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COUNTY BOROUGH OF ROCHDALE



ANNUAL REPORT

OF THE

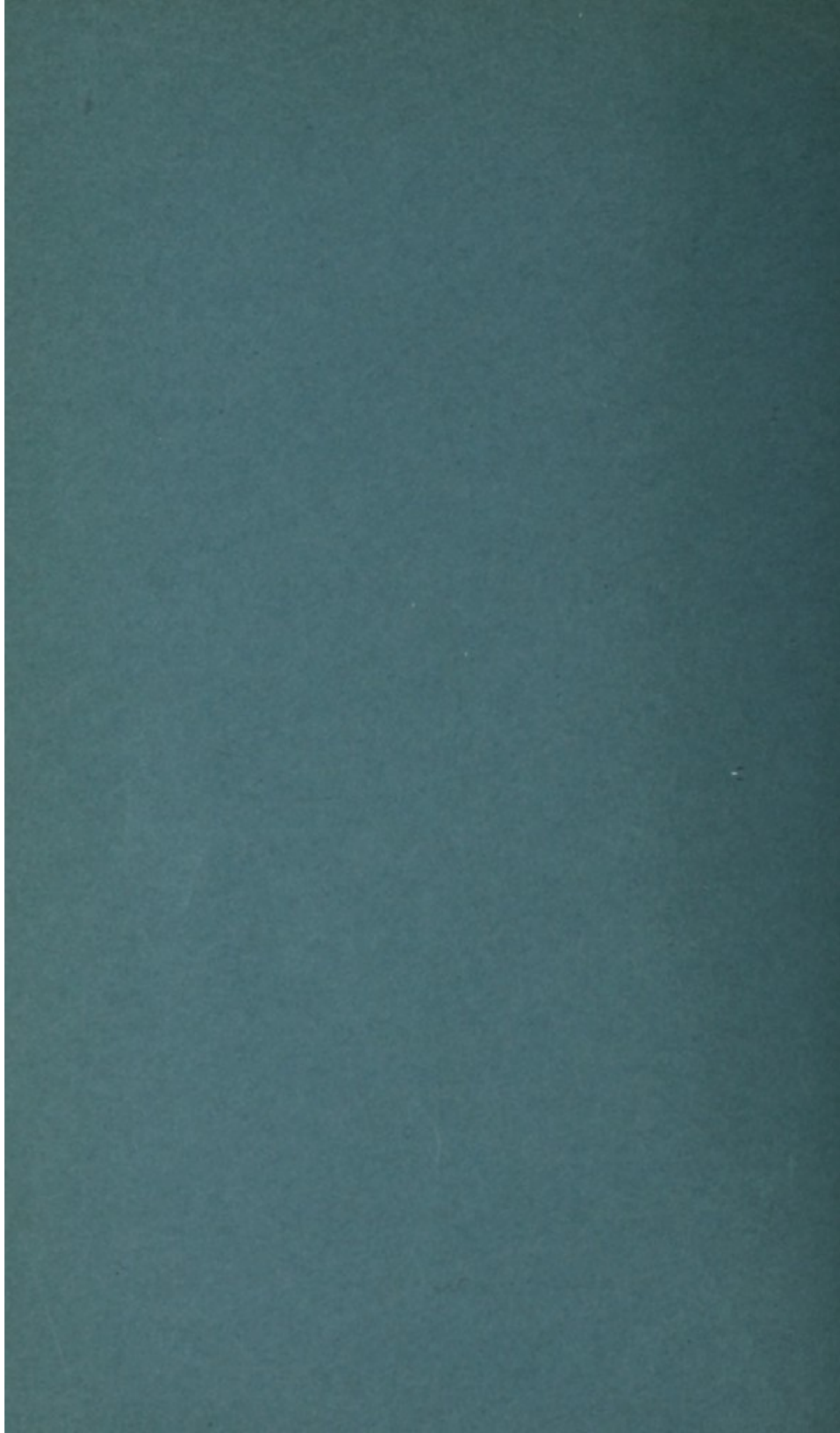
MEDICAL OFFICER OF HEALTH

AND

SCHOOL MEDICAL OFFICER

For the Year ending 31st December, 1957

JOHN INNES, M.D., D.P.H.
Medical Officer of Health and
Principal School Medical
Officer.



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ROCHDALE:
E. WRIGLEY & SONS LTD., PRINTERS, ACKER STREET

1958

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PUBLIC HEALTH OFFICERS

DECEMBER, 1957

Medical Officer of Health, School Medical Officer,

JOHN INNES, M.D., D.P.H.

Deputy Medical Officer of Health :

NORA MILLS, M.D.

Assistant Medical Officers :

MARGARET L. DENNIS, M.R.C.S., L.R.C.P.
(Ceased—October, 1957) (M. & C.W.)

DOROTHY NORMAN, M.B. Ch.B.
(from November, 1957)

MARY A. MCKENZIE, M.B., Ch.B.

JEAN M. MOORE, M.B., B.S.(Lond.)
(Ceased—March, 1957)

FRANCIS J. CAUCHI, M.D., B.Sc., D.P.H.
(from April, 1957)

Lay Administrative Officer :

S. BUTTERWORTH

Chief Public Health Inspector :

A. TURNER, C.S.I.B., A.R.S.H.

Senior District Public Health Inspector :

A. SYMONS

Meat and Foods Inspector :

J. GAWTHORPE

Public Health Inspectors :

W. C. CROSSLEY F. REYNOLDS

W. GARTSIDE K. E. SMITH

J. PEARSON

Health Visitors (Maternity and Child Welfare) :

B. ALLETSON I. RUSHTON

S. H. BARLOW M. M. SWITZER

E. M. MASSEY F. THORNTON

W. REEVE N. WHITELEY

E. REDHEAD

Health Visitors (Tuberculosis) :

M. L. GALLIMORE WM. GULLIFORD

Clinic Nurses : (Part-time)

J. MOSELEY L. HOLLINSHEAD

Chief Dental Officer :

H. P. GLEDSDALE, L.D.S.

Dental Officers :

R. G. WATSON, L.D.S. } Part-time
R. J. G. YOUNG, L.D.S. }
Mrs. J. GIBSON, L.D.S. }

Dental Attendants :

LUCY DANIELS, S.R.N.

MARY FLETCHER, S.R.N.

JESSIE LEACH

Duly Authorised Officers :

W. BEELEY

W. KERSHAW

Mental Health Visitor :

JOAN R. LAMBERT (Ceased—July, 1957)

MARJORIE OLIVER (from December, 1957)

Occupation Centre Superintendent :

Mrs. I. TAFTS

Ambulance Officer :

E. OSBALDESTON

Social Workers :

MURIEL E. ANSTEY (Ceased—June, 1957)

CLARA M. LINTERN (Part-time)

District Nursing Association :

Superintendent—E. M. FELSTEAD, S.R.N.,
S.C.M., Q.N., H.V.

Asst. Super.—B. A. M. ALLWORK, S.R.N., Q.N.

Municipal Midwives :

W. U. CARR

S. M. HAMILTON

V. E. S. CORRIN

N. HOOK

G. DOWD

K. WHELAN

PART TIME OFFICERS

Ophthalmic Surgeon :

A. STEWART SCOTT, F.R.C.S.Ed., D.O.M.S.

Tuberculosis Physician :

W. R. MAY, M.B., B.S., D.C.H., M.R.C.P.

Paediatrician :

B. WOLMAN, M.D., M.R.C.P., D.C.H.

E.N.T. Surgeons :

V. T. SMITH, M.D., F.R.F.P.S.

P. K. BASU, M.B., B.S.

Physiotherapist :

ELLEN LUMB

Family Planning Medical Officer :

HELEN E. BARLOW, M.B., CH.B.

Public Analyst :

T. W. LOVETT, F.R.I.C.

**To the Chairman and Members of the Health
Committee of the County Borough of Rochdale.**

LADIES AND GENTLEMEN,

I have the honour to present my Annual Report on the health conditions in the County Borough of Rochdale and on the work of the Public Health Department for the year 1957.

The first comment must be on the Registrar General's estimate of the population, which estimate is down again by almost 1,000 persons. This is in spite of a continued small excess of births over deaths. A continuation of this decline would mean that the 1961 Census will find Rochdale with a population of less than 83,000, in other words, down to the 1901 figure.

The Infant Mortality figure this year showed a definite increase over the last two years and was all the more disappointing in that no specific cause for the increase could be detected. Discussions on this subject took place, and will continue, with the Consultant Paediatrician.

From the point of view of sickness, the year was dominated by the epidemic of Influenza in the months of September and October. In the event it was plain that the name "Asian Flu" and the steady approach were more alarming than the disease itself. Although widespread through the town it was, on the whole, short-lived and did comparatively little damage.

The services provided through the Clinics to mothers and babies remained substantially unchanged. We were, however, very sorry indeed to lose in October the services of Dr. Dennis who had been with the Department since 1949, first as School Medical Officer and later in charge of the Child Welfare Section. Dr. Dennis' interest in the children went far beyond clinical detail and this outlook is difficult to replace.

The preventive side of infectious diseases found its main interest in vaccination against Poliomyelitis. After a very halting start in 1956, it appeared as though a steady and increasing campaign was to be established in the current year. Unfortunately, however, as the scope of the scheme was expanded by Central Government direction, so the supply of British vaccine tended to diminish.

The survey of housing conditions was, to all intents and purposes, completed during the year. On the other hand, only preliminary work could be done in regard to the establishment of a Smoke Control Area.

I have thought much on what might be the scientific guiding principle for the solution of the problems of the immediate future. Somewhat reluctantly I have been forced to the conclusion that the necessary principles are not scientific, but, indeed, are no more complicated than can be summed up in the phrase "courtesy and thought for others".

Scientists tell us that cancer of the lung will be prevented by cutting tobacco smoking down to moderate limits. No smoking in non-smoking compartments, nor in public dining rooms before or during meals, no smoking in the live theatre, no encouragement to the child smoker—these things may savour of courtesy rather than of scientific prevention, but they will have the same result.

Accidents on the roads are becoming a major life hazard. Controlled speed on the open road does not kill or maim, but flashy acceleration and cutting-in in traffic does. The shopper who parks awkwardly at corners so as to avoid walking ten yards, the sight-seeing motorist who saunters on the crown of a busy road at twenty miles an hour, are dangerous as well as thoughtless.

The investigation of an outbreak of food poisoning is scientific and often minutely so. Nevertheless, the actual causes are simple and would be removed by a little more consideration for the susceptibilities of others. Handling food with dirty hands is slovenly as well as unhygienic. It is true that dropping of cigarette ash over food, either by customer or seller, does not really cause illness, but it is an indication of this slovenly attitude towards other people's food.

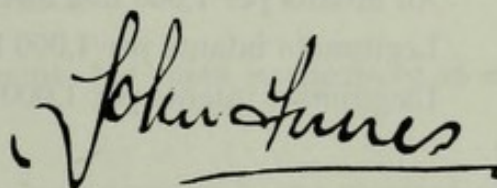
There may be an argument as to whether cracked crockery, dirty cutlery, or soiled tablecloths will cause disease, but they are certainly discourteous to the customer. Replace the courtesy and the danger will disappear.

It does seem that a stage has been reached when we all possess the knowledge and the means to prevent still more illness and incapacity. All we need to add is a little active consideration for others and prevention will follow automatically. Black smoke, dirty river beds, littered beauty spots, all these have this same dual element contained in them.

I would once again take this opportunity of referring to and, insofar as it is my prerogative, acknowledging the excellent team work which goes on in Rochdale with particular regard to its Health Services. The various groups of staff, the Health Committee and many Departments with which we are in daily association, have worked well together and encouraged each other throughout the year in dealing with problems of health and social well-being.

I have the honour to be,

Your obedient Servant,

A handwritten signature in cursive script, reading "John Jones". The signature is written in dark ink and is positioned above the typed name of the signatory.

Medical Officer of Health

25th July, 1958.

STATISTICS

Year ended 31st December, 1957.

Area (in acres)	9,556
Registrar-General's Estimate of Population, mid-year 1957 ...	85,310
Number of Inhabited Houses (Census 1951)	29,426
Number of Houses on Corporation Estates (December, 1957) ...	7,071
Number of Houses on Corporation Estates (December, 1956) ...	6,913
Estimated sum represented by a Penny Rate	£3,480
Rateable Value	£890,555
Estimated expenditure on Health Services provided for by rates ...	£68,966

	Total	M.	F.
Live Births —Legitimate	1,263	664	599
Illegitimate	72	45	27
	<u>1,335</u>	<u>709</u>	<u>626</u>
Birth-rate per 1,000 of estimated population ...			15.6

Still-Births 39—Rate per 1,000 total (live and still) births ... 28.4

	Total	M.	F.
Deaths	1,238	634	604
Death-rate per 1,000 of estimated population ...			14.5

Deaths from Maternal Causes—3.

Rate per 1,000 total (live and still) births 2.19

Death-rate of Infants under one year of age (46 deaths).

All infants per 1,000 live births	34
Legitimate infants per 1,000 legitimate live births (43) ...	34
Illegitimate infants per 1,000 illegitimate live births (3) ...	42

	Deaths	Rate per 1,000 of population
Cancer	186	2.18
Tuberculosis (all forms)	4	0.05

VITAL STATISTICS

Population.

The Registrar General's estimate of the population as at mid-year 1957 is 85,310. This compares with the mid-year estimate of 86,260 in 1956, and the 1951 Census figure of 88,429. During 1957 there was an increase in births and a slight decrease in deaths, giving a margin of births over deaths of just under 100.

Live Births.

The live birth rate was equal to 15.6 per 1,000 of the estimated population. The figure for the previous year was 15.0. For the ten years 1947-56 the average birth rate was 15.6 per 1,000.

The proportion of illegitimate births was less than the previous figure, 72 this year as compared with 82 last year, representing 5.4% of the total births. In the last six years the figure has varied between 6.0% and 6.7%.

Still Births.

There were 39 still births recorded, as against 29 in 1956. The average for the preceding five years was 33 still births.

Infant Mortality.

There were 46 deaths registered under one year of age, equal to a mortality rate of 34 per 1,000 live births registered, compared with 36 deaths and a mortality rate of 28 in 1956. The lowest figure ever recorded for the County Borough was 21 deaths in 1955, equal to a rate of 17 per 1,000 live births.

No one cause could be held responsible for the increase in 1956. In the present figures the increase is mainly due to congenital malformation, which is adding a label rather than describing the cause.

The following Table which sets out the fate of 119 Rochdale children who were prematurely born during the year is of continuing interest. The figures in this Table do not coincide with those given elsewhere as deaths during the year due to prematurity. They are, however, strictly comparable with the Tables given in the Reports for the last few years.

The figures show an increase in all groups, but more particularly in the lowest weight group.

On the other hand, a very considerable improvement in the survival rate of those children under 3 lb. 4 ozs. at birth is shown, and a falling off in the survival rate of the next group 3 lbs. 5 ozs. to 4 lbs. 6 ozs. at birth.

Premature Births during 1957.

BIRTH WEIGHT	PLACE OF BIRTH			TOTAL	DEATHS								CHILDREN SURVIVING OVER 3 MONTHS				
	Home	Birch Hill Hospital	Other Hospitals		In first 24 hours		24 hours to 7 days			7 days to 28 days		28 days to 3 months		H.	B. H. H.	O. H.	Total
					H.	B. H. H.	H.	B. H. H.	O. H.	H.	O. H.	H.	B. H. H.				
3 lbs. 4 ozs. or less ...	—	16	—	16	—	3	—	1	—	—	1	—	—	—	11	—	11
3 lbs. 5 ozs. to 4 lbs. 6 ozs.	—	19	1	20	—	4	—	3	1	—	—	—	—	—	12	—	12
4 lbs. 7 ozs. to 4 lbs. 15 ozs.	7	18	2	27	—	—	—	—	—	—	—	1	—	6	18	2	26
5 lbs to 5 lbs. 8 ozs.	23	31	2	56	—	—	—	—	—	—	—	1	—	23	31	1	55
Totals	30	84	5	119	—	7	—	4	1	—	1	2	—	29	72	3	104

Table I (Page 74) shows comparative figures for Infantile Mortality in the Borough.

In recent years a shift of interest has taken place from Infant Mortality, that is the deaths of children under one year of age, which has declined very considerably, to Neo-natal Mortality, that is deaths of infants in the first four weeks of life, which has not declined to the same extent. More recently a further concept has developed to include the loss of infant life whether it occurs immediately before birth, during birth, or very soon afterwards. To this, the term Peri-natal Mortality is being applied. Very largely, it is suggested, the same causes might result in stillbirth, in death during childbirth or during the first week of an infant's separate life, and it is often merely a matter of chance in which of these phases death occurs.

The following Table sets out Rochdale's experience in this respect during the last ten years, in other words, in more or less normal conditions after the war.

The last column in the Table brings together stillbirths and deaths of infants which occurred in the first six days of life and, therefore, represents the loss of infant life just before or during confinement, or soon after birth. This appeared more stable and more indicative of a steady improvement until this last year.

Year 1	Live Births 2	Still Births 3	Infant Deaths 4	Neo-natal Mortality 5	Early N.N.M. 6	P-n.M. Col. 3+6 7
1948	1,500	50	57 (38)	33	27	77 (50)
1949	1,362	39	56 (41)	37	32	71 (50)
1950	1,371	38	64 (47)	37	35	73 (52)
1951	1,275	31	69 (54)	47	39	71 (54)
1952	1,321	29	52 (39)	33	31	60 (44)
1953	1,297	33	40 (31)	32	27	60 (45)
1954	1,243	33	29 (23)	21	16	49 (38)
1955	1,263	39	21 (17)	15	14	53 (40)
1956	1,294	29	36 (28)	25	20	49 (37)
1957	1,335	39	46 (34)	30	26	65 (47)

The figures in brackets show :— * rates per 1,000 live births.

† rates per 1,000 live and stillbirths.

Deaths from all causes.

The deaths registered number 1,238, which is less than the figure of last year, 1,271. This total was made up of 634 males and 604 females.

The general tendency was for the male deaths to exceed the female deaths in the age groups up to 65. The figures for the age group 75 and over definitely show a much bigger survival rate for females than for males.

The death rate from all causes was 14.5 per 1,000 of the estimated population, as compared with 14.7 in 1956 and an average of 14.8 during the ten years 1947-1956.

The chief causes of death are given in comparison with the previous year :—

	1957	1956
Tuberculosis	4	14
Cancer	186	168
Cerebral Haemorrhage, etc.	202	202
Heart Disease	354	400
Other Circulatory Diseases	86	76
Bronchitis	72	90
Influenza	17	6
Pneumonia (all forms)	67	63
Motor Accidents	10	8
All Other Accidents	33	29
Suicide	16	20
	<hr/> 1,047	<hr/> 1,076

From this list certain diseases which have appeared for many years have been dropped, because they have ceased to be significant. On the other hand, Motor Accidents and All Other Accidents have been added as now significant groups and significant risks of the present generation.

Table I Appendix (Page 74) shows comparative mortality rates and birth rates during the past ten years, while Table II Appendix (Page 75) shows the age and sex distribution, and the causes of deaths in 1957.

The following Table shows the tremendous change which has taken place in the expectation of life during the last forty years. It will be noted that no really significant percentage of deaths occurs below the age of 45 years.

Percentage of Deaths in year groups, distributed according to age at death.

Age Group					1917	1927	1937	1947	1957
Under 15 years	...	...	...	...	22	14	6	9	5
15—45 years	...	...	...	...	17	13	13	6	4
45—65 years	...	...	...	...	29	33	32	24	23
65 years and over	...	...	...	...	32	40	49	60	68

Respiratory Diseases.

This group of diseases caused 149 deaths as compared with 168 in 1956 and 111 in 1955. Pneumonia caused 67 deaths (63), Bronchitis 72 (90) and other respiratory affections 10 deaths (15). 64% of these deaths occurred in persons 65 years old or over.

Cancer.

Deaths classified to this cause and shown in the age groups below number 186 (males 92, females 94), as against 168 in the previous year:—

	Total deaths	Under 15 years	15-44 years	45-64 years	65 years and over
Year 1957	186	1	11	74	100
Year 1956	168	—	7	65	96

These figures do not indicate any radical change over recent years. It is, however, interesting to note that the total number of Cancer deaths in 1950 was 185, i.e. practically the same figure, but the number of deaths due to Cancer of the Lungs was 26 in 1950 and 44 this year.

The death rate was 2.18 per 1,000 of the estimated population as against 1.95 per 1,000 for the previous year.

Comparative Mortality and Birth Rates.

	Death-rate All Causes per 1,000 of population	Live Birth-rate per 1,000 of population	Infant Mortality per 1,000 live births
ROCHDALE	14.5	15.6	34
Average 12 neighbour- ing manufacturing towns	13.11	16.51	26
Administrative County of Lancaster ...	12.85	16.00	25
Great Towns	11.5	16.1	24
Smaller Towns ...	11.4	16.0	24
ENGLAND AND WALES	11.5	16.1	23

These provisional figures are corrected only for transfer and institutions, and make no allowance for variations in the age and sex distribution of the population in different areas.

Professional Conference on Ante-natal Care.

In July, 1956, the first Conference for the area served by the Rochdale & District Hospital Management Committee was convened, with your Medical Officer of Health as Chairman. Questionnaires were designed, distributed to doctors, completed and considered. Eventually, in November, 1956, two reports were produced, an administrative one to the various hospital and local authority bodies, and a professional one which was circulated to all doctors and midwives in the County Borough and the surrounding County district.

In the former little was recommended, since the ante-natal services in this district have been for over twenty years a very closely knit entity. Improvement in ante-natal clinic accommodation was recommended and some improvement in the laboratory service.

The professional report consisted mainly of an accepted routine of ante-natal supervision, which is practical in its application for all the persons concerned, while containing an adequate safety margin from the point of view of the expectant mother.

General Provision of Health Services.

Administration.

The Health Committee of the County Borough Council is responsible for all the Health Services, including those established under the Health Service Act, 1946, allocating certain duties to the following Sub-committees :—

- (a) Sanitary Sub-committee
- (b) Accounts and Staffing Sub-committee
- (c) Domiciliary Services Sub-committee.

The Health Committee receives direct reports dealing with the Mental Health and the Ambulance Services.

This arrangement has worked satisfactorily and no further extension of the Sub-committee principle is contemplated.

Co-ordination and Co-operation with other parts of the National Health Service.

All arrangements outlined in detail in the 1952 Report remain in operation. There have been no major developments during the year.

Clinic and Treatment Centres.

The hours of clinic sessions and the situation of centres are as shown :—

	Mon.	Tues.	Wed.	Thurs.	Fri.
I.—Child Welfare					
(A) St. Luke's School, Deeplish	10—12 noon 2—4 p.m.	—	—	—	—
(B) St. Clement's School Spotland Bridge ...	—	10—12 noon 2—4 p.m.	—	—	—
(C) Council Offices, Norden	—	—	—	2—4 p.m.	—
(D) Baillie St. Council School	—	—	2—4 p.m.	2—4 p.m.	10—12 noon
(E) Castleton Wesleyan School, Durban St.	—	—	—	—	10—12 noon 2—4 p.m.
(F) Bamford Workingmen's Club	—	—	—	1st in each month 10—12 noon	—
(G) Kirkholt Infants' School, Hartley Lane	—	2—4 p.m.	2—4 p.m.	—	—
II.—Ante Natal (Baillie St. Council School)	9-30 a.m. to 11 a.m. 2—4 p.m.	5-30 to 7-0 p.m.	9-30 a.m. to 11 a.m.	9-30 a.m. to 11 a.m.	—
III.—Post Natal (Baillie St. Council School)	—	—	—	—	2—3-30 p.m.
IV.—Family Planning Clinic (Baillie St. Council School)	—	2—4 p.m.	5-30—7 p.m.	—	—
V.—Clinics Provided by the Education Committee—	See page 82				

The work in connection with Corporation Clinics is set out in detail in the respective sections in this Report.

HOME NURSING

This Service continues to be run on an agency basis by the Rochdale District Nursing Association.

The Local Health Authority is represented by two members of the Health Committee and its Medical Officer of Health on the Association's Committee. Two members of the Associations' Committee attend the Domiciliary Services Sub-committee.

At Christmas Miss Felstead, who had been Superintendent since August, 1948, relinquished her post upon getting married. During this period she had given valuable and much appreciated service to the Association and to the town. For the last five years of this period she had also acted as Non-medical Supervisor of Midwives under the Domiciliary Service and in this had achieved a very valuable linkage between the two groups giving nursing service in the home. The Association was fortunate to be able to obtain a successor to Miss Felstead and a First Assistant Superintendent almost immediately.

The staff of the Home consists of the Superintendent, two Assistant Superintendents, 9 full-trained female District Nurses, 1 female and 1 male candidate under training, 1 full-trained male District Nurse and 6 part-time Nurses.

During the year 89,940 visits were paid to 3,276 patients. Of these, 2,621 were new patients, most of whom were referred by general practitioners, but some were sent by hospitals, clinics and the Public Health Department.

Among these 3,276 patients, the following are the main groups of conditions treated :—

	1957	1956
Anaemias	358	367
Arthritis and Rheumatism	75	63
Bronchitis	344	298
Other respiratory diseases	73	91
Burns and Scalds	31	33
Cancer	86	97
Cardiac disease	444	387
Cerebral lesions	115	125
Ear, Nose and Throat conditions	181	165
Gastro-intestinal disorders	238	204
Gynaecological conditions	88	87
Septic lesions	117	141
Post-operative dressings	245	288
Senility	121	135
Skin conditions	15	19

The following is a summary of the work done during the year :—

	1957	1956
Patients on the books 1st January	655	618
New patients during the year	2,621	2,562
Total nursed	3,276	3,180
Total discharged	2,555	2,525
Remaining on books 31st December	711	655

Method of Discharge.

	1957	1956
Convalescent	1,344	1,452
Removed to Hospital	370	367
Relieved	248	446
Died	593	260
Total visits paid to 3,276 patients	89,940	
Total visits paid to 3,180 patients		82,071

Included in the above figures for 1957 are the following patients who suffered from Infectious Diseases :—

	Patients	Visits
Pneumonia	72	784
Tuberculosis	66	2,974
Others	66	575
	<u>204</u>	<u>4,333</u>

Of the total visits, 1,661 were paid to 175 children under five years of age.

These figures show a small increase in the number of patients, but quite a significant increase in the number of visits paid. Bronchitis and cardiac diseases constitute the group showing the most definite increase.

Out of the total of 2,621 new patients 1,413 were referred for the purpose of having various forms of injections. This service by itself makes a significant contribution to keeping individuals ambulant or even working. It is also interesting to note that 1,463 out of a total of 3,276 persons nursed were patients over the age of 65 and they absorbed 53,587 visits during the year. That the whole Service reduces the demand upon hospital beds is undoubted, although in an area where waiting lists are very short this is not easy to assess.

The Committee continues to receive letters of appreciation testifying to the high quality of the service of the nurses and to their kindness and helpful attitude.

MORBIDITY.

The Department continues to receive from the Manager of the Local Office of the Ministry of National Insurance a weekly return of the figures of new claims to sickness benefit. There has been no change in the form of the records which are still unanalysed and still cover an area which includes the postal districts of Whitworth and Milnrow, as well as Rochdale itself.

This year's morbidity graph followed the usual course until the first week in September when the town was struck by the wave of "Asian" influenza. The figures rapidly rose until by the end of that month they were four times the normal for the year. Sickness remained at a level more than double the normal from the beginning of September until the middle of October and dropped back to normal at the end of that month.

There was still a slight and quite significant increase in sickness during late November and December. The type of influenza, as it occurred in Rochdale, was not particularly severe although the level of deaths did rise a little above the average for the last few years and altogether 14 influenza deaths were recorded during the epidemic period.

UNEMPLOYMENT.

I am indebted to the Manager of the Rochdale Employment Exchange for information regarding the state of unemployment in Rochdale and the adjoining districts of Wardle, Whitworth and Milnrow.

The average number of unemployed persons on the register during the year ended 31st December, 1957, was as follows:—Men 206, Women 107, making a total of 313. The corresponding figures in 1956 were Men 171, Women 178, totalling 349.

I am also informed that in the middle of 1957 there were approximately 52,351 insured persons (28,851 Men, 20,472 Women and 3,028 Juveniles) in employment in the area.

AMBULANCE SERVICE

At the end of the year the fleet comprised three ambulances, one sitting case car and three dual purpose vehicles, together with one car hired through the Car Hire Service of the Corporation mainly for midwifery and general duties. The personnel consisted of one Ambulance Officer, twenty-two Driver/Attendants and two Telephonists.

The service continues to operate from the headquarters and garage in Drake Street.

The new Dennis diesel ambulance with Lomas body referred to in my last Report was delivered in August and replaced the remaining Humber ambulance purchased in 1948.

The decision to adopt diesel power was taken after recommendations by the Ambulance Sub-committee, following most satisfactory experience of the Austin taxi, which has proved so economical in operation. The Sub-committee has also recommended the purchase of a 2 ton Bedford diesel-powered dual purpose vehicle to replace the 1949 Commer. Delivery of this vehicle is awaited. This vehicle will be capable of carrying a stretcher case in an emergency, but in addition to general ambulance service duties, it will be used for the children attending the Occupation Centre and the transport of goods, i.e. welfare foods, etc., to Clinics.

In the following Table, the definition of "Other Persons" and "Patients" has the same meaning as in previous years.

	BOROUGH						COUNTY AND OTHERS					
	Ambulances		D.P. Vehicle		S.C. Cars		Ambulances		D.P. Vehicle		S.C. Cars	
	1957	1956	1957	1956	1957	1956	1957	1956	1957	1956	1957	1956
PATIENTS :												
Emergency ...	1740	1227	340	409	187	226	1	9	2	2	-	3
Ordinary Removals	13599	13839	9042	8156	3006	3032	1	3	2	1	-	-
Other Persons ...	99	183	9242	8834	2939	4272	-	-	-	-	-	-
Totals ...	15438	15249	18624	17399	6132	7530	2	12	4	3	-	3
MILEAGE :												
Removals ...	57109	53625	38894	37129	19579	20438	10	82	59	34	-	37
General Trans. ...	21	101	6569	8450	8938	9109	-	-	-	-	-	-
Lost Journeys D.D.	587	461	496	422	735	581	-	-	-	-	-	-
Midwifery ...	38	36	732	813	6268	8909	-	-	-	-	-	-
Totals ...	57755	54223	46691	46814	35520	39037	10	82	59	34	-	37
CALLS :												
Total Calls ...	10091	10888	6372	6662	4214	4980	2	11	4	3	-	3
Transmitted by Radio ...	6660	7718	2831	3204	1112	1482	-	7	1	1	-	-

During the past year ambulances removed 15,341 patients, involving 57,119 miles, the dual purpose vehicles removed 9,386 patients, involving 38,953 miles, the sitting case cars removed 3,193 patients, involving 19,579 miles and 12,280 other persons were transported involving together with general transport 24,384 miles.

Again, emergency and ordinary removals have shown a considerable increase, but a corresponding decrease has occurred in the removal of other persons. In fact, the total number of persons carried during the year was only 4 greater than that in the previous year, whilst the mileage involved, totalling 140,227 was 192 miles less than in the previous year. The number of emergency cases removed represents 5.6% of all cases removed.

The availability of radio contact has again proved to be most effective, 51% of the total calls being re-directed by means of radio. It is still difficult to produce conclusive evidence of economies effected through the adoption of radio telecommunications, but it is nevertheless a fact that the average number of miles per patient during the past year was 4.6 against 4.9, 5.0 and 4.75 respectively in the years, 1954, 1955 and 1956. To obtain this figure the data relating to the transport of patients over long distances, such as to Manchester hospitals and beyond, has been excluded. In addition to statistical information, numerous instances can be cited where the provision of radio has greatly assisted and increased the efficiency of the Service.

The number of journeys to Manchester hospitals and other destinations outside the Borough increased and, selecting for comparison purposes the months of March, June and October in each year, we find that in 1955 there were 444 patients so conveyed, involving 7,939 miles, in 1956 there were 417 patients involving 4,054 miles, and in 1957 there were 474 patients involving 6,325 miles. This sharp increase during 1957 is accounted for by the increased number of patients being referred to out-patient departments at Manchester hospitals.

From costing statistics published by the Ministry of Health and the Association of Municipal Treasurers, it would appear that Rochdale is above the average for County Boroughs. The Ambulance Sub-committee is to investigate this question.

During the year, a team was entered for the National Ambulance Competition, 1957 and competed in the eliminating regional contest held at Southport in September, 1957. The Rochdale team was unsuccessful in reaching the final, but a further team has been entered for the Competition in 1958 and, no doubt, will benefit from the past experience.

This year, of the 21 Drivers entered for the National Safe Driving Competition in 1957, 20 Drivers gained awards.

LABORATORY FACILITIES.

Throughout the year the bacteriological examination of Milk, Water and Ice-cream has been carried out at the Public Health Laboratory at Monsall Hospital, Manchester.

Individual specimens from individual patients are still referred to the local Hospital Laboratories, from which information of epidemiological importance is passed either to the Public Health Laboratory or to the Medical Officer of Health, or to both.

The chemical analysis of water, as well as of milk and foodstuffs taken under the Food and Drugs Act, is performed by the Borough Analyst.

HOSPITALS.

The hospital services in the district provide 1,375 beds for patients. This total number of beds and the units of which it is made up are both under constant review to meet changing needs in the area. It is notable that this district is not affected by the long waiting lists for admission which exist in many other areas.

MATERNITY HOMES.

At the end of the year there was one dwellinghouse registered as a Maternity Home for three patients at 78 Louise Street.

Maternity and Child Welfare

Notification of Births—Public Health Act, 1936.

There were 1,276 births, all notified by midwives, as belonging to Rochdale. This figure includes 797 occurring at Birch Hill Maternity Home and 28 in other hospitals, which are classified to Rochdale.

Health Visitors.

There have been nine Health Visitors and one full time Clinic Nurse working in the Department during the year. One of the Health Visitors was ill until September and when she came back started work on a part-time basis. The Student Health Visitor appointed in 1956 left us, but another one has been appointed and she should qualify in June, 1958.

The Health Visitors have continued to spend most of their time visiting children under five in their own homes and have done a lot of good in this respect. Their help and advice has been of great assistance to mothers at a loss to know what to do with their infants, also to those who have faulty ideas on the rearing of their family. The great majority of the homes which they visit contain healthy and contented children with a background of normal family life, and parents who

are good and respectable citizens. There are, however, a few homes with children who are ill and here again the Health Visitors can help in many ways. There are also homes which contain "problem families". The parents are in some way unable to shoulder their responsibilities to the community and to their family and here the Health Visitor has a very difficult task. She must put in hours of hard work to try and make the lot of the children easier and often she feels very frustrated and disillusioned, but in the end there is usually some improvement to show for her labour.

The Health Visitors also attend twelve sessions at the Infant Welfare Clinics and four sessions at Ante-natal Clinics. One of them attends Birch Hill Hospital and makes a round of the Childrens' Pavilion and Maternity Unit one morning each week and this same Health Visitor attends a Paediatric Clinic at Smith Street on Wednesday afternoons.

There is a clinic each month for premature babies born at home and this is staffed by Health Visitors, and also one of them goes to the Ante-natal relaxation class every week to give general instructions to the expectant mothers.

The Health Visitors also keep an eye on the health of children attending the four nursery schools in the town. They attend regularly to inspect the children for cleanliness and their heads for infestation. They also attend with the Medical Officer when medical inspections are carried out, and they are able to chat with the staff about the general well being of the children who attend.

The following Table will show the way in which the Health Visitor spends her time :—

	1957	1956
Primary visits to births	1,341	1,230
Primary visits to stillbirths	41	22
Subsequent visits to infants under 1 year ...	6,153	5,930
Subsequent visits to young children 1-2 years...	3,259	3,144
Subsequent visits to young children 2-5 years...	6,403	6,004
Ante-natal cases	1	—
Maternal and infant deaths	31	25
Infectious diseases	1,197	321
Incomplete visits	2,048	2,104
	<hr/>	<hr/>
	20,474	18,780
Ante-natal and post-natal clinics	193	233
Child welfare clinics	918	861
Nursery schools	93	90
	<hr/>	<hr/>
	21,678	19,964
	<hr/>	<hr/>

These figures require very little comment except to say that there have been slightly more visits in every section this year than last. The vast increase in visits in infectious diseases is due to the measles epidemic which was in April, May and June. There is also a very slight increase in the number of dysentery cases visited.

We have had P.T.S. nurses and final year student nurses from Birch Hill Hospital to see the Infant Welfare Clinics and the work of the Health Visitor. The Health Visitors have been exceptionally good in taking these students on their districts and into patients' houses and showing them the type of work they do.

Child Welfare Centres.

The total number of new patients attending the Child Welfare Clinics this year is fewer than last year. 69% of the total children born in Rochdale have attended the clinics. It will be seen that there have been higher attendances at St. Luke's and St. Clement's this year than last and that there have been fewer attendances at Castleton, Norden and Bamford. At Castleton, although there have not been so many new cases, the average attendances have hardly fallen and at Bamford there is only one clinic each month, but at Norden the attendances are particularly disappointing and continue to fall off.

At Baillie Street where there are three different sessions each week, it will be seen that patients prefer to come on Wednesday and Thursday afternoons rather than Friday mornings. Kirkholt has not had quite as many attendances as last year. If a large number of patients arrive there at one time there is considerable overcrowding and the year was spent in hopeful anticipation of the time when new and larger premises could be built.

Again there has been a falling off of attendances of children between one and two years and this may be attributed to the fact that it is not our practice to do any immunisation or vaccination during this age period. The attendances of children under one year have increased and those of children between two and five years are about the same. The total number of attendances during the year is just about the same as last year, so that as there are fewer new cases it shows that those children who do attend are doing so more frequently and are becoming more confident in the clinics.

Dr. Barker has continued to do two sessions at the clinics each week. When Dr. Moore left, Dr. McKenzie took an extra session at Baillie Street on Wednesday afternoons and Dr. Cauchi, who came to replace her, took sessions at St. Luke's, St. Clement's and Norden. Dr. Dennis left in November and her sessions were taken over by Dr. Norman. We have also had assistance from Medical Officers at Birch Hill Hospital, who have relieved for holidays and sickness.

The sessions are mainly taken up with vaccinations and immunisations, with examining new babies and with dealing with problems which the mother herself brings up. Babies and toddlers are weighed each time they attend and

baby foods and cod liver oil and orange juice can be obtained. Immunisations against whooping cough and diphtheria are carried out separately.

Vaccinations against smallpox are done during the first week of every month. Vaccinations against poliomyelitis have also been done in great numbers. On several occasions we have had to close down clinic sessions in order to fit in a vaccination session and get through the necessary number of children. We did, however, manage to end the year in the position where the vast number of children between six months and five years, whose parents wanted them to be vaccinated against poliomyelitis, had been done.

The following Table shows the attendances at the Clinics during 1957 :—

Centre	New Cases admitted during 1957	Total Attendances of Children			Average Attendance per Clinic Session	No. of Medical examinations by M.O.
		under 1 yr.	1—2 yrs.	2—5 yrs.		
(a) Baillie Street * (Wardleworth)	158	1,404	337	326	42 (39) †	1,005
(b)*St. Luke's ...	216	2,879	488	504	42 (34)	1,839
(c)*St. Clement's ...	142	2,304	378	641	33 (30)	1,340
(d) Baillie Street *(Castleton) ...	148	1,711	402	329	50 (48)	1,119
(e) *Castleton ...	113	1,720	514	794	33 (35)	1,138
(f) Norden ...	30	458	151	360	19 (22)	290
(g) Baillie St. (Comb.)	50	550	184	124	19 (24)	502
(h) Bamford ...	7	63	42	94	17 (20)	70
(i) Kirkholt ...	122	1,494	245	557	16 (17)	897
Totals ...	986	12,583	2,741	3,729	—	8,200
Corresponding Figures 1956 ...	996	12,468	2,946	3,748	—	8,526

* Two Clinic Sessions per week.

† Figures in brackets are for 1956.

Care of Premature Infants.

There were 30 premature babies born at home in 1957. Dr. Wolman has continued to hold a premature baby clinic in the Health Department each month, where premature babies born at home have been seen monthly until they are six months old, and vaccinations and immunisations have been done.

Premature babies born in previous years continue to be examined at yearly intervals for the survey of premature babies started in 1950. Some of these examinations are done at the Child Welfare Clinic, some in Nursery Schools, while some are now old enough to be examined in Infant and Junior Schools.

Domiciliary Midwifery Service.

The Midwives have worked all the year under the supervision of Miss Felstead, as Non-medical Supervisor. Miss Felstead, however, as already stated, got married in December and resigned at the end of the year. Her advice, her assistance and her quiet efficiency were much valued. Nurse Hamilton and Nurse Ashworth who were on sick leave at the beginning of the year returned in July and April and Queen's Nurses Crompton and Owen, who had been kindly helping out, returned to their duties in the same months. Nurse Dowd went on sick leave in November and Nurse Ashworth left altogether in December, so we finished the year with one Midwife short and one off sick.

The following Table will show the type of visits that the Midwives have been doing :—

	1957	1956
Cases delivered	453	446
Subsequent visits	6,057	5,571
Continuation visits to Hospital patients ...	1,835	1,255
Ante-natal Home visits	2,536	2,766
Ante-natal Clinic visits	466	434
Miscellaneous visits	4	2

The one Midwife in private practice attended 74 cases during the year.

The Midwives have attended two cases as maternity nurses during the year and doctors were called in to 180 cases on medical aid forms. Gas and air analgesia was administered to 409 cases out of 457 and Pethidine to 295 cases.

The following cases were reported by the Midwives as being admitted to hospital before the delivery of the infant, although they had started to look after them in their own homes :—

- 6 Ante-partum haemorrhage ;
- 6 Hypertension ;
- 4 Premature labour (one—twins) ;
- 3 Foetal distress ;
- 2 each—Transverse lie, Breech ;
- 2 Persistent occipito—posterior ;
- 2 Post maturity ;
- 1 each—Prolonged labour, renal colic, low haemoglobin and Hyperemesis.

Out of these there were 31 live births, (which included four premature babies) and one stillbirth.

The following cases were reported by the Ante-natal Clinic as having had their bookings changed from home to hospital while attending there :—

- 6 Premature labour ;
- 5 Pre-eclampsia ;
- 4 Low haemoglobin ;
- 1 each—overdue, Rhesus negative, twin pregnancy, ante-partum haemorrhage.

Out of these there were 19 live births, (which included five premature babies) and one stillbirth.

Pupil Midwives have continued to come to us from Birch Hill Hospital for their Part II Training. During the year thirteen pupils have been trained and they have all been successful in passing the final examination.

Ante-natal Clinics.

The arrangements here are the same as mentioned in last year's Report. Monday afternoons are set aside for patients who are to be confined at home. Attendances have again improved, 98% of the total births having attended the Clinic. In addition to the routine blood tests and medical examinations, the patients who are to be confined at home now have the opportunity to attend ante-natal relaxation exercise classes which were started in October, 1955. Two classes are held each week by the Physiotherapist, one for the new patients and one for re-visits. During the year 87 sessions were held with a total of 468 attendances. At the latter class a health visitor attends and she holds group discussions and gives talks to any of the patients who wish to join in. They have become very popular especially because the patients have time to talk about their worries. It is hoped that more discussion groups of this type will be held in the future, but at present the accommodation for the purpose is very limited.

Distribution of Welfare Foods.

The arrangements for the distribution of welfare foods have continued as previously reported, with distribution points at the various child welfare clinics during clinic sessions and at the Public Health Offices, Baillie Street, during normal office hours.

The staffing of the distribution centres is covered by three female assistants, two full-time and one part-time.

During the year 38,291 tins of National Dried Milk, 8,810 bottles of Cod Liver Oil, 69,274 bottles of Orange Juice and 3,994 packets of Vitamin Tablets were distributed. The average distribution of National Dried Milk and Orange Juice has decreased during the year. This is probably due to the fact that in April, 1957 the sale price of National Dried Milk was increased from 10½d. to 2/4d. per tin and as from the 1st November, 1957 supplies of Orange Juice were no longer available to children over two years of age, by decision of the Government.

Post-natal Clinic.

There is one post-natal clinic held weekly in the same premises, conducted by the same Consultant Obstetrician and Gynaecologist.

The number of women who attended the clinics and the attendances made by them are set out in the following Table. The distinction made between persons resident in the County Borough and those resident outside is maintained purely for the purpose of this Report. Within the clinic itself no such distinctions are made.

	Rochdale Borough		County Districts		Total	
	1957	1956	1957	1956	1957	1956
(1) ANTE-NATAL CLINICS						
(a) No. of Expectant Mothers attending (New Cases)	1,355	1,262	175	182	1,530	1,444
(b) No. of attendances (Old and New Cases)	9,571	8,550	1,717	1,435	11,288	9,985
(c) Average attendances per clinic session	39.2	34.8	7.1	5.8	46.3	40.6
(2) POST-NATAL CLINIC						
(a) No. of Mothers attending (New Cases)	541	489	138	109	679	598
(b) No. of attendances (Old and New Cases)	583	537	149	122	732	659
(c) Average attendance per clinic session	12.2	11.2	3.1	2.5	15.3	13.7

Emergency Maternity Unit.

Under arrangements made by the Rochdale and District Hospital Management Committee, this Unit, based at Birch Hill Hospital, is available on call at all times within the Hospital Management Committee's area. The service was only called upon once during the year.

Maternity Home.

The number of Rochdale women admitted to the Maternity Home at Birch Hill Hospital for confinement was 820, three of whom gave birth to their babies at home before admission.

The number of babies born in hospital and classified to Rochdale was 797 live births and 30 stillbirths.

Medical Assistance.

Midwives practising in the district requested the services of a medical practitioner in 141 maternity cases and in 39 cases of newly born children. The corresponding figures last year were 104 and 22 respectively.

The Local Health Authority pays the medical fees only where the general practitioner is not already called upon to give these services under the terms of his contract with the Local Executive Council. During the year two cases were so treated.

Maternity Outfits.

Sterilised accouchement outfits continue to be supplied free of charge to expectant mothers who are having their confinements at home. These outfits, of the standard prescribed by the Ministry of Health, are available at the Child Welfare Centres, or through the Domiciliary Midwife, and during the year 510 such outfits have been issued.

Puerperal Pyrexia.

During the year eight cases of Puerperal Pyrexia were reported by the Midwifery Service. Of these, only two were notified by the doctor. The nursing of these cases was handed over to the District Nurses. Most of the raised temperatures were due to engorged breasts.

Maternal Mortality.

There were three deaths classified by the Registrar General as due to maternal causes. In the first of these cases death was due to the sudden development and rapid course of a disease condition in a pregnancy which appeared normal in every way until the last month. In the second, death was due to eclampsia not without adequate warning of its onset. Unfortunately, due to the coincidence of several factors, there was a lapse of supervision for ten days at a vital stage. In the third case, death was due to gas gangrene following an abortion.

AREA	1957	1956	Average 5 years 1951-55
ROCHDALE	2.19	Nil.	0.76
Average 12 neighbouring manufacturing towns ...	0.43	0.39	0.72
Administrative County of Lancaster	0.58	0.61	1.00
England and Wales	0.47	0.56	0.72

Ophthalmia Neonatorum.

For the past four years there have been no cases.

VACCINATION AND IMMUNISATION.

National propaganda is made available to the public and supplemented by local propaganda of the usual visual type. General Practitioners are circularised from time to time with any fresh information or about altered arrangements.

These methods have produced the usual solid and fairly satisfactory, if not brilliant, results in respect of Diphtheria and Whooping Cough, and the usual rather disappointing results in respect of vaccination against Smallpox.

Further reference to immunisation and vaccination will be found in the sections dealing with Child Welfare, with Nursery Schools and with the School Medical Service.

Diphtheria.

During the year 751 children under five received a course of immunisation. In 1956 the number immunised in this group was 897. The following Table shows immunisation in relation to the child population under five years of age. The numbers immunised include those who had completed a course of immunisation before 1st January, 1958. The estimated population figure is supplied by the General Register Office.

Age at 31/12/57 i.e. born in Year	Under 1 1957	1 1956	2 1955	3 1954	4 1953	Total
Number immunised	160	623	716	704	740	2,943
Estimated mid-year child population 1957	Children under five 6,000					

In addition to the above immunisations, 200 children between the ages of five and fifteen were immunised, as compared with 170 children in 1956, and 673 children received re-inforcing doses, usually about four years after the initial treatment, compared with 894 in 1956.

Whooping Cough.

The general arrangements for immunisation against Whooping Cough remain as detailed in recent Reports, both as regards our own arrangements and those for the work to be carried out by the family doctor. We do not use Combined Prophylaxis.

During the year 840 children received a full course of three injections, as compared with 838 the previous year. Of this number, 115 children were immunised by their own doctors. In addition, booster doses were given to 171 children, including 16 given by own doctors.

Altogether, since the scheme was introduced there have been 81 cases of Whooping Cough reported amongst immunised children. Since, however, Whooping Cough is so variable in its effects, it is by no means certain that all the cases have been reported to us. It is, however, quite true to say that there have been no really serious cases amongst immunised children.

Since the scheme started in September, 1949 a total of 6,259 children has been immunised.

Vaccination against Smallpox.

No large scale propaganda has been undertaken, but the subject is discussed with the individual parents by the Health Visitor.

	Under 1 yr.	1 yr.	2-4 yrs.	5-14 yrs.	15 yrs. or over	TOTAL 1957	TOTAL 1956
No. Vaccinated ...	374	36	28	6	4	448	458
No. Re-vaccinated ...	—	—	—	—	7	7	8

It seems very difficult to arouse any real interest in vaccination amongst parents of young children. It is an interesting fact that in 1952 when the town was visited by an outbreak of Variola Minor, or Alastrim, a total of nearly 20,000 vaccinations or revaccinations against Smallpox, more or less equally divided amongst General Practitioners and the Department's own medical staff, was carried out. The total for this year is only 455 vaccinations and revaccinations. Of this meagre number three were performed by the Department's staff for every one performed by the doctors in the town. It is difficult to imagine a more potent form of propaganda.

This form of vaccination is now offered to children at the Child Welfare Clinics. During the year on an average three children have been vaccinated at each monthly clinic allocated to this purpose.

Poliomyelitis Vaccination.

The first of two important stages in the vaccination campaign against Poliomyelitis occurred in May when a Ministry circular advised the continuation of vaccination during the summer or so-called Poliomyelitis months and extended the arrangements to include children born in 1955 and 1956. The second occurred in November when the arrangements were extended by the Ministry to all children under fifteen, also to certain priority groups—doctors and families, ambulance staffs and nursing staffs. At this stage also, the first notification was made of the introduction of American Salk vaccine and the parents were to be allowed to choose between this vaccine and the British produced vaccine. The public

were notified of the first alteration through the columns of the local press. The second alteration was dealt with by means of letters to the parents. Approximately 4,500 letters were sent out. The letters also contained information as to the choice between American Salk and British vaccines, and pointed out that choice of the British vaccine would result in delay.

The special classes were notified direct, doctors, ambulance staffs and nurses by personal letters, while expectant mothers and babies at six months old were dealt with through the clinics or from the appropriate registers.

During the year eleven monthly batches of British vaccine were received, in all totalling just over 5,000 doses.

The various methods of publicity or approach resulted in the receipt in the Department of 2,418 consents for vaccination by British vaccine and 1,094 for Salk vaccine. Altogether, 2,104 in the various categories were treated with two doses of vaccine during the year. No Salk vaccine had been received at the 31st December.

As the position with regard to supplies of vaccine became more stabilised, the general practitioners were gradually brought into the picture for all classes of patient, quite apart from the special categories already mentioned.

The following Table shows the distribution of the general work of immunisation and vaccination :—

	1953	1954	1955	1956	1957
GENERAL PRACTITIONERS :					
Diphtheria Immunisation ...	253	267	218	219	142
„ Boosters ...	173	166	159	141	131
Whoop. Cough Immunisation	156	191	143	162	115
„ Boosters ...	18	27	20	36	16
Vaccinations ...	353	268	203	138	111
Re-vaccinations ...	111	36	11	8	7
M.C.W. CLINICS :					
Diphtheria Immunisation ...	645	624	570	677	597
„ Boosters ...	45	36	48	70	24
Whoop. Cough Immunisation	659	589	601	676	725
„ Boosters ...	42	214	74	195	155
Vaccinations ...	4	—	120	320	337
Re-vaccinations ...	41	—	—	—	—
SCHOOL CLINIC :					
Diphtheria Immunisation ...	266	201	185	171	212
„ Boosters ...	987	694	589	683	518

CARE OF UNMARRIED MOTHERS AND ILLEGITIMATE CHILDREN.

This work has continued under the guidance of a Joint Case Committee, made up of members of the Domiciliary Services Sub-committee and of the Rochdale Welfare Mission.

I am indebted to Mrs. Lintern for the following report of the work done during the year.

CASES REFERRED DURING 1957 :

Expectant unmarried mothers	... ..	63
Aftercare unmarried mothers	... ..	6
Matrimonial problems	... ..	8
Children and preventive	... ..	2
Others	... ..	10
		—
		89
		—

TYPE OF ASSISTANCE REQUIRED :

Ante-natal and post-natal accommodation	... ..	12
Advice on affiliations and private agreements	... ..	7
Help with adoptions	... ..	10
Matrimonial and family problems	... ..	16
Material help given	... ..	17

Of the cases dealing with the illegitimate child, 56 were unmarried mothers and 7 were married women. The following is a brief summary of the results :—

Child kept by mother	... ..	46
Not yet born	... ..	1
In foster home or residential nurseries	... ..	3
Left district	... ..	5
Married to the putative father or to another man	... ..	13
Kept child but living with putative father	... ..	3

There were twins born to two of the unmarried mothers. In one case, twin boys, one twin died after two days survival, the other was placed for adoption. In the other case, twin girls, they were kept by their mother, after receiving material help. Later she married the putative father. Her own father was contacted and helped to pay a small deposit on a house for them.

Unmarried Mothers.

The ages of the unmarried mothers who were dealt with varied between 15 and 34 years. There were 39 under the age of 21 years. In six cases it was a second illegitimate child.

In all cases where mothers were accommodated in Voluntary Homes, financial help was required, but in most cases some contribution towards the fees was made by the girl herself or her parents. One or two cases were referred immediately after confinement and were in need of advice and material help. Others had to be transferred from hospital to a Mother and Baby Home, because they had no place to take the baby. Financial help was required for a term of six to eight weeks.

Every effort is made to contact the putative fathers and to make them accept their responsibility. Many mothers cannot apply for an Order against the putative father as they have no knowledge of his address and often know him only by a Christian name.

In the work of Moral Welfare we are concerned primarily with the building up and maintenance of good family life. Any breakdown in this life is bound to have its repercussions upon the members of the family, particularly upon the children and young people, and may well be a contributory factor in the breakdown of their own personal life. Every effort made to build up the family life of the Country is of the greatest national importance.

We also realise how great is the need for educational work in the realm of personal relationships. Many marriages which break down after only a short time are often due to lack of preparation for marriage, also to the fact that many people marry after knowing each other for only a few months.

The work the Committee is doing in Rochdale could not begin without the help of those who refer cases. We therefore thank all those who have helped in this way, whether they are Social Workers, Public Officials, Doctors, Almoners and Sisters of Maternity Wards, or private individuals. The work could not continue without the co-operation of those who are so willing to give advice and help when needed.

We owe a debt of gratitude to Medical Officers of Health in this and in other areas for their continued co-operation, help and advice.

JOINT COMMITTEE FOR CHILDREN NEGLECTED OR ILL-TREATED IN THEIR OWN HOMES.

This Committee, formed at the end of 1950, and comprising representatives of the Local Authority, the Statutory Services and Voluntary Organisations, continued its regular meetings during the year with the Medical Officer of Health as Chairman.

There were eleven meetings held, at which the following have been represented :—

ROCHDALE CORPORATION :

Education, Borough Treasurer's, Housing, Children's, Welfare Services, Police and School Medical Department.

N.S.P.C.C., PROBATION OFFICE, NATIONAL ASSISTANCE BOARD, HOSPITAL MANAGEMENT COMMITTEE, WAR PENSIONS WELFARE SERVICE.

PUBLIC HEALTH DEPARTMENT :

Maternity and Child Welfare, Public Health Inspectors, Moral Welfare Worker, Mental Health Workers, District Nursing Association.

It is encouraging to note that again no fewer than fifteen members were present at every meeting, while the average attendance for the eleven meetings was 18.

A total of fourteen new cases has been referred to the Committee from the sources set out below :—

Maternity and Child Welfare Department	...	...	...	...	8
School Medical Department	...	...	...	...	4
Housing Department	...	...	...	...	1
Social Worker	...	...	...	...	1
					—
					14
					—

At the beginning of 1957 there were 75 cases in the "live" register. During the year 20 of these had further reports made upon them and 25 were closed. In addition, there were 14 new cases in 1957. At the end of the year 64 cases remained in the "live" register.

The following list shows the number of times the 34 cases have come up for discussion and further report :—

	Old Cases	1957 Cases
Once only ...	2	5
Twice ...	4	3
Three times ...	—	1
Four times ...	4	3
Five times ...	—	1
Six times ...	1	1
Seven times ...	1	—
Nine times ...	2	—
Eleven times ...	6	—
	—	—
	20	14
	—	—

An average of fourteen cases came up for discussion at each meeting of the Committee.

The following is a very brief summary of the conditions in each of the fourteen new cases as they were brought to the notice of the Committee :—

CASE NO. 1 (Referred by C.W.)—One child ; father Polish. Mother habitual drunkard, disappears without warning and leaves the child uncared for.

CASE NO. 2 (Referred by C.W.)—Two illegitimate children cared for by grandparents, mother left home to live with a married man. Children not having proper care.

CASE NO. 3 (Referred by C.W.)—One child in hospital most of its life, three children at home and another expected. Father will not work, drinks and ill-treats mother.

CASE NO. 4 (Referred by C.W.)—Baby with mentally backward mother, arrived in Rochdale from another town, where resident in hostel. Three other children in care and husband, aged 78 years, in hospital.

CASE NO. 5 (Referred by Social Worker)—Three children and mother residing with a relative, father left home. Have been supervised by Department for past 12 months.

CASE NO. 6 (Referred by Housing Dept.)—One illegitimate child with epileptic mother. House and child neglected.

CASE NO. 7 (Referred by C.W.)—One child. Parents cannot read or write, inveterate scroungers and refuse Health Visitor admission.

CASE NO. 8 (Referred by S.M.O.)—Eight children in poor housing accommodation and consequent neglect. Father epileptic.

CASE No. 9 (Referred by S.M.O.)—Two children, one mentally deficient living with mother and grandmother. Husband in gaol.

CASE No. 10 (Referred by C.W.)—One child illegitimate suffers from eczema. Not having proper care and attention when discharged from hospital.

CASE No. 11 (Referred by C.W.)—Four children, another expected. Children neglected. Father not working. Complaints from neighbours.

CASE No. 12 (Referred by S.M.O.)—Two children, one of whom has already been before Juvenile Court. Mother is not co-operative.

CASE No. 13 (Referred by C.W.)—Two boys and an illegitimate girl. Husband does not provide food and clothing for them. Matrimonial problem.

CASE No. 14 (Referred by S.M.O. & C.W.)—Four children, including two illegitimate. Grandmother has the children with her sometimes when visited. Poor home. Children verminous on several occasions.

It will be seen from these descriptions that it is unlikely that many of the cases will have been solved within the year. It is, however, true that most of them have considerably improved.

NURSERIES AND CHILD MINDERS REGULATION ACT, 1948.

Under the first part of this Act, premises where the children are to be looked after during the day must be registered. Under the second part of the Act, persons who receive more than two children, who come from more than one household to be looked after for reward during the day, must also be registered.

In the latter category, only two persons were registered during the year to receive a total of eleven children.

In the former category 6 premises were registered at the end of the year. All of these are Nurseries attached to cotton mills in the town. In total, these Nurseries were registered for the accommodation of 296 children. During the year 211 children were admitted to the Nurseries and 212 left the Nurseries. At the end of the year there were 270 on the registers as against 271 on the registers in 1956.

The Matrons of the various Nurseries submit a quarterly report on the children and the Medical Officer in charge of Child Welfare pays a visit to each Nursery at three-monthly intervals. Each Nursery has its own visiting Medical Officer, who is usually the General Practitioner associated with the parent mill.

Domestic Help Service

During the year the Domestic Helps assisted in 312 cases (29 cases of maternity, 256 chronic cases and 27 general sickness) as against 264 cases during 1956. The average period over which assistance was given was 14 days for maternity, 149 for chronic cases and 19 for general sickness. These figures still reflect the concentration on the care of the elderly sick and infirm in their own homes.

At the end of the year 45 Domestic Helps (17 full-time and 28 part-time) were employed as compared with 45 (19 full-time and 26 part-time) at the end of the previous year.

Persons who claim their inability to pay the full charge of 3s. 0d. per hour for the services of a Domestic Help are required to state their financial circumstances and are assessed in accordance with an approved scale which is based on a scale of charges recommended by the Association of Municipal Corporations.

The average rate of recovery of the cost of this Service during the year was 9% of the total cost. No charge was made to 221 households out of the total number of households to which this service was rendered. The corresponding figures in the previous year were 11% recovered and 184 households in which no charge was made.

The demand on the Service was not much affected by the epidemic of Influenza, because of the short duration of the illness in the majority of cases. Strangely enough, although there was not a great deal of effect on the staff at the time, there was a very definite increase in the sickness rates amongst members of the staff about one to two months after the Influenza had died down.

The tendency for the staff to build up into a largely permanent one continues. It might be said that roughly two-thirds are permanent and one-third floating.

The majority of patients dealt with are found to be most co-operative and many are very appreciative. We have had a few awkward clients, but these are mostly elderly people amongst whom awkwardness towards their own relatives is not unknown. In fact, the Service often moves in at a point when the patience as well as the strength of the relatives has been exhausted.

It is disappointing to find from time to time, even though it be only in a small minority, the small amount of family feeling which exists. It is surprising to us to have to root out sons and daughters to visit the elderly father or mother.

This is predominantly a Service in which co-operation by everyone concerned is of the greatest importance. The needs of the patient vary and the state of the staff fluctuates considerably. The ability of the Organiser to make quick and personal survey of the situation is, therefore, of great value.

PREVENTION, CARE AND AFTER CARE.

Illness Generally.

Equipment for the nursing of cases at home is available either through the Home Nursing Service or from the Central Store.

Convalescent Home accommodation is provided for persons who are recommended by local General Practitioners, Specialists or Hospital Medical Officers. Arrangements were made during the year for the admission of 81 cases to Convalescent Homes, usually for a period of two weeks. Extensions were granted in seven cases on medical recommendation. Fare or transport was provided in two cases.

Accommodation was arranged for the 81 cases referred to, in the following manner :—

	Adults	Children
	—————	—————
West Hill, Southport	50	—
Grey Court, Hest Bank	12	—
Beechways, Southport	6	—
Others	10	3

The total cost of Convalescent Home accommodation was £450 6s. 0d., of which £97 12s. 6d., or 21.68% was recovered.

Respiratory Diseases cases (22) formed the largest single class of admissions, the remainder being from a wide variety of causes, Post Operative (17), General Debility (10), Anaemia (9), Nervous Debility (6), Cardiac Debility (5), Rheumatism (5), Gastric Conditions (4), Pneumonia (3).

Health Education.

Emphasis continued to be laid on personal advice in the homes and elsewhere between members of the Health Department staff and the actual persons and families concerned. In addition, every opportunity is taken of speaking on health subjects by invitation to the regular meetings of any interested organised bodies in the town.

Smoking and Cancer of the Lung.

Reports were made to the Health Committee and the Education Committee on Ministry of Health Circular 7/1957. It was decided that no special propaganda on the subject should be initiated, but that the subject should be included in general propaganda. The matter was also to be discussed by the Joint Consultative Committee of Head Teachers as to the best methods to be adopted in schools.

Mental Health Service

Staff.

Medical Officer of Health and Deputy Medical Officer of Health.
Duly Authorised Officers—two. Also act as Mental Health Workers.
Mental Health Workers—one.

Co-ordination with Regional Hospital Board, etc.

Mental Illness—Consultant Clinic held weekly by Regional Hospital Board medical staff, is attended by the Local Health Authority's Duly Authorised Officer for follow-up purposes. With scarcely any exception the supervision of patients on trial from mental hospitals, or on licence from mental institutions, is undertaken by the Duly Authorised Officers and the Mental Health Worker.

The Local Education Authority has no Educational Psychologist at present.

There is still no Child Guidance organisation available in this area. This is a very serious drawback. It seems unlikely that this will be overcome in the near future, since the real difficulty is the absence of Consultants trained in this work and, indeed, a shortage in the personnel seeking to train for this type of work.

	Under age 16		Aged 16 and over	
	M.	F.	M.	F.
1. Particulars of cases reported during 1957.				
(a) Cases ascertained to be defectives "subject to be dealt with". Number in which action taken on reports by:—				
(1) Local Education Authorities on children				
(i) While at school or liable to attend school ...	4	2	—	—
(ii) On leaving special schools	—	—	4	9
(iii) On leaving ordinary schools	—	—	—	—
(2) Police or by Courts	—	—	—	—
(3) Other sources	—	—	—	—
TOTAL of 1 (a).....	4	2	4	9
(b) Cases reported who were found to be defectives but were not regarded as "subject to be dealt with" on any ground	—	—	—	—
(c) Cases reported who were not regarded as defectives and are thus excluded from (a) or (b)	—	—	—	—
(d) Cases reported in which action was incomplete at 31st December, 1957, and are thus excluded from (a) or (b)	—	—	4	—
TOTAL of 1 (a)—(d) inc....	4	2	8	9

	Under age 16		Aged 16 and over	
	M.	F.	M.	F.
2. Disposal of cases reported during 1957.				
(a) Of the cases ascertained to be defectives "subject to be dealt with" (i.e., at 1 (a)), number				
(i) Placed under Statutory Supervision	4	2	4	9
(ii) Placed under Guardianship	—	—	—	—
(iii) Taken to "Places of Safety"	—	—	—	—
(iv) Admitted to Hospitals	—	—	—	—
TOTAL of 2 (a).....	4	2	4	9
(b) Of the cases not ascertained to be defectives "subject to be dealt with" (i.e. at 1 (b)), number				
(i) Placed under Voluntary Supervision	—	—	—	—
(ii) Action unnecessary	—	—	—	—
TOTAL of 2 (b)	—	—	—	—
(c) Cases reported at 1 (a) or (b) above who removed from the area or died before disposal was arranged	—	—	—	—
TOTAL of 2 (a)—(c) inc....	4	2	4	9
3. Number of mental defectives for whom care was arranged by the Local Health Authority under Circular 5/52 during 1957 and admitted to :—				
(a) National Health Service Hospitals.....	—	1	—	—
(b) Elsewhere	3	—	—	—
TOTAL	3	1	—	—
4. Total cases on Authority's Registers at 31/12/57.				
(i) under Statutory Supervision	22	18	45	36
(ii) under Guardianship	—	—	—	—
(iii) in "Places of Safety"	—	1	3	9
(iv) in Hospitals	9	10	49	46
TOTAL of 4 (i)—(iv) inc....	31	29	97	91
(v) Under Voluntary Supervision	—	—	5	7
TOTAL of 4 (i)—(v) inc....	31	29	102	98
5. Number of defectives under Guardianship on 31/12/57, who were dealt with under the provisions of Section 8 or 9, Mental Deficiency Act, 1913 (Inc. in 4 (ii))				
—	—	—	—	—
6. Classification of defectives in the Community on 31/12/57 (according to need at that date)				
(a) Cases included in 4 (i)—(iii) in need of hospital care and reported accordingly to the hospital authority :—				
(1) In urgent need of hospital care :—				
(i) "cot and chair" cases	1	1	—	—
(ii) ambulant low grade cases	2	—	—	—
(iii) medium grade cases	3	—	—	—
(iv) high grade cases	1	—	—	—
TOTAL urgent cases	7	1	—	—

	Under age 16		Aged 16 and over	
	M.	F.	M.	F.
(2) Not in urgent need of hospital care :—				
(i) "cot and chair" cases	—	—	—	—
(ii) ambulant low grade cases	—	—	—	—
(iii) medium grade cases	—	—	—	—
(iv) high grade cases	—	—	—	—
TOTAL non-urgent cases...	—	—	—	—
TOTAL OF URGENT AND NON-URGENT CASES ...	7	1	—	—
(b) Of the cases included in items 4 (i), (ii) and (v), number considered suitable for :—				
(i) occupation centre	19	17	1	3
(ii) industrial centre	—	—	—	—
(iii) home training	—	—	—	—
TOTAL of 6 (b)	19	17	1	3
(c) Of the cases included in 6 (b), number receiving training on 31/12/57				
(i) in occupation centre (including voluntary centres)	19	17	1	3
(ii) in industrial centre	—	—	—	—
(iii) from a home teacher in groups	—	—	—	—
(iv) from a home teacher at home (not in groups)	—	—	—	—
TOTAL of 6 (c)	19	17	1	3

Ascertainment.

During the year four boys and two girls under the age of sixteen years were notified under Section 57 (3) of the Education Act, 1944. Of these, one boy and one girl attend the Occupation Centre full time.

There were 23 young persons notified under Section 57 (5) of the Education Act, 1944, 12 males and 11 females. Of the 23 cases mentioned, action was incomplete in respect of 4 boys.

No person was reported through the Courts during the year.

Short Stay Cases (Ministry of Health Circular 5/1952).

One girl under 16 years was accommodated in a Mental Deficiency Hospital through the Manchester Regional Hospital Board. Three boys under 16 years were accommodated in private Short Stay Homes approved by the Ministry, the fees for which are between 7 and 10 guineas weekly. Cases in the main are only admitted to Private Homes when the Regional Hospital Board is unable to provide accommodation elsewhere.

Provision for short term emergency care in cases of defectives whose parents or guardians are unable to look after them because of illness in the family or some other temporary domestic crisis is recognised as an essential component

of any adequate scheme of community care. Beyond notifying the Board of Control that such a case has been admitted, no legal formalities are involved.

Residential Care.

During the year one adult and five cases under sixteen years were admitted to Mental Deficiency Hospitals. It would be difficult to imagine a more diverse set of circumstances which determined the necessity for admission in these individual cases.

The 114 cases accommodated in hospitals for mental defectives are spread over several hospitals, but are mainly accommodated in either Brockhall, Calderstones or the Royal Albert Hospitals.

There are thirteen cases in "Places of Safety". The number of persons so accommodated at Birch Hill Hospital has been reduced from fourteen in 1956 to twelve this year.

At the end of the year eight defectives were on the Regional Hospital Board's waiting list for Institutional care. The bed situation has not improved yet, but there is a prospect of some expansion in the near future.

One male patient under sixteen years of age died of Pneumonia.

Supervision.

If there is no need, for his own sake or for the sake of others, to remove a defective from his home, the case is best met by Statutory Supervision. This means that the defective is visited regularly by an Officer of the Local Health Authority for the purpose of ensuring that conditions continue to be satisfactory and care continues to be adequate. On the 31st December, there were 133 cases under community care. Of these, 121 were under Statutory Supervision, 62 are in regular employment, 16 are unemployable and 43 are sixteen years of age or under. Of the cases under Voluntary Supervision, 4 are in regular employment and 8 are in receipt of National Assistance. During the year nine cases were removed from the register of Statutory Supervision after proving over a period of years that they were quite capable of managing themselves and their own affairs. One case under Voluntary Supervision was dealt with in a similar way. This removal from the register does not always mean the breaking of the bond between officer and "client", a fact from which the Department derives considerable satisfaction.

During the year 687 visits were made by the Mental Health Worker to the homes and places of employment, etc. of mental defectives. This number is very much less than during the previous year, because sickness prevented Miss Oliver taking over when Miss Lambert left in July. Miss Lambert had been with the Department since its inception in 1948 and many of the Rochdale families had occasion to be grateful for her close and kindly interest in their welfare.

Occupation Centre.

The Occupation Centre staff consists of a Supervisor, 6 Assistant Supervisors (4 qualified), a Caretaker and a Meals Server.

At the end of 1957 there were 56 children on the register, 40 from the Borough itself and 16 from the adjoining area of the County.

During the year seven children were admitted. One boy was transferred to High Birch Special School and one girl was admitted to an Institution for Mental Defectives.

A newly converted classroom on the second floor and the appointment of an additional qualified Assistant Supervisor enabled an addition group to be formed. The classes are now :—Juniors 1, 2 and 3 ; Senior Girls ; Senior Boys ; together with a special group made up of low-grade children.

The large garden shed which was provided during the year proved a great asset, not only as a playroom for the low-grade children, but also for storing play equipment.

The Garden Competition aroused keen interest this year. Each child had its own individual garden and derived great pleasure from this.

Whilst on holiday at Weymouth one of the boys met with no mean success. He entered a children's musical talent competition because he has outstanding ability in drum playing. He reached the finals of the competition and played "The Dambusters' March" accompanied by the entire Pier Orchestra. About 1,500 people were present when he was awarded the first prize. He is now very keen to seize every opportunity of practising his art in the Centre during the musical sessions.

Events during the year included :—

1. Visit to the Children's Art Exhibition, Rochdale Art Gallery.
2. Summer Outing—Junior Department to Lyme Park, Senior Department to Lytham and St. Annes.
3. Harvest Festival—Each class presented its own Harvest performance and this enabled each child to take an active part in the service.
4. Parents' Open Days—These were arranged in class groups.
5. Christmas Party.
6. Visit to Rialto Cinema to see "Oklahoma"—This was for training in social recreation and a "follow-on" to our own sound projector.

An examination of the above list of events will show that the children at this Centre have now gone very much beyond the original conception of an Occupation Centre for Mental Defectives. One of the chief aims within the Centre is to make the children as socially acceptable as is possible. This aspect, sometimes overlooked in the pursuit of more material ends, is of tremendous

importance in many ways. Parents who have hitherto been hampered in seeking holidays, or indeed in excursions away from their own homes, because of the embarrassment of a mental defective, now find it quite an easy matter to take with them a child who has been properly trained in social conduct.

The same thing applies for those children who are ultimately able to perform some type of wage-earning work. The less they "differ" from other children in appearance and conduct, the better are their chances of obtaining and keeping employment.

The seven years since the Centre opened have been years first of experimentation and then of progress. It is clear that in certain directions very little progress can ever be made. Nevertheless, it is becoming increasingly evident that outside those limits imposed by the level of intelligence, very considerable improvement can be made in personality and in social acceptance.

Interested parties who visit the Centre for the first time very often do so with a feeling of some trepidation, if not for their physical welfare at any rate for their susceptibilities. None, however, leave it without a feeling of pleasure at what they have seen of children quietly and happily engaged within their own capacity.

Approach to these children by means of music and rhythm continues to be explored and we feel that there is still more which can be done along these lines. This is quite distinct from the use of music in recreation.

MENTAL PATIENTS

Analysis of Admissions to Mental Hospitals, 1957.

During the year 151 persons were admitted to Mental Hospitals from the Borough. Of these, 77 were males and 74 females. Many others received treatment as out-patients at Sparthfield Clinic and Birch Hill Hospital. The total admissions for the year show an increase of 37 over the 1956 total and there was one more in hospital in December, 1957 than in December, 1956.

Of the above number, 40 males and 38 females had previously been admitted to hospital for mental treatment.

Of the total patients admitted to hospitals, 96 (64%) were admitted as Voluntary patients under the provisions of the Mental Treatment Act, 1930. Eight persons were certified as persons of unsound mind before admission, and six persons were so certified after admission. Nine patients were removed to hospital under Section 20 of the Lunacy Act, 1890 (Three Day Orders) for their own safety or the safety of others.

Twenty-eight patients were admitted under Orders made by Justices for fourteen days' observation. Of these, fifteen elected to stay beyond that period as Voluntary patients to continue their treatment. Two were discharged after fourteen days, whilst the remainder recovered after further detention of fourteen days in accordance with the Amended Provisions of Section 21A of the Lunacy Act, 1890. Four patients were transferred to other hospitals.

Two patients were certified in the Borough Magistrates' Court following the evidence of two Medical Officers, in each instance in accordance with the Provisions of the Magistrates' Courts Act, 1952.

During the past year the percentage of Voluntary patients who enter hospital has considerably increased in comparison with those who are admitted under some form of Order. The number receiving out-patient treatment continues to increase and many individuals are now seeking treatment for the milder forms of emotional disturbance on their own initiative.

Although the passage of time continues to break down the old attitudes and opinions of the public towards mental ill-health, there are still to be found some who retain an old-fashioned outlook in regard to nervous and mental disorders generally. However, it is gradually becoming more and more recognised that these disorders are closely allied to the other forms of ill-health, and should be thought of in the same manner.

After discharge from hospital and whether completely recovered or not, an increasing number of patients are keeping in touch with the Mental Health Officers, whose advice and guidance often proves helpful in enabling the patients to avoid a relapse or recurrence.

Hospital Treatment.

	Males	Females
	—————	—————
Mental Patients in hospitals on the 31st December, 1956	120	167
Admissions during the year... ..	77	74
Discharges during the year	67	85
Mental Patients in hospitals on the 31st December, 1957	130	156

Analysis of Patients discharged during 1957.

Recovered	19	25
Relieved	35	50
Not improved	5	2
Transferred to other hospitals	1	3
Deaths	7	5

The 286 patients in hospitals at the 31st December, 1957 were distributed as follows :—

Prestwich	...	...	86	Lancaster Moor	...	21
Birch Hill	...	...	80	Rainhill	...	14
Whittingham	...	...	39	Fairfield	...	10
Winwick	...	...	23	Springfield	...	6
				Others	...	7

Visits to Mental Patients during the year	...	...	2,064
Night Calls	...	...	114

Dr. S. Falk, Consultant Psychiatrist, continues in charge of the Psychiatric Clinic in Rochdale. The Clinic is held at Sparthfield, Manchester Road, Rochdale. There are two sessions weekly, Monday evening and Thursday during the day-time, and Dr. Falk is assisted by his deputy Dr. J. Steen and by Dr. A. J. Skentelberry from Birch Hill Hospital. One of the Mental Health Workers attends the evening session and is able to do valuable follow-up work there, as well as to provide useful background information in many cases.

Prevalence of Infectious Diseases

The grand total of infectious diseases this year is five times that of last year and some 50% more than the recent average. This apparently alarming situation is almost entirely accounted for by Measles which was present in epidemic form from mid-March to mid-July.

Incidentally, the total reached by this epidemic is the highest recorded in any calendar year since 1916. It is an interesting point that with 3,000 cases we had no fewer than 80 deaths from Measles in 1916, and two years later 1,700 cases produced 30 deaths. This year not a single death was recorded out of nearly 2,000 cases.

In some ways more worrying, although numerically much less important, was a minor outbreak of Dysentery, which straggled over the town towards the end of the year and bids fair to figure largely in the 1958 Report. The majority of the cases were due to Sonne bacillus and the illness was quite mild. On the other hand, several of them took a considerable period to clear up bacteriologically.

	1957	1956	Average 1951-55
Scarlet Fever	44	62	98
Diphtheria	—	—	—
Tuberculosis	64	72	91
Pneumonia	47	15	30
Whooping Cough	96	211	128
Measles	1,924	20	837
Chicken Pox	19	15	39
C.S. Meningitis	—	6	1
Poliomyelitis	1	11	4
Dysentery	58	32	25
Other Diseases	26	26	35
	<u>2,279</u>	<u>470</u>	<u>1,288</u>

In addition to the above formal notifications, the following cases of infectious diseases were brought to the notice of the Department, chiefly through the medium of schools :—Chicken Pox 16, Whooping Cough 6.

Poliomyelitis.

There was only one case which occurred during the year in a three year old child in April and this was of the paralytic type. Fortunately, however, the residual weakness is scarcely appreciable.

Food Poisoning.

(a) Notifications as returned to the Registrar General :—	15
(b) Cases otherwise ascertained :—	1
(c) Fatal cases :—	1

Outbreaks	No. of Outbreaks		No. of Cases		Total No. of Cases
	Family Outbreaks	Other Outbreaks	Notified	Otherwise ascer.	
Agent identified					
(i) Clostridia Welchii	1	—	4	—	4
(ii) Staph. Aureus ...	1	—	8	—	8*
Agent not identified ...	1	—	2	—	2

Single Cases	Notified	Otherwise ascer.	Total Cases
Agent identified			
(i) Clostridia Welchii	—	1†	1
(ii) Salmonella—Heidelberg	1	—	1

Salmonella Infections (not food-borne) :—

Salmonella Type	Outbreaks		No. of Cases	Single Cases	Total No. of Cases (Outbreaks and Single Cases)
	Family	Other	(Outbreaks)		
Heidelberg	—	1	1	1	1

* This group of eight cases due to Staph. Aureus consists of two families (6) and (2) forming part of a major outbreak in Manchester, of which notes were sent to the Medical Officer of Health, Manchester, for inclusion in his Report, July, 1957.

† Adult man admitted to hospital 5 a.m. 27/10/57, as "Gastric crisis—e.g. perforated ulcer". Major symptom—cramp spreading upwards from the legs. Died early 28/10/57. Bacillus Welchii recovered post mortem from the stomach. No other cases. Nothing recovered from foodstuffs.

Tuberculosis

There were 54 new cases notified, as against 51 the previous year. The new cases in 1955 totalled 64 and during the five years 1950-54 there was an average of 87.

Of these 54 cases, 49 were Pulmonary and 5 Non-Pulmonary.

In addition, 10 cases, 9 Pulmonary and 1 Non-Pulmonary, came to the knowledge of the Department for the first time otherwise than by notification.

Average 5 year periods	NOTIFICATIONS		
	Pulmonary	Non- Pulmonary	Total
1933—37	81	26	107
1938—42	84	29	113
1943—47	71	20	91
1948—52	89	15	104
1953	51	2	53
1954	71	3	74
1955	57	7	64
1956	46	5	51
1957	49	5	54

Although the notification figures are practically the same as last year, the picture is somewhat different. The 1957 total was increased at the end of the year by nine cases from the Mass Miniature Radiography Survey. One or two of these cases might never have been notified. Others would, no doubt, have been postponed to 1958 but for the Survey.

It is too early to give details of the Survey yet, but the gross details are as follows :—

			No. examined	Cases discovered
School Children	...	...	Males 1,190	—
	...	...	Females 1,220	—
Adults at Static Unit	...	...	Males 4,702	3
	...	...	Females 5,649	3
Adults at Mobile Unit	...	...	Males 7,786	2
	...	...	Females 5,560	6
			26,107	14
			26,107	14

Altogether, therefore, almost 2,000 examinations were required to discover one new case of Pulmonary Tuberculosis. In fact, only nine new cases of Pulmonary Tuberculosis were notified by the Clinic.

The following Table sets out the number of deaths and mortality rates for the years 1948 and onwards. The virtual disappearance in this ten years of Non-pulmonary Tuberculosis as a cause of death is noteworthy.

Year	Pulmonary Tuberculosis		Non-Pulmonary Tuberculosis	
	Deaths	Rate per 1,000 pop.	Deaths	Rate per 1,000 pop.
1948	44	0.50	5	0.06
1949	15	0.17	4	0.04
1950	38	0.43	4	0.04
1951	23	0.26	4	0.05
1952	26	0.30	4	0.05
1953	23	0.27	2	0.02
1954	13	0.15	1	0.01
1955	9	0.10	1	0.01
1956	13	0.15	1	0.01
1957	4	0.05	—	—

The 54 new cases notified, together with the number of deaths resulting from the disease are arranged in the summary below :—

Age Periods	New Cases				Deaths			
	Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary	
	M.	F.	M.	F.	M.	F.	M.	F.
Under 1 year	—	1	—	—	—	—	—	—
1—5 years	1	—	—	—	—	—	—	—
5—15 „	1	1	1	2	—	—	—	—
15—25 „	5	5	1	—	—	—	—	—
25—35 „	2	5	—	1	—	—	—	—
35—45 „	4	7	—	—	—	—	—	—
45—55 „	7	1	—	—	4	—	—	—
55—65 „	4	3	—	—		—	—	—
65 years and over	2	—	—	—	—	—	—	—
TOTAL	26	23	2	3	4	—	—	—
1956	27	19	1	4	9	4	—	—

It is interesting to note that of the 54 new notifications arising in Rochdale during the year a fairly clear and direct cause could be established in no fewer than thirty cases. In most of these a family history was discernible. It is thus evident that Tuberculosis, so far as this County Borough is concerned, has now become an infectious disease which could be eliminated by a process directed at and circling round the individual known case.

It may well be that all forms of cross-screening of the population could soon be abandoned as both unnecessary and wasteful.

In the same connection, it is to be noted that whereas in 1956 the number of sputum positive cases at home was 31, in 1957 the corresponding number was 21, a very considerable decrease in the number of infectious foci in the town.

The following is a summary of the known cases of Tuberculosis in the Borough at 31st December, 1957 :—

	Males	Females	Total
	—————	—————	—————
Pulmonary	322	246	568
Non-Pulmonary...	28	36	64
	—————	—————	—————
	350	282	632
	=====	=====	=====

No fewer than 118 cases were notified ten years or more ago.

The old system of removing from the register after a set number of years of quiescence and arrest seems now to have been abandoned. The present view would appear to be that it is better to continue supervision even at quite long intervals in the belief that there is always a possibility of a breakdown under stress.

Residential Treatment.

During the year 59 Rochdale patients were, at their first examination, recommended for Sanatorium treatment. Throughout the year there was virtually no waiting list for admission to Sanatorium.

Handicrafts Classes (Report by Mr. J. Wilson, Director of Welfare Services).

The handicrafts classes for tuberculous patients which, for males, commenced in May, 1954 and for females, in April, 1957, have continued during the year ended 31st December, 1957, the average attendance of males being 4 and of females 7. Each week two sessions are held for males and two for females. Visits are made to members who, for health reasons, find themselves temporarily unable to attend the classes.

Much interest is shown by members of both groups, but particularly by the females, and the friendly contacts they make, coupled with the practical knowledge they are gaining, is of considerable help to them.

Chest Clinic (Dr. W. R. May, Consultant Physician).

The following Table shows the work carried out at the Chest Clinic during the year :—

	Adults		Children under 16 yrs.	Total
	M.	F.		
Number of Clinic Sessions				346
Number of Treatment Sessions				106
Total attendances	1619	1356	1071	4046
New Patients examined found :—				
(a) Tuberculous	28	27	8	63
(b) Non-Tuberculous	165	103	61	329
Contacts examined	34	34	81	149
Contacts found to be Tuberculous	—	1	1	2
B.C.G. Vaccinations	1	29	79	109
Mantoux Tests	5	103	371	479
Treatment recommended (Tuberculous cases only) :—				
(a) Sanatorium or Hospital	26	25	8	59
(b) Domiciliary	2	2	—	4
Removed from Register	6	11	3	20
Visits by Nurses				5070

Re-housing of the Tuberculous.

The details of this scheme of co-operation between the Health Committee, the Housing Committee and the Hospital Management Committee through the Consultant Chest Physician, have been given in previous Reports.

At the end of 1956 there were six cases awaiting consideration by the Medical Officer of Health, whilst three already approved by the Housing Committee were awaiting re-housing. Two were still under review from 1955, one a case of lack of co-operation and the other a case where sanatorium treatment had not been completed.

During 1957, thirteen cases were recommended by the Chest Physician. Of these, one was re-housed privately and another was re-housed through the ordinary Points Letting Scheme. Nine received the support of the Medical Officer of Health and were eventually approved by the Housing Committee for re-housing, while two remained under consideration by the Medical Officer of Health.

Of the nine approved, seven were re-housed by the end of the year while two still awaited houses of a particular type.

Of the two under review from 1955, one has been approved and re-housed and the other is now outside the scheme. Of the six under review from 1956, one died, three were re-housed through Demolition Orders on their houses and two were approved by Committee and re-housed.

Skin Testing.

Heaf testing of school children is dealt with in the School Medical section of the Report.

Venereal Diseases

No material change has been made in the day-to-day arrangements at the end of the year. There were 464 (276 males and 188 females) dealt with during the year, as against 484 in 1956. The number of new cases was 160 (117 males and 43 females), but of these 86 did not require treatment.

The following summary gives the number of cases dealt with during the past three years.

	1957	1956	1955
	—	—	—
1. No. of persons under treatment or observation at commencement of year	301	264	233
2. No. of persons who ceased to attend in previous years and who returned to the Centre suffering from the same infection	1	1	1
3. No. of new cases who have had previous treatment	2	4	2
4. No. of new cases	160	215	212
Total cases dealt with	464	484	448
5. Total attendances :—			
At which patients saw Physician	1,425	2,002	2,314
At which patients did not see Physician	331	337	311
6. Patients not completing treatment and/or observation	18	—	3
7. No. discharged after completion of treatment and/or observation	168	182	177

Sanitary Circumstances of the Area

I am indebted to the Chief Officials of the various Departments of the Corporation for information included in this section of the Report, also to the Manager of the Heywood and Middleton Water Board.

Water Supply.

The County Borough draws its water supply from two sources, the Corporation Waterworks, and the Heywood and Middleton Joint Water Board. A summary of the reports submitted by Mr. R. N. Simpson, M.Inst.W.E., Waterworks Engineer, Rochdale, and Mr. A. F. Herd, A.Inst.W.E., Manager of the Heywood and Middleton Water Board, is set out below in the manner prescribed by the Ministry of Health.

	Rochdale	Heywood & Middleton
(i) Whether the water supply of the area and its several parts had been satisfactory.		
(a) in quality 	Satisfactory	Satisfactory
(b) in quantity 	Satisfactory	Satisfactory
(ii) Where there is a piped supply whether bacteriological examinations were made of the raw water and, where treatment is installed, of the water going into supply if so, how many and the results obtained the results of any chemical analyses	Chlorination 126 samples— satisfactory 87 samples— satisfactory	Chlorination 104 samples— satisfactory 119 samples— satisfactory
(iii) Where the waters are liable to have plumbo-solvent action, the facts as to contamination by lead, including precautions taken and number and result analyses 	Plumbo-solvent action, pH value controlled by addition of lime No dissolved lead found in any samples.	Plumbo-solvent action, pH value controlled by addition of chalk No dissolved lead found in any samples.
(iv) Action taken in respect of any form of contamination 	Nil.	Nil.
(v) Particulars of the number of dwelling houses and the number of the population supplied from public watermains	Population 83,000 approx.	Population 4,500 approx.
(a) direct to the houses 	28,560 approx.	1,414 approx.
(b) by means of stand-pipes 	Nil.	Nil.

Drainage and Sewerage.

At Roch Mills Sewage Purification Works the sewage is screened after grit removal and then passed through primary and secondary sedimentation tanks. Half the flow is then passed through an activated sludge plant constructed on the Kessener System and the other half is pumped to bacteria beds. The sludge drying area has been increased during the year. Satisfactory effluents are obtained.

The scheme to connect the sewers of the Wardle Urban District to the Rochdale sewers has been submitted to the Ministry of Housing and Local Government and its decision is awaited.

Rivers and Streams.

The Mersey Rivers Board is responsible for the prevention of pollution of rivers and streams in this area. The Corporation co-operates with the Rivers Board in providing facilities for the discharge of polluting effluents to the sewers for subsequent purification at the Sewage Works.

A number of agreements have been made during the last few years with local manufacturers which have considerably reduced the river and stream pollution in the County Borough area.

The cleansing of some brook courses has been carried out during the past year.

W. H. G. MERCER, B.Sc., A.M.Inst.C.E.,
Borough Surveyor.

Meteorological Notes.

This summary of the features of the year, as recorded at the Meteorological Station, Roch Mills Sewage Works, is included by the courtesy of the Borough Surveyor.

			Mean	Total	Sunshine	
			Temperatures	Rainfall	Total	Daily
			Deg. F.	Inches	Hrs.	Average
1953	...	...	49	38.42	1206.1	2.7
1954	...	...	47	55.97	999.3	3.8
1955	...	...	47	33.77	1394.6	3.4
1956	...	...	46	45.87	1135.9	3.1
1957	...	...	48	46.19	1166.1	3.2
Mean	...	...	48	47.86	1218.7	3.3

Mean temperatures and sunshine for the year were slightly above average. Rainfall was above average and sunshine average.

October was the wettest month with 6.29 ins., having 19 rainy days. The highest rainfall in any one day occurred on the 31st December when 1.79 ins. fell in 24 hours.

April was the driest month with 0.54 ins. of rain recorded on eight days, whilst February and December were the coldest months.

The highest temperature of 83° was recorded on the 28th June, whilst the lowest temperature of 21° was recorded on the 4th December.

June had by far the largest amount of sunshine, with the 15th and 17th both having 15.7 hours. December, however, had the lowest sunshine with only 30.1 hours for the whole month, against June with 277 hours. On 153 days in the year less than one hour's sunshine was recorded.

Appreciable fog occurred on 28 days, chiefly in October and December.

Public Cleansing.

The policy, which has been put into effect over the last few years, of replacing old refuse collection vehicles with modern machines and of reconstructing the refuse separation and incineration plant has now begun to show results. Delays on refuse collection due to vehicle and plant breakdowns have been virtually eliminated and travelling time between collection and disposal point reduced. The frequency of refuse collection over the last twelve months has been the highest for many years and approximated to a weekly collection over the greater part of the year.

An increased yield of salvage has resulted from the first twelve months of working of the new plant.

Although not so difficult as a few years ago, the recruitment and retention of suitable labour remains the most serious obstacle to a fully efficient service.

The number of British Standard dustbins supplied under the Corporation's scheme as a charge against the general rate was 2,983.

A long-term programme for the provision of new public conveniences in those areas of the town still lacking these amenities has been approved and will be implemented as conditions permit.

No changes were made in street cleansing methods, the beat system being used for the sweeping of streets and mechanical gully emptiers for emptying and flushing street gullies.

W. R. Booker, M.Inst.P.C.,
Cleansing Superintendent.

Public Health Inspection of the Area.

During the year the staff of the Department consisted of the Chief Public Health Inspector and his Deputy, together with the Meat and Food Inspector and four Public Health Inspectors. One vacancy for a Public Health Inspector existed during the early part of the year but in May 1957 one of the Student Inspectors qualified and was appointed to the vacant position. One Trainee or Student Inspector was on the staff at the beginning of the year and one who had been undergoing further instruction at the Salford Royal Technical College during the latter part of 1956 and the early part of 1957, returned for further practical training during the summer. He passed his qualifying examination and obtained an appointment with another Authority.

During the year the Council formulated a scheme for the training of staff and as a result of this new scheme three applications for studentship were considered. A young lady was appointed but as she lacked one G.C.E. subject she could not immediately be classed as a trainee or Student Inspector. She therefore came to this Department in the first place as a Pool Junior and immediately took steps to obtain the G.C.E. subject which she required. In addition she undertook training in building construction—a qualification which she will require before she can be admitted to the examination for Public Health Inspectors. A vacancy for a Student Inspector existed therefore and this was not filled until early in 1958.

The Housing Survey Officer resigned during the year and as his duties were diminishing, arrangements were made for the Public Health Inspectors to do the work.

There are three Rodent Operatives attached to this Department and an Infectious Diseases Enquiry Officer works part time in the Department dealing mainly with disinfestation.

Most of the work of the Inspectors during the year has again been in connection with the repair of dwellinghouses and their outbuildings, this aspect of the work presented the same difficulties as have been mentioned in recent Annual Reports.

Most of the nuisances and defects were dealt with by informal means, i.e. by the issuing of Preliminary Notices which are in fact letters drawing attention to defects and suggesting remedies. During the year 997 such Preliminary Notices were issued. The Committee authorised the service of 92 Abatement or Statutory Notices to secure the abatement of nuisances and the remedy of sanitary defects in and around dwellings; 44 of these Abatement or Statutory Notices being served. In the remaining cases the work was carried out before the service of the Notices. In one case it was necessary to institute legal proceedings against the owner of the property and to obtain a Magistrate's Order to enforce

the execution of repairs. In 11 other cases concerning drains, rainwater pipes, closets, etc. the Statutory Notices were not complied with and the Corporation carried out the work in default of the owners. Subsequently arrangements had to be made to recover the cost of the work.

The following classified statement shows the nature of the works which were accomplished during the year. The statement also includes work carried out in Factories, Food Premises etc. following the service of Preliminary Notices but excludes work done under the Housing Acts. The work included in the statement is very similar in nature to that referred to in previous Annual Reports but it may be noticed that this year there are included 70 notices dealing with inadequate or defective water supplies. These have all been the result of service pipes being partially blocked with sediment, thus reducing the pressure and the amount of water available to the users. In co-operation with the Waterworks Department it was possible to obtain a remedy in all these cases and generally the cost to the owners of the property was quite small.

NATURE OF NUISANCES DEALT WITH.

HOUSES—

Verminous dwellings disinfested	...	...	...	...	...	...	39
Dirty houses cleaned	...	...	...	...	...	...	21
Repairs to roofs, floors, walls, eavestroughing rainwater pipes, chimneys and general repairs to brickwork or stonework (including dampness) and repair or renewal of house fittings	...	...	...	...	...	...	794

YARDS, PASSAGES, ETC.—

Repairs to yard surfaces, gates, walls, etc.	...	...	...	...	...	...	15
Offensive accumulations and stagnant water removed	...	...	...	...	...	...	111

SANITARY CONVENIENCES—

Closet buildings repaired	...	...	...	...	...	...	65
Closet fittings repaired	88

DRAINS—

Main or branch drains repaired or cleared	138
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GENERAL—

Absence or unsatisfactory condition of sanitary accommodation at factories and shops	30
Miscellaneous nuisances remedied	44

FOOD PREMISES*—

Defects of various kinds at food premises	287
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WATER SUPPLIES—

Obstructed or defective water service pipes	70
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* Further reference to this item is made under the section of the report dealing with the inspection and supervision of food.

The introduction of the Rent Act entailed a great amount of work of a new kind. This is described in more detail in another part of the Report but it had the effect temporarily of reducing the number of complaints received from tenants.

Rochdale Corporation Act 1948—Establishments for Massage and Special Treatment.

Part VIII of this Act provides that any person carrying on an establishment within the meaning of the Act without a Licence or exemption becomes liable to legal proceedings. During 1957 2 exemptions were extended and 21 licences were renewed.

During the year the Inspectors paid 17 visits of inspection to premises as Officers duly authorised in accordance with the provisions of the Act.

HOUSING.

Clearance Areas.

On 3rd January 1957 the Council made the County Borough of Rochdale Freehold Compulsory Purchase Order. This was submitted to the Minister and a number of objections to it were received. On 8th October 1957 the Minister held a public local enquiry concerning the Order and as a result the Order was confirmed without variation.

The Council were authorised to make a "well maintained" payment in respect of one house only and it was suggested that this payment should be made to the tenant.

The area contains 177 houses, 2 lock up shops and a warehouse but 4 of the houses had already been the subject of Demolition Orders or had been closed under the provisions of the Housing Acts and 8 others were vacant and derelict. There remained 165 occupied houses. Of these 165 houses, 62 were back to back houses, inset cottages or of the "not through" type. 142 of the houses had only a single dwelling room on the ground floor, only 18 had private yards, 35 had no yards. 112 had joint use of congested common yards. Many of the houses had no separate closet accommodation. Practically all the houses showed signs of dampness and in many of them there was serious dampness.

Individual Unfit Houses.

In the last Annual Report it was noted that the Housing Committee had been compelled to reduce the number of houses allocated for re-housing of the occupants of condemned houses. During 1957 however it became possible to increase the number of houses represented to the Committee. Representations concerning 126 houses were submitted to the Committee, 10 houses being empty

when the representations were made. The Housing Committee dealt with these representations as follows :—

Demolition Orders made	95*
Closing Orders made... ..	23
Undertakings accepted that the houses would be made fit ...	1
Representations still under consideration at the end of the year	7

* This figure includes 4 Corporation properties which were not the subject of formal Demolition Orders but which the Council agreed to demolish.

Certificates of Disrepair.

The Housing Repairs and Rents Act 1954 remained in operation until July 5th 1957 when its provisions concerning the issue of Certificates of Disrepair were replaced by the Rent Act 1957. A number of Certificates of Disrepair issued under the older Act remained in force at least so far as the items of disrepair were concerned. The Housing Repairs and Rents Act provisions concerning the increase of rent did not appear to have been widely adopted in the Borough but the Rent Act 1957 was given much more attention by the owners of property. For some months during the latter part of the year a great deal of the Public Health Inspectors' time was spent in dealing with applications for Certificates of Disrepair and in explaining the procedure to applicants and to owners of property. Nevertheless the Act appears to have had the effect of reducing the number of complaints which were received by the Department—apparently tenants preferred to use the Rent Act to secure the repair of defects rather than to submit complaints for attention by the Department either under the provisions of the Housing or of the Public Health Acts.

The following is a summary of the action taken under the provisions of the Rent Act 1957 between 6th July and 31st December 1957.

Number of applications for certificates	176
Number of decisions not to issue certificates	—
Number of decisions to issue certificates :—	
in respect of some but not all defects	113
in respect of all defects	63
Number of undertakings to repair given by landlords	87
Number of such undertakings refused by Local Authority ...	—
Number of Certificates issued	68
Applications by landlords to Local Authority for cancellation of certificates	1
Objections by tenants to cancellation of certificates	—
Certificates cancelled by Local Authority	1

Houses-let-in-lodgings.

The Housing Repairs and Rents Act 1954 provides means for securing the fitness of houses-let-in-lodgings according to the number of families accommodated. It also seeks to prevent the overcrowding of such premises. 74 inspections of these premises were carried out. It is unfortunate that persons having control of houses-let-in-lodgings are not required to notify the local authority of the existence of such premises and the powers therefore can only be applied to such premises as and when they come to the notice of the Department.

Enquiries concerning properties.

It has been the practice of the Department for some years to assist purchasers of property by giving them information about any property in which they are interested. This service again continued and during the year 340 such enquiries were received. In addition to this the Town Clerk's Department has made 1405 enquiries under the Local Land Charges Act. Officially this should involve no more than a search for any outstanding notices but it has been the practice of the Department to scrutinise each enquiry to see if the house is likely to become the subject of Housing Act procedure. In many cases specific enquiries were made on this aspect of the "search". In some cases it was not easy to predict the future of the properties concerned because of the difficulty in assessing the rate of progress of the slum clearance programme. During the year it became quite a regular practice for Solicitors dealing with property transfers to enquire whether the properties were included in a Smoke Control Area or whether they were likely to be so included.

Applications for Corporation Houses.

There has been a most remarkable reduction in the number of houses which required inspection and report in this connection; only 53 houses were inspected compared with 275 during 1956.

Housing Survey.

Although there was a still further reduction in staff allocated to this purpose, it was possible to complete the Survey as far as is necessary.

Table I summarises the position at the end of the Survey and takes into account as a nett figure not only those houses freshly surveyed, but also those which have been surveyed previously and are now demolished. The totals do not, therefore, represent the total work done throughout the Survey, but are related only to the state of the houses existing at the end of December, 1957. There are still many major problems facing us associated with the pre-1871 houses.

TABLE I.

House Type	Date of Erection					Totals
	Pre 1871	1871-1890	1891-1915	1916-1932	1932-1939	
Through	5,860	3,639	7,436	836	1,862	19,633
Back-to-back	1,911	55	—	—	—	1,966
Inset	309	5	—	—	—	314
Not through	748	18	—	—	—	766
Others Inspected— Shops, Hotels, Farms, etc.	463	108	112	15	9	707
TOTAL	9,291	3,825	7,548	851	1,871	23,386

TABLE II.

	Pre 1871	1871- 1890	1891- 1915	1916- 1932	1932- 1939	Total
Total No. in District	9,291	3,825	7,548	851	1,871	23,386
Baths	1,452	749	2,523	804	1,871	7,399
Hot Water B/Boiler	1,718	872	2,994	826	1,871	8,281
Hot Water Geyser	1,840	1,036	1,945	16	—	4,837
W.C.	8,488	3,741	7,149	851	1,871	22,100
W.W.C.	57	16	351	—	—	424
Pail	740	68	48	—	—	856
Privy	6	—	—	—	—	6
Water supply Satis.	9,146	3,821	7,542	851	1,871	23,231
Drainage Satis....	8,134	3,636	6,889	851	1,871	21,381
Food Store Satis.	294	56	388	718	1,738	3,194
Yards and Gardens	2,704	3,176	7,388	821	1,871	15,960
Sinks—Porcelain	5,815	2,801	6,152	848	1,871	17,487
Salt Glazed	213	178	422	3	—	816
Stone	3,263	846	974	—	—	5,083
Washing Facilities—						
Scullery	6,103	2,506	4,963	834	1,869	16,275
Kitchen	583	412	1,143	2	1	2,141
L.Rm/K.	664	552	1,071	8	—	2,295
L.Rm.	1,516	48	82	—	—	1,646
Cellar	332	258	214	—	—	804
Wash-house	93	49	75	7	1	225
Standard—Good	659	883	4,014	843	1,871	8,270
Medium	4,221	2,453	3,433	7	—	10,114
Poor	4,411	489	101	1	—	5,002

TABLE III.

	Type Pre 1871						Total
	Thro.	B.to B.	Not Thro.	Inset	Others		
No. in District	5,860	1,911	748	309	463	9,291	
Baths	1,157	7	24	—	264	1,452	
Hot Water B/Boiler	1,396	14	31	3	274	1,718	
Hot Water Geyser	1,378	246	94	31	91	1,840	
W.C.	5,527	1,742	511	284	424	8,488	
W.W.C.	49	—	6	—	2	57	
Pail	282	169	227	25	37	740	
Privy	2	—	4	—	—	6	
Water Supply Satis	5,824	1,902	679	295	446	9,146	
Drainage Satis.	5,347	1,599	482	281	425	8,134	
Food Storage Satis.	261	1	6	2	24	294	
Yards and Gardens	2,256	35	95	5	313	2,704	
Sinks—Porcelain	4,138	723	403	112	439	5,815	
Salt Glazed	141	50	14	4	4	213	
Stone	1,581	1,138	331	193	20	3,263	
Washing Facilities—							
Scullery	4,273	935	453	81	361	6,103	
Kitchen	553	—	15	3	12	583	
L.Rm/Kit.	552	43	39	9	21	664	
L.Rm.	119	918	226	216	37	1,516	
Cellar	285	14	10	—	23	332	
W.House	78	1	5	—	9	93	
Standard—Good	618	5	3	—	33	659	
Medium	3,281	425	158	102	255	4,221	
Poor	1,961	1,481	587	207	175	4,411	

The up-to-date estimate of the housing problem in Rochdale is, therefore, as follows :—

	1957	1956
Through houses in poor condition (Table III)	1,961	1,989
Back-to-back houses (Table III)	1,911	1,938
Not through houses (Table III)	748	777
Inset cottages (Table III)	309	311
Houses built 1871-1890—in poor condition (Table II) ...	498	498
Houses built 1891-1915—in poor condition (Table II) ...	101	101
	<u>5,528</u>	<u>5,614</u>

Common Lodging Houses.

There are two common lodging houses with 11 rooms containing 240 beds. 20 visits of inspection were made during the year. The houses were found to be clean and well conducted.

Closet Accommodation.

	Houses		Other Premises	Total
	Separate Accommodation	Joint Accommodation		
I Number of premises involved	424	432	37	893
II (a) Unsuitability or absence of sewer as primary obstacle ...	334	118	76	528
(b) Closets associated with properties due for demolition or improvement involving vacation of some houses	71	88	2	161
(c) Capable of conversion without much technical difficulty ...	19	3	17	39
III TOTAL PAIL CLOSETS ...	424	209	95	728
IV Total Pail Closets at December, 1956	448	239	105	792

The accommodation in the Borough at the end of December, excluding premises on the fresh water carriage system, was approximately as follows:—

Pail Closets	...	...	...	...	...	...	...	728
Waste Water Closets	...	...	...	...	...	...	...	424

In the last Annual Report it was mentioned that the Health Committee had increased the contribution which they offered towards the cost of converting pail closets and waste water closets. The hope was expressed that this would induce the owners of the property served by pail closets to proceed with conversions but the response continued to be disappointing as, although 64 pail closets were done away with during the year only 32 were actually converted,

the remainder being demolished along with condemned houses or being abandoned when business premises became vacant. The situation as regards waste water closets was a little more favourable, 113 being converted to the fresh water carriage system. The above Table shows that 728 pail closets were still in use to the end of the year.

It will be seen from this Table that the pail closets which now remain are chiefly those where there is technical difficulty in conversion, where conversion ought to be associated with housing improvement, or where the owners either have proved unco-operative or have not the financial resources necessary.

Smoke Abatement.

There were 121 smoke observations of one half hour each made during the year and these revealed 9 contraventions of the Public Health Act 1936, involving 8 firms.

In 7 cases the Committee authorised the service of a Smoke Notice and at the same time the attention of the firms was directed to the services offered by the National Industrial Fuel Efficiency Services organisation. Several of the firms concerned took advantage of the facilities offered. In the remaining case the firm concerned was already the subject of a Magistrate's Order to abate a smoke nuisance and therefore legal proceedings were instituted. The Magistrates imposed a fine of £5.

A Clean Air Exhibition was held during the year which was intended to emphasise all aspects of the atmospheric pollution problem and to indicate the remedies which are available. Strenuous attempts were made to publicise the Exhibition and the local press devoted a large amount of space to articles which were prepared in the Department. In spite of this and other publicity the attendance at the Exhibition was most disappointing. However, even if the Exhibition failed to attract visitors, the publicity appears to have aroused interest not only amongst industrialists, but amongst householders.

Smokeless Zone.

The premises in the Central Smokeless Zone have again been the subject of frequent observations and whenever smoke has been observed to be emitted, the premises have been visited and the source of the smoke investigated. As a result of investigations 13 offences were discovered and reported to the Health Committee. In 11 cases letters of warning were sent to the offenders, the remaining 2 cases were the subject of legal proceedings. In each case the Magistrates imposed fines of £2 and in one of the cases the offender was ordered to pay £3 3s. 0d. costs.

Smoke Control Area.

In January 1957 a report was submitted to the Health Committee concerning the proposed Kirkholt Smoke Control Area. This Area includes the Corporation housing estates known as Dicken Green, Kirkholt, Alder Road and Kirklees, and also includes private houses in Lowther Road, Shaw Road and Oldham Road. At the date of the proposal it contained 2,851 houses of which 422 were privately owned. In addition there were 45 premises of other kinds. After considering the report the Committee agreed in principle to the establishment of this Smoke Control Area and decided that the Minister of Housing and Local Government be informed. This was done and in July 1957 the Council were notified that the Minister agreed to their proceeding with a detailed survey of the Area prior to submitting an Order for confirmation by the Minister. At the end of the year the detailed survey was in hand, but much delayed by staff shortages.

Local Joint Consultative Committee on Atmospheric Pollution.

The Committee met once during the year and in addition to the subjects which are usually discussed the members of the Committee were asked to bring the requirements of the Clean Air Act to the notice of the bodies they represented. Particular attention was directed to the fact that in 1957 it was likely that sections of the Clean Air Act dealing with industrial premises would be brought into operation. In addition the Committee was given information concerning the Clean Air Campaign and was asked to enlist the assistance and interest of its associations.

Measurement of Atmospheric Pollution.

Three stations sited as under, provide records indicating the nature and extent of atmospheric pollution in the Borough. At each of these there is a deposit gauge and a sulphur dioxide gauge.

- A. Roch Mills Sewage Works.
- B. Near the Church of the Good Shepherd, Entwisle Road.
- C. Foxholes House, Rugby Road.

By this arrangement it is hoped that the Roch Mills gauges will give an indication of pollution where the prevailing south-west wind enters the Borough and before it normally receives the products of combustion produced in the town. The other two stations, being situated to the north-east of the Roch Mills site, should give some indication of the pollution of the atmosphere by the Borough itself.

The succeeding Table shows the results of the analyses of the material collected in the three deposit gauges during the year, and the average figures for the years 1952 to 1956 are also included so that some comparison may be made.

ATMOSPHERIC POLLUTION—Average Monthly Deposit at Three Gauges during 1957.

A.—Roch Mills Gauge (Sewage Works) B.—Entwisle Road Gauge C.—Foxholes House Gauge

Month	Average Rainfall in millimeters			Insoluble Deposit in tons per sq. mile			Soluble Deposit in tons per sq. mile			TOTAL DEPOSIT in tons per sq. mile		
	A	B	C	A	B	C	A	B	C	A	B	C
January	99	97	110	9.0	10.6	9.8	5.3	12.1	5.9	14.3	22.7	15.7
February	78	81	87	6.7	7.1	5.4	6.6	4.7	4.7	13.3	11.8	10.1
March	91	102	110	9.3	10.5	8.1	8.6	7.6	5.9	17.9	18.1	14.0
April	13	13	13	4.9	8.2	5.7	3.5	3.2	2.4	8.4	11.4	8.1
May	38	36	43	3.8	8.8	4.9	4.2	3.7	3.5	8.0	12.5	8.4
June	59	62	62	8.5	13.0	8.9	5.4	4.6	4.1	13.9	17.6	13.0
July	126	123	120	5.7	6.5	6.0	7.9	9.1	7.5	13.6	15.6	13.5
August	148	152	153	5.0	7.3	5.1	9.8	10.4	11.3	14.8	17.7	16.4
September	157	166	160	3.7	6.3	4.6	7.6	8.1	6.5	11.3	14.4	11.1
October	147	149	177	5.4	7.9	6.7	8.6	8.4	9.0	14.0	16.3	15.7
November	52	59	61	3.6	2.5	2.1	4.3	4.0	4.5	7.9	6.5	6.6
December	118	123	133	9.5	15.5	6.7	8.5	8.8	10.3	18.0	24.3	17.0
TOTALS	1126	1163	1229	75.1	104.2	74.0	80.3	84.7	75.6	155.4	188.9	149.6
AVERAGES	94	97	102	6.25	8.68	6.16	6.70	7.06	6.30	12.95	15.74	12.46
Average of three gauges	98	98	98	7.03	7.03	7.03	6.68	6.68	6.68	13.71	13.71	13.71
1956	96	96	96	7.64	7.64	7.64	7.65	7.65	7.65	15.29	15.29	15.29
1955	70	70	70	7.99	7.99	7.99	6.38	6.38	6.38	14.37	14.37	14.37
1954	124	124	124	9.99	9.99	9.99	9.24	9.24	9.24	19.23	19.23	19.23
1953	82	82	82	9.41	9.41	9.41	6.88	6.88	6.88	16.29	16.29	16.29
1952	85	85	85	7.95	7.95	7.95	8.99	8.99	8.99	16.94	16.94	16.94
1951	94	94	94	9.84	9.84	9.84	8.53	8.53	8.53	18.37	18.37	18.37

Sulphur Dioxide Gauges.

The results obtained from these instruments are tabulated below :—

Month	Roch Mills	Entwisle Road	Foxholes	Average
January	2.2	1.6	2.2	2.0
February	2.6	1.8	2.5	2.3
March	2.3	1.4	2.1	1.9
April	1.7	1.4	1.5	1.5
May	1.5	1.1	1.2	1.3
June	1.1	0.8	1.0	1.0
July	1.0	0.8	0.9	0.9
August	0.9	0.6	0.9	0.8
September	1.2	1.1	1.2	1.2
October	1.8	1.5	1.9	1.7
November	2.6	1.9	2.1	2.2
December	2.3	2.3	2.5	2.4
Average for 1957	1.76	1.36	1.66	1.60
1956	1.95	1.43	1.79	1.72
1955	1.46	1.49	1.57	1.51
1954	1.72	1.59	1.68	1.66
1953	1.60	1.58	1.59	1.59

The results given above are the weight in milligrammes of SO² collected per day on 100 square centimetres of treated fabric exposed. The purpose of this particular survey is to detect changes which may be taking place in the amount of pollution emitted each month, and not to estimate the total amount of sulphur emitted in any given area.

INSPECTION AND SUPERVISION OF FOOD AND OF FOOD PREMISES.

The Milk (Special Designations) (Specified Areas) (No. 2) Order 1954 requires that all milk sold by retail for consumption in Rochdale homes must be either Tuberculin Tested or Pasteurised or Sterilised.

Milk Distribution.

Under the Milk and Dairies Regulations 1949 the local authority has the duty of controlling the distribution of milk and has also control over the use of the various special designations.

Licenses and registrations issued under these Regulations :—

Premises used as a Dairy	...	...	...	...	...	3
Persons licensed as Distributors of Milk	...	...	...	...	...	341
Dealer's Licences to sell Pasteurised Milk	...	...	...	...	...	42
Dealer's Licences to sell T. Tested Milk	...	...	...	...	...	34
Dealer's Licences to sell Sterilised Milk	...	...	...	...	...	228
*Supplementary Licences — Pasteurised Milk	...	...	...	...	...	7
	Tuberculin Tested Milk	...	...	...	...	7
	Sterilised Milk	...	...	...	...	7

*A Supplementary Licence is issued to persons whose premises are outside the Borough, but who distribute within the Borough.

Cleanliness and Keeping Quality of the Milk Supply.

166 samples of milk were obtained and were tested to determine the cleanliness or keeping quality of the milk and, where the samples were of heat-treated milk, tests were applied to determine the efficiency of heat treatment.

The Methylene Blue Reduction Test was applied to 135 samples of which:—

82 were tuberculin tested milks	...	...	8 proving unsatisfactory
21 were tuberculin tested pasteurised milks	...	...	all satisfactory
32 were pasteurised milks	...	...	all satisfactory

The 8 unsatisfactory samples were reported to the Ministry of Agriculture, Fisheries and Food whose duty it is to investigate such unsatisfactory samples.

The Turbidity Test was applied to 31 samples of Sterilised Milk.

The Phosphatase Test was applied to 53 samples of milk to determine the effectiveness of the heat treatment process. 21 of these were Tuberculin Tested Milk and the remainder consisted of 32 samples of Pasteurised Milk. All samples were reported to be satisfactory.

Examination of Milk for M. Tuberculosis.

87 samples of milk were taken during delivery to customers for examination for the presence of M. Tuberculosis. All samples were negative. It is interesting to note that since June 21st 1954 no sample of milk has been reported to be infected with M. Tuberculosis.

Slaughterhouses and Knacker's Yard.

There are 5 slaughterhouses in the Borough. One is operated by the Corporation Markets Committee and is available for use by private butchers. Another is occupied by a wholesale butcher, two are used by individual butchers to provide meat for their own shops, and the remaining one is a horse slaughterhouse.

It cannot be said that any of the premises are either ideally situated or completely suitable for their purpose and, of course, until all slaughtering is carried out in one public abattoir, there is bound to be some waste of the Meat Inspector's time and, as a result, incomplete supervision of the slaughtering of animals for human consumption.

Meat and Food Supply.

There has been regular inspection of meat and food offered for sale and nearly 20 tons were condemned as unfit for human consumption, being either destroyed or disposed of for salvage purposes. This work involved 1,983 visits during the year.

Condemned meat is collected by the Cleansing Department and taken to Entwisle Road Works where it is treated to produce fertiliser. The Health Committee has maintained its policy that there shall be no payment for condemned meat surrendered for destruction or salvage. There has been no formal objection raised to this policy during the year.

The following Table gives a detailed report on the examination of carcasses inspected at the slaughterhouses. In addition to the inspection of animal carcasses shown in the Table the Meat Inspectors saw the carcasses of 930 horses. Of these 1 whole carcase, 2 part carcasses and offal weighing 790 lbs. were condemned. The number of horses slaughtered has continued to decline, the totals for 1956, 1955 and 1954 being 1253, 1452 and 1795 respectively.

Carcasses Inspected and Condemned.

	Cattle ex- cluding Cows	Cows	Calves	Sheep and Lambs	Pigs
Number killed	2,694	2,350	325	19,619	2,582
Number inspected	2,694	2,350	325	19,619	2,582
ALL DISEASES EXCEPT TUBERCULOSIS & CYSTICERCI :					
Whole carcasses condemned ...	2	20	8	6	6
Carcasses of which some part or organ was condemned ...	481	607	4	160	109
Percentage of the number inspected affected with disease other than Tuberculosis ...	17.93%	26.26%	3.69%	.85%	4.22%
TUBERCULOSIS ONLY :					
Whole carcasses condemned ...	2	3	—	—	2
Carcasses of which some part or organ was condemned ...	84	352	—	—	72
Percentage of the number inspected affected with Tuberculosis	3.19%	15.11%	—	—	2.86%
CYSTICERCOSIS ONLY					
Carcasses of which some part or organ was condemned ...	2	—	—	—	—
Carcasses submitted to treatment by refrigeration ...	—	—	—	—	—
Generalised and totally condemned	—	—	—	—	—

Off-Licences (other than those included in "Groceries and General Provisions")	...	...	...	...	...	...	...	...	16
Public Houses	...	...	...	...	...	...	...	...	180
Cafes, Restaurants, Canteens etc.	...	...	...	...	...	...	...	...	113
Clubs, Hospital Kitchens, Institution Kitchens	...	...	...	...	...	...	...	...	70

Despite the pressure of work falling on the Department from other directions as much time as possible was spent on the inspection of food premises during the year and in all 1394 visits were made. In many of the premises a verbal recommendation was all that was needed to secure compliance with our requirements. This was particularly the case where branches of the large multiple stores were concerned even where extensive alterations were needed. In other cases written "notices" were sent, covering the following types of defect or fault:—

Unsuitable surfaces of benches, counters, tables etc. (Reg. 6)	...	...	...	...	...	...	...	...	17
Dirty or defective fittings or utensils (Reg. 6)	...	...	...	...	...	...	...	...	14
Inadequate protection of exposed foods or unsuitable arrangements for the storage of food (Reg. 8)	...	...	...	...	...	...	...	...	9
Absence of notice re hand washing (Reg. 14)	...	...	...	...	...	...	...	...	16
Unsuitable or defective sanitary conveniences (Reg. 14)	...	...	...	...	...	...	...	...	7
Absence of wash hand basin or lack of hot water supply to wash hand basin and want of towels, soap, nail brushes etc. (Reg. 16)	...	...	...	...	...	...	...	...	44
Non-provision of first aid boxes (Reg. 17)	...	...	...	...	...	...	...	...	6
Lack of proper provision for outdoor clothing (Reg. 18)	...	...	...	...	...	...	...	...	6
Unsuitable or defective sinks, lack of hot water supply to sinks, and absence of washing facilities etc. (Reg. 19)	...	...	...	...	...	...	...	...	21
Insufficient lighting—natural or artificial (Reg. 20)	...	...	...	...	...	...	...	...	2
Defective surfaces of walls, floors, ceilings and want of cleansing or decoration of them (Reg. 23)	...	...	...	...	...	...	...	...	115
Accumulations of refuse or inadequate storage of refuse (Reg. 24)	...	...	...	...	...	...	...	...	19
Insufficient or defective ventilation (Reg. 21)	...	...	...	...	...	...	...	...	5
Insufficient water supply (Reg. 15)	...	...	...	...	...	...	...	...	4
Name and address of stall proprietor not displayed (Reg. 26A)	...	...	...	...	...	...	...	...	1
Inadequate screening of stall (Reg. 27)	...	...	...	...	...	...	...	...	1

The Regulations generally continued to be well appreciated by food traders and many improvements have been carried out without any interference by the Department. It is still difficult however in some cases to convince traders of the need for separate wash hand basins, and to a lesser extent the same thing applies to the protection of exposed foodstuffs, e.g. in a small house-shop the installation of a wash hand basin is often a difficult and inconvenient operation and the only place for it may be next to the sink previously used for all trade and domestic purposes and for personal cleanliness.

Rochdale Corporation Act 1937.

This act deals with the registration of premises used for the sale of ice cream or for the preparation of cooked meats and fish. Reference has been made in a previous paragraph to premises which prepare or sell ice cream. The number of premises registered for the cooking of meat or fish is as follows :—

Fish Friers	...	...	...	...	...	...	...	98
Butchers	...	...	...	...	...	...	...	29
Cafes, Restaurants, Canteens, Kitchens, etc.	...	...	...	...	...	...	...	183

791 visits of inspection were made to these premises during the year.

Prevention of Damage by Pests Act, 1949.

The staff engaged in this work consists of three men with assistance provided by the Borough Surveyor's Department whilst the destruction of rats in sewers is proceeding.

During the year 1,840 dwelling houses and 1,284 business and other premises were inspected for the presence of rats or mice. Evidence of rat infestation was found at 348 premises (282 dwelling houses and 66 business or other premises) but the extent of infestation was, in the great majority of these cases, slight. Mouse infestation was discovered at 510 premises (429 dwelling houses and 81 business or other premises) and in these also the great majority showed only a minor infestation.

856 premises (711 dwelling houses and 145 business or other premises) were treated to destroy vermin. 909 treatments were carried out and these required 3,734 visits.

The main sewers were treated twice during the year. In the course of the first treatment 2,542 manholes were baited and 631 of these showed evidence of rat infestation and were treated by the placing of poison baits. The work was preceded by the "test-baiting" of 288 manholes in districts where rat infestation was thought to be unlikely. This work enabled us to exclude 756 manholes from the treatment.

The second treatment took place during November and December and working from information gained during the Spring treatment it was necessary only to treat 784 manholes. Of these 292 were found to be infested and were treated by the placing of different poison baits.

In the report for 1957 it was mentioned that the development of bait preservatives was likely to make more effective treatments possible. The effect of using these was twofold. Their use permits the placing of larger baits in the manholes and allows a greater interval before the poison bait is placed. Thus, the method is more effective in promoting amongst rats the habit of feeding at the manhole. Secondly the use of bait preservative makes a more flexible programme possible.

Shops Act, 1950.

275 inspections of premises were made during the year.

Offensive Trades.

The number of premises at which these trades were carried on in the Borough is as follows :—

Tripe Boiling	...	...	1	Knacker's Yard (Bone Boiling)	1
Fellmongers etc.	...	...	1	Rag and Bone Dealers	...
					5

The Knacker's Yard is visited regularly, 84 visits being made during the year. Visits are made at intervals to the other offensive trades.

Cleansing Station.

The general work of the Cleansing Station is under the supervision of the Deputy Chief Public Health Inspector. The Station is open from Monday morning until Saturday mid-day. Evening sessions are available as required for those in industry.

The following tables show the number of persons cleansed at this Station :—

	1957	1956	1955	1954	1953
Scabies	31	20	15	22	16
Other Verminous Conditions	72	97	130	146	173
	<u>103</u>	<u>117</u>	<u>145</u>	<u>168</u>	<u>189</u>

Just over half these cases were children of school-age.

Once again only a small number of cases required attention during the year and it was thus found possible to enlist the services of the Clinic Staff in dealing with certain problem families, 169 visits being made for this purpose. In addition to this 415 follow-up visits were made in connection with the B.C.G. vaccination scheme.

Rag Flock Filling and Other Filling Materials Act, 1951.

This Act provides for the registration of premises where filling of certain types is used in the manufacture of bedding, toys, baby carriages and other articles of upholstery and also for the licensing of premises where rag flock is manufactured or stored. Regulations made under the Act apply standards by which the cleanliness of certain filling materials can be assessed. Four premises in the Borough were registered for the purposes of the Act. No premises exist which require licences.

FACTORIES ACTS, 1937 and 1948.

Part I of the Act.

1. INSPECTIONS for the purposes of provisions as to health.

Premises (1)	Number on Register (2)	Number of		
		Inspec- tions (3)	Written notices (4)	Occu- piers prose- cuted (5)
(i) Factories in which Sec. 1, 2, 3, 4 and 6 are to be enforced by Local Authorities	72	40	4	—
(ii) Factories not included in (i) in which Sect. 7 is enforced by the Local Authority	565	442	22	—
(iii) Other Premises in which Sec. 7 is enforced by the Local Authority (excluding out-workers premises)	27	10	3	—
TOTAL	664	492	29	—

2. CASES IN WHICH DEFECTS WERE FOUND.

Particulars (1)	No. of cases in which defects were found				No. of cases in which Pros. instituted
	Found (2)	Remedied (3)	To H.M. Inspector (4)	By H.M. Inspector (5)	
Want of cleanliness (S.1) ...	9	9	—	6	—
Overcrowding (S.2)	—	—	—	—	—
Unreasonable temperature (S.3)	1	1	—	1	—
Inadequate ventilation (S.4)	—	—	—	—	—
Ineffective drainage of floors (S.6)	—	—	—	—	—
Sanitary Conveniences (S.7)					
(a) Insufficient	4	4	—	2	—
(b) Unsuitable or defective	17	17	—	14	—
(c) Not separate for sexes	1	1	—	1	—
Other offences against the Act (not including offences relating to Outwork)	—	—	—	—	—
TOTAL	32	32	—	24	—

TABLE I.—Vital Statistics of Whole District during 1957,
and previous years.

Year	Population estimated to Middle of each Year	LIVE BIRTHS		Nett Deaths belonging to the District.			
		Nett		Under 1 year of age		At All Ages	
		Number	Rate per 1,000 of est. population	Number	Rate per 1,000 Nett Live Births	Number	Rate per 1,000 of est. population
1947	†86,110	1725	20.0	95	55	1399	16.2
1948	88,110	1500	17.0	57	38	1245	14.1
1949	88,930	1362	15.3	56	41	1320	14.8
1950	89,530	1371	15.3	64	47	1316	14.7
1951	87,300	1275	14.6	69	54	1457	16.7
1952	86,890	1321	15.2	52	39	1248	14.4
1953	86,350	1297	15.0	40	31	1247	14.4
1954	86,770	1243	14.3	29	23	1198	13.8
1955	86,490	1263	14.6	21	17	1230	14.2
1956	86,260	1294	15.0	36	28	1271	14.7
Average for years 1947-1956	87,274	1365	15.6	52	37	1293	14.8
1957	85,310	1335	15.6	46	34	1238	14.5

† Estimated Civilian Population

TABLE II.

CAUSES OF DEATH AT DIFFERENT PERIODS OF LIFE.
Year 1957.

			All Ages	0-	1-	5-	15-	25-	45-	65-	75-
ALL CAUSES	Males	...	634	31	2	7	3	18	192	174	207
	Females	...	604	15	2	1	5	21	98	184	278
1—Tuberculosis of Respiratory System	...	...	4	...	...	...	...	...	4	...	...
2—Other Forms of Tuberculosis	...	...	...	...	...	...	...	...	...	...	...
3—Syphilitic Disease	...	...	5	...	...	...	...	...	3	1	1
4—Diphtheria	...	...	...	...	...	...	...	...	...	...	...
5—Whooping Cough	...	...	...	...	...	...	...	...	...	...	...
6—Meningococcal Infections	...	...	...	...	...	...	...	...	...	...	...
7—Acute Poliomyelitis and Polioencephalitis	...	...	...	...	...	...	...	...	...	...	...
8—Measles	...	...	...	...	...	...	...	...	...	...	...
9—Other Infective and Parasitic Diseases	...	...	4	1	...	1	...	...	...	1	1
0—Cancer of Stomach	...	...	31	...	...	...	...	1	7	11	12
1—Cancer of Lung Bronchus	...	...	44	...	...	...	...	5	26	13	...
2—Cancer of Breast	...	...	13	...	...	...	1	...	6	5	1
3—Cancer of Uterus	...	...	7	...	...	...	...	2	4	...	1
4—Cancer of all other sites	...	...	91	...	...	1	...	2	31	23	34
5—Leukaemia and Aleukaemia	...	...	6	...	...	...	...	...	1	2	3
6—Diabetes	...	...	4	...	...	...	...	...	2	2	...
7—Vascular Lesions of Nervous System	...	...	202	...	...	1	...	2	33	80	86
8—Coronary Disease—Angina	...	...	160	...	...	...	...	1	48	62	49
9—Hypertension with Heart Disease	...	...	17	...	...	...	...	...	8	5	4
0—Other Heart Diseases	...	...	177	...	...	...	...	6	18	40	113
1—Other Diseases of the Circulatory System	...	...	86	...	...	...	1	...	5	22	58
2—Influenza	...	...	17	1	...	...	...	1	7	4	4
3—Pneumonia	...	...	67	4	1	1	...	5	11	18	27
4—Bronchitis	...	...	72	...	...	...	...	1	26	20	25
5—Other Respiratory Diseases	...	...	10	...	...	...	...	...	4	3	3
6—Ulceration of the Stomach or Duodenum	...	...	9	...	...	...	...	1	5	1	2
7—Gastro Enteritis and Diarrhoea	...	...	8	3	...	...	...	1	2	1	1
8—Nephritis and Nephrosis	...	...	2	...	...	...	...	...	...	1	1
9—Hyperplasia of Prostate	...	...	11	...	...	...	...	...	...	6	5
0—Pregnancy, Childbirth and Abortions	...	...	3	...	...	...	1	2	...	...	...
1—Congenital Malformations	...	...	15	12	1	1	...	...	1	...	...
2—Other defined and ill-defined diseases	...	...	113	23	...	...	2	2	24	27	35
3—Motor Accidents	...	...	10	...	...	1	3	3	1	1	1
4—All Other Accidents	...	...	33	2	1	2	...	1	4	7	16
5—Suicide	...	...	16	...	...	...	...	3	9	2	2
6—Homicide and Operations of War	...	...	1	...	1	...	...	...	...	...	...

TABLE III.

INFANT MORTALITY.—Nett Deaths from stated causes at various Ages under one year of age—Year 1957.

CLASSIFIED CAUSES OF DEATH	AGE AT DEATH								Total Deaths under 1 year	
	Under 1 week	1-2 weeks	2-3 weeks	3-4 weeks	4 weeks to 3 months	3-6 months	6-9 months	9-12 months	1957	1956
	Tuberculosis, Non-Respiratory
Bronchitis	...	...	...	...	...	...	...	...	...	...
Other Respiratory Diseases	...	...	...	...	...	...	...	...	...	...
Dysentery	...	...	...	...	1	...	...	...	1	...
Gastritis and Diarrhoea	...	...	...	...	2	1	...	...	3	1
Influenza	...	...	...	...	...	1	...	...	1	...
Pneumonia	...	...	...	...	...	1	1	2	4	5
Prematurity	10	1	...	...	...	...	...	...	11	11
Congenital Malformations	6	1	2	...	3	...	...	...	12	5
Other Causes	10	...	...	...	2	2	...	...	14	14
ALL CAUSES—1957	26	2	2	...	8	5	1	2	46	...
ALL CAUSES—1956	20	2	1	2	6	2	2	1	...	36

Nett Live Births in the year :—Legitimate 1,263 ; Illegitimate 72.

Nett Deaths in the year :—Legitimate infants 43 ; Illegitimate infants 3.

ANNUAL REPORT

ON THE
MEDICAL INSPECTION OF SCHOOL CHILDREN

For the Year ended 31st December, 1957

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SCHOOL MEDICAL SERVICE.

Principal School Medical Officer and Medical Officer of HealthJOHN INNES, M.D., D.P.H.
Deputy School Medical Officer and Deputy Medical Officer of Health	...	...	...NORA MILLS, M.D.
School Medical Officers	...	...	...MARY A. MCKENZIE, M.B., Ch.B. FRANCIS J. CAUCHI, M.D., B.Sc., D.P.H.
Principal School Dental Officer	...	...	...H. P. GLEDSDALE, L.D.S.
School Dental Officers	...	...	...R. G. WATSON, L.D.S. (Part-time) R. J. G. YOUNG, L.D.S. do. H. GIBSON, L.D.S. do. Mrs. J. GIBSON, L.D.S. do.
Speech Therapist	...	...	...D. RACHEL HARTLEY, L.C.S.T.
Orthoptist	...	...	...AUDREY DEAN, D.B.O.
School Nurses	...	...	...E. MAXIM, S.R.N., Q.N. H. BOWDELL, S.R.N., S.C.M., H.V., Q.N. P. JOHN, S.R.N., S.C.M., H.V. C. WALKER, S.R.N., R.F.N., S.C.M., H.V., Q.N. M. M. TURNER, S.R.N., S.C.M., H.V. A. TONGE, S.R.N. B. MADEN, S.R.N.
Dental Attendants	...	...	...LUCY DANIELS, S.R.N. MARY FLETCHER, S.R.N. JESSIE LEACH.
Clerks	...	...	...Mrs. D. BARNISH JUNE MILLS DOROTHY CLARENCE.

Consultants :

Ophthalmic Surgeon	...	...	...A. STEWART SCOTT, F.R.C.S., Ed., D.O.M.S.
Aurists	...	...	...V. T. SMITH, M.D., F.R.F.P.S. P. K. BASU, M.B., B.S.

Available for consultation at Smith Street Clinic by arrangement with the Regional Hospital Board :

Paediatrician	...	...	...B. WOLMAN, M.D., M.R.C.P., D.C.H.
Orthopaedic Surgeon	...	...	...A. P. GRACIE, F.R.C.S.

**To the Chairman and Members of the Education Committee of the
County Borough of Rochdale.**

LADIES AND GENTLEMEN,

I beg to submit my Annual Report for 1957, being the forty-ninth report on the School Medical Services in Rochdale.

The size of the school population and the health of that population remain very similar to last year.

The Report shows that only 37 out of a total of nearly 5,000 children examined were found suffering from unsatisfactory nutrition, i.e. less than 1%. The great majority of the defects found are of the Ear, Nose or Throat, i.e. adenoids, tonsils, running ears or enlarged neck glands.

Defective vision and squint figure highly in the list of Defects Requiring Treatment. What might be regarded as real illness, i.e. defects of heart and lungs and similar conditions, is recorded in very small figures indeed.

The general standard of hygiene and cleanliness has risen very considerably. Yet, on the other hand, there still remain the few problem families just as bad and as difficult to handle as ever.

Here and elsewhere will be found most interesting accounts of what can now be done and is being done for the educationally sub-normal child and, indeed, for the higher grade mentally defective child.

The aim of the School Dental Service is that children shall leave school without losing permanent teeth, free from dental disease or irregularities and trained in the care of their teeth. For all this, an adequate staff, working regularly, is the first essential. While we have not yet reached full staff, we have, at any rate, had a year of stable conditions which have allowed planned progress.

Pure tone audiometry is now well established in school entrants. More and more emphasis is being placed upon earlier detection of hearing defects in children, not only because of their own importance, but because of the newer opportunities for treatment which are continually being developed.

The School Medical Report is now no longer a mere collection of statistics. Each section is in itself a medical or socio-medical essay and, therefore, requires no introductory comment. Comparison from year to year is becoming more and more difficult. I propose to avoid it altogether this year and to take in next year's Annual Report an opportunity for long-term comparison.

As an example of the impossibility of statistical comparison, I cannot do better than refer to the discussion on Page 10, on the new problems which arise from earlier physical development.

I wish to acknowledge the high standard of work carried out by all members of the School Medical team and particularly to acknowledge Dr. Mills' work in the preparation of this Report. The Service is indebted to the Chief Education Officer and his Department, and to the Members of the Medical Services Sectional Committee for their assistance in many ways.

I have the honour to be, Ladies and Gentlemen,

Your obedient Servant,

John Limes.

Medical Officer of Health and
Principal School Medical Officer

13th May, 1958.

School Medical Service

The Registrar General's estimated population of Rochdale for mid-year 1957 was 85,310.

SCHOOL POPULATION

	Schools	Children
County Schools	26	7,380
Voluntary Schools... ..	13	3,391
Grammar Schools	2	1,085
Technical Schools	2	760
Special Schools	3	229
Nursery Schools	4	263
	50	13,108

Staff.

Dr. Jean M. Moore left in April and Dr. Francis J. Cauchi, appointed in her place, began to work here during the same month. Mrs. Barnish was re-designated as School Clinic Assistant.

Dr. McKenzie attended a course organised by the National Association for Mental Health for Medical Officers on educationally sub-normal children and mental defectives in January and has since been approved by the Minister for the purpose of the ascertainment of educationally sub-normal children.

Dr. Mills attended a refresher course for Senior School Medical Officers at Newcastle-upon-Tyne in September, and a refresher course for School Nurses in London, during July, was attended by Mrs. Walker.

There are now four part-time School Dentists in addition to the full-time Principal Dental Officer and there has been one change in the Dental Attendant staff.

As usual, many nursing students and other interested persons have visited the Clinics and Special Schools, and the Medical Research Council continues to make periodic use of the School Clinic premises for the follow-up of groups of school children who were examined and received B.C.G. injections in 1951.

SCHOOL CLINIC SERVICES

Central Clinic, Penn Street :

Open daily from 8-45 a.m. to 5-0 p.m. (5-15 p.m. on Mondays)
Saturdays from 8-45 a.m. to 12-0 noon.

- A. **Minor Ailment Clinic**—daily 8-45 a.m. to 12-0 noon.
- B. **Dental**—Routine—Seven sessions per week
Special—Two sessions per week
General Anaesthetic—One session per week.
- C. **Ophthalmic**— Three sessions per week.
Orthoptic— Eleven sessions per week.
- D. **Ear, Nose & Throat**— One session per week.
- E. **Foot Clinic**— One session per week.

Special appointments and examinations are arranged to suit patients and staff.

Other Premises :

- B. **Dental**—
- | | |
|-------------------|---|
| BROWNHILL SCHOOL— | Treatment and X-ray examination
Ten sessions per week (P.D.O.) |
| NORDEN CLINIC— | One session per week (P.D.O.) |
| BRIMROD SCHOOL | } One session per week alternately,
as the work requires. |
| BALDERSTONE HALL | |
- E. **Orthopaedic**—
- SMITH STREET CLINIC— One session per week (Wednesday a.m.)
- F. **Paediatric**—
- SMITH STREET CLINIC— One session per week (Wednesday p.m.)
- G. **Speech Therapy**—
- BAILLIE STREET SCHOOL—Ten sessions per week.

WORK OF THE SCHOOL NURSES

	1957	1956
New cases seen at morning clinics	624	326
Dressings at morning clinics	3,959	4,042
Hygiene—Inspections	31,479	31,389
Re-inspections	2,749	3,946
Special School Inspections—		
1. Brownhill (a) Dressings 194		
(b) Specials 1,784 ...	1,978	2,445
2. High Birch (a) Dressings 278		
(b) Specials 2,877 ...	3,155	2,928
Inspections with Medical Officers—		
1. At school	7,539	8,032
2. At clinic	2,799	2,726
Eye Clinic cases... ..	980	1,037
Aurists' Clinic (total attendance)	374	540
Home visits	759	833
Total	56,395	58,244

Again there have been no changes in the School Nursing staff during the year and, apart from a little sick-leave, there has been no interruption of the nurses' work, in which the usual high standards have been maintained.

School Hygiene and Inspection.

During 1957 general improvement, including extensive alterations to the sanitary accommodation, have been completed at Meanwood Primary, Derby Street Primary, and Lowerplace Secondary Schools. The electrical installations have been renewed and the staff accommodation improved.

Major improvements to the Secondary Technical Schools for Girls and Boys have been virtually completed and it is expected that the premises will have been entirely re-decorated by Easter, 1958. The work carried out includes renewal of the electrical installation, improved sanitary and cloakroom facilities, the provision of additional windows and better staff facilities.

At Lowerplace and Spotland Primary Schools extensive alterations have been started, dealing with almost every aspect of the school premises.

On the site of the Kirkholt Junior School three attractive pre-fabricated classrooms have been provided to meet the larger number of children entering

the school and at Greenbank Secondary School work has commenced on the provision of additional classrooms on the flat roof of the school. Work has also begun on the improvement of the domestic science and scullery facilities at Brimrod Secondary School and on general alterations at the Parish Church Secondary School.

Work has proceeded steadily on the erection of the new St. Peter's C. of E. Junior School and its completion is anticipated by Easter, 1958. A tender has been accepted for the building of a new Roman Catholic Secondary School at Kingsway and work will begin early in 1958.

It will be appreciated from this report that the extensive building programme forecast in 1956 has been fully realised in 1957.

Medical Inspection in School. (Table I, Page 109).

All Rochdale schools have been visited during the year for periodic medical inspection.

	1957	1956
Periodic Medical Inspections	4,927	4,655
Special Inspections	113	200
Re-inspections	2,499	3,177
Brownhill Inspections	347	417
Total	7,886	8,449
Parents interviewed	337	457

The following is a summary of the work done at the Clinic.

Children seen by the School Medical Officers—

Clinic Inspections (new cases)	1,231	837
Clinic Re-inspections	1,568	1,889
Special Examinations	718	653
Foot Clinic	361	701
Total	3,878	4,080
New cases seen by Aurists	144	152
Children seen by the Ophthalmologist	980	1,037
New cases referred to Orthopaedic Surgeon	55	62
New cases referred to Paediatrician	21	32
Total	1,200	1,283

FINDINGS OF MEDICAL INSPECTION

Children continue to improve in physical development, but this very improvement brings with it certain problems. Many girls and boys, while still a year or more below school-leaving age, are physically and sexually almost completely mature. One sees girls in our schools whose physical appearance and development suggest nubility and capacity for child-bearing. Boys are seen, although less often, from twelve years of age upwards, with deep voices, powerful physique and the obvious need to shave frequently.

Unfortunately, intellectual and particularly emotional development rarely keeps pace with these physical changes, so that many of these children feel uncertain and insecure in a world where their appearance and spare-time occupations expose them to temptations and bewilderment with which they are utterly unable to cope. This accounts for much misbehaviour, unhappiness and juvenile crime, and calls forth condemnation from older people and from authority in general. The "mixed-up kid" is far from being only a character in an American movie.

Included among these young people is a sizeable group which becomes very much unsettled during the last year or so at school. These boys and girls long for the days when they will leave school and its discipline, unprepared though they are for an adult world which they visualise only in terms of freedom, pleasure and romance. Many of them demand and receive a good deal of pocket money, sums of 15s. 0d. or more a week not being rare when father and mother, and perhaps older siblings go out to work. Some of this money is spent on cigarettes and a minority smoke fairly heavily, perhaps ten cigarettes a day. The school medical staff are frankly told at times "I cannot stop it, it has become a habit".

A good deal of money is spent on particular items of popular clothing, because they are in fashion and not because they last long. The wearing of luminous socks and casual shoes has greatly increased. The shoes are very cheap and last the average 12 or 13 year old child about a fortnight. Leather or leatherette jerkins and waterproof windcheaters are very popular among all ages of school children. These are worn in school even when adequate warm clothing is worn beneath and there is often great reluctance to take them off. Among the presumably more intelligent at the Grammar School the standard of the senior girls' footwear has much deteriorated during the last two or three years, the drift being towards "casuals" usually well-worn, "comfortable" and sloppy.

The unsettled older children become "fed-up" with school dinners, preferring to spend their dinner money at the nearest chip shop. The meals service seems to be resented as a part of the school life and discipline which they are anxious to leave.

Some show behaviour problems such as staying out late at night or all night, a revolt against parental authority. Many have discovered a kind of escape from their problems through physical symptoms of illness and come to us with various complaints such as vague aches, abdominal pain and sickness, or periodic headache of the migraine type.

The last year of secondary modern school life, which could be so enjoyable and important in fitting these young men and women for an adult life of maturity and responsibility, is a bore and a waste of time to this group, who derive no advantage from it.

In spite of the general overall improvement in children's physique, there are some with long-standing poor health, which constantly interrupts school attendance and results in educational retardation. An example is the primary school child with a persistent cough which continues all winter. Many factors are involved here as in all school medical work. Infected tonsils and general upper respiratory infections may be a factor and the possibility of sub-clinical whooping cough in the immunised child cannot be ignored. Persistent nasal catarrh is at its worst in children from homes where maternal care is not of the best. Here, poor hygiene, lack of fresh air in an unventilated home, a preponderance of carbohydrate in the diet, lack of a handkerchief, or of training in its use, or even in the proper use of the nose itself, all play a part in the perpetuation of this unpleasant condition. Such children look and often are backward, and suffer from a variable degree of catarrhal deafness.

Poor posture, in spite of well-organised physical exercise, is seen in a high proportion of children in every school and can be described as illustrating a "couldn't care less" attitude, sloppy, slouching and drooping. It is sometimes found that such children are having far too much done for them, especially those from small families where the mother, sometimes over-anxious in her maternal duties, waits on the child hand and foot, with the result that many cannot dress themselves and will not attempt to do so. Parents are, on the whole, very conscious of child health these days but, when overdone, this can do considerable harm to the child.

There are large numbers of asthmatic children whose asthma is usually well under control with only occasional absence from school. Most can manage at an ordinary school. The severe cases attend Brownhill and there, where they constitute about a quarter of the children on the register, they are able to keep at school reasonably well. Unfortunately, they are liable to relapse if discharged. One girl after five years at Brownhill, was discharged for trial at an ordinary secondary modern school. She was only able to attend one week.

A few squints are seen at every inspection, but this problem is well catered for in Rochdale. Also at every school there are thin children whose mothers say "they eat nothing" and who seek our help in their vain attempts to increase

body weight. There are a few fat children in every school too, as reported last year, and it is curious that parents never voluntarily consult us about this. In fact, it is most difficult to secure the mother's co-operation in reducing the weight of these obese children even when the disadvantages of obesity are obvious and enlarged upon by the doctor. If not taken in hand early, obesity seems to advance to a point of no return, when simple dietetic measures are no longer of any avail, as though the body has become incurably habituated to over-eating and excessive fat deposit. Where, as so often happens, the over-eating is caused by emotional disturbance, ridicule and teasing follow the obesity, in turn aggravating the sensitivity and creating a vicious circle which it is difficult to break.

As in all recent years, the torrent of "nervous" complaints and symptoms shows no sign of abating and even if a child displays none of these symptoms, mothers interviewed for other matters are likely sooner or later to mention, in the child's hearing, that he is "highly strung". This nebulous condition, impossible of definition, seems to be expected and indeed to involve some cachet, as though its possessor is of finer clay than his fellows.

Some slum property, mainly near the centre of the town, continues to be demolished. Although most of the tenants welcome the change to modern amenities, a significant minority leave their new municipal houses and return to houses not much better than those from which they were re-housed. The reasons for this are generally financial and a wish to return nearer the town. The adults of the family have not been able to adjust their spending habits (to pay the new rent) or their leisure occupations, so they come back to a small rented house in a built-up area, which is cheaper and less "lonely". This, of course, may be their own affair, but it is difficult to feel much sympathy for those who complain of the effect on their children of the damp and unsuitable houses in which they have themselves chosen to live. Some people seem to choose houses with incredible carelessness. "I only saw the house at night and didn't realise it was so dark and cramped", or "the woman never told me it was so damp", are typical remarks heard.

The influenza epidemic in the early Autumn affected some thousands of children and it is our impression that at least one member of nearly every family was affected. School attendance was reduced to as little as 50% and the average time off school was about a fortnight. Needless to say, all the well-known poor attenders were off school whether they had the "Asian" or not. Most children seemed to recover completely and looked in normal health on return to school, but the Brownhill children did not. Some had obviously lost a lot of ground when they came back to school. They looked ill and had lost from $1\frac{1}{2}$ to $2\frac{1}{2}$ lbs. weight which could be ill-spared since these were children who much needed a little extra flesh on their bones. Those worst affected were found only to have been off school a short time and to have got up too soon because of their mother's wish to return to work or some similar reason.

Here follows a description of two cases, examples of the problems confronting the Service. A 10 year old boy, was referred by his family doctor to a Psychiatrist who, unable to accept children as patients, sent him on to us. He had been stealing money from his home and from his grandmother, and the police had been informed. The boy was very good at sport, like his father who had played football for Rochdale, but following his careless loss of several articles of clothing in the changing rooms, his mother went to his school, made rather a scene and insisted that he should stop playing football. This very much upset the boy, who was on the school team and he cried himself to sleep that night. The stealing dated from this time and the stolen money was significantly spent on balls which he gave away. His school work also began to deteriorate. After a discussion between the mother and the School Nurse, Nurse consulted the school who agreed he had been badly handled at home and who arranged for him to resume football. There has been no further trouble.

Another ten year old boy began to truant and to sleep out at night on grassland near his home. The home was found to be very well-kept and furnished. Both parents were working and had little time to spend with their children. The boy spent as much time as possible with an aunt who had always longed for a boy, but whose only girl is now grown-up. The aunt said that the boy was very affectionate, often wanting to "clip on" and sometimes sitting on her knee, a practice his mother did not permit and disapproved of on the aunt's part, calling it "spoiling". It seemed impossible to change this busy, very practical and undemonstrative mother, so it was recommended that the aunt should continue to give him the demonstrations of affection that he craves and that he should be allowed to sleep in the garden on those occasions when he wants to "get away from it all".

A thought which occurs at times to the school doctor is that large families would find frequent baths much easier if shower baths were as frequent in homes, especially Corporation houses, as they are in schools. Children are accustomed to the idea of showers which have the added advantages of using less hot water and taking less time than the ordinary household bath. But since it is only within the last thirty years that baths have been automatically included in planning houses for the masses, presumably it will be many more years before the shower cabinet is accepted as a normal fitting for the family bathroom.

Some rewarding moments for the school doctor, nurse or clerk, come from spending a little time explaining to parents things of which they have been, sometimes for years, pathetically ignorant. Hospital staffs are very busy, we know, but it does seem that much so-called defaulting or non-co-operation would not occur if even the simplest explanation of medical conditions could be given to the parents of ailing children. The average parent is devoted to his children, anxious for their welfare and willing to go to great inconvenience and expense to ensure this welfare. Our sympathies are with the mother who repeatedly

has to ask for time off work, always a full day if a journey to Manchester, a long wait and a meal are involved, only to be told "come again in two months", without any comment on the child's progress or reason for the return. The woman has lost her day's wage and earned the disapproval of her foreman for nothing, or so she thinks. When it is explained that, for example, the Ear, Nose and Throat Surgeon is waiting for the right time to do a tympanoplasty, or the Orthopaedic Surgeon for the day when a sequestrum is ready for removal, she is perfectly satisfied, but only too often the few words of explanation have either not been given or have been imperfectly understood, because technical terms have been used.

Infestation with Vermin. (Table III, Page 111).

As usual, each school was visited by the School Nurses three times during the year for hygiene inspection. The inspections made numbered 31,479 and following these inspections 32 children attended the Public Health Department's Cleansing Centre.

The cleanliness of the children, reported last year to be steadily improving, has continued to improve and the hard core of dirty children has become smaller and possibly harder. During 1957, 791 children, or 2.51%, were found with some sign of verminous infestation. In 1956 this percentage for the same total of inspections, was 3.9%. On fifteen occasions, a school department was found to be 100% clean. Four schools attained this figure twice. The nurses continue to devote much time and energy to this work and are in most cases helped very much by the head teachers and their staffs.

Children treated at the Cleansing Centre :

	1957	1956
Verminous heads—		
Referred by School Medical Service ...	36	78
Referred by Family Doctor... ..	1	1
Referred from Children's Committee Home ...	—	3
Scabies—		
Referred by School Medical Service ...	17	16
Referred by Family Doctor... ..	5	2
Referred by Consultant Paediatrician ...	1	—
Verminous body—		
Referred by School Medical Service ...	1	1

Altogether, four children were sent from the School Clinic to the Centre, the rest being found in the course of school inspections. The child infested with body lice was the same boy mentioned in last year's report. He was treated before Christmas, the father refusing to attend for treatment himself. After Christmas the boy's condition recurred and on this occasion the father's attendance was ensured by pressure from the Public Health Department.

School Clinic. (Table IV, Groups 1, 2, 4 and 7, Pages 113 and 114).

The total attendances during 1957 were 6,117, much the same as the previous year with 5,966, and the children attended because of the following conditions :—

	1957	1956
Ringworm	1	2
Scabies	9	16
Impetigo	58	184
Other Skin Diseases	112	61
External Eye Diseases	51	31
E.N.T. Conditions	177	198
Miscellaneous Minor Ailments	1,225	955
Septic Wounds	165	231
Plantar Warts	57	60

The incidence of Plantar Warts has varied little. Septic and Contagious Skin Conditions have reduced. The only figures which have increased are Eye cases and Miscellaneous Conditions, mainly minor injuries.

SCHOOL DENTAL SERVICE

This year has been more satisfactory in many respects than for some time, there having been no multiple changes in staff as was the case over the past few years and, although no full-time officers have been secured, two new Attendants, replacing Mrs. Smith and the late Miss Petrie, together with a more or less static position in the number of part-time officers, have made both re-organisation and progress possible.

The equivalent of 2.7 full-time officers have been in service during the year, Mrs. Gibson retiring for four months for domestic reasons, but returning towards December on a slightly reduced sessional basis. In spite of advertising and personal contact with the Dental Schools, it has not been possible to appoint a full-time officer. One was engaged, but failed to commence and in other cases enquiries did not materialise. The difficulty of attracting entrants into the School Service in competition with the Services, the General Dental Service and Hospitals remains a perennial problem. Numbers are limited and many do not care for children's work. In other cases, with men in particular, the commencing salary and the length of time needed to reach the maximum militate against recruitment. Even such climatically favoured localities as Devon and Cornwall are under strength.

All the schools in the Borough have been visited for Routine Dental Inspection, including Nursery and Special Schools. It is hoped that staffing will enable this to be continued, since it enables a proper picture of the general

condition to be obtained. When treatment is considered necessary, regular routine visits act as a reminder to parents. Twenty-five per cent of children examined were free from dental defects and fifty per cent were advised of the necessity for early treatment. The condition in general is quite fair, all things considered. It could only be considered really satisfactory when not more than one third need treatment. Such a position neither we, nor any other Authority, are likely to realise under present conditions.

All the Clinics have been in use during the period and the service provided in the Kirkholt/Balderstone area has been well attended and appreciated, catering as it does for the now large child population centred there and avoiding the difficulties of travel to town.

Over 5,000 fillings have been inserted, the majority in permanent teeth, and over 2,700 teeth extracted, about 14% only of these being permanent, while some were removed to relieve "overcrowding" rather than because they themselves were defective.

The problem of dental caries remains as intractable as ever in spite of greater awareness of the need for regular treatment and increased interest in dental health.

Only one half of the children inspected in Nursery Schools were free from dental defects and in a total of thirteen Infant Schools this had dropped to 42%. The condition of older boys is less satisfactory than the girls. Standards of oral hygiene are lower and there seems to be less interest in the advantages of a clean and well-preserved dentition.

Parents can greatly assist in preserving the dental health of their children by seeing that teeth are cleaned regularly, particularly last thing at night. The mere provision of a brush and toothpaste, achieves little. Soft, sticky foods and sweets should be avoided and dental attention sought on the first signs of even small specks and discolourations which are often signs of commencing decay.

The number of children either wearing or in need of dentures has been agreeably small. These are normally children over fourteen years of age and the defects result from injury or chronic neglect. Three such cases found towards the end of the year are being provided with the necessary replacements for front teeth.

The number of children sustaining injury to front teeth has been less this year, probably due to the mild winter, since most of these are the results of sliding or sledging, the others being due to football, cycling, playground collisions and falls. It is possible to preserve these teeth in many cases by immediate treatment and thus avoid gaps or dentures during school life.

Defective Vision—The Eye Clinic.

Mr. Stewart Scott has continued his thrice-weekly clinics at the Penn Street premises and any surgical treatment required has again been carried out by him at Rochdale Infirmary or the Manchester Royal Eye Hospital. The new Ophthalmic Clinic at Birch Hill Hospital is gradually becoming staffed and equipped and already some children needing refraction only are being referred there. These children have all originally been examined by Mr. Scott at Penn Street, but need re-refracting sometimes fairly frequently after treatment here at the Orthoptic Clinic. The fact that these refractions can now be done at Birch Hill reduces their waiting period and relieves the pressure on Mr. Scott's services at the School Clinic.

Altogether, 980 children attended the Eye Clinic sessions at Penn Street during 1957, 968 being refracted. About half these children (485) were prescribed glasses. The Medical Officers of the Lancashire County Council referred 64 children to our clinics and the others were Rochdale school children, with the exception of sixty-two, all with squints, who were referred from the Infant Welfare Clinics.

Twenty-seven children attended the clinic for other reasons than refraction or squint. Eleven were new cases and the rest re-examinations of children with chronic eye conditions, already known to us. They were diagnosed as follows:—

Nystagmus	...	...	...	...	...	...	...	...	7
Cataract	...	...	...	...	...	...	...	...	4
Chalazion	...	...	...	...	...	...	...	...	2
Conjunctivitis and Blepharitis	...	...	...	...	...	...	...	...	2
Congenital Coloboma of Iris and Choroid	...	...	...	...	...	...	...	...	2
Corneal Ulcer, Injury, blocked Lachrymal Duct, Dermoid Cyst, Coloboma of Macula, Optic Atrophy, Megalocornea of both Eyes, No Tears (1 each)	...	...	...	...	...	...	...	...	8
For completion of Form B.D.8	...	...	...	...	...	...	...	...	2
									—
Total	...	...	...	...	...	...	...	...	27
									—

Parents of small children are normally issued atropine ointment to be rubbed into the eyes for a week before refraction, but this is often inefficiently done, so that dilatation is inadequate when the child attends for refraction. In September we began to require the mother's attendance a week before the refraction for instruction in the proper use of the mydriatic and the results have been a little better with practical instead of verbal instruction. Unfortunately, many parents with several children and living at a distance, such as the County cases, find an extra visit to the clinic very difficult.

We have two blind and three partially-sighted children at Special Residential Schools.

Orthoptic Clinic—Report from Miss Dean.

During the year there were 2,739 attendances. On 467 occasions patients failed to report, in many cases because of illness, the parents asking for later appointments. Of the 187 new cases, 52 were patients from the Lancashire County Council area. At the end of the year, there were 21 new cases on the waiting list.

Twenty of these new cases were found to have pseudo-squints. No treatment is necessary for these, but usually the children are kept under observation until they are old enough to do simple tests and to use the illiterate E. Card.

It is satisfactory to report that of the 112 patients discharged all have been cured of squint or cosmetically improved.

Dr. Scott's waiting list for refraction has increased again, but should show a substantial reduction with the referring of certain patients for refraction at the new Ophthalmic Clinic at Birch Hill Hospital.

Thirteen children underwent squint operations at Rochdale Infirmary during the year and one boy will require a further operation to deal with a small residual angle of squint. There remains a waiting-list of 39 patients and it is hoped that beds will be allocated for these in the New Year.

Ear, Nose and Throat Consultant Clinic.

Mr. Smith and Dr. Basu have again conducted clinics as required at Penn Street and have also operated on or otherwise treated the children at the Infirmary.

	1957	1956
New cases examined	144	152
Re-examinations	230	388

A hundred and ten children were considered to need operative treatment. At the Infirmary 91 tonsillectomies were done on our cases, four antral washouts, one Eustachian Catheterisation and a manipulation of a fractured nose. Other forms of treatment than surgical were sufficient for 199 children. At the end of the year there were 64 names on the tonsillectomy waiting list as compared with 67 the previous year. Sixteen Rochdale children are at Residential Special Schools for the Deaf and the Partially-deaf.

Audiometric Testing.

Most of the primary schools were visited during the year for audiometric testing by the sweep method. Again entrants and former absentees were tested. The alterations at St. Edward's School are now complete, so this school was tested for the first time. In all, 1,282 children were tested at school. Thirty-three were referred for more detailed testing at the clinic, as requiring further investigation and the disposal of these cases was as follows :—

Hearing found satisfactory for practical purposes	...	...	...	...	12
Progress to be watched at school	...	...	...	...	4
Referred to minor ailment clinic	...	...	...	...	1
Referred to E.N.T. clinic	...	...	...	...	6
					—
					23
Re-examinations from E.N.T. clinic	...	...	...	...	10
					—
Total	...	...	...	...	33
					—

The resources of Professor Ewing's Department for the Education of the Deaf at Manchester University continue to be available for our children and we must again record our gratitude to him and his staff.

Speech Clinic.

Report by Miss Hartley, Speech Therapist.

During 1957, 188 children made 1,870 attendances at this clinic. There were 82 new cases. New cases are for the most part five or six year old children. It is very rare for a child to get beyond this age before a speech defect is noticed and the child referred for help. Frequently, however, the parents, accustomed to the child's speech, tell me they had noticed no defect.

An experiment has been tried whereby a clinic has been held at High Birch E.S.N. School for one session each week. Several children from this school were already attending the clinic regularly, and various other children needed some help. It was felt that these children would co-operate better on their "home territory". Though it is difficult to assess the progress made, the children try hard, seem more aware of their speech and lose much less schooling than they did when making journeys to the clinic.

An interesting familial tendency to speech defect is shown by the following facts. In no less than seventeen cases, two or more children from the same family are on our present list, or else the child now attending has one or more siblings who attended the clinic at some time during the past three years. Generally the defect in the younger child's speech is due to imitating the elder. In one or two cases, where the defects are slightly different, or the age gap

precludes the possibility of imitation, it seems that the parents, fearing a defect in the younger child, use injudicious methods of correction. These make the younger child worried and may precipitate a stammer. In two cases three brothers from the same family were referred for speech therapy and here it seems the families suffer from an innate weakness of speech.

A boy of three and a girl of five were referred to the clinic because of very poor speech. Both chattered away happily and their sentence construction was quite good, but many sounds were wrong. Neither child responded readily when addressed. Their parents had recently suspected the children to be deaf and when tested in Manchester by Professor Ewing, fairly severe deafness was found in both.

The following table shows the distribution of different speech defects. The cases of retarded speech are with one exception among children suspected of sub-normal intelligence. The exception is a young brother and sister who had had a very unhappy and unstable home life. Probably when they become settled in the Children's Home to which they have been admitted their speech will automatically improve.

	Boys	Girls
	-----	-----
Simple Dyslalia	43	25
Multiple Dyslalia	27	5
General Dyslalia	4	1
Retarded Speech	7	3
Stammer	52	7
Hearing Defect	1	2
Defects of Voice and Cleft Palate	7	4
	-----	-----
Total	141	47
	-----	-----

Foot Clinic.

The foot clinic has been held on Friday afternoons, as before, by Dr. Cauchi since Dr. Moore left. The bulk of the cases are still crooked toes, valgoid ankles, flat feet and knock knee, but on the whole conditions have very much improved and young children are more adequately shod than they were.

During the year 276 individual children were seen, compared with 393 the year before, and there were 28 new cases and 308 re-examinations against 108 and 308 during 1956.

Difficult or awkward cases were again referred for advice to Mr. Gracie at the Orthopaedic Clinic.

The disposal of these cases was as follows :—

Corrective exercises	...	...	...	...	...	...	...	12
Adjusted footwear and appliances	...	...	...	...	...	...	...	11
Operative Treatment	...	...	...	...	...	...	...	2

Of the remainder six failed to attend when given an appointment and the others needed no active treatment at the time of examination. We again express our thanks to Mr. Gracie for his assistance and advice.

Consulting Paediatrician's Clinic.

During 1957, 21 children were referred to Dr. Wolman and, of these, one did not keep the appointment. The reasons for referral were :—

Heart murmurs	...	...	...	...	...	...	...	3
Respiratory infections	...	...	...	...	...	...	...	2
Debility and/or malnutrition	...	...	...	...	...	...	...	9
Behaviour problems	...	...	...	...	...	...	...	3
Incontinence	...	...	...	...	...	...	...	2
Enlarged thyroid	...	...	...	...	...	...	...	1
Choreiform movements	...	...	...	...	...	...	...	1
								—
Total	...	...	...	...	...	...	...	21
								—

Of these children, six were admitted to Lake View Continuation Hospital. One of the behaviour-problem children was referred to the Psychiatrist at Booth Hall Hospital, while the other two children were kept under periodic observation. The remainder of the referrals did not need any treatment.

We are grateful to Dr. Wolman for making these arrangements and for the useful advice and reports which we receive from him.

Brownhill School.

In collaboration with Miss Pearce, Head Teacher.

The old buildings in which are situated the children's dining rooms and cloakrooms, the staff and medical rooms and the dental clinic, have become increasingly difficult to keep in repair. In fact, parts of the building are falling down, shored up and out of use. Plans are being drawn up for a new building, incorporating the present classrooms, which will considerably facilitate the work done at the school and make possible remedial work which is much needed and which cannot now be done. Examples are the breathing exercises needed by the considerable number of asthmatic pupils and postural drainage for the several children with bronchiectasis. Adequate assembly and P.E. space with equipment for the latter will be much appreciated and bring this old school into line with the new and modernised schools from which the children come.

There were 48 new admissions during 1957, thirty boys and fifteen girls. One girl was recommended by the Consultant Chest Physician, one by the Consultant Paediatrician, seven by their family doctors and the rest were first found to need admission by the School Medical Officers.

The reasons for admission were as follows :—

	Boys	Girls
	<hr/>	<hr/>
Sub-normal nutrition and debility	7	7
Asthma	1	—
Nervous conditions	8	4
Physical handicap	1	1
Bronchitis	1	—
Other conditions	2	2
Fits	2	—
Admitted for observation	8	4
	<hr/>	<hr/>
Total	30	18
	<hr/>	<hr/>

The children admitted for observation have again shown the most diverse symptoms and form a most interesting group.

1. Boy, aged 9, pale and thin with poor vision and unable to read a single word. I.Q. 81. He has poor self-control and no power of concentration and is unable to listen even to stories for more than a few minutes. We have no co-operation from the home since his mother is perfectly satisfied with this child as he is.

2. Boy, aged 9, tall and thin with a poor posture and I.Q. of 86. The home is good and the mother has plenty of insight. The boy is amenable to discipline, but easily led by others. He works hard, but has a very low level of attainment and no initiative whatever.

3. Boy, aged 10, I.Q. 113, restless and impetuous, fussy about food, no patience and a vocal tic. Said to need Child Guidance, but this was not available. After a few months at Brownhill he is much more settled, has more control, better application to work and is less faddy about his food, but still inclined to live in a world of his own.

4. Boy, aged 11, I.Q. 88, but not working to capacity. Has a poor digestion. On admission his visual memory was that of a boy of 14, but his auditory memory was practically non-existent so he was extremely backward scholastically. He gave the impression that he knew his limitations, accepted his attainments as hopeless and was, therefore, resentful and unhappy. He has, after eight months, made wonderful progress in reading and number. Encouragement and praise, together with a firm but understanding attitude on the part of the teacher, have undoubtedly given him new confidence in himself, convincing him

that his attainment can and will be improved. This has reduced his anti-social behaviour and given him an incentive to work. Physically he has much improved too.

5. Boy, aged 14, a polite and very much inhibited boy, who was developing into a recluse. For some little time before admission to Brownhill he had refused to go to school at all. His mother dressed him in a very effeminate way in coloured jeans and a pretty floral shirt. Probably she wished he was a girl. We succeeded in persuading her to dress him in cord trousers or grey flannels with a modern boy's shirt and jacket so that he now looks more like a normal boy. He is still rather temperamental and emotional, but has attended school regularly and caused no trouble. For a time he opposed instructions in work, but is now more co-operative.

6. Girl, aged 13, admitted for frequent fainting attacks. She has never fainted at Brownhill, is a happy and contented girl and a normal energetic pupil.

7. Girl, aged 10, said to need Child Guidance Clinic treatment, but none was available. She was on admission disobedient with a history of stealing and a habit of talking to imaginary people. So far, after six months at Brownhill, she has been quite normal, working satisfactorily and with plenty of self-confidence. No disobedience.

One severely handicapped spastic boy was transferred from Brownhill when a place was found for him at a School for Physically Handicapped Children. His original admission to Brownhill was a temporary expedient since he needed more than we could give him.

Another boy was found a place at a Residential School for Epileptics. A third boy, with severe congenital heart disease, who had attended no other school than Brownhill and had to be provided with door-to-door transport in a taxi, unfortunately succumbed to his second cardiac operation in November.

Again we have had a few disappointing experiences, because of lack of co-operation from parents, a minority of whom expect miracles done between the hours of nine and four. A girl of 13 was admitted from the Grammar School where things were too much for her and where her behaviour had evoked a suggestion that she needed psychiatric treatment. Her physical condition was good, but she complained of frequent minor upsets such as headaches, sore throats, a whitlow. It was discovered after four months that each week she went to the pictures once, a youth club once, and a local dance hall three times, so it was decided that her place at Brownhill could be better used.

A boy of nine was admitted chiefly because of minor behaviour problems. We eventually became certain that this was entirely due to the mother's determination that this child, who had a strong will and a well-defined personality,

should behave in exactly the same way as his more docile and colourless brothers and sisters. He was discharged after a few months during which we tried to persuade the parents to allow him a little more latitude, but this over-tidy and strict home may cause him to destroy something more important than his own puppets, on which he released his pent-up emotions at Brownhill.

Another boy, aged 14, was said to be destructive and bad-tempered at home and to need psychiatric treatment. Home visits and other evidence made it obvious that in this unhappy home the family spent most of their time quarrelling. The mother, at times foul-mouthed, pays frequent visits to schools, objecting to her children being disciplined or corrected in any way. The boy was in good physical condition, a pleasant, smiling and agreeable child, no trouble whatever in school. He was discharged after three months, not considered to need a place at Brownhill.

A third boy, an only child, aged 9, was admitted because of nervous tics, tachycardia and poor posture. The family had left a Corporation house, finding the rent more than they wanted to pay. The father seemed a good type of rather rough workman, but the mother, apparently of sub-normal mentality, behaved in a very odd manner, dashing upstairs without a word when a home visit was paid, and rushing about overhead, presumably making the two beds which constituted the entire upstairs furniture. She had little idea of bringing up a boy and especially of seeing that he had the badly needed social contacts we recommended. We did our best, and had had some small success when he left Brownhill after seven months.

The staff at Brownhill can look back on a year of considerable activity and success in circumstances of great inconvenience. Teaching, medical and catering staff all look forward with pleasure to extending their work in the modern and attractive surroundings of the new school.

Examination of Educationally Sub-normal Children.

Since the early months of 1957, another of the Medical Officers, Dr. M. A. McKenzie, has become available for mental testing, so the burden of this branch of school medical work upon Dr. Mills has been very much eased. Altogether, 169 children have been fully tested. These children are for the most part referred by the Education Authority because of their poor showing in school examinations. About one in eight is found to be truly educationally sub-normal, in the sense that ascertainment and special education are necessary. The rest are not working to their capacity for one or more of a variety of reasons.

There can be no doubt that many parents are deeply concerned about their children's backwardness in school attainment. Only the backward or very careless parent is unconcerned. Too often, however, parents' only remedies for backwardness involve considerable and sometimes unwise spending. Private tuition is sought, often with good results. With a less happy outcome, the more

gullible parents spend large sums on encyclopaedias, sold on so-called easy terms by persuasive travelling salesmen. The parents' hope is that the child will be encouraged to read by the mere possession of these information-packed volumes. The truth is that these children would benefit far more from ten minutes spent by the father each evening in explaining elementary change over the shop counter and how to tell the time, or in playing simple word games, or in learning the multitude of things which the average child picks up as he goes along. The slightly sub-normal child can only learn these things with patience and deliberate effort. Time and trouble seem to be much scarcer than money, the spending of which for many promises the easy way out.

High Birch School—Head Master's Report.

The complement of 100 pupils has been maintained and despite 30 new admissions during the school year, a small waiting list has come into being. Three children have been transferred to other special schools and twelve pupils who had reached the compulsory school leaving age have been placed in suitable employment with the co-operation of the Youth Employment Officer. This placing is an indication of the care taken by the staff to ensure the future livelihood of the pupils and is a reflection of the confidence of employers in the product of High Birch School.

Some children are greatly handicapped by their inability to express themselves freely and fully in speech, a defect particularly noticeable in the self-conscious child. It is with a view to remedying this definite obstacle to learning that Speech Therapy has now been introduced into the time-table. Twenty-one children are already receiving considerable benefit from this remedial treatment.

Two groups of children, twelve boys and twelve girls, have enjoyed a fortnight's recuperation at the Rochdale Children's Moorland Home during holiday periods. One of the features of High Birch is the excellent spirit which has been built up between the staff, children and parents. The interest shown by parents and former pupils in school activities is remarkable and finds its expression in a thriving Parent/Teacher Association, and in full attendances at all social gatherings. The Annual Open Day held on the 23rd July was attended by more than 250 parents and friends, and the school was thrown open to display the pupils' work and general activities, including physical education, percussion and dance.

Most children like to display their efforts, whether it be in craft, art, music, or physical movement, yet many of these children had been deterred in their former schools by their comparatively low achievements. Under the stimulus of this school and the sympathetic interest taken in and paid to their efforts, the sense of failure so often previously experienced is replaced by a consciousness of positive achievement and an inner pride in its recognition by teacher, parent and class-mate.

Another interesting feature is the interest taken in the school by the staff of a local multiple store, who have made many generous gifts at festive seasons of the year and have, in turn, been themselves guests of the children at school socials organised in conjunction with parents.

In short, the spirit of High Birch is undoubtedly high, and the interest shown by parents, friends, employers and outsiders is most beneficial to the progress of the school and contributes to the general happiness and well-being of its pupils.

Remedial Education Course—School Organiser's Report.

Each September the reading ability of every seven year old child is assessed and compared with the normal standard for that age. The Remedial Teacher takes two twenty week courses, from February to July, and from September to February, visiting two adjacent schools in the morning for one hour each and two more in the afternoon. Children selected to attend the courses are those whose potential ability appears to be at least average, but who are backward in reading. Investigations to date show that about one child in twenty falls into this category. Attention has been concentrated upon pupils in the first year of the junior schools, because this is the best stage for remedial work and offers the best opportunity for ensuring that every child in need of attention is discovered and provided for, so that he or she can cope with the work of the junior school.

In general it is found that after twenty weeks' teaching, all the children have made at least one year's progress in reading ability, often considerably more. These children are still backward and will need special attention from their class teachers to further the improvement made during the remedial course. Nevertheless, they have shown that they are capable of major improvement if more individual attention can be given to them. They do make up the considerable leeway in attainment which has hitherto marked them out from children of like ability.

The remedial classes are conducted usually in the child's own school, because pupils then waste no time attending a separate centre and the all-important co-operation and consultation between the class teacher and the remedial teacher is facilitated.

The arrangements for treating children who are dull and backward are not so encouraging. Under present conditions of crowded classrooms and shortage of experienced teachers trained to deal with problems of backward children, it is difficult to provide the special individual attention which these children clearly need.

Child Guidance.

We have still no Child Guidance Clinic and no Educational Psychologist in Rochdale, and we have the utmost difficulty in obtaining a psychiatric consultation. Treatment is quite unobtainable.

Children Notified to the Local Authority for Mental Deficiency.

Altogether, fourteen children were recommended to the Education Committee during 1957 as suitable for notification to the Local Authority for Mental Deficiency. Ten had attended Special Schools and were notified under Sub-section 5 of Section 57 of the Education Act, as being in need of statutory supervision after leaving school. The other four were notified under Sub-section 3 of the same Section as being ineducable.

The four ineducable children have all been admitted to the Occupation Centre. Three were notified and admitted at the age of five. The other was eight years of age when notified. She had attended a Primary School for a time, but was found impossible to test. She attended the Occupation Centre for observation and after a time improved so much that a satisfactory mental test and examination were completed enabling notification under Sub-section 3.

Nursery Schools.

During the year 39 Medical Inspections have been carried out and 537 children have been examined. On an average most of the children have been examined at six monthly intervals and more examinations have been done if this has been considered necessary. The general condition of every child who was examined was reported to be satisfactory. This speaks very well for the general nutrition of the children concerned and the care that they have received.

The types of defects that have been reported are as follows :—

Teeth	...	...	...	69	Speech	...	...	...	10
Eyes—					Heart and Circulation	...			5
Vision	...	...	...	4	Lungs	...	...	...	3
Other	...	...	...	33	Deformity	...	...	...	45
Ears—					Posture	...	...	...	1
Hearing	...	...	...	3	Flat Foot etc.	...	...	...	6
Other	...	...	...	13	Mental Development	...	...	...	15
Tonsils	...	...	...	40	Other Diseases	...	...	...	11
Cervical Glands	...	...	...	21	Nervous System	...	...	...	—

At Medical Inspections the opportunity is taken to catch up with Vaccinations and Immunisations against Whooping-cough and Diphtheria when these have not already been done. Most children attending nursery school have had these vaccinations and immunisations completed. A few are in the process of having them done at the end of Medical Inspections and we are waiting for consents in the case of about 6 children.

Verminous Conditions.

	Head		Clean		Nits		Vermin	
	Inspections							
	1956	1957	1956	1957	1956	1957	1956	1957
First Quarter ...	1,229	1,390	1,195	1,350	33	40	1	—
Second Quarter ...	1,288	1,117	1,253	1,085	31	32	4	—
Third Quarter ...	798	744	786	729	10	15	2	—
Fourth Quarter ...	1,361	1,221	1,325	1,198	32	21	4	2
	4,676	4,472	4,559	4,362	106	108	11	2

It will be seen from these figures that there are fewer cases with actual vermin this year than last although there is a slight increase in the number of children with nits. From these figures it should follow that one inspection of 80 children should average 2 children with dirty heads. In actual practice, however, there are often inspections when no defaulters are found, although of course there are other occasional ones when considerably more are discovered.

The Public Health Staff are very pleased that there is so much co-operation between the Head Teachers and Staff at the Nursery Schools and themselves. We wish to thank everybody concerned for the consideration which they have shown to us.

The Nursery Schools are doing good work and there are many children who have benefited by their admission and attendance there. The staff are not just keeping an eye on them for their mothers between the hours of 8-30 a.m. and 4-30 p.m., they are caring for both their mental and physical needs during this time and by their help and supervision they are able to influence them in the right direction. Children attending Nursery Schools are given activities in accordance with their growing mental needs and their health is looked after in many ways, including provision of periods for rest, also supervision of, and training in, personal cleanliness and the use of toilets and cloakrooms. The dinners which they are given each day are designed especially for the needs of children of their age, and they are also encouraged to take the necessary exercise and fresh air. The children also benefit from the company of others of their own age and Nursery Schools are a good way of teaching them to live a community life.

There are also children who are in some way out of the ordinary who have special reason to be thankful to the Nursery Schools. Those who have developed difficulties in feeding or other problems of behaviour seem to have no difficulty at all when they are at Nursery Schools. Those who are slow to speak or to walk and run about or those who are abnormally shy all benefit tremendously from the company they enjoy and the care of their teachers. Another group of

children who benefit are those who come from homes where normal care and attention is lacking. Their attendance at Nursery Schools assures that for a certain time each day they are looked after in a proper manner. They are fed and if they are not adequately clothed then efforts are made to remedy this defect. They are treated, as far as possible, as normal human beings and in this way their start in life is much better than they would receive in their own homes.

Diphtheria Immunisation.

During the year 232 children of school age completed a full course of primary immunisation and 667 children who had previously been immunised received reinforcing injections.

Infectious Diseases.

The following cases of infectious diseases were notified among school children during the year :—

	1957
Scarlet Fever	23
Measles	527
Whooping Cough	27
Chicken Pox	13
Sonne Dysentery	13
	603

Poliomyelitis Vaccination.

During the year 2,104 children received a full course of two injections, 1,393 of which were given by the School Medical staff. There were 1,441 children of those vaccinated who were of school age, while the remainder, were under five.

Skin Testing for Tuberculosis.

There were thirteen schools visited for the purpose of carrying out skin tests during 1957. A total of 1,859 tests was carried out with 1,770 negative results and 89 positive results. From these positive results no cases of Pulmonary Tuberculosis were diagnosed, but from subsequent follow-up one parent was found to be a Tuberculosis case. The Heaf Multiple Puncture Method was used throughout.

B.C.G. Vaccination against Tuberculosis.

There were 35 children of school age who received a full course of B.C.G. Vaccination under the contact scheme at the Chest Clinic during the year.

Children Neglected in their own Homes.

A member of the School Medical staff has attended each meeting of the Joint Committee for Children Neglected or Ill-treated in their own Homes.

Of the fourteen new cases dealt with, four cases, involving sixteen children were referred from the School Medical Department. The first of these families included eight children, where the main difficulty was poor housing accommodation linked with low family income. Unfortunately, the father was not co-operative in improving the housing conditions. The second family with two children, included mental deficiency and the father in prison. The main thing here was to re-assure and advise the mother from time to time. The third family contained two children suffering mainly from behaviour problems and continues under supervision. The fourth family with four children, including two illegitimate children, contains all the problems of the broken family, repeatedly re-joining and re-breaking. The main assistance here was to see to the physical well-being of the children.

Other Medical Examinations.

The medical examinations of adults at the school clinic during 1957, are classified as follows :—

Corporation Superannuation Scheme...	...	...	...	...	121
Full-time workers in Meals Service	...	...	...	...	54
Training College students	...	...	...	...	33
					<hr/>
Total	...	...	...	...	208
					<hr/>

The following special examinations were made of children. These are figures which cannot be included in any part of the statistical tables.

Children undertaking part-time employment	...	...	...	281
Children going to camp, holidays abroad, boarded out, acting in pantomime, returning to Special Schools	...	...	...	196
Special survey of children prematurely born	...	...	...	98
				<hr/>
Total	...	...	...	575
				<hr/>

Prematurely Born Children.

The regular examination of these children has continued and during 1957 there were 51 six year olds and 47 eight year olds seen. Twenty-three children did not attend when sent for, occasionally because of illness, but more often because the parents did not think the examination necessary. Persistent non-attenders are examined at the next medical inspection of their school. There is nothing to add to the remarks made in last year's Report on the physical condition of these children.

National Society for the Prevention of Cruelty to Children.

Inspector Budd has filled the vacancy caused by Inspector Lowe's leaving the district and he supplies the following report :—

The total number of cases for the area was 153 during 1957, involving 382 children. Thirteen families were reported to me by the School Medical and Education Departments, one family on two occasions, totalling 14 complaints. These families involved 29 school children and eleven under school age. In one case, a boy was taken to the Juvenile Court and placed under the supervision of the Probation Officer. Three of the families are still under my supervision. Warnings and advice have sufficed for the remainder.

Convalescent and Holiday Homes.

The Moorland Home and the Convalescent Home at St. Anne's have again given holidays to many Rochdale children. Those who went to the Moorland Home, 174 in all, were first examined at the School Clinic. Pearson's Fresh Air Fund has again taken 75 Rochdale girls to Squire's Gate, Blackpool, and 14 of these were selected for a Christmas holiday there as well.

School Meals Service.

Report from Miss Elsworth, Organiser.

There are at present 18 kitchens and 49 dining centres in the Rochdale School Meals Service, ranging in size from Nursery School kitchens with a capacity of 80 meals per day to the Central Kitchen at Brownhill with a capacity of approximately 1,500 meals per day. The average number of school meals produced is 6,200 a day and of these 350 are free meals.

The School Meals staff includes full-time and part-time kitchen helpers, meals servers working at the dining centres and welfare assistants who look after the children during the dinner break. All full-time employees have an annual medical examination.

The number of meals served to school children during the last ten years is as follows :—

	Free Meals Supplied	Meals Paid For
1957	60,977	977,261
1956	56,773	1,021,849
1955	50,849	965,795
1954	48,681	949,693
1953	47,547	939,985
1952	46,820	941,644
1951	26,963	902,751
1950	35,177	955,399
1949	42,191	812,055
1948	42,730	853,818

Cost of Medical and Dental Inspection, and Treatment.

Year ending 31st March, 1957.

	£
Salaries of Medical, Dental and other staff	14,687
Local Government Superannuation—	
Equivalent Contribution	808
Equal Annual Charge	488
Additional Allowance	10
National Insurance	283
Printing, Stationery and Advertising	295
Postages and Telephones	235
Drugs, Medical Requisites and Apparatus	966
Uniforms and Clothing... ..	221
Rents, Rates and Insurance	461
Travelling and Subsistence	246
Upkeep of Buildings—Repair and Maintenance	74
Fuel, Light and Cleaning	1,266
Medical Examinations	Charge £50
Less adjustments for previous years	Credit £213 Credit 163
Cleansing of Pupils and Clothing	76
Conveyance of Children	386
Other Expenses	80
	£20,419

MEDICAL INSPECTION RETURNS

YEAR ENDED 31ST DECEMBER, 1957.

TABLE I.

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

A.—PERIODIC MEDICAL INSPECTIONS.

Age Groups inspected and Number of Pupils examined in each :—

Entrants	...	...	...	...	...	...	...	1,209
Second Age Group (11+)	...	...	...	...	...	...	...	1,088
Third Age Group (14+)	...	...	...	...	...	...	...	1,042
								Total	3,339
Additional Periodic Inspections	...	...	...	...	...	...	...	1,588
								Grand Total	4,927

B.—OTHER INSPECTIONS.

Number of Special Inspections	...	...	...	...	...	...	...	113
Number of Re-inspections	...	...	...	...	...	...	...	2,499
								Total	2,612

C.—PUPILS FOUND TO REQUIRE TREATMENT.

Number of Individual Pupils found at Periodic Medical Inspection to require treatment (excluding Dental Diseases and Infestation with Vermin)

Age Groups Inspected	For defective vision (excluding squint).	For any of the other conditions recorded in Table III	Total individual pupils
(1)	(2)	(3)	(4)
Entrants	17	155	160
11 +	102	145	220
14 +	137	83	201
Total	256	383	581
Additional Periodic Inspections	116	195	280
Grand Total	372	578	861

TABLE I.—(continued)

D.—CLASSIFICATION OF THE PHYSICAL CONDITION OF PUPILS INSPECTED IN THE AGE GROUPS RECORDED IN TABLE I.A.

Age Groups Inspected	Number of Pupils Inspected	Satisfactory		Unsatisfactory	
		No.	% of Col. (2)	No.	% of Col. (2)
(1)	(2)	(3)	(4)	(5)	(6)
Entrants	1,209	11,98	99.09	11	.91
11 +	1,088	1,079	99.18	9	.82
14 +	1,042	1,041	99.904	1	.096
Additional Periodic Inspections	1,588	1,572	99.00	16	1.00
Total	4,927	4,890	99.25	37	.75

TABLE II.

INFESTATION WITH VERMIN.

(i) Total number of individual examinations of pupils in schools by the school nurses or other authorised persons	31,479
(ii) Total number of individual pupils found to be infested	791
(iii) Number of individual pupils in respect of whom cleansing notices were issued (Section 54 (2), Education Act, 1944)	43
(iv) Number of individual pupils in respect of whom cleansing orders were issued (Section 54 (3), Education Act, 1944)	7

TABLE III.

RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION.

A.—PERIODIC INSPECTIONS.

Defect Code No.	Defect or Disease	PERIODIC INSPECTIONS				TOTAL (including all other age groups inspected)	
		Entrants		Leavers		Requiring Treatment	Requiring Observation
		Requiring Treatment	Requiring Observation	Requiring Treatment	Requiring Observation		
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
4	Skin	6	9	7	3	27	25
5	Eyes— a. Vision ...	17	4	137	88	372	329
	b. Squint ...	74	30	14	—	173	41
	c. Other... ..	2	2	—	1	5	4
6	Ears— a. Hearing ...	—	20	—	2	19	32
	b. Otitis Media	5	9	5	1	24	20
	c. Other... ..	—	3	5	1	5	8
7	Nose and Throat ...	17	146	3	8	67	221
8	Speech	15	27	—	—	36	33
9	Lymphatic Glands ...	1	128	—	9	2	189
10	Heart	2	10	1	9	8	38
11	Lungs	7	21	5	7	32	47
12	Developmental—						
	a. Hernia ...	1	—	—	—	6	1
	b. Other... ..	1	20	7	5	16	48
13	Orthopaedic—						
	a. Posture ...	2	12	5	6	14	42
	b. Feet	8	22	23	37	81	125
	c. Other... ..	11	42	6	9	46	67
14	Nervous system—						
	a. Epilepsy ...	—	—	—	—	3	1
	b. Other... ..	—	—	—	—	2	2
15	Psychological—						
	a. Development	—	15	1	—	2	27
	b. Stability ...	—	4	—	—	1	7
16	Abdomen	2	4	—	—	4	6
17	Other	1	3	1	1	5	14

TABLE III—(continued).

B.—SPECIAL INSPECTIONS

De- fect Code No. (1)	Defect or Disease (2)	Special Inspections	
		Requiring Treatment (3)	Requiring Observation (4)
4	Skin	6	14
5	Eyes— a. Vision	443	225
	b. Squint	212	16
	c. Other	5	7
6	Ears— a. Hearing	5	20
	b. Otitis Media	11	9
	c. Other	2	3
7	Nose and Throat	47	80
8	Speech	42	29
9	Lymphatic Glands	2	19
10	Heart	5	26
11	Lungs	28	27
12	Developmental—		
	a. Hernia	1	—
	b. Other	—	20
13	Orthopaedic—		
	a. Posture	9	29
	b. Feet	62	53
	c. Other	25	39
14	Nervous system—		
	a. Epilepsy	3	3
	b. Other	—	13
15	Psychological—		
	a. Development	—	25
	b. Stability	—	11
16	Abdomen	—	5
17	Other	7	35

TABLE IV.

Treatment of Pupils attending Maintained Primary and Secondary Schools
(including Special Schools).

GROUP 1.—Eye Diseases, Defective Vision and Squint.

External and other, excluding errors of refraction and squint	63
Errors of refraction (including squint)	968
	<hr/>
Total	1,031
	<hr/>
Number of pupils for whom spectacles were prescribed	485

GROUP 2.—Diseases and Defects of Ear, Nose and Throat.

Received operative treatment—	
(a) for diseases of the ear	—
(b) for adenoids and chronic tonsillitis	91
(c) for other nose and throat conditions	6
Received other forms of treatment	376
	<hr/>
Total	473
	<hr/>

Total number of pupils in schools who are known to have been provided
with hearing aids—

(a) in 1957	3
(b) in previous years	10

GROUP 3.—Orthopaedic and Postural Defects.

Number of pupils known to have been treated at clinics or out-patient departments	625
---	-----

(10) Administration of general anaesthetics for extraction	...	...	...	...	40
(11) Orthodontics :—					
(a) Cases commenced during the year	...	...	...	...	26
(b) Cases carried forward from previous year...	...	...	...	...	20
(c) Cases completed during the year	...	...	...	...	7
(d) Cases discontinued during the year	...	...	...	...	3
(e) Pupils treated with appliances	...	...	...	...	4
(f) Removable appliances fitted	...	...	...	...	—
(g) Fixed appliances fitted	...	...	...	...	4
(h) Total attendances	...	...	...	...	88
(12) Number of pupils supplied with artificial dentures	...	...	...	...	—
(13) Other operations : Permanent Teeth	...	...	...	...	1,085
Temporary Teeth	...	...	...	...	232
Total (13)	...	...	...	...	<u>1,317</u>

TABLE VI.
HANDICAPPED PUPILS REQUIRING EDUCATION AT SPECIAL SCHOOLS OR BOARDING IN BOARDING HOMES

	(1) Blind (2) Partially sighted		(3) Deaf (4) Partially Deaf		(5) Delicate (6) Physically Handicapped		(7) Educationally subnormal (8) Maladjusted		(9) Epileptic	Total 1-9
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)
In the calendar year ended 31st December, 1957 :—										
(A) Handicapped Pupils newly placed in Special Schools or Boarding Homes ...	1	1	—	—	45	—	24	—	2	73
(B) Handicapped pupils newly assessed as requiring Education at Special School or boarding in Homes ...	2	1	—	—	48	3	20	—	4	78
On or about January 31st, 1958 :-										
(C) Number of Handicapped Pupils from the area—										
(i) attending Special Schools										
(a) as Day Pupils ...	—	—	—	—	96	6	90	—	2	194
(b) as Boarding Pupils...	2	3	6	10	1	10	3	2	1	38
(ii) attending independent schools under Authority arrangements ...										
(iii) boarded in Homes ...	—	—	—	—	—	—	—	1	—	1
TOTAL (C)	2	3	6	10	97	16	93	3	3	233
(D) Number of Handicapped Pupils being educated under arrangements made under Section 56 of the Education Act, 1944—										
(i) in hospitals ...	(63 Pupils were educated during 1956-57)									
(ii) elsewhere ...	—	—	—	—	—	1	—	—	—	1
(E) Number of Handicapped Pupils from the area requiring places in Special Schools (including any such unplaced children who are temporarily receiving home tuition) ...										
	1	1	—	—	13	2	6	—	1	25
(F) Were on the registers of hospital special schools 22										
(G) Number of children reported during the year—										
(a) under Section 57 (3) excluding any returned under (b)—4										
(b) " " " relying on Section 57 (4)—0										
(c) " " " 57 (5)—10										
of the Education Act, 1944										

TABLE VI
 HANDBICAPPED CHILDREN REQUIRING EDUCATION AT SPECIAL
 SCHOOLS OR BOARDING HOMES

Year	Total number of children requiring education at special schools or boarding homes		Number of children requiring education at special schools		Number of children requiring education at boarding homes	
	1944	1945	1944	1945	1944	1945
1944	100	110	80	85	20	25
1945	110	120	90	95	20	25
1946	120	130	100	105	20	25
1947	130	140	110	115	20	25
1948	140	150	120	125	20	25
1949	150	160	130	135	20	25
1950	160	170	140	145	20	25
1951	170	180	150	155	20	25
1952	180	190	160	165	20	25
1953	190	200	170	175	20	25
1954	200	210	180	185	20	25
1955	210	220	190	195	20	25
1956	220	230	200	205	20	25
1957	230	240	210	215	20	25
1958	240	250	220	225	20	25
1959	250	260	230	235	20	25
1960	260	270	240	245	20	25
1961	270	280	250	255	20	25
1962	280	290	260	265	20	25
1963	290	300	270	275	20	25
1964	300	310	280	285	20	25
1965	310	320	290	295	20	25
1966	320	330	300	305	20	25
1967	330	340	310	315	20	25
1968	340	350	320	325	20	25
1969	350	360	330	335	20	25
1970	360	370	340	345	20	25
1971	370	380	350	355	20	25
1972	380	390	360	365	20	25
1973	390	400	370	375	20	25
1974	400	410	380	385	20	25
1975	410	420	390	395	20	25
1976	420	430	400	405	20	25
1977	430	440	410	415	20	25
1978	440	450	420	425	20	25
1979	450	460	430	435	20	25
1980	460	470	440	445	20	25
1981	470	480	450	455	20	25
1982	480	490	460	465	20	25
1983	490	500	470	475	20	25
1984	500	510	480	485	20	25
1985	510	520	490	495	20	25
1986	520	530	500	505	20	25
1987	530	540	510	515	20	25
1988	540	550	520	525	20	25
1989	550	560	530	535	20	25
1990	560	570	540	545	20	25
1991	570	580	550	555	20	25
1992	580	590	560	565	20	25
1993	590	600	570	575	20	25
1994	600	610	580	585	20	25
1995	610	620	590	595	20	25
1996	620	630	600	605	20	25
1997	630	640	610	615	20	25
1998	640	650	620	625	20	25
1999	650	660	630	635	20	25
2000	660	670	640	645	20	25

