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COUNTY BOROUGH OF ROCHDALE



ANNUAL REPORT

OF THE

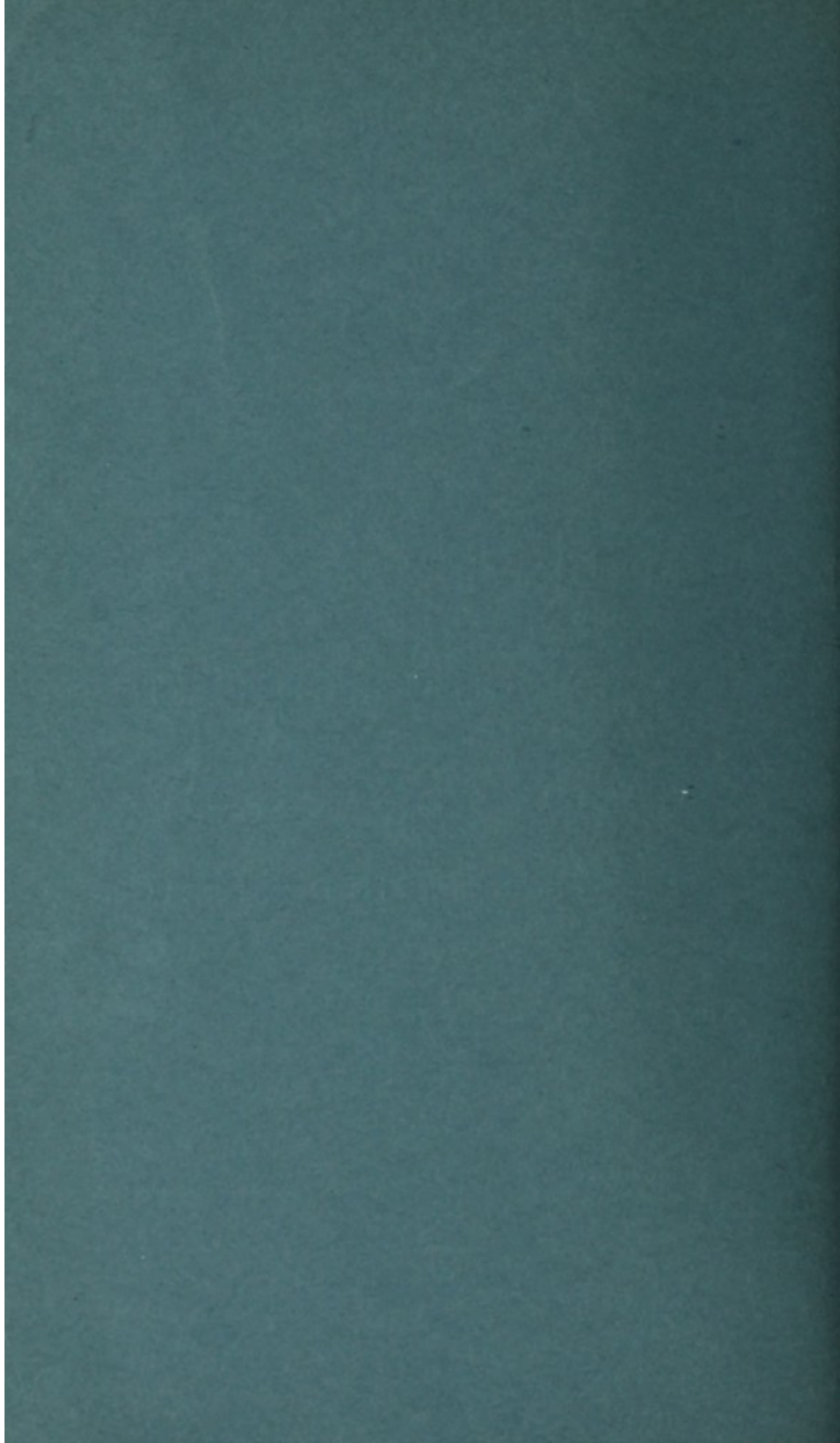
MEDICAL OFFICER OF HEALTH

AND

SCHOOL MEDICAL OFFICER

For the Year ending 31st December, 1958

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



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For the Year ending 31st December, 1958

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

Public Health Department,
Baillie Street,
Rochdale.

Tel. No. Rochdale 47474
Ext. 230

ROCHDALE:
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1959

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PUBLIC HEALTH OFFICERS

DECEMBER, 1958

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 :

MARY A. MCKENZIE, M.B., CH.B.
FRANCIS J. CAUCHI, M.D., B.SC., D.P.H.
DOROTHY NORMAN, M.B., CH.B.
(Ceased—5.6.58)
K. WASU THAKRE, M.B., B.S.
(Commenced—1.8.58)

Lay Administrative Officer :
S. BUTTERWORTH

Chief Public Health Inspector :
A. TURNER, C.S.I.B., CERT.M.I.

Senior District Public Health Inspector :
A. SYMONS, C.S.I.B., CERT.M.I.

Meat and Foods Inspector :
J. GAWTHORPE, C.S.I.B., CERT.M.I.

Public Health Inspectors :
W. C. CROSSLEY, C.S.I.B., CERT.M.I.
W. GARTSIDE, P.H.I.B.
J. PEARSON, C.S.I.B.
K. E. SMITH, C.S.I.B.
F. REYNOLDS, C.S.I.B., CERT.M.I.
(Ceased 12.1.58)

Health Visitors (Maternity and Child Welfare) :

B. ALLETSON, S.R.N., S.C.M., H.V.
S. H. BARLOW, S.R.N., S.C.M., H.V.
A. F. DOYLE, S.R.N., S.C.M., H.V., R.F.N.
E. M. MASSEY, S.R.N., S.C.M., H.V., Q.N.
I. RUSHTON, S.R.N., H.V.
M. M. SWITZER, S.R.N., S.C.M., H.V.
F. THORNTON, S.R.N., S.C.M., H.V., Q.N.,
R.M.P.A.
N. WHITELEY, S.R.N., S.C.M., H.V.
W. REEVE, S.R.N., S.C.M., H.V. (died 13.8.58)
E. REDHEAD, S.R.N., S.C.M., H.V., Q.N.
(ceased 17.4.58)

Health Visitors (Tuberculosis) :

M. L. GALLIMORE, S.R.N., T.B.CERT.
WM. GULLIFORD, S.R.N., Q.N.

Clinic Nurses : (Part-time)

J. MOSELEY, S.R.N., S.C.M., H.V.
H. ORMANDY, S.R.N., S.C.M., Q.N.
(commenced 13.10.58)
L. HOLLINSHEAD, S.R.N., Q.N.
(ceased 30.8.58)

Chief Dental Officer :

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

Dental Officers :

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

Dental Anaesthetist :

R. MALLINSON, M.B., CH.B.

Dental Attendants :

LUCY DANIELS, S.R.N.
MARY FLETCHER, S.R.N.
JESSIE LEACH

Duly Authorised Officers :

W. BEELEY W. KERSHAW
A. PATERSON (commenced—4.12.58)

Mental Health Visitor :

MARJORIE OLIVER (ceased—30.6.58)
PATRICIA SKELTON (commenced—30.6.58)

Occupation Centre Superintendent :

Mrs. I. TAFTS

Ambulance Officer :

E. OSBALDESTON

Social Worker :

CLARA M. LINTERN (Part-time)

District Nursing Association :

Superintendent—Miss D. A. HUNTER, S.R.N.,
S.C.M., H.V., Q.N., R.F.N.
1st Asst. Sup.—Miss M. MORGAN, S.R.N.,
S.C.M., H.V., Q.N., R.F.N.
2nd Asst. Sup.—Miss B. A. M. ALLWORK,
S.R.N., Q.N.

Municipal Midwives :

W. U. CARR, S.R.N., S.C.M.
G. DOWD, S.R.N., S.C.M.
S. M. HAMILTON, S.R.N., S.C.M.
M. L. HARRISON, S.R.N., S.C.M.
(commenced—9.6.58)
N. HOOK, S.R.N., S.C.M.
N. F. TOTTEN, S.R.N., S.C.M.
(commenced—29.9.58)
V. E. S. CORRIN, S.R.N., S.C.M.
(ceased—19.9.58)
K. WHELAN, S.R.N., S.C.M.,
(ceased—10.11.58)

Physiotherapist :

ELLEN LUMB, M.S.C.P.

CONSULTANT OFFICERS

Ophthalmic Surgeon :

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

Paediatrician :

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

Tuberculosis Physician :

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

E.N.T. Surgeons :

V. T. SMITH, M.D., F.R.F.P.S.
P. K. BASU, M.B., B.S.

Family Planning Medical Officer :

HELEN E. BARLOW, M.B., CH.B.
(ceased—19.11.58)
LENA WALKER, L.R.C.P., L.R.C.S.
(commenced 19.11.58)

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 1958.

Once again the first noteworthy point is the population figure which, according to the Registrar General's estimate, has fallen again from last year by 420 persons. This is in spite of the fact that there have been 107 more births than deaths in the town. I said last year that a continuation of the 1957 rate would mean a population in 1961 equal to the 1901 figure. It has in 1958 already reached the 1903 figure. Theoretically the decrease since the 1951 Census means a town of 1,000 fewer houses, a reduction of 3,539 persons at 3.5 persons per house.

The year showed a definite improvement in the infantile mortality rate, although it has not yet overtaken the record set up in 1955 of 17 deaths per 1,000 live births.

The number of inhabitants who survive to over 65 years of age continues to increase. It has more than doubled in the last forty years. This figure is not only an interesting statistical fact, but represents a social factor which must be taken into account on all sides. For instance, this age group of Rochdale residents absorbs 56% of the visiting time of the District Nursing Service and 98% of the Home Help Service.

The ambulance returns also indicate the changing attitude towards illhealth. More and more persons are being treated in Clinics, Out-patient Departments and under various Day Hospital arrangements. This change reflects on the one hand the appreciation of the costly nature of in-patient treatment and, on the other hand, the many benefits which accrue to the patient who can be treated on a domiciliary basis. It is quite apparent that Ambulance Services, particularly on the sitting case car side will have to expand to meet this need.

Several sections of the Report indicate the difficulty of maintaining staffs of Midwives, Health Visitors and Mental Health Workers in a County Borough in this part of England. There is an overall shortage of such workers and, under these circumstances, it is obvious that the type of district must influence applicants.

The proportion of Rochdale women admitted to the Maternity Home for their confinement continues to rise. So far, no real difficulties have arisen in regard to women where admission was necessary on social grounds, nor have any drastic changes had to be made in the number of days during which patients are kept in hospital.

No basic alterations have been made in our Clinic Services for Maternity and Child Welfare. It is hoped, however, next year to experiment in various directions both in regard to the most economical use of staff and the best use of ad hoc buildings, i.e. assuming that the latter become available during 1959.

So far as the prevention of disease is concerned, the chief interest still continues to revolve round the Poliomyelitis Vaccination Campaign, which was expanded at the end of the year to include persons of all ages up to twenty-five years. The number of persons immunised in this way was more than twice as great as the 1957 total. There were only three cases of Poliomyelitis in the town, these occurred in children towards the end of the year.

Further attention is drawn to the position of Pulmonary Tuberculosis in the town, with fewer new cases, fewer deaths and empty sanatorium beds. Considerable progress was made during the year in the demolition of unfit houses and the re-housing of the families concerned. Nevertheless, the Housing Survey indicates that there was at the end of the year still a total of 5,360 houses which should be regarded as unsatisfactory for human habitation.

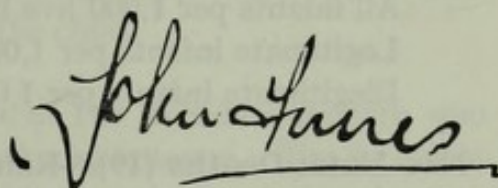
The drive against smoke polluted atmosphere took another definite step forward in the middle of the year with the coming into operation of the Clean Air Act, 1956. Amongst the many alterations in procedure, the main one resulted in the Council deciding on a programme of Smoke Control Areas, commencing on the Kirkholt side of the town. Detailed procedure, however, was not undertaken until 1959 and will, therefore, be recorded in the next year's Report. The measurement of atmospheric pollution in the town continues to show a decreasing degree of pollution.

I am glad once more to have the opportunity of acknowledging the work performed loyally and enthusiastically by all sections of the Department. The increasing co-ordination of services in the town is attributable to the individual members of the Public Health staff, as well as to other factors.

The staff has been fortunate in continuing to receive the support of the Health Committee throughout the year and, in fact, the co-operation of individual members in quite a number of social problems.

I have the honour to be,

Your obedient Servant,

A handwritten signature in dark ink, appearing to read 'John Jones', with a horizontal line underneath.

Medical Officer of Health,

19th September, 1959.

STATISTICS

Year ended 31st December, 1958.

Area (in acres)	9,556
Registrar-General's Estimate of Population, mid-year 1958 ...	84,890
Number of Inhabited Houses (Census 1951)	29,426
Number of Houses on Corporation Estates (December, 1958) ...	7,141
Number of Houses on Corporation Estates (December, 1957) ...	7,071
Estimated sum represented by a Penny Rate	£3,580
Rateable Value	£908,996
Estimated expenditure on Health Services provided for by rates ...	£72,410
<hr/>	
	Total M. F.
Live Births —Legitimate 1,319 ... 687 ... 632	
Illegitimate 81 (5.8%)* 44 (6.0%)* 37 (5.5%)*	
	<hr/>
1,400 ... 731 ... 669	
	<hr/>
* Illegitimate live births per cent of total live births.	
Birth-rate per 1,000 of estimated population ...	16.5
Still-Births 35—Rate per 1,000 total (live and still) births ...	24.4
Total Live and Still-Births	1,435
<hr/>	
	Total M. F.
Deaths 1,293 ... 639 ... 654	
Death-rate per 1,000 of estimated population ...	15.2
Deaths from Maternal Causes—Nil.	
Rate per 1,000 total (live and still births)	—
<hr/>	
Death-rate of Infants under one year of age (32 deaths)	
All infants per 1,000 live births	23
Legitimate infants per 1,000 legitimate live births (31)... ..	23
Illegitimate infants per 1,000 illegitimate live births (1) ...	12
Neo-Natal Deaths (19) —Rate per 1,000 total (live and still births)	13.2
	Deaths Rate per 1,000 of population
Cancer	201 ... 2.38
Tuberculosis (all forms)	10 ... 0.12

VITAL STATISTICS

Population.

The Registrar General's estimate of the population as at mid-year 1958 is 84,890. This compares with the mid-year estimate of 85,310 in 1957, and the 1951 Census figure of 88,429, and is almost identical with the population of the town as then constituted in 1903. During 1958 there was an increase in births and a lesser increase in deaths, giving a margin of births over deaths of just over 100.

Live Births

The live birth rate was equal to 16.5 per 1,000 of the estimated population. The figure for the previous year was 15.6. For the ten years 1948-57 the average birth rate was 15.2 per 1,000.

The proportion of illegitimate births was greater than the previous figure, 81 this year as compared with 72 last year, representing 5.8% of the total births. In the last six years the figure has varied between 5.4% and 6.7%.

Still Births

There were 35 still births recorded as against 39 in 1957. The average for the preceding five years was 34 still births.

Infant Mortality

There were 32 deaths registered under one year of age, equal to a mortality rate of 23 per 1,000 live births registered, compared with 46 deaths and a mortality rate of 34 in 1957. 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. The figure for the present year is the same as that for 1954.

The decrease this year shows itself mainly in respect of deaths due to premature birth, referred to overleaf, and to congenital malformation. In eight of the deaths appearing in Table III (Page 73), grouped under "Other Causes", no fewer than four are due to intrinsic factors or foetal deficiencies rather than to any conditions preventable after the birth of the child.

The following Table which sets out the fate of 113 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 Report for the last few years.

Table I (Page 71) shows comparative figures for Infantile Mortality in the Borough.

Premature Births during 1958.

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 ...	—	9	—	9	—	4	—	1	—	—	—	—	—	—	4	—	4
3 lbs. 5 ozs. to 4 lbs. 6 ozs.	2	18	—	20	—	1	—	1	—	—	—	—	—	—	18	—	18
4 lbs. 7 ozs. to 4 lbs. 15 ozs.	2	20	1	23	—	—	—	—	—	—	—	—	—	2	20	1	23
5 lbs to 5 lbs. 8 ozs.	11	44	6	61	—	—	—	—	—	1	—	—	1	10	43	6	59
Totals	15	91	7	113	—	5	—	2	—	1	—	—	1	12	85	7	104

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 appears more stable and more indicative of a steady improvement, albeit with a strange pendulum effect during the last six years.

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
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)
1958	1,400	35	32 (23)	19	14	49 (34)

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 1,293 which is greater than the figure of last year, 1,238. This total was made up of 639 males and 654 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 15.2 per 1,000 of the estimated population, as compared with 14.5 in 1957 and an average of 14.6 during the ten years 1948-1957.

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

	1958	1957
Tuberculosis	10	4
Cancer	201	186
Cerebral Haemorrhage, etc.	208	202
Heart Disease	442	354
Other Circulatory Diseases	68	86
Bronchitis	85	72
Influenza	4	17
Pneumonia (all forms)	65	67
Motor Accidents	13	10
All Other Accidents	35	33
Suicide	13	16
	<hr/> 1,144 <hr/>	<hr/> 1,047 <hr/>

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 71) shows comparative mortality rates and birth rates during the past ten years, while Table II Appendix (Page 72) shows the age and sex distribution, and the causes of deaths in 1958.

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 now 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	1958
Under 15 years	...	...	...	...	22	14	6	9	4
15—45 years	...	...	...	...	17	13	13	6	3
45—65 years	...	...	...	...	29	33	32	24	26
65 years and over	...	...	...	...	32	40	49	60	67

Respiratory Diseases

This group of diseases caused 161 deaths as compared with 149 in 1957 and 168 in 1956. Bronchitis caused 85 deaths (72), Pneumonia 65 (67) and other respiratory affections 11 deaths (10). Of these deaths 69% occurred in persons 65 years old or over.

Cancer

Deaths classified to this cause and shown in the age groups below number 201 (males 98, females 103), as against 186 in the previous year :—

	Total deaths	Under 15 years	15-44 years	45-64 years	65 years and over
Year 1958	201	—	13	80	108
Year 1957	186	1	11	74	100

The activities of the Manchester Committee on Cancer in the educational field continued in the area throughout the year. Statistics as to work done and results achieved are not published for the separate areas.

The Committee had once more the question of smoking and lung cancer under consideration, and the desirability of including material referring to this problem in the Department's general propaganda was confirmed by the

Committee. The only separate approach suggested was to school children. The best methods for this approach were to be decided upon by the Teachers' Joint Consultative Committee.

Propaganda material would, therefore, reach the public through lectures and discussions groups, together with the excellent publicity given to these by the local press. Wherever possible, the personal approach is made, as in other health problems.

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	15.2	16.5	23
Average 12 neighbour- ing manufacturing towns ...	13.19	16.48	27
Administrative County of Lancaster ...	12.85	16.17	25

General Provision of Health Services.

Administration and Co-ordination.

General administration within the Department continues on the lines set out in previous Reports.

On the whole, the Health Services in the town have settled down to a good working standard of co-ordination. This is established on two main bases. There is first a considerable cross-representation in Committee membership as between the Local Health Authority, the Hospital Authority and the Executive Council. Secondly, and in some ways more important, there is close working between the Officers of the various Departments and a growing understanding of the part which each has to play and the problems with which they are faced.

There is equally a continuing readiness to seek consultation at Officer and at Committee level on both new and existing problems.

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 Working-men'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 79				

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.

Miss D. A. Hunter and Miss M. Morgan have successfully completed their first twelve months as Superintendent and First Assistant Superintendent, respectively.

The staff of the Home consists of the Superintendent, two Assistant Superintendents, 9 full-trained female District Nurses, 2 full-trained male District Nurses, 3 part-time Nurses and 7 female Students.

During the year 85,343 visits were paid to 3,207 patients. Of these 2,486 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 3,207 patients, the following are the main groups of conditions treated :—

	1958	1957
Anaemias	478	358
Arthritis and Rheumatism	61	75
Bronchitis	332	344
Other respiratory diseases	65	73
Burns and Scalds	26	31
Cancer	103	86
Cardiac disease	425	444
Cerebral lesions	108	115
Ear, Nose and Throat conditions	173	181
Gastro-intestinal disorders	195	238
Gynaecological conditions	90	88
Septic lesions	86	117
Post-operative dressings	216	245
Senility	115	121
Skin conditions	5	15

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

	1958	1957
Patients on the books 1st January	721	655
New patients during the year	2,486	2,621
Total nursed	3,207	3,276
Total discharged	2,494	2,555
Remaining on books 31st December	713	711

Method of Discharge :

	1958	1957
Convalescent	1,317	1,344
Removed to Hospital	368	370
Relieved	579	593
Died	230	248
Total visits paid to 3,207 patients	85,343	
Total visits paid to 3,276 patients		89,940

Included in the above figures for 1958 are the following patients who suffered from Infectious Diseases :—

	Patients	Visits
Pneumonia	82	745
Tuberculosis	57	5,534
Others	24	209
	<u>163</u>	<u>6,488</u>

Of the total visits, 1,071 were paid to 144 children under five years of age.

The figures show a decrease in the new patients and in the total nursed during the year. The number of visits remains more or less unchanged.

The groups of anaemias and cancers show significant increases, while gastrointestinal disorders and septic lesions show significant decreases as compared with the previous year.

No fewer than 1,351 of the patients dealt with were referred only for the purpose of receiving 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 1,485 out of the same total were patients over the age of 65 and they absorbed 47,675 visits during the year, or 56% of the total visits.

At every Committee meeting letters are presented expressing the appreciation of patients and relatives for the skill of the nurses and the helpful attitude of the staff as a whole.

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.

The Morbidity Graph followed a very average curve throughout the year, with one quite small peak in February. This would not support the theory held for so long that health conditions depend directly on the weather. Rochdale's 1958 weather will be remembered mainly as a miserable voyage from miserable Spring to miserable Autumn.

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, 1958, was as follows :— Men 735, Women 861, making a total of 1,596. The corresponding figures in 1957 were Men 206, Women 107, totalling 313.

I am also informed that in the middle of 1958 there were approximately 51,309 insured persons (28,026 Men, 20,487 Women and 2,796 Juveniles) in employment in the area.

AMBULANCE SERVICE

At the end of the year the fleet was numerically unchanged and comprised three ambulances, one sitting case car and three dual-purpose vehicles, together with a car hired through the Car Hire Service of the Corporation 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 Commer dual-purpose vehicle purchased in 1949 was replaced in July by a 2-ton Bedford Diesel powered vehicle.

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	
	1958	1957	1958	1957	1958	1957	1958	1957	1958	1957	1958	1957
PATIENTS :												
Emergency ...	1444	1740	309	340	180	187	1	1	—	2	—	—
Ordinary Removals	12069	13599	8178	9042	2752	3006	5	1	1	2	3	—
Other Persons ...	121	99	11213	9242	3012	2939	—	—	—	—	—	—
Totals ...	13634	15438	19700	18624	5944	6132	6	2	1	4	3	—
MILEAGE :												
Removals...	51987	57109	34540	38894	21531	19579	44	10	5	59	76	—
General Trans. ...	20	21	8590	6569	9719	8938	—	—	—	—	—	—
Lost Journeys D.D.	573	587	498	496	641	735	6	—	—	—	—	—
Midwifery ...	35	38	720	732	6773	6268	—	—	—	—	—	—
Totals ...	52615	57755	44348	46691	38664	35520	50	10	5	59	76	—
CALLS :												
Total Calls ...	10169	10091	6490	6372	4258	4214	6	2	1	4	1	—
Transmitted by Radio ...	5278	6660	2521	2831	871	1112	2	—	—	1	—	—

During the past year ambulances removed 13,519 patients, involving 52,031 miles ; the dual-purpose vehicles removed 8,488 patients, involving 34,545 miles ; the sitting case cars removed 2,935 patients, involving 21,607 miles ; and 14,346 other persons were transported, involving, together with general transport, 27,575 miles.

The number of emergency and ordinary removals during the year showed a considerable decrease over the previous year. On the other hand, an increase in the number of other persons transported occurred. In all, 912 fewer persons were carried during 1958 than in the previous year, with a corresponding decrease in the mileage amounting to 4,277 miles. The increase in the number of other

persons transported is largely due to the development of the special clinic for premature infants held regularly at Birch Hill Hospital. Obviously mothers accompany the babies and rank as other persons, whilst statistically the babies count as ordinary removals.

The number of journeys to Manchester hospitals and other destinations outside the Borough was not as great as in the previous year. 469 patients, involving 7,792 miles, were conveyed, as against 474 patients, involving 6,325 miles in 1957.

Following the same formula as in previous years, we find that during 1958 the average number of miles per patient was 4.1, as against 5.0, 4.75 and 4.6 in the years 1955, 1956 and 1957.

The efficiency of the service is aided beyond all measure by the installation of radio-control. The percentage of calls re-directed by means of radio during the year was 41.4% which compares with 51% in the previous year. This reduction does not reflect reduced efficiency in the use of telecommunications. It has been possible during the year to improve upon the system of advance booking and it is now possible to plan ahead to a greater extent. Therefore, at the commencement of the tour of duty each driver is given a list of removals to be undertaken. Previously many of these were transmitted to the drivers by radio.

During the year the Ambulance Sub-committee has considered the cost of the service on the comparison of costing returns issued by the Ministry of Health and the Association of Municipal Treasurers. The general conclusion reached was that when all factors were considered our own service was not unduly high in cost.

Because of difficulties experienced by the Transport Department in maintaining ambulance service vehicles in a satisfactory state of mechanical efficiency, it was decided that an additional ambulance be obtained and an order was placed for a Dennis diesel ambulance.

During the year a team entered for the National Ambulance Competition and competed in the eliminating regional contest held at Washington Hall, near Chorley, in May, 1958. The Rochdale team was unsuccessful in reaching the final, but came in fourth in the competition.

22 drivers entered for the National Safe Driving Competition and 17 qualified. Two others were unable to qualify because of absence through sickness and, therefore, received exemptions.

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 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.

Two new Units were opened at Birch Hill Hospital during the year, the Pathological Laboratory on the 29th April, and the Ophthalmic Unit, including out-patient, operating and in-patient accommodation, on the 29th July.

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 1,402 births all notified by midwives, as belonging to Rochdale. This figure includes 540 occurring at Birch Hill Maternity Home and 51 in other hospitals, which are classified to Rochdale.

Health Visitors.

During the last twelve months there have been many changes amongst the Health Visitors. The year started with eight on the staff and finished with only six. A student Health Visitor joined us on the 10th July, 1958, after passing the examination and, for a few weeks, the Department was well staffed. Then we had the misfortune of losing Mrs. Reeve, who died suddenly on the 13th August. A new student Health Visitor was appointed in September and she should qualify in June, 1959. The Department was unfortunately unable to appoint new Health Visitors and the work has had to be shared amongst all the other Health Visitors. The Clinic Nurse resigned at the end of August and a new one was appointed on the 13th October. Two more Health Visitors left at the end of the year which made us under-staffed.

The Health Visitors continue to spend most of their time visiting children under five years of age, but the under one year-olds and problem families were given priority. The Health Visitor's help, advice and assurance, is particularly important in cases where mothers do not attend the Clinics and where the mother is worried in case she does something wrong, especially with the first baby of an elderly mother.

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

There is a Clinic each month for premature babies born at home and this is staffed by Health Visitors. One Health Visitor goes to the Ante-natal Relaxation Class every week to give instruction to the expectant mothers.

The Health Visitors attend the four Nursery Schools to inspect the children for cleanliness and head infestation. They also attend with the Medical Officer every three weeks when medical inspections are carried out and take part in the discussions about the attendances and well-being of the children.

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

	1958	1957
Primary visits to births	1,383	1,341
Primary visits to stillbirths	30	41
Subsequent visits to infants under 1 year ...	5,816	6,153
Subsequent visits to young children 1-2 years...	3,150	3,259
Subsequent visits to young children 2-5 years...	6,734	6,403
Ante-natal cases	1	1
Maternal and infant deaths	35	31
Infectious diseases	333	1,197
Incomplete visits	1,304	2,048
	<hr/> 18,786	<hr/> 20,474
Ante-natal and post-natal clinics	139	193
Child welfare clinics	774	918
Nursery schools	110	93
	<hr/> 19,809	<hr/> 21,678

These figures demand very little comment. There is a decrease in the number of visits for infectious diseases and incomplete visits, but the others, with few variations, are the same.

As last year, we had Preliminary Training School and final year Nurses from Birch Hill Hospital to visit the Infant Welfare Clinics and observe the work of the Health Visitor. The Health Visitors have been very co-operative in taking these students on to their districts and into people's homes.

The Health Visitors have also taken part in the preparation of Nursery Nurses for their N.N.E.B. examination, also certain lectures have been carried out for the St. John's Ambulance Brigade.

Child Welfare Centres.

The total number of new patients attending the Child Welfare Clinics this year is little more than last year. There are increased attendances at all clinic sessions except Bamford. The attendances at Norden of new cases and children under one year has improved, but between one and five years the number has fallen. Conditions at Kirkholt Clinic are still the same and we are still waiting for new and larger premises. On the parents' request the Norden Clinic is again opened every week, but the doctor is there only every other week.

The following Table shows the attendances at the Clinics during 1958 :—

Centre	New Cases admitted during 1958	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)	169	1,694	406	446	† 51 (42)	1,014
(b)*St. Luke's ...	195	3,024	462	832	46 (42)	1,782
(c)*St. Clement's ...	150	2,321	556	711	36 (33)	1,584
(d) Baillie Street *(Castleton) ...	150	1,596	462	385	49 (50)	1,153
(e) *Castleton ...	138	2,110	564	928	38 (33)	1,202
(f) Norden ...	48	469	83	257	24 (19)	327
(g) Baillie St. (Comb.)	55	471	153	159	18 (19)	503
(h) Bamford ...	10	60	25	68	13 (17)	44
(i) Kirkholt ...	113	1,194	326	580	21 (16)	773
Totals ...	1028	12,939	3,037	4,366	—	8,382
Corresponding Figures 1957 ...	986	12,583	2,741	3,729	—	8,200

* Two Clinic Sessions per week.

† Figures in brackets are for 1957

Dr. Barker has continued to do two sessions at the Clinics each week. Dr. Cauchi has continued to undertake St. Luke's, St. Clement's and Norden Clinics, and Dr. McKenzie the Castleton and Baillie Street Clinics.

When Dr. Norman left in May, her sessions were taken over by Dr. Brookes of Heywood and a Medical Officer from Birch Hill Hospital, until Dr. Thakre took up her appointment in August. The Medical Officers from Birch Hill Hospital have also been kind enough to relieve for holidays and sickness.

The work at the Clinics mainly consists of vaccinations and immunisations, advice to mothers on different problems and the examination of new babies. Mothers who do not want to see the Clinic Doctor will have their children weighed and usually buy baby food, cod liver oil and orange juice. The Whooping Cough and Diphtheria immunisations are still done separately, but we are hoping to use triple vaccines in the near future.

As there are very few cases of Smallpox in the Country many mothers think that it is not necessary to have their children vaccinated. Advice that "the world is getting smaller, Africa and Eastern countries still have Smallpox and if your child wants to visit these countries he will have to have it done" and "it carries much less risk at this age than when done later", usually convinces the mother to get it done early. Vaccination for Poliomyelitis is done at all clinics.

Care of Premature Infants

There were 15 premature babies born at home in 1958. 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 six months old, and vaccinations and immunisations have been carried out.

Premature babies born in previous years continue to be examined at yearly intervals for the Survey of Premature Babies which was 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

Miss Hunter took over supervision of the Midwives at the beginning of the year after Miss Felstead's resignation in December, 1957. Nurse Harrison commenced duty with us on the 9th June, but went off sick in November, and Nurse Totten commenced in September. Nurse Corrin and Nurse Whelan left in September and November, so we finished the year with one Midwife short and one off sick.

Being short of Midwives various schemes for mobilising them are under consideration. An experiment is under way to provide a self-drive car for the Midwives.

The following Table will show the type of visits the Midwives have carried out :—

	1958	1957
Cases delivered	450	453
Subsequent visits	6,403	6,057
Continuation visits to Hospital patients ...	2,291	1,835
Ante-natal Home visits	1,872	2,536
Ante-natal Clinic visits	376	466
Miscellaneous visits	1	4

The one Midwife in private practice attended 88 cases during the year.

The Midwives have not attended any cases as maternity nurses during the year and doctors were called in to 159 cases on medical aid forms. Gas and air analgesia was administered to 400 cases out of 450 and Pethidine to 264 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 :—

5 Prolonged Labour

5 Ante-partum haemorrhage (one—twins)

2 each—Hypertension, Breech, Persistent Occipito-posterior, Post maturity, Hydramnios

1 each—Low haemoglobin, placenta praevia and haematuria.

Out of these there were 23 live births, (which included two premature babies) and no stillbirths.

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

7 Low haemoglobin

4 Overdue

11 Rhesus negative

3 Twin pregnancy

3 Hydramnios

2 Breech

1 each—Thrombosis, Osteomyelitis, previous miscarriages and pre-eclampsia.

Out of these there were 34 live births, (which included five premature babies) and three stillbirths.

A Peri-natal Survey covering all the babies born from 12.0 a.m. on the 3rd March, to 12.0 p.m. on the 9th March, was organised by the National Birthday Trust Fund, during which period we had eleven deliveries but no still births.

Pupil Midwives have continued to come to us from Birch Hill Hospital for their Part II Training. During the year ten 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 been maintained, 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 Physio-therapist, one for the new patients and one for re-visits.

During the year, 91 sessions were held with a total of 399 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. These talks 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.

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	
	1958	1957	1958	1957	1958	1957
(1) ANTE-NATAL CLINICS						
(a) No. of Expectant Mothers attending (New Cases) ...	1,320	1,355	177	175	1,497	1,530
(b) No. of attendances (Old and New Cases) ...	9,427	9,571	1,325	1,717	10,752	11,288
(c) Average attendances per clinic session ...	40.6	39.2	5.7	7.1	46.3	46.3
(2) POST-NATAL CLINIC						
(a) No. of Mothers attending (New Cases) ...	541	541	112	138	653	679
(b) No. of attendances (Old and New Cases) ...	590	583	133	149	723	732
(c) Average attendance per clinic session ...	12.3	12.2	2.7	3.1	15.0	15.3

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. No calls were made upon the service during the year.

Maternity Home.

The number of Rochdale women admitted to the Maternity Home at Birch Hill Hospital for confinement was 850, eight of whom gave birth to their babies at home before admission.

The number of babies born in hospital and classified to Rochdale was 840 live births and 24 stillbirths.

Medical Assistance.

Midwives practising in the district requested the services of a medical practitioner in 132 maternity cases and in 27 cases of newly born children. The corresponding figures last year were 141 and 39 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 four 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 488 such outfits have been issued.

Puerperal Pyrexia

During the year one case of Puerperal Pyrexia was reported by the Midwifery Service. This case was notified by the midwife and the nursing was handed over to the District Nurse.

Maternal Mortality.

No deaths were recorded by the Registrar-General in respect of 1958 as due to maternal causes.

AREA	1958	1957	Average 5 years 1952-56
ROCHDALE	Nil.	2.19	0.75
Average 12 neighbouring manufacturing towns ...	0.43	0.43	0.61
Administrative County of Lancaster	0.45	0.58	0.98

Ophthalmia Neonatorum.

For the past five years there have been no cases.

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 the 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 33,337 (38,291) tins of National Dried Milk, 5,629 (8,810) bottles of Cod Liver Oil, 41,636 (69,274) bottles of Orange Juice and 3,927 (3,994) packets of Vitamin Tablets were distributed.

It will be seen from comparison with the figures in brackets giving the distribution for the previous year that the only material to keep up in amount distributed is Vitamin Tablets. The reduction in Orange Juice shows the full impact of the reduction in distribution scope which was prescribed by the Ministry at the end of 1957. There are several factors involved in the reduction of National Dried Milk, including increased price and the variety of alternatives.

The biggest factor in the reduction of Cod Liver Oil distribution in bottles may well be the general tendency towards the concentrated form of this product—easier to take, easier to measure and pleasanter for all concerned.

NURSERIES AND CHILD MINDERS REGULATIONS 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 this latter category, however, no persons were registered during the year.

In the former category six 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 151 children were admitted to the Nurseries and 204 left the Nurseries. At the end of the year there were 217 on the registers as against 270 on the registers in 1957.

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.

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 702 children under five received a course of immunisation. In 1957 the number immunised in this group was 751. 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, 1959. The estimated population figure is supplied by the General Register Office.

Age at 31/12/58 i.e. born in Year	Under 1 1958	1 1957	2 1956	3 1955	4 1954	Total
Number immunised	126	618	675	721	733	2,873
Estimated mid-year child population 1958	Children under five 6,100					

In addition to the immunisations in the above Table, 320 children between the ages of five and fifteen were immunised, as compared with 200 children in 1957, and 966 children received re-inforcing doses, usually about four years after the initial treatment, compared with 673 in 1957.

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 800 children received a full course of three injections, as compared with 840 the previous year. Of this number, 134 children were immunised by their own doctors. In addition, booster doses were given to 162 children, including 29 given by own doctors.

Altogether, since the scheme was introduced there have been 87 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 7059 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 1958	TOTAL 1957
No. Vaccinated ...	425	28	36	15	15	519	448
No. Re-vaccinated ...	—	—	2	4	29	35	7

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 re-vaccinations 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 554 vaccinations and re-vaccinations. Of this meagre number two were performed by the Department's staff for every one performed by the doctors in the town. It is difficult to plan a more potent form of propaganda.

This form of vaccination is also 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.

There was only one important change in the campaign against Poliomyelitis during the year, that was the advice contained in a Circular issued in September to extend the scope to include persons aged 15—25 years. This change was conveyed by various methods to the public and to General Practitioners, but up to the end of the year the response was very poor.

During the year we continued to be supplied with both British vaccine and Salk vaccine, some of it American tested only, and some of it re-tested in this Country. The supplies received were as follows:— British—2366 c.c., Salk, single tested—2224 c.c., Salk, double tested—2962 c.c. For the use of this we received 2328 consents for British vaccine and 3582 for Salk vaccine.

At a later stage and because of the hold up in British supplies, 1220 persons changed over from British to Salk, thus easing the situation considerably.

The total vaccinated during the year was 1407 with British vaccine and 4028 with Salk vaccine, making a grand total of 5435 vaccinated.

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

	1954	1955	1956	1957	1958
GENERAL PRACTITIONERS :					
Poliomyelitis Vaccination ...	—	—	—	—	373
Diphtheria Immunisation ...	267	218	219	142	141
„ Boosters ...	166	159	141	131	159
Whoop. Cough Immunisation	191	143	162	115	134
„ Boosters ...	27	20	36	16	29
Vaccinations ...	268	203	138	111	156
Re-vaccinations ...	36	11	8	7	31
M.C.W. CLINICS :					
Poliomyelitis Vaccination ...	—	—	—	—	1,831
Diphtheria Immunisation ...	624	570	677	597	541
„ Boosters ...	36	48	70	24	1
Whoop. Cough Immunisation	589	601	676	725	666
„ Boosters ...	214	74	195	155	133
Vaccinations ...	—	120	320	337	363
Re-vaccinations ...	—	—	—	—	4
SCHOOL CLINIC :					
Poliomyelitis Vaccination ...	—	—	—	—	3,231
Diphtheria Immunisation ...	201	185	171	212	341
„ Boosters ...	694	589	683	518	806

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 1958 :

Expectant unmarried mothers	...	...	...	...	...	73
Aftercare	...	...	...	...	...	3
Matrimonial problems	...	...	...	...	...	7
Children and preventive	...	...	...	...	...	1
Personal and social problems	...	...	...	...	...	21
						<u>105</u>

TYPE OF ASSISTANCE REQUIRED :

Ante-natal and post-natal accommodation ...	...	...	...	...	10
Married women admitted to voluntary homes ...	...	...	...	...	1
Advice on affiliations and private agreements ...	...	...	...	...	8
Help with adoptions ...	...	...	...	...	14
Matrimonial and family problems ...	...	...	...	...	15
Material help given ...	...	...	...	...	18

Of the cases dealing with the illegitimate child, 66 were unmarried mothers and ten were married women. This number includes two mothers who had divorced their husbands and three mothers who are legally separated. Seven of the babies, including one set of twin boys, have been adopted through the legal adoption societies.

Child kept by mother ...	...	...	...	...	...	...	47
Not yet born (31.12.58) ...	...	...	...	...	...	...	8
Left district ...	...	...	...	...	...	...	3
Married to putative father or another man ...	...	...	...	...	...	...	19
Kept child but living with putative father ...	...	...	...	...	...	...	10
Stillborn ...	...	...	...	...	...	...	2
Died ...	...	...	...	...	...	...	1

Unmarried Mothers :

The ages of the unmarried mothers who were dealt with varied between 14 and 45 years. There were 43 under the age of 21 years. In seven cases it was a second illegitimate child.

The national illegitimate births are in the region of 30,000 per year. We feel there is not the same stigma attached to illegitimacy today and we are extremely concerned with the present trend of increasing numbers in these births throughout the Country. There is a general lowering of moral standards. Young people break away from a good home to live in awful conditions in some high-priced one-room flat. There also seems to be a lack of parental control in many cases. Even today, some parents confess that they have not been able to talk about 'that sort of thing' to their daughters. Other parents say that they have given their boy or girl everything they wanted for the asking and then wonder why they have gone wrong.

The matrimonial problems concerning teenage couples indicate a need to help them to understand that marriage is more than a physical attraction.

There has been more hope of reconciliation and of keeping families united, but in some cases, where reconciliation is impossible, a host of difficulties can

arise when husbands and wives go their separate ways, perhaps re-marry, and one parent is trying to cope with the care and custody of growing children, sometimes with nowhere to live, insufficient income and struggling against ill-health or unemployment. This also applies to families where the paternal parent is serving a long prison sentence.

We are deeply grateful to all those who have referred cases to us, and for their continued co-operation and advice when needed.

We owe a debt of gratitude to Medical Officers of Health in this and other areas for their continued co-operation, practical help and advice. To all we say thank you.

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 Departments.

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 sixteen.

A total of five new cases was referred to the Committee from the sources set out below :—

Maternity and Child Welfare Department	...	...	3
School Medical Department	...	...	1
N.S.P.C.C. Inspector	...	...	1
			—
			5
			—

At the beginning of 1958 there were 64 cases on the ' live ' register. During the year 16 of these had further reports made upon them and 24 were closed. In addition, there were 5 new cases in 1958. At the end of the year 45 cases remained on the ' live ' register.

The following list shows the number of times the 21 cases have come up for discussion and further report :—

	Old Cases	1958 Cases
Once only ...	3	—
Twice ...	2	3
Three times ...	—	1
Seven times ...	2	1
Nine times ...	1	—
Ten times ...	1	—
Eleven times ...	7	—
	—	—
	16	5
	—	—

An average of thirteen 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 five new cases as they were brought to the notice of the Committee :—

CASE NO. 1 (Referred by C.W.)—Problem family arrived from Wigan, overcrowding a relative's one up and one down house with their six children, making a total of eleven occupants. Father never works long at once. One child at a Residential Deaf School.

CASE NO. 2 (Referred by N.S.P.C.C. Inspector)—Displaced person living with her two children in one room. Husband returned to Germany. Boy truanting from school. Mother difficult to deal with.

CASE NO. 3 (Referred by C.W.)—Mother mentally backward—in rooms with baby, having four children already in care of another Authority. Not caring for child adequately.

CASE NO. 4 (Referred by S.M.O.)—One child and father living alone, mother having left home. Unsatisfactory school reports resulted in home visit and the discovery of bad conditions.

CASE NO. 5 (Referred by C.W.)—Man and woman living together with mixed family. Eviction is threatened and man has left home. One of the four children in hospital and awaiting discharge, but parents ignore hospital requests.

It will be seen that the number of new cases is decreasing as are the number of cases remaining on the live register. It is also true that another year has gone by without a case of actual physical cruelty to a child.

Unfortunately, however, it is also true, as can be seen from the table of times discussed, that many of the cases now with us are as bad and as difficult to solve as at any time in the past.

Domestic Help Service

During the year the Domestic Helps assisted in 359 cases (19 cases of maternity, 315 chronic cases, 23 general sickness and 2 tuberculous) as against 312 cases during 1957. The average period over which assistance was given was ten days for maternity, 171 for chronic cases and 15 for general sickness.

At the end of the year 46 Domestic Helps (17 full-time and 29 part-time) were employed as compared with 45 (17 full-time and 28 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 8.6% of the total cost. No charge was made to 297 households out of the total number of households to which this service was rendered. The corresponding figures in the previous year were 9% recovered and 221 households in which no charge was made.

The above figures continue to reflect the concentration on the care of the elderly sick and infirm in their own homes. The number of chronic sick cases this year was more than the total of all types of cases in the previous year and the average period for assistance, while falling in respect of maternity and general sickness, rose considerably in respect of chronic cases.

It is noticeable that more and more of these chronic cases are becoming entirely dependent upon the Home Help Service for their welfare at home. In other words, they require daily visits and special arrangements have to be made to look after them during the holiday periods. These elderly people have no close relatives nor anyone to whom they can call upon for assistance outside ourselves.

On the other hand, we have had during this past year an increase of cases involving young families where the mother is either run down by over-work or incapacitated by some form of disease or disability. These cases take a great deal of organising and a satisfactory solution can only be achieved after much co-operation and a great deal of good-will. A solution is, however, very satisfying when it is reached.

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 84 cases to Convalescent Homes, usually for a period of two weeks. Extensions were granted in four cases on medical recommendation. Fare or transport was provided in four cases.

Accommodation was arranged for the 84 cases referred to in the following manner :—

	Adults	Children
West Hill, Southport	50	—
Grey Court, Hest Bank	15	—
Beechways, Southport	5	—
Others	8	6

The total cost of Convalescent Home accommodation was £414 6s. 0d., of which £124 10s. 9d., or 30.15% was recovered.

Respiratory Diseases cases (21) formed the largest single class of admissions, the remainder being from a wide variety of causes, Post Operative (19), General Debility (12), Nervous Debility (9), Anaemia (6), Cardiac Debility (5), Rheumatism (4), Gastric Conditions (4), Pneumonia (4).

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 accepting invitations to speak on health subjects at the regular meetings of interested organised bodies. This is much more successful than attempting to call special meetings for health subjects alone.

During the month of November we took part in the national "Guard that Fire" campaign. The methods used were by posters, leaflet distribution, special handbills in selected shops, cars and buses, as well as cinema slides.

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 the 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 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 1958.				
(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 ...	1	4	—	—
(ii) On leaving special schools	—	1	4	6
(iii) On leaving ordinary schools	—	—	—	—
(2) Police or by Courts	—	—	—	—
(3) Other sources	—	—	—	—
TOTAL of 1 (a).....	1	5	4	6
(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, 1958, and are thus excluded from (a) or (b)	—	1	2	1
TOTAL of 1 (a)—(d) inc....	1	6	6	7

	Under age 16		Aged 16 and over	
	M.	F.	M.	F.
2. Disposal of cases reported during 1958.				
(a) Of the cases ascertained to be defectives "subject to be dealt with" (i.e., at 1 (a)), number				
(i) Placed under Statutory Supervision	1	5	4	6
(ii) Placed under Guardianship	—	—	—	—
(iii) Taken to "Places of Safety"	—	—	—	—
(iv) Admitted to Hospitals	—	—	—	—
TOTAL of 2 (a).....	1	5	4	6
(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....	1	5	4	6
3. Number of mental defectives for whom care was arranged by the Local Health Authority under Circular 5/52 during 1958 and admitted to :—				
(a) National Health Service Hospitals.....	1	1	—	—
(b) Elsewhere	2	1	—	—
TOTAL	3	2	—	—
4. Total cases on Authority's Registers at 31/12/58.				
(i) under Statutory Supervision	19	17	50	53
(ii) under Guardianship	—	—	—	—
(iii) in "Places of Safety"	—	1	3	9
(iv) in Hospitals	8	7	49	51
TOTAL of 4 (i)—(iv) inc....	27	25	102	113
(v) Under Voluntary Supervision	—	—	5	7
TOTAL of 4 (i)—(v) inc....	27	25	107	120
5. Number of defectives under Guardianship on 31/12/58, 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 31/12/58 (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	—	—	—	—
(ii) ambulant low grade cases	4	1	—	—
(iii) medium grade cases	—	—	1	—
(iv) high grade cases	—	—	—	—
TOTAL urgent cases	4	1	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...	4	1	1	—
TOTAL OF URGENT AND NON-URGENT CASES ...	—	—	—	—
(b) Of the cases included in items 4 (i), (ii) and (v), number considered suitable for :—				
(i) occupation centre	14	14	—	2
(ii) industrial centre	—	—	3	5
(iii) home training	—	—	—	—
TOTAL of 6 (b)	14	14	3	7
(c) Of the cases included in 6 (b), number receiving training on 31/12/58				
(i) in occupation centre (including voluntary centres)	14	14	2	7
(ii) in industrial centre	—	—	1	—
(iii) from a home teacher in groups	—	—	—	—
(iv) from a home teacher at home (not in groups)	—	—	—	—
TOTAL of 6 (c)	14	14	3	7

Ascertainment.

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

There were twenty young persons notified under Section 57 (5) of the Education Act, 1944, seven males and thirteen females. Of the twenty cases mentioned, action was incomplete in respect of two boys and two girls.

No person was reported through the Courts during the year.

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

One boy and one girl under 16 years were accommodated in Mental Deficiency Hospitals through the Manchester Regional Hospital Board. Two boys and one girl under sixteen 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.

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.

Residential Care.

During the year four adults and five persons 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 115 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", twelve of these being accommodated in Birch Hill Hospital.

At the end of the year six defectives were on the Regional Hospital Board's waiting list for Institutional care.

One male patient under sixteen years of age died from Muscular Atrophy.

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 151 cases under community care. Of these, 139 were under Statutory Supervision, 103 being over sixteen years of age and 82 being in regular employment.

During the year 7 males and 2 females 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.

During the year quite a number of cases in Mental Deficiency Hospitals were, under the new Regulations, discharged from Order by the Board of Control, but allowed to stay in hospital on an 'informal' basis. This was always done after consultation between the Hospital and the Health Department, in which consultation with the relatives was included. This process was continuing at the end of the year.

A total of 791 visits were made by the Mental Health Worker to the homes and places of employment, etc. of mental defectives.

Occupation Centre.

The Occupation Centre staff consists of a Supervisor, 5 Assistant Supervisors (3 qualified), a Caretaker and a Meals Server.

At the end of 1958 there were 53 children on the register, 38 from the Borough itself and 15 from the adjoining area of the County.

During the year five children were admitted. Five children were transferred to Institutions, one child died, one child removed after a temporary stay in Rochdale and one older girl was withdrawn by the Lancashire County Council.

Events during the year included :—

1. Visit to Billy Smart's Circus.
2. Summer Outings—Junior Department to Wythenshawe Park, Senior Department to Lytham St. Annes.
3. Harvest Festival.
4. Educational visit to St. John's Kitchen by the Senior Department.
5. Christmas Plays and Christmas Party.

The house system continues to be popular. Children receive points for good work and this acts as an incentive. House matches on Friday afternoons are a much looked forward to event. Table tennis, rounders and other competitive games are played with remarkable keenness.

The Parents' Association has provided a Tape Recorder for use in the Centre and this is greatly appreciated. It has been used mainly in two ways, first for recording special occurrences at the Centre, as for instance, at the Christmas Party. The children vastly enjoy the repetition of events in which they have taken part and in which they can recognise themselves. It has also been used for recording items such as part-singing by sections of the school, which, as well as establishing a standard, forms an index of progress and is invaluable in comparing methods of work.

MENTAL PATIENTS

Analysis of Admissions to Mental Hospitals, 1958.

Whilst there is a slight increase in the number of patients admitted to Mental Hospitals for treatment during the year, 169 (151 in 1957), there was a marked fall in the number of patients in hospital at the end of the year. Many others are receiving treatment at the Sparthfield Clinic and at Birch Hill Hospital as out-patients. Of those admitted to Hospital, 70 were male and 99 were female patients.

Of the total number admitted to hospitals 97 (58%) were on a Voluntary basis. There were 14 persons certified as persons of unsound mind before admission and 26 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. 27 patients were admitted under Orders made by Justices for fourteen days' observation, of whom some were discharged within fourteen days whilst others recovered after being further detained under the provisions of Section 21 A. of the Lunacy Act, 1890. 14 were certified for further detention and three were transferred to other hospitals. After medical evidence in the Borough Magistrates' Court five patients were certified and sent into Mental Hospitals under the provisions of the Magistrates' Court Act, 1952.

Mental Hospitals.

An important change in the treatment of mental patients is noted in the efforts to restore the patients' confidence in themselves and others. In this

direction the system of locking each door of the mental wards and corridors has largely disappeared and patients thereby feel more relaxed, feel to be trusted and made to realise that they are not imprisoned and have not lost touch with the world outside. Relatives and friends feel to be more accessible to them and more freedom of parole is given within the precincts of the hospital grounds and beyond.

New contemplated legislation in Mental Health will further tend to reduce compulsory treatment to a minimum. Most hospitals, general as well as mental, will be able to admit mental patients. Wards will be set aside for psychiatric patients who may be admitted on an informal basis. Relatives of patients are to be granted more facilities to obtain treatment for patients who fail to seek voluntary treatment themselves or who are incapable of so doing, but no patient will be admitted except on the advice of a Psychiatrist or by Justices under the Magistrates' Court Act, 1952 or, in cases of necessity, when relatives fail to act. The Police will be empowered to act in cases of violent or dangerous patients, whilst Mental Health Officers will be concerned less with the removal of patients, but far more widely with pre and after care work in the patients' homes, in hospitals and elsewhere.

Hospital Treatment.

	Males	Females
Mental Patients in hospitals on the 31st December, 1957	130	156
Admissions during the year	70	99
Discharges during the year	104	116
Mental Patients in hospitals on the 31st December, 1958	96	139

Analysis of Patients discharged during 1958.

Recovered	34	35
Relieved	46	61
Not improved	2	4
Transferred to other hospitals	6	2
Deaths	16	14

The 235 patients in Hospitals at the 31st December, 1958 were distributed as follows :—

Prestwich	69	Rainhill	12
Birch Hill	65	Fairfield	8
Whittingham	34	Springfield	2
Winwick	19	Others	9
Lancaster Moor	17		
Visits to Mental Patients during the year			2,075
Night Calls			87

Dr. S. Falk, Consultant Psychiatrist, continues in charge of the Psychiatric Clinic at Sparthfield, Manchester Road, Rochdale. There are two sessions weekly, Monday evenings and Thursdays during the day time. A Mental Health Worker attends the evening session to give any background information and to assist in follow-up work.

Prevalence of Infectious Diseases

The grand total of infectious diseases this year is very much reduced as compared with the previous year and is about half the previous annual average.

The 1957 increase was due to Measles, which epidemic finished in May, 1957. Throughout 1958 there were only occasional Measles cases. As forecast in the previous Report, the Dysentery which had commenced in the town at the end of the year continued into the beginning of the year and in fact did not finally close down until June. As previously reported, the majority of the cases were due to *Sonne-bacillus* and in most cases the illness was quite mild. Nevertheless, these outbreaks occupy much time and a good deal of patience on both sides.

	1958	1957	Average 1952-56
Scarlet Fever	16	44	99
Diphtheria	—	—	—
Tuberculosis	34	64	88
Pneumonia	14	47	21
Whooping Cough	51	96	156
Measles	246	1,924	691
Chicken Pox	28	19	36
C.S. Meningitis	—	—	2
Poliomyelitis	3	1	6
Dysentery	135	58	31
Other Diseases	11	26	38
	<u>538</u>	<u>2,279</u>	<u>1,148</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 4, Measles 4, Scarlet Fever 1.

Poliomyelitis.

There were three Poliomyelitis cases during the year, one non-paralytic in a boy of six years in August, and two paralytic cases, one in a boy of two years in September and one in a boy of four years in December.

The first of the latter has been discharged home from the Orthopaedic Hospital still suffering from some muscular weakness, but is improving. The other case was transferred to an Orthopaedic Hospital in January, 1959 and while improving is still in hospital at the time of going to press.

Food Poisoning.

- (a) Notifications as returned to the Registrar General 5
 (b) Cases otherwise ascertained —
 (c) Fatal —

Outbreaks	No. of Outbreaks		No. of Cases		Total No. of Cases
	Family Outbreaks	Other Outbreaks	Notified	Otherwise ascer.	
Agent identified					
(i) Salmonella Typhii-murium ...	1	—	2	—	2
Agent not identified ...	1	—	2	—	2

Single Cases	No. of Cases		Total Cases
	Notified	Otherwise ascer.	
Agent identified			
(i) Salmonella Typhii-murim ...	1	—	1

Tuberculosis

There were 34 cases notified, as against 54 in the previous year. The new cases in 1956 totalled 54 and during the five years 1950-54, there was an average of 72 cases notified.

Of these 34 cases, 33 were Pulmonary and 1 Non-pulmonary.

In addition, the Department was notified of twenty cases, 19 Pulmonary and 1 Non-pulmonary, which had come to reside in the town after notification elsewhere.

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—57	55	4	59
1958	33	1	34

It is interesting to note that the above Table is more accurate than summary Tables usually are. In fact, the change in notification figures took place quite suddenly in the period 1948/1952, with 1949 showing 142 notifications, 1950 showing 122 and 1952 showing 94. Since then there has not been a total above 74 and only once has the Non-pulmonary total with seven cases in 1955 reached the previously common totals.

Mass Miniature Radiography Survey, 1957.

Final figures do not vary materially from those provisionally supplied in last year's Report. There were, as provisionally stated 26,107 examinations carried out, which resulted in the discovery of 17 new cases (not 14 as in the previous Report), 8 males and 9 females. The female cases were all in the age group between 20 and 45, whereas the males were scattered between the age groups 15 to 59.

A further two cases were found to require treatment. Therefore, in all 11 new cases of Pulmonary Tuberculosis were notified to the Department by the Chest Clinic. This still compares very favourably with the previous 1952 Survey, as a result of which no fewer than 43 cases were notified to the Department.

The following Table sets out the number of deaths and mortality rates for the year 1949 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.
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	—	—
1958	9	0.11	1	0.01

The 34 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—5 years	1	3	—	—	—	—	—	—
5—15 „	1	1	1	—	—	—	1	—
15—25 „	—	3	—	—	—	1	—	—
25—35 „	4	3	—	—	—	1	—	—
35—45 „	1	3	—	—	—	1	—	—
45—55 „	4	2	—	1	—	1	—	—
55—65 „	3	1	—	—	3	1	—	—
65 years and over	1	1	—	—	1	—	—	—
TOTAL	15	17	1	1	4	5	1	—
1957	26	23	2	3	4	—	—	—

A glance at the deaths from Pulmonary Tuberculosis during the year compared with the 1948 deaths shows a remarkable change in the quality of the disease as well as in the quantity.

Age Periods	1958		...	...	1948	
	M.	F.			M.	F.
Under 25 years	—	1	...	...	3	2
25—45 years	—	2	...	...	12	7
45—55 years	—	1	...	...	5	1
55—65 years	3	1	...	...	5	3
65 years and over	1	—	...	...	6	3
	4	5			31	16

Of this year's nine deaths, one occurred after twenty years' illness, one after eight years, one after seven years and two after two years, while the remaining four died within two years of notification. On the other hand, out of the 47 deaths in 1948, no fewer than 36 died within two years of notification and mostly within a much smaller interval.

The picture in 1948 is, therefore, of a disease not only killing more frequently, but killing younger and killing more quickly. On the general standard of health of the older members of the population, it is also noteworthy as a commentary that a considerable number of cases of Pulmonary Tuberculosis were only notified at death and indeed often only discovered in the course of an inquest.

During the year the practice has continued of close and persistent investigation into the source of every new case of Pulmonary Tuberculosis. As a result we continue to be able to establish the direct cause, either in the family or at work, in a very large proportion of cases. This confirms us in our opinion that so far as Rochdale is concerned the disease can at this stage be successfully tackled by processes designed at once to seek out new sources and to ring round the individual newly discovered case.

In this same connection it is important to note the rapid decrease in the number of sputum positive cases at home. In 1956 the number of these potential sources of infection in the town was 31, in 1957 the number had fallen to 21 and at the end of 1958 this type of case numbered only 13.

The following is a summary of the known cases of Tuberculosis in the Borough at 31st December, 1958 :—

	Males	Females	Total
Pulmonary	327	257	584
Non-pulmonary... ..	26	34	60
	353	291	644

Residential Treatment.

During the year 25 Rochdale patients were, at their first examination, recommended for Sanatorium treatment. Throughout the year there was no waiting list for admission to Sanatorium.

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

Four classes are held each week, two for females and two for males. During the year the average attendance for the men's classes was 5, for the women's classes 8. These classes help to bridge the interval between completion of treatment and resumption of full-time employment, and the practical knowledge gained coupled with the friendly atmosphere of the classes is of undoubted value to the members. Visits are made to members who for health reasons find themselves temporarily unable to attend the classes.

The standard of work has remained consistently high. Many of the articles made in the class were included in the Exhibition of Handicrafts organised by the Welfare Services Department and held at the Town Hall in September.

In June the members had an enjoyable outing by coach to Chester, where a visit was paid to the Zoo.

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	Total	Total 1957
	M.	F.	under 16 yrs.		
Number of Clinic Sessions ...	—	—	—	332	—
Number of Treatment Sessions ...	—	—	—	106	—
Total attendances	1638	1331	1011	3980	—
New Patients examined found :—					
(a) Tuberculous	14	15	2	31	63
(b) Non-Tuberculous ...	212	107	98	417	329
Contacts examined	54	63	83	200	149
Contacts found to be Tuberculous	—	1	4	5	2
B.C.G. Vaccinations	—	8	71	79	109
Mantoux Tests	—	12	142	154	479
Treatment recommended (Tuberculous cases only) :—					
(a) Sanatorium or Hospital	12	8	5	25	59
(b) Domiciliary	2	8	1	11	4
Removed from Register	11	5	—	16	20
Visits by Nurses	—	—	—	4832	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 1957 two recommendations by the Chest Physician were still being considered by the Medical Officer of Health, whilst two other cases, although recommended by Committee, awaited houses of a particular type. During 1958 one of the former cases was approved and re-housed, whilst of the latter, one left town and the other was satisfactorily re-housed. Only one case, therefore, is still outstanding from 1957.

During 1958 nine cases were recommended by the Chest Physician. Of these, one was re-housed privately, five received the support of the Medical Officer of Health and were approved by the Housing Committee, eventually being re-housed, whilst three cases remain under consideration by the Medical Officer of Health.

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 420 (232 male and 188 female) cases dealt with during the year, as against 464 in 1957. The number of new cases was 142 (108 males and 34 females), but of these 72 did not require treatment.

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

	1958	1957	1956
1. No. of persons under treatment or observation at commencement of year	276	301	264
2. No. of persons who ceased to attend in previous years and who returned to the Centre suffering from the same infection	—	1	1
3. No. of new cases who have had previous treatment	2	2	4
4. No. of new cases	142	160	215
Total cases dealt with	420	464	484
5. Total attendances :—			
At which patients saw Physician	934	1,425	2,002
At which patients did not see Physician ...	170	331	337
6. Patients not completing treatment and/or observation	13	18	—
7. No. discharged after completion of treatment and/or observation	158	168	182

Sanitary Circumstances of the Area

I am indebted to the Chief Officials of the various Departments the of 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	Chlorination	Chlorination
if so, how many and the results obtained	102 samples—satisfactory	181 samples—satisfactory
the results of any chemical analyses	79 samples—satisfactory	46 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	Plumbo-solvent action, pH value controlled by addition of chalk
	No dissolved lead found in any samples.	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 4,450 approx.
(a) direct to the houses	28,800 approx.	1,434 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 sedimentation tanks. Half the flow is then passed through the Kessener activated sludge plant and the other half is pumped to bacteria beds. Satisfactory effluents are obtained.

During the year the sludge drying area has been increased, and a number of minor improvements carried out on the works.

The scheme for connecting the sewers of the Wardle Urban District to Rochdale sewers was approved by the Ministry of Housing and Local Government. Work commenced in June and the sewers were connected in November.

A number of storm water overflows have been reconstructed during the year.

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 River Board in providing facilities for the discharge of polluting effluents to the sewers for subsequent purification at the Sewage Works. The trade effluent agreements which have been made with local manufacturers in recent years have noticeably reduced the river and stream pollution in the County Borough Area.

W. H. G. MERCER, B.Sc. (Tech.), A.M.I.C.E.,
M.I.Mun.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.

Year			Mean	Total	Sunshine	
			Temperatures	Rainfall	Total	Daily
			Deg. F.	Inches	Hrs.	Average
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
1958	...	...	47	46.85	941.3	2.5
Mean	...	...	47	44.13	1193.5	3.3

The mean temperatures and the total rainfall for the year were average, whilst the sunshine was considerable less and the lowest recorded for the last ten years.

February was the wettest month with 6.45 inches, having 23 rainy days and of these 17 'wet' days. The highest rainfall in any one day occurred on the 7th June when 1.04 inches fell in 12.5 hours.

April was the driest month with 1.39 inches of rain spread over 12 days, whilst January and March were the coldest months.

The highest temperature of 76° was recorded on the 19th July, whilst the lowest temperature of 12° was recorded on the 23rd January.

July had by far the largest amount of sunshine again, although the 15th June had 12.6 hours of sunshine, the highest figure recorded for any one day. December, however, had the lowest sunshine with only 13.5 hours for the whole month, against July with 121 hours. On 157 days in the year less than one hour's sunshine was recorded.

Appreciable fog occurred on 47 days, January, November and December being the months heavily affected.

Public Cleansing.

The collection of refuse was carried out on the same lines as last year. No general re-organisation of collecting areas was necessary, all new properties being absorbed into existing rounds. A continued improvement in the recruitment and retention of suitable labour was noticeable. Unfortunately, this was no doubt due to some unemployment and short time working in other local industries. A regular weekly collection of refuse was maintained throughout the year.

The efficiency of the refuse separation plant has been further increased by the installation of conveyor belts for carrying salvaged paper from the sorting belt to the mechanical press.

The number of British Standard dustbins supplied under the Corporation's scheme for the provision of dustbins was 3025.

The culverting of a section of Moss Brook adjoining Waithlands Tip has been undertaken and this will add considerably to the 'life' of the tip.

Good progress has been made in the provision of additional public conveniences. During the year one new convenience was opened, the building of one started and the siting of a further two agreed upon.

In the street cleansing section a mechanical sweeper-collector was acquired and is giving very satisfactory results.

A rotary snow plough, brought into use for the first time in the early months of the year, proved of great value and during this winter experiments are being carried out with snow fencing on certain lengths of road.

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

Public Health Inspection of the Area.

At the beginning of the year the staff of the Department consisted of the Chief Public Health Inspector, the Senior District Public Health Inspector, the Meat and Food Inspector and five Public Health Inspectors. Very early in the year one of the Public Health Inspectors secured another appointment and his position was unfilled for the rest of the year. The establishment of the Department provides for three trainee or student Inspectors. At the beginning of the year there were two vacancies but one of these was filled in February. The remaining vacancy was filled in August by the young lady to whom reference was made in the last Annual Report. There are three Rodent Operatives attached to this Department and an Infectious Diseases Officer works part time in the Department dealing mainly with disinfection.

Much of the work of the Inspectors during the year has again been in connection with the repair of dwelling-houses and their outbuildings.

Most of the nuisance 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 849 such Preliminary Notices were issued. The Committee authorised the service of 79 Abatement or Statutory Notices to secure the abatement of nuisances and the remedy of sanitary defects in and around dwellings, 38 of these 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 5 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 is very similar in nature to that in previous Annual Reports but it may be noticed that this year there are included 91 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 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. The Rochdale Corporation Act 1958 enhances the powers of the Corporation to deal with this type of defect and indeed contains other sections which will expedite procedure in dealing with certain other types of nuisance.

HOUSING.

Clearance Areas.

On 3rd December 1958 the Council made Clearance Orders in respect of the John Street Clearance Areas Nos. 1, 2, 4, and 5 and a Compulsory Purchase Order in respect of John Street Clearance Area No. 3. The Areas contain 60 dwelling-houses of which 2 are in a derelict condition, 2 shops with dwelling accommodation and 1 lock up shop. All the properties are old, badly congested and many of them show signs of serious dampness and disrepair.

NATURE OF NUISANCES DEALT WITH

HOUSES—

Verminous dwellings disinfested...	...	...	...	...	...	24
Dirty houses cleaned	...	...	...	...	...	19
Repairs to roofs, floors, walls, eavestroughing, rainwater pipes, chimneys and general repairs to brickwork and stonework (including dampness) and repair or renewal of house fittings	...	...	...	...	...	981

YARDS, PASSAGES, ETC.

Repairs to yard surfaces, gates, walls etc.	...	...	...	...	12
Offensive accumulations and stagnant water removed	...	...	...	...	93

SANITARY CONVENIENCES—

Closet buildings repaired	...	...	...	...	...	50
Closet fittings repaired	90

DRAINS—

Main or branch drains repaired or cleared	108
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GENERAL—

Absence or unsatisfactory condition of sanitary accommodation at factories and shops	17
Miscellaneous nuisances remedied	2

FOOD PREMISES—

Defects of various kinds at food premises	93
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WATER SUPPLIES—

Obstructed or defective water service pipes	91
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Individual Unfit Houses.

Representations concerning 151 houses were submitted to the Housing Committee and in addition to these 7 of the houses represented during 1957 were still under consideration at the beginning of 1958. The Housing Committee dealt with these houses as follows :—

Demolition Orders made	...	...	...	...	...	...	129*
Closing Orders made	...	...	...	...	...	...	17
Representations still under consideration at the end of the year							12

* This figure includes 33 Corporation properties which were not the subject of formal Demolition Orders but which the Council agreed to demolish.

Early in the year it was discovered that a house which was the subject of a Closing Order made in May 1955, had become re-occupied. The occupiers were prosecuted and were fined £5, they were also warned that there was the possibility of a continuing penalty of up to £5 per day if they continued in occupation. The occupiers neither paid the fine nor vacated the premises. Further proceedings were necessary on three occasions before the premises were vacated and in all fines totalling £65 10 0 were imposed.

Certificates of Disrepair.

In the last Annual Report it was mentioned that much of the Public Health Inspectors' time had had to be spent in dealing with applications for Certificates of Disrepair. This state of affairs continued during the early part of the year, then the character of the work changed and the staff had to deal with applications for Certificates concerning the execution of work undertaken by landlords.

The following is a summary of action taken under the provisions of the Rent Act 1957 during the year.

Number of applications for certificates	...	...	...	...	118
Number of decisions not to issue certificates	...	...	...	...	—
Number of decisions to issue certificates :—					
in respect of some but not all defects	...	...	...	...	30
in respect of all defects	...	...	...	...	29
Number of undertakings to repair given by landlords	...	...	...	...	59
Number of such undertakings refused by Local Authority	...	...	...	...	—
Number of Certificates issued	...	...	...	...	59
Applications by landlords to Local Authority for cancellation of certificates	...	...	...	...	13
Objections by tenants to cancellation of certificates	...	...	...	...	1*
Certificates cancelled by Local Authority...	...	...	...	...	13

* This certificate was cancelled after a further application by the landlord when work was satisfactorily completed.

Houses-let-in-lodgings.

The Housing Repairs and Rents Act 1954 provides means of 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. 149 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. During the year 537 such enquiries were received. This figure is almost double the enquiries received during 1957. In addition to this the Town Clerk's Department has made 1519 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 were 44 cases in which applicants for Corporation houses applied for support on the grounds that their houses were detrimental to their health. The remarkable reduction in such applications which was the subject of comment in the report for 1957 has therefore continued.

Housing Survey.

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 or were, at the end of the year, vacated for the purpose of demolition. 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 1958. 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	1933- 1939	
Through	5,791	3,637	7,434	836	1,862	19,560
Back-to-back	1,847	55	—	—	—	1,902
Inset	305	5	—	—	—	310
Not through	713	18	—	—	—	731
Others Inspected— Shops, Hotels, Farms, etc.	463	108	112	15	9	707
TOTAL	9,119	3,823	7,546	851	1,871	23,210

TABLE II.

	Pre 1871	1871- 1890	1891- 1915	1916- 1932	1933- 1939	Total
Total No. in District	9,119	3,823	7,546	851	1,871	23,210
Baths	1,563	1,005	2,632	811	1,871	7,882 X
Hot Water B/Boiler	1,829	1,128	3,103	826	1,871	8,757 Y
Hot Water Geyser	1,818	1,036	1,943	23	—	4,820
W.C.	8,410	3,741	7,218	851	1,871	22,091
W.W.C.	52	16	289	—	—	357
Pail	651	66	39	—	—	756
Privy	6	—	—	—	—	6
Water supply Satis.	8,974	3,819	7,540	851	1,871	23,055
Drainage Satis....	8,020	3,634	6,887	851	1,871	21,263
Food Store Satis.	403	312	488	727	1,745	3,675 Z
Yards and Gardens	2,685	3,174	7,388	821	1,871	15,939
Sinks—Porcelain	5,750	2,799	6,150	848	1,871	17,418
Salt Glazed	205	178	422	3	—	808
Stone	3,164	846	974	—	—	4,984
Washing Facilities—						
Scullery	6,004	2,504	4,963	834	1,869	16,174
Kitchen	571	412	1,143	2	1	2,129
L.Rm/K.	652	552	1,069	8	—	2,281
L.Rm.	1,470	48	82	—	—	1,600
Cellar	331	258	214	—	—	803
Wash-house	91	49	75	7	1	223
Standard—Good	659	883	4,014	843	1,871	8,270
Medium	4,202	2,453	3,431	7	—	10,093
Poor	4,258	487	101	1	—	4,847

X This figure exceeds that shown in the 1957 Report by 483. This reduction represents the number of bathrooms installed during the last few years, usually in owner-occupied houses, and usually with the assistance of an Improvement Grant by the Housing Committee.

A similar increase is reflected in the number of houses which now possess hot water supplies—Y, and adequate food storage—Z.

These improvements have been mainly made in 'through' houses built between 1871 and 1890. They have, however, also been made in 'through' houses built before 1871 and in those built between 1891 and 1915.

TABLE III.

				Type Pre 1871					
				Thro.	B. to B.	Not Thro.	Inset	Others	Total
No. in District	...	...	...	5,791	1,847	713	305	463	9,119
Baths	...	...	...	1,268	7	24	—	264	1,563
Hot Water B/Boiler	...	...	...	1,507	14	31	3	274	1,829
Hot Water Geyser	...	...	...	1,363	242	91	31	91	1,818
W.C.	...	...	...	5,520	1,687	494	285	424	8,410
W.W.C.	...	...	...	44	—	6	—	2	52
Pail	...	...	...	225	160	209	20	37	651
Privy	...	...	...	2	—	4	—	—	6
Water Supply Satis	...	...	...	5,755	1,838	644	291	446	8,974
Drainage Satis.	...	...	...	5,297	1,564	455	279	425	8,020
Food Storage Satis.	...	...	...	370	1	6	2	24	403
Yards and Gardens	...	...	...	2,241	31	95	5	313	2,685
Sinks—Porcelain	...	...	...	4,114	699	387	111	439	5,750
Salt Glazed	...	...	...	135	48	14	4	4	205
Stone	...	...	...	1,542	1,100	312	190	20	3,164
Washing Facilities—									
Scullery	...	...	...	4,229	900	436	78	361	6,004
Kitchen	...	...	...	542	—	14	3	12	571
L.Rm/Kit.	...	...	...	543	40	39	9	21	652
L.Rm.	...	...	...	117	892	209	215	37	1,470
Cellar	...	...	...	284	14	10	—	23	331
W.House	...	...	...	76	1	5	—	9	91
Standard—Good	...	...	...	618	5	3	—	33	659
Medium	...	...	...	3,265	422	158	102	255	4,202
Poor	...	...	...	1,908	1,420	552	203	175	4,258

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

	1958	1957
Through houses in poor condition (Table III) ...	1,908	1,961
Back-to-back houses (Table III) ...	1,847	1,911
Not through houses (Table III) ...	713	748
Inset cottages (Table III) ...	305	309
Houses built 1871-1890—in poor condition (Table II) ...	487	498
Houses built 1891-1915—in poor condition (Table II) ...	101	101
	<u>5,361</u>	<u>5,528</u>

During the year the Council registered a Caravan Site in the Norden and Bamford district. Licences were also issued to 5 occupiers. Later in the year an unregistered caravan site was discovered in the Castleton district. The owner was prosecuted for using the site without the Council's approval. He was fined £5. Later the caravans were removed from the site.

There are two common lodging houses with 11 rooms containing 240 beds. 23 visits of inspection were made during the year. The houses were found to be clean and well conducted.

	Houses		Other Premises	Total
	Separate Accommodation	Joint Accommodation		
I Number of premises involved	383	373	36	792
II (a) Unsuitability or absence of sewer as primary obstacle ...	326	116	82	524
(b) Closets associated with properties due for demolition or improvement involving vacation of some houses	46	65	2	113
(c) Capable of conversion without much technical difficulty ...	11	3	9	23
III TOTAL PAIL CLOSETS ...	383	184	93	660
IV Total Pail Closets at December, 1957	424	209	95	728

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

Pail Closets	...	...	...	...	...	...	660
Waste Water Closets	...	...	...	...	...	...	357

At the Council meeting on 6th February it was decided that the Council's contribution towards the cost of converting pail closets and waste water closets should be increased to an amount not exceeding one half of the cost of the work. This decision will enable action to be taken under the provisions of the Public Health Act to compel conversion in cases where persuasion fails.

During the year 68 pail closets were either converted or done away with and 63 waste water closets were converted to the fresh water carriage system. The Table above shows that 660 pail closets were still in use at the end of the year and it shows also that the pail closets which now remain are chiefly those where there is technical difficulty in conversion and where conversion ought to be associated with housing improvement. There are only 23 pail closets which can be described as being capable of conversion without much technical difficulty.

Smoke Abatement.

During the first five months of the year the powers for dealing with smoke nuisances under the Public Health Act 1936 continued in force. On 1st June however the appropriate provisions of the Clean Air Act 1956 were brought into operation and on the same date regulations made under the provisions of the Act prescribed what shall be considered breaches of the Clean Air Act. The method of dealing with smoke nuisances was considerably altered as from 1st June. It is no longer necessary to serve a notice requiring the abatement of a smoke nuisance. Legal proceedings may now be authorised by the Committee without serving any notice.

There were 84 smoke observations taken during the year and these revealed 3 contraventions of the Public Health Act 1936 involving two firms. There were also revealed 3 contraventions of the Clean Air Act involving three firms.

One of the contraventions of the Public Health Act was dealt with by the service of a statutory notice. The other two involving one firm, were the subject of legal proceedings which resulted in the making by the Magistrates of an Order to abate the nuisance and to carry out certain works. The costs of the proceedings were awarded to the Corporation.

In the three cases which were breaches of the Clean Air Act, 1956 legal proceedings were taken against one firm resulting in a conviction and a fine of £20 with an Order to pay £3 3 0d. cost. In the other two cases the Committee decided to send letters of warning.

Prior Approval of New Furnaces.

Applications were made by three firms for the approval of new boiler plants which they intended to instal. In each case plans and specifications were submitted and the Council approved all the applications although in one case certain reservations were made. The examination of such applications is always

a highly technical matter and in the early part of the year, the Health Committee agreed that in suitable cases consultant advice should be obtained. The three cases mentioned, however, were comparatively simple and it was not necessary to take advantage of this facility.

Central Smokeless Zone.

The premises in the Central Smokeless Zone have been the subject of frequent observation and whenever smoke has been observed to be emitted, the premises have been visited and the source of the smoke investigated. During the year 15 premises were visited and as a result, 8 offences were discovered and reported to the Health Committee. None of the persons concerned had had previous warnings and the Committee decided that a warning letter should be sent to each of the offenders.

Smoke Control Areas.

In January 1957 a report was submitted to the Health Committee concerning the proposed Kirkholt Smoke Control Area and later during the year the Council were notified that the Ministry of Housing and Local Government agreed to their proceeding with a detailed survey of the area prior to submitting an Order for confirmation by the Minister. The survey proceeded during the year but because of staff shortages and pressure of other duties it was necessary to deal with the area in sections. The Health Committee at their meeting in October decided to make an Order covering the Alder Road Estate and the Thornham sections of the area and they indicated their desire that this Order should become operative on 1st September 1959. Objections to the order were, however, received and the Committee's decision therefore became the subject of a public local enquiry to be held in 1959.

The Alder Road Estate and Thornham Smoke Control Area contains 314 privately owned houses and 149 Corporation owned houses, making a total of 463 houses. The Area also includes one industrial premises and eight premises used for other purposes. It is estimated that 1,730 tons of bituminous coal are burned in the Area each year.

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 was hoped that the Roch Mills gauges would give an indication of pollution where the prevailing south-west wind enters the

ATMOSPHERIC POLLUTION—Average Monthly Deposit at Three Gauges during 1958.

A.—Roch Mills Gauge (Sewage Works)				B—Entwisle Road Gauge			C—Foxholes House Gauge					
Month	Average Rainfall in millimetres			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	103	102	127	6.67	7.51	6.40	7.60	6.77	8.31	14.27	14.28	14.71
February	143	164	162	6.31	8.94	4.97	7.30	7.74	7.87	13.61	16.68	12.84
March	58	56	61	6.07	7.44	3.84	4.38	4.04	4.40	10.45	11.48	8.24
April	31	30	36	7.14	7.10	5.54	4.51	3.54	3.37	11.65	10.64	8.91
May	96	103	111	1.33	4.90	5.67	9.59	8.97	8.81	10.92	13.87	14.48
June	121	126	135	6.17	7.57	4.74	8.96	7.04	9.27	15.13	14.61	14.01
July	101	98	99	1.76	5.30	9.91	6.74	5.00	5.07	8.50	10.30	14.98
August	126	139	135	9.89	9.24	4.37	7.40	7.07	6.87	17.29	16.31	11.24
September	122	124	124	3.82	6.61	2.50	8.73	7.31	6.97	12.55	13.92	9.47
October	117	122	124	0.83	1.17	0.70	7.47	7.17	7.31	8.30	8.34	8.01
November	44	46	58	9.36	17.58	11.54	5.74	5.97	5.00	15.10	23.55	16.54
December	104	105	109	11.12	6.34	8.21	8.23	5.87	6.37	19.35	12.21	14.58
TOTALS	1166	1215	1281	70.47	89.70	68.39	86.65	76.49	79.62	157.12	166.19	148.01
AVERAGES	97	101	107	5.87	7.48	5.70	7.22	6.37	6.63	13.09	13.85	12.33
Average of three gauges				6.35			6.74			13.09		
Average for 5 years 1953—57				8.41			7.36			15.78		

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 then 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 for the five years 1953-1957 are also included so that some comparison may be made.

For this year the Table would seem to show that on average the atmosphere is less polluted at Foxholes after it has passed the centre of the town than it was at Roch Mills when it entered the town.

Another interesting fact from these figures is that quite regularly there is higher rainfall on the Foxholes side of the town compared with the Roch Mills side of the town. Without making quite elaborate calculations in respect of wind direction and velocity, the presence of fog and other similar factors, it is not safe to draw too precise deductions from these figures. Nevertheless, the overall picture is one of reducing atmospheric pollution.

Sulphur Dioxide Gauges.

The results obtained from these instruments are tabulated below :—

Month			Roch Mills	Entwisle Road	Foxholes	Average
January ...	...	...	2.7	2.5	2.6	2.6
February ...	...	...	2.1	1.9	2.0	2.0
March ...	...	...	2.1	2.3	2.0	2.1
April ...	...	...	1.7	1.5	1.6	1.6
May ...	...	...	1.3	1.2	1.4	1.3
June ...	...	...	1.3	1.2	1.3	1.3
July ...	...	...	0.8	0.8	0.9	0.8
August ...	...	...	0.9	0.8	0.8	0.8
September ...	...	...	1.4	1.0	1.1	1.3
October ...	...	...	1.5	1.3	1.4	1.4
November ...	...	...	2.6	2.2	2.0	2.3
December ...	...	...	3.2	2.5	2.8	2.8
Average for 1958 ...			1.8	1.6	1.6	1.7
Average for 5 years 1953-1957 ...			1.7	1.5	1.7	1.6

The results given above are the weight in milligrammes of SO_2 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.

Licences and Registrations issued under these Regulations :—

Premises used as a Dairy	...	...	...	...	...	3
Persons licensed as Distributors of Milk	...	...	...	...	...	359
Dealer's Licences to sell Pasteurised Milk	...	...	...	...	...	49
Dealer's Licences to sell T. Tested Milk	...	...	...	...	...	39
Dealer's Licences to sell Sterilised Milk	...	...	...	...	...	247
* Supplementary Licences—Pasteurised Milk	...	...	...	...	...	12
Tuberculin Tested Milk	...	...	...	...	...	11
Sterilised Milk	...	...	...	...	...	12

* 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.

111 samples of milk were obtained and were tested to determine the cleanliness and 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 95 samples of which :—

64 were tuberculin tested milks	...	...	6 proving unsatisfactory
16 were tuberculin tested pasteurised milks	...	...	all satisfactory
15 were pasteurised milks	...	...	all satisfactory

The 6 unsatisfactory samples were reported to the Ministry of Agriculture, Fisheries and Food, whose duty it is to investigate such samples.

The Turbidity Test was applied to 16 samples of sterilised milk.

The Phosphatase Test was applied to 32 samples of milk to determine the effectiveness of the heat treatment process. These included 16 samples of pasteurised milk and 15 samples of tuberculin tested pasteurised milk, together with a sample of tuberculin tested milk. All samples were reported as satisfactory.

Examination of Milk for M. Tuberculosis.

64 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.

There is one premises licensed as a Knacker Yard and 93 visits were paid to it during the year.

Meat and Food Supply.

There has been regular inspection of meat and food offered for sale and nearly 25 tons were condemned as unfit for human consumption and were either destroyed or disposed of for salvage purposes. This work involved 1,904 visits during the year.

Until the 31st May, 1958 condemned meat was collected by the Cleansing Department and taken to Entwisle Road Works where it was treated to produce fertiliser.

In April, 1958 the Health Committee agreed that from 1st June, 1958 condemned meat should be sold to commercial firms, the sale of the material and the selection of the processing firm being left in the hands of the Committee. After inspection of the premises by the Chairman of the Committee and the Chief Public Health Inspector, one firm was selected and continued to receive condemned meat for the remainder of the year. The payments for the material are made to the Council and periodically disbursements are made to the owner.

The following Table gives a detailed report on the examination of carcasses inspected at the slaughterhouses. In addition to the inspection of the carcasses shown in the Table, the Meat Inspectors saw the carcasses of 520 horses. Of these, one whole carcase, one part carcase and offal weighing 270 lbs. were condemned. The number of horses slaughtered has continued to decline, the totals for 1955, 1956 and 1957 being 1,452, 1,253 and 930 respectively.

Carcases Inspected and Condemned.

	Cattle ex- cluding Cows	Cows	Calves	Sheep and Lambs	Pigs
Number killed	2,224	3,806	253	16,233	3,944
Number inspected	2,224	3,806	253	16,233	3,944
ALL DISEASES EXCEPT TUBERCULOSIS & CYSTICERCI :					
Whole carcases condemned ...	1	17	17	14	3
Carcases of which some part or organ was condemned ...	369	1,070	5	347	200
Percentage of the number inspected affected with disease other than Tuberculosis ...	16.64%	28.56%	8.69%	2.22%	5.15%
TUBERCULOSIS ONLY :					
Whole carcases condemned ...	1	6	—	—	1
Carcases of which some part or organ was condemned ...	59	596	—	—	22
Percentage of the number inspected affected with Tuberculosis	2.70%	15.81%	—	—	.58%
CYSTICERCOSIS ONLY					
Carcases of which some part or organ was condemned ...	—	—	—	—	—
Carcases submitted to treatment by refrigeration ...	—	—	—	—	—
Generalised and totally condemned	—	—	—	—	—

Manufacture and Sale of Ice Cream.

At the end of the year 375 premises were registered for the sale and storage of ice cream. There were 23 visits of inspection to premises where ice cream is sold. In almost every case the ice cream is sold wrapped or in containers as received from the wholesalers or manufacturers.

Two premises are registered for the manufacture of ice cream. In both cases the cold mix process is used and 17 visits of inspection were made to these premises.

Food and Drugs Act 1955.

During the year 189 samples (117 formal and 72 informal) were analysed or otherwise examined by the Public Analyst. There were 117 samples of milk and 72 other samples. These 72 samples were of 38 different kinds of foodstuffs. In 2 samples of milk which were reported as being below standard, there was a deficiency of milk fat. This was however, a condition which had arisen naturally and was not the result of adulteration or abstraction.

A sample of double cream was deficient in butter fat. In this case the Health Committee interviewed the vendor, advised him of his responsibilities and issued a warning. The remaining adulterated sample was an unopened glass jar of chicken fillets which contained a foreign body. This was an article which had been packed abroad and no blame could be attached to anyone in this country. The matter was brought to the attention of the importers concerned.

Food Preparing Premises.

The number of food premises and the types of business operated are given in the following Table. This list is considered to be substantially complete :—

Grocery and General Provisions	...	...	...	...	...	400
Fish and Chip Shops	...	...	...	...	...	98
Butchers Shops	...	...	...	...	...	113
Bakehouses, Bakers Shops and Confectioners Shops	...	...	...	...	...	92
Shops selling sweets, etc.	...	...	...	...	...	83
Off-Licences	...	...	...	...	...	89
Public Houses	...	...	...	...	...	176
Cafes, Restaurants, Canteens etc.	...	...	...	...	...	183
Clubs, Hospital Kitchens, Institution Kitchens	...	...	...	...	...	71

The inspection of food premises continued during the year and despite the pressure of other work, 1,220 visits were made. Where minor matters requiring attention were discovered a verbal recommendation was all that was needed to secure compliance with the requirements of the Food Hygiene Regulations. In one case, however, legal proceedings were instituted. The defendant was convicted on eight charges, was fined £8 and ordered to pay £3. 3s. 0d. costs.

In other cases letters were sent covering the following types of defects or faults.

Unsuitable surfaces of benches, counters, tables etc (Reg. 6)	...	48
Dirty or defective fittings or utensils (Reg. 6)...	...	6
Inadequate protection of exposed foods or unsuitable arrangements for the storage of food (Reg. 8)	...	7
Smoking in food room (Reg. 9)	...	1
Want of cleanliness of person or clothing (Reg. 9)	...	1
Absence of notice re hand washing (Reg. 14)	...	7
Unsuitable or defective sanitary conveniences (Reg. 14)	...	4
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)	...	11

Non-provision of first aid boxes (Reg. 17)	...	...	...	...	7
Lack of proper provision for outdoor clothing (Reg. 18)	...	...	...	...	3
Unsuitable or defective sinks, lack of hot water supply to sinks, and absence of washing facilities etc. (Reg. 19)	...	...	...	...	2
Insufficient lighting—natural or artificial (Reg. 20)	...	...	...	...	3
Defective surfaces, walls, floors, ceilings and want of cleansing or decoration of them (Reg. 23)	...	...	...	...	48
Accumulations of refuse or inadequate storage of refuse (Reg. 24)	...	...	...	...	11
Insufficient or defective ventilation (Reg. 21)	...	...	...	...	3
Insufficient water supply (Reg. 15)	...	...	...	...	—
Absence of proper means of maintaining food etc. at prescribed temperatures (Reg. 25)	...	...	...	...	2
Name and address of stall proprietor not displayed (Reg. 26a)	...	...	...	...	—
Inadequate screening of stall (Reg. 27)	...	...	...	...	—

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
Meat Preparing Premises...	...	...	...	...	...	...	...	30
Cafes, Restaurants, Canteens, Kitchens etc.	...	...	...	...	...	...	...	183
Visits of inspection made to these premises during the year totalled 618.								

Prevention of Damage by Pests Act, 1949.

The staff engaged on this work consists of three men with assistance provided by the Borough Surveyor's Department whilst the destruction of rats in sewers is proceeding. There was during the year an unusually high incidence of staff absence due to ill health. This resulted in a reduction in the time available for survey of premises to discover vermin infestation.

1,052 dwelling houses and 741 business and other premises were inspected for the presence of rats or mice. Evidence of rat infestation was found at 391 premises (305 dwelling houses and 86 business or other premises) but the extent of infestation was, in the great majority of these cases, slight. Mouse infestation was discovered at 522 premises (446 dwelling houses and 76 business or other premises) and in these also the great majority showed only a minor infestation.

909 premises (751 dwelling houses and 158 business or other premises) were treated to destroy vermin. 966 treatments were carried out and these required 3,745 visits.

The main sewers were treated twice during the year. In the course of the first treatment 2,720 manholes were baited and 453 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 274 manholes in districts where rat infestation was thought to be unlikely. This work enabled us to exclude 852 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 1,026 manholes. Of these 255 were found to be infested and were treated by the placing of different poison baits.

Comparison of these figures with those published in previous years shows that the new methods first referred to in the Annual Report of 1957 have begun to effect a reduction in the amount of sewer infestation. It remains to be seen whether the improvement can be maintained or whether still different methods may have to be adopted.

Shops Act, 1950.

197 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, 93 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 table shows the number of persons cleansed at this Station :—

					1958	1957	1956	1955	1954
Scabies	...	...	...	...	68	31	20	15	22
Other Verminous Conditions	...				113	72	97	130	146
					181	103	117	145	168

Nearly 71% of 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, 240 visits being made for this purpose. In addition to this 574 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.

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 1958 2 exemptions were extended and 17 licences were renewed.

During the year the Inspectors paid 21 visits of inspection to premises as Officers duly authorised in accordance with the provisions of the Act.

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	36	2	—
(ii) Factories not included in (i) in which Sect. 7 is enforced by the Local Authority	535	393	20	—
(iii) Other Premises in which Sec. 7 is enforced by the Local Authority (excluding out-workers premises)	47	30	4	—
TOTAL	654	459	26	—

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) ...	7	7	—	4	—
Overcrowding (S.2)	—	—	—	—	—
Unreasonable temperature (S.3)	—	—	—	—	—
Inadequate ventilation (S.4)	—	—	—	—	—
Ineffective drainage of floors (S.6)	—	—	—	—	—
Sanitary Conveniences (S.7)					
(a) Insufficient	3	3	—	2	—
(b) Unsuitable or defective	16	16	—	11	—
(c) Not separate for sexes	—	—	—	—	—
Other offences against the Act (not including offences relating to Outwork)	4	—	4	—	—
TOTAL	30	26	4	17	—

TABLE I.—Vital Statistics of Whole District during 1958,
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
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
1957	85,310	1335	15.6	46	34	1238	14.5
Average for years 1948-1957	87,194	1326	15.2	47	35	1277	14.6
1958	84,890	1400	16.5	32	23	1293	15.2

† Estimated Civilian Population

TABLE II.

[illegible]

TABLE III.

INFANT MORTALITY.—Nett Deaths from stated causes at various
Ages under one year of age—Year 1958.

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	1958	1957
Tuberculosis, Non-Respiratory	...	...	...	...	...	...	...	...	...	...
Bronchitis	...	...	...	...	...	...	...	...	...	...
Other Respiratory Diseases	...	...	...	...	...	...	...	...	...	...
Dysentery	...	...	...	...	...	...	1	...	1	1
Gastritis and Diarrhoea	...	...	...	1	...	...	...	...	1	3
Influenza	...	...	...	...	...	1	...	...	1	1
Pneumonia	...	1	1	...	2	1	...	1	6	4
Prematurity	5	...	...	...	1	...	...	...	6	11
Congenital Malformations	5	1	...	...	3	...	...	...	9	12
Other Causes	4	1	...	...	1	2	...	...	8	14
ALL CAUSES—1958	14	3	1	1	7	4	1	1	32	...
ALL CAUSES—1957	26	2	2	...	8	5	1	2	...	46

Nett Live Births in the year :—Legitimate 1,319 ; Illegitimate 81.

Nett Deaths in the year :—Legitimate infants 31 ; Illegitimate infants 1.

ANNUAL REPORT

ON THE
MEDICAL INSPECTION OF SCHOOL CHILDREN
For the Year ended 31st December, 1958
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SCHOOL MEDICAL SERVICE

Principal School Medical Officer and Medical Officer of HealthJOHN INNES, M.D., D.P.H.
Deputy Principal 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.
Medical Anaesthetist ...	...	...R. MALLINSON, M.B., Ch.B. do.
Speech Therapist ...	...	...D. RACHEL HARTLEY, L.C.S.T. (Left 22.6.58.)
Orthoptist ...	...	...AUDREY DEAN, D.B.O. (Left 29.11.58.)
School Nurses ...	...	...H. BOWDELL, S.R.N., S.C.M., H.V., Q.N. (Left 7.9.58.) P. JOHN, S.R.N., S.C.M., H.V. B. MADEN, S.R.N. E. MAXIM, S.R.N., Q.N. H. SIMM, S.R.N. (since 17.11.58.) A. TONGE, S.R.N. M. M. TURNER, S.R.N., S.C.M., H.V. C. WALKER, S.R.N., R.F.N., S.C.M., H.V., Q.N.
Dental Attendants ...	...	...LUCY DANIELS, S.R.N. MARY FLETCHER, S.R.N. JESSIE LEACH
School Clinic Assistant ...	...	...Mrs. D. BARNISH
Clerks ...	...	...DOROTHY CLARENCE JUNE MILLS (Left 31.1.58.) MARJORIE CRABTREE (since 3.2.58.)

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 arrangements 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 1958, being the fiftieth Report on the School Medical Services in Rochdale.

The size of the school population remains as in the previous two years and the health of the children on the whole was good.

The Report continues to indicate the trend, mentioned so often recently, away from physical illness and towards conditions of mal-adjustment. Of 5,600 pupils inspected at routine inspections only 47 showed unsatisfactory nutrition, which is less than 1%. Strangely enough the highest figures were in respect of children born in 1951 and 1952.

Several comparisons are made throughout the Report between 1927 and the present year. As a general summary it is of interest to note that in 1927 no fewer than 111 children died under the age of one year, a further 54 between one and five years, and 45 died in the school age period between five and fifteen years. In 1957, while there were 46 deaths in children under one year, there were only four in the one to five year group and only eight in the five to fifteen year group. Of these last, no fewer than three were deaths due to accidents.

In 1927, the Open Air School was in the midst of early development, the emphasis being on the open air conditions under which the children were taught. Now the term has practically disappeared, since all our modern schools are in fact open air schools. The buildings and the organisation still remain at Brownhill, but the emphasis is now upon the slow pace and calm atmosphere which allow the delicate and handicapped child to develop away from the rough and tumble of a large ordinary school.

Thirty years ago the School Medical Report was quite definitely a statement of how many children suffered from what, and how badly. The present one is much more of a social history in miniature than a catalogue of physical defects. Ministry Regulations state that the Medical Officer of Health of an area "should acquire an accurate knowledge of the influences, social and environmental and industrial, which may operate prejudicially to health in the area". The School Medical Officer of today appears to have in his mind the same broad principles when a child is brought to him for special examination.

As the major illnesses and gross defects disappear, so the sieve must get finer in order to detect those deficiencies or tendencies likely to hamper the adolescent as he goes out into the complicated modern world. Equally, medical research is directing its attention to the detection of defects at an earlier stage, for instance, at the moment, in connection with hearing. Thus, and thus only, can we concentrate on all that is normal in the child with a handicap, instead of being forced at a later stage to concentrate on the handicap itself.

Once again, I place on record my appreciation of the work carried out during the year by all members of the staff, medical, nursing, ancillary and administrative. We have continued to receive the active support of the Chief Education Officer and his staff, and the encouragement of the Medical Services Sectional Committee, and for this we are grateful.

I must conclude with a special tribute to Dr. Mills who, once more, has prepared this Report, but in all probability for the last time. I should imagine that her knowledge of and service to the children of one community is unique and it is impossible in a paragraph to assess the advantages which Rochdale families have reaped from these years of devotion to their interests. In the last few years her experience has been particularly valuable in regard to the special categories of children included in the educationally sub-normal, backward and mal-adjusted.

Dr. Mills will take with her into retirement the appreciation and thanks of people in many walks of life, and opportunities will certainly be seized of expressing these.

As this Report goes to print I would personally acknowledge the pleasure I have had in working with Dr. Mills over so many years.

I have the honour to be, Ladies and Gentlemen,

Your obedient Servant,

John Limes.

Medical Officer of Health and
Principal School Medical Officer

18th April, 1959.

School Medical Service

The latest available estimate of the town's population is 85,310.

SCHOOL POPULATION

	Schools	Children
County Schools	26	7,288
Voluntary Schools...	13	3,368
Grammar Schools	2	1,173
Technical Schools	2	807
Special Schools	3	215
Nursery Schools	4	276
	50	13,127

Staff.

There have been no changes in the medical staff. One school nurse left in September and was replaced in November. Miss Hartley, Speech Therapist, left in June and so far it has not been possible to appoint a successor. Miss Dean, Orthoptist, left in November but Miss Peak was appointed to take her place from January 5th 1959.

In July each of the school doctors attended some sessions of the International Congress on the Modern Educational Treatment of the Deaf held at the University of Manchester.

Miss Bowdell, school nurse, attended a refresher course in London during April.

We have had the usual visits to the Clinic by nursing students and members of a Medical Research Council team.

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 9.0 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 and Throat**—One session per week

- | | |
|-----------------|-----------------------|
| E. Foot Clinic— | One session per month |
|-----------------|-----------------------|

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

Other Premises :

- ### B. Dental—

- NORDEN CLINIC— Treatment and X-ray examination
Ten sessions per week P.D.O.

- | | | |
|------------------|---|---|
| BRIMROD SCHOOL | } | Sessions as the work requires and
as staff are available |
| 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 when a therapist is on the staff.

WORK OF THE SCHOOL NURSES

						1958	1957
New cases seen at morning clinics	...	...	...	...	...	407	624
Dressings at morning clinics	...	...	...	...	...	3,352	3,959
Hygiene—Inspections	...	...	...	...	...	30,565	31,479
Re-inspections	...	...	...	...	...	2,238	2,749
Special School Inspections—							
1. Brownhill	(a)	Dressings	327				
	(b)	Specials	1,768	...		2,095	1,978
2. High Birch	(a)	Dressings	165				
	(b)	Specials	1,882	...		2,047	3,155
Inspections with Medical Officers—							
1. At school	...	...	...	...	...	7,628	7,539
2. At clinic	...	...	...	...	...	2,349	2,799
Eye Clinic cases...	...	...	...	...	...	1,005	980
Aurists' Clinic (total attendance)	...	...	...	...	...	272	374
Home visits	...	...	...	...	...	760	759
Total						52,718	56,395

The value of a good school nurse's work cannot be judged by figures. Not infrequently, an hour is spent interviewing one parent and a whole session and more can be taken up in an attempt to deal with the immediate problems arising from a single home visit. Let it suffice to say that the usual high standards have been maintained during the year and that at present it seems impossible to replace fully-trained and experienced staff, when they leave, except by nurses with inferior qualifications and training.

School Hygiene and Inspection

The general improvement of school premises, including alterations to the sanitary accommodation, were completed during 1958 at Lowerplace and Spotland Primary Schools and Parish Church Secondary School. The electrical installations at these schools were also renewed and the general staff accommodation improved.

The new St. Peter's School was completed by Easter. The sanitary accommodation in this school is planned on a grouping basis so that each block of classrooms has its own cloakroom and lavatory facilities. Work was started in March on the new St. Joseph's R.C. Secondary School and it is anticipated that the building will be completed by September 1960.

At Greenbank Secondary School the provision of additional domestic science and needlework classrooms was finished by the end of the year, and this has considerably improved the accommodation at this school. Work has begun on the additional classrooms to be built on the flat roof of the Grammer School for Girls.

Considerable progress has been made on the preparation of sketch plans for the proposed improvement of the accommodation at the Brownhill Special School and it is anticipated that work will start on the alterations in April 1959. Progress has also been made on minor alterations at Newbold and Townhead schools where the electrical installations are being renewed and other small improvements being carried out.

On a careful inspection of the St. John's Infant School building it was discovered that the repairs needed were so extensive that it would be advisable to demolish the old buildings and erect new ones. This matter was discussed with the School Managers and it was agreed to build a new one-form entry junior and infant school. This proposal has been submitted to the Ministry of Education for approval and it is hoped that work will be started on the new school buildings in 1959.

In December 1958, a White Paper was submitted to Parliament in connection with the general improvement of school buildings. It is hoped that as a result of decisions taken in this connection, a number of the more unsatisfactory school buildings in Rochdale will be replaced in the not too distant future.

Medical Inspection in Schools. (Part I, Page-107)

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

					1958	1957
Periodic Medical Inspections	...	...	...	...	5,216	4,927
Special Inspections	...	...	...	...	100	113
Re-inspections	...	...	...	...	2,312	2,499
Brownhill Inspections	...	...	...	...	437	347
Total	...	...	...	...	8,065	7,886
Parents interviewed	...	...	...	...	293	337

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

Children seen by the Medical Officers—

Clinic Inspections (new cases)	...	...	...	1,013	1,231
Clinic Re-inspections	...	...	...	1,336	1,568
Special Examinations	...	...	...	621	718
Foot Clinic	...	...	...	229	361
Total				3,199	3,878

New cases seen by Aurists	...	...	...	130	144
Children seen by Ophthalmologist	...	...	...	1,005	980
New cases referred to Orthopaedic Surgeon	...	...	...	31	55
New cases referred to Paediatrician	...	...	...	25	21
Total				1,191	1,200

FINDINGS OF MEDICAL INSPECTION

The following is a typical medical inspection in this town. The example chosen was a Primary School with 165 children on the register, a hundred of these being tested for the medical inspection :

- 59 were routinely inspected, at 5, 8 or 11 years of age
- 38 were seen as re-inspections from last year
- 3 were absent

Of the 59 routine cases only one was in an unsatisfactory nutritional state (0.5% approx.). Two needed referral to the E.N.T. Clinic (1%), two to the Speech Clinic, and one to the Eye Clinic. The parent of this last child wrote later to say he preferred to consult an optician.

Four of the children were already attending the E.N.T. Clinic for catarrh, deafness and frequent colds. Three were already under the care of Mr. Scott at the Eye Clinic, and another three were attending the Orthopaedic Clinic for knock-knee, hallux valgus and 'curly' toes. Four boys and one girl had already had their tonsils removed. Four children were put on observation until next year because of throat conditions, two for mild orthopaedic and three for visual defects. These visual defects were in children with vision of about 6/9 or 6/12 and no symptoms. The vision testing in school can never be as accurate as that done at the Clinic and to refer every child with a school visual defect of 6/9 or 6/12 would waste a good deal of time for all concerned.

One child examined was a problem. He had been pilfering, chiefly pencils and other small objects from other children ; nothing serious but a pointer to the

fact that investigation was needed. In this case a home visit was paid, advice given and the pilfering ceased. The rest of the routine cases were considered not to be in need of any attention.

Of the 38 re-inspections, twelve were seen because they were already under treatment for visual and other eye defects. The condition of the glasses, regularity in their use and in attendance at the Clinic were checked. Two other children had undescended testicles and one a heart murmur, apparently functional since a normal life was being led and no symptoms were present. She is, however, seen at each inspection. Four were orthopaedic cases and five had imperfect speech but were not considered to be in need of speech therapy. The other fourteen children were taken off the list as not requiring any further attention.

Ten parents attended the inspection (10%) which is a fair number for a district like this where so many mothers go out to work.

Details noticed at all school inspections include the extreme reluctance of boys to wear underpants. Even at the Grammar and Technical Schools more boys are without these garments than with. Casual shoes are being worn more and more, and the number of minor foot defects is still far too high. The chief difficulties are with the 13, 14 and 15 year old girls who seem to want to grow up earlier and earlier, abandoning in the process sensible shoes in favour of fashionable "smarter" footwear. The treatment of minor foot defects is so long drawn out, is undramatic, and there is so little improvement to be seen for the trouble taken, that the girls don't consider the exercises to be worth while and give them up. There can in fact be little done in the early treatment of hallux valgus apart from the provision of correct footwear. The uniform shoes worn at the Girls' Grammar School are excellent.

A few squints are discovered in every school. This year, at Newbold Primary School, there seemed to be more than usual. Half of the children were already under treatment at the Eye Clinic having been referred before school age by the Infant Welfare Clinics.

At the Kirkholt Primary Schools there is a great deal of poor speech in the entrant classes, including babyish speech, substitution of sounds and more definite speech defects. Very often the fathers are found to have poor speech. These entrants to school also suffer from much catarrhal infection of the upper respiratory tract, causing some deafness as well as interfering with speech clarity. It is a great disadvantage being without a Speech Therapist.

It is usually easy to decide at a school inspection which children should be referred to the E.N.T. Consultant as possibly needing tonsillectomy and adenoidectomy, because they will have a history of repeated infection, frequent absence from school, glandular enlargement, and interference with breathing. Other

children will be found to be holding their own with their infections and these can be put on observation until the next inspection. Here nearly all children fall into one or other of these groups.

Nasal catarrh accounts for a very great deal of discomfort in children; it is generally not taken at all seriously by parents, doctors, teachers or consultants, but it is the cause of much coughing and disturbed nights for parents and children, to say nothing of other disadvantages.

Each school has a few children with asthma or bronchitis. All these chesty children should sleep alone and, if possible, alone in a room, and no cats or budgies should be kept in the house. Comparatively few homes visited seem to be without pets and there seems to have been a great increase recently in the number of budgies kept, though both feathers and seed can be harmful to the asthmatic.

During the year there has been an increase in the number of skin affections found at inspections. Close questioning often discloses that the condition has been present for a long time and that other members of the family are affected in the same way. Parents and children call the condition "heat spots" but they are generally a chronic slight scabies with superimposed secondary infection.

Looking back over many years of school medical work one of the most striking changes that has taken place is social, not medical. One is continually surprised by the extreme friendliness and social ease of children nowadays; they often treat one as an equal. "I like your dress, is it new?" would once have been a wildly improbable remark from a nine year old child to a fifty-nine year old doctor, but is now a typical bit of chat during a medical examination.

We see children at their most natural and unself-conscious however, at the "polio-jab" sessions held at the School Clinic. The policy has recently been adopted of sending for about 150 children to the School Clinic on Saturday mornings, as well as visiting schools at other times. These clinics have proved most successful. The children, away from school discipline and deliberately allowed to chatter freely amongst themselves, turn up in gratifyingly large numbers, 96% being by no means unusual. The whole affair seems to be regarded as somewhat in the nature of an outing, combined as it is with errands, shopping and visits to the multiple stores. The noise at these clinics is occasionally, for short periods, ear-splitting, but the premises are extremely convenient, with a reception counter just inside the main door, adjoining the waiting room, with plenty of comfortable chairs. A small room near the door is used for the actual injections. Though the clinic is not large, no undue difficulty is met with in dealing with 150 children in an hour even when they are accompanied by parents and assorted siblings and friends.

We cannot prevent a dozen or so from attending half an hour before the time mentioned, but apart from these, nobody need wait for more than a few minutes. The whole procedure is adequately summed up in the words of one client, "That were quick". Speed though essential up to a point should never be sought to the stage of dispensing with a few words spoken to each child. A remark such as "Those new jeans are a nice colour" or "So you are a Presley fan" is sufficient to avoid the feeling of doing veterinary rather than medical work. Children are much more at ease when visiting the clinic than they are on school premises where they must of necessity be kept quiet during polio sessions and, therefore, have more time to imagine painful pricks and to listen to each other's hair-raising stories of "needles that come out at the other side of your arm". At the clinic they are more inclined to come in smiling, with a remark such as "I'm too young to die" said as a joke, or "I'm dead" when leaving. Loud laughter from the other children greets these sallies of wit.

The short-lived hula-hoop craze came to its maximum in November and it was then normal to see numerous hoops parked in the school cloakrooms. Abdominal tenderness from the stiffness of overworked muscles puzzled many a doctor unaware of the latest hobby of his patients.

There is quite a social distinction between the mother who always buys new clothes for her children and the one who equips her family by regular attendance at jumble sales. Many children never in their school lives have a new dress, coat or pair of shoes, and as they get older they long to go into a shop and choose for themselves from a stock of new and unworn clothes. Where there is no encouragement at home for her to take higher education, it is easy to understand an intelligent fifteen year old girl ignoring long-term prospects and seizing upon a well paid job in order to gratify as soon as possible this longing for bright, new clothes. We have been told by the mother of such a girl "I can't understand it, she has plenty of clothes", which is true, but all from jumble sales and never the girl's choice in colour or style.

The Girls' Grammar and Technical Schools presumably consist of those who have benefited most from the education provided by the State and should yield some interesting information about health, appearance, etc., compared with the girls attending secondary modern schools. This should help to justify or otherwise the method of selection for these schools.

At 11 plus years, there is nothing much to choose between the two groups of girls, except that the girls in uniform are much smarter and neater in appearance than those who are not. There are at this age no girls in bizarre or odd clothes. The physical defects are also much the same and have nearly all been dealt with at previous inspections.

At fourteen years the difference is more marked. Health and build are similar, but attitude, manners and speech are different, reflecting wider and different interests. The secondary modern schoolgirl of fourteen is looking outwards from school, while the other is very much concerned with school work, except the odd ones, the misfits, who now want to leave the Grammar School. There is a great increase in the number of schoolgirls who now do outside work on Saturdays, chiefly serving in shops. This practice is frowned on by the authorities for various reasons including the interference with sport. Teams for games do not turn up. It is felt that the money earned by this weekend work is all frittered away on dancing etc. In other words, it is not really necessary and therefore it is harmful.

Some of our most uphill and difficult work concerns children whose parents are mentally unstable or frankly psychotic. Mental ill-health in the parents invariably has an adverse effect on the children, often as regards their physical health and always on their happiness and general welfare. There is little one can do for these sad children.

When the father is the mental patient, a good mother is able to buffer the children against the worst results, but when the mother is mentally ill, it is more difficult for the father to do this. Worst off of all are those children whose father and mother are both unstable, quarrelsome and emotionally immature. In these circumstances the children bear the full brunt of both hereditary and environmental handicaps.

Even with apparently insuperable disadvantages, however, we sometimes see children turn out well. One girl from a bad home, with lazy and indifferent parents, a continual problem to the school medical service, has done well at the Grammar School and incidentally the home has improved.

School medicine continues to change. Our most difficult problems are less concerned with the physical needs of children and more with personal attributes and failings which affect children's health and happiness.

Infestation with Vermin (Table I, Part D, Page 108)

All the schools except two were visited three times during the year for hygiene inspection. These two exceptions were visited twice but missed their last inspections because we were without one school nurse for two months during the Autumn Term.

At these school visits, 30,565 inspections of children were made and it was found necessary for 55 children to attend the Public Health Department's Cleansing Centre. Nits and vermin were found at 669 inspections out of the grand total. In April we began to issue Lorexane shampoos to suitable families, with instructions in the use of this pleasant toilet preparation. It is a pity that

Sacker's combs are not a little cheaper; five and sixpence is too much for mothers of large families where there is only one wage-earner, yet these are the people in most need of such a comb. All the available cash in such families is already spoken for to buy more urgent necessities such as food, coal, rent and clothing. Although we have fairly frequent visits from the travelling representatives of pharmaceutical companies we have never yet had a traveller to encourage the sale of these invaluable combs.

The percentage of children found with verminous infestation was 2.18, again a slight improvement on last year's figure of 2.51. Most of these children, as before, belong to the same few families which make so much work for the School Medical Service.

Children treated at the Cleansing Centre :

				1958	1957
				<hr/>	<hr/>
Verminous heads—					
Referred by School Medical Service	...	...	77		36
Referred by Family Doctor	...	...	—		1
Scabies—					
Referred by School Medical Service	...	...	36		17
Referred by Family Doctor	...	...	3		5

Twenty-two children were sent from the School Clinic to the Centre and the rest were discovered in the course of school inspections.

School Clinic. (Table II, Part A, B, D, and G, Pages 111 and 112)

The total attendances during 1958 were 4,478 and the children attended because of the following conditions :

							1958	1957
							<hr/>	<hr/>
Ringworm	...	...	...	...	...	...	2	1
Scabies	...	...	...	...	...	...	26	9
Impetigo	...	...	...	...	...	...	35	58
Other Skin Diseases	...	...	...	...	...	...	76	112
External Eye Diseases	...	...	...	...	...	...	84	51
E.N.T. Conditions	...	...	...	...	...	...	116	177
Miscellaneous Minor Ailments	...	...	...	...	...	...	891	1,225
Septic Wounds	...	...	...	...	...	...	119	165
Plantar Warts	...	...	...	...	...	...	71	57

Scabies has increased during the year but septic conditions and impetigo have further decreased.

SCHOOL DENTAL SERVICE

The staffing position has remained more or less static throughout the year, the equivalent of 2.7 full-time Officers being available. It was not possible to recruit full-time Officers and the staff, therefore, consists of the Principal Dental Officer and four part-time Officers.

All schools, including nursery and special schools, have again been visited for routine dental inspection and 40% of the children were free from dental defects. This is rather better than in 1957 and probably shows the result of continuous inspections and treatment. There is, however, no diminution in the amount of dental decay found. This is a national problem which will continue in association with a high consumption of sweets and carbohydrates between meals, and indifference to adequate tooth cleansing. The claims of toothpaste manufacturers in television and press advertising that their products prevent decay or will keep teeth clean 'all day' are to be deprecated. It cannot be too strongly emphasised that no toothpaste can do more than clean at the time and the greatest value comes from regular and systematic brushing, particularly after meals.

In February a regular general anaesthetic session was commenced with Dr. R. Mallinson as Anaesthetist. This has been appreciated and is proving a valuable extension of the services provided.

Seven children have been provided with artificial dentures, chiefly for loss of front teeth, and it has also been possible to treat more cases of irregular dentition.

In August the Clinic established at Brownhill was declared unsafe and was evacuated. This necessitated re-arrangement to accommodate the facilities previously available at Brownhill. There are thus now only four Clinics—Norden, Penn Street, Brimrod and Balderstone. All these are in adapted premises and they suffer from a variety of disadvantages.

In September a visit to the area was paid by Dr. A. T. Wynne, Dental Adviser to the Ministry of Education. All the Clinics were visited and a comprehensive discussion on the School Dental Service in Rochdale took place between Dr. Wynne, the Principal School Medical Officer, the Chief Education Officer and the Principal Dental Officer.

In a subsequent report from the Ministry of Education the shortage of staff was noted and the hope expressed that efforts to improve this position would continue. The policy of inspecting all the Authority's schools was commended, as was the amount of work performed. The equipment in the Clinics was considered capable of improvement to bring it into line with modern standards.

The Clinic premises were all considered inadequate in some respect or other and, being in adapted buildings, difficult of further improvement.

It is suggested that the needs of the Dental Service would be best met by a multi-surgery Central Clinic with facilities for general anaesthetics, X-rays and orthodontic specialist treatment, and containing the administrative headquarters of the Principal Dental Officer. Other routine Clinics would best be situated in the Kingsway and Spotland areas and, together with some use of the Clinic planned by the Health Committee at Kirkholt, should provide a very satisfactory school dental service, given adequate dental staff. It is considered that modern, well-planned and equipped Clinics would in themselves assist dental recruitment.

The members of the Medical and Welfare Sectional Committee visited all the Clinics in October and the report of the Ministry's adviser was accepted.

The improvement of the existing Clinics commenced towards the end of the year, new modern equipment being approved for Penn Street, Norden and Brimrod. This is to be installed in the New Year and with re-decoration will make a vast difference in amenities and working conditions.

The new Clinic, to replace the one now in Balderstone Hall, is expected to be commenced in 1959-60, as is also the Health Authority's Child Welfare Clinic at Kirkholt, which includes a Dental Surgery.

Defective Vision—The Eye Clinic. (Table III, Part I, Page 111)

No change has been made in the arrangements at the Eye Clinic in Penn Street, and Mr. Stewart Scott continues to examine children there at three sessions each week. The new Ophthalmic Clinic at Birch Hill Hospital was officially opened on the 29th July and certain children selected by Mr. Scott now attend there for refractions. In all 180 children have been referred there during the year. This has been a great help and has substantially reduced the heavy waiting list of children waiting for refraction. Operations for squint and other conditions are now done at Birch Hill instead of at the Infirmary as formerly.

Mr. Scott examined 1,005 children altogether at Penn Street, and of these 990 were refracted. Glasses were prescribed for 424 and obtained at the end of the year by 391. No fewer than 320 of the children were referred to the Clinic because of squint and 15 had inflammatory or unusual conditions.

The Lancashire County Council's Medical Officers referred 45 cases of squint and 19 other children to our Clinic. The Rochdale Infant Welfare Department sent us 80 cases of squint.

Thirty-one children were examined who did not squint and who did not all need refracting ; six were new cases and the others attended for observation of previously diagnosed conditions.

Nystagmus	...	...	...	...	...	...	9	(3 new cases)
Cataract	...	...	...	...	...	...	4	(1 new case)
Chalazion	...	...	...	...	...	...	3	
Blocked Lachrymal duct	...	...	...	...	...	...	3	
Dermoid Cyst	...	...	...	...	...	...	2	
Conjunctivitis, ptosis, coloboma of macula, coloboma of iris and choroid, optic nerve atrophy, bilateral dislocation of lenses, megalo-cornea of both eyes (one each)	...	...	...	...	...	...	7	
No tears, boy now emigrated to Australia	...	...	...	...	...	...	1	
Keratoconus and corneal scarring (new case, formerly lived in County area)	...	...	...	...	...	...	1	
Abnormal formation of nerves, not a disease but of scientific interest	...	...	...	...	...	...	1	
Total							31	

Two blind and three partially sighted Rochdale children were at residential special schools at the end of the year.

Orthoptic Clinic

Miss Dean left this Authority's employ in November and our new Orthoptist, Miss Peak, was due to begin work on the 5th January 1959. The following report is a simple summary of work until the 29th November.

There were 2,457 attendances in all and 254 children failed to keep their appointments for one reason or another.

At the end of the year Mr. Scott had operated on a total of 477 children for squint since he began this work in Rochdale during 1954. Fourteen children's names were on the waiting list.

Ear, Nose and Throat Consultant Clinic

Mr. Smith and Dr. Basu have continued the work of the consultant clinics at Penn Street and have operated on, or otherwise treated, children at the Infirmary.

						1958	1957
New cases examined	...	...	...	...	...	130	144
Re-examinations	...	...	...	...	...	142	230

Of these children 112 were considered to need operative treatment. At the Infirmary 103 tonsillectomies were done on our cases, five antral washouts and three Eustachian catheterisations. One child had a granulation removed from the ear and another had a growth taken from the nostril. Other forms of non-operative treatment were given to 134 children. At the end of the year there were 52 names on the waiting list for operation.

Sixteen children attended special residential schools for the Deaf and the Partially Deaf during the year, the same number as for 1957.

Audiometric Testing

This work has been continued during 1958 and all entrants to school have been tested in addition to special cases and those who had for some reason missed their test. Apart from the routine testing in schools, seventeen children had special and fuller tests at the School Clinic. Of these, seven were found to have hearing which was satisfactory for practical purposes, one was referred to Professor Ewing at the Department for the Education of the Deaf at Manchester University, six were referred to the E.N.T. Clinic, and three were re-examinations after examination and treatment at this Clinic.

In view of the extremely small amount of deafness discovered by a routine audiometric testing and the increasing emphasis now placed on the importance of testing children's hearing very early in life, it seems that the time now occupied in routine testing of five year-olds could be more profitably spent on other aspects of school medical work.

We continue to appreciate very much the facilities afforded at the Department for the Education of the Deaf at Manchester University and are grateful to Professor Ewing and his staff for their help.

Speech Clinic. (Table III, Part 6, Page 112)

Miss Hartley left this Authority's service in June, and it has not so far been possible to replace her, so that Rochdale children have been without a Speech Clinic for half of the year and there seems to be no prospect of remedying this in the near future. This is an unfortunate state of affairs, because, though there is not a large incidence of severe speech defect, children who are handicapped in this way are at a great disadvantage not only during their educational careers but all through their lives. A marked stammer or dyslalia not only interferes with educational progress but limits the chances of employ-

ment and hampers social life to a very considerable degree, causing loneliness and unhappiness.

There were 804 attendances during the six months the Clinic was open and 27 children were discharged during that time. When Miss Hartley left 105 children were making regular weekly attendances, four were coming once a fortnight, six were on the waiting list and 62 were on review. Patients on review were mainly children with slight stammers, not at the time requiring treatment, or children who had made satisfactory progress at the Clinic, but whose speech was not quite perfect.

Foot Clinic

The Foot Clinic has been held on Friday afternoons as before, and the numbers have again contracted in comparison with 1957.

The standard of footwear and of general health has very much improved, and fewer cases of toe deformity and flat foot were seen.

During the year, 184 individual children were seen. There were 7 new cases and 222 re-examinations; 142 children were discharged as needing no further treatment and 19 discharged because of repeated failure to attend when sent for.

As in previous years, difficult or awkward cases were referred to Mr. Gracie for his advice.

Orthopaedic and Postural Defects. (Table III, Part 3, Page 111)

Thirty-one children were referred by the School Medical Officers to Mr. Gracie during 1958 :

Toe deformities	...	...	...	...	...	...	...	9
Flat feet and valgoid ankles	...	...	...	...	...	...	...	4
Knock-knee	...	...	...	...	...	...	...	3
Postural defects	...	...	...	...	...	...	...	3
Torticollis	...	...	...	...	...	...	...	2
Others	...	...	...	...	...	...	...	10
								—
Total	...	...	...	...	...	...	...	31
								—

These patients were disposed of as follows : five were admitted to hospital for operative and other treatment ; ten were kept under observation and treatment at the Orthopaedic Clinic in Smith Street ; six children had their footwear

adjusted and of the remainder one failed to attend and nine 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 1958, twenty-five children were referred to Dr. Wolman and of these one failed to attend. The reasons for referral were as follows :—

Heart murmurs	...	...	...	...	...	...	...	...	4
Behaviour problems	...	...	...	...	...	...	...	...	3
Debility and/or malnutrition	...	...	...	...	...	...	...	...	12
Migraine	...	...	...	...	...	...	...	...	1
Convulsions	...	...	...	...	...	...	...	...	2
Asthma	...	...	...	...	...	...	...	...	2
Enuresis	...	...	...	...	...	...	...	...	1
									—
Total	...	...	...	...	...	...	...	...	25
									—

Of these children, eleven were admitted to Lake View Continuation Hospital.

One of the behaviour problems was referred to a psychiatrist and the other two were kept under observation. One child with convulsions, who also had hemiplegia, was referred to a neuro-surgeon in Manchester. The remainder did not need any active treatment.

Once again we record our thanks to Dr. Wolman for his advice, co-operation and helpful reports.

Brownhill School

In collaboration with Miss Pearce, Head Teacher.

The work of the Open Air School has been done with considerable difficulty during the past year and on a reduced scale for the last four months. It was mentioned in last year's Report that parts of the older premises had been found unsafe and unfit for use. Conditions deteriorated in this building during 1958 and in August an inspection was made by the Borough Surveyor's Department, following a request by the Headmistress to the Chief Education Officer. Matters were found to be in such a state, especially the roof, as to endanger the safety of children and staff using the building. The major part of the old house, including the whole of the upper floor, was immediately closed, leaving in use only the cloakrooms, one diningroom and the kitchen premises. The usual numbers of children fit to leave the school had been discharged at the end of July, but no new pupils could be admitted at the beginning of the September term, and at the end of the year 67 children were attending the school instead of the usual 114.

One classroom has been divided by means of furniture to provide a Head Teacher's room and a staff room, also used for medical inspection. Both children and staff have adapted themselves to their new and highly inconvenient situation with goodwill and cheerfulness. It is expected that numbers may have to be further reduced when building for the new school begins, probably in the Spring of 1959.

Drastic reduction of numbers in a long-established school for delicate and handicapped children is no easy task. The worst problems are the children with chronic bronchitis, asthma or bronchiectasis, and congenital heart disease. Their afflictions are usually permanent ones and life in an ordinary school is difficult if not impossible. Most are able to attend a special school with reasonable regularity but find it beyond them to cope with the rough and tumble of an ordinary school. A slow pace, a calm atmosphere, and an absence of hurry, jostling and roughness is essential to these children's happiness and progress. Many of these children come from the oldest and most overcrowded schools in the town, the Roman Catholic Schools, and the improvement in their school attendance after admission to Brownhill is striking. Since these chest complaints are often permanent some of the children have attended the school for a considerable time, two for seven years.

There were 28 new admissions during the year, fifteen boys and thirteen girls and the reasons for their admission were as follows :—

							Boys	Girls
Sub-normal nutrition and debility	...	...	...	...	...	...	3	6
Asthma	...	...	...	...	...	...	3	—
Nervous conditions	...	...	...	...	...	...	2	—
Physical handicap	...	...	...	...	...	...	2	—
Bronchitis	...	...	...	...	...	...	1	2
Other conditions	...	...	...	...	...	...	2	2
Fits	...	...	...	...	...	...	—	1
Admitted for observation	...	...	...	...	...	...	2	2
Total							15	13

The observation cases were again the most interesting.

1. Girl, aged 8, admitted at the request of the family doctor because of severe emotional outbursts occasioned apparently by her intense dislike of her former school. She was in a highly disturbed nervous and mental condition and for the first few days continually ran home from school, showed ungovernable fits of temper and at times had to be forcibly controlled because she was so excited

as to be beyond the reach of reasoning. Great patience and understanding on the part of all the staff, sometimes in spite of intense provocation, gradually won her confidence and calmed the violent emotional storms. She no longer needs to be escorted to school since she now loves to come, has made many friends and is very happy. It is now possible to see her true nature which is generous, willing and helpful. She is completely controlled in class and is an excellent worker. As she gradually becomes less self-centred she should be a useful and sensible member of the community. The change in this girl's behaviour and outlook is the most remarkable that Miss Pearce has ever seen in her teaching experience. Needless to say the mother, who was in despair about her daughter, is delighted by her improvement.

2. Girl, aged $8\frac{1}{2}$, admitted because she had recently been discharged from a Special School for the Blind following an operation which gave her a certain degree of sight. She needed re-education by sighted methods entirely new to her, consequently all her work was at the beginner's stage and she could not have adapted herself in an ordinary large school. Temperamentally she was extremely quiet and unemotional, difficult to approach and unresponsive. She still makes no effort at conversation but will answer questions. In spite of this she is a keen worker and has been very industrious. She takes great pleasure in colour and form in art work, and delights in reproducing fine details. In nine months she has made twelve months' progress in reading and her written English has progressed correspondingly. Number work is slow but all her work is neat, figures and letters being well-formed. She does not appear to have high intelligence and will never reach great heights in scholastic work. She is very happy in her own quiet way and loves to run and skip on the field if she thinks she is unobserved. Her father is blind and her mother has little vision, but has been very helpful and co-operative, bringing her to the school bus in the Town Centre every morning and meeting the bus every afternoon.

3. Boy, aged 7, admitted on the recommendation of one of the school doctors because of extreme nervous excitability. He was a bedwetter and did not begin to speak until five years old but between 5 and 7 became a noisy uncontrolled problem child. He was the youngest of five children, was unable to fasten his own shoes, and made a fearful scene at our first attempt to do a medical examination. After eleven months he has become a perfectly normal high spirited boy, willing and co-operative. His work is very satisfactory, his reading age has advanced from 7.9 to 9.5 but his comprehension is less good than it might be. On admission he could not be given dental treatment because of his nervous condition but recently has been to the dentist for tooth-filling and behaved excellently.

4. Boy, aged $8\frac{1}{2}$, admitted because of nervous tension, complete lack of self-confidence and tendency to burst into tears for no apparent reason. It was found impossible to cope with him at his former school. After eleven months,

during which time he has formed a close association with another boy admitted at the same time, he has become a perfectly normal member of the school community. His work has steadily improved under wise guidance from his class teacher and he has now become more self-reliant and is beginning to show signs of independence. This development and maturing of his behaviour has been the fundamental factor in his remedial treatment at Brownhill. With this self-confidence he now needs further encouragement to press on with his work, which is below standard, as is typical of the retarded child. He has a very pleasant personality and is willing and co-operative but will always be a sensitive person by nature.

One girl with congenital heart disease, somewhat improved after operation, had attended Brownhill for over seven years with some intervals, and she left in July to reside permanently in South Africa. Recently Miss Pearce received a most cheerful letter from her, enclosing a school report showing excellent progress except in Afrikaans, a subject in which she is naturally rather behind the others!

A boy with multiple defects including congenital deformities of jaw and arm and partial paralysis of the legs, was admitted to Brownhill for a few weeks during 1958. The special school to which he was transferred in 1955, because of poor home conditions and general lack of progress due to non-co-operation of the mother, temporarily closed. He had improved considerably, still very small for his age but in much better physical condition with the regular meals and sleep which were previously lacking.

Another boy, a partial albino with marked myopia and suffering from fits, was transferred to a residential special school where he is making more satisfactory progress.

A third boy who had been in the school for a year, admitted because of minor epilepsy, died in September from laryngeal spasm and asphyxia.

We have as usual several children in the school who have been ascertained as physically handicapped. These include two hemiplegics, a kyphosis following Potts disease, two partially sighted children, an osteomyelitis, an epileptic and a paresis following a brain tumour.

Since 1925, when Brownhill was opened as an open air school, with three classrooms built in the garden of the old house used for administrative and other purposes, the work done there has been of inestimable value to hundreds of Rochdalian children now leading healthy and happy lives. Many of them bring their own children as candidates for admission, remembering the benefit they felt from attending the school. All concerned with the school are much looking forward to seeing its work continue and extend in the modern and convenient building soon to rise on the old site.

The first occasion on which mention of the Open Air School occurs along with Dr. Mills' name, is in the Annual Report for 1927, when the school accommodated 90 children.

Many differences could be discussed. The dietary appears to have been very satisfying and, judging by the increase of weight in the children, quite satisfactory, yet there was far too much potato-pie and suet pudding, and too little first class protein to satisfy modern standards.

The regular attendance of children at the Ultra-Violet Ray Department of the Rochdale Infirmary is also noted.

More important is the type of child dealt with then and now. Of the 180 children admitted in 1927, no fewer than 67 were classified as pre-tubercular, judged by the fact that they were unsatisfactory as regards nutrition, frequently showed enlarged neck glands and, in certain cases, had a family history of tuberculosis.

There were 37 cases of definite heart disease and six of the cases were definitely rheumatic in origin.

Fortunately, these major classifications have disappeared from our present list of admissions.

Examination of Educationally Sub-normal Children

This work has again been done by Dr. Mills and Dr. McKenzie who between them tested 129 children during 1958. In spite of the local recession in trade, large families of newcomers continue to settle in the town and often one or more members are educationally sub-normal and have enjoyed no special educational facilities before arriving here.

Difficulty is still met in convincing some parents that their child is backward and that something will have to be done about it. There are still parents who think that education is a waste of time and that reading is an unnecessary "frill". The fact that a child can go errands and bring back the correct change is often adduced as proof that he cannot be backward, whereas it is nothing more than a tribute to the shopkeeper's honesty.

One severely handicapped child, recovering from encephalitis was found to be suitable only for home tuition. This was arranged by the Chief Education Officer and continued until the girl improved in health sufficiently to attend a residential special school.

High Birch Special E.S.N. School—School Organiser's Report

The year has seen the school beset by difficulties regarding admissions and staffing, but in the main they have been overcome, thanks to the work of the Head Teacher and his staff. Because of an increase in the number of children awaiting admission there has been a corresponding increase in the size of classes in order to accommodate the more urgent cases. Twenty-two children have been admitted, and eighteen others have left on reaching the age of sixteen.

The inevitable staffing changes have caused difficulties which can be very disturbing in a school which depends for a great deal of its success upon close and stable relationships carefully developed between the Head Teacher, his staff, and their pupils. Fortunately, a full complement of staff has been maintained, although not without some breaks in continuity. Mr. K. S. Hamer, Deputy Head since 1952, left in September to become Head of Brimrod Secondary Modern School. He was succeeded by Mrs. K. I. Marshall who brings to the post a great deal of experience as a teacher and a wide knowledge of backward children following on a year's special study at London University.

The onset of economic difficulties in the town seems to have given rise to an increase in the number of applications from parents for the premature withdrawal of their children from the school. On examination, the grounds for these applications are found to be invariably financial, whereas there is no doubt that educationally sub-normal pupils require to spend an additional year at school to gain full benefit from the course.

The hard work put in by Mr. Spencer and his staff to interest parents and former pupils in the continued progress of the school is most fruitful. The Parent-Teacher Association meetings are well-attended, and the Open Day which is now a feature of school life brought a record attendance of parents and interested friends. These occasions are particularly pleasing as they provide excellent opportunities for parents to see the inner workings of the school and help to dispel some of the prejudices which still exist in the public mind against "special" schools. They also foster the social consciousness which is so important to proper development.

The school was also the scene of the meeting of the Roch Valley Branch of the National Union of Teachers, when sixty visitors were able to see the excellent facilities afforded at High Birch. The remedial work at the school has continued satisfactorily and school functions have been carried out with the customary enjoyment and efficiency which characterise High Birch at work and at play.

Remedial Education Course—School Organiser's Report

The system introduced several years ago of carrying out at set intervals surveys of childrens' attainment and innate ability continues to be most helpful.

The initial detection of backwardness on transfer from infant to junior school enables diagnosis of the underlying causes and application of remedial treatment at an early stage of the child's development. These children fall into three categories—(i) the educationally sub-normal child, for whom admission to High Birch is recommended ; (ii) the child who is dull and backward by reason of limited ability ; (iii) the child of normal ability who is backward in attainment.

Subsequent surveys carried out in the second and fourth year of the junior school help the follow-up of cases of backwardness, and also reveal cases which have not hitherto been sufficiently pronounced to warrant remedial treatment.

The remedial classes conducted by the Peripatetic Remedial Teacher have been mainly concerned with children in category (iii) and have continued to produce good results. It is apparent, however, that further follow-up and continuation by the class teacher of intensive methods of individual teaching are necessary if progress made in the remedial class is to be sustained in all cases. The problem of giving individual attention to children in category (ii) is made much more difficult by present conditions and by the shortage of experienced teachers, especially those trained to provide for dull and backward children. Many Head Teachers, however, are beginning to apply the specialist methods to their backward pupils, thus enabling more attention to be given to those children of limited ability who hitherto have been the concern of the class teacher and outside the immediate responsibility of the Remedial Teacher.

An encouraging trend in dealing with the problem of backwardness is the increase in the number of teachers who wish to make use of the opportunity afforded by the Education Committee of full-time secondment on salary to attend special courses of 3—12 months duration on the education of the dull and backward child. In addition it is pleasing to report that more than 50 of our teachers are attending a course of eight weekly lectures, organised by the Authority in conjunction with the School of Education of Manchester University, when the various problems connected with the dull and backward child are the subject of talks and discussion by experts in their special field of education.

Physical Education

Mr. W. M. D. Cameron left in December 1958 and is to be replaced in January 1959 by Mr. C. Meek.

The facilities for physical education continue to improve. In the older schools, when substantial alterations take place, the opportunity is taken to provide modern apparatus and equipment. Pupils readily respond to the stimulus these offer.

Gymnasia in secondary modern schools are now fully equipped and well

used both by school pupils and for evening activities. Most junior schools have modern climbing apparatus and a reasonable supply of small equipment.

During 1958 the new St. Peter's Church of England School was opened, and staff and pupils take full advantage of the new school conditions which are a complete contrast to those in their former premises. Physical education periods now take place in a light, airy hall, well fitted with apparatus and portable equipment. Children do their work in bare feet on an excellent floor and it is obvious from their response and performance that the provision of such facilities results in a great improvement in their physical condition.

Opportunities for physical education in the Roman Catholic schools continue to be limited and difficult, but the new St. Joseph's Secondary School and the new primary school will begin to relieve the disadvantageous conditions in which teachers and pupils are now working.

Extensive alterations are about to take place at Brownhill Special School and particular attention is being paid to the exceptional needs of these physically handicapped and delicate pupils. In the assembly hall some long-needed facilities for remedial work will be provided.

Junior school children at the age of ten continue to attend the Baths for one period every school day for three weeks with their class teachers in accordance with the Intensive Swimming Scheme. This concentration of lessons over a short period results in the children's fears being quickly overcome and the results are excellent. Last year 1,370 children attended the Baths under this Scheme and 75% were able to swim one breadth of the Baths at the end of the three-week period. Indeed, at one school only two children out of fifty were unable to swim.

Work to improve playing field facilities continues but it was hampered during 1958 by the very wet conditions which made the surface waterlogged for long periods and restricted the use of the fields. Work was begun on the complete re-surfacing of Heybrook Playing Fields but because of the weather the work was only partly finished at the end of the Summer and much remains to be done in 1959.

Teachers of physical education regularly attend the various refresher courses that are arranged in Rochdale and elsewhere and a generally high standard is maintained throughout Rochdale schools.

Child Guidance

The position is as before. We have no Child Guidance Clinic and no Educational Psychologist.

Children Notified to the Local Authority for Mental Deficiency

Twenty children were recommended to the Education Committee during 1958 as suitable for notification to the Local Authority for Mental Deficiency. Fourteen had attended a special school and were notified under Sub-Section 5 of Section 57 of the Education Act, as being in need of statutory supervision. The other six were notified under Sub-Section 3 of the same Section, as being ineducable.

One girl had attended a Primary School and was then admitted to High Birch which she attended for about a year by which time it became clear that she was not profiting by her attendance and was ineducable, so she was notified at the age of 9 and admitted to the Occupation Centre. Another girl attended a Primary School for a time, was notified at the age of 6, and is now at the Occupation Centre. The other four were notified at the age of 5 ; two were to be admitted early in 1959, and two are awaiting admission to the Occupation Centre.

Nursery Schools—Report by Dr. K. W. Thakre :

During the year 42 medical inspections have been carried out and 579 children examined at the four nurseries. Many of the children have colds and enlarged tonsils. The percentage of carious teeth in children is less than before. Most of them like to go to their own dentist, but there are still a number of mothers who prefer to bring their children to the School Clinic for treatment. Squint is another major defect observed during medical inspections. These children are referred through the School Clinic to be seen by the Consultant Ophthalmologist for observation, for treatment by the Orthoptist, or for operation.

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

Teeth	59	Heart and Circulation ...	3
Eyes—		Lungs	10
Vision	4	Deformity	58
Other	58	Posture	13
Ears—		Flat Foot, etc.	21
Hearing	4	Poor Mental Development	8
Other	14	Other Diseases	9
Tonsils	72	Nervous System	5
Cervical Glands ...	55		
Speech	10		

At the time of Medical Inspections, the opportunity is taken to catch up with immunisations and vaccinations. Most of the children are already done before admission.

Verminous Conditions.

	Head		Clean		Nits		Vermin	
	Inspections							
	1957	1958	1957	1958	1957	1958	1957	1958
First Quarter ...	1,390	1,270	1,350	1,219	40	50	—	1
Second Quarter ...	1,117	1,296	1,085	1,250	32	45	—	1
Third Quarter ...	744	886	729	853	15	28	—	5
Fourth Quarter ...	1,221	1,199	1,198	1,138	21	58	2	3
	4,472	4,651	4,362	4,460	108	181	2	10

Out of 4,651 inspections, 191 showed actual vermin or nits. It is the largest number since 1954. The reason for this increase cannot be traced to any particular cause.

There is still a great demand for places at Nursery Schools and there is a long waiting list. Some of the children have to wait nearly two years before they can be admitted to Nursery School.

The children learn discipline, co-operation and regular habits, they also learn to live socially and take part in group games. This is very important for an only child. They are not only looked after physically when mother goes to work, but every effort is made to enhance their mental growth. Teachers in the Nursery Schools keep a record of the progress of a child and this enables us to detect a mentally retarded child earlier than otherwise. Children of problem families and large families are very much benefited by the Nursery Schools. In some cases this is the only place where they get a balanced diet and consideration, as well as an effort to improve their habits and speech. Even the medical instructions are carried out during nursery hours where mothers fail to do so.

Head Teachers have been most considerate and helpful in solving some of the family difficulties by taking children into Nursery Schools whenever they could do so. The teaching staff have been most co-operative and helpful with the Health Visitors and Medical Officers, and I would like to thank them for all their help.

Diphtheria Immunisation.

During the year 346 children of school age completed a full course of primary immunisation, and 948 children who had previously been immunised received re-inforcing injections, an increase on the numbers for 1957.

Poliomyelitis Vaccination.

During the year 5,098 children received a full course of two injections, 3,198 of which were given by the School Medical Staff. There were 3,509 children of those vaccinated of school age, while the remainder were under five.

Skin Testing for Tuberculosis.

Four schools were visited for the purpose of carrying out skin tests during 1958. A total of 363 tests was carried out with 340 negative results and 23 positive results. From these positive results no cases of Pulmonary Tuberculosis were diagnosed. The Heaf Multiple Puncture method was used throughout. This programme had to be virtually abandoned because of the concentration on Poliomyelitis Vaccination. It is hoped to resume it as soon as practicable.

B.C.G. Vaccination against Tuberculosis.

A full course of B.C.G. vaccination was received by 24 children of school age under the contact scheme at the Chest Clinic during the year.

Infectious Diseases

During the year ending 31st December 1958, there have been 176 cases of infectious diseases notified in school children :

							1958	1957
Scarlet Fever	...	...	...	...	...	...	11	23
Measles	...	...	...	...	...	...	83	527
Whooping Cough	...	...	...	...	...	...	15	27
Chicken Pox	...	...	...	...	...	...	16	13
Dysentery	...	...	...	...	...	...	45	13
Erysipelas	...	...	...	...	...	...	1	—
Poliomyelitis	...	...	...	...	...	...	1	—
Food Poisoning	...	...	...	...	...	...	1	—
Tuberculosis—Pulmonary	...	...	...	...	...	...	2	—
Non-Pulmonary	...	...	...	...	...	...	1	—
Total	...	...	...	...	...	...	176	603

The case of Poliomyelitis occurred at St. Michael's School, Bamford (outside the Borough) and was diagnosed as non-paralytic.

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. On

every occasion she has either been able to supply useful information to assist the Committee in its decisions, or has given background information about cases already being dealt with by the Department.

Of the five new cases dealt with, only one case, involving one child, was referred from the School Medical Department. This five year old boy was an only child, living alone with his father, the mother having left home. The problem here is that while the child in many ways is adequately provided for in a physical sense, there is severe psychological defect in the background.

Other Medical Examinations

The medical examinations of adults at the School Clinic during 1958, are classified as follows :—

Corporation Superannuation Scheme	...	...	...	...	194
Full-time workers in Meals Service	...	...	...	...	80
Training College Students	...	...	...	...	61
					<hr/>
Total	...	...	...	...	335
					<hr/>

The following special examinations were made of children, figures which cannot be included in the Statistical Tables :—

Children undertaking part-time employment	...	...	...	297
Children going to camp, holidays abroad, boarded-out, acting in pantomime, returning to Special Schools	...	...	...	217
Special Survey of children prematurely born	...	...	...	101
				<hr/>
Total	...	...	...	615
				<hr/>

Prematurely Born Children

During 1958 the regular examination of these children was continued, and 49 six-year olds and 52 eight-year olds were medically inspected.

National Society for the Prevention of Cruelty to Children

Inspector Budd reports that during 1958, of the 162 cases and 405 children with which he dealt, 8 cases, involving 16 children of school age and 5 under the age of five, were reported to him by the Rochdale Education Department

Convalescent and Holiday Homes

The Moorland Home and the St. Annes Convalescent Home have again afforded holidays to many Rochdale children. Those going to the Moorland Home, and numbering 161, were examined at the School Clinic beforehand. The

gain in weight was striking in some instances, and especially so in Open Air School pupils all of whom gained more during their fortnight's holiday than during the several preceding weeks. This can be attributed to the clearer air and more regular hours of sleep.

Pearson's Fresh Air Fund again provided a holiday for 75 Rochdale girls at Squires Gate, Blackpool, and five of these were chosen for a Christmas holiday too.

SCHOOL MEALS SERVICE

Report from Miss Elsworth, Organiser

This Service continues to develop and more than 1,100,000 school dinners were provided in 1958. (977,261 in 1957).

A new kitchen was opened with the building of St. Peter's School, in accordance with the Authority's policy of ensuring that wherever possible meals are cooked on school premises. As a result of this policy, the number of meals sent out daily from the Central Kitchen at Brownhill has been substantially reduced and is now less than 750, compared with 1500 last year.

The Authority's training scheme for cook-supervisors is now beginning to show results and most recent new appointments have been members of staff with the City and Guilds qualifications.

There is close co-operation with the Medical Officer of Health to ensure that the highest standards of hygiene are maintained and there were no cases of infection in schools which were caused by school meals. All full-time employees in the School Meals Service have an annual medical examination and two employees required a re-examination later in the year before being passed as fit.

Cost of Medical and Dental Inspection, and Treatment
Year Ending 31st March 1958

							£
Salaries of Medical, Dental and other staff ...	...	...	...	...	...	...	16,369
Local Government Superannuation—							
Equivalent Contribution ...	...	...	...	...	...	...	838
Equal Annual Charge ...	...	...	...	...	...	...	524
Additional Allowance ...	...	...	...	...	...	...	10
National Insurance ...	...	...	...	...	...	...	342
Printing, Stationery and Advertising ...	...	...	...	...	...	...	291
Postages and Telephones ...	...	...	...	...	...	...	247
Drugs, Medical Requisites and Apparatus ...	...	...	...	...	...	...	1,018
Uniforms and Clothing ...	...	...	...	...	...	...	143
Rents, Rates and Insurance ...	...	...	...	...	...	...	431
Travelling and Subsistence ...	...	...	...	...	...	...	238
Upkeep of Buildings—Repair and Maintenance ...	...	...	...	...	...	...	43
Fuel, Light and Cleaning ...	...	...	...	...	...	...	1,446
Medical Examinations						Charge £94	
Less adjustments for previous years—Credit £50						Debit	44
Cleansing of Pupils and Clothing ...	...	...	...	...	...	...	37
Conveyance of Children ...	...	...	...	...	...	...	340
Other Expenses ...	...	...	...	...	...	...	43
							£22,404

MEDICAL INSPECTION AND TREATMENT

YEAR ENDED 31ST DECEMBER, 1958.

TABLE 1.

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

A.—PERIODIC MEDICAL INSPECTIONS.

Age Groups Inspected (By year of birth)	No. of Pupils Inspected	Physical Condition of Pupils Inspected			
		SATISFACTORY		UNSATISFACTORY	
		No.	% of Col. 2	No.	% of Col. 2
(1)	(2)	(3)	(4)	(5)	(6)
1954 and later	352	350	99.43	2	.57
1953	512	510	99.61	2	.39
1952	702	689	98.15	13	1.85
1951	125	123	98.40	2	1.60
1950	607	598	98.52	9	1.48
1949	522	516	98.85	6	1.15
1948	102	101	99.02	1	.98
1947	660	659	99.85	1	.15
1946	686	678	98.83	8	1.17
1945	117	117	100.00	—	—
1944	520	520	100.00	—	—
1943 and earlier	697	694	99.57	3	.43
TOTAL	5602	5555	99.16	47	.84

B.—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 (By year of birth)	For defective vision (excluding squint)	For any of the other conditions recorded in Part II	Total individual pupils
(1)	(2)	(3)	(4)
1954 and later	1	23	23
1953	2	35	35
1952	12	84	87
1951	2	26	26
1950	36	61	85
1949	25	67	78
1948	6	6	12
1947	65	51	113
1946	66	62	121
1945	12	14	22
1944	73	37	103
1943 and earlier	120	60	167
TOTAL	420	526	872

C.—OTHER INSPECTIONS

Number of Special Inspections	...	...	...	...	...	...	100
Number of Re-inspections	...	...	...	...	...	...	2,505
						Total	2,605

D.—INFESTATION WITH VERMIN.

(a) Total number of individual examinations of pupils in schools by the school nurses or other authorised persons	...	...	...	...	35,216
(b) Total number of individual pupils found to be infested	...	...	...	...	803
(c) Number of individual pupils in respect of whom cleansing notices were issued (Section 54 (2), Education Act, 1944)	...	...	...	...	61
(d) Number of individual pupils in respect of whom cleansing orders were issued (Section 54 (3), Education Act, 1944)	...	...	...	...	2

TABLE II

RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION.

A.—PERIODIC INSPECTIONS.

Defect Code No.	Defect or Disease	PERIODIC INSPECTIONS							
		ENTRANTS		LEAVERS		OTHERS		TOTAL	
		(T) (3)	(O) (4)	(T) (5)	(O) (6)	(T) (7)	(O) (8)	(T) (9)	(O) (10)
(1)	(2)								
4	Skin	11	3	4	4	20	37	35	44
5	Eyes—								
	a. Vision ...	17	2	141	69	262	259	420	330
	b. Squint ...	49	41	29	4	118	6	196	51
	c. Other... ..	2	4	1	—	9	20	12	24
6	Ears—								
	a. Hearing ...	4	4	3	—	4	3	11	7
	b. Otitis Media...	3	3	7	1	8	13	18	17
	c. Other... ..	—	—	—	—	2	3	2	3
7	Nose and Throat ...	30	132	7	4	18	111	55	247
8	Speech	11	33	3	1	17	13	31	47
9	Lymphatic Glands ...	2	67	—	1	—	83	2	151
10	Heart	1	32	2	6	7	40	10	78
11	Lungs	4	20	8	1	13	30	25	51
12	Developmental—								
	a. Hernia ...	—	2	2	1	1	4	3	7
	b. Other... ..	1	28	2	3	9	26	12	57
13	Orthopaedic—								
	a. Posture ...	—	5	1	—	3	24	4	29
	b. Feet	5	20	8	9	19	70	32	99
	c. Other... ..	14	44	3	2	32	63	49	109
14	Nervous System—								
	a. Epilepsy ...	1	—	1	—	2	—	4	—
	b. Other... ..	3	3	1	—	1	2	5	5
15	Psychological—								
	a. Development	—	3	1	—	2	10	3	13
	b. Stability ...	—	2	—	1	2	2	2	5
16	Abdomen	4	—	1	—	5	5	10	5
17	Other	1	1	1	1	3	8	5	10

TABLE II—(continued).

B.—SPECIAL INSPECTIONS

De- fect Code No. (1)	Defect or Disease (2)	Special Inspections	
		Requiring Treatment (3)	Requiring Observation (4)
4	Skin	—	—
5	Eyes— a. Vision	—	1
	b. Squint	—	—
	c. Other	—	—
6	Ears— a. Hearing	—	1
	b. Otitis Media	—	—
	c. Other	—	—
7	Nose and Throat	—	2
8	Speech	—	2
9	Lymphatic Glands	—	—
10	Heart	—	1
11	Lungs	—	—
12	Developmental—		
	a. Hernia	—	—
	b. Other	2	2
13	Orthopaedic—		
	a. Posture	—	—
	b. Feet	—	2
	c. Other	—	—
14	Nervous system—		
	a. Epilepsy	—	—
	b. Other	1	2
15	Psychological—		
	a. Development	—	3
	b. Stability	—	2
16	Abdomen	—	—
17	Other	—	—

TABLE III

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

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

External and other, excluding errors of refraction and squint ...	...	99
Errors of refraction (including squint) ...	...	1,070
Total ...	...	1,269
Number of pupils for whom spectacles were prescribed ...	...	424

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

Received operative treatment—

(a) for diseases of the ear ...	...	1
(b) for adenoids and chronic tonsillitis ...	...	103
(c) for other nose and throat conditions ...	...	4
Received other forms of treatment ...	...	250
Total ...	...	358

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

(a) in 1958 ...	...	2
(b) in previous years ...	...	12

GROUP 3.—Orthopaedic and Postural Defects

(a) Pupils treated at clinics or out-patients departments...	...	502
(b) Pupils treated at school for postural defects ...	...	—
Total ...	...	502

GROUP 4.—Diseases of the Skin.

(excluding uncleanliness, for which see Part D of Table I)

Ringworm—

(a) Scalp	...	...	...	...	...	...	...	...	—
(b) Body	...	...	...	...	...	...	...	...	2
Scabies	...	...	...	...	...	...	...	...	26
Impetigo	...	...	...	...	...	...	...	...	35
Other skin diseases	...	...	...	...	...	...	...	...	76
Total									139

GROUP 5.—Child Guidance Treatment

Pupils treated at Child Guidance Clinics	—
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GROUP 6.—Speech Therapy

Pupils treated by speech therapists	115
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GROUP 7.—Other Treatment Given

(a) Pupils with minor ailments	891
(b) Pupils who received convalescent treatment under School Health Service arrangements	—
(c) Pupils who received B.C.G. vaccination	...	...	...	...	...	24
(d) Septic wounds	...	...	...	...	...	119
(e) Plantar Warts	...	...	...	...	...	71
Total						1,105

TABLE IV

Dental Inspection and Treatment.

(1) Number of pupils inspected by the Authority's Dental Officers :—								
(a) At Periodic Inspections	...	...	...	...	...	...	12,895	
(b) As Specials	...	...	...	...	...	...	1,132	
Total (1)	...	...	...	...	...	...	14,027	
(2) Number found to require treatment	...	...	...	...	...	...	8,231	
(3) Number offered treatment	...	...	...	...	...	...	6,623	
(4) Number actually treated	...	...	...	...	...	...	5,296	
Number of attendances made by pupils for treatment, including those recorded at heading 11(h) overleaf	...	...	...	...	...	...	6,800	
(6) Half days devoted to :—								
(a) Periodic (School) Inspection	...	...	...	...	...	...	71	
(b) Treatment	...	...	...	...	...	...	1,027	
Total (6)	...	...	...	...	...	...	1,098	
(7) Fillings :—								
(a) Permanent Teeth	...	...	...	...	...	...	4,514	
(b) Temporary Teeth	...	...	...	...	...	...	358	
Total (7)	...	...	...	...	...	...	4,872	
(8) Number of teeth filled :—								
(a) Permanent Teeth	...	...	...	...	...	...	3,762	
(b) Temporary Teeth	...	...	...	...	...	...	302	
Total (8)	...	...	...	...	...	...	4,064	

(9) Extractions :—

(a) Permanent Teeth ...	...	...	...	...	...	...	698
(b) Temporary Teeth ...	...	...	...	...	...	...	3,148
							<hr/>
			Total (9)	3,846

(10) Administration of general anaesthetics for extraction	558
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(11) Orthodontics :—

(a) Cases commenced during the year	57
(b) Cases carried forward from previous year	25
(c) Cases completed during the year	...	...	...	...	25
(d) Cases discontinued during the year	...	...	...	...	3
(e) Pupils treated with appliances	...	...	...	...	11
(f) Removable appliances fitted	...	...	...	...	6
(g) Fixed appliances fitted	...	...	...	...	5
(h) Total attendances	216

(12) Number of pupils supplied with artificial teeth	7
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(13) Other operations:—

(a) Permanent Teeth	1,545
(b) Temporary Teeth	103
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			Total (13)	1,648

TABLE V.

HANDICAPPED PUPILS REQUIRING EDUCATION AT SPECIAL SCHOOLS OR BOARDING IN BOARDING HOMES

[illegible]

TABLE V.

HANDICAPPED PUPILS RECEIVING EDUCATION AT SPECIAL SCHOOLS OR BOARDING IN BOARDING HOMES

State	Total	Special Schools	Boarding Homes	Total	Special Schools	Boarding Homes	Total	Special Schools	Boarding Homes	Total
Alabama	10	10	—	10	10	—	10	10	—	10
Arkansas	10	10	—	10	10	—	10	10	—	10
California	10	10	—	10	10	—	10	10	—	10
Colorado	10	10	—	10	10	—	10	10	—	10
Connecticut	10	10	—	10	10	—	10	10	—	10
Delaware	10	10	—	10	10	—	10	10	—	10
Florida	10	10	—	10	10	—	10	10	—	10
Georgia	10	10	—	10	10	—	10	10	—	10
Idaho	10	10	—	10	10	—	10	10	—	10
Illinois	10	10	—	10	10	—	10	10	—	10
Indiana	10	10	—	10	10	—	10	10	—	10
Iowa	10	10	—	10	10	—	10	10	—	10
Kansas	10	10	—	10	10	—	10	10	—	10
Kentucky	10	10	—	10	10	—	10	10	—	10
Louisiana	10	10	—	10	10	—	10	10	—	10
Maine	10	10	—	10	10	—	10	10	—	10
Maryland	10	10	—	10	10	—	10	10	—	10
Massachusetts	10	10	—	10	10	—	10	10	—	10
Michigan	10	10	—	10	10	—	10	10	—	10
Minnesota	10	10	—	10	10	—	10	10	—	10
Mississippi	10	10	—	10	10	—	10	10	—	10
Missouri	10	10	—	10	10	—	10	10	—	10
Montana	10	10	—	10	10	—	10	10	—	10
Nebraska	10	10	—	10	10	—	10	10	—	10
Nevada	10	10	—	10	10	—	10	10	—	10
New Hampshire	10	10	—	10	10	—	10	10	—	10
New Jersey	10	10	—	10	10	—	10	10	—	10
New Mexico	10	10	—	10	10	—	10	10	—	10
New York	10	10	—	10	10	—	10	10	—	10
North Carolina	10	10	—	10	10	—	10	10	—	10
North Dakota	10	10	—	10	10	—	10	10	—	10
Ohio	10	10	—	10	10	—	10	10	—	10
Oklahoma	10	10	—	10	10	—	10	10	—	10
Oregon	10	10	—	10	10	—	10	10	—	10
Pennsylvania	10	10	—	10	10	—	10	10	—	10
Rhode Island	10	10	—	10	10	—	10	10	—	10
South Carolina	10	10	—	10	10	—	10	10	—	10
South Dakota	10	10	—	10	10	—	10	10	—	10
Tennessee	10	10	—	10	10	—	10	10	—	10
Texas	10	10	—	10	10	—	10	10	—	10
Vermont	10	10	—	10	10	—	10	10	—	10
Virginia	10	10	—	10	10	—	10	10	—	10
Washington	10	10	—	10	10	—	10	10	—	10
West Virginia	10	10	—	10	10	—	10	10	—	10
Wisconsin	10	10	—	10	10	—	10	10	—	10
Wyoming	10	10	—	10	10	—	10	10	—	10
Total	10	10	—	10	10	—	10	10	—	10

Source: The Bureau of Special Education, U.S. Department of Education.

Notes: Figures are for the year ending June 30, 1944.

Figures in parentheses are for the year ending June 30, 1943.

Figures in brackets are for the year ending June 30, 1942.

Figures in italics are for the year ending June 30, 1941.

Figures in bold type are for the year ending June 30, 1940.

Figures in regular type are for the year ending June 30, 1939.

