

[Report 1971] / Medical Officer of Health, Lancashire County Council.

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LANCASHIRE COUNTY COUNCIL

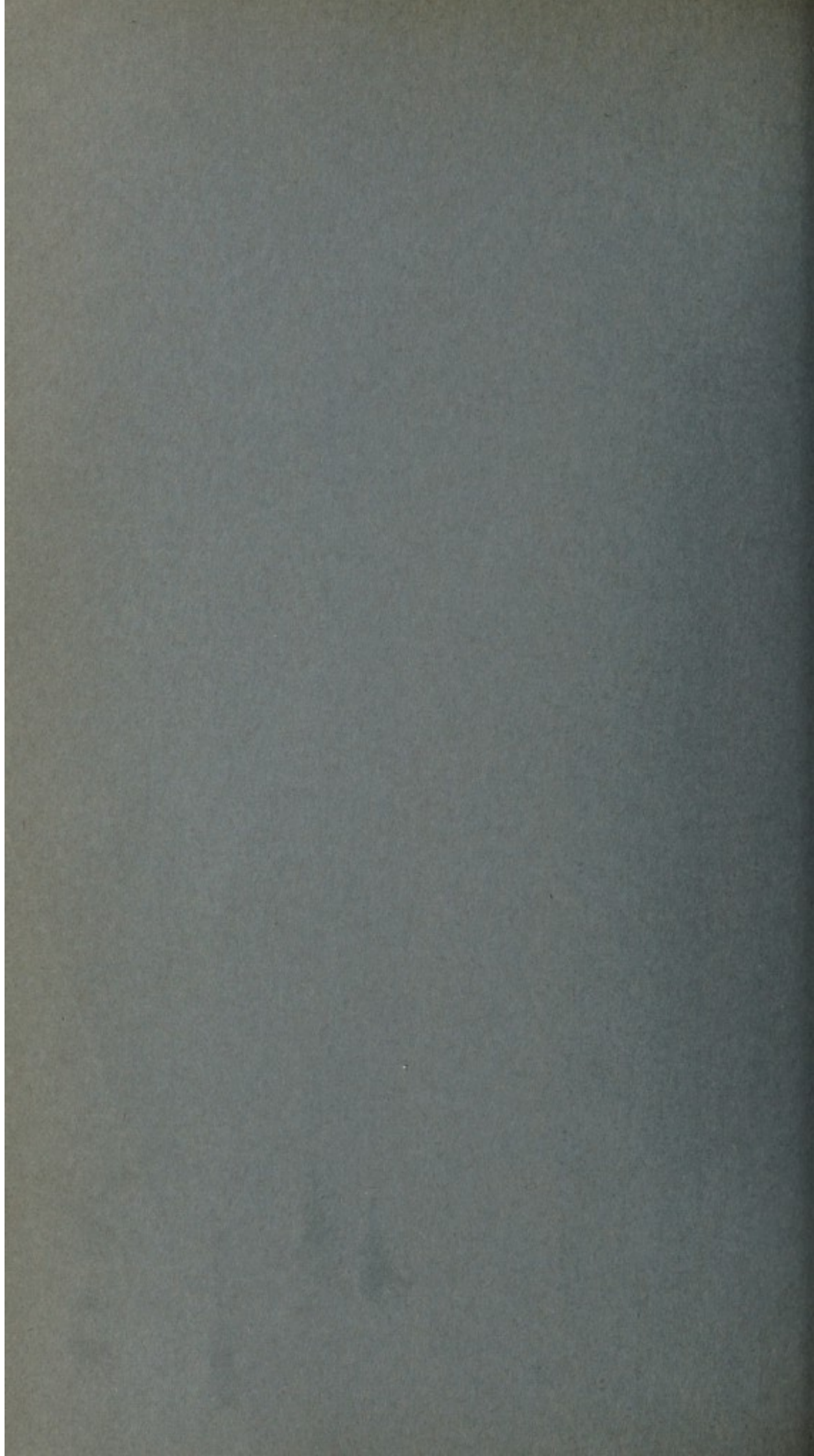
REPORT

OF THE

MEDICAL OFFICER OF HEALTH

FOR THE YEAR 1971

(Presented to the County Council, 2nd November, 1972)





LANCASHIRE COUNTY COUNCIL

REPORT

OF THE

MEDICAL OFFICER OF HEALTH

FOR THE YEAR 1971

(Presented to the County Council, 2nd November, 1972)



TANCAHINE COUNTY COUNCIL

REPORT

OF THE

MEDICAL OFFICER OF HEALTH

FOR THE YEAR 1931

(Presented to the County Council and Members, 1932)

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Vice-Chairman:

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(Jointly with School Health Service)

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* Part-time.

† 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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G. ENTWISLE, L.D.S.

Area Dental Officers:

T. N. ASHALL, L.D.S.
 T. A. M. ASHMAN, L.D.S.
 J. GREENHALGH, L.D.S., R.C.S.
 J. L. HALTON, L.D.S.
 F. M. HEAP, B.D.S.
 J. F. HIGSON, B.D.S.
 A. JONES, L.D.S., R.C.S.

L. A. JONES, L.D.S.
 J. O. LOFTHOUSE, M.Sc., L.D.S., R.C.S.,
 D.D.P.H.
 G. K. TAYLOR, L.D.S., R.C.S.
 P. H. TAYLOR, B.D.S.
 C. R. WHEELER, L.D.S.
 BERTHA D. WORSWICK, B.D.S.

Dental Officers:*Whole-time:*

JOAN M. BULLOUGH, L.D.S.

A. L. CALLAND, L.D.S.

MARGARET CLARK, L.D.S.

MOIRA L. CLARK, B.D.S.

J. B. CLUNAN, B.D.S.

R. A. COLLINS, L.D.S.

W. O. DUTHIE, L.D.S.

A. H. ELLAM, L.D.S., B.D.S., F.D.S., R.C.S.

G. R. FAIRCLOUGH, L.D.S.

R. H. FIELDING, B.D.S.

G. E. FLENLEY, L.D.S., R.C.S.

C. H. FRODSHAM, L.D.S.

H. GAUNT, B.Ch.D.

S. GOLDMAN, L.D.S.

B. J. HALL, B.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. R. LORD, L.D.S.

S. MYSOREKAR, Stat. Exam.

BALAMANI NAIR, B.D.S.

P. NAIR, B.D.S.

W. F. NEWMAN, L.D.S., R.C.S.

K. I. PARTINGTON, B.D.S.

KATHLEEN PLATT, L.D.S.

B. H. REID, L.D.S.

E. P. REYNOLDS, L.D.S., R.C.S.

CATHERINE A. ROBINSON, B.D.S.

MAGGIE ROBINSON, L.D.S.

JOAN A. SOAMES, B.D.S.

C. B. TATTERSALL, L.D.S.

H. W. TOTTY, B.D.S.

S. L. WOOD, 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.

MAVIS BIRKINHEAD, B.D.S.

DOROTHY A. CARSON, L.D.S.

S. A. COLDWELL, B.D.S.

L. B. CORNER, L.D.S., R.C.S.

MARY G. COWPER, L.D.S.

MARJORIE R. CRAVEN, L.D.S.

E. CROSBIE, L.D.S.

P. F. CUNNINGHAM, L.D.S.

R. DANNOUS, Stat. Exam.

ELISABETH A. DURANT, L.D.S.

A. M. FLETT, 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.

J. L. INGLEBY, B.Ch.D., L.D.S., R.C.S.

CLAIRE C. KEARNEY, B.D.S.

H. N. KEHOE, L.D.S., R.C.S.

L. LEVER, L.D.S.

BERYL LEVY, L.D.S.

W. A. LINNELL, L.D.S.

ISOBEL C. MACKIE, L.D.S.

R. MARSHALL, B.D.S.

KATHLEEN R. MAXFIELD, L.D.S.

JEAN MCAULIFFE, B.D.S.

ANNIE H. MCGREGOR, B.D.S.

K. E. METCALF, L.D.S.

IRENE MICHAEL, L.D.S., R.C.S.

H. MUNGUR, L.D.S., R.C.S.

T. K. O'BRIEN, B.D.S.

EVELYN PURSLOW, B.D.S.

D. M. RENNER, L.D.S., R.C.S.

P. D. ROBINSON, L.D.S.

J. S. SELWYN, L.D.S.

A. P. TAYLOR, B.D.S.

FREDA N. WILLIAMS, L.D.S.

N. WOOLLEY, B.D.S.

Chief Administrative Officer:

F. V. ROBINSON

Welfare Services Organiser:

B. C. FOX, C.S.W. (acting)

Ambulance Service Organiser:

A. ORTON, M.B.E.

County Public Health Officers:

A. KEWLEY

B. B. MORGANS

R. K. TAYLOR

T. RILEY

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 F. M. TONGE, 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, 1971

To the Chairman and Members of the Lancashire County Council.

I have the honour to present the eighty-third annual report on the health, sanitary conditions and circumstances of the Administrative County of Lancaster for the year ended 31st December, 1971.

From the 1st January, 1971, responsibility for the welfare services, together with the former children's service passed to the Social Services Committee, although for the whole of the year executive responsibility for the services, other than the children's service, remained with the staff of the health department.

The report is, therefore, presented in the same format as has been usual in previous years, and reference will be found to the whole range of the health and welfare services.

The population of the Administrative County estimated by the Registrar General in mid-1971 was 2,513,400, an increase since last year of 35,840. In the last eight years the County population has risen by a quarter of a million (10.8 per cent.), nearly three times the rate for England and Wales. The new towns of Skelmersdale and Preston/Chorley/Leyland will continue to add to this in future years.

Although no precise figures are available for immigrants from abroad their numbers are relatively small. These people are concentrated mainly in Stretford and the areas around Burnley and to a smaller extent in Ashton-under-Lyne.

The birth and death rates which are above those for England and Wales continue to show a decrease. The number of maternal deaths was five more than last year, details are given on page 26.

Respiratory tuberculosis has steadily declined over the past twenty years but this year there have been more notifications and deaths.

Infectious disease did not constitute a serious problem and the number of measles cases markedly declined during the year, but food poisoning continues to be a hazard. Ninety more cases were notified than in 1970 and there was one death. More education is needed amongst food handlers because the standards of food care are too low.

Routine vaccination against smallpox ceased on the recommendation of the Joint Committee on Vaccination and Immunisation of the Department of Health and Social Security. Vaccination against the disease is still available for health service staff who are at general risk and for persons travelling to infected areas.

Until fluoridation gains acceptance dental caries amongst children and young persons will continue to be greatly in excess of what would be the case if the simple step of fluoridation of the water supplies were undertaken.

Housing standards have continued to improve by means of various Government grants which are available. The Housing Act, 1969, made it possible to improve whole areas of both houses and the environment. Fourteen areas were declared under this heading in 1971.

Smoke control areas now cover approximately 31 per cent. of the Administrative County area. By the end of 1971, 43 more orders for the making of smoke control areas were submitted to the Department of the Environment covering a further 38,600 properties.

Health centre provision is making rapid progress. Ten centres were operating at the end of the year and a further 41 are planned.

Sixty per cent. of the health visiting staff and over 76 per cent. of the district nursing staff are now attached to general practices.

Towards the end of the year the County Health Committee agreed to the establishment of a new post of Director of Nursing Services, thus implementing one of the main recommendations of the Mayston Report on the Management Structure of the Local Authority Nursing Services.

The year saw the extension of the practice of domiciliary midwives delivering their patients in hospital units. The first unit was opened at Hope Hospital, Salford, in 1966 and during 1971 similar schemes were started at the Burnley General Hospital and Fazackerley Hospital, Liverpool.

The Ambulance Service conveyed 1,114,096 cases, a number which is likely to increase with the expansion of day care services in hospitals. To meet the load of non-urgent patients at peak periods a part-time supplementary force would be a solution.

A County Chiropodist was appointed to deal with a continually increasing service. Patients, numbering 61,329 were treated by chiropodists either directly employed by the County Council or by voluntary associations.

The Health Education Service continued to play a most important role in the promotion and teaching of good health habits to all sections of the community. The year was marked by a review of the structure of the service, and investigations into the part to be played in the future by modern media, including video tape recording and television. It is anticipated that the use of these media will be of great benefit in the promotion of good health habits amongst the community.

One very unsatisfactory feature of the health record which is general throughout the country is the increasing incidence of venereal infections, especially gonorrhoea. The table on page 78 shows that there has been a 28 per cent. increase in the number of cases of gonorrhoea in County residents in the last five years, and a 43 per cent. increase in total venereal and non-venereal infections. These figures do not include people treated otherwise than at the special clinics.

Gonorrhoea is particularly dangerous in the female in that she may be infectious and yet show no symptoms, thus increasing the spread of the disease.

The Health Education section of the department endeavoured to promote a knowledge and understanding of venereal diseases among young people and I am glad to acknowledge the help which Dr. P. S. Silver, the Consultant Venereologist in the Bolton area, gives to this aspect of our work.

To all 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, in particular of the Health 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.

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 Conistown 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 Conistown (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.—No changes of boundary affecting the areas of the Administrative County or its constituent districts occurred during 1971. In terms of land and inland water together, exclusive of tidal water and foreshore, the area of the Administrative County at the 31st December, 1971, remained therefore at 1,032,723 acres.

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 133 to 140.

Population of Administrative County.—CENSUS, 1971.—The seventeenth decennial Census of the population of England and Wales, was taken on the 26th April, 1971, and a Preliminary Report was issued by the Registrar General in August, 1971. The figures provided in the Preliminary Report are provisional and relate to the numbers only, by sex, of the population in each local authority area, and are obtained from the summaries made for each enumeration district. The figures are subject to confirmation in the Substantive Census Reports to be published later, but past experience has shown that the final figures are unlikely to differ materially from those issued in the Preliminary Report.

The population of the Administrative County as shown by the Preliminary Report was 2,505,299. Compared with the enumerated population at the Census, 1961, related to the same area, this represents an increase of 307,091 persons or 14.0 per cent. of the 1961 total. The corresponding proportionate increase for England and Wales was 5.4 per cent.

Of the 108 districts in the Administrative County area, 85, including all the rural districts, showed a rise in population since the 1961 Census. In the case of 39 districts the increase amounted to 20 per cent. or more, whilst 11 of these showed increases of 50 per cent. or more. The most outstanding changes were recorded in the urban districts of Skelmersdale and Holland, and Formby and the rural district of Whiston, where the proportionate increases in population over the 1961 figures were 120·5 per cent., 100·3 per cent., and 95·4 per cent. respectively.

Of the 23 districts experiencing a decline in population all but five were limited to a loss of less than 10 per cent., and 13 showed reductions below five per cent.

Those districts experiencing the most marked proportionate increase during the inter-censal period were:—

<i>District</i>	<i>Increase (per cent.)</i>	<i>District</i>	<i>Increase (per cent.)</i>
Skelmersdale & Holland U.D.	120·5	Kirkham U.D.	33·3
Formby U.D.	100·3	Blackrod U.D.	33·1
Whiston R.D.	95·4	Garstang R.D.	32·9
Little Lever U.D.	79·4	Chorley R.D.	32·6
Preesall U.D.	72·5	Golborne U.D.	32·2
Tottington U.D.	72·4	Lunesdale R.D.	30·6
Billinge & Winstanley U.D.	63·8	Thornton Cleveleys U.D.	30·1
Warrington R.D.	63·8	Poulton-le-Fylde U.D.	28·9
Turton U.D.	57·0	West Lancashire R.D.	28·3
Rainford U.D.	55·6	Milnrow U.D.	27·1
Whitefield U.D.	52·0	Ormskirk U.D.	26·7
Wigan R.D.	47·0	Heywood M.B.	26·3
Walton-le-Dale U.D.	41·5	Hindley U.D.	25·3
Royton U.D.	40·4	Tyldesley U.D.	25·0
Longridge U.D.	38·9	Worsley U.D.	23·1
Ashton-in-Makerfield U.D.	36·4	Denton U.D.	22·6
Fulwood U.D.	35·7	Lancaster R.D.	22·1
Blackburn R.D.	35·1	Preston R.D.	20·8
Crompton U.D.	34·0	Leyland U.D.	20·5
Irlam U.D.	33·8		

The pattern presented by the figures available in the Preliminary Report of the Census illustrates further decongestion of the county boroughs, and densely populated urban areas with the major increases in the population being shown in the central and western parts of the County area.

ESTIMATED HOME POPULATIONS.—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 at the 30th June, 1971, was 2,513,400, an increase of 35,840 over the estimate for the previous year, and 8,101 more than the Census, 1971, enumeration made on the 26th April, 1971, to which reference is made above. The *natural* increase in population during the year (i.e., the excess of live births over deaths) was 11,712, an increase of 960 as compared with the corresponding figure for the previous year. In terms of the total increase in population the proportion represented by the natural increase was 32·7 per cent.

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
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
1970	2,477,560	+ 20,280	2,045,210	+ 10,220	432,350	+ 10,060
1971	2,513,400	+ 35,840	2,067,840	+ 22,630	445,560	+ 13,210

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, 1971, distributed among the non-county boroughs and the urban and rural districts:—

	*Area in acres 31.12.1971	Population		Persons per acre	Acres per person
		Census, 1971 (Preliminary)	Estimated home population mid-1971		
Municipal Boroughs (26) ...	125,120	896,671	899,100	7.19	0.14
Urban Districts (68) ...	255,290	1,164,197	1,168,740	4.58	0.22
Rural Districts (14) ...	652,313	444,431	445,560	0.68	1.46
Administrative County (108) ...	1,032,723	2,505,299	2,513,400	2.43	0.41

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

Summary of Vital Statistics, 1889-1971.—The following table compares the County birth and death rates for the year 1971 with the previous year, and with the 82 years, 1889-1970, grouped in quinquennial periods:—

	Per 1,000 of estimated population				Maternal mortality rate per 1,000 total (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—						
1889-1895 (7 years) ...	30.34	18.76	*1.35	—	—	157
1896-1900 ...	27.73	17.24	1.14	—	—	165
1901-1905 ...	26.16	15.32	0.91	0.63	—	145
1906-1910 ...	24.02	14.03	0.86	0.71	—	125
1911-1915 ...	21.72	14.42	0.87	0.90	—	120
1916-1920 ...	18.09	14.47	0.93	1.08	—	95
1921-1925 ...	17.71	12.59	0.71	1.18	—	83
1926-1930 ...	14.56	12.49	0.60	1.36	—	74
1931-1935 ...	13.36	12.58	0.51	1.50	4.81	65
1936-1940 ...	14.05	13.16	0.44	1.60	4.13	58
1941-1945 ...	16.65	12.91	0.41	1.79	2.60	52
1946-1950 ...	17.40	12.58	0.35	1.87	1.17	41
1951-1955 ...	14.47	12.77	0.19	2.02	0.99	29
1956-1960 ...	16.22	12.73	0.09	2.10	0.51	25
1961-1965 ...	18.18	12.63	0.05	2.13	0.33	22
1966-1970 ...	17.43	12.53	0.03	2.24	0.19	20
Year—						
1970 ...	16.86	12.52	0.02	2.30	0.14	19.8
1971 ...	16.73	12.07	0.02	2.21	0.26	17.7
Increase or decrease in 1971 on—						
Mean of 5 years, 1966-70	-0.70	-0.46	-0.01	-0.03	+0.07	-2.0
Previous year	-0.13	-0.45	—	-0.09	+0.12	-2.1

*Six 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 1971 relating to mothers and infants are set out below:—

Total live births	42,045
Live birth rate per 1,000 population—crude	16.73
Live birth rate per 1,000 population—adjusted	17.06
Proportion (per cent.) of illegitimate live births to total live births ...	6.71
Total stillbirths	605
Stillbirth rate per 1,000 <i>total</i> births	14.2
Total live births and stillbirths	42,650
Total infant deaths (under one year)	744
Infant mortality rate per 1,000 live births	17.7
Mortality rate of legitimate infants per 1,000 legitimate live births	17.1
Mortality rate of illegitimate infants per 1,000 illegitimate live births	26.6
Neo-natal mortality (deaths under four weeks) rate per 1,000 live births	11.7
Early neo-natal mortality (deaths under one week) rate per 1,000 live births	10.3
Perinatal mortality (stillbirths and deaths under one week) rate per 1,000 <i>total</i> births	24.4
Total maternal deaths (including deaths from abortion)	11
Maternal mortality rate per 1,000 <i>total</i> births	0.26

Births and Birth Rates.—**LIVE BIRTHS.**—The number of infants born alive in 1971 to mothers normally resident in the Administrative County area was 42,045. This was 278 more than the figure recorded in 1970. 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
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
1970	17,912	16,874	34,786	3,633	3,348	6,981	21,545	20,222	41,767
1971	17,811	17,001	34,812	3,728	3,505	7,233	21,539	20,506	42,045

During the period covered by the above table the sex ratio of infants born alive has varied within the limits of 1,051 and 1,078 males for each 1,000 females. In 1971 the corresponding proportion of males was 1,065.

The crude live birth rate for the Administrative County declined in 1971 for the seventh successive year. At 16.73 per 1,000 of the estimated home population, the rate was 0.13 per 1,000 below that for 1970, and 0.70 per 1,000 lower than the average for the five years 1966-70.

The number of live births assigned to each County district and the corresponding crude and adjusted rates are given in Table 3, pages 133 to 140. 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 52 years are given in Table 1, page 130.

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 132. 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 the years since 1967, which are based on occurrences.

	Live birth rate per 1,000 of the estimated home population									
	1962	1963	1964	1965	1966	1967	1968	1969	1970	1971
Urban Districts:										
Crude ...	18.29	18.27	18.64	18.08	17.88	17.56	17.38	16.87	17.01	16.83
Adjusted ...	18.29	18.82	19.20	18.62	18.41	18.26	18.25	17.55	17.69	17.51
Rural Districts:										
Crude ...	18.23	18.34	18.87	18.83	17.74	17.48	17.03	16.96	16.15	16.23
Adjusted ...	18.60	18.16	18.68	18.07	16.85	16.43	16.01	15.95	15.18	15.26
Administrative County										
Crude ...	18.28	18.28	18.68	18.20	17.86	17.55	17.32	16.89	16.86	16.73
Adjusted ...	18.28	18.83	19.05	18.56	18.21	18.07	17.84	17.23	17.20	17.06
England and Wales ...	18.0	18.2	18.5	18.1	17.7	17.2	16.9	16.3	16.0	*16.0

*Provisional figure.

Illegitimate Live Births.—Particulars of the illegitimate live births which occurred during 1971 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
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
1970	2,840	— 2	— 0.1	6.80
1971	2,821	— 19	— 0.7	6.71

The number of illegitimate live births recorded in 1971 was 19 less than in the previous year, and for the second successive year it is possible to comment upon a reduction in the proportion of the total live births represented by illegitimate live births of 0.09 per cent. The proportion was nevertheless above the average for the five years 1966-70 by 0.12 per cent.

STILLBIRTHS.—The 605 stillbirths assigned to the Administrative County in 1971 were 17 fewer than in the previous year. The stillbirth rate of 14.2 per 1,000 total (live and still) births was the lowest on record, being 0.5 per 1,000 below the previous low record in 1970. The corresponding provisional rate for England and Wales in 1971 was 12.5 per 1,000 total births. Expressed in terms of home population, the stillbirth rate for the Administrative County in 1971, was 0.24 per 1,000 and that for the whole country, 0.20.

The stillbirth rate for each County district is given in Table 3, pages 133 to 140.

Deaths and Death Rates.—The number of deaths from all causes assigned to the Administrative County in 1971 was 30,333, a decrease of 682 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
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
1970	13,326	12,863	26,189	2,466	2,360	4,826	15,792	15,223	31,015
1971	12,968	12,591	25,559	2,432	2,342	4,774	15,400	14,933	30,333

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-	
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
1970	828	142	150	230	234	641	1,973	5,157	8,974	12,686	31,015
1971	744	129	153	255	249	659	1,968	4,904	8,598	12,674	30,333

Of the total deaths 70.1 per cent. occurred at ages over 64 years and 41.8 per cent. at ages over 74 years. Of females who died during 1971, more than three-quarters (77.2 per cent.) had attained the age of 75 years and more than half (52.4 per cent.) had attained the age of 65 years. The corresponding proportions for males were lower at 63.3 per cent. and 31.5 per cent. respectively.

There were 873 deaths of children under five years of age, 97 fewer than in the previous year, with the mortality rate of 4.05 per 1,000 children within the age group being the lowest ever recorded. Although the 153 deaths of children in the age group 5-14 years in 1971 were three more than the number recorded in 1970, the mortality rate of 0.36 per 1,000 children within the age group was lower by 0.01 per 1,000 than the corresponding rate for the previous year.

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

The 30,333 deaths assigned to the County in 1971 were equivalent to a crude rate of 12.07 per 1,000 of the estimated home population. This rate was 0.45 per 1,000 below the corresponding rate for the previous year, and 0.46 per 1,000 below the rate for the preceding five years, 1966-70.

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 132, whilst the crude and adjusted rates are shown in Table 3, pages 133 to 140. 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									
	1962	1963	1964	1965	1966	1967	1968	1969	1970	1971
Urban Districts:										
Crude ...	12.89	12.77	12.13	12.43	12.97	12.38	12.49	12.66	12.81	12.36
Adjusted ...	14.44	14.05	13.34	13.30	13.74	13.24	13.49	13.67	13.83	13.35
Rural Districts:										
Crude ...	12.64	12.22	11.88	11.44	11.50	11.16	11.23	11.41	11.16	10.71
Adjusted ...	13.02	11.98	12.36	11.44	11.85	11.83	12.13	12.10	12.05	11.57
Administrative County										
Crude ...	12.85	12.69	12.09	12.27	12.73	12.18	12.28	12.44	12.52	12.07
Adjusted ...	14.27	13.83	13.18	13.01	13.49	13.03	13.26	13.44	13.64	13.15
England and Wales ...	11.9	12.2	11.3	11.5	11.7	11.2	11.9	11.9	11.7	*11.6

*Provisional figure

As a matter of interest the crude death rates for each of the last 52 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 130.

CAUSES OF DEATH.—A classified statement of the causes of death in 1971, by age group and sex, for the Administrative County and the aggregates of urban and rural districts is given in Table 5, pages 142 to 144. Details of the deaths by cause group in the various County districts are given in Table 4 (following page 140) and total deaths by sex are shown for each district in Table 3, pages 133 to 140.

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 1971 is shown in the following table:—

Cause of death	No. of deaths	Percentage of total deaths
Heart disease (all forms) ...	10,408	34.3
Cancer (including leukaemia) ...	5,564	18.3
Cerebrovascular disease ...	4,417	14.6
Pneumonia ...	1,924	6.3
Bronchitis, emphysema ...	1,588	5.2
Other diseases of the circulatory system ...	1,543	5.1
Violence (including accidents, suicide and all other external causes) ...	1,354	4.5

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 1971 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
1970	420	0.17	504	0.20	7,784	3.14	1,621	0.65	10,329	4.17
1971	403	0.16	441	0.18	8,032	3.20	1,532	0.61	10,408	4.14

There was an increase of 79 in the number of deaths from all forms of heart disease assigned to the Administrative County in 1971. The 10,408 deaths which represent 34.3 per cent. of all deaths were equivalent to a mortality rate of 4.14 per 1,000 of the estimated home population, 0.03 per 1,000 below the corresponding rate for the previous year. 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 1971.

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
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
1960	9,429	4.33	1970	10,329	4.17
1961	9,905	4.49	1971	10,408	4.14

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 1966–71, 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 haematopoietic tissue	Total— all forms
		Stomach	Lung, bronchus	Breast	Uterus			
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
1970	M.	408	1,283	6	—	63	659	3,135
	F.	295	237	480	201	72	722	2,563
	T.	703	1,520	486	201	135	1,381	5,698
1971	M.	378	1,187	—	—	81	675	2,966
	F.	288	222	494	204	74	719	2,568
	T.	666	1,409	494	204	155	1,394	5,564

*Since 1969, the following have been excluded from this group:—

Malignant neoplasm—	1969			1970			1971		
	Male	Female	Total	Male	Female	Total	Male	Female	Total
Buccal cavity and pharynx ...	48	43	91	44	45	89	52	40	92
Oesophagus ...	98	74	172	102	71	173	86	84	170
Intestine ...	349	467	816	363	433	796	331	439	770
Larynx ...	25	8	33	47	7	54	26	4	30
Prostate ...	200	—	200	160	—	160	180	—	180

There were 134 fewer deaths from all forms of cancer in the Administrative County in 1971 than in the previous year. The 5,564 deaths were equivalent to a mortality rate of 2.21 per 1,000 of the estimated home population, being lower by 0.09 and 0.03 per 1,000 respectively than the corresponding rates for 1970, and the five years 1966–70. The corresponding provisional rate for England and Wales in 1971 was 2.39 per 1,000.

The number of deaths from leukaemia and cancer of the prostate at 155 and 180 were greater in 1971 by 20 than the corresponding totals noted in the previous year, with a resultant increase of 0.01 per 1,000 in each case in the mortality rates to 0.06 and 0.07 respectively per 1,000 of the estimated home population. Although the 1,394 deaths from other malignant neoplasms were 13 more than in 1970, there was a fall of 0.01 in the mortality rate to 0.55 per 1,000 of the estimated home population. The 494 deaths from cancer of the breast in 1971, were eight more than in the previous year, but the mortality rate remained unchanged at 0.20 per 1,000 of the estimated home population. Increases of three in the number of deaths from cancer of the uterus and of the buccal cavity and pharynx to 204 and 92 resulted in no change in the respective mortality rates of 0.08 and 0.04 per 1,000.

Deaths from cancer of the lung, stomach, intestine, larynx and oesophagus were all lower in 1971 than in the previous year. The 1,409 deaths from cancer of the lung, bronchus were 111 fewer than in 1970. This is the first year since 1958 that it has been possible to make this comment. There was a subsequent fall in the mortality rate of 0.05 to 0.56 per 1,000 of the estimated home population. The corresponding provisional rate for England and Wales in 1971 was 0.63 per 1,000. The 666 deaths from cancer of the stomach were 37 fewer than in 1970 with a fall of 0.02 to 0.26 per 1,000 in the mortality rate, whilst the 770 and 30 deaths from cancer of the intestine and of the larynx were 26 and 24 fewer than the respective totals for the previous year with a fall of 0.01 in each case in the mortality rate to 0.31 and 0.01 per 1,000. Although three fewer deaths were ascribed to cancer of the oesophagus, the 170 deaths from this cause in 1971 resulted in an unchanged mortality rate of 0.07 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
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
1970	2.37	1.98	2.30	2.36
1971	2.29	1.84	2.21	* 2.39

*Provisional figure.

CEREBROVASCULAR DISEASE.—Deaths from this cause group which, in 1971, represented 14.6 per cent. of the total deaths from all causes, increased by 30 to 4,417 as compared with the previous year. The mortality rate of 1.76 per 1,000 of the estimated home population was lower by 0.01 per 1,000 than the corresponding rate for 1970. Persons aged 65 years and over accounted for 84.6 per cent. of deaths from cerebrovascular disease.

PNEUMONIA.—The 1,924 deaths from pneumonia in 1971, which were assigned to the Administrative County were 264 fewer than in the previous year. The resultant mortality rate of 0.77 per 1,000 of the estimated home population was 0.11 per 1,000 lower than in 1970. Persons aged 65 years and over accounted for over 82 per cent. of the number of deaths from pneumonia, whilst a further 4.2 per cent. were infants under one year of age.

BRONCHITIS, EMPHYSEMA.—For the third year in succession there was a reduction in the number of deaths classified to this cause group and assigned to the Administrative County in 1971. The 1,588 deaths so recorded were 57 fewer than in 1970, and 158 below the average for the preceding five years 1966–70. The mortality rate for 1971, at 0.63 per 1,000 of the estimated home population was the lowest recorded rate since 1939. Over 74 per cent. of the deaths from bronchitis, emphysema were of persons aged 65 years and over.

OTHER CIRCULATORY DISEASES.—There were 1,543 deaths classified to other circulatory diseases in 1971, 41 more than in the previous year. The resultant mortality rate was 0.61 per 1,000 of the estimated home population. Persons aged 65 years and over accounted for 87 per cent. of the deaths from this cause group during the year.

VIOLENCE.—There was an increase of 98 in the number of deaths ascribed to all forms of violence and assigned to the Administrative County in 1971. The 1,354 deaths were classified into the four groups shown in the following table, in which corresponding figures for the previous three years are also given, together with the resultant death rates 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
1970	356	0.14	635	0.26	177	0.07	88	0.04	1,256	0.51
1971	379	0.15	689	0.27	192	0.08	94	0.04	1,354	0.54

Mortality from all forms of violence in the Administrative County in 1971 corresponded to a rate of 0.54 per 1,000 of the estimated home population, 0.03 per 1,000 higher than the corresponding rate in the previous year.

In each of the four groups in the above table there was an increase in the number of deaths recorded in 1971 compared with the previous year. The highest proportionate increase was in the group all other accidents where the 689 deaths were 54 more than in 1970 with a rise in the mortality rate of 0.01 per 1,000 to 0.27 per 1,000 of the estimated home population. The 192 deaths from suicide and self-inflicted injuries were 15 more than in 1970, and resulted in a mortality rate of 0.08 per 1,000 of the estimated home population. Deaths from all other external causes in 1971, numbered 94 as compared with 88 in the previous year resulting in a mortality rate which remained unchanged at 0.04 per 1,000 of the estimated home population.

Whilst an examination of the table will show that there is a fluctuation each year in the number of deaths ascribed to the three cause groups already mentioned, it will be seen that deaths from motor vehicle accidents show a consistent increase each year. The 379 deaths in 1971 were 23 more than in the previous year, and the mortality rate of 0.15 per 1,000 of the estimated home population was higher by 0.01 per 1,000 than the corresponding rate for 1970.

TRANSFERABLE DEATHS.—During the year under review, the following transfers were made—13,359 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; 9,161 deaths occurring in County districts of persons not belonging thereto were transferred to the areas to which they belonged.

Maternal Mortality.—There were 11 deaths classified to maternal causes in 1971 and assigned by the Registrar General to the Administrative County. This was five more than the number recorded in the previous year, and three more than the average for the five years 1966–70. Of the 11 deaths in 1971, three were ascribed to abortion whilst the remaining eight were due to other complications of pregnancy, childbirth and the puerperium. The maternal mortality rate for 1971 was 0.26 per 1,000 total (live and still) births. Particulars of maternal mortality in the Administrative County and England and Wales in 1971 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
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
1970	42,389	6	0.14	0.18
1971	42,650	11	0.26	*0.17

*Provisional figure.

The causes of the 11 maternal deaths in 1971 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	
	1970	1971
<i>Complications of pregnancy—</i>		
Ectopic pregnancy (631)	1	1
Other complications of pregnancy (634)	1	1
<i>Urinary infections and toxæmias of pregnancy and the puerperium—</i>		
Pre-eclampsia, eclampsia and toxæmia unspecified (637)	1	—
Other toxæmias of pregnancy and the puerperium (639)	—	1
<i>Abortion—</i>		
Abortion induced for medical indications (640)	1	1
Spontaneous abortion (643)	—	1
Abortion not specified as induced or spontaneous (644)	—	1
<i>Delivery—</i>		
Delivery complicated by placenta prævia or antepartum hæmorrhage (651)	1	1
Delivery complicated by other postpartum hæmorrhage (653)	—	1
Delivery complicated by prolonged labour of other origin (657)	—	1
Delivery with other obstetrical trauma (660)	1	—
Delivery with other complications (661)	—	1
Delivery with laceration of perineum, without mention of other laceration (659)	—	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.—The 744 deaths of infants under one year of age assigned to the Administrative County in 1971 constituted a new low record being 59 fewer than the previous low record noted in 1969. The resultant mortality rate of 17.7 per 1,000 live births also constituted a new low record, being 1.6 per 1,000 below the 1969 rate, and 2.0 per 1,000 below the average for the five years 1966–70. Of the total deaths at all ages, the 744 infant deaths amounted to 2.5 per cent.

The following table shows the County, urban and rural infant death rates for 1971 and the preceding 10 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										
	1961	1962	1963	1964	1965	1966	1967	1968	1969	1970	1971
Urban Districts	24.9	24.9	24.1	21.2	20.0	20.5	20.2	19.9	19.2	20.7	18.0
Rural Districts	19.4	19.1	18.8	22.3	18.9	16.6	19.0	17.0	20.0	15.5	16.0
Administrative County	24.1	24.0	23.3	21.4	19.8	19.9	20.0	19.4	19.3	19.8	17.7
England and Wales	21.4	21.7	21.1	19.9	19.0	19.0	18.3	18.3	18.0	18.2	*17.5

*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 130.

MORTALITY OF ILLEGITIMATE INFANTS.—The following table shows the differential incidence of mortality during 1971 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
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
1970	20.3	26.2	20.7	14.7	31.1	15.5	19.3	26.8	19.8
1971	17.3	27.5	18.0	15.8	20.3	16.0	17.1	26.6	17.7

NEO-NATAL MORTALITY.—There were 494 deaths of infants at ages under four weeks—76 fewer than in 1970. The mortality rate of 11.7 per 1,000 live births represented a new low record for the Administrative County, being 1.4 per 1,000 below the previous low record noted in 1969, and 1.9 per 1,000 below the average for the five years 1966–70. The proportion of infant deaths represented by neo-natal deaths was 66.4 per cent.

The neo-natal mortality rates for the Administrative County and the aggregates of the urban and rural districts for 1971 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										
	1961	1962	1963	1964	1965	1966	1967	1968	1969	1970	1971
Urban Districts	17.5	17.8	16.6	15.2	13.6	14.4	14.3	13.3	12.6	14.2	11.8
Rural Districts	16.1	14.1	13.0	16.8	13.1	10.8	14.3	12.8	15.1	11.0	11.3
Administrative County	17.3	17.2	16.1	15.4	13.5	13.8	14.3	13.2	13.1	13.6	11.7
England and Wales	15.3	15.1	14.3	13.8	13.0	12.9	12.5	12.4	12.0	12.3	*11.6

*Provisional figure.

EARLY NEO-NATAL DEATHS.—There were 435 deaths of infants during the first week of life in 1971, and the resultant mortality rate for the Administrative County of 10.3 per 1,000 live births constituted a new low record being 0.9 per 1,000 below the previous low noted in 1968. Early neo-natal deaths accounted for 58.5 per cent. of the total of infant deaths, and 88.1 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 142, 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 435 early neo-natal, 494 neo-natal and 744 infant deaths registered in 1971 and assigned by the Registrar General to the Administrative County, the local analyses show respective totals of 431, 487 and 718. 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 ...	—	—	3
Measles ...	—	—	—
Acute respiratory infections (except influenza) ...	—	1	41
Influenza ...	—	—	2
Pneumonia ...	8	14	74
Other diseases of respiratory system ...	1	2	11
Gastro-enteritis and diarrhoea ...	—	4	17
Congenital anomalies ...	71	100	139
Anencephalus ...	10	10	10
Spina bifida ...	8	16	20
Congenital hydrocephalus ...	4	5	5
Other congenital anomalies of nervous system ...	4	6	8
Congenital anomalies of circulatory system ...	28	40	66
Congenital anomalies of respiratory system ...	—	—	—
Congenital anomalies of digestive system ...	2	3	8
Congenital anomalies of genito-urinary system ...	1	2	2
Other and unspecified congenital anomalies ...	14	18	20
Certain causes of perinatal mortality ...	332	338	341
Maternal conditions unrelated to pregnancy ...	1	2	2
Toxaemias of pregnancy ...	2	2	2
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 ...	2	2	2
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 ...	27	27	27
Conditions of placenta ...	3	3	3
Conditions of umbilical cord ...	2	2	2
Birth injury without mention of cause ...	27	28	28
Haemolytic disease of newborn ...	9	10	10
Anoxic and hypoxic conditions not elsewhere classified ...	156	157	158
Other conditions of foetus and newborn ...	102	104	106
All other causes ...	19	29	90
TOTAL—all causes ...	431	487	718

Particulars of the registered infant, neo-natal and early neo-natal deaths and death rates for each County district for the year 1971 are given in Table 3, pages 133 to 140.

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 605 stillbirths and 435 early neo-natal deaths in 1971, together represented a perinatal mortality rate of 24.4 per 1,000 total births, the lowest on record, 1.6 per 1,000 below the previous lowest rate in 1970, and 2.9 per 1,000 lower than the average for the preceding five years. The corresponding provisional rate for England and Wales for 1970 was 22.3 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 1971.

Smallpox.—No case of smallpox was notified in the County area during 1971. This was the eighteenth successive year in which the area has been free from this disease.

Diphtheria.—There were no cases of diphtheria notified in the Administrative County area during 1971.

Whooping Cough.—The 1,220 cases of whooping cough notified during the year were 406 below the number recorded during 1970, and five below the average for the preceding five years, 1966–70. The resultant attack rate for 1971 of 0.49 per 1,000 of the estimated home population was 0.17 per 1,000 lower than the corresponding rate for the previous year. There were no deaths from whooping cough during 1971.

Measles (excluding rubella).—Following the considerable rise in notifications of measles in the Administrative County area in 1970, the number of cases during the year now under report declined dramatically to a low record of 5,031, with an attack rate of 2.00 per 1,000 of the estimated home population.

Prior to the introduction of vaccination against this disease in May, 1968, it was usual to make reference to an annual average of 20,000 notified cases. The numbers of cases reported in the three years since the extension of vaccination to all susceptible children in December, 1968, have been—1969 – 6,477; 1970 – 23,683 and 1971 – 5,031. The high incidence of cases of measles during 1970, would now appear to have been due to the inability to maintain the full vaccination programme between March, 1969 and March, 1970, during which time adequate supplies of vaccine were not available.

There were no deaths from measles during 1971.

Acute Poliomyelitis.—There was no case of poliomyelitis notified in the Administrative County area during 1971. No deaths were ascribed to poliomyelitis during the year.

Acute Meningitis.—The 192 cases of acute meningitis notified during 1971 were 146 more than in the previous year, and the attack rate of 0.08 per 1,000 of the estimated home population was consequently higher by 0.06 per 1,000 than in 1970. According to information supplied by local medical officers of health, six deaths were classified to this cause during the year.

Acute encephalitis.—The three cases of acute encephalitis notified during the year were four less than in 1970. Two cases were infective and one post-infectious. Local medical officers of health reported six deaths as being classified to this cause during 1971.

Scarlet fever.—There was a decline in the number of cases of scarlet fever notified during 1971, to 967—49 fewer than in the previous year. The resultant attack rate of 0.39 per 1,000 of the estimated home population was 0.02 per 1,000 below the rate for the previous year and 0.15 per 1,000 below the average for the preceding five years 1966–70.

Typhoid and paratyphoid fevers.—These were five cases of typhoid fever and six of paratyphoid fever notified in the Administrative County area during 1971, two less in total than in the previous year. No deaths were reported.

Dysentery.—Although the 560 cases of dysentery which were notified during 1971 were 87 more than in the previous year, they were nevertheless 746 below the average for the five years 1966–70. The attack rate for 1971 was 0.22 per 1,000 of the estimated home population. One death was ascribed to dysentery during the year.

Infective jaundice.—The 612 cases of infective jaundice notified in the area of the Administrative County during 1971 were equivalent to an attack rate of 0.24 per 1,000 of the estimated home population and were 1,173 and 0.48 per 1,000 below the respective totals for 1970. According to information reported locally by medical officers of health, there were nine deaths from this cause during 1971.

	Anthrax			Ophthalmia neonatorum		
	M.	F.	T.	M.	F.	T.
Administrative County	2	—	2	1	11	12

There were no notifications made in respect of the following diseases in the area of the Administrative County during 1971:—

Acute poliomyelitis—paralytic	Plague
Acute poliomyelitis—non paralytic	Relapsing fever
Cholera	Smallpox
Diphtheria	Tetanus
Malaria	Typhus
Yellow fever	

Below, comparison is made of the numbers of notifications of the principal infectious diseases during 1971 and the preceding 10 years:—

Infectious disease	1961	1962	1963	1964	1965	1966	1967	1968	1969	1970	1971
Measles (excluding rubella) ...	23,773	13,346	27,631	22,767	19,055	23,283	17,102	15,699	6,477	23,683	5,031
Infective jaundice ...	—	—	—	—	—	—	—	—	1,448*	1,785	612
Whooping cough ...	982	260	2,113	1,673	588	1,091	2,179	802	431	1,626	1,220
Scarlet fever ...	1,297	775	704	1,257	2,217	1,814	1,284	1,028	1,296	1,016	967
Dysentery ...	1,622	2,991	1,640	1,757	1,141	924	2,405	1,660	1,068	473	560
Diphtheria ...	1	1	—	—	—	—	—	8	—	—	—
Acute poliomyelitis ...	103	5	7	3	12	3	1	2	1	—	—
Acute encephalitis ...	10	5	9	6	7	5	7	10	9	7	3
Typhoid and paratyphoid fevers ...	33	9	12	24	237	16	5	4	5	13	11
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 1971 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)
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
1970	373	89	462	0.15	0.04	0.19
1971	401	93	494	0.16	0.04	0.20

The 494 cases of tuberculosis notified in 1971 in the Administrative County were 32 more than the number recorded in the previous year. The attack rate of the disease at 0.20 per 1,000 of the estimated home population was consequently greater by 0.01 per 1,000 than the rate for 1970, which constituted a low record. The incidence rates for the Administrative County were again below the corresponding provisional rates for England and Wales in 1971, 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 1971, are analysed by sex/age group and site classification in Table 6, page 145.

MORTALITY.—There was an increase of seven in the number of deaths from all forms of tuberculosis in 1971, compared with the previous year. The 69 deaths were equivalent to a mortality rate of 0.27 per 10,000 of the estimated home population, which, although higher by 0.02 per 10,000 than the low record noted in 1970, was nevertheless 0.11 per 10,000 below the average for the previous five years 1966–70. The provisional rate for deaths from all forms of tuberculosis in England and Wales in 1971 was 0.29 per 10,000 of the estimated home population.

In the table below the number of tuberculous deaths registered during 1971 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 from 1968. This is due to the fact that all deaths from "late effects" have in the past three 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)
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
1970	36	26	62	0.15	0.10	0.25
1971	45	*24	69	0.18	*0.10	0.27

*Included in the 24 deaths from other tuberculosis are 13 ascribed to "late effects of tuberculosis", equivalent to a death rate of 0.05 per 10,000 of the population.

Table 5, pages 142 to 144, shows the distribution by sex and age group of the deaths from tuberculosis assigned in 1971 to the Administrative County and to the aggregated urban and rural districts.

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

REVISED AS AT 31/12/71

NON-COUNTY BOROUGHS INDICATED *

Scale: 8 miles to 1 inch.

HEALTH DIVISIONS

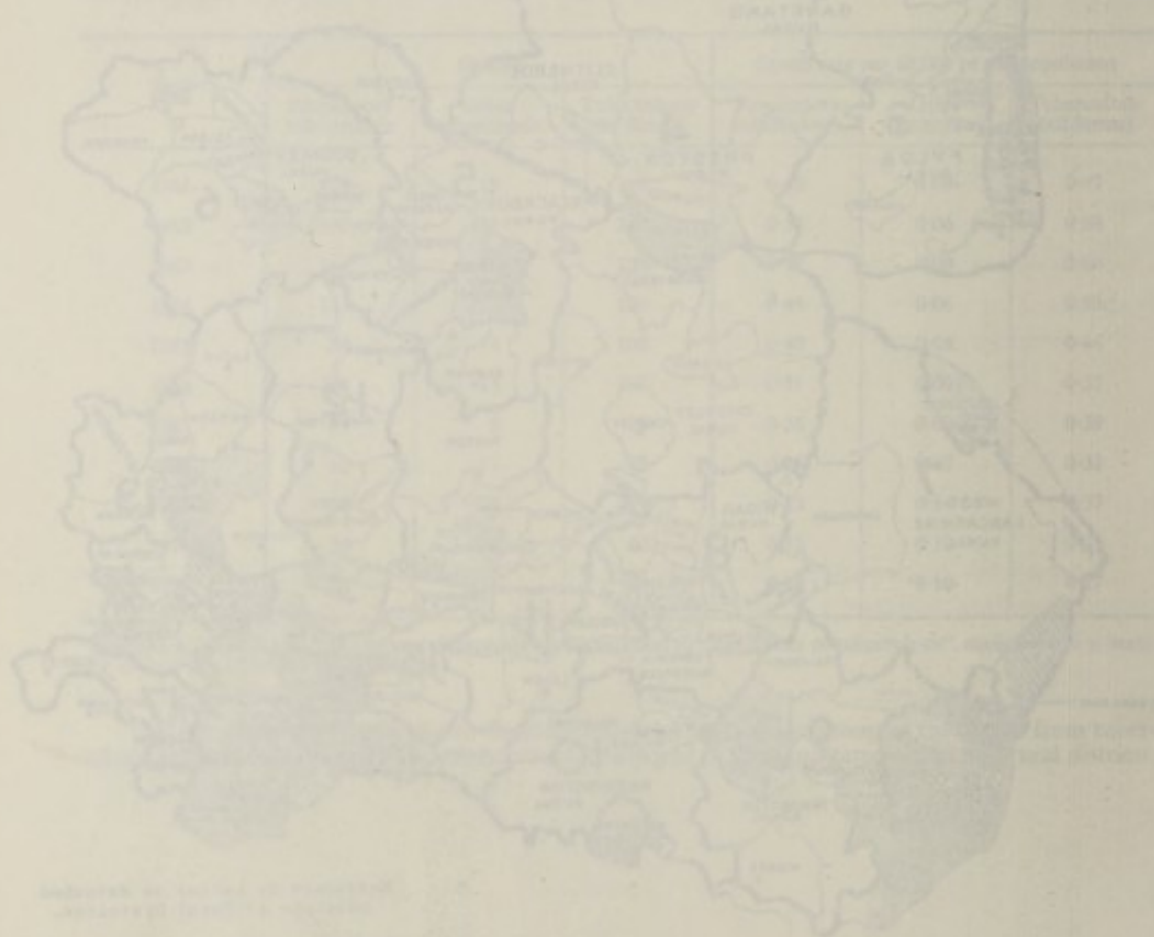
COUNTY OF LANCASTER

The following table shows the population of the health divisions of the County of Lancaster for the year 1901. The population of the County as a whole was 140,000. The population of the health divisions is given in the following table:

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Population of health divisions

Area of health divisions

HEALTH DIVISIONS

1901

GENERAL ADMINISTRATION

Under the provisions of the National Health Service Act, 1946, as amended by the Health Services and Public Health Act, 1968, the County Council is the local health authority for the Administrative County area. Health centres, midwifery, health visiting, district nursing, immunisation and vaccination and ambulance services are provided. In addition there are arrangements for the prevention of illness, care and after-care of a medical nature and the medical aspects of the care of mothers and young children.

The County Health Committee comprises members of the County Council together with representatives of the County District Council Associations, the Lancashire Executive Council and the Lancashire County Local Medical Committee and voluntary associations.

As a result of the Local Authority Social Services Act, 1970, a new Social Services Committee was established which became responsible for the former children's service, the home help service, the non-medical aspects of the care of nursing mothers and young children, the welfare of the elderly and physically handicapped, the regulation of day nurseries and child minders, welfare of the mentally ill and mentally disordered who are outside the hospital services.

Although this new Social Services Committee became operative on the 1st January, 1971, the executive responsibility for the services, with the exception of the children's service, remained with the County Medical Officer and his staff throughout the year. For this reason the report contains details of the services provided.

The Director of Social Services took up his appointment on the 1st October, 1971, and was concerned with establishing the management structure of the Social Services Department which assumed full responsibility for the whole range of functions transferred to the Social Services Committee on the 1st April, 1972.

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.

Social Services.—From the 1st January, 1971, Area Social Services (Welfare) Committees were constituted from members of the existing 17 Divisional Health Committees in order to administer those services which were transferred from the Health Committee to the Social Services Committee. The Divisional Medical Officer continued to act as the senior executive officer and adviser to the Area Social Services (Welfare) Committee up to the transfer of functions to the Social Services Department on the 1st April, 1972.

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 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 schemes of delegation, insofar as they relate to those functions which were transferred to the Social Services Committee, were revoked on the 1st July, 1972.

The division of the Administrative County into health divisions and delegate districts for the purposes of administration of the health services is as shown on the map here inserted, whilst in the following statement the acreages, the Preliminary Census, 1971, populations and the Registrar General's estimated mid-1971 populations of the various areas as constituted at the 31st December, 1971, are set forth.

Health Division No.	Sanitary district	Area in acres at 31st Dec., 1971	Population	
			Preliminary Census, 1971 (areas as constituted at 31st Dec., 1971)	Estimated home, mid-1971
1	Dalton-in-Furness U.D.	8,022	11,217	11,320
	Grange U.D.	1,883	3,627	3,520
	Ulverston U.D.	3,206	11,888	12,010
	North Lonsdale R.D.	127,448	16,821	16,560
		140,559	43,553	43,410
2	Lancaster M.B.	5,101	49,525	49,300
	Morecambe and Heysham M.B.	3,796	41,863	41,620
	Carnforth U.D.	1,504	4,258	4,320
	Lancaster R.D.	52,982	17,091	17,130
	Lunesdale R.D.	76,267	10,739	10,660
		139,650	123,476	123,030
3	Fleetwood M.B.	2,565	28,584	29,270
	Lytham St. Annes M.B.	5,814	40,089	40,180
	Kirkham U.D.	939	6,422	6,560
	Poulton-le-Fylde U.D.	2,272	16,401	16,260
	Preesall U.D.	3,277	4,066	4,150
	Thornton Cleveleys U.D.	3,358	26,869	26,910
	Fylde R.D.	33,264	20,251	20,160
	† Garstang R.D. (part)	14,535	4,983	5,000
		66,024	147,665	148,490
4	Chorley M.B.	4,283	31,609	31,470
	Adlington U.D.	1,062	4,991	5,010
	Fulwood U.D.	3,164	21,741	22,330
	Leyland U.D.	3,804	23,391	23,370
	Longridge U.D.	3,285	6,507	6,590
	Walton-le-Dale U.D.	4,733	26,841	26,780
	Withnell U.D.	4,186	3,217	3,200
	Chorley R.D.	41,117	37,879	38,110
	† Clitheroe R.D. (part)	19,803	2,568	2,670
	† Garstang R.D. (part)	42,956	14,135	14,170
	Preston R.D.	49,754	52,660	53,200
		178,147	225,539	226,900
5	Accrington M.B.	4,418	36,838	36,870
	Clitheroe M.B.	2,386	13,191	13,320
	Darwen M.B.	5,959	28,880	29,110
	Church U.D.	528	5,310	5,310
	Clayton-le-Moors U.D.	1,060	6,760	6,780
	Great Harwood U.D.	2,868	11,000	11,000
	Oswaldtwistle U.D.	4,885	14,015	14,000
	Rishton U.D.	2,879	6,010	6,050
	Blackburn R.D.	19,469	20,332	20,440
	† Clitheroe R.D. (part)	12,367	6,892	7,490
		56,819	149,228	150,370

† 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., 1971	Population	
			Preliminary Census, 1971 (areas as constituted at 31st Dec., 1971)	Estimated home, mid-1971
6	Colne M.B.	5,939	18,873	18,870
	Nelson M.B.	3,445	31,225	31,560
	Barrowford U.D.	1,387	5,130	5,190
	Brierfield U.D.	807	7,572	7,580
	Padiham U.D.	975	10,192	10,230
	Trawden U.D.	6,815	1,854	1,880
	Burnley R.D.	39,849	18,060	18,160
		59,217	92,906	93,470
7	*Crosby M.B.	4,785	57,405	57,790
	Formby U.D.	5,613	23,501	23,800
	Litherland U.D.	1,210	23,670	23,830
	Ormskirk U.D.	15,227	27,618	27,720
	Skelmersdale and Holland U.D.	7,510	30,522	31,120
	West Lancashire R.D.	65,168	71,269	71,990
		99,513	233,985	236,250
8	Abram U.D.	1,979	6,472	6,610
	Ashton-in-Makerfield U.D.	6,266	26,271	26,470
	Aspull U.D.	1,905	7,510	7,500
	Billinge and Winstanley U.D.	4,596	11,379	11,480
	Hindley U.D.	2,610	24,307	24,310
	Ince-in-Makerfield U.D.	2,321	15,925	15,780
	Orrell U.D.	1,616	12,069	12,070
	Standish-with-Langtree U.D.	3,266	11,159	11,210
	Wigan R.D.	11,191	14,851	14,700
		35,750	129,943	130,130
9	Widnes M.B.	5,746	56,709	56,960
	*Huyton-with-Roby U.D.	3,055	66,629	67,200
	Kirkby U.D.	4,845	59,759	60,170
	Prescot U.D.	871	12,590	12,650
	Rainford U.D.	5,877	8,381	8,400
	Whiston R.D.	23,786	85,558	84,940
		44,180	289,626	290,320
10	Golborne U.D.	7,561	28,178	28,290
	Haydock U.D.	2,395	14,180	14,330
	Newton-le-Willows U.D.	3,105	22,380	22,330
	Warrington R.D.	22,357	50,342	50,180
		35,418	115,080	115,130
11	Farnworth M.B.	1,504	26,841	26,270
	Leigh M.B.	6,361	46,117	46,180
	Atherton U.D.	2,265	21,758	21,620
	Blackrod U.D.	2,392	4,801	4,800
	Horwich U.D.	3,257	16,433	16,550
	Kearsley U.D.	1,727	11,243	11,320
	Little Lever U.D.	807	9,124	9,200
	Turton U.D.	17,334	21,500	21,520
	Tyldesley U.D.	5,175	21,163	21,100
	Westhoughton U.D.	5,560	17,729	17,680
		46,382	196,709	196,240

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

Health Division No.	Sanitary district	Area in acres at 31st Dec., 1971	Population	
			Preliminary Census, 1971 (areas as constituted at 31st Dec., 1971)	Estimated home, mid-1971
12	Haslingden M.B.	8,203	14,953	14,960
	Prestwich M.B.	2,421	32,838	33,310
	Radcliffe M.B.	4,957	29,320	29,510
	Rawtenstall M.B.	9,528	21,404	21,200
	Ramsbottom U.D.	9,562	15,872	15,980
	Tottington U.D.	2,542	9,740	9,730
	Whitefield U.D.	3,391	21,841	21,850
		40,604	145,968	146,540
13	Bacup M.B.	6,121	15,102	15,110
	Heywood M.B.	8,508	30,418	30,450
	Littleborough U.D.	7,855	11,987	12,130
	Milnrow U.D.	5,194	10,329	10,320
	Wardle U.D.	3,192	5,334	4,880
	Whitworth U.D.	4,483	7,417	7,460
		35,353	80,587	80,350
14	*Middleton M.B.	5,172	53,419	54,270
	Chadderton U.D.	3,014	32,406	32,480
	Crompton U.D.	2,865	17,027	17,200
	Failsworth U.D.	1,679	23,233	23,230
	Lees U.D.	288	4,367	4,400
	Royton U.D.	2,148	20,319	20,280
		15,166	150,771	151,860
15	Eccles M.B.	3,417	38,413	38,430
	Swinton and Pendlebury M.B.	3,362	40,124	40,070
	Worsley U.D.	7,240	49,573	49,800
		14,019	128,110	128,300
16	*Stretford M.B.	3,533	54,011	54,220
	Irlam U.D.	4,714	20,571	20,750
	Urmston U.D.	4,799	44,523	44,400
		13,046	119,105	119,370
17	Ashton-under-Lyne M.B.	4,135	48,865	48,620
	Mossley M.B.	3,661	10,055	10,180
	Audenshaw U.D.	1,241	11,887	11,870
	Denton U.D.	2,593	38,107	38,360
	Droylsden U.D.	1,245	24,134	24,210
		12,875	133,048	133,240

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

The various health services, the day-to-day administration of which devolved throughout the year 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 1971.

Health Division No. 2.—Apart from the serious shortage of applicants for the vacancies for chiropodists, with the result that the waiting list is distressingly long for treatment, the services in this area could hardly be improved.

Health Division No. 4.—On the whole the health services have operated satisfactorily during the year, the only real exception being the chiropody service which, as in 1970, had to be restricted due to the difficulty in recruiting qualified staff. By the end of the year the position had eased a little.

Unlike previous years no particular problems have been experienced in recruiting nurses and midwives and apart from short periods the health visiting staff have been virtually up to establishment.

Health Division No. 8.—The Division has continued to provide a satisfactory service, but the recruitment of staff has hindered the expansion of some services.

Liaison between officers has been excellent, and a good integration has been shown, ensuring a continuity of services to the community.

Health Division No. 14.—The general standard of local authority services in the division compares favourably with other areas in the north west. Plans are now going forward for health centre premises in four districts of the area.

Good co-ordination with the hospitals has been achieved by the further use of the district nursing sister liaison officer.

Health Division No. 15.—The difficulty in recruiting and retaining medical officers which was commented upon a year ago has become more marked.

The health centres at Little Hulton and at Eccles were commissioned during the year, and at the time of writing the health centre at Pendlebury is at the loan sanction approval stage.

Health Division No. 17.—The health visitor situation is much the same as last year – still well below establishment, and any extension of the health visiting service was prevented by this shortage.

Middleton M.B.—The general standard and availability of health services available to Middleton residents is at least equal to that prevailing generally in the north-west. So far as local authority services are concerned the principal needs are the increased recruitment of medical and health visiting staff.

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 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, 1971, no fewer than 105 districts had as medical officer of health the divisional medical officer of the health division in which the district is situate. In the remaining three County districts, the duties of medical officer of health were, at the 31st December, 1971, still being undertaken by medical practitioners engaged in private practice.

CO-ORDINATION AND CO-OPERATION WITH OTHER BRANCHES OF THE NATIONAL HEALTH SERVICE.—The existing 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 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.

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 in 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 October, 1971, related to 52 projects for 1972/73, 34 for 1973/74 and 27 for 1974/75 involving capital expenditure of £3,797,541, £3,094,780 and £3,167,683 respectively.

HEALTH SERVICES

HEALTH CENTRES

The County Council's health centre development programme gained further momentum during 1971 when there was considerable consolidation of work on a large number of projects. At the end of the year there were ten centres operating, four of which had been completed during the year. All but two of these ten centres are buildings adjoining clinics and linked to the clinic by a covered way, an arrangement which does not give completely satisfactory operation of the centre and one that has now been abandoned. It is interesting to note the improvement in working arrangements in the two integrated centres which have been opened (Aintree and Cantril Farm). At the end of the year four other centres were under construction, whilst development work was well advanced on a further thirteen.

As a result of the heavy demand for health centres in the Administrative County area, it was necessary for development work to be carried out by private architects on seven centres, two of which have been allocated to architects of development companies dealing with town centre developments.

Health centres are planned for the following districts:—

Ashton-under-Lyne	Kirkby
Aughton (West Lancs. R.D.)	Leigh
Bacup	Littleborough
Blackrod	Little Lever
Brierfield	Maghull (West Lancs. R.D.)
Burscough (Ormskirk U.D.)	Milnrow
Chadderton	Morecambe
Chorley	Nelson
Clitheroe	Prestwich
Colne	Radcliffe
Coppull (Chorley R.D.)	Rainford
Crompton	Rainhill (Whiston R.D.)
Failsworth	Ramsbottom
Fleetwood	Rawtenstall
Freckleton (Fylde R.D.)	Risley (Warrington R.D.)
Great Eccleston (Fylde R.D.)	St. Annes (Lytham St. Annes M.B.)
Great Harwood	Skelmersdale
Haslingden	Swinton and Pendlebury
Haydock	Ulverston
Heysham (Morecambe M.B.)	Whiston (Whiston R.D.)
	Withnell

It is also intended to provide additional consulting suites and reorganise accommodation at the existing health centre at Penketh, and also as soon as possible improve the amount of accommodation available at Kirkham and Eccles health centres.

There is still very little demand for accommodation in health centres from general dental practitioners, though this type of accommodation is to be provided in the health centres for Skelmersdale (Old Core), Swinton (Pendlebury) and Ormskirk (Burscough). There was, however, a significant change in the policy of the Local Pharmaceutical committee, and it does seem that in the future, pharmacists will be much more interested in forming a consortium to dispense prescriptions at health centres. Negotiations were in hand at the year end for the provision of pharmacies in three health centres.

A considerable number of meetings were held during the year with general practitioners, general dental practitioners, pharmacists, architects, etc., at which representatives of the executive council and local professional committees were present. There is no doubt that the development of health centres is a complicated and time consuming occupation, but it is equally true to say that consultation is a vital aspect of this, and one which though so time consuming is absolutely essential if a satisfactory end product is to materialise.

In the report for 1970 an opinion was stated that there was little doubt that the advantages of practice from a health centre were commending themselves more and more to general practitioners. The events of 1971 have upheld this opinion, and enquiries for information about health centres have continued to be received from doctors throughout the year. The County Council's development programme is now extensive, and the indications are that demand will continue to be high in the future.

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	
1967	97	5,275	16,480	72,645	13.8	4.4	1,607
1968	90	5,112	14,931	64,237	12.6	4.3	1,218
1969	86	4,619	14,170	57,577	12.5	4.1	1,125
1970	83	4,404	12,215	50,269	11.4	4.1	1,075
1971	75	4,060	10,467	42,215	10.4	4.3	889

Of the 75 clinics in operation at the end of the year, 29 had the services of a hospital consultant obstetrician in addition to County Council staff. The consultants conducted 1,074 of the 4,060 sessions held during the year, 970 were conducted by County Council medical officers, 1,827 by County Council midwives and 189 by general practitioners employed on a sessional basis.

Table 7, page 146 gives attendance particulars relating to the antenatal and post-natal clinics in the respective health divisions and delegate districts during 1971.

County patients in Health Division No. 10 attended antenatal clinics of St. Helens C.B., payment being made according to the number of cases and attendances. During the year two expectant mothers made 12 attendances.

Relaxation, Exercise and Mothercraft Classes.—At 9 of the classes organised at County Council clinics the instruction in relaxation and exercises is given by qualified physiotherapists whilst at 76 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:—

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

This teaching is carried out by health visitors and midwives.

Details of attendances, etc., during 1971 in each health division and delegate district are given in Table 7, on page 146 and set forth below are the totals for the County area for each year 1967 to 1971:—

Year	No. of classes at end of year	No. of sessions	No. of women attending	No. of attendances
1967	79	3,311	5,019	26,145
1968	78	3,474	5,239	27,107
1969	85	3,629	5,880	29,925
1970	82	3,798	6,280	30,785
1971	85	3,778	5,814	29,373

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.

Child Health Centres.—At the end of 1971, 288 child health centres were in operation.

One centre at the Rainsough Methodist Church Hall, Rainsough, closed on the 22nd September and three new centres were opened during the year, one at the Youth Centre, Hale Village, on the 28th April, one at the Labour Club, Wargrave Road, Newton-le-Willows, on the 1st November and one at Stonefold School, Rising Bridge, Haslingden, on the 18th October.

The following were transferred to alternative premises during 1971:—

Health Division No.	Premises
2 ...	Congregational Hall, Wentworth Drive, Lancaster (closed 29th March) St. Bernadette's Church Hall, Barton Road, Lancaster (opened 7th April)
7 ...	St. Giles Church Hall, Aintree Lane, Aintree (closed 8th November) Health Centre, Oriel Drive, Aintree (opened 15th November)
8 ...	Bethel Methodist School, Leigh Road/Atherton Road, Hindley Green (closed 27th January) Hindley Green Working Men's Club, Atherton Road, Hindley Green (opened 26th May)
9 ...	184/186 Roundhey, Cantril Farm Estate, Knowsley (closed 17th November) Health Centre, "The Withens", Cantril Farm Estate, Knowsley (opened 1st December)
17 ...	Westernlea, Denton Road, Audenshaw (closed 10th May) Guide Lane, Audenshaw (opened 17th May)
Crosby ...	All Saints Church Hall, Forefield Lane, Crosby (closed 25th January) Bretlands Road, Thornton (opened 8th February)
Huyton ...	68 Derby Road, Huyton (closed 29th September) Lathom Road, Huyton (opened 5th October)

The following statement gives details of attendances of children at child health centres during each year from 1967 to 1971, and Table 8 on page 147 gives similar information for 1971 for each health division and delegate district.

	1967	1968	1969	1970	1971
No. of centres at end of year	280	285	287	286	288
No. of half-day sessions	16,061	16,478	16,581	16,657	16,838
No. of children who attended (age at end of year)—					
Under 1	33,483	34,498	35,010	34,866	35,503
1—	30,509	30,917	31,032	31,456	32,304
2–4 (inclusive)	30,119	32,743	32,142	32,714	31,769
TOTAL	94,111	98,158	98,184	99,036	99,576
No. of attendances at ages (in years)—					
Under 1	503,971	485,557	484,265	486,239	502,444
1—	108,115	111,055	107,506	113,357	110,449
2–4 (inclusive)	89,027	89,068	84,484	85,046	82,562
TOTAL	701,113	685,680	676,255	684,642	695,455
Average attendances per session	44	42	41	41	41

County Council medical officers conducted 11,419 of the 16,838 sessions held during the year under report, 4,716 were conducted by health visitors, 50 by hospital medical staff and the remaining 703 by general practitioners employed on a sessional basis. Of the 99,576 children who attended, 2,478 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
1967	80.3	35.0
1968	84.8	36.4
1969	84.3	36.3
1970	87.0	37.1
1971	85.1	36.9

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 1967 to 1971:—

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)
1967	32	36	37	468	56	45
1968	50	44	34	562	73	42
1969	32	38	19	348	59	21
1970	19	30	20	170	50	15
1971	24	17	8	159	34	10

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 1971, eleven 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 1971 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
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
1970	42,412	669	835	15.8	19.7
1971	42,597	671	825	15.8	19.4

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 guidance in combined listening and watching for speech 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 and partial hearing loss 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.

Dr. Jean Robson, the medical officer in charge, reports:—

"The testing and guidance of pre-school children continued at Fulwood clinic in 1971. Although there has been an increase in the number of children referred to the clinic, and in the number of children who have some degree of deafness, there has been only a slight increase in the number of deaf and partially hearing children referred who require to use a hearing aid. This indicates that there has been an improvement in the efficiency of the screening tests of hearing carried out by the health visitors so that, in addition to children with severe deafness and a severe partial hearing loss, more cases of conductive deafness are being detected in the pre-school period.

Screening tests of hearing in infancy detect not only children with impaired hearing, but also children with other handicaps — for example mental handicap, cerebral palsy, visual defects, language disorders and frequently multiple handicaps. Therefore, a wide cross-section of handicapped children is referred to the Audiology Clinic and, in view of this, it is necessary to have a team approach. In addition to the immediate clinic staff, which consist of a medical officer, five trained health visitors and three teachers of the deaf, one of whom is a pre-school specialist teacher, it is most valuable to have close co-operation from Mr. B. Fisher in his capacity as educational psychologist, and also from the consultant otologists, consultant paediatricians, consultant ophthalmologists and speech therapists in the area served by Fulwood clinic. We are fortunate to have the services of Mrs. Darnell whose clerical organisation of the clinic is so efficient.

A child with any degree of deafness is referred to the consultant otologist of the area in which he lives so that any possible medical or surgical treatment can be carried out. Two groups in which exudative otitis media is common are worthy of mention. There is a high incidence of exudative otitis media resulting from Eustachian dysfunction in children who have had repair of a cleft palate. Adenoidectomy is not advisable in these cases, but this condition is treated by myringotomy and insertion of grommet tubes. There is also a high incidence of partial hearing loss due to exudative otitis media in Down's syndrome. Occasionally in both these groups a partial sensori-neural deafness is found.

The impedance meter with the XY plotter has continued to give useful information, particularly in the differential diagnosis of conductive, sensori-neural and mixed types of deafness.

If no treatment is possible and the child has a residual hearing loss of 40 decibels or more, following treatment, parent guidance by a member of the audiology clinic staff is arranged. Guidance is usually given at home. At the end of 1971, 96 children were receiving guidance.

The aims of guidance are:—

- (1) to show the parents how to encourage the deaf and partially hearing pre-school child to listen and watch for speech throughout the day in routine situations of bathing, dressing and feeding, and constructive play and domestic routine.
- (2) to show the parents how to give the deaf child as much experience of sound as possible and to teach him the association between a sound and its source, so that his interest in sound is stimulated, and he actively uses his residual hearing.
- (3) to introduce the hearing aid and to keep a constant check on the fitting of the moulds and the efficiency and setting of the hearing aid.
- (4) to train the parents to use the Speech Training Unit which amplifies sound to a greater intensity than the individual hearing aid and gives greater clarity of reproduction.
- (5) to help to sort out the emotional problems which frequently arise when parents discover that they have a deaf or partially hearing child.
- (6) where the pre-school child is attending a nursery school, or day nursery, for part of the day, to visit the nursery school to show the staff how to help the deaf or partially hearing child.

The work of the clinic during 1971 and the preceding four years is summarised below:—

Sessions and Attendances at Diagnostic Clinic

Year	No. of sessions	No. of attendances	
		Total	Average
1967	217	813	3.7
1968	223	841	3.7
1969	212	782	3.7
1970	252	913	3.6
1971	266	1,001	3.8

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	...	...	...	...	...	...	...	286
(ii) New cases	...	...	...	...	...	...	...	521

(b) New cases:—

(i) Deafness confirmed	...	...	...	...	...	...	...	306
(ii) Under investigation at end of year	...	...	...	...	...	...	...	19
(iii) Found to have normal hearing after adequate investigation	...	...	...	...	...	...	...	196
Total	...	...	...	...	...	...	...	521

(c) No. in (a) (ii) who were mentally retarded	...	...	...	...	...	...	...	31
(d) No. in (b) (i) who were mentally retarded	...	...	...	...	...	...	...	21
(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	...	...	55	34	59	48	64	28	72	34	33	34	10	11	2	8	6	3	3	1	6	10	310	211
Deafness confirmed	...	...	30	18	33	23	28	15	42	25	21	22	8	9	1	7	4	3	3	1	6	7	176	130

Results of Tests on the 306 Deaf Children

(a) No. who had some hearing over the whole range of speech frequencies	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	294
(b) No. who possessed merely an island of hearing	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	12
(c) No. who did not respond to any sound stimuli	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	—
Total	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	306

Of those in group (a) above:—

No. whose hearing loss was more marked in the higher frequencies	24
No. whose hearing loss was more marked in the lower frequencies	101

Vulnerable Groups.—Dr. Jean Robson reports that of the 306 children diagnosed as deaf amongst the new cases attending during the year, 280 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
2	Children with a family history of congenital deafness ...	13
3	Children who were premature	16
4	Children with a history of abnormality in the antenatal period	2
5	Children with a history of perinatal abnormality	11
6	Children who have had a severe illness or have been treated with streptomycin for any illness	14
7	Children who are not speaking well by the age of two years and children aged 2-5 years with speech defects	45
8	Children with a history of otitis media and/or chronic upper respiratory tract infection	155
9	Children who are not included in any of the above categories but who have some congenital abnormalities	14
10	Mother suspects the child is deaf	8
Total ...		280

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 1971 have now been trained and, in addition, in the past three years, 225 health visitors have attended refresher courses in screening tests of hearing. The training of the health visitors is carried out by Dr. Robson.

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, 1971

	No. of children tested	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 ...	5,412	127	23.5	50	45	30	2
Not in vulnerable groups ...	15,239	72	4.7	12	36	22	2

Screening Test Failure Rates, 1964-71

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	
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	59	11.1	13,640	54	3.9
1970	6,054	92	15.0	15,096	50	3.3
1971	5,412	127	23.5	15,239	72	4.7

Screening Test Failures by Vulnerable Group, 1971

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. Children with a family history of congenital deafness	12	3	6	3	—
3. Children who were premature	24	6	12	5	1
4. Children with a history of abnormality in the antenatal period	10	1	5	3	1
5. Children with a history of perinatal abnormality	13	2	7	4	—
6. Children who have had a severe illness or have been treated with streptomycin for any illness	—	—	—	—	—
7. Children who are not speaking well by the age of two years and children aged 2-5 years with speech defects	5	2	1	2	—
8. Children with a history of otitis media and/or chronic upper respiratory tract infection	47	32	11	4	—
9. Children who are not included in any of the above categories but who have some congenital abnormality	13	3	2	8	—
10. Mother suspects that child is deaf ...	3	1	1	1	—
TOTAL	127	50	45	30	2

Screening Tests Failures by Age Group, 1971

(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-	4,430	81	35	30	15	1
1-	873	32	8	12	11	1
2-	55	8	3	2	3	—
3-	27	4	2	1	1	—
4 and over	27	2	2	—	—	—
TOTAL	5,412	127	50	45	30	2

(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-	12,596	44	7	20	16	1
1-	2,436	26	4	15	6	1
2-	145	2	1	1	—	—
3-	43	—	—	—	—	—
4 and over	19	—	—	—	—	—
TOTAL	15,239	72	12	36	22	2

Consolidated figures for 17 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	No. of children who died before being diagnosed
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
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, 1971	59,854	850	14.2	350	5.8	76	16	3
Others tested, 1st April, 1957—31st December, 1971	107,759	376	3.5	62*	0.6	42	6	—

*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 350 deaf children picked out from the vulnerable groups between the 1st April, 1957, and the 31st December, 1971, respectively fell into vulnerable groups as follows:—

Group			
1	Children with cerebral palsy	1	1
2	Children with a family history of congenital deafness	1	29
3	Children who were premature	4	41
4	Children with a history of abnormality in the antenatal period	1	17
5	Children with a history of perinatal abnormality	1	16
6	Children who have had a severe illness or have been treated with streptomycin for any illness	—	12
7	Children who are not speaking well by the age of two years and children aged 2–5 years with speech defects	6	41
8	Children with a history of otitis media and/or chronic upper respiratory tract infection	2	143
9	Children who are not included in any of the above categories but who have some congenital abnormality	1	22
10	Mother suspects that child is deaf	—	28
Total		17	350

Dental Care of Mothers and Young Children.—Details of dental inspection and treatment carried out by dental officers during 1971 under section 22 of the National Health Service Act are shown below and compared with those for the previous year.

The first table relates to the pre-school child whilst the second shows those relative to the expectant and nursing mother.

Pre-school Children

Year	No. inspected	Individuals treated	Attendances	Fillings	Extractions	General anaesthetics	Other operations
1970	4,949	3,453	6,504	3,935	4,335	2,173	1,419
1971	4,994	3,413	6,659	4,027	4,404	2,095	1,320

Expectant and Nursing Mothers

Year	No. inspected	Individuals treated	Attendances	Fillings	Extractions	General anaesthetics	Other treatments	Dentures			
								Full upper and/or lower—first time	Others—first time	Replacements	Total supplied
1970	1,282	1,027	3,062	1,824	1,440	258	709	59	94	93	246
1971	1,324	1,070	3,196	1,957	1,525	256	600	76	120	108	304

The pre-school returns show a similar pattern to the previous year with a slight increase in inspections, attendances, fillings and extractions. Continued shortage of professional staff is still the main limiting factor in developing this aspect of the dental service. The fact that over 4,000 fillings were inserted and an even greater number of teeth were extracted for this very young age group suggests that much greater thought should be given to methods of prevention in the caries control.

The expectant and nursing mother returns also show a slight increase in all main sub-divisions with the exception of the supply of dentures which shows a considerable increase. Details relating to the supply of dentures have been sub-divided into four divisions in this report and adjusted accordingly for comparison with 1970. By this means the number of dentures inserted in patients for the first time, together with the number of replacement dentures can now be shown. An increase is shown during 1971 of 28 per cent. in the former and of 16 per cent. in the latter with a total increase of 23 per cent being recorded for the year.

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				
	1967	1968	1969	1970	1971
Minor ailment	2,306	2,694	2,917	3,096	2,245
Ophthalmic	3,995	4,089	3,731	4,038	3,434
Ear, nose and throat	196	110	120	119	100
Orthopaedic	5,733	6,650	6,112	5,830	5,855
Ultra-violet light	1,475	1,156	638	285	199
Speech therapy	1,193	2,026	2,271	2,029	1,787
Orthoptic	1,097	1,264	1,139	1,429	1,320
Chiropody	252	271	253	194	177
TOTAL	16,247	18,260	17,181	17,020	15,117

Family Planning Clinics.—The family planning service in the Administrative County area is provided by the Family Planning Association mainly in County Council clinics which they are allowed to use rent free.

The County Council pays the Family Planning Association for all cases referred to them as being in medical need. The definition of this need, accepted by the Department of Health and Social Security and the Local Authority Associations, is "any woman whose health in the opinion of the examining doctor would be expected to suffer by the increased mental, physical or social burdens placed on her by pregnancy".

In addition to adopting this definition of medical need the County Council increased the scope of its family planning provisions in a number of ways during 1971 viz:—

(1) Hospital doctors and doctors in charge of family planning clinics are authorised to classify women as medical cases for grant purposes. (This was previously restricted to County Council medical staff and general medical practitioners).

(2) From 1st April, 1972 payments may be made to the Family Planning Associations for social cases.

(3) Payments are authorised to general medical practitioners for providing specialist family planning services which may not otherwise be readily available, e.g., I.U.D. fitting.

(4) Agreed to finance pilot domiciliary family planning schemes in some areas of acute social need, i.e. Health Division 9, Huyton-with-Roby, Stretford, and Ashton-under-Lyne subject to such schemes ranking for government grant under the Urban Aid programme (*note* — at the end of 1971 such approval had not been given).

As a result of the wider definition of medical need, and also item (1) above, the number of cases in respect of which per capita payments were made to the Family Planning Association during 1971 increased very considerably. The figures for that year and the previous four years are given in the following statement:—

Health Division No.	No. of cases referred to Family Planning Association Clinics on medical grounds during—				
	1967	1968	1969	1970	1971
1	—	—	1	5	21
2	31	57	86	89	300
3	1	3	14	20	226
4	7	3	14	21	418
5	—	—	—	—	83
6	8	13	18	4	35
7	—	—	—	—	293
8	2	5	9	25	259
9	—	2	8	9	348
10	9	6	18	5	343
11	61	37	46	38	141
12	—	—	12	16	51
13	12	18	34	27	75
14	3	—	—	—	47
15	12	7	25	19	146
16	31	15	22	15	71
17	1	8	7	6	151
Delegate District—					
Crosby M.B.	—	—	—	1	13
Huyton-w-Roby U.D.	—	—	1	—	26
Middleton M.B.	2	4	16	28	68
Stretford M.B.	11	87	107	99	28
TOTAL— Administrative County	191	265	438	427	3,143

In Stretford the County Council provides a family planning clinic service operated by its own staff, and during 1971, a total of 46 sessions were held of which 34 were attended by medical staff. The total number of attendances was 215 and 37 new cases were taken on the books during the year.

Care of Premature Infants.—The importance of the care of premature infants becomes greater relatively as infantile mortality declines. Of the total of 718 deaths of infants under one year occurring in 1971 and assigned to the Administrative County, 113 were certified as due to prematurity unqualified by any other cause. The neo-natal mortality rate of premature babies was 117 per thousand live premature births in 1971, compared with a total neo-natal rate of 11.6 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 1971. 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) ...	4	1	3	1	18	2	23	2	113	2	161	8
(ii) In hospitals, including maternity homes in the National Health Service	88	68	174	105	488	90	584	48	1,314	50	2,648	361
TOTAL—1971 ...	92	69	177	106	506	92	607	50	1,427	52	2,809	369
1970 ...	111	99	234	102	513	99	579	47	1,539	52	2,976	399
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

Of the 161 premature infants born alive at home or in private nursing homes 29 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 1971 and for the preceding four years, together with the average for the five years 1962–66, is shown in the statement below:—

Year	Proportion (per cent) of prematurity amongst—					
	Live births	Stillbirths	Total births	Live births	Stillbirths	Total births
1962–66 ...	6.7	59.7	7.7			
1967 ...	6.5	63.1	7.4			
1968 ...	6.7	63.6	7.6			
1969 ...	6.9	62.4	7.7			
1970 ...	7.1	64.0	8.0			
1971 ...	6.7	61.5	7.5			

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
1962–66	14,102	2,237	16,339	2,112	161	2,273	15.0	7.2	13.9
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
1970	2,976	399	3,375	201	12	213	6.8	3.0	6.3
1971	2,809	369	3,178	156	8	164	5.6	2.2	5.2

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)
1962-66	209,315	14,102	6.7	12,890	91.4	12,173	86.3
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
1970	41,789	2,976	7.1	2,725	91.6	2,607	87.6
1971	41,997	2,809	6.7	2,571	91.5	2,479	88.3

A summary of the deaths within certain periods of the first month of life of the premature infants notified in 1971 whose mothers were normally resident in the Administrative County area is given by birth weight below:—

Weight at birth	Premature infants born in 1971—																	
	*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	1	25	2	100	—	—	—	—	1	50	—	—	75	85.2	8	9.1	—	—
Over 2 lb. 3 oz. to 3 lb. 4 oz.	2	66.7	—	—	—	—	2	66.7	—	—	—	—	64	36.8	29	16.7	2	1.1
Over 3 lb. 4 oz. to 4 lb. 6 oz.	3	16.7	1	5.6	—	—	3	25	1	8.3	—	—	53	10.9	18	3.7	4	0.8
Over 4 lb. 6 oz. to 4 lb. 15 oz.	—	—	—	—	—	—	—	—	—	—	—	—	12	2.1	8	1.4	1	0.2
Over 4 lb. 15 oz. to 5 lb. 8 oz.	2	1.8	1	0.9	2	1.8	—	—	—	—	—	—	26	2.0	10	0.8	6	0.5
TOTAL— 5½ lb. or less	8	5.0	4	2.5	2	1.2	5	17.2	2	6.9	—	—	230	8.7	73	2.8	13	0.5

* 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 148.

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 County Council in co-operation with the various voluntary moral welfare associations. 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. 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.

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	
			No.	*Per cent.
1967	313	17	330	12
1968	292	17	309	11
1969	264	17	281	10
1970	190	17	207	7
1971	178	16	194	7

*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 1971 are shown in Table 10, page 149.

Ophthalmia Neonatorum.—Twelve cases of ophthalmia neonatorum were notified during 1971 in infants born to women resident in the Administrative County area, eight occurring in hospital and four in domiciliary births. In 11 cases vision was subsequently ascertained to have been unimpaired, and one had removed out of the Administrative County area.

Welfare Foods.—Particulars of centres issuing welfare foods at the end of 1971 are given below, together with comparative figures for the previous year:—

	1970	1971
Child health centres and school clinics	274	266
Premises tenanted by the County Council for the sole purpose of distributing welfare foods	7	17
Others, e.g., shops, private houses and W.R.V.S. centres ...	23	16
TOTAL	304	299

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 drops (10ml. bottles)	Vitamin tablets (packets of 45)	Orange juice (6 oz. bottles)
Individuals	44,743	17,986	39,789	29,310	639,325
N.H.S. hospitals	76	—	—	—	1,680
Day nurseries (including factory nurseries) ...	1	661	381	—	7,629
TOTAL—1971	44,820	18,647	40,170	29,310	648,634
1970	51,145	28,196	—	37,587	641,486

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 vitamin drops and 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 1971 is compared below with that for each of the previous five years:—

Year	Day nurseries	Child places
1966	53	2,526
1967	51	2,456
1968	51	2,456
1969	50	2,422
1970	52	2,502
1971	55	2,647

Details of attendances, etc., at County Council day nurseries during 1971 are given in the following statement together with the corresponding figures for each of the previous four years. Particulars for 1971 in respect of each health division and delegate district are shown in Table 11 on page 150.

	1967	1968	1969	1970	1971
No. of children on registers at end of year ...	2,814	2,776	2,711	2,702	2,957
No. of children on waiting lists at end of year	2,285	2,191	2,225	2,059	2,435
Total No. of attendances	521,524	515,237	506,816	500,262	534,630
No. of children on register at end of year whose parents or guardians were categorised as:—					
Social cases	1,501	1,447	1,468	1,535	1,713
Others	1,313	1,329	1,243	1,167	1,244
*Full-time equivalent of staff employed at end of year	675	671	691	670	714

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

TRAINING.—Of the 55 nurseries administered by the County Council at the end of 1971, 44 were approved for the training of nursery students. There were four nursery training schools in the Administrative County area at Newton-le-Willows, Rossendale, Lancaster and Ashton-under-Lyne. In addition there was an arrangement with the Burnley and Rochdale Education Authorities to take nursery students into a County Council day nursery to obtain practical experience. Student and nursery nurses are required to make home visits with health visitors and they also attend approximately four sessions in clinics.

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, each of one week's duration for day nursery matrons, deputy matrons and nursery assistants. Visits were made to various day nurseries and nursery and special schools.

Two matrons attended a training course lasting twelve weeks at Stockport College of Technology for experienced matrons and deputy matrons of day and residential nurseries. It is anticipated that attending such courses will be a requisite for future matrons of nurseries.

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 1967–1971 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
1967	82	1.5	1.6	1.6
1968	95	1.3	1.9	1.8
1969	98	1.5	2.0	1.9
1970	87	1.1	1.9	1.7
1971	107	1.6	2.2	2.0

The injuries were mostly of a minor nature although in a small number of cases fractures were sustained. Of the 107 cases reported, 69 were referred to hospital and 15 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 day 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 1971 and the previous two years.

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	—	15	—	300	5	11	8	42
2	1	18	25	402	36	10	86	40
3	1	20	9	524	27	11	50	141
4	—	24	—	635	76	17	202	122
5	—	26	—	564	117	1	160	20
6	—	7	—	153	41	16	97	63
7	2	29	40	627	21	26	56	202
8	1	10	30	236	38	2	84	34
9	—	24	—	697	9	1	27	10
10	1	18	40	536	50	1	100	10
11	1	15	22	414	63	4	180	18
12	—	6	—	164	21	1	45	1
13	1	6	40	139	30	—	47	—
14	4	10	124	285	72	13	143	39
15	—	16	—	465	22	—	46	—
16	—	11	—	344	36	—	72	—
17	2	10	110	250	34	1	51	12
Delegate District—								
Crosby M.B.	1	10	10	228	7	3	21	42
Huyton-with-Roby U.D.	1	5	34	148	2	—	3	—
Middleton M.B.	—	2	—	62	14	—	24	—
Stretford M.B.	1	8	38	213	11	—	38	—
Administrative County—								
1971	17	290	522	7,436	732	118	1,540	796
1970	18	249	596	6,080	613	124	1,145	934
1969	20	171	621	3,993	374	136	882	770

As a result of the provisions of the Health Services and Public Health Act, 1968, the number of premises and persons registered during the year has continued to increase, imposing a considerable amount of extra work on the field and administrative staff.

During the year Area Superintendent Health Visitors participated in courses for playgroup supervisors and leaders organised by Colleges of Further Education and the Workers Education Association in various parts of the County.

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 newborn infants and their mothers by the health visitors is greatly facilitated.

The numbers of notified births occurring in each area during the year 1971 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	1	5	121	102	122	107	—	—	1	—	21	26	22	26	—	—	2	5	142	128	144	133	—	—
2	58	67	832	795	890	862	18	12	3	4	35	49	38	53	1	—	61	71	867	844	928	915	19	12
3	9	9	415	399	424	408	1	1	3	7	120	101	123	108	—	1	12	16	535	500	547	516	1	2
4	89	115	1292	1252	1381	1367	25	22	5	6	360	341	365	347	3	1	94	121	1652	1593	1746	1714	28	23
5	28	27	846	862	874	889	7	2	5	2	59	62	64	64	1	—	33	29	905	924	938	953	8	2
6	—	—	—	—	—	—	—	—	—	1	53	34	53	35	—	—	—	1	53	34	53	35	—	—
7	55	60	660	668	715	728	13	9	4	—	89	110	93	110	—	—	59	60	749	778	808	838	13	9
8	162	172	1850	1665	2012	1837	50	29	6	10	181	184	187	194	1	—	168	182	2031	1849	2199	2031	51	29
9	129	111	1365	1299	1494	1410	28	34	6	10	257	286	263	296	—	1	135	121	1622	1585	1757	1706	28	35
10	—	—	—	—	—	—	—	—	8	6	261	225	269	231	1	—	8	6	261	225	269	231	1	—
11	160	162	1874	1644	2034	1806	45	26	2	3	189	186	191	189	2	—	162	165	2063	1830	2225	1995	47	26
12	24	29	468	446	492	475	4	1	3	4	181	155	184	159	—	1	27	33	649	601	676	634	4	2
13	133	116	1029	933	1162	1049	17	15	6	4	146	159	152	163	—	1	139	120	1175	1092	1314	1212	17	16
14	—	—	—	—	—	—	—	—	5	6	129	120	134	126	2	—	5	6	129	120	134	126	2	—
15	3	7	235	230	238	237	—	1	3	4	44	34	47	38	—	1	6	11	279	264	285	275	—	2
16	64	57	831	776	895	833	13	28	—	1	38	30	38	31	—	—	64	58	869	806	933	864	13	28
17	111	96	1096	1085	1207	1181	27	18	9	9	202	198	211	207	1	2	120	105	1298	1283	1418	1388	28	20
Delegate District—																								
Crosby M.B.	5	5	107	93	112	98	2	—	1	2	15	21	16	23	—	—	6	7	122	114	128	121	2	—
Huyton-w-Roby U.D.	—	—	—	—	—	—	—	—	2	1	45	58	47	59	—	1	2	1	45	58	47	59	—	1
Middleton M.B.	—	—	—	—	—	—	—	—	—	2	63	69	63	71	—	—	—	2	63	69	63	71	—	—
Stretford M.B.	6	9	159	162	165	171	—	—	3	—	13	7	16	7	—	—	9	9	172	169	181	178	—	—
Administrative County	1037	1047	13180	12411	14217	13458	250	198	75	82	2501	2455	2576	2537	12	9	1112	1129	15681	14866	16793	15995	262	207

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 1971 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-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				
Total No. occurring in Administrative County	1037	1047	13180	12411	14217	13458	250	198	75	82	2501	2455	2576	2537	12	9	1112	1129	15681	14866	16793	15995	262	207
No. transferred out of Administrative County to areas of other L.H. authorities	409	420	4367	4045	4776	4465	97	59	—	1	3	3	3	4	—	—	409	421	4370	4048	4779	4469	97	59
No. occurring in and belonging to Administrative County	628	627	8813	8366	9441	8993	153	139	75	81	2498	2452	2573	2533	12	9	703	708	11311	10818	12014	11526	165	148
No. transferred into Administrative County from areas of other L.H. authorities	643	755	8906	8150	9549	8905	149	138	—	—	2	1	2	1	—	—	643	755	8908	8151	9551	8906	149	138
Final No. belonging to Administrative County	1271	1382	17719	16516	18990	17898	302	277	75	81	2500	2453	2575	2534	12	9	1346	1463	20219	18969	21565	20432	314	286

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 1971, as the following statement shows:—

Year					Proportion (per cent.) of notified births assigned to Administrative County area and occurring—	
					In hospitals, maternity homes, etc.	In the home
1967	...	...	...	...	78.2	21.8
1968	...	...	...	...	80.9	19.1
1969	...	...	...	...	83.2	16.8
1970	...	...	...	...	86.0	14.0
1971	...	...	...	...	88.0	12.0

MANAGEMENT OF THE COUNTY COUNCIL NURSING SERVICES

Towards the end of 1971, the Health Committee agreed to the establishment of a new post of Director of Nursing Services, thus implementing a recommendation of the Mayston Report on the Management Structure of the Local Authority Nursing Services.

Following the appointment of a Director early in 1972, it is hoped that a new management structure for the County Nursing Services will be agreed with the Department of Health during the year.

MIDWIFERY

The County Council provide a midwifery service by the employment of midwifery sisters in urban areas and district nursing-midwifery sisters in the rural areas. The numbers employed on the 31st December, 1971, 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				
	1967	1968	1969	1970	1971
<i>Whole-time staff—</i>					
Midwives	241	238	235	235	228
Nurse-midwives	69	63	59	51	44
<i>Part-time staff—</i>					
Midwives or nurse-midwives	13	17	18	17	18
<i>Total equivalent whole-time staff engaged in midwifery</i>	248	247	244	243	238

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

Confinements occurring in the Administrative County area were 69 more than in the preceding year, those attended by County Council midwives and nurse-midwives accounting for 14.9 per cent of the whole.

The following table shows the number of confinements attended by midwives in the various services during each year from 1967 to 1971. These figures do not include miscarriages.

					Total confinements attended				
					1967	1968	1969	1970	1971
(a) Local Health Authority services—									
County Council midwives	...	...	...	...	8,841	7,895	6,833	5,883	5,056
County Council nurse-midwives	...	...	...	...	483	396	399	287	163
(b) Hospital services—									
In State hospitals	...	...	...	...	25,618	25,866	25,509	26,353	27,373
In voluntary hospitals	...	...	...	...	—	—	—	—	—
(c) In private practice—									
Domiciliary	...	...	...	...	1	—	—	—	—
Nursing homes, etc.	...	...	...	...	491	321	311	218	218
TOTAL—All services	...	...	...	...	35,434	34,478	33,052	32,741	32,810

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 1971 they made 130,959 visits to 30,218 such cases as compared with 121,637 visits to 27,492 cases in 1970. The 1971 figures represent increases of 7.1 per cent. in visits and 9.0 per cent. in cases when compared with those for 1970. In illustration of the growing tendency towards the early discharge of mothers from hospital, the case totals quoted earlier in the paragraph, when expressed as a percentage of all confinements in hospital where the mother was resident in the Administrative County area, rose from 76.7 to 82 per cent.

County Council midwives and nurse-midwives also attended 82 miscarriages, a reduction of 62 when compared with 1970.

Oxygen Resuscitators.—At the end of the year 277 midwifery sisters and district nursing-midwifery sisters were in possession of oxygen resuscitators.

District Training of Pupil Midwives.—Fifty-five 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 142 pupils from 13 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 53 midwifery sisters and district nursing-midwifery sisters attended residential refresher courses in 1971.

In addition an area superintendent of district nurses and two area supervisors of midwives attended a post certificate course for supervisors of midwives held at Tetley Hall, Leeds, from the 29th March to 3rd April, 1971.

A half-day refresher course was held at County Hall on the afternoons of 27th May and 15th June. Dr. S. Bender, Consultant Obstetrician, Chester Royal Infirmary, gave a talk entitled "Dangerous Women". The total attendance of 314 included 104 from other authorities and hospitals.

Motor Transport.—It is the policy of the County Council that all midwifery sisters should use cars or mini-vans for their official duties. At the end of 1971, forty-eight were using County Council owned mini-vans, the remainder using their own motor cars.

Pupil Midwives' Hostels, Kirkby and Prestwich.—During the year 25 pupil midwives stayed at these hostels, 13 at the Kirkby hostel and 12 at Prestwich, whilst undertaking their three months district training.

Housing of County Council Midwifery Sisters.—Of the 228 whole-time midwifery sisters employed on the 31st December, 1971, 45 occupied houses owned by the County Council, 19 occupied houses rented by the County Council from local district councils, whilst three occupied houses let direct to them by local district councils. The remaining 161 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 mutually agreed. An arrangement of this type took place at Whiston Hospital involving the attendance of a district midwifery sister for two days a week at the hospital to assist in pupil midwife training. This arrangement terminated at the end of August, 1971.

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 number 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
1970	...	...	...	288
1971	...	...	...	348

The number from Health Division No. 15 now represents 76 per cent. of the births in the divisional area for which the domiciliary midwifery service is responsible.

Similar arrangements were introduced during the year at Burnley General Hospital, and at Fazakerley Hospital, Liverpool.

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, 1971, in the various types of service:—

Type of service	No. of midwives
(a) Local Health Authority services—	
County Council midwives	243
County Council nurse-midwives	45
(b) Hospital services—	
In State hospitals	416
In voluntary hospitals	—
(c) In private practice—	
Domiciliary	1
Nursing homes, etc.	5
TOTAL—All services	710

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 1971 and the four previous years:—

	1967		1968		1969		1970		1971	
	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 ...	8,841	483	7,895	396	6,833	399	5,883	287	5,056	163
Miscarriages ...	159	8	181	19	131	13	129	15	80	2
TOTAL ...	9,000	491	8,076	415	6,964	412	6,012	302	5,136	165
	9,491		8,491		7,376		6,314		5,301	

The numbers of visits made by County Council midwives and nurse-midwives during 1971 are given below, together with the figures for the previous four years:—

	VISITS PAID				
	1967	1968	1969	1970	1971
Midwives	237,684	213,319	193,472	170,487	172,741
Nurse-midwives	14,353	12,646	12,242	8,691	5,174
TOTAL	252,037	225,965	205,714	179,178	177,459
Visits to mothers confined in hospital and discharged before the 10th day	80,595	96,708	107,219	121,637	131,459

Particulars of bookings of the general practitioners in connection with the confinements attended in 1971 by County Council midwives and nurse-midwives are given in the following table:—

	CONFINEMENTS			TOTAL BIRTHS
	Doctor not booked	Doctor booked	Total	
Midwives	77	4,979	5,056	5,065
Nurse-midwives	3	160	163	163
TOTAL	80	5,139	5,219	5,228

Of the 5,219 mothers attended in confinement by County Council midwives and nurse-midwives, 5,139 or 98·5 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.
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
1970	6,170	4,648	75	1,014	17	3,634	59
1971	5,219	3,999	77	1,202	23	2,979	54

*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:—

	1967	1968	1969	1970	1971
(a) Total No. of live and still births occurring in the Administrative County	35,564	34,919	33,822	33,198	33,257
(b) No. of (a) which were domiciliary	9,279	8,194	7,068	5,922	5,134
(c) No. of (b) which were attended by County Council midwives and nurse-midwives	9,240	8,155	7,014	5,894	5,128
(d) Percentage of (c) to (a)	26·0	23·4	20·7	17·8	15·7
(e) Percentage of (c) to (b)	99·6	99·5	99·2	99·5	99·8

Of the total births to mothers normally resident in the Administrative County area, 12·0 per cent were domiciliary (see page 56).

In the following statement particulars are given for 1971 and each of the four preceding years of deaths of mothers and children amongst cases attended by County Council midwifery sisters and district nursing-midwifery sisters.

	1967	1968	1969	1970	1971
<i>Deaths of mother or child (including deaths after removal to hospital)—</i>					
No. of live and still births attended ...	9,353	8,311	7,244	6,189	5,228
No. of deaths of mother ...	1	1	—	1	—
No. of deaths of child ...	20	18	5	12	7

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 1971, information relative to 4,412 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	177	176	1	—	6	174	3	167
30 years and over	6	6	—	—	1	6	—	—
Pregnant 2nd, 3rd or 4th time—								
Under 35 years	3,859	3,851	8	3,308	551	3,828	31	3,284
35 years and over	175	174	1	150	25	175	—	—
Pregnant for 5th or more times—	195	194	1	130	65	190	5	—
TOTAL	4,412	4,401	11	3,588	648	4,373	39	3,451

*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.

The table below illustrates the proportion of the cases booked in 1971, who fulfilled the domiciliary criteria by age and parity alone, and also by all criteria (excluding the Rhesus factor), with the corresponding proportions for each year since 1964.

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
1970...	91.0	78.8
1971...	91.5	78.2

*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 463 health visitor/school nurses, compared with 451 at the end of 1970. There were also 187 school/clinic nurses engaged whole or part-time in school health work and in clinics. In addition eight tuberculosis visitors were still employed at the end of 1971, 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 and 13 area superintendents.

Although there was a slight improvement in recruitment during 1971, 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 to enable them to undertake training for the health visitor's certificate was continued and during the year 32 students who had been assisted in this way were successful in obtaining the qualification. A further 29 students commenced their training in September, 1971.

During 1971 health and tuberculosis visitors in the Administrative County area visited a total of 253,249 persons. Visits paid during each of the last five years are shown below and similar information by health division and delegate district for 1971 is given in Table 12, page 151, 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 tuberculosis)		Tuberculosis				
					Cases		Contacts		
			under 65 yrs.	65 yrs. and over	under 65 yrs.	65 yrs. and over	under 65 yrs.	65 yrs. and over	
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
1970	15,714	476,066	35,236	74,457	10,942	2,148	15,190	860	630,613
1971	14,777	447,075	39,706	74,473	8,914	1,913	14,336	882	601,776

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 tuberculosis cases and contacts and on the other by the increased visits to other classes of adults.

More general practitioner attachment schemes have been established during the year and these account partly for the increase.

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.

Educational Work of Health Visitors.—This work essentially can 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.

There has been a marked increase in the requests from schools and other organisations for individual talks on a variety of subjects and many health visitors held counselling sessions – mainly in secondary modern schools. Others have been involved in parent/teacher meetings to discuss the film strips on sex education for eight year olds. Two comprehensive schools run small playgroups for four year olds as part of a child care course and health visitors were involved in discussions regarding the development of these children. Health education talks at a very practical level were given to educationally subnormal children.

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

Mothercraft and relaxation classes continued to form part of the health visitors' work both in clinics and hospitals and in several cases evening sessions were held.

Insofar as training was concerned, facilities were again provided during 1971 as an adjunct to the health visitor training courses at Liverpool, Bolton, Manchester and Preston whereby students accompany health visitors (many of whom are trained as fieldwork instructors) in various parts of the County area for their practical training. 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 in training, student teachers from training colleges, students from the social studies department of Manchester University and the Harris College, Preston, and from the post-graduate teachers' 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.

General Practitioner Attachment Schemes.—During 1971 the number of health visitors involved in either attachment or liaison schemes with general practitioners continued to increase. Over 60 per cent. of the health visitors are now actively engaged in attachment schemes.

Attachment has brought about a marked change in the pattern of the health visitors' work. Visits to patients 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. This, therefore, involves more travelling for the individual health visitor.

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.

Evening cytology clinic sessions continue to be held in some areas in addition to day time sessions.

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 several hospitals family care conferences are being held, 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 a further area joint meetings were held with members of staff from an adjacent borough and hospital staff to discuss and plan geriatric care in the area. Joint meetings have also been held between staffs of County and County Borough and general practitioners.

In many areas health visitors, on a rota basis, liaise with the following hospital departments:—geriatric, paediatric, diabetic, chest and heart, ophthalmic, midwifery, ear nose and throat, skin and general out-patients.

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.

Co-operation between health visitors and hospital social workers continues 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.

The mother and baby unit/health visitor liaison scheme formed as part of the female psychiatric section of Whittingham Hospital, near Preston, has continued. The 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 family health visitor is maintained.

Training and Refresher Courses.—Members of the staff attended post certificate refresher courses organised by the Royal College of Nursing and the Health Visitors' Association. Some attended conferences organised by other Local Authorities. Supervisory staff commenced middle management training courses at William Rathbone College, Liverpool.

During the late part of 1971, the Stretford Technical College arranged short courses entitled "Principles and Practice of Teaching for Health Visitors", which were attended by health visitors from areas of the County within reasonable travelling distance of the College.

Eight more health visitors attended courses for fieldwork instructors at Chiswick Polytechnic, Bolton Institute of Technology, Durham Technical College and Croydon College of Technology. This training is essential for health visitors who will undertake the practical training of student health visitors.

One hundred health visitors attended a refresher course in the screening for normal hearing. This training was given on two full day sessions at East Cliff Offices (approximately 50 health visitors attended on each day). Dr. Robson from the Audiology Clinic at Fulwood gave the lectures and conducted the tuition sessions along with one of the health visitors specially trained in this work.

The aim behind these in-service courses is to ensure that all health visitors have an up-to-date knowledge of developments in this field and are in fact carrying out the tests correctly. Health visitors who received their initial training prior to 1965 attended the refresher course in 1971.

Health visitors new to the County were also given initial training in carrying out screening tests for normal hearing.

Concern has been expressed that some staff carrying out the screening tests might have a hearing loss themselves thereby limiting their ability to check the hearing of children. Arrangements have been made for all health visitors to be tested.

The annual study day for health visiting staff was held at the County Hall on the 25th February and repeated on the 18th March. Dr. S. L. McKinley, Medical Officer, Division 11 spoke on "Some recent changes in Paediatrics" and Miss G. Meredith, Health Visitor, Division 11 and Miss K. M. Reddish, Health Visitor, Division 15 spoke on "Combining screening for normal hearing with developmental assessment".

DISTRICT NURSING

Since 1948 the County Council has provided the district nursing service by direct employment of the appropriate staff.

Staffing.—Details of the numbers of staff employed in 1971 and in each of the four preceding years are given in the statement below:—

					No. employed at end of year				
					1967	1968	1969	1970	1971
<i>Whole-time staff—</i>									
Nurses (general nursing only)	...	...	...	...	544	579	572	587	618
Nurses (general nursing and midwifery)	...	...	...	...	63	57	55	52	45
Nurses (general nursing, midwifery and health visiting)	...	...	...	...	6	6	4	3	2
Nursing auxiliaries	...	...	...	...	55	57	65	73	79
<i>Part-time staff—</i>									
Nurses	...	...	...	...	20	17	16	9	14
Nursing auxiliaries	...	...	...	...	16	13	12	12	15
<i>Total equivalent whole-time staff engaged in district nursing</i>					689	714	710	726	759

Of the 744 whole-time nurses employed at the 31st December, 1971, 443 were state registered, 416 representing 93.9 per cent. were district trained; state enrolled nurses numbered 206 of whom 140 (67.9 per cent.) were district trained.

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 attachment schemes where the medical practitioner, district nursing sister and district nurse operate as a team, has progressed and 473 nursing staff work wholly and 54 partly within attachment schemes. Comparable figures for 1970 were 408 and 89 respectively, which illustrates the extent of development. Over 76 per cent. of the full-time district nursing sisters and district nurses are now actively engaged in attachment schemes.

The number of general practitioners now associated with attachment schemes is 627 and the number of surgery sessions attended by district nursing staff was 33,901 at which 178,560 treatments were given. This figure is additional to the number of visits paid to cases quoted in the following table.

The scheme functions through the liaison achieved by the district nursing sister in charge of the nursing team attending surgery sessions regularly, sometimes daily, to carry out injections and undertake dressings for patients whom she would normally have had to visit in their own homes. The sister also discusses with the general practitioner the treatment and progress of patients being nursed at home, and following this, variations in nursing care can be implemented where necessary without delay. Constant contact also brings to light cases which may require nursing care at home and enables arrangements to be made for such care to be given.

Doctors and nurses appreciate these attachment schemes and consider that they are of benefit to the patients.

Cases Attended.—In the following statement particulars are given of the number of cases attended by the district nursing sisters and district nurses during 1971 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, reference to which is made in the preceding section.

	1967	1968	1969	1970	1971
General nursing cases attended	56,796	65,867	61,577	60,786	62,248
No. of visits paid to these cases	1,694,452	1,791,045	1,802,159	1,839,374	1,901,569
Average no. of visits per case	29.8	27.2	29.2	30.3	30.5

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 1971 these numbered 41,168 and in the table below are analysed by disease or ailment in order of frequency and by age group. A similar but more detailed statement is given in Table 13, page 152.

Disease or ailment	Total cases	Age group (years)				
		0–	5–	15–	45–	65–
Senility and other ill-defined conditions ...	6,831	71	124	1,157	1,596	3,883
Diseases of digestive system ...	5,053	188	347	1,310	1,371	1,837
Diseases of the heart and circulatory system ...	4,004	7	8	259	848	2,882
Anaemias and other blood diseases ...	3,482	5	5	444	786	2,242
Cancer ...	2,961	35	11	164	1,052	1,699
Accidents, injuries, etc. (including burns and scalds) ...	2,916	190	210	458	544	1,514
Diseases of the skin ...	2,865	94	100	551	605	1,515
Diseases of respiratory system (other than tuberculosis) ...	2,677	197	111	459	544	1,366
Diseases of the central nervous system ...	2,404	2	9	163	492	1,738
Diseases of the genito-urinary system ...	1,972	143	52	532	559	686
Diseases of bones and organs of movement (including rheumatism and arthritis) ...	1,353	2	11	72	312	956
* Infective and parasitic diseases ...	994	51	40	216	286	401
Diabetes ...	749	2	18	53	174	502
Diseases of eye, ear and mastoid process ...	530	44	14	46	72	354
Mental, psychoneurotic disorders ...	371	2	2	69	85	213
All other conditions ...	2,006	36	22	1,835	68	45
TOTAL—All conditions ...	41,168	1,069	1,084	7,788	9,394	21,833

* Including tuberculosis of respiratory system.

The number of cases upon which attendance ceased in 1971, was approximately 1,800 more than in the previous year. The average duration of treatment increased from 14.2 weeks in 1970 to 14.9 during 1971, whilst the average number of visits per case also rose from 29.9 to 30.6. The average number of visits per case per week remained unchanged at 2.1.

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				
	1967	1968	1969	1970	1971	1967	1968	1969	1970	1971	1967	1968	1969	1970	1971
Tuberculosis of respiratory system ...	16.6	16.5	16.5	22.1	12.9	79.3	70.8	77.4	83.2	63.0	4.8	4.3	4.7	3.8	4.9
Other infective and parasitic diseases ...	7.0	5.7	6.6	5.1	6.9	21.5	20.8	22.4	17.5	21.6	3.1	3.7	3.4	3.4	3.1
Cancer ...	8.1	8.9	9.5	9.4	10.6	35.4	36.0	36.2	36.1	39.4	4.4	4.0	3.8	3.8	3.7
Diabetes ...	32.8	29.3	34.9	23.9	24.6	159.0	150.6	171.3	109.9	118.7	4.8	5.1	4.9	4.6	4.8
Anaemias and other blood diseases ...	36.6	31.9	47.1	41.7	43.3	38.1	36.6	47.5	42.2	42.7	1.0	1.1	1.0	1.0	1.0
Mental, psychoneurotic disorders ...	9.7	10.9	15.8	11.4	16.0	25.2	19.2	26.2	20.5	25.2	2.6	1.8	1.7	1.8	1.6
Cerebral haemorrhage, cerebral embolism and thrombosis ...	13.2	14.3	15.0	15.2	18.3	36.6	38.0	40.2	41.9	43.0	2.8	2.7	2.7	2.8	2.3
Other diseases of central nervous system ...	22.9	23.1	26.7	25.2	31.3	58.6	54.1	66.5	61.1	74.5	2.6	2.3	2.5	2.4	2.4
Diseases of eye, ear and mastoid process ...	2.1	1.3	4.8	6.6	5.8	8.5	5.1	18.7	29.6	29.6	4.0	3.9	3.9	4.5	5.1
Diseases of heart and circulatory system ...	17.9	17.4	14.9	15.7	16.6	39.9	40.3	34.2	34.1	36.1	2.2	2.3	2.3	2.2	2.2
Influenza ...	6.8	3.1	4.5	3.7	2.8	12.7	12.0	11.0	11.6	9.6	1.9	3.9	2.4	3.1	3.4
Pneumonia ...	2.6	3.9	3.6	4.9	4.5	12.6	15.4	14.9	19.0	15.1	4.9	4.0	4.1	3.9	3.4
Bronchitis ...	5.1	5.8	7.3	7.0	10.2	16.5	16.7	20.2	18.5	22.3	3.2	2.9	2.8	2.6	2.2
Other diseases of respiratory system ...	3.8	2.6	3.9	3.6	5.4	13.0	9.4	12.8	10.9	13.4	3.5	3.6	3.3	3.0	2.5
Diseases of digestive system ...	5.1	4.0	4.1	4.3	4.3	14.3	12.0	12.6	12.3	12.3	2.8	3.0	3.1	2.9	2.8
Diseases of genito-urinary system ...	22.0	18.2	19.7	17.6	15.8	22.1	20.2	21.6	17.9	17.3	1.0	1.1	1.1	1.0	1.1
Diseases of the skin ...	10.5	9.5	11.4	12.2	12.8	28.2	26.0	30.6	32.1	33.5	2.7	2.7	2.7	2.6	2.6
Diseases of bones and organs of movement (including rheumatism and arthritis) ...	33.3	30.0	31.7	35.9	35.2	64.6	60.7	59.8	66.0	64.5	1.9	2.0	1.9	1.8	1.8
Senility and ill-defined conditions ...	12.4	11.1	12.7	12.1	12.4	26.8	24.0	26.7	24.7	24.5	2.2	2.2	2.1	2.0	2.0
Burns and scalds ...	5.0	5.0	5.2	5.1	5.6	16.3	15.0	17.6	16.8	16.3	3.3	3.0	3.4	3.3	2.9
Other accidents, injuries, etc. ...	5.8	4.9	7.3	7.6	7.3	15.5	12.2	20.2	19.6	16.9	2.7	2.5	2.8	2.6	2.3
All other conditions ...	5.0	4.7	3.8	4.1	3.6	13.1	13.0	11.8	12.2	10.6	2.6	2.8	3.1	3.0	2.9
TOTALS—Administrative County ...	14.2	12.2	15.3	14.2	14.9	29.8	26.6	32.0	29.9	30.6	2.1	2.2	2.1	2.1	2.1

In Table 14, page 153, 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 1971.

Below are given the agencies by which the services of the nurses were enlisted for the cases terminated in 1971.

	No. of patients	Per cent. of total
General practitioners	34,296	83.3
Hospitals	5,664	13.8
Patients, relatives or friends	697	1.7
Public health authorities	421	1.0
Others	90	0.2

The principal reasons for the cessation of the nurses' attendances on the cases under review in 1971 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 153 and 154.

	No. of patients	Per cent. of total
Recovered, relieved or convalescent	23,363	56.8
Admitted to hospital	7,932	19.3
Died	5,125	12.4
Gone away	1,550	3.8
Out-patient, X-ray, etc.	1,475	3.6
Nurse withdrawn	1,542	3.7
Others	181	0.4

The statement below provides an analysis of the types and numbers of treatments which were involved in the cases upon which attendance ceased in 1971.

Nursing treatment	No. of cases	Proportion of total (per cent.)
General nursing care	8,724	21.2
General nursing care with injections	833	2.0
General nursing care with dressings and poultices	499	1.2
General nursing care with bladder lavage, rectal lavage, catheterisation and enemata	266	0.6
Septic dressings and poultices	2,555	6.2
Dry dressings	9,155	22.2
Burns and scalds—dressings and treatments	577	1.4
Pre-operative treatment and pre-X-ray	1,252	3.0
Blanket baths (one, twice or thrice weekly)	1,588	3.9
Douche and pessaries	211	0.5
Bladder lavage, rectal lavage, catheterisation, enema, saline or washout	2,013	4.9
Injections (hypodermic or intramuscular)	10,377	25.2
Injections (hypodermic or intramuscular) with dressings	294	0.7
Operations	—	—
Eyes, ears, nose and throat treatments	462	1.1
Skin treatments	270	0.7
Care of patients in plaster casts and splints	49	0.1
Clinical observation	1,193	2.9
Others	850	2.1

Treatments comprising or including injections amounted to 27.9 per cent. of the total whilst general nursing care, either alone or in conjunction with some other form of treatment, was needed in 25.1 per cent. Dressings or poultices, excluding those required for the treatment of burns, were required in 30.4 per cent. of the cases.

Post-Certificate Training.—Six training courses leading to the examination for the National Certificate in District Nursing were held at the training centre during the year. Participants included staff from other authorities and hospital pupils (S.E.N. only) as will be seen from the following tables. Out of the total of 98 who took the examination only five failed to reach the required standard for the award of the Certificate in District Nursing.

Type of Course			County Staff	Other Authorities' Staff	Hospital pupils
State registered nurses	...	Pass	32	16	—
	...	Fail	1	1	—
State enrolled nurses	...	Pass	20	4	21
	...	Fail	1	—	2

Residential refresher courses organised by the Queen's Institute of District Nursing at Oxford, Sheffield, Southampton and London were attended by a total of 60 district nursing sisters and district charge nurses. Twenty-nine district nurses attended refresher courses organised by the Queen's Institute and the Royal College of Nursing in London and Birmingham.

A seminar on district nurse training arranged by the Department of Health and Social Security in May was attended by the Deputy Superintendent of District Nurses and the Course Tutor at the Nurses Training Centre.

Half-day studies were held at County Hall in October and a total of 594 nurses attended. A talk on "Renal Dialysis", illustrated by slides, was given by Dr. H. J. Goldsmith, Consultant Physician, Sefton General Hospital, Liverpool.

On the 8th December, 73 nursing auxiliaries attended a lecture given by Mr. D. Burton, Senior Social Worker for the Deaf, on the subject of "Hard of Hearing" and "The Deaf and Blind".

A top management course of four weeks was attended by the Superintendent of District Nurses at Strathclyde University, Glasgow, in October, and an Area Superintendent attended a middle management course at the William Rathbone Staff College, Liverpool, from the 18th October to the 12th November, 1971. A practical work instructors' course at the Nurses Training School held in October was attended by 15 district nursing sisters, and 20 nursing auxiliaries participated in a training course held at Knowle View Mental Health Hostel, Whitefield, from the 1st to the 5th November.

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 1971, 30 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 1971. Four hundred and fifty-three were positive for albumin and 225 showed a positive reaction to sugar in previously unknown cases. The family doctors were informed of the results.

Motor Transport.—At the end of 1971 motor cars or mini vans were being used for official duties by 702 of the district nursing staff. The vehicles were owned in 610 cases by the nurses themselves and in 92 by the County Council.

Housing of District Nursing Staff.—Of the staff employed on the 31st December, 1971, 39 nurses occupied houses owned by the County Council, 15 occupied houses rented by the County Council from district councils, one occupied a house rented by the County Council from a private owner and 12 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 poliomyelitis, diphtheria, whooping cough, tetanus, measles and rubella. 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 1971 under the County Council's scheme are detailed below.

Vaccination against Smallpox.—The Chief Medical Officer to the Department of Health and Social Security in C.M.O. 12/71 informed local authorities that in view of evidence studied by the Smallpox Vaccination Sub-Committee as to the smallpox eradication programme of the World Health Organisation, vaccination against the disease need not now be recommended as a routine procedure in early childhood. Vaccination against the disease is still available, however, to persons travelling to infected areas, and to health services staff coming into contact with patients.

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 1971 the following persons were vaccinated at the centre:—

Children under nine months	...	...	...	1
Children over nine months	...	...	...	51
Adults	...	...	...	335
TOTAL	...	...	...	387

Of the 387 persons vaccinated, 307 were residents of Lancashire, 52 were from Westmorland, six were from Yorkshire, one was from Cumberland and 21 were from other areas.

Immunisation against Poliomyelitis, Diphtheria, Whooping Cough, Tetanus, Measles and Rubella.—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 1971.

Antigen used	Primary immunisations						Reinforcement doses				
	(a)	Under 2	2–	3–	4–	8–	Totals under 16	Under 4	4–	8–	Totals under 16
	(b)	1970–71	1969	1968	1964–67	1956–63	1956–71	1968–71	1964–67	1956–63	1956–71
Poliomyelitis only ...		22,602	7,858	1,186	2,853	761	35,260	1,105	30,107	7,365	38,577
Diphtheria only ...		15	7	3	29	7	61	4	254	223	481
Whooping cough only...		13	4	1	5	3	26	3	6	2	11
Tetanus only ...		22	16	11	71	556	676	47	245	3,394	3,686
Measles only ...		8,142	7,873	2,602	2,865	483	21,965	—	—	—	—
Rubella only ...		—	—	—	—	20,540	20,540	—	—	—	—
Diphtheria and whooping cough (combined) ...		18	14	1	1	3	37	5	66	16	87
Diphtheria, whooping cough and tetanus (combined) ...		22,430	7,450	966	734	114	31,694	1,090	2,135	372	3,597
Diphtheria, whooping cough, tetanus and poliomyelitis (combined) ...		5	2	—	—	—	7	—	—	—	—
Diphtheria and tetanus (combined) ...		960	453	209	1,895	824	4,341	504	29,264	5,123	34,891

(a) Age, in years, at end of 1971.

(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. The effects of the introduction towards the end of 1968 of the revised schedule of vaccination and immunisation procedures would appear to be passing, although the increase in the numbers primarily protected during 1971 against the several diseases was still not sufficient for the totals to attain the levels which previously applied.

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 2	2-	3-	4-	8-	Total under 16	Under 4	4-	8-	Total under 16
1967	28,834	2,701	772	2,490	1,116	35,913	2,173	20,505	4,089	26,767
1968	29,635	2,915	993	2,724	895	37,162	3,648	25,396	6,782	35,826
1969	17,283	2,303	835	2,965	954	24,340	3,332	29,995	6,834	40,161
1970	21,866	6,992	755	2,348	654	32,615	2,014	27,468	5,828	35,310
1971	22,607	7,860	1,186	2,853	761	35,267	1,105	30,107	7,365	38,577

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 2	2-	3-	4-	8-	Total under 16	Under 4	4-	8-	Total under 16
1967	31,589	1,534	637	2,629	1,106	37,495	15,609	25,854	12,298	53,761
1968	30,829	1,755	688	2,590	1,166	37,028	17,475	28,313	10,875	56,663
1969	14,754	1,618	550	2,459	830	20,211	14,322	30,996	5,680	50,998
1970	22,487	6,836	576	2,189	777	32,865	5,004	28,475	5,106	38,585
1971	23,428	7,926	1,179	2,659	948	36,140	1,603	31,719	5,734	39,056

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 2	2-	3-	4-	8-	Total under 16	Under 4	4-	8-	Total under 16
1967	30,396	1,371	507	773	232	33,279	12,011	2,314	303	14,628
1968	29,500	1,518	519	838	163	32,538	13,331	3,057	377	16,765
1969	14,205	1,518	421	697	82	16,823	10,831	2,835	263	13,929
1970	21,525	6,438	472	648	89	29,172	3,646	2,110	209	5,965
1971	22,466	7,470	968	740	120	31,764	1,098	2,207	390	3,695

MEASLES IMMUNISATION.—During the year 21,965 children in all were protected against measles compared with 22,546 in the previous year.

Corresponding particulars of immunisations against poliomyelitis, diphtheria, whooping cough and measles during 1971 are given by health divisions and delegate districts in Tables 16–19, pages 155 to 158 together with the number of primary immunisations and reinforcements performed by general practitioners in the course of private practice.

RUBELLA IMMUNISATION.—Immunisation against rubella is available for all girls between their 11th and 14th birthdays. During the year 20,540 girls had been vaccinated.

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 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, 36,718 children under 16 years of age at the end of the year were immunised against tetanus, 23,417 of them being under two years of age. In addition, 42,174 reinforcement injections were given.

Immunisation and Vaccination.—PERCENTAGES VACCINATED AS AT 31ST DECEMBER, 1971.—In the following table indices of acceptance of protection against the diseases specified are given as at the 31st December, 1971, for each health division and delegate district and for the Administrative County as a whole. Figures for the Administrative County for the previous four years are also given although they have been revised, to conform with the amended basis of calculation, namely children born two years prior to the year under report protected at any time expressed as a percentage of the number of live births during that year.

Health Division No.—	Percentages vaccinated		
	Poliomyelitis	Whooping cough	Diphtheria
	†Born two years previously	†Born two years previously	†Born two years previously
1	88	88	89
2	72	66	72
3	76	71	75
4	79	78	81
5	80	76	80
6	74	75	76
7	67	75	76
8	90	87	90
9	55	51	56
10	67	70	70
11	69	65	69
12	75	77	79
13	68	67	72
14	75	72	76
15	75	70	76
16	89	74	90
17	67	65	69
Delegate District—			
Crosby M.B.	68	68	69
Huyton-with-Roby U.D.	70	79	79
Middleton M.B.	68	66	67
Stretford M.B.	63	60	65
Administrative County—			
1971	72	71	74
1970	74	75	78
1969	77	78	82
1968	72	74	77
1967	72	75	77

† Children born two years previously and vaccinated at any time, as percentage of live births during that year.

The percentages for England comparable with those quoted in the table for 1971 were:—Poliomyelitis 80, Whooping Cough 78 and Diphtheria 80.

AMBULANCE SERVICE

Radio Communication Scheme.—Although the initial installation of radio equipment throughout the County ambulance service was completed in 1959, due to local circumstances there are still one or two areas remaining where the deployment of vehicles is undertaken on a local basis, and at the 31st December, 1971, three stations still had telephone watches.

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, 1971, was as follows:—

Fitted to:—	Mobile sets	*Installation parts
Operational vehicles	247	247
Reserve vehicles	4	60
Transport engineers	2	2
Supervisory cars	7	7
Major disaster vehicle	2	2
In reserve, at wireless work-shops, etc.	15	23
	277	341

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

Ground Communications.—PRIVATE TELEPHONE NETWORK.—At the end of 1971, of the 46 County ambulance stations 43 were linked together by the private telephone network.

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 1971 there were nine 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 nine 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, 1971, still served by agency agreements with the authorities indicated:—

Agency	Area served	Estimated population, 1971
Westmorland C.C. ...	North Lonsdale R.D. (part)—(Skelwith; Hawkshead; Claife)	1,400
Blackburn C.B.C. ...	Blackburn R.D. (part)—(Livesey; Pleasington; Mellor; Ramsgrave; Balderstone; Osbaldeston; Clayton-le-Dale; Salesbury; Wilpshire; Dinckley)	12,810
	Preston R.D. (part)—Samlesbury (part)	
Burnley C.B.C. ... (Emergency service only)	Burnley R.D. (part)—(Worsthorne; Cliviger; Habergham Eaves; Dunnockshaw)	—
Bolton C.B.C. ...	Turton U.D.	21,520

The Construction (Health and Welfare) Regulations, 1966.—During the year notifications were received from contractors in respect of 14 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, social services, health education, etc.

The establishment and strength of vehicles operated by all services administered by the health department at the 31st December, 1971, were as follows:—

Service	Authorised establishment	Vehicle strength
Ambulance	312	326
District nursing	144	140
Domiciliary midwifery	23	23
Social Services (Welfare)	16	16
Health education	8	7
Divisional transport	14	14
Health Department (Admin.)	2	2
	<u>519</u>	<u>528</u>

Of the 528 vehicles operated by the health department, 326 belonged to the ambulance service fleet comprising the following types of vehicle:—

Ambulance with one fixed stretcher with loading gear and an adaptable seat unit for six patients or a second stretcher	28
Ambulance with two adaptable seat/bed units for two stretchers or 12 sitting patients ...	33
Ambulance with one Fernoflex cot and one multi-posture trolley	47
Ambulance with two multi-posture trolleys	58
Eight/nine and ten seat dual purpose ambulances capable of adaptation to carry one stretcher	148
Long distance ambulances	7
Major incident control vehicles	2
Multi-purpose Land Rover ambulances	2
Stores collection and delivery van	1
	<u>326</u>

The average age of stretcher carrying ambulances at the 31st December, 1971, was 4.8 years and that of dual purpose ambulances 2.6 years.

VEHICLE MILEAGES.—The gross mileage (*i.e.*, both operational and non-operational) of the ambulance service fleet in 1971 was 6,013,781—for the ninth successive year the highest total on record. It represented an increase of 224,468 or 3.9 per cent. over that for 1970. Details of the gross mileages in 1971 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	
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
1970	3,286,561	2,502,752	—	5,789,313	+4.2
1971	3,372,779	2,566,381	74,621	6,013,781	+3.9

DEVELOPMENT AND PURCHASE OF NEW VEHICLES.—In 1971, it was agreed that the BLMC EA chassis would be used as the basis for stretcher carrying ambulance requirements for that year, and an order was placed for 27 vehicles each equipped with two multi-posture trolleys. Delivery of the first vehicles was expected early in 1972.

Orders were also placed during the year under report for a further three long distance ambulances based on the Austin 3-litre saloon car and delivery was completed by the end of the year. This increased the number of such vehicles to six, bringing the long distance fleet up to the level whereby savings could be made on rail journeys and at the same time provide more comfort and less inconvenience to patients travelling over long distances.

During the year a Bedford 25 cwt., 126" wheelbase CF van was purchased and converted in the County Council's Transport Workshops into a prototype eight seater dual purpose ambulance with the view to this type of vehicle being used in future in preference to the BLMC 250 JU. By the end of 1971, the conversion had been carried out, and the vehicle was about to be put into service for the comments of the operational personnel.

The Transport Department, as in previous years, undertook the conversion of standard BLMC 250 JU's into dual purpose ambulances to meet service requirements in 1971/72.

HEALTH SERVICE MOTOR VEHICLES.—Of the 202 vehicles, other than ambulance service vehicles, operated by the various health and social services at the end of the year, 163 were mini vans for the official use of district nursing and midwifery sisters. During 1971 the mini vans ran a total of 1,024,432 miles for official purposes, a decrease of 20,211 compared with the corresponding total for the previous year.

SOCIAL SERVICES VEHICLES.—The fleet of coaches specially adapted for the conveyance of handicapped persons was increased to 16 during 1971. A contract for a further three coaches was negotiated during the year for delivery in 1972.

Staff.—The following table shows the approved establishment of operational and control room staffs together with the number employed on the 31st December, 1971.

	Approved establishment	Employed at 31st December, 1971
Operational staff (including station officers) ...	847	840
Control room staff:—		
Senior controllers ...	5	5
Controllers ...	25	25
Assistant controllers ...	20	20
Control room assistants ...	22	22

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 1971, but there was no further significant improvement in the age structure. The situation is however kept under constant review.

TRAINING.—During the year courses of six weeks duration were held for new entrants; two-week courses for personnel with more than two and less than five years' service and a two-week refresher course for personnel who have attended a course of basic training. Because of the limited residential accommodation at the Training Centre at "Westleigh", Lea, Nr. Preston, it was again necessary to "board out" the students attending the two-week courses at a hotel in Preston.

The following gives details of the number of students who attended courses during 1971:—

Type of Course	County Council Personnel	Personnel of Other Authorities	Total
6 week courses ...	100	61	161
2 week courses (basic) ...	124	92	216
2 week courses (refresher) ...	74	2	76
TOTAL ...	298	155	453

Of the 453 students who attended the Training Centre, three failed to complete a six-week course satisfactorily, and two failed to complete a two-week basic course satisfactorily.

County Council Ambulance Service Corps—St. John Ambulance Brigade.—The ambulance service continued to be embodied as a Corps of the St. John Ambulance Brigade. As a result of the introduction of the Millar type of training at the Training Centre, a large number of the staff no longer wish to retain their connection with the St. John Brigade.

In view of this it will be necessary to reorganise the constitution of the County Corps, and a review is currently being carried out.

EFFICIENCY COMPETITION.—The competition for the Alderman Lord Trophy for the year 1970/71 was won by Health Division No. 12. Second place was gained by Health Division No. 2 and third by Health Division No. 15.

NATIONAL SAFE DRIVING COMPETITION.—All eligible staff of the County ambulance service took part in the National Safe Driving Competition for 1971 and of the 744 drivers entered, awards were made to 598.

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. 15 team which went forward into the regional competition where they were placed fourth out of the 13 entrants.

Premises.—The number of ambulance stations in use at the 31st December, 1971, was as follows:—

Main stations at radio control centres	5
Main stations (full time service with 24 hour telephone watch) ...	3
Depots (full time service without telephone watch)	35
Garages (day or alternating shift service only without telephone watch)	3
TOTAL ...	46

The extension of Cadishead ambulance station was completed in September, 1971. This increased the number of bays at the station from three to six.

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		
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
1970	65,642	983,197	1,048,839	40,731	1,089,570
1971	65,672	1,012,103	1,077,775	36,321	1,114,096

* 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, it is gratifying to note that the upward trend of previous years was much less pronounced in 1971, the total of 65,672 cases being 0.5 per cent. greater than the corresponding figure for 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, 8,208 such journeys were made and these are not included in the total of 65,672 cases given in the table.

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 further decrease equivalent to 10.8 per cent. took place during the year. This was mainly accounted for by a reduction in the number of cases moved on behalf of social services, an increasing number of which were conveyed in the specially adapted coaches.

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 8.0 minutes, the highest station average being 14.0 minutes and the lowest 5.8 minutes. Journeys to hospital averaged 24.1 minutes from the time of call, the highest station average being 54.9 minutes and the lowest 17.7 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.

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.)
1967	58,400	7.7	23.1
1968	59,843	7.6	23.2
1969	62,204	7.7	23.5
1970	62,519	7.8	23.8
1971	62,326	8.0	24.1

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

Type of case	1967	1968	1969	1970	1971
Emergency ...	26.0	26.2	26.6	26.3	26.1
Non-urgent ...	416.7	414.4	408.2	409.9	417.2
TOTAL ...	442.7	440.6	434.8	436.2	443.3

In the following table the patients carried during 1971 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 ...	61	8	11
Sitting I ...	27	72	70
Sitting II ...	12	20	19

LONG DISTANCE SERVICE.—The table below gives particulars of the work of the headquarters long distance service during each of the five years 1967–71:—

Year	Cases moved			Case mileage (road journeys only)
	By road	By rail	Total	
1967	5,367	866	6,233	220,878
1968	5,921	588	6,509	249,556
1969	6,046	573	6,619	256,553
1970	6,594	869	7,463	270,116
1971	7,543	1,101	8,644	278,068

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

Radio Control Area	Patients moved	Mileage
Accrington	105	2,759
Whiston	187	4,964
Swinton	255	17,064
Whitefield	555	20,914

The total number of long distance patients moved by road during 1971 amounted to 8,645 and involved a mileage of 323,769. With regard to the 1,101 rail journeys, the ambulance service was required to pay the cost of the patient's fare on 901 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, although the British Red Cross Society, to whom the County Council is indebted, provided escorts on 56 journeys.

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 59 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 the other County services and (c) certain special journeys referred to earlier which were outside the scope of section 27, but does not include mileage run for vehicle maintenance and similar purposes.

Year	Total operational mileage	Section 27 cases	
		Mileage	Average miles per case
1967	5,219,280	5,023,434	5.07
1968	5,332,042	5,144,964	5.10
1969	5,496,804	5,310,179	5.18
1970	5,719,883	5,515,418	5.25
1971	5,940,850	5,759,497	5.34

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				
	1967	1968	1969	1970	1971
†Social Services (Mental health) ...	35,225	33,635	32,057	33,422	14,511
Nursing ...	23,011	17,456	21,691	20,768	9,162
School health ...	16,559	20,206	18,790	18,831	22,778
Social Services (Welfare) ...	93,746	88,820	84,022	97,346	79,971
Coroner's ...	262	245	133	105	112
†Education ...	—	—	—	—	13,348
TOTAL—Other County services ...	168,803	160,362	156,693	170,472	139,882
National Coal Board ...	10,027	7,177	6,602	6,518	5,220

†Mileages for 1971 allow for transfer of financial responsibility for Junior Training Centres to the Lancashire Education Committee.

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 1971 chest physicians, employed by Regional Hospital Boards, working in close co-operation with the County Council's medical and health visiting staff carried out 376 home visits to new patients and contacts and 384 home visits to old cases and contacts. Tuberculosis visitors and health visitors made 10,827 visits to cases and 15,218 visits to contacts. The number of households visited was 5,215.

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 1969 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.

In April, 1970, the views of the County Health Committee were requested by the Manchester Regional Hospital Board. A reply was sent pointing out that the basic concern of the County Health Committee was that the radiological resources of the Board should be sufficient to cater for the immense amount of preventive work which was required in their area. They expressed the view that there was still a place for industrial surveys and pointed out also that they considered it of some consequence that a mobile unit has the great advantage of taking the service to the potential patient who may be reluctant to travel any distance.

In August, 1970, the Board wrote to the effect that having regard to the fact that they had reduced the number of mass miniature units in the region from six to four, two years previously, they had now come to the conclusion that any further reduction would not be in the best interests of the National Health Service or the public.

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:—

	1967	1968	1969	1970	1971
Number of persons tested for suitability for B.C.G. vaccination ...	2,504	2,347	2,081	2,419	3,019
Number of persons vaccinated ...	2,525	2,330	2,258	2,401	2,701

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 1971 and the previous four years and similar information for each health division and delegate district for 1971 is given in Table 20, 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						
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
1970 ...	218	29,640	3,706	24,772	83.6	23,079	2,029	9.2	20,079	90.8	19,895
1971 ...	246	32,075	3,563	26,762	83.4	24,889	2,868	12.0	20,990	88.0	20,832

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 Social Services Committees.

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.

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 79 clinics were in operation. The following table shows the results of the work done in 1971:—

	Age group (years)						Total all ages
	Under 20	20—	30—	40—	50—	60—	
No. of first smears taken ...	127	3,958	6,975	5,462	2,553	490	19,565
No. of repeat smears requested ...	2	236	589	434	211	36	1,508
No. of positive smears ...	—	3	14	15	7	2	41
No. of positive smears per 1,000 screened ...	—	0.8	2.0	2.7	2.7	4.0	2.1
No. of cases referred to G.P.'s for other conditions ...	9	385	753	626	252	44	2,069

A summary of results since 1967 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
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
1970	19,959	1,580	51	2.6	2,044
1971	19,565	1,508	41	2.1	2,069

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)
1967	(a) 37	(b) 63	994	2,750
1968	(a) 17	(b) 46	998	2,769
1969	(a) 35	(b) 38	1,175	3,671
1970	(a) 22	(b) 46	1,215	3,677
1971	(a) 16	(b) 35	1,271	4,194
				Total— all conditions
				3,844
				3,830
				4,919
				4,960
				5,516

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

In 1968 the Minister of Health issued a circular 38/68 with which was enclosed a memorandum on the control of venereal disease which had been prepared with the agreement of his Standing Medical Advisory Committee.

Paragraph 14 of this memorandum expressed the view that the ultimate responsibility for contact tracing must rest with the medical officer of health although the way in which responsibility is delegated and discharged in individual areas would be a matter for local decision.

In the Administrative County area contact tracing is undertaken by social workers or clinic staff employed by hospital authorities with assistance on request by the County Council's health visitors. The venereologists concerned have been consulted as to the adequacy of these arrangements and the general opinion is that they are working very well.

Reference to health education on the subject of venereal disease is given from page 81 of this report.

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, district 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 1971 assistance was given in 140 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.

During 1971 there were admitted to convalescent homes 128 individuals compared with 178 in 1970. 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	5	5
Blackburn and District Convalescent Home, St. Annes	22	39
Delton, Blackpool	4	1
Evelyn Devonshire Red Cross Home, Buxton	2	6
Grey Court, Hest Bank	1	2
Greylands Holiday Home, Rhos-on-Sea	1	1
Lady Forester Convalescent Home, Llandudno	—	1
Lear Home, West Kirby	—	22
Seabright, St. Annes	—	6
TOTAL	35	83

Mothers accompanied by children admitted to Convalescent Homes

Name and address of home	Mother with one child	Mother with three children
Grey Court, Hest Bank	1	1
St. Agnes House, Manchester	1	—
Knowle House, Handforth	1	—
TOTAL	3	1

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:—

	1967	1968	1969	1970	1971
Adults	187	149	163	172	118
Unaccompanied children under school age	17	16	9	1	—
Mothers accompanied by children—					
Mothers	7	2	2	2	4
Children	8	2	2	3	6
TOTAL	219	169	176	178	128

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 1971 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
1967	304	2,446	98	6,290
1968	220	1,587	95	5,142
1969	191	1,100	108	5,033
1970	123	511	80	4,255
1971	123	596	77	4,817

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.

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. 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.

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 1971 comprised 755 cases where normal laundry was provided, 304 cases where normal laundry was supplemented by the supply of incontinence pads and 3,584 cases where incontinence pads only were supplied.

Chiropody Service.—This service continued on the same lines as previously reported. During the year, however, a new post of County Chiropodist was created and as a result Mr. E. G. Jones, M.Ch.S., S.M.Ch., took up duty on the 1st December, 1971.

A comparison and summary of the direct and indirect services for 1971 is given in the following table together with the totals of patients and treatments provided in each of the previous four years. Detailed statistics for each area are given on pages 160 and 161, Table 21 covering the services provided directly by the County Council and Table 22 the services provided by voluntary associations.

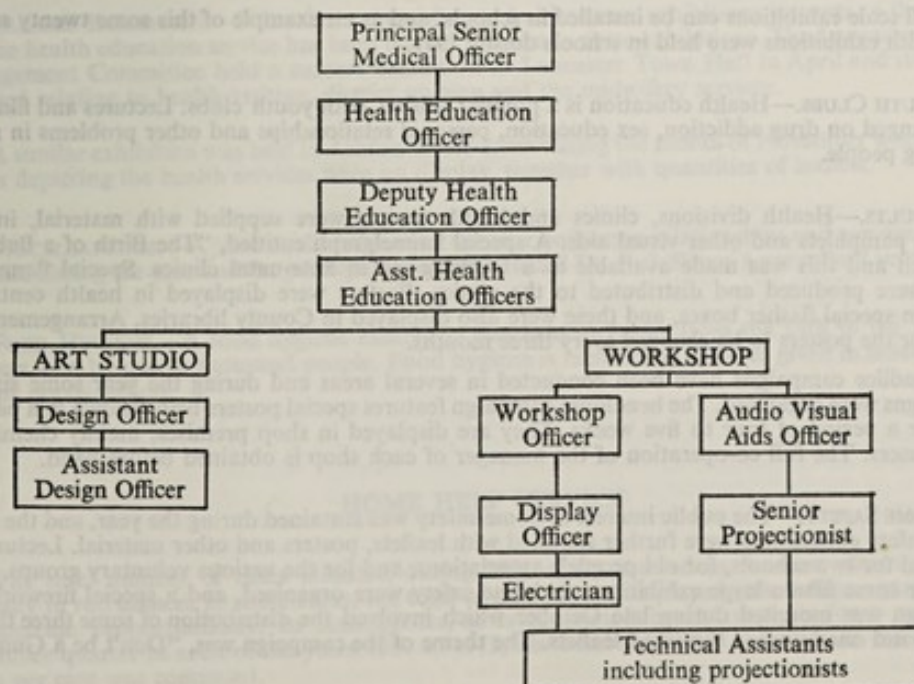
The number of clinic premises used for chiropody sessions in the service provided directly by the County Council was 219 at the end of 1971.

Category of patient—	Chiropody service provided—					
	Directly by County Council		By voluntary associations		Totals	
	Patients	Treatments	Patients	Treatments	Patients	Treatments
Elderly persons	51,886	240,567	8,363	40,855	60,249	281,422
Handicapped persons	993	3,930	54	255	1,047	4,185
Expectant mothers	33	46	—	—	33	46
TOTAL	52,912	244,543	8,417	41,110	61,329	285,653
Place of treatment—						
Clinics	29,994	143,151	2,970	15,737	32,964	158,888
Surgeries	888	4,297	3,553	15,705	4,441	20,002
Homes for the elderly	3,434	13,738	8	42	3,442	13,780
Patients' homes	18,596	83,357	1,886	9,626	20,482	92,983
TOTAL ... 1971 ...	52,912	244,543	8,417	41,110	61,329	285,653
1970	52,133	233,580	8,932	43,265	61,065	276,845
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

HEALTH EDUCATION

The County Council during the year reviewed the commitments of the health education service and the expansion necessary to meet the ever growing demands being made. These demands have stemmed partly from the concern felt about such problems as venereal disease, drug abuse and partly from the increasing recognition of the important role that health education must play in the prevention of illness and the promotion of health.

Staffing.—Bearing in mind the opportunity to use radio and television in the future and the need for staff to be available to further the work of health education throughout the community, approval was given to a revised staffing structure. The service is under the general direction of a Principal Senior Medical Officer, a health education officer, a deputy and area health education officers. These are backed by art staff (design officer and assistant design officer), a workshop staff, and audio-visual aids staff (including projectionists).



Premises.—The unit is housed in modern accommodation with offices and film library in an adjoining building. The accommodation, which includes photographic and design studios and a fully equipped workshop, has greatly facilitated the design and production of health education display materials.

Equipment and visual aids.—Workshop machinery and tools (including electrical apparatus and accessories); artist studio equipment (drawing boards, geometrical items); photographic equipment (including cameras, enlargers); audio visual aid equipment (including projectors, both cine and still, tape recorders, record players), and other visual aids (including various anatomical models).

The film library (which consists of both 16 mm. cine films and 35 mm. filmstrips) is constantly extended by the acquisition of new films and, to meet additional demands, duplicate copies of existing films. The loan service to schools of films for showing on the school projector is limited only by the number of film copies available for screening. More than 1,500 issues on loan are made from the film library each year and the projectionists give a minimum of 600 film shows annually.

Video Tape Recording/Television.—In June, 1971, the County Medical Officer of Health established a departmental working party to consider the use of closed circuit television and to report on the types of equipment available.

In the early discussions the working party sought to ascertain the extent to which closed-circuit television and video tape recording could be used and the justification in acquiring such equipment.

Financial provision has now been made for the acquisition of video tape recording equipment and progress is being made to have available films scripted and produced to meet the demands of this new and exciting development.

Health Centres will have television monitors for showing short video tapes on health education subjects.

Vehicles and Trailers.—A range of specialist transport is available to meet the needs of the service and in addition two 22 ft. trailers are available for towing by landrovers. Exhibitions are designed to specification on these trailers which tour the County area and they also take part in carnival and other processions.

A specially equipped 20 ft. caravan which incorporates the "Happy Lion" dental health campaign visits schools. This caravan is adaptable for use for other types of exhibitions.

Poster, Leaflet Production.—The staff of the design studio produce a large variety of pamphlets, leaflets and posters as required. Contracts are taken for printing of material.

Services Provided.—SCHOOLS.—This service continues to be extremely popular, and increasing numbers of head teachers and staff are requesting assistance. They realise that health education in the schools is best undertaken as a planned activity, and not just as an occasional isolated film show or lecture. The interest in personal relationship courses, including sex education, venereal disease, alcoholism and drugs continues to grow.

Full scale exhibitions can be installed in schools, and as an example of this some twenty smoking and health exhibitions were held in schools during 1971.

YOUTH CLUBS.—Health education is a popular subject with youth clubs. Lectures and film shows are arranged on drug addiction, sex education, personal relationships and other problems in relation to young people.

ADULTS.—Health divisions, clinics and health centres were supplied with material, including posters, pamphlets and other visual aids. A special flannelgraph entitled, "The Birth of a Baby" was produced and this was made available as a teaching aid in ante-natal clinics. Special flannelgraph boxes were produced and distributed to the clinics. Posters were displayed in health centres and clinics in special flasher boxes, and these were also displayed in County libraries. Arrangements were made for the posters to be changed every three months.

Headlice campaigns have been conducted in several areas and during the year some six major campaigns were organised. The headlouse campaign features special posters being shown in a particular area for a period of four to five weeks. They are displayed in shop premises, mainly chemists and hairdressers. The full co-operation of the manager of each shop is obtained before hand.

HOME SAFETY.—The public interest in home safety was sustained during the year, and the existing home safety committees were further supplied with leaflets, posters and other material. Lectures were arranged for two schools, for old people's associations, and for the various voluntary groups. During the year some fifteen large exhibitions on home safety were organised, and a special firework safety campaign was mounted during late October which involved the distribution of some three thousand posters and one hundred thousand leaflets. The theme of the campaign was, "Don't be a Gunpowder Clot!"

Shop window displays were mounted in parts of the County area, and current home safety material was displayed.

The workshop produced four home safety trailers, two on general home safety themes, one on fire-work safety, and one advising as to the safety precautions necessary at Christmas time. This last trailer also played carols and a recorded message by the Chairman of the Health Committee. All four trailers toured throughout the Administrative County area. Emphasis was placed on water safety, and special posters were distributed in conjunction with "Learn to Swim" campaigns. Another important aspect of home safety was the introduction of "Unwanted Medicines and Drugs" campaigns. Two such large campaigns were organised in Lancaster and Garstang, and a third, organised in association with the North-East Lancs. Pharmaceutical Society covered the north-east area of the County.

A special activity regarding home safety was inaugurated during the year, in the form of an inter-primary school safety quiz. Home Safety Committees in six areas organised such events which were particularly well received. This is good publicity for home safety, as due to the fact that schoolchildren are involved, it also attracts the attention of the adult population, especially parents, as is proved by very good attendances at the "finals" of the events. All the finals were attended by civic dignitaries and some attracted sporting personalities and officials from the Royal Society for the Prevention of Accidents.

Special Features and Other Activities.—**DENTAL HEALTH EDUCATION.**—Dental Health campaigns continue to be very popular with the primary and junior schools, and the "Happy Lion" campaign enjoyed a very full and successful year. The "Happy Lion", caravan visited twenty-two schools in the Fylde and Preston areas, and was seen by some six thousand children, both infants and juniors.

The Dental Health Exhibition, which is directed to the 7-11 year olds, was staged in five local authority areas within Lancashire, and was visited by fifteen thousand children.

A further edition of the dental health newspaper entitled "Open Wide" was produced, and some forty thousand copies were distributed to primary school children in various parts of the County.

IN-SERVICE TRAINING.—The idea of holding in-service training sessions, both at central office and in other parts of the County, was developed during 1971 and a conference was convened at East Cliff County Offices attended by senior administrative medical officers from the health divisions. The main object was to assist them in getting the message of health education across to the public in their areas. It was decided to hold special in-service training days during the following year in respect of health education techniques and developments.

ALCOHOLISM.—The first British international conference on alcoholism and drug dependence took place in Liverpool during March, and was organised by the Merseyside Council on Alcoholism. The conference was attended by representatives of the health department, and a small exhibition which was designed by the County health education unit was on display.

The above display was also on show during the month of June at the Post Graduate Medical Centre in Lancaster.

CAREERS EXHIBITION.—It has been the policy to hold careers exhibitions in parts of the County, and the health education service has been invited to assist in these exhibitions. The Lancaster Hospital Management Committee held a careers exhibition in Lancaster Town Hall in April and stands were supplied relating to health visiting, district nursing and the midwifery services.

A similar exhibition was held in Ashton-under-Lyne during the month of November where various stands depicting the health services were on display, together with quantities of leaflets.

MISCELLANEOUS.—A joint health/education seminar on human relationships and teenage problems was held during the year and the principal speakers included Dr. P. S. Silver, a consultant venereologist.

FOOD HYGIENE.—A food hygiene exhibition was held in Eccles from the 14th to the 19th June, and was seen by over a thousand people. Food hygiene is included in lectures given in schools and to various organisations.

HOME HELP SERVICE

The total number of cases attended during 1971 again showed an increase although, due to difficulty in recruitment in some areas, the total of home helps employed (whole-time equivalent) did not increase proportionately. In consequence, as is illustrated by the analysis for a week in the December quarter of each of the years 1967 to 1971, 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					
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
1970	4,615	2,425	18	160	181	58	28,383	1,531	30,634	12.9
1971	4,804	2,524	31	100	181	69	29,676	1,610	31,667	12.6

Table 23, page 162, gives for the year 1971 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
1967	17,868	94,794	5.31
1968	18,713	94,188	5.03
1969	19,699	95,141	4.83
1970	20,369	96,982	4.76
1971	22,062	100,973	4.58

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 24, page 163, reproduces the resultant analysis for the December quarter, 1971, 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 22,062 cases attended, 20,318 or 92 per cent. were persons aged 65 years and over and these cases received 92,556 hours or 92 per cent. of the total amount of help provided during the week (100,973 hours). Not shown in the table is the fact that 20,419 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

At the end of the year under review 11,276 mentally disordered children and adults were in the care of the County mental health service, an increase of 626 on the previous year. The total of 11,276 comprised 5,763 mentally ill, 5,181 subnormal or severely subnormal and 332 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 26 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 ten 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 24 County Council medical officers and 149 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 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 1971 was 72, including six psychiatric social workers. Fifty-four were qualified by possessing an appropriate degree or diploma or the certificate in social work, and 18 by virtue of having had sufficient approved experience in mental welfare work. In addition 22 trainee mental welfare officers and one welfare assistant were employed, making a total staff of 95. During 1971 five mental welfare officers obtained the certificate in social work and by the end of the year an additional ten mental welfare officers and trainees were taking courses leading to the award of a social work certificate. A scheme of in-service training for trainee mental welfare officers is now operating and it is felt that a more effective officer will be developed over a shorter period as a result of this scheme. In addition good in-service training stimulates the recruitment of staff and facilitates the entry of officers to full professional social work courses. Two newly appointed mental welfare officers attended an induction course at Harrogate in February, 1971. Two senior mental welfare officers attended a three months sandwich course organised by and held at the National Institute for Social Work Training in London.

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 25 place adult hostels for the mentally subnormal were opened during the year making a total of 25 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.

Five senior staff from mental health hostels attended in-service training schemes at Bolton Institute of Technology, Stockport College of Technology and Millbank College of Commerce, Liverpool. The schemes are promoted by the Council for Training in Social Work in conjunction with the Department of Health and Social Security.

A refresher course for staff of junior mental health hostels was held during 1971 at Preston.

Three wardens from mental health hostels attended a full time course leading to the award of the Certificate in Residential Social Work. The course was arranged by the Millbank College of Commerce, Liverpool.

TRAINING CENTRE STAFF.—At the 31st December, 1971, there were 34 superintendents and 207 instructors employed in adult training centres.

In September, 1971, the sixth 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 ten instructors were seconded to this course. The third one-year course commenced at Bolton Institute of Technology to which one superintendent and nine instructors were seconded. In addition, three instructors began a one-year course at Hull College of Commerce.

During the year one superintendent and 20 instructors were awarded the National Training Council diploma. At the end of the year 26 superintendents and 34 instructors held diplomas, and a superintendent and 22 instructors were taking courses leading to the award of a diploma.

Approval was given to the attendance of staff on the following courses and conferences during 1971:—

National Association for Mental Health—residential course—Surrey.

Royal Institute of Public Administration—residential course—Newbury.

Merseyside Industrial Therapy Services Limited—one day conference—Whiston Hospital.

National Society for Mentally Handicapped Children—one day conference—Manchester.

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

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

Building Programme.—The five centres and two hostels which were under construction at the end of 1970 were completed and brought into operation during 1971. These were adult training centres at Golborne, Orrell, Middleton and Swinton, the industrial training centre at Sedburn Road, Kirkby, and hostels for adults at Golborne and Orrell. The industrial training unit formerly operating at the centre in Mercer Avenue, Kirkby was transferred to the new unit and the Mercer Avenue establishment reverted to normal adult training centre status.

With the opening of the new purpose-built centre at Middleton, the centre held in the Mills Hill Baptist Church, Chadderton and used as an interim measure for training centre purposes for approximately five years was vacated.

Work commenced on the following projects during 1971 and all are expected to come into operation during 1972.

Ormskirk junior hostel	...	...	...	18 places
Litherland adult training centre	...	...	...	60 places
Litherland adult hostel	...	...	...	25 places
Ramsbottom adult training centre	...	...	...	60 places

					Training Centres	Hostels	
					Adult	Adult	Junior
Existing at 1.1.71	...	...	...	...	30	23	4
Brought into operation during 1971	...	...	...	...	6*	2	—
In operation at 31.12.71	...	...	...	...	35	25	4
Under construction at 31.12.71	...	...	...	...	2	1	1

* Includes one purpose-built centre to replace rented premises.

At the end of the year under review two group homes for the mentally handicapped were in being, providing accommodation for seven persons in all—four at Chorley and three at Haslingden. Experience has shown them to be successful and it is intended to bring six additional homes into operation early in the 1972/73 financial year.

Training Centres.—JUNIOR TRAINING CENTRES.—On the 1st April, 1971, the Lancashire Education Committee assumed responsibility for the junior training centres of the County Council, by virtue of the Education (Handicapped Children) Act, 1970. At the 31st March, 1971, there were 23 centres providing a total of 1,456 places. There were 1,375 children on the registers of these centres.

ADULT TRAINING CENTRES.—A summary of the number of adult training centre places provided by the County Council and of attendances at the centres during the years 1966 to 1971 is given below. Information for each centre for the year under report is given in Table 25, page 164.

Year	At 31st December			Attendances during year		Proportion (per cent.) of attendances to nominal places available
	No. of centres	No. of places nominally available	No. on register	Total day places nominally available	Total attendances	
1966	23	1,099	1,325	237,185	242,376	105
1967	23	1,164	1,433	251,257	281,766	112
1968	25	1,189	1,493	243,022	282,503	116
1969	30	1,489	1,673	324,210	318,085	98
1970	30	1,489	1,832	340,254	361,626	106
1971	34	1,755	2,062	365,843	396,292	108

At the 31st December, 1971, in addition to the 2,062 cases attending County Council training centres, a further 26 were on the registers of centres provided by other local authorities, whilst a further 56 were attending other bodies' centres.

OTHER DAY CENTRES.—All the County Council training centres referred to above are intended to cater for mentally subnormal persons suffering from some form of permanent mental disorder amenable to the same sort of provision as for the subnormal.

A number of hospital patients who normally reside in the County area attended Cleveland House Psychiatric Day Centre (Salford C.B.C.) during 1971. 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 1971 at Orrell and Golborne, giving a total of 25 in operation with 710 places. The number of places provided in four junior hostels remained unchanged at 100. At the 31st December, 1971, 678 adults and 93 children were in residence at County Council hostels and an additional 67 adults and 18 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 County Council's hostels at the end of 1971:—

Junior Hostels

	Age group (years)									
	Under 5		5–		10–		15–		Total	
	M	F	M	F	M	F	M	F	M	F
Short term care	—	—	—	—	—	—	—	—	—	—
Long term care	2	—	23	17	30	16	4	1	59	34
Total	2	—	23	17	30	16	4	1	59	34

Adult Hostels

	Age group (years)									
	16–		25–		40–		55–		60–	
	M	F	M	F	M	F	M	F	M	F
Mentally subnormal ...	52	33	87	81	107	97	31	24	22	17
Mentally ill	6	3	12	10	37	23	10	12	4	10
Total	58	36	99	91	144	120	41	36	26	27

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 127 such cases in residence at the end of 1971 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 18.9 per cent. (24 in number) were engaged in outside employment compared with 9 per cent. (50) of the mentally subnormal. The corresponding proportion of all residents was 10.9 per cent.

Turning to a consideration of the age grouping of the adult hostel population it will be seen from the above table that 264, or 38.9 per cent. of the total, were aged 40 years and over, 77 (11.4 per cent.) were 55 years and over and no less than 53 (7.8 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 current restriction imposed at national level upon the County Council's mental health service building programme.

The hostel for the rehabilitation of mentally ill persons opened at Hill Crest, Radcliffe, in August, 1970. It was built to provide for up to 26 men and women who have recovered from mental illness but who require some degree of support before they can be integrated into the community, has again received residents from a variety of areas during the year. Initially the number of suitable referrals was not as high as anticipated, and in addition, early staffing difficulties necessitated postponement of efforts to organise recruitment and selection of residents. As a result the hostel for the greater part of its history has catered for a wide range of psychiatric and social problems. In the last few months, some attempt has been made to select candidates according to a more consistent framework of criteria, deduced in great part from characteristics of those residents already admitted and proving, or having proved to have benefitted from the hostel's provisions.

Of 40 persons admitted and since discharged, seven were admitted to hospital, 17 returned home, 13 went into lodgings, one was transferred to hostel accommodation, one to a foster home and one to a group home. Only one of the 40 persons referred to was in employment on admission to the hostel. On discharge from the hostel 55 per cent. were in employment. Of the 17 residents at present in the hostel 12 are in employment.

It should, however, be noted that claims for improvement in respect of mentally ill persons admitted to Hill Crest are not restricted to those whose successes are measurable according to the two conventional yardsticks of sustained employment and private accommodation. There are many less measurable but nonetheless tangible benefits derived by those who have remained at Hill Crest.

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 1971 were as follows:—

				County Council hostels	Voluntary residential homes	Hospital	Total
Children	...	...	...	143	86	145	374
Adults	...	...	...	132	43	166	341

OTHER AUTHORITIES' RESIDENTIAL ACCOMMODATION.—In the course of the year twenty-three persons were admitted to hostels for the mentally ill operated by Blackpool County Borough. A further three persons were admitted to Richmond Fellowship Homes. A new establishment Cairncroft Rehabilitation Centre, Manchester, also offered facilities and three persons were admitted during the year.

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 34 clubs were in operation, 18 for the mentally subnormal and sixteen for the mentally ill, with total average attendances per week of 794 and 450 respectively.

Guardianship.—The total number of cases under guardianship at the end of the year was three.

Holidays.—The County Council have agreed to pay the transport and staff accommodation charges for parties of trainees from adult training centres going on a week's holiday, and during 1971 holidays were arranged for trainees of 22 centres, the total number involved being 981 adults. In the case of children at junior hostels who would not otherwise be provided with a holiday the 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 1971, 12 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. A detailed analysis of such cases in 1971 is given in Table 26, page 165. The elderly mentally infirm, defined as "persons who have become mentally infirm through old age", are primarily the responsibility of the welfare services and those included in the tables are persons only in respect of whom some facility of the mental health service has been called upon.

Mentally ill, elderly mentally infirm, and psychopathic cases

Category	1967	1968	1969	1970	1971
Mentally ill—					
Aged under 16 years	6	6	23	14	7
Aged 16 years and over	5,320	5,426	5,086	5,337	5,734
Elderly mentally infirm	403	318	359	322	332
Psychopathic—					
Aged under 16 years	—	—	1	3	8
Aged 16 years and over	4	3	13	12	14
TOTAL	5,733	5,753	5,482	5,688	6,095

Subnormal and severely subnormal cases

Category	1967	1968	1969	1970	1971
Subnormal—					
Aged under 16 years	431	538	688	672	741
Aged 16 years and over	1,568	1,555	1,881	2,008	1,958
Severely subnormal—					
Aged under 16 years	894	953	903	998	983
Aged 16 years and over	1,157	1,200	1,174	1,284	1,499
TOTAL	4,050	4,246	4,646	4,962	5,181

The total number of cases under the five categories of mental disorder, *i.e.*, 11,276 at the end of 1971, was equivalent to 4.40 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 2.43 per 1,000 of the estimated home population whilst that for subnormal and severely subnormal cases was 2.06.

The table below shows the annual number of cases of mental subnormality (including severe subnormality) referred to the County Council during each of the last ten years:—

Year	Children under 16 years	Adults of 16 years and over	Total
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
1970 ...	407 ...	496 ...	903
1971 ...	264 ...	389 ...	653

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 1971. Similar information is given by health divisions and delegate districts in Table 27, 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	...	813
Posts requiring compulsory examination	...	1,450
Fitness to enter other local authority superannuation schemes	...	133
Fitness to enter other local authority sickness pay schemes	...	15
Fitness to resume work—County Council employees	...	151
Children in care of Social Services Committee	...	2,675
Entry to teachers' training colleges	...	3,368
Entrants to teaching profession (Form 28 RQ)...	...	358
Others	...	1,130

*During the year 9,268 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 1971, there were 24 registered nursing homes in the Administrative County area, all of which are inspected periodically by the divisional medical staffs.

The 24 nursing homes are situated in the following districts:—

<i>Health Division No. 1—</i>		<i>Health Division No. 10—</i>	
Grange U.D.	2	Golborne U.D.	1
Ulverston U.D.	1	<i>Health Division No. 11—</i>	
North Lonsdale R.D.	2	Horwich U.D.	1
<i>Health Division No. 2—</i>		<i>Health Division No. 12—</i>	
Lunesdale R.D.	1	Radcliffe M.B.	1
Lancaster R.D.	1	Rawtenstall M.B.	1
<i>Health Division No. 3—</i>		<i>Health Division No. 13—</i>	
Lytham St. Annes M.B.	3	Heywood M.B.	1
<i>Health Division No. 4—</i>		Littleborough U.D.	2
Clitheroe R.D.	1	Milnrow U.D.	1
<i>Health Division No. 7—</i>		Wardle U.D.	1
Crosby M.B.	2		
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 1971:—

No. of applications for registration received during 1971	...	1
No. of applications for registration under consideration at 31st December, 1970	...	nil
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, 1971	...	nil
No. of certificates of registration cancelled	...	2
No. of inspections carried out during 1971	...	45

Particulars of the cases admitted to and treated in the nursing homes during 1971 are given in the following statement:—

(a) Maternity cases—

(i) No. admitted	...	...	...	...	...	...	...	297
(ii) No. of confinements	...	...	...	...	...	...	...	219
(iii) No. of live births	...	...	...	...	...	...	...	217
(iv) No. of stillbirths	...	...	...	...	...	...	...	3
(v) No. of miscarriages	...	...	...	...	...	...	...	3
(vi) No. of deaths—mother	...	...	...	...	...	...	...	nil
child	...	...	...	...	...	...	...	1
(vii) No. of confinements at which analgesia used	...	...	...	...	...	...	...	198

(b) Medical cases—

(i) No. admitted	...	...	...	...	...	...	...	1,335
(ii) No. of deaths	...	...	...	...	...	...	...	255

(c) Surgical cases—

(i) No. admitted	...	...	...	...	...	...	...	1,230
(ii) No. of operations performed	...	...	...	...	...	...	...	1,102
(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 1971 there was one licensed agency in the area.

Visitors from other Countries, Organisations, etc.—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 1971, the County Health department officers were pleased to welcome the following:—

July 5th/9th

MISS MY LUI THI
Programme Controller
(Nursing) Vietnam.

Requested by R.C.N./N.C.N.

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, also visited the various services during the year.

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 1971 and although the total amount of accommodation available by the 31st December, 1971, had increased substantially (there were 4,268 persons accommodated in County Council homes compared with 4,034 twelve months earlier), the rate of progress was not sufficient to make any reduction in the waiting list, which rose from 1,605 to 1,756.

Tables 28 and 30, pages 167 and 171, give details of persons accommodated in County Council homes, etc., during 1971. Similar information in respect of County residents in premises managed by other local authorities and by voluntary organisations is given in Tables 29, 31 and 32.

The following new homes were brought into use during 1971:—

Healey View, Chorley	Peel Court, Oswaldtwistle
Pendle Brook House, Barrowford	Rimrose, Litherland
Greenacres, Standish	Crossford, Siretford

Healey View and Crossford each have accommodation for 52 residents; Pendle Brook House and Rimrose are 32 place homes, and Greenacres and Peel Court have 33 places. Each home has separate housing accommodation for the warden and deputy warden.

During the year the construction of a further seven homes commenced at Ramsbottom, Fence, Poulton-le-Fylde, Widnes, Royton, Accrington and Longton. The homes at Ramsbottom, Widnes, Royton, Accrington and Longton will each provide 52 places, whilst the Poulton home will have 33 places and the Fence home 16 places.

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, 1971, 73 schemes were in operation with a total daily average attendance of approximately 234.

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 generally 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. The charge for the service is 15p 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, 534 residents were admitted for short-stay periods (355 at The Empress and 179 at The Cumberland). The average occupancy rate for the year was 26 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, 12 schemes were approved for grant purposes providing an additional 357 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	
				£		£	
Ashton-in-Makerfield U.D.C.	...	24	...	1,320	...	55-00	
Burnley R.D.C.	...	27	...	65	...	2-45	
Chorley R.D.C.	...	20	...	386	...	19-30	
Denton U.D.C.	...	24	...	1,388	...	57-83	
Failsforth U.D.C.	...	34	...	619	...	18-20	
Farnworth M.B.C.	...	31	...	Details of costs not yet finalised			
Haydock U.D.C.	...	12	...	372	...	31-00	
Preesall U.D.C.	...	12	...	341	...	28-40	
Rishton U.D.C.	...	56	...	2,324	...	41-50	
Whitworth U.D.C.	...	38	...	1,292	...	34-00	
Whitworth U.D.C.	...	36	...	1,512	...	42-00	
Widnes M.B.C.	...	43	...	924	...	21-50	

The above approvals brought the total of approved schemes to 216 and when all become operative the 86 district councils concerned will be providing 5,716 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 one admission of this type for each 15 or part 15 housing units included in each particular scheme has been laid down.

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 Social Services Committee being satisfied with the voluntary body's constitution.
- Existing schemes shall be eligible for consideration, but the prior approval of the County Social Services 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, 1971, 32 schemes of voluntary sheltered housing, providing 453 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:—

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; Winifred Kettle House, Westhoughton.

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 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 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 £2,000 was paid to the Community Council for the financial year ended 31st March, 1972.

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 and 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 was 20p per head of pensionable population on an equal partnership basis.

In September, 1970, the Health Committee approved an increase in the amount payable per head of pensionable population from 20p to 25p with effect from 1st April, 1971, and when this is matched by the County Districts there will be available a total of about £178,000 a year. The Committee also gave approval to the Registrar General's annual population figures being used in calculating the maximum grant payable to District Councils.

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 1971.

Meals on Wheels Services—

Number of County districts operating schemes	...	...	...	108
Meals served weekly	...	...	...	11,350
Number of persons participating	...	...	...	5,737

Luncheon Clubs—

Number of County districts operating clubs	...	...	...	77
Number of clubs	...	...	...	120
Total membership	...	...	...	6,180

Old People's Clubs—

Number of County districts operating clubs—

Part-time	...	...	...	96
Full-time	...	...	...	40

Number of clubs in operation—

Part-time	...	...	...	437
Full-time	...	...	...	57

Membership—

Part-time	...	...	...	43,643
Full-time	...	...	...	10,829

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.

The families are required to clothe and feed themselves 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, 1971, 16 properties were being used as individual units of temporary accommodation.

A comparative statement of the families in temporary accommodation at the end of 1970 and 1971 is given below:—

Premises	December, 1970		December, 1971			
	No. of families	Total persons	No. of families	Parents	Children	Total persons
The Hollins, Farnworth ...	20	116	20	38	71	129
31, Ashburton Road, Trafford Park	5	17	5	5	15	25
Individual units ...	15	74	16	32	58	106
TOTAL ...	40	207	41	75	144	260

During the year 94 families were admitted and 94 families were discharged. The following analysis gives details of those discharged from temporary accommodation:—

Period in County Council accommodation—						No. of families	
Under one week	...	...	...	...	...	...	27
One week and under one month	...	...	...	...	...	...	20
One month and under six months	...	...	...	...	...	...	25
Six months and under eighteen months	...	...	...	...	...	...	15
Eighteen months and over	...	...	...	...	...	...	7
Reason for discharge—							
Private housing	...	...	...	...	...	...	37
Local authority housing	...	...	...	...	...	...	26
Other known destination	...	...	...	...	...	...	9
Destination not known	...	...	...	...	...	...	22

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. ...	1	Kirkby U.D. ...	5
Bacup M.B. ...	14	Newton-le-Willows U.D. ...	8
Barrowford U.D. ...	1	Ormskirk U.D. ...	1
Chadderton U.D. ...	1	Padiham U.D. ...	1
Crosby M.B. ...	1	Radcliffe M.B. ...	3
Darwen M.B. ...	4	Rawtenstall M.B. ...	2
Eccles M.B. ...	7	Rishton U.D. ...	1
Farnworth M.B. ...	1	Stretford M.B. ...	1
Golborne U.D. ...	1	Skelmersdale & Holland U.D. ...	1
Great Harwood U.D. ...	1	Swinton & Pendlebury M.B. ...	2
Haslingden M.B. ...	3	Whitefield U.D. ...	2
Haydock U.D. ...	1	Widnes M.B. ...	2
Heywood M.B. ...	4	Worsley U.D. ...	2
Hindley U.D. ...	3	Blackburn R.D. ...	3
Horwich U.D. ...	1	Preston R.D. ...	1
Huyton-with-Roby U.D. ...	2	Warrington R.D. ...	3
		Whiston R.D. ...	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 1971, 1,478 examinations or re-examinations took place. A total of 403 persons were certified as blind on initial examination and 148 on re-examination.

The following statement analyses the sources from which applicants for registration were referred to the County Council during 1971:—

(a) General practitioner ...	46
(b) Medical source other than general practitioner ...	329
(c) Department of Health and Social Security ...	79
(d) Lay source other than Department of Health and Social Security ...	358
TOTAL ...	812

At the end of 1971, there were 4,641 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—	
1970	13	94	71	482	831	3,068	4,559
1971	17	99	63	473	801	3,188	4,641

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 Clifton Spinney, Nottingham, 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.

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 sheltered employment, details of which are given on page 104) as shown in the following table:—

Occupation	No.	Occupation	No.
1 Masseurs and physiotherapists ...	2	19 Animal husbandry (incl. poultry keeping) ...	3
2 Lecturers, teachers, instructors (incl. craft instructors) ...	4	20 Machine operators (engineering) ...	45
3 Clergy and members of religious orders ...	2	21 Machine operators, minders (other than engineering) ...	9
4 Barristers, solicitors and related workers ...	2	22 Fitters and assemblers ...	16
5 Musicians (incl. music teachers) ...	3	23 Viewers, inspectors and testers ...	7
6 Social, welfare and related workers (incl. placement officers) ...	1	24 Boxers, fillers and packers ...	10
7 Proprietors, managers and executives in industry, commerce ...	1	25 Warehousemen, storekeepers and assistants ...	5
8 Computer programmers ...	2	26 Carpenters and joiners ...	—
9 Other professional, technical, administrative, executive or managerial workers ...	—	27 Knitters (hand and machine), weavers and netting makers ...	7
10 Typists, shorthand typists and secretaries ...	26	28 Upholsterers, machinists (bedding, etc.) and mattress makers ...	—
11 Braille copyists and proof readers ...	5	29 Basket makers ...	2
12 Clerical workers ...	1	30 Mat makers ...	—
13 Telephone operators ...	21	31 Chair seaters ...	—
14 Working proprietors, shop managers, assistants, salesmen ...	6	32 Brush makers ...	—
15 Street vendors, newsvendors, hawkers ...	—	33 Wireworkers ...	—
16 Sales representatives, agents, collectors, commercial travellers ...	1	34 Boot and shoe repairers ...	3
17 Farmers, farm managers and workers, market gardeners ...	3	35 Piano tuners ...	9
18 Gardeners, groundsmen ...	4	36 Craftsmen and production process workers (nec) ...	1
		37 Labourers (nec) ...	27
		38 Cleaners, caretakers, porters, domestic, and canteen workers ...	11
		39 Launderers and dry cleaners ...	—
		40 Other workers ...	13

SOCIAL WELFARE OFFICERS OF THE BLIND.—On the 31st December, 1971, the establishment of social welfare officers of the blind was 48. 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 if the pre-school child and school child on holiday.

SOCIAL AND HANDICRAFT CENTRES.—At the end of 1971 there were 54 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	Farnworth	Ormskirk
Ashton-under-Lyne	Fleetwood	Orrell
Ashton-in-Makerfield	Fulwood	Padiham
Atherton	Golborne	Prestwich
Audenshaw	Halewood (Whiston R.D.)	Radcliffe
Bacup	Heywood	Rishton
*Barrow-in-Furness	Hindley	*Rochdale
Brierfield	Horwich	Standish
*Burnley	Huyton	*St. Helens
Chadderton	Kirkby	Stretford
Chorley	Lancaster	Swinton and Pendlebury
Colne	Leigh	Thornton Cleveleys
Crompton	Litherland	Ulverston
Crosby	Lytham St. Annes	Walton-le-Dale
Darwen	Middleton	Westhoughton
Denton	Morecambe	Widnes
Eccles	Mossley	*Wigan
Failsworth	Nelson	Worsley

*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
Disc type—		
Owned by user	1	—
Loaned to user by County Council	—	—
Tape type—		
Rental paid by:—		
User	26	6
County Council	994	87
Other bodies, e.g., Rotary, Inner Wheel, Round Table, etc.	14	1

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 147 cases and details of these are set out below:—

Holiday Accommodation	Number of persons
Henderson Holiday Home, Blackpool	22*
Princess Alexandra Home, Blackpool	4
Godfrey Ermen Home, Southport	12
Royal National Institute for the Blind Homes	54*
Manchester Jewish Home, Southport	3
Private booking	13
Group holidays arranged by the County Council	39
TOTAL	147

*Includes one deaf/blind: in each case the Council also granted financial assistance to the sighted guide.

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 £1.25 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 512 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 551 persons who were registered as blind during the year 1971, 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 1971, there were 2,222 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—	
1970	12	148	62	243	247	1,455	2,167
1971	8	156	67	244	260	1,487	2,222

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 1971 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	45
Bolton, Leigh and District	104
Bury and District	14
Carlisle (Barrow) Diocesan Mission	11
Liverpool Adult Deaf and Dumb Society	155
Liverpool Catholic Deaf Society of St. Vincent de Paul	71*
Manchester Institute for the Deaf	207
North and East Lancashire Welfare Association	286
Oldham	47
Rochdale and District	50
Salford and District Association	62†
Southport and District	39
St. Helens and District	30
Warrington, Widnes and District	53
Wigan and District	78
TOTAL ...	1,119

*Included in the 155 supervised by the Liverpool Adult Deaf and Dumb Society.

†Included in the 207 supervised by the Manchester Institute for the Deaf.

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 —10,843 as compared with 8,846 on the 31st December, 1970. Details of those registered on the 31st December, 1971, 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. F.	1 1	11 9	82 30	202 58	236 131	532 229
F	Arthritis and rheumatism	M. F.	2 2	6 19	55 147	212 693	212 974	487 1,835
G	Congenital malformations and deformities	M. F.	28 41	27 24	34 34	23 24	12 27	124 150
H/L	Diseases of digestive and genito-urinary systems, of heart or circulatory system, of respiratory system (other than tuberculosis) and of skin.	M. F.	22 26	42 26	102 80	575 331	247 211	988 674
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. F.	31 28	69 53	159 118	251 203	147 184	657 586
V	Organic nervous diseases — epilepsy, disseminated sclerosis, poliomyelitis, hemiplegia, sciatica, etc.	M. F.	101 63	200 192	393 491	706 701	307 385	1,707 1,832
U/W	Neurosis, psychoses and other nervous and mental disorders not included in V.	M. F.	22 6	18 20	40 49	50 55	25 14	155 144
X	Tuberculosis (respiratory)	M. F.	— —	— 2	11 2	16 14	9 10	36 28
Y	Tuberculosis (non-respiratory)	M. F.	— 2	1 3	10 12	12 22	4 10	27 49
Z	Diseases and injuries not specified above	M. F.	31 17	35 34	46 45	86 131	59 119	257 346
	TOTAL	M. F.	238 186	409 382	932 1,008	2,133 2,232	1,258 2,065	4,970 5,873

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, 1971 there were ten full-time and five part-time occupational therapists employed by the County Council along with 13 full-time and 16 part-time handicraft instructors.

In 1971, 12,192 domiciliary visits were made to 1,758 persons as compared with 11,386 visits to 1,795 persons in 1970. 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 1,870. The comparable figure for 1970 was 1,446.

SOCIAL CENTRES.—County Council social centres have now been set up in all of the 17 health divisions and also in the four delegate districts. At the end of the year there were 54 in operation with a total active membership of 1,881. 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.—Six centres were in operation at the end of the year—Caton has been open for some time and is operated under the supervision of a qualified wood machinist. Fulwood, Chorley, Ashton-in-Makerfield, Rawtenstall and Whitefield concentrate mainly on out-work.

New Lodge Centre at Atherton became operative at the end of 1971. It is the first of a series of purpose built day centres designed for the use of physically handicapped and other groups. Eighty persons can attend at any one time for social activities and a workshop is provided for 24 persons. In addition there is a library/sitting area, bathing, shower and hairdressing facilities.

SOCIAL WORKERS.—The social workers 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, 54 whole-time and two part-time social welfare officers, 25 trainee social welfare officers and 36 whole-time welfare assistants.

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.

Willow Bank, Swinton.—The second purpose built home for the handicapped provides accommodation for 35 permanent residents, and also provides facilities for 12 day care persons.

On the 31st December, 1971 the County Council were maintaining 172 epileptics in colonies and homes and 133 handicapped persons in homes run by voluntary organisations. In addition, 1,035 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 21 men and 11 women between the ages of 16 and 30 years, and 28 men and 17 women between the ages of 30 and 50 years, were living in such homes.

HOLIDAYS.—Arrangements were made for 595 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/hotels	...	...	...	...	165
Prestatyn Holiday Camp	...	...	...	...	186
Other group holidays...	...	...	...	...	59
Lakeland View, Fleetwood	...	...	...	...	185
				TOTAL	595

Handicapped persons staying at holiday camps were conveyed by special vehicle or coach except for a small number who preferred to travel in their own motor invalid tricycles. Individual transport arrangements were made for all handicapped persons going to Lakeland View, nursing homes or hotels. Of these, 324 were conveyed by ambulance 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 106 persons were regularly conveyed by ambulance service vehicles, 654 by private hire transport and 592 by the specialised vehicles now in use in Health Divisions Nos. 2, 3, 4, 5, 7, 8, 9, 11(2), 12, 14, 15, 16 and 17 and there are 2 reserve vehicles.

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 16 vehicles.

CAR PARKING BADGES.—Section 21 of the Chronically Sick and Disabled Persons Act, 1970 followed by The Disabled Persons (Badges for Motor Vehicles) Regulations, 1971 amended the previous scheme for issue of car parking badges for disabled persons. Under the new regulations three types of badge can be issued:—

- (a) to disabled drivers as specified,
- (b) to disabled passengers,
- (c) to institutions carrying disabled persons regularly.

The badges are issued for a period of 3 years and the County Council charge only for duplicate badges where originals have been mislaid.

ADAPTATIONS AT THE HOMES OF HANDICAPPED PERSONS.—Assistance was given to 48 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, 661 persons were assisted with other alterations to their homes designed to afford them greater comfort or convenience. The cost to the County Council was £35,908.

AIDS, GADGETS AND EQUIPMENT.—Items costing £25 or less are provided free of charge (or on loan if suitable), whilst items over £25 are all issued on loan. During 1971, equipment was split into two categories—that provided by welfare as an aid to independent timing and mobility, e.g. walking aids, special bathroom, kitchen or personal aids, household lifts etc; and that equipment geared to nursing, e.g., lifting hoists, nipple mattresses, special beds, etc.

SCALE OF CHARGES.—With the increased demand for adaptations and services due to the implementation of the Chronically Sick and Disabled Persons Act, 1970, it was found necessary to impose a scale of assessment and charges for this service and for the provision of telephones and television receivers. The scale is based on both capital and income. No change was made to the holiday scheme and 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	300	407	707
In epileptic colonies	—	172	172
In other L.C.C. Part III accommodation ...	3	50	53
TOTAL ...	303	629	932
<i>Spastics—</i>			
At home or in special schools	353	398	751
In other L.C.C. Part III accommodation ...	2	36	38
TOTAL ...	355	434	789

THE CHRONICALLY SICK AND DISABLED PERSONS ACT, 1970.—This Act, which was placed on the Statute book on 29th May, 1970 came into operation gradually during late 1970 and 1971. It specified many services to be provided for handicapped persons, the majority of which were in the county scheme and already being provided to varying degrees. The new provisions were for telephones and television receivers for certain classes of handicapped persons. During 1971, 113 telephones were provided in the County area, whilst in 37 cases the County Council took over the rental of existing telephones. Consideration is being given to the provision of television receivers in cases of need.

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 1971 the following 12 workshops employed a total of 106 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.
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	33	1	34
Skip and basket maker	25	1	26
Machine knitter	1	15	16
Mat maker	8	—	8
Mattress maker	3	—	3
Assembly worker	3	—	3
Chair caner	1	1	2
Furniture maker	1	—	1
Piano tuner	1	—	1
Seamstress... ..	—	2	2
Other	10	—	10
Undergoing re-training	—	—	—
TOTAL	86	20	106

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 8th November, 1971.

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 per week an additional £11.54 per week is paid to men and £10.39 per week to women. For earnings over £3 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.
 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 1971 were as follows:—

Occupation	Men	Women	Total
Piano tuner	4	—	4
Hand/machine knitter	—	7	7
Braille copyist and proof-reader	1	2	3
Firewood dealer	1	—	1
Boot and shoe repairer	3	—	3
Poultry keeper	1	—	1
News vendor	1	—	1
Music teacher	—	1	1
TOTAL	11	10	21

PHYSICALLY HANDICAPPED.—At the end of the year 12 men and four 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.
S.E.L.N.E.C. (Local Authority) Sheltered Workshop Committee	Old Trafford, Manchester, 16
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 1971 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 committees and 75 such homes were registered at 31st December, 1971. 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.	2
3	Fleetwood M.B.	3
	Lytham St. Annes M.B.	19
	Kirkham U.D....	1
	Thornton Cleveleys U.D.	3
4	Fulwood U.D....	1
	Leyland U.D.	1
	Chorley R.D.	1
	Garstang R.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.	2
10	Haydock U.D....	1
11	Leigh M.B.	1
12	Prestwich M.B.	3
	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.	1
	Swinton and Pendlebury M.B.	1
16	Urmston U.D.	3
	TOTAL—Administrative County	75

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.

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, 1961. 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 seven instances during 1971. Removal to hospital was ordered in four cases and to homes for the elderly in three. Of the former, three were admitted to homes for the elderly, and one died. Of those admitted to homes for the elderly one remained in the accommodation, one was subsequently admitted to hospital and one died.

The following table shows the summary water undertakers covering the supply of the water supply to the County districts served by each of the

District served	Type of supply	Summary water undertaker
Aston U.D.	Upland surface water and deep wells	Aston U.D.
Barnsley U.D.	Upland surface water	Barnsley U.D.
Barnsley U.D. (part)	Upland surface water	Barnsley U.D.
Barnsley U.D. (part)	Upland surface water	Barnsley U.D.
Barnsley U.D. (part)	Upland surface water	Barnsley U.D.
Barnsley U.D. (part)	Upland surface water	Barnsley U.D.
Barnsley U.D. (part)	Upland surface water	Barnsley U.D.
Barnsley U.D. (part)	Upland surface water	Barnsley U.D.
Barnsley U.D. (part)	Upland surface water	Barnsley U.D.
Barnsley U.D. (part)	Upland surface water	Barnsley U.D.
Barnsley U.D. (part)	Upland surface water	Barnsley U.D.
Barnsley U.D. (part)	Upland surface water	Barnsley U.D.
Barnsley U.D. (part)	Upland surface water	Barnsley U.D.
Barnsley U.D. (part)	Upland surface water	Barnsley U.D.
Barnsley U.D. (part)	Upland surface water	Barnsley U.D.
Barnsley U.D. (part)	Upland surface water	Barnsley U.D.
Barnsley U.D. (part)	Upland surface water	Barnsley U.D.
Barnsley U.D. (part)	Upland surface water	Barnsley U.D.
Barnsley U.D. (part)	Upland surface water	Barnsley U.D.
Barnsley U.D. (part)	Upland surface water	Barnsley U.D.
Barnsley U.D. (part)	Upland surface water	Barnsley U.D.
Barnsley U.D. (part)	Upland surface water	Barnsley U.D.
Barnsley U.D. (part)	Upland surface water	Barnsley U.D.
Barnsley U.D. (part)	Upland surface water	Barnsley U.D.
Barnsley U.D. (part)	Upland surface water	Barnsley U.D.
Barnsley U.D. (part)	Upland surface water	Barnsley U.D.

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 1971.

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 undertaking	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	Adlington U.D. Chorley M.B. Fulwood U.D. Leyland U.D. Longridge U.D. Walton-le-Dale U.D. Withnell U.D. Chorley R.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. Blackrod U.D. Farnworth M.B. Haslingden M.B. (part) Horwich U.D. 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	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 Council—</i>		
Widnes M.B.C.	Deep wells	Widnes M.B. Whiston 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 1971 and the preceding year receiving water from the public mains.

Water supplied from public mains

	1970		1971	
	No. of dwelling houses	No. of population	No. of dwelling houses	No. of population
Total Urban Districts	714,600	2,039,000	721,200	2,061,900
Total Rural Districts	139,600	423,800	143,800	437,100
Administrative County... ..	854,200	2,462,800	865,000	2,499,000

In addition to 16,560 new houses reported to have been connected during the year to the public mains supply, there were also 227 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 1971, however, 338 samples of the untreated water were submitted from 17 County districts for bacteriological examination and of these, 19 were reported to be unsatisfactory. Of 27 samples submitted from seven districts for chemical analysis, two were unsatisfactory. Where apparatus is installed for the treatment of water going into supply, samples of the treated water numbered 2,397 from 58 districts for bacteriological examination and 74 from 20 districts for chemical analysis. Unsatisfactory results were reported in 100 of the former and seven of the latter.

Fluoridation of Public Water Supplies.—Whilst the County Council in 1966 approved a policy of fluoridation of public water supplies no material progress was made during the year towards its introduction in any area of the Administrative County.

PRIVATE SUPPLIES.—According to local reports some 5,400 dwellings, housing an estimated population of 14,400 were still dependent on supplies from wells, springs, etc., at the end of 1971. Bacteriological examination of the untreated water was made in 501 instances and 257 of the samples were found to be unsatisfactory. Chemical analyses numbered 32, of which 10 gave unsatisfactory results. Where treatment was installed, 34 samples of treated water taken for bacteriological examination gave six unsatisfactory results. Of the three samples submitted for chemical analysis one proved to be satisfactory. 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, 1944-71, 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, 1944-71.—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 Secretary of State for the Environment 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 Secretary 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 Secretary 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 Secretary.

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 Act, 1971, removed the limit imposed by section 1 of the Act of 1944, as amended, on contributions from moneys provided by Parliament under that section towards the expenses of local authorities in England and Wales.

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 Secretary of State for the Environment 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 Secretary makes his contribution.

Particulars of schemes approved by the County Council during 1971 are as follows:—

Authority	Nature of Scheme and Estimated Cost
*Preston and District Water Board (Withnell U.D.)	Provision of 4" diameter water main (£6,333)
*Ramsbottom U.D.	Sewerage of Turn village (£23,000)
*Fylde R.D.	Singleton sewerage scheme (£355,100)
*North Lonsdale R.D.	Backbarrow and Haverthwaite—Sewerage and sewage disposal scheme 'C'. Revised to include Finsthwaite, Lakeside, Newby Bridge and Staveley (£345,845)
*North Lonsdale R.D.	Satterthwaite—Sewerage and sewage disposal scheme (£18,346)
*North Lonsdale R.D.	Hawkshead—Sewerage and sewage disposal scheme (£59,564)
*Warrington R.D.	Cuerdley village drainage scheme, including a contribution to the Central Electricity Generating Board for provision of pumping station and rising main to serve the village (£19,500)
*West Lancashire R.D.	Sewerage of North Meols, Banks (£267,156)
*West Lancashire R.D.	Sewerage of Melling Mount, Melling (£25,764)
*West Lancashire R.D.	Sewerage and sewage disposal scheme for the parishes of Rufford and Scarisbrick (£1,037,272)
*Whiston R.D.	Sewerage of Lancaster Avenue, Tarbock and Mill Lane, Bold (£5,601)
*Wigan R.D.	Sewerage of Anderton Mill area of Wrightington (£5,700)
*Wigan R.D.	Sewerage of Crooke and Wigan Road areas of Shevington (£78,300)

*Also approved in part for grant under section 56 of the Local Government Act, 1958.

The following applications received during the year are under consideration:—

Authority	Nature of Scheme and Estimated Cost
Rawtenstall M.B.	Water Supply to Dean village (£5,680)
Preston R.D.	Sewerage of 56 premises at Lea Town by gravity sewer (£26,064)

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 schemes approved by the County Council during 1971 are as follows:—

Authority	Nature of Scheme and Estimated Cost
Farnworth M.B.	Proposed relief sewer—MacDonald Avenue (£29,000)
Failsworth U.D.	Renewal of filter media at Failsworth sewage disposal works (£10,000)
Haslingden M.B.	Provision of additional pump—Baxenden pumping station (£2,710)
Haslingden M.B.	Proposed surface water sewer—Sykeside (£91,850)
Haydock U.D.	Connection into sewers of Newton-le-Willows Urban District Council for conveying sewage from eastern area of Haydock to Warrington—loan charge element of treatment charges
Huyton-with-Roby U.D.	Removal of sludge lagoon at Huyton sewage disposal works (£5,000)
Huyton-with-Roby U.D.	Surface water and foul outfall sewers to serve swimming baths and sports hall (£2,716)
Huyton-with-Roby U.D.	Extensions to sewage works (£540,951)
Ince-in-Makerfield U.D.	Sewerage of Spring View district (£114,000)
Ince-in-Makerfield U.D.	Improvement of Ince brook (£74,058)
Leigh M.B.	Etherstone/Westleigh main drainage scheme (£410,000)
Morecambe and Heysham M.B.	Heysham main drainage scheme—provision of full treatment facilities (£3,400,000)
Poulton-le-Fylde U.D.	Proposed sewage treatment plant—Skeppol marsh (£141,637)
Stretford M.B.	Drainage of Eastnor St. redevelopment area (£7,843)
Tyldesley U.D.	Relaying of three lengths of sewers on the Shakerley estate due to presence of methane gas (£5,500)
Westhoughton U.D.	Provision of sewage disposal works at Rogers Farm (£860,822)
Worsley U.D.	Overspill development scheme—surface water sewers, new sewage works and intercepting sewer (£81,723)
Burnley R.D.	Surface water sewers to serve Habergham Eaves industrial estate (£26,473)
Clitheroe R.D.	Extensions at Chipping sewage disposal works (£24,500)
Lunesdale R.D.	Caton and Brookhouse sewerage scheme (£167,500)

The following applications received during the year are under consideration:—

Authority	Nature of Scheme and Estimated Cost
Billinge and Winstanley U.D.	Proposed sewerage and sewage treatment scheme—twelve houses at Pimbo Road, Kings Moss (£1,063)
Burnley R.D.	Surface water sewer in Beverly Road, Blacko (£6,108)
Chorley R.D.	Extensions to sewage treatment works, Whittle-le-Woods (£600,000)

Closet Accommodation.—The statement below which excludes fresh water closets, gives the totals of the types of closet accommodation (including that at factories, schools, etc.) in the Administrative County area at the end of 1971 as compiled from the local health reports. The number of dwellings not on the water carriage system was approximately 6,000.

Closet Accommodation at end of 1971

	Urban districts	Rural districts	Administrative County
Privy middens	140	510	650
Privy closets	140	580	720
Pail closets	2,390	2,470	4,860
Waste-water closets	13,970	440	14,410

At the end of the year the total number of trough closets remaining in the Administrative County area was reported to be 67.

A summary of the action taken in the County districts during 1971 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	10	106	116
Privy closets to pail closets	11	25	36
Pail closets to fresh-water closets	100	189	289
Waste-water closets to fresh-water closets	917	48	965

Public Cleansing.—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. Seventy-three districts reported the use of the disposable sack/bin liner system of refuse collection during the year. This system now extends to approximately 128,000 premises. The number of dry ashpits declined to approximately 30. 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 54 of the 108 County districts the owner or occupier was responsible for the renewal of movable dustbins, in 47 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 six 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 1971 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 78 cases.

	No. of premises visited	No. of visits made	Defects or nuisances		No. of notices served	
			No. discovered	No. abated	Informal	Statutory
Urban districts	257,463	438,128	55,794	49,055	12,961	3,610
Rural districts	32,252	63,663	3,301	2,607	1,121	56
Administrative County	289,715	501,791	59,095	51,662	14,082	3,666

Prevention of Atmospheric Pollution.—Clean Air Acts, 1956 and 1968.—In 1971, 43 orders for the making of smoke control areas were submitted to the Department of the Environment by authorities within the Administrative County involving 38,600 properties. Orders receiving confirmation numbered 31, covering 26,600 properties. In circular 63/70 local authorities were informed that the Minister had been advised that supplies of solid smokeless fuel might be short in some parts of the country during the winter of 1970/71 and that accordingly he was willing on request by local authorities either to suspend orders already in force or to postpone the operative dates of orders recently confirmed but not yet brought into operation. Of the 350 orders in force at the end of the year involving 278,800 properties, 49 covering 47,000 properties had been suspended and a further seven orders covering 6,990 properties had their operative dates postponed.

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 1971 was 356, 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 29 in respect of sites and 326 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 564 involving 16,149 caravans. There were reported to be 1,971 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 31 County districts in respect of permanent residential caravan sites and from 22 in respect of holiday caravan sites.

Swimming Baths and Pools.—In 40 of the County districts there are public swimming baths and in 27 districts there are school swimming baths. Privately owned swimming baths or pools used by the public, or specific groups thereof, exist in 10 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 1,468 samples of the water were submitted to bacteriological examination and 113 to chemical analysis. One hundred and fifty-four of the former and two 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 1971 was 5,338 of which 2,156 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 1971 there were 59 full-time rodent operatives employed by local authorities within the Administrative County area. A further 64 had been employed part-time during the year. The number of properties inspected following notification was 43,209 including 1,215 agricultural, and of these 33,653 were infested—17,247 by rats and 16,406 by mice. In addition 31,927 properties, including 1,437 agricultural, were inspected for reasons other than notification and of these 6,114 were found to be infested—3,896 by rats and 2,218 by mice. Infestation of sewers by rats was reported in 71 of the 108 County districts.

Factories Act, 1961.—The following table provides a summary of the action taken during 1971 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	582	540	23	—
(ii) Factories not included in (i) in which section 7 (relating to sanitary conveniences) enforced by the local authority	8,536	4,961	195	—
(iii) Other premises in which section 7 enforced by the local authority *(excluding out-workers' premises)	491	915	22	—
TOTAL	9,609	6,416	240	—

*i.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)	86	82	—	6	—
Overcrowding (S.2)	—	—	—	—	—
Unreasonable temperature (S.3)	1	1	—	—	—
Inadequate ventilation (S.4)	8	8	—	—	—
Ineffective drainage of floors (S.6)	9	9	—	—	—
Sanitary conveniences (S.7)—					
(a) insufficient	58	51	—	12	—
(b) unsuitable or defective	323	321	—	56	—
(c) not separate for sexes	6	4	—	1	—
Other offences against the Act (not including offences relating to Outwork)	6	6	—	—	—
TOTAL	497	482	—	75	—

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. ...	189	—	—	—	—	—
Nets other than wire nets ...	1	—	—	—	—	—
Umbrellas, etc. ...	2	—	—	—	—	—
Paper bags ...	3	—	—	—	—	—
Making of boxes or other receptacles or parts thereof made wholly or partially of paper ...	2	—	—	—	—	—
Basket making ...	51	—	—	—	—	—
Cosques, Christmas stockings, etc. ...	9	—	—	—	—	—
Rugmaking ...	6	—	—	—	—	—
Textile finishing ...	2	—	—	—	—	—
Woodcraft ...	1	—	—	—	—	—
Radler ...	1	—	—	—	—	—
Sewing pram canopies ...	2	—	—	—	—	—
Carrycot making ...	4	—	—	—	—	—
TOTAL ...	273	—	—	—	—	—

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 is 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 1971:—

	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 ...	3,937	10,614	606	2,082	63
No. of registered premises receiving a general inspection during year ...	1,297	4,973	302	1,237	31
No. of exemptions current at end of year—					
Space (s.5.(2)) ...	—	—	—	—	—
Temperature (s.6) ...	—	—	—	—	—
Sanitary conveniences (s.9) ...	1	—	—	—	—
Washing facilities (s.10) ...	—	1	—	—	—

The total number of visits of all kinds made by the inspectors to registered premises was 17,146.

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

HOUSING

There were 17,172 new housing units completed in the Administrative County in 1971, 1,229 less than the number completed in the previous year. The proportionate contribution to the total made by local authority building declined from 27 per cent. in 1970 to 24 per cent. in 1971. Particulars of the dwellings completed in each County district during 1971 are shown in Table 34, page 177.

According to information supplied by local medical officers of health, some of which is also reproduced in Table 34, more than 21,000 dwellings were unfit for human habitation, of which almost 7,000 were the subject of demolition and clearance orders. In all, 67,110 houses were inspected under the Public Health or Housing Acts for housing defects, 108,724 inspections being made for the purpose. In consequence of action taken by the local authorities or their officers, 7,366 houses found to be not in all respects reasonably fit were rendered fit during the year. Of these, 5,332 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 1,933 cases. Formal notices under sections 9 and 16 of the Housing Act, 1957, secured the completion of necessary work on 87 houses; the work on nine, however, was carried out by the local authorities in default of the owners. Nine unfit houses were made fit after determination of a demolition order under section 24 of the Housing Act, 1957, and five were made fit after modification or revocation of clearance orders under section 24 of the Housing Act, 1961.

Demolition carried out during 1971 accounted for 3,794 houses, of which 3,075 were in or adjoining clearance areas, and displaced 4,578 persons. The 3,075 in or adjoining clearance areas related to 2,846 found unfit for human habitation, two included by reason of bad arrangements, etc., and 227 which were on land acquired under section 43(2) of the Housing Act, 1957. Of the 719 demolished houses not in or adjoining clearance areas 633 were the result of formal or informal procedure under sections 16 or 17(1) of the Act of 1957, 64 were local authority owned houses certified unfit by the medical officer of health, 17 resulted from action taken under local Acts and five included in unfitness orders.

Closures were applied to 424 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 nine houses under sections 17(3) and 26 of the Act of 1957 and in two cases to parts of buildings under section 18. The total number of persons displaced by closure was 614.

At the end of 1971 there were reported to be 26 houses, subject to existing demolition or clearance orders, which had been retained for temporary accommodation, 20 under section 48 of the Act of 1957 and six under section 17(2). 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 Acts, 1969 and 1971, 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 1971 was 2,809. In schemes submitted by local authorities to the Minister, 1,745 properties were approved during the year, 1,694 of which belonged to local authorities. Schemes actually completed during 1971 involved 2,048 properties of which 1,473 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 5,784 applications—5 less than in 1970—were made to local authorities within the Administrative County area and all but 156 were to the full standard. During the same period 5,440 applications were approved, of which 232 were to the reduced standard. Work was completed on 4,343 premises.

The Housing Act, 1969, provides local authorities with the opportunity to effect the improvement in whole areas of both houses and the environment and 14 such General Improvement Areas were 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 1971, four applications for special grants were made to local authorities within the Administrative County area, all 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 £2.50 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, 1972, amounted to £2,632.

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, coloring matter, dried or condensed milk, and the restrictions on the use of special designs—

The Milk (Special Designation) Regulations 1955-56—The following statement gives particulars of the designations operating in the Administrative County in the financial year 1971-72. The County is the Food and Drugs Authority in respect of the five-year licensing period 1971-1975.

Designation of Milk—A Milk of Designation is one which is produced in the Administrative County and is subject to the following conditions:

- (1) Designation of Milk—Milk produced by a designated producer.
- (2) Designation of Milk—Milk produced by a designated producer.
- (3) Designation of Milk—Milk produced by a designated producer.

(4) Designation of Milk—Milk produced by a designated producer.

(5) Designation of Milk—Milk produced by a designated producer.

The above designations cover the handling and distribution of the following categories of milk:—

Designation of Milk—Milk produced by a designated producer.

Designation of Milk	Number of Designations	Number of Producers
Designation of Milk	1,000	1,000
Designation of Milk	1,000	1,000

In the 1971-72 financial year, the County Council was responsible for the handling and distribution of the following categories of milk:—

INSPECTION AND SUPERVISION OF FOOD

Milk Supply.—During 1971 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.

THE MILK (SPECIAL DESIGNATION) REGULATIONS 1963-65.—The following statement gives particulars of the dealers' licences operative at the 31st December, 1971, in the districts for which the County Council is the Food and Drugs Authority, in respect of the five-year licensing period 1971-1975.

Type of licence	No. of licences operative at 31.12.71
(1) Dealer's (Untreated) Licence—required by a dealer obtaining untreated milk (other than prepacked milk) for the purpose of resale	9
(2) Dealer's (Pasteuriser's) Licence—required by anyone operating a pasteurising plant	16
(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	1
(5) Dealer's (Prepacked Milk) Licence—for the purpose of buying and selling prepacked milk (untreated, pasteurised, sterilised, ultra heat treated or all four categories) ...	3,486

The above 3,486 licences cover the handling and distribution of the following categories of milk:—

Untreated	698
Pasteurised	2,017
Sterilised	3,063
Ultra heat treated	1,185

In the 18 County districts autonomous for Food and Drugs purposes there were operative at the end of 1971 one Dealer's (Pasteuriser's) Licence in respect of premises and plant used for the heat treatment of milk, one Dealer's (Steriliser's), 1,532 Dealer's (Prepacked Milk) and 107 Dealer's (Untreated) Licences. The numbers of dealers authorised to deal in the respective designations of milk by virtue of these licences were—untreated 209, pasteurised 1,194, sterilised 1,420 and ultra heat treated 495.

PASTEURISED, STERILISED AND ULTRA HEAT TREATED MILK.—Details are given below of samples obtained by sampling officers of the County Council from premises licensed for the heat treatment of milk and from retailers selling milk in the County area.

PASTEURISED MILK

Samples obtained from	Number obtained	Phosphatase test— number unsatisfactory	Methylene blue test— number unsatisfactory
Plants	397	4	1
Retailers	899	1	12
Totals	1,296	5	13

STERILISED MILK

Samples obtained from	Number obtained	Turbidity test— number unsatisfactory
Plants	71	—
Retailers	339	—
Totals	410	—

ULTRA HEAT TREATED MILK

Samples obtained from	Number obtained	Colony count test number unsatisfactory
Plants	13	—

UNTREATED MILK.—Results of samples of untreated milk obtained from retailers in the County Food and Drugs area and submitted to the methylene blue test were as follows:—

Number of samples obtained	Methylene blue test— number unsatisfactory
183	11

In all cases where a sample fails either the phosphatase test or the methylene blue test investigations are carried out to ascertain the cause of such failure and repeat samples taken.

PROVISION OF MILK TO SCHOOLS, DAY NURSERIES AND HOMES FOR THE ELDERLY.—Of the 1,902 samples of designated milks obtained by the County Council's sampling officers (see above), 127 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.

BACTERIOLOGICAL AND BIOLOGICAL EXAMINATIONS OF UNTREATED 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. Samples taken and submitted during 1971 were as follows:—

Number of samples obtained	Number of samples containing brucella organisms	Number of samples containing tubercle bacilli
495	35	—

In each case the Medical Officer of Health for the appropriate County district was informed so that the appropriate action could be taken.

Although brucellosis in human beings is not a notifiable disease, five such cases came to the notice of local Medical Officers of Health during the year.

During 1970 the Ministry of Agriculture, Fisheries and Food introduced the Brucellosis Incentives Scheme to replace the Brucellosis (Accredited Herds) Scheme which had been in operation since 1967. This was to encourage owners of clean or relatively clean herds to gain voluntary accreditation in advance of a scheme of compulsory area eradication. A start was made during the year under review and the northern part of the County was included in one of the first compulsory testing areas. Approximately 28 per cent. of the 5,777 dairy herds in the whole of the County were either accredited, or in the process of becoming so at the end of the year.

SAMPLING BY LOCAL AUTHORITIES.—The number of milk samples reported to have been taken during 1971 by officers of the local authorities within the Administrative County and submitted to biological examination for either tuberculosis or brucellosis, or both, was 6,566. The results were as follows:—

					Positive		Negative		No result
Tuberculosis	...	...	...	...	—	...	687	...	118
Brucellosis—									
Ring test	...	...	...	...	454	...	5,841	...	93
Culture test	...	...	...	...	222	...	562	...	168
Biological test	...	...	...	...	112	...	375	...	114

Particulars of the milk samples submitted to the statutory tests are given in the following statement:—

				No. of samples	Results—					
					Satis- factory	Unsatis- factory			Void samples	
<i>Raw Milk—</i>										
Methylene blue test	...	...	1,028	...	840	...	157	...	31	
<i>Heat treated Milk—</i>										
Methylene blue test	...	...	1,148	{	996	...	47	...	30	
Phosphatase test	...	...			1,027	...	1	...	4	
Turbidity test	...	...	325	...	325	...	—	...	—	
Colony count test	...	...	46	...	46	...	—	...	—	

For the twelfth 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 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 ...	5,994	5,871	5,797	5,797
(ii) Greengrocers and fruiterers (including those selling wet fish, game, etc.) ...	1,316	1,263	1,281	1,281
(iii) Fishmongers (including those selling poultry, game, etc.) ...	219	217	219	219
(iv) Meat shops (butchers, purveyors of cooked and preserved meats, tripe, etc.) ...	1,939	1,892	1,909	1,895
(v) Bakers and/or confectioners ...	1,439	1,424	1,419	1,416
(vi) Fried fish shops ...	1,251	1,234	1,251	1,251
(vii) Shops selling mainly sugar confectionery, minerals, ice-cream, etc. ...	2,391	2,156	1,876	1,880
(viii) Licensed premises, clubs, canteens, restaurants, cafes, snack bars, and similar catering establishments ...	8,200	8,128	8,107	8,092
(ix) Others ...	1,557	1,165	1,203	1,191

Premises registered under the Food and Drugs Act or corresponding provisions of local legislation numbered 9,210 and 9,050 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 73 and two respectively. It is the general practice to carry out complete post-mortem examinations at all such establishments but ante-mortem examinations of all animals is confined to relatively few districts.

The following table, compiled from the local health reports, shows the numbers of animals killed in the Administrative County area during 1971 together with the numbers and results of inspections carried out.

Carcases Inspected and Condemned, 1971

	Cattle including cows	Calves	Sheep and lambs	Pigs	Horses
Number killed	142,400	1,438	544,680	414,010	—
Number inspected... ..	138,818	1,433	514,537	410,206	—
<i>All diseases except tuberculosis and cysticercii:</i>					
Whole carcasses condemned	224	73	547	1,028	—
Carcasses of which some part or organ was condemned	49,994	37	59,177	100,662	—
Percentage of the number inspected affected with disease other than tuber- culosis and cysticercii	36.2	7.7	11.6	24.8	—
<i>Tuberculosis only:</i>					
Whole carcasses condemned... ..	—	—	—	3	—
Carcasses of which some part or organ was condemned	3	—	—	3,105	—
Percentage of the number inspected affected with tuberculosis	0.0	—	—	0.8	—
<i>Cysticercosis:</i>					
Carcasses of which some part or organ was condemned	268	—	128	—	—
Carcasses submitted to treatment by refrigeration	70	—	—	—	—
Generalised and totally condemned ...	—	—	—	—	—

POULTRY INSPECTION.—From information given in local health reports there were 76 poultry processing premises in the Administrative County area, to which 1,972 visits were made during 1971. Turkeys, ducks, hens, broilers and capons are processed, 10,600,500 being dealt with during the year. Of this total some 144,030 birds representing 1.36 per cent. of the total and weighing some 364,683 lbs. were condemned as unfit for human consumption.

SLAUGHTER OF POULTRY ACT, 1967.—There were 31 premises registered under section 2 for the slaughter of poultry in the Administrative County area.

LIQUID EGG (PASTEURISATION) REGULATIONS, 1963.—There were three egg pasteurisation plants in operation at the end of the year. Twenty-four samples of liquid egg from four County districts were submitted to the Alpha-Amylase test, none of which proved to be unsatisfactory.

Food Poisoning.—During 1971 cases of food poisoning notified in the Administrative County area numbered 415 but 60 more, although not the subject of formal notification, were ascertained by local medical officers of health. The total of 475 was 40 more than in the previous year and 38 more than the annual average for the preceding five years 1966-70. One death—a female, aged 71—was recorded as being due to food poisoning.

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 46 outbreaks involving 166 cases, and in addition a further 107 cases forming part of outbreaks originating in other local authority areas, the remaining 202 being apparently isolated and unrelated.

Brief particulars of the outbreaks, including such information as is available regarding 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. ...	4	—	Salm. typhimurium ...	Not ascertained ...	Not ascertained.
	3	—	Salm. typhimurium ...	Not ascertained ...	Not ascertained.
Ashton-u-Lyne M.B. ...	7	—	Salm. typhimurium (phage type 32) ...	Not ascertained ...	Not ascertained.
Crosby M.B. ...	4	—	Salm. enteritidis ...	Frozen turkey ...	Home.
	2	—	Salm. typhimurium ...	Not ascertained ...	Not ascertained.
Dalton-in-Furness U.D. ...	2	—	Not identified ...	Steak and kidney pie ...	Home.
Darwen M.B. ...	2	—	Salm. typhimurium ...	Not ascertained ...	Not ascertained.
Denton U.D. ...	5	—	Salm. enteritidis (phage 8) ...	Not ascertained ...	Not ascertained.
	2	—	Salm. typhimurium (phage type 1.A) ...	Not ascertained ...	Not ascertained.
	2	—	Salm. panama (group D) ...	Not ascertained ...	Not ascertained.
	2	—	Salm. typhimurium (group B phage U.129) ...	Not ascertained ...	Not ascertained.
Droylsden U.D. ...	2	—	Salm. typhimurium ...	Not ascertained ...	Home.
Fleetwood M.B. ...	2	—	Salm. stanley ...	Not ascertained ...	Not ascertained.
	3	—	Salm. heidelberg ...	Not ascertained ...	Not ascertained.
Fulwood U.D. ...	67†	—	Salm. typhimurium 1.A ...	Raw milk ...	Hospitals and homes.
	2	—	Salm. lagos ...	Not ascertained ...	Hospitals and homes.
	3	—	Salm. not identified ...	Not ascertained ...	Hospitals and homes.
Heywood M.B. ...	4	—	Salm. typhimurium ...	Not ascertained ...	Not ascertained.
Kirkby U.D. ...	8	—	Salm. reading ...	Not ascertained ...	Not ascertained.
	4	—	Salm. reading ...	Not ascertained ...	Not ascertained.
	3	—	Salm. reading ...	Not ascertained ...	Not ascertained.
	4	—	Salm. reading ...	Not ascertained ...	Not ascertained.
	4	—	Salm. typhimurium ...	Not ascertained ...	Not ascertained.
	2	—	Salm. reading ...	Not ascertained ...	Not ascertained.
Lancaster M.B. ...	18	—	Salm. typhimurium ...	Not ascertained ...	Hospital.
Leyland U.D. ...	2	—	Salm. typhimurium ...	Beef ...	Home.
Leigh M.B. ...	2	—	Salm. indiana ...	Not ascertained ...	Not ascertained.
Little Lever U.D. ...	4	—	Salm. typhimurium ...	Not ascertained ...	Not ascertained.
Longridge U.D. ...	2	1	Salm. stanley ...	Not ascertained ...	Not ascertained.
Middleton M.B. ...	4	—	Salm. typhimurium ...	Not ascertained ...	Not ascertained.
	5	—	Salm. group B ...	Not ascertained ...	Not ascertained.
	3	—	Salm. group B ...	Not ascertained ...	Not ascertained.
Morecambe M.B. ...	3	—	Salm. typhimurium U.70 ...	Not ascertained ...	Home.
	4	—	Clostridium welchii ...	Not ascertained ...	Boarding house.
	4	—	Salm. typhimurium (phage type 1) ...	Not ascertained ...	Hotel.
Stretford M.B. ...	3†	—	Salm. indiana ...	Roast beef ...	Home.
Swinton and Pendlebury M.B. ...	2	—	Salm. indiana ...	Not ascertained ...	Not ascertained.
Urmston U.D. ...	3	—	Salm. indiana ...	Not ascertained ...	Not ascertained.
	2	—	Salm. indiana ...	Not ascertained ...	Not ascertained.
Walton-le-Dale U.D. ...	23†	—	Salm. typhimurium ...	Milk ...	Home.
	2	—	Salm. lagos ...	Not ascertained ...	Not ascertained.
	3	—	Salm. bredeney ...	Not ascertained ...	Not ascertained.
Whitefield U.D. ...	3	—	Salm. typhimurium ...	Not ascertained ...	Not ascertained.
Worsley U.D. ...	12	—	Clostridium welchii ...	Not ascertained ...	Not ascertained.
	2	—	Salm. typhimurium ...	Not ascertained ...	Not ascertained.
Fylde R.D. ...	3†	—	Salm. typhimurium ...	Untreated milk ...	Home.
North Lonsdale R.D. ...	2	—	Salm. agona ...	Not ascertained ...	Not ascertained.
Preston R.D. ...	11†	—	Salm. typhimurium ...	Milk ...	Hospitals and homes.
	2	—	Salm. enteritidis ...	Not ascertained ...	Not ascertained.
	3	—	Salm. bredeney ...	Not ascertained ...	Not ascertained.
	3	—	Salm. agona ...	Not ascertained ...	Not ascertained.

* Including non-notified cases ascertained during investigations.

† Part of an outbreak in the area of another authority.

Of the 202 isolated cases of food poisoning which occurred in 1971, the responsible organisms in 62 were identified as salmonellae—37 of *s. typhimurium*, 3 each of *s. agona* and *s. group B*, 2 each of *s. enteritidis* and *s. stanley* and one each of *s. lexington*, *s. remo*, *s. virchow*, *s. indiana*, *s. braenderup*, *s. saintpaul*, *s. infantis*, *s. bredeney*, *s. jerusalem*, *s. dublin*, *s. brandenberg*, *s. reading*, *s. lindmarsh*, *s. san diego*, and *s. panama*. In the remaining 140 isolated cases the responsible agents or organisms were not identified.

Food and Drugs.—The following information has been derived from the Annual Report for 1971 of the County Analyst, A. C. Bushnell, Esq., M.Chem.A., F.R.I.C.

Among new Regulations issued during the year under review which have a bearing on the work of the public analyst were the following:—

The Preservatives in Food (Amendment) Regulations, 1971.

The Milk (Gt. Britain) Order, 1971.

The Welfare Food Order, 1971.

The Welfare Food (Amendment) Order, 1971.

FOOD AND DRUGS 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 1971, was 6,337 as compared with 6,832 in the previous year. Of these, 610 were classified as adulterated—122 more than in 1970.

In the following table figures relating to samples during the last ten years are given.

Sampling and Imperfect Samples, 1962-1971

Year	1962	1963	1964	1965	1966	1967	1968	1969	1970	1971
Percentage of adulteration ...	3.8	5.8	7.2	6.4	5.3	4.9	5.4	6.3	7.1	9.6
Total samples ...	8,784	8,243	7,766	7,959	8,190	8,055	7,661	6,722	6,832	6,337
Formal samples ...	3,230	2,686	2,528	2,216	2,577	2,126	2,112	1,705	1,764	1,069
Informal samples ...	5,122	5,211	4,855	5,333	5,003	5,465	5,130	4,688	4,760	5,069
Private samples ...	432	346	383	410	610	464	419	329	308	199
No. of adulterated samples ...	334	480	562	512	436	398	411	426	488	610
No. of samples per 1,000 of the population ...	5.86	5.39	5.41	5.34	5.50	5.37	5.10	4.2	4.1	4.0

MILK.—*Adulteration.*—The number of milk samples submitted under the Food and Drugs Act in 1971 was 3,329 and, of these, 202 were given adverse reports. The amount of milk adulteration was, therefore, 6.1 per cent. The table below shows the adulteration rates for the past ten years.

Adulteration of Milk, 1962-71

Year	No. of samples	No. of adulterated samples	Percentage of adulteration
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
1970	3,739	156	4.1
1971	3,329	202	6.1
1962-71	42,409	2,005	4.7

Particulars of the various types of adulteration and the number of samples in each category are given in the following statement:—

	No.	Per cent. of total
Deficient in fat only	35	1.66
Containing added water only	104	3.12
Deficient in fat and containing added water	6	0.19
Containing penicillin or other bacteriostat	10	0.31
Containing foreign matter	22	0.67
Containing insects, etc.	1	0.03
Incorrectly described	2	0.06
Deficient in fat and containing penicillin	2	0.06
	<u>202</u>	<u>6.10</u>
Milk containing more than 3 per cent. added water ...	34	1.21
Milk 10 per cent. or more deficient in fat	21	0.63

The foregoing statement shows that 1.84 per cent. of total milk adulteration may be considered to be "serious", with 34 samples containing added water and 21 samples deficient in fat. Seventeen of the watered samples were involved in prosecution cases, but there is, additionally, a distinct impression growing that the large dairies can be as careless at times as small ones were believed to be; and the findings could add up to a case for taking all samples from large dairies formally.

The pattern of the milk adulteration may also be shown in relation to the various grades of the milk offered for sale.

Adulteration of Various Grades of Milk

Grade of milk	No. of samples	No. adulterated	Percentage of adulteration
Pasteurised	1,382	71	5.1
Sterilised	494	16	3.2
UHT	141	12	8.6
Untreated	1,332	103	7.7
Channel Islands... ..	286	8	2.8

A most interesting change is occurring in the pattern of adulteration of milk according to grade. Up to and including the year 1969 it was possible to leave the phrase unchanged which indicated that untreated milk which was encountered in single churns tended to show a greater adulteration rate than milks which had been bulked before bottling. In 1971 the greatest rate of adulteration occurred with UHT milk.

Average Composition.—The average composition of the milk examined in the County Laboratory during 1971 is shown in the table below:—

Average Composition of Milk, 1971

Month	*No. of samples	Fat per cent.	Solids-non-fat per cent.	Total solids per cent.
January	322	3.71	8.50	12.21
February... ..	328	3.64	8.47	12.11
March	345	3.65	8.53	12.18
April	225	3.59	8.55	12.14
May	347	3.59	8.67	12.26
June	244	3.68	8.66	12.34
July	213	3.69	8.64	12.33
August	257	3.74	8.65	12.39
September	252	3.81	8.70	12.51
October	259	3.84	8.74	12.58
November	309	3.90	8.67	12.57
December	232	3.81	8.60	12.41
Whole year	*3,333	3.72	8.61	12.37

* Includes Appeal-to-Cow samples, but excludes 43 samples examined for foreign matter.

FOOD OTHER THAN MILK.—Adulteration.—During the year under review 3,008 samples other than milk were examined on behalf of the County Council. Of these, 408 were criticised amounting to a so-called adulteration rate of 13·6 per cent. This is higher than the figure for the year 1970 when it was 10·7 per cent. It is, however, considerably higher than the adulteration rate for milk in 1971, which was 6·1 per cent. The general public contributes greatly to this high return by its constant vigil for extraneous matter in food. A high proportion of the samples which caused comment were samples improperly labelled, and some sausages which contained permitted quantities of preservative but which were sold with no adequate notification of the fact. Thus, 137 of the 408 unsatisfactory samples contained extraneous matter, 75 contained insect matter, 46 contained mould, yeasts, etc., 117 were wrongly labelled and 15 samples of sausages were only reported wrong because of preservative, or because of narrowly failing to comply with the standards for meat content. The above-mentioned "adulteration rate" of 13·6 per cent., therefore, is misleading as an index of actual adulteration of food.

DRUGS.—During the year under review 314 samples of drugs were submitted on behalf of the County Council for examination as compared with 313 such samples in 1970 and 260 in 1969.

Twenty-one of the samples examined for the County Council were commented upon during 1971.

PROSECUTIONS.—During the year legal proceedings were instituted in 47 cases of food and drugs samples taken for the County Council. In all 47 cases the defendants were convicted or ordered to pay costs, the total County fines and costs amounting during the year to £1,597.40.

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 1971 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
Ashton-in-Makerfield
Aspull
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 37 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 25p 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 3,221 inspections (including 69 Sunday or evening visits) and the local Public Health Inspectors 5,022 inspections, a total of 8,243 inspections, which resulted in a small number of contraventions of the Acts being noted and the shopkeepers being informed of the requirements of the Acts.

Legal proceedings were instituted in seven cases where contraventions of the Sunday trading restrictions were observed and fines and costs totalling £27.50 were imposed. A shopkeeper was also prosecuted on three occasions for trading on the early-closing day for which fines and costs totalling £12.00 were imposed.

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 78 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. In several instances minor contraventions of the Act were noted and the proprietors were informed of the requirements of the Act.

TABLE 1.—COUNTY BIRTH AND DEATH RATES 1901-1911

Year	Population	Birth Rate per 1,000		Death Rate per 1,000		Infant Mortality per 1,000 live births	
		Actual	Estimated	Actual	Estimated	Actual	Estimated
1901	100,000	20.0	20.0	10.0	10.0	10.0	10.0
1902	100,000	20.0	20.0	10.0	10.0	10.0	10.0
1903	100,000	20.0	20.0	10.0	10.0	10.0	10.0
1904	100,000	20.0	20.0	10.0	10.0	10.0	10.0
1905	100,000	20.0	20.0	10.0	10.0	10.0	10.0
1906	100,000	20.0	20.0	10.0	10.0	10.0	10.0
1907	100,000	20.0	20.0	10.0	10.0	10.0	10.0
1908	100,000	20.0	20.0	10.0	10.0	10.0	10.0
1909	100,000	20.0	20.0	10.0	10.0	10.0	10.0
1910	100,000	20.0	20.0	10.0	10.0	10.0	10.0
1911	100,000	20.0	20.0	10.0	10.0	10.0	10.0

TABLES, ETC.

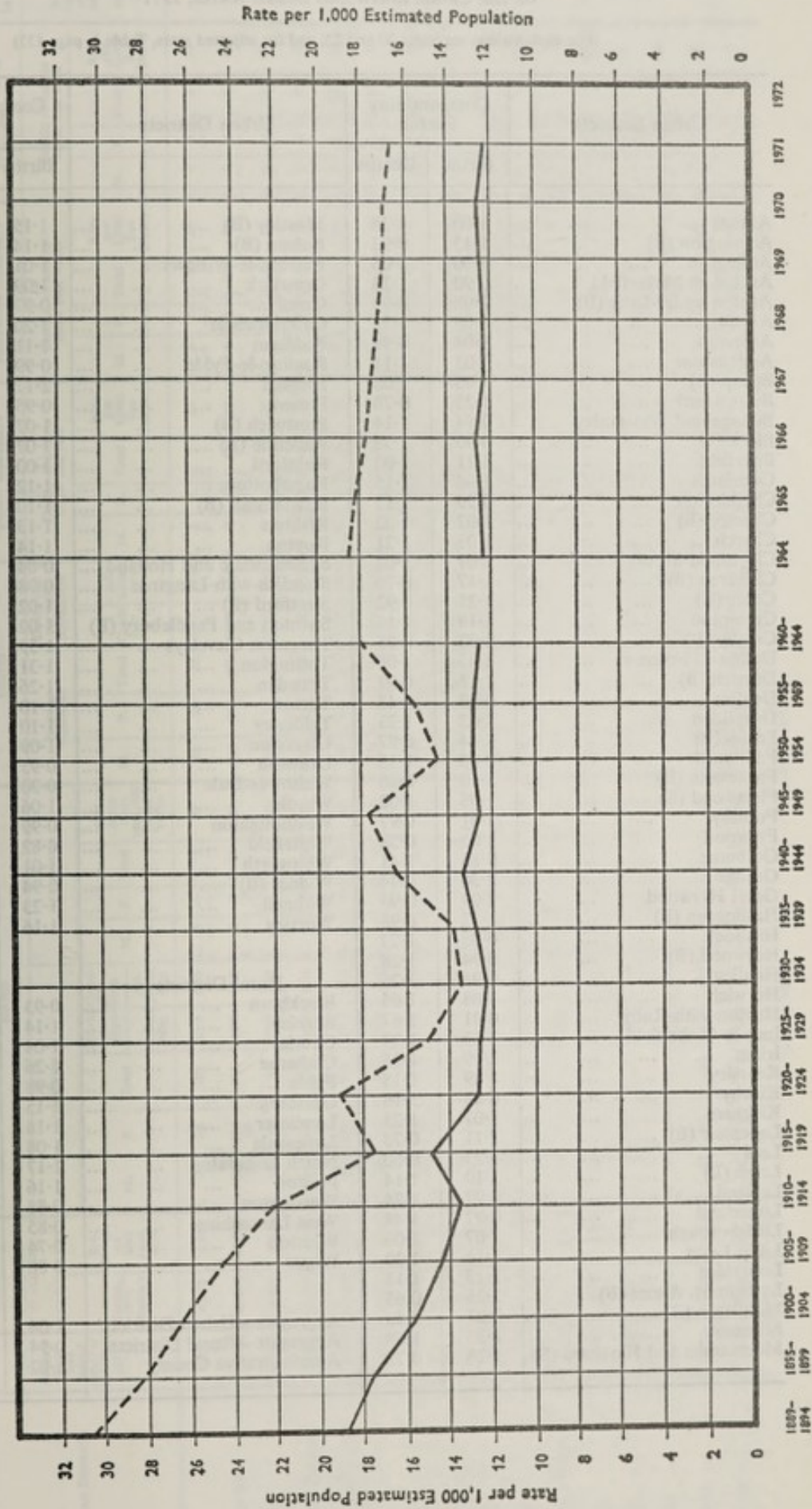
TABLE 1—COUNTY BIRTH AND DEATH RATES 1889-1971

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	27	26	26
1960-1964 ...	17.96	17.94	18.08	12.69	12.75	12.38	24	24	20
1965-1969 ...	17.55	17.55	17.58	12.38	12.58	11.35	20	20	18
YEAR—									
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
1970 ...	16.86	17.01	16.15	12.52	12.81	11.16	19.8	20.7	15.5
1971 ...	16.73	16.83	16.23	12.07	12.36	10.71	17.7	18.0	16.0

ADMINISTRATIVE COUNTY OF LANCASTER

Birth and Death Rates, 1889-1971

Crude Live Birth Rate - - - - - Crude Death Rate - - - - -



Urban Districts	Comparability Factor		Urban Districts	Comparability Factor	
	Births	Deaths		Births	Deaths
Abram	1·00	1·38	Mossley (B)	1·15	1·06
Accrington (B)	1·13	0·93	Nelson (B)	1·14	0·88
Adlington	1·00	1·05	Newton-le-Willows	1·01	1·14
Ashton-in-Makerfield	0·90	1·23	Ormskirk	1·09	1·06
Ashton-under-Lyne (B)	1·08	0·99	Orrell	0·97	1·22
Aspull	0·98	1·38	Oswaldtwistle	1·20	1·11
Atherton	1·04	0·94	Padiham	1·11	0·95
Audenshaw	1·03	1·11	Poulton-le-Fylde	0·99	0·97
Bacup (B)	1·06	1·08	Preesall	2·17	0·54
Barrowford	1·25	0·78	Prescot	0·95	1·21
Billinge and Winstanley	0·74	1·14	Prestwich (B)	1·07	0·77
Blackrod	0·90	1·35	Radcliffe (B)	1·07	1·06
Brierfield	1·11	1·00	Rainford	1·00	1·47
Carnforth	1·04	1·15	Ramsbottom	1·12	0·98
Chadderton	0·99	1·13	Rawtenstall (B)	1·10	0·89
Chorley (B)	1·07	1·02	Rishton	1·13	0·95
Church	1·05	1·21	Royton	1·14	1·25
Clayton-le-Moors	1·07	1·04	Skelmersdale and Holland	0·84	1·80
Clitheroe (B)	1·17	0·76	Standish-with-Langtree	0·98	1·21
Colne (B)	1·21	0·92	Stretford (B)	1·02	1·21
Crompton	1·19	1·16	Swinton and Pendlebury (B)	1·02	1·16
Crosby (B)	1·03	0·95	Thornton Cleveleys	1·39	0·63
Dalton-in-Furness	1·05	1·06	Tottington	1·31	0·89
Darwen (B)	1·11	0·97	Trawden	1·26	0·92
Denton	0·99	1·43	Turton	1·10	1·30
Droylsden	1·02	1·23	Tyldesley	1·10	1·25
Eccles (B)	1·04	0·97	Ulverston	1·09	0·72
Faiilsworth	0·95	1·18	Urmston	0·95	1·22
Farnworth (B)	1·10	0·88	Walton-le-Dale	0·90	1·23
Fleetwood (B)	1·05	1·02	Wardle	1·06	0·57
Formby	1·61	0·97	Westhoughton	0·99	1·09
Fulwood	1·05	0·58	Whitefield	0·82	1·47
Golborne	0·85	1·41	Whitworth	1·01	1·14
Grange	2·36	0·44	Widnes (B)	0·94	1·36
Great Harwood	1·09	0·93	Withnell	1·23	0·92
Haslingden (B)	1·12	0·96	Worsley	1·16	1·42
Haydock	0·95	1·23			
Heywood (B)	0·94	1·28			
Hindley	0·95	1·26			
Horwich	1·08	1·05			
Huyton-with-Roby	0·91	1·67			
Ince-in-Makerfield	1·03	1·27			
Irlam	1·19	1·36			
Kearsley	1·09	1·15			
Kirkby	0·98	3·16			
Kirkham	1·07	1·23			
Lancaster (B)	1·11	0·73			
Lees	1·23	0·60			
Leigh (B)	1·10	1·14			
Leyland	0·97	1·24			
Litherland	0·97	1·44			
Littleborough	1·07	1·06			
Little Lever	1·14	1·39			
Longridge	1·15	1·15			
Lytham St. Annes (B)	1·25	0·65			
Middleton (B)	0·97	1·48			
Milnrow	1·25	1·09			
Morecambe and Heysham (B)	1·26	0·72			

TABLE 3—AREA, POPULATION, etc., IN EACH DISTRICT, TOGETHER WITH THE NUMBERS OF BIRTHS AND DEATHS DURING 1971

Notes: The Census, 1971, populations given in this table refer to the areas as constituted at 31st December, 1971. Acreages 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 20 and 22, and for the district factors see Table 2, page 132. Rates based upon less than 20 births or deaths 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, such rates being in italics in the following table.

such rates being in italics in the following table.

URBAN DISTRICTS	POPULATION AT ALL AGES		BIRTHS				DEATHS				INFANT MORTALITY		NEO-NATAL MORTALITY				EARLY NEO-NATAL MORTALITY				PERINATAL MORTALITY																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																													
	Acreage (land and inland water) at 31st Dec. 1971	Census, 1971 (Prelim.)	Est. Home, at 30th June, 1971	LIVE BIRTHS			STILLBIRTHS			Number registered		Deaths of infants under one year		Deaths of infants under four weeks				Deaths of infants under one week																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																
				M.	F.	Total	Crude rate per 1,000 population	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	Rate per 1,000 live births																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																										

L.—Legitimate.

I.—Illegitimate.

TABLE 3—continued

URBAN DISTRICTS	Area (land and water) at 31st Dec. 1971	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
		Est. Home, 30th June, 1971	Census, 1971 (Prelim.)	5,310	5,310	33	38	83	15.6	16.4	1	1	2	12	33	66	12.4	15.0	1	1	2	36	1	1	2	24	1	1	2	24	
Church	..	5,310	5,310	33	38	83	15.6	16.4	1	1	2	12	33	66	12.4	15.0	1	1	2	36	1	1	2	24	1	1	2	24	24		
Clayton-le-Moors	..	6,760	6,760	61	51	129	19.0	20.3	2	2	4	15	66	53	119	17.6	18.3	1	1	2	16	1	1	2	8	1	1	2	8	8	
Cliitheroe (B)	..	13,191	13,320	88	84	181	13.6	15.9	2	2	4	11	93	116	209	15.7	11.9	3	3	6	17	3	3	6	17	3	3	6	17	17	
Colne (B)	..	18,873	18,870	127	127	257	15.7	19.0	1	1	2	3	159	161	320	17.0	15.6	2	4	7	24	1	4	5	17	1	4	5	17	17	
Crompton	..	17,027	17,200	149	151	313	18.2	21.7	3	3	6	9	109	86	195	11.3	13.1	2	4	6	19	2	3	5	16	2	3	5	16	16	
Crosby (B)	..	57,405	57,790	412	410	881	15.2	15.7	5	9	14	10	377	413	790	13.7	13.0	10	9	22	25	3	7	12	14	3	7	11	12	12	
Dalton-in-Furness	..	11,217	11,320	94	96	198	17.5	18.4	2	2	4	10	61	54	115	10.2	10.8	3	2	7	35	2	1	4	20	2	1	3	15	15	
Darwen (B)	..	28,880	29,110	230	229	493	16.9	18.8	3	9	18	18	240	212	452	15.5	15.0	7	3	11	22	5	1	6	12	5	1	6	12	12	
Denton	..	38,107	38,360	295	292	634	16.5	16.3	2	4	6	6	189	208	397	10.3	14.7	4	6	13	21	4	1	8	13	3	1	5	8	8	
Droylsden	..	24,134	24,210	187	190	402	16.6	16.9	6	5	11	27	151	142	293	12.1	14.9	5	2	7	17	1	1	2	5	1	1	2	5	5	
Eccles	..	38,413	38,430	236	223	523	13.6	14.1	3	6	9	17	293	307	600	15.6	15.1	1	2	6	11	1	3	4	8	1	3	4	8	8	
Falshaworth	..	23,233	23,230	189	181	391	16.8	16.0	3	7	18	18	131	128	259	11.1	13.1	1	3	4	10	1	2	3	8	1	2	3	8	8	
Farnworth (B)	..	26,841	26,270	216	205	474	18.0	19.8	3	7	15	15	217	205	422	16.1	14.2	9	3	12	25	5	1	6	13	4	1	5	11	11	
Fleetwood (B)	..	28,584	29,270	207	211	458	15.6	16.4	2	5	11	11	205	206	411	14.0	14.3	4	5	10	22	2	5	8	17	2	4	7	15	15	
Fernby	..	23,501	23,800	205	198	412	17.3	27.9	1	1	2	2	87	91	178	7.5	7.3	2	4	6	15	2	3	5	12	2	3	5	12	12	
Fulwood	..	21,741	22,330	160	136	308	13.8	14.5	5	3	8	25	135	158	293	13.1	7.6	1	2	3	10	1	1	2	3	1	1	2	3	3	3

L.—Legitimate.

L.—Illegitimate.

TABLE 3—continued

URBAN DISTRICTS	Acreage (land and water) at 31st Dec. 1971	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	Stillbirth 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			
Golborne	7,561	28,178	28,290	19.4	16.5	12.8	20	129	9.1	12.8	3	4	7	13	1	3	4	7	13	1	3	4	7	1	3	4	7	1	3	4	7	1	3	4	7	5		
Grange	1,883	3,627	3,520	6.8	16.0	8.3	nil	30	18.8	8.3	1	—	1	42	1	—	1	42	1	42	1	—	1	42	1	—	1	42	1	—	1	42	1	—	1	42	42	
Great Harwood	2,868	11,000	11,000	14.5	15.8	12.6	6	78	13.5	12.6	3	—	3	19	2	—	2	19	2	19	2	—	2	19	2	—	2	19	2	—	2	19	2	—	2	19	19	
Hatfield (B)	8,203	14,953	14,960	14.6	16.4	15.1	18	115	15.7	15.1	2	3	6	28	1	2	3	28	1	2	3	5	23	1	2	4	23	1	2	4	18	1	2	4	18	36		
Haydock	2,395	14,180	14,310	20.7	19.7	13.8	20	79	11.2	13.8	3	1	5	17	1	—	2	7	17	1	—	2	7	1	—	2	7	1	—	2	7	1	—	2	7	7	26	
Heywood (B)	8,508	30,418	30,450	18.4	17.3	15.4	19	179	12.0	15.4	4	1	6	11	4	—	4	11	6	11	4	—	4	7	1	—	4	7	1	—	4	7	1	—	4	7	23	
Hindley	2,610	24,307	24,310	19.5	18.5	15.1	15	148	12.0	15.1	5	5	10	21	4	1	5	10	21	4	1	5	13	1	4	1	13	1	4	1	5	11	1	4	1	5	25	
Horwich	3,257	16,433	16,550	17.4	18.8	14.6	10	112	13.9	14.6	1	2	3	10	1	—	2	3	10	1	—	2	3	1	—	2	3	1	—	2	3	1	—	2	3	1	3	14
Huyton-with-Roby	3,055	66,629	67,200	15.3	13.9	15.7	22	340	9.4	15.7	11	5	19	19	8	3	13	19	19	8	3	13	13	1	1	1	13	1	1	1	1	1	1	1	1	1	34	
Ince-in-Makerfield	2,321	15,925	15,780	18.8	19.4	15.7	17	101	12.4	15.7	2	5	7	24	2	3	5	7	24	2	3	5	17	1	2	3	17	1	2	3	5	17	1	2	3	5	33	
Irlam	4,714	20,571	20,750	17.5	20.8	13.7	16	119	10.1	13.7	4	1	5	14	3	1	4	5	14	3	1	4	11	1	2	1	11	1	2	1	3	8	1	2	1	3	24	
Kearsley	1,727	11,243	11,320	17.8	19.4	14.5	24	80	12.6	14.5	5	—	6	30	3	—	3	6	30	3	—	3	15	1	2	—	15	1	2	—	2	10	1	2	10	34		
Kirkby	4,845	59,759	60,170	22.7	22.2	23.1	11	241	7.3	23.1	24	14	45	33	12	10	26	45	33	12	10	26	19	11	9	24	18	11	9	24	18	11	9	24	28			
Kirkham	939	6,422	6,560	13.9	14.9	13.5	22	43	11.0	13.5	1	1	2	22	1	1	2	2	22	1	1	2	22	1	1	2	22	1	1	2	22	1	1	2	22	43		
Lancaster (B)	5,101	49,525	49,300	15.0	16.7	10.8	16	343	14.8	10.8	6	5	12	16	5	2	7	12	16	5	2	7	9	1	5	2	9	1	5	2	7	9	1	5	2	7	25	
Lees	288	4,367	4,400	20.7	25.5	11.3	22	45	18.9	11.3	2	—	2	22	1	—	1	2	22	1	—	1	11	1	—	1	11	1	—	1	1	1	1	1	1	1	32	

1—Illegitimate.
1—Illegitimate.

L.—Legitimate.

I.—Illegitimate.

TABLE 3—continued

URBAN DISTRICTS	Average (land and inland water) at 31st Dec. 1971	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, 1971 (Prelim.)	Est. Home, at 30th June, 1971	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
Leigh (B)	6,361	46,117	46,180	421	365	829	18.0	19.8	8	7	16	13.6	15.5	4	6	14	17	3	4	9	11	2	4	8	10	28
Leyland	3,804	23,391	23,370	180	190	390	16.7	16.2	5	—	7	11.9	14.8	4	3	8	21	2	2	5	13	—	2	3	8	25
Litherland	1,210	23,670	23,830	195	168	389	16.3	15.8	1	6	7	10.0	14.4	4	1	5	13	4	—	4	10	4	—	4	10	28
Littleborough	7,855	11,987	12,130	110	110	244	20.1	21.5	1	4	6	12.1	12.8	2	5	7	29	2	4	6	25	2	4	6	25	48
Little Lever	807	9,124	9,200	129	140	296	32.2	36.7	2	3	6	8.3	11.5	3	1	4	14	3	—	3	10	3	—	3	10	30
Longridge	3,285	6,597	6,590	51	79	135	20.5	23.6	—	1	1	12.3	14.1	—	—	1	7	—	1	1	7	—	1	1	7	15
Lytham St. Annes (B)	5,814	40,089	40,180	153	156	342	8.5	10.6	3	2	6	19.0	12.4	4	4	8	23	1	1	2	6	1	1	2	6	23
Middleton (B)	5,172	53,419	54,270	355	342	785	14.5	14.1	6	2	9	10.4	15.4	7	1	10	13	7	1	9	11	5	1	6	8	19
Millnrow	5,194	10,329	10,320	97	100	207	20.1	25.1	—	—	—	11.6	12.6	4	1	5	24	4	1	5	24	4	1	5	24	24
Morecambe and Heytham (B)	3,796	41,863	41,620	183	209	439	10.5	13.2	3	1	6	16.9	12.2	3	1	4	9	3	1	4	9	3	1	4	9	22
Mossley (B)	3,681	10,055	10,180	100	78	187	18.4	21.2	—	1	1	12.1	12.8	1	1	2	11	1	1	2	11	1	1	2	11	16
Nelson (B)	3,445	31,225	31,560	260	221	505	16.0	18.2	1	2	3	15.1	13.3	3	1	6	12	2	1	3	6	2	1	3	6	12
Newton-le-Willows	3,105	22,380	22,330	189	164	388	17.4	17.6	1	2	8	13.6	15.5	5	2	7	18	4	1	5	13	4	—	4	10	30
Ormskirk	15,227	27,618	27,720	222	232	477	17.2	18.7	3	—	3	10.2	10.8	4	5	9	19	1	2	3	6	—	2	2	4	10
Orrell	1,616	12,069	12,070	94	80	180	14.9	14.5	2	—	2	11.3	13.8	1	—	1	6	—	—	—	nil	—	—	—	—	11
Oswaldtwistle...	4,885	14,015	14,000	90	112	223	15.9	19.1	2	1	3	12.1	13.4	4	2	6	27	3	2	5	22	1	2	3	13	27

L.—Legitimate.

L.—Illegitimate.

TABLE 3—continued

Urban Districts	Average (land and inland water) at 31st Dec. 1971	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, 1971 (Prelim.)	Est. Home, 30th June, 1971	M.	F.	Total	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	Rate per 1,000 live births
Padstow	975	10,192	10,230	65	68	133	14.0	15.5	3.4	74	15.0	14.3	1	2	3	28	1	2	3	14	1	2	3	14	47
Poulton-le-Fylde	2,272	16,401	16,260	102	80	182	11.8	11.7	10	103	12.1	11.7	2	—	2	10	2	—	2	10	2	—	2	10	21
Presall	3,277	4,066	4,150	24	14	41	9.9	21.5	nil	44	20.7	11.2	1	1	2	49	1	1	2	24	1	1	2	24	24
Prescot	871	12,490	12,650	116	101	216	18.2	17.3	17	68	11.1	13.4	1	1	2	9	1	1	2	9	1	1	2	9	21
Prestwich (B)	2,421	32,838	33,310	168	160	328	10.5	11.2	14	229	15.7	12.1	3	3	6	17	2	2	4	11	2	2	4	11	25
Radcliffe (B)	4,957	29,320	29,510	272	225	497	18.8	20.1	12	206	13.0	13.8	12	12	25	45	10	8	19	34	9	8	18	32	45
Rainford	5,877	8,381	8,400	101	99	203	24.2	24.2	5	31	7.4	10.9	1	1	2	5	1	1	2	5	1	1	2	5	5
Ramsbottom	9,562	15,872	15,980	133	123	256	17.0	19.0	7	87	11.3	11.1	1	1	2	7	1	1	2	7	1	1	2	7	11
Rawtenstall (B)	9,528	21,404	21,200	120	136	256	13.3	14.6	2	156	15.8	14.1	1	1	2	7	1	1	2	7	1	1	2	7	11
Rushon	2,879	6,010	6,050	54	47	105	17.4	19.7	19	46	15.0	14.3	1	1	2	19	1	1	2	19	1	1	2	19	28
Royton	2,148	20,319	20,280	221	190	436	21.5	24.5	20	107	10.2	12.8	1	5	6	14	1	2	3	7	1	2	3	7	25
Skidmersdale and Holland	7,510	30,522	31,120	388	390	778	26.4	22.2	16	115	6.7	12.1	13	3	18	22	6	1	8	10	6	1	8	10	25
Standish-with-Langtree	3,266	11,159	11,210	97	103	203	18.1	17.7	5	67	10.2	12.3	1	1	2	10	1	1	2	10	1	1	2	10	15
Stretford (B)	3,533	54,011	54,220	370	343	713	15.4	15.7	21	353	12.3	14.9	6	5	14	17	3	5	11	13	3	5	11	13	34
Swinton and Pendlebury (B)	3,362	40,124	40,070	340	275	615	16.2	16.5	15	255	12.3	14.3	10	3	14	22	9	2	12	18	8	1	9	14	29
Thornton Cleveleys	3,358	26,869	26,910	160	156	316	12.4	17.2	18	210	15.3	9.6	—	—	—	nil	—	—	—	nil	—	—	—	—	18

1.—Illegitimate.
L.—Legitimate.

1.—Illegitimate.

L.—Legitimate.

I.—Illegitimate.

TABLE 3—continued

URBAN DISTRICTS	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, 1971 (Prelim.)	Est. Home, at 31st Dec. 1971	M.	F.	Total	Crude rate	Ad-justed rate	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		
Tottington	2,542	9,740	9,730	104	106	210	22.4	29.3	1	2	3	14	52	71	123	12.6	11.2	2	1	3	14	—	—	—	—	—	—	—	nil	14
Trarham	6,815	1,854	1,880	11	9	22	11.7	14.7	—	—	—	nil	12	16	28	14.9	13.7	—	—	—	45	—	—	—	—	—	—	—	45	45
Turton	17,334	21,500	21,520	213	190	412	19.1	21.0	4	4	8	19	95	104	199	9.2	12.0	3	1	5	12	3	1	4	10	—	—	—	2	21
Tyldesley	5,175	21,163	21,100	199	204	428	20.3	22.3	2	7	9	21	120	114	234	11.1	13.9	5	2	7	16	4	—	4	9	—	—	—	7	27
Ulverston	3,206	11,838	12,010	104	97	212	17.7	19.3	1	1	2	9	81	100	181	15.1	10.9	6	2	8	38	5	2	7	33	—	—	—	33	42
Urmston	4,799	44,523	44,400	360	332	733	16.5	15.7	3	5	9	12	229	223	452	10.2	12.4	3	1	5	7	1	—	1	7	—	—	—	7	13
Walton-le-Dale	4,733	26,841	26,780	287	272	588	22.0	19.8	4	3	8	13	112	109	221	8.3	10.2	3	7	10	17	2	5	7	12	—	—	—	12	25
Wardle	3,192	5,334	4,880	44	40	90	18.4	19.5	—	—	2	22	43	43	86	17.6	10.0	2	3	5	56	1	3	4	44	—	—	—	44	65
Westhoughton	5,560	17,729	17,680	106	110	234	13.2	13.1	2	—	2	8	119	119	238	13.5	14.7	2	3	5	21	1	2	3	13	—	—	—	13	21
Whitefield	3,391	21,841	21,850	188	143	345	15.8	13.0	2	2	5	14	109	120	229	10.5	15.4	4	2	6	17	2	1	3	9	—	—	—	9	23
Whitworth	4,483	7,417	7,460	62	49	126	16.9	17.1	2	—	2	16	44	38	82	11.0	12.5	1	1	3	24	1	1	2	16	—	—	—	16	31
Wilnes (B)	5,746	56,709	56,960	515	490	1,083	19.1	18.0	4	6	10	9	298	269	567	10.0	13.6	11	4	18	17	6	2	11	10	—	—	—	10	19
Withnell	4,186	3,217	3,200	23	29	56	17.5	21.5	—	—	2	34	28	26	54	16.9	15.5	2	—	2	36	1	—	1	18	—	—	—	18	52
Worley	7,240	49,573	49,800	393	372	824	16.5	19.1	1	3	5	6	284	269	553	11.1	15.8	4	4	10	12	2	3	6	7	—	—	—	7	12
Total Urban Districts	380,410	2,060,868	2,067,840	16,542	15,794	34,812	16.8	17.5	242	219	504	14	12,968	12,591	25,559	12.4	13.4	331	229	628	18	—	—	—	12	183	135	360	10	24

L—Illegitimate

L—Legitimate.

TABLE 3—continued

RURAL DISTRICTS	Acreage (land and inland water) at 31st Dec. 1971	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, 1971 (Prelim.)	Est. Home, 30th June, 1971	M.	F.	Total	Live birth rate 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	
							Crude rate	Ad- justed rate																				
Blackburn	19,469	20,332	20,440	166	143	317	15.5	14.4	9	2	1	3	9.8	10.9	9	2	1	3	9	2	1	3	9	2	1	3	9	19
Burnley	39,849	18,060	18,160	124	108	242	13.3	15.2	12	3	—	3	13.3	11.4	21	2	2	5	21	2	2	5	21	2	2	5	21	33
Chorley	41,117	37,879	38,110	361	342	728	19.1	19.9	19	7	5	14	10.6	12.2	14	6	4	10	14	4	3	7	10	4	3	7	10	28
Citheroe	32,170	9,460	10,160	37	52	96	9.4	11.8	10	1	—	1	12.2	10.4	10	—	—	1	10	—	—	—	1	—	—	1	10	21
Fylde	33,264	20,251	20,160	186	168	375	18.6	18.2	5	—	2	2	14.6	11.2	11	4	—	4	11	3	—	3	8	3	—	3	8	13
Garstang	57,491	19,118	19,170	162	156	332	17.3	19.9	15	3	2	5	12.4	13.3	9	1	2	3	9	1	1	2	6	1	1	2	6	21
Lancaster	52,982	17,091	17,130	93	98	201	11.7	13.8	20	2	2	4	16.1	11.6	5	—	—	1	5	—	—	—	1	—	—	—	—	20
Lunesdale	76,267	10,739	10,660	103	68	179	16.8	18.1	16	2	1	3	13.2	9.6	17	2	1	3	17	1	1	2	11	1	1	2	6	22
North Lonsdale	127,448	16,821	16,560	103	97	208	12.6	14.7	5	—	1	1	12.3	10.2	10	1	1	2	10	1	—	1	5	1	—	1	5	10
Preston	49,754	52,660	53,200	383	380	759	15.0	17.4	14	5	5	11	11.8	11.2	13	9	1	10	13	7	1	8	10	6	1	7	9	22
Warrington	22,357	50,342	50,180	543	477	1,053	21.0	18.5	11	8	4	12	9.3	10.5	12	6	7	13	12	4	4	8	8	4	4	8	8	19
West Lancashire	65,168	71,269	71,990	543	497	1,099	15.3	13.0	13	5	10	15	9.6	12.3	25	13	10	27	25	10	8	21	19	10	8	21	19	32
Whiston	23,786	85,538	84,940	592	596	1,285	15.1	11.2	18	9	14	23	8.8	13.7	23	13	16	30	23	9	6	16	12	8	5	14	11	28
Wigan	11,191	14,851	14,700	155	155	319	21.7	19.1	12	4	—	4	7.9	10.5	13	1	2	4	13	1	—	2	13	1	—	2	6	19

L.—Illegitimate.

L.—Illegitimate.

L.—Legitimate.

L.—Illegitimate.

TABLE 3—continued

TOTALS	Average (land and inland water) at 31st Dec. 1971	POPULATION AT ALL AGES		BIRTHS						DEATHS		INFANT MORTALITY		NEO-NATAL MORTALITY				EARLY NEO-NATAL MORTALITY				PERINATAL MORTALITY																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																						
				LIVE BIRTHS			STILLBIRTHS																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																					
		Census, 1971 (Prelim.)	Est. Home, 30th June, 1971	M.	F.	Total	Crude rate	Ad-justed rate	M.	F.	Total	Still-birth rate per 1,000 total births	M.	F.	Total	Number registered	Death rate per 1,000 population	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.

TABLE 6—ANALYSIS BY AGE-GROUP, SEX AND SITE CLASSIFICATION OF THE NOTIFICATIONS OF TUBERCULOSIS RECEIVED DURING 1971

SITE OF TUBERCULAR INFECTION	AGE GROUPS—YEARS												TOTAL ALL SEXES		
	0-		1-		5-		10-		15-		20-			TOTAL M. & F.	
	Both Sexes		Both Sexes		Both Sexes		Both Sexes		Both Sexes		Both Sexes				
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.			
Respiratory system—															
Primary notifications	1	2	11	7	18	17	30	13	17	11	28	23	19	401	
Inward transfers	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Total	1	2	11	7	18	17	30	13	17	11	28	23	19	401	
Meninges and C.N.S.—															
Primary notifications	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Inward transfers	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Total	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Intestines, peritoneum and mesenteric glands—															
Primary notifications	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Inward transfers	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Total	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Bones and joints—															
Primary notifications	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Inward transfers	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Total	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Skin and subcutaneous cellular tissue—															
Primary notifications	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Inward transfers	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Total	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Lymphatic system—															
Primary notifications	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Inward transfers	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Total	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Genito-urinary system—															
Primary notifications	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Inward transfers	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Total	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
All other sites—															
Primary notifications	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Inward transfers	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Total	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
RESPIRATORY TUBERCULOSIS															TOTAL ALL FORMS
Sex	AGE GROUPS—YEARS														
	TOTAL M. & F.														
	0-	1-	5-	10-	15-	20-	25-	35-	45-	55-	65-	All ages			
M.	1	11	6	13	17	23	27	26	50	38	262	93	307		
F.	1	7	4	17	11	19	24	22	18	10	11	139	187		
M.	—	—	—	—	—	—	—	—	—	—	—	—	56		
F.	—	—	—	—	—	—	—	—	—	—	—	—	33		
TOTAL	1	18	9	13	22	28	34	60	60	44	316	98	363		
	1	2	4	21	15	20	32	27	21	10	14	169	220		

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 1971

Health Division Number	Number of clinics at December, 1971	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 classes at end of year	Number of sessions	Number of women attending	Number of attendances		
1	2	—	—	—	100	558	1,898	19.0	3.4	215	223	3	110	161	682		
2	—	—	—	—	—	—	—	—	—	—	—	4	217	475	2,532		
3	4	—	—	—	175	837	2,417	13.8	2.9	62	83	6	282	451	2,831		
4	5	—	198	—	52	789	2,960	11.8	3.8	39	39	8	332	371	2,252		
5	6	293	6	—	102	1,819	5,875	14.7	3.2	59	63	7	383	471	2,556		
6	4	—	313	—	—	301	1,919	6.1	6.4	—	—	4	137	175	980		
7	—	—	—	—	—	—	—	—	—	—	—	2	121	169	767		
8	3	—	130	9	20	320	1,126	7.1	3.5	1	1	5	250	304	1,657		
9	7	—	100	75	256	749	4,542	10.5	6.1	343	344	7	240	254	1,028		
10	4	25	103	—	52	639	2,038	11.3	3.2	—	—	5	220	327	1,482		
11	5	—	118	80	49	1,058	3,507	14.2	3.3	21	21	8	350	658	3,146		
12	7	208	55	—	89	724	3,670	10.4	5.1	2	2	7	314	414	2,166		
13	6	145	153	—	11	558	3,222	10.4	5.8	7	7	2	80	96	401		
14	6	95	180	—	—	402	2,615	9.5	6.5	—	—	4	91	259	676		
15	4	126	26	25	49	826	1,751	7.7	2.1	97	104	4	197	348	1,738		
16	2	11	25	—	—	68	113	3.1	1.7	2	2	1	88	271	1,486		
17	6	24	145	—	115	372	2,469	8.7	6.6	—	—	4	186	309	1,451		
De'egate District—																	
Crosby M.B. ..	1	—	42	—	—	17	92	2.2	5.4	—	—	1	48	74	553		
Huyton-w-Roby U.D.	1	—	75	—	4	167	561	7.1	3.4	—	—	1	40	21	71		
Middleton M.B. ..	2	43	158	—	—	263	1,440	7.2	5.5	—	—	1	50	113	450		
Stretford M.B. ..	—	—	—	—	—	—	—	—	—	—	—	1	42	93	468		
Torral—Adminis- trative County	75	970	1,827	189	1,074	10,467	42,215	10.4	4.0	848	889	85	3,778	5,814	29,373		

TABLE 8—CHILD HEALTH CENTRES
SUMMARY, BY HEALTH DIVISIONS AND DELEGATE DISTRICTS, OF ATTENDANCES DURING 1971

Health Division Number	Number of centres at 31st December, 1971	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	1971	1970	1966-69	0	1-	2-4 (inclusive)		
1 ..	7	171	26	—	412	379	404	4,285	974	1,825	36.0	34
2 ..	19	948	96	—	1,475	1,340	1,754	21,461	4,842	2,951	27.5	280
3 ..	16	832	129	—	1,579	1,388	1,221	23,695	5,313	3,497	33.3	182
4 ..	35	1,016	513	—	3,476	2,955	2,999	49,097	11,740	6,625	43.1	124
5 ..	20	653	501	—	1,970	1,836	1,892	34,405	8,406	8,832	44.0	—
6 ..	15	463	361	—	1,278	1,356	1,770	20,412	6,254	5,964	38.9	—
7 ..	17	621	233	50	2,452	2,161	1,575	32,290	5,541	6,080	48.6	182
8 ..	15	†518	127	157	2,181	2,087	1,636	31,678	6,027	2,723	50.4	134
9 ..	21	811	493	68	3,417	2,888	2,541	40,024	10,198	8,163	42.6	93
10 ..	14	614	77	97	1,984	1,726	1,525	22,790	5,336	2,658	39.1	45
11 ..	22	571	498	158	3,103	2,637	1,942	41,721	6,752	3,356	42.2	197
12 ..	21	772	492	—	2,065	2,002	2,321	29,605	6,735	4,336	32.2	282
13 ..	8	340	238	—	1,285	1,164	1,290	20,800	3,611	4,088	49.3	134
14 ..	7	407	204	—	1,466	1,504	1,382	26,179	4,265	3,249	55.1	103
15 ..	12	700	204	—	1,644	1,622	2,301	28,895	7,174	5,299	45.8	—
16 ..	6	292	155	7	961	978	1,213	17,349	4,385	3,663	55.9	100
17 ..	14	616	40	166	1,917	1,682	1,353	23,258	4,328	2,709	36.9	163
Delegate District—												
Crosby M.B.	4	161	136	—	740	657	742	9,321	2,177	2,968	48.7	169
Huyton-with-Roby U.D.	6	311	95	—	815	686	577	10,037	1,946	1,718	33.7	19
Middleton M.B.	5	314	64	—	610	562	455	7,018	1,744	742	25.1	110
Stretford M.B.	4	288	34	—	673	694	876	8,134	2,701	1,116	37.1	127
Total—Administrative County ..	288	11,419	4,716	703	35,503	32,304	31,769	502,444	110,449	82,562	41.3	2,478

*See text, page 41.

†Includes 50 sessions conducted by hospital medical staff.

TABLE 10—MOTHER AND BABY HOMES
SUMMARY, BY HEALTH DIVISIONS AND DELEGATE DISTRICTS, OF UNMARRIED EXPECTANT AND NURSING MOTHERS FOR WHOM THE COUNTY COUNCIL ACCEPTED
FINANCIAL RESPONSIBILITY AND WHO WERE ADMITTED TO HOMES DURING 1971

Home	*NUMBER OF CASES ADMITTED																	FROM DELEGATE DISTRICT			Total— Admini- strative County			
	FROM HEALTH DIVISION NUMBER																	Crosby M.B.	Huyton- w-Roby U.D.	Middle- ton M.B.		Stret- ford M.B.		
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17						Total	
Ashcroft House, 214 Whitegate Drive, Blackpool	—	—	1 (1)	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1 (1)	—	—	—	1 (1)	2 (2)	
Eighton Lodge, Low Eighton, Gateshead 9	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	1	—	—	—	—	1	
Fylde House of Help, 141 Hornby Road, Blackpool	—	4	3	10	4	—	—	—	—	—	—	—	—	—	—	—	21	—	—	—	—	1	22	
Knowle House, Sazars Road, Handforth, Manchester	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1 (1)	—	1 (1)	—	—	—	1	—	2 (1)	
Lancaster, Morecambe and District Moral Welfare Association, Girls' Hostel, 7 Queen Street, Lancaster	1	6	4	3	2	—	—	1	—	—	—	—	—	—	—	—	17	—	—	—	—	—	17	
Liverpool Catholic Children's Society—Affiliated Homes	—	—	—	4	—	—	2	2	10 (3)	—	1	—	—	—	1	—	20 (3)	2	3	—	—	—	25 (3)	
Lorna Lodge, Barlow Moor Road, Manchester 20	—	—	—	—	1	—	—	—	2	4	—	—	—	—	—	—	7	—	—	—	—	—	7	
Prospect House, 7 Trinity Road, Hoylake	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	1	
St. Agnes' House, 15 Mauldeth Road, Manchester 20	—	1	1 (1)	—	—	—	—	1	—	—	3	3	1	—	1 (1)	1	12 (2)	—	—	1	—	—	13 (2)	
St. Anne's Maternity Home, Simpson Hill, Heywood	—	—	—	—	3 (1)	3	—	—	1	—	6	4 (1)	1	5 (1)	—	3	26 (3)	—	—	4	1	5	36 (3)	
St. Bridget's Home, Lache Lane, Chester	—	—	—	—	—	—	8	—	2	—	—	—	—	—	—	—	10	1	—	—	—	—	11	
St. Mary's Home, Coledale Hall, Carlisle	—	—	—	—	—	—	—	—	—	1	1	—	1	—	—	—	3	—	—	—	—	—	3	
St. Monica's Home, 13 Croxteth Road, Liverpool 8	—	1 (1)	—	—	—	—	—	1	3 (1)	—	—	—	—	—	—	—	5 (2)	1	2 (1)	—	—	—	8 (3)	
St. Teresa's Home, 61 Broom Lane, Salford 7	—	1	2	1	2	—	—	—	—	—	2	3	1	—	1 (1)	1	17 (1)	—	—	1	3	—	21 (1)	
Waverley House, Victoria Road, Grappenhall, Warrington	—	—	—	—	—	—	2	3	6	10 (1)	—	—	—	—	—	—	21 (1)	—	4	—	—	—	25 (1)	
TOTAL	1	13 (1)	11 (2)	18	12 (1)	3	12	8	24 (4)	16 (1)	13	10 (1)	4	5 (1)	4 (3)	2	6	162 (14)	4	9 (1)	6	5	8 (1)	194 (16)

*These normally are expectant mothers. Post-natal cases are included and also shown in brackets. Cases transferred from one home to another are shown against the homes to which they were first admitted.

†Cases referred by County Social Services Committee.

TABLE 12—HEALTH VISITING
SUMMARY, BY HEALTH DIVISIONS AND DELEGATE DISTRICTS, OF HOME VISITS DURING 1971

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)	Cases		Contacts		Total		
	1971	1970	1966-69											Under 65	65 and over	Under 65	65 and over			
1 ..	617	481	1,392	668 (49)	6 (4)	3 (1)	37	4	316	—	361	8,194	581	2,207	17	19	27	3	11,409	
2 ..	1,589	1,616	3,998	2,299 (774)	52 (41)	127 (79)	212	59	1,485	—	1,129	24,922	2,901	7,139	190	54	364	42	36,741	
3 ..	2,225	2,436	4,175	1,852 (625)	90 (46)	101 (52)	108	95	1,691	103	1,166	23,800	1,971	5,007	273	174	846	13	33,330	
4 ..	4,901	4,222	7,838	3,298 (706)	105 (50)	233 (109)	—	65	2,583	—	1,314	41,616	5,731	7,237	559	87	457	7	57,008	
5 ..	3,344	2,098	4,100	2,883 (430)	127 (48)	1,097 (141)	86	146	1,564	172	1,002	22,941	2,599	5,311	190	52	883	43	33,021	
6 ..	1,423	1,971	2,583	1,280 (477)	70 (41)	150 (94)	320	103	1,236	—	1,899	19,366	1,750	3,353	223	71	530	91	27,283	
7 ..	3,206	3,418	8,813	983 (258)	92 (32)	104 (66)	20	43	918	240	1,057	33,641	1,619	2,929	580	108	555	49	40,538	
8 ..	2,707	2,222	5,847	866 (180)	77 (29)	45 (30)	183	17	253	377	918	26,117	1,815	1,863	1,031	174	1,486	35	33,439	
9 ..	4,606	4,506	11,769	6,488 (606)	184 (39)	161 (153)	122	94	2,375	1,263	1,386	37,106	3,561	8,960	1,264	315	1,618	54	54,264	
10 ..	2,480	2,491	7,514	851 (227)	34 (10)	52 (35)	22	83	268	206	536	20,377	1,043	1,668	855	164	1,437	207	26,287	
11 ..	3,766	3,416	9,335	2,850 (604)	83 (29)	143 (125)	6	48	773	307	814	35,213	3,450	5,832	492	185	1,133	208	47,327	
12 ..	2,043	2,396	5,934	2,102 (141)	49 (9)	119 (84)	85	37	718	90	753	26,585	2,366	3,994	264	41	970	24	34,977	
13 ..	1,475	1,177	3,010	1,234 (43)	5	25 (11)	—	13	214	320	354	15,602	467	2,533	726	67	589	—	20,338	
14 ..	1,838	1,915	5,391	1,256 (82)	21 (4)	42 (39)	9	34	514	80	390	23,547	1,138	2,532	186	6	727	12	28,538	
15 ..	1,855	1,523	4,514	838 (298)	58 (17)	66 (60)	66	24	261	1	443	16,625	1,685	1,847	32	13	27	3	20,675	
16 ..	1,084	1,059	2,849	1,191 (500)	34 (19)	39 (35)	75	106	430	—	117	11,868	1,834	3,080	31	13	55	2	17,000	
17 ..	2,868	1,927	3,153	1,541 (109)	33 (15)	47 (30)	5	59	968	273	297	14,701	862	2,622	1,363	102	1,417	24	21,388	
Delegate District—																				
Crosby M.B. ..	936	1,012	2,787	535 (35)	17 (6)	7 (5)	4	4	131	114	156	9,851	381	1,195	285	98	372	42	12,380	
Huyton-w-Roby U.D. ..	1,112	1,211	3,727	1,546 (205)	21 (1)	65 (10)	33	—	1,187	60	198	11,318	446	1,753	131	45	140	14	14,045	
Middleton M.B. ..	897	782	1,771	611 (278)	18 (10)	131 (93)	9	28	416	66	289	10,878	2,546	1,666	115	81	587	4	16,166	
Stretford M.B. ..	940	953	2,910	548 (153)	37 (19)	57 (52)	141	48	645	—	198	12,807	960	1,665	107	44	116	5	15,902	
TOTAL—Admin. County ..	45,912	42,832	103,410	35,720 (6,780)	1,213 (469)	2,814 (1,304)	1,543	1,110	18,946	3,672	14,777	447,075	39,706	74,473	8,914	1,913	14,336	882	602,076	

*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.

†Excludes maternity cases and persons discharged from mental hospitals.

††Cases visited at the request of a G.P. or hospital are included and also shown separately in brackets.

TABLE 14—DISTRICT NURSING
ANALYSIS OF COMPLETED CASES BY DURATION OF TREATMENTS, FREQUENCY OF VISITS AND DISPOSAL OF CASES
YEAR ENDED 31ST DECEMBER, 1971

Disease or ailment	Total No. of cases	Duration of treatment					Average No. of visits (day and night)	No. of visits per case per week	Disposal of cases												
		Length of treatment (weeks)	Average duration of treatment (weeks)	Total visits		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.
Tuberculosis of respiratory system	113	1.454	12.9	7,118	—	63.0	4.9	76	67.3	6	5.3	5	4.4	10	8.8	—	15	13.3	1	0.9	
Other infective and parasitic diseases	881	6,097.3	6.9	19,005	60	21.6	3.1	717	81.4	69	7.8	18	2.0	17	1.9	5	52	5.9	3	0.3	
Cancer	2,961	31,343.1	10.6	111,928	4,615	39.4	3.7	389	13.1	809	27.3	1,650	55.7	55	1.9	9	40	1.4	9	0.3	
Diabetes	749	18,455.3	24.6	88,906	9	118.7	4.8	226	30.2	242	32.3	70	9.3	134	17.9	4	70	9.3	3	0.4	
Anaemias and other blood diseases	3,482	150,841	43.3	148,390	126	42.7	1.0	1,651	47.4	743	21.3	353	10.1	372	10.7	22	321	9.2	20	0.6	
Mental, psychoneurotic disorders	371	5,954.4	16.0	9,340	23	25.2	1.6	151	40.7	126	34.0	27	7.3	20	5.4	2	34	9.2	11	3.0	
Cerebral haemorrhage, cerebral embolism and thrombosis	986	18,002.1	18.3	42,317	111	43.0	2.3	206	20.9	403	40.9	337	34.2	23	2.3	2	12	1.2	3	0.3	
Other diseases of central nervous system	1,418	44,435.4	31.3	104,598	1,025	74.5	2.4	415	29.3	534	37.7	270	19.0	109	7.7	7	72	5.1	11	0.8	
Diseases of eye, ear and mastoid process	530	3,072.6	5.8	15,644	22	29.6	5.1	455	85.8	34	6.4	5	0.9	11	2.1	6	19	3.6	—	—	
Diseases of heart and circulatory system	4,004	66,352.4	16.6	144,273	382	36.1	2.2	1,787	44.6	1,152	28.8	754	18.8	141	3.5	31	117	2.9	22	0.5	
Influenza	86	244.4	2.8	820	6	9.6	3.4	74	86.0	5	5.8	3	3.5	1	1.2	—	3	3.5	—	—	
Pneumonia	423	1,894.7	4.5	6,347	35	15.1	3.4	214	50.6	100	23.6	94	22.2	8	1.9	1	12	1.2	1	0.2	
Bronchitis	1,075	10,916	10.2	23,637	351	22.3	2.2	686	63.8	194	18.0	149	13.9	15	1.4	2	23	2.1	6	0.6	
Other diseases of respiratory system	1,093	5,854.3	5.4	14,643	51	13.4	2.5	846	77.4	121	11.1	63	5.8	10	0.9	4	47	4.3	2	0.2	
Diseases of digestive system	5,053	21,963.6	4.3	61,946	134	12.3	2.8	4,251	84.1	419	8.3	109	2.2	59	1.2	118	23	87	1.7	10	0.2
Diseases of genito-urinary system	1,972	31,190.4	15.8	34,013	97	17.3	1.1	1,559	79.1	207	10.5	86	4.4	44	2.2	20	10	52	4	0.2	
Diseases of the skin	2,865	36,692.7	12.8	96,089	27	33.5	2.6	2,090	72.9	393	13.7	111	3.9	92	3.2	50	17	124	4.3	5	0.2
Diseases of bones and organs of movement (including rheumatism and arthritis)	1,353	47,627.4	35.2	86,669	540	64.5	1.8	557	41.2	465	34.4	134	9.9	112	8.3	6	65	4.8	14	1.0	
Senility and ill-defined conditions	6,831	84,687.1	12.4	166,840	654	24.5	2.0	3,101	45.4	1,372	20.1	790	11.6	206	3.0	1,131	16.6	2.8	43	0.6	
Burns and scalds	641	3,581.7	5.6	10,442	—	16.3	2.9	519	81.0	60	9.4	8	1.2	9	1.4	6	0.9	37	5.8	2	0.3
Other accidents, injuries, etc.	2,275	16,543	7.3	38,302	53	16.9	2.3	1,745	76.7	264	11.6	73	3.2	76	3.3	38	1.7	74	3.3	5	0.2
All other conditions	2,006	7,225	3.6	21,145	88	10.6	2.9	1,648	82.2	214	10.7	16	0.8	26	1.3	11	0.5	85	4.2	6	0.3
TOTAL—Administrative County	41,168	614,428.1	14.9	1,252,412	8,409	30.6	2.1	23,363	56.8	7,932	19.3	5,125	12.4	1,550	3.8	1,475	3.6	1,542	3.7	181	0.4

Note: Percentages are of the total cases of the particular disease or ailment.

TABLE 16—VACCINATION AGAINST POLIOMYELITIS
SUMMARY, BY HEALTH DIVISIONS AND DELEGATE DISTRICTS, OF IMMUNISATIONS PERFORMED DURING 1971

Health Division No.	No. who completed a full course of primary vaccination						No. who were given a reinforcement dose			By G.P.'s in private practice (included in previous col.)	
	Under 1		1-1970		1969		Total—under 4		4-1964-67		Reinforcement
	(a)	(b)	1971	1970	1969	1968	1968-71	1956-63	1964-67	1956-63	
1	39	373	76	12	500	20	523	3	540	259	293
2	48	842	306	33	1,229	81	1,354	44	1,338	607	493
3	16	1,146	346	81	1,589	229	1,885	67	1,605	620	507
4	57	1,758	875	148	2,838	323	3,201	40	3,197	833	813
5	48	1,420	492	63	2,023	126	2,179	30	1,782	699	764
6	9	704	337	57	1,107	34	1,152	11	954	70	222
7	53	1,532	482	60	2,127	120	2,269	22	1,985	365	1,167
8	10	1,661	432	32	2,135	164	2,328	29	1,884	61	291
9	63	1,697	622	129	2,511	511	3,245	223	2,447	767	450
10	30	1,067	463	41	1,601	105	1,723	17	1,709	208	856
11	79	1,676	643	71	2,469	213	2,728	46	2,498	112	681
12	21	1,288	486	46	1,841	72	1,919	6	1,572	115	308
13	41	758	213	45	1,057	75	1,153	21	836	60	304
14	25	1,072	259	53	1,409	133	1,565	23	1,016	168	347
15	109	1,002	316	45	1,472	66	1,568	30	1,583	477	470
16	23	717	257	27	1,024	29	1,059	6	1,215	539	465
17	16	1,247	399	114	1,776	294	2,154	84	1,421	568	286
Delegate District—											
Crosby M.B.	16	407	181	36	640	67	726	19	385	68	296
Huyton-with-Roby U.D.	24	655	329	26	1,034	24	1,064	6	973	63	62
Middleton M.B.	41	424	189	45	699	72	793	22	529	362	382
Stretford M.B.	12	381	157	22	572	95	679	12	638	304	230
TOTAL—Administrative County ..	780	21,827	7,860	1,186	31,653	2,853	35,267	761	30,107	7,365	9,687
											5,747

(a) Age, in years, at end of 1971.

(b) Year of birth.

TABLE 17—IMMUNISATION AGAINST DIPHTHERIA
SUMMARY, BY HEALTH DIVISIONS AND DELEGATE DISTRICTS, OF VACCINATIONS PERFORMED DURING 1971

Health Division No.	No. who completed a full course of primary immunisation							No. who were given a reinforcement dose				By G.P.'s in private practice (included in previous cols.)			
	(a)	Under 1	1-1970	2-1969	3-1968	Total—under 4	4-1964-67	8-1956-63	Total—under 16	Under 4	1968-71	1964-67	1956-63	Total—under 16	Reinforcement
	(b)	1971							1956-71	1968-71	1964-67	1956-63	1956-71		
1	42	371	73	11	497	15	3	515	65	1968-71	562	307	934	319	230
2	61	846	293	34	1,234	54	13	1,301	68	1968-71	1,366	63	1,497	559	309
3	26	1,133	334	67	1,560	163	56	1,779	85	1968-71	1,631	508	2,224	518	392
4	65	1,804	874	142	2,885	240	28	3,153	113	1968-71	2,972	691	3,776	874	487
5	56	1,411	480	54	2,001	109	36	2,146	70	1968-71	1,792	147	2,009	785	411
6	14	701	339	53	1,107	28	10	1,145	29	1968-71	961	86	1,076	222	227
7	61	1,805	546	74	2,486	120	63	2,669	61	1968-71	2,131	188	2,380	1,251	644
8	10	1,675	430	33	2,148	135	27	2,310	52	1968-71	2,076	96	2,224	290	257
9	73	1,700	625	131	2,529	505	214	3,248	47	1968-71	2,525	842	3,414	493	223
10	73	1,124	482	44	1,723	98	118	1,939	192	1968-71	1,710	106	2,008	962	472
11	96	1,698	633	71	2,498	281	98	2,877	142	1968-71	2,777	214	3,133	730	297
12	23	1,369	512	47	1,951	81	21	2,053	75	1968-71	1,675	387	2,137	388	402
13	45	817	225	48	1,135	77	25	1,237	22	1968-71	918	198	1,138	328	243
14	33	1,065	252	51	1,401	113	22	1,536	74	1968-71	1,070	196	1,340	342	347
15	109	1,000	305	39	1,453	66	25	1,544	220	1968-71	1,661	225	2,106	462	639
16	24	737	277	39	1,077	45	13	1,135	103	1968-71	1,374	132	1,609	520	376
17	35	1,261	396	108	1,800	260	111	2,171	71	1968-71	1,630	830	2,531	341	359
Delegate District—															
Crosby M.B.	21	416	174	34	645	59	17	721	15	1968-71	414	62	491	294	200
Huyton-with-Roby U.D.	21	705	323	32	1,081	41	6	1,128	4	1968-71	1,146	58	1,208	117	61
Middleton M.B.	41	442	181	45	709	78	22	809	44	1968-71	591	223	858	376	259
Stretford M.B.	16	403	172	22	613	91	20	724	51	1968-71	737	175	963	258	311
TOTAL—Administrative County	945	22,483	7,926	1,179	32,533	2,659	948	36,140	1,603	1968-71	31,719	5,734	39,056	10,429	7,146

(a) Age, in years, at end of 1971. (b) Year of birth.

TABLE 18—IMMUNISATION AGAINST WHOOPING COUGH
SUMMARY, BY HEALTH DIVISIONS AND DELEGATE DISTRICTS, OF IMMUNISATIONS PERFORMED DURING 1971

Health Division No.	No. who completed a full course of primary immunisation										No. who were given a reinforcement dose				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	1968-71	1964-67	1956-63	Total— under 16	Primary	Reinforcement
	(b)	1971	1970	1969	1968	1968-71	1964-67	1956-63	1956-71	1968-71	1968-71	1964-67	1956-63	1956-71	1968-71	1968-71
1 ..	..	42	359	73	10	484	6	2	492	55	77	11	143	308	135	
2 ..	..	60	802	254	24	1,140	9	—	1,149	48	54	12	114	537	91	
3 ..	..	25	1,077	305	57	1,464	29	2	1,495	59	101	8	168	473	129	
4 ..	..	61	1,724	828	132	2,745	57	9	2,811	49	176	36	261	822	221	
5 ..	..	55	1,342	462	46	1,905	54	11	1,970	59	113	17	189	772	139	
6 ..	..	14	689	332	44	1,079	8	1	1,088	5	58	12	75	209	65	
7 ..	..	60	1,785	537	69	2,451	63	7	2,521	40	270	39	349	1,185	242	
8 ..	..	10	1,656	412	22	2,100	28	8	2,136	31	80	21	132	284	86	
9 ..	..	49	1,608	574	96	2,327	73	9	2,409	18	121	6	145	350	120	
10 ..	..	72	1,104	474	38	1,688	48	9	1,745	179	235	22	436	843	306	
11 ..	..	96	1,591	590	60	2,337	52	20	2,409	127	94	8	229	686	181	
12 ..	..	22	1,325	494	41	1,882	32	2	1,916	60	125	22	207	378	138	
13 ..	..	43	775	209	33	1,060	33	4	1,097	19	50	11	80	287	74	
14 ..	..	32	1,016	232	37	1,317	24	1	1,342	55	63	12	130	312	123	
15 ..	..	106	936	264	28	1,334	15	1	1,350	126	111	40	277	424	253	
16 ..	..	24	637	230	31	922	14	4	940	55	119	14	188	484	129	
17 ..	..	34	1,209	369	73	1,685	62	11	1,758	44	134	41	219	308	151	
Delegate District—																
Crosby M.B. ..	..	21	410	173	32	636	37	7	680	12	125	22	159	289	130	
Huyton-with-Roby U.D. ..	..	21	705	322	32	1,080	2	—	1,082	—	3	—	3	117	—	
Middleton M.B. ..	..	41	436	179	43	699	40	6	745	32	54	18	104	356	86	
Stretford M.B. ..	..	16	376	157	20	569	54	6	629	25	44	18	87	237	73	
TOTAL— Administrative County ..	..	904	21,562	7,470	968	30,904	740	120	31,764	1,098	2,207	390	3,695	9,661	2,872	

(a) Age, in years, at end of 1971. (b) Year of birth.

TABLE 19—VACCINATION AGAINST MEASLES
SUMMARY, BY HEALTH DIVISIONS AND DELEGATE DISTRICTS, OF VACCINATIONS PERFORMED DURING 1971

Health Division No.	No. who completed a full course of primary vaccination							By G.P.'s in private practice (included in previous col.)
	(a)	Under 1	1-1971	2-1970	3-1969	Total—under 4 1968-71	4-1964-67	
	(b)	1971	1970	1969	1968	1968-71	1956-63	1956-71
1	1	1	247	175	35	458	34	496
2	2	—	307	329	81	717	82	804
3	3	1	461	367	120	949	131	1,089
4	4	4	610	708	309	1,631	455	2,247
5	5	2	556	547	199	1,304	173	1,494
6	6	2	242	304	97	645	106	754
7	7	2	488	552	191	1,233	171	1,419
8	8	1	671	535	97	1,304	114	1,423
9	9	1	675	534	142	1,352	152	1,525
10	10	2	430	471	194	1,097	224	1,328
11	11	1	639	549	149	1,338	168	1,524
12	12	—	401	431	164	996	130	1,128
13	13	—	269	237	99	605	51	657
14	14	—	237	340	125	702	103	818
15	15	—	442	349	101	892	87	994
16	16	1	275	257	78	611	125	740
17	17	—	447	341	104	892	113	1,011
Delegate District—								
Crosby M.B.	..	—	156	151	57	364	43	409
Huyton-with-Roby U.D.	..	—	339	447	176	962	258	1,339
Middleton M.B.	..	1	146	154	48	349	45	398
Stretford M.B.	..	—	85	95	36	216	100	368
TOTAL—Administrative County ..	19	8,123	7,873	2,602	18,617	2,865	483	21,965
								5,445

(a) Age, in years, at end of 1971.

(b) Year of birth.

TABLE 21—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						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	Clinic	Surgery	Patient's home	Home for elderly	Elderly persons		Handicapped persons	Expectant mothers
1 ..	4	307	1,779	616	2,125	404	4,787	136	1	380	124	438	84	990	35	1	1,026
2 ..	8	1,458	9,665	—	3,591	1,487	14,651	89	3	2,411	—	898	341	3,612	36	2	3,650
3 ..	26	2,887	19,598	—	5,482	1,356	26,049	385	2	3,000	—	926	179	4,033	71	1	4,105
4 ..	10	838	5,588	2,590	6,496	739	14,921	486	6	1,323	562	1,569	206	3,572	84	4	3,660
5 ..	21	2,165	14,025	204	11,857	1,514	27,365	235	—	2,683	33	2,234	293	5,198	45	—	5,243
6 ..	8	1,384	9,889	—	6,411	859	16,897	261	1	1,824	—	1,802	273	3,858	40	1	3,899
7 ..	8	670	5,506	—	653	464	6,597	20	6	1,646	—	415	156	2,200	11	6	2,217
8 ..	7	1,081	7,525	—	5,895	289	13,566	140	3	1,997	—	1,483	111	3,523	66	2	3,591
9 ..	11	1,148	6,517	6	4,717	541	11,537	244	—	1,569	1	1,112	228	2,835	74	1	2,910
10 ..	24	708	6,052	640	3,187	—	9,573	302	4	1,386	117	842	—	2,509	133	3	2,545
11 ..	31	1,411	8,935	—	3,921	778	13,388	246	—	2,161	—	1,030	240	3,349	82	—	3,431
12 ..	8	1,311	8,687	—	3,453	1,232	13,331	41	—	1,605	—	763	415	2,766	17	—	2,783
13 ..	18	1,148	7,465	—	4,611	457	12,142	387	4	1,547	—	929	94	2,494	74	2	2,570
14 ..	5	727	4,747	—	3,778	923	9,285	163	—	988	—	803	248	2,000	39	—	2,039
15 ..	4	1,024	6,656	86	7,112	797	14,443	205	3	1,356	18	1,430	182	2,946	39	1	2,986
16 ..	7	545	2,899	—	2,493	557	5,888	53	8	629	—	535	97	1,236	20	5	1,261
17 ..	11	867	7,547	—	3,127	816	11,213	277	—	817	—	427	143	1,336	51	—	1,387
Delegate District—																	
Crosby M.B. ..	3	332	2,431	—	146	51	2,627	1	—	756	—	43	7	805	1	—	806
Huyton-with-Roby U.D. ..	2	480	2,856	—	1,792	—	4,494	154	—	778	—	351	—	1,093	36	—	1,129
Middleton M.B. ..	1	138	1,090	155	1,232	—	2,412	65	—	307	33	327	—	645	22	—	667
Stretford M.B. ..	4	572	3,694	—	1,278	474	5,401	40	5	831	—	239	137	1,186	17	4	1,207
TOTAL—Administrative County	221	21,201	143,151	4,297	83,357	13,738	240,567	3,930	46	29,994	838	18,596	3,434	51,886	993	33	52,912

TABLE 22—CHIROPODY SERVICE—(b) PROVIDED BY VOLUNTARY ASSOCIATIONS

Health Division Number	Number of clinics opening 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	Clinic	Surgery	Patient's home	Home for elderly	Elderly persons		Handicapped persons	Expectant mothers
1 ..	5	255	1,727	838	977	42	3,541	43	—	337	164	181	8	679	11	—	690
2 ..	6	139	1,089	—	—	—	1,088	1	—	249	—	—	—	249	—	—	249
3 ..	1	99	601	—	34	—	633	2	—	74	—	14	—	88	—	—	88
4 ..	2	95	784	5,519	2,727	—	9,029	1	—	164	1,210	542	—	1,915	1	—	1,916
5 ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
6 ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
7 ..	—	—	—	—	649	—	623	26	—	—	—	133	—	122	11	—	133
8 ..	1	56	373	137	450	—	960	—	—	65	23	75	—	163	—	—	163
9 ..	5	161	1,005	—	649	—	1,652	2	—	173	—	149	—	320	2	—	322
10 ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
11 ..	4	288	2,123	4,395	773	—	7,250	41	—	509	970	191	—	1,666	4	—	1,670
12 ..	8	548	4,210	2,913	1,982	—	9,103	2	—	705	830	403	—	1,937	1	—	1,938
13 ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
14 ..	—	—	—	1,903	568	—	2,362	109	—	—	356	97	—	432	21	—	453
15 ..	2	358	2,715	—	—	—	2,714	1	—	552	—	—	—	551	1	—	552
16 ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
17 ..	1	113	1,110	—	817	—	1,900	27	—	142	—	101	—	241	2	—	243
Delegate District—																	
Crosby M.B. ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Huyton-with-Roby U.D. ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Middleton M.B. ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Stretford M.B. ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
TOTAL—Administrative County	35	2,112	15,737	15,705	9,626	42	40,855	255	—	2,970	3,553	1,886	8	8,363	54	—	8,417

LARGE 37—HOME MEDICAL SERVICES

TABLE 23—HOME HELP SERVICE
SUMMARY, BY HEALTH DIVISIONS AND DELEGATE DISTRICTS, OF CASES ATTENDED DURING 1971

Note: The Percentages given are of the total numbers of cases in the respective areas.

Health Division Number	Home helps employed at 31st December, 1971		Total number of cases attended	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			Total cases attended per 1,000 population (mid-1971)	
	Actual number	Whole-time equivalent		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		Total	Per cent.		
						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					
1 ..	89	44	485	—	—	3	0.6	—	—	—	—	—	—	7	1.4	25	5.2	441	90.9	9	—	9	1.9	11.2
2 ..	317	142	1,789	—	—	3	0.2	21	1.2	2	—	20	1.1	17	1.0	1,570	87.8	156	87.8	156	—	156	8.7	14.5
3 ..	146	77	1,870	—	—	6	0.3	9	0.5	3	1	6	0.3	32	1.7	1,620	86.6	193	86.6	193	—	193	10.3	12.6
4 ..	379	230	2,124	1	0.0	8	0.4	6	0.3	—	1	6	0.3	87	4.1	1,975	93.0	40	93.0	40	—	40	1.9	9.4
5 ..	308	169	2,223	—	—	—	—	1	0.0	3	2	—	—	—	—	118	5.3	2,039	91.7	26	34	60	2.7	14.8
6 ..	223	117	1,659	—	—	3	0.2	4	0.2	—	—	—	—	—	—	92	5.5	1,539	92.8	21	—	21	1.3	17.7
7 ..	129	74	1,067	—	—	10	0.9	36	3.4	—	1	8	0.7	91	8.5	787	73.8	105	73.8	105	29	134	12.6	6.0
8 ..	303	181	2,008	1	0.0	3	0.1	23	1.1	2	4	13	0.6	270	13.4	1,655	82.4	37	82.4	37	—	37	1.8	15.4
9 ..	278	148	1,785	1	0.1	13	0.7	9	0.5	5	6	1	0.1	36	2.0	1,503	84.2	205	84.2	205	6	211	11.8	8.0
10 ..	244	131	1,429	9	0.6	4	0.3	9	0.6	2	5	9	0.6	87	6.1	1,262	88.3	41	88.3	41	1	42	2.9	12.4
11 ..	458	229	2,787	8	0.3	12	0.4	1	0.0	11	1	—	—	232	8.3	2,498	89.6	24	89.6	24	—	24	0.9	14.2
12 ..	184	96	1,794	—	—	8	0.4	19	1.1	2	—	—	—	163	9.1	1,542	86.0	59	86.0	59	1	60	3.3	12.2
13 ..	155	73	1,216	—	—	2	0.2	3	0.2	1	4	5	0.4	108	8.9	1,063	87.4	8	87.4	8	22	30	2.5	15.1
14 ..	277	136	1,617	—	—	3	0.2	8	0.5	—	—	5	0.3	62	3.8	1,469	90.8	70	90.8	70	—	70	4.3	16.6
15 ..	258	128	1,631	4	0.2	11	0.7	1	0.1	1	1	2	0.1	61	3.7	1,475	90.4	75	90.4	75	2	77	4.7	12.7
16 ..	181	83	780	4	0.5	—	—	8	1.0	—	—	5	0.6	73	9.4	658	84.4	29	84.4	29	3	32	4.1	12.0
17 ..	376	211	2,471	—	—	5	0.2	6	0.2	5	1	11	0.4	324	13.1	2,060	83.4	51	83.4	51	8	59	2.4	18.5
Delegate District—																								
Crosby M.B.	64	35	681	1	0.1	3	0.4	10	1.5	3	1	2	0.3	55	8.1	552	81.1	39	81.1	39	15	54	7.9	11.8
Huyton-with-Roby U.D.	135	78	724	1	0.1	1	0.1	—	—	1	—	—	—	6	0.8	635	87.7	78	87.7	78	2	80	11.0	10.8
Middleton M.B.	122	63	757	—	—	—	—	2	0.3	—	—	2	0.3	58	7.7	656	86.7	37	86.7	37	2	39	5.2	13.9
Stretford M.B.	178	81	770	1	0.1	2	0.3	5	0.6	—	—	4	0.5	29	3.8	651	84.5	67	84.5	67	11	78	10.1	14.2
TOTAL—Adm. County ..	4,804	2,524	31,667	31	0.1	100	0.3	181	0.6	41	28	104	0.3	2,026	6.4	27,650	87.3	1,370	87.3	1,370	136	1,506	4.8	12.6

TABLE 24—HOME HELP SERVICE
ADMINISTRATIVE COUNTY—ANALYSIS OF CASES ATTENDED IN WEEK ENDED 27TH NOVEMBER, 1971

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 ...	—	8	95	34	1	1	—	—	5	1	—	4	2	—	—	2
CONTINEMENTS																
At home ...	—	5	48	15	1	2	—	—	2	—	—	2	1	—	1	1
Away from home ...	—	3	16	6	—	3	—	—	—	—	—	1	2	—	—	—
TUBERCULOSIS																
Aged 65 years and over ...	10	6	70	30	5	8	3	—	—	—	—	11	5	—	—	—
Aged under 65 years ...	4	11	73	29	4	9	1	1	—	—	—	9	6	—	—	—
MENTALLY DISORDERED																
Aged under 65 years ...	20	40	282	114	27	21	7	1	4	—	—	38	19	2	1	—
CHRONIC SICK																
Aged under 65 years ...	162	969	5,484	2,110	561	386	79	13	72	12	8	787	276	38	20	10
CHRONIC SICK, ELDERLY AND INFIRM																
Aged 65 years and over ...	3,045	17,200	92,269	36,901	10,353	6,754	1,387	260	1,227	144	120	14,151	5,213	665	142	74
ILLNESS AND OTHERS																
Aged 65 years and over ...	7	50	217	109	26	22	3	2	3	—	1	48	9	—	—	—
Aged under 65 years ...	66	456	2,419	889	282	177	27	11	22	3	—	350	147	15	5	5
ALL CATEGORIES																
Week ended 27th November, 1971	3,314	18,748	100,973	40,237	11,260	7,383	1,507	288	1,335	160	129	15,401	5,680	720	169	92
Week ended 28th November, 1970	3,048	17,321	96,982	38,495	9,871	6,954	1,588	257	1,390	189	120	13,614	5,653	792	204	106

TABLE 25—MENTAL HEALTH SERVICE
ATTENDANCES AT COUNTY COUNCIL ADULT TRAINING CENTRES DURING 1971

Health Division Number	Location of centre	Attendances during 1971			At 31st December, 1971		Remarks
		Total day places nominally available	Total attendances	Proportion (per cent.) attendances to nominal places available	Number of places nominally available	Number on register	
	<i>Adult Centres—</i>						
1	Ulverston	13,920	10,958	78.7	60	57	
2	Lancaster	10,080	15,433	153.1	45	70	
3	Fleetwood	13,110	12,563	95.8	57	61	
	Lytham	13,800	12,958	93.9	60	59	
4	Chorley	10,260	16,164	157.5	45	76	
	Bamber Bridge	10,215	12,240	119.8	45	60	
	Leyland	13,680	12,479	91.2	60	61	
5	Darwen	13,920	11,146	80.1	60	56	
	Accrington	13,053	10,898	83.5	57	57	
6	Colne	10,350	12,353	119.4	45	56	
	Padiham	13,740	12,000	87.3	60	54	
7	Ormskirk	14,040	17,614	125.5	60	82	
	Crosby	1,155	1,149	99.5	11	11	
8	Hindley	10,260	14,269	139.1	45	53	
	Orrell	3,540	2,066	58.4	60	51	Opened 4th October, 1971
9	Huyton	13,200	20,313	153.9	60	100	
	Widnes	9,945	13,528	136.0	45	68	
	Kirkby (Mercersvale) ..	9,495	7,956	83.8	45	54	
	Kirkby (Seftonvale) ..	9,660	7,202	74.6	60	48	Opened 26th April, 1971
10	Haydock	9,990	13,170	131.8	45	58	
	Golborne	6,420	3,576	55.7	60	46	Opened 12th July, 1971
11	Atherton	10,305	17,195	166.9	45	83	
	Farnworth	10,260	9,346	91.1	45	47	
12	Whitefield	10,305	13,990	135.7	45	73	
	Haslingden	9,675	12,093	125.0	45	88	
13	Wardle	10,170	11,663	114.7	45	56	
14	Chadderton (Oak Bank) ..	10,125	14,209	140.3	45	71	
	Chadderton (Mills Hill) ..	6,030	5,392	89.4	—	—	Closed 20th August, 1971
	Middleton	5,400	3,732	69.1	60	47	Opened 23rd August, 1971
15	Eccles	10,035	13,396	133.5	45	63	
	Walkden	10,080	12,085	119.9	45	43	
	Swinton	6,480	4,582	70.7	60	48	Opened 5th July, 1971
16	Urmston	10,350	10,637	102.8	45	67	
17	Droylsden	8,960	6,529	72.9	40	35	
	Denton	10,035	9,394	93.6	45	46	
	Ashton-under-Lyne	13,800	12,024	87.1	60	57	
	TOTAL— Administrative County ..	365,843	396,292	108.3	1,755	2,062	

TABLE 26—MENTAL HEALTH SERVICE
ANALYSIS OF PERSONS UNDER THE CARE OF THE COUNTY COUNCIL AT 31ST DECEMBER, 1971

	Mentally ill				Elderly mentally infirm		Psychopath				Subnormal				Severely subnormal				Total—by age and sex				Total— all ages
	Under 16 years		16 years and over				Under 16 years		16 years and over		Under 16 years		16 years and over		Under 16 years		16 years and over		Under 16 years		16 years and over		
	M.	F.	M.	F.			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, 1971	2	5	2,343	3,391	90	242	5	3	10	4	433	308	1,029	929	536	447	762	737	976	763	4,234	5,303	11,276
(b) Attending training centres or special schools	—	—	91	68	—	—	—	—	—	—	338	236	477	452	397	318	495	474	735	554	1,063	994	3,346
*(c) On waiting list for training centres	—	—	1	—	—	—	—	—	—	—	9	4	8	6	16	11	40	53	25	15	49	59	148
(d) Resident in County Council hostels	—	—	86	81	—	—	—	—	—	—	27	20	178	146	33	14	120	109	60	34	384	336	814
†(e) On waiting list for residence in County Council hostels	—	—	2	1	3	6	—	—	—	—	3	—	21	12	8	6	16	9	11	6	42	28	87
(f) Resident at County Council expense in other residential homes or hostels	—	—	2	13	—	—	—	—	—	—	11	7	34	18	—	—	—	—	11	7	36	31	85
(g) Attending day hospitals	—	—	113	150	10	15	5	3	—	—	1	—	1	2	2	1	3	2	8	4	127	169	308
(h) Persons other than those in (b) to (g) who are receiving home visits	2	5	2,054	3,096	77	221	—	—	10	4	79	62	383	333	80	97	110	90	161	164	2,634	3,744	6,703
2. Persons on waiting list for hospital care—																							
(a) Urgent cases	—	—	—	1	4	17	—	—	—	—	2	1	2	4	24	10	11	5	26	11	17	27	81
(b) Non-urgent cases	—	—	—	—	1	4	—	—	—	—	3	—	5	2	6	4	7	5	9	4	13	11	37
3. Persons admitted for temporary residential care—																							
(a) To National Health Service hospitals	—	—	34	57	22	42	—	—	—	—	16	7	8	8	71	51	28	31	87	58	92	138	375
(b) To County Council residential accommodation	—	—	—	6	—	—	—	—	—	—	44	38	39	44	32	29	20	23	76	67	59	73	275
(c) Elsewhere	—	—	—	1	—	—	—	—	—	—	5	4	7	3	47	30	15	18	52	34	22	22	130
4. Sources of information in respect of cases referred to the County Council during 1971—																							
(a) General practitioners	3	—	548	1,002	32	171	—	—	2	2	10	7	7	11	7	12	4	9	20	20	593	1,195	1,828
(b) Hospitals, on discharge	—	4	505	806	—	—	—	—	—	—	—	1	35	17	9	7	10	9	9	12	550	832	1,403
(c) Hospitals, out-patients	1	3	535	839	—	—	—	—	—	—	—	3	8	5	12	13	4	7	13	19	547	851	1,430
(d) Local education authorities	1	3	4	4	—	—	—	—	—	—	11	13	10	13	10	10	6	4	22	26	20	21	89
(e) Police and courts	—	—	91	91	—	—	—	—	2	1	2	—	5	5	—	—	3	1	2	—	101	98	201
(f) Other sources	3	—	421	530	1	—	—	—	2	2	32	25	72	80	44	36	30	34	79	61	526	646	1,312

* 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 27—MEDICAL EXAMINATIONS
SUMMARY, BY HEALTH DIVISIONS AND DELEGATE DISTRICTS, OF MEDICAL EXAMINATIONS CARRIED OUT BY COUNTY COUNCIL MEDICAL STAFFS DURING 1971

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 Social Services Committee	Entry to teachers' training colleges	Entrants to teaching profession (form 28 R.Q.)	Others
	Number of forms M.E.S. scrutinised	* Medical examinations carried out as a result of scrutiny of forms M.E.S.	Posts requiring compulsory examination								
1	116	5 (1)	28	3	—	—	4	70	45	1	—
2	†† 430	‡‡ 61 (1)	80	15	15	—	6	105	223	14	117
3	439	53 (8)	60	13	—	—	3	213	204	12	—
4	892	24 (7)	104	—	—	—	12	278	339	18	—
5	663	67	80	2	—	—	—	165	229	9	† 265
6	361	19	49	2	—	—	4	507	142	28	—
7	460	117 (20)	108	—	—	—	7	153	240	26	304
8	473	4 (4)	37	5	—	—	11	102	141	17	—
9	592	213 (14)	70	2	—	—	12	204	284	72	—
10	430	43	80	1	—	—	7	65	147	2	300
11	715	25 (31)	57	1	—	—	8	196	291	56	—
12	455	17	64	54	—	—	31	115	199	10	—
13	71	—	40	2	—	—	3	56	79	10	—
14	311	3 (3)	52	2	—	—	2	42	98	7	—
15	638	3	21	4	—	—	—	109	126	11	—
16	164	17	37	15	—	—	2	20	89	14	—
17	414	26	102	3	—	—	34	71	151	22	—
Delegate District—											
Crosby M.B.	68	4	16	1	—	—	—	45	84	5	—
Hayton-with-Roby U.D.	126	17	21	1	—	—	5	82	61	6	144
Middleton M.B.	140	5	45	7	—	—	—	55	107	4	—
Stretford M.B.	159	1	42	—	—	—	—	22	89	14	—
TOTAL—Administrative County	† 9,268	724 (89)	†† 1,450	133	15	—	151	2,675	3,368	338	1,130
			‡‡ 1,450								‡‡ 10,093

* In addition, examinations were carried out of employees referred by C.M.O.H. (Central Office). These are shown in brackets.

† Includes 240 in respect of day nurseries. ‡ Includes 1,191 scrutinised by C.M.O.H. (Central Office).

‡‡ Includes 257 arranged by C.M.O.H. (Central Office). †† Includes 148 for Lancaster University. ‡‡ Includes 17 for Lancaster University.

TABLE 28—NATIONAL ASSISTANCE ACT, 1948—WELFARE SERVICES
ACCOMMODATION PROVIDED DURING THE YEAR 1971
(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., 1971	Cases which were County Council responsibility						Cases which were responsibility of other Local Authorities											
			No. at 31st Dec., 1970		Admissions		Discharges		Deaths		No. at 31st Dec., 1971		Admissions		Discharges		Deaths		No. at 31st Dec., 1971	
			M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
1	Marsh House, Ulverston	35	15	18	4	12	4	8	2	3	13	19	1	—	—	—	—	—	1	2
2	Millwood House, Barrow-in-Furness	43	15	22	7	7	3	2	2	2	17	25	—	—	—	—	—	—	—	1
	*The Empress, Morecambe	46	11	35	—	—	9	34	2	1	—	—	—	—	—	—	—	—	—	—
	Moor Platt, Caton	26	2	24	—	6	—	5	—	—	2	25	—	—	—	—	—	—	—	—
	The Hermitage, Caton	40	12	26	8	9	2	4	4	7	14	24	—	—	—	—	—	—	—	—
	The Laurels, Lancaster	29	9	17	2	3	3	2	—	—	8	15	—	—	—	—	—	—	—	—
	Fair Elms, Lancaster	23	5	18	2	7	1	5	—	—	6	17	—	—	—	—	—	—	—	—
	Dolphinlee House, Lancaster	50	11	39	5	10	3	8	—	—	13	36	—	—	—	—	—	—	—	—
	Beaumont View, Lancaster	51	12	38	5	19	2	10	4	7	11	40	—	—	—	—	—	—	—	—
3	Slyne House, Lancaster	51	7	39	1	6	1	6	1	3	6	36	—	—	—	—	—	—	—	—
	Norcross House, Carleton, Thornton Cleveleys	24	8	16	1	5	1	4	—	—	8	14	—	—	—	—	—	—	—	—
	Milbank, Kirkham	50	19	31	6	12	7	3	1	6	17	34	1	—	—	—	—	—	1	—
	Clifton House, Ballam Road, Lytham	51	6	46	2	17	4	2	—	—	4	47	—	—	—	—	—	—	—	—
	*The Cumberland, Esplanade, Fleetwood	50	11	28	7	13	5	10	2	3	11	28	—	—	—	—	—	—	—	—
	Crossacres, St. Annes	50	12	39	1	19	3	8	4	8	9	42	—	—	—	—	—	—	—	—
4	The Woodlands, St. Andrew's Rd. South, St. Annes	24	4	15	6	3	3	2	1	—	6	16	—	—	—	—	—	—	—	—
	The Beeches, Bonds, Garstang	44	17	28	15	26	15	21	2	5	15	28	—	—	—	—	—	—	—	—
	Withnell Fold, near Chorley	40	19	20	11	25	8	18	3	7	19	20	1	—	—	—	—	—	1	—
	Peterfield House, Penwortham	50	15	34	19	18	13	12	9	6	12	34	—	—	—	—	—	—	—	—
	Broadfield House, Leyland	35	9	41	9	32	4	22	4	11	10	40	—	—	—	—	—	—	—	—
	Coniston House, Chorley	50	7	31	3	31	3	28	1	5	6	31	—	—	—	—	—	—	—	—
	Charnley Fold House, Walton-le-Dale	51	15	36	6	32	20	26	4	6	12	37	1	—	—	—	—	—	1	—
	Fell View, Longridge	51	7	45	12	26	5	21	—	—	8	44	—	—	—	—	—	—	—	—
5	Healey View, Chorley	51	—	—	—	—	—	—	—	—	10	38	—	—	—	—	—	—	—	—
	Hill Top, Manchester Road, Accrington	16	15	—	4	4	2	7	3	—	13	—	—	—	—	—	—	—	—	—
	Warren Holt, Wilpshire	26	14	11	5	7	4	10	—	—	12	11	—	—	—	—	—	—	—	—
	Glendene, Knowsley Road, Clayton-le-Dale	21	9	25	8	9	6	9	2	2	9	24	—	—	—	—	—	—	—	—
	Broad Oak, Accrington	34	9	25	4	10	5	8	—	—	13	24	—	—	—	—	—	—	—	—
	Northlands, Great Harwood	29	14	25	8	21	6	12	4	6	16	35	—	—	—	—	—	—	—	—
	Greenways, Darwen	50	18	32	5	24	5	8	—	—	8	41	—	—	—	—	—	—	—	—
	Castleford, Clitheroe	50	10	39	5	16	6	10	2	2	8	39	—	—	—	—	—	—	—	—
	Woodlands, Clayton-le-Moors	51	11	36	7	16	6	1	1	—	6	15	—	—	—	—	—	—	—	—
6	Peel Court, Oswaldtwistle	33	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	Stanley Villas, Albert Road, Colne	14	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	Andrew Smith House, Marsden Hall Road, Nelson	50	18	32	8	24	14	20	1	4	16	32	—	—	—	—	—	—	—	—
	Marles Hill, Wheatley Lane, Barrowford	27	11	15	8	10	7	9	1	1	11	15	—	—	—	—	—	—	—	—
	Woodside, Padiham	50	13	35	14	26	13	17	4	7	10	37	—	—	—	—	—	—	—	—
7	Favordale, Colne	51	19	32	7	24	9	21	1	2	16	33	—	—	—	—	—	—	—	—
	Marbent, Marine Terrace, Waterloo	21	3	17	3	7	—	5	3	2	3	17	—	—	—	—	—	—	—	—
	Sefton House, Junction Lane, Burscough	30	8	19	3	7	2	6	2	1	9	19	1	—	—	—	—	—	—	—
	Thornton Hall Tanhouse Road, Thornton, Crosby	51	9	25	4	13	3	9	2	2	8	39	—	—	—	—	—	—	—	—
	Eskdale, Birkdale, Southport	35	5	9	3	6	3	3	2	5	7	20	1	—	—	—	—	—	1	—
	Beaconview, Skelmersdale	50	21	29	2	7	—	5	1	2	21	28	—	—	—	—	—	—	—	—
	Alma Green, Up Holland	35	8	24	2	8	—	3	2	2	9	25	—	—	—	—	—	—	—	—
	Whinbrook House, Maghull	50	21	28	6	10	4	6	2	3	21	29	—	—	—	—	—	—	—	—
8	Thorley House, Altherton Road, Hindley	39	21	18	2	1	—	—	—	—	2	18	—	—	—	—	—	—	—	—
	Garwood House, Ashton-in-Makerfield	51	18	33	4	11	1	6	3	1	17	35	1	—	—	—	—	—	1	—
	Sherwood House, Platt Bridge, Hindley	51	21	30	9	18	7	15	4	3	20	29	1	—	—	—	—	—	1	—
9	High Carrs, Broadgreen Road, Huyton-w-Roby	26	7	19	6	10	2	7	3	5	8	17	—	—	—	—	—	—	—	—
	Huyton Quarry Manor, Manor Farm Road, Huyton-w-Roby	50	14	34	6	11	3	6	4	5	13	34	—	—	—	—	—	—	—	—

TABLE 28—continued

[illegible]

* A further 20 places are available in this Home for short stay cases.

* A further 10 places are available in this Home for short stay cases.

TABLE 29—continued

Managing Authority	Home	Cases which were County Council responsibility									
		No. at 31st December, 1970		Admissions		Discharges		Deaths		No. at 31st December, 1971	
		M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
London Borough of Kensington and Chelsea ...	Kingsmead, Chelsea ...	—	1	—	—	—	—	—	1	—	1
London Borough of Merton ...	Hall Place, Merton, London ...	—	1	—	—	—	—	—	1	—	—
Manchester C.B.C. ...	Whitemoss, Blackley ...	1	1	—	—	—	—	—	—	1	—
	Weylands, Baguley ...	—	1	—	—	—	1	—	—	—	1
	Kirkley House, Manchester ...	—	1	—	—	—	—	—	—	—	1
	"Lawnhurst", Didsbury, Manchester ...	1	1	—	—	—	—	—	—	—	—
	"Longford", Edge Lane, Chorlton-cum-Hardy ...	1	1	—	—	—	—	—	—	—	—
	"Lismara", West Didsbury, Manchester ...	1	—	—	—	—	—	—	—	—	—
Nottingham C.C. ...	The Old Vicarage, Southwell ...	—	1	—	—	—	—	—	—	—	—
	Bridgeway House, Mansfield ...	—	1	—	—	—	—	—	—	—	—
	Fairhaven, Oldham ...	—	1	—	—	—	—	—	—	—	—
Oldham C.B.C. ...	Edward House, Oldham ...	—	1	—	—	—	—	—	—	—	—
	Stamford House, Oldham ...	—	1	—	—	—	—	—	—	—	—
	"Limescroft", Oldham ...	—	1	—	—	—	—	—	—	—	—
	Glen Thorn, 57, Queens Road, Oldham ...	1	1	—	—	—	—	—	—	—	—
Oxford C.C. ...	Shillingford House, Oxford ...	—	1	—	—	—	—	—	—	—	—
Plymouth C.B.C. ...	"Hillside", Station Road, Plymouth ...	1	—	—	—	—	—	—	—	—	—
Preston C.B.C. ...	Ashton Civic Hostel, Preston ...	—	3	—	—	—	—	—	—	—	3
	Wilson House, Preston ...	1	—	—	—	—	—	—	—	—	—
	Chamber House, Heywood ...	—	1	—	—	—	—	—	—	—	—
Rochdale C.B.C. ...	Kingstand, Manchester Road, Rochdale ...	—	1	—	—	—	—	—	—	—	—
	"Mayfield", Rochdale ...	—	1	—	—	—	—	—	—	—	—
	"Beaumonts", Rochdale ...	—	1	—	—	—	—	—	—	—	—
	Nutgrove Hall, St. Helens ...	—	1	—	—	—	—	—	—	—	—
St. Helens C.B.C. ...	Ashton's Green, St. Helens ...	—	1	—	—	—	—	—	—	—	—
	The Hardmans, Salford ...	—	1	—	—	—	—	—	—	—	—
Salford C.B.C. ...	Evasholme, Park Road, Salford ...	1	—	—	—	—	—	—	—	—	—
	Cranbrook, Prestwich ...	1	—	—	—	—	—	—	—	—	—
	Wentworth, 8, Westminster Rd., Ellesmere Pk., Eccles ...	—	1	—	—	—	—	—	—	—	—
	"Ivy Court", Salford ...	—	1	—	—	—	—	—	—	—	—
Sheffield C.B.C. ...	"Kirkhill", 127, Lovedeers Road, Sheffield ...	—	1	—	—	—	—	—	—	—	—
Southport C.B.C. ...	Marshside, 10, Marshside, Southport ...	—	1	—	—	—	—	—	—	—	—
	"Fairholme", Southport ...	—	1	—	—	—	—	—	—	—	—
Staffordshire C.C. ...	Fernleigh, 52 Marston Road, Stafford ...	1	—	—	—	—	—	—	—	—	—
Stoke-on-Trent C.B.C. ...	La, Turnhurst Road, Chell, Stoke-on-Trent ...	—	1	—	—	—	—	—	—	—	—
Surrey C.C. ...	St. James', Farnham, Surrey ...	—	1	—	—	—	—	—	—	—	—
Warrington C.B.C. ...	Westy Hall, Marsden Avenue, Latchford ...	—	1	—	—	—	—	—	—	—	—
	"Orford Hall", Warrington ...	1	3	—	—	—	—	—	—	—	2
	Houghton Hall, Houghton Green, Warrington ...	—	1	—	—	—	—	—	—	—	1
Westmorland C.C. ...	The Abbey, Staveley ...	—	1	—	—	—	—	—	—	—	—
West Riding C.C. ...	Millgarth, Pontefract ...	1	—	—	—	—	—	—	—	—	—
	Hillworth Lodge, Oakworth Road, Keighley ...	1	—	—	—	—	—	—	—	—	—
	Brook Lodge, Selby ...	—	1	—	—	—	—	—	—	—	—
	Park House, Bradford ...	1	—	—	—	—	—	—	—	—	—
	Yew Tree House, Bentley, Wakefield ...	—	—	—	—	—	—	—	—	—	—
Wigan C.B.C. ...	Douglas Bank House, Wigan ...	1	—	—	—	—	—	—	—	—	—
	Woodlands Hall, Bradshaw Street, Whalley ...	—	1	—	—	—	—	—	—	—	—
	TOTAL ...	26	60	6	11	2	4	4	11	26	56

TABLE 31—NATIONAL ASSISTANCE ACT, 1948—WELFARE SERVICES

ACCOMMODATION PROVIDED DURING THE YEAR 1971 (continued)—

(2) In former Public Assistance Institutions, etc. (continued)—

(b) Managed by other Local Authorities, and in which residents of the Administrative County area are accommodated

Managing Authority	Name of establishment	Cases which were County Council responsibility													
		In respect of accommodation provided under S.21(1)(a)							In respect of accommodation provided under S.21(1)(b)						
		No. at 31st Dec. 1970		Admissions		Discharges		Deaths		No. at 31st Dec. 1970		Admissions		Discharges	
		M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Liverpool C.B.C. ...	Westminster House, Liverpool ...	—	1	—	—	—	—	—	—	—	—	—	—	—	—
Manchester C.B.C. ...	Newholme, Withington ...	1	—	—	—	1	—	—	—	—	—	—	—	—	—
Preston C.B.C. ...	Preston Civic Hostel, Fulwood ...	3	6	—	—	1	4	2	2	—	—	—	—	—	—
Salford C.B.C. ...	The Homestead, Salford ...	1	—	—	—	—	—	—	1	—	—	—	—	—	—
	TOTAL—Former Public Assistance Institutions ...	5	7	—	—	2	5	2	3	—	—	—	—	—	—
Manchester C.B.C. ...	Langho Epileptic Colony, Langho ...	61	63	7	2	8	2	3	1	57	62	—	—	—	—
	TOTAL—All above establishments ...	66	70	7	2	10	7	3	3	60	62	—	—	—	—

TABLE 32—continued

Voluntary Organisation	Name and address of establishment	No. at 31st Dec., 1970		Admissions		Discharges		Deaths		No. at 31st Dec., 1971	
		M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
North East Lancashire Association for the Deaf	"The Croft", St. Pauls Road, Preston	3	2	—	—	—	—	3	2	—	—
Northern Counties Eventide Homes	Eventide Home, Birkdale, Southport	—	—	—	—	—	—	—	—	—	—
Papworth Village Settlement	Papworth Village Settlement, Cambridge	3	—	—	—	—	—	3	—	—	—
Peacchaven House Committee	115, Roe Lane, Southport	—	1	—	—	—	—	—	—	—	—
Pentecostal Eventide Housing Association	Aismunderley Close, Ripon, Yorks.	—	1	—	—	—	—	—	—	—	—
	"Claremont", Cavendish Road, Matlock	—	1	—	—	—	—	—	—	—	—
Railway Benevolent Institution	Boxhurst, Dorking, Surrey	—	—	—	—	—	—	—	—	—	—
Royal Air Force Association	R.A.F. Assoc. Home, Sussexdowne, Sussex	1	—	—	—	—	—	—	—	—	—
Royal Alfred Merchant Seamen's Society	Belvedere, Kent	1	—	—	—	—	—	—	—	—	—
R.N.I. for the Deaf	St. Anthony's, Crowborough, Sussex	1	—	—	—	—	—	—	—	—	—
St. Elizabeth's Home for Epileptics	St. Elizabeth's Home, Much Hadham	—	1	—	—	—	—	—	—	—	—
St. Joseph's Hospital	St. Joseph's Hospital, Manchester	—	1	—	—	—	—	—	—	—	—
Salvation Army Eventide Homes	Elizabeth Walker Home, Orrell Hey, Bootle	—	1	—	—	—	—	—	—	—	—
	Holt House, Prestwich	—	13	—	2	—	3	—	1	—	—
	Laurel Bank, Salford	—	—	—	—	—	—	—	—	—	—
	Mary Fowler Home, Allerton, Liverpool	—	3	—	—	—	—	—	—	—	—
	Marlow, Wittington, Bucks.	—	—	—	—	—	—	—	—	—	—
	The Hawthorns, Buxton	—	1	—	—	—	—	—	—	—	—
	Sunnyside, Edinburgh	—	1	—	—	—	—	—	—	—	—
	"Villa Adastra", 79, Keymer Road, Hassocks, Sussex	—	1	—	—	—	—	—	—	—	—
	Wickstead Hall, Wirsall, Nr. Whitechurch	—	—	—	—	—	—	—	—	—	—
Servite Houses, London	Servite House, Station Road, Plymouth	2	1	—	—	—	—	2	—	—	—
Sir Robert Jones Memorial Workshops	Sir Robert Jones Workshops, Upper Parliament St., Liverpool	—	8	—	—	—	—	—	—	—	—
Sisters of Charity of Jesus and Mary	Stella Matutina Convent, Ansdell	—	49	—	15	—	8	—	—	—	—
	Holly Mount Convent, Tooting	—	4	—	5	—	1	—	—	—	—
	Beechville, Lostock Park, Bolton	—	2	—	—	—	—	—	—	—	—
	Libury Hall, Munden, Herts.	—	—	—	—	—	—	—	—	—	—
	Woodlands, Mottram Rd., Stalybridge	—	—	—	—	—	—	—	—	—	—
	The Cove, Silverdale	—	8	—	1	—	—	—	—	—	—
	New Park House, Longton Road, Trentham, Stoke-on-Trent	—	1	—	—	—	—	—	—	—	—
	"Four Acres", North Ferry, Yorks.	—	—	—	—	—	—	—	—	—	—
	Turner Memorial Home, Dingle Head, Liverpool	—	2	—	—	—	—	—	—	—	—
	Ann Challis Eventide Home, Urnston	—	24	—	4	—	—	—	—	—	—
	Haylands Eventide Home, Urnston	20	—	—	—	—	—	—	—	—	—
	Tickford Abbey, Newport	—	1	—	—	—	—	—	—	—	—
	St. George's Training Centre, Harrogate	2	—	—	—	—	—	—	—	—	—
Women's Voluntary Services Residential Clubs		—	—	—	—	—	—	—	—	—	—
Yorkshire Association for the Care of Cripples		—	—	—	—	—	—	—	—	—	—
	TOTAL	191	410	52	117	34	56	24	52	185	419

TABLE 33—NATIONAL ASSISTANCE ACT, 1948—WELFARE SERVICES

ACCOMMODATION PROVIDED DURING THE YEAR 1971 (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. 1970		Admissions		Discharges		Deaths		No. at 31st Dec. 1971	
		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 ...	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	14	—	3	—	—	—	4	5	13
Catholic Blind Institute	59, Brunswick Road, Liverpool, 6	1	2	—	2	—	—	1	1	—	3
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 ...	5	13	1	2	—	—	1	4	5	11
Henshaw's Institution for the Blind	Mary Ann Scott Home, Southport Thomas Briggs Lomas Home, Rhyl	—	9	—	—	—	2	—	—	—	7
Hereford County Association for the Blind	Hampton Grange, Hereford	—	1	—	—	—	—	—	—	—	1
Keighley and District Blind Society	Keighley Home for Blind, Scott Street, Keighley, Yorks.	—	2	—	1	—	1	—	—	—	2
Manchester Jewish Blind Society	Jewish Blind Society Home, Albert Road, Southport	2	1	—	—	—	—	—	—	2	1
Manchester and Salford Blind Aid Society	"Elms", Pendleton ... Godfrey Ermen Memorial Home, Southport "Oaklands", Pendleton	1	15	—	2	—	—	1	3	—	14
	"Oaklands", Pendleton	4	3	—	—	—	—	—	—	4	3
	"Oaklands", Pendleton	4	13	1	6	—	2	—	2	5	15
North Regional Association for the Blind	"Oaklands", Huddersfield Road, Holmfirth	1	4	—	1	—	—	—	—	1	5
Royal National Institute for the Blind	Royal School for the Blind, Leatherhead "Tate House", Home for the Deaf-Blind, Harrogate "Wilton Grange", West Kirby	2	—	—	—	—	—	—	—	2	—
	"Kathleen Chambers" Home, Burnham-on-Sea	1	2	—	—	—	—	—	—	1	2
	Westcliffe House, Westgate-on-Sea	1	—	—	—	—	—	—	—	—	—
	Roper House, St. Dunston Street, Canterbury	—	2	—	—	—	—	—	—	—	2
	Wilberforce Home for the Multiple Blind, 187, Tadcaster Road, York.	—	1	—	—	—	1	—	—	—	1
	TOTAL ...	32	88	2	18	—	8	4	14	30	84

TABLE 34—HOUSING
SUMMARY OF WORK CARRIED OUT DURING THE YEAR 1971

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	
	Houses	Flats	Houses	Flats	Houses	Flats					In respect of which clearance, demolition, etc., orders have been made	In respect of which orders have not yet been made
Abram ...	173	—	—	—	—	—	290	379	—	14	19	4
Accrington (B) ...	38	31	1	31	—	—	1,336	2,786	—	158	170	622
Adlington ...	66	—	—	—	—	—	267	327	2	—	24	—
Ashton-in-Makerfield ...	194	16	49	16	—	—	902	1,137	24	36	40	164
Ashton-under-Lyne (B) ...	124	60	16	60	—	—	1,555	2,169	642	330	432	*
Aspull ...	29	36	23	36	—	—	120	432	34	57	78	128
Atherton ...	42	25	20	25	—	—	421	677	43	63	13	142
Audenshaw ...	35	—	—	—	—	—	173	68	93	44	49	378
Bacup (B) ...	34	—	—	—	1	—	893	1,390	—	111	119	865
Barrowford ...	12	—	—	—	—	—	132	270	2	—	12	158
Billinge and Winstanley ...	77	—	—	—	—	—	228	494	28	3	24	32
Blackrod ...	6	—	—	—	—	—	929	1,246	3	—	12	3
Brierfield ...	60	—	—	—	—	—	196	392	13	—	13	8
Carnforth ...	30	—	—	—	—	—	291	321	—	—	—	—
Chadderton ...	359	—	—	—	—	—	2,795	3,507	57	255	194	—
Chorley (B) ...	161	—	28	—	133	—	420	1,312	311	10	87	228
Church ...	—	26	—	26	—	—	200	300	4	17	75	33
Clayton-le-Moors ...	26	—	—	—	—	—	89	142	13	—	20	52
Clitheroe (B) ...	43	—	—	—	26	—	34	72	7	6	26	150
Colne (B) ...	69	16	56	16	13	—	253	503	171	50	39	61

*Not available

TABLE 34—continued

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	
	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
Crompton ...	178	45	42	45	—	—	528	722	7	93	37	259
Crosby (B) ...	38	36	—	8	—	—	3,067	5,288	697	10	—	860
Dalton-in-Furness ...	8	—	—	—	—	—	37	95	15	1	—	1
Darwen (B) ...	143	6	68	6	—	—	344	431	9	141	72	23
Denton ...	110	—	22	—	—	—	2,133	2,838	57	8	13	15
Droylsden ...	20	—	8	—	—	—	195	300	—	106	262	372
Eccles (B) ...	40	106	24	106	—	—	7,457	8,392	128	56	183	244
Failsworth ...	73	20	34	20	1	—	395	894	57	60	35	210
Farnworth (B) ...	282	48	159	48	—	—	460	1,402	63	118	490	527
Fleetwood (B) ...	121	—	—	—	—	—	413	760	88	3	34	63
Formby ...	273	—	48	—	—	—	362	485	15	9	6	3
Fulwood ...	217	—	—	—	—	—	326	519	217	—	—	—
Golborne ...	167	—	16	—	—	—	266	657	189	4	35	31
Grange ...	18	9	—	—	—	9	4	8	—	—	—	—
Great Harwood ...	35	—	—	—	—	—	267	324	31	31	11	140
Haslingden (B) ...	102	—	2	—	—	—	375	1,130	1	47	53	295
Haydock ...	306	30	28	30	—	—	409	906	11	27	7	60
Heywood (B) ...	232	—	—	—	—	—	2,211	4,198	260	13	102	430
Hindley ...	299	84	72	84	—	—	205	381	3	65	160	190
Horwich ...	81	—	—	—	—	—	1,256	2,359	421	27	6	430
Huyton-with-Roby ...	139	36	120	36	—	—	1,594	2,850	125	7	—	66

TABLE 34—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	
													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	Houses	Flats						
Ince-in-Makerfield	172	85	99	85	—	—	73	—	610	720	216	239	239	508
Irlam	65	—	—	—	—	—	65	—	285	736	109	—	16	—
Kearsley	33	—	—	—	—	—	33	—	56	114	5	81	40	—
Kirkby	343	32	214	32	18	—	111	—	836	1,138	—	—	—	—
Kirkham	65	4	3	—	—	—	62	4	287	947	87	—	22	28
Lancaster (B)	62	27	—	—	—	—	62	27	315	468	9	26	109	46
Lees	59	—	—	—	—	—	59	—	316	497	1	14	32	102
Leigh (B)	239	76	—	76	—	—	239	—	1,288	1,891	—	236	129	1,217
Leyland	102	—	—	—	—	—	102	—	1,100	1,120	—	3	1	27
Litherland	257	4	254	—	—	—	3	4	2,272	3,900	355	48	—	137
Littleborough	190	29	—	29	—	—	190	—	427	390	81	22	—	—
Little Lever	180	25	—	25	—	—	180	—	640	1,442	22	5	—	2
Longridge	61	—	—	—	—	—	61	—	106	182	29	—	3	20
Lytham St. Annes (B)	228	148	—	68	—	—	228	80	346	790	1	1	11	3
Middleton (B)	239	97	—	28	—	—	239	69	1,351	2,316	47	124	73	21
Milnrow	63	—	31	—	—	—	32	—	429	591	4	—	6	35
Morecambe and Heysham (B)	137	23	—	—	—	—	137	23	111	120	—	—	3	22
Mossley (B)	103	—	—	—	—	—	103	—	177	389	52	10	155	30
Nelson (B)	88	—	65	—	—	—	23	—	174	657	—	25	70	—
Newton-le-Willows	48	—	25	—	—	—	23	—	595	994	75	10	124	453
Ormskirk	78	15	7	15	—	—	71	—	1,356	2,258	206	3	61	—

TABLE 34—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	
													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	Houses	Flats						
Orrell	23	—	—	—	—	—	23	—	247	377	26	4	19	40
Oswaldtwistle	95	40	—	—	—	—	95	—	55	69	28	7	143	302
Padiham	1	—	—	—	—	—	1	—	157	258	14	—	19	222
Poulton-le-Fylde	43	28	—	—	—	—	43	28	290	891	5	—	—	—
Preesall	87	6	—	—	—	—	87	6	60	90	—	—	—	—
Prescot	—	101	—	—	—	—	—	—	1,071	1,711	98	—	116	—
Prestwich (B)	28	108	22	86	—	—	6	22	299	390	22	97	369	43
Radcliffe (B)	113	—	—	—	—	—	113	—	423	1,252	—	81	75	272
Rainford	150	6	6	6	—	—	144	—	24	34	—	8	6	5
Ramsbottom	178	—	1	—	—	—	171	—	31	99	—	10	31	—
Rawtenstall (B)	38	—	—	—	—	—	38	—	40	158	4	89	121	747
Rishton	25	—	11	—	—	—	14	—	27	83	17	—	—	—
Royton	192	—	—	—	—	—	192	—	708	1,075	105	2	15	48
Skelmersdale and Holland...	829	—	11	—	73	—	88	—	254	562	17	—	25	17
Standish-with-Langtree	121	7	8	7	—	—	113	—	230	309	24	3	17	—
Stretford (B)	42	12	—	12	—	—	42	—	1,451	4,489	227	146	449	420
Swinton and Pendlebury (B)	59	331	4	122	—	—	55	209	2,755	1,484	—	187	113	158
Thornton Cleveleys...	75	25	—	—	—	—	75	25	150	252	11	—	2	2
Tottington	137	16	17	16	—	—	120	—	86	86	—	4	37	95
Trawden	—	—	—	—	—	—	—	—	165	200	—	—	6	11
Turton	329	—	—	—	—	—	329	—	521	574	133	10	27	100

TABLE 34—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	
	Houses	Flats	Houses	Flats	Houses	Flats	Houses	Flats						
Tyldesley ...	142	—	65	—	—	—	77	—	402	491	9	12	90	168
Ulverston ...	82	—	—	—	—	—	82	—	12	84	13	1	29	40
Urmston ...	75	73	—	8	—	—	75	65	549	865	1	1	7	18
Walton-le-Dale ...	249	—	—	—	—	—	249	—	672	843	7	—	—	68
Wardle ...	53	—	30	—	—	—	23	—	211	247	28	7	78	29
Westhoughton ...	10	—	—	—	—	—	10	—	626	1,224	118	—	88	27
Whitefield ...	70	63	—	34	—	—	70	29	602	742	40	24	33	—
Whitworth ...	25	8	—	8	—	—	25	—	123	251	26	4	22	31
Widnes (B) ...	517	61	15	49	—	—	502	12	1,108	2,043	97	87	328	1,029
Withnell ...	17	—	—	—	—	—	17	—	27	32	—	—	14	45
Worsley ...	94	—	36	—	—	—	62	—	1,171	3,276	40	97	37	77
Total Urban Districts ...	11,171	2,080	1,760	1,440	119	—	8,633	640	61,452	99,064	6,250	3,708	6,362	13,912

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

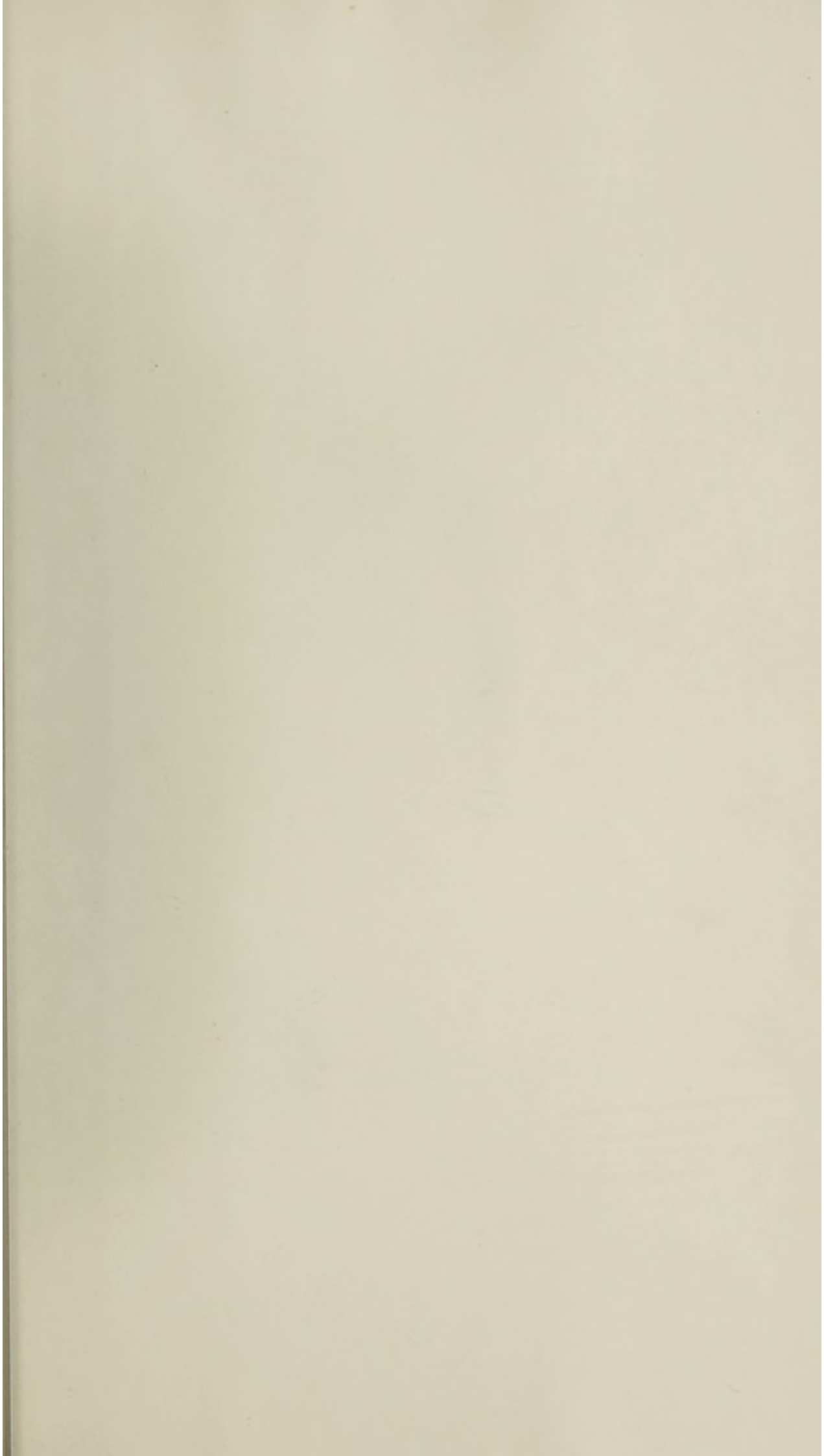
TABLE 34—continued

RURAL 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	In respect of which clearance, demolition, etc., orders have been made	In respect of which orders have not yet been made	No. remaining at end of year
	Houses	Flats	Houses	Flats	Houses	Flats	Houses	Flats	Houses	Flats							
Blackburn ...	72	—	—	—	—	—	—	—	72	—	176	292	—	—	8	81	—
Burnley ...	174	54	—	—	—	—	—	—	174	—	155	310	93	21	76	201	—
Chorley ...	554	—	—	—	—	—	—	—	554	—	165	463	63	21	33	58	—
Clitheroe ...	8	—	3	—	—	—	—	—	5	—	47	47	—	—	7	9	—
Fylde ...	120	—	—	—	—	—	—	—	120	—	49	65	4	6	24	28	—
Garstang ...	135	—	—	—	—	—	—	—	135	—	81	238	46	16	12	10	—
Lancaster ...	38	5	—	—	—	—	—	—	38	5	192	426	29	—	4	1	—
Lunesdale ...	40	—	—	—	—	—	—	—	40	—	96	355	57	—	3	6	—
North Lonsdale ...	94	—	39	—	—	—	—	—	55	—	379	496	17	8	56	17	—
Preston ...	283	38	—	—	—	34	—	—	283	4	502	1,151	352	—	13	52	—
Warrington ...	577	124	—	—	240	—	—	124	337	—	1,113	1,672	6	2	23	—	—
West Lancashire ...	711	—	—	—	—	—	—	—	711	—	742	1,103	117	6	10	21	—
Whiston ...	509	122	32	50	197	72	—	—	280	—	1,911	2,965	263	5	48	10	—
Wigan ...	263	—	—	—	—	—	—	—	263	—	50	77	69	1	43	39	—
Total Rural Districts ...	3,578	343	74	138	437	196	9	3,067	9	5,658	9,660	1,116	86	360	533	—	—
Total Urban Districts ...	11,171	2,080	1,760	1,440	119	—	8,633	640	61,452	99,064	6,250	3,708	6,362	13,912	—	—	—
Total Administrative County ...	14,749	2,423	1,834	1,578	556	196	11,700	649	67,110	108,724	7,366	3,794	6,722	14,445	—	—	—

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Mary Jones	30
Robert Brown	28
Elizabeth White	22
James Wilson	35
Sarah Davis	27
Thomas Miller	32
Anna Taylor	24
George Clark	38
Margaret Lewis	26
Richard Hall	31
Elizabeth King	23
William Scott	33
Mary Adams	29
John Baker	27
Sarah Green	25
Thomas Hill	34
Anna Young	22
George King	36
Margaret Lee	28
Richard Clark	32
Elizabeth Hall	24
William Taylor	37
Mary Adams	26
John Baker	29
Sarah Green	23
Thomas Hill	35
Anna Young	27
George King	31
Margaret Lee	25
Richard Clark	33
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