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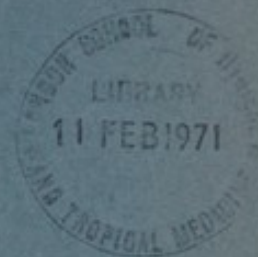
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LANCASHIRE COUNTY COUNCIL

REPORT

OF THE

MEDICAL OFFICER OF HEALTH

FOR THE YEAR 1969

(Presented to the County Council, 5th November, 1970)

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LANCASHIRE COUNTY COUNCIL

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LANCASHIRE COUNTY COUNCIL

REPORT

OF THE

MEDICAL OFFICER OF HEALTH

FOR THE YEAR 1900

Presented to the Council of the County of Lancashire

PRINCIPAL CONTENTS

	PAGE
PUBLIC HEALTH AND HOUSING COMMITTEE	5
HEALTH COMMITTEE	6
VITAL STATISTICS	15
INFECTIOUS AND OTHER NOTIFIABLE DISEASES	27
HEALTH SERVICES	31
Health Centres	36
Care of Mothers and Young Children	37
Midwifery	54
Health Visiting	59
District Nursing	61
Vaccination and Immunisation	65
Ambulance Service	68
Prevention of Illness, Care and After-care	75
Home Help Service	81
Mental Health	82
Other Services	88
WELFARE SERVICES	90
Welfare of the Elderly	90
Welfare of the Homeless	94
Welfare of Handicapped Persons	95
Other Services	103
SANITARY CIRCUMSTANCES	105
HOUSING	117
INSPECTION AND SUPERVISION OF FOOD	119
SHOPS ACTS, 1950-65	126
YOUNG PERSONS EMPLOYMENT ACT, 1964	126
TABLES, ETC.	127
INDEX	183

Page	
5	Public Health and Hygiene Committee
6	Health Committee
11	Vital Statistics
27	Infection and Other Notifiable Diseases
31	Health Services
36	Health Census
37	Care of Mothers and Young Children
34	Midwifery
39	Health Visiting
61	Dental Services
63	Vaccination
68	Accident Services
73	Prevention of Illness
81	Health Education
81	Mental Health
88	Other Services
90	Welfare Services
93	Welfare of the Family
94	Welfare of the Handicapped
95	Welfare of the Unemployed
103	Other Services
105	Sanitary Conditions
117	Housing
119	Infection and Prevention of Food
126	Smoke Act 1955-6
128	Young Persons Employment Act 1954
131	Tables, etc.
132	Index

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(Jointly with School Health Service)

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Deputy County Medical Officer and Deputy Principal School Medical Officer :

(Vacant)

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†Senior Medical Officer.

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*Part-time.

†Senior Medical Officer.

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*Part-time.

†Senior Medical Officer.

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A. H. ELLAM, L.D.S., B.D.S., F.D.S., R.C.S.
G. R. FAIRCLOUGH, L.D.S.
S. GOLDMAN, L.D.S.
J. GREENHALGH, L.D.S.
L. B. HALL, L.D.S.
J. S. HIGHAM, B.D.S.
N. P. HILTON, L.D.S.
G. M. KAYE, L.D.S., R.C.S.
P. J. KENYON, B.D.S.

W. A. LINNELL, L.D.S.
W. R. LORD, L.D.S.
H. MUNGUR, L.D.S., R.C.S.
P. NAIR, B.D.S.
W. F. NEWMAN, L.D.S.
K. S. NUNN, B.D.S.
KATHLEEN PLATT, L.D.S.
G. S. PRENTICE, L.D.S.
B. H. REID, L.D.S.
CATHERINE A. ROBINSON, B.D.S.
MAGGIE ROBINSON, L.D.S.
D. W. ROSE, B.D.S., R.C.S.
JOAN A. SOAMES, B.D.S.
H. W. TOTTY, B.D.S.
H. V. O. TRENBATH, L.D.S.
K. WOODS, L.D.S., B.D.S.

Part-time :

A. G. ADDINSELL, L.D.S.
 H. H. BAYLIE, B.D.S.
 A. BESWICK, B.D.S.
 MAVIS BIRKINHEAD, B.D.S.
 DOROTHY A. CARSON, L.D.S.
 MARY G. COWPER, L.D.S.
 MARJORIE R. CRAVEN, L.D.S.
 P. F. CUNNINGHAM, L.D.S.
 ELISABETH A. DURANT, L.D.S.
 FRANCES H. FISH, B.D.S.
 A. M. FLETT, L.D.S.
 H. GAUNT, B.Ch.D.
 R. B. GELDEARD, L.D.S.
 L. K. GRAY, L.D.S.
 CATHERINE T. M. GREEN, L.D.S.
 W. P. HAMER, L.D.S., B.D.S.
 K. HEYS, L.D.S.
 SUSAN J. HILL, B.D.S.

A. HODGKINSON, L.D.S.
 T. S. HOLT, L.D.S.
 CLAIRE C. KEARNEY, B.D.S.
 L. LEVER, L.D.S.
 BERYL LEVY, B.D.S.
 ISOBEL C. MACKIE, L.D.S.
 R. MARSHALL, B.D.S.
 K. MATSON, L.D.S., R.C.S.
 KATHLEEN R. MAXFIELD, L.D.S.
 K. E. METCALF, L.D.S.
 IRENE MICHAEL, L.D.S., R.C.S.
 H. B. NYMAN, L.D.S.
 EVELYN PURSLOW, B.D.S.
 P. D. ROBINSON, L.D.S.
 J. S. SELWYN, L.D.S.
 ANNIE H. TYLDESLEY, B.D.S.
 FRED A. WILLIAMS, L.D.S.
 N. WOOLLEY, B.D.S.

S. L. WOOD, L.D.S.

Chief Lay Administrative Officer :

F. V. ROBINSON

Welfare Services Organiser :

G. A. ROYLE, LL.B., B.Com., D.M.A., A.C.I.S.

Ambulance Service Organiser :

A. ORTON, M.B.E.

County Public Health Officers :

A. KEWLEY

D. B. SOUTHWORTH

R. K. TAYLOR

K. WALMSLEY

Supervisor of Midwives :

MISS M. LEES, S.R.N., S.C.M.

Superintendent Health Visitor and School Nurse :

MISS P. C. L. GOULD, S.R.N., S.C.M., H.V.Cert.

Superintendent of District Nurses :

MISS L. MOORCROFT, S.R.N., S.C.M., H.V.Cert., Q.N.

County Analyst :

A. C. BUSHNELL, M.Chem.A., F.R.I.C.

REPORT OF THE MEDICAL OFFICER OF HEALTH

for the Year ended 31st December, 1969

To the Chairman and Members of the Lancashire County Council.

I have the honour to present the eighty-first annual report on the health, sanitary conditions and circumstances of the Administrative County of Lancaster in respect of the year ended 31st December, 1969.

During the greater part of this period my predecessor, Dr. S. C. Gawne, was in office.

The report indicates continuing satisfactory trends in the incidence of infectious disease including tuberculosis and the recognised groups of vital statistics including infant mortality, neo-natal mortality and the maternal mortality rates but there are a number of conditions whose continued presence in the community indicate that more must be done to improve health standards. These conditions include a large amount of dental disease resulting in adult life in the need to provide dentures, a high incidence of bronchitis and emphysema, a steadily rising number of deaths from lung cancer, a considerable number of deaths from heart disease particularly coronary thrombosis, and an increase in the amount of venereal disease and environmental pollution from several causes. In addition, cases of infectious jaundice appear to be increasing and resulted in ten deaths in 1969. There were also cases of brucellosis due to infected milk or from direct contact with infected cattle.

The main point about all the conditions which have been mentioned is that by and large we understand the causes and we could do a great deal more to eliminate them. By far the biggest damaging factor to health today is the cigarette which roughly accounts for nine out of ten lung cancer deaths, three out of four bronchitis deaths and one out of four coronary heart disease deaths.

It is extremely difficult to alter well established habits and the main attack on smoking habits is carried out by an extensive programme in schools.

Dental caries has its origin in the use of sugary dummies and sweetened drinks in feeding bottles. These errors are repeatedly brought to the notice of mothers at baby welfare centres. Pre-school children are also given too many sticky sweets and biscuits between meals. The damage done is sometimes so great that all the primary teeth have to be removed. The Manchester Dental Hospital has a special clinic for pre-school children and makes about three sets of teeth every two weeks for children under five years of age.

More births now take place in hospital than at home and the figure for last year was 83 per cent. Ten years ago it was only 68 per cent. The Ministry of Health Standing Maternity and Midwifery Advisory Committee which has been considering the future of the domiciliary midwifery service and the question of bed needs for maternity patients for the past three years has now reported. They consider that there should be sufficient facilities to allow for 100 per cent. hospital delivery and that the greater safety of hospital confinement for mother and child justifies this objective. The County Council with 83 per cent. of births occurring in hospital is in the highest group of authorities for hospital confinements. This percentage has been achieved mainly by short stay arrangements which are increasing each year.

Children born with handicapping conditions or at risk of developing them are now given special attention. There are three Assessment Centres; the first is a centre run by the Spastics Society at Rodney House, Manchester, and this has given many years of useful service. Manchester Regional Hospital Board have a hospital assessment centre at Pendlebury with the full range of consultants and there is a newly opened centre attached to Mere Oaks Special School for the Physically Handicapped at Standish. The capital cost of this nursery unit was generously provided by the Spastics Society. Consultants in attendance include a paediatrician, an orthopaedic consultant, a psychiatric consultant, an audiologist and supporting staff including educational psychologists and special health visitors. All these centres deal with children from birth upwards.

The influx of immigrants to the County has largely been to the cities and large towns and County district areas have received no significantly large groups of these people. Some language difficulties have been encountered necessitating the employment of interpreters but generally no insuperable problems have been met in relation to immigrant populations.

Because of the conquest of the traditional infectious diseases, it is possible for the health staff of local authorities to pay more attention to the promotion of good health and the treatment and relief of disabilities and chronic illness. The Health Committee have been particularly generous and far-seeing in their attitude to health education and possess one of the largest health education departments in the country. It is hoped that it will be able to influence young people and adults and to provide a real understanding of healthy living.

The relief of disabilities and provision of facilities for chronic illness have been facilitated in Lancashire by reason of the fact that the health and welfare services come under the control of one committee although it is now proposed to have a separate department dealing with welfare services including children's services. It will more than ever be necessary to see that there is an adequate linkage system to avoid duplication of effort and wasteful expenditure.

Links with general practice are constantly being forged by means of the attachment of nursing staff to family doctors and by provision of health centres. At the time of writing this report there were five health centres in operation, two under construction and a further 18 in course of development.

Skelmersdale New Town has presented a special problem because it has proved difficult to recruit general practitioners to this new area. The Health Committee have, by adaptation of existing houses, provided immediate accommodation for doctors pending the completion of a health centre and consultations were held with the Liverpool Regional Hospital Board about the building of a new hospital but for the time being this has been shelved.

The need to register premises and persons for the purpose of child-minding has involved considerable work for supervisory and administrative staff and it is not thought that children are being minded under unsatisfactory conditions or without the necessary registration.

The Ambulance Service has continued to convey increasing numbers of persons to hospital which constitutes 96 per cent. of its work. The standard of the emergency service is being raised by the provision of special Ambulance Service training courses. These are residential and the main course occupies a period of six weeks. There are also short courses. During the year a total of 241 students attended, including a number from adjoining Counties and towns and from the North-East coast area.

Additional provision has been made in the Mental Health Service with two new 31-place adult hostels and six additional training centres, five adult and one junior. Towards the end of the year facilities for those who have been mentally ill were further developed by the provision of a day rehabilitation centre at Urmston and by the completion of a residential home in Radcliffe for those who need a transitional period before going to work in the community.

The needs of the elderly have been met by increases in the Home Help Service. No restriction has ever been placed by the Health Committee on the numbers of home helps to be employed and the limit is simply that of availability of staff. Two new homes for the elderly were occupied, one other was completed and almost ready to admit residents and work was in progress at a further six. Owing to difficulties in finding suitable sites, the policy of building single-storey homes was abandoned in favour of multi-storey and the six still in building at the end of the year were of this type. There was an increase of 658 units of sheltered housing accommodation for the elderly provided by District Councils and grant-aided by the County Council. All the schemes approved to the end of the year will, when operative, provide over 4,900 units of sheltered housing.

Five social centres for the handicapped have been planned and a start has been made on the first one in Atherton. Proposals were approved for the provision of additional specially-built coaches for the conveyance of handicapped persons and a contract for five new coaches was placed.

Reference has been made in this short introduction to but a few of the principal matters engaging the attention of those concerned with preventive medicine. A perusal of the body of the report will indicate the extent and continuing progress of the services provided for the benefit of the public.

To all the staff of the department, both central and divisional, who have continued to co-operate in the maintenance and advancement of the various services, I would express my thanks and to the members of the County Council and, in particular of the Health Committee and of the former Public Health and Housing Committee, my appreciation of their interest and support.

I am, my Lord, Ladies and Gentlemen,

Your obedient Servant,

C. H. T. WADE,
County Medical Officer of Health.

Health Department,
East Cliff County Offices,
Preston.
October, 1970.

VITAL STATISTICS

Physical features and general character of the County.—The Geographical County of Lancaster is bounded on the north by Westmorland, on the north-west by Cumberland, on the east by Yorkshire, on the south by Cheshire and on the West by the Irish Sea. The north-western portion of the County—the peninsulas of Furness and Cartmel, physically a part of the Lake Country—is separated from the rest of the County by Morecambe Bay and the estuary of the River Kent.

The greatest length of the County from Wrynose Pass, Dunderdale, in the north-west to Denton in the south-east, is roughly 80 miles and from east to west in the widest part, south of the Ribble, about 45 miles; north of the River Ribble the width contracts, varying between 10 and 25 miles.

The Pennine Range runs along the eastern side of the County. In the north is Conistone Old Man, the highest point in Lancashire, 2,633 feet, whilst two of the neighbouring fells attain to more than 2,500 feet. The highest point south of Morecambe Bay is at Greygarth, Leck, Lunesdale Rural District (2,250 feet).

The chief rivers are the Mersey, Irwell, Ribble, Wyre and Lune, which flow into the Irish Sea. In the northern portions are the Rivers Kent, Leven, Keer, Cocker, Duddon, Brathay, Winster, etc. The only large lakes entirely in Lancashire are Conistone (the third largest lake in England) and Esthwaite. Two thirds of the shore of Lake Windermere is in the County.

Almost every type of scenery is to be found within the borders of Lancashire, ranging from the mountain rock and lakes of the Furness area and the wild moorland of the Yorkshire boundary to the valleys of the Lune and Ribble and the cultivated plains sweeping from the Pennines to the sea.

The County can be roughly divided into two distinct types of area, that in the north consisting chiefly of sparsely populated rural districts which, as the mid-south and south-east are approached, resolve themselves into densely populated industrial areas. Whilst the northern portion of the County together with the fertile plains of the Fylde and west coast are predominantly agricultural in character, the industrial life is principally centred on engineering and allied trades, textile works, mining and quarrying.

Area of Administrative County.—Although the area of the Administrative County—land and inland water together, exclusive of tidal water and foreshore—as constituted on the 31st December, 1969, remained at 1,032,723 acres, some adjustments were made affecting certain of the constituent districts. The County of Lancaster (Kirkby Urban District) Confirmation Order, 1968, transferred a total of 173 acres, having a population at the time of the Census, 1961 enumeration of 51 persons, from West Lancashire R.D. to Kirkby U.D. By virtue of the Glaze Brook (Local Boundaries) Order, 1969, six and three acres were transferred from Golborne U.D. and Irlam U.D. respectively, two to Leigh M.B. and seven to Warrington R.D. No transfer of population was involved.

The parish of Hardhorn-with-Newton in Garstang rural district was renamed Staining by a Statutory Notice of the County Council in accordance with section 147(4) of the Local Government Act, 1933. All these changes were effective from the 1st April, 1969.

The acreage of each County district, compiled in accordance with the County Report on the Census, 1961, as adjusted for any subsequent boundary alteration, is given in Table 3, pages 132 to 139.

Population of Administrative County.—Estimates of home population include members of British, Commonwealth and foreign armed forces stationed in the area, but not members of the armed forces stationed outside England and Wales. In compiling the local estimates undergraduates in residential colleges of universities, pupils in boarding schools, patients in psychiatric hospitals and persons in similar institutions are treated generally as part of the population of the area in which the institution is situated, but patients in general hospitals, convalescent homes and similar institutions are generally included in the population of the area of their normal place of residence.

The Registrar General's estimate of the home population of the Administrative County at the 30th June, 1969, was 2,457,280, an increase of 29,240 over the estimate for the previous year. Compared with the Census enumeration of 1961, as adjusted for subsequent boundary alterations, the estimate for 1969 was greater by 259,072. The *natural* increase in population during the year (i.e., the excess of live births over deaths) was 10,931, a decrease of 1,316 as compared with the corresponding figure for the previous year, and the lowest natural increase recorded since 1961. It will thus be seen that inward migration was again the major factor in the increase of population, representing in 1969 some 63 per cent. of the total growth.

The tabular statement below records the estimated home populations of the Administrative County, the aggregate urban districts and the aggregate rural districts for each of the last 10 years together with the annual increase or decrease. No adjustments have been made for such boundary alterations as may have taken place during the period.

Year	Administrative County		Urban Districts		Rural Districts	
	Estimated home population	Annual increase or decrease	Estimated home population	Annual increase or decrease	Estimated home population	Annual increase or decrease
1960	2,175,950	+ 24,950	1,862,800	+ 19,800	313,150	+ 5,150
1961	2,206,190	+ 30,240	1,882,530	+ 19,730	323,660	+ 10,510
1962	2,237,810	+ 31,620	1,904,000	+ 21,470	333,810	+ 10,150
1963	2,268,060	+ 30,250	1,923,230	+ 19,230	344,830	+ 11,020
1964	2,291,680	+ 23,620	1,935,430	+ 12,200	356,250	+ 11,420
1965	2,326,890	+ 35,210	1,958,590	+ 23,160	368,300	+ 12,050
1966	2,366,020	+ 39,130	1,979,100	+ 20,510	386,920	+ 18,620
1967	2,396,000	+ 29,980	1,999,010	+ 19,910	396,990	+ 10,070
1968	2,428,040	+ 32,040	2,020,070	+ 21,060	407,970	+ 10,980
1969	2,457,280	+ 29,240	2,034,990	+ 14,920	422,290	+ 14,320

CONSTRUCTED POPULATIONS.—The Registrar General's estimates of the home population relate to the position at the 30th June and refer to the areas as constituted at that date. It follows that where an area has been affected by changes of boundary during the year such estimates are inappropriate for use with the mixed records of births, deaths, etc., for the year which combine the "before change" and "after change" position in the year. For the calculation of annual rates based on population, therefore, the Registrar General now issues a *constructed* population which, mingling in appropriate proportions the populations of the area both before and after the boundary alteration, corresponds with the combination of "before change" and "after change" records of births, deaths, etc., against which it is to be set.

The constructed populations relevant in 1969 are shown in Table 3, pages 132 to 139, and have been used throughout this report where appropriate in the calculation of statistics.

AVERAGE POPULATION DENSITIES.—The following table gives the area, population, persons per acre and acres per person of the Administrative County as constituted on the 31st December, 1969, distributed among the non-county boroughs and the urban and rural districts:—

	* Area in acres 31.12.1969	Population		Persons per acre	Acres per person
		Census, 1961	Estimated home population mid-1969		
Municipal Boroughs (26)	125,120	902,260	899,140	7.19	0.14
Urban Districts (68)	255,290	973,135	1,135,850	4.45	0.22
Rural Districts (14)	652,313	322,813	422,290	0.65	1.54
Administrative County (108) ...	1,032,723	2,198,208	2,457,280	2.38	0.42

* As supplied by Ordnance Survey Department and given to the nearest acre.

Summary of Vital Statistics, 1889—1969.—The following table compares certain County birth and death rates for the year 1969 with those for the previous year and for the 80 years, 1889—1968, grouped in quinquennial periods:—

	Per 1,000 of estimated population				Maternal mortality rate per 1,000 <i>total</i> (live and still) births	Rate of deaths under one year per 1,000 live births
	Live birth rate	Crude death rate	Death rate from tuberculosis of respiratory system	†Death rate from cancer		
Mean of 5 years—						
1889–1893 ...	30·67	19·21	*1·38	—	—	159
1894–1898 ...	28·76	17·35	1·21	—	—	159
1899–1903 ...	26·81	16·31	1·00	*0·60	—	155
1904–1908 ...	24·94	14·66	0·88	0·68	—	136
1909–1913 ...	22·57	13·91	0·84	0·82	—	120
1914–1918 ...	18·53	14·96	0·98	1·03	—	105
1919–1923 ...	19·15	12·92	0·75	1·12	—	87
1924–1928 ...	15·43	12·36	0·63	1·29	—	77
1929–1933 ...	13·65	12·82	0·56	1·45	4·93	70
1934–1938 ...	13·64	12·62	0·45	1·57	4·68	59
1939–1943 ...	15·34	13·20	0·42	1·68	3·13	56
1944–1948 ...	18·29	12·66	0·39	1·87	1·64	46
1949–1953 ...	14·95	12·76	0·25	1·96	0·94	32
1954–1958 ...	15·22	12·80	0·12	2·08	0·75	27
1959–1963 ...	17·55	12·81	0·06	2·12	0·40	24
1964–1968 ...	17·91	12·31	0·04	2·17	0·25	20
Year—						
1968 ...	17·32	12·28	0·03	2·19	0·23	19·4
1969 ...	16·89	12·44	0·02	2·25	0·17	19·3
Increase or decrease in 1969 on—						
Mean of 5 years, 1964–68	— 1·02	+ 0·13	—0·02	+0·08	—0·08	—0·8
Previous year	— 0·43	+ 0·16	—0·01	+0·06	—0·06	—0·1

* Four years. † Includes, from 1950, deaths from Hodgkin's disease, leukaemia and aleukaemia

Note : The death rates given in this Report for the County area and for the County districts are (except where otherwise stated) "unweighted" or "crude" rates, i.e., they are neither "standardised" nor "corrected."

Principal Vital Statistics relating to Mothers and Infants.—In accordance with the requirements of the Department of Health and Social Security certain statistics for 1969 relating to mothers and infants are set out below:—

Total live births ...	41,504
Live birth rate per 1,000 population—crude ...	16·89
Live birth rate per 1,000 population—adjusted ...	17·23
Proportion (per cent) of illegitimate live births total live births ...	6·85
Total stillbirths ...	632
Stillbirth rate per 1,000 <i>total</i> births ...	15·0
Total live births and stillbirths...	42,136
Total infant deaths (under one year) ...	803
Infant mortality rate per 1,000 live births ...	19·3
Mortality rate of legitimate infants per 1,000 legitimate live births	18·7
Mortality rate of illegitimate infants per 1,000 illegitimate live births	28·5
Neo-natal mortality (deaths under four weeks) rate per 1,000 live births ...	13·1
Early neo-natal mortality (deaths under one week) rate per 1,000 live births ...	11·3
Perinatal mortality (stillbirths and deaths under one week) rate per 1,000 <i>total</i> births ...	26·2
Total maternal deaths (including deaths from abortion) ...	7
Maternal mortality rate per 1,000 <i>total</i> births ...	0·17

Births and Birth Rates.—LIVE BIRTHS.—The number of infants born alive in 1969 to mothers normally resident in the Administrative County area was 41,504. This was 558 fewer than the figure recorded in 1968. The sex distribution of the infants is shown below, together with the corresponding figures for each of the previous 10 years. It should be noted that up to and including the year 1966, all the births shown are those which were registered, whilst since 1967 birth occurrences are given.

Year	Urban Districts			Rural Districts			Administrative County		
	Males	Females	Total	Males	Females	Total	Males	Females	Total
1959	15,943	14,785	30,728	2,596	2,358	4,954	18,539	17,143	35,682
1960	16,295	15,460	31,755	2,789	2,593	5,382	19,084	18,053	37,137
1961	16,924	15,854	32,778	2,909	2,803	5,712	19,833	18,657	38,490
1962	17,865	16,963	34,828	3,114	2,973	6,087	20,979	19,936	40,915
1963	18,203	16,933	35,136	3,304	3,021	6,325	21,507	19,954	41,461
1964	18,653	17,425	36,078	3,457	3,265	6,722	22,110	20,690	42,800
1965	18,355	17,060	35,415	3,602	3,332	6,934	21,957	20,392	42,349
1966	18,206	17,178	35,384	3,587	3,276	6,863	21,793	20,454	42,247
1967	18,200	16,907	35,107	3,544	3,396	6,940	21,744	20,303	42,047
1968	18,068	17,037	35,105	3,561	3,396	6,957	21,629	20,433	42,062
1969	17,626	16,714	34,340	3,642	3,522	7,164	21,268	20,236	41,504

In 1969 the sex ratio of infants born alive was 1,051 males for each 1,000 females, being the lowest recorded in the period covered by the above table. Whilst within the limits of 1,051 and 1,081 males for each 1,000 females, in the period 1959—68, it was considerably below the average of 1,068 males in the preceding five years.

For the fifth consecutive year there was a decline in 1969 in the crude live birth rate for the Administrative County. This rate, at 16.89 per 1,000 of the estimated home population was 0.43 per 1,000 below that for 1968, and 1.02 per 1,000 lower than the average for the five years 1964—68.

The number of live births assigned to each County district and the corresponding crude and adjusted rates are given in Table 3, pages 132 to 139. As a matter of interest the crude live birth rates of the Administrative County, the total urban districts and the total rural districts for the quinquennia since 1889 and for each of the last 55 years are given in Table 1, page 128.

Adjusted Birth Rates.—Birth rates are usually expressed as proportions of total populations which, comprising persons of all ages, include many who can have no influence on the reproductive process but do affect the birth rate in that a high proportion of them in the population of an area tends to lower, and a low proportion to raise, the rate of the area in relation to those of other areas. In order to nullify the effect of these variables and provide a basis for valid comparison of rates the Registrar General compiles and issues a comparability factor for each area. The adjusted birth rate resulting from the multiplication of the crude birth rate of an area by its comparability factor may be regarded as being comparable with the adjusted rate of any other area or with the crude rate for England and Wales. In the factors for 1957 and subsequent years an adjustment was made by the Registrar General to take account of the presence in each area of sterile population in institutions for the mentally ill or mentally subnormal.

The comparability factors for the Administrative County and its constituent districts are given in Table 2, page 131. The effect of the County factors upon the crude live birth rates for each of the last 10 years may be seen in the following table, which also includes the corresponding live birth rates for England and Wales. All the rates shown relate to live births registered with the exception of those for 1967, 1968 and 1969, which are based on occurrences.

	Live birth rate per 1,000 of the estimated home population									
	1960	1961	1962	1963	1964	1965	1966	1967	1968	1969
Urban Districts:										
Crude ...	17.05	17.41	18.29	18.27	18.64	18.08	17.88	17.56	17.38	16.87
Adjusted...	17.05	17.41	18.29	18.82	19.20	18.62	18.41	18.26	18.25	17.55
Rural Districts:										
Crude ...	17.19	17.65	18.23	18.34	18.87	18.83	17.74	17.48	17.03	16.96
Adjusted...	18.22	18.35	18.60	18.16	18.68	18.07	16.85	16.43	16.01	15.95
Administrative County										
Crude ...	17.07	17.45	18.28	18.28	18.68	18.20	17.86	17.55	17.32	16.89
Adjusted...	17.24	17.45	18.28	18.83	19.05	18.56	18.21	18.07	17.84	17.23
England and Wales ...	17.1	17.4	18.0	18.2	18.5	18.1	17.7	17.2	16.9	*16.3

Illegitimate Live Births.—Particulars of the illegitimate live births which occurred during 1969 and were assigned to the Administrative County are given below together with figures for each of the preceding 10 years. It should be noted that up to and including the year 1966, all the births shown are those which were registered, whilst since 1967 birth occurrences are given.

Year	No. of illegitimate live births	Increase or decrease on previous year	Percentage increase or decrease on previous year	Percentage of total live births
1959	1,296	+154	+13.5	3.63
1960	1,365	+69	+5.3	3.68
1961	1,565	+200	+14.7	4.07
1962	1,840	+275	+17.6	4.50
1963	1,976	+136	+7.4	4.77
1964	2,173	+197	+10.0	5.08
1965	2,411	+238	+11.0	5.69
1966	2,510	+99	+4.1	5.94
1967	2,760	+250	+10.0	6.56
1968	2,858	+98	+3.6	6.79
1969	2,842	-16	-0.6	6.85

Although the number of illegitimate live births in the Administrative County in 1969 was lower by 16 when compared with the previous year, the proportion of the total of live births represented by the illegitimate live births was greater at 6.85 per cent., the highest recorded in the post-war period.

STILLBIRTHS.—The number of stillbirths which occurred in the Administrative County in 1969 was 632. The resultant stillbirth rate of 15.0 per 1,000 total births was the lowest rate ever recorded, being 0.7 per 1,000 below the previous low record noted in 1967. The corresponding provisional rate for England and Wales in 1969 was 13.2 per 1,000 total births. Expressed in terms of home population the still birth rate for the Administrative County was 0.26 per 1,000 and that for the whole Country, 0.22.

The stillbirth rate for each County district is given in Table 3, pages 132 to 139.

Deaths and Death Rates.—The number of deaths from all causes assigned to the Administrative County in 1969 was 30,573, an increase of 758 over the total recorded for the previous year. The distribution by sex is shown below, together with corresponding figures for each of the preceding five years:—

Year	Urban Districts			Rural Districts			Administrative County		
	Males	Females	Total	Males	Females	Total	Males	Females	Total
1964	11,920	11,555	23,475	2,192	2,042	4,234	14,112	13,597	27,709
1965	12,316	12,022	24,338	2,199	2,016	4,215	14,515	14,038	28,553
1966	12,913	12,747	25,660	2,322	2,129	4,451	15,235	14,876	30,111
1967	12,418	12,325	24,743	2,286	2,143	4,429	14,704	14,468	29,172
1968	12,887	12,341	25,228	2,350	2,237	4,587	15,237	14,578	29,815
1969	13,113	12,640	25,753	2,425	2,395	4,820	15,538	15,035	30,573

The following table analyses by age group the deaths assigned to the Administrative County in each of the last 10 years:—

Year	Deaths in age periods										Total
	0-	1-	5-	15-	25-	35-	45-	55-	65-	75-	
1960	929	144	123	181	970		6,661		7,470	10,802	27,280
1961	927	116	137	202	965		6,978		8,264	11,770	29,359
1962	984	126	132	206	995		6,883		7,916	11,522	28,764
1963	966	143	144	201	256	766	2,005	4,923	7,879	11,492	28,775
1964	916	126	151	243	263	757	1,933	4,893	7,503	10,924	27,709
1965	839	135	150	258	248	718	1,953	4,982	7,852	11,418	28,553
1966	841	152	144	265	272	714	1,952	5,153	8,237	12,381	30,111
1967	840	138	147	263	270	657	1,961	4,972	8,140	11,784	29,172
1968	815	137	151	213	242	663	2,011	5,045	8,425	12,113	29,815
1969	803	141	119	225	271	683	1,934	5,212	8,774	12,411	30,573

Of the total deaths 69·3 per cent. occurred at ages over 64 years and 40·6 per cent. at ages over 74 years. Of females who died during 1969, more than three-quarters (76·7 per cent.) had attained the age of 65 years and more than half (50·8 per cent.) had attained the age of 75 years. The corresponding proportions for males were lower at 62·1 per cent. and 30·7 per cent. respectively. The 944 deaths of children under five years of age were eight fewer than in 1968, and the mortality rate of 4·38 per 1,000 children within the age group represented the lowest rate ever recorded. The 119 deaths of children in the age group 5–14 years resulted in a mortality rate of 0·30 per 1,000 children within the age group, again the lowest rate ever recorded.

The separate causes to which the deaths in the age groups quoted in the above table were ascribed are shown in Table 5, pages 142 to 144.

The 30,573 deaths assigned to the Administrative County in 1969 were equivalent to a crude rate of 12·44 per 1,000 of the estimated home population. This rate was 0·16 per 1,000 greater than the corresponding rate for the previous year, and higher by 0·13 per 1,000 than the rate for the preceding five years, 1964–68.

Adjusted Death Rates.—Populations of districts or areas are not similarly constituted, either by age or sex, and their crude death rates fail as comparative mortality indexes in that variations between them reflect not only a differing mortality experience but also a differing population constitution. It is therefore necessary to identify and allow for the population variable and in practice this is achieved by the calculation and supply to each area by the Registrar General of an area comparability factor. The adjusted death rate resulting from the multiplication of the crude death rate of an area by its comparability factor may be regarded as comparable with the adjusted rate of another area or with the crude rate for England and Wales. The comparability factor for each County district is given in Table 2 on page 131, whilst the crude and adjusted rates are shown in Table 3, pages 132 to 139. The effect of the County factors, also given in Table 2, may be seen in the following table which shows for the Administrative County and for the urban and rural areas, both the crude and adjusted rates for each of the last 10 years. The death rates for England and Wales are also given.

	Death rate per 1,000 of the estimated population									
	1960	1961	1962	1963	1964	1965	1966	1967	1968	1969
Urban Districts:										
Crude	12·55	13·40	12·89	12·77	12·13	12·43	12·97	12·38	12·49	12·66
Adjusted	13·93	15·01	14·44	14·05	13·34	13·30	13·74	13·24	13·49	13·67
Rural Districts:										
Crude	12·43	12·74	12·64	12·22	11·88	11·44	11·50	11·16	11·23	11·41
Adjusted	12·68	13·13	13·02	11·98	12·36	11·44	11·85	11·83	12·13	12·10
Administrative County:										
Crude	12·54	13·31	12·85	12·69	12·09	12·27	12·73	12·18	12·28	12·44
Adjusted	13·79	14·77	14·27	13·83	13·18	13·01	13·49	13·03	13·26	13·44
England and Wales	11·5	11·9	11·9	12·2	11·3	11·5	11·7	11·2	11·9	*11·9

* Provisional figure

As a matter of interest the crude death rates for each of the last 55 years and the quinquennial averages since 1889 for the Administrative County and the aggregates of the urban and rural districts are given in Table 1, page 128.

CAUSES OF DEATH.—A classified statement of the causes of death in 1969, by age group and sex, for the Administrative County and the aggregates of urban and rural districts is given in Table 5, pages 141 to 143. Details of the deaths by cause group in the various County districts are given in Table 4 (following page 139) and total deaths by sex are shown for each district in Table 3, pages 132 to 139.

PRINCIPAL CAUSES OF DEATH.—Between 60 and 70 per cent. of all deaths each year are classified to causes falling within three main groups—heart disease, cancer and cerebrovascular disease. The relative importance of these and of the other principal causes of death in 1969 is shown in the following table:—

Cause of death	No. of deaths	Percentage of total deaths
Heart disease (all forms)	10,363	33·9
Cancer (including leukaemia)	5,529	18·1
Cerebrovascular disease	4,426	14·5
Pneumonia	1,881	6·2
Bronchitis, emphysema	1,807	5·9
Other diseases of the circulatory system	1,503	4·9
Violence (including accidents, suicide and all other external causes)	1,288	4·2

More details of the chief causes of death are given in the following paragraphs under their respective headings, where it will be seen that in certain instances comparisons prior to 1968 are not made, because of changes in the classification of causes of death resulting from the Eighth Revision of the International Classification, full details of which were given in the Annual Report for 1968.

HEART DISEASES.—The deaths classified to the heart diseases as grouped in the International Abbreviated List of 50 Causes and assigned to the Administrative County in 1969 are shown in the following table, together with the resultant death rates per 1,000 of the estimated home population and the corresponding figures for the previous year.

Year	Chronic rheumatic heart disease		Hypertensive disease		Ischaemic heart disease		Other forms of heart disease		Total— all forms	
	No. of deaths	Death rate	No. of deaths	Death rate	No. of deaths	Death rate	No. of deaths	Death rate	No. of deaths	Death rate
1968	384	0.16	510	0.21	7,784	3.21	1,713	0.71	10,391	4.28
1969	424	0.17	544	0.22	7,684	3.13	1,711	0.70	10,363	4.22

The 10,363 deaths in 1969 from all forms of heart disease, which accounted for 33.9 per cent. of all deaths, were 28 fewer than those for the previous year, and the resultant death rate of 4.22 per 1,000 of the estimated home population was 0.06 per 1,000 below that for 1968. Deaths of persons over 65 years of age accounted for 73.2 per cent. of the total deaths from all forms of heart disease in 1969.

The following table shows the total deaths and equivalent rates from all forms of heart disease in the Administrative County during each of the past 20 years.

Year	No. of deaths	Crude death rate per 1,000 population	Year	No. of deaths	Crude death rate per 1,000 population
1950	9,145	4.47	1960	9,429	4.33
1951	9,543	4.68	1961	9,905	4.49
1952	8,579	4.20	1962	9,820	4.39
1953	8,326	4.07	1963	9,740	4.29
1954	8,772	4.27	1964	9,608	4.19
1955	9,017	4.36	1965	9,998	4.30
1956	8,948	4.28	1966	10,137	4.28
1957	9,051	4.29	1967	10,025	4.18
1958	9,603	4.51	1968	10,391	4.28
1959	8,874	4.13	1969	10,363	4.22

MALIGNANT NEOPLASMS, INCLUDING NEOPLASMS OF LYMPHATIC AND HAEMATOPOIETIC TISSUES.—The following table gives particulars of deaths assigned to the Administrative County in each of the years 1964-69, for this group of causes, under the headings taken from the Abbreviated List of 50 Causes (B List).

Year	Sex	Malignant neoplasm—				Leukaemia	* Other malignant neoplasms including neoplasms of lymphatic and haemato-poietic tissue	Total— all forms
		Stomach	Lung, bronchus	Breast	Uterus			
1964	M.	375	942	5	—	72	1,175	2,569
	F.	336	156	417	201	43	1,115	2,268
	T.	711	1,098	422	201	115	2,290	4,837
1965	M.	407	993	9	—	67	1,230	2,706
	F.	302	186	415	201	64	1,122	2,290
	T.	709	1,179	424	201	131	2,352	4,996
1966	M.	398	997	3	—	84	1,289	2,771
	F.	346	180	434	210	56	1,174	2,400
	T.	744	1,177	437	210	140	2,463	5,171
1967	M.	387	1,014	5	—	80	1,298	2,784
	F.	291	223	461	187	59	1,271	2,492
	T.	678	1,237	466	187	139	2,569	5,276
1968	M.	413	1,088	1	—	75	1,283	2,860
	F.	317	193	470	210	67	1,192	2,449
	T.	730	1,281	471	210	142	2,475	5,309
1969	M.	391	1,159	5	—	62	629	2,966
	F.	298	215	486	224	65	683	2,563
	T.	689	1,374	491	224	127	1,312	5,529

* In 1969, this group excludes:—

Malignant neoplasm—	Male	Female	Total
Buccal cavity and pharynx	48	43	91
Oesophagus	98	74	172
Intestine	349	467	816
Larynx	25	8	33
Prostate	200	—	200

There was an increase of 220 in the number of deaths from all forms of cancer in 1969 to 5,529, the highest number ever recorded. Although the resultant death rate of 2.25 per 1,000 of the estimated home population was 0.10 per 1,000 below the corresponding provisional rate for England and Wales, it was nevertheless the highest rate ever noted for the Administrative County, being 0.06 per 1,000 greater than the corresponding rate for the previous year, and 0.08 per 1,000 above the average for the five years 1964-68.

For the third year in succession, deaths from lung cancer reached a new peak, the 1,374 deaths resulting in a rate of 0.56 per 1,000 of the estimated home population, 0.03 per 1,000 greater than that for the previous year. The rate for the Administrative County was however, lower by 0.05 per 1,000, than the corresponding provisional rate for England and Wales. The death rate from all forms of cancer other than lung cancer, for the Administrative County in 1969 of 1.69 per 1,000 of the estimated home population was 0.05 per 1,000 lower than the rate for England and Wales. The rates for deaths from malignant neoplasms of the breast and of the uterus at 0.20 and 0.09 per 1,000 of the estimated home population respectively, were greater in each case by 0.01 per 1,000 compared with the corresponding rate for 1968. The 127 deaths from leukaemia resulted in a rate of 0.05 per 1,000 of the estimated home population, 0.01 per 1,000 below that for the previous year, whilst the rate for malignant neoplasms of the stomach remained unchanged at 0.28 per 1,000 of the estimated home population. The preceding table shows that an additional five categories of malignant neoplasms have been introduced in 1969 which previously were included in the grouping "other malignant neoplasms". Had these categories again been included in "other neoplasms," the resultant rate for deaths from this group would have been unchanged at 1.07 per 1,000 of the estimated home population.

The movement during the last 10 years of the crude cancer rates for the Administrative County and for its constituent grouped urban and rural areas is shown in the following table, together with the corresponding rates for England and Wales:—

Year	Mortality rate from cancer (all forms) per 1,000 of estimated home population			
	Urban Districts	Rural Districts	Administrative County	England and Wales
1960	2.15	1.90	2.11	2.16
1961	2.22	2.02	2.19	2.16
1962	2.09	2.12	2.10	2.18
1963	2.16	1.81	2.11	2.18
1964	2.15	1.88	2.11	2.21
1965	2.18	1.99	2.15	2.23
1966	2.22	2.01	2.19	2.25
1967	2.27	1.87	2.20	2.27
1968	2.25	1.89	2.19	2.32
1969	2.32	1.93	2.25	*2.35

* Provisional figure.

CEREBROVASCULAR DISEASE.—There were 13 fewer deaths classified to this cause group in 1969 than in the previous year. The 4,426 deaths so classified and assigned to the Administrative County resulted in a mortality rate of 1.80 per 1,000 of the estimated home population, being 0.03 per 1,000 below that for 1968. Of the total deaths from all causes in 1969, cerebrovascular disease accounted for 14.5 per cent. Persons aged 65 years of age and over accounted for 83.6 per cent. of deaths from this cause group.

PNEUMONIA.—For the second year in succession, deaths from pneumonia which were assigned to the Administrative County in 1969 showed a considerable increase. The 1,881 deaths from this cause group were 177 more than the number recorded in 1968, and 411 more than the average for the five years 1964-68. The resultant mortality rate of 0.77 per 1,000 of the estimated home population was 0.07 per 1,000 greater than that for the previous year. Almost 78 per cent. of deaths from pneumonia were of persons aged 65 years and over, whilst a further 5.5 per cent. were of infants under one year of age.

BRONCHITIS, EMPHYSEMA.—The 1,807 deaths classified to bronchitis, emphysema in 1969 were 144 more than in the previous year, and were equivalent to a mortality rate of 0.74 per 1,000 of the estimated home population. This was higher by 0.06 per 1,000 than the corresponding rate for 1968. Persons aged 65 years and over accounted for 73 per cent. of the deaths from this cause group.

OTHER DISEASES OF THE CIRCULATORY SYSTEM.—For the fifth year in succession the number of deaths classified to this cause group increased. The 1,503 deaths from diseases of the circulatory system which were 88 more than in 1968, were equivalent to a mortality rate of 0.61 per 1,000 of the estimated home population. Of the total deaths from this group of causes, 87.4 per cent. were of persons aged 65 years and over.

VIOLENCE.—There was an increase of 90 in the number of deaths ascribed to all forms of violence and assigned to the Administrative County in 1969. The 1,288 deaths so ascribed were classified into the four groups indicated in the following table, in which corresponding figures for the previous year are also given, together with the resultant death rate per 1,000 of the estimated home population.

Year	Motor vehicle accidents		All other accidents		Suicide and self-inflicted injuries		All other external causes		Total—all forms	
	No. of deaths	Death rate	No. of deaths	Death rate	No. of deaths	Death rate	No. of Deaths	Death rate	No. of deaths	Death rate
1968	307	0·13	583	0·24	220	0·09	88	0·04	1,198	0·49
1969	328	0·13	648	0·26	233	0·09	79	0·03	1,288	0·52

Mortality from all forms of violence in the Administrative County in 1969 corresponded to a rate of 0·52 per 1,000 of the estimated home population, 0·03 per 1,000 greater than the corresponding rate in the previous year.

Although the number of deaths caused by motor vehicle accidents was 21 more than in 1968, the mortality rate remained unchanged at 0·13 per 1,000 of the estimated home population. Deaths attributable to all other accidents, which account for some 50 per cent. of all deaths from violence, were 65 more than in the previous year with a resultant increase of 0·02 per 1,000 in the mortality rate. There were 13 more deaths from suicide and self-inflicted injuries, but the mortality rate remained unchanged at 0·09 per 1,000 population, the lowest recorded rate since 1941. There were nine fewer deaths from all other external causes, resulting in a mortality rate of 0·03 per 1,000 of the estimated home population.

TRANSFERABLE DEATHS.—During the year under review, the following transfers were made—12,950 persons, having a fixed or usual place of residence in the Administrative County, died in a district other than that in which they resided and these deaths (known as inward transfers) were assigned to their proper districts; 9,180 deaths occurring in County districts of persons not belonging thereto were transferred to the areas to which they belonged.

Maternal Mortality.—There were seven deaths classified to maternal causes in 1969 and assigned by the Registrar General to the Administrative County. This was three less than in the previous year and only one more than the low record of maternal deaths noted in 1967. Of the seven deaths in 1969, one was ascribed to abortion whilst the remaining six were due to other complications of pregnancy, childbirth and the puerperium. The maternal mortality rate for the Administrative County in 1969 was 0·17 per 1,000 total births, 0·06 per 1,000 below that for the previous year and 0·08 per 1,000 lower than the corresponding rate for the five years 1964–68. The corresponding provisional rate for 1969 for England and Wales was 0·19 per 1,000 total births. Particulars of maternal mortality in the Administrative County and England and Wales in 1969 and each of the preceding 10 years are given in the following table:—

Year	Administrative County			England and Wales
	No. of total births (live and still)	No. of maternal deaths	Mortality per 1,000 total births	Mortality per 1,000 total births
1959	36,502	19	0·52	0·38
1960	37,990	17	0·45	0·39
1961	39,260	15	0·38	0·33
1962	41,738	16	0·38	0·35
1963	42,209	12	0·28	0·28
1964	43,574	13	0·30	0·25
1965	43,087	14	0·32	0·25
1966	42,969	11	0·26	0·26
1967	42,718	6	0·14	0·20
1968	42,770	10	0·23	0·24
1969	42,136	7	0·17	*0·19

* Provisional figure.

The causes of the seven maternal deaths in 1969 are analysed in accordance with the International List in the following statement, which also shows the corresponding analysis for the previous year:—

Cause of death	No. of deaths	
	1968	1969
<i>Urinary infections and toxæmias of pregnancy and the puerperium—</i>		
Pyelitis and pyelonephritis (635)	—	1
Pre-eclampsia, eclampsia and toxæmia unspecified (637)	1	—
<i>Abortion—</i>		
Abortion induced for other reasons (642)	1	1
Spontaneous abortion (643)	2	—
<i>Delivery—</i>		
Delivery without mention of complication (650)	1	—
Delivery complicated by placenta prævia or antepartum hæmorrhage (651)	1	—
Delivery complicated by other post partum hæmorrhage (653)	—	3
Delivery with other complications (661)	1	2
<i>Complications of the puerperium—</i>		
Puerperal pulmonary embolism (673)	2	—
Other and unspecified complications of the puerperium (677)	1	—

Investigation of Maternal Deaths.—Under instructions of the Secretary of State for Health and Social Services each death of a woman which has any association with childbirth must be investigated and, in the County area, such investigations are carried out by the divisional medical staffs. A confidential report on the facts and circumstances of each fatality is forwarded to the Department of Health and Social Security.

Infant Mortality.—There were 12 fewer deaths of infants under one year of age assigned to the Administrative County in 1969. The 803 deaths so assigned resulted in a mortality rate of 19·3 per 1,000 live births, which constituted a new low record. The mortality rate was 0·1 per 1,000 below the previous low record noted in 1968 and 0·8 per 1,000 below the average for the five years 1964-68. Of the total deaths at all ages, the 803 infant deaths amounted to 2·6 per cent.

The following table shows the County, urban and rural infant death rates for 1969 and the preceding ten years, together with those for England and Wales. Up to and including 1966, the rates are per 1,000 live births registered, whilst since 1967 they are related to birth occurrences.

	Rate of deaths of children under 1 year per 1,000 live births										
	1959	1960	1961	1962	1963	1964	1965	1966	1967	1968	1969
Urban Districts	23·8	25·4	24·9	24·9	24·1	21·2	20·0	20·5	20·2	19·9	19·2
Rural Districts... ..	22·8	22·7	19·4	19·1	18·8	22·3	18·9	16·6	19·0	17·0	20·0
Administrative County	23·7	25·0	24·1	24·0	23·3	21·4	19·8	19·9	20·0	19·4	19·3
England and Wales... ..	22·2	21·8	21·4	21·7	21·1	19·9	19·0	19·0	18·3	18·3	*18·1

* Provisional figure.

The movement of the infant mortality rate since 1889, the first year for which County statistics are available, is shown in Table 1, page 128.

MORTALITY OF ILLEGITIMATE INFANTS.—The following table shows the differential incidence of mortality during 1969 and the preceding five years amongst legitimate and illegitimate infants under one year of age in the urban and rural districts and the Administrative County:—

Year	Mortality per 1,000 live births								
	Urban Districts			Rural Districts			Administrative County		
	Legitimate infants	Illegitimate infants	Total	Legitimate infants	Illegitimate infants	Total	Legitimate infants	Illegitimate infants	Total
1964	20·9	26·7	21·2	21·7	40·2	22·3	21·0	28·1	21·4
1965	19·8	22·7	20·0	18·4	32·1	18·9	19·6	23·6	19·8
1966	19·9	30·1	20·5	16·2	28	16·6	19·3	29·9	19·9
1967	19·7	26·2	20·2	17·9	47·3	19·0	19·4	28·3	20·0
1968	19·3	26·7	19·9	16·4	29·2	17·0	18·8	26·9	19·4
1969	18·4	29·0	19·2	19·7	24·5	20·0	18·7	28·5	19·3

NEO-NATAL MORTALITY.—There were 542 deaths of infants at ages under four weeks—13 fewer than in 1968. The mortality rate of 13.1 per 1,000 live births represented a low record for the Administrative County, which was 0.1 per 1,000 below the previous record established in 1968. The proportion of the total of infant deaths represented by neo-natal deaths was 67.5 per cent.

The neo-natal mortality rates for the Administrative County and the aggregates of the urban and rural districts for 1969 and each of the preceding 10 years are given in the following table together with the corresponding rates for England and Wales.

	Rate of deaths of children aged less than four weeks per 1,000 live births										
	1959	1960	1961	1962	1963	1964	1965	1966	1967	1968	1969
Urban Districts	16.5	17.4	17.5	17.8	16.6	15.2	13.6	14.4	14.3	13.3	12.6
Rural Districts	17.8	17.8	16.1	14.1	13.0	16.8	13.1	10.8	14.3	12.8	15.1
Administrative County	16.7	17.5	17.3	17.2	16.1	15.4	13.5	13.8	14.3	13.2	13.1
England and Wales... ..	15.9	15.5	15.3	15.1	14.3	13.8	13.0	12.9	12.5	12.4	12.0

* Provisional figure.

EARLY NEO-NATAL MORTALITY.—Although there were three fewer deaths of infants during the first week of life in 1969 than in the previous year, the 470 deaths assigned to the Administrative County resulted in a mortality rate of 11.3 per 1,000 live births, 0.1 per 1,000 higher than the low record noted in 1968. The mortality rate was nevertheless 1.0 per 1,000 below the average for the preceding five years. Early neo-natal deaths accounted for 58.5 per cent. of total infant deaths, and 86.7 per cent. of neo-natal deaths occurred during the first week of life.

CAUSES OF INFANT AND NEO-NATAL DEATHS.—A reference to Table 5, page 141, shows that the group classifications of the International Abbreviated List of 50 Causes (B List) are unsatisfactory from the point of view of a detailed analysis of deaths at ages under one year, considerably more than a half of such infant deaths being shown within the three groups—"Other causes of perinatal mortality," "Birth injury, difficult labour and other anoxic and hypoxic conditions" and "Congenital anomalies". A more satisfactory classification of the causes of infant and neo-natal mortality is available, however, from departmental records, although three factors operate against an exact agreement of the deaths analysed locally with those included in the Registrar General's analysis—(i) the local analysis relates to deaths occurring during the calendar year, the latter to deaths registered; (ii) the former analysis may be deficient in isolated instances of deaths in hospital which may not have been brought to the notice of the appropriate divisional medical officer; (iii) the difficulty inherent in most qualitative analyses, that of accurate classification, is particularly great in respect of causes of death in that reference back to the certifying practitioner cannot normally be made by the County authority in cases of inadequate certification.

Compared with the 470 early neo-natal, 542 neo-natal and 803 infant deaths registered in 1969 and assigned by the Registrar General to the Administrative County, the local analyses show respective totals of 476, 542 and 791. These were classified by cause groups as follows:—

Cause of death	Early neo-natal deaths	Neo-natal deaths	Infant deaths
Tuberculosis of respiratory system	—	—	—
Tuberculosis, other forms	—	—	—
Whooping cough	—	—	—
Meningococcal infection	—	—	4
Measles	—	—	—
Acute respiratory infections (except influenza)	1	2	36
Influenza	—	—	1
Pneumonia	11	15	78
Other diseases of respiratory system	—	—	9
Gastro-enteritis and diarrhoea	1	5	28
Congenital anomalies	61	99	156
Anencephalus	8	9	9
Spina bifida	3	10	15
Congenital hydrocephalus	—	—	2
Other congenital anomalies of nervous system	3	4	6
Congenital anomalies of circulatory system	27	42	70
Congenital anomalies of respiratory system	2	4	5
Congenital anomalies of digestive system	2	9	18
Congenital anomalies of genito-urinary system	1	1	5
Other and unspecified congenital anomalies	15	20	26

Cause of death	Early neo-natal deaths	Neo-natal deaths	Infant deaths
Certain causes of perinatal mortality	387	399	402
Maternal conditions unrelated to pregnancy... ..	9	9	9
Toxaemias of pregnancy	6	6	6
Maternal ante- and intrapartum infection	—	—	—
Difficult labour with abnormality of bones, organs or tissues of pelvis	—	—	—
Difficult labour with disproportion, but no mention of abnormality of pelvis	—	—	—
Difficult labour with malposition of foetus	4	4	4
Difficult labour with abnormality of forces of labour	1	1	1
Difficult labour with other and unspecified compli- cations	—	—	—
Other complications of pregnancy and childbirth ...	44	45	45
Conditions of placenta	6	6	6
Conditions of umbilical cord	5	5	5
Birth injury without mention of cause	34	35	35
Haemolytic disease of newborn	19	19	20
Anoxic and hypoxic conditions not elsewhere classified	125	131	132
Other conditions of foetus and newborn	134	138	139
All other causes	15	22	77
TOTAL—all causes	476	542	791

Particulars of the registered infant, neo-natal and early neo-natal deaths and death rates for each County district for the year 1969 are given in Table 3, pages 132 to 139.

Perinatal Mortality.—This term describes the total loss of new life shortly before, during and shortly after birth, represented by all stillbirths in combination with early neo-natal deaths. The perinatal mortality rate expresses the total of such events as a proportion of the total (live and still) births. The 632 stillbirths and 470 early neo-natal deaths in 1969 together represented a perinatal mortality rate of 26.2 per 1,000 total births, the lowest on record, 1.4 per 1,000 below the previous lowest rate established in 1968, and 2.6 per 1,000 lower than the average for the preceding five years. The corresponding provisional rate for England and Wales for 1969 was 23.4 per 1,000 total births.

INFECTIOUS AND OTHER NOTIFIABLE DISEASES

The following paragraphs give information on the incidence of the infectious and other notifiable diseases in the area of the Administrative County during 1969.

Smallpox.—For the sixteenth successive year no case of smallpox was notified within the Administrative County area. England and Wales were also free from this disease in 1969.

Diphtheria.—There were no cases of diphtheria notified during 1969 in the County area.

Whooping cough.—The 431 cases of whooping cough notified in 1969 were equivalent to an attack rate of 0.18 per 1,000 of the estimated home population. These represented the lowest number of cases and attack rate recorded since 1962, and were 836 and 0.36 per 1,000 below the average for the preceding five years. There were no deaths from whooping cough during the year.

Measles (excluding rubella).—There was a dramatic fall in the incidence of measles in 1969, the 6,477 cases notified in the Administrative County being the lowest number recorded since compulsory notification was introduced in 1940. The resultant attack rate of 2.64 per 1,000 of the estimated home population was also the lowest recorded, being 5.65 per 1,000 below the average for the five years 1964-68, and compared favourably with the provisional rate for England and Wales in 1969, which was 2.91 per 1,000 of the estimated home population. For the first year since 1956, no deaths from measles were reported in the Administrative County area.

In a letter to local authorities in December, 1969, the Chief Medical Officer of the Department of Health and Social Security commented that the usual biennial epidemic of measles had failed to occur during the winter of 1968-69, notifications nationally for the period October, 1968 to September, 1969 amounting to about 156,000 as compared with 214,000 in the period October, 1967 to September, 1968 and 580,000 from October, 1966 to September, 1967. The Chief Medical Officer was of the opinion that this marked reduction could reasonably be ascribed to the effects of vaccination.

Acute poliomyelitis.—One case of acute poliomyelitis was notified in the Administrative County in 1969, and was subsequently confirmed as paralytic, virus type 2. The case was a boy aged four years eleven months, who had not been vaccinated against poliomyelitis. He was subsequently reported to have recovered with functional limitations and to be still receiving treatment. For the sixth successive year there were no deaths from poliomyelitis in the County area.

Acute meningitis.—There were 37 cases of acute meningitis notified during 1969, equivalent to an attack rate of 0.02 per 1,000 of the estimated home population. Three deaths reported by local medical officers of health in 1969, were classified to this cause.

Acute encephalitis.—Nine cases of acute encephalitis were notified in the Administrative County compared with ten in the previous year. Seven cases were infective, and three post-infectious. According to information supplied by local medical officers of health three deaths were classified to this cause in 1969.

Scarlet fever.—There was an increase in the number of cases of scarlet fever in 1969 to 1,296—268 more than in the previous year. The resultant attack rate of 0.53 per 1,000 of the estimated home population was nevertheless 0.11 per 1,000 below the average for the preceding five years. For the eleventh successive year no death was recorded locally from scarlet fever.

Typhoid and paratyphoid fevers.—There were three cases of typhoid fever and two of paratyphoid fever notified in the Administrative County in 1969, one more in total than in the previous year. No deaths were reported.

Dysentery.—The 1,068 cases of dysentery notified in 1969, were 592 fewer than in the previous year, and 509 below the average for the five years 1964-68. The attack rate of 0.43 per 1,000 of the estimated home population was 0.25 per 1,000 below that for the previous year. There were no deaths.

Infective jaundice.—There were 1,448 notified cases of infective jaundice in the Administrative County in 1969, the first full year in which the disease was compulsorily notifiable. The attack rate was equivalent to 0.59 per 1,000 of the estimated home population. Ten deaths from this cause were reported locally by medical officers of health.

Food poisoning.—The 440 cases of food poisoning notified during the year were two less than in 1968, but 249 more than the average for the preceding five years 1964-68. No deaths were reported.

Particulars of the various outbreaks of food poisoning in 1969, including the organisms or other agents responsible, the foods involved and the places where the contaminated foods were consumed are given later in the report in the section relating to "INSPECTION AND SUPERVISION OF FOOD".

Notifications.—The table below, which is compiled from the quarterly returns of local medical officers of health, shows the numbers of cases of infectious and other notifiable diseases (excluding tuberculosis—see Table 6, page 144) notified during the year 1969, after corrections subsequently made either by notifying medical practitioners or by medical superintendents of infectious diseases hospitals:—

NOTIFICATIONS OF INFECTIOUS AND OTHER NOTIFIABLE DISEASES (AFTER CORRECTION) FOR
THE YEAR ENDED 31ST DECEMBER, 1969, ANALYSED BY SEX AND AGE

Scarlet fever	Whooping cough	Measles (excluding rubella)	Acute poliomyelitis		Dysentery	Acute meningitis	Sex	Age group	Sex	Acute encephalitis		Typhoid fever	Paratyphoid fever	Infective jaundice	Food poisoning	Leptospirosis	Tetanus										
			Paralytic	Non-paralytic						Infective	Post-infectious																
ADMINISTRATIVE COUNTY																											
641	231	3,375	1	—	520	19	M.	ALL AGES	M.	4	1	2	2	708	199	1	2										
655	200	3,102	—	—	548	18	F.		F.	3	1	1	—	740	241	—	—										
1,296	431	6,477	1	—	1,068	37	T.		T.	7	2	3	2	1,448	440	1	2										
5	32	200	—	—	28	6	M.	0—	M.	—	—	—	1	62	50	—	—										
4	26	179	—	—	21	5	F.											1—	F.	—	—	—	74	35	—	—	
9	58	379	—	—	49	11	T.																				2—
12	30	456	—	—	46	1	M.	5—	M.	3	1	—	1	411	32	—	—										
19	18	411	—	—	49	—	F.											10—	F.	4	1	—	1	387	24	—	
31	48	867	—	—	95	1	T.																				15—
184	95	1,527	1	—	158	4	M.	25—	M.	1	—	2	—	201	66	1	1										
152	81	1,420	—	—	135	6	F.											45—	F.	1	—	—	—	28	30	—	
336	176	2,947	1	—	293	10	T.																				65—
314	57	1,111	—	—	137	3	M.	UN- KNOWN	M.	—	—	—	—	5	—	—	—										
337	59	1,000	—	—	108	5	F.											F.	—	—	—	—	—	1	2	—	
651	116	2,111	—	—	245	8	T.																				T.
87	5	42	—	—	33	2	M.	—	—	—	—	—	—	6	—	—	—										
98	4	45	—	—	32	1	F.											—	—	—	—	—	—	—	—	—	
185	9	87	—	—	65	3	T.																				—
25	2	10	—	—	23	—	M.	—	—	—	—	—	—	—	—	—	—										
32	2	24	—	—	58	—	F.											—	—	—	—	—	—	—	—	—	
57	4	34	—	—	81	—	T.																				—
9	2	11	—	—	93	3	M.	—	—	—	—	—	—	—	—	—	—										
12	4	12	—	—	142	1	F.											—	—	—	—	—	—	—	—	—	
21	6	23	—	—	235	4	T.																				—
5	8	18	—	—	2	—	M.	—	—	—	—	—	—	—	—	—	—										
1	6	11	—	—	3	—	F.											—	—	—	—	—	—	—	—	—	
6	14	29	—	—	5	—	T.																				—

Other Diseases

	Ophthalmia neonatorum			Malaria (Believed to have been contracted abroad)		
	M.	F.	T.	M.	F.	T.
Administrative County	7	4	11	4	1	5

There were no notifications made in respect of the following diseases in the area of the Administrative County during 1969:—

Anthrax
Cholera
Diphtheria
Plague

Relapsing fever
Smallpox
Typhus
Yellow fever

Below, comparison is made of the numbers of notifications of the principal infectious diseases during 1969 and the preceding 10 years:—

Infectious disease	1959	1960	1961	1962	1963	1964	1965	1966	1967	1968	1969
Measles (excluding rubella) ...	22,493	20,054	23,773	13,346	27,631	22,767	19,055	23,283	17,102	15,699	6,477
Infective jaundice ...	—	—	—	—	—	—	—	—	—	—	1,448*
Whooping cough ...	2,615	2,805	982	260	2,113	1,673	588	1,091	2,179	802	431
Scarlet fever ...	2,508	2,022	1,297	775	704	1,257	2,217	1,814	1,284	1,028	1,296
Dysentery ...	2,279	4,052	1,622	2,991	1,640	1,757	1,141	924	2,405	1,660	1,068
Diphtheria ...	2	3	1	1	—	—	—	—	—	8	—
Acute poliomyelitis ...	56	6	103	5	7	3	12	3	1	2	1
Acute encephalitis ...	5	8	10	5	9	6	7	5	7	10	9
Typhoid and paratyphoid fevers ...	26	20	33	9	12	24	237	16	5	4	6
Smallpox ...	—	—	—	—	—	—	—	—	—	—	—

* Notifiable in 1969 for the first full year.

Tuberculosis.—NOTIFICATIONS.—In the following table the numbers of primary notifications and the corresponding attack rates in the Administrative County are given for 1969 and each of the preceding 10 years:—

Year	Primary notifications			Attack rate per 1,000 population		
	Respiratory tuberculosis	Non-respiratory tuberculosis	Tuberculosis (all forms)	Respiratory tuberculosis	Non-respiratory tuberculosis	Tuberculosis (all forms)
1959	1,016	110	1,126	0.47	0.05	0.52
1960	775	86	861	0.36	0.04	0.40
1961	728	100	828	0.33	0.05	0.38
1962	740	100	840	0.33	0.04	0.38
1963	601	89	690	0.26	0.04	0.30
1964	596	98	694	0.26	0.04	0.30
1965	504	97	601	0.22	0.04	0.26
1966	490	80	570	0.21	0.03	0.24
1967	455	82	537	0.19	0.03	0.22
1968	405	79	484	0.17	0.03	0.20
1969	413	97	510	0.17	0.04	0.21

The 510 cases of tuberculosis notified in 1969 in the Administrative County were 26 more than in the previous year, when notifications of the disease reached a low record. The resultant attack rate for 1969 of 0.21 per 1,000 of the estimated home population was consequently higher by 0.01 per 1,000 than that recorded in 1968. The incidence rates for the Administrative County were again below the corresponding provisional rates for England and Wales in 1969, by 0.03 per 1,000 of the estimated home population in the case of respiratory tuberculosis, 0.01 per 1,000 for non-respiratory tuberculosis and by 0.04 per 1,000 for all forms of tuberculosis.

The tuberculosis notifications, both primary and inward transfer (i.e., relating to known cases of tuberculosis moving into the County area), received during 1969, are analysed by sex/age group and site classification in Table 6, page 144.

MORTALITY.—Although the number of deaths from all forms of tuberculosis was greater by 13 than in the previous year, the 91 deaths in 1969, were 17 below the average for the five years 1964-68. The death rate for the Administrative County in respect of deaths from all forms of tuberculosis in 1969 of 0.37 per 10,000 of the estimated home population compared favourably with the corresponding provisional rate of 0.38 per 10,000 for England and Wales.

In the table below the number of tuberculous deaths registered during 1969 and the preceding 10 years are given for the Administrative County together with the corresponding death rates. It must be emphasised however that because of a change in the classification of the causes of death in 1968, full details of which were given in the report for that year, the rates for the years up to and including 1967 are not strictly comparable with those for 1968 and 1969. This is due to the fact that all deaths from "late effects" have in the past two years been classified to "Other tuberculosis" whereas formerly some of these would have been classified to "Respiratory tuberculosis".

Year	Deaths			Death rate per 10,000 of the population		
	Respiratory tuberculosis	Other tuberculosis	Tuberculosis (all forms)	Respiratory tuberculosis	Other tuberculosis	Tuberculosis (all forms)
1959	163	13	176	0.76	0.06	0.82
1960	151	8	159	0.69	0.04	0.73
1961	129	19	148	0.58	0.09	0.67
1962	130	13	143	0.58	0.06	0.64
1963	117	19	136	0.52	0.08	0.60
1964	113	13	126	0.49	0.06	0.55
1965	94	14	108	0.40	0.06	0.46
1966	121	15	136	0.51	0.06	0.57
1967	87	6	93	0.36	0.03	0.39
1968	61	17	78	0.25	0.07	0.32
1969	56	35	91	0.23	0.14	0.37

Table 5, pages 141 to 143, shows the distribution by sex and age group of the deaths from tuberculosis assigned in 1969 to the Administrative County and to the aggregated urban and rural districts.

COUNTY OF LANCASTER

HEALTH DIVISIONS

AND

DELEGATE AUTHORITIES



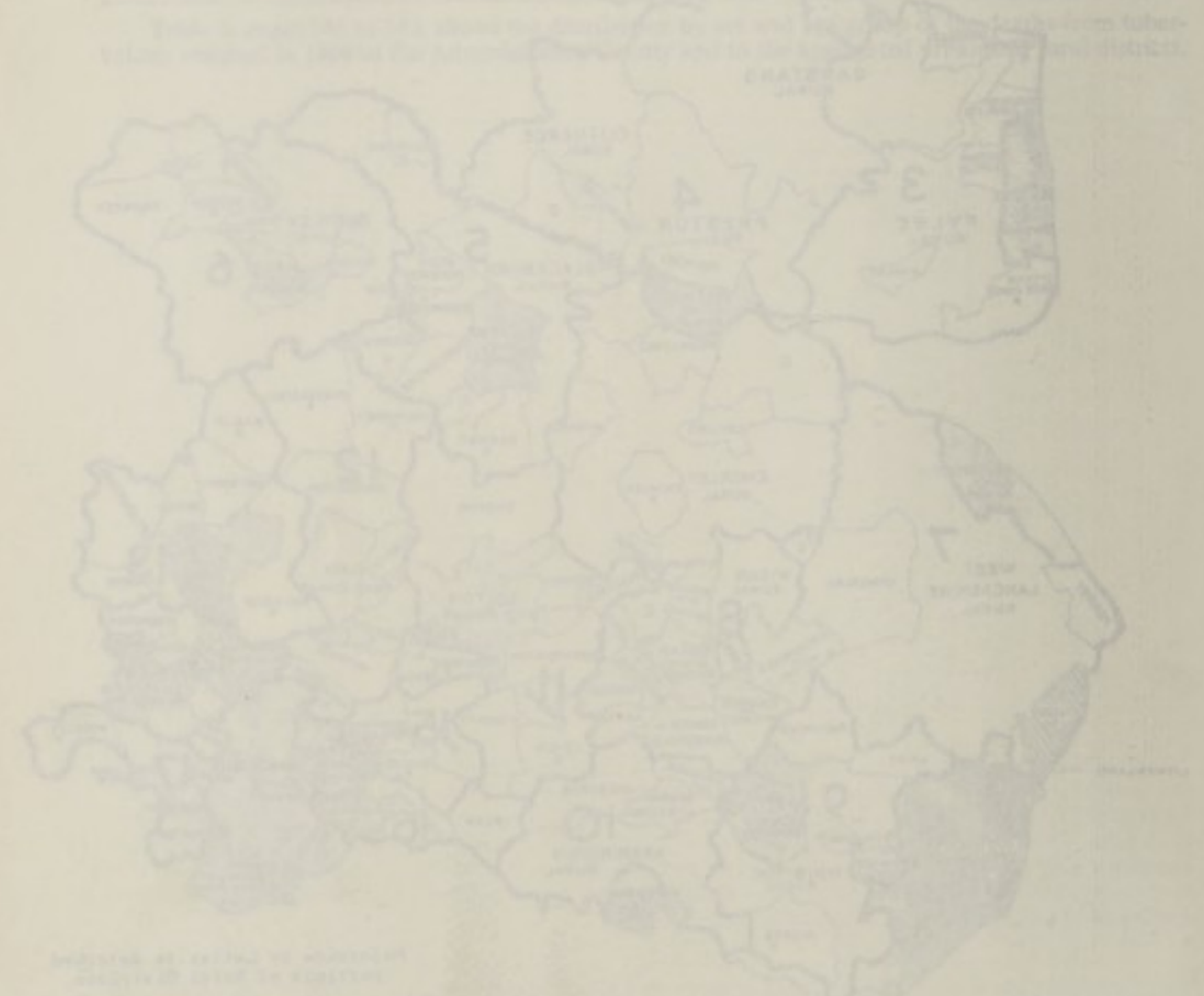
Delegate Authorities

Reference by Letter to detached portions of Rural Districts.

Letter	Name of District
A	BLACKBURN
B	LANCASTER
C	PRESTON
D	WEST LANCASHIRE
E	WIGAN

COUNTY OF LANCASTER
 HEALTH DIVISIONS
 DE STATE

Division	Population	Area	Population Density	Area Density
1	100	100	1.00	1.00
2	200	200	1.00	1.00
3	300	300	1.00	1.00
4	400	400	1.00	1.00
5	500	500	1.00	1.00
6	600	600	1.00	1.00
7	700	700	1.00	1.00
8	800	800	1.00	1.00
9	900	900	1.00	1.00
10	1000	1000	1.00	1.00
11	1100	1100	1.00	1.00
12	1200	1200	1.00	1.00
13	1300	1300	1.00	1.00
14	1400	1400	1.00	1.00
15	1500	1500	1.00	1.00
16	1600	1600	1.00	1.00
17	1700	1700	1.00	1.00
18	1800	1800	1.00	1.00
19	1900	1900	1.00	1.00
20	2000	2000	1.00	1.00
21	2100	2100	1.00	1.00
22	2200	2200	1.00	1.00
23	2300	2300	1.00	1.00
24	2400	2400	1.00	1.00
25	2500	2500	1.00	1.00
26	2600	2600	1.00	1.00
27	2700	2700	1.00	1.00
28	2800	2800	1.00	1.00
29	2900	2900	1.00	1.00
30	3000	3000	1.00	1.00
31	3100	3100	1.00	1.00
32	3200	3200	1.00	1.00
33	3300	3300	1.00	1.00
34	3400	3400	1.00	1.00
35	3500	3500	1.00	1.00
36	3600	3600	1.00	1.00
37	3700	3700	1.00	1.00
38	3800	3800	1.00	1.00
39	3900	3900	1.00	1.00
40	4000	4000	1.00	1.00
41	4100	4100	1.00	1.00
42	4200	4200	1.00	1.00
43	4300	4300	1.00	1.00
44	4400	4400	1.00	1.00
45	4500	4500	1.00	1.00
46	4600	4600	1.00	1.00
47	4700	4700	1.00	1.00
48	4800	4800	1.00	1.00
49	4900	4900	1.00	1.00
50	5000	5000	1.00	1.00



COUNTY OF LANCASTER
 HEALTH DIVISIONS
 DE STATE

HEALTH SERVICES

Services Provided.—Under the provisions of Part III of the National Health Service Act, 1946, it is the duty of the County Council, as local health authority for the Administrative County area, to provide, in accordance with approved schemes, health centres and services embracing the care of mothers and young children, midwifery and maternity nursing, health visiting, home nursing, vaccination and immunisation, ambulance transportation and the prevention of tuberculosis and mental illness and care and after-care of the tuberculous and mentally disordered. Under permissive sections of the Act the County Council's approved scheme of prevention, care and after-care is extended to cover all forms of illness and a domestic help service is provided.

In addition, provision is made under the terms of the National Assistance Act, 1948, for (i) residential accommodation for the aged and infirm, (ii) temporary accommodation for persons in urgent need and (iii) the welfare of handicapped persons.

Certain amendments in the law relating to the work of the local authority with regard to the provision of the health and welfare services were made by virtue of the Health Services and Public Health Act, 1968, to which reference was made in last year's report.

The responsibility for the administration of the various functions referred to above is that of the Health Committee which, appointed in accordance with the provisions of the National Health Service Act, 1946, consists of members of the County Council, together with representatives of the County District Council Associations in Lancashire, the Lancashire Executive Council, the Lancashire Local Medical Committee, and voluntary organisations concerned with the care of old people.

DIVISIONAL ADMINISTRATION.—The administrative arrangements made by the County Council for carrying out their duties as local health authority were designed to conform, as far as possible, to those made for the treatment services administered by regional boards and executive councils and accordingly, following the pattern for the hospital treatment services laid down by the Act, committees were established in 17 divisional areas covering the Administrative County for the local management of the services in the divisions.

Each divisional health committee is composed of members of the County Council, representatives appointed by (a) the councils of County districts within the division, (b) management committees of hospitals serving the division and (c) the education divisional executives within the division, together with persons co-opted at the discretion of the divisional committee with the approval of the Health Committee, and the committees undertake the day-to-day administration of the bulk of the services provided by the local health authority, except insofar as they have been delegated to certain County district councils under the terms of the Local Government Act, 1958, as referred to below.

DELEGATION OF FUNCTIONS.—In accordance with approved delegation schemes made under section 46 of the Local Government Act, 1958, the councils of four County districts—Crosby M.B., Huyton-with-Roby U.D., Middleton M.B., and Stretford M.B.—administer within their respective areas a wide range of health and welfare services on behalf of the County Council. The delegated services are specified in the Act and from those listed in the first two paragraphs above exclude only the ambulance service, such part of the prevention of illness, care and after-care scheme as relates to the care or after-care in residential accommodation of persons suffering from mental illness, and the provision of residential and temporary accommodation under the National Assistance Act, 1948. The remaining functions required by section 46 to be included in delegation schemes are those under the Nurseries and Child Minders Regulation Act, 1948, and those under the Mental Health Act, 1959, not included in the prevention of illness, care and after-care scheme by virtue of the amendment by that Act of Part III of the National Health Service Act.

The health divisions and delegate districts into which the Administrative County is divided for the purposes of administration of the health and welfare services are shown on the map here inserted, whilst in the following statement the acreages, the Census, 1961, populations and the Registrar General's estimated mid-1969 populations of the various areas as constituted at the 31st December, 1969, are set forth.

Health Division No.	Sanitary district	Area in acres at 31st Dec., 1969	Population	
			Census, 1961 (areas as constituted at 31st Dec., 1969)	Estimated home, mid-1969
1	Dalton-in-Furness U.D.	8,022	10,316	11,000
	Grange U.D.	1,883	3,125	3,310
	Ulverston U.D.	3,206	10,527	10,850
	North Lonsdale R.D.	127,448	16,598	15,820
		140,559	40,566	40,980
2	Lancaster M.B.	5,101	48,253	48,170
	Morecambe and Heysham M.B.	3,796	40,228	40,880
	Carnforth U.D.	1,504	4,113	4,190
	Lancaster R.D.	52,982	14,000	17,310
	Lunesdale R.D.	76,267	8,224	10,770
		139,650	114,818	121,320
3	Fleetwood M.B.	2,565	27,686	28,970
	Lytham St. Annes M.B.	5,814	36,189	37,000
	Kirkham U.D.	939	4,819	6,380
	Poulton-le-Fylde U.D.	2,272	12,726	16,150
	Preesall U.D.	3,277	2,357	3,490
	Thornton Cleveleys U.D.	3,358	20,648	26,250
	Fylde R.D.	33,264	17,370	18,410
	†Garstang R.D. (part)	14,535	3,751	4,630
		66,024	125,546	141,280
4	Chorley M.B.	4,283	31,315	30,990
	Adlington U.D.	1,062	4,276	4,680
	Fulwood U.D.	3,164	16,016	19,880
	Leyland U.D.	3,804	19,413	23,100
	Longridge U.D.	3,285	4,686	6,170
	Walton-le-Dale U.D.	4,733	18,964	26,160
	Withnell U.D.	4,186	2,849	3,070
	Chorley R.D.	41,117	28,567	35,700
	†Clitheroe R.D. (part)	19,803	2,389	2,540
	†Garstang R.D. (part)	42,956	10,639	13,120
	Preston R.D.	49,754	43,592	51,310
		178,147	182,706	216,720
5	Accrington M.B.	4,418	39,018	36,340
	Clitheroe M.B.	2,386	12,158	12,910
	Darwen M.B.	5,959	29,475	28,500
	Church U.D.	528	5,888	5,870
	Clayton-le-Moors U.D.	1,060	6,421	6,460
	Great Harwood U.D.	2,868	10,718	11,050
	Oswaldtwistle U.D.	4,885	11,918	13,940
	Rishton U.D.	2,879	5,433	5,650
	Blackburn R.D.	19,469	15,053	19,520
	†Clitheroe R.D. (part)	12,367	6,410	6,810
		56,819	142,492	147,050
6	Colne M.B.	5,939	19,430	18,890
	Nelson M.B.	3,445	32,292	31,230
	Barrowford U.D.	1,387	4,644	4,700
	Brierfield U.D.	807	7,018	7,290
	Padiham U.D.	975	9,899	10,160
	Trawden U.D.	6,815	1,952	2,020
	Burnley R.D.	39,849	16,035	16,170
		59,217	91,270	90,460

† Populations computed from Registrar General's estimates on basis of parish populations as at Census, 1961.

Health Division No.	Sanitary district	Area in acres at 31st Dec., 1969	Population	
			Census, 1961 (areas as constituted at 31st Dec., 1969)	Estimated home, mid-1969
7	*Crosby M.B.	4,785	59,166	58,580
	Formby U.D.	5,613	11,734	21,730
	Litherland U.D.	1,210	24,871	24,540
	Ormskirk U.D.	15,227	21,803	25,900
	Skelmersdale and Holland U.D. ...	7,510	13,841	23,640
	West Lancashire R.D.	65,168	55,565	67,100
		99,513	186,980	221,490
8	Abram U.D.	1,979	6,004	6,290
	Ashton-in-Makerfield U.D. ...	6,266	19,262	25,600
	Aspull U.D.	1,905	6,748	7,480
	Billinge and Winstanley U.D. ...	4,596	6,945	10,510
	Hindley U.D.	2,610	19,396	22,640
	Ince-in-Makerfield U.D.	2,321	18,019	16,890
	Orrell U.D.	1,616	10,664	12,090
	Standish-with-Langtree U.D. ...	3,266	9,692	10,960
	Wigan R.D.	11,191	10,102	13,760
		35,750	106,832	126,220
9	Widnes M.B.	5,746	52,186	55,120
	*Huyton-with-Roby U.D.	3,055	63,089	68,890
	Kirkby U.D.	4,845	52,139	65,260
	Prescot U.D.	871	13,079	13,200
	Rainford U.D.	5,877	5,385	7,380
	Whiston R.D.	23,786	43,786	82,420
		44,180	229,664	292,270
10	Golborne U.D.	7,561	21,310	27,620
	Haydock U.D.	2,395	12,074	13,010
	Newton-le-Willows U.D.	3,105	21,768	22,280
	Warrington R.D.	22,357	30,732	46,900
		35,418	85,884	109,810
11	Farnworth M.B.	1,504	27,502	26,560
	Leigh M.B.	6,361	46,174	46,200
	Atherton U.D.	2,265	19,756	20,840
	Blackrod U.D.	2,392	3,606	4,840
	Horwich U.D.	3,257	16,078	16,670
	Kearsley U.D.	1,727	10,296	11,760
	Little Lever U.D.	807	5,085	7,310
	Turton U.D.	17,334	13,698	20,320
	Tyldesley U.D.	5,175	16,813	20,080
	Westhoughton U.D.	5,560	16,260	17,620
		46,382	175,268	192,200
12	Haslingden M.B.	8,203	14,360	14,280
	Prestwich M.B.	2,421	34,209	33,060
	Radcliffe M.B.	4,957	26,726	28,460
	Rawtenstall M.B.	9,528	23,890	21,640
	Ramsbottom U.D.	9,562	13,817	14,940
	Tottington U.D.	2,542	5,649	7,250
	Whitefield U.D.	3,391	14,372	20,720
		40,604	133,023	140,350

* District to the Council of which certain health and welfare functions are delegated.

Health Division No.	Sanitary district	Area in acres at 31st Dec., 1969	Population	
			Census, 1961 (areas as constituted at 31st Dec., 1969)	Estimated home, mid-1969
13	Bacup M.B.	6,121	17,308	16,270
	Heywood M.B.	8,508	24,090	30,360
	Littleborough U.D.	7,855	10,552	11,110
	Milnrow U.D.	5,194	8,129	9,930
	Wardle U.D.	3,192	4,608	5,060
	Whitworth U.D.	4,483	7,064	7,780
		35,353	71,751	80,510
14	*Middleton M.B.	5,172	56,668	57,510
	Chadderton U.D.	3,014	32,568	31,920
	Crompton U.D.	2,865	12,708	15,860
	Failsforth U.D.	1,679	19,819	22,640
	Lees U.D.	288	3,730	3,780
	Royton U.D.	2,148	14,474	19,040
		15,166	139,967	150,750
15	Eccles M.B.	3,417	43,173	39,830
	Swinton and Pendlebury M.B.	3,362	40,470	40,640
	Worsley U.D.	7,240	40,393	49,700
		14,019	124,036	130,170
16	*Stretford M.B.	3,533	60,364	58,820
	Irlam U.D.	4,714	15,371	20,230
	Urmston U.D.	4,799	43,068	43,540
		13,046	118,803	122,590
17	Ashton-under-Lyne M.B.	4,135	50,154	48,180
	Mossley M.B.	3,661	9,776	9,750
	Audenshaw U.D.	1,241	12,122	11,810
	Denton U.D.	2,593	31,089	38,120
	Droylsden U.D.	1,245	25,461	25,250
		12,875	128,602	133,110

* District to the Council of which certain health and welfare functions are delegated.

The various health and welfare services, the day-to-day administration of which devolves upon Divisional Health Committees and the four District Councils to whom certain duties have been delegated, have continued to function satisfactorily. Whilst particulars of the work accomplished relative to the various services is given in some detail in the pages which follow, it is of interest to record here some of the comments of divisional medical officers and medical officers of health of delegate authorities on various aspects of the services during 1969.

Health Division No. 2.—Once again we can feel proud of our year's work, and consider that we have continued to make steady, if unspectacular, progress in our field of preventive and social medicine. Staffing has not proved a great problem, although it was necessary to appoint additional part-time school nurses to compensate for a few vacancies in the health visitor establishment.

The Observations Register and attempt at full developmental examination of babies which began on 1st January, 1969, has proved more successful than we dared to hope, and already a wealth of information is at our disposal. This is essentially a long term project, to enable forward planning, and the true value will only become apparent at the end of the second year.

The geriatric liaison scheme was put on a more permanent and satisfactory basis.

The Divisional Medical Officer was appointed a member of both the local Hospital Management Committees during the year, helping further the co-ordination and co-operation amongst the three branches of the National Health Service in this area.

Health Division No. 4.—It is felt that on the whole the various services have operated fairly satisfactorily during the year despite staff shortages. In this respect the chiropody service has suffered

worst and there is room for considerable improvement but only when existing staff vacancies can be filled.

The G.P. attachment services are proving very worth-while and have been further developed during the year.

Health Division No. 6.—The people in the Division are well informed of the services available and make full use of them.

Although well endowed with four day nurseries the demand always exceeds places available, although many applicants are in the non-priority class. The present shortage of female labour, and the tradition of mothers going out to work in this area will ensure a continued demand for this service.

The demand for night helps continues to be heavy and some difficulty is being experienced in recruiting suitable staff.

Health Division No. 8.—The Division has continued to provide a satisfactory service but staff recruitment has hindered the expansion in some sections. Liaison between all officers has remained excellent and good integration has been shown by all disciplines, so ensuring continuity of service to the community.

Health Division No. 13.—The services are considered adequate and satisfactory.

Health Division No. 14.—Residents of the Division enjoy reasonably adequate hospital services save in regard to long term "chronic sick" accommodation. Despite Ministerial advice it is apparent that present hospital policies are to retain only patients who can benefit from active therapy as distinct from professional nursing care.

The general standard of local authority services in the division compares favourably with other areas of the North West. The principal deficiencies are in the continuing imbalance between demand for, and availability of residential accommodation for the elderly—particularly the mentally confused and also in the recruitment of certain categories of qualified staff—medical officers, social welfare officers, nursery nurses and health visitors.

Health Division No. 17.—Services have continued to function in a satisfactory manner. Generally, the staffing position has improved except in respect of health visitors where numbers are well below establishment.

Middleton M.B.—The general standard and availability of health services available to Middleton residents is comparable with that in adjacent towns. So far as local health services are concerned, the principal needs remain the immediate recruitment of medical and health visiting staff.

Hospital facilities in general are reasonably adequate but there remain serious deficiencies in geriatric accommodation, in-patient child psychiatric services and accommodation for the younger chronic sick.

CONTROL, SUPERVISION AND CO-ORDINATION OF SERVICES.—The County Medical Officer of Health and Principal School Medical Officer is responsible for the control, supervision and co-ordination of the various services provided by the local health authority and acting under his direction the divisional medical officers, who are also school medical officers, are responsible on behalf of the divisional committees for the staffs on the divisional establishments and for the day-to-day control and supervision of the various services provided. The services of the supervisory officers of the midwifery, district nursing, health visiting and ambulance services on the central office staff of the County Medical Officer of Health are available to divisional medical officers as required.

In the districts to the councils of which certain health and welfare functions have been delegated, the medical officer of health is responsible, through the Council's Health Committee, for the control and supervision of the several services but, as in each case the medical officer of health and the divisional medical officer are one and the same person and as the delegate authority is required to conform to the policies of the local authority, continuity of co-ordination is ensured.

One of the duties required of a divisional medical officer is that he shall undertake the duties of medical officer of health for the County districts within his division, where he may be so appointed. This provision has, in fact, done much to assist County districts in meeting the requirements of the Local Government Act, 1933, regarding the appointment of medical officers of health not engaged in private practice as medical practitioners and of affording complete co-ordination of the medical services of the County Council and the public health work of the district councils. Up to the 31st December, 1969, no fewer than 103 districts had as medical officer of health the divisional medical officer of the health division in which the district is situate. In addition, two districts had a medical officer (departmental) who, having been appointed in the capacity of medical officer of health prior to the inception of the Divisional Health Administration Scheme, has been allowed to continue as such until such time as the district councils themselves desire the appointment of the divisional medical officer. In the remaining three County districts, the duties of medical officer of health were, at the 31st December, 1969, still being undertaken by medical practitioners engaged in private practice.

CO-ORDINATION AND CO-OPERATION WITH OTHER BRANCHES OF THE NATIONAL HEALTH SERVICE.—The structure of the National Health Service with responsibilities shared by separate administrative bodies renders it essential that there should be effective arrangements for securing integration. In Lancashire there exists a wide variety of liaison arrangements between the local health authority and the other statutory and voluntary bodies. Many of these arrangements are, of course, the result of the implementation of statutory requirements or approved schemes of administration, but the less formal meetings which take place from time to time as occasion demands between representatives of the several bodies are also useful and the meetings and contacts at officer level are undoubtedly of great value. In this connection, the Lancashire system of divisionalisation of the local health authority's services has facilitated liaison at local level by making it possible for officers of the local health authority to meet and to work in close touch with their opposite numbers in the hospital and domiciliary services. The aim of the local health authority is to strengthen this desirable liaison with advantage to all concerned.

In general, a good and effective liaison exists between the local health authority staffs and the different departments of the various hospitals throughout the area. In particular, a very high degree of co-operation is called for in connection with the problems associated with chronic sick and geriatric cases by reason of the great pressure on hospital beds on the one hand and the inability of the local health authority to keep pace with the demand for places in homes for the elderly and infirm on the other. In the field of mental health, too, liaison is gradually being strengthened, with greater co-ordination of effort between the hospital psychiatric staffs and the mental health staffs of the local health authority.

Whilst the pattern of co-operation with general practitioner services has developed more slowly and perhaps less uniformly than that with the hospital services, evidence continues to grow of increasing use of the assistance made available to general practitioners and their patients by the local health authority. The extension of arrangements allying health visitors and district nursing sisters to individual or group practices has continued, and the scope of such attachments has been carried a stage further with an experimental secondment of a social welfare officer and a mental welfare officer to two general practice groups. Progress has again been made with regard to the proposed establishment of group practice centres in premises adjacent to County Council clinics or child health centres, further reference to which is made below.

Much good work is done in the County area in connection with welfare matters, particularly as regards the care of the elderly and infirm, by various voluntary bodies such as Old People's Welfare Committees, the Inskip League of Friendship, Tuberculosis Care Committees, Social Service Councils, Personal Services Committees, etc. Every effort is made by the local health authority to work in close conjunction with these bodies and to co-ordinate their efforts with the statutory services and facilities provided.

Development of Local Authority Health and Welfare Services.—Each year since 1967, each County and County Borough Council has been required to submit to the Department of Health and Social Security by the 1st October detailed returns giving particulars of all projects for which the authority's plans (including the selection and acquisition of sites) were sufficiently well advanced to lead them to expect to seek loan sanction (or to finance out of revenue or special capital funds) during the three succeeding financial years. The submission of such returns is for the purpose of programming individual capital projects and to enable the Secretary of State to prepare three-year lists of projects for which he hopes to be able to recommend loan sanction.

The returns submitted to the Department of Health and Social Security in September, 1969, related to 29 projects for 1970/71, 28 for 1971/72 and 34 for 1972/73 involving capital expenditure of £1,766,379, £1,403,315 and £1,796,876 respectively.

HEALTH CENTRES

The County Council have embarked on an extensive building programme of health centres which are provided under section 21 of the National Health Service Act, 1946. Prior to the receipt of the Government circular issued in 1967 encouraging local health authorities to build health centres, the County Council had embarked upon a limited programme of group practice centres. The five centres in this programme, classed as section 21 health centres, were to be built adjoining school clinics, and attached to them by a link corridor. By the end of 1969 two of these centres had come into full use whilst the other three were almost completed. The first to be completed, at Kirkham, was opened on the 2nd July, 1969. The centre at Thornton Cleveleys was opened on the 3rd November, 1969. Despite anticipated teething troubles the two centres quickly settled down and are now operating satisfactorily.

Following the receipt of the circular referred to above a review was made of the County Council's clinic building programme and as a result of this it is now intended to build health centres in a number of areas instead of clinics. Apart from these centres, the upsurge of interest in health centre practice amongst general practitioners over the past three or four years resulted in requests being received for the provision of such facilities in a number of County districts. In consequence by the end of the year the County Council had an extensive building programme for the next few years, included in which are projects for the following districts:—

Ashton-under-Lyne
Ashton-in-Makerfield
Bacup
Brierfield
Chadderton
Crompton
Denton

Eccles
Failsworth
Halewood (Whiston R.D.)
Haslingden
Haydock
Irlam
Kirkby

Knowsley-Cantril Farm (Whiston R.D.)
 Leigh
 Little Hulton
 Longridge
 Longton (Preston R.D.)
 Milnrow
 Morecambe
 Prestwich

Radcliffe
 Ramsbottom
 Skelmersdale
 Ulverston
 Whitefield
 Widnes
 Walkden

It is regrettable that delays have occurred in the implementation of the health centre building programme. These have resulted from a variety of factors such as difficulty in obtaining agreement on siting, delay in obtaining land, and problems of agreement on sketch plans both with general practitioners and the Department of Health and Social Security. Unfortunately, the very complexity of the problem caused by the involvement of so many individuals or organisations militates against rapid decision taking and this inevitably causes delay. It is of course essential that there should be consultation at all stages of the development of a health centre with the Executive Council, the Local Medical Committee and the doctors concerned, as well as the Department of Health and Social Security and it seems inevitable that this volume of consultation will lead to delay in the implementation of proposals.

Enquiries from general practitioners, are still being received, and it seems reasonable to assume that demand will continue unabated in the future, not only for new and developing areas, but also for areas where there are well established practices.

CARE OF MOTHERS AND YOUNG CHILDREN

The County Council's arrangements for the care of mothers and young children provide for the expectant and nursing mother, and for her child until it reaches school age, facilities which include child health centres, antenatal and post-natal care, dental care, special facilities for the care of premature infants and unmarried mothers and their children, and day nurseries. The service is closely correlated with the domiciliary midwifery, health visiting and domestic help services, by which means the mother can receive advice and care for herself and her child as well as help in the home during and after her confinement. The conduct of all these services within the framework of County Council policy is delegated, for their respective areas, to the councils of four County districts—Crosby M.B., Huyton-with-Roby U.D., Middleton M.B. and Stretford M.B.

Antenatal and Post-natal Care.—The following statement gives particulars of attendances, etc., at the County Council antenatal and post-natal clinics for each of the last five years.

Year	No. of clinics at end of year	No. of half-day sessions	Antenatal attendances				No. of post-natal attendances
			No. of women attending	No. of attendances	Average attendances per session	Average attendances per individual	
1965	95	5,303 (38)	18,934	83,431	15.8	4.4	2,347 (530)
1966	95	5,306 (30)	18,527	82,520	15.6	4.5	2,234 (448)
1967	97	5,275 (15)	16,480	72,645	13.8	4.4	1,607 (96)
1968	90	5,112 (11)	14,931	64,237	12.6	4.3	1,218 (42)
1969	86	4,619 (8)	14,170	57,577	12.5	4.1	1,125 (15)

Note: Particulars of special post-natal sessions are included and also given separately in brackets.

Although the majority of post-natal examinations are carried out during antenatal sessions, there have been special post-natal sessions in Health Division No. 8 but these were discontinued on the 30th September, 1969.

Of the 86 clinics in operation at the end of the year, 36 had the services of a hospital consultant obstetrician in addition to County Council staff. The consultants conducted 1,413 of the 4,619 sessions held during the year (including the eight post-natal sessions), 1,293 were conducted by County Council medical officers, 1,687 by County Council midwives and 226 by general practitioners employed on a sessional basis.

Table 7, page 145 gives attendance particulars relating to the antenatal and post-natal clinics in the respective health divisions and delegate districts during 1969.

County patients in Health Divisions Nos. 9 and 10 attended antenatal and post-natal clinics of St. Helens C.B., payment being made according to the number of cases and attendances. During the year 13 expectant mothers made 87 attendances and in addition seven post-natal attendances were recorded.

Relaxation, Exercise and Mothercraft Classes.—At 23 of the classes organised at County Council clinics the instruction in relaxation and exercises is given by qualified physiotherapists whilst at 62 other classes this work is carried out by County Council midwives and health visitors who have attended a course on natural childbirth. Such courses are arranged by the County Council, the tutor in charge being a qualified physiotherapist with much practical experience in this work.

The classes for the mothers are divided into three periods, *viz.*, (1) exercises, (2) relaxation and (3) demonstrations and discussions. Each period occupies about 15 minutes so that, taking into account the time necessary for preparation, an expectant mother spends approximately one hour at each session. The demonstrations and discussions include—

- (a) instruction in use of analgesic apparatus;
- (b) flannelgraphs to illustrate talks on labour and pelvic anatomy;
- (c) talks on bathing and feeding of baby;
- (d) display of baby clothes and patterns;
- (e) talks on hygiene of pregnancy, etc.

This teaching is carried out by health visitors and midwives.

Details of attendances, etc., during 1969 in each health division and delegate district are given in Table 7, on page 145, and set forth below are the totals for the County area for each year 1965 to 1969.

Year	No. of classes at end of year	No. of sessions	No. of women attending	No. of attendances
1965	70	2,798	5,272	25,170
1966	72	3,086	4,789	25,221
1967	79	3,311	5,019	26,145
1968	78	3,474	5,239	27,107
1969	85	3,629	5,880	29,925

The value of these classes was emphasised in the memorandum on antenatal care related to toxæmia which was issued by the then Ministry of Health in May, 1956, and it is generally agreed that the local health authority antenatal clinics are more suitable for this type of work than the busy hospital out-patient clinic. Patients who attend hospital out-patient departments or general practitioners' surgeries for their antenatal care are therefore welcome at the classes. This attitude was endorsed in the Cranbrook Report, which recommended that health education and mothercraft instruction should be available for all expectant mothers. There is still scope for further development of this aspect of antenatal care.

Child Health Centres.—The number of child health centres to which mothers may bring their babies and toddlers regularly for supervision continues to increase. The administration of the centres has continued on the same lines as in previous years and at the end of 1969 there were 287 centres in operation. Of these the following were opened during the year on the dates shown:—

Health Division No.	Centre	Date opened
4 ...	British Legion Club, Mawdesley	4th July
8 ...	Bispham Methodist Chapel, Billinge Higher End, Billinge ...	2nd June
9 ...	The Pavilion, Bushey Lane, Rainford	22nd January
9 ...	Methodist Church Hall, Bold, Whiston	10th July
11 ...	Branch Surgery, Salford Road, Over Hulton	1st April
11 ...	Leigh Cricket Club, Pennington	6th March
15 ...	Partington Lane, Swinton	27th February

The following centres were closed during the year on the dates shown:—

Health Division No.	Centre	Date closed
4 ...	All Saints Scout Hall, Moor Road, Chorley	27th November
12 ...	Methodist School, Blackburn Road, Baxenden, Rising Bridge...	7th March
13 ...	Heap Bridge County School, Heywood	7th October
15 ...	14/16, Abbey Grove, Eccles... ..	7th January

Of the centres at the end of the previous year, the following were transferred during 1969 to alternative premises:—

Health Division No.	Premises
3 ...	Public Offices, Clifton Drive South, St. Annes (closed 18th March) Queensway Chapel, Walter Avenue, St. Annes (closed 20th March) County Council Clinic, Back Headroomgate Road, St. Annes (opened 1st April)
4 ...	Conservative Club, Bury Lane, Brinscall, Withnell (closed 21st October) Methodist Church Hall, School Lane, Brinscall (opened 4th November)
17 ...	Hurst Nook School, Nook Lane, Ashton-under-Lyne (closed 31st March) Hurst Community Centre, Ashton-under-Lyne (opened 14th April)
17 ...	St. Agnes Sunday School, Beresford Crescent, Reddish (closed 27th May) Denton West Community Centre, Hulme Road, Denton (opened 3rd June)

The following statement gives details of attendances of children at child health centres during each year from 1965 to 1969 and Table 8 on page 146 gives similar information for 1969 for each health division and delegate district.

	1965	1966	1967	1968	1969
No. of centres at end of year	272	276	280	285	287
No. of half-day sessions	15,624	15,758	16,061	16,478	16,581
No. of children who attended (age at end of year)—					
Under 1	34,248	34,586	33,483	34,498	35,010
1—	30,638	30,455	30,509	30,917	31,032
2-4 (inclusive)	30,382	30,935	30,119	32,743	32,142
TOTAL	95,268	95,976	94,111	98,158	98,184
No. of attendances at ages (in years)—					
Under 1	540,196	508,728	503,971	485,557	484,265
1—	116,548	113,160	108,115	111,055	107,506
2-4 (inclusive)	96,347	91,062	89,027	89,068	84,484
TOTAL	753,091	712,950	701,113	685,680	676,255
Average attendances per session... ..	48	45	44	42	41

County Council medical officers conducted 11,884 of the 16,581 sessions held during the year under report, 4,290 were conducted by health visitors, 46 by hospital medical staff and the remaining 361 by general practitioners employed on a sessional basis. Of the 98,184 children who attended 2,511 were referred, as a result of medical examination, either to a general practitioner or direct to a specialist for diagnosis and/or treatment. This total does not include children found to have some minor condition whose mothers are advised that this warrants a visit to the family doctor.

The percentage of children, in age groups, who took advantage of the facilities at child health centres is shown in the following statement:—

	Under 1 year	1-4 years inclusive
1965	81.7	36.5
1966	83.7	35.8
1967	80.3	35.0
1968	84.8	36.4
1969	84.3	36.3

Great importance continues to be attached to the educational work of the centres and group discussions, films, film strips, posters, etc., are used widely in this work.

In addition to the facilities provided by the County Council, arrangements exist whereby County children from the surrounding districts may attend at centres administered by St. Helens County Borough Council, a payment per attendance being made by the County Council to the Corporation. The following table gives details of the attendances of County children at the St. Helens centres used

during the period 1965 to 1969:—

Year	No. of children who attended (age at end of year)			No. of attendances by children at ages (in years)		
	Under 1	1–	2–4 (inclusive)	Under 1	1–	2–4 (inclusive)
1965	77	22	24	597	80	47
1966	35	31	33	510	89	21
1967	32	36	37	468	56	45
1968	50	44	34	562	73	42
1969	32	38	19	348	59	21

Generally speaking, the facilities provided for child health work in the Administrative County insofar as centres are concerned are fairly adequate, but alternative accommodation is required in some districts and arrangements are in hand for the opening of additional centres.

The most satisfactory premises are the permanent centres, particularly those which are purpose built. The needs of the child health service, however, are such that many more child health centres than other types of clinic are required and use must be made of rented premises such as Sunday schools, village halls, etc.; in fact, well over half the child health centres throughout the County are held in premises of this type. Much good work is done, however, in these centres although the premises are sometimes far from ideal.

DEVELOPMENTAL PAEDIATRICS.—The importance of developmental assessments of young children by the medical staff of child health centres was emphasised in the Sheldon Report which was published in 1967, and these are being carried out increasingly by the County Council's medical officers as part of the child health service.

It is hoped that eventually one medical officer from each health division will attend a special six weeks course in Developmental Paediatrics which is organised each year by the Society of Medical Officers of Health. By the end of 1969, eight medical officers had attended these courses. It is hoped that the extra expertise acquired by these doctors will be placed at the disposal of the other doctors in the child health service in the division and also be of benefit in examination of babies for adoption.

Incidence of Congenital Malformations.—At the request of the then Ministry of Health arrangements were made to supply the Registrar General with details of infants in whom congenital defects are observed at birth. No central record of individual cases is maintained. The object of the scheme is to compile statistical information, some of which will be published regularly in the Registrar General's returns, from which it should be possible to detect any national or regional changes in the pattern.

The scheme commenced on the 1st January, 1964, and the statement below shows the number of children born with a malformation or malformations during 1969 together with comparative figures for the four previous years.

Year	Total births (live and still)	No. of infants with malformations	No. of malformations	Rate per 1,000 total notified births	
				Infants with malformations	Malformations
1965	42,856	703	847	16.4	19.8
1966	42,891	717	868	16.7	20.2
1967	42,540	651	824	15.3	19.4
1968	42,815	655	777	15.3	18.1
1969	42,164	649	782	15.4	18.5

The incidence of abnormalities varies considerably from one health division to another and would appear to be due to under reporting in some hospitals.

Detection of Deafness in Young Children.—It is recognised that most deaf children possess some residual hearing and the modern aim is to fit such children with hearing aids, and to give them training as soon as possible so that they may learn to speak in a manner similar to that of a normal child.

The County Council therefore agreed in 1955 to the establishment of a special clinic at Fulwood for the diagnosis of deafness in young children, and also to the training of health visitors to carry out screening tests to confirm that young children have normal hearing.

AUDIOLOGY CLINIC.—The clinic was opened in January, 1956, to serve mainly the children in the northern part of the County, children in the south of the County being served by the clinic at Manchester University and the Hearing Assessment Clinic, Crown Street, Liverpool.

The medical officer in charge is Dr. Jean Robson and four health visitors are in attendance. County teachers of the deaf employed in the school health service are also attached to the clinic and undertake home training of the older children.

The diagnostic clinic is staffed by the medical officer and health visitors and the guidance clinic by the health visitors.

Dr. Jean Robson reports:—

"The testing and guidance of pre-school children has continued at Fulwood Audiology Clinic in 1969.

Again there was a decrease in the average age of referral and an increase in the number of cases of partial conductive deafness referred to the clinic. In many cases there is a mixed type of deafness—conductive deafness due to exudative otitis media is superimposed on perceptive deafness.

When deafness of any degree is diagnosed the pre-school child is referred to the consultant otologist of the area in which he lives, and we have excellent co-operation from all the consultant otologists involved. Any possible medical or surgical treatment is carried out and, if there is still a residual hearing loss of approximately 35 to 40 decibels or over, the child is issued with a hearing aid and guidance is given to the parents and child by a member of the clinic staff.

All children receiving guidance are reviewed at four monthly intervals to assess progress and to exclude the possibility of the occurrence of a superimposed conductive deafness.

At the present time 70 children are receiving home guidance from the three County teachers of the deaf and four specially trained health visitors on the staff, and nine children attend the clinic for guidance.

One County teacher of the deaf is now specialising in pre-school guidance, and this specialisation is thought to be helpful so that we can continue to evolve new methods of helping deaf and partially hearing children in the pre-school period. In addition to encouraging the deaf or partially hearing child to watch and listen for speech throughout the day in routine situations of bathing, dressing, feeding and household routine, more emphasis is being placed on structured play situations and more channeling of the child's programme. The composite figures of the cases of deafness referred to Fulwood Audiology Clinic in the past fourteen years show that the aetiology of deafness was known in 65.62 per cent. of cases, i.e., cases falling into the 'at risk' groups 2, 3, 4, 5, 6 and 8, leaving 34.38 per cent. of cases of deafness of unknown aetiology.

There has been a change in the picture of the aetiology of deafness over the years. We now rarely see a child who is suffering from deafness as a result of rhesus incompatibility and most cases which arise from this condition have only a slight perceptive deafness. It is hoped that, with the introduction of rubella vaccination, there will be a marked reduction in the number of cases of deafness arising as a result of maternal rubella.

It has continued to be very helpful to have Mr. B. Fisher working as a member of the team in the Audiology Clinic in his capacity as educational psychologist. His psychological assessments are particularly valuable in the case of multi-handicapped children of whom we have a large number referred."

The work of the clinic during 1969 and the preceding four years is summarised below:—

Sessions and Attendances at Diagnostic Clinic

Year	No. of sessions	No. of attendances	
		Total	Average
1965	192	706	3.7
1966	220	803	3.7
1967	217	813	3.7
1968	223	841	3.7
1969	212	782	3.7

Note: The maximum number of children who can be dealt with at one session is five.

- (a) No. of individual children attending:—
- | | | | | | | | |
|----------------|-----|-----|-----|-----|-----|-----|-----|
| (i) Old cases | ... | ... | ... | ... | ... | ... | 218 |
| (ii) New cases | ... | ... | ... | ... | ... | ... | 337 |
- (b) New Cases:—
- | | | | | | | |
|---|-----|-----|-----|-----|-----|-----|
| (i) Deafness confirmed | ... | ... | ... | ... | ... | 163 |
| (ii) Under investigation at end of year | ... | ... | ... | ... | ... | 18 |
| (iii) Found to have normal hearing after adequate investigation | ... | ... | ... | ... | ... | 156 |
| Total | ... | ... | ... | ... | ... | 337 |
- (c) No. in (a) (ii) who were mentally retarded 16
- (d) No. in (b) (i) who were mentally retarded 6
- (e) No. in (b) (iii) who were mentally retarded 10

Individual Children Attending—New Cases

	Age (in years) at date of first attendance																					
	0—		1—		2—		3—		4—		5—		6—		7—		8—		9—		Total	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Total attending	25	23	43	29	39	27	40	33	25	20	8	5	5	6	2	1	—	1	4	1	191	146
Deafness confirmed	14	13	16	11	9	9	20	20	18	14	5	2	3	3	1	1	—	—	3	1	89	74

Results of Tests on the 163 Deaf Children

(a) No. who had some hearing over the whole range of speech frequencies	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	156
(b) No. who possessed merely an island of hearing	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	7
(c) No. who did not respond to any sound stimuli	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	—
Total	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	163

Of those in group (a) above:—

No. whose hearing loss was more marked in the higher frequencies	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	23
No. whose hearing loss was more marked in the lower frequencies	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	50

Vulnerable Groups.—Dr. Jean Robson reports that of the 163 children diagnosed as deaf amongst the new cases attending during the year, 150 fell into vulnerable groups. Some fell into more than one group but each child has been assigned to one group only according to the aetiological factor which is considered to be the most important. The distribution in the various groups is as follows:—

Group																						
1	...	Children with cerebral palsy	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	—
2	...	Children with a family history of congenital deafness	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	13
3	...	Children who were premature	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2
4	...	Children with a history of abnormality in the antenatal period	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	6
5	...	Children with a history of perinatal abnormality	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	7
6	...	Children who have had a severe illness or have been treated with streptomycin for any illness	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	3
7	...	Children who are not speaking well by the age of two years and children aged 2-5 years with speech defects	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	21
8	...	Children with a history of otitis media and/or chronic upper respiratory tract infection	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	86
9	...	Children who are not included in any of the above categories but who have some congenital abnormalities	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	6
10	...	Mother suspects the child is deaf	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	6
		Total...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	150

SCREENING TESTS OF HEARING.—Health visitors need special training to carry out screening tests of hearing and an effort is made to train all the health visitors to carry out simple distracting tests suitable for children aged 6-16 months. Practically all the health visitors on the staff at the end of 1969 have now been trained.

An endeavour is still being made to test all babies at the age of approximately 9-12 months by these simple tests, the babies in the "at risk" or vulnerable groups being recorded separately. From September, 1963, an additional group was added to the special groups, i.e., "Mother suspects that the child is deaf," in order to bring the groups into line with those defined by Dr. Mary Sheridan in the Monthly Bulletin of the Ministry of Health, December, 1962.

Screening Tests, 1969

	No. of children tested (1)	No. failing screening tests (2)	Failure rate per 1,000 children tested (3)	No. of children in col. (2)—			
				Diagnosed as deaf (4)	Diagnosed as not deaf (5)	Still under consideration (6)	Moved to other areas (7)
In vulnerable groups ...	5,283	58	11.0	24	8	23	3
Not in vulnerable groups ...	13,640	51	3.7	8	25	17	1

Screening Test Failure Rates, 1963-69

Year	Children in vulnerable groups			Children not in vulnerable groups		
	No. of children—		Failure rate per 1,000 children tested	No. of children—		Failure rate per 1,000 children tested
	Tested	Failing test		Tested	Failing test	
1963	5,243	74	14.1	3,162	12	3.8
1964	6,387	106	16.6	7,868	30	3.8
1965	6,329	82	13.0	9,489	37	3.9
1966	6,613	78	11.8	11,440	38	3.3
1967	6,254	69	11.0	12,806	37	2.9
1968	5,466	66	12.0	13,254	28	2.1
1969	5,283	58	11.0	13,640	51	3.7

Screening Test Failures by Vulnerable Group, 1969

Group	No. of children				
	Failing screening tests	Diagnosed as deaf	Diagnosed as not deaf	Still under consideration	Moved to other areas
1. Children with cerebral palsy...	2	—	1	1	—
2. Children with a family history of congenital deafness ...	9	3	1	5	—
3. Children who were premature ...	11	—	1	9	1
4. Children with a history of abnormality in the antenatal period ...	3	—	1	2	—
5. Children with a history of perinatal abnormality ...	3	—	1	1	1
6. Children who have had a severe illness or have been treated with streptomycin for any illness ...	2	2	—	—	—
7. Children who are not speaking well by the age of two years and children aged 2-5 years with speech defects ...	1	—	—	1	—
8. Children with a history of otitis media and/or chronic upper respiratory tract infection ...	17	16	—	—	1
9. Children who are not included in any of the above categories but who have some congenital abnormality ...	4	1	2	1	—
10. Mother suspects that child is deaf ...	6	2	1	3	—
TOTAL ...	58	24	8	23	3

Screening Tests Failures by Age Group, 1969

(i) Children in vulnerable groups

Age (in years) at date of test	No. of children tested	No. failing screening tests	No. diagnosed as deaf	No. diagnosed as not deaf	No. still under consideration	No. moved to other areas
0-	4,262	33	16	4	10	3
1-	918	18	5	3	10	—
2-	64	1	1	—	—	—
3-	21	3	—	1	2	—
4 and over	18	3	2	—	1	—
TOTAL	5,283	58	24	8	23	3

(ii) Children not in vulnerable groups

Age (in years) at date of test	No. of children tested	No. failing screening tests	No. diagnosed as deaf	No. diagnosed as not deaf	No. still under consideration	No. moved to other areas
0-	10,876	23	5	12	5	1
1-	2,565	26	3	12	11	—
2-	155	1	—	1	—	—
3-	31	—	—	—	—	—
4 and over	13	1	—	—	1	—
TOTAL	13,640	51	8	25	17	1

Consolidated figures for 15 years are now available and these are shown in the following table:—

	No. of children tested	No. failing screening tests	Failure rate per 1,000 children tested	No. of children in col. (2) diagnosed as deaf	Rate of deafness per 1,000 children tested	No. of children still under consideration	No. of children who have moved to other areas (7)	No. of children who died before being diagnosed (8)
	(1)	(2)	(3)	(4)	(5)	(6)		
General population tested, 1955, 1956 and 1st January—31st March, 1957	5,531	31	5.6	17	3.1	—	—	—
Vulnerable groups tested, 1st April, 1957— 31st December, 1969	48,388	630	13.0	248	5.1	48	13	3
Others tested, 1st April, 1957—31st December, 1969	77,424	251	3.8	36*	0.5	21	4	—

* Seven of these children were suspected of deafness by parents or day nursery matron.

Vulnerable Groups.—The 17 deaf children diagnosed from screening tests of the general population from 1st January, 1955, to the 31st March, 1957, and the 248 deaf children picked out from the vulnerable groups between the 1st April, 1957, and the 31st December, 1969, respectively fell into vulnerable groups as follows:—

Group								
1	...	Children with cerebral palsy...	...	...	...	1	...	—
2	...	Children with a family history of congenital deafness	...	...	...	1	...	24
3	...	Children who were premature	...	...	...	4	...	33
4	...	Children with a history of abnormality in the antenatal period	...	...	...	1	...	13
5	...	Children with a history of perinatal abnormality	...	...	...	1	...	11
6	...	Children who have had a severe illness or have been treated with streptomycin for any illness	...	...	...	—	...	11
7	...	Children who are not speaking well by the age of two years and children aged 2-5 years with speech defects	...	...	...	6	...	35
8	...	Children with a history of otitis media and/or chronic upper respiratory tract infection	...	...	...	2	...	82
9	...	Children who are not included in any of the above categories but who have some congenital abnormality	...	...	...	1	...	14
10	...	Mother suspects that child is deaf	...	...	...	—	...	25
		Total...				17	...	248

Dental Care of Mothers and Young Children.—The following table compares the dental treatment under section 22 of the National Health Service Act, recorded in 1969 with that carried out in the previous year:—

	1968		1969	
	Pre-school children	Expectant and nursing mothers	Pre-school children	Expectant and nursing mothers
No. of first inspections	4,599	1,585	5,434	1,374
First treatment visits... ..	3,801	1,477	3,830	1,309
Subsequent treatment visits	3,573	3,138	3,448	2,721
Total treatment attendances	7,374	4,615	7,278	4,030
Fillings	4,301	2,436	4,341	2,143
Extractions	5,229	2,645	5,102	2,186
General anaesthetics	2,527	441	2,556	366
Other operations	1,532	876	1,320	718
Dentures—				
Patients supplied for first time with—				
Full upper and/or full lower or full with partial	—	125	—	115
Partial only	—	147	—	123
Total dentures (including replacements) ...	—	431	—	416

From the above table it will be seen that the pattern of previous years continued in 1969. Continuing reductions both in inspection and treatment visits by expectant and nursing mothers have been partially compensated by a rise of 18 per cent. in the first inspections for the pre-school child. Of all treatment visits at school dental clinics 6·8 per cent. were made by patients in this category.

Whilst it would seem that, through changes in social patterns and dental health education generally, many of the expectant and nursing mothers who some years ago received treatment through the school dental service now receive routine treatment and advice through their family dental practitioner on a continuous re-call system, it is interesting to note that an increasing number of these mothers are using the school dental service for their very young children.

This indicates the value and success of the health visitor and all workers associated with the child health centres in educating the mother in the necessity for early advice and care of the deciduous dentition of the very young. Never was "prevention better than cure" of more value than in this particular age group of the community and it is to be regretted that over 2,500 pre-school children had to receive a general anaesthetic for the extraction, on average, of two teeth as their introduction to the dental team whose main purpose is to educate the community to take care of their teeth and not to have them extracted. It is however significant that for the second year in succession many children under five years of age did attend the clinics for inspection only—no treatment being required—and it is to this end that all concerned in the dental care of the pre-school child are constantly working.

Special Clinics, etc.—Further facilities in relation to the welfare of pre-school children are provided at the various school clinics. The following statement shows the types of conditions for which pre-school children were examined and/or treated at these clinics during each of the past five years and the number of attendances made for the purpose:—

Type of session	No. of attendances				
	1965	1966	1967	1968	1969
Minor ailment	2,332	2,630	2,306	2,694	2,917
Ophthalmic	3,631	3,929	3,995	4,089	3,731
Ear, nose and throat	81	74	196	110	120
Orthopaedic	6,269	5,589	5,733	6,650	6,112
Ultra-violet light	2,213	1,937	1,475	1,156	638
Speech therapy	1,116	1,024	1,193	2,026	2,271
Orthoptic	1,380	1,191	1,097	1,264	1,139
Chiropody	204	343	252	271	253
TOTAL	17,226	16,717	16,247	18,260	17,181

Family Planning Clinics.—In February, 1966, the then Minister of Health issued circular 5/66 urging local health authorities to take all possible steps to ensure the present and future development of family planning services which he regarded as an essential aspect of family welfare.

For many years the County Council have made case payments to the Family Planning Association for women referred to their clinics by the County Council's medical staff where pregnancy was likely to be detrimental to health. On receipt of the Minister's circular the County Health Committee agreed

also to meet the cost of drugs and appliances provided by the Family Planning Association for such cases. They also agreed that County clinics could be used by the Family Planning Association free of charge; previously a nominal rent per session had been charged.

In general the County Council at that time considered that the needs of the women concerned were being met, so far as clinic services are concerned, by the Family Planning Association but in Stretford and adjacent areas where no such clinic was provided they agreed in January, 1967, to set up their own clinic for cases needing advice on health grounds. A clinic was opened in Stretford in November, 1967.

The County Health Committee agreed in March, 1967, that grants could be made to the Family Planning Association for cases referred to their clinics on medical grounds by general medical practitioners, in addition to cases referred by the County Council's medical staff.

A further circular, 15/67, was issued by the Minister drawing attention to the National Health Service (Family Planning) Act, 1967, which extended the powers of local health authorities in order to enable them to provide (or arrange for other bodies to provide) advice on contraception and supplies for any persons who need them on social grounds and not (as hitherto) only in medical cases.

In January, 1968, the County Health Committee decided that in view of the economic situation no expansion of the service beyond the limits already agreed by them should be permitted. The policy was reviewed in July, 1969, when it was decided that there should be no change.

In December, 1969, however, the Committee agreed that with effect from 1st January, 1970, in conformity with the provisions of the Family Law Reform Act, 1969, relating to the age of majority, unmarried women aged 18 years and over referred on social grounds be allowed to attend County Council premises used by the Family Planning Association. The policy is now to limit attendance at the Association clinics held on County premises to, (a) married women, (b) unmarried women of any age referred on medical grounds and (c) unmarried women aged 18 years and over referred on social grounds.

The number of cases referred on medical grounds to family planning clinics during each of the last five years is given in the following analysis by health divisions and delegate districts:—

Health Division No.	No. of cases referred during—				
	1965	1966	1967	1968	1969
1	—	—	—	—	1
2	35	37	31	57	86
3	1	5	1	3	14
4	—	1	7	3	14
5	—	—	—	—	—
6	2	1	8	13	18
7	—	—	—	—	—
8	7	3	2	5	9
9	—	—	—	2	8
10	—	—	9	6	18
11	8	33	61	37	46
12	—	—	—	—	12
13	45	16	12	18	34
14	—	—	3	—	—
15	6	1	12	7	25
16	5	1	31	15	22
17	7	3	1	8	7
Delegate District—					
Crosby M.B. ...	—	—	—	—	—
Huyton-w-Roby U.D. ...	—	—	—	—	1
Middleton M.B. ...	1	1	2	4	16
Stretford M.B. ...	—	2	11	87	107
TOTAL— Administrative County...	117	104	191	265	438

Of the 438 cases in 1969, 104 were referred to the County Council's clinic at Stretford; 26 to a clinic operated by Rochdale County Borough Council and the remaining 308 to Family Planning Association clinics as follows:—

Clinic	No. of cases
*Ashton-under-Lyne and District F.P.A. Clinic, Crickets Lane, Ashton-under-Lyne	7
Blackpool and Fylde F.P.A. Clinic, Municipal Health Centre, Whitegate Drive, Blackpool	4
Bolton F.P.A. Clinic, Public Health Department, Civic Centre, Bolton	19
Bury and District F.P.A. Clinic, The Wylde, Bury	5
*Colne and District F.P.A. Clinic, Bank House, Albert Road, Colne	7
*Eccles and District F.P.A. Clinic, Corporation Road, Eccles	39
Fleetwood F.P.A. Clinic, Outpatients Department, Fleetwood Hospital, Fleetwood	10
*Fulwood F.P.A. Clinic, Lytham Road, Fulwood	2
*Heywood F.P.A. Clinic, Argyle Parade, Darnhill, Heywood	8
*Heywood F.P.A. Clinic, Taylor Street, Heywood	
*Hindley F.P.A. Clinic, 17, Liverpool Road, Hindley	9
*Huyton F.P.A. Clinic, Derby Road, Huyton-with-Roby	1
Kirkby F.P.A. Clinic, Cherryfield Drive, Kirkby	3
*Lancaster and District F.P.A. Clinic, Ashton Road, Lancaster	27
*Leigh and District F.P.A. Clinic, College Street, Leigh	21
*Little Hulton F.P.A. Clinic, Haysbrook Avenue, Little Hulton	6
*Lytham F.P.A. Clinic, Bath Street, Lytham	4
Manchester, Salford and District F.P.A. Clinic, 23, Anson Road, Manchester	6
*Middleton and District F.P.A. Clinic, Borrowdale Road, Langley Estate, Middleton	15
*Middleton and District F.P.A. Clinic, Durnford Street, Middleton	1
Morecambe F.P.A. Clinic, Queen Victoria Hospital, Morecambe	55
*Nelson and District F.P.A. Clinic, Leeds Road, Nelson	11
*Newton-le-Willows F.P.A. Clinic, The Gables, Crow Lane West, Newton-le-Willows	12
Preston F.P.A. Clinic, Avenham Health Centre, Denbigh Way, (off Charlotte Street), Preston	12
*Rawtenstall F.P.A. Clinic, Bacup Road, Rawtenstall	7
Salford F.P.A. Clinic, Rosamund Street, Salford, 3	1
*Ulverston F.P.A. Clinic, Victoria Road, Ulverston	1
Warrington and District F.P.A. Clinic, Capesthorpe Road, Orford, Warrington	6
*Whitefield F.P.A. Clinic, The Uplands, Bury New Road, Whitefield	4
*Widnes F.P.A. Clinic, Kingsway, Widnes	5

* Denotes clinics held in County Council premises

Care of Premature Infants.—The importance of the care of premature infants becomes greater relatively as the infantile mortality declines. Of the total of 791 deaths of infants under one year occurring in 1969 and assigned to the Administrative County, 154 were certified as due to prematurity unqualified by any other cause. The neo-natal mortality rate of premature babies was 137 per thousand live premature births in 1969, compared with a total neo-natal rate of 13.0 per 1,000 notified live births.

If premature babies are born at home they require special care and County Council midwives are encouraged to keep up-to-date in their knowledge of the management of premature babies by means of refresher courses and visits to premature baby units. Special cots, feeders, hot water bottles, etc., are held in each division for loan whenever the need arises.

If the premature baby requires transfer to hospital it should, if possible, be transported in a special heated carrier with facilities for the administration of oxygen. These carriers are provided by the hospital groups and all County Council ambulances have been fitted with an electric point in order that the heating of the carrier may be continued during the ambulance journey.

Arrangements exist whereby the special attention of health visitors is drawn to all premature births notified and such infants are visited as early as possible. This is particularly important in the case of infants born in hospital, while for babies born at home close liaison between the midwife and health visitor is imperative.

The following table analyses by weight group and place of occurrence all notified premature births assigned to the Administrative County in 1969. The totals by weight for the four previous years are also shown.

	Weight at birth											
	2 lb. 3 oz. or less		Over 2 lb. 3 oz. to 3 lb. 4 oz.		Over 3 lb. 4 oz. to 4 lb. 6 oz.		Over 4 lb. 6 oz. to 4 lb. 15 oz.		Over 4 lb. 15 oz. to 5 lb. 8 oz.		Total—5 lb. 8 oz. or less	
	Live births	Still-births	Live births	Still-births	Live births	Still-births	Live births	Still-births	Live births	Still-births	Live births	Still-births
Number born—												
(i) At home or in private nursing homes (including maternity homes not in the National Health Service and Mother and Baby Homes)	3	1	5	7	20	2	28	1	159	5	215	16
(ii) In hospitals, including maternity homes in the National Health Service	125	73	177	116	487	97	593	46	1,251	43	2,633	375
TOTAL—1969	128	74	182	123	507	99	621	47	1,410	48	2,848	391
1968	137	85	212	133	505	111	592	59	1,356	63	2,802	451
1967	107	56	211	114	531	125	552	54	1,328	71	2,729	420
1966	138	93	173	131	539	122	602	54	1,462	58	2,914	458
1965	115	75	182	128	440	131	539	44	1,395	49	2,671	427

Of the 215 premature infants born alive at home or in private nursing homes 42 were transferred to hospital, 17 of these being 4 lb. 6 oz. or less in weight.

The incidence of prematurity amongst live births, stillbirths and total births for 1969 and for the preceding four years, together with the average for the five years 1960–64, is shown in the statement below:—

Year	Proportion (per cent.) of prematurity amongst—		
	Live births	Stillbirths	Total births
1960–64	6.8	58.1	7.8
1965	6.3	59.3	7.2
1966	6.9	63.1	7.9
1967	6.5	63.1	7.4
1968	6.7	63.6	7.6
1969	6.9	62.4	7.7

Details of premature births taking place at home in relation to the total assigned to the Administrative County are given in the following statement for each of the last five years and as annual averages for the preceding five years.

Year	Total premature births			Premature births at home			Percentage of premature births occurring at home		
	Live births	Still-births	Total	Live births	Still-births	Total	Live births	Still-births	Total
1960–64	13,742	2,278	16,020	2,470	193	2,663	18.0	8.5	16.6
1965	2,671	427	3,098	344	33	377	12.9	7.7	12.2
1966	2,914	458	3,372	332	26	358	11.4	5.7	10.6
1967	2,729	420	3,149	264	21	285	9.7	5	9.1
1968	2,802	451	3,253	247	21	268	8.8	4.7	8.2
1969	2,848	391	3,239	203	16	219	7.1	4.1	6.8

For the same period the relationship in the Administrative County of total notified live births, premature live births and survival of the latter beyond 24 hours and 28 days is summarised in the following table:—

Year (1)	Total notified live births (2)	Premature live births					
		Total		Survived 24 hours		Survived 28 days	
		No. (3)	Per cent. of col. (2) (4)	No. (5)	Per cent. of col. (3) (6)	No. (7)	Per cent. of col. (3) (8)
1960-64	201,123	13,742	6.8	12,501	91.0	11,772	85.7
1965	42,136	2,671	6.3	2,461	92.1	2,330	87.2
1966	42,166	2,914	6.9	2,666	91.5	2,526	86.7
1967	41,874	2,729	6.5	2,490	91.2	2,340	85.7
1968	42,106	2,802	6.7	2,551	91.0	2,423	86.5
1969	41,537	2,848	6.9	2,596	91.2	2,459	86.3

A summary of the deaths within certain periods of the first month of life of the premature infants notified in 1969 whose mothers were normally resident in the Administrative County area is given by birth weight below:—

Weight at birth	Premature infants born in 1969—																	
	*At home or in private nursing homes (including maternity homes not in the National Health Service and Mother and Baby Homes)						At home or in private nursing homes and transferred to hospital						In hospitals, including maternity homes in the National Health Service					
	Died within 24 hours of birth		Died in 1 and under 7 days		Died in 7 and under 28 days		Died within 24 hours of birth		Died in 1 and under 7 days		Died in 7 and under 28 days		Died within 24 hours of birth		Died in 1 and under 7 days		Died in 7 and under 28 days	
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
2 lb. 3 oz. or less	3	100	—	—	—	—	2	100	—	—	—	—	91	72.8	18	14.4	3	2.4
Over 2 lb. 3 oz. to 3 lb. 4 oz.	1	20	1	20	—	—	1	20	1	20	—	—	61	34.5	38	21.5	4	2.3
Over 3 lb. 4 oz. to 4 lb. 6 oz.	2	10	1	5	1	5	1	10	1	10	—	—	50	10.3	31	6.4	5	1.0
Over 4 lb. 6 oz. to 4 lb. 15 oz.	—	—	—	—	—	—	—	—	—	—	—	—	28	4.7	13	2.2	8	1.3
Over 4 lb. 15 oz. to 5 lb. 8 oz.	—	—	3	1.9	1	0.6	—	—	2	11.1	—	—	16	1.3	5	0.4	5	0.4
TOTAL— 5½ lb. or less	6	2.8	5	2.3	2	0.9	4	9.5	4	9.5	—	—	246	9.3	105	4.0	25	0.9

* Including any who were subsequently transferred to hospital.

The above summary of neo-natal mortality amongst premature infants is given for each health division and delegate district in Table 9, page 147.

Care of Unmarried Mothers and their Children.—Arrangements for the care of unmarried mothers and illegitimate children are carried out by the staff of the Health Committee in co-operation with the various voluntary moral welfare associations and the Children's Department. Priority in admission to the Council's day nurseries is afforded to illegitimate children in order to enable their mothers to go out to work.

The County Council do not administer any mother and baby homes. The antenatal, maternity and post-natal care of unmarried mothers in hostels is carried out through various moral welfare societies. In all but one instance payment is made entirely on a case basis, the full cost of maintenance being met by the County Council, less any contributions received from the mothers or on their behalf. The exception is the St. Monica Maternity Home, Kendal, to which an annual grant is made under the terms of an agreement between the managers of the home and five local health authorities.

Particulars of the County cases for which accommodation has been provided during the last five years are given in the following statement:—

Year	Expectant mothers	Post-natal cases	Total cases		*Per cent.
			No.		
1965 ...	338	25	363	...	15
1966 ...	327	23	350	...	14
1967 ...	313	17	330	...	12
1968 ...	292	17	309	...	11
1969 ...	264	17	281	...	10

* Ratio of total cases to total illegitimate births assigned to Administrative County area.

The numbers of unmarried expectant mothers and post-natal cases admitted to the various mother and baby homes from each health division and delegate district during 1969 are shown in Table 10, page 148.

Ophthalmia Neonatorum.—Eleven cases of ophthalmia neonatorum were notified during 1969 in infants born to women resident in the Administrative County area, four occurring in hospital and seven in domiciliary births. In eight cases vision was subsequently ascertained to have been unimpaired, one was still under treatment at the end of the year and two had removed out of the Administrative County area.

Welfare Foods.—Particulars of centres issuing welfare foods at the end of 1969 are given below, together with comparative figures for the previous year:—

	1968	1969
Child health centres and school clinics	274	274
Premises tenanted by the County Council for the sole purpose of distributing welfare foods... ..	4	7
Others, <i>e.g.</i> , shops, private houses and W.R.V.S. centres ...	26	23
TOTAL	304	304

It is necessary to employ some part-time personnel and, in addition, valuable assistance is received from many sources, *viz.*, shopkeepers, private householders and in several instances members of the W.R.V.S.—a notable contribution which is greatly appreciated.

Details of quantities issued during the year, with comparative totals for the previous year, are given in the following table:—

Issued to	National dried milk (20 oz. tins)	Cod liver oil (6 oz. bottles)	Vitamin tablets (packets of 45)	Orange juice (6 oz. bottles)
Individuals	74,091	29,102	34,656	569,558
N.H.S. hospitals	499	—	—	1,360
Day nurseries (including factory nurseries)	2	1,276	—	7,661
TOTAL—1969	74,592	30,378	34,656	578,579
1968	124,222	31,583	31,203	515,479

In considering the figures shown in this table it should be borne in mind that only those hospitals requiring small quantities of welfare foods obtain supplies from County Council centres, the majority ordering direct from Government depots. Local Education Authorities also obtain supplies of cod liver oil for children under five years of age in daily attendance at maintained schools and nursery schools direct from Government depots and not from local health authority distribution centres.

Day Nurseries.—The total day nursery accommodation provided by the County Council at the end of 1969 is compared below with that for each of the previous five years:—

Year	Day nurseries	Child places
1964	53	2,506
1965	53	2,526
1966	53	2,526
1967	51	2,456
1968	51	2,456
1969	50	2,422

Details of attendances, etc., at County Council day nurseries during 1969 are given in the following statement together with the corresponding figures for each of the previous four years. Particulars for 1969 in respect of each health division and delegate district are shown in Table 11 on page 149.

	1965	1966	1967	1968	1969
No. of children on registers at end of year ...	2,732	2,885	2,814	2,776	2,711
No. of children on waiting lists at end of year ...	2,046	2,363	2,285	2,191	2,225
Total no. of attendances ...	505,465	519,391	521,524	515,237	506,816
No. of children on register at end of year whose parents or guardians were categorised as:—					
Social cases ...	1,220	1,352	1,501	1,447	1,468
Others ...	1,512	1,533	1,313	1,329	1,243
* Full-time equivalent of staff employed at end of year ...	675	689	675	671	691

* Includes domestics; two students in training counted as one unit of staff.

TRAINING.—Of the 50 nurseries administered by the County Council at the end of 1969, 39 were approved for the training of nursery students. There were three nursery training schools in the Administrative County area—at Newton-le-Willows, Rossendale and Lancaster. In addition, there was an arrangement with the Burnley Education Authority to take nursery students into a County Council day nursery to obtain practical experience.

In September, 1962, the Lancashire Education Committee introduced a revised “full-time” National Nursery Examination Board training course under which students, although no longer employees of the County Council, will continue to attend day nurseries for training in the care of young children. The N.N.E.B. training scheme at Rochdale has not been altered.

Student health visitors during their training spend some three to five days in a nursery to gain practical experience in dealing with healthy children and to learn about the administration of day nurseries.

During the year three refresher courses were held in the Health Department, each of a week's duration, for day nursery matrons, deputy matrons, and nursery assistants. Visits were made to various day nurseries and nursery schools.

One matron attended a course lasting 11 weeks at Stockport College of Technology for experienced matrons and deputy matrons of day and residential nurseries. She reported that she found the course valuable. It is intended to support any further courses of this kind.

ADMISSION TO NURSERIES—PRIORITIES.—Priority is given to one parent families, to families where the mother is unable to look after her children because of illness or confinement or where ill-health of the father necessitates the mother going out to work. Also included in the priority classes are those categories referred to in para. 5 of Ministry of Health circular 37/68, dated 18th October, 1968, as subsequently amended. These are children—

- (a) whose mothers are unable to look after them adequately because they are incapable of giving young children the care they need,
- (b) for whom day care might prevent the breakdown of the mother or the break-up of the family,
- (c) whose home conditions (e.g., because of gross overcrowding) constitute a hazard to their health and welfare,
- (d) whose health and welfare are seriously affected by a lack of opportunity for playing with others,
- (e) who are mentally handicapped,
- (f) who are physically handicapped.

ACCIDENTS IN DAY NURSERIES.—The following table gives information about accidents to children when attending County Council day nurseries during the five years 1965–1969 inclusive.

Year	No. of accidents reported	Accident rate per 10,000 attendances by age group (in years)		
		0–	2–4 inclusive	Total under 5 years
1965	126	2.5	2.5	2.5
1966	110	2.2	2.1	2.1
1967	82	1.5	1.6	1.6
1968	95	1.3	1.9	1.8
1969	98	1.5	2.0	1.9

The injuries were mostly of a minor nature although in a small number of cases fractures were sustained. Of the 98 cases reported, 57 were referred to hospital and 11 to the family doctor for treatment or advice.

Nurseries and Child Minders Regulation Act, 1948.—In order to remedy various deficiencies which had become evident in the operation of this Act new legislation was introduced by the implementation of section 60 of the Health Services and Public Health Act, 1968. This section came into force on the 1st November, 1968, but a period of three months grace was allowed before penalties for non-compliance with the amended statutory provisions became operative.

The principal change concerned child minders. Whereas previously they were only required to register if they were receiving more than two children under five from more than one family for reward, the new legislation required them to register if they were receiving one child for reward. The definition of "a substantial part of a day" which was a governing factor in determining whether registration was necessary and which had been the subject of a variety of interpretations by local health authorities, was clarified by requiring registration in the case of both child minders and nurseries where children were received for a period or periods aggregating two hours or more.

Among various other amendments local health authorities were empowered to impose additional conditions on child minders and penalties for non-compliance with the provisions of the 1948 Act as amended were substantially increased.

A Ministry of Health Circular 36/68 was issued on the 18th October, 1968 explaining the provisions of the new legislation and was accompanied by a further circular 37/68 issued on the same date on the subject of day care facilities for children under five.

Particulars of registrations at the end of the year are given in the following table for each health division, together with the totals for the Administrative County for 1969 and the previous year.

Health Division No.	PREMISES				PERSONS			
	No. of premises providing		No. of children authorised		No. of persons providing		No. of children authorised	
	All day care	Sessional care	All day care	Sessional care	All day care	Sessional care	All day care	Sessional care
1	2	11	36	195	3	3	8	9
2	1	10	25	213	23	5	53	17
3	2	9	29	224	11	8	52	104
4	—	8	—	242	26	11	71	91
5	—	11	—	264	79	1	105	1
6	—	3	—	76	18	11	60	20
7	2	13	40	293	17	20	45	283
8	1	4	30	88	24	1	48	24
9	—	30	—	424	12	1	29	10
10	1	10	32	372	—	22	—	40
11	1	8	22	210	45	5	136	21
12	—	5	—	148	10	2	28	2
13	2	4	85	85	—	14	—	24
14	4	10	174	280	47	12	98	37
15	—	9	—	228	—	13	—	24
16	—	5	—	139	15	1	30	1
17	3	3	110	75	18	—	30	—
Delegate District—Crosby M.B.	—	6	—	140	5	6	17	62
Huyton-w-Roby U.D.	—	2	—	48	2	—	20	—
Middleton M.B.	—	3	—	72	10	—	16	—
Stretford M.B.	1	7	38	177	9	—	36	—
Administrative County—1969	20	171	621	3,993	374	136	882	770
1968	21	53	748	1,345	46	56	340	473

It can be seen that by comparing the figures for 1969 with those for the previous year the provisions of the Health Services and Public Health Act, 1968, have resulted in many more premises and persons being registered. A publicity campaign in late 1968 and early 1969 produced a considerable number of applications for registration. Many of these applications were subsequently withdrawn however, when the applicants were informed of the required standards.

The recent legislation has meant that large numbers of minders of fewer than three children and of nursery groups which take children for sessional care are now required to be registered. This has resulted in a considerable burden of extra work for both the supervisory and the administrative staff and at the end of the year there was still a number of applications for registration outstanding.

Notified Births.—Under the provisions of section 203 of the Public Health Act, 1936, each birth is required to be notified to the medical officer of health of the welfare authority for the area in which the birth takes place. The County Council are the welfare authority for all districts in the Administrative County, and arrangements exist whereby each birth notification is sent to the medical officer of the health division or delegate district in which the birth occurs. In this way the prompt visiting of new-born infants and their mothers by the health visitors is greatly facilitated.

The numbers of notified births occurring in each area during the year 1969 are summarised in the table below, domiciliary births and those occurring in hospitals, maternity homes, etc., being shown separately. The figures, relating as they do to births which actually occurred in the County regardless of whether or not the mothers of the children born were domiciled in the County area, thus provide an assessment of the amount of midwifery undertaken.

Health Div. No.	In hospitals, maternity homes, etc.								In the home								TOTAL							
	Live births						Still-births		Live births						Still-births		Live births						Still-births	
	Premature		Mature		Total				Premature		Mature		Total				Premature		Mature		Total			
	M.	F.	M.	F.	M.	F.			M.	F.	M.	F.	M.	F.			M.	F.	M.	F.	M.	F.		
1	2	3	140	109	142	112	3	—	1	2	32	25	33	27	—	—	3	5	172	134	175	139	3	—
2	60	60	769	769	829	829	14	10	—	—	73	67	73	67	1	1	60	60	842	836	902	896	15	11
3	13	13	531	416	544	429	—	2	3	4	149	135	152	139	1	3	16	17	680	551	696	568	1	5
4	88	106	1279	1219	1367	1325	28	22	7	10	432	414	439	424	1	2	95	116	1711	1633	1806	1749	29	24
5	34	35	880	873	914	908	3	5	2	5	99	103	101	108	1	—	36	40	979	976	1015	1016	4	5
6	4	6	106	105	110	111	1	1	6	10	117	103	123	113	—	1	10	16	223	208	233	224	1	2
7	35	38	599	517	634	555	10	6	1	2	129	132	130	134	—	—	36	40	728	649	764	689	10	6
8	145	163	1661	1547	1806	1710	41	36	6	9	248	243	254	252	1	2	151	172	1909	1790	2060	1962	42	38
9	112	98	1125	1086	1237	1184	24	31	9	18	344	336	353	354	1	2	121	116	1469	1422	1590	1538	25	33
10	—	—	—	—	—	—	—	—	8	11	294	258	302	269	1	3	8	11	294	258	302	269	1	3
11	142	165	1823	1673	1965	1838	43	26	5	4	251	219	256	223	—	1	147	169	2074	1892	2221	2061	43	27
12	18	23	433	434	451	457	2	5	1	6	249	258	250	264	2	—	19	29	682	692	701	721	4	5
13	88	96	868	823	956	919	19	14	6	8	188	195	194	203	—	—	94	104	1056	1018	1150	1122	19	14
14	—	—	—	—	—	—	—	—	5	6	204	192	209	198	1	—	5	6	204	192	209	198	1	—
15	5	4	222	217	227	221	—	1	6	4	107	96	113	100	1	1	11	8	329	313	340	321	1	2
16	48	87	820	839	868	926	22	17	3	1	61	64	64	65	—	—	51	88	881	903	932	991	22	17
17	111	114	923	808	1034	922	26	26	14	13	292	294	306	307	1	1	125	127	1215	1102	1340	1229	27	27
Delegate District—																								
Crosby M.B.	4	10	143	150	147	160	1	—	2	34	17	34	19	—	—	4	12	177	167	181	179	1	—	
Huyton-w-Roby U.D.	—	—	—	—	—	—	—	—	2	2	73	66	75	68	1	1	2	2	73	66	75	68	1	1
Middleton M.B. . . .	—	—	—	—	—	—	—	—	3	85	97	85	100	4	2	—	3	85	97	85	100	4	2	
Stretford M.B. . . .	13	12	226	226	239	238	—	1	1	—	26	23	27	23	—	1	14	12	252	249	266	261	—	2
Administrative County	922	1033	12548	11811	13470	12844	237	203	86	120	3487	3337	3573	3457	17	21	1008	1153	16035	15148	17043	16301	254	224

Note.—A birth is regarded as "premature" if the birth weight is 5½ lb. or less.

In contrast to the above table, the statement inserted below provides for the year 1969 details of the births (a) occurring in, and (b) finally belonging to the Administrative County area after reassignment of births transferable to or from other local health authorities' areas. It will be appreciated that the latter relate to notified births and therefore, although corrected for transfers, differ in some small degree from the numbers of births as supplied by the Registrar General and used for the calculation of vital statistics in other sections of the report.

	In hospitals, maternity homes, etc.								In the home								TOTAL							
	Live births						Still- births		Live births						Still- b'ths		Live births						Still births	
	Preme- ture		Mature		Total				Preme- ture		Mature		Total				Preme- ture		Mature		Total			
	M.	F.	M.	F.	M.	F.			M.	F.	M.	F.	M.	F.			M.	F.	M.	F.	M.	F.		
Total No. occurring in Administrative County	922	1033	12548	11811	13470	12844	237	203	86	120	3487	3337	3573	3457	17	21	1008	1153	16035	15148	17043	16301	254	224
No. transferred out of Administrative County to areas of other L.H. authori- ties	355	393	4084	3767	4439	4160	97	86	2	1	7	6	9	7	—	—	357	394	4091	3773	4448	4167	97	86
No. occurring in and belonging to Admin- istrative County ..	567	640	8464	8044	9031	8684	140	117	84	119	3480	3331	3564	3450	17	21	651	759	11944	11375	12595	12134	157	138
No. transferred into Administrative County from areas of other L.H. au- thorities	707	731	7953	7399	8660	8136	188	144	—	—	13	5	13	5	—	—	707	731	7966	7404	8673	8135	188	144
Final No. belonging to Administrative County	1274	1371	16417	15443	17691	16814	328	261	84	119	3493	3336	3577	3455	17	21	1358	1490	19910	18779	21268	20269	345	282

Note.—A birth is regarded as "premature" if the birth weight is 5½ lb. or less.

The widening of the ratio of institutional to domiciliary births which has been a feature for some years was continued in 1969, as the following statement shows:—

Year	Proportion (per cent.) of notified births assigned to County area and occurring—	
	In hospitals, maternity homes, etc.	In the home
1965	73.9	26.1
1966	76.3	23.7
1967	78.2	21.8
1968	80.9	19.1
1969	83.2	16.8

MIDWIFERY

The County Council provide a midwifery service by the employment of full-time midwifery sisters in urban areas and district nursing-midwifery sisters in the rural areas. The numbers employed on the 31st December, 1969, including those in the delegate districts, are shown in the statement below in comparison with those employed in the previous four years.

	No. employed at end of year				
<i>Whole-time staff—</i>	1965	1966	1967	1968	1969
Midwives	251	243	241	238	235
Nurse-midwives	67	65	69	63	59
<i>Part-time staff—</i>					
Midwives or nurse-midwives	10	10	13	17	18
<i>Total equivalent whole-time staff engaged in midwifery</i>	263	254	248	247	244

Supervision of midwives throughout the Administrative County area is carried out by a non-medical supervisor of midwives, a deputy and two area supervisors, whilst the nursing-midwifery sisters are supervised by the district nursing superintendents.

Confinements occurring in the Administrative County area were 1,426 fewer than in the preceding year, those attended by County Council midwives and nurse-midwives accounting for 21.9 per cent. of the whole.

The following table shows the number of confinements attended by midwives in the various services during each year from 1965 to 1969. These figures do not include miscarriages.

	Total confinements attended				
	1965	1966	1967	1968	1969
(a) Local Health Authority services—					
County Council midwives	10,597	9,618	8,841	7,895	6,833
County Council nurse-midwives	568	523	483	396	399
(b) Hospital services—					
In State hospitals	25,222	25,187	25,618	25,866	25,509
In voluntary hospitals	—	—	—	—	—
(c) In private practice—					
Domiciliary	2	6	1	—	—
Nursing homes, etc.	481	366	491	321	311
TOTAL—All services	36,870	35,700	35,434	34,478	33,052

In addition to the confinements shown at (a) in the above table, County Council midwives and nurse-midwives attend cases discharged from hospital before the end of the minimum lying-in period as defined by the Central Midwives Board, and during 1969 they made 123,701 visits to 25,774 such cases as compared with 96,708 visits to 23,115 cases in 1968. The 1969 figures represent increases of 27.9 per cent. and 11.5 per cent. respectively over those for the preceding year. In further illustration of the growing tendency towards the early discharge of mothers from hospital, the case totals quoted earlier in this paragraph represented in 1968, 68 per cent. and in 1969, 75 per cent. of confinements in hospital where the mother was resident in the Administrative County area.

The County Council midwives and nurse-midwives also attended 144 miscarriages—a reduction of 56 on the previous year.

Oxygen Resuscitators.—At the end of the year 301 midwives and nurse-midwives were in possession of oxygen resuscitators.

District Training of Pupil Midwives.—Forty-six of the County Council's midwifery sisters are approved by the Central Midwives Board as pupil midwife teachers and give instruction in domiciliary midwifery to pupil midwives taking their Part II training. During the year 121 pupils from twelve hospitals in the Administrative County area completed their district training under these arrangements.

Post-Graduate Training.—In accordance with the rules of the Central Midwives Board, 51 County Council midwifery sisters and district nursing-midwifery sisters attended a residential refresher course during 1969.

In addition the County Supervisor of Midwives and her deputy attended a residential post-graduate course for supervisors of midwives at Van Mildert College, Durham from the 13th–18th April, 1969, and a one-day symposium for examiners of the Central Midwives Board held in London on the 21st February.

A half-day refresher course was held at County Hall on the afternoons of the 21st April and 1st May. Dr. E. E. Rawlings, consultant obstetrician and gynaecologist, Hope Hospital, Salford, gave a lecture entitled "A Survey of the first two years' work in a general practitioner short stay unit and its relation to the future role of the domiciliary midwife." Midwifery sisters and district nursing-midwifery sisters attending numbered 358, including 93 from other authorities.

First-Aid in Midwifery.—As in previous years the supervisors of midwives gave lectures on "First-aid in midwifery" to newly appointed ambulance drivers and attendants.

Motor Transport.—At the end of 1969, all the whole-time midwifery sisters employed were using motor cars for official duties. Fifty-one of the cars were owned by the County Council, the remainder being privately owned. Details of transport used by nursing-midwifery sisters are given in the district nursing section of this report.

Pupil Midwives' Hostels, Kirkby and Prestwich.—During the year 29 pupil midwives stayed at these hostels, 13 at the Kirkby hostel and 16 at Prestwich, whilst undertaking their three months district training.

Housing of County Council Midwifery Sisters.—Of the 235 whole-time midwifery sisters employed on the 31st December, 1969, 51 occupied houses owned by the County Council, 34 occupied houses rented by the County Council from local district councils, whilst five occupied houses let direct to them by local district councils. The remaining 145 midwifery sisters provided their own living accommodation.

Health Services and Public Health Act, 1968.—Under the provisions of section 10 of this Act, arrangements may be made between a local authority and a hospital management committee whereby the services of midwives employed by the authority are made available in a hospital on such terms and conditions as may be agreed. During the year three arrangements of this nature were made between the County Council and hospital management committees which were experiencing difficulty in staffing maternity units. The periods of secondment were eleven weeks, the services of a tutor for two days a week over thirty-four weeks, and a short period comprising four night duties. One of these arrangements was continued into 1970.

Section 10 of the Act also confers on a local health authority power to provide or make arrangements for the provision of midwives for attendance on women elsewhere than in their own homes or in hospitals vested in the Secretary of State. The object of this is to enable midwives to attend women at health centres, local health authority clinics, at the midwife's home, general practitioner's surgery or elsewhere as required, thereby providing for greater flexibility in the deployment of midwives and promoting closer co-operation between the local authority midwifery services and general practice. The County Council had previously agreed to County Council district midwifery sisters attending confinement cases which satisfied certain criteria in Hope Hospital, Salford, reference to which is made below.

General Practitioner Maternity Unit, Hope Hospital, Salford.—In March, 1966, after consultation with general practitioners, Salford City Council, Salford Hospital Management Committee and the Manchester Regional Hospital Board, the County Council agreed to take part in an experimental scheme for the admission, delivery and immediate transfer home of patients to be dealt with by domiciliary midwifery sisters employed by the County Council and Salford City Council together with general practitioners at the Maternity Unit, Hope Hospital, Salford.

Basically the idea is for the midwifery sister and/or the general practitioner to go into this unit with the patient, deliver her, and take her home within a few hours of delivery. If the delivery occurs during the night the patient will be kept in over-night. If a complication develops during labour the patient will be transferred to one of the labour wards in the specialist unit on request by the general practitioner to the registrar on duty. The patient will then come within the full jurisdiction of the hospital staff, though the midwifery sister and the general practitioner will be encouraged to follow the patient through. The patient while in the general practitioners' unit is the responsibility of the general practitioner.

The scheme enables patients who would otherwise be delivered at home to be delivered in hospital. The patients admitted fall into the following categories:—

- (1) Healthy primigravida or multipara whose home conditions are good, but who for emotional reasons requires the "safety" of hospital precincts.
- (2) Patient whose home conditions are border line, if it is considered the home is fit for early discharge.
- (3) Pregnant woman with good home who has had some minor obstetrical complication in a previous pregnancy which is unlikely to recur but is causing anxiety to her.

The scheme commenced in October, 1966, and the numbers of births in the unit to patients residing in the Administrative County area are as follows:—

				No. of births
1966	...	...	...	8
1967	...	...	...	112
1968	...	...	...	149
1969	...	...	...	228

The increase of 53 per cent. in the number of births reflects the growing participation in the scheme of the groups concerned and the number from Health Division No. 15 now represents 51 per cent. of the births in the divisional area for which the domiciliary midwifery service is responsible.

STATISTICS

ALL MIDWIFERY SERVICES IN THE ADMINISTRATIVE COUNTY AREA

Roll of Midwives.—The following table shows the distribution of all midwives on the County roll on the 31st December, 1969, in the various types of service:—

Type of service						No. of midwives
(a) Local Health Authority services—						
County Council midwives						249
County Council nurse-midwives						63
(b) Hospital services—						
In State hospitals						380
In voluntary hospitals						—
(c) In private practice—						
Domiciliary						—
Nursing homes, etc.						4
TOTAL—All services						696

COUNTY COUNCIL MIDWIFERY SERVICE

The following table gives the numbers of confinements and miscarriages attended by midwives and nurse-midwives employed by the County Council in the Administrative County area during 1969 and the four previous years:—

	1965		1966		1967		1968		1969	
	Mid-wives	Nurse-mid-wives	Mid-wives	Nurse-mid-wives	Mid-wives	Nurse-mid-wives	Mid-wives	Nurse-mid-wives	Mid-wives	Nurse-mid-wives
Confinements... ..	10,597	568	9,618	523	8,841	483	7,895	396	6,833	399
Miscarriages	138	13	166	19	159	8	181	19	131	13
TOTALS	10,735	581	9,784	542	9,000	491	8,076	415	6,964	412
	11,316		10,326		9,491		8,491		7,376	

The numbers of visits made by County Council midwives and nurse-midwives during 1969 are given below, together with the figures for the previous four years.

	VISITS PAID				
	1965	1966	1967	1968	1969
Midwives	287,235	260,024	237,684	213,319	193,472
Nurse-midwives	17,145	15,876	14,353	12,646	12,242
TOTAL	304,380	275,900	252,037	225,965	205,714
Visits to mothers confined in hospital and discharged before the 10th day	57,839	70,504	80,595	96,708	123,701

Particulars of bookings of the general practitioners in connection with the confinements attended in 1969 by County Council midwives and nurse-midwives are given in the following table:—

	CONFINEMENTS			TOTAL BIRTHS
	Doctor not booked	Doctor booked	Total	
Midwives	114	6,719	6,833	6,845
Nurse-midwives	9	390	399	399
TOTAL	123	7,109	7,232	7,244

Of the 7,232 mothers attended in confinement by County Council midwives and nurse-midwives, 7,109 or 98·3 per cent. had also booked a doctor.

The use of the different types of inhalational analgesic during the last five years is shown below:—

Year	Total confinements attended by County Council midwives and nurse-midwives	Confinements at which inhalational analgesic was administered		Confinements at which the following inhalational analgesics were administered			
				Nitrous oxide/oxygen		Trilene	
		No.	*Per cent.	No.	*Per cent.	No.	*Per cent.
1965	11,165	9,241	83	108	1	8,879	80
1966	10,141	8,166	81	138	1	7,968	79
1967	9,324	7,337	79	505	5	6,769	73
1968	8,291	6,256	75	875	11	5,381	65
1969	7,232	5,539	76	1,022	14	4,517	62

* Of total confinements attended by County Council midwives and nurse-midwives.

The relationship of the numbers of live and still births attended by County Council midwives and nurse-midwives to both domiciliary and total domiciliary and institutional live and still births occurring in the Administrative County is shown in the statement below:—

	1965	1966	1967	1968	1969
(a) Total No. of live and still births occurring in the Administrative County	37,225	35,987	35,564	34,919	33,822
(b) No. of (a) which were domiciliary	11,233	10,183	9,279	8,194	7,068
(c) No. of (b) which were attended by County Council midwives and nurse-midwives	11,200	10,158	9,240	8,155	7,014
(d) Percentage of (c) to (a)	30·1	28·2	26·0	23·4	20·7
(e) Percentage of (c) to (b)	99·7	99·8	99·6	99·5	99·2

Of the total births to mothers normally resident in the Administrative County area, 16·8 per cent. were domiciliary (see page 54).

In the following statement particulars are given for 1969 and each of the four preceding years of deaths of mothers and children amongst cases attended by County Council midwives and nurse-midwives.

	1965	1966	1967	1968	1969
<i>Deaths of mother or child (including deaths after removal to hospital)—</i>					
No. of live and still births attended ...	11,201	10,165	9,353	8,311	7,244
No. of deaths of mother ...	1	—	1	1	—
No. of deaths of child ...	45	30	20	18	5

Criteria for Booking of Domiciliary Confinement.—Since the beginning of 1964 arrangements have been in operation throughout the Administrative County area by which some appraisal is possible as to the extent to which the generally accepted criteria for home confinement are fulfilled in relation to those expectant mothers who book a County Council district midwifery sister for their confinement. These criteria, as published in Ministerial Reports on Confidential Enquiries into Maternal Deaths in England and Wales since 1958, are:—

1. As far as can be ascertained the woman's general physical state is unimpaired.
2. She is pregnant for the second, third or fourth time, the previous pregnancies, labours and puerperia have been normal and she is under 35 years of age.
3. She is a primigravida under 30 years of age.
4. She is Rhesus positive, or is known to have no antibodies.
5. The home conditions are suitable.

From experience gained in the collation and analysis of the information obtained in 1964, collection of data relating to the Rhesus factor has not been undertaken in subsequent years. This was decided as a result of the difficulties and delays often involved in securing such data and the fact that less than one per cent. of all expectant mothers may be expected to be Rh. negative with antibodies.

During 1969, information relative to 6,051 bookings was analysed as shown in the following table. In considering this, regard must be had to what may appear to be discrepancies in that women stated to be pregnant for the first time are shown to have had previous abnormal pregnancies. This arises from differences of definition inasmuch as for the purpose of the classification "Pregnant first time" previous abortions are disregarded, whereas under the heading "Previous pregnancies, labours and puerperia" abortions or ectopic gestations are treated as previous abnormal pregnancies.

Pregnancy/age	Total booked	Patient's physical state		Previous pregnancies, labours and puerperia		Home conditions		*Domiciliary criteria fulfilled
		Satisfactory	Not satisfactory	All normal	Not all normal	Suitable	Not suitable	
Pregnant 1st time—								
Under 30 years	367	366	1	—	11	365	2	354
30 years and over	12	12	—	—	1	12	—	—
Pregnant 2nd, 3rd or 4th time—								
Under 35 years	5,085	5,064	21	4,339	746	5,051	34	4,304
35 years and over	248	245	3	197	51	246	2	—
Pregnant for 5th or more times—	339	329	10	244	95	326	13	—
TOTAL	6,051	6,016	35	4,780	904	6,000	51	4,658

* Rhesus factor ignored.

It must be pointed out that the above figures represent the position at the time of booking. Many cases shown on booking to be unsuitable for home confinement are subsequently delivered in hospital, often after consultation between the divisional medical officer and the family doctor.

From the above table it will be seen that of the 6,051 cases booked, 599 or 9.9 per cent should not on the basis of age and parity alone, have been booked for domiciliary confinement. It has been possible to comment upon a reduction in each year since 1964, the first year for which statistics were available, when the corresponding proportion was 19.3 per cent. It can thus be seen that the efforts of the doctors and midwives to persuade the older multiparae to be confined in hospital are having a gradual effect. No doubt the increasing tendency to early discharge from hospital is also helpful in making hospital confinement more attractive to the older woman with a family.

As will be seen from the table below the improvement referred to is also reflected in the proportion of bookings where all the criteria (excluding the Rhesus factor) are taken into consideration.

Year	Percentage fulfilling domiciliary criteria	
	By age/ parity only	*All criteria
1964	80.7	†
1965	83.0	69.0
1966	85.5	72.6
1967	86.7	73.1
1968	88.8	74.3
1969	90.1	77.0

* Rhesus factor ignored.

† Not available.

HEALTH VISITING

The health visiting service is provided by the direct employment of qualified health visitors who also perform the duties of school health visitor within the school health service. At the end of the year there were 432 health visitor/school nurses, compared with 415 at the end of 1968. There were also 162 school/clinic nurses engaged whole or part-time in school health work and in clinics. In addition 13 tuberculosis visitors were still employed at the end of 1969, although the work of these nurses is becoming gradually merged with the general duties of the health visitors as the original tuberculosis visitors either retire or resign. The professional supervision of the service is carried out by the superintendent health visitor, a deputy and ten area superintendents. During the year one of the area superintendents was appointed as play group adviser, specifically to assess the need for day care for priority groups and to assist in the setting up of play groups in those areas of the Administrative County which have been designated as areas of special social need, namely Ashton-under-Lyne, Middleton, Stretford, Huyton-with-Roby, Kirkby and Litherland.

Although there was a slight improvement in recruitment during 1969, the whole-time equivalent of the number of staff engaged was still well below the authorised establishment. Recruitment of school/clinic nurses, both S.R.N. and S.E.N. has, therefore, continued with the object of freeing the health visitor from those duties which do not require her expertise and training. The scheme by which the County Council provides financial grants to nurses who are able to meet the necessary academic standards to enable them to undertake training for the health visitor's certificate was continued and during the year 22 students who had been assisted in this way were successful in obtaining the qualification. A further 24 students commenced their training in September, 1969.

During 1969 health and tuberculosis visitors in the Administrative County area visited a total of 253,396 persons. Visits paid during each of the last five years are shown below and similar information by health division and delegate district for 1969 is given in Table 12, page 150, together with an analysis of the type of visits paid, classified in accordance with the requirements of the Department of Health and Social Security.

Year	Visits paid by health and tuberculosis visitors to—								Total
	Expectant mothers	Children under 5 years	Adults (excl. expectant mothers and tuberculous)		Tuberculosis				
					Cases		Contacts		
			under 65 yrs.	65 yrs. and over	Under 65 yrs.	65 yrs. and over	Under 65 yrs.	65 yrs. and over	
1965	18,661	490,949	24,485	66,643	20,727	2,462	27,783	1,011	652,721
1966	18,456	492,224	27,763	72,387	18,764	2,445	24,724	1,216	657,979
1967	16,968	482,388	29,385	67,738	15,656	2,550	21,699	1,338	637,722
1968	15,799	492,671	32,751	69,981	13,817	2,748	19,803	1,188	647,758
1969	14,579	473,348	32,157	71,136	12,683	2,375	17,672	1,082	625,032

Even over the period covered by the table there has been a definite change in the pattern of visiting of different classes of the population. This is evidenced on the one hand by the falling number of visits to expectant mothers and to tuberculosis cases and contacts under 65 years of age and on the other by the increased visits to other classes of adults.

The health visitor occupies a position within the health services which involves her in many aspects that are dealt with in detail elsewhere in this report. Naturally the demands upon her services are constantly changing and she often acts as the link between the various services, being able to make available ideas having a relevance in more than one service.

Again, as referred to under the heading of "Problem Families" health visitors are intimately concerned with work relating to such families and families where battering of a baby is suspected. The amendment to the Nurseries and Child Minders Regulations occasioned the supervisory staff a considerable increase in the amount of visiting of child minders and play groups both at the time of registration and subsequently to ensure that standards are adequately maintained.

Educational work of Health Visitors.—This work can essentially be divided into two parts. Firstly, there is the educational work in the day-to-day operation of the health services and secondly, the assistance which is given by the health visitor in the training of others.

The programme of lectures and talks, many of which are undertaken in co-operation with other departments of the County Council, the regional hospital boards and voluntary agencies, continued as in previous years.

The amount of teaching in schools by health visitors continued to increase and the health visitors often take part in health education and mothercraft subjects which are included in the school curriculum. In some instances health visitors have given specialised talks within the syllabus for the G.C.E. or C.S.E. examinations in human biology, whilst talks continue to be given during courses leading to the Duke of Edinburgh Awards. Health visitors acted both as lecturers and examiners for the course of mothercraft as planned by the National Association for Maternal Welfare. As this is probably the only opportunity for many girls to obtain this kind of knowledge, which will be so important to them within a few years, co-operation with the schools in this subject is valued.

The provision of modern purpose-built clinics has greatly encouraged educational work, not least at antenatal clinics and relaxation classes and many health visitors and midwives have been trained to teach relaxation and exercises to the mothers who attend. In some areas evening sessions are being held for relaxation and mothercraft, subjects which form a combined programme.

Mothers Clubs continued to play an important role. These clubs, which form a close link between parent and health visitor, enable valuable educational work to be promoted by way of talks and/or demonstrations on all aspects of parentcraft.

Insofar as training was concerned facilities were again provided during 1969 as an adjunct to the health visitor training courses at Liverpool, Bolton, Bradford, Manchester and London whereby students accompany health visitors (many of whom are trained as fieldwork instructors) in various parts of the County area for their practical training, and similar facilities were provided for a group of students taking part in a degree course in nursing at Manchester University. In addition to periods of practical training, visits of observation were arranged for student nurses, district nurses under training, student teachers from training colleges, and trainee teachers of the mentally handicapped from the Harris College, Preston, students from the social studies department of Manchester University and the Harris College, and from the child care course at Liverpool University. Individual students from other teacher training colleges together with students undertaking nursery nurse training visited child health centres, school clinics and day nurseries in connection with specific projects they were studying, and similar visits continued to be arranged for the students attending the pre-nursing course at the Newton-le-Willows College of Further Education.

Co-operation with General Practitioners.—In two divisions and one delegate district there is full attachment of health visitors to general practices. Active co-operation between health visitors and general practitioners in other areas is increasing, 151 health visitors being linked either by liaison or full attachment with groups of general practitioners and these schemes are bringing good results.

Attachment has brought about a marked change in the pattern of the health visitors' work, whereby visits to patients either to fulfil statutory responsibilities or to cover requests from the general practitioner, are now undertaken throughout the area covered by the practice rather than over the traditional circumscribed geographical area.

In some areas clinic premises are used by general practitioners for conducting surgeries and clinics, whilst in others the practitioners are conducting their own child health and immunisation clinics at which the health visitors or clinic nurses attend, thus illustrating the growing degree of co-operation between the practitioners and the local authority services.

Co-operation with Hospitals.—Co-operation with hospital staffs at all levels continues to develop in accordance with the particular need. In one division, for example, a health visitor accompanies the geriatrician on domiciliary visits. In another area family care conferences have been established, where the geriatrician, health visitor, social worker and family meet to discuss the situation and problems of the geriatric patient. The health visitor visits with the geriatrician and after discussion arranges with colleagues that any help required is obtained. In many areas health visitors, on a rota basis, attend geriatric, paediatric, diabetic, ophthalmic and chest clinics.

Some health visitors attend hospital antenatal clinics and also visit the maternity wards so that they meet the mothers before and after babies are born to help with any problems. During 1969, a scheme commenced with the Duchess of York Hospital for Babies, Manchester, whereby the liaison health visitor informs her colleagues in the County of any children from their area who are patients, thus facilitating the exchange of relevant information.

Co-operation between health visitors and hospital social workers continued to prove of value. In one maternity hospital a County and a County Borough health visitor visit the lying-in wards for mothercraft teaching and discussion groups, an arrangement which is proving most successful. In some areas health visitors take groups of expectant mothers to visit the local maternity hospital or provide instruction at mothercraft and relaxation classes in the hospitals. On the other hand, midwifery sisters from the hospital may attend local authority antenatal clinics to inform the mothers of the hospital regime.

A mother and baby unit and a health visitor liaison scheme formed as part of the female psychiatric section of Whittingham Hospital, near Preston, have been in operation since June, 1967. A health visitor visits the hospital each week to discuss infant feeding and management with the mothers, and also to advise the staff on the care of any toddlers there. Contact between this health visitor and the health visitor in the area of the patient's home is maintained.

In two divisions health visitors have been included in research schemes in connection with developmental paediatrics and in another division they took part in research into bladder cytology amongst workers employed or formerly employed in rubber processing. School/clinic nurses were also involved in a survey carried out by the Department of Preventive Medicine at Manchester University.

Training and Refresher Courses.—Members of the staff attended post certificate refresher courses organised by the Royal College of Nursing, the Health Visitors' Association and the Central Council for Health Education. Some attended conferences organised by Stretford College of Further Education and by other Local Authorities, three members of the supervisory staff attended a long week-end management course.

During the early part of 1969, the Stretford Technical College arranged short courses entitled "Principles and Practice of Teaching for Health Visitors", which were attended by 13 health visitors from areas of the County within reasonable travelling distance of the College.

This year Dr. Jean Robson of the Fulwood Audiology Clinic conducted the training courses on screening tests for normal hearing of children between 7 and 16 months old previously undertaken by the staff of Manchester University. All newly qualified and newly appointed health visitors are trained to undertake this work. For further details see page 40 (Audiology Clinic).

Two more health visitors attended courses for fieldwork instructors at Chiswick Polytechnic, London, to enable them to undertake practical training of students.

The annual one-day conference for health visiting staff was held at the County Hall on the 13th March and repeated on the 18th March. Dr. H. Inceman, Consultant Psychiatrist, Cranage Hall Hospital, Mrs. B. M. Berman, Teacher-in-Charge of the Moat Hall Autistic Unit at Peel Green, and Mrs. E. Henry, Matron of the Gt. Harwood Day Nursery addressed the conference on "The Autistic Child", and Dr. R. V. Dent, Consultant Geriatrician at Crumpsall Hospital, Dr. W. A. B. Cooper, General Practitioner, and Mrs. N. Cunliffe, Health Visitor, on "The Needs of the Elderly".

DISTRICT NURSING

The County Council provide a domiciliary nursing service by the direct employment of whole-time district nursing sisters and district nurses.

Staffing.—Details of the numbers of staff employed in 1969 and in each of the four preceding years are given in the statement below:—

				No. employed at end of year				
				1965	1966	1967	1968	1969
<i>Whole-time staff—</i>								
Nurses (general nursing only)	...	...	...	483	516	544	579	572
Nurses (general nursing and midwifery)	...	...	...	62	60	63	57	55
Nurses (general nursing, midwifery and health visiting)	...	...	...	5	5	6	6	4
Nursing auxiliaries	...	...	...	—	24	55	57	65
<i>Part-time staff—</i>								
Nurses	...	...	...	22	21	20	17	16
Nursing auxiliaries	...	...	...	4	9	16	13	12
<i>Total equivalent whole-time staff engaged in home nursing</i>				553	610	689	714	710

Of the 696 whole-time nurses employed on the 31st December, 1969, 447 were state registered. Of these 436 or 97 per cent. were "district" trained and 184 were state enrolled nurses.

SUPERVISION OF DISTRICT NURSING STAFF.—The establishment provides for a superintendent, a deputy superintendent, 13 area superintendents and two tutors.

Health Services and Public Health Act, 1968.—Section 11 of this Act extended the powers of local health authorities by enabling them to arrange for the attendance of nurses on persons who require nursing elsewhere than in their own homes. Local authority nursing staff may attend women at health centres, or local health authority clinics or at the nurse's home, or general practitioner's surgery or elsewhere as required, thereby providing for greater flexibility in the development of nurses and promoting closer co-operation between the local authority nursing service and general practices.

Attachment Schemes.—The development of full attachment schemes, where the medical practitioner and district nursing sister operate as a team, has progressed satisfactorily in all divisions. Over 75 per cent. of the district nursing staff take part in attachment schemes.

The district nursing sister in charge of the nursing team attends the medical practitioner's surgery regularly, in some instances daily, to undertake injections and dressings of patients whom she would otherwise have to visit in their own home. She also discusses treatment and progress of patients being nursed at home. By constant contact with the general practitioners many cases come to light which require nursing care at home and arrangements are made to carry out such care.

District nursing staff cover the area of the medical practitioner insofar as it is contained in the Administrative County area.

General practitioners are pleased with the co-operation and help they are getting and there is no doubt that these schemes are to the benefit of the health service.

Health Services Cadet Scheme.—Due to the difficulties which were continually being experienced in recruiting attendants in homes for the elderly and in mental health hostels, the County Council in November, 1966, agreed to the introduction of a cadet training scheme. A course of two years duration commenced in April, 1967, with ten cadets who were required to take further education lectures. The theoretical side of the course was co-ordinated by the tutors who were already responsible for the training of nurses at the County Council training centre, whilst practical training was provided at homes for the elderly, mental health establishments, and other appropriate establishments.

An additional ten cadets joined the course at a later date making a total of 20, and of these 14 completed the course, six cadets having withdrawn. No arrangements were in hand for the running of a similar course at the end of the year.

Cases Attended.—In the following statement particulars are given of the number of cases attended by the district nursing sisters and district nurses during 1969 together with the number of visits involved. For comparative purposes, corresponding figures for the previous four years are also given. These figures do not include cases attended in doctors' surgeries which are increasing with the growth of attachment schemes.

	1965	1966	1967	1968	1969
General nursing cases attended	45,754	50,828	56,796	65,867	61,577
No. of visits paid to these cases	1,358,992	1,449,994	1,694,452	1,791,045	1,802,159
Average No. of visits per case	29.7	28.5	29.8	27.2	29.2

Analysis of Completed Cases.—Only on the completion of attendance upon a case can a comprehensive picture be obtained of the nursing care and treatment accorded to such a case. It is for this reason, therefore, that a statistical analysis is carried out based on the cases on which attendance ceased during each year. In 1969 these numbered 37,050 and in the table below are analysed by disease or ailment in order of frequency and by age group, and a similar but more detailed statement is given in Table 13, page 151.

Disease or ailment	Total cases	Age group (years)				
		0—	5—	15—	45—	65—
Senility and other ill-defined conditions	5,930	48	85	971	1,332	3,494
Diseases of digestive system	4,435	116	278	970	1,202	1,869
Anaemias and other blood diseases	3,629	—	5	507	838	2,279
Diseases of respiratory system (other than tuberculosis)	3,106	240	141	648	665	1,412
Diseases of the central nervous system	3,043	2	4	167	562	2,308
Diseases of the skin	2,806	109	124	561	570	1,442
Cancer	2,573	8	3	143	919	1,500
Diseases of the heart and circulatory system	2,538	—	4	191	621	1,722
Accidents, injuries, etc. (including burns and scalds)	2,312	171	144	364	420	1,213
Diseases of the genito-urinary system	1,764	146	46	393	490	689
Diseases of bones and organs of movement (including rheumatism and arthritis)	1,165	1	8	74	298	784
* Infective and parasitic diseases	967	51	27	257	269	363
Diabetes	574	6	9	41	140	378
Diseases of eye, ear and mastoid process	491	73	48	71	63	236
Mental, psychoneurotic disorders	245	—	3	33	68	141
All other conditions	1,472	20	11	1,362	50	29
TOTAL—All conditions	37,050	991	940	6,753	8,507	19,859

* Including tuberculosis of respiratory system.

Comment was made in the reports for 1967 and 1968 upon the effect apparent in the analysis of cases of the scheme of attachment whereby district nurses are attached to general practitioners. In May, 1969, provision was made to exclude nursing treatments undertaken in surgeries from the analysis, and this has resulted in the figures reverting to the pattern which applied before the introduction of attachment schemes.

In 1969, the total number of cases upon which attendance ceased was approximately 4,600 fewer than in the previous year. The average duration of treatment of all cases increased from 12.2 weeks in 1968 to 15.3 weeks in 1969, whilst the average number of visits per case increased from 26.6 to 32.0, which was only 2.2 visits per case below the average for 1966, the last year before the introduction of attachment schemes.

The following table gives details of the treatment averages in accordance with the separate diseases or ailments for each of the last five years:—

Disease or ailment	Average duration of treatment (weeks)					Average No. of visits (day and night)					Average No. of visits per case per week				
	1965	1966	1967	1968	1969	1965	1966	1967	1968	1969	1965	1966	1967	1968	1969
Tuberculosis of respiratory system ..	20.5	17.0	16.6	16.5	16.5	94.1	76.1	79.3	70.8	77.4	4.6	4.5	4.8	4.3	4.7
Other infective and parasitic diseases ..	6.4	6.2	7.0	5.7	6.6	22.5	21.3	21.5	20.8	22.4	3.5	3.5	3.1	3.7	3.4
Cancer	7.3	7.7	8.1	8.9	9.5	35.7	34.2	35.4	36.0	36.2	4.9	4.4	4.4	4.0	3.8
Diabetes	30.4	31.7	32.8	29.3	34.9	166.4	177.2	159.0	150.6	171.3	5.5	5.6	4.8	5.1	4.9
Anaemias and other blood diseases ..	44.7	45.8	36.6	31.9	47.1	50.7	50.8	38.1	36.6	47.5	1.1	1.1	1.0	1.1	1.0
Mental, psychoneurotic disorders ..	12.2	16.3	9.7	10.9	15.8	24.4	29.7	25.2	19.2	26.2	2.0	1.8	2.6	1.8	1.7
Cerebral haemorrhage, cerebral embolism and thrombosis ..	12.2	11.6	13.2	14.3	15.0	34.8	37.7	36.6	38.0	40.2	2.8	3.3	2.8	2.7	2.7
Other diseases of central nervous system ..	26.2	28.1	22.9	23.1	26.7	65.9	65.4	58.6	54.1	66.5	2.5	2.3	2.6	2.3	2.5
Diseases of eye, ear and mastoid process ..	8.8	4.7	2.1	1.3	4.8	33.9	18.7	8.5	5.1	18.7	3.9	3.9	4.0	3.9	3.9
Diseases of heart and circulatory system ..	20.8	22.1	17.9	17.4	14.9	43.6	47.7	39.9	40.3	34.2	2.1	2.2	2.2	2.3	2.3
Influenza	4.2	2.6	6.8	3.1	4.5	12.2	10.3	12.7	12.0	11.0	2.9	3.9	1.9	3.9	2.4
Pneumonia	3.9	4.2	2.6	3.9	3.6	19.1	18.4	12.6	15.4	14.9	4.9	4.4	4.9	4.0	4.1
Bronchitis	5.4	6.3	5.1	5.8	7.3	17.8	18.3	16.5	16.7	20.2	3.3	2.9	3.2	2.9	2.8
Other diseases of respiratory system ..	3.1	2.4	3.8	2.6	3.9	12.9	10.1	13.0	9.4	12.8	4.2	4.2	3.5	3.6	3.3
Diseases of digestive system ..	4.4	4.9	5.1	4.0	4.1	13.2	15.4	14.3	12.0	12.6	3.0	3.1	2.8	3.0	3.1
Diseases of genito-urinary system ..	25.4	34.1	22.0	18.2	19.7	22.5	26.4	22.1	20.2	21.6	0.9	0.8	1.0	1.1	1.1
Diseases of the skin	12.9	12.3	10.5	9.5	11.4	37.0	34.6	28.2	26.0	30.6	2.9	2.8	2.7	2.7	2.7
Diseases of bones and organs of movement (including rheumatism and arthritis) ..	32.6	33.1	33.3	30.0	31.7	65.9	66.4	64.6	60.7	59.8	2.0	2.0	1.9	2.0	1.9
Senility and ill-defined conditions ..	12.9	13.4	12.4	11.1	12.7	29.7	27.1	26.8	24.0	26.7	2.3	2.0	2.2	2.2	2.1
Burns and scalds	7.1	5.7	5.0	5.0	5.2	21.9	19.3	16.3	15.0	17.6	3.1	3.4	3.3	3.0	3.4
Other accidents, injuries, etc. ..	10.3	9.1	5.8	4.9	7.3	25.8	23.7	15.5	12.2	20.2	2.5	2.6	2.7	2.5	2.8
All other conditions	5.2	5.5	5.0	4.7	3.8	14.2	15.6	13.1	13.0	11.8	2.7	2.9	2.6	2.8	3.1
TOTALS—Administrative County ..	16.6	16.9	14.2	12.2	15.3	35.2	34.2	29.8	26.6	32.0	2.1	2.0	2.1	2.2	2.1

In Table 14, page 152, details are given of the duration of treatment and frequency of visits to the nursing cases, classified by ailment group, on which attendance ceased during 1969.

Below are given the agencies by which the services of the nurses were enlisted for the cases terminated in 1969.

	No. of patients	Per cent. of total
General practitioners	32,114	86.7
Hospitals	3,855	10.4
Patients, relatives or friends ..	552	1.5
Public health authorities ..	470	1.3
Others	59	0.2

The principal reasons for the cessation of the nurses' attendances on the cases under review in 1969 are summarised below. They are analysed in detail, according to disease or ailment and by health divisions and delegate districts, in Tables 14 and 15 on pages 152 and 153.

	No. of patients	Per cent. of total
Recovered, relieved or convalescent ..	21,188	57.2
Admitted to hospital	6,838	18.5
Died	4,999	13.5
Gone away	1,376	3.7
Out-patient, X-ray, etc. ..	1,212	3.3
Nurse withdrawn	1,346	3.6
Others	91	0.2

The statement below provides an analysis of the types and numbers of treatments which were involved in the cases upon which attendance ceased in 1969.

Nursing treatment	No. of cases	Proportion of total (per cent.)
General nursing care	8,191	22.1
General nursing care with injections	812	2.2
General nursing care with dressings and poultices	449	1.2
General nursing care with bladder lavage, rectal lavage, catheterisation and enemata	238	0.6
Septic dressings and poultices	2,478	6.7
Dry dressings	6,778	18.3
Burns and scalds—dressings and treatments	557	1.5
Pre-operative treatment and pre-X-ray	1,101	3.0
Blanket baths (one, twice or thrice weekly)	1,357	3.7
Douche and pessaries	240	0.6
Bladder lavage, rectal lavage, catheterisation, enema, saline or washout	1,925	5.2
Injections (hypodermic or intramuscular)	10,960	29.6
Injections (hypodermic or intramuscular) with dressings	317	0.9
Operations	—	—
Eyes, ears, nose and throat treatments	376	1.0
Skin treatments	206	0.6
Care of patients in plaster casts and splints	34	0.1
Clinical observation	346	0.9
Others	685	1.8

Treatments comprising or including injections amounted to 32.6 per cent. of the total whilst general nursing care, either alone or in conjunction with some other form of treatment, was needed in 26.2 per cent. Dressings or poultices, excluding those required for the treatment of burns, were required in 27.0 per cent. of the cases.

Post-Certificate Training.—During the year two training courses for state registered nurses were held at the district nurse training centre. Twenty-two County Council district nursing sisters, one area superintendent of health visitors, and four district nursing sisters from other local health authorities qualified for the national certificate in district nursing.

A ten weeks training course leading to the award of the Queen's Institute of District Nursing Certificate of proficiency for enrolled nurses was also held. Twenty-two County Council district nurses (S.E.N.) and one district nurse from another authority were successful in obtaining the certificate.

The County Superintendent of district nurses attended a conference organised by the Manchester Area Nurse Training Committee and several other nursing supervisory staff attended a course in Nursing Research Appreciation at the William Rathbone Staff College, Liverpool.

Residential courses at Cardiff, Birmingham and Southampton were attended by a total of 57 County Council district nursing sisters. Twenty district nurses attended residential refresher courses at the William Rathbone Staff College, Liverpool.

Study days were held at County Hall on the 21st and 30th October. At the morning sessions talks illustrated by slides and films were given on "Resuscitation". In the afternoons Mr. C. Brun, F.R.C.S., Consultant Surgeon, Blackburn and District Hospital Management Committee, spoke on the subject of "Arterial Surgery". A total of 572 nurses participated.

Night Nursing Service.—In September, 1966, the County Council agreed to provide an all night nursing service on an experimental basis for cases needing such care who suffer from illnesses other than cancer. The cancer cases are cared for by the night nursing service under the Marie Curie Memorial Foundation scheme operated by the County Council.

The cases needing this service include, for example, cardiac cases in the final stage of illness, neurological cases which cannot be admitted to hospital and patients discharged from hospital in the terminal stages of illness. Nurses undertaking this work are not on the whole-time district nursing staff of the County Council but are specially employed, being recruited on the same basis as for the Marie Curie scheme. During 1969, forty-one cases were attended.

Routine Testing of Urine.—For new patients attended by district nurses the use of Uristix strips, a simplified method of testing urine for sugar and albumin, was continued during 1969. Five hundred and eight-eight tests were positive for albumin and 274 showed a positive reaction to sugar in previously unknown cases. The family doctors were informed of the results.

Motor Transport.—At the end of 1969 motor cars were being used for official duties by 667 of the district nursing staff. The vehicles were owned in 577 cases by the nurses themselves and in 90 by the County Council.

Housing of District Nursing Staff.—Of the staff employed on the 31st December, 1969, forty-five nurses occupied houses owned by the County Council, 24 occupied houses rented by the County Council from district councils, one occupied a house rented by the County Council from a private owner and 16 rented houses direct from district councils. All the remaining nurses provided their own living accommodation.

VACCINATION AND IMMUNISATION

Under the County Council's vaccination and immunisation schemes made under section 26 of the National Health Service Act, 1946, facilities are provided for giving protection against smallpox, poliomyelitis, diphtheria, whooping cough, tetanus and measles. For this purpose sessions are held periodically at child health centres and other suitable centres, such as schools. The sessions are normally conducted by the divisional medical staffs although arrangements do exist whereby general practitioners may be engaged on a sessional basis to supplement them as necessary. Throughout the year under report the arrangements continued whereby all medical practitioners, whether or not providing general services under Part IV of the Act, could provide service under the County Council's arrangements. Since April, 1967, general practitioners have submitted claims on the local executive councils on a prescribed form in respect of the vaccination and/or immunisation of patients on their lists undertaken as part of general medical services in pursuance of public policy. Information contained in the form is transmitted to the appropriate local health authority for the purpose of maintaining records.

The vaccination and immunisation schemes of the County Council lay upon health visitors the duty of securing the presentation of children for primary vaccination and immunisation and for such subsequent reinforcement treatment as is required until school age is attained. Arrangements exist whereby systematic provision is made for administering further reinforcements as necessary during the period of school life.

Whilst in appropriate cases the facilities provided by the County Council are available to adults, it should be noted that records are now maintained in respect of children under the age of 16 years only and all statistics quoted in this section are therefore limited to such children.

Arrangements under section 26 also include provision for the vaccination against anthrax of workers exposed to special risk. In addition the County Council, under section 28 of the Act, maintain a yellow fever vaccination centre and provide B.C.G. vaccination against tuberculosis. Reference to the former is made later in this section of the Report and to the latter in the section dealing with "Prevention of Illness, Care and After-Care".

Particulars of vaccinations and immunisations undertaken in 1969 under the County Council's scheme are detailed below.

Vaccination against Smallpox.—The following statement shows the numbers of primary vaccinations and re-vaccinations performed on children in the Administrative County during 1969 and each of the preceding four years. Similar information is given for 1969 for each health division and delegate district in Table 16, page 154.

Year	PRIMARY VACCINATIONS PERFORMED				RE-VACCINATIONS PERFORMED		
	Age in years				Age in years		
	Under 2	2–	5–	Total under 16	Under 5	5–	Total under 16
1965	12,448	3,008	1,271	16,727	241	2,145	2,386
1966	14,000	5,074	3,940	23,014	261	6,213	6,474
1967	12,612	4,682	1,831	19,125	202	1,938	2,140
1968	11,991	5,855	1,622	19,468	199	1,504	1,703
1969	8,349	4,588	1,369	14,305	288	1,624	1,912

It will be seen from the above table that as regards primary vaccinations there was a falling-off in 1969 in the numbers protected in all age groups. The decline would appear to be due in the main to the implementation of the recommendation of the National Joint Committee on Immunisation and Vaccination that consultation with the general practitioner is advisable in view of the possibility of accidental infection of eczematous members of the family of a child vaccinated against smallpox. As a result, although the procedure is theoretically safer, many opportunities for vaccination whilst the parent is present and willing are lost. This decline is most apparent in the age group "under two years" and is reflected in the acceptance rate of infant vaccination which fell from 29 per cent. of those estimated to be eligible in 1968 to 20 per cent. in 1969.

No cases were reported during 1969 of complications associated with vaccination *i.e.*, generalised vaccinia, post-vaccinal encephalomyelitis or death from any other complication of vaccination.

Vaccination against Yellow Fever.—The County Council's yellow fever vaccination centre at the Ashton Road Clinic, Lancaster, continued to operate during the year in providing vaccination for persons proceeding abroad. In accordance with arrangements of the Department of Health and Social Security, a charge for the vaccination is made and an international certificate for production in countries other than the United Kingdom is supplied to each person vaccinated.

During the year 1969 the following persons were vaccinated at the centre:—

Children under nine months	...	...	...	1
Children over nine months	...	...	...	43
Adults	...	...	...	247
TOTAL	...	...	...	291

Of the 291 persons vaccinated, 245 were residents of Lancashire, 32 were from Westmorland, four were from Yorkshire and ten were from other areas.

Immunisation against Poliomyelitis, Diphtheria, Whooping Cough, Tetanus and Measles.—Below is given a summary, by types of antigen used, of the numbers of children in specified age groups who completed a full course of primary immunisation or were given a reinforcement dose in the Administrative County area during 1969.

Antigen used	Primary immunisations							Reinforcement doses			
	(a)	Under 1	1–	2–	4–	8–	Total under 16	Under 4	4–	8–	Total under 16
	(b)	1969	1968	1966–67	1962–65	1954–61	1954–69	1966–69	1962–65	1954–61	1954–69
Poliomyelitis only	...	876	16,320	3,129	2,963	954	24,242	3,301	29,936	6,833	40,070
Diphtheria only	...	—	7	3	26	12	48	8	264	176	448
Whooping cough only	...	—	8	1	2	—	11	6	8	2	16
Tetanus only	...	5	13	24	99	760	901	52	204	1,519	1,775
Measles only	...	15	2,245	7,239	4,221	281	14,001	—	—	—	—
Diphtheria and whooping cough (combined)	...	5	39	12	28	—	84	36	55	5	96
Diphtheria, whooping cough and tetanus (combined)	...	1,098	12,968	1,817	665	82	16,630	10,758	2,713	255	13,726
Diphtheria, whooping cough, tetanus and poliomyelitis (combined)	...	14	73	9	2	—	98	31	59	1	91
Diphtheria and tetanus (combined)	...	45	505	327	1,738	736	3,351	3,489	27,905	5,243	36,637

(a) Age, in years, at end of 1969.

(b) Year of birth.

As the numbers of children afforded protection against each disease are not readily ascertainable from the above table they are shown separately in the following tables together with the corresponding totals for each of the previous four years. As anticipated, there was a decline in the numbers primarily protected against the various diseases consequent upon the introduction of the revised schedule of vaccination and immunisation procedures towards the end of 1968.

Poliomyelitis Vaccination

Year	Primary vaccinations completed (by age, in years, at end of year)						Reinforcement doses given (by age, in years, at end of year)			
	Under 1	1–	2–	4–	8–	Total under 16	Under 4	4–	8–	Total under 16
1965	6,398	24,907	9,201	7,741	7,443	55,690	2,367	32,568	32,071	67,006
1966	6,029	20,893	4,157	5,635	9,633	46,347	1,397	18,182	10,029	29,608
1967	7,476	21,358	3,473	2,490	1,116	35,913	2,173	20,505	4,089	26,767
1968	7,454	22,181	3,908	2,724	895	37,162	3,648	25,396	6,782	35,826
1969	890	16,393	3,138	2,965	954	24,340	3,332	29,995	6,834	40,161

Diphtheria Immunisation

Year	No. who completed a full course of primary immunisation (by age, in years, at end of year)						No. who were given a reinforcement injection (by age, in years, at end of year)			
	Under 1	1-	2-	4-	8-	Total under 16	Under 4	4-	8-	Total under 16
1965	13,056	16,990	2,397	2,211	822	35,476	11,772	20,401	10,399	42,572
1966	13,006	17,744	2,492	2,781	1,088	37,111	13,621	22,959	11,391	47,971
1967	13,902	17,687	2,171	2,629	1,106	37,495	15,609	25,854	12,298	53,761
1968	12,240	18,589	2,443	2,590	1,166	37,028	17,475	28,313	10,875	56,663
1969	1,162	13,592	2,168	2,459	830	20,211	14,322	30,996	5,680	50,998

Whooping Cough Immunisation

Year	No. who completed a full course of primary immunisation (by age, in years, at end of year)						No. who were given a reinforcement injection (by age, in years, at end of year)			
	under 1	1-	2-	4-	8-	Total under 16	Under 4	4-	8-	Total under 16
1965	12,849	16,664	2,113	701	148	32,475	9,701	2,213	429	12,343
1966	12,684	17,301	2,231	867	188	33,271	11,065	2,436	348	13,849
1967	13,417	16,979	1,878	773	232	33,279	12,011	2,314	303	14,628
1968	11,780	17,720	2,037	838	163	32,538	13,331	3,057	377	16,765
1969	1,117	13,088	1,839	697	82	16,823	10,831	2,835	263	13,929

MEASLES IMMUNISATION.—The vaccination campaign against measles was severely affected when, as a precautionary measure in March, restrictions were placed on the use of one make of vaccine and as a result it was only possible to offer protection against the disease to susceptible children between four and seven years of age and to those between their first and seventh birthdays who were attending day nurseries and nursery schools or living in residential establishments. During the year 14,001 children in all had been protected compared with 30,910 in the previous year.

Corresponding particulars of immunisations against poliomyelitis, diphtheria, whooping cough and measles during 1969 are given by health divisions and delegate districts in Tables 17-20, pages 155 to 158 together with the numbers of primary immunisations and reinforcements performed by general practitioners in the course of private practice.

TETANUS IMMUNISATION.—Provision for protection against tetanus is included in the County Council's immunisation scheme and in the great majority of cases is given by means of the triple antigen incorporating protection also against diphtheria and whooping cough. A statement of the numbers of immunisations performed with the different antigens is given earlier in this section of the Report. In all, 20,980 children under 16 years of age at the end of the year were immunised against tetanus, 14,721 of them being under two years of age. In addition, 52,229 reinforcement injections were given.

Immunisation and Vaccination.—PERCENTAGES VACCINATED AS AT 31ST DECEMBER, 1969.—In the following table indices of acceptance of vaccination against the diseases specified are given as at the 31st December, 1969, for each health division and delegate district and for the Administrative County as a whole. Figures for the Administrative County for the four previous years are also given. In considering the acceptance rates for diseases other than smallpox regard must, however, be had to the effect of the introduction towards the end of 1968 of a revised schedule of ages for vaccinations and

immunisations which resulted in so delaying the commencement of immunisation and extending the period between doses as to make any legitimate comparison with the figures quoted for previous years impossible.

Health Division No.—	Percentages vaccinated			
	Smallpox	Poliomyelitis	Whooping cough	Diphtheria
	*Under 2 years	†Born in previous year	†Born in previous year	†Born in previous year
1	46	76	77	77
2	21	59	58	61
3	22	60	58	62
4	26	56	60	61
5	18	63	63	66
6	25	71	82	82
7	19	58	63	64
8	27	70	75	75
9	21	48	47	49
10	20	48	49	49
11	20	58	56	60
12	20	60	66	67
13	16	55	54	60
14	14	59	65	67
15	9	62	65	68
16	30	70	62	73
17	7	46	49	51
Delegate District—				
Crosby M.B.	23	51	54	55
Huyton-with-Roby U.D.	18	39	53	53
Middleton M.B.	14	39	43	48
Stretford M.B.	13	47	54	55
Administrative County—				
1969	20	57	59	61
1968	29	71	74	78
1967	30	65	70	73
1966	33	65	72	73
1965	29	68	70	71

* Children vaccinated during year at ages under two years, as percentage of live births during previous year.

† Children born in previous year and vaccinated at any time, as percentage of live births during that year.

The percentages for England and Wales comparable with those quoted in the table for 1969 were:—Smallpox 31, Poliomyelitis 65, Whooping Cough 66 and Diphtheria 67.

AMBULANCE SERVICE

Radio Communication Scheme.—The initial installation of radio equipment throughout the County ambulance service was completed in June, 1959, but due to local circumstances there are still one or two areas remaining where the deployment of vehicles is undertaken on a local basis rather than by control centres and at the 31st December, 1969, four stations still had telephone watches. As the S.T.D. network now covers those parts of the County area in which the four remaining telephone watch stations are situated, thereby reducing the cost of telephone calls to the control centres, it is hoped in the near future to incorporate the stations into the general control pattern.

Details of the five radio control areas, into which the County is divided, together with the location of the transmitter sites and control centres are given below.

Area No.	Health divisions covered	Fixed remote station site	Control centre
1	Parts of Divisions 1 and 2 plus the whole of Divisions 3 and 4	Barnacre	Broughton House
2	Divisions 5 and 6 and parts of Divisions 12 and 13	Hameldon	Accrington
3	Divisions 7, 8, 9 and 10	Billinge Beacon	Whiston
4	Divisions 11, 15, and 16	Winter Hill	Swinton
5	Divisions 14, 17 and parts of Divisions 12 and 13	Hebers	Whitefield

The radio equipment in use at the 31st December, 1969, was as follows:—

Fitted to:—	Mobile sets	*Installation parts
Operational vehicles	233	233
Reserve vehicles	4	60
H.Q. stores van	1	1
Supervisory cars	7	7
Major disaster vehicle	2	2
In reserve, at wireless workshops, etc.	16	24
	263	327

* Fixed equipment, e.g., aerials, cradles, etc.

The radio telephone link between emergency vehicles conveying patients to Preston Royal Infirmary and the casualty department of this hospital, which was installed in 1964 continues to be most successful and it is hoped to provide similar links with other hospitals.

REPLACEMENT OF RADIO EQUIPMENT.—It was agreed by the Health Committee in 1966 that a programme to replace the existing radio equipment, which was at that time over ten years old, costly to maintain and no longer conformed to the G.P.O. requirements, should be undertaken and phased over a period of two years. In accordance with this programme, delivery of mobile sets began towards the end of 1967 and by the end of 1969 the fitting of these sets was complete and the main station equipment installed.

Ground Communications.—PRIVATE TELEPHONE NETWORK.—At the end of 1969, forty-three of the 46 County ambulance stations were linked together by the private telephone network, and one of the three stations not connected into the network linked to an adjacent main station by a private wire.

TELEPHONE ANSWERING MACHINES.—The telephone answering machines installed at each of the five control centres continue to be used and consideration was given during the year to the installation at Broughton control of a device to record all emergency calls as they are received, but this was deferred due to continuing financial restrictions, although it is hoped to install such a device in the new control which is due for completion in the middle of 1970.

COMMUNICATION WITH HOSPITALS.—A number of the larger hospitals in the County are connected to either the control centres or ambulance stations by private wire. At the end of 1969 there were eight hospitals with this facility and transport officers on the staff of the County ambulance service were stationed at five of them. Because of the mutual responsibility of the hospitals and ambulance service in the removal of cases, the principle has been accepted whereby the hospital authorities and the County Council share the cost of these lines equally.

In addition to the foregoing eight private wires, Whiston control is linked to Whiston Hospital by an extension from the hospital's switchboard.

Agency Arrangements.—Whilst in the interests of efficiency and economy a direct service is provided wherever practicable, the following parts of the Administrative County were, at the 31st December, 1969, still served by agency agreements with the authorities indicated:—

Agency	Area served	Estimated population, 1969
Westmorland C.C. ...	North Lonsdale R.D. (part)—(Skelwith; Hawkshead; Claife)	1,340
Blackburn C.B.C. ...	Blackburn R.D. (part)—(Livesey; Pleasington; Mellor; Ramsgreave; Balderstone; Osbaldeston; Clayton-le-Dale; Salesbury; Wilpshire; Dinckley) ...	12,240
	Preston R.D. (part)—Samlesbury (part) ...	
Burnley C.B.C. ... (Emergency service only)	Burnley R.D. (part)—(Worsthorne; Cliviger; Habbergham Eaves; Dunnockshaw) ...	—
Bolton C.B.C. ...	Turton U.D. ...	20,320

The Construction (Health and Welfare) Regulations, 1966.—During the year notifications were received from contractors in respect of 22 sites in the Administrative County area.

When such notifications are received, arrangements are made for the supervisory assistants to visit the sites concerned and discuss with contractors the arrangements for summoning an ambulance if required and also to ascertain the precise locations of the sites and the most suitable means of access for ambulances.

The information is then notified to the control centres and ambulance stations concerned to ensure that if an emergency call is received, no delay will arise in reaching the scene of the accident.

Vehicles.—In addition to control of the fleet of ambulances and dual purpose vehicles the ambulance service is also responsible for the vehicles operated by other services administered by the health department, i.e., nursing, domiciliary midwifery, welfare, mental health, health education, etc.

The establishment and strength of vehicles operated by all services administered by the health department at the 31st December, 1969, were as follows:—

Service	Authorised establishment	Vehicle strength
Ambulance ...	313	307
District nursing ...	144	144
Domiciliary midwifery ...	23	23
Welfare ...	8	8
Health education ...	8	7
Divisional transport ...	14	14
Health Department (Admin.) ...	2	2
	<hr/> 512	<hr/> 505

Of the 505 vehicles operated by the health department, 307 belonged to the ambulance service fleet comprising the following types of vehicle:—

Ambulances—

One fixed stretcher with loading gear and an adaptable seat unit for six patients or a second stretcher	100
Two adaptable seat/stretcher bed units for two stretchers (carry-in load) or twelve sitting patients	33
One Fernoflex cot and one multi-posture trolley	26
Major incident control vehicles	2
Multi-purpose Land Rover ambulances	2

Dual-purpose ambulances—

Ten seats and capable of adaptation to one stretcher and two seats	2
Eight/nine seats and capable of adaptation to one stretcher and two/three seats	139
Long distance dual-purpose ambulances	2
Stores collection and delivery van	1
TOTAL	307

The average age of stretcher carrying ambulances at the 31st December, 1969, was 4.5 years and that of dual-purpose ambulances 1.8 years.

VEHICLE MILEAGES.—The gross mileage (*i.e.*, both operational and non-operational) of the ambulance service fleet in 1969 was 5,557,069—for the seventh successive year the highest total on record. It represented an increase of 145,224 or 2.7 per cent over that for 1968. Details of the gross mileages in 1969 and each of the preceding ten years are as follows:—

Year	Total annual mileage				Increase or decrease on previous year (per cent.)
	Ambulances	Dual-purpose vehicles	Sitting case cars	Total	
1959	2,419,107	890,897	1,213,644	4,523,648	+ 4.2
1960	2,574,418	1,182,384	968,834	4,725,636	+ 4.5
1961	2,525,350	1,327,180	716,122	4,568,652	— 3.3
1962	2,484,161	1,533,360	620,343	4,637,864	+ 1.5
1963	2,641,971	1,766,815	372,548	4,781,334	+ 3.1
1964	2,745,641	1,837,994	318,769	4,902,404	+ 2.5
1965	2,807,146	1,860,342	304,696	4,972,184	+ 1.4
1966	2,931,188	2,029,578	170,710	5,131,476	+ 3.2
1967	3,000,826	2,254,781	31,635	5,287,242	+ 3.0
1968	3,073,322	2,338,523	—	5,411,845	+ 2.4
1969	3,132,115	2,424,954	—	5,557,069	+ 2.7

DEVELOPMENT AND PURCHASE OF NEW VEHICLES.—Since the publication of the Millar Report in 1968 which recommended the development of a more suitable ambulance chassis, certain theoretical design work has taken place, but from a practical point of view the availability of an improved type of chassis specially designed for ambulance purposes does not appear to be much nearer.

A commercially developed ambulance chassis announced in 1968 and broadly conforming to the recommendations of the Millar Report is still undergoing development work and no information is available as to when it might go into production.

Studies are currently taking place in the Ambulance Services Advisory Council and a recently sponsored independent survey resulted in a design concept for a purely emergency type ambulance. Ambulance Services are therefore still reliant upon the adaptation of commercial type vehicles for ambulances and the recent withdrawal from production of certain types of chassis which had previously been widely used by ambulance authorities has further restricted the range available.

During 1968 orders were placed for 15 Bedford Hawson ambulances and 20 BMC LD5W ambulances. Due to production difficulties, the delivery of the Bedford Hawson chassis was seriously delayed, so much so that the chassis had to be eliminated from consideration for 24 further ambulances required in 1969, and as a result a further order was placed for 24 BMC LD5W ambulances, some equipped with a Fernoflex cot and a multi-posture trolley and others with two multi-posture trolleys.

The 1969 requirement for dual-purpose ambulances was again undertaken by the Transport Department using the BMC 250 JU mini-bus as the basic vehicle.

HEALTH SERVICE MOTOR VEHICLES.—Of the 198 vehicles, other than ambulance service vehicles, operated by the various health and welfare services at the end of the year, 167 were mini vans for the official use of district nursing and midwifery sisters. During 1969 the mini vans ran a total of 743,824 miles for official purposes, a decrease of 74 compared with the corresponding total for the previous year.

DIVISIONAL TRANSPORT SCHEME.—There was no change in the number of vehicles available within the health divisions, fourteen vehicles being in use during 1969.

WELFARE SERVICES VEHICLES.—Proposals to expand the fleet of specially built coaches for the conveyance of handicapped persons were approved during 1969, and resulted in the placing of a contract for five coaches. The vehicles will be luxury coaches equipped with 20 seats some of which will be removable to provide alternative space for up to four wheel-chairs. The nearside entrance is to be a patent lift/step arrangement which will enable a single entrance to be utilised for the combined purpose of loading wheel-chairs and steps for ambulant persons.

Staff.—The following table shows the approved establishment of operational and control room staffs together with the number employed on the 31st December, 1969.

	Approved establishment	Employed at 31st December, 1969
Operational staff (including station officers) ...	840	814
Control room staff:—		
Senior controllers ...	5	5
Controllers ...	25	25
Assistant controllers ...	20	20
Control room assistants ...	22	22

In April, 1969, the County Council approved certain recommendations relating to the establishment. The previous review of the establishment had been made in March, 1968, when the operational staff total was fixed at 797. It had been found that this establishment was not adequate to deal with the general increase in the demands on the service, and a considerable volume of regular overtime was being worked. The revised establishment raised the authorised number of staff to 840, an increase of 43.

APPOINTMENT OF OPERATIONAL STAFF.—Since 1961, it has been the policy of the County Council to recruit younger personnel to compensate for the high proportion of staff moving into the upper age groups, and this has resulted in a lowering of the average age.

This policy was continued during 1969, but there was no further significant improvement in the age structure. The situation is however kept under constant review.

TRAINING.—The new wage structure which was introduced on the 30th June, 1969, recognised the Millar type six-week and two-week courses of training for qualification pay purposes. As these courses cover the syllabus for the St. John First Aid Certificate and the whole of the subjects included in the Extended Training Scheme, it was decided that no useful purpose could be served by continuing training activities outside the recognised courses.

First Aid Certificate.—Although the new wage structure allows for the payment of 13s. 4d. per week for holders of a current First Aid Certificate, this allowance only affects new appointments who have not attended a Millar type course of training. Immediately the personnel concerned have completed a course satisfactorily the 13s. 4d. allowance is absorbed into the new rate of pay which is applicable to staff in this category.

Ambulance Service Training Centre.—At the commencement of 1969 training was in progress at the Ambulance Headquarters, Broughton, but following the acquisition of and adaptations to the former Civil Defence Headquarters, at Lea, near Preston, training was transferred to these premises on the 14th April, 1969.

The new wage structure referred to previously led to the introduction of two-week courses of training, the first one commencing on the 15th September, 1969. During the latter part of the year both six-week and two-week courses were held simultaneously and up to 42 students were in attendance at one time.

The following gives details of the number of students who attended courses during 1969:—

Type of Course	County Council Personnel	Personnel of Other Authorities	Total
6 week courses ...	83	15	98
2 week courses ...	100	43	143
TOTAL ...	183	58	241

Of the 241 students who attended the Training Centre only one did not complete the course satisfactorily.

County Council Ambulance Service Corps—St. John Ambulance Brigade.—The ambulance service is embodied as a Corps of the St. John Ambulance Brigade and on the 31st December, 1969, the strength of the Corps was as follows:—

Corps officers	Divisional officers	Other ranks	Total
1	47	660	708

EFFICIENCY COMPETITION.—The competition for the Alderman Lord Trophy for the year 1968/69 was won by Health Division No. 2. Second place was gained by Health Division No. 16 and third by Health Division No. 5.

NATIONAL SAFE DRIVING COMPETITION.—All eligible staff of the County ambulance service took part in the National Safe Driving Competition for 1969 and of the 754 drivers entered, awards were made to 568.

NATIONAL AMBULANCE SERVICE COMPETITION.—A team was entered in this competition which was accorded approval by the Department of Health and Social Security and is designed to encourage ambulance staffs to maintain a high standard of efficiency.

The area competition for the "Geere Cup" presented by Alderman J. W. Geere, J.P., was won by the Health Division No. 11 team which went forward into the regional competition gaining seventh place out of a total of fourteen entrants.

Premises.—The number of ambulance stations in use at the 31st December, 1969, was as follows:—

Main stations at radio control centres	...	...	...	5
Main stations (full time service with 24 hour telephone watch)	...	...	...	4
Depots (full time service without telephone watch)	...	...	...	33
Garages (day or alternating shift service only without telephone watch)	...	...	...	4
				—
				46
				—

Although work was in progress during the year on two new ambulance stations which will replace existing stations housed in adapted premises, no new station was opened in 1969. Adaptations and extensions were however completed in July, 1969, to the Clitheroe Ambulance Station to bring it up to a reasonable standard, and to obviate the need to use accommodation in the adjacent fire station.

As mentioned earlier the former Civil Defence Headquarters at "Westleigh", Lea, nr. Preston, was opened in April, 1969, as an Ambulance Service Training Centre. There is residential accommodation for 21 students, tutorial accommodation, dining room, instructors offices, kitchen accommodation, and training areas.

Service Statistics.—The cases dealt with by the County ambulance service fall into three broad groups and in the table below the case totals for the past five years are analysed accordingly:—

Year	Section 27 cases			Cases chargeable to other departments of the County Council	Total cases
	* Emergency	† Non-urgent	Total		
1965	57,365	870,453	927,818	55,073	982,891
1966	58,148	883,721	941,869	58,960	1,000,829
1967	61,414	928,691	990,105	56,724	1,046,829
1968	62,736	945,346	1,008,082	47,290	1,055,372
1969	65,453	959,573	1,025,026	43,473	1,068,499

* Includes National Coal Board cases. † Excludes certain day care cases transported by taxi.

The above table indicates that there has been an increase in the total number of cases conveyed under the provisions of section 27 of the National Health Service Act, 1946, which is mainly the result of a further increase in the number of non-urgent removals. With the exception of the year 1965 when there was a slight decrease, the demand on the ambulance service for conveyance of general treatment cases has risen steadily since the year 1957.

With regard to emergency cases a further rise of 4.3 per cent. took place in 1969 as compared with 2.2 per cent. in the previous year, and this was mainly attributable to an increase in road accident cases in 1969 of 3.6 per cent. compared with the previous year.

In addition to dealing with the above-mentioned cases, certain journeys were made which, whilst of an emergency nature were strictly not "emergency cases" under section 27 of the Act, namely (a) emergency transport of midwives, doctors, medical specimens, etc., and (b) journeys where it was found that a vehicle was not required. During the year under review, 5,770 such journeys were made and these are not included in the total of 65,453 cases given in the table.

The response to emergency calls for the County as a whole was very satisfactory, the average time taken to reach the scene of an emergency from the time of receipt of call being 7.7 minutes, the highest station average being 13.3 minutes and the lowest 5.1 minutes. Journeys to hospital averaged 23.5 minutes from the time of call, the highest station average being 56.3 minutes and the lowest 17.4 minutes. This highest station average is in respect of Grange-over-Sands ambulance station, where emergency cases have usually to be taken a considerable distance to hospital.

Regarding cases moved on behalf of other departments of the County Council, *i.e.*, outside the provisions of section 27 of the National Health Service Act, a decrease equivalent to 8.1 per cent. took place during the year. This was mainly accounted for by a reduction in the number of cases moved on behalf of welfare services, an increasing number of which were conveyed in the specially adapted coaches attached to health divisions.

A summary of the average time factor in dealing with emergency calls over the last five years is reproduced below:—

Year	Number of journeys	Average time taken to reach case (mins.)	Average time taken to reach hospital (mins.)
1965	54,268	7.8	22.9
1966	55,115	7.7	22.9
1967	58,400	7.7	23.1
1968	59,843	7.6	23.2
1969	62,204	7.7	23.5

The numbers of cases moved per 1,000 population served during each of the last five years were as follows:—

Type of case	1965	1966	1967	1968	1969
Emergency ...	25.0	24.9	26.0	26.2	26.6
Non-urgent ...	402.8	403.6	416.7	414.4	408.2
TOTAL	427.8	428.5	442.7	440.6	434.8

In the following table the patients carried during 1969 are analysed according to type. Recumbent cases are those requiring a stretcher, sitting I cases are patients able to travel with the help of one attendant only and sitting II cases are those requiring the assistance of two attendants.

Type	Proportion (per cent.) of—		
	Emergency	Non-urgent	Total cases
Recumbent	60	8	11
Sitting I	29	73	71
Sitting II	11	19	18

LONG DISTANCE SERVICE.—The table below gives particulars of the work of the headquarters long distance service during each of the five years 1965-69:—

Year	Cases moved			Case mileage (road journeys only)
	By road	By rail	Total	
1965	4,809	979	5,788	170,948
1966	5,172	818	5,990	219,968
1967	5,367	866	6,233	220,878
1968	5,921	588	6,509	249,556
1969	6,046	573	6,619	256,553

In addition, long distance road journeys were made by vehicles from the Accrington, Whiston, Swinton and Whitefield areas and these are summarised below:—

<i>Radio Control Area</i>	<i>Patients moved</i>	<i>Mileage</i>
Accrington	140	4,709
Whiston	249	7,416
Swinton	185	4,383
Whitefield	569	22,048

The total number of long distance patients moved by road during 1969 amounted to 7,189 and involved a mileage of 295,109. With regard to the 573 rail journeys, the ambulance service was required to pay the cost of the patient's fare on 351 occasions. In every case, however, arrangements for the journey, including the reservation of seats and the reception of patients at rail termini, were made by the ambulance service. Most of the patients travelling by rail were accompanied by a relative or friend but ambulance service escorts were provided on six occasions. In addition, the County Council is indebted to the British Red Cross Society, which rendered valuable assistance by providing escorts on 58 journeys.

It will be noted that recent years have shown a decrease in the use of rail transport. This is attributable to the curtailment of railway services, the growing use of diesel and similar stock, which has greatly reduced the availability of reserved compartments and more recently to the introduction of substantial charges for the reservation of compartments. In consequence, it is becoming necessary to revert to road transport for a growing number of journeys, particularly where stretcher patients are concerned.

It should also be appreciated that a proportion of the work of the long distance service relates to intra-county removals, *i.e.*, patients from the County area who requires transport to hospitals within the geographical County, but who are situated some considerable distance from those hospitals. Whenever it is possible to co-ordinate a number of such journeys, the use of rail transport is uneconomical. In many cases, however, subject to the consent of the doctor or hospital in charge of the patient, and providing a reasonable train service is available, combined rail and road transport is used.

NATIONAL HEALTH SERVICE (AMENDMENT) ACT, 1957.—Under the provisions of the above-mentioned Act, ambulance authorities are empowered to undertake duties, on a chargeable basis, which do not fall within the scope of section 27 of the National Health Service Act, 1946. The duties include the provision of stand-by cover at sports meetings and other large gatherings of public bodies, the conveyance of private individuals for holidays, and certain house-to-house removals of a temporary nature, etc. The provision of such facilities is, of course, made only in cases where the necessary arrangements can be carried out without prejudice to the normal running of the County ambulance service.

In this connection, vehicles from County ambulance stations were in attendance at sporting or race meetings on 57 days during the year.

OPERATIONAL MILEAGE.—The following table shows the operational mileage run by the ambulance service during the last five years. The expression "operational mileage" includes the total mileage covered in respect of (a) cases conveyed under section 27 of the Act, (b) chargeable journeys undertaken on behalf of other County services and (c) certain special journeys referred to earlier which were outside the scope of section 27, but does not include "dead" mileage run for maintenance and similar purposes.

Year	Total operational mileage	Section 27 cases	
		Mileage	Average miles per case
1965	4,914,057	4,738,605	5.11
1966	5,069,035	4,882,236	5.18
1967	5,219,280	5,023,434	5.07
1968	5,332,042	5,144,964	5.10
1969	5,496,804	5,468,560	5.10

With regard to journeys undertaken on behalf of other County services, particulars for each of the last five years are given below. The mileage run on behalf of the National Coal Board and chargeable to that authority is also shown for record purposes although both mileage and cases dealt with are included in the above statistics as removals under section 27.

Service	Mileage				
	1965	1966	1967	1968	1969
Mental health	36,018	34,095	35,225	33,635	32,057
Nursing	12,226	17,779	23,011	17,456	21,691
School health... ..	15,226	15,359	16,559	20,206	18,790
Welfare	89,052	95,267	93,746	88,820	84,022
Coroner's	270	210	262	245	133
TOTAL—Other County services ...	152,792	162,710	168,803	160,362	156,693
National Coal Board	14,134	11,704	10,027	7,177	6,602

PREVENTION OF ILLNESS, CARE AND AFTER-CARE

The functions of the County Council relating to the prevention of illness and the care and after-care of sick persons formerly carried out in accordance with approved schemes made under Part III of the National Health Service Act, 1946, are now exercised under section 12 of the Health Services and Public Health Act, 1968. So far as the Municipal Boroughs of Crosby, Middleton and Stretford and the Urban District of Huyton-with-Roby are concerned, however, these functions, excepting those concerned with the care and after-care in residential accommodation of persons suffering from mental illness, have been delegated to the councils of those districts.

Tuberculosis.—Work in regard to the prevention of tuberculosis and the care and after-care of cases continued on the same lines as set out in previous reports. During 1969 chest physicians, employed by Regional Hospital Boards, working in close co-operation with the County Council's medical and health visiting staff carried out 312 home visits to new patients and contacts and 209 home visits to old cases and contacts. Tuberculosis visitors and health visitors made 15,058 visits to cases and 18,754 visits to contacts. The number of tuberculous households visited was 7,504.

MASS RADIOGRAPHY.—Mass radiography units operated by the Manchester and Liverpool Regional Hospital Boards visited a number of districts both in the County area and in County Boroughs at which County residents were able to attend.

Towards the end of the year a copy of a memorandum (HM (69) 97), which was sent to all regional hospital boards, was received from the Department of Health and Social Security. This memorandum reviewed the present effectiveness of the service and suggested that the general need for mass radiography of the chest no longer existed. Hospital boards were asked to consider in consultation with local health authorities how the need for chest x-ray services in their region could best be met, with a view to integrating any remaining mass miniature radiography units with hospital radiography departments. At the end of the year the matter was still under consideration.

VACCINATION AGAINST TUBERCULOSIS—Contacts.—B.C.G. vaccinations of suitable contacts of cases of tuberculosis infection are carried out by chest physicians on behalf of the County Council. The following statement shows the numbers of such persons examined and tested for suitability for B.C.G. vaccination and the numbers actually vaccinated during the last five years:—

	1965	1966	1967	1968	1969
Number of persons tested for suitability for B.C.G. vaccination	2,228	2,487	2,504	2,347	2,081
Number of persons vaccinated	2,309	2,501	2,525	2,330	2,258

School children.—The County Council's proposals made under section 28 of the National Health Service Act and now exercised under section 12 of the Health Services and Public Health Act, 1968 provide for B.C.G. vaccination to be offered to (i) school children who are approaching 13 years of age or are older and (ii) students attending universities, teacher training colleges or other establishments of further education.

During 1961 the then Ministry of Health approved an extension of this scheme so that at the discretion of the local health authority B.C.G. vaccination may be offered to school children aged ten years or more. It is not expected that any general extension on these lines will be necessary but it will enable appropriate steps to be taken immediately in any area where the need for early B.C.G. vaccination might arise.

The following table summarises the results of B.C.G. vaccination programmes completed at schools during 1969 and the previous four years and similar information for each health division and delegate district for 1969 is given in Table 21, page 159.

Year	No. of schools	No. of parents' consent forms				No. of children					
		Sent to parents	Returned			Tuberculin test performed	Tuberculin test positive		Tuberculin test negative		Vaccinated with B.C.G.
			Refused	Consented			No.	% of tests read	No.	% of tests read	
				No.	% of forms sent						
1965 ...	222	23,924	4,538	18,130	75.8	17,142	2,307	13.9	14,334	86.1	14,021
1966 ...	232	26,256	4,375	20,693	78.8	19,225	2,485	13.3	16,132	86.7	15,883
1967 ...	221	24,981	3,992	19,615	78.5	18,201	2,105	12.0	15,417	88.0	15,298
1968 ...	229	28,855	4,027	23,450	81.3	21,467	2,485	11.9	18,455	88.1	18,183
1969 ...	221	28,633	3,939	23,226	81.1	21,783	1,827	8.7	19,091	91.3	18,889

PROTECTION OF CHILDREN FROM TUBERCULOSIS.—In October, 1967, the Home Office and the then Ministry of Health issued recommendations regarding the protection of organised groups of children against the risk of infection by adults suffering from tuberculosis. These recommendations have been adopted by the County Council and applied in regard to staff employed or to be employed with groups of children who are the responsibility of the Health, Education or Children's Committees. Full details of the recommendations and of the types of personnel included in the arrangements made by the County Council have been given in previous reports.

Teachers and other staff in schools (apart from school meals staff) have in the past not been required to undergo periodic x-ray examinations, but following the issue of circular 3/69 by the Department of Education and Science, the County Education Committee resolved to adopt the recommendation contained in paragraph 3(ii) of that circular, that teachers and other adults whose work brings them into contact with school children should have an x-ray examination of the chest at three-yearly intervals.

Illness Generally.—Prevention, care and after-care in relation to illnesses other than tuberculosis are perhaps less specific and follow different lines.

MENTAL ILLNESS.—The prevention, care and after-care of mental illness is undertaken in accordance with the County Council's scheme for the provision of a mental health service which is dealt with fully later in this report.

CERVICAL CYTOLOGY.—In 1965 the Health Committee considered the possibility of providing facilities for a screening service for women who are at risk of cancer of the cervix. The responsibility for examining slides of smears taken from such women had been placed on Regional Hospital Boards and it was decided that the County Council, in conjunction with the appropriate Regional Hospital Board, should provide a cervical cytology service.

The service is available throughout the County, and at the end of the year 72 clinics were in operation. The following table shows the results of the work done in 1969:—

	Age group (years)						Total all ages
	Under 20	20—	30—	40—	50—	60—	
No. of first smears taken ...	64	3,447	5,373	4,039	1,502	277	14,702
No. of repeat smears requested ...	2	182	445	381	122	19	1,151
No. of positive smears ...	—	8	19	28	7	1	63
No. of positive smears per 1,000 screened ...	—	2.4	3.5	7.0	4.7	0.4	4.3
No. of cases referred to G.P.'s for other conditions ...	15	388	655	529	157	23	1,767

A summary of results since 1966 is given below:—

Year	No. of first smears taken	No. of repeat smears requested	No. of positive smears	No. of positive smears per 1,000 screened	No. of cases referred to G.P.'s for other conditions
1966	9,684	395	44	4.5	1,104
1967	18,777	1,387	79	4.2	2,176
1968	15,124	1,129	81	5.4	1,938
1969	14,702	1,151	63	4.3	1,767

VENEREAL DISEASE.—Arrangements are in being whereby, at the request of the hospital authorities, follow-up of persons under treatment for venereal disease is undertaken by the County Council's medical officers or health visitors. Local health authority activity in this field is, of course, mainly dependent upon the venereologist for its initiation in any particular case.

The following table, compiled from returns supplied annually by medical officers of treatment centres, analyses by conditions the number of County residents attending such centres for the first time in each of the last five years:—

Year	No. found to be suffering from—			
	Syphilis	Gonorrhoea	Other conditions (incl. non-venereal)	Total— all conditions
1965	92	653	2,537	3,282
1966	89	843	2,717	3,649
1967	(a) 37 (b) 63	994	2,750	3,844
1968	(a) 17 (b) 46	998	2,769	3,830
1969	(a) 35 (b) 38	1,175	3,671	4,919

(a) Primary and secondary, (b) other.

OTHER TYPES OF ILLNESS.—General arrangements also exist whereby the hospital authorities notify the County Council of the discharge of all patients who are in need of after-care. This enables the health visiting and nursing staff to carry out home visits in such cases and call into action any of the other social services which may be considered to be of assistance to the patient. Action is also initiated on the reports of medical practitioners, midwives, home nurses and other health officers on circumstances disclosed during the course of their duties.

Arrangements exist for emergency night attendance in appropriate cases of persons who are seriously ill and an evening attendance service for visiting solitary chronic sick people.

Towards the end of 1961 the County Council agreed to administer a day and night nursing and night sitter service for cancer cases, financed by the Marie Curie Memorial Foundation. Its main purpose is to assist the relatives of patients to obtain adequate rest periods from the responsibility of nursing, in addition to caring for those who live alone. During 1969 assistance was given in 187 cases.

CONVALESCENT HOME CARE.—Arrangements for the convalescence of general cases have been made with convalescent homes in the northern part of the country to accept cases from the Administrative County. In addition to facilitating the convalescence of general cases, provision is also made in the County Council's scheme to enable young children to be sent away from home owing to the presence there of a person suffering from tuberculosis.

During 1969 there were admitted to convalescent homes 176 individuals compared with 169 in 1968. The following statements give particulars of the admissions:—

Adults admitted to Convalescent Homes

Name and address of home	Male	Female
Binswood Red Cross Home, Didsbury	—	1
Blackburn and District Convalescent Home, St. Annes	10	12
Delton, Blackpool	4	7
Evelyn Devonshire Red Cross Home, Buxton	8	7
Grey Court, Hest Bank	4	8
Heath Memorial Convalescent Home, Llanfairfechan	16	—
Horncliffe Convalescent Home, Blackpool	—	1
John Braddock Convalescent Home, Colwyn Bay	1	—
Lady Forester Convalescent Home, Llandudno	1	—
Lear Home, West Kirby	—	35
Mary Bamber Convalescent Home, Rhos-on-Sea	—	1
Progress Hotel, Blackpool	1	—
Seabright, St. Annes	7	32
St. Tudno, Llandudno	—	1
Sutcliffe Rhodes Lodge, Southport	1	5
TOTAL	53	110

Unaccompanied Children under School Age admitted to Convalescent Homes

Name and address of home	Male	Female
Ormerod Home, St. Annes	2	2
West Kirby	4	1
TOTAL	6	3

Mothers accompanied by children admitted to Convalescent Homes

Name and address of home	Mother with one child
Grey Court, Hest Bank	2
TOTAL	2

The use made of the convalescent care scheme during the past five years is shown in the following statement of annual admissions to convalescent homes:—

	1965	1966	1967	1968	1969
Adults	198	149	187	149	163
Unaccompanied children under school age	13	23	17	16	9
Mothers accompanied by children—					
Mothers	2	—	7	2	2
Children	3	—	8	2	2
TOTAL	216	172	219	169	176

Because of a reduction in the number of convalescent home places available in recent years, it has been necessary to limit admission to persons under 70 years of age and cases recovering from acute illness or acute exacerbations of chronic illnesses.

NIGHT AND EVENING HELPS.—The County Council's arrangements for a night attendance service and an evening visiting service continued under the same conditions as set out in previous reports.

The following table shows the extent of these services for 1969 compared with the previous four years:—

Year	Night helps		Evening helps	
	No. of cases	No. of night attendances	No. of cases	No. of evening visits
1965	313	2,595	135	5,997
1966	247	1,745	69	4,887
1967	304	2,446	98	6,290
1968	220	1,587	95	5,142
1969	191	1,100	108	5,033

LOAN OF NURSING EQUIPMENT.—The County Council provide equipment such as special beds, mattresses, pillows and items of nursing equipment for loan, free of charge, to patients being nursed in their own homes. Requests for equipment to be provided are generally made by hospitals, general practitioners or district nurses. The St. John Ambulance Brigade, the British Red Cross Society and other voluntary organisations also provide equipment on loan and in a number of areas mutual arrangements have been made with these organisations.

Stocks of equipment provided by the County Council are held by district nursing sisters, County Council clinics and ambulance stations as determined by local needs and facilities. On account of the highly specialised treatment involved, special arrangements are made for the accommodation of patients suffering from paraplegia on discharge to their homes from hospital. The district nursing sister and her supervisor visit the patient in hospital and obtain first-hand information of nursing methods and equipment suited to the individual. Necessary equipment is then supplied to the patient's home under the supervision of the district nursing sister.

LAUNDRY SERVICE.—The care and after-care services include the provision of a free laundry service for bedding and night clothing of persons urgently needing such assistance. It is limited to areas where suitable arrangements can be made with hospital laundries but now covers the major part of the County. Bedding is provided on loan and is normally collected, laundered and returned to the patient twice weekly.

On average three sets of bedding are required for each case, each set being made up of two sheets, four draw sheets and two pillow cases. Transport has been arranged by agreement with local councils, the W.R.V.S. and with private contractors.

Where appropriate, disposable incontinence pads as a supplement or, in some cases, an alternative to the normal laundry service are provided by the County Council. Some form of service can therefore be made available in all divisions. Protective pants and interliners are also provided for some incontinent patients who are able to be dressed during some part of the day.

The service which was given during 1969 comprised 646 cases where normal laundry was provided, 325 cases where normal laundry was supplemented by the supply of incontinence pads and 2,187 cases where incontinence pads only were supplied.

Problem Families.—Following the recommendations of the working party set up in 1963 to consider the system of co-ordinating the work of the Health, Children's and Education Departments in connection with problem families and families with problems, the initiative now rests with each department and its staff to bring cases forward for discussion with other departments, particularly when there appears to be the need for a case conference to be held as distinct from informal consultation on any particular aspect of a case, and no one officer is responsible for convening conferences and co-ordinating work with families needing help.

Any officer actually concerned with a family in need of help may initiate a case conference with the appropriate officials of other departments and bodies as and when necessary. The senior officers of the three departments at area or divisional level may initiate discussions at their discretion on matters of policy arising within the work with families in need of help or advice. The discussions may take place at area/divisional level or district/sub-district level.

The services provided by the County Health Committee to deal with these families include:—

- (a) Health visiting.
- (b) Mothercraft training.
- (c) Use of specially selected home helps and loan of kitchen equipment.
- (d) Provision of day nursery accommodation.

(a) *Health Visiting.*—Experience shows that the health visitor can play a most important part in the preventive aspect of work with these families as she is the only worker who regularly goes into all homes where there are children. She is in a particularly good position to see the early signs of deterioration and is often able to take appropriate action to help the family in the early stages. This is true preventive work and as such is extremely difficult to record for statistical purposes. The County Council health visitors spend a considerable amount of time on work with problem families and potential problem families and this often goes on for years before much improvement can be seen.

(b) *Mothercraft Training.*—In certain cases mothercraft training may prove most valuable in the rehabilitation of the family. It is, however, most important that the training should be introduced as part of a larger plan for dealing with a family and when the mother returns home further help will be required to ensure that the lessons learnt in the period of training are put into practice.

The County Council send mothers for training to the Brentwood Recuperative Centre, Marple, Cheshire, which is administered by the Community Council of Lancashire and has been used continuously for a number of years. In addition arrangements are occasionally made with probation officers for the accommodation of mothers and children at the Elizabeth Fry Home, York.

Details of mothers and children sent by the County Council to Brentwood during the past six years are given in the following statement:—

Year		Mothers		Children	Year		Mothers		Children
1964	...	8	...	30	1967	...	12	...	34
1965	...	3	...	12	1968	...	8	...	31
1966	...	5	...	21	1969	...	3	...	12

(c) *Use of Specially Selected Home Helps and Loan of Kitchen Equipment.*—The County Council's approved arrangements now exercised under section 12 of the Health Services and Public Health Act, 1968, provide that such steps as are considered necessary will be taken to prevent physical neglect or risk of mental illness of children or the break-up of problem families or potential problem families. Such steps may include the use of specially selected home helps to work with the mother in her home to teach her housecraft.

Normally a charge is made for a home help in accordance with the family income but in these special cases the divisional health committee, at their discretion, may reduce the assessed charges or waive them altogether for a period of five weeks subject thereafter to a review each month in cases where it is considered that the supply of home help would be a major contribution to meet the problems of the family. The divisional health committee may decide subsequently that the charge should be increased, by stages if necessary, up to the full amount that would normally be paid in accordance with the assessment scale.

(d) *Provision of Day Nursery Accommodation.*—Children of problem families are regarded by the County Council as coming within the priority groups for admission to day nurseries and provision is made in the assessment scales regulations whereby the fee normally payable on the basis of family income can be reduced or waived altogether if the circumstances warrant such a course.

In addition, family unit accommodation is provided under the National Assistance Act, 1948, to deal with evicted families. Further reference to this work is made on page 94 of this report.

Chiropody Service.—This service, now provided under section 12 of the Health Services and Public Health Act, 1968, continued on the same lines as previously reported.

In 1969 the number of patients treated fell slightly compared with the previous year (the qualifying age limit for women was raised from 60 years or over to 65 years or over as from the 1st October, 1968) although the total number of treatments increased. This meant that the normal frequency of treatment of once in eight weeks, as decided by the Health Committee, was almost attained. The number of clinic premises used for chiropody sessions in the service provided directly by the County Council remained much the same—180 at the end of 1969 compared with 189 at the end of 1968.

A comparison and summary of the direct and indirect services for 1969 is given in the table below together with the totals of patients and treatments provided in each of the last four years. Detailed statistics for each area are given on pages 160 and 161, Table 22 covering the services provided directly by the County Council and Table 23 the services provided by voluntary associations.

Category of patient—	Chiropody service provided—					
	Directly by County Council		By voluntary associations		Totals	
	Patients	Treatments	Patients	Treatments	Patients	Treatments
Elderly persons ...	47,053	223,141	10,120	47,378	57,173	270,519
Handicapped persons ...	830	3,287	71	249	901	3,536
Expectant mothers ...	53	75	1	1	54	76
TOTAL ...	47,936	226,503	10,192	47,628	58,128	274,131
<i>Place of treatment—</i>						
Clinics ...	27,614	135,364	4,022	17,929	31,636	153,293
Surgeries ...	832	4,521	3,582	18,950	4,414	23,471
Homes for the elderly ...	3,421	13,514	5	20	3,426	13,534
Patients' homes ...	16,069	73,104	2,583	10,729	18,652	83,833
TOTAL ... 1969 ...	47,936	226,503	10,192	47,628	58,128	274,131
... 1968 ...	47,996	214,885	10,933	50,226	58,929	265,111
... 1967 ...	43,639	191,354	13,286	62,104	56,925	253,458
... 1966 ...	39,713	174,927	13,892	63,750	53,605	238,677

On average the number of treatments given per patient in the year 1969 was 4.8 to those attending clinics, 5.3 to those attending surgeries, 4.0 to those in homes for the elderly and 4.5 to patients treated at home.

Health Education and Propaganda.—In November 1969, the Health Education Unit moved from temporary premises at Waterloo Road, Preston, to specially designed purpose-built accommodation at the East Cliff County Offices. This new accommodation, which includes photographic and design studios and a fully equipped wood and metal working shop, has greatly facilitated the design and production of health education display material.

In all aspects of the unit's work there has been an increase in volume over the previous year.

The film library was extended by the purchase of a further nine new films with titles including "Motherhood", "Your Skin", "Understanding Stresses and Strains" etc., and to meet additional demands, duplicate copies of existing film titles were bought. The loan service to schools of films for projection on the school projector has been expanded and is limited only by the number of film copies available for screening. Over 600 film shows were given by health education projection staff during the year and more than 1,500 issues on loan made from the film library.

The demand for posters and pamphlets continues to increase and some 800,000 pamphlets and 45,000 posters were supplied to health divisions for distribution in health centres, clinics, etc. Sixteen major exhibitions were staged in various parts of the County during the year, including topics on "Care of the Teeth", "Health Services", "Mental Health", and "Smoking and Health". All exhibitions were well attended and the material well received. An extension of this service is that during the winter months the various stands from these exhibitions are available to schools and adult groups for use in topics or similar health education campaigns.

Dental health continues to form a major part of the service with continued visiting of primary and junior schools by the Happy Lion Caravan featuring a programme for the 5 to 8 year olds. The mobile unit is equipped with puppet theatre using hand and stick puppets and a slide projector, 16 m.m. projector and tape recorder. It has visited some 36 schools and been seen by some 7,500 children. The dental health exhibition for 7 to 11 year olds was staged on six occasions when some 22,700 children and 2,000 adults attended.

The development of health education services in schools continues to increase with the programmes operated on the principle that the teachers are health educators. Provision is made for help in the planning of a suitable syllabus, access to suitable material, the supply and creation of special material and such help as may be required for the completion of the series. The service to schools allows for full planning consultation with head teachers and staff to allow for regular teaching periods each week to last for the whole of the academic year. The importance of continuity and planning in topics and material cannot be too heavily stressed. Visual aids and other material available to schools includes exhibition stands, topic material, film strips and loops, 16 m.m. cine films, models, charts and specially prepared panels and stands. In secondary and grammar schools and colleges of further education, the work is mainly directed on the "Life Science Topics" including work for the C.S.E. and G.C.E. 'O' level in Health Education and Human Biology. The service for school leavers for their final term includes a course of seven lectures/discussion including "Smoking and Health", "Sex Education", "Venereal Diseases" and "Personal Relationships". The demand for this service increases rapidly as head teachers pass on to their colleagues the success of this type of venture in their schools.

With the establishment of a comprehensive health education service to secondary schools, it is hoped that more time can be given to the development and creation of a similar service to the primary and junior schools. Work is in hand on the production of teaching material for use in the primary school, and the basis of this will be the formation of good health habits. The material will be available for use in primary schools in 1970.

Work in youth clubs continues to expand and the demand is greater than can be met from present resources. As an experiment, youth clubs in some areas have attended together at a central venue to prevent duplication of meetings. During the year more than 30 meetings were held in clubs, including talks on "Maturity", "Personal Relationships" and "Growing Up". An exhibition was provided at the Lancashire Youth Conference held in Lytham administering services which the health education unit can make available for youth organisations.

Due to shortage of staff it has not been possible to maintain the work amongst Home Safety Committees or to increase the number of these Committees. None the less a large amount of Home Safety propaganda has been carried out with the provision of home safety exhibitions, campaigns and safety weeks. Venues have included local town halls, factory premises, at which joint exhibitions have been staged with the Fire Service, Ambulance Service, etc. The unit participated in a safety exhibition at the Royal Lancashire Show from the 29th to the 31st July, and a Home Safety conference was held at East Cliff County Offices during November with the theme "Training for Home Safety".

Four major home safety mobile trailers were designed with themes of "Spring into Home Safety This Year", "Learn to Swim", "Guy Fawkes" and "Safety at Christmas".

The supply of topics and portable equipment to clinics and health centres has continued, featuring amongst other subjects immunisation and child welfare. Special design display and pamphlet material has been created to deal with specific topics including immunisation, head lice and scabies. Some 70 flasher boxes were constructed and installed in libraries in the area of the Administrative County, providing for a regular display of posters and health education material to the public.

HOME HELP SERVICE

The total number of cases attended during 1969 again showed an increase although, due to difficulty in recruitment in some areas, the total of home helps employed (whole-time equivalent) did not materially change. In consequence, as illustrated below by the analysis for a week in the December quarter of each of the years 1965 to 1969, the trend showing a reduction in the number of hours per case was continued.

Service Statistics.—The statement below shows for the Administrative County as a whole the number of home helps employed at the 31st December of each of the last five years, together with their whole-time equivalents and the number of instances by type of case in which home help was provided in each of those years.

Year	Home helps employed at 31st December		No. of cases for which home help was provided during the year for—							Total cases attended per 1,000 population
	Total	Whole-time equivalent	Problem families	Confinements		Tuber- culosis	Chronic sick and elderly & infirm	Illness and others	Total	
				At home	Away from home					
1965	4,054	2,102	16	611	223	109	21,898	1,614	24,471	10.5
1966	4,181	2,269	27	537	182	106	22,607	1,604	25,063	10.6
1967	4,399	2,370	23	432	202	84	24,396	1,626	26,763	11.2
1968	4,522	2,355	21	302	226	84	25,918	1,557	28,108	11.6
1969	4,520	2,379	21	229	188	67	27,140	1,649	29,294	11.9

Table 24, page 162, gives for the year 1969 a detailed breakdown of the case totals and shows for each health division and delegate district the number of cases attended, distinguishing where appropriate between cases aged under 65 years and those aged 65 years and over, the proportion each category of case forms of the total of patients cared for and the ratio of cases attended to population served.

The following table shows the total number of cases and hours of service provided during corresponding weeks of the December quarter of the last five years.

Year	Total cases attended during the week	Total hours of service provided	Hours per case
1965	15,666	88,267	5.63
1966	16,508	90,757	5.50
1967	17,868	94,794	5.31
1968	18,713	94,188	5.03
1969	19,699	95,141	4.83

In four selected weeks of the year (normally the 11th week of each quarter) a survey is undertaken of the amount of help provided for each category of case and Table 25, page 163, reproduces the resultant analysis for the December quarter, 1969, and gives comparative totals for all case categories combined for the corresponding week in the December quarter of the previous year. The pattern of the supply of home help is clearly defined. Of the 19,699 cases attended, 18,107 or 92 per cent. were persons aged 65 years and over and these cases received 86,786 hours or 91 per cent. of the total amount of help provided during the week (95,141 hours). Not shown in the table is the fact that 18,109 cases either lived alone or lived with another person incapable of housework. The table also illustrates the distribution of help to the ten categories of cases both as regards the number of days of the week on which help was provided and the degree of service involved.

MENTAL HEALTH

Whilst the Mental Health Act, 1959, forms a large part of the framework shaping the relationship between the mentally disordered and those agencies charged with their care and treatment, the facilities provided by local health authorities in performing their duties relating to prevention, care and after-care now depend upon powers derived from the Health Services and Public Health Act, 1968. Section 12 of the latter Act enables local health authorities to provide residential accommodation, training establishments and other ancillary or supplementary services for the prevention of all types of illness, including mental disorder, and for the care and after-care of persons suffering from illness.

At the end of the year under review 10,128 mentally disordered children and adults were in the care of the County mental health service, an increase of 129 on the previous year. The total of 10,128 comprised 5,123 mentally ill, 4,646 subnormal or severely subnormal and 359 elderly mentally infirm. The extent to which, and the manner in which, the County Council are dealing with demands on this scale may be seen in some detail in the succeeding paragraphs, but Table 27 on page 165 provides a concise analysis of those in care and of the provision made for them.

Staff.—MEDICAL OFFICERS.—During the year a further nine of the County Council's medical officers obtained one of the qualifications governing the examination of subnormal children specified in the Medical Examination (Subnormal Children) Regulations, 1959, and most of the medical staff now hold a qualification specified under these regulations. At the end of the year 30 County Council medical officers and 160 other medical practitioners were approved under section 28 of the Mental Health Act, 1959, to make medical recommendations concerning mentally disordered persons.

CONSULTANT PSYCHIATRISTS.—It is the joint policy of the County Council and the Manchester and Liverpool Regional Hospital Boards to establish close liaison between the County Council's Mental Health service and the hospital services. To this purpose the hospital consultant psychiatrists, three of whom are part-time members of the County Council's staff, are available to advise mental welfare officers in the performance of their duties.

MENTAL WELFARE OFFICERS.—The total number of qualified mental welfare officers employed at the end of 1969 was 79, including 6 psychiatric social workers. Fifty seven were qualified by possessing an appropriate degree or diploma, or the certificate in social work, and 22 by virtue of having had sufficient approved experience in mental welfare work. In addition 20 trainee mental welfare officers and one welfare assistant were employed, making a total staff of 100. During 1969, nine mental welfare officers obtained the certificate in social work and by the end of the year an additional 18 mental welfare officers and trainees were taking courses leading to the award of a social work certificate.

The arrangements made between the County Council and certain neighbouring County Borough Councils for mental welfare officers to share "on call" duties outside normal working hours have proved satisfactory.

HOSTEL STAFF.—Two new 31-place adult hostels were opened during the year with accommodation for 17 male and 14 female persons at each, making an operational total of 17 adult hostels and four junior hostels. The staff establishment for the adult hostels comprises a warden and deputy warden and at the junior hostels a matron and deputy, together with attendants and the normal complement of cooks and domestic staff at each establishment.

TRAINING CENTRE STAFF.—The table below shows the number of training centre supervisory staff in each category at the 31st December, 1969:—

	Junior and mixed centres	Adult centres
Superintendents	—	30
Supervisors	23	—
Instructors	—	165
Assistant supervisors	110	—
Trainee assistant supervisors	19	—
	<hr/> 152	<hr/> 195

In September, 1969, the fourth one-year training course for adult training centre staff leading to the award of the diploma of the National Training Council commenced at the Harris College, Preston, and two superintendents and four instructors were seconded to this course. A similar one-year course commenced at Bolton Institute of Technology to which six instructors were seconded. In addition, seven instructors began a one-year course at Hull College of Commerce.

During the year two superintendents and five instructors were awarded the National Training Council diploma. The position relating to qualifications at the end of the year was that 19 superintendents and 8 instructors held a diploma and a further four superintendents and 16 instructors were taking courses leading to the award of a diploma.

Twenty-two members of the staff of junior training centres returned from one-year and two-year courses at the Harris College, Preston, in July, 18 of whom were awarded the diploma. However, these represented a nett gain of only seven, the service suffering a loss of 11 qualified teachers during the year. At the end of the year 17 were on courses, 14 of whom were due to complete their training in July, 1970. Seventy-five of the staff were qualified, of whom 19 were supervisors, but the small increase thus recorded over the corresponding total for the previous year was more than offset by the reduced number on course so that the proportion of staff at junior training centres holding or undergoing training leading to the award of an appropriate qualification declined from 63.5 per cent. at the end of 1968 to 60.5 per cent.

Approval was given to the attendance of staff on the following courses and conferences during 1969:—

Hostel staff refresher course—County Offices, Preston.

Study course for psychiatric social workers—Leicester University.

Fire prevention course—Washington Hall, Chorley.

Course of evening lectures on student supervision—Millbanke College of Commerce, Liverpool.

Introduction to outdoor pursuits—Tower Wood, Windermere.

Weekend school—Comprehensive Community Mental Health Services, Salford University.

Music for mentally handicapped children—Liverpool University.

Annual conference of the Federation of Associations of Mental Health Workers—Scarborough.

Annual conference of the National Association of Teachers of the Mentally Handicapped—Birmingham.

Annual conference of the National Association for Mental Health—London.

Building Programme.—All six training centres which were under construction at the end of 1968 were completed and brought into operation during 1969. These were the adult training centres at Lytham, Leyland, Darwen, Ormskirk and Ashton-under-Lyne and the junior training centre at Swinton which replaced the existing adapted premises at Swinton and the separate special care unit at Eccles.

Of eight adult hostels in building at the end of 1968 only two (at Lytham and Darwen) were completed during the year under report. Early in 1969 it had already become apparent that progress on the hostels was falling behind schedule due to the failure of the heating sub-contractor to fulfil his obligations. The contract was terminated and inevitably, further delays were incurred whilst fresh contracts were negotiated. These projects are now expected to be completed early in 1970.

In August, 1969, work was commenced on a new 60-place junior training centre at Skelmersdale which is intended to replace unsatisfactory adapted premises in use at Lathom. Work on the following extensions to existing premises also began:—

Kirkham J.T.C.—Therapeutic swimming pool, financed entirely from voluntary sources. Completed in December, 1969.

Hindley J.T.C.—Additional 12-place special care unit and, provided by the Wigan Spastics Society, an overnight stay unit of eight beds. Completed in November, 1969.

Lancaster J.T.C.—New 12-place special care unit.

Newton-le-Willows J.T.C.—Additional classrooms, assembly hall, special care unit, etc., which will increase the nominal capacity of the centre from 50 to 130 places, including 18 special care.

The position at the 31st December, 1969, with regard to establishments was as follows:—

	Training centres		Hostels	
	Adult	Junior and mixed	Adult	Junior
Existing at 1.1.69	25	23	15	4
Brought into operation during 1969	5	*1	2	—
In operation at 31.12.69	30	23	17	4
Under construction at 31.12.69	—	1	6	—

* Purpose-built, replacing existing adapted premises.

Training Centres.—A summary of the number of training centre places provided by the County Council and of attendances at the centres during 1969 and the five previous years is given below. Similar information for each centre for the year under report is given in Table 26, page 164.

Year		Position at 31st December			Attendances during year		
		No. of centres	No. of places nominally available	No. on register	Total day places nominally available	Total attendances	Proportion (per cent) of attendances to nominal places available
1964	(a)	20	1,115	1,060	217,669	172,977	79
	(b)	11	517	678	93,717	110,339	118
	(c)	1	20	27	4,880	4,494	92
	(d)	32	1,652	1,765	316,266	287,810	91
1965	(a)	20	1,119	1,001	224,320	157,810	70
	(b)	22	1,024	1,113	180,883	199,753	110
	(c)	1	20	30	4,680	4,835	103
	(d)	43	2,163	2,144	409,883	362,398	88
1966	(a)	20	1,119	1,023	221,212	157,268	72
	(b)	23	1,099	1,325	237,185	242,376	105
	(c)	1	20	25	4,500	4,405	98
	(d)	44	2,238	2,373	462,897	404,049	89
1967	(a)	22	1,275	1,113	235,446	171,240	73
	(b)	23	1,164	1,433	251,257	281,766	112
	(c)	1	20	27	4,540	4,653	102
	(d)	46	2,459	2,573	491,243	457,659	93
1968	(a)	23	1,333	1,212	247,667	188,592	76
	(b)	25	1,189	1,493	243,022	282,503	116
	(c)	1	20	29	4,500	4,793	107
	(d)	49	2,542	2,734	495,189	475,888	96
1969	(a)	23	1,362	1,241	264,050	205,309	78
	(b)	30	1,489	1,673	324,210	318,085	98
	(c)	—	—	—	—	—	—
	(d)	53	2,851	2,914	588,260	523,394	89

(a) Junior and mixed centres. (b) Adult centres.
(c) Separate special care units. (d) All centres.

The following table shows the total County cases attending day training centres and special care units at the end of each of the last five years:—

Year	No. of County cases attending —				
	County Council centres		Other authorities' centres	Other bodies' centres	Total
	Junior and mixed	Adult			
1965	1,031	1,113	69	58	2,271
1966	1,029	1,313	64	30	2,436
1967	1,159	1,409	75	34	2,677
1968	1,247	1,512	43	46	2,848
1969	1,206	1,666	52	51	2,975

The above figures show a decrease of 41 children attending junior training centres and an increase of 154 attending adult training centres. Although five new 60-place adult centres came into operation in 1969, three had very restricted attendances owing to the fact that their associated hostels were incomplete and unoccupied.

OTHER DAY CENTRES.—All the County Council training centres referred to above are intended to cater for mentally subnormal persons or those suffering from some form of permanent mental disorder amenable to the same sort of provision as for the subnormal. By the opening towards the end of 1969 of a day rehabilitation centre at Urmston a new development occurred in the provision by the County Council of facilities for the more acutely mentally ill. This centre is intended for psychiatric patients living in the community who are in need either of a period of rehabilitation following hospital treatment or of some form of sheltered occupation distinct from that offered at existing County centres for the mentally handicapped. By the end of the year it was not fully operational but five persons were reported to have commenced attendance.

A number of hospital patients who normally reside in the County area attended Cleveland House Psychiatric Day Centre (Salford C.B.C.) during 1969. Sponsored by the County Council by agreement with the consultant psychiatrist, these patients derive considerable benefit under the care of the centre's staff of occupational and art therapists.

Residential Accommodation.—**HOSTELS.**—Two new hostels for mentally subnormal adults were opened during 1969 (at Lytham and Darwen), giving a total of 17 in operation with 479 places. The number of places provided remained unchanged at 100 in four junior hostels. At the 31st December, 462 adults and 91 children were in residence at County Council hostels and an additional 75 adults and 19 children were resident at the County Council's expense in residential accommodation of other local authorities or voluntary bodies.

The following tables serve to outline the constitution of the population of the County Council's hostels at the end of 1969:—

Junior Hostels

	Age group (years)									
	Under 5		5–		10–		15–		Total	
	M	F	M	F	M	F	M	F	M	F
Short term care	—	—	—	2	—	—	1	—	1	2
Long term care	1	1	20	11	32	19	2	2	55	33
Total	1	1	20	13	32	19	3	2	56	35

Adult Hostels

			Age group (years)											
			16–		25–		40–		55–		60–		Total	
			M	F	M	F	M	F	M	F	M	F	M	F
Mentally subnormal	...		29	23	71	51	73	58	25	22	12	14	210	168
Mentally ill	...	...	—	—	5	5	26	20	8	5	6	9	45	39
Total	...		29	23	76	56	99	78	33	27	18	23	255	207

The short term care picture presented by the junior table is, of course, not typical of the situation during the greater part of the year and particularly the summer months when the pressure for such care is at its height. Whilst the adult hostels were intended essentially for mentally subnormal persons experience has shown that, with careful selection, persons suffering from certain chronic forms of mental illness can be successfully integrated. The 84 such cases in residence at the end of 1969 represented over 18 per cent. of the total. In two of the hostels this proportion had reached nearly 50 per cent. Of the mentally ill in residence 11.9 per cent. (10 in number) were engaged in outside employment compared with 15.6 per cent. (59) of the mentally subnormal. The corresponding proportion of all residents was 14.9 per cent.

Turning to a consideration of the age grouping of the adult hostel population it will be seen from the above table that 278, or 60.2 per cent. of the total, were aged 40 years and over, 101 (21.9 per cent.) were 55 years and over and no less than 41 (8.9 per cent.) were already 60 years or over. Substantial reason may be adduced in favour of encouraging the resident, regardless of age, to continue working or attending the training centre—at present a condition of residence—for so long as he or she is capable and desirous of doing so, but the problem of his or her subsequent "retirement" which is presently posed is one both of principle, as to the most suitable form of placement, and of practical provision bearing in mind the currently severe restriction imposed at national level upon the County Council's mental health service building programme.

GROUP HOMES.—At the end of 1969 two group homes operated by the County Council provided accommodation for seven persons—four at Chorley and three at Haslingden. Although originally intended to assist mentally ill persons in re-adjusting to normal life in the community, they now accommodate mentally subnormal persons selected from the neighbouring hostel who it was considered would benefit from a greater independence.

SHORT TERM CARE.—Residential care for periods varying from two to four weeks is made available by the County Council for mentally handicapped persons living at home with parents or relatives. This is to enable parents, etc., to take a holiday or otherwise be afforded short periods of relief. The short term care is provided either by admission to County Council hostels, other suitable establishments at the expense of the County Council, or hospital. The numbers of children and adults provided with short term care in this way during 1969 were as follows:—

				County Council hostels	Voluntary residential homes	Hospital	Total
Children	...	...	...	141	104	192	437
Adults	...	...	...	88	44	188	320

OTHER AUTHORITIES' RESIDENTIAL ACCOMMODATION.—In the course of the year four persons were admitted to the hostel for the mentally ill operated by St. Helens County Borough and two persons were admitted to similar establishments in Salford and Manchester. In addition, Blackpool County Borough provided accommodation for a total of 40 persons in need of short term rehabilitation care during 1969.

These establishments for the mentally ill are designed to provide short term rehabilitative care for periods of up to six months and generally accommodate former hospital patients who may be in employment, or if not employed would benefit from hostel facilities. The main criteria for admission are that persons should behave in a socially acceptable way, be employed or potentially employable, and capable of drawing benefit from the facilities available.

Registration and Inspection of Mental Nursing Homes for Mentally Disordered Persons.—Part III of the Mental Health Act, 1959, provides for the registration and periodic inspection by the local authority concerned of mental nursing homes and residential homes for mentally disordered persons. Seven mental nursing homes and three residential homes were registered with the County Council at the end of the year. At the time of the inspections, which are carried out at six-monthly intervals, all the premises were found to continue to meet the requirements for registration.

Social Activities for the Mentally Disordered.—The County Council's proposals for the Mental Health Service include the provision of social clubs for the mentally handicapped. It is the policy to encourage voluntary societies to set up and operate such clubs for the mentally handicapped by allowing the use of County Council premises or alternatively paying the rental for suitable premises. In this way co-operation between the County Council and voluntary effort is fostered and encouraged. Whilst those for the mentally ill are social clubs in function, their purpose is essentially rehabilitation and they are run by the County Council in close liaison with the consultant psychiatrist and possibly in association with a neighbouring County Borough Council. At the end of the year a total of 30 clubs were in operation, 21 for the mentally subnormal and nine for the mentally ill, with total average attendances per week of 836 and 165 respectively.

Guardianship.—Two new admissions to the guardianship of the County Council took place during the year. The total number of cases under guardianship at the end of the year was six and one person remained under the guardianship of a private individual.

Holidays.—The County Council have agreed to pay transport and staff accommodation charges for parties of trainees from junior and adult training centres going on a week's holiday, and during 1969 holidays were arranged for trainees of 16 centres, the total number involved being 542 adults and 90 juniors. In the case of children at junior hostels who would not otherwise be provided with a holiday the Health Committee have authorised the payment by the County Council of transport and accommodation charges for both the children and accompanying supervisory staff for two weeks holiday each year. During 1969, 24 residents from two of the junior hostels were afforded a holiday under this provision.

General Statistics.—The following tables show the numbers of cases by category of mental disorder in County Council care on the 31st December of each of the last five years. The year 1966 saw the introduction of a new category of mental disorder, that of "elderly mentally infirm", defined as "persons who have become mentally infirm through old age". A detailed analysis of cases in County care is given in Table 27, page 165.

Mentally ill, elderly mentally infirm, and psychopathic cases

Category	1965	1966	1967	1968	1969
Mentally ill—					
Aged under 16 years	7	2	6	6	23
Aged 16 years and over	5,346	5,275	5,320	5,426	5,086
†Elderly mentally infirm	*	342	403	318	359
Psychopathic—					
Aged under 16 years	—	—	—	—	1
Aged 16 years and over	1	6	4	3	13
TOTAL	5,354	5,625	5,733	5,753	5,482

*Only available from 1966.

†Primarily the responsibility of the Welfare Service.

Subnormal and severely subnormal cases

Category	1965	1966	1967	1968	1969
Subnormal—					
Aged under 16 years	343	378	431	538	688
Aged 16 years and over	1,496	1,494	1,568	1,555	1,881
Severely subnormal—					
Aged under 16 years	845	853	894	953	903
Aged 16 years and over	1,012	1,054	1,157	1,200	1,174
TOTAL	3,696	3,779	4,050	4,246	4,646

The total number of cases under the five categories of mental disorder, *i.e.*, 10,128 at the end of 1969, was equivalent to 4.12 per 1,000 of the estimated home population in the Administrative County area. The corresponding and constituent rate for the total of mentally ill, elderly mentally infirm and psychopathic cases was 2.23 per 1,000 of the estimated home population whilst that for subnormal and severely subnormal cases was 1.89.

The table below shows the annual number of cases of mental subnormality (including severe subnormality) referred to the County Council from 1958 onwards:—

Year	Children under 16 years	Adults of 16 years and over	Total
1958 ...	184 ...	88 ...	272
1959 ...	205 ...	58 ...	263
1960 ...	189 ...	118 ...	307
1961 ...	218 ...	185 ...	403
1962 ...	230 ...	239 ...	469
1963 ...	235 ...	242 ...	477
1964 ...	286 ...	311 ...	597
1965 ...	319 ...	356 ...	675
1966 ...	327 ...	361 ...	688
1967 ...	314 ...	364 ...	678
1968 ...	347 ...	314 ...	661
1969 ...	366 ...	320 ...	686

OTHER SERVICES

Medical Examinations carried out by County Council Medical Staff.—Medical staff in the health divisions and delegate districts have the responsibility of carrying out medical examinations for a variety of County Council purposes. It is not the policy of the Council to undertake for superannuation purposes the medical examination of newly appointed staff. Candidates complete a form of medical questionnaire (Form M.E.5) and only in cases where the answers given indicate some past medical history which raises doubt as to fitness for job is a physical medical examination given.

It is to be noted, however, that in the cases of certain categories of staff, notably staffs employed in the medical, nursing, day nursery and dental services, or where the employee will be in contact with children, satisfactory medical and X-ray reports are required before the candidate can take up duty. In addition, medical examinations are carried out at the request of other local authorities throughout the country who are offering appointments to candidates resident in the County area.

The table below shows the major groups of examinations undertaken during 1969. Similar information is given by health divisions and delegate districts in Table 28, page 166.

Medical examinations undertaken in respect of—

Fitness for job—County Council employees—

*Examinations carried out as a result of scrutiny of forms M.E.5	...	860
Posts requiring compulsory examination	...	1,289
Fitness to enter other local authority superannuation schemes	...	171
Fitness to enter other local authority sickness pay schemes	...	2
Fitness to resume work—County Council employees	...	141
Children in care of Children's Committee	...	2,150
Entry to teachers' training colleges	...	3,086
Entrants to teaching profession (Form 28 RQ)...	...	276
Boothstown Remand Home	...	814
Others	...	282

*During the year 11,700 forms M.E.5 were scrutinised, but only in those cases where a decision could not be given solely by reference to the form was an actual physical examination carried out.

Nursing Homes.—The law relating to nursing homes is contained in sections 187-195 of the Public Health Act, 1936, the Nursing Homes Act, 1963, and the Conduct of Nursing Homes Regulations, 1963.

At the end of 1969, there were 25 registered nursing homes in the Administrative County area, all of which are inspected periodically by the divisional medical staffs.

The 25 nursing homes are situated in the following districts:—

<i>Health Division No. 1—</i>		<i>Health Division No. 10—</i>	
Dalton-in-Furness U.D.	1	Golborne U.D.	1
Grange U.D.	2	<i>Health Division No. 11—</i>	
Ulverston U.D.	1	Turton U.D.	1
North Lonsdale R.D.	1	<i>Health Division No. 12—</i>	
<i>Health Division No. 2—</i>		Radcliffe M.B.	1
Lunesdale R.D.	1	Rawtenstall M.B.	1
Lancaster R.D.	1	<i>Health Division No. 13—</i>	
<i>Health Division No. 3—</i>		Heywood M.B.	1
Lytham St. Annes M.B.	3	Littleborough U.D.	2
<i>Health Division No. 4—</i>		Milnrow U.D.	1
Clitheroe R.D.	1	Wardle U.D.	1
<i>Health Division No. 7—</i>		<i>Health Division No. 16—</i>	
Crosby M.B.	2	Urmston U.D.	1
Formby U.D.	1		
West Lancashire R.D.	1		

The following is a summary of the action taken with regard to the registration of nursing homes during 1969:—

No. of applications for registration received during 1969	...	nil
No. of applications for registration under consideration at 31st December, 1968	...	1
No. of certificates of registration issued	...	1
No. of applications withdrawn	...	nil
No. of applications refused	...	nil
No. of applications under consideration at 31st December, 1969	...	nil
No. of certificates of registration cancelled	...	1
No. of inspections carried out during 1969	...	36

Particulars of the cases admitted to and treated in the nursing homes during 1969 are given in the following statement:—

(a) Maternity cases—								
(i) No. admitted	...	...	...	...	...	...	...	396
(ii) No. of confinements	...	...	...	...	...	...	...	311
(iii) No. of live births	...	...	...	...	...	...	...	312
(iv) No. of stillbirths	...	...	...	...	...	...	...	1
(v) No. of miscarriages	...	...	...	...	...	...	...	2
(vi) No. of deaths—mother	...	...	...	...	...	...	...	—
child	...	...	...	...	...	...	...	—
(vii) No. of confinements at which analgesia used...	...	...	...	...	...	...	...	310
(b) Medical cases—								
(i) No. admitted	...	...	...	...	...	...	...	2,042
(ii) No. of deaths	...	...	...	...	...	...	...	262
(c) Surgical cases—								
(i) No. admitted	...	...	...	...	...	...	...	1,139
(ii) No. of operations performed	...	...	...	...	...	...	...	1,000
(iii) No. of deaths	...	...	...	...	...	...	...	18

Nursing Agencies.—Section 2 of the Nurses Agencies Act, 1957, requires that a person shall not carry on an agency for the supply of nurses on any premises in the area of the licensing authority unless he is the holder of a licence from that authority authorising him to do so. The County Council are the licensing authority in the Administrative County, and at the end of 1969 there was one licensed agency in the area.

Visitors from other Countries, Organisations, etc.—Many requests are received from organisations for their officers to visit the Administrative County of Lancaster to study the administration of the County health services, to make visits of observation with nursing, midwifery, health visiting and other field staff on their rounds, and to visit the various establishments.

During 1969, the County Health department officers, who spend an appreciable amount of time arranging programmes for such visitors, were pleased to welcome the following:—

February 26th/28th	Miss B. Cummings, Administrative Course Student	Requested by Rathbone College, Liverpool
April 14th/May 23rd	Mr. N. B. Navunisaravi, Statistician, Fiji	Requested by British Council
May 13th	Mr. Rigby, Research Worker	Requested by Cheshire County Council
June 25th/28th	Dr. Simsiroglou, Greece	Requested by World Health Organisation
July 24th	Miss Rowley, Director of Education	Requested by Melbourne Nursing Services, Australia
July 28th/August 1st	Mrs. Madoorappan, World Health Fellow, Mauritius	On observation tour
October 27th/29th	Miss I. Price, Tutor	Requested by Royal College of Nursing and Queens Institute of District Nurses
October 27th	Professor S. Brodjohudojo, Dr. O. Odang, Dr. M. Suling, Indonesia	By arrangement with the Foreign and Commonwealth Office

These are, of course, additional to the other visitors of various categories many of whom are studying for a professional qualification, e.g., student health visitors, pupil midwives, qualified nurses taking district nurse training, students from teacher training colleges and the like.

WELFARE SERVICES

WELFARE OF THE ELDERLY

Section 21 of the National Assistance Act, 1948, requires local welfare authorities to provide residential accommodation for those who are in need of care and attention which is not otherwise available to them. This obligation has been made the basis of a large and growing variety of services about which some details are given below. During the year under review policy continued to be guided by desire to diversify services as far as is practicable, so as to be able to meet individual needs rather than force the applicant to accept a rigid and preconceived "solution" to his difficulties.

Residential Homes.—The demand for residential accommodation continued unabated during 1969 and although the total amount of accommodation available by the 31st December, 1969, had increased substantially (there were 3,814 persons accommodated in County Council homes compared with 3,660 twelve months earlier), the rate of progress was not sufficient to make any reduction in the waiting list, which rose from 1,223 to 1,532.

Tables 29 and 31, pages 167 and 171, give details of persons accommodated in County Council homes, etc., during 1969. Similar information in respect of County residents in premises managed by other local authorities and by voluntary organisations is given in Tables 30, 32 and 33.

Two 51-place homes, detailed below, were completed and brought into use during 1969:—

Larchfields, Newton-le-Willows

Shawbury, Middleton

Each home is of single storey construction and consists of three 17-place wings which can operate substantially as self-contained units. This design tends to reduce the somewhat oppressive impact that living in a large communal home can have and increases the possibilities for each resident of becoming a member of a congenial group. Special attention has been given in the design of the new homes to the provision of accommodation for the staff. A three-bedroom bungalow built on to each home is provided for the warden and there is similar accommodation for the deputy warden, which can alternatively be used for three single staff.

Work continued during the year on the first of the new multi-storey homes for 50 residents at Leigh, and was completed on the last of the 51-place homes at Kearsley.

The difficulty in finding suitable sites has led to the abandonment of the building of further single-storey 51-place types and during the year the construction of multi-storey homes was begun at Prestwich, Stretford, Eccles, Barrowford and Litherland. The homes at Prestwich, Stretford and Eccles will provide 52 places whilst the Barrowford and Litherland homes will have 32 places. Day care annexes with 12 places are being built with the Prestwich and Eccles homes.

The Health Services and Public Health Act, 1968.—Section 44(1) of this Act enables local welfare authorities to extend their schemes under which local authorities provide residential accommodation with other local authorities and with voluntary organisations. Amended schemes may cover in addition, arrangements with privately-owned registered homes which are run for profit.

The County Council are not obliged to seek an amendment to their scheme and the Minister indicated when the Act came into effect that he did not intend for the present to issue any recommendation. The County Council decided to defer taking action in this matter.

Day Care Service.—In expanding this service the County Council accepted the principle of setting up day care services gradually at existing residential homes wherever room is available and the newcomers can be accommodated without the need for substantial capital expenditure. The largest single difficulty in the way of expanding the service was found to be transport and to relieve the ambulance service, extensive use was made of taxis on a contract basis. At the 31st December, 1969, 61 schemes were in operation with a total daily average attendance of approximately 183.

The selection of the old people is by reference to their need for care or their relatives' need for relief, so that in the main they are people whose names are already on the waiting list for admission to a welfare home. Applicants requiring specialised care more appropriately supplied by the hospital service are not eligible.

Old people usually attend on two or three days a week and the usual amenities of the home are available. A mid-day meal and afternoon tea are provided. Towards the end of the year the Health Committee approved an increase in the nominal charge from two shillings to three shillings per day. Transport, where required, is free.

Short Stay Scheme.—Quite frequently old people are admitted to residential homes on a temporary basis, sometimes to help them over a short period of difficulty and sometimes to allow them some experience of life in welfare accommodation before they finally decide whether to give up their homes. In addition to these informal arrangements, however, 20 places at The Empress, Morecambe, and 10 at The Cumberland, Fleetwood, are used for short-stay accommodation. Those admitted (generally for a fortnight) are people deemed to be in need of care (a) to restore their capacity for independent living, (b) to allow relatives a respite, (c) during the temporary absence of those who normally look after them, or (d) during their absence from an old people's home to facilitate redecoration or maintenance work.

During the year 592 residents were admitted for short-stay periods to these two homes (408 at The Empress and 184 at The Cumberland). The average occupancy rate for the year was 23 but as usual, demand was greatly in excess of the available supply during the summer months. For this reason the places were allocated to divisions on a basis of relative pensionable population.

Sheltered Housing for the Elderly.—One of the most striking developments that has taken place since the war in the welfare field has been the widespread provision by local housing authorities of warden supervised accommodation for the elderly. In Lancashire a formal scheme was drawn up in 1956 after consultations with the district councils associations whereby the County Council agreed to make grants towards the cost of approved sheltered housing schemes. The purpose of the annual grant (which is fixed initially on estimated costs and is not normally expected to exceed £50 a unit) is to meet expenditure by the district council on what are broadly described as "welfare" facilities—i.e., the call-bell or audible intercommunication system, any communal rooms or laundry, and the remuneration and accommodation provided for the resident part-time warden. The grant is payable in respect of each unit of accommodation occupied by a tenant approved by the appropriate divisional medical officer as being in need of the special facilities provided and is also payable during void periods.

During the year under review 20 schemes were approved for grant purposes providing an additional 658 units of accommodation. Details of the schemes are as follows:—

County district				No. of units of accommodation				Estimated annual cost of welfare facilities	Estimated annual cost per unit of accommodation		
								£	£	s.	d.
Accrington M.B.	...	...	...	40	...	...	...	1,267	...	31	13 6
Bacup M.B.	...	...	...	32	...	...	...	1,521	...	47	11 0
Chadderton U.D.	...	...	...	45	...	...	...	1,649	...	36	13 0
Eccles M.B.	...	...	...	34	...	...	...	507	...	14	18 3
Fylde R.D.	...	...	...	28	...	...	...	1,253	...	44	15 0
Fylde R.D.	...	...	...	28	...	...	...	1,280	...	45	14 0
Golborne U.D.	...	...	...	26	...	...	...	1,246	...	42	18 0
Kirkby U.D.	...	...	...	40	...	...	...	831	...	20	15 6
Littleborough U.D.	...	...	...	28	...	...	...	1,322	...	47	4 0
Nelson M.B.	...	...	...	43	...	...	...	647	...	15	0 8
Nelson M.B.	...	...	...	43	...	...	...	647	...	15	0 8
Oswaldtwistle U.D.	...	...	...	28	...	...	...	889	...	31	15 0
Royton U.D.	...	...	...	23	...	...	...	1,117	...	48	12 0
Swinton and Pendlebury M.B.	...	...	...	50	...	...	...	867	...	17	7 0
Warrington R.D.	...	...	...	36	...	...	...	1,840	...	51	2 3
Warrington R.D.	...	...	...	36	...	...	...	1,838	...	51	1 1
Warrington R.D.	...	...	...	36	...	...	...	1,851	...	51	8 4
Westhoughton U.D.	...	...	...	7	...	...	...	65	...	9	6 0
Worsley U.D.	...	...	...	32	...	...	...	445	...	13	18 0
Worsley U.D.	...	...	...	23	...	...	...	1,240	...	53	18 0

The above approvals brought the total of approved schemes to 188 and when all become operative the 80 district councils concerned will be providing 4,902 units of sheltered housing. They vary widely in character but all have the essential minimum requirements of a resident warden and a call-bell or "intercom" system. The warden is not employed to provide care for the tenants in the usual sense but to see that the necessary domiciliary services are brought in as required. The knowledge that such a "good neighbour" is available in case of need provides a strong sense of reassurance for many tenants who would otherwise be beset by anxieties if they were living alone, and a watchful eye can detect the early signs of neglect as well as the unforeseen emergency.

In 1963 the Health Committee approved a scheme for the admission to sheltered housing of handicapped persons below pensionable age who it was considered were in need of and would benefit from the facilities available without unduly altering the general character of the scheme. A maximum of two admissions of this type to each scheme was laid down. Sixty-six persons in this category have so far been approved for this type of accommodation.

With the object of encouraging voluntary housing societies to provide sheltered housing facilities—i.e., a warden system and warden's supervision—at their homes, the County Council in 1965 approved payment of an annual grant in respect of each approved resident. Grant is subject to the following conditions being met by the housing society and is made under section 119 of the Housing Act, 1957:—

- The grants to be made to voluntary bodies who are registered Housing Associations, subject to the Health Committee being satisfied with the voluntary body's constitution.
- Existing schemes shall be eligible for consideration, but the prior approval of the County Health Committee shall be obtained to all future schemes.
- The minimum requirements shall be the provision of a resident warden and call-bell system.
- The grants payable in respect of approved schemes shall be £20 a year in respect of each tenant agreed by the divisional medical officer. The voluntary body shall be eligible for payment of this grant in respect of a period of vacancy if the previous tenant and the subsequent tenant are ones agreed by the divisional medical officer.

In July 1969, the Health Committee amended the scheme to allow voluntary organisations providing purpose-built accommodation to submit costs in the same way as district councils in order that the Committee may approve a unit grant.

At the 31st December, 1969, twenty-one schemes of voluntary sheltered housing, providing 231 units of accommodation had been approved for grant by the County Council.

Following receipt of an application for grant by a voluntary housing society operating outside the Administrative County area, it was decided that it would be preferable on balance for payment of grant to be made to housing societies operating within the County area only, irrespective of the area from which the resident was admitted.

The scheme can only be described as an unqualified success, both in the extent to which it has encouraged district councils to embark upon such projects and in the degree to which the desirable results that were expected to flow from these initiatives have already been realised in practice. Two County-wide surveys have indicated that despite the fact that the applicants are selected for this accommodation as "at risk" cases, very few of them deteriorate in sheltered housing to a level that necessitates their transfer to a welfare home. Experiments in still further narrowing the gap between housing and welfare accommodation are in hand, in that about a dozen schemes are in operation or are at various stages of planning which involve the provision of 24-hour supervision of housing by the staff of an adjacent welfare home. This principle has been very successful at the following homes since the first scheme of this type at The Limes/The Hollies (Swinton) became operational in 1964:—

Beaumont View, Lancaster; Charnley Fold, Walton-le-Dale; Garswood House, Ashton-in-Makerfield; Brynheys, Worsley; Birchfold, Worsley; Hurst Hall, Ashton-under-Lyne; Castleford, Clitheroe; Dolphinlee House, Lancaster; Redcliffe, Prestwich.

Care of the Elderly in their Own Homes.—The objects of the County Council's scheme to promote the care of old people in their own homes are to encourage and assist old people to continue to live in their own homes for as long as possible by the use of all available statutory and voluntary services and also to co-ordinate such services as well as to encourage and foster voluntary activity on behalf of the elderly.

To achieve these objects the scheme provides for the establishment by divisional health committees of welfare sub-committees. Each sub-committee is fully representative and includes members from each district council, voluntary district old people's welfare committee, hospital management committee and local medical committee within the divisional area. Officers of the Department of Health and Social Security also serve in an advisory capacity together with geriatricians where such appointments have been made. Provision is also made for the appointment by health divisions of a divisional welfare organiser whose duties are to ensure on behalf of the divisional medical officer that the objects of the scheme are achieved.

Efforts have been made to establish in each County district and in each parish of a rural district a voluntary old people's welfare committee. Whilst the divisional medical officer is the co-ordinating link between the divisional welfare sub-committee and the voluntary committees, the usual practice is for the divisional welfare organiser to serve on the voluntary committees. Other divisional officers, such as nurses and health visitors, providing statutory services for the elderly, are also co-opted on the voluntary committees.

The needs of those requiring assistance are categorised and kept under review, frequently by follow-up visits by voluntary and divisional field workers. As a result the demand for statutory services such as the provision of district nurses, home helps, health visitors, social security benefits and allowances, etc., has greatly increased and the following voluntary services are also being provided—meals on wheels, clubs, shopping, collecting pensions, changing library books, visiting, transport, provision of clothing and Christmas gifts.

There is very full co-operation between the County Council and the Community Council of Lancashire whose full-time field officer works closely with officers of the County Council in connection with the care of the elderly and in the establishment of local old people's welfare committees. A grant of £1,750 was paid to the Community Council for the financial year ended 31st March, 1970.

The National Assistance Act, 1948 (Amendment) Act, 1962.—The effect of this Act, which came into operation in May, 1962, was to amend section 31 of the principal act and extend the existing powers of local authorities (within a County the County Council and the County District Councils) relating to the provision of recreation or meals for old people. Previously limited to making contributions to the funds of any voluntary organisation providing such services, local authorities may now make available further assistance in the form of premises, staff, furniture, vehicles, etc., and are authorised to provide meals and recreation for old people, either directly or through the agency of voluntary organisations.

The County Council policy had hitherto been to assist voluntary organisations at County level, grants to old people's clubs and meals services being dealt with by the County Districts and understood to amount to approximately £25,000 a year.

During 1964 the County Council and the County District Council Associations formulated a common policy for the exercise of their new concurrent powers and in doing so agreed that it would be undesirable to upset the work at present being generally well undertaken by voluntary bodies in providing meals and recreational facilities for old people. Under the scheme, which was welcomed by a conference of the County Council, County District Council Associations and the major voluntary bodies (the British Red Cross Society, the Lancashire Community Council, County Old People's Welfare Committee and the Women's Royal Voluntary Services), the County District Councils have the primary responsibility for expanding the services and for sponsoring and encouraging voluntary effort.

Applications from voluntary bodies are dealt with by the County District Councils, and the County Council have agreed to an equal partnership with the County Districts on the cost of assistance from public funds. The initial limit from the County Council to a County District is 4s. per head of pensionable population on an equal partnership and when this is matched by the County Districts there is available a total of about £130,000 a year.

The new arrangements for joint financial responsibility and the expansion of the existing services came into operation on the 1st April, 1965, and the following information shows the extent of the various services available at the end of 1969.

Meals on Wheels Services—

Number of County Districts operating schemes	...	...	...	106
Meals served weekly	...	...	...	11,054
Number of persons participating	...	...	...	5,682

Luncheon Clubs—

Number of County Districts operating clubs	...	...	...	70
Number of clubs	...	...	...	115
Total membership	...	...	...	5,624

Old People's Clubs—

Number of County Districts operating clubs—

Part-time	...	...	...	97
Full-time	...	...	...	36

Number of clubs in operation—

Part-time	...	...	...	422
Full-time	...	...	...	51

Membership—

Part-time	...	...	...	40,484
Full-time	...	...	...	10,957

Temporary Protection of Property.—Where a person is admitted to any hospital or to accommodation provided under Part III of the National Assistance Act, 1948, or is removed to any other place under an order made under section 47 of the Act, (which relates to certain persons who are suffering from grave chronic disease or, being aged, infirm or physically incapacitated, are living in insanitary conditions), such person may not always have made arrangements for the disposal or safekeeping of his property. If it appears to the Council that there is danger of loss of, or damage to, any movable property of his by reason of his temporary or permanent inability to protect or deal with the property and no other suitable arrangements have been or are being made, it is the duty of the Council to take reasonable steps to prevent or mitigate the loss or damage.

This duty is imposed by section 48 of the National Assistance Act, 1948, but the Council are under an obligation to act only where the person's circumstances are within their knowledge or where the possible need for action on their part is brought to their notice, and then only when no other suitable arrangements have been or are being made. Arrangements have been made for hospital management committees to co-operate by notifying divisional medical officers of cases admitted to hospital where action by the Council is considered to be necessary for the protection of a patient's movable property and where other suitable arrangements have not been made.

Apart from the cases mentioned, there arises also the problem of safeguarding the property of those patients who are incapable of managing their own affairs because of mental incapacity. Jurisdiction in these matters is exercised through the Court of Protection, Royal Courts of Justice, to whom it is necessary to make application for orders appointing receivers to manage and administer a patient's estate or give such other directions as may be appropriate and necessary. Section 49 of the National Assistance Act, 1948, authorises the defraying of expenses in connection with applications made by an officer of the County Council.

Where there are no relatives able or willing to act on behalf of the patient, applications are made centrally and require much care in preparation and presentation as well as in acting upon the Court's directions.

Not infrequently the department is called upon to deal with the estates of former residents in homes or persons whose property has been protected under section 48 of the National Assistance Act when these die leaving no known next-of-kin, and this involves the preparation of a detailed report to the solicitor for the Duchy of Lancaster.

WELFARE OF THE HOMELESS

Accommodation for Homeless Families.—The policy of the County Council concerning families falling within the scope of section 21 (1) (b) is to maintain and preserve the family as a unit, primarily in the interests of the children but also to improve the prospects of ultimate rehousing and to facilitate such rehabilitative work as may be possible or appropriate whilst the family are in County Council accommodation.

Two properties are in use as special family unit accommodation, viz., The Hollins, Farnworth, providing for 20 families, and 31, Ashburton Road, Trafford Park, housing six families. The premises are designed to provide separate quarters for each family, comprising living room, kitchen and bedrooms with separate bathroom and indoor and outdoor toilets. Electricity is supplied as part of the service and constant hot water is available but gas for cooking purposes is obtained by the families by prepayment slot meters.

Mothers are required to clothe and feed their families and to maintain their quarters in a clean and reasonable condition. The supervisors give such domestic training, advice and help as conditions require whilst a social worker deals with personal problems primarily to secure rehousing of the families as quickly as possible.

In order to ease the pressure for accommodation and at the same time provide temporary housing for families where close supervision is not considered necessary, it has been possible to arrange temporary leases on properties purchased by the Lancashire County Council for purposes such as future road works, etc. These properties are all due for demolition at the end of a given period and in December, 1969, 17 properties were being used as individual units of temporary accommodation.

A comparative statement of the families in temporary accommodation at the end of 1968 and 1969 is given below.

Premises	December, 1968			December, 1969			Total persons
	No. of families	Total persons		No. of families	Parents	Children	
The Hollins, Farnworth	21	94	...	21	34	64	98
31, Ashburton Road, Trafford Park	6	25	...	6	6	13	19
Individual units	18	108	...	17	31	76	107
TOTAL	45	227	...	44	71	153	224

During the year 68 families were admitted and 69 families were discharged. The following analysis gives details of those discharged from temporary accommodation:—

Period in County Council accommodation—								No. of families
Less than four weeks ... ..	...	...	...	...	...	...	...	31
One to three months ... ..	...	...	...	...	...	...	...	16
Three to six months ... ..	...	...	...	...	...	...	...	7
Six to 12 months ... ..	...	...	...	...	...	...	...	9
Over 12 months ... ..	...	...	...	...	...	...	...	6
<i>Reason for discharge—</i>								
Obtained private accommodation ... ..	...	...	...	...	...	...	...	29
Placed in "intermediate" accommodation ... ..	...	...	...	...	...	...	...	4
Returned to husband or other relative ... ..	...	...	...	...	...	...	...	20
Took own discharge—address unknown ... ..	...	...	...	...	...	...	...	14
Obtained resident post ... ..	...	...	...	...	...	...	...	2

Intermediate Housing.—In 1956 the County Council approved a scheme for dealing with the problems of homelessness in co-operation with district councils as housing authorities. The scheme provided for the County Council to indemnify district councils against certain financial losses incurred in respect of intermediate houses made available for the accommodation of homeless families. During 1968 discussions were held between the County Council and the three Lancashire Associations of County District Councils resulting in the Associations agreeing to recommend to their member authorities that each should offer at least one house over the next few years as intermediate accommodation for the homeless. For their part the County Council agreed that in future a grant would be paid to cover any financial loss on such houses. This has already led to a substantial increase in the number of intermediate houses available, the total provision by the year end being as follows:—

Authority	No. of houses	Authority	No. of houses
Ashton-under-Lyne M.B.C. ...	1	Leyland U.D.C. ...	2
Bacup M.B.C. ...	1	Newton-le-Willows U.D.C. ...	4
Barrowford U.D.C. ...	1	Ormskirk U.D.C. ...	1
Chadderton U.D.C. ...	1	Padiham U.D.C. ...	1
Crosby M.B.C. ...	1	Radcliffe M.B.C. ...	3
Darwen M.B.C. ...	3	Rawtenstall M.B.C. ...	2
Eccles M.B.C. ...	3	Stretford M.B.C. ...	1
Farnworth M.B.C. ...	1	Swinton & Pendlebury M.B.C. ...	2
Great Harwood U.D.C. ...	1	Skelmersdale & Holland U.D.C. ...	1
Haslingden M.B.C. ...	1	Whitefield U.D.C. ...	1
Haydock U.D.C. ...	1	Widnes M.B.C. ...	2
Heywood M.B.C. ...	3	Worsley U.D.C. ...	1
Hindley U.D.C. ...	1	Walton-le-Dale U.D.C. ...	1
Horwich U.D.C. ...	1	Blackburn R.D.C. ...	2
Huyton-with-Roby U.D.C. ...	1	Preston R.D.C. ...	1
Kirkby U.D.C. ...	5	Warrington R.D.C. ...	2
Leigh M.B.C. ...	1	Whiston R.D.C. ...	1

Additional Measures taken to reduce Homelessness.—In the discussions with the District Councils Associations to which reference has been made above, agreement was also reached on the inception of an "early-warning" system which would entail the housing authority notifying the appropriate officer of the County Council of any family residing in a municipal house against whom the district council contemplated eviction proceedings. The intention is to enable the County Council's social workers to investigate and make recommendations to the housing authority. Where children are involved the County Council can guarantee the district council against further rent losses whilst attempts are made to work with the family if a decision to seek possession is postponed at the request of the social worker.

The district councils have also been asked to accept responsibility for rehousing those homeless families who have some residential claims to be re-settled in a particular district and other families (normally from temporary accommodation) by agreement in the light of the family's wishes and the availability of employment and schools.

WELFARE OF HANDICAPPED PERSONS

Under sections 29 and 30 of the National Assistance Act, 1948, local authorities have power to make arrangements for promoting the welfare of persons who are blind, deaf or dumb, or who are substantially or permanently handicapped by illness, injury, or congenital deformity or such other disabilities as may be prescribed by the Department of Health and Social Security. Arrangements are made by the County Council in accordance with approved schemes.

Blind Persons.—REGISTRATION OF BLINDNESS.—Applicants for registration are examined on behalf of the County Council by consultant ophthalmologists or registered medical practitioners with special experience in ophthalmology.

During the year 1969, 1,334 examinations or re-examinations took place. A total of 346 persons were certified as blind on initial examination and 155 on re-examination.

The following statement analyses the sources from which applicants for registration were referred to the County Council during 1969:—

(a) General practitioner ...	49
(b) Medical source other than general practitioner ...	240
(c) Department of Health and Social Security ...	91
(d) Lay source other than Department of Health and Social Security ...	421
TOTAL ...	801

At the end of 1969 there were 4,474 registered blind persons in the Administrative County area, and the following table gives their distribution according to certain specified age groups. For comparison, figures for the preceding year are also given.

Year	Age in years						Total (all ages)
	0—	5—	16—	21—	50—	65—	
1968 ...	11	94	67	510	826	3,011	4,519
1969 ...	15	91	71	489	820	2,988	4,474

REHABILITATION OF THE NEWLY BLIND.—The Royal National Institute for the Blind offers courses at the Queen Elizabeth Homes of Recovery at Torquay to newly blind persons who require rehabilitation before being trained to re-enter employment. Arrangements for the attendance of suitable persons are made by the Department of Employment and Productivity.

There are many others, elderly people and housewives, who need help and guidance in adjusting themselves to their new condition of blindness. Social welfare officers of the blind do much to help them but their ability to do so is inevitably restricted because of the large number of blind persons within the care of each.

To meet this need the Royal National Institute for the Blind provides a special residential home of recovery at Oldbury Grange, Bridgnorth, Shropshire, where people are helped to become active and independent. A course of training for day-to-day living is usually of about three months' duration and training in orientation and mobility is also given.

Where the full cost of the social rehabilitation course cannot be met by the persons concerned the County Council grant financial assistance in accordance with a scale used for various services provided for handicapped persons. During 1969 assistance was given in six such cases.

EMPLOYMENT.—The Department of Employment and Productivity is responsible for the placing of blind persons in employment. Although the County Council have no direct responsibility in this sphere it is nevertheless relevant to their welfare responsibilities to note that blind persons resident in Lancashire were at the end of the year engaged in occupations (other than in sheltered employment, details of which are given on page 101) as shown in the following table:—

Group Classification	Occupation	No.	Group Classification	Occupation	No.
I 1	Masseurs and physiotherapists ...	4	IV 3	Animal husbandry (including poultry keeping) ...	2
I 2	Lecturers, teachers, instructors (including craft instructors) ...	—	V 1	Machine tool operators ...	38
I 3	Clergy and members of religious orders ...	3	V 2	Fitters and assemblers ...	14
I 4	Barristers, solicitors and related workers ...	2	V 3	Viewers, inspectors, testers ...	12
I 5	Musicians (including music teachers) ...	2	V 4	Boxers, fillers, packers ...	9
I 6	Social, welfare and related workers (including placement officers) ...	5	V 5	Warehousemen, storekeepers and assistants ...	2
I 7	Proprietors, managers and executive workers in industry and commerce ...	—	V 6	Carpenters and joiners ...	2
I 8	Other workers in Group I (not elsewhere classified) ...	—	V 7	Knitters (hand and machine), weavers, netting makers ...	2
II 1	Typists, shorthand typists, secretaries ...	19	V 8	Upholsterers, machinists (bedding, etc.), mattress makers ...	—
II 2	Braille copyists and proof readers ...	2	V 9	Basket makers ...	—
II 3	Clerical workers ...	4	V 10	Mat makers ...	—
II 4	Telephone operators ...	22	V 11	Chair seaters ...	—
III 1	Working proprietors, shop managers ...	4	V 12	Brush makers ...	—
III 2	Shop assistants, salesmen ...	3	V 13	Wireworkers ...	1
III 3	Street vendors, newsvendors, hawkers ...	—	V 14	Boot and shoe repairers ...	—
III 4	Sales representatives, agents, collectors, commercial travellers, ...	2	V 15	Piano tuners ...	3
IV 1	Farmers, farm managers, market gardeners, farm workers ...	5	V 16	Firewood workers ...	3
IV 2	Gardeners, groundsmen ...	4	V 17	Craftsmen and production process workers (not elsewhere classified) ...	6
			V 18	Labourers (not elsewhere classified) ...	26
			VI 1	Domestic/canteen workers, cleaners, caretakers, porters ...	13
			VI 2	Launderers, dry cleaners ...	—
			VI 3	Miscellaneous workers (not elsewhere classified) ...	25
					237

SOCIAL WELFARE OFFICERS OF THE BLIND.—The social work services in the County area have been administered by Divisional Health Committees since 1st January, 1969, when the social welfare officers of the blind were transferred to divisional administration.

On the 31st December, 1969, the establishment of social welfare officers of the blind was 44. Their main duties were:—

- (i) discovery of blind persons and ascertainment of their needs;
- (ii) the visitation of blind persons in their homes or elsewhere within the area of the Council;
- (iii) teaching blind persons wherever practicable to read embossed literature;
- (iv) instructing blind persons in single pastime occupations in their homes or elsewhere and in methods of overcoming the effects of their disabilities;
- (v) generally assisting in promoting the welfare of blind persons;
- (vi) advising blind persons of all available social services, including entitlement to social security benefits and allowances or financial assistance from other sources;
- (vii) paying particular attention to those blind persons who are also suffering from some other form of handicap, the nature of which is such as to increase the disability of blindness;
- (viii) organising social centres and classes;
- (ix) care of the pre-school child and school child on holiday.

SOCIAL AND HANDICRAFT CENTRES.—At the end of 1969 there were 56 social and handicraft centres at which blind persons resident in the Administrative County area attended. In addition to the lessons given to the blind persons, musical entertainment and refreshments were provided.

The following list shows the districts in which the social and handicraft centres were situated:—

Accrington	Failsworth	Ormskirk
Ashton-under-Lyne	Farnworth	Orrell
Ashton-in-Makerfield	Fleetwood	Padiham
Atherton	Fulwood	Prestwich
Audenshaw	Golborne	Radcliffe
Bacup	Halewood (Whiston R.D.)	Rishton
*Barrow-in-Furness	Heywood	*Rochdale
*Blackpool (2)	Hindley	Standish
Brierfield	Horwich	*St. Helens
*Burnley	Huyton	Stretford
Chadderton	Kirkby	Swinton and Pendlebury
Chorley	Lancaster	Thornton Cleveleys
Colne	Leigh	Ulverston
Crompton	Litherland	Walton-le-Dale
Crosby	Lytham St. Annes	Westhoughton
Darwen	Middleton	Widnes
Denton	Morecambe	*Wigan
Eccles	Mossley	Worsley
	Nelson	

*Social and handicraft centre in the area of the County Borough, but available for blind or partially sighted persons resident in the Administrative County area.

TALKING BOOKS FOR BLIND PERSONS.—The British Talking Book Service for the Blind is organised by the Royal National Institute for the Blind in co-operation with St. Dunstan's. Originally library members used disc machines, but in May, 1964, the Library Committee decided not to issue any more machines of this type nor sanction their transfer to new users. Thus eventually all library members will use tape machines, which remain the property of the library and are only available on rental.

At the end of the year machines as under were in use by County residents:—

	Blind	Partially sighted
<i>Disc type—</i>		
Owned by user	2	—
Loaned to user by :—		
Agencies for the Blind	—	—
County Council	6	—
Other bodies, e.g., Rotary, Inner Wheel, Round Table, etc. —	—	—
<i>Tape type—</i>		
Rental paid by :—		
User	24	8
Agencies for the Blind	809	48
Other bodies, e.g., Rotary, Inner Wheel, Round Table, etc. 19	—	—

Since April, 1966, the County Council have on request paid the rental for all County users of tape machines. As cassettes containing the tape recordings may be sent by post free of charge, a completely free service is provided for library members.

HOLIDAYS FOR BLIND AND PARTIALLY SIGHTED PERSONS.—The scheme of the County Council for the welfare of blind and partially sighted persons provides that the Council shall promote facilities for holidays.

In addition to group holiday arrangements made by various local blind societies, the Council assisted individual blind people to have a holiday. Financial assistance was granted by the Council in 99 cases and details of these are set out below:—

Holiday Accommodation	Number of persons
Henderson Holiday Home, Blackpool	25*
Princess Alexandra Home, Blackpool	9*
Godfrey Ermen Home, Southport	10
North Regional Association for the Blind Group	
Holidays at St. Annes	18†
Royal National Institute for the Blind Homes ...	6*
Manchester Jewish Home, Southport	4
Group holidays arranged by local Blind Societies	17
Private booking	6
Group holidays arranged by the County Council...	4
TOTAL ...	99

*Includes one deaf/blind; in each case the Council also granted financial assistance to the sighted guide.

†Includes three deaf/blind; in these cases the Council also granted financial assistance to the sighted guides.

The County Council also assisted blind people and their guides to travel to holiday addresses by providing ambulance service transport, railway warrants, bus fares or hired coaches.

WIRELESS TELEGRAPHY ACTS, 1949 AND 1955.—A blind person (not being resident in a public or charitable institution or a school) who produces to the Postmaster-General a certificate, issued by or under the authority of the Council of the County or of the County Borough in which he is ordinarily resident, that he is registered as a blind person in the area of the County or the County Borough, may receive a wireless licence without the payment of any fee or purchase a combined licence for sound and television for 25/- less than the usual fee.

Applications for certificates of blindness for blind persons living in the Administrative County area are forwarded to the County Council. If the applicant is certified by one of the ophthalmologists acting on behalf of the County Council, the certificate is issued.

During the year 453 certificates were issued.

CERTIFICATES OF BLINDNESS FOR THE DEPARTMENT OF HEALTH AND SOCIAL SECURITY.—To enable blind persons to receive the higher rate of benefit payable to persons who are registered as blind within the meaning of the National Assistance Act, 1948, certificates of blindness in respect of the majority of the 501 persons who were registered as blind during the year 1969, were forwarded to the Department of Health and Social Security.

Partially Sighted Persons.—For the purposes of the County Council's scheme, a partially sighted person is considered to be one who is substantially and permanently handicapped by congenitally defective vision or in whose case illness or injury has caused defective vision of a substantial and permanently handicapping character. A register of partially sighted persons resident in the Administrative County area is maintained and services and facilities provided for the blind or general classes of the handicapped, as appropriate, are made available to them.

At the end of 1969 there were 2,082 persons in the Administrative County area registered as partially sighted and the following table gives their distribution according to certain specified age groups. For comparison, the figures for the preceding year are also given.

Year	Age in years						Total (all ages)
	0—	5—	16—	21—	50—	65—	
1968	11	138	66	218	240	1,269	1,942
1969	13	148	67	243	253	1,358	2,082

Deaf or Dumb Persons.—Local Societies for the Deaf act as agents of the County Council for the provision of welfare services in accordance with the Council's scheme and provision is made for minority representation of the Council on the committees of the various societies. Qualified welfare officers employed by the societies assist deaf people in many ways—by visiting, acting as interpreters, in obtaining employment, etc. In addition, they supervise institutes which cater for the religious, recreational and welfare needs of deaf and dumb people.

The County Council make a grant to each society based on the number of deaf persons over 16 years of age resident in the County area supervised by the society.

The following statement shows the Societies for the Deaf which received payments from the County Council for 1969 and the number of deaf persons living in the Administrative County area who were supervised by these societies:—

Deaf Society	No. of deaf persons aged 16 years and over
Blackpool and Fylde	4
Bolton, Leigh and District	137
Bury and District	12
Carlisle (Barrow) Diocesan Mission	12
Liverpool Adult Deaf and Dumb Society	127
Liverpool Catholic Deaf Society of St. Vincent de Paul	64*
Manchester Institute for the Deaf	201
North and East Lancashire Welfare Association	256
Oldham	65
Rochdale and District	51
Salford and District Association	64†
Southport and District	33
St. Helens and District	25
Warrington, Widnes and District	56
Wigan and District	86
TOTAL	1,065

*Included in the 127 supervised by the Liverpool Adult Deaf and Dumb Society.

†Included in the 201 supervised by the Manchester Institute for the Deaf.

The amount paid to the North Regional Association for the Deaf for the financial year 1969-70 was £971 4s. 0d.

Handicapped Persons other than the Blind, Partially Sighted, Deaf and Dumb.—REGISTER.—There were more names on the County Council's register of handicapped persons at the end of the year—7,845 as compared with 7,306 on the 31st December, 1968. Details of those registered on the 31st December, 1969, classified in accordance with the Department of Employment and Productivity code for disabled persons, are as follows:—

Code	Classification of handicap	Sex	Age in years					Total (all ages)
			0—	16—	30—	50—	65—	
A/E	Amputation	M.	1	4	65	151	156	377
		F.	—	6	29	54	95	184
F	Arthritis and rheumatism	M.	2	4	38	158	157	359
		F.	—	18	115	514	577	1,224
G	Congenital malformations and deformities	M.	29	32	28	20	15	124
		F.	28	25	31	25	19	128
H/L	Diseases of digestive and genito-urinary systems, of heart or circulatory system, of respiratory system (other than tuberculosis) and of skin.	M.	7	43	71	284	125	530
		F.	21	26	80	232	126	485
Q/T	Injuries of head, face, neck, thorax, abdomen, pelvis or trunk. Injuries or diseases (other than tuberculosis) of upper and lower limbs and of spine.	M.	25	54	125	180	92	476
		F.	19	48	93	173	124	457
V	Organic nervous diseases — epilepsy, disseminated sclerosis, poliomyelitis, hemiplegia, sciatica, etc.	M.	81	170	316	542	217	1,326
		F.	41	166	441	594	254	1,496
U/W	Neurosis, psychoses and other nervous and mental disorders not included in V.	M.	1	12	30	26	16	85
		F.	2	16	37	44	17	116
X	Tuberculosis (respiratory)	M.	—	1	11	9	7	28
		F.	—	4	9	6	3	22
Y	Tuberculosis (non-respiratory)	M.	—	1	11	11	8	31
		F.	—	1	14	11	7	33
Z	Diseases and injuries not specified above	M.	17	19	37	55	35	163
		F.	1	15	39	80	66	201
	TOTAL	M.	163	340	732	1,436	828	3,499
		F.	112	325	888	1,733	1,288	4,346

OCCUPATIONAL THERAPY.—Occupational therapists and handicraft instructors employed by the County Council attended handicapped persons in their own homes and gave instruction at social centres. In some divisions they taught handicrafts to residents of County Council Part III establishments. At 31st December, 1969 there were seven full-time and three part-time occupational therapists employed by the County Council along with 13 full-time and 11 part-time handicraft instructors.

In 1969, 11,462 domiciliary visits were made to 1,635 persons as compared with 12,584 visits to 1,933 persons in 1968. Handicraft classes were held in some districts under the Further Education Regulations, teaching staff being employed by the Education Committee. The number of persons attending classes, including those held at social centres, was 1,192. The comparable figure for 1968 was 1,229.

SOCIAL CENTRES.—County Council social centres have now been set up in all of the 17 health divisions and also in three of the four delegate districts. At the end of the year there were 46 in operation with a total active membership of 1,728. Voluntary organisations such as the Inskip League of Friendship, the Cripples' Help Society and the Invalid Tricycle Association also run social centres for the handicapped in some areas. Financial assistance was given to various local branches of these organisations.

OCCUPATIONAL CENTRES.—Two centres were in operation at the end of the year—at Caton where nine men, attending daily, worked under the supervision of a qualified wood machinist and at Fulwood where there was a part-time supervisor, 18 men and women attended on four days per week.

SOCIAL WORKERS.—Bearing in mind the recommendations of the Younghusband Committee, the County Council decided to employ a social worker in every division except Health Division No. 1 where it was considered more appropriate to employ a welfare assistant.

The social workers on the staff are employed to provide services for the elderly and the physically handicapped, and their duties include the maintenance of waiting lists for County Council residential accommodation. The divisional welfare organiser is now employed as a senior social worker with some administrative duties.

By the end of the year the County Council were employing 17 divisional welfare organisers, 42 whole-time and one part-time social welfare officers, 30 trainee social welfare officers and 19 whole-time and two part-time welfare assistants. Included in these figures are seven officers who during the year were sent on two-year training courses in social welfare.

RESIDENTIAL ACCOMMODATION.—*Lakeland View Home for the Physically Handicapped, Fleetwood.*—This 50-place specialised home for the handicapped has 38 permanent and 12 temporary places. The permanent accommodation was fully occupied throughout the year and there continued to be heavy demand on the temporary places for both short-stay in winter and holidays during the summer months.

A further home for the handicapped is in the course of erection at Swinton with another proposed in Crosby.

On the 31st December, 1969 the County Council were maintaining 182 epileptics in colonies and homes and 107 handicapped persons in homes run by voluntary organisations. In addition, 1,186 handicapped persons were maintained in the County Council's welfare homes or homes managed by other welfare authorities. By far the largest proportion of these persons had handicaps associated with old age, but 11 men and 10 women between the ages of 16 and 30 years, and 17 men and 20 women between the ages of 30 and 50 years, were living in such homes.

HOLIDAYS.—Arrangements were made for 561 handicapped persons to have financial assistance towards the cost of a holiday during the year. Details are as follows:—

	No. of handicapped persons
Nursing homes	77
Prestatyn Holiday Camp	166
Other group holidays... ..	132
Lakeland View, Fleetwood	186
TOTAL	561

Handicapped persons staying at holiday camps were conveyed by motor coach except for a small number who preferred to travel in their own motor invalid tricycles. Others staying in Lakeland View and nursing homes were conveyed by ambulance transport (234 cases) or were able to use public transport.

TRANSPORT.—*General.*—In addition to the transport mentioned in the preceding paragraph, arrangements were made to convey severely handicapped persons to weekly meetings at social and/or handicraft centres. During the year 201 persons were regularly conveyed by ambulance service vehicles, 602 by private hire transport and 513 by the specialised vehicles now in use in Health Divisions Nos. 2, 3, 4, 9, 11, 12, 14 and 17.

There is no doubt that the provision of suitable transport is a vital need in the establishment and operation of satisfactory services for all types of handicapped persons and it can be assumed that expenditure will continue to rise as the County Council's services for the handicapped develop and expand. There is a particular need for specialised vehicles and reference is made earlier in this report in the section relating to the Ambulance Service with regard to proposals to increase the existing fleet of eight vehicles.

CAR PARKING BADGES.—On a recommendation of his Advisory Committee on Health and Welfare Services the Minister of Health, in 1961, asked local welfare authorities to issue badges to identify the vehicles of handicapped drivers whose disability allowed only limited mobility. Each local authority was left to make its own arrangements for the issue of badges. The scheme was subsequently reviewed by the Ministry who recommended no changes in its operation but clarified the categories of handicapped persons eligible to receive badges, *viz:*—

1. Those with invalid carriages supplied by the Ministry of Health.
2. Those with defects of locomotion who need specially adapted vehicles.
3. Those who as a result of amputations or with heart and chest conditions have really severe difficulty in walking or who have a defect of the spine or central nervous system which makes control of the lower limbs difficult.

The County Council are issuing these badges in appropriate cases and by the end of the year they had been supplied to 954 handicapped persons. The number of badges issued or renewed during the year was 293. The badges are valid for a period of three years from date of issue.

ADAPTATIONS AT THE HOMES OF HANDICAPPED PERSONS.—Assistance was given to 75 handicapped persons in connection with adaptations needed at their homes to enable the Department of Health and Social Security to supply an invalid vehicle and storage shed. In addition, 317 persons were assisted with other alterations to their homes designed to afford them greater comfort or convenience. The cost to the County Council was £15,222.

AIDS, GADGETS AND EQUIPMENT.—Small items costing £5 or less are provided free. Equipment costing more than £5, such as lifting hoists, page turners, etc., are supplied on loan and can be withdrawn and re-issued when no longer needed by the handicapped person.

CHARGES FOR SERVICES PROVIDED FOR HANDICAPPED PERSONS.—With a few exceptions adaptations are now carried out at the homes of handicapped persons free of charge and items of equipment, e.g., lifting devices and aids to daily activities are issued free or on loan. Those persons helped under the assisted holiday scheme are assessed to contribute in accordance with their means.

EPILEPTICS AND SPASTICS.—The following statement shows the number of persons ordinarily resident in the Administrative County who are known to be suffering from epilepsy or cerebral palsy:—

					0—	Age (years) 16—	Total	
<i>Epileptics—</i>								
At home or in special schools	...	...	...	...	309	420	729
In epileptic colonies	...	...	...	...	—	182	182
In other L.C.C. Part III accommodation	...			...	3	31	34
TOTAL					...	312	633	945
<i>Spastics—</i>								
At home or in special schools	...	...	...	...	374	360	734
In homes run by voluntary organisations	...			...	—	25	25
In other L.C.C. Part III accommodation	...			...	2	34	36
TOTAL					...	376	419	795

The services provided for epileptics and spastics and the liaison between the local health services and the diagnostic and remedial services provided by regional hospital boards continued unchanged throughout the year.

Provision of Sheltered Employment for Blind, Partially Sighted and Severely Disabled Sighted Persons.—A scheme approved by the Minister of Labour, for the provision of sheltered employment for blind, partially sighted and severely disabled sighted persons came into operation on the 10th January, 1966.

Details are given below in regard to the sheltered employment of seriously disabled persons in accordance with the scheme.

BLIND AND PARTIALLY SIGHTED.—At the end of 1969 the following 13 workshops employed a total of 116 blind and partially sighted persons under arrangements with the County Council:—

Controlling Body	Address of Workshop for the Blind
Blackburn County Borough Council	Mill Hill Street, Mill Hill, Blackburn.
Blackpool and Fylde Society for the Blind	Castlegate, Lytham Road, Blackpool, S.S.
Bolton County Borough Council	Marsden Road, Bolton.
Fulwood (Preston) Institute for Blind Welfare ...	Lytham Road, Fulwood, near Preston.
Industrial Services Consortium (formerly Leeds County Borough Council)	Roundhay Road, Leeds.
Liverpool Workshops for the Blind	Cornwallis Street, Liverpool.
Liverpool Catholic Blind Institute	Brunswick Road, Liverpool.
Oldham Workshops for the Blind Management Committee	New Radcliffe Street, Oldham.
St. Helens County Borough Council	Boundary Road, St. Helens.
S.E.L.N.E.C. (Local Authority) Sheltered Workshop Committee	Old Trafford, Manchester, 16.
Stockport County Borough Council	St. Petersgate, Stockport.
Warrington County Borough Council	Richmond Avenue, Warrington.
Wigan, Leigh and District Society for the Blind ...	Darlington Street East, Wigan.

The types of employment and the number of blind persons employed in the various occupations are set out below:—

Occupation	Men	Women	Total
Brush maker	36	2	38
Skip and basket maker	27	1	28
Machine knitter	—	17	17
Mat maker	12	—	12
Mattress maker	3	—	3
Assembly worker	—	1	1
Chair caner	—	1	1
Furniture maker	3	—	3
Piano tuner	2	—	2
Seamstress	—	2	2
Other	9	—	9
Undergoing re-training	—	—	—
TOTAL ...	92	24	116

Remuneration.—In July, 1967, a new national wages structure for employees in workshops for the blind providing for higher rates of pay and for the termination of the system based on "earnings" and "augmentation" was introduced. Since then all payments to workshop employees have been treated as wages, the County Council's payment to workshops in respect of their trading losses now includes a contribution towards employees' wages. In addition to the standard rate, an employee may receive a service supplement and/or production bonus.

A further increase in the basic rates for employees of workshops for the blind which links them to the rates payable to local authorities' manual workers was agreed by the National Joint Council of Workshops for the Blind effective from 29th September, 1969.

All the blind persons employed at workshops for the blind are registered under the Disabled Persons (Employment) Acts, 1944 and 1958, and are approved as blind workers by the Department of Employment and Productivity.

HOME WORKERS SCHEME.—The County Council operate a home workers scheme in accordance with the recommendations of the Local Authorities Advisory Committee. This lays down minimum net weekly earnings for different occupations which must be attained before a blind person is eligible for admission to the scheme. Augmentation is also paid by the County Council to home workers. On earnings up to and including £3 0s. 0d. per week an additional £8 1s. 6d. per week is paid to men and £7 5s. 0d. per week to women. For earnings over £3 0s. 0d. per week a reduced amount of augmentation is paid in accordance with a sliding scale.

All home workers are registered under the Disabled Persons (Employment) Acts, 1944 and 1958, and approved by the Department of Employment and Productivity.

The following agencies for the blind supervise on behalf of the County Council the blind persons included in the home workers' scheme:—

Accrington and District Institution for the Blind.
Ashton-under-Lyne and District Society for the Blind.
Colne and District Society for the Blind.
Fulwood (Preston) Institute for Blind Welfare.
Liverpool Cornwallis Street Workshops for the Blind.
National Library for the Blind (Northern Branch).
Wigan, Leigh and District Society for the Blind.

The occupations of the home workers at the end of 1969 were as follows:—

Occupation	Men	Women	Total
Piano tuner	6	—	6
Hand/machine knitter	—	7	7
Braille copyist and proof-reader	2	4	6
Firewood dealer	1	—	1
Boot and shoe repairer	1	—	1
Poultry keeper	—	1	1
Confectioner	1	—	1
News vendor	1	—	1
Music teacher	—	1	1
TOTAL	12	13	25

PHYSICALLY HANDICAPPED.—At the end of the year nine men and two women were employed at basketry finishing, book binding, textile hand block printing and general work in the following workshops under arrangements with the County Council and with the approval of the Department of Employment and Productivity:—

Controlling Body	Address of Workshop
Blackpool and Fylde Society for the Blind	Castlegate, Lytham Road, Blackpool, S.S.
Oldham Workshops for the Blind Management Committee	New Radcliffe Street, Oldham.
Queen Elizabeth's Foundation for the Disabled	Dorincourt Estates, Leatherhead Court, Surrey.
Sir Robert Jones Memorial Workshops	74, Upper Parliament Street, Liverpool, 8.
Yateley Industries for Disabled Girls	Mill Lane, Yateley, Camberley, Surrey.

MENTALLY DISORDERED.—One man and three women were employed at the end of 1969 under the sheltered employment scheme in making carnival novelties at Cheadle Royal Hospital, Cheadle, Cheshire.

OTHER SERVICES

Registration of Homes for Disabled and/or Old Persons.—Sections 37 to 40 of the National Assistance Act, 1948, provide for the registration and inspection by the councils of counties and county boroughs of disabled persons' and old persons' homes.

The day-to-day administration in connection with the registration and inspection of disabled persons' and old persons' homes was referred, throughout the Administrative County area, to the divisional health committees and 76 such homes were registered at 31st December, 1969. The homes were situated in the areas of the following health divisions:—

Health Division No.	District	No. of registered homes
1	Grange U.D.	1
2	Lancaster M.B.	2
	Lancaster R.D.	3
	Morecambe and Heysham M.B.	3
3	Fleetwood M.B.	2
	Lytham St. Annes M.B.	22
	Thornton Cleveleys U.D.	3
4	Fulwood U.D.	1
	Garstang R.D.	1
	Leyland U.D.	1
	Preston R.D.	2
5	Accrington M.B.	2
	Oswaldtwistle U.D.	1
	Clitheroe R.D.	1
6	Nelson M.B.	2
	Burnley R.D.	1
	Colne M.B.	1
7	Crosby M.B.	5
	Formby U.D.	2
	West Lancashire R.D.	1
9	Widnes M.B.	1
	Whiston R.D.	1
10	Haydock U.D.	1
11	Leigh M.B.	1
12	Prestwich M.B.	2
	Haslingden M.B.	1
	Tottington U.D.	2
13	Heywood M.B.	1
14	Lees U.D.	1
	Royton U.D.	1
15	Eccles M.B.	2
	Swinton and Pendlebury M.B.	1
16	Urmston U.D.	3
17	Ashton-under-Lyne M.B.	1
	TOTAL—Administrative County	76

War Charities Act, 1940.—Section 41 of the National Assistance Act, 1948, provides for the registration of charities for disabled persons. It is enacted that the War Charities Act, 1940, shall have effect as if references to a War Charity in that Act included references to a charity for disabled persons. Applications to the County Council for registration are referred for consideration to the appropriate divisional health committees and at 31st December, 1969, there were 89 charities registered.

Charities Act, 1960.—The County Council maintain an index of local charities in accordance with information supplied by the Charity Commission.

Compulsory Removal of Persons in need of Care and Attention.—Section 47 of the National Assistance Act, 1948, has the purpose of securing necessary care and attention for persons who are suffering from grave chronic disease or, being aged, infirm or physically incapacitated, are living in insanitary conditions and are unable to devote to themselves, and are not receiving from other persons, proper care and attention.

For the purposes of this section, the appropriate authorities are the councils of county boroughs and county districts. If the medical officer of health of an appropriate authority certifies such action to be necessary, and subject to certain other specified conditions, the authority may apply to a court of summary jurisdiction for an order for the removal of such a person to a hospital or other suitable place.

The National Assistance (Amendment) Act, 1951, an Act to amend section 47 of the 1948 Act, came into operation on the 1st September, 1951. Its aim and effect was to speed up the procedure for obtaining orders under section 47 in certain instances where removal without delay was certified to be necessary by the medical officer of health and another registered medical practitioner.

Use of the above powers was found necessary in 10 instances during 1969. Removal to hospital was ordered in six cases and to homes for the elderly in four. Of the former, three subsequently returned home, two remained in hospital, and the other was transferred to a home for the elderly. Of those admitted to homes for the elderly, two remained and two were later admitted to hospital where one subsequently died.

SANITARY CIRCUMSTANCES OF THE COUNTY

Water Supply.—With the exception of a comparatively small and gradually diminishing number of isolated areas the Administrative County is, generally speaking, well provided with a constant, plentiful and wholesome water supply.

The following tabular statement shows the statutory water undertakers covering the whole of the Administrative County area, the types of supply and the County districts served by each at the end of 1969.

LOCAL WATER SUPPLIES

Statutory water undertaker	Type of supply	Districts served
<i>Joint Bodies—</i>		
Calder Water Board	Upland surface water and deep wells	Accrington M.B. Church U.D. Clayton-le-Moors U.D. Great Harwood U.D. Haslingden M.B. (part) Oswaldtwistle U.D. Padiham U.D. Rishton U.D. Burnley R.D. (part)
Furness Water Board	Upland surface water	Dalton-in-Furness U.D. Grange U.D. Ulverston U.D. North Lonsdale R.D.
Fylde Water Board	Upland surface water	Clitheroe M.B. Darwen M.B. Fleetwood M.B. Kirkham U.D. Lytham St. Annes M.B. Poulton-le-Fylde U.D. Preesall U.D. Thornton Cleveleys U.D. Blackburn R.D. Clitheroe R.D. Fylde R.D. Garstang R.D. Lancaster R.D. (part) Preston R.D. (part)
Lune Valley Water Board	Upland surface water	Carnforth U.D. Lancaster M.B. Morecambe and Heysham M.B. Lancaster R.D. (part) Lunesdale R.D.
Makerfield Water Board	Upland surface water and deep wells	Abram U.D. Ashton-in-Makerfield U.D. Aspull U.D. (part) Golborne U.D. (part) Hindley U.D. Ince-in-Makerfield U.D. Leigh M.B. Newton-le-Willows U.D. Orrell U.D. Skelmersdale and Holland U.D. (part) Standish-with-Langtree U.D. West Lancashire R.D. (part) Wigan R.D.

LOCAL WATER SUPPLIES (*continued*)

Statutory water undertaker	Type of supply	Districts served
North Calder Water Board	Upland surface water and springs	Barrowford U.D. Brierfield U.D. Colne M.B. Nelson M.B. Trawden U.D. Burnley R.D. (part)
Preston and District Water Board	Upland surface water	Fulwood U.D. Leyland U.D. Longridge U.D. Walton-le-Dale U.D. Preston R.D. (part) West Lancashire R.D. (part)
West Lancashire Water Board	Deep wells	Formby U.D. Ormskirk U.D. Skelmersdale and Holland U.D. (part) West Lancashire R.D. (part)
West Pennine Water Board	Upland surface water	Ashton-under-Lyne M.B. Audenshaw U.D. Chadderton U.D. (part) Crompton U.D. Droylsden U.D. (part) Failsworth U.D. (part) Heywood M.B. Lees U.D. Littleborough U.D. Middleton M.B. Milnrow U.D. Mossley M.B. Prestwich M.B. (part) Royton U.D. Wardle U.D. Whitworth U.D.
<i>County Borough Councils—</i>		
Bolton C.B.C.	Upland surface water	Aspull U.D. (part) Bacup M.B. Farnworth M.B. Haslingden M.B. (part) Kearsley U.D. Little Lever U.D. Radcliffe M.B. Ramsbottom U.D. Rawtenstall M.B. Tottington U.D. Turton U.D. Westhoughton U.D. Whitefield U.D. Worsley U.D. (part) Burnley R.D. (part)
Liverpool C.B.C.	Upland surface water	Chorley M.B. (part) Crosby M.B. Huyton-with-Roby U.D. Kirkby U.D. (part) Litherland U.D. Prescot U.D. Warrington R.D. (part) West Lancashire R.D. (part) Whiston R.D. (part)
Manchester C.B.C.	Upland surface water	Atherton U.D. Chadderton U.D. (part) Denton U.D. Droylsden U.D. (part) Eccles M.B. Failsworth U.D. (part) Irlam U.D. Prestwich M.B. (part) Stretford M.B. Swinton and Pendlebury M.B. Tyldesley U.D. Urmston U.D. Worsley U.D. (part)

LOCAL WATER SUPPLIES (*continued*)

Statutory water undertaker	Type of supply	Districts served
St. Helens C.B.C.	Upland surface water and deep wells	Billinge and Winstanley U.D. Haydock U.D. Kirkby U.D. (part) Rainford U.D. Warrington R.D. (part) West Lancashire R.D. (part) Whiston R.D. (part)
Warrington C.B.C.	Upland surface water	Golborne U.D. (part) Warrington R.D. (part)
<i>County District Councils—</i>		
Adlington U.D.C.	Upland surface water and springs	Adlington U.D.
Blackrod U.D.C.	Upland surface water and springs	Blackrod U.D.
Horwich U.D.C.	Upland surface water, deep well and springs	Horwich U.D.
Widnes M.B.C.	Deep wells	Widnes M.B. Whiston R.D. (part)
Withnell U.D.C.	Upland surface water	Withnell U.D.
Chorley R.D.C.	Upland surface water	Chorley R.D. West Lancashire R.D. (part)

PUBLIC MAINS SUPPLIES.—The following table, compiled from the local health reports, shows the approximate number of houses and population at the end of 1969 and the preceding year receiving water from the public mains.

Water supplied from public mains

	1968		1969	
	No. of dwelling houses	No. of population	No. of dwelling houses	No. of population
Total Urban Districts	699,000	2,013,200	707,500	2,028,100
Total Rural Districts	130,800	398,800	135,800	414,300
Administrative County... ..	829,800	2,412,000	843,300	2,442,400

In addition to 18,250 new houses reported to have been connected during the year to the public mains supply, there were also 186 existing houses provided with such a supply for the first time.

In areas supplied from outside sources sampling of the water by the local authorities is in many cases considered to be unnecessary, or may be carried out only in consequence of complaints from consumers, owing to the fact that the supplying authority itself undertakes routine sampling. During 1969, however, 329 samples of the untreated water were submitted from 15 County districts for bacteriological examination and of these 28 were reported to be unsatisfactory. Of 33 samples submitted from six districts for chemical analysis, one was unsatisfactory. Where apparatus is installed for the treatment of water going into supply, samples of the treated water numbered 2,133 from 60 districts for bacteriological examination and 102 from 29 districts for chemical analysis. Unsatisfactory results were reported in 98 of the former and three of the latter.

Fluoridation of Public Water Supplies.—Whilst the County Council in 1966 approved a policy of fluoridation of public water supplies little or no progress was made during the year towards its introduction in any area of the Administrative County, for in no water undertaking area are all the Councils in favour of fluoridation.

PRIVATE SUPPLIES.—According to local reports some 5,900 dwellings, housing an estimated population of 15,500 were still dependent on supplies from wells, springs, etc., at the end of 1969. Bacteriological examination of the untreated water was made in 375 instances and 176 of the samples were found to be unsatisfactory. Chemical analyses numbered 19, of which seven gave unsatisfactory results. Where treatment was installed, 115 samples of treated water taken for bacteriological examination gave 44 unsatisfactory results but none of the three submitted for chemical analysis was unsatisfactory. In all cases of unsatisfactory results the consumers were notified and advised on all necessary precautions. In several cases alternative supplies, including connection to the public mains, were provided.

Drainage and Sewerage.—In the following paragraphs reference is made to financial assistance granted to local authorities under the Rural Water Supplies and Sewerage Acts, and section 56 of the Local Government Act, 1958, in connection with water supply schemes as well as drainage and sewerage schemes.

RURAL WATER SUPPLIES AND SEWERAGE ACTS, 1944-65.—Local authorities are obliged by the Act of 1944 to provide a supply of wholesome water *in pipes* to every *rural locality* in their district in which there are houses or schools, and an extension of mains to points which would enable the houses or schools to be connected thereto at a reasonable cost.

The Act enables the Minister of Housing and Local Government to make grants to local authorities towards the cost of providing a supply, or improving an existing supply of water in a rural locality or of making adequate provision for the sewerage, or the disposal of the sewage, of a rural locality. Grants in respect of the latter are only made where the Minister is satisfied that the need for the works is due to anything done or proposed to be done to provide or increase piped water supplies in the localities concerned. Where under the Act the Minister undertakes to make a contribution, the County Council concerned are also required to contribute.

The Act also provides County Councils with full opportunity of expressing their views on the scope of schemes and the desirability or otherwise of individual schemes being confined to separate parishes or districts or embracing all the areas in question, by requiring local authorities to consult with the County Council before submitting schemes to the Minister.

The Act of 1955 amended the requirements of section 1 of the Act of 1944 with regard to contributions towards expenses incurred by local authorities in connection with water supplies, sewerage and sewage disposal in rural localities.

The Rural Water Supplies and Sewerage (No. 2) Act, 1955, increased the limit of contributions out of money provided by Parliament which may be made under the section referred to above, and this limit was further raised by the Act of 1965.

With the formation during recent years of a number of water boards, which included county borough council undertakings, doubts arose as to the legality of continued contributions to rural district councils under the above Acts as long as a county borough council was a constituent member of a joint water board covering the area of the rural district. The position was clarified by the Rural Water Supplies and Sewerage Act, 1961, which, *inter alia*, provides that where a contribution towards the expenses of a scheme under the Rural Water Supplies and Sewerage Acts is made by the Minister in respect of any rural locality, it continues to be obligatory for the County Council to make a contribution, whatever may be the nature of the water authority to whom the Minister makes his contribution.

Particulars of applications received during 1969 are given in the following table:—

Authority	Nature of scheme and estimated cost	Action taken
Calder Water Board ...	Water supply—Habergham Eaves (£8,000)	Approved in March 1969. The Minister has now agreed to make a lump sum payment of £1,764. The County Council's contribution will be £1,638.
Fylde Water Board ...	Water supply — nine properties — Parish of Chaigley (£4,490).	Approved in September 1969. The Minister has now agreed to make a payment of £1,134 towards the cost of this scheme and the County Council's contribution will be £1,053.
Grange U.D.C. (North Lonsdale R.D.C.) ...	Sewerage and sewage disposal (joint basis) scheme 'A' — Cartmel peninsula (£403,550)	Under consideration.
Oswaldtwistle U.D.C. ...	Sewerage — Kendal Row area of Belthorn Village (£5,410)	Under consideration.
Blackburn R.D.C. ...	Surface water sewer — Ribchester Road — Knowsley Road (£9,708)	Approved for submission to the Minister of Housing and Local Government.
Fylde R.D.C. ...	Sewerage — Village of Thistleton (£9,064)	Approved for submission to the Minister of Housing and Local Government.
Garstang & Fylde Rural Districts (Joint scheme) ...	Sewerage — Gt. Eccleston and St. Michaels (£496,500)	Under consideration.
Garstang R.D.C. (Fylde Water Board) ...	Water supply — Claughton (£6,902)	Under consideration.
North Lonsdale R.D.C. ...	Sewerage and sewage disposal — Backbarrow and Haverthwaite (£162,965)	Under consideration.
Preston R.D.C. ...	Sewerage and sewage disposal — Ribchester (£194,382)	Under consideration.

In addition further action was taken during the year in connection with certain schemes which were the subject of applications made in previous years, and particulars are given in the following table:—

Authority	Nature of scheme and estimated cost	Action taken
Calder Water Board ...	Water supply — Cross Edge district (£12,092)	In July, 1968 the County Council agreed to make a lump sum payment of £3,224 towards the cost of this scheme which it was originally estimated would cost £10,400. The price has now increased to £12,092 and the County Council have increased their contribution to £3,705. The Minister's grant has also increased from £3,472 to £3,990.
Fylde Water Board ...	Water supply — Waterside (£1,470)	In April, 1968 the County Council agreed to make a payment of a lump sum of £419 towards the cost of this scheme. The Minister has now decided to pay a reduced grant of £390 because of savings made on the scheme and the County Council's grant will now be £362.
Furness Water Board (North Lonsdale R.D.C.) ...	Water supply — Hamlets of Newland and Arrad Foot (£16,105)	Approved for submission to the Minister of Housing and Local Government.
Fylde Water Board (Garstang R.D.C.) ...	Mains water supply — Barnacre with Bonds (£3,283)	In November, 1968 the County Council agreed to make a lump sum grant of £981 towards the cost of this scheme and the Minister's grant was to be £1,057. In view of savings made on the scheme the Minister's grant has been reduced to £927, and the County Council has reduced its grant to £861.
Preston and District Water Board ...	Longridge Fell improvement scheme phases 1 to 3 — Lower Dutton supplies (£54,800)	This scheme was approved in April, 1969 and the Minister has now undertaken to make a grant of £430 half yearly for 30 years and the County Council's grant will be £399 half yearly for 30 years.
Blackburn R.D.C. ...	Sewerage — Tockholes and Livesey (£81,200)	Approved in October, 1968. The Minister has now agreed to make a payment of £1,049 half yearly for 30 years. The County Council's contribution will be £974 half yearly for 30 years.
Burnley R.D.C. ...	Sewerage — Parish of Read (£4,308)	In February, 1963 the County Council agreed to make a grant of £897 towards the cost of this scheme and the Minister's grant was to be £966. In view of savings made on the scheme the Minister has reduced his grant to £927 and the County Council's grant will now be £861.
Chorley R.D.C. ...	Water supply — Rivington (£11,386)	In December, 1965 the County Council agreed to make half yearly payments of £129 for 30 years towards this scheme and the Minister's grant was £139 half yearly for 30 years. In January, 1969 the Minister reduced his grant to £125 half yearly for 30 years and the County Council's grant was reduced to £116 half yearly for 30 years. The Minister has now indicated that since the final cost of the scheme was £11,386, he has increased his grant to £139 half yearly for 30 years and the County Council's revised grant will be £129 half yearly for 30 years.
Fylde R.D.C. ...	Sewerage — Wharles (£5,237)	In July, 1964, the County Council agreed to a lump sum payment of £1,240 towards the cost of this scheme and the Minister's grant was £1,335. The Minister has now decided to reduce his grant to £1,097 and the County Council's grant will now be £1,019.
North Lonsdale R.D.C....	Sewerage and sewage disposal — Low Furness (£346,946)	Approved for submission to the Minister of Housing and Local Government subject in part to an application for grant under the Local Government Act, 1958.
North Lonsdale R.D.C....	Sewerage — Sparkbridge (£3,216)	In April, 1968 the County Council agreed to make a lump sum grant of £573 towards the cost of this scheme and the Minister's grant was £617. In view of savings on the scheme the Minister has now decided to pay a reduced grant of £548 and the County Council's revised lump sum grant is £509.
North Lonsdale R.D.C....	Sewerage — Tarn Close (£3,116)	In April, 1968 the County Council agreed to make a lump sum grant of £656 towards the cost of this scheme and the Minister's grant was £706. In view of savings made on the scheme the Minister has decided to reduce his grant to £585 and the County Council's revised grant will be £543.
Preston R.D.C. ...	Reorganisation scheme — Longridge Fell supplies — Longridge, Ribchester, Dilworth, Hothersall and Dutton areas Phases II and III (£29,350)	Under consideration.
Warrington R.D.C. ...	Main drainage (stage II) — Winwick, Croft and Houghton Green (£90,700)	Approved for submission to the Minister of Housing and Local Government.

Authority	Nature of scheme and estimated cost	Action taken
Warrington R.D.C. ...	Drainage — Warrington Road, Risley (£18,800)	In July, 1967 the County Council agreed to a revised contribution of £149 half yearly for 30 years towards the cost of this scheme. The Minister's contribution was £160 half yearly for 30 years. The Minister has now reduced his half yearly contributions to £115 and the County Council's contribution will be £107 half yearly for 30 years.
Warrington R.D.C. ...	Main drainage — Glazebrook (£32,000)	Approved in July, 1966. The Minister has now agreed to make a payment of £428 half yearly for 30 years and the County Council's grant will be £397 half yearly for 30 years.
West Lancs. R.D.C. ...	Sewerage and sewage disposal work—Bispham Green (£7,817)	In July, 1967 the County Council agreed to make a lump sum payment of £765 towards the cost of this scheme and the Minister was to pay £824. The Minister has now decided to increase his grant to £1,132 and the County Council's revised contribution will be £1,051.
Tottington U.D.C. ...	Water supply — Affetside, Four Lane Ends, Three Lane Ends (£55,183)	Approved in March, 1967. The Minister has now agreed to make half yearly payments of £692 for 30 years and the County Council's grant will be £643 half yearly for 30 years.

LOCAL GOVERNMENT ACT, 1958, SECTION 56.—Under the provisions of this Act the County Council has continued to give financial assistance to County District Councils towards the cost of schemes of sewerage and sewage disposal.

Particulars of the applications received during the year 1969 are set out below:—

Authority	Nature of scheme and estimated cost	Action taken
Ashton-in-Makerfield U.D.C. ...	Relaying of sewer — Birch Grove (£700)	Approved for the purposes of the County Council's scheme for financial assistance.
Ashton-in-Makerfield U.D.C. ...	Surface water sewer — Garswood area (additional scheme £35,250)	Approved for the purposes of the County Council's scheme of financial assistance.
Ashton-under-Lyne M.B.C. ...	Reconstruction of sewer — Katherine Street (£60,000)	Approved for the purposes of the County Council's scheme of financial assistance.
Aspull U.D.C. ...	Main drainage (£246,123)	Approved for the purposes of the County Council's scheme of financial assistance.
Atherton U.D.C. ...	Relief sewer — Leigh Road, Atherton (£9,835)	Approved for the purposes of the County Council's scheme of financial assistance.
Dalton-in-Furness U.D.C. ...	Main sewerage — Urban District (£303,800)	Approved for the purposes of the County Council's scheme of financial assistance.
Formby U.D.C. ...	Sewage disposal — sewer to Hillhouse sewage disposal works (£150,000)	Approved for the purposes of the County Council's scheme of financial assistance.
Haslingden M.B.C. ...	Surface water sewer — Clod Lane (£1,609)	Approved for the purposes of the County Council's scheme of financial assistance.
Haslingden, Rawtenstall... and Bacup Outfall Sewerage Board	Replacement of existing Gas Holder (£20,406)	Under consideration.
Haslingden, Rawtenstall... and Bacup Outfall Sewerage Board	Sludge treatment plant — Ewood sewage disposal works (£112,652)	Under consideration.
Huyton-with-Roby U.D.C. ...	Relief sewer — Page Moss (£33,082)	Approved for the purposes of the County Council's scheme of financial assistance.
Kearsley U.D.C. ...	Sewerage and sewage disposal — Glen Cottage, off Manchester Road (£2,100)	Approved for the purposes of the County Council's scheme of financial assistance.
Kirkby U.D.C. ...	Construction of Valley sewer (£74,365)	Approved for the purposes of the County Council's scheme of financial assistance.
Leigh M.B.C. ...	Sewerage and sewage disposal — Central drainage area (£195,323)	Approved for the purposes of the County Council's scheme of financial assistance.
Leigh M.B.C. ...	Renewal of pumping station — Common Lane (£4,400)	Approved for the purposes of the County Council's scheme of financial assistance.
Prestwich M.B.C. ...	Extension of sewage disposal works — Simister (£42,250)	Approved for the purposes of the County Council's scheme of financial assistance.

Authority	Nature of scheme and estimated cost	Action taken
Royton U.D.C. ...	Sewerage — Town centre (£8,300)	Approved for the purposes of the County Council's scheme of financial assistance.
Royton U.D.C. ...	Sewage disposal works — Reconstruction (£483,000)	Approved for the purposes of the County Council's scheme of financial assistance.
Stretford M.B.C. ...	Sewerage — Clifford Ward re-development area (£33,500)	Approved for the purposes of the County Council's scheme of financial assistance.
Stretford M.B.C. ...	Replacement of trunk sewer — Chester Road (£410,000)	Approved for the purposes of the County Council's scheme of financial assistance.
Stretford M.B.C. ...	Sewerage — Cornbrook housing scheme (£15,000)	Approved for the purposes of the County Council's scheme of financial assistance.
Stretford M.B.C. ...	Sewerage — King Street (£20,500)	Approved for the purposes of the County Council's scheme of financial assistance.
Westhoughton U.D.C. ...	Sewerage and sewage disposal (£2,050,000)	Under consideration.
Blackburn R.D.C. and Preston R.D.C. (joint scheme)	Sewerage — Mellor Brook area (£10,850)	Approved for the purposes of the County Council's scheme of financial assistance.
Burnley R.D.C. ...	Sewerage scheme — parishes of Old Laund Booth and Read extensions (£270)	Approved for the purposes of the County Council's scheme of financial assistance.
Burnley R.D.C. ...	Surface water drain — Roughlee Booth (£3,771)	Approved for the purposes of the County Council's scheme of financial assistance.
Fylde R.D.C. ...	Surface water sewer — Little Eccleston-w-Larbeck (£10,750)	Approved for the purposes of the County Council's scheme of financial assistance.
Lunesdale R.D.C. ...	Improvement of existing drainage arrangements — Brookhouse and Caton (£92,700)	Approved for the purposes of the County Council's scheme of financial assistance.
Warrington R.D.C. ...	Surface water and foul sewers — Manchester Road, Woolston (£8,400)	Approved for the purposes of the County Council's scheme of financial assistance.
Whiston R.D.C. ...	Surface water sewer — Windle and Eccleston (£8,944)	Under consideration.

In respect of schemes submitted prior to 1969, development occurred during the year as follows:—

Authority	Nature of scheme and estimated cost	Action taken
Ashton-under-Lyne M.B.C. ...	Re-sewering — Hillgate redevelopment area — Curzon Road/Alfred Street (£43,911)	Approved for the purposes of the County Council's scheme of financial assistance.
Bacup Rawtenstall Joint Sewer Committee ...	Extensions to trunk sewer from Queens Square to Ewood Bridge (£14,900)	Approved for the purposes of the County Council's scheme of financial assistance.
Clitheroe M.B.C. ...	Improvement of sewage disposal works (£250,400)	Approved for the purposes of the County Council's scheme of financial assistance.
Crompton U.D.C. ...	Flood prevention — Buckstones Road area (£83,850)	Approved for the purposes of the County Council's scheme of financial assistance.
Golborne U.D.C. ...	Sewage disposal works at Mill Lane, Golborne and Heyshott Lane, Glazebury (£726,700)	Approved for the purposes of the County Council's scheme of financial assistance.
Hindley U.D.C. ...	Reconstruction of culvert — Park Road (£5,500)	Approved for the purposes of the County Council's scheme of financial assistance.
Preesall U.D.C. ...	New sewer — police station to sewage disposal works (£25,000)	Approved for the purposes of the County Council's scheme of financial assistance.
Standish-with-Langtree U.D.C. ...	Internal drainage phase II — Standish (£277,500)	Approved for the purposes of the County Council's scheme of financial assistance.
Tyldesley U.D.C. ...	Sewage disposal works — improvements (£162,000)	Under consideration.
Blackburn R.D.C. ...	Surface water sewer — Livesey Branch Road Area (£35,500)	Approved for the purposes of the County Council's scheme of financial assistance.
Burnley R.D.C. ...	Sewers and sewage works — Parish of Foulridge (£51,129)	Approved for the purposes of the County Council's scheme of financial assistance.
North Lonsdale R.D.C. ...	Sewerage — Sparkbridge (£3,216)	Approved for submission to the Minister of Housing and Local Government subject in part to an application for grant under the Rural Water Supplies and Sewerage Acts 1944-65.
Whiston R.D.C. ...	Sewerage and sewage disposal schemes for retrospective approval (£96,500)	Under consideration.

Closet Accommodation.—The statement below gives the totals of the main types of all closet accommodation (including that at factories, schools, etc.,) in the Administrative County area at the end of 1969 as compiled from the local health reports. The number of *dwellings* not on the water carriage system was approximately 7,400.

Closet Accommodation at end of 1969

	Urban districts	Rural districts	Administrative County
Privy middens	250	730	980
Privy closets	270	800	1,070
Pail closets	2,910	2,980	5,890
Fresh-water closets	794,920	148,150	943,070
Waste-water closets	17,320	530	17,850

At the end of the year the total number of trough closets remaining in the Administrative County area was reported to be 180.

A summary of the action taken in the County districts during 1969 to provide the more sanitary types of closet accommodation is given below:—

Conversions	Urban districts	Rural districts	Administrative County
Privy closets to fresh-water closets	20	60	80
Privy closets to pail closets	20	—	20
Pail closets to fresh-water closets	80	210	290
Waste-water closets to fresh-water closets	1,180	60	1,240

Public Cleansing.—At the end of 1969 there were reported to be 959,680 movable dustbins in use in the Administrative County area and the number of dry ashpits had declined to approximately 210. Throughout the County area a weekly collection of household and, in most cases, trade refuse was normal but in a very few districts, mainly rural in character, the interval between collections was extended, the maximum period being two weeks. The work was undertaken by labour directly employed by the local authorities and using covered motor vehicles specially designed for the purpose. Sixty districts reported the partial use of the paper sack system of refuse collection during the year. This system now extends to approximately 68,100 premises. Controlled tipping was the generally adopted means of disposing of household refuse, other methods reported being crude tipping into disused mineshafts and quarries or separation and incineration.

In 56 of the 108 County districts the owner or occupier was responsible for the renewal of movable dustbins, in 43 districts they were supplied out of the rate fund, in one they were provided by the council on an annual rental and in the remaining eight districts a combination of these means of renewal was in operation at the end of the year.

Sanitary Inspections.—The following table gives the numbers of premises visited and visits paid during 1969 by local public health inspectors, the defects or nuisances discovered and the action taken in all County districts. It was found necessary to institute legal proceedings in 83 cases.

	No. of premises visited	No. of visits made	Defects or nuisances		No. of notices served	
			No. discovered	No. abated	Informal	Statutory
Urban districts	263,424	471,825	56,031	52,988	15,231	4,127
Rural districts	40,318	70,500	3,210	2,516	1,551	127
Administrative County	303,742	542,325	59,241	55,504	16,782	4,254

Prevention of Atmospheric Pollution.—Clean Air Act, 1956.—In 1969, 35 orders for the making of smoke control areas were submitted to the Ministry of Housing and Local Government by authorities within the Administrative County, involving 23,100 properties. Orders receiving confirmation numbered 42, covering 34,800 properties, and the total number in force at the end of the year was 280, involving 223,650 properties.

Progress achieved in the elimination and prevention of atmospheric pollution is kept under review by a Clean Air Council, appointed under the Act by the Minister, and the National Clean Air Society, of which the County Council and some of the County district councils are members, is also active in this matter. At regional and local levels various voluntary associations of local authorities, such as the Manchester and District Regional Clean Air Council and the South East Lancashire and North Cheshire Consultative Committee on Atmospheric Pollution, have been established as advisory and technical bodies for the purpose of improving the control of and reducing atmospheric pollution in the areas represented.

Co-operation between industrial managements and public health officials in the individual and practical problems involved in the elimination of black smoke continued to be very good.

Movable Dwellings and Camping Sites.—By section 269 of the Public Health Act, 1936, local authorities are empowered to grant licences authorising persons to allow land occupied by them within the district to be used as sites for movable dwellings, and licences authorising persons to erect and station, or use, such dwellings within the district. Local authorities may attach to any such licence such conditions as they think fit with regard to water supply, sanitary arrangements, free space, etc.

A movable dwelling is described in this section of the Act as including any tent, van, shed or other conveyance, whether on wheels or not, and any shed or similar structure which is used either regularly, or at certain seasons only, or intermittently for human habitation, but does not include a structure to which the building byelaws of the local authority apply.

The number of sites in the Administrative County area used for camping purposes during 1969 was 415, according to the reports of local medical officers of health. Licences issued by the local authorities under section 269 of the Act of 1936 numbered 34 in respect of sites and 564 in respect of individual movable dwellings.

As from the 19th August, 1960, more effective powers for controlling caravan sites were conferred on local authorities by the operation of the Caravan Sites and Control of Development Act, 1960. As well as strengthening the powers of planning authorities it introduced a new licensing system to be administered within the Administrative County area by County district councils. The purpose of the Act is to secure that all caravan sites, whether residential or holiday sites, are properly equipped and run; that sites are not allowed in the wrong places but are allowed in acceptable places, and that planning permission is not withheld on principle but only where there is some definite planning objection; that permission is given on a long term or permanent basis unless there is some definite reason against this; and that where sites have to be run down or numbers have to be reduced this is done with due regard to avoidance of hardship.

At the end of the year the total number of site licences in operation under this Act was 550 involving 15,216 caravans. There were reported to be 1,762 caravans used for permanent occupation. The adoption of the Model Standards issued by the Ministry of Housing and Local Government in conjunction with the Act was reported from 34 County districts in respect of permanent residential caravan sites and from 22 in respect of holiday caravan sites.

Swimming Baths and Pools.—In 38 of the County districts there are public swimming baths and in 22 districts there are school swimming baths. Privately owned swimming baths or pools used by the public, or specific groups thereof, exist in six districts.

In nearly all instances filtration and chlorination plants are installed and the frequency of water change generally varies between three and six hours. During the year 1,125 samples of the water were submitted to bacteriological examination and 109 to chemical analysis. Forty-eight of the former and four of the latter were found to be unsatisfactory.

Disinfestation.—The number of dwellings reported by the local medical officers of health to have been disinfested during 1969 was 5,961 of which 3,007 were council owned dwellings. Almost the whole of this work is undertaken by the local authority staffs but contractors are employed by some authorities, particularly in cases of heavy infestation where hydrogen cyanide gas is required to be used in the van during removal of furniture, bedding, etc., to fresh premises.

Prevention of Damage by Pests Act, 1949.—Under this Act powers relating to the control of rats and mice were vested in the local sanitary authorities upon whom rests the obligation of ensuring freedom from rats and mice in their areas. The Act lays down the duty of occupiers of land to give written notice of rodent infestation to the appropriate authority and the powers given to local authorities enable them, *inter alia*, to serve formal notice on owners and occupiers requiring any necessary work of rodent destruction, including structural work, to be carried out; to carry out such work in default of the owner or occupier and recover therefrom any expenses reasonably incurred; and to require information as to the interests in land. Certain powers of entry for authorised persons are also laid down.

At the end of 1969 there were 86 full-time rodent operatives employed by local authorities within the Administrative County area. A further 69 had been employed part-time during the year. The number of properties inspected following notification was 41,337 including 1,118 agricultural, and of these 31,160 were infested—16,748 by rats and 14,412 by mice. In addition 27,499 properties, including 1,656 agricultural, were inspected for reasons other than notification and of these 5,891 were found to be infested—3,459 by rats and 2,432 by mice. Infestation of sewers by rats was reported in 76 of the 108 County districts.

Factories Act, 1961.—The following table provides a summary of the action taken during 1969 in all County districts in connection with the administration of Parts I and VIII of the Factories Act, 1961.

PART I OF THE ACT

1.—INSPECTIONS FOR PURPOSES OF PROVISIONS AS TO HEALTH

(including inspections made by Public Health Inspectors)

Premises (1)	Number on register (2)	Number of		
		Inspections (3)	Written notices (4)	Occupiers prosecuted (5)
(i) Factories in which sections 1, 2, 3, 4 and 6 (relating to cleanliness, overcrowding, temperature, ventilation and drainage of floors) enforced by local authorities	670	534	20	—
(ii) Factories not included in (i) in which section 7 (relating to sanitary conveniences) enforced by the local authority	8,404	5,208	251	—
(iii) Other premises in which section 7 enforced by the local authority ^a (excluding out-workers' premises) ...	600	589	23	—
TOTAL	9,674	6,331	294	—

^ai.e., Electrical stations, institutions, sites of building operations and works of engineering construction, slaughter-houses and railway running sheds.

2.—CASES IN WHICH DEFECTS WERE FOUND

Particulars (1)	Number of cases in which defects were—				Number of cases in which prosecutions were instituted (6)
	Found (2)	Remedied (3)	Referred to H.M. Inspector (4)	Referred by H.M. Inspector (5)	
Want of cleanliness (S.1)	104	98	—	12	—
Overcrowding (S.2)	—	—	—	—	—
Unreasonable temperature (S.3)	8	8	1	—	—
Inadequate ventilation (S.4)	22	18	1	1	—
Ineffective drainage of floors (S.6)	4	4	—	—	—
Sanitary conveniences (S.7)—					
(a) insufficient	25	15	—	12	—
(b) unsuitable or defective	391	332	—	76	—
(c) not separate for sexes	33	32	—	3	—
Other offences against the Act (not including offences relating to Outwork)	7	11	—	4	—
TOTAL	594	518	2	108	—

PART VIII OF THE ACT

OUTWORK

(Sections 133 and 134)

Nature of Work (1)	Section 133			Section 134		
	Number of out-workers in August list required by Section 133 (1) (c) (2)	Number of cases of default in sending lists to the Council (3)	Number of prosecutions for failure to supply lists (4)	Number of instances of work in unwholesome premises (5)	Notices served (6)	Prosecutions (7)
Wearing apparel, making, etc. ...	341	1	—	—	—	—
Household linen ...	8	—	—	—	—	—
Locks, latches and keys ...	—	—	—	—	—	—
Umbrellas, etc. ...	10	—	—	—	—	—
Nets, other than wire nets ...	10	—	—	—	—	—
Paper bags ...	4	—	—	—	—	—
Making of boxes or other receptacles or parts thereof made wholly or partially of paper ...	26	—	—	—	—	—
Stuffed toys ...	5	—	—	—	—	—
Basket making ...	68	—	—	—	—	—
Chocolates and sweetmeats ...	2	—	—	—	—	—
Cosaques, Christmas stockings, etc. ...	15	—	—	—	—	—
Textile weaving ...	14	—	—	—	—	—
Paper crackers ...	108	—	—	—	—	—
Knitting ...	2	—	—	—	—	—
Embroidery (gold thread) ...	1	—	—	—	—	—
Packaging ...	1	—	—	—	—	—
TOTAL ...	615	1	—	—	—	—

Offices, Shops and Railway Premises Act, 1963.—This Act prescribes standards which must be observed in a wide field of conditions affecting the safety, health and welfare of employees in all offices and shops, and in most railway buildings near to the permanent way. For most offices and shops the general provisions other than those relating to fire precautions are enforced within the Administrative County area by the district councils by whom such premises have been registered. The general provisions include matters relating to cleanliness, overcrowding, temperature, ventilation, lighting, sanitary conveniences, washing facilities, drinking water, accommodation for clothing, seating arrangements, eating facilities, etc., and every local authority was required to appoint inspectors for the purpose of enforcement.

The following table summarises the work done by the constituent local authorities of the Administrative County area in 1969:—

	Class of premises				
	Offices	Retail shops	Wholesale shops, warehouses	Catering establishments open to public, canteens	Fuel storage depots
No. of registered premises at end of year ...	3,770	10,808	656	1,996	87
No. of registered premises receiving a general inspection during year ...	1,387	5,474	277	1,048	37
No. of exemptions current at end of year—					
Space (s.5.(2)) ...	1	—	—	—	—
Temperature (s.6) ...	—	—	—	—	—
Sanitary conveniences (s.9) ...	—	—	—	—	—
Washing facilities (s.10) ...	—	—	—	—	—

The total number of visits of all kinds made by the inspectors to registered premises was 17,737.

Rag Flock and Other Filling Materials Act, 1951.—Under this Act premises used for upholstering, stuffing of bedding and toys, lining of baby carriages, etc., must be registered by the local authority (in the County area the Borough and District Councils) and premises used for manufacturing or

storing rag flock must be licensed by such authority. Subject to appeal, a licence may be refused if the local authority consider the arrangements at the premises in question to be unsatisfactory. The renovating and reconditioning of articles and the upholstery of public vehicles are exempted from these provisions. Premises must be inspected and samples of the materials used may be taken for analysis by the public analyst. Power of entry is granted to the authorised officers of the local authority.

At the end of 1969 there were reported to be 67 registered premises in the County area and the number of licensed premises was 18, of which four were used for the manufacture or manufacture and storage of rag flock and 14 for its storage only. Inspections of all premises during the year numbered 47. One sample was submitted for examination and was found to be satisfactory.

Premises and Occupations which can be Controlled by Byelaws and Regulations.—OFFENSIVE TRADES.—Offensive trades were carried on in 33 districts during 1969, the premises numbering 74. These were chiefly tripe boilers and/or dressers, gut scrapers, fat melters, tanners, soap boilers, rag and bone dealers, glue manufacturers and leather dressers. Regular inspections were reported to have been made of all premises.

COMMON LODGING HOUSES.—At the end of 1969 there were five common lodging houses on the registers of four district councils in the Administrative County.

CANAL BOATS.—No action was reported during the year relating to the inspection of canal boats.

Inspection of County Districts.—During 1969 reports on completed surveys of the housing, sanitary circumstances, etc., of Ince-in-Makerfield U.D. and Whitworth U.D. were considered by the Public Health and Housing Committee. Copies of these reports, which incorporated recommendations for improvements, were then forwarded to the district councils concerned for consideration and any necessary action.

HOUSING

There were 18,899 new housing units completed in the Administrative County in 1969, 2,031 less than the number completed in the previous year. The proportionate contribution to the total made by local authority building declined from 31 per cent. in 1969 to 29 per cent. in 1969. Particulars of the dwellings completed in each County district during 1969 are shown in Table 35, page 177.

According to information supplied by local medical officers of health, some of which is also reproduced in Table 35, more than 26,000 dwellings were unfit for human habitation, of which some 7,000 were the subject of demolition and clearance orders. In all, 56,069 houses were inspected under the Public Health or Housing Acts for housing defects, 103,373 inspections being made for the purpose. In consequence of action taken by the local authorities or their officers, 8,434 houses found to be not in all respects reasonably fit were rendered fit during the year. Of these, 6,327 were brought up to standard as a result of informal action. Formal notices under the Public Health Acts resulted in the remedying of defects in 2,055 cases. Formal notices under sections 9 and 16 of the Housing Act, 1957, secured the completion of necessary work on 40 houses; the work on 13 however was carried out by the local authorities in default of the owners. Eleven unfit houses were made fit after determination of a demolition order under section 24 of the Housing Act, 1957, and one was made fit after modification or revocation of a clearance order under section 24 of the Housing Act, 1961.

Demolition carried out during 1969 accounted for 3,332 houses, of which 2,641 were in or adjoining clearance areas, and displaced 5,882 persons. The 2,641 in or adjoining clearance areas related to 2,445 found unfit for human habitation, 12 included by reason of bad arrangements, etc., and 184 which were on land acquired under section 43(2) of the Housing Act, 1957. Of the 691 demolished houses not in or adjoining clearance areas 619 were the result of formal or informal procedure under sections 16 or 17(1) of the Act of 1957, 61 were local authority owned houses certified unfit by the medical officer of health and 11 resulted from action taken under local Acts.

Closures were applied to 328 houses under sections 16(4), 17(1) and 35(1) of the Housing Act, 1957, and section 26 of the Housing Act, 1961, and to seven houses under sections 17(3) and 26 of the Act of 1957. The total number of persons displaced by closures was 669.

At the end of 1969 there were reported to be 28 houses, subject to existing demolition or clearance orders, which had been retained for temporary accommodation, 19 under section 48 of the Act of 1957, three under section 17(2) and six under section 46. There were no houses reported to be licensed for temporary accommodation under section 34 or section 53.

IMPROVEMENT GRANTS.—The Housing Act, 1949, introduced a feature whereby local authorities could give financial assistance towards the cost of improvement of dwellings, or conversion of premises to form dwellings. This assistance was known as an improvement grant and was at the discretion of the local authority. Since that time the legislation covering such grants has been amended on several occasions and is now governed by the provisions of the Housing Act, 1969, the terms of which have made these grants more attractive to owners.

The number of dwellings or other buildings involved in improvement schemes of private bodies or individuals approved for grant by local authorities within the Administrative County during 1969 was 669. In schemes submitted by local authorities to the Minister, 623 properties were approved during the year, 580 of which belonged to local authorities. Schemes actually completed during 1969 involved 664 properties of which 471 were owned by private bodies or persons.

STANDARD GRANTS.—The House Purchase and Housing Act, 1959, set up a new system of standard grants to supplement the existing system of improvement grants paid at the discretion of the local authority. The distinctive features of this system were that these grants were payable only in respect of the provision of specific standard amenities and on the expenditure actually incurred for this purpose and that, provided certain conditions were satisfied, the owner of the property could claim the grant as of right. These grants are now also covered by the provisions of the Housing Act, 1969, and are intended to help meet the cost of improving houses by providing for the first time, any missing standard amenities. The standard amenities are:—(a) fixed bath or shower in a bathroom; (b) wash-hand basin; (c) sink; (d) hot and cold water supply at a fixed bath or shower, wash-hand basin, sink; (e) water closet.

Where it would not be practicable at reasonable cost to improve a house to the full standard a grant can still be made if after improvement the house would be provided with:—(a) sink; (b) hot and cold water supply at a sink; (c) water closet.

During the year under report 4,946 applications—98 fewer than in 1968—were made to local authorities within the Administrative County area and all but 81 were to the full standard. During the same period 4,670 applications were approved, of which 77 were to the reduced standard. Work was completed on 4,314 premises. Emphasis was placed by the Ministry of Housing and Local Government on the need to effect by voluntary means the required rate of improvement, but at the same time provision was made in Part II of the Act of 1964 to extend the powers of local authorities to secure compulsory improvements. Only one new improvement area, within which such powers may be applied as needed, was reported to have been declared during the year.

SPECIAL GRANTS.—Under the provisions of the Housing Act, 1969, grants can be made at the discretion of local councils towards the cost of providing standard amenities which will be shared in houses in multiple occupation, where there is no immediate prospect of conversion into permanent separate dwellings.

During 1969 two applications for special grants were made to local authorities within the Administrative County area, both of which were approved.

FINANCIAL ASSISTANCE TO LOCAL AUTHORITIES.—The Housing (Financial Provisions) Act, 1958, repealed all previous legislation insofar as contributions to district councils by the County Council are concerned without affecting the continuation of contributions towards previously approved houses for agricultural workers under section 3(1) of the Housing (Financial and Miscellaneous Provisions) Act, 1946, and other houses under section 3(2). At the same time, by section 23, it provides for the payment to district councils by the County Council, in respect of houses provided for agricultural workers, of an annual contribution of £2 10s. 0d. or less per house for 60 years where the exchequer subsidy is increased under section 5 of the Act.

The total contributions paid by the County Council to district councils under the Act during the financial year ended the 31st March, 1970, amounted to £2,620.

INSPECTION AND SUPERVISION OF FOOD

Milk Supply.—During 1969 the number of County districts for which the County Council were Food and Drugs Authority remained at 90. Within these districts the County Council are responsible for the licensing and inspection of heat treatment plants and premises and for the licensing, under the Milk (Special Designation) Regulations, 1963-65, of all milk dealers other than producer-retailers (who are licensed by the Ministry of Agriculture, Fisheries and Food). They are also concerned with milk sampling and testing generally and with the administration of the Milk and Dairies (General) Regulations, 1959, insofar as they relate to the general sanitation of dairies and plant licensed by them.

The provisions of the Food and Drugs Act, 1955, relating to milk supplies for which the County Council are the responsible authority include the prohibition of the sale of milk from cows suffering from tuberculosis or other specified diseases, the prevention of the adulteration of milk by the addition of water, colouring matter, dried or condensed milk, etc., the restrictions on the use of special designations and the prevention of the use of false descriptions in relation to milk. Food and Drugs Authorities are also required to enforce provisions concerning the prohibition of the description "cream" in relation to any substance which resembles but which is not "cream" as defined.

The whole of the Administrative County area is a "specified area" where only milk of a special designation may be sold by retail for human consumption. During the year under report 2,181 samples of designated milk (1,097 pasteurised, 365 sterilised and 719 untreated) were obtained by sampling officers of the County Council from retailers in the 90 districts comprising the County Food and Drugs area.

On submission to the prescribed tests 13 samples of pasteurised milk failed the methylene blue test only and two the phosphatase test only, and 39 samples of untreated milk failed the methylene blue test. Appropriate action was taken to ensure adequate heat treatment, etc., of future supplies of milk from the sources concerned. All the samples of untreated milk examined for the presence of tubercle bacilli were reported to be satisfactory.

THE MILK (SPECIAL DESIGNATION) REGULATIONS, 1963-65.—The following statement gives particulars of the dealer's licences issued by the County Council as Food and Drugs Authority for the licensing period 1966-70.

Licence	No. of licences	
	Issued during 1969	In operation at 31.12.69
(1) Dealer's (Untreated) Licence—required by a dealer obtaining untreated milk (other than pre-packed milk) for the purpose of resale	7	44
(2) Dealer's (Pasteuriser's) Licence — required by anyone operating a pasteurising plant	1	13
(3) Dealer's (Steriliser's) Licence — for the operation of a sterilising plant	—	3
(4) Dealer's (Ultra Heat Treated) Licence—for the operation of an ultra high temperature plant	—	—
(5) Dealer's (Prepacked Milk) Licence — for the purpose of buying and selling pre-packed milk (untreated, pasteurised, sterilised, ultra heat treated or all four categories)	218	4,728

The number of dealers authorised by the above licences to handle and distribute each of the types of designated milk was as follows:—

Designation	No. of dealers licensed	
	During 1969	At 31.12.69
Untreated	73	994
Pasteurised	136	2,223
Sterilised	178	4,224
Ultra heat treated	72	637

From the premises licensed for the heat treatment of milk 264 samples were obtained during the year and submitted to the prescribed tests. One sample failed the phosphatase test. The cause of the failure was discovered and subsequent samples were satisfactory. Two samples failed the methylene blue test. Conditions at the premises concerned were investigated and subsequent samples proved satisfactory.

In the 18 County districts autonomous for Food and Drugs purposes there were operative at the end of 1969 one Dealer's (Pasteuriser's) Licence in respect of premises and plant used for the heat treatment of milk, 1,329 Dealer's (Prepacked Milk) and 113 Dealer's (Untreated) Licences. The numbers of dealers authorised to deal in the respective designations of milk by virtue of these licences were—untreated 307, pasteurised 1,128, sterilised 1,652 and ultra heat treated 244.

PROVISION OF MILK TO SCHOOLS, DAY NURSERIES AND HOMES FOR THE ELDERLY.—Of the 2,181 samples of designated milks obtained by the County Council's sampling officers (see above), 216 were of milk supplied to schools, day nurseries and homes for the elderly.

The County Council's policy of endeavouring to arrange for heat treated milk to be provided at all schools in the County area was continued, particularly in view of the possibility of brucella infections occurring in raw milk, but where it has been impossible in the more remote parts of the County area to obtain heat treated milk untreated milk has been supplied.

BRUCELLA ORGANISMS IN MILK.—Samples of untreated milk submitted by the County Council's officers for bacteriological and biological examination to the Public Health Laboratories are examined for the presence of brucella organisms in addition to those of tuberculosis.

During 1969 although, as stated above, no evidence of tuberculosis was found in any of the 568 samples submitted, 65 of these were reported to contain brucella organisms. In each case the medical officer of health for the appropriate County district was informed in order to take whatever action he deemed suitable.

SAMPLING BY LOCAL AUTHORITIES.—The number of milk samples reported to have been taken during 1969 by officers of the local authorities within the Administrative County and submitted to biological examination for either tuberculosis or brucellosis, or both, was 8,849. The results were as follows:—

					Positive		Negative		No result
Tuberculosis	...	...	...	...	—	...	901	...	113
Brucellosis—									
Ring test	...	...	...	...	923	...	7,692	...	222
Culture test	...	...	...	...	308	...	839	...	158
Biological test	...	...	...	...	129	...	468	...	147

Particulars of the milk samples submitted to the statutory tests are given in the following statement:—

			No. of samples			Results—			
					Satisfactory	Unsatisfactory		Void samples	
Raw Milk—									
Methylene blue test	...	...	963	...	735	...	175	...	43
Heat treated Milk—									
Methylene blue test	...	...	1,238	{	1,113	...	25	...	33
Phosphatase test	...	...			1,185	...	3	...	8
Turbidity test	...	...	322	...	322	...	—	...	—
Colony count test	...	...	27	...	27	...	—	...	—

For the tenth successive year no sample of milk taken within the Administrative County area by either County or local officers gave a positive result to the biological test for tuberculosis.

Food Hygiene (General) Regulations, 1960.—The following table, which has been compiled from the reports of local medical officers of health, gives details of the 25,667 food premises which are subject to the Food Hygiene (General) Regulations, 1960.

Type of business	No. of premises	No. of premises fitted to comply with Regulation 16. (Wash-hand basins)	No. of premises to which Regulation 19 applies. (Sinks)	No. of premises fitted to comply with Regulation 19.
(i) Greengrocers and provision dealers ...	6,489	6,255	5,975	5,947
(ii) Greengrocers and fruiterers (including those selling wet fish, game, etc.) ...	1,499	1,416	1,450	1,440
(iii) Fishmongers (including those selling poultry, game, etc.) ...	267	259	261	261
(iv) Meat shops (butchers, purveyors of cooked and preserved meats, tripe, etc.) ...	2,064	2,023	2,058	2,053
(v) Bakers and/or confectioners ...	1,526	1,501	1,521	1,517
(vi) Fried fish shops ...	1,256	1,228	1,246	1,248
(vii) Shops selling mainly sugar confectionery, minerals, ice-cream, etc. ...	2,410	2,245	1,799	1,826
(viii) Licensed premises, clubs, canteens, restaurants, cafes, snack bars, and similar catering establishments ...	8,213	8,015	8,038	8,013
(ix) Others ...	1,746	1,426	1,382	1,377

Premises registered under the Food and Drugs Act or corresponding provisions of local legislation numbered 9,446 and 9,411 inspections of such premises were made during the year.

Byelaws relating to the handling of food intended for sale were in operation in almost all the 108 County Districts and their enforcement in conjunction with the Food Hygiene Regulations rarely called for action beyond the informality of personal advice and guidance upon which the inspectorial staffs of local authorities mainly rely.

Licensed private slaughterhouses and public abattoirs in operation at the end of the year numbered 78 and four respectively. It is the general practice to carry out complete post-mortem examinations at all such establishments but ante-mortem examination of all animals is confined to relatively few districts.

The following table, compiled from the local health reports, shows the numbers of certain classes of animals killed in the Administrative County area during 1969 together with the numbers and results of inspections carried out.

Carcases Inspected and Condemned, 1969

	Cattle including cows	Calves	Sheep and lambs	Pigs	Horses
Number killed	123,877	3,297	453,174	293,924	—
Number inspected	123,877	3,297	453,174	293,924	—
<i>All diseases except tuberculosis and cysticerci:</i>					
Whole carcasses condemned	292	111	577	764	—
Carcasses of which some part or organ was condemned	54,181	64	63,386	48,283	—
Percentage of the numbered inspected affected with disease other than tuber- culosis and cysticerci	44.0	5.3	14.1	16.7	—
<i>Tuberculosis only:</i>					
Whole carcasses condemned	2	—	—	1	—
Carcasses of which some part or organ was condemned	6	—	—	1,440	—
Percentage of the number inspected affected with tuberculosis	0.0	—	0.0	0.5	—
<i>Cysticercosis:</i>					
Carcasses of which some part or organ was condemned	170	—	24	—	—
Carcasses submitted to treatment by refrigeration	65	—	—	—	—
Generalised and totally condemned ...	—	—	—	—	—

POULTRY INSPECTION.—From information given in local health reports there were 79 poultry processing premises in the Administrative County area, to which 2,222 visits were made during 1969. Turkeys, ducks, hens, broilers and capons are processed, 11,517,699 being dealt with during the year. Of this total some 159,489 birds representing 1.38 per cent. of the total and weighing some 429,900 lbs. were condemned as unfit for human consumption.

THE ICE CREAM (HEAT TREATMENT, ETC.) REGULATIONS, 1959-63.—During the year routine visiting of premises for the purpose of sampling, temperature recording and inspection of equipment was reported to have been undertaken in the majority of County districts. The standards of production and storage required by the regulations were generally maintained.

LIQUID EGG (PASTEURISATION) REGULATIONS, 1963.—There were three egg pasteurisation plants in operation at the end of the year. Forty-six samples of liquid egg from eight County districts were submitted to the Alpha-Amylase test, none of which proved to be unsatisfactory.

Food Poisoning.—During 1969 cases of food poisoning formally notified in the Administrative County area numbered 440, but 128 more, although not the subject of formal notification, were ascertained by local medical officers of health. The total of 568 was 84 more than in the previous year and 161 more than the annual average for the preceding five years 1964-1968. There were no deaths.

Defining an outbreak in this instance as the whole of the cases, being more than one in number either probably or certainly derived from a single contaminating or infecting source, there were 38 outbreaks involving 271 cases, and in addition a further 71 cases forming part of five outbreaks originating in other local authority areas, the remaining 226 being apparently isolated and unrelated. Brief particulars of the outbreaks, including such information as is available regarding the organisms or other agents responsible, the foods involved and the place where the contaminated food was consumed, are given in the following statement:—

District	*No. of cases	No. of deaths	Organisms or other agents responsible	Foods involved	Place where contaminated food was consumed
Accrington M.B.	3	—	Salm. typhimurium	Not ascertained	Home.
	5	—	Salm. paratyphoid 'B'	Not ascertained	Not ascertained.
Atherton U.D.	2	—	Salm. virchow	Chicken	Home.
Audenshaw U.D.	2	—	Salm. indiana	Not ascertained	Not ascertained.
	2	—	Salm. javiana	Not ascertained	Not ascertained.
Chorley M.B.	2	—	Salm. virchow	Not ascertained	Not ascertained.
Colne M.B.	2†	—	Not identified	Not ascertained	Hospital.
Crosby M.B.	6	—	Not identified	Not ascertained	Not ascertained.
Dalton-in-Furness U.D.	3	—	Salm. typhimurium	Duck egg	Public restaurant.
Darwen M.B.	2	—	Salm. typhimurium	Not ascertained	Not ascertained.
Denton U.D.	8	—	Staph. aureus	Not ascertained	Canteen.
	3	—	Not identified	Not ascertained	Not ascertained.
	2	—	Salm. panama	Not ascertained	Not ascertained.
Droylsden U.D.	2	—	Salm. enteritidis	Not ascertained	Home.
Eccles M.B.	3	—	Salm. virchow	Chicken	Not ascertained.
Fleetwood M.B.	2	—	Cl. welchii	Not ascertained	Not ascertained.
Fulwood U.D.	63	—	Cl. welchii	Roast beef	Home for the elderly.
Irlam U.D.	2	—	Salm. typhimurium	Not ascertained	Not ascertained.
Kirkby U.D.	2	—	Salm. virchow	Not ascertained	Not ascertained.
	4	—	Salm. falkensee	Not ascertained	Not ascertained.
	5	—	Salm. panama	Not ascertained	Not ascertained.
	4	—	Not identified	Not ascertained	Not ascertained.
Lytham St. Annes M.B.	3	—	Salm. heidelberg	Not ascertained	Not ascertained.
Middleton M.B.	4	—	Salm. typhimurium	Not ascertained	Not ascertained.
Poulton-le-Fylde U.D.	5	—	Salm. heidelberg	Not ascertained	Not ascertained.
Prescot U.D.	2	—	Not identified	Cockles	Home.
Swinton & Pendlebury M.B.	43†	—	Salm. virchow	Chicken	Restaurant.
Tyldesley U.D.	3	—	Salm. heidelberg	Not ascertained	Not ascertained.
Whitefield U.D.	80	—	Cl. welchii	Chicken	Canteen.
Widnes M.B.	3†	—	Salm. enteritidis	Cooked squid	Hotel abroad.
	2	—	Salm. panama	Not ascertained	Hotel.
Worsley U.D.	19†	—	Salm. typhimurium	Beef	Home.
	6	—	Cl. welchii	Beef	Canteen.
	3	—	Salm. typhimurium	Sausage	Home.
	4	—	Salm. typhimurium	Cream dessert	Home.
	4	—	Salm. typhimurium	Not ascertained	Not ascertained.
	3	—	Salm. virchow	Chicken	Restaurant.
Blackburn R.D.	3	—	Salm. typhimurium	Not ascertained	Not ascertained.
Chorley R.D.	4†	—	Cl. welchii	Not ascertained	Not ascertained.
Clitheroe R.D.	6	—	Salm. newport	Turkey	Home.
Garstang R.D.	9	—	Salm. typhimurium	Milk	Institute of Agriculture.
Preston R.D.	2	—	Salm. typhimurium	Not ascertained	Abroad.
Warrington R.D.	5	—	Not identified	Not ascertained	Not ascertained.

* Including non-notified cases ascertained during investigations.

† Part of an outbreak in the area of another local authority.

Of the 226 isolated cases of food poisoning which occurred in 1969 the responsible organisms in 44 were identified as salmonellae—16 of *s. typhimurium*, 9 of *s. panama*, five of *s. virchow*, three of *s. enteritidis*, two of *s. heidelberg*, and one each of *s. senftenberg*, *s. worthington*, *s. montivideo*, *s. bovismorbificans*, *s. oranienberg*, *s. fischerklotz*, *s. group B*, *s. newport*, *s. tennessee*. Three cases were due to *clostridium welchii*. In the remaining 179 isolated cases the responsible agents or organisms were not identified.

In Preesall U.D. *clostridium welchii* was isolated in rice pudding and prunes consumed at a school, and although no cases of food poisoning were either notified or ascertained, 141 children were affected adversely. This incident is not included in the foregoing details.

Food and Drugs.—The following information has been derived from the Annual Report for 1969 of the County Analyst, A. C. Bushnell, Esq., M.Chem.A., F.R.I.C.

During the year under review there was no Statutory Instrument which significantly altered the world of food standards but among new Regulations issued which have a bearing on the work of the Public Analyst were the following:—

The Artificial Sweeteners in Food Regulations, 1969.

The Soft Drinks (Amendment) Regulations, 1969.

The Dangerous Drugs Act, 1965 (Modification) Order, 1969.

The Food (Control of Irradiation) (Amendment) Regulations, 1969.

Food Hygiene—The Meat (Sterilisation) Regulations, 1969.

FOOD AND DRUG SAMPLES.—The number of food and drugs samples (excluding appeal-to-cow samples) from the 90 districts within the area for which the County Council are the Food and Drugs authority examined during 1969 was 6,722 as compared with 7,661 in the previous year. Of these, 426 were classified as adulterated—15 more than in 1968.

In the following table figures relating to samples during the last ten years are given.

Sampling and Imperfect Samples, 1960-1969

Year	1960	1961	1962	1963	1964	1965	1966	1967	1968	1969
Percentage of adulteration ...	4.6	4.9	3.8	5.8	7.2	6.4	5.3	4.9	5.4	6.3
Total samples ...	7,857	8,352	8,784	8,243	7,766	7,959	8,190	8,055	7,661	6,722
Formal samples ...	3,012	2,995	3,230	2,686	2,528	2,216	2,577	2,126	2,112	1,705
Informal samples ...	4,589	5,025	5,122	5,211	4,855	5,333	5,003	5,465	5,130	4,688
Private samples ...	256	332	432	346	383	410	610	464	419	329
No. of adulterated samples ...	361	414	334	480	562	512	436	398	411	426
No. of samples per 1,000 of the population ...	5.48	5.57	5.86	5.39	5.41	5.34	5.50	5.37	5.10	4.2

When in the past the rates of sampling were established, the greater proportion of the foods which were examined were natural products, and drugs were vegetable powders or simple extracts or tinctures, and relatively simple tests were sufficient to establish that such materials were unadulterated.

Made up foods, and the changing emphasis of public concern, has made it necessary to examine most modern foods from four different points of view—namely to check composition, to regulate the content of permitted additives, to look for the possibility of contamination, and to assess the adequacy of the labelling. Many more *problems* are now presented to the laboratory too, so there is no occasion to be apologetic if the number of samples per head of population shows some decline. The word "adulteration" is also misleading because samples which proved to be unsatisfactory with respect to any of the four above-mentioned areas of potential criticism are lumped together to give the percentage adulteration figure. The same may be said, of course, for the figures which appertain to "Number of Adulterated Samples". The apparent comparability of the figures in the above Table is, therefore, slightly misleading. It is interesting nevertheless, that with the 1969 reduction in run-of-the-mill samples there is an increase in the "adulteration rate" in samples other than milk to over fourteen per cent., yet the actual *number* of unsatisfactory samples remained essentially the same as in previous years.

MILK.—*Adulteration.*—The number of milk samples submitted under the Food and Drugs Act in 1969 was 3,716 and, of these, 127 were given adverse reports. The amount of milk adulteration was, therefore, 3.4 per cent., which is back to the levels which used to be encountered before the four years during which carelessness with the penicillin medication of cows caused elevated adulteration rates to be recorded. The table below shows the adulteration rates for the past ten years.

Adulteration of Milk, 1960-69

Year	No. of samples	No. of adulterated samples	Percentage of adulteration
1960	5,051	178	3.5
1961	5,201	180	3.5
1962	5,403	156	2.9
1963	4,823	250	5.2
1964	4,268	319	7.5
1965	4,415	290	6.6
1966	4,403	207	4.7
1967	4,133	137	3.3
1968	4,178	161	3.8
1969	*3,716	127	3.4
1960-69	45,590	2,005	4.4

* Excludes 16 appeal-to-cow samples.

Particulars of the various types of adulteration and the number of samples in each category are given in the following statement:—

	No.	% of total
Deficient in fat only	53	1.42
Deficient in fat and containing antibiotic	1	0.02
Containing added water only	27	0.74
Deficient in fat and containing extraneous water	3	0.08
Containing added water and antibiotic	1	0.02
Containing added water and preservative	1	0.02
Containing penicillin or other bacteriostat	9	0.24
Containing foreign matter, etc.	31	0.84
Incorrectly described	1	0.02
Containing preservatives	—	nil
Containing colouring matter	—	nil
	127	3.4
Milk containing more than 3 per cent. added water	9	0.24
Milk 10 per cent. or more deficient in fat	24	0.64

The foregoing statement shows that 0.88 per cent. of the total milk adulteration may be considered to be "serious", with nine samples containing added water, and 24 samples deficient in fat. Several of these seriously adulterated samples were taken informally, and could not, therefore, lead to prosecutions. In another instance the corresponding appeal-to-cow samples showed fat deficiencies of the same order as were found in the original formal sample. In 16 instances legal proceedings were instituted, in connection with 18 samples of milk, although three of these involved the presence of broken glass, and nine cases concerned other foreign matter. Four of the samples contained insects, one contained a slug, one case (initially concerning five samples) involved the presence of dung in the milk, one contained a dead mouse and extraneous water and two samples contained mouldy milk residues. One sample contained penicillin and one contained penicillin and was deficient in fat. This means that only two samples were classic cases of true adulteration. One of these was deficient in fat and solids-not-fat and contained extraneous water, and the other was deficient in fat only.

Average Composition.—The average composition of the milk examined in the County Laboratory during 1969 is shown in the table below:—

Average Composition of Milk, 1969

Month	*No. of samples	Fat per cent.	Solids-not-fat per cent.	Total solids per cent.
January	343	3.69	8.51	12.26
February	279	3.67	8.56	12.23
March	343	3.77	8.56	12.33
April	273	3.70	8.50	12.20
May	338	3.67	8.58	12.25
June	354	3.59	8.65	12.24
July	219	3.62	8.65	12.27
August	282	3.70	8.62	12.32
September	330	3.86	8.69	12.55
October	293	3.91	8.70	12.61
November	309	3.94	8.64	12.58
December	355	3.91	8.61	12.52
Whole year	*3,718	3.76	8.60	12.36

* Includes Appeal-to-Cow samples, but excludes Channel Islands milk and fourteen samples examined for foreign matter only.

The median figures (*i.e.*, the middle reading in each of the whole series) and the modes (*i.e.*, the values which occur most often) are given below:—

	Fat per cent.	Solids-not fat per cent.	Total solids per cent.
Mean	3.76	8.60	12.36
Median	3.74	8.63	12.37
Mode	3.65	8.55	12.20

FOOD OTHER THAN MILK.—Adulteration.—During the year under review, 3,006 samples other than milk were examined on behalf of the County Council. Of these, 426 were criticised amounting to a so-called adulteration rate of 14.2 per cent. This is much higher than the figure for the year 1968 when it was 7.2 per cent. It is also higher than the adulteration rate for milk in 1969 which was 3.4 per cent. The general public contributes greatly to this high return by its constant vigilance for extraneous matter in food, and a high proportion of the other samples which caused comment were samples improperly labelled, and some sausages which contained permitted quantities of permitted preservative but were sold with no adequate notification of the fact. Thus 98 of the 426 unsatisfactory samples contained extraneous matter, 59 contained insect matter, 41 were wrongly labelled and 18 samples of sausages were only reported wrong because of preservative or because of narrowly failing to comply with the suggested meat content. The above-mentioned "adulteration rate" of 14.2 per cent., therefore, is misleading as an index of actual adulteration of food.

DRUGS.—During the year under review 260 samples of drugs were submitted on behalf of the County Council for examination as compared with 477 such samples in 1968 and 497 in 1967.

The materials classified as drugs comprise articles for which there are monographs in the British Pharmacopoeia and in the British Pharmaceutical Codex, so they include a few articles such as arrowroot and olive oil which could also be regarded as being foods. Also included are a number of proprietary medicines and some traditional household remedies such as aspirin and bicarbonate of soda, herbal remedies, and some articles such as toothpaste for which medicinal claims appeared on the labels. Included among the more modern drugs were such materials as Butazolidin, Fentazin and Tuinal, but possibly a completely satisfactory sampling of the more potent materials must await the setting up and operation of the whole licensing and sampling scheme to be operated by the Department of Health and Social Security under the Medicines Act in the autumn of 1970.

Eight medicine samples received adverse comment in 1969.

PROSECUTIONS.—During the year, a total of 426 County food and drugs samples were reported upon adversely. In respect of 45 of these, legal proceedings were instituted. Twenty of these samples consisted of milk, and of these, three contained broken glass, three contained insects or insect remains, three contained dung, two contained dung and were incorrectly labelled, two contained penicillin, two contained mould, one was deficient in fat and solids-not-fat and contained extraneous water, one contained a slug and a patch of its mucus, one contained insoluble deposit and suspended matter, one was deficient in fat, and one contained a mouse and extraneous water. In addition, a sample of Channel Islands milk was found to contain broken glass. The other samples which led to legal proceedings were: seven breads (two contained insects, one contained a filter tip from a cigarette, one contained fragments of paper, one contained parts of the stub of a lead pencil, one contained a piece of iron plate, one contained a piece of woven cloth), one portion of a sandwich contained a piece of rodent excrement, one picnic bun contained coarsely woven cotton cloth, one jam contained broken glass, three meat and potato pies (two contained insects and one contained paint and sawdust), one sample of biscuits contained parts of a fly, one pork sausage contained pieces of polythene, one part sweet contained perspex, one baby food contained beetles, one trifle contained black soil, one ice lolly contained a human cranial hair, one sample of salmon spread contained broken glass, one cheese and onion pie contained a spider beetle, one pork pie contained a warehouse moth, one flour confectionery cake contained mouldy flour, and one sample of mincemeat contained broken glass. The total County fines and costs during the year amounted to £1,855 13s. 0d.

SHOPS ACTS, 1950-65

A "local authority" for the purposes of administering the provisions of the Shops Acts is the Council of:—

- (a) A Municipal Borough,
- (b) An Urban District with a population of 20,000 or more according to the last published census,
- (c) Elsewhere, the County Council.

During 1969 the County Council were responsible for enforcing the provisions of the Acts in the following 70 of the 108 districts in the Administrative County area:—

Urban Districts—

Abram
Adlington
Aspull
Ashton-in-Makerfield
Atherton
Audenshaw
Barrowford
Billinge and Winstanley
Blackrod
Brierfield
Carnforth
Church
Clayton-le-Moors
Crompton
Dalton-in-Furness
Failsworth
Formby
Fulwood
Grange
Great Harwood
Haydock
Hindley
Horwich
Ince-in-Makerfield

Irlam
Kearsley
Kirkham
Lees
Leyland
Littleborough
Little Lever
Longridge
Milnrow
Orrell
Oswaldtwistle
Padiham
Poulton-le-Fylde
Preesall
Prescot
Rainford
Ramsbottom
Rishton
Royton
Skelmersdale and Holland
Standish-with-Langtree
Tottington
Trawden
Turton

Tyldesley
Ulverston
Walton-le-Dale
Wardle
Westhoughton
Whitefield
Whitworth
Withnell

Rural Districts—

Blackburn
Burnley
Chorley
Clitheroe
Fylde
Garstang
Lancaster
Lunesdale
North Lonsdale
Preston
Warrington
West Lancashire
Whiston
Wigan

By arrangement with the County Council, the Public Health Inspectors of 44 of the above districts undertook on behalf of the County Council inspectorial duties relating to the hours of employment and the display of records of notices for young persons. The County Council paid the district councils for such inspections at the rate of 5/-d. per shop per annum (two inspections) with a minimum of £12 per annum for those districts with less than 48 shops.

Throughout the year the County Shops Inspectors made 3,322 inspections (including 109 Sunday or evening visits) and the local Public Health Inspectors 6,160 inspections, a total of 9,482 inspections, which resulted in 100 contraventions of the Acts being noted and the shopkeepers being informed of the requirements of the Acts.

Legal proceedings were instituted in eight cases where contraventions of the Sunday trading restrictions were observed and fines and costs totalling £36 1s. 0d. imposed. There was also one case of a shopkeeper trading after the normal evening closing hour for which a fine of £5 was imposed, and one case of trading on half-day closing, resulting in fines and costs totalling £2 5s. 0d.

YOUNG PERSONS (EMPLOYMENT) ACT, 1964

The County Council are responsible for the enforcement of this Act in the 70 districts of the Administrative County area for which they are the Shops Acts Authority.

During the year 106 visits were made in respect of the employment of young persons to premises in which intoxicating liquor is regularly sold or supplied after 11 p.m. Where necessary, letters were forwarded to the proprietors of the premises concerned.

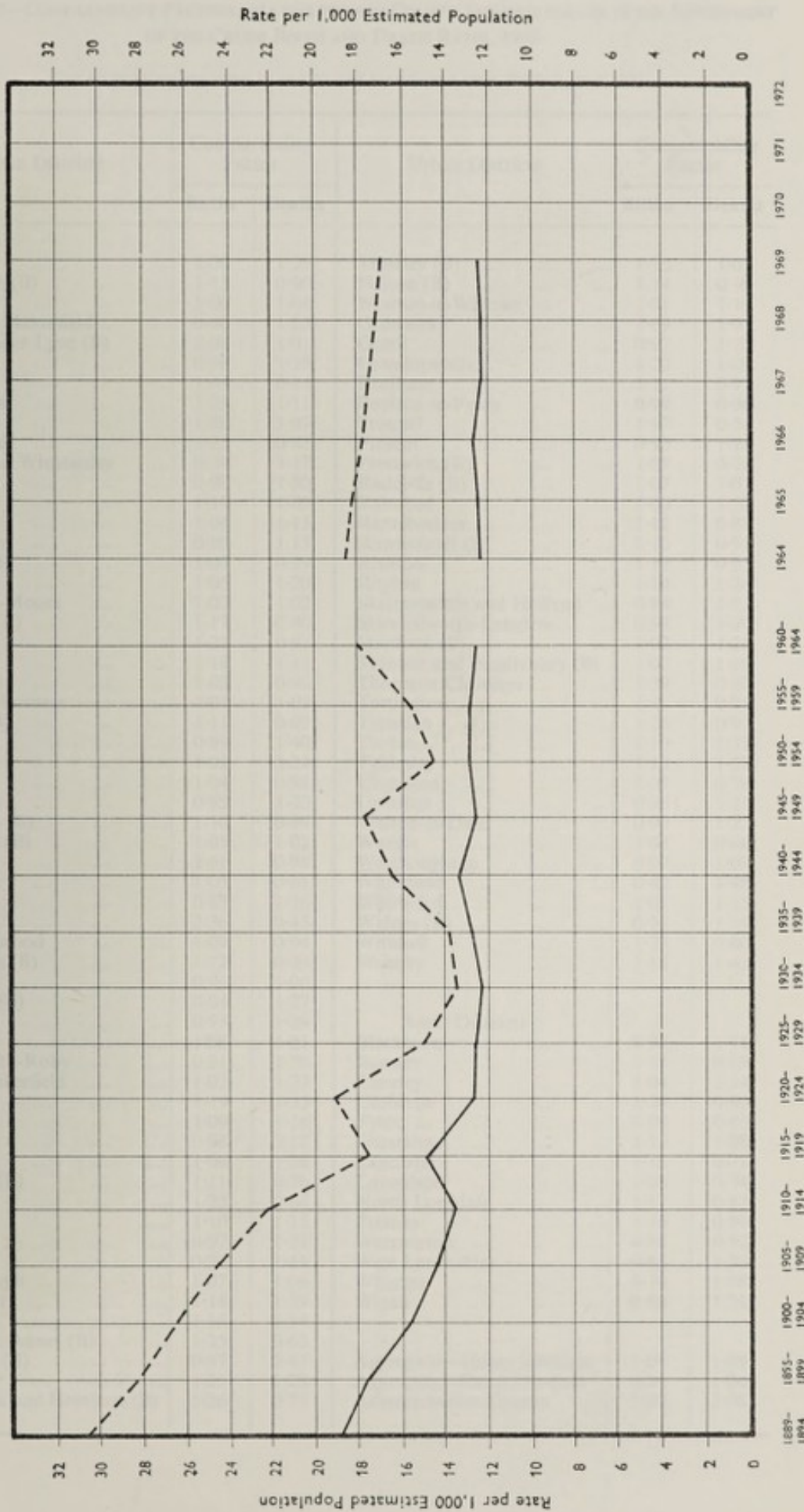
TABLE 1—COUNTY BIRTH AND DEATH RATES 1889-1969

PERIOD	CRUDE LIVE BIRTH RATE per 1,000 population			CRUDE DEATH RATE per 1,000 population			INFANT MORTALITY per 1,000 live births		
	County	Urban Districts	Rural Districts	County	Urban Districts	Rural Districts	County	Urban Districts	Rural Districts
AVERAGE 5 YEARS—									
1889-1894 (6 years) ...	30.42	30.98	28.63	18.70	19.18	16.91	155	159	128
1895-1899 ...	28.34	28.63	26.56	17.64	17.97	15.62	167	173	130
1900-1904 ...	26.51	26.67	25.37	15.89	16.13	14.21	151	156	119
1905-1909 ...	24.54	24.70	23.46	14.35	14.52	13.17	128	132	98
1910-1914 ...	22.26	22.40	21.38	13.90	14.09	12.69	120	123	97
1915-1919 ...	17.45	17.47	17.31	14.98	15.10	14.25	101	103	89
1920-1924 ...	19.13	19.13	18.29	12.61	12.73	11.87	85	87	70
1925-1929 ...	14.94	14.99	14.65	12.65	12.85	11.51	77	79	66
1930-1934 ...	13.50	13.55	13.21	12.43	12.62	11.32	66	67	61
1935-1939 ...	13.82	13.76	14.21	12.81	13.03	11.43	58	59	52
1940-1944 ...	16.22	16.24	16.08	13.16	13.46	11.35	54	55	46
1945-1949 ...	17.75	17.97	16.42	12.63	12.90	11.05	45	45	41
1950-1954 ...	14.60	14.75	13.76	12.75	13.04	11.10	30	30	29
1955-1959 ...	15.69	15.66	15.84	12.81	13.00	11.74	26	26	26
1960-1964 ...	17.96	17.94	18.08	12.69	12.75	12.38	24	24	20
YEAR—									
1915 ...	19.78	19.91	18.95	15.32	15.60	13.57	119	123	94
1916 ...	18.54	18.54	18.59	14.31	14.47	13.32	99	101	82
1917 ...	16.25	16.27	16.08	13.98	14.05	13.56	96	96	94
1918 ...	16.08	16.09	16.06	17.26	17.40	16.41	100	101	90
1919 ...	16.62	16.58	16.88	14.06	14.01	14.40	93	94	88
1920 ...	22.97	22.30	22.98	12.74	12.83	12.19	91	95	67
1921 ...	20.76	21.06	18.94	12.27	12.31	11.97	88	90	76
1922 ...	18.11	18.28	17.04	13.23	13.43	11.99	85	87	75
1923 ...	17.29	17.42	16.48	12.30	12.44	11.45	80	82	67
1924 ...	16.54	16.62	16.05	12.53	12.66	11.77	81	84	68
1925 ...	15.89	15.99	15.23	12.66	12.79	11.86	82	83	71
1926 ...	15.61	15.66	15.29	11.99	12.21	10.69	80	82	71
1927 ...	14.57	14.59	14.48	12.72	12.86	11.94	73	74	68
1928 ...	14.56	14.64	14.08	11.91	12.08	10.95	69	71	57
1929 ...	14.09	14.08	14.20	14.00	14.32	12.12	84	87	64
1930 ...	14.01	14.07	13.66	11.87	12.10	10.56	64	64	58
1931 ...	13.85	13.90	13.51	12.86	13.05	11.73	70	72	63
1932 ...	13.44	13.50	13.12	12.29	12.50	11.09	67	68	65
1933 ...	12.89	12.92	12.70	13.09	13.26	12.09	68	70	61
1934 ...	13.34	13.38	13.07	12.08	12.21	11.15	61	61	59
1935 ...	13.31	13.30	13.34	12.62	12.78	11.54	62	62	57
1936 ...	13.63	13.62	13.71	12.85	13.09	11.21	58	59	47
1937 ...	13.81	13.78	14.05	13.29	13.47	12.14	62	64	51
1938 ...	14.14	14.03	14.86	12.29	12.48	11.08	55	55	53
1939 ...	14.25	14.11	15.12	13.04	13.33	11.20	57	57	52
1940 ...	14.44	14.37	14.87	14.34	14.78	11.63	59	60	50
1941 ...	14.73	14.76	14.55	13.06	13.40	11.03	61	62	51
1942 ...	15.97	16.07	15.42	12.31	12.59	10.68	52	54	44
1943 ...	17.32	17.38	16.98	13.26	13.51	11.79	54	55	47
1944 ...	18.64	18.65	18.61	12.84	13.02	11.64	46	47	41
1945 ...	16.62	16.63	16.50	13.12	13.39	11.45	50	51	43
1946 ...	18.42	18.63	17.09	12.61	12.82	11.32	46	46	48
1947 ...	20.48	20.87	18.12	13.02	13.25	11.59	47	47	45
1948 ...	17.21	17.48	15.64	11.74	12.00	10.18	40	40	35
1949 ...	15.99	16.18	14.85	12.72	13.05	10.78	38	39	32
1950 ...	15.06	15.22	14.09	12.84	13.18	10.88	33	33	31
1951 ...	14.61	14.79	13.56	13.85	14.23	11.76	29	29	31
1952 ...	14.33	14.50	13.40	12.23	12.65	9.89	30	31	26
1953 ...	14.77	14.92	13.96	12.17	12.34	11.25	29	29	30
1954 ...	14.25	14.33	13.81	12.64	12.80	11.72	29	29	29
1955 ...	14.39	14.31	14.86	12.95	13.19	11.60	26.6	25.9	30.1
1956 ...	15.24	15.19	15.49	12.72	12.96	11.43	27.2	27.3	26.6
1957 ...	16.00	15.89	16.56	12.85	13.11	11.45	25.2	25.3	24.5
1958 ...	16.17	16.17	16.18	12.85	12.95	12.23	25.6	25.5	26.3
1959 ...	16.59	16.67	16.08	12.68	12.80	12.01	23.7	23.8	22.8
1960 ...	17.07	17.05	17.19	12.54	12.55	12.43	25.0	25.4	22.7
1961 ...	17.45	17.41	17.65	13.31	13.40	12.74	24.1	24.9	19.4
1962 ...	18.28	18.29	18.23	12.85	12.89	12.64	24.0	24.9	19.1
1963 ...	18.28	18.27	18.34	12.69	12.77	12.22	23.3	24.1	18.8
1964 ...	18.68	18.64	18.87	12.09	12.13	11.88	21.4	21.2	22.3
1965 ...	18.20	18.08	18.83	12.27	12.43	11.44	19.8	20.0	18.9
1966 ...	17.86	17.88	17.74	12.73	12.97	11.50	19.9	20.5	16.6
1967 ...	17.55	17.56	17.48	12.18	12.38	11.16	20.0	20.2	19.0
1968 ...	17.32	17.38	17.03	12.28	12.49	11.23	19.4	19.9	17.0
1969 ...	16.89	16.87	16.96	12.44	12.66	11.41	19.3	19.2	20.0

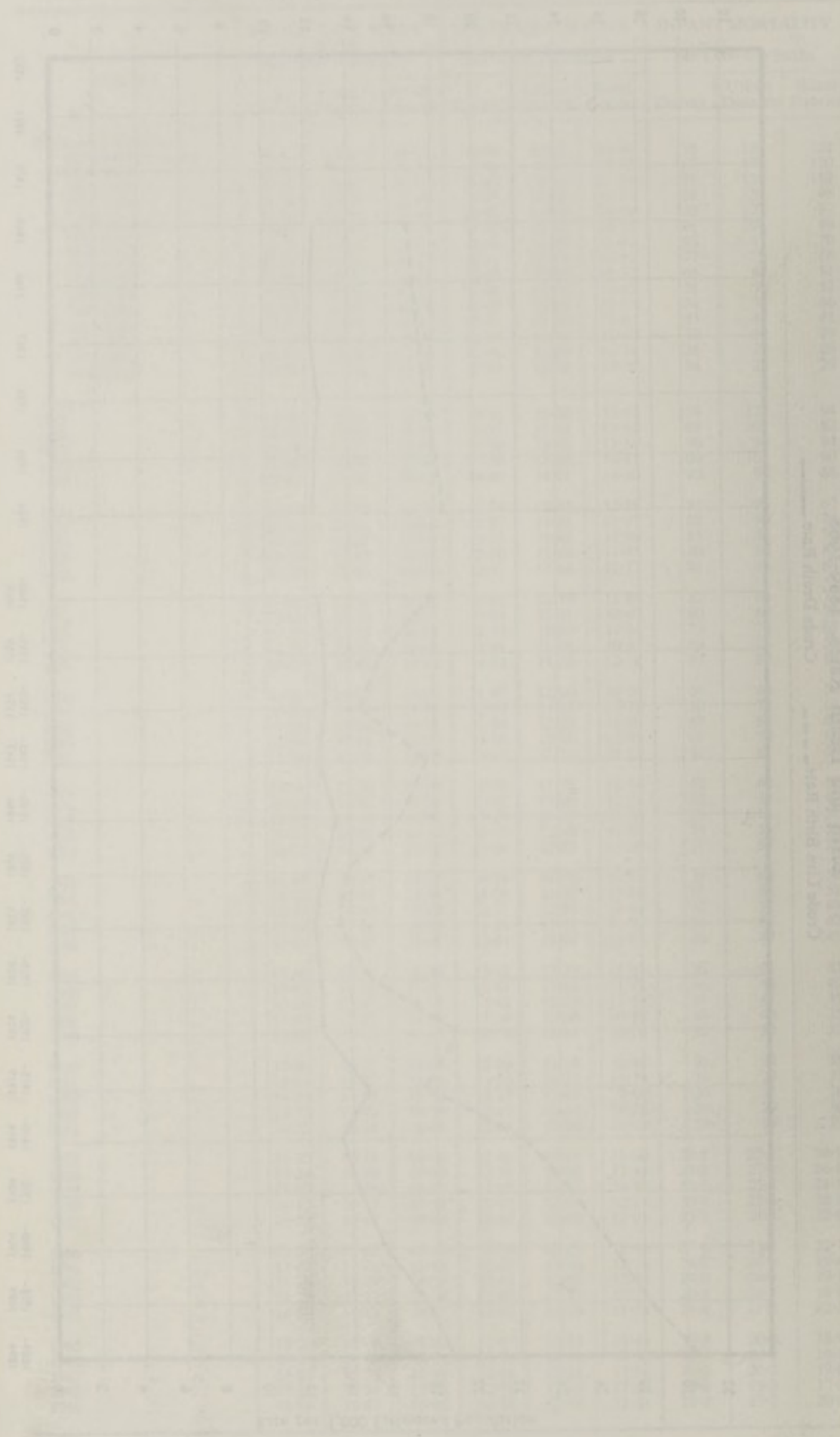
ADMINISTRATIVE COUNTY OF LANCASTER

Birth and Death Rates, 1889-1968

Crude Live Birth Rate - - - - - Crude Death Rate ———



STATIONARY POINTS OF THE CURVE



STATIONARY POINTS OF THE CURVE

TABLE 3—AREA, POPULATION, etc., IN EACH DISTRICT, TOGETHER WITH THE NUMBERS OF BIRTHS AND DEATHS DURING 1969

Notes: The Census, 1961, populations given in this table refer to the areas as constituted at 31st December, 1969. Areas are as supplied by the Ordnance Survey Department and are given to the nearest acre. The adjusted rates are based on "comparability factors" supplied by the Registrar General. For explanation see pages 18 and 20, and for the district factors see Table 2, page 131. Rates based upon less than 20 births or deaths are distinguished by italic type as a warning that such rates are subject to a specially large amount of variation in proportion to their magnitude owing to the small number of persons whose experience is being recorded.

URBAN DISTRICTS	Average (land and water) at 31st Dec. 1969	POPULATION AT ALL AGES		BIRTHS						DEATHS				INFANT MORTALITY				NEO-NATAL MORTALITY				EARLY NEO-NATAL MORTALITY				Stillbirths and deaths of infants under one week per 1,000 total births
				LIVE BIRTHS			STILLBIRTHS			Number registered		Death rate per 1,000 population		Deaths of infants under one year				Deaths of infants under four weeks				Deaths of infants under one week				
		Census, 1961	Est. Home, 30th June, 1969	M.	F.	Total	Crude rate	Ad-justed rate	M.	F.	Total	Crude rate	Ad-justed rate	M.	F.	Total	Rate per 1,000 live births	M.	F.	Total	Rate per 1,000 live births	M.	F.	Total	Rate per 1,000 live births	
Abram	1,979	6,004	6,290	63	54	122	19.4	19.4	2	1	3	24	3	3	15.4	2	1	3	25	1	1	2	16	40		
Accrington (B) ..	4,418	39,018	36,340	275	283	621	17.1	19.3	4	2	6	10	5	10	14.0	5	5	10	16	3	—	3	5	14		
Adlington	1,062	4,276	4,680	34	52	92	19.7	19.7	—	—	—	nil	—	1	14.2	—	—	—	11	—	—	—	nil	nil		
Ashton-in-Makerfield ..	6,266	19,262	25,600	300	274	597	23.3	21.0	4	5	9	15	5	10	13.3	2	4	6	17	2	4	6	10	25		
Ashton-under-Lyne (B) ..	4,135	50,154	48,180	409	380	864	17.9	19.3	8	6	14	16	12	22	15.5	12	8	20	25	9	6	15	17	33		
Aspull	1,905	6,748	7,480	77	77	162	21.7	21.3	1	2	3	18	3	3	17.5	—	—	3	19	3	—	3	19	36		
Atherton	2,265	19,756	20,840	202	199	420	20.2	21.0	5	—	5	12	—	5	14.4	2	3	5	12	—	2	2	5	16		
Audenshaw	1,241	12,122	11,810	103	93	213	18.0	18.5	2	4	6	27	—	3	14.1	—	—	3	14	—	1	1	5	32		
Bacup (B)	6,121	17,308	16,270	89	110	221	13.6	14.4	—	—	—	nil	—	7	14.0	4	3	7	32	3	2	5	23	14		
Barrowford	1,387	4,644	4,700	29	27	61	13.0	16.3	—	—	—	nil	—	—	13.1	—	—	—	nil	—	—	—	—	nil		
Billinge and Winstanley ..	4,596	6,945	10,510	133	127	261	24.8	18.4	2	1	3	11	—	2	12.3	2	—	2	8	2	—	2	8	19		
Blackrod	2,392	3,606	4,840	33	38	76	15.7	14.1	1	1	2	26	—	2	14.3	—	—	2	26	—	—	—	—	26		
Brierfield	807	7,018	7,290	72	57	135	18.5	20.5	3	1	4	29	2	4	12.5	2	2	4	30	2	1	3	22	50		
Carnforth	1,504	4,113	4,190	17	31	50	11.9	12.4	—	—	—	nil	—	1	19.0	1	—	1	20	—	—	—	—	nil		
Chadderton	3,014	32,568	31,920	272	245	555	17.4	17.2	2	3	5	9	3	6	14.1	1	1	2	11	—	2	3	5	14		
Chorley (B)	4,283	31,315	30,990	231	188	466	15.0	16.1	3	3	6	13	—	5	15.4	4	1	5	11	2	1	3	6	19		

L.—Legitimate.

I.—Illegitimate.

TABLE 3—continued

URBAN DISTRICTS	Acreage (land and inland water) at 31st Dec. 1969	POPULATION AT ALL AGES		BIRTHS						DEATHS			INFANT MORTALITY			NEO-NATAL MORTALITY				EARLY NEO-NATAL MORTALITY			PERINATAL MORTALITY			
				LIVE BIRTHS			STILLBIRTHS			Number registered		Death rate per 1,000 population		Deaths of infants under one year			Deaths of infants under four weeks			Deaths of infants under one week						
		Census, 1961	Est. Home, 30th June, 1969	M.	F.	Total	Live birthrate per 1,000 population		M.	F.	Total	Crude rate	Adjusted rate	M.	F.	Total	Rate per 1,000 live births	M.	F.	Total	Rate per 1,000 live births	M.		F.	Total	Rate per 1,000 live births
							Crude rate	Adjusted rate																		
Church	528	5,888	5,870	38	40	87	14.8	15.5	14.3	36	34	70	11.9	14.3	3	1	1	2	1	2	23	1	2	23	45	
Clayton-le-Moors	1,060	6,421	6,460	53	42	106	16.4	17.5	17.2	59	52	111	17.2	17.5	3	2	2	2	2	2	19	2	2	19	63	
Clitheroe (B)	2,386	12,158	12,910	115	102	212	18.0	21.1	10.8	87	87	174	13.5	10.8	—	—	—	—	—	—	nil	—	—	—	9	
Colne (B)	5,939	19,430	18,890	118	105	223	14.5	17.5	13.9	135	146	281	14.9	13.9	6	5	1	4	3	1	15	3	1	4	32	
Crompton	2,865	12,708	15,860	187	155	362	22.8	27.1	14.1	102	100	202	12.7	14.1	8	3	5	8	3	5	22	3	4	7	33	
Crosby (B)	4,785	59,166	58,580	446	387	897	15.3	15.8	13.8	388	423	811	13.8	13.2	19	11	6	13	8	3	14	8	3	13	24	
Dalton-in-Furness	8,022	10,316	11,000	96	94	198	18.0	18.9	12.5	80	51	131	11.9	12.5	4	2	3	4	1	3	20	1	3	4	30	
Darwen (B)	5,959	29,475	28,500	211	199	451	15.8	17.5	14.1	201	204	405	14.2	14.1	8	2	6	7	2	5	16	2	3	5	20	
Denton	2,593	31,089	38,120	283	261	595	15.6	15.4	15.3	195	221	416	10.9	15.3	15	5	7	15	4	6	22	4	6	13	40	
Droghda (B)	1,245	25,461	25,240	196	216	434	17.2	17.5	16.7	207	134	341	13.5	16.7	9	4	3	9	2	3	14	2	3	5	32	
Eccles (B)	3,417	43,173	39,830	277	256	597	15.0	15.6	13.9	292	263	555	13.9	13.6	13	3	6	13	1	6	18	1	6	11	23	
Falsworth	1,679	19,819	22,640	200	191	413	18.2	17.3	13.3	130	122	252	11.1	13.3	8	5	3	8	4	2	15	2	2	4	17	
Farnworth (B)	1,504	27,502	26,560	181	205	423	15.9	17.5	14.4	215	214	429	16.2	14.4	9	3	5	9	1	4	12	1	4	5	26	
Fleetwood (B)	2,565	27,686	28,970	220	188	461	15.9	16.7	13.9	219	175	394	13.6	13.9	10	5	3	10	4	1	15	4	1	7	28	
Formby	5,613	11,734	21,730	258	214	483	22.2	35.7	7.1	91	65	156	7.2	7.1	4	1	3	4	1	—	2	1	—	1	16	
Fulwood	3,164	16,016	19,880	123	111	241	12.1	12.7	8.5	141	138	279	14.0	8.5	1	1	—	1	1	—	4	1	—	1	12	

L.—Legitimate.
L.—Illegitimate.

L.—Legitimate.

I.—Illegitimate.

TABLE 3—continued

URBAN DISTRICTS	Acreage (land and inland water) at 31st Dec. 1969	POPULATION AT ALL AGES		BIRTHS										DEATHS				INFANT MORTALITY				NEO-NATAL MORTALITY				EARLY NEO-NATAL MORTALITY				PERINATAL MORTALITY																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																														
				LIVE BIRTHS				STILLBIRTHS			Number registered			Death rate per 1,000 population		Deaths of infants under one year			Deaths of infants under four weeks			Deaths of infants under one week																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																						
				M.	F.	Total	Crude rate	Adjusted rate	Live birth rate per 1,000 population	Still-birth rate per 1,000 total births	M.	F.	Total	M.	F.	Total	Crude rate	Adjusted rate	M.	F.	Total	Rate per 1,000 live births	M.	F.	Total	Rate per 1,000 live births	M.	F.	Total		Rate per 1,000 live births																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																													

L.—Legitimate.

I.—Illegitimate.

† Constructed population for calculation of birth and death rates. See page 16.

TABLE 3—continued

URBAN DISTRICTS	Acreage (land and inland water) at 31st Dec. 1969	POPULATION AT ALL AGES		BIRTHS						DEATHS			INFANT MORTALITY			NEO-NATAL MORTALITY			EARLY NEO-NATAL MORTALITY			PERINATAL MORTALITY	
				LIVE BIRTHS			STILLBIRTHS			Number registered	Death rate per 1,000 population		Deaths of infants under one year			Deaths of infants under four weeks			Deaths of infants under one week				
		M.	F.	Total	M.	F.	Total	Crude rate	Ad- justed rate		M.	F.	Total	Rate per 1,000 live births	M.	F.	Total	Rate per 1,000 live births	M.	F.	Total		Rate per 1,000 live births
		Census, 1961	Est. Home, 30th June, 1969																				
Leigh (B)	6,361	46,174	46,200	394 L.	359 F.	796 }	17.2	18.9	13.1	15.1	11 L.	7 F.	19 }	24 L.	6 F.	10 }	13 L.	5 M.	3 F.	8 }	10	24	
Leyland	3,804	19,413	23,100	205 L.	187 F.	413 }	17.9	17.4	10.2	13.4	5 L.	4 F.	11 }	27 L.	4 F.	6 }	15 L.	2 M.	2 F.	4 }	10	38	
Litherland	1,210	24,871	24,540	185 L.	195 F.	400 }	16.3	15.8	10.0	14.4	6 L.	4 F.	9 }	23 L.	2 F.	5 }	13 L.	2 M.	3 F.	5 }	13	37	
Littleborough	7,855	10,552	11,110	115 L.	94 F.	226 }	20.3	21.7	13.3	14.1	2 L.	3 F.	5 }	22 L.	2 F.	4 }	18 L.	2 M.	2 F.	4 }	18	26	
Little Lever	807	5,085	7,310	111 L.	102 F.	228 }	31.2	35.6	10.1	14.0	2 L.	4 F.	4 }	18 L.	1 F.	1 }	4 L.	—	—	—	nil	13	
Longridge	3,285	4,686	6,170	60 L.	49 F.	118 }	19.1	22.0	13.0	14.8	3 L.	1 F.	2 }	17 L.	—	1 }	8 L.	—	1 F.	1 }	8	41	
Lytham St. Annes (B)	5,814	36,189	37,000	192 L.	139 F.	366 }	9.9	12.4	18.7	12.2	1 L.	1 F.	2 }	5 L.	1 F.	2 }	5 L.	1 M.	1 F.	2 }	5	29	
Middleton (B)	5,172	56,668	57,510	339 L.	374 F.	790 }	13.7	13.3	10.2	15.0	7 L.	10 F.	22 }	28 L.	5 F.	8 }	20 L.	3 M.	8 F.	14 }	18	41	
Milnrow	5,194	8,129	9,930	105 L.	94 F.	203 }	20.4	25.5	12.4	13.4	1 L.	1 F.	2 }	39 L.	4 F.	4 }	20 L.	4 M.	—	4 }	20	25	
Morecambe and Heysham (B)	3,796	40,228	40,880	185 L.	207 F.	438 }	10.7	13.5	17.7	12.6	3 L.	4 F.	7 }	16 L.	2 F.	2 }	9 L.	1 M.	2 F.	3 }	7	16	
Mossley (B)	3,661	9,776	9,750	73 L.	67 F.	147 }	15.1	17.4	13.7	14.7	2 L.	2 F.	4 }	27 L.	2 F.	2 }	27 L.	2 M.	2 F.	4 }	27	40	
Nelson (B)	3,445	32,292	31,230	241 L.	205 F.	500 }	16.0	18.2	16.8	15.1	8 L.	4 F.	14 }	28 L.	6 F.	2 }	20 L.	3 M.	1 F.	6 }	12	26	
Newton-le-Willows	3,105	21,768	22,280	195 L.	164 F.	388 }	17.4	17.6	11.8	13.6	4 L.	2 F.	6 }	15 L.	4 F.	2 }	15 L.	4 M.	2 F.	6 }	15	28	
Ormskirk	15,227	21,803	25,000	195 L.	205 F.	430 }	16.6	18.1	11.8	12.6	5 L.	5 F.	11 }	26 L.	4 F.	2 }	16 L.	4 M.	2 F.	7 }	16	25	
Orrell	1,616	10,664	12,090	81 L.	95 F.	185 }	15.3	14.8	11.6	14.2	1 L.	1 F.	2 }	11 L.	1 F.	1 }	5 L.	1 M.	—	1 }	5	21	
Oswaldtwistle	4,885	11,918	13,940	120 L.	106 F.	243 }	17.4	20.9	13.3	14.5	6 L.	1 F.	8 }	23 L.	5 F.	1 }	29 L.	5 M.	1 F.	7 }	29	48	

—Legitimate.
—Illegitimate.

L.—Illegitimate.

L.—Legitimate.

TABLE 3—continued

URBAN DISTRICTS	Acreage (land and water) at 31st Dec. 1969	POPULATION AT ALL AGES		BIRTHS						DEATHS				INFANT MORTALITY				NEO-NATAL MORTALITY				EARLY NEO-NATAL MORTALITY				PERINATAL MORTALITY					
				LIVE BIRTHS			STILLBIRTHS			Number registered		Deaths of infants under one year		Deaths of infants under four weeks		Deaths of infants under one week		Deaths of infants under one week													
		Census, 1961	Est. Home, 30th June, 1969	M.	F.	Total	Live birthrate per 1,000 population		Still- birth rate per 1,000 total births	M.	F.	Total	Crude rate	Ad- justed rate	M.	F.	Total	Rate per 1,000 live births	M.	F.	Total	Rate per 1,000 live births	M.	F.	Total		Rate per 1,000 live births	M.	F.	Total	Rate per 1,000 live births
							Crude rate	Ad- justed rate																							
Padstow	975	9,899	10,160	73	74	147	15.6	17.3	15.5	84	79	163	16.0	15.5	1	1	2	13	1	1	2	6	1	1	2	6	1	1	2	6	19
Poulton-le-Fylde	2,272	12,726	16,150	106	109	215	13.9	13.8	11.5	95	99	194	12.0	11.5	2	3	5	22	1	1	2	13	1	1	2	9	1	1	2	9	18
Prestall	3,277	2,357	3,490	20	28	48	14.6	28.8	12.4	42	35	77	22.1	12.4	1	1	2	20	1	1	2	20	1	1	2	20	1	1	2	20	57
Preston	871	13,079	13,200	111	97	208	16.8	16.0	14.2	72	82	154	11.7	14.2	5	2	7	32	2	2	4	18	2	2	4	18	2	2	4	18	22
Prestwich (B)	2,421	34,209	33,060	184	191	375	12.4	13.3	12.9	258	303	561	17.0	12.9	5	2	7	19	2	2	4	12	2	2	4	10	2	2	4	10	26
Radcliffe (B)	4,957	26,726	28,460	256	266	522	19.5	20.9	14.6	188	199	387	13.6	14.6	2	5	7	16	1	1	2	4	1	1	2	4	1	1	2	4	21
Rainford	5,877	5,385	7,380	76	74	150	21.0	21.0	15.6	43	34	77	10.4	15.6	1	1	2	6	1	1	2	nil	1	1	2	nil	1	1	2	25	
Ramsbottom	9,562	13,817	14,940	123	123	246	17.7	19.8	11.8	90	90	180	12.0	11.8	2	2	4	8	2	2	4	8	2	2	4	8	2	2	4	19	
Rawtenstall (B)	9,528	21,890	21,640	150	139	289	14.7	16.2	14.5	159	185	344	15.9	14.5	1	2	3	9	1	1	2	9	1	1	2	9	1	1	2	28	
Ribblesdale	2,879	5,433	5,650	63	43	106	19.6	22.1	16.2	54	42	96	17.0	16.2	1	1	2	18	1	1	2	nil	1	1	2	nil	1	1	2	26	
Royton	2,148	14,474	19,040	186	200	386	21.4	24.4	13.3	94	110	204	10.7	13.3	5	9	14	37	4	6	10	27	4	6	10	25	4	6	10	34	
Skelmersdale and Holland	7,510	13,841	23,640	248	242	490	21.7	18.2	17.2	124	98	222	9.4	17.2	8	3	11	23	5	1	6	14	4	1	5	12	4	1	5	36	
Standish-with-Langtree	3,266	9,692	10,960	93	84	177	16.6	16.3	14.2	69	60	129	11.8	14.2	5	2	7	38	3	1	4	22	2	1	3	11	2	1	3	22	
Stretford (B)	3,533	60,364	58,820	385	397	782	15.8	16.1	14.0	346	336	682	11.6	14.0	8	2	10	26	4	1	5	16	3	8	11	14	3	8	11	36	
Swinton and Pendlebury (B)	3,362	40,470	40,640	286	286	572	15.1	15.4	14.4	240	263	503	12.4	14.4	2	7	9	15	1	1	2	10	1	1	2	8	1	1	2	29	
Thornton Cleveleys	3,358	20,648	26,250	182	166	348	14.4	20.0	10.0	205	219	424	16.2	10.0	4	2	6	19	3	1	4	11	3	1	4	11	3	1	4	21	

1.—Illegitimate.
L.—Legitimate.

L.—Legitimate.

L.—Legitimate.

TABLE 3—continued

URBAN DISTRICTS	Acres (land and water) at 31st Dec. 1969	POPULATION AT ALL AGES		BIRTHS						DEATHS				INFANT MORTALITY			NEO-NATAL MORTALITY			EARLY NEO-NATAL MORTALITY			PERINATAL MORTALITY																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																													
				LIVE BIRTHS			STILLBIRTHS			Number registered		Death rate per 1,000 population		Deaths of infants under one year			Deaths of infants under four weeks			Deaths of infants under one week																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																
		M.	F.	Total	Crude rate	Ad-justed rate	Live birth rate per 1,000 population	M.	F.	Total	Still-birth rate per 1,000 total births	M.	F.	Total	Crude rate	Ad-justed rate	M.	F.	Total	Rate per 1,000 live births	M.	F.		Total	Rate per 1,000 live births	M.	F.	Total	Rate per 1,000 live births																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																							
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L.—Legitimate.

I.—Illegitimate.

† Constructed population for calculation of birth and death rates. See page 16.

TABLE 3—continued

RURAL DISTRICTS	Acreage (land and inland waters) at 31st Dec. 1969	POPULATION AT ALL AGES		BIRTHS						DEATHS			INFANT MORTALITY			NEO-NATAL MORTALITY			EARLY NEO-NATAL MORTALITY			PERINATAL MORTALITY				
				LIVE BIRTHS			STILLBIRTHS			Number registered			Deaths of infants under one year			Deaths of infants under four weeks			Deaths of infants under one week							
Census, 1961	Est. Home, at 30th June, 1969	M.	F.	Total	Crude rate	Ad- justed rate	Live birth rate per 1,000 population	M.	F.	Total	Crude rate	Ad- justed rate	M.	F.	Total	Rate per 1,000 live births	M.	F.	Total	Rate per 1,000 live births	M.	F.	Total	Rate per 1,000 live births		
Blackburn	19,469	15,053	19,520	143	140	283	15.3	14.2	10	3	—	3	12.6	14.0	—	—	2	7	—	—	2	7	—	—	2	7
Burnley	39,849	16,035	16,170	108	109	217	13.9	15.8	9	1	1	2	16.0	14.2	—	—	1	4	—	—	1	4	—	—	1	4
Chorley	41,117	28,567	35,700	336	359	695	20.3	21.1	11	4	4	8	11.0	12.5	—	—	6	18	—	—	6	18	—	—	6	18
Culterhoe	82,170	8,799	9,350	48	63	111	12.2	15.4	17	—	—	—	14.3	12.9	—	—	1	9	—	—	—	nil	—	—	—	nil
Fylde	33,264	17,370	18,410	164	147	311	18.4	18.0	12	4	2	4	15.7	10.8	—	—	2	30	—	—	2	15	—	—	2	30
Garsang	57,491	14,390	17,750	174	132	306	17.9	20.6	16	3	2	5	11.4	12.3	—	—	4	13	—	—	4	9	—	—	4	9
Lancaster	52,982	14,000	17,310	105	102	207	12.9	15.2	9	1	1	2	15.1	10.7	—	—	3	27	—	—	3	18	—	—	3	18
Lunesdale	76,267	8,224	10,770	89	92	181	17.3	18.7	21	4	—	4	10.6	7.8	—	—	3	32	—	—	3	22	—	—	3	22
North Lonsdale	127,448	16,598	15,820	104	94	198	13.1	15.3	14	3	—	3	14.8	12.3	—	—	4	19	—	—	4	10	—	—	4	10
Preston	49,754	43,592	51,310	367	382	749	15.1	17.5	9	4	4	7	12.6	11.3	—	—	7	9	—	—	7	5	—	—	7	5
Warrington	22,357	30,732	46,900	551	499	1,050	23.3	20.5	16	8	9	18	11.0	10.1	—	—	14	23	—	—	14	22	—	—	14	22
West Lancashire	65,168	55,565	67,100	532	502	1,034	16.2	13.8	10	6	6	11	10.3	13.4	—	—	8	19	—	—	8	17	—	—	8	17
Whiston	23,786	43,786	82,420	598	612	1,210	15.7	11.6	12	4	11	16	8.7	13.6	—	—	15	29	—	—	15	21	—	—	15	21
Wigan	11,191	10,102	13,760	133	152	285	21.0	18.5	14	3	4	4	8.6	11.5	—	—	5	17	—	—	5	17	—	—	5	17

L.—Legitimate.

I.—Illegitimate.

† Constructed population for calculation of birth & death rates. See page 16.

TABLE 3—continued

TOTALS	Acreage (land and inland water) at 31st Dec. 1969	POPULATION AT ALL AGES		BIRTHS						DEATHS			INFANT MORTALITY			NEO-NATAL MORTALITY			EARLY NEO-NATAL MORTALITY			Stillbirths and deaths of infants under one week per 1,000 total births		
				LIVE BIRTHS			STILLBIRTHS			Number registered		Death rate per 1,000 population		Deaths of infants under one year			Deaths of infants under four weeks			Deaths of infants under one week				
		Census, 1961	Est. Home, 30th June, 1969	M.	F.	Total	Live birth rate per 1,000 population	Crude rate	Ad-justed rate	M.	F.	Total	M.	F.	Total	Rate per 1,000 live births	M.	F.	Total	Rate per 1,000 live births	M.		F.	Total
Total Rural Districts	652,313	322,813	422,290	L. 3,452	3,385	7,164	17.0	16.0				12											25	
Total Urban Districts	380,410	1,875,395	2,034,990	L. 16,334	15,491	34,340	16.9	17.6				16											26	
Total Administrative County	1,032,723	2,198,208	2,457,280	L. 19,786	18,876	41,504	16.9	17.2				15											26	

L.—Legitimate.

I.—Illegitimate.

† Constructed population for calculation of birth and death rates. See page 16.

Year to which the return relates	GRAND DISTRICT - Cal.	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100	101	102	103	104	105	106	107	108	109	110	111	112	113	114	115	116	117	118	119	120	121	122	123	124	125	126	127	128	129	130	131	132	133	134	135	136	137	138	139	140	141	142	143	144	145	146	147	148	149	150	151	152	153	154	155	156	157	158	159	160	161	162	163	164	165	166	167	168	169	170	171	172	173	174	175	176	177	178	179	180	181	182	183	184	185	186	187	188	189	190	191	192	193	194	195	196	197	198	199	200	201	202	203	204	205	206	207	208	209	210	211	212	213	214	215	216	217	218	219	220	221	222	223	224	225	226	227	228	229	230	231	232	233	234	235	236	237	238	239	240	241	242	243	244	245	246	247	248	249	250	251	252	253	254	255	256	257	258	259	260	261	262	263	264	265	266	267	268	269	270	271	272	273	274	275	276	277	278	279	280	281	282	283	284	285	286	287	288	289	290	291	292	293	294	295	296	297	298	299	300	301	302	303	304	305	306	307	308	309	310	311	312	313	314	315	316	317	318	319	320	321	322	323	324	325	326	327	328	329	330	331	332	333	334	335	336	337	338	339	340	341	342	343	344	345	346	347	348	349	350	351	352	353	354	355	356	357	358	359	360	361	362	363	364	365	366	367	368	369	370	371	372	373	374	375	376	377	378	379	380	381	382	383	384	385	386	387	388	389	390	391	392	393	394	395	396	397	398	399	400	401	402	403	404	405	406	407	408	409	410	411	412	413	414	415	416	417	418	419	420	421	422	423	424	425	426	427	428	429	430	431	432	433	434	435	436	437	438	439	440	441	442	443	444	445	446	447	448	449	450	451	452	453	454	455	456	457	458	459	460	461	462	463	464	465	466	467	468	469	470	471	472	473	474	475	476	477	478	479	480	481	482	483	484	485	486	487	488	489	490	491	492	493	494	495	496	497	498	499	500	501	502	503	504	505	506	507	508	509	510	511	512	513	514	515	516	517	518	519	520	521	522	523	524	525	526	527	528	529	530	531	532	533	534	535	536	537	538	539	540	541	542	543	544	545	546	547	548	549	550	551	552	553	554	555	556	557	558	559	560	561	562	563	564	565	566	567	568	569	570	571	572	573	574	575	576	577	578	579	580	581	582	583	584	585	586	587	588	589	590	591	592	593	594	595	596	597	598	599	600	601	602	603	604	605	606	607	608	609	610	611	612	613	614	615	616	617	618	619	620	621	622	623	624	625	626	627	628	629	630	631	632	633	634	635	636	637	638	639	640	641	642	643	644	645	646	647	648	649	650	651	652	653	654	655	656	657	658	659	660	661	662	663	664	665	666	667	668	669	670	671	672	673	674	675	676	677	678	679	680	681	682	683	684	685	686	687	688	689	690	691	692	693	694	695	696	697	698	699	700	701	702	703	704	705	706	707	708	709	710	711	712	713	714	715	716	717	718	719	720	721	722	723	724	725	726	727	728	729	730	731	732	733	734	735	736	737	738	739	740	741	742	743	744	745	746	747	748	749	750	751	752	753	754	755	756	757	758	759	760	761	762	763	764	765	766	767	768	769	770	771	772	773	774	775	776	777	778	779	780	781	782	783	784	785	786	787	788	789	790	791	792	793	794	795	796	797	798	799	800	801	802	803	804	805	806	807	808	809	810	811	812	813	814	815	816	817	818	819	820	821	822	823	824	825	826	827	828	829	830	831	832	833	834	835	836	837	838	839	840	841	842	843	844	845	846	847	848	849	850	851	852	853	854	855	856	857	858	859	860	861	862	863	864	865	866	867	868	869	870	871	872	873	874	875	876	877	878	879	880	881	882	883	884	885	886	887	888	889	890	891	892	893	894	895	896	897	898	899	900	901	902	903	904	905	906	907	908	909	910	911	912	913	914	915	916	917	918	919	920	921	922	923	924	925	926	927	928	929	930	931	932	933	934	935	936	937	938	939	940	941	942	943	944	945	946	947	948	949	950	951	952	953	954	955	956	957	958	959	960	961	962	963	964	965	966	967	968	969	970	971	972	973	974	975	976	977	978	979	980	981	982	983	984	985	986	987	988	989	990	991	992	993	994	995	996	997	998	999	1000
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TABLE 4—continued

TABLE 4—continued

TABLE 7—ANTENATAL AND POST-NATAL CLINICS
SUMMARY, BY HEALTH DIVISIONS AND DELEGATE DISTRICTS, OF ANTENATAL AND POST-NATAL ATTENDANCES AND OF RELAXATION CLASSES DURING 1969

Health Division Number	Number of clinics at 31st December, 1969	Number of sessions during year conducted by—				Antenatal attendances			Post-natal attendances		Relaxation classes			
		Medical officers	Midwives	G.P.'s, on sessional basis	Hospital medical staff	Number of women attending	Number of attendances	Average attendances per session	Average attendances per individual	Number of women attending	Number of attendances	Number of sessions	Number of women attending	Number of attendances
1 ..	2	—	—	—	96	520	1,898	19.8	3.7	177	182	92	154	699
2 ..	—	—	—	—	—	—	—	—	—	—	—	233	515	2,711
3 ..	4	—	2	—	175	814	3,173	18.0	3.9	203	248	276	440	2,747
4 ..	6	—	171	—	165	2,401	6,888	20.5	2.9	53	53	342	426	2,239
5 ..	6	335	3	—	101	1,792	6,388	14.6	3.6	46	48	301	602	2,784
6 ..	5	—	323	—	—	398	2,566	7.9	6.4	—	—	141	150	829
7 ..	1	50	—	—	—	30	223	4.5	7.4	—	—	47	46	297
8 ..	6	—	123	25	82	581	2,528	11.0	4.4	335	335	277	325	1,627
9 ..	6	—	—	78	304	1,047	4,647	12.2	4.4	261	281	195	183	799
10 ..	5	26	152	—	52	845	2,500	10.9	3.0	—	—	249	375	2,011
11 ..	8	—	206	123	49	1,244	4,796	12.7	3.9	60	61	311	705	3,622
12 ..	7	273	15	—	98	1,020	5,292	13.7	5.2	6	6	296	406	2,118
13 ..	6	185	129	—	11	719	3,867	11.9	5.4	42	42	81	82	384
14 ..	6	91	189	—	—	543	3,347	12.0	6.2	—	—	94	216	589
15 ..	5	248	—	—	50	727	2,796	9.4	3.8	118	141	215	272	1,402
16 ..	2	20	35	—	—	156	317	5.8	2.0	7	7	95	253	1,657
17 ..	6	23	97	—	128	784	3,097	12.5	4.0	—	—	170	418	1,819
Delegate District—														
Crosby M.B. ..	1	—	51	—	—	50	201	3.9	4.0	1	1	45	88	477
Hayton-w-Roby U.D. ..	2	—	—	—	101	185	771	7.6	4.2	18	20	76	36	169
Middleton M.B. ..	2	41	176	—	1	296	2,234	10.2	7.5	—	—	46	81	383
Stretford M.B. ..	—	1	15	—	—	18	48	3.0	2.7	—	—	47	107	562
Total—Administrative County ..	86	1,293	1,687	226	1,413	14,170	57,577	12.5	4.1	1,027	1,125	3,629	5,880	29,925

* Includes eight sessions for post-natal purposes only at which 15 women made 15 attendances.

TABLE 8—CHILD HEALTH CENTRES
SUMMARY, BY HEALTH DIVISIONS AND DELEGATE DISTRICTS, OF ATTENDANCES DURING 1969

Health Division Number	Number of centres at 31st December, 1969	Number of sessions conducted by—			Number of children who attended and were born in—			Number of attendances by children at ages (in years)			Average attendances (all children) per session	*Number of children referred elsewhere
		Medical officers	Health visitors	G.P.s, on sessional basis	1969	1968	1964-67	0-	1-	2-4 (inclusive)		
1 ..	7	180	11	—	422	369	496	4,270	733	1,448	33.8	38
2 ..	19	904	97	—	1,439	1,384	1,920	21,709	5,573	4,107	31.4	320
3 ..	16	657	253	—	1,570	1,297	1,000	24,653	5,058	3,265	36.2	165
4 ..	35	954	563	—	3,195	3,043	3,248	46,084	11,040	7,244	42.4	174
5 ..	20	737	398	—	1,932	1,700	1,869	33,344	7,412	9,030	43.9	—
6 ..	15	454	277	—	1,164	1,128	1,342	17,621	5,388	4,432	37.5	—
7 ..	17	635	203	51	2,348	2,029	2,627	28,052	5,374	6,418	44.8	174
8 ..	14	1,603	139	72	2,118	1,904	1,736	28,194	6,154	3,769	46.8	148
9 ..	20	763	422	80	3,122	2,784	2,071	36,908	7,600	6,175	40.1	99
10 ..	14	653	76	—	1,956	1,620	1,415	24,323	5,010	2,229	43.3	84
11 ..	22	744	547	—	2,936	2,282	1,753	39,106	7,377	4,565	39.5	148
12 ..	21	924	387	—	2,493	1,944	2,206	29,388	7,147	5,737	32.2	239
13 ..	9	425	115	—	1,187	1,111	1,278	18,055	3,568	3,972	47.4	243
14 ..	7	442	162	—	1,550	1,400	1,138	25,379	4,252	2,909	53.9	65
15 ..	12	874	49	8	1,893	1,885	2,498	28,289	7,609	5,866	44.9	2
16 ..	6	333	114	8	1,009	1,014	1,311	18,681	4,888	3,204	58.8	130
17 ..	14	618	75	142	1,950	1,559	1,923	25,190	5,034	3,423	40.3	195
Delegate District—												
Crosby M.B.	4	164	185	—	575	575	703	10,675	2,480	3,207	46.9	99
Hayton-with-Roby U.D.	6	282	128	—	825	730	336	10,309	1,905	1,673	33.9	14
Middleton M.B.	5	322	48	—	547	566	416	6,228	1,496	650	22.6	55
Stretford M.B.	4	262	41	—	779	708	856	7,807	2,408	1,161	37.5	119
TOTAL—Administrative County ..	287	11,930	4,290	361	35,010	31,032	32,142	484,265	107,506	84,484	40.8	2,511

* See text, page 39.

† Includes 46 sessions conducted by hospital medical staff.

TABLE 9—CARE OF PREMATURE INFANTS

SUMMARY, BY HEALTH DIVISIONS AND DELEGATE DISTRICTS, OF PREMATURE INFANTS BORN IN 1969 WHOSE MOTHERS WERE NORMALLY RESIDENT IN THE ADMINISTRATIVE COUNTY AREA

Health Division No.	BORN IN HOSPITAL												BORN AT HOME OR IN A NURSING HOME											
	Over 2 lb. 3 oz. or less				Over 3 lb. 4 oz. to 4 lb. 6 oz.				Over 4 lb. 6 oz. to 5 lb. 8 oz.				(a) Nurtured entirely there.				Over 3 lb. 4 oz. to 4 lb. 6 oz.				Over 4 lb. 6 oz. to 5 lb. 8 oz.			
	Died				Died				Died				Died				Died				Died			
	Total births	Within 24 hours	In 1 and under 7 days	In 7 and under 28 days	Total births	Within 24 hours	In 1 and under 7 days	In 7 and under 28 days	Total births	Within 24 hours	In 1 and under 7 days	In 7 and under 28 days	Total births	Within 24 hours	In 1 and under 7 days	In 7 and under 28 days	Total births	Within 24 hours	In 1 and under 7 days	In 7 and under 28 days	Total births	Within 24 hours	In 1 and under 7 days	In 7 and under 28 days
1	3	3	—	—	9	—	—	—	5	—	—	—	9	—	—	—	—	—	—	—	—	—	—	—
2	3	2	1	—	17	—	2	—	26	1	2	1	59	—	—	—	—	—	—	—	—	—	—	—
3	3	3	—	—	21	4	1	—	18	2	1	1	50	1	—	—	—	—	—	—	—	—	—	—
4	4	2	1	—	28	—	2	1	51	2	1	1	105	—	—	2	—	—	—	—	—	—	—	—
5	4	3	1	—	24	3	1	—	44	1	—	—	87	1	—	1	—	—	—	—	—	—	—	—
6	1	—	—	—	21	2	1	—	20	1	—	—	37	1	—	—	—	—	—	—	—	—	—	—
7	5	4	—	—	41	8	4	1	24	3	1	1	71	1	—	—	—	—	—	—	—	—	—	—
8	13	10	—	—	20	3	1	—	48	1	—	—	68	2	1	—	—	—	—	—	—	—	—	—
9	22	16	2	—	49	5	2	—	61	2	2	—	147	5	1	—	—	—	—	—	—	—	—	—
10	5	3	2	—	28	4	6	—	30	3	1	—	55	—	—	—	—	—	—	—	—	—	—	—
11	5	2	2	1	16	5	3	—	40	1	—	1	123	2	—	2	—	—	—	—	—	—	—	—
12	11	7	1	1	8	2	2	—	39	1	1	—	59	1	—	—	—	—	—	—	—	—	—	—
13	3	3	—	—	26	3	1	—	25	—	1	—	38	—	—	—	—	—	—	—	—	—	—	—
14	8	7	1	—	20	2	2	—	30	2	1	1	59	—	—	1	—	—	—	—	—	—	—	—
15	7	5	1	—	19	4	1	—	20	1	—	—	67	1	—	—	—	—	—	—	—	—	—	—
16	1	—	—	—	14	1	—	—	12	1	1	—	29	—	—	—	—	—	—	—	—	—	—	—
17	13	10	2	—	40	5	2	1	39	5	1	—	61	—	—	—	—	—	—	—	—	—	—	—
Delegate District— Crosby M.B.	—	—	—	—	15	—	4	—	12	—	—	—	33	—	—	—	—	—	—	—	—	—	—	—
Huyton-w-Roby U.D.	7	6	—	—	17	1	—	—	14	—	—	—	31	—	1	—	—	—	—	—	—	—	—	—
Middleton M.B.	6	4	2	—	11	2	—	—	14	1	—	—	24	2	—	—	—	—	—	—	—	—	—	—
Stretford M.B.	1	1	—	—	15	3	—	1	21	—	—	—	39	—	—	—	—	—	—	—	—	—	—	—
TOTAL— Admin. County	125	91	18	3	487	50	31	5	593	28	13	8	1,251	16	5	5	—	—	—	—	—	—	—	—
																	3	1	1	1	21	7	—	—
																	10	1	1	1	—	—	—	—
																	10	1	1	1	—	—	—	—
																	141	—	—	—	—	—	—	—
																	18	—	—	—	—	—	—	—

TABLE 11—DAY NURSERIES
SUMMARY, BY HEALTH DIVISIONS AND DELEGATE DISTRICTS, OF ACCOMMODATION AND ATTENDANCES DURING 1969

Health Division Number	Accommodation and attendances during 1969							Position at 31st December, 1969							
	Number of nursery days	Total day places available at ages (in years)			Total attendances at ages (in years)		Proportion of attendances to places available (all ages)	Number of nurseries	Number of places approved for children at ages (in years)		Number of children—				
		0-24 (inclusive)			0-24 (inclusive)				On registers		On waiting lists				
		0-24 (inclusive)			0-24 (inclusive)				Social cases		Social cases				
		0-	2-4 (inclusive)	0-24 (inclusive)	0-	2-4 (inclusive)			0-	2-4 (inclusive)	0-	2-4 (inclusive)	0-	2-4 (inclusive)	
1	..	—	—	—	—	—	—	—	—	—	—	—	—	—	—
2	..	510	10,200	21,675	3,542	21,207	77.6	2	40	85	24	119	—	33	18
3	..	256	4,864	7,936	2,427	8,637	86.4	1	19	31	11	23	—	23	49
4	..	490	9,065	15,435	5,555	15,752	87.0	2	37	63	15	30	—	19	306
5	..	1,468	25,197	44,283	16,091	49,568	94.5	6	103	181	40	106	—	17	122
6	..	968	15,972	31,944	10,184	33,726	91.6	4	66	132	28	92	—	16	111
7	..	255	6,375	16,575	3,080	13,430	71.9	1	25	65	11	43	—	6	14
8	..	—	—	—	—	—	—	—	—	—	—	—	—	—	—
9	..	510	5,610	24,990	3,992	16,648	67.5	2	22	98	20	64	—	4	125
10	..	—	—	—	—	—	—	—	—	—	—	—	—	—	—
11	..	973	20,686	28,711	9,421	28,970	77.7	3	67	91	17	87	—	3	—
12	..	244	4,636	7,564	1,794	7,737	78.1	1	19	31	11	25	—	24	39
13	..	724	11,828	19,076	6,719	18,279	80.9	3	49	79	16	62	—	2	250
14	..	1,463	18,249	43,386	9,891	39,709	80.5	6	75	178	32	69	—	7	219
15	..	732	10,980	21,960	5,935	20,643	80.7	3	45	90	22	86	—	15	176
16	..	1,007	11,570	33,258	6,777	35,187	93.6	4	46	132	28	91	—	20	240
17	..	1,479	27,353	46,597	9,460	54,702	86.8	6	111	189	33	92	—	—	198
Delegate District—															
Crosby M.B.	..	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Hayton-with-Roby U.D.	..	765	10,233	23,038	7,806	16,871	74.2	3	43	98	19	61	—	—	—
Middleton M.B.	..	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Stretford M.B.	..	748	9,968	17,940	7,596	15,480	82.7	3	40	72	39	52	—	5	164
TOTAL—Administrative County	..	12,592	202,786	404,368	110,270	396,546	83.5	50	807	1,615	366	1,102	—	194	2,031

TABLE 12—HEALTH VISITING
SUMMARY, BY HEALTH DIVISIONS AND DELEGATE DISTRICTS, OF HOME VISITS DURING 1969

Health Division Number	*Cases visited by—										Visits paid by health visitors and tuberculosis visitors								
	Health visitors										T.B. visitors								
	Children born in			†Aged 65 years or over	‡Mentally disordered	§Discharged from hospital	¶T.B. households	Infectious diseases (other than T.B.)	Other cases	T.B. households	Expectant mothers	Children under 5 years	Adults (excluding expectant mothers and tuberculous)		Tuberculosis		Total		
	1969	1968	1964-67										Under 65	65 and over	Under 65	65 and over		Under 65	65 and over
1	619	431	1,153	641 (18)	11 (6)	18 (10)	54	4	205	—	287	7,698	629	2,023	49	18	30	4	10,738
2	1,669	1,986	4,616	3,285 (1,167)	62 (30)	152 (67)	46	95	1,221	244	1,590	29,548	3,274	8,556	971	114	1,656	20	45,729
3	2,169	2,717	4,991	1,559 (517)	74 (48)	94 (136)	4	99	1,867	150	1,270	25,779	1,727	4,428	299	142	863	27	34,535
4	4,254	4,835	8,140	3,128 (515)	94 (47)	259 (124)	1	143	2,226	922	1,118	44,684	3,538	7,419	753	151	544	15	58,222
5	3,111	2,053	4,508	2,080 (194)	57 (17)	843 (126)	7	145	1,126	130	819	22,312	1,765	3,408	150	106	309	104	28,973
6	1,502	1,803	2,746	1,732 (549)	72 (54)	145 (103)	150	212	701	—	810	16,907	1,537	4,044	192	35	370	37	23,932
7	2,889	2,876	7,689	1,096 (147)	56 (21)	67 (46)	38	41	319	160	966	33,798	1,674	2,678	595	144	757	100	40,712
8	2,569	2,361	6,497	875 (59)	39 (5)	104 (37)	13	56	75	472	1,358	31,001	1,605	3,291	1,513	217	3,029	40	42,054
9	4,797	4,320	13,660	5,699 (205)	183 (36)	220 (128)	179	137	837	1,384	1,309	38,882	3,259	7,960	2,377	500	3,182	226	57,695
10	2,276	2,035	6,842	649 (78)	59 (7)	50 (35)	45	69	104	209	571	20,133	1,180	1,036	1,140	140	1,732	216	26,148
11	3,588	3,334	8,392	2,508 (415)	90 (36)	96 (74)	16	116	969	285	785	35,770	1,820	4,817	485	161	1,122	66	45,026
12	2,667	2,283	6,039	1,110 (227)	85 (18)	51 (38)	69	63	605	103	688	26,743	1,605	2,380	546	128	620	85	32,995
13	1,598	1,368	2,930	994 (16)	8 (3)	12 (7)	4	11	63	70	430	15,410	471	2,349	1,011	24	479	—	20,174
14	1,886	1,781	5,908	1,162 (103)	8 (3)	57 (41)	1	17	185	114	261	23,091	676	2,543	179	52	425	36	27,263
15	1,953	1,889	6,391	1,103 (127)	59 (18)	51 (38)	132	44	142	4	380	17,025	1,070	1,397	119	72	72	5	20,140
16	1,132	1,216	3,044	433 (45)	26 (5)	21 (15)	79	12	370	—	279	13,490	1,398	1,688	114	51	80	—	17,100
17	2,589	1,918	4,176	2,778 (203)	37 (18)	98 (41)	4	48	752	1,834	337	15,610	1,100	4,584	1,469	189	1,478	70	24,837
Delegate District—																			
Crosby M.B. ..	1,095	1,074	3,731	722 (22)	13 (1)	8 (6)	7	—	101	118	199	14,456	236	1,315	402	37	371	7	17,023
Huyton-w-Roby U.D. ..	1,113	1,190	4,407	1,309 (175)	35 (6)	123 (18)	151	18	906	62	387	14,036	448	2,318	115	12	193	1	17,510
Middleton M.B. ..	820	856	2,265	519 (230)	46 (19)	59 (42)	6	41	382	87	328	12,077	1,868	1,428	93	21	280	16	16,111
Stretford M.B. ..	1,009	975	2,877	358 (29)	47 (7)	36 (31)	150	51	604	—	407	14,898	1,277	1,274	111	61	80	7	18,115
TOTAL—Admin. County ..	45,305	43,301	111,002	33,740 (5,041)	1,161 (405)	2,564 (1,163)	1,156	1,422	13,760	6,348	14,579	473,348	32,157	71,136	12,683	2,375	17,672	1,082	625,032

* A case which can be classified to more than one category is included under each appropriate heading. No adult case is included unless some advice or service was given.

† Cases visited at the request of a G.P. or hospital are included and also shown separately in brackets.

‡ Excludes maternity cases and persons discharged from mental hospitals.

TABLE 13—DISTRICT NURSING
ANALYSIS OF COMPLETED CASES BY SEX AND AGE GROUPS—YEAR ENDED 31ST DECEMBER, 1969

Disease or ailment	Total cases (both sexes)	Age in years												All ages	
		0—			5—			15—			45—			65—	
		M.		F.	M.		F.	M.		F.	M.		F.	M.	
		No.	Per cent.	No.	No.	Per cent.	No.	No.	Per cent.	No.	No.	Per cent.	No.	No.	Per cent.
Tuberculosis of respiratory system ..	181	2	0.3	3	0.8	—	—	45	2.4	41	0.8	16	0.3	19	0.3
Other infective and parasitic diseases ..	786	21	3.5	25	6.4	—	—	60	3.3	111	2.3	146	2.8	94	1.4
Cancer ..	2,573	4	0.7	4	1.0	—	—	40	2.2	103	2.1	506	9.6	675	10.4
Diabetes ..	574	4	0.7	2	0.5	—	—	18	1.0	23	0.5	101	1.9	79	1.2
Anaemias and other blood diseases ..	3,629	—	—	—	—	—	—	28	1.5	479	9.8	683	13.0	517	8.0
Mental, psychoneurotic disorders ..	245	—	—	—	—	—	—	10	0.5	23	0.5	46	0.9	40	0.6
Cerebral haemorrhage, cerebral embolism and thrombosis ..	1,330	1	0.2	—	—	—	—	5	0.3	8	0.2	112	2.1	433	6.7
Other diseases of central nervous system ..	1,713	1	0.2	—	—	—	—	56	3.0	98	2.0	202	3.8	453	7.0
Diseases of eye, ear and mastoid process ..	491	26	4.3	47	12.1	—	—	28	1.5	43	0.9	39	0.7	68	1.0
Diseases of heart and circulatory system ..	2,538	—	—	—	—	—	—	45	2.4	146	3.0	248	7.6	637	9.8
Influenza ..	157	—	—	—	—	—	—	8	0.4	17	0.3	13	0.4	27	0.4
Pneumonia ..	474	2	0.3	5	1.3	—	—	13	0.7	19	0.4	58	1.8	129	2.0
Bronchitis ..	1,194	58	9.7	34	8.7	—	—	35	1.9	55	1.1	144	4.4	364	5.6
Other diseases of respiratory system ..	1,281	63	10.5	69	17.7	—	—	215	11.7	286	5.8	93	2.9	163	3.1
Diseases of digestive system ..	4,435	75	12.5	41	10.5	—	—	420	22.8	550	11.2	594	18.3	705	10.9
Diseases of genito-urinary system ..	1,764	135	22.5	11	2.8	—	—	22	1.2	371	7.6	125	3.9	255	3.9
Diseases of the skin ..	2,806	63	10.5	46	11.8	—	—	216	11.7	345	7.0	198	6.1	388	6.0
Diseases of bones and organs of movement (including rheumatism and arthritis) ..	1,165	1	0.2	—	—	—	—	22	1.2	52	1.1	64	2.0	128	2.0
Senility and ill-defined conditions ..	5,930	28	4.7	20	5.1	—	—	334	18.1	637	13.0	569	17.5	1,116	17.2
Burns and scalds ..	616	72	12.0	55	14.1	—	—	43	2.3	49	1.0	23	0.7	73	1.1
Other accidents, injuries, etc. ..	1,696	30	5.0	14	3.6	—	—	165	9.0	107	2.2	93	2.9	165	2.5
All other conditions ..	1,472	6	1.0	14	3.6	—	—	13	0.7	1,349	27.5	16	0.5	9	0.1
TOTAL—Administrative County ..	37,050	601	100	390	100	409	100	1,841	100	4,912	100	3,246	100	6,490	100
														12,709	100
														24,341	100

Note: Percentages are of the total cases of the particular sex/age group.

TABLE 14—DISTRICT NURSING
ANALYSIS OF COMPLETED CASES BY DURATION OF TREATMENTS, FREQUENCY OF VISITS AND DISPOSAL OF CASES
YEAR ENDED 31ST DECEMBER, 1969

Disease or ailment	Total No. of cases	Duration of treatment				Disposal of cases															
		Length of treatment (weeks)	Average duration of treatment (weeks)	Total visits		Average No. of visits (day and night)	No. of visits per case per week	Recovered, relieved or convalescent		Admitted to hospital		Died		Gone away		Out-patient X-ray, etc.		Nurse withdrawn		Other	
				Day	Night			No.	Per cent.	No.	Per cent.	No.	Per cent.	No.	Per cent.	No.	Per cent.	No.	Per cent.	No.	Per cent.
Tuberculosis of respiratory system	181	2,994.6	16.5	14,006	2	77.4	4.7	118	65.2	16	8.8	4	2.2	13	7.2	2	1.1	27	14.9	1	0.6
Other infective and parasitic diseases	786	5,175.6	6.6	17,434	202	22.4	3.4	651	82.8	57	7.3	20	2.5	15	1.9	1	0.1	40	5.1	2	0.3
Cancer	2,573	24,498.3	9.5	89,540	3,501	36.2	3.8	326	12.7	660	25.7	1,481	57.6	43	1.7	9	0.3	49	1.9	5	0.2
Diabetes	574	20,041.6	34.9	98,281	27	171.3	4.9	170	29.6	161	28.0	62	10.8	96	16.7	3	0.5	80	13.9	2	0.3
Anaemias and other blood diseases	3,629	171,054	47.1	172,218	162	47.5	1.0	1,835	50.6	607	16.7	382	10.5	330	9.1	16	0.4	447	12.3	12	0.3
Mental, psychoneurotic disorders	245	3,868	15.8	6,403	24	26.2	1.7	106	43.3	83	33.9	20	8.2	11	4.5	3	1.2	19	7.8	3	1.2
Cerebral haemorrhage, cerebral embolism and thrombosis	1,330	19,938.4	15.0	53,244	216	40.2	2.7	275	20.7	487	36.6	508	38.2	46	3.5	2	0.2	10	0.8	2	0.2
Other diseases of central nervous system	1,713	45,810.6	26.7	113,773	163	66.5	2.5	500	29.2	628	36.7	393	22.9	116	6.8	15	0.9	56	3.3	5	0.3
Diseases of eye, ear and mastoid process	491	2,349.4	4.8	9,122	50	18.7	3.9	432	88.0	26	5.3	3	0.6	4	0.8	4	0.8	22	4.5	—	—
Diseases of heart and circulatory system	2,538	37,936.7	14.9	86,684	178	34.2	2.3	1,255	49.4	619	24.4	476	18.8	83	3.3	24	0.9	74	2.9	7	0.3
Influenza	157	710.9	4.5	1,717	3	11.0	2.4	138	87.9	10	6.4	6	3.8	3	1.9	—	—	—	—	—	—
Pneumonia	474	1,692.1	3.6	7,035	35	14.9	4.1	273	57.6	98	20.7	96	20.3	1	0.2	—	—	5	1.1	1	0.2
Bronchitis	1,194	8,722.7	7.3	24,125	32	20.2	2.8	786	65.8	222	18.6	144	12.1	18	1.5	1	0.1	20	1.7	3	0.3
Other diseases of respiratory system	1,281	4,973.3	3.9	16,385	33	12.8	3.3	1,082	84.5	103	8.0	47	3.7	22	1.7	4	0.3	22	1.7	1	0.1
Diseases of digestive system	4,435	18,297.3	4.1	55,710	167	12.6	3.1	3,624	81.7	450	10.1	127	2.9	63	1.4	112	2.5	53	1.2	6	0.1
Diseases of genito-urinary system	1,764	34,795.4	19.7	37,927	158	21.6	1.1	1,391	78.9	171	9.7	79	4.5	56	3.2	17	1.0	47	2.7	3	0.2
Diseases of the skin	2,806	31,919.6	11.4	85,912	77	30.6	2.7	2,129	75.9	398	14.2	110	3.9	67	2.4	37	1.3	62	2.2	3	0.1
Diseases of bones and organs of movement (including rheumatism and arthritis)	1,165	36,945.4	31.7	69,584	31	59.8	1.9	464	39.8	353	30.3	141	12.1	111	9.5	4	0.3	84	7.2	8	0.7
Senility and ill-defined conditions	5,930	75,119.1	12.7	157,785	450	26.7	2.1	2,581	43.5	1,246	21.0	804	13.6	206	3.5	925	15.6	146	2.5	22	0.4
Burns and scalds	616	3,219.7	5.2	10,846	—	17.6	3.4	524	85.1	53	8.6	12	1.9	9	1.5	5	0.8	13	2.1	—	—
Other accidents, injuries, etc.	1,696	12,451.6	7.3	34,211	1	20.2	2.8	1,336	78.8	202	11.9	59	3.5	41	2.4	23	1.4	33	1.9	2	0.1
All other conditions	1,472	5,663.6	3.8	17,302	49	11.8	3.1	1,192	81.0	188	12.8	25	1.7	22	1.5	5	0.3	37	2.5	3	0.2
TOTAL—Administrative County ...	37,050	568,177.9	15.3	1,179,244	5,561	32.0	2.1	21,188	57.2	6,838	18.5	4,999	13.5	1,376	3.7	1,212	3.3	1,346	3.6	91	0.2

Note : Percentages are of the total cases of the particular disease or ailment.

TABLE 15—DISTRICT NURSING
ANALYSIS OF COMPLETED CASES IN EACH HEALTH DIVISION BY SEX, DURATION OF TREATMENT, FREQUENCY OF VISITS AND
DISPOSAL OF CASES—YEAR ENDED 31ST DECEMBER, 1969

Health Division No.	TOTAL CASES				DURATION OF TREATMENT					DISPOSAL OF CASES																	
	Both sexes	Male		Female		Length of treatment (weeks)	Average duration of treatment (weeks)	Total visits		Average No. of visits (day and night)	Average No. of visits per case per week	Recovered, relieved or convalescent		Admitted to hospital		Died		Gone away		Out-patient X-ray, etc.		Nurse withdrawn		Other			
		No.	Per cent.	No.	Per cent.			Day	Night			No.	Per cent.	No.	Per cent.	No.	Per cent.	No.	Per cent.	No.	Per cent.	No.	Per cent.	No.	Per cent.	No.	Per cent.
1	729	211	28.9	518	71.1	11,412.7	15.7	27,903	78	38.4	2.4	375	51.4	142	19.5	108	14.8	72	9.9	4	0.5	27	3.7	1	0.1		
2	2,146	708	33.0	1,438	67.0	33,611	15.7	69,365	112	32.4	2.1	1,133	52.8	391	18.2	311	14.5	154	7.2	55	2.6	93	4.3	9	0.4		
3	2,924	977	33.4	1,947	66.6	37,597	12.9	72,083	417	24.8	1.9	1,518	51.9	500	17.1	348	11.9	187	6.4	195	6.7	166	5.7	10	0.3		
4	3,789	1,210	31.9	2,579	68.1	55,473.7	14.6	118,779	672	31.5	2.2	2,100	55.4	543	14.3	564	14.9	179	4.7	324	8.6	75	2.0	4	0.1		
5	2,664	888	32.2	1,806	67.8	40,139.3	15.1	80,034	59	30.1	2.0	1,637	61.4	537	20.2	299	11.2	78	2.9	30	1.1	79	3.0	4	0.2		
6	1,637	512	31.3	1,125	68.7	36,661	22.4	60,347	62	36.9	1.6	763	46.6	330	20.2	268	16.4	47	2.9	72	4.4	149	9.1	8	0.5		
7	1,962	671	34.2	1,291	65.8	23,574.9	12.0	46,158	154	23.6	2.0	1,269	64.7	365	18.6	212	10.8	58	3.0	14	0.7	37	1.9	7	0.4		
8	1,862	641	34.4	1,221	65.6	26,989.6	14.5	61,201	188	33.0	2.3	1,177	63.2	284	15.3	286	15.4	43	2.3	16	0.9	53	2.8	3	0.2		
9	2,922	1,132	38.7	1,790	61.3	30,443.6	10.4	70,564	536	24.3	2.3	2,080	71.2	444	15.2	243	8.3	53	1.8	13	0.4	85	2.9	4	0.1		
10	1,094	404	36.9	690	63.1	18,484.6	16.9	36,271	550	33.7	2.0	651	59.5	226	20.7	150	13.7	32	2.9	7	0.6	28	2.6	—	—		
11	2,337	830	35.5	1,507	64.5	42,708.7	18.3	93,012	32	39.8	2.2	1,253	53.6	501	21.4	436	18.7	64	2.7	30	1.3	49	2.1	4	0.2		
12	2,315	782	33.8	1,533	66.2	36,455.7	15.7	76,613	352	33.2	2.1	1,267	54.7	434	18.7	335	14.5	76	3.3	130	5.6	71	3.1	2	0.1		
13	1,521	560	36.8	961	63.2	20,796.7	13.7	42,375	15	27.9	2.0	955	62.8	277	18.2	153	10.1	47	3.1	48	3.2	37	2.4	4	0.3		
14	1,580	557	35.3	1,023	64.7	38,070	24.1	73,834	733	47.2	2.0	947	59.9	280	17.7	237	15	39	2.5	23	1.5	54	3.4	—	—		
15	1,428	496	34.7	932	65.3	24,427	17.1	48,040	192	33.8	2.0	734	51.4	294	20.6	222	15.5	41	2.9	25	1.8	111	7.8	1	0.1		
16	1,173	392	33.4	781	66.6	17,029.7	14.5	40,836	104	34.9	2.4	708	60.4	216	18.4	136	11.6	40	3.4	18	1.5	53	4.5	2	0.2		
17	2,176	816	37.5	1,360	62.5	24,973.1	11.5	59,137	455	27.4	2.4	1,163	53.4	451	20.7	271	12.5	58	2.7	139	6.4	80	3.7	14	0.6		
Delegated District—																											
Crosby M.B.	641	204	31.8	437	68.2	19,661.1	30.7	32,295	456	51.1	1.7	288	44.9	176	27.5	110	17.2	33	5.1	3	0.5	27	4.2	4	0.6		
Huyton-w-R. U.D.	804	251	31.2	553	68.8	9,692	12.1	24,377	324	30.7	2.5	480	59.7	168	20.9	82	10.2	32	4.0	5	0.6	32	4.0	5	0.6		
Middleton M.B.	667	263	39.4	404	60.6	8,428.1	12.6	21,353	13	32.0	2.5	401	60.1	137	20.5	104	15.6	18	2.7	3	0.4	4	0.6	—	—		
Stretford M.B.	679	234	34.5	445	65.5	11,548.3	17.0	24,687	57	36.4	2.1	289	42.6	142	20.9	124	18.3	25	3.7	58	8.5	36	5.3	5	0.7		
TOTAL—Admin. County...	37,050	12,709	34.3	24,341	65.7	568,177.9	15.3	1,179,244	5,561	32.0	2.1	21,188	57.2	6,838	18.5	4,999	13.5	1,376	3.7	1,212	3.3	1,346	3.6	91	0.2		

Note : Percentages are of the total cases in the particular area.

TABLE 16—VACCINATION AGAINST SMALLPOX
SUMMARY, BY HEALTH DIVISIONS AND DELEGATE DISTRICTS, OF VACCINATIONS PERFORMED DURING 1969

Health Division No.	Vaccinations (by age, in years, at date of vaccination)					Re-vaccinations (by age, in years, at date of re- vaccination)			By G.P.'s, in private practice (included in previous cols.)	
	0—	1—	2—	5—	Total under 16	0—	5—	Total under 16	Vaccina- tions	Re-vaccina- tions
1	36	256	46	23	361	5	132	137	244	64
2	20	338	165	26	549	17	114	131	250	88
3	48	382	166	76	672	21	186	207	221	96
4	108	880	681	172	1,841	60	156	216	724	154
5	25	404	256	137	822	15	32	47	661	32
6	19	334	139	79	571	10	50	60	177	28
7	14	553	332	95	994	9	125	134	667	100
8	11	675	246	49	981	6	43	49	166	17
9	40	796	209	71	1,116	23	58	81	448	77
10	29	405	270	78	782	7	68	75	567	71
11	4	693	343	78	1,118	34	259	293	206	50
12	23	435	271	58	787	26	127	153	186	98
13	13	228	95	61	397	8	42	50	90	23
14	52	194	316	94	656	6	49	55	203	24
15	18	160	248	52	478	5	26	31	295	24
16	19	304	151	30	504	11	50	61	212	28
17	23	135	284	71	513	11	39	50	170	27
Delegate District—										
Crosby M.B. ..	14	194	87	19	314	8	24	32	140	22
Huyton-with-Roby U.D.	11	207	114	39	371	—	18	18	100	18
Middleton M.B. ..	27	91	76	49	243	5	15	20	140	20
Stretford M.B. ..	18	113	93	12	236	1	11	12	145	4
TOTAL— Administrative County ..	572	7,777	4,538	1,369	14,306	288	1,624	1,912	6,012	1,065

TABLE 17.—VACCINATION AGAINST POLIOMYELITIS
SUMMARY, BY HEALTH DIVISIONS AND DELEGATE DISTRICTS, OF VACCINATIONS PERFORMED DURING 1969

Health Division No.	Primary vaccinations completed										Reinforcement doses				By G.P.s. in private practice (included in previous cols.)	
	(a)		(b)		(c)		(d)		(e)		(f)		(g)		(h)	
	Under 1	1-1969	1-1968	2-1967	3-1966	Total—under 4	4-1962-65	8-1954-61	Total—under 16	Under 4	4-1962-65	8-1954-61	Total—under 16	Primary	Reinforcement	
1	44	277	17	10	348	23	—	371	77	554	264	895	246	269		
2	46	648	87	19	800	62	14	876	107	1,293	122	1,522	257	282		
3	30	708	77	18	833	131	29	993	87	1,519	159	1,765	249	210		
4	178	1,686	311	68	2,243	306	59	2,608	262	2,831	553	3,646	877	629		
5	42	1,194	155	54	1,445	98	21	1,564	59	1,609	1,122	2,790	436	233		
6	53	719	73	20	865	21	4	890	116	847	56	1,019	116	284		
7	64	1,064	136	66	1,330	102	41	1,473	343	1,999	386	2,728	861	721		
8	22	1,170	80	43	1,315	171	27	1,513	220	2,194	119	2,533	206	308		
9	68	1,102	164	120	1,454	707	415	2,576	136	2,369	1,510	4,015	595	251		
10	38	683	120	22	863	84	30	977	486	1,610	401	2,497	444	625		
11	53	1,391	218	92	1,754	375	102	2,231	645	2,571	302	3,518	455	382		
12	34	1,022	164	42	1,262	87	9	1,358	33	1,517	141	1,691	261	158		
13	21	622	82	37	762	50	10	822	20	768	51	839	124	72		
14	15	815	107	28	965	94	6	1,065	99	1,308	444	1,851	227	211		
15	90	850	91	30	1,061	153	47	1,261	180	1,495	315	1,990	345	432		
16	19	565	48	24	656	38	11	705	102	1,378	211	1,691	127	196		
17	20	764	149	51	984	122	38	1,144	76	1,390	315	1,781	158	180		
Delegate District—																
Crosby M.B.	21	273	59	29	382	101	39	522	182	513	116	811	267	323		
Huyton-w-Roby U.D.	8	323	68	26	425	103	17	545	19	1,092	71	1,182	28	6		
Middleton M.B.	9	232	47	24	312	38	11	361	49	427	63	539	150	88		
Stretford M.B.	15	285	50	12	362	99	24	485	34	711	113	858	188	95		
TOTAL—Administrative County	890	16,393	2,303	835	20,421	2,965	954	24,340	3,332	29,995	6,834	40,161	6,617	5,955		

(a) Age in years, at end of 1969. (b) Year of birth.

TABLE 18—IMMUNISATION AGAINST DIPHTHERIA
SUMMARY, BY HEALTH DIVISIONS AND DELEGATE DISTRICTS, OF IMMUNISATIONS PERFORMED DURING 1969

Health Division No.	No. who completed a full course of primary immunisation						No. who were given a reinforcement injection				By G.P.'s in private practice (included in previous cols.)	
	Under 1	1—	2—	3—	Total— under 4	Total— under 16	4—	8—	Under 4	4—	8—	Total— under 16
	(a) 1969	1968	1967	1966	1966— 69		1962— 65	1954— 61	1966— 69	1962— 65	1954— 61	1954— 69
1 ..	54	263	11	9	337	352	15	—	290	558	275	1,123
2 ..	58	612	41	18	729	780	39	12	866	1,476	91	2,433
3 ..	48	578	52	5	683	789	91	15	897	1,510	170	2,577
4 ..	201	1,235	223	40	1,699	2,122	306	117	1,429	2,829	1,000	5,258
5 ..	48	865	91	30	1,034	1,154	103	17	263	1,518	115	1,896
6 ..	59	615	36	6	716	738	19	3	456	687	52	1,195
7 ..	92	1,042	115	48	1,297	1,458	124	37	742	2,490	137	3,369
8 ..	23	818	47	34	922	1,136	163	51	1,292	2,124	105	3,521
9 ..	69	948	118	81	1,216	2,050	582	252	397	2,712	1,057	4,166
10 ..	64	672	94	13	843	1,005	74	88	746	1,654	177	2,577
11 ..	76	984	125	66	1,251	1,525	218	56	1,427	2,345	138	3,910
12 ..	50	804	96	15	965	1,071	90	16	1,108	1,521	445	3,074
13 ..	23	522	66	24	635	710	54	21	490	825	270	1,585
14 ..	26	551	64	19	660	742	75	7	562	1,310	324	2,196
15 ..	109	695	43	14	861	938	61	16	1,166	1,566	165	2,897
16 ..	30	355	34	12	431	481	42	8	691	1,354	604	2,649
17 ..	45	699	101	36	881	1,063	123	59	880	1,469	285	2,634
Delegate District—												
Crosby M.B. ..	24	286	44	18	372	423	43	8	168	496	67	731
Huyton-with-Roby U.D. ..	35	529	103	32	699	849	127	23	48	1,213	121	1,382
Middleton M.B. ..	9	188	55	24	276	341	56	9	176	549	57	782
Stretford M.B. ..	19	331	59	6	415	484	54	15	228	790	25	1,043
TOTAL— Administrative County ..	1,162	13,592	1,618	550	16,922	20,211	2,459	820	14,322	30,996	5,680	50,998
												7,364
												7,274

(a) Age, in years, at end of 1969. (b) Year of birth.

TABLE 19—IMMUNISATION AGAINST WHOOPING COUGH
SUMMARY, BY HEALTH DIVISIONS AND DELEGATE DISTRICTS, OF IMMUNISATIONS PERFORMED DURING 1969

Health Division No.	No. who completed a full course of primary immunisation										No. who were given a reinforcement injection				By G.P.'s, in private practice (included in previous cols.)	
	(a)		Under 1	1—	2—	3—	Total—under 4	4—	8—	Total—under 16	Under 4	4—	8—	Total—under 16	Reinforcement	
	(b)	1969	1968	1967	1966	1966	1966	1962—65	1954—61	1954—69	1966—69	1962—65	1954—61	1954—69		
1 ..		52	263	10	8	333	7	—	—	340	266	66	6	338	254	188
2 ..		55	577	35	13	680	20	1	1	701	555	104	14	673	326	276
3 ..		46	548	48	5	647	14	1	1	662	791	141	7	939	236	220
4 ..		188	1,184	181	28	1,581	105	18	18	1,704	460	238	16	714	955	429
5 ..		45	825	76	23	969	33	—	—	1,002	181	96	6	283	502	168
6 ..		59	614	31	4	708	5	—	—	713	101	57	9	167	110	123
7 ..		92	1,030	109	45	1,276	60	27	27	1,363	650	453	56	1,159	817	455
8 ..		23	814	42	21	900	27	2	2	929	1,058	168	27	1,253	224	288
9 ..		60	904	109	62	1,126	118	4	4	1,248	340	205	10	555	372	128
10 ..		64	664	89	12	829	33	4	4	866	707	339	19	1,065	442	584
11 ..		75	922	98	32	1,127	44	3	3	1,174	1,293	124	6	1,423	463	345
12 ..		50	794	82	12	938	42	2	2	982	960	99	7	1,066	271	57
13 ..		22	466	59	20	567	15	3	3	585	447	28	5	480	144	59
14 ..		23	527	56	18	624	22	1	1	647	516	41	14	571	228	104
15 ..		106	662	39	11	818	13	—	—	831	1,017	109	11	1,137	335	206
16 ..		30	309	27	10	376	8	2	2	386	459	109	1	569	180	223
17 ..		40	674	87	26	827	16	5	5	848	592	137	11	740	196	120
Delegate District—																
Crosby M.B.	..	24	283	44	17	368	22	4	4	394	141	115	22	278	213	149
Huyton-with-Roby U.D.	..	35	529	102	28	694	33	—	—	727	38	39	4	81	237	55
Middleton M.B.	..	9	173	48	20	290	36	4	4	290	132	110	12	254	116	62
Siretford M.B.	..	19	326	55	6	406	24	1	1	431	127	57	—	184	216	102
TOTAL—Administrative County	..	1,117	11,088	1,418	421	16,044	697	82	82	16,823	10,831	2,835	263	13,929	6,837	4,341

(a) Age, in years, at end of 1969. (b) Year of birth.

TABLE 20—IMMUNISATION AGAINST MEASLES
SUMMARY, BY HEALTH DIVISIONS AND DELEGATE DISTRICTS, OF IMMUNISATIONS PERFORMED DURING 1969

Health Division No.	No. who completed a full course of primary immunisation										By G.P.'s, in private practice (included in previous cols.) Primary
	(a)	Under 1 1969	1— 1968	2— 1967	3— 1966	Total— under 4 1966— —69	4— 1962— —65	8— 1954— —61	Total— under 16 1954— —69		
1	..	—	120	92	46	258	58	49	365	230	
2	..	2	133	185	108	428	203	26	657	251	
3	..	—	110	216	128	454	219	24	697	68	
4	..	3	121	432	270	826	440	15	1,281	445	
5	..	3	86	244	205	538	289	13	840	467	
6	..	1	205	215	119	540	122	2	664	144	
7	..	1	151	366	255	773	353	22	1,148	554	
8	..	—	128	362	149	639	269	16	924	193	
9	..	—	109	231	144	484	197	15	696	196	
10	..	—	97	188	126	411	208	7	626	286	
11	..	—	191	433	239	863	462	23	1,348	273	
12	..	—	76	268	173	517	402	24	943	142	
13	..	—	92	136	69	297	91	6	394	83	
14	..	—	65	157	102	324	141	2	467	164	
15	..	1	145	306	157	609	209	12	830	262	
16	..	—	103	151	86	340	116	5	461	122	
17	..	2	119	201	112	434	138	4	576	91	
Delegate District—											
Crosby M.B.	—	50	96	63	209	111	10	330	155	
Huyton-with-Roby U.D.	—	44	117	76	237	66	1	304	109	
Middleton M.B.	1	28	64	38	131	78	3	212	79	
Stretford M.B.	1	72	68	46	187	49	2	238	50	
TOTAL— Administrative County	15	2,245	4,528	2,711	9,499	4,221	281	14,001	4,364	

(a) Age, in years, at end of 1969.

(b) Year of birth.

TABLE 21—B.C.G. VACCINATION
SUMMARY, BY HEALTH DIVISIONS AND DELEGATE DISTRICTS, OF B.C.G. VACCINATION PROGRAMMES IN SCHOOLS DURING 1969

Health Division Number	Number of schools completed	Number of parents' consent forms—			Tuberculin test performed	Number of children			Vaccinated
		Sent to parents	Returned with consent			Tuberculin test positive		Tuberculin test negative	
			Number	Percentage of forms sent		Number	Percentage of tests read		
1 ...	3	254	227	89.4	221	7	3.3	208	208
2 ...	8	820	696	84.9	621	41	6.9	553	551
3 ...	11	958	806	84.1	758	84	11.3	660	651
4 ...	25	2,515	2,130	84.7	1,957	139	7.3	1,760	1,740
5 ...	16	2,865	2,007	70.1	1,843	119	6.7	1,644	1,639
6 ...	7	587	489	83.3	462	18	4.0	428	427
7 ...	15	1,531	1,372	89.6	1,298	65	5.1	1,203	1,201
8 ...	13	1,324	1,145	86.5	1,028	61	6.2	926	924
9 ...	25	6,527	5,275	80.8	4,949	406	8.5	4,364	4,352
10 ...	7	1,024	863	84.3	818	118	14.5	698	667
11 ...	19	1,704	1,385	81.3	1,308	119	9.7	1,109	1,095
12 ...	5	698	596	85.4	541	61	11.5	469	470
13 ...	9	1,098	807	73.5	749	119	16.3	613	575
14 ...	5	419	365	87.1	361	26	7.6	318	318
15 ...	9	1,055	722	68.4	886	72	8.5	777	777
16 ...	5	597	506	84.8	481	22	4.7	444	440
17 ...	7	1,152	858	74.5	810	71	9.1	706	705
Delegate District— Crosby M.B. ...	14	1,220	1,084	88.9	875	110	12.7	759	710
Huyton-with-Roby U.D. ...	7	1,059	857	80.9	882	51	6.8	695	688
Middleton M.B. ...	2	240	130	54.2	114	3	3.0	96	96
Stretford M.B. ...	9	986	906	91.9	821	115	14.8	661	655
TOTAL— Administrative County ...	221	28,633	23,226	81.1	21,783	1,827	8.7	19,091	18,889

TABLE 22—CHIROPODY SERVICE—(a) PROVIDED DIRECTLY BY THE COUNTY COUNCIL

Health Division Number	Number of clinics operating at end of year	Total number of clinic sessions held	ANALYSIS OF TREATMENTS GIVEN						ANALYSIS OF PATIENTS TREATED									
			By place of treatment			By class of patient			By place of treatment			By class of patient						
			Clinic	Surgery	Patient's home	Home for elderly	Elderly persons	Handicapped persons	Expectant mothers	Total	Clinic	Surgery	Patient's home	Home for elderly	Elderly persons	Handicapped persons	Expectant mothers	Total
1 ..	2	292	1,653	664	1,634	409	4,227	133	—	4,360	334	125	342	82	855	28	—	883
2 ..	6	1,586	9,876	—	4,252	1,639	15,651	112	4	15,767	2,355	—	1,078	370	3,760	39	4	3,803
3 ..	22	2,758	17,759	—	4,422	1,123	23,019	284	1	23,304	2,547	—	744	204	3,418	76	1	3,495
4 ..	9	865	5,222	2,562	6,267	767	14,455	358	5	14,818	1,126	487	1,278	211	3,071	29	2	3,102
5 ..	11	1,911	13,527	340	8,723	1,408	23,792	199	7	23,998	2,639	67	1,490	331	4,477	47	3	4,527
6 ..	8	1,331	9,624	—	4,383	1,013	14,911	109	—	15,020	1,884	—	909	261	3,025	29	—	3,054
7 ..	9	592	5,697	—	1,944	482	7,939	182	2	8,123	1,542	—	576	183	2,251	48	2	2,301
8 ..	8	1,148	7,889	—	5,973	391	14,063	180	10	14,253	1,731	—	1,431	102	3,183	73	8	3,264
9 ..	9	1,212	6,824	—	4,506	549	11,667	207	5	11,879	1,444	—	1,009	168	2,563	55	3	2,621
10 ..	13	614	4,885	662	3,746	587	9,761	110	9	9,880	801	98	975	184	2,024	30	4	2,058
11 ..	28	1,603	9,987	—	2,704	1,038	13,412	316	1	13,729	2,387	—	658	318	3,280	82	1	3,363
12 ..	6	828	5,839	—	3,168	850	9,857	—	—	9,857	897	—	689	251	1,837	—	—	1,837
13 ..	16	1,060	7,091	—	4,009	305	11,100	298	7	11,405	1,454	—	765	97	2,241	70	5	2,316
14 ..	5	679	4,499	—	3,359	809	8,505	160	2	8,667	1,017	—	709	185	1,859	50	2	1,911
15 ..	4	947	6,251	53	6,395	702	13,283	112	6	13,401	1,165	14	1,322	107	2,554	49	5	2,608
16 ..	5	329	1,953	—	1,145	360	3,439	8	11	3,458	461	—	275	89	814	3	8	825
17 ..	9	894	6,598	—	2,802	793	9,844	349	—	10,193	1,426	—	869	200	2,410	85	—	2,495
Delegate District—																		
Crosby M.B.	3	367	2,781	—	160	—	2,930	10	1	2,941	781	—	75	—	851	4	1	856
Huyton-with-Roby U.D.	2	462	2,922	—	1,495	—	4,323	93	1	4,417	592	—	271	—	845	17	1	863
Middleton M.B.	1	137	1,076	240	1,155	—	2,423	48	—	2,471	318	41	304	—	651	12	—	663
Stretford M.B.	4	561	3,411	—	862	289	4,540	19	3	4,562	713	—	300	78	1,084	4	3	1,091
TOTAL— Admin. County	180	20,176	135,364	4,521	73,104	13,514	223,141	3,287	75	226,503	27,614	832	16,069	3,421	47,053	830	53	47,936

TABLE 23—CHIROPODY SERVICE—(b) PROVIDED BY VOLUNTARY ASSOCIATIONS

Health Division Number	Number of clinics operating at end of year	Total number of clinic sessions held	ANALYSIS OF TREATMENTS GIVEN						ANALYSIS OF PATIENTS TREATED						Total			
			By place of treatment				By class of patient		By place of treatment				By class of patient					
			Clinic	Surgery	Patient's home	Home for elderly	Elderly persons	Handicapped persons	Expectant mothers	Total	Clinic	Surgery	Patient's home	Home for elderly		Elderly persons	Handicapped persons	Expectant mothers
1 ..	5	200	1,917	781	867	20	3,545	40	—	3,585	363	149	187	5	695	9	—	704
2 ..	7	149	1,184	—	—	—	1,182	2	—	1,184	387	—	—	—	386	1	—	387
3 ..	1	133	781	—	101	—	880	2	—	882	95	—	16	—	110	1	—	111
4 ..	3	182	1,384	6,772	2,769	—	10,924	1	—	10,925	218	1,297	550	—	2,064	1	—	2,065
5 ..	—	—	—	—	836	—	811	25	—	836	—	—	277	—	270	7	—	277
6 ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
7 ..	—	—	—	—	755	—	741	14	—	755	—	—	186	—	181	5	—	186
8 ..	1	53	391	152	407	—	946	4	—	950	41	12	39	—	88	4	—	92
9 ..	4	206	1,293	—	779	—	2,064	8	—	2,072	266	—	161	—	425	2	—	427
10 ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
11 ..	3	274	2,131	4,621	960	—	7,674	38	—	7,712	481	887	355	—	1,707	16	—	1,723
12 ..	12	599	4,798	4,746	1,728	—	11,272	—	—	11,272	1,236	870	425	—	2,531	—	—	2,531
13 ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
14 ..	—	—	—	1,877	523	—	2,326	74	—	2,400	—	366	108	—	462	12	—	474
15 ..	9	389	2,702	—	—	—	2,702	—	—	2,702	609	—	—	—	609	—	—	609
16 ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
17 ..	1	200	1,348	1	1,004	—	2,311	41	1	2,353	326	1	279	—	592	13	1	606
Delegate District—																		
Crosby M.B. ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Huyton-with-Roby U.D. ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Middleton M.B. ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Stretford M.B. ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
TOTAL— Admin. County ..	46	2,475	17,929	18,950	10,729	20	47,378	249	1	47,628	4,022	3,582	2,583	5	10,120	71	1	10,192

TABLE 24—HOME HELP SERVICE
SUMMARY, BY HEALTH DIVISIONS AND DELEGATE DISTRICTS, OF CASES ATTENDED DURING 1969

Note: The percentages given are of the total numbers of cases in the respective areas

Health Division Number	Home helps employed at 31st December, 1969		Total number of cases attended	CATEGORY OF CASE										Total cases attended per 1,000 population (mid-1969)													
	Actual number	Whole-time equivalent		Problem families		Confinement				Tuberculosis			Mentally disordered (under 65 years)		Chronic sick (under 65 years)		Chronic sick and elderly and infirm (65 years and over)		Illness and others								
				Number of cases	Per cent.	At home		Away from home		Number of cases			Per cent.		Number of cases	Per cent.	Number of cases	Per cent.	Number of cases	Per cent.	Number of cases						
						Number of cases	Per cent.	Number of cases	Per cent.	Under 65 years	65 years and over	Total									Under 65 years	65 years and over	Total				
1 ..	90	44	525	2	0.4	4	0.8	1	0.2	—	—	—	—	5	1.0	33	6.3	464	88.4	16	—	16	3.0	12.8			
2 ..	328	151	1,746	1	0.1	12	0.7	11	0.6	1	2	3	0.2	13	0.7	17	1.0	1,566	89.7	123	—	123	7.0	14.4			
3 ..	153	83	1,808	—	—	21	1.2	14	0.8	1	1	2	0.1	8	0.4	62	3.4	1,486	82.2	215	—	215	11.9	12.8			
4 ..	351	203	1,997	2	0.1	40	2.0	6	0.3	1	—	1	0.1	9	0.5	68	3.4	1,785	89.4	83	3	86	4.3	9.2			
5 ..	348	186	2,225	—	—	4	0.2	2	0.1	2	1	3	0.1	3	0.1	149	6.7	1,981	89.0	61	22	83	3.7	15.1			
6 ..	203	104	1,680	—	—	17	1.0	—	—	1	1	2	0.1	9	0.5	97	5.8	1,530	91.1	22	3	25	1.5	18.6			
7 ..	119	69	1,103	1	0.1	28	2.5	42	3.8	1	1	2	0.2	12	1.1	93	8.4	780	70.7	121	24	145	13.1	6.8			
8 ..	289	169	1,880	2	0.1	16	0.9	19	1.0	5	3	8	0.4	10	0.5	248	13.2	1,554	82.7	23	—	23	1.2	14.9			
9 ..	231	134	1,401	—	—	7	0.5	15	1.1	11	4	15	1.1	—	—	26	1.9	1,189	84.9	149	—	149	10.6	6.3			
10 ..	239	131	1,300	7	0.5	4	0.3	9	0.7	2	2	4	0.3	9	0.7	83	6.4	1,119	86.1	65	—	65	5.0	11.8			
11 ..	431	212	2,439	—	—	17	0.7	4	0.2	—	1	1	0.0	8	0.3	282	11.6	2,110	86.5	17	—	17	0.7	12.7			
12 ..	175	95	1,698	—	—	29	1.7	17	1.0	2	1	3	0.2	—	—	163	9.6	1,414	83.3	72	—	72	4.2	12.1			
13 ..	153	72	1,069	—	—	1	0.1	4	0.4	2	2	4	0.4	4	0.4	107	10.0	936	87.6	12	1	13	1.2	13.3			
14 ..	242	124	1,513	—	—	9	0.6	4	0.3	—	—	—	—	2	0.1	55	3.6	1,346	89.0	96	1	97	6.4	16.2			
15 ..	220	111	1,298	—	—	7	0.5	8	0.6	1	1	2	0.2	1	0.1	33	2.5	1,195	92.1	52	—	52	4.0	10.0			
16 ..	126	56	522	2	0.4	1	0.2	4	0.8	—	—	—	—	3	0.6	36	6.9	453	86.8	15	8	23	4.4	8.2			
17 ..	353	185	2,353	3	0.1	7	0.3	6	0.3	5	3	8	0.3	9	0.4	297	12.6	1,963	83.4	54	6	60	2.5	17.7			
Delegate District—																											
Crosby M.B. ..				57	33	613	—	—	1	0.2	8	1.3	2	4	0.7	2	0.3	43	7.0	503	82.1	35	17	52	8.5	10.5	
Huyton-with-Roby U.D. ..				119	74	709	1	0.1	3	0.4	2	0.3	1	4	0.7	—	—	15	2.1	580	81.8	93	10	103	14.5	10.3	
Middleton M.B. ..				124	64	723	—	—	—	—	7	1.0	—	—	—	—	—	55	7.6	611	84.5	49	1	50	6.9	12.6	
Stretford M.B. ..				169	79	692	—	—	1	0.1	5	0.7	—	—	—	7	1.0	14	2.0	599	86.6	59	7	66	9.5	11.8	
TOTAL—Admin. County ..				4,520	2,379	29,294	21	0.1	229	0.8	188	0.6	38	29	67	0.2	114	0.4	1,976	6.7	25,164	85.9	1,432	103	1,535	5.2	11.9

TABLE 25—HOME HELP SERVICE
ADMINISTRATIVE COUNTY—ANALYSIS OF CASES ATTENDED IN WEEK ENDED 22ND NOVEMBER, 1969

Category	Number of cases attended		Number of hours of service	Number of case days	Number of cases in which home help was provided—											
					On days during week								For total hours during week			
	Male	Female			1	2	3	4	5	6	7	Under 6	6—	10—	14—	18—
SPECIAL CASES— Problem families ...	—	5	64	21	1	—	—	1	2	1	—	1	1	—	2	1
	—	7	67	22	2	1	1	—	3	—	—	1	3	1	2	—
	—	17	158	45	4	7	2	—	3	1	—	5	7	2	—	3
TUBERCULOSIS— Aged 65 years and over ...	6	11	91	32	5	9	3	—	—	—	—	8	9	—	—	—
	3	16	85	35	9	7	1	1	1	—	—	13	6	—	—	—
MENTALLY DISORDERED— Aged under 65 years ...	11	37	239	95	25	11	7	—	4	—	1	31	13	2	2	—
CHRONIC SICK— Aged under 65 years ...	119	864	5,203	2,000	443	329	87	13	87	17	7	613	290	49	19	12
CHRONIC SICK, ELDERLY AND INFIRM— Aged 65 years and over ...	2,719	15,343	86,585	34,421	8,578	6,330	1,376	227	1,264	182	105	11,957	5,133	715	165	92
ILLNESS AND OTHERS— Aged 65 years and over ...	4	24	110	50	11	12	5	—	—	—	—	23	5	—	—	—
	43	470	2,539	943	242	200	29	6	28	6	2	323	154	23	9	4
ALL CATEGORIES— Week ended 22nd November, 1969	2,905	16,794	95,141	37,664	9,320	6,906	1,511	248	1,392	207	115	12,975	5,621	792	199	112
Week ended 30th November, 1968	2,716	15,997	94,188	37,234	8,406	6,675	1,487	263	1,484	241	157	11,721	5,764	858	224	146

TABLE 26—MENTAL HEALTH SERVICE
ATTENDANCES AT COUNTY COUNCIL TRAINING CENTRES DURING 1969

Health Division Number	Location of centre	Attendances during 1969			Position at 31st December, 1969		Remarks
		Total day places nominally available	Total attendances	Proportion (per cent.) of attendances to nominal places available	Number of places nominally available	Number on register	
	<i>Junior and Mixed Centres—</i>						
1	Ulverston	5,820	4,428	76.1	30	26	
2	Lancaster	11,700	12,340	105.5	60	67	
3	Kirkham	10,620	8,424	79.3	60	50	
4	Chorley	10,282	6,562	63.8	53	48	
	Bamber Bridge	11,640	6,975	59.9	60	45	
5	Oswaldtwistle	10,980	10,744	97.9	60	71	
6	Nelson	9,850	6,702	68.0	50	39	
7	Burscough	12,480	9,042	72.5	60	47	
	Crosby	15,675	13,712	87.5	75	77	
8	Hindley	11,340	7,513	66.3	60	63	
9	Huyton	19,760	14,024	71.0	104	88	
	Kirkby	11,400	8,599	75.4	60	57	
	Widnes	9,550	9,878	103.4	50	62	
10	Newton-le-Willows	9,400	12,856	136.8	50	81	
11	Atherton	12,276	8,526	69.5	62	45	
	Farnworth	7,164	6,486	90.5	36	35	
12	Prestwich	9,900	4,795	48.4	50	26	
	Rawtenstall	9,700	6,669	68.8	50	42	
13	Heywood	10,980	6,599	60.1	60	43	
14	Chadderton	16,351	10,077	61.6	83	66	
15	Swinton	13,662	11,770	86.2	69	70	Opened 6th January, 1969
16	Stretford	10,980	9,272	84.4	60	45	
17	Ashton-under-Lyne	12,540	9,316	74.3	60	48	
	TOTAL	264,050	205,309	77.8	1,362	1,241	
	<i>Adult Centres—</i>						
1	Ulverston	12,780	6,035	47.2	60	37	Hostel not yet open
2	Lancaster	10,125	11,066	109.3	45	62	
3	Fleetwood	13,110	14,766	112.6	57	69	
	Lytham	9,900	6,550	66.2	60	48	Opened 10th April, 1969
4	Chorley	13,740	13,568	98.7	45	64	
	Leyland	9,840	4,674	47.5	60	33	Opened 10th April, 1969 Hostel not yet open
	Bamber Bridge	13,740	12,430	90.5	45	55	
5	Accrington	13,110	9,440	72.0	57	50	
	Darwen	13,080	7,656	58.5	60	50	Opened 20th January, 1969
6	Padiham	13,980	8,047	57.6	60	41	
	Colne	10,485	13,195	125.8	45	65	
7	Ormskirk	9,120	4,651	50.0	60	43	Opened 5th May, 1969 Hostel not yet open
8	Hindley	10,305	14,461	140.3	45	64	
9	Huyton	13,380	21,564	161.2	60	112	
	Kirkby	10,080	7,046	69.9	45	38	
	Widnes	10,080	13,057	129.5	45	63	
10	Haydock	10,935	13,617	124.5	45	76	
11	Atherton	10,395	15,752	151.5	45	75	
	Farnworth	10,440	8,153	78.1	45	44	
12	Haslingden	9,000	11,783	130.9	45	66	
	Whitefield	10,800	14,460	133.9	45	69	
13	Wardle	10,845	9,492	87.5	45	56	
14	Chadderton (Oak Bank)	9,990	12,776	127.9	45	69	
	Chadderton (Mills Hill)	9,990	8,413	84.2	45	44	
15	Eccles	10,395	13,191	126.9	45	65	
	Worsley	10,080	11,396	113.1	45	55	
16	Urmston	10,170	11,308	111.2	45	63	
17	Denton	10,035	10,089	100.5	45	42	
	Droyfsden	9,000	7,056	78.4	40	23	
	Ashton-under-Lyne	5,280	2,393	45.3	60	32	Opened 25th August, 1969 Hostel not yet open
	TOTAL	324,210	318,085	98.1	1,489	1,673	
TOTAL—ALL CENTRES		588,260	523,394	89.0	2,851	2,914	

TABLE 27—MENTAL HEALTH SERVICE
ANALYSIS OF PERSONS UNDER THE CARE OF THE COUNTY COUNCIL AT 31st DECEMBER, 1969

	Mentally ill				Elderly mentally infirm		Psychopath				Subnormal				Severely subnormal				Total—by age and sex				Total— all ages
	Under 16 years		16 years and over		M.	F.	Under 16 years		16 years and over		M.	F.	Under 16 years		16 years and over		M.	F.	M.	F.			
	M.	F.	M.	F.			M.	F.	M.	F.			M.	F.	M.	F.							
1. (a) Total numbers of persons under care at 31st December, 1969	12	11	1,983	3,103	97	262	—	1	9	4	378	310	993	888	512	391	602	572	902	713	3,684	4,829	10,128
(b) Attending training centres	—	—	99	61	—	—	—	—	1	2	294	220	447	410	423	327	393	398	717	547	940	871	3,075
*(c) On waiting list for training centres	—	—	—	4	—	—	—	—	—	—	30	8	15	11	20	35	2	7	50	43	21	19	133
(d) Resident in County Council hostels	—	—	52	48	—	—	—	—	—	—	31	15	139	114	24	17	74	58	55	32	265	220	572
†(e) On waiting list for residence in County Council hostels	—	—	6	1	—	—	—	—	—	—	5	2	34	28	3	2	8	6	8	4	48	35	95
(f) Resident at County Council expense in other residential homes or hostels	—	—	6	9	—	—	—	—	—	—	7	7	31	9	3	—	13	6	10	7	50	24	91
(g) Attending day hospitals	—	—	84	116	11	21	—	—	—	—	—	—	2	1	3	4	2	—	3	4	99	138	244
(h) Other persons than those in (b) to (g) who are receiving home visits	12	11	1,771	2,902	86	241	—	1	8	2	46	58	402	383	61	32	143	102	119	102	2,410	3,630	6,261
2. Persons on waiting list for hospital care—																							
(a) Urgent cases	—	—	—	1	2	5	—	—	—	—	3	—	2	3	25	9	4	7	28	9	8	16	61
(b) Non-urgent cases	—	—	—	—	5	18	—	—	1	—	3	—	3	—	14	7	11	4	17	7	20	22	66
3. Persons admitted for temporary residential care—																							
(a) To National Health Service hospitals	—	—	18	27	16	22	—	—	—	—	27	28	13	13	90	47	33	46	117	75	80	108	380
(b) To County Council residential accommodation ..	—	—	4	3	5	23	—	—	—	—	50	38	29	24	27	26	16	17	77	64	54	67	262
(c) Elsewhere	—	—	—	3	—	—	—	—	—	—	13	18	—	9	45	28	13	19	58	46	13	31	148
4. Sources of information in respect of cases referred to the County Council during 1969—																							
(a) General practitioners	10	6	693	1,039	—	—	—	—	2	1	3	2	9	12	3	5	1	5	16	13	705	1,057	1,791
(b) Hospitals, on discharge	3	7	734	1,148	—	—	—	—	1	—	1	—	27	20	—	2	15	22	4	9	777	1,190	1,980
(c) Hospitals, out-patients	4	6	321	545	—	—	—	—	—	—	2	—	1	2	12	7	2	1	18	13	324	548	903
(d) Local education authorities	—	2	—	—	—	—	—	—	—	—	14	15	5	5	18	21	4	3	32	38	9	8	87
(e) Police and courts	—	—	76	70	—	—	—	—	—	—	2	—	3	1	—	—	2	1	2	—	81	72	155
(f) Other sources	9	6	403	483	—	—	—	—	3	1	65	50	59	50	81	63	37	33	155	119	502	567	1,343

* Excludes County cases attending other authorities' or other bodies' centres.

† Excludes persons in hospitals who are considered suitable for transfer to County Council hostels.

TABLE 28—MEDICAL EXAMINATIONS
SUMMARY, BY HEALTH DIVISIONS AND DELEGATE DISTRICTS, OF MEDICAL EXAMINATIONS CARRIED OUT BY COUNTY COUNCIL MEDICAL STAFFS DURING 1969

Health Division Number	Medical examinations undertaken in respect of										Total medical examinations
	Fitness for job— County Council employees			Fitness to enter other local authorities' super-annuation schemes	Fitness to enter other local authorities' sickness pay schemes	Fitness to resume work— County Council employees	Children in care of Children's Committee	Entry to teachers' training colleges	Entrants to teaching profession (form 28 R.Q.)	Others	
	Number of forms M.E.5 scrutinised	*Medical examinations carried out as a result of scrutiny of forms M.E.5	Posts requiring compulsory examination								
1	148	3	35	2	—	2	50	47	1	—	140
2	419	17 (1)	88	7	—	12	167	191	5	2	490
3	562	68 (6)	86	5	—	—	165	183	3	7	523
4	1,257	83	123	—	—	18	312	322	11	—	869
5	911	134 (10)	55	11	—	—	—	257	10	1273	750
6	368	18	47	8	—	—	192	97	38	—	400
7	895	101 (5)	45	4	—	4	146	220	10	—	535
8	489	47	41	9	—	6	120	135	10	—	368
9	626	89 (35)	55	6	—	16	—	307	72	—	580
10	475	34	45	6	—	6	133	139	6	—	369
11	765	44 (27)	64	—	—	9	—	239	21	1814	1,218
12	536	27	97	73	—	27	115	173	7	—	519
13	109	4	58	1	—	2	70	85	8	—	228
14	550	5	51	7	—	2	67	100	11	—	243
15	835	13	63	1	—	—	156	147	17	—	397
16	191	19	41	12	—	5	27	74	6	—	184
17	434	20	36	8	—	28	106	107	15	—	320
Delegate District—											
Crosby M.B.	133	10	9	1	—	1	38	80	4	—	143
Huyton-with-Roby U.D.	201	17	23	3	2	3	116	42	5	—	211
Middleton M.B.	292	—	15	6	—	—	126	57	4	—	208
Stretford M.B.	327	23	34	1	—	—	44	84	12	—	198
TOTAL—Administrative County	§11,700	776 (84)	**1,289	171	2	141	2,150	3,086	276	1,096	**9,071

* In addition, examinations were carried out of employees referred by C.M.O.H. (Central Office). These are shown in brackets.
† Includes 257 in respect of day nurseries. ‡ Boothstown Remand Home. § Includes 1,177 scrutinised by C.M.O.H. (Central Office).
** Includes 178 arranged by C.M.O.H. (Central Office).

TABLE 29—NATIONAL ASSISTANCE ACT, 1948—WELFARE SERVICES
ACCOMMODATION PROVIDED DURING THE YEAR 1969

(1) In Homes— (a) Managed by the Lancashire County Council and administered by the Divisional Health Committee

Health Div. No.	Home	Accommodation capacity at 31st Dec., 1969	Cases which were County Council responsibility								Cases which were responsibility of other Local Authorities							
			No. at 31st Dec., 1968		Admissions		Discharges		Deaths		No. at 31st Dec., 1969		Admissions		Discharges		Deaths	
			M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
1	Marsh House, Ulverston	35	14	19	2	11	2	9	—	2	14	19	—	—	—	—	—	2
2	Millwood House, Barrow-in-Furness	41	16	24	5	8	4	4	—	3	16	25	—	—	—	—	—	1
	*The Empress, Morecambe	50	14	34	9	20	9	19	2	3	12	32	—	—	—	—	—	—
	Moor Platt, Caton	26	2	25	2	13	1	13	1	1	2	24	—	—	—	—	—	—
	The Hermitage, Caton	40	12	24	16	17	13	10	3	4	12	27	—	—	—	—	—	—
	The Laurels, Lancaster	29	10	16	8	14	6	9	1	5	11	16	—	—	—	—	—	—
	Fair Elms, Lancaster	23	6	16	10	7	8	2	3	5	5	16	—	—	—	—	—	—
	Dolphinlee House, Lancaster	50	12	39	10	17	10	11	2	3	10	42	—	—	—	—	—	—
	Beaumont View, Lancaster	51	18	33	18	59	19	52	4	3	37	—	—	—	—	—	—	—
3	Slyne House, Lancaster	51	11	38	17	75	18	67	1	4	9	42	—	—	—	—	—	—
	Norcross House, Carlisle, Thornton Cleveleys	24	8	14	—	14	8	8	—	3	8	17	—	—	—	—	—	—
	Milbank, Kirkham	50	20	29	6	17	5	8	2	6	19	32	—	—	—	—	—	—
	Clifton House, Ballam Road, Lytham	51	11	41	1	17	1	8	3	9	8	41	—	—	—	—	—	—
	†The Cumberland, Esplanade, Fleetwood	40	10	27	6	13	3	6	3	4	10	30	—	—	—	—	—	—
4	Crossacres, St. Annes	50	9	42	10	14	6	8	—	8	13	40	—	—	—	—	—	—
	The Woodlands, St. Andrew's Rd. South, St. Annes	24	7	16	2	3	2	3	—	—	7	16	—	—	—	—	—	—
	The Beeches, Bonds, Garstang	44	15	28	24	27	23	24	1	6	15	25	—	—	—	—	—	—
	Withnell Fold, near Chorley	40	17	23	9	20	4	14	3	8	19	21	—	—	—	—	—	—
	Peterfield House, Penwortham	50	12	38	24	27	24	28	1	6	11	31	—	—	—	—	—	—
	Broadfield House, Leyland	50	10	41	18	27	11	26	2	7	15	35	—	—	—	—	—	—
	Coniston House, Chorley	35	8	30	8	23	7	18	2	8	7	27	—	—	—	—	—	—
	Charnley Fold House, Walton-le-Dale	51	16	35	12	22	12	15	—	9	16	33	—	—	—	—	—	—
5	Fell View, Longridge	51	11	40	12	43	11	35	1	10	11	38	—	—	—	—	—	—
	Hill Top, Manchester Road, Accrington	16	16	—	3	—	1	2	3	—	15	—	—	—	—	—	—	—
	Warren Holt, Wipshire	26	14	11	6	2	4	4	—	—	14	11	—	—	—	—	—	—
	Glendene, Knowsley Road, Clayton-le-Dale	21	21	—	—	5	—	4	—	1	—	—	—	—	—	—	—	—
	Broad Oak, Accrington	34	10	24	13	13	9	9	4	3	10	25	—	—	—	—	—	—
	Northlands, Great Harwood	39	14	25	16	12	6	6	—	5	14	26	—	—	—	—	—	—
	Greenways, Darwen	50	18	33	16	14	10	10	7	4	17	33	—	—	—	—	—	—
	Castleford, Clitheroe	50	11	39	5	13	2	11	3	3	11	38	—	—	—	—	—	—
6	Woodlands, Clayton-le-Moors	51	12	39	10	19	7	13	4	3	11	42	—	—	—	—	—	—
	Stanley Villas, Albert Road, Colne	14	—	14	—	5	—	4	—	1	—	14	—	—	—	—	—	—
	Andrew Smith House, Marsden Hall Road, Nelson	50	19	32	8	7	7	5	4	4	16	30	—	—	—	—	—	—
	Marles Hill, Wheatley Lane, Barrowford	27	11	15	5	5	3	5	—	—	12	15	—	—	—	—	—	—
	Woodside, Padham	50	14	36	5	18	5	14	1	5	13	35	—	—	—	—	—	—
7	Favordale, Colne	51	14	35	9	19	6	19	1	2	16	33	—	—	—	—	—	—
	Marbenthe, Marine Terrace, Waterloo	21	4	17	1	9	—	9	1	1	4	16	—	—	—	—	—	—
	Sefton House, Junction Lane, Burscough	28	9	17	3	5	3	4	—	2	9	16	—	—	—	—	—	—
	Thornton Hall, Tanhouse Road, Thornton, Crosby	51	9	40	5	37	4	34	1	2	9	41	—	—	—	—	—	—
	Eskdale, Birkdale, Southport	35	9	23	3	21	2	16	1	4	9	24	—	—	—	—	—	—
	Beaconview, Skelmersdale	50	18	30	10	12	5	10	2	3	21	29	—	—	—	—	—	—
	Alma Green, Up Holland	35	8	21	2	14	2	8	—	1	8	26	—	—	—	—	—	—
8	Whinbrook House, Maghull	50	19	29	13	21	7	19	5	2	20	29	—	—	—	—	—	—
	Thorley House, Atherton Road, Hindley	39	20	17	5	12	2	7	2	4	21	18	—	—	—	—	—	—
	Garswood House, Ashton-in-Makerfield	51	17	29	9	16	5	6	3	7	18	32	—	—	—	—	—	—
9	Sherwood House, Platt Bridge, Hindley	51	15	23	11	17	3	9	3	6	20	25	—	—	—	—	—	—
	High Carrs, Broadgreen Road, Huyton-w-Roby	26	5	18	5	3	1	—	1	3	8	18	—	—	—	—	—	—
	Huyton Quarry Manor, Manor Farm Road, Huyton-w-Roby	50	14	35	1	23	1	11	1	11	13	36	—	—	—	—	—	—

TABLE 29—continued

Health Div. No.	Home	Accommodation capacity at 31st Dec., 1969	Cases which were County Council responsibility										Cases which were responsibility of other Local Authorities									
			No. at 31st Dec., 1968		Admissions		Discharges		Deaths		No. at 31st Dec., 1969		No. at 31st Dec., 1968		Admissions		Discharges		Deaths		No. at 31st Dec., 1969	
			M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
9	Ethel Hanley House, Coronation Drive, Widnes	50	14	34	9	9	6	7	2	3	15	33	—	—	—	—	—	—	—	—	—	—
	Fazakerley House, Park Road, Prescott	35	5	27	4	8	1	8	—	—	8	25	—	—	—	—	—	—	—	—	—	—
	Kirkby House, Kirkby	51	16	35	5	10	4	7	2	3	15	35	1	—	—	—	—	—	—	1	—	—
10	Roseheath House, Burncroft Road, Halewood	51	16	29	4	11	6	6	1	3	13	31	—	—	—	—	—	—	—	—	—	—
	Golborne House, Derby Road, Golborne	50	17	31	4	8	3	7	—	—	18	30	—	—	—	—	—	—	—	2	—	—
	Heathside, Penketh	50	22	27	5	8	11	5	1	1	15	29	2	—	—	—	—	—	—	—	—	—
	Heyescroft, Haydock	51	20	29	5	14	10	6	1	1	14	36	—	—	—	—	—	—	—	—	—	—
11	Larchfields, Sturges Street, Newton-le-Willows	51	—	—	20	30	1	—	—	—	19	29	—	—	—	—	—	—	—	—	—	—
	Hourigan House, Myrtle Avenue, Leigh	50	13	37	8	10	7	7	1	5	14	37	1	—	—	—	—	—	—	—	—	—
	Winifred Kettle House, Westhoughton	50	13	37	8	10	7	7	2	1	12	39	—	—	—	—	—	—	—	—	—	—
	The Wilfred Geere House, Farnworth	35	8	26	3	12	3	6	—	—	8	27	—	—	—	—	—	—	—	1	—	—
12	Park House, Tyldesley	51	12	37	5	17	5	1	2	4	10	49	—	—	—	—	—	—	—	—	—	—
	Hazelhurst, Ramsbottom	16	9	7	5	3	8	—	—	—	6	10	—	—	—	—	—	—	—	—	—	—
	Croich Hey, Hawkshaw	27	7	20	3	6	3	7	—	—	7	19	—	—	—	—	—	—	—	—	—	—
	Redcliffe, Prestwich	27	11	16	2	9	4	10	—	—	9	15	—	—	—	—	—	—	—	—	—	—
	Horncliffe House, Rawtenstall	38	10	28	3	7	6	4	1	1	6	30	—	—	—	—	—	—	—	—	—	—
	Red Bank House, Radcliffe	50	19	32	10	12	6	11	3	2	20	26	—	—	—	—	—	—	—	—	—	—
	Ravengarth, Helmshore	50	12	35	8	16	5	13	—	—	15	36	—	—	—	—	—	—	—	—	—	—
13	Elmhurst, Whitefield	51	15	37	4	22	7	12	2	7	10	40	—	—	—	—	—	—	—	—	—	—
	Oaklands, Rochdale Road, Milnrow	12	—	12	—	3	—	1	—	—	—	12	—	—	—	—	—	—	—	—	—	—
	Brooklyn, Rochdale Road, Heywood	21	11	4	4	7	3	—	1	3	11	8	—	—	—	—	—	—	—	—	—	—
	Olive House, Bacup	14	5	7	1	2	—	2	—	—	6	6	—	—	—	—	—	—	—	—	—	—
14	Birch View, Wardle	50	13	36	14	21	6	16	2	9	19	32	—	—	—	—	—	—	—	—	—	—
	Claremont, 78, Windsor Road, Oldham	17	—	17	—	9	—	8	—	—	—	17	—	—	—	—	—	—	—	—	—	—
	Schofield House, Middleton	40	7	33	10	9	6	5	3	5	8	32	—	—	—	—	—	—	—	—	—	—
	The Coppice, 84, Windsor Road, Oldham	20	14	8	9	2	7	6	—	—	16	4	—	—	—	—	—	—	—	—	—	—
	Broadway House, Chadderton	50	12	37	2	13	3	9	—	—	11	38	—	—	—	—	—	—	—	—	—	—
	Laburnum House, Crompton	35	13	23	10	22	6	11	3	12	14	22	—	—	—	—	—	—	—	—	—	—
	Saxonside, Middleton	35	8	26	7	13	5	6	4	5	6	28	—	—	—	—	—	—	—	—	—	—
	Brierfields, Failsworth	51	16	33	11	10	8	8	3	1	16	34	—	—	—	—	—	—	—	—	—	—
15	Shawbury, Grimshaw Lane, Middleton	51	—	—	56	130	42	84	2	7	12	39	—	—	—	—	—	—	—	—	—	—
	Gilda Brook, Preston Avenue, Eccles	50	10	39	9	27	7	17	2	10	10	39	—	—	—	—	—	—	—	—	—	—
	The Limes, Moorfield Close, Swinton	35	8	23	12	13	9	12	—	—	11	23	—	—	—	—	—	—	—	—	—	—
	Birchfold, Worsley	50	9	40	9	24	8	21	—	—	10	38	—	—	—	—	—	—	—	—	—	—
	Brynbeys, Worsley	51	15	33	9	16	7	10	2	4	15	35	—	—	—	—	—	—	—	—	—	—
16	Grangehorpe, 98-100, Talbot Road, Stretford	25	9	15	6	6	3	3	3	3	9	16	—	—	—	—	—	—	—	—	—	—
	The Harry Lord House, Old Trafford	50	21	29	8	8	6	4	3	3	20	30	—	—	—	—	—	—	—	—	—	—
	The Katharine Lowe House, Davyhulme	50	8	42	5	10	2	2	2	2	9	43	—	—	—	—	—	—	—	—	—	—
	Beechfield House, Irlam	51	9	41	4	10	3	7	—	—	5	15	—	—	—	—	—	—	—	—	—	—
17	Holme Lea, Astley Road, Stalybridge	20	8	13	9	16	12	14	1	7	7	29	—	—	—	—	—	—	—	—	—	—
	Sunnyside, Sunnyside Road, Droylsden	35	8	28	10	28	10	20	1	7	19	34	—	—	—	—	—	—	—	—	—	—
	Hurst Hall, Ashton-under-Lyne	51	18	33	14	34	13	26	3	4	18	34	—	—	—	—	—	—	—	—	—	—
	Greatwood House, Denton	51	19	32	11	44	9	38	—	—	1	44	—	—	—	—	—	—	—	—	—	—
	Kingsfield, Ashton-under-Lyne	51	18	34	14	33	14	28	1	6	17	33	—	—	—	—	—	—	—	—	—	—
	Grasmere Lodge, Manchester Road, Ashton-u-Lyne	21	3	18	—	3	—	4	1	1	2	16	—	—	—	—	—	—	—	—	—	—
	TOTAL	3,743	1,071	2,470	743	1,570	587	1,115	140	351	1,087	2,574	13	19	1	5	1	5	2	1	11	18

TABLE 33—continued

Voluntary Organisation	Name and address of establishment	No. at 31st Dec., 1968		Admissions		Discharges		Deaths		No. at 31st Dec., 1969	
		M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Hannay Masonic Trust	Fair Lawn, Lytham	1	1	—	—	—	—	—	—	1	1
Hostels for Crippled Women	The Tithebarn, Great Crosby	1	2	—	—	—	—	—	—	1	—
Borough of Hyde Welfare for Aged, Infirm and Lonely People	Love Walk, Denmark Hill, London, S.E.5	1	1	—	—	—	—	—	—	1	1
	Bowlacre Home, Hyde	3	1	—	—	—	—	—	—	3	1
Infantile Paralysis Fellowship	Pole Bank Hall, Hyde	—	3	—	—	—	—	—	—	—	3
	Silverwood Home, Cobham	—	1	—	—	—	—	—	—	—	1
House Committee for Kolbe House	The Lantern, Worthing	—	1	—	—	—	—	—	—	—	1
Langdale Cottage Homes Trust	Kolbe House, London, W.5	—	5	—	—	—	—	—	—	—	3
Liverpool Personal Service	Langdale Cottage Homes, Worsley	—	—	—	2	—	1	—	1	—	—
	52, Croxeth Road, Liverpool	—	—	—	—	—	—	—	—	—	2
	25/27, Sefton Drive, Liverpool	—	1	—	—	—	—	—	—	—	1
Liverpool Women's Free Church Council	Sundale, Liverpool, 17	—	—	—	—	—	—	—	—	—	—
Leeds Home for Aged Jews	Donisthorpe Hall, Leeds	1	—	—	—	—	—	—	—	—	—
Maghull Homes for Epileptics (Inc.)	Maghull Homes for Epileptics, Maghull	14	20	2	1	—	2	1	1	16	18
Manchester Jewish Homes for the Aged	Manchester Jewish Homes for the Aged, Manchester	6	12	4	5	—	—	6	1	4	16
Maryland Home for Elderly People	Maryland Home, Formby	1	12	—	—	—	—	—	—	1	10
Methodist Homes for the Aged	Astoria, Colwyn Bay	—	3	—	—	—	—	—	—	—	3
	Engleberg, Ash Hill, Wolverhampton	—	2	—	—	—	—	—	—	—	—
	Fulwood Park, Liverpool	2	2	—	—	—	—	—	—	2	1
	Glen Rosa, Ilkley	—	1	—	—	—	—	—	—	—	—
	Harwood Court, Cramlington	—	—	—	—	—	—	—	—	—	—
	Homewood, Leamington Spa	—	—	—	—	—	—	—	—	—	—
	Stratton House, Bath	1	—	—	—	—	—	—	—	—	—
	Siarr Hills, St. Annes	—	7	1	4	—	—	—	—	1	11
	Woodbank, Woking	—	1	—	—	—	—	—	—	—	—
	Aigburth, Dabby, Leicester	—	1	—	—	—	—	—	—	—	—
	The Convent, Leigh	—	9	—	2	—	—	—	—	—	8
Missionary Sisters of Our Lady of Apostles	Morris Feinmann Homes Trust, Didsbury	—	2	—	—	—	—	—	—	—	2
Mutual Aid Homes Ltd.	Westley, Grange-over-Sands	—	2	—	—	—	—	—	—	—	1
	Park View, Chorleywood Road, Rickmansworth, Herts.	—	2	—	—	—	—	—	—	—	2
National Institute for the Deaf	Richardson House, Blackburn	—	6	—	—	—	—	—	—	—	6
National Society for Epileptics	Chalfont Colony, Chalfont St. Peter	1	—	—	—	—	—	—	—	1	—
National Spastics Society	Broadstones, Broadstones Road, Yardley	—	—	—	2	—	—	—	—	—	2
	Drummond Centre, Essex	1	2	1	1	—	—	—	—	2	3
	Daresbury Hall Centre, Daresbury	—	—	—	—	—	—	—	—	—	—
	The Bedford, Buxton	1	1	—	—	—	—	—	—	1	—
	Elphick House, Bristol	—	—	—	—	—	—	—	—	—	—
	Heathbank, Halifax	2	1	—	—	—	—	—	—	2	—
	Oakwood Centre, High Street, Kelvedon	—	—	—	—	—	—	—	—	—	—
	Thorn Grove House, Gillingham	1	—	—	—	—	—	—	—	—	—
Nazareth House	Nazareth House, Blackburn	—	—	—	—	—	—	—	—	—	—
	Nazareth House, Widnes	28	41	13	12	—	—	10	13	23	33
	Nazareth House, Crosby	3	29	—	10	2	7	—	5	1	32

TABLE 33—continued

Voluntary Organisation	Name and address of establishment	No. at 31st Dec., 1968		Admissions		Discharges		Deaths		No. at 31st Dec., 1969	
		M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Northern Counties Eventide Homes	36, Lancaster Road, Birkdale	...	...	...	...	...	...	...	...	...	...
Papworth Village Settlement	Papworth Village Settlement, Cambridge	...	...	...	...	...	...	...	...	...	...
Peacehaven House Committee	115, Roe Lane, Southport	...	...	...	...	...	...	...	...	...	...
Pentecostal Eventide Housing Association	Brooklands, Birkwell	...	...	...	...	...	...	...	...	...	...
Railway Benevolent Institution	Woodend, Disley	...	...	...	...	...	...	...	...	...	...
Royal Air Force Association	Boxhurst, Dorking, Surrey	...	...	...	...	...	...	...	...	...	...
Royal Alfred Merchant Seamen's Society	R.A.F. Assoc. Home, Sussexdowne, Storrington, Sussex	...	...	...	...	...	...	...	...	...	...
St. Elizabeth's Home for Epileptics	Belvedere, Kent	...	...	...	...	...	...	...	...	...	...
St. Joseph's Hospital	St. Elizabeth's Home, Much Hadham	...	...	...	...	...	...	...	...	...	...
Salvation Army Eventide Homes	St. Joseph's Hospital, Manchester	...	...	...	...	...	...	...	...	...	...
	Elizabeth Walker Home, Orrell Hey, Bootle	...	...	...	...	...	...	...	...	...	...
	Holt House, Prestwich	...	...	...	...	...	...	...	...	...	...
	Laurel Bank, Salford	...	...	...	...	...	...	...	...	...	...
	Mary Fowler Home, Allerton, Liverpool	...	...	...	...	...	...	...	...	...	...
	Marlow, Wittington, Bucks.	...	...	...	...	...	...	...	...	...	...
	The Hawthorns, Buxton	...	...	...	...	...	...	...	...	...	...
	Sunnyside, Edinburgh	...	...	...	...	...	...	...	...	...	...
	"Villa Adalstra", 79, Keymer Road, Hassocks, Sussex	...	...	...	...	...	...	...	...	...	...
	Wickstead Hall, Wirsall, Nr. Warrington	...	...	...	...	...	...	...	...	...	...
Sir Robert Jones Memorial Workshops	Sir Robert Jones Workshops, Upper Parliament St., Liverpool	...	...	...	...	...	...	...	...	...	...
Sisters of Charity of Jesus and Mary	Stella Matutina Convent, Ansdell	...	...	...	...	...	...	...	...	...	...
Society of Friends	Holly Mount Convent, Tottington	...	...	...	...	...	...	...	...	...	...
Society of Friends of Foreigners in Distress	Beechville, Lostock Park, Bolton	...	...	...	...	...	...	...	...	...	...
Stapely Home for Aged Jews	Libury Hall, Munden, Herts.	...	...	...	...	...	...	...	...	...	...
Stone Bower Fellowship	Stapely, Liverpool, 18	...	...	...	...	...	...	...	...	...	...
Turner Memorial Home of Rest	The Cove, Silverdale	...	...	...	...	...	...	...	...	...	...
Urmston Housing Association	Turner Memorial Home, Dingle Head, Liverpool	...	...	...	...	...	...	...	...	...	...
Women's Voluntary Services Residential Clubs	Ann Challis Eventide Home, Urmston	...	...	...	...	...	...	...	...	...	...
	Haylands Eventide Home, Urmston	...	...	...	...	...	...	...	...	...	...
	Tickford Abbey, Newport	...	...	...	...	...	...	...	...	...	...
	58, Elsworth Road, Hampstead	...	...	...	...	...	...	...	...	...	...
Yorkshire Association for the Care of Cripples	St. George's Training Centre, Harrogate	...	...	...	...	...	...	...	...	...	...
	TOTAL	185	431	69	111	31	73	40	68	183	401

TABLE 34—NATIONAL ASSISTANCE ACT, 1948—WELFARE SERVICES

ACCOMMODATION PROVIDED DURING THE YEAR 1969 (continued)—

(3) In Establishments managed by Voluntary Organisations (residents normally belonging to the Administrative County area) (continued)—

(b) Homes for the Blind

Voluntary Organisation	Name and address of establishment	No. at 31st Dec., 1968		Admissions		Discharges		Deaths		No. at 31st Dec., 1969	
		M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Barrow, Furness & South Cumberland Association for the Blind	Ostley House, Abbey Road, Barrow-in-Furness ...	2	1	—	2	—	—	1	1	1	2
Blackpool and Fylde Society for the Blind	Princess Alexandra Home for the Blind, Bosworth Place, Squires Gate, Blackpool ...	5	15	—	6	—	1	2	7	3	13
Catholic Blind Institute	59, Brunswick Road, Liverpool, 6 ...	1	2	—	—	—	—	—	1	1	1
Child Memorial Home for the Blind	Child Memorial Home for the Blind, Sunny Lawns, Sandy Walk, Wakefield ...	—	1	—	—	—	—	—	—	—	1
Fulwood Workshops for the Blind	William Wilding Galloway Home, Liverpool Road, Penwortham, Preston ...	3	15	1	3	—	5	—	1	4	12
Henshaw's Institution for the Blind	Mary Ann Scott Home, Southport ...	—	12	—	2	—	2	—	1	—	11
Hereford County Association for the Blind	Thomas Briggs Lomas Home, Rhyll ...	5	—	—	—	—	—	2	—	3	—
Jewish Homes for Blind Persons	Hampton Grange, Hereford ...	—	1	—	—	—	—	—	—	—	1
Keighley and District Blind Society	Rockefield, Westcott, Dorking ...	1	—	—	—	1	—	—	—	—	—
Manchester Jewish Blind Society	Bingley Home for Blind, Bingley, Yorks. ...	1	—	—	—	—	—	—	—	1	—
Manchester and Salford Blind Aid Society	Keighley Home for Blind, Scott Street, Keighley, Yorks. ...	—	1	—	1	—	—	—	—	—	2
North Regional Association for the Blind	Jewish Blind Society Home, Albert Road, Southport ...	2	1	—	—	—	—	1	1	1	—
Royal National Institute for the Blind	"Elms", Pendleton ...	—	8	—	4	—	—	—	3	—	9
	Godfrey Ermen Memorial Home, Southport ...	3	2	—	—	1	—	—	—	2	2
	"Oaklands", Pendleton ...	9	9	2	6	2	—	4	2	5	13
	"Oaklands", Huddersfield Road, Holmfirth ...	2	7	—	—	1	—	—	2	1	5
	Royal School for the Blind, Leatherhead ...	2	—	—	—	—	—	—	—	2	—
	"Tate House", Home for the Deaf-Blind, Harrogate ...	2	1	—	—	—	—	—	—	2	1
	"Wilton Grange", West Kirby ...	1	1	—	—	—	—	—	—	1	1
	"Kathleen Chambers" Home, Burnham-on-Sea ...	1	—	—	—	—	—	—	—	1	—
	Westcliffe House, Westgate-on-Sea ...	—	1	—	1	—	—	—	—	—	2
	Oldbury Grange, Bridgenorth ...	—	—	1	1	1	—	—	—	—	1
	Roper House, St. Dunston Street, Canterbury ...	—	—	—	1	—	—	—	—	—	1
	Wilberforce Home for the Multiple Blind, 187, Tadcaster Road, Yorks. ...	—	—	—	1	—	—	—	—	—	1
	TOTAL	40	78	4	27	6	8	10	19	28	78

TABLE 35—HOUSING
SUMMARY OF WORK CARRIED OUT DURING THE YEAR 1969

URBAN DISTRICTS	NEW HOUSES ERECTED DURING YEAR				DEFECTIVE DWELLINGS			UNFIT DWELLINGS				
	Total		By Local Authority		By Other Local Authorities		Total No. inspected for housing defects	No. of inspections made for the purpose	No. of defective houses rendered fit	No. demolished during year	No. remaining at end of year	
											In respect of which clearance, demolition, etc., orders have been made	In respect of which orders have not yet been made
	Houses	Flats	Houses	Flats	Houses	Flats						
Abram	33	—	—	—	33	—	370	802	1	14	15	41
Accrington (B)	102	20	52	20	50	—	1,215	2,678	3	16	407	388
Adlington	46	—	—	—	46	—	220	253	36	—	2	—
Ashton-in-Makerfield	166	—	76	—	90	—	452	905	60	51	60	236
Ashton-under-Lyne (B)	121	4	15	4	106	—	1,539	2,336	561	74	344	*
Aspull	46	—	—	—	46	—	163	587	—	5	32	281
Atherton	85	24	4	24	81	—	493	668	40	19	19	152
Audenshaw	—	—	—	—	—	—	345	984	—	7	12	488
Bacup (B)	13	—	—	—	13	—	565	1,096	—	73	125	1,086
Barrowford	11	—	—	—	11	—	148	210	15	—	5	170
Billinge and Winstanley	12	—	—	—	12	—	201	426	12	2	23	17
Blackrod	65	—	34	—	31	—	253	324	3	—	20	15
Brierfield	44	—	—	—	44	—	184	296	20	2	10	—
Carnforth	14	—	—	—	14	—	147	214	13	—	—	—
Chadderton	204	58	21	58	183	—	993	1,733	84	142	300	—
Chorley (B)	158	134	6	134	152	—	548	1,411	326	24	97	200
Church	—	—	—	—	—	—	200	300	6	93	51	33
Clayton-le-Moors	72	48	35	48	37	—	47	101	25	16	—	20
Clitheroe (B)	30	16	—	16	30	—	108	219	22	—	4	181
Colne (B)	16	8	—	8	16	—	209	809	25	16	40	130

• Not available

* Not available

TABLE 35—continued

URBAN DISTRICTS	NEW HOUSES ERECTED DURING YEAR						DEFECTIVE DWELLINGS				UNFIT DWELLINGS		
	Total		By Local Authority		By Other Local Authorities		By Other Bodies or Persons		Total No. inspected for housing defects	No. of inspections made for the purpose	No. of defective houses rendered fit	No. demolished during year	No. remaining at end of year
	Houses	Flats	Houses	Flats	Houses	Flats	Houses	Flats					In respect of which clearance, demolition, etc., orders have been made
Ince-in-Makerfield	149	68	83	68	—	—	66	—	642	709	216	149	235
Irlam	63	—	—	—	—	—	63	—	248	622	123	—	4
Kearsley	82	—	—	—	—	—	82	—	28	79	11	65	78
Kirkby	367	42	215	—	92	—	60	42	899	1,134	190	—	—
Kirkham	38	6	—	—	—	—	38	6	426	619	162	—	15
Lancaster (B)	146	57	34	36	—	—	112	21	575	739	8	9	3
Lees	85	26	9	26	—	—	76	—	198	289	75	26	40
Leigh (B)	158	8	—	8	—	—	158	—	642	2,515	—	62	103
Leyland	86	20	—	16	—	—	86	4	53	64	—	1	4
Litherland	143	48	140	48	—	—	3	—	1,942	3,498	324	—	51
Littleborough	127	—	—	—	—	—	127	—	242	311	31	67	39
Little Lever	177	52	28	52	—	—	149	—	230	287	—	24	107
Longridge	89	5	—	—	—	—	89	5	80	142	25	—	8
Lytham St. Annes (B)	240	60	—	—	—	—	240	60	76	226	1	2	1
Middleton (B)	208	80	153	80	—	—	55	—	1,980	1,262	85	208	363
Milnrow	48	—	—	—	—	—	48	—	251	333	—	7	8
Morecambe and Heysham (B)	89	16	—	—	—	—	89	16	143	173	2	—	2
Mossley (B)	105	20	—	20	—	—	105	—	174	406	62	29	139
Nelson (B)	10	—	—	—	—	—	10	—	113	782	—	33	45
Newton-le-Willows	39	—	27	—	—	—	12	—	550	740	140	27	48
Ormskirk	219	16	12	16	—	—	207	—	986	2,325	201	10	56

TABLE 35—continued

URBAN DISTRICTS	NEW HOUSES ERECTED DURING YEAR						DEFECTIVE DWELLINGS				UNIT DWELLINGS					
	Total		By Local Authority		By Other Local Authorities		By Other Bodies or Persons		Total No. inspected for housing defects	No. of inspections made for the purpose	No. of defective houses rendered fit	No. demolished during year	No. remaining at end of year	In respect of which orders have not yet been made	In respect of which clearance, demolition, etc., orders have been made	
	Houses	Flats	Houses	Flats	Houses	Flats	Houses	Flats								
Orrell	107	24	21	24	—	—	86	—	490	607	14	12	9	69		
Oswaldtwistle	50	—	28	—	—	—	22	—	103	173	26	40	166	316		
Padiham	4	—	—	—	—	—	4	—	161	326	38	11	2	140		
Poulton-le-Fylde	56	2	—	—	—	—	56	2	23	96	6	—	4	—		
Prescarr	59	—	—	—	—	—	59	—	16	34	—	—	—	—		
Prescot	—	—	—	—	—	—	—	—	550	1,011	41	34	7	1		
Prestwich (B)	60	57	—	45	—	—	60	12	491	445	42	77	226	151		
Radcliffe (B)	261	90	69	90	—	—	192	—	532	1,368	78	91	74	350		
Rainford	182	—	—	—	—	—	182	—	8	17	—	—	13	5		
Ramsbottom	132	—	36	—	—	—	96	—	21	49	—	72	19	—		
Rawtenstall (B)	32	10	9	10	—	—	23	—	79	345	34	53	226	961		
Rishton	4	—	—	—	—	—	4	—	38	124	13	—	—	—		
Royton	253	—	—	—	—	—	253	—	605	1,082	142	22	25	—		
Skelmersdale and Holland	1,575	4	—	4	—	—	1,575	—	240	580	33	—	47	30		
Standish-with-Langtree	41	—	3	—	—	—	38	—	242	492	41	5	14	36		
Siretford (B)	20	99	19	99	—	—	1	—	1,471	4,656	302	57	643	1,500		
Swinton and Pendlebury (B)	204	—	50	—	—	—	154	—	2,398	4,110	107	128	245	96		
Thornton Cleveleys...	65	8	—	—	—	—	65	8	58	110	9	—	2	4		
Tottington	291	—	—	—	—	—	291	—	18	54	1	—	17	132		
Trawden	—	—	—	—	—	—	—	—	85	110	5	—	7	11		
Turton	265	—	—	—	—	—	265	—	427	494	32	22	—	141		

TABLE 35—continued

URBAN DISTRICTS	NEW HOUSES ERECTED DURING YEAR						DEFECTIVE DWELLINGS				UNFIT DWELLINGS		
	Total		By Local Authority		By Other Local Authorities		By Other Bodies or Persons		Total No. inspected for housing defects	No. of inspections made for the purpose	No. of defective houses rendered fit	No. demolished during year	No. remaining at end of year
	Houses	Flats	Houses	Flats	Houses	Flats	Houses	Flats					In respect of which clearance, etc., orders have been made
Tyldesley	136	—	—	—	—	—	136	—	191	327	21	22	12
Ulverston	169	—	—	—	—	—	169	—	74	140	12	6	25
Urmston	174	50	9	50	—	—	165	—	159	289	22	15	11
Walton-le-Dale	161	—	—	—	—	—	161	—	728	960	237	6	12
Wardle	31	—	—	—	—	—	31	—	361	366	41	9	37
Westhoughton	120	8	—	8	—	—	120	—	1,071	2,502	206	20	62
Whitefield	68	36	1	18	—	—	67	18	194	598	28	33	26
Whitworth	52	—	22	—	—	—	30	—	162	362	39	29	14
Widnes (B)	395	176	216	176	—	—	179	—	1,556	2,562	277	133	233
Withnell	23	—	—	—	—	—	23	—	14	14	*	*	*
Worsley	151	10	53	10	—	—	98	—	3,141	4,039	69	124	107
Total Urban Districts	11,738	1,994	2,222	1,715	92	—	9,424	279	52,176	96,313	7,557	3,235	6,944
													18,268

* Not available

TABLE 35—continued

RURAL DISTRICTS	NEW HOUSES ERECTED DURING YEAR						DEFECTIVE DWELLINGS			UNFIT DWELLINGS		
	Total		By Local Authority		By Other Local Authorities		Total No. inspected for housing defects	No. of inspections made for the purpose	No. of defective houses rendered fit	No. demolished during year	No. remaining at end of year	
	Houses	Flats	Houses	Flats	Houses	Flats					In respect of which clearance, etc., orders have been made	In respect of which orders have not yet been made
Blackburn ...	211	—	—	—	—	—	12	27	3	5	8	3
Burnley ...	162	—	18	—	—	—	116	232	81	32	75	238
Chorley ...	459	—	—	—	—	—	73	227	51	3	—	70
Clitheroe ...	7	—	3	—	—	—	85	95	5	2	5	9
Fylde ...	233	—	12	—	—	—	36	49	2	4	17	40
Garstang ...	245	—	12	—	—	—	61	213	33	2	16	19
Lancaster ...	67	2	—	—	—	—	248	581	17	—	—	1
Lunesdale ...	67	—	—	—	—	—	52	73	3	5	4	11
North Lonsdale ...	91	—	16	—	—	—	428	614	23	5	92	41
Preston ...	355	12	39	5	—	—	121	306	11	5	11	65
Warrington ...	678	—	—	—	—	—	482	987	340	2	32	10
West Lancashire ...	545	23	—	—	—	—	729	1,089	91	20	15	21
Whiston ...	597	1,107	41	87	214	968	1,400	2,477	195	8	57	12
Wigan ...	306	—	—	—	—	—	50	90	22	4	38	39
Total Rural Districts ...	4,023	1,144	141	92	214	968	3,893	7,060	877	97	370	579
Total Urban Districts ...	11,738	1,994	2,222	1,715	92	—	52,176	96,313	7,557	3,235	6,944	18,268
Total Administrative County ...	15,761	3,138	2,363	1,807	306	968	56,069	103,373	8,434	3,332	7,314	18,847

INDEX

	Page		Page
Abortion	24, at 140, 143	Delegation of functions	31
Accidents, deaths due to	23, at 140, 143	Dental care of mothers and young children	45
Accommodation provided—		Diabetes, deaths from	at 140, 142
Welfare Services	90, 167–176	Digestive system, other diseases	at 140, 143
Acute encephalitis	27, 28, 29	Diphtheria	27, 28, 29, at 140, 141
Acute meningitis	27, 28	immunisation	66, 156
Acute poliomyelitis	27, 28, 29, at 140, 141	Disinfestation	113
immunisation against	66, 155	District nursing	61, 151–153
Adjusted birth rates	18	Divisional health administration	31
death rates	20	Drainage and sewerage	108
Adulteration, food and drugs	123	Dysentery (amoebic and bacillary) 27, 28, 29, at 140, 141	
Agencies for supply of nurses	89		
Ambulance Service	68	Elderly, welfare of	90, 167–172, 175
Anaemias	at 140, 142	Emphysema	22, at 140, 143
Analgesia	57	Encephalitis, acute	27, 28, 29
Analyses, food and drugs	123	Endocrine nutritional and metabolic diseases, other	at 140, 142
milk	120, 123	Enteritis and diarrhoeal diseases	at 140, 141
Antenatal clinics	37, 145	Epileptics and spastics	101
Anthrax	28	Evening helps	78
Appendicitis	at 140, 143	External causes, all other deaths from 23, at 140, 143	
Area, Administrative County	15		
health divisions	32	Factories, etc., inspection of	114
urban and rural districts	16, 132	Family planning clinics	45
Asthma	at 140, 143	Financial assistance (<i>see</i> Grants)	
Atmospheric pollution	112	Fluoridation of water supplies	107
Audiology clinic	40	Food, inspection and supervision of	119
Avitaminoses and other nutritional deficiency at 140, 142		Food and drugs, sampling	123
		Food poisoning	27, 28, 121
B.C.G. vaccination	75, 159	Gas/air analgesia	57
Birth injury, difficult labour and other anoxic and hypoxic conditions	at 140, 143	Genito-urinary system, other diseases of	at 140, 143
Birth rates	17, 18, 128, 132	Grants to local authorities—	
Births	17, 18, 53, 132	drainage and sewerage	108
Blind persons, welfare of	95, 176	housing	117
Blood and blood forming organs, other diseases of at 140, 142		sheltered housing for the elderly	91
Bronchitis	22, at 140, 143	water supplies	108
Camping sites	113	Handicapped persons, welfare of	95, 173–176
Canal boats, inspection of	116	Health centres	36
Cancer death rates	17, 22	Health education	80
deaths	21, at 140, 141, 142	Health services	31
Caravan sites	113	Health Services and Public Health Act, 1968 55, 62, 90	
Care and after-care of sick persons	75	Health visiting	59, 150
Care of elderly persons in their own homes	92	Heart disease	21, at 140, 142
mothers and young children	37	Home help service	81, 162, 163
premature infants	47, 147	Homeless families, welfare of	94
unmarried mothers and their children 49, 148		Homes, for elderly	90, 167–172
Cerebrovascular disease, deaths from 22, at 140, 142		for the blind	176
Cervical cytology	76	disabled and/or old persons	103
Charities Act, 1960	103	mother and baby	49, 148
Child health centres	38, 146	nursing	88
Chiropody service	80, 160, 161	mental, etc.	86
Cholera	28, at 140, 141	Hostels (mental health)	85
Circulatory system, other diseases of 22, at 140, 142		Houses, for midwives	55
Cirrhosis of liver	at 140, 143	for nurses	65
Clean Air Act, 1956	112	Housing	117, 177
Cleansing, public	112	sheltered, for the elderly	91
Clinics, antenatal and post-natal	37, 145	Hygiene, Food Regulations	120
audiology	40	Hyperplasia of prostate	at 140, 143
family planning	45		
relaxation	38, 145	Ice-cream	121
special	45	Illegitimate births	17, 19, 132
Closet accommodation	112	Illegitimate infant deaths	17, 24, 132
Common lodging houses	116	Immunisation	66, 156–158
Comparability factors	18, 20, 131	Infant mortality	24, 132, 141
Congenital malformations (anomalies) 40, at 140, 143		rates	17, 24, 128–132
Constructed populations	16, 134, 137–139	Infectious and other notifiable diseases	27
Convalescent home care	77	Infective and parasitic diseases, other	at 140, 141
		Infective jaundice	27, 28, 29
Day nurseries	50, 149	Influenza	at 140, 143
Deaf or dumb, welfare of	98	Inspection and supervision of food	119
Deafness in young children, detection of	40	Intestinal obstruction and hernia	at 140, 143
Death rates	17, 20, 128, 132		
Deaths	19, 132, at 140, 141	Laundry service	78
causes of	20, at 140, 141	Leukaemia	21, at 140, 142
early neo-natal	25, 132	Liquid Egg (Pasteurisation) Regs., 1963	121
external causes	23, at 140, 143	Live births	17, 18, 53, 132
infant	17, 24, 132, 141	Leptospirosis	28
maternal	17, 23, at 140, 143		
investigation of	24	Malaria	28, 141
neo-natal	17, 25, 132, 141	Malignant neoplasms	21, at 140, 141, 142
perinatal	17, 26, 132	Mass radiography	75

	Page		Page
Maternal mortality	17, 23, at 140, 143	Registration of blindness	95
investigation of	24	homes for disabled and/or old persons	103
rates	17, 23	nursing homes	86, 88
Measles	27, 28, 29, at 140, 141	Relaxation classes	38, 145
immunisation	66, 67, 158	Respiratory diseases, other	at 140, 143
Medical examinations	88, 166	Respiratory tuberculosis	29
Meningitis	27, 28, at 140, 142	death rates	17, 29
Mental health	82, 164, 165	deaths	29, at 140, 141
Mental disorders	at 140, 142	notifications	29, 144
Midwifery	54	Rheumatic fever, active	at 140, 142
Milk	119	Rheumatic heart disease, chronic	at 140, 142
adulteration of	123	Roll of midwives	56
in schools, etc.	120	Rural Water Supplies and Sewerage Acts, 1944	
licences	119	to 1965	108
Mother and baby homes	49, 148	Sampling, food and drugs	123
Mothercraft training	38, 79	milk	120, 123
Mothers and young children, care of	37	Sanitary circumstances of County	105
Motor transport, midwives	55	Sanitary inspections	112, 116
nurses	65	Scarlet fever	27, 28, 29
Motor vehicle accidents, deaths due to	23, at 140, 143	Sewerage	108
Movable dwellings	113	Shops Acts, 1950-65	126
Musculo-skeletal system and connective tissue,		Skin and subcutaneous tissue, diseases of	at 140, 143
diseases of	at 140, 143	Smallpox	27, 28, 29
National Assistance Act, 1948—		vaccination against	65, 154
Section 47 (compulsory removal)	104	Smoke abatement	112
Welfare services	93, 167-176	Spastics and epileptics	101
Neo-natal mortality	17, 25, 132, 141	Statistics, vital	15
Neoplasms, malignant and benign	21, at 140, 141	Stillbirths	17, 19, 53, 132
Nephritis and nephrosis	at 140, 143	Suicide and self inflicted injuries	23, at 140, 143
Nervous system and sense organs, other diseases		Swimming baths and pools	113
of	at 140, 142	Symptoms and ill defined conditions	at 140, 143
Night helps	78	Syphilis and its sequelae, deaths from	at 140, 141
Nitrous oxide/oxygen analgesia	57	Tetanus	28
Nurseries	50, 149	immunisation against	67
Nurseries and Child Minders Regulation Act, 1948	52	Training centres (mental health)	84, 164
Nurses Agencies Act, 1957	89	Transferable deaths	23
Nursing equipment, loan of	78	Trilene, administration of	57
Nursing homes	88	Tuberculosis	29
mental, etc.	86	care and after-care	75
Nursing in the home	62, 151-153	death rates	17, 29
Offensive trades	116	deaths	29, at 140, 141
Offices, Shops and Railway Premises Act, 1963	115	notifications	29, 144
Ophthalmia neonatorum	28, 50	vaccination against	75, 159
Oxygen resuscitators	55	Typhoid fever	27, 28, 29, 141
Pail closets	112	Typhus and rickettsioses	28, 141
Paratyphoid fever	27, 28, 29	Ulcer, peptic, deaths from	at 140, 143
Partially-sighted, welfare of	98	Unmarried mothers and their children, care of	49, 148
Perinatal mortality, other causes of	at 140, 143	Vaccination, poliomyelitis	66, 155
Perinatal mortality	17, 26, 132	smallpox	65, 154
Plague	28, 141	tuberculosis	75, 159
Pneumonia	20, 22, at 140, 143	yellow fever	66
Poliomyelitis, acute	27, 28, 29, at 140, 141	Veneral disease, care and after-care	77
vaccination against	66, 155	Violence, deaths from	23, at 140, 143
Population, Administrative County	15, 16	Vital statistics	15
health divisions	32	Voluntary organisations, use of	
urban and rural districts	16, 132	50, 78, 79, 91, 97, 98, 99, 101, 173-176	
Post-natal clinics	37, 145	War Charities Act, 1940	103
Poultry processing, inspection of premises	121	Water supplies	105
Premature infants, care of	47, 147	Welfare foods	50
Prevention of atmospheric pollution	112	Welfare Services	90
Prevention of Damage by Pests Act, 1949	113	accommodation provided	90, 167-176
Prevention of illness, care and after-care	75	Whooping cough	27, 28, 29, at 140, 141
Privy middens	112	immunisation	66, 157
Problem families	79	Wireless Telegraphy Acts, 1949 and 1955	98
Propaganda, prevention of illness	80	Yellow fever, vaccination against	66
Rag Flock and Other Filling Materials Act, 1951	115	Young Persons (Employment) Act, 1964	126