# [Report 1950] / Medical Officer of Health and School Medical Officer of Health, Southport County Borough.

#### **Contributors**

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COUNTY BOROUGH



OF SOUTHPORT

INSTITUTE OF SOCIAL

10. PARKS HOAD, OXFORD

# REPORT

UPON THE

# HEALTH AND SANITARY CONDITIONS

OF THE

## COUNTY BOROUGH OF SOUTHPORT

FOR THE YEAR 1950

(including the Forty second Annual Report of the School Medical Officer)



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OF SOUTHPORT

INSTITUTE OF SOGIAL MEDICINE

16. PARKE ROAD, OXFORD

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## THE HEALTH COMMITTEE

The Worshipful the Mayor (Councillor R. F. FLEETWOOD-HESKETH, T.D., J.P., D.L.)

Chairman: Councillor Mrs. E. SMITH

Vice-Chairman: Councillor W. BERWICK

Ald. H. W. BARBER, J.P.

Ald. Dr. H. COATES, J.P.

Ald. Dr. A. W. LIMONT, J.P.

Ald. F. W. REDDAWAY, J.P.

Coun. A. H. ALLEN

Coun. Mrs. J. F. T. Brooks

Coun. G. H. F. GALLIE

Coun. E. P. GUTTERY

Coun. G. W. KENDALL

Coun. W. PAULDEN

Coun. L. F. SPENCE

Coun. F. E. THORNLEY

Coun. G. B. WOOLFENDEN

Dr. P. Y. LYLE, M.C.

## SUB COMMITTEES APPOINTED 26th MAY, 1950

#### Mental Health Services

Chairman Coun. Mrs. J. F. T. Brooks

Vice-Chairman Coun. G. H. GALLIE

Ald. Dr. H. COATES, J.P. Coun. L. F. SPENCE
Ald. Dr. A. W. LIMONT, J.P. Coun. G. B. WOOLFENDEN

Coun. A. H. ALLEN

Dr. P. Y. LYLE, M.C.

#### Accounts

Chairman Coun. E. P. GUTTERY

Vice-Chairman Coun. G. W. KENDALL

Ald. Dr. A. W. LIMONT, J.P. Coun. W. PAULDEN

Ald. F. W. REDDAWAY, J.P. Coun. L. F. SPENCE

Coun. Mrs. J. F. T. Brooks Coun. F. E. THORNLEY

Coun. G. H. Gallie Coun. G. B. Woolfenden

## Joint Health and Education

The Worshipful the Mayor

(Councillor R. F. FLEETWOOD-HESKETH, T.D., J.P., D.L.)

Chairman Ald. F. W. REDDAWAY, J.P.

Vice-Chairman Coun. W. PAULDEN

## Home Nursing Joint Sub-Committee

Chairman Coun. Mrs. J. F. T. Brooks

Vice-Chairman Coun, G. H. GALLIE

Ald. F. W. REDDAWAY, J.P.

## National Assistance Act 1948

(Section 47 Cases)

Chairman

Vice-Chairman Coun. Mrs. J. F. T. Brooks

## STAFF OF THE HEALTH DEPARTMENT ON THE 31st DECEMBER, 1950

## Medical Staff (Full-Time)—

Medical Officer of Health and School Medical Officer

Deputy Medical Officer of Health and Deputy School Medical Officer

Assistant Medical Officer of Health and Assistant School Medical Officer W. E. FitzGerald, M.C., M.B., Ch.B., D.P.H., Barrister-at-Law

G. N. M. Wishart, M.R.C.S., L.R.C.P., D.P.H.

Anna I. Davison, M.B., Ch.B.

## Medical Staff (Part-Time)-

Medical Officer for Mental Health Service

J. N. Matthews, M.R.C.S., L.R.C.P., D.P.H.

## Visiting Medical Staff-

Ante-Natal and Post-Natal Clinic

Eye Clinic

Ear, Nose and Throat Clinic

Skin Clinic

N. E. Laurence, F.R.C.S.

D. Rankine, M.B., Ch.B.

R. V. Tracy-Forster, M.B., Ch.B., D.L.O.

H. Bardsley, M.R.C.S., L.R.C.P.

#### Dental Staff-

Senior Dentist

Dentist

Mechanic

Attendants

J. H. Highton, L.D.S.

W. Martland, L.D.S.

(Vacant)

Miss H. Rimmer and Mrs. M. E. Ball

Sanitary Staff—Chief Sanitary Inspector E. Avison (a)(b)(h)(n)(o); Deputy Chief Sanitary Inspector, G. E. Hadley (a)(b); Meat and Food Inspector, D. Wood (a)(b); Food Hygiene Inspector, T. W. Robertshaw (a)(b); District Inspectors, J. Arrowsmith (a), W. Vickers (a)(b)(h); and S. J. Wilde (a)(b); Infectious Diseases Enquiry Officer, W. Rigby; Rodent Operator, J. S. Amery.

Health Visiting and School Nursing Staff—Superintendent Health Visitor and School Nurse, Miss A. F. Probert (c)(d)(e); Health Visitors/School Nurses, Mrs. D. Brown (c)(d)(e); Mrs. W. Watkinson (c)(d)(e); Misses M. E. Brett (c) (d)(e); J. Holliday (c)(f)(e),; Mrs. F. P. Capel; Misses M. K. Donaghey (c)(d)(e); K. A. R. Taylor (c)(d)(e); C. Airey (c)(f)(e), D. C. Ashton (c)(f)(e), M. A. Turvey (d)(e), M. Turner (e)(k), A. Cowper (c)(d)(e), N. Dentith (c)(d)(e).

Midwifery Staff—Supervisor of Midwives and Inspector of Nursing Homes, Miss M. McAleavy (d)(e); DISTRICT MIDWIVES, Miss S. A. Cryer (d)(e), Mrs. K. B. Harrison (d)(e).

PART-TIME MIDWIVES: -Mrs. E. Shawcroft (d).

Mental Health Staff—Senior Mental Health Visitor and Duly Authorised Officer, J. Sinnot (i); \*Mental Health Visitors and Duly Authorised Officers, Miss A. L. Bennett (j) and K. Bain (j).

Clerical Staff—Administrative Assistant, F. H. Dix, A.C.I.S.; Chief Clerk, W. R. Holgate; Senior Clerks; Miss M. E. Wells and Miss D. Allen, B.Com.; Clerks; R. Rimmer, Misses N. Somech, B. Jones, L. Pearlman, M. Ball, B. Forshaw, M. Roe, B. C. Jones, S. M. Birrell and E. M. Whaite.

## Day Nurseries-

King Street Matron Mrs. A. Williams (e).

Bedford Park Matron Miss A. K. Baxter (e)(d)(l)

## Notes re qualifications

- (a) Sanitary Inspectors Certificate.
- (b) Meat and Food Certificate.
- (c) Health Visitors Certificate.
- (d) State Certified Midwife.
- (e) State Registered Nurse.
- (f) Part I Certificate-Central Midwives Board.
- (g) State Registered Fever Nurse.
- (h) Smoke Inspectors Certificate.
- (i) Relieving Officers Certificate.
- (j) Royal Medico-Psychological Association's Certificate.
- (k) Certificate of British Tuberculosis Association
- (l) State Registered Children's Nurse.
- (m) Member of the Chartered Society of Physiotherapy.
- (n) Sanitary Science Certificate.
- (o) Food Hygiene Certificate.

## Ambulance Services-

Chief Fire Officer and Ambulance Officer-J. Perkins, Grad. I. Fire E.

Public Analyst J. F. Clark, M.Sc., F.R.I.C.

Pathologist L. Wise, B.Sc., M.B., Ch.B.

<sup>\*</sup>Also acts as Senior Welfare Officer.

# ANNUAL REPORT

OF THE

## MEDICAL OFFICER OF HEALTH AND SCHOOL MEDICAL OFFICER

FOR THE YEAR 1950

# TO THE CHAIRMAN AND MEMBERS OF THE HEALTH COMMITTEE

Mr. CHAIRMAN, LADIES AND GENTLEMEN,

I have the honour to present the Annual Report for the year 1950.

The Registrar General's estimate of the population for the middle of 1950 was 85,500 as compared with 85,540 in the previous year. The birth rate for the town of 10.41 per 1000 of the population is low and is now comparable with the rates in the second decade of the interwar period. The infantile mortality rate is also low being 27 per 1000 births and this is the lowest rate recorded so far for the town.

The crude death rate for the town was 16.37 per 1000 of the population as compared with the rate of 15.58 being the average for the previous ten years. The rate corrected for age and sex was 12.44 per 1000 of the population. Just over 42 per cent of the deaths which occurred related to persons aged 75 and over. No maternal deaths occurred during the year as a result of child birth.

The principle causes of death are shown in the Section dealing with Vital Statistics and, as may be expected, these are causes which in the main claim their victims from the older age groups.

One outstanding figure is that the infant deaths due to premature birth which was 16 per 1000 live births in the previous year had fallen to 10 in 1950. This it is hoped may be the result not only of the ante-natal work carried out by the obstetric surgeons, but also the care of premature infants after birth by the paediatrician.

The number of still births during the year was the lowest on record.

The report illustrates the value of the work done by the Health Visitors in the homes and at the Welfare Centres and Clinics.

The work of the Sanitary Section has continued and developed. An account of this work includes information regarding Meat and Food inspection, the results of the sampling of food and drugs and the Food Hygiene work. The courses of instruction on Food Hygiene given to those connected with the various trades and to members of the general public which took place during the winter of 1950-51 were very successful. We are indebted to the St. John Ambulance Association for

their help in organising the classes. The classes are conducted under the aegis of the Association but are supported by grants from the Local Authority and are staffed by members of the Health Department.

The School Health Service continued to work smoothly and efficiently throughout the year. In addition to those children who came within the groups prescribed for examination, all the children in the schools are seen and examined by the nurses responsible for the area in which the school is situated. Any children who appear to need further examination, or concerning whom the teaching staff have some anxiety, are then referred for special examination by the School Medical Officer. In 1950, as many as 1253 special examinations were made. This system must give a sense of security to parents and teachers.

I have pleasure in recording my appreciation of the work done by all the members of the staff of the Health and School Medical Departments and my thanks to the Health and Education Committees for their continued support and consideration.

I am,

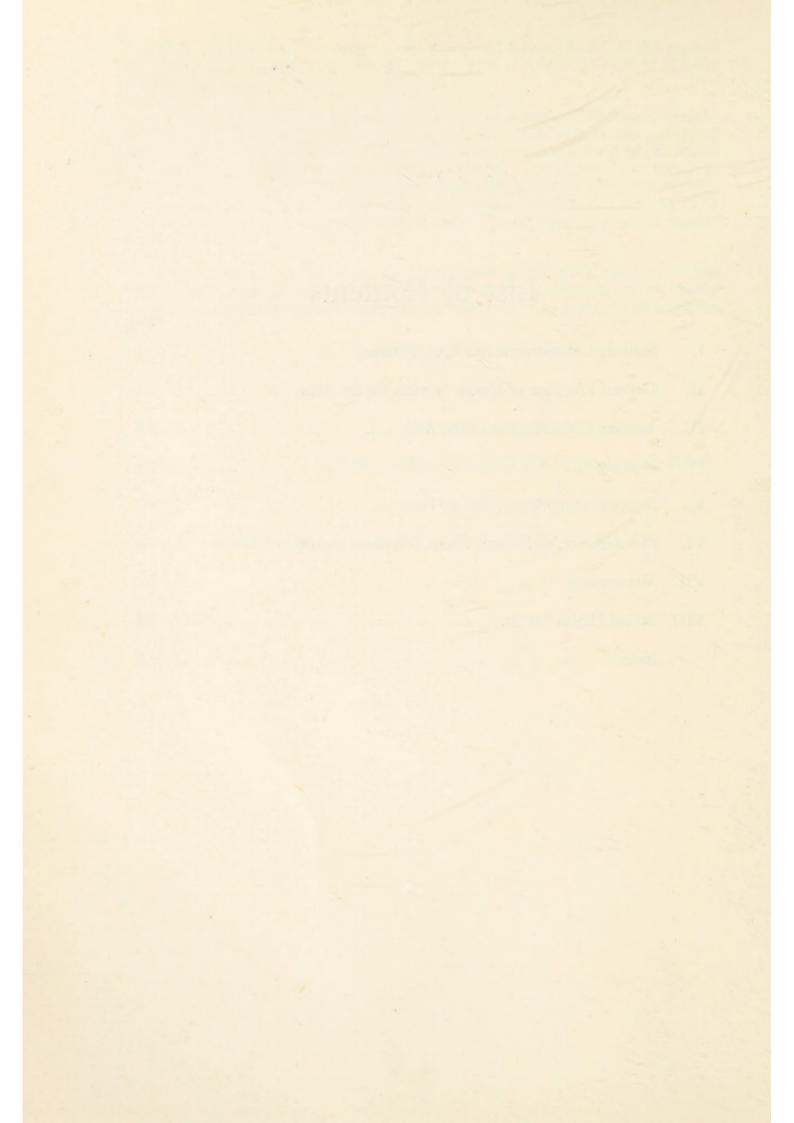
Yours faithfully,

W. E. FitzGerald,

Medical Officer of Health and School Medical Officer.

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## Part 1

# STATISTICAL MEMORANDA

AND

VITAL STATISTICS

## STATISTICAL MEMORANDA

Area of Borough (including Foreshore)	18,333 acres
Area of Borough (excluding Foreshore)	9,426 acres
Population (1931 Census)	78,927
Do. (Estimated by the Registrar-General), middle of 1950	85,500
Density of Population	9.071
Number of inhabited houses, 1st April, 1950	24,626
Number of permanent houses erected and completed during 1950	102
Rateable Value, 1st April, 1950	£965,525
Sum represented by a Penny Rate	£3,829
Number of births registered	890
Legitimate 83	1
Illegitimate 5	9
Net birth rate (per 1,000 of the population)	10.41
Average birth rate, preceding 10 years	12.67
Number of infant deaths (under one year)	24
Infant Mortality Rate (per 1,000 births)	27
Legitimate (per 1,000 legitimate births)	6
Illegitimate (per 1,000 illegitimate births)	4
Average Infantile Mortality Rate, preceding 10 years	40
Number of deaths registered	1,400
Crude death rate (per 1,000 of the population)	16.37
Average crude death rate, preceding 10 years	15.58
Corrected death rate (per 1,000 of the population)	12.44
Number of deaths from tuberculosis (all forms)	20
Tuberculosis death rate (per 1,000 of the population)	0.23
Average tuberculosis death rate (preceding 10 years)	0.43
Number of deaths from Zymotic disease	2
Death rate from Zymotic diseases (per 1,000 of the population)	0.02
Average death rate from Zymotic diseases (preceding 10 years)	0.08
Number of women dying in, or in consequence of, child-birth—	
From Sepsis	None
From other causes	None
Average domestic consumption of water per head, per day	28.73 galls.
Total consumption of water per head, per day	37.26 galls.
Rainfall during 1950	36.51 inches
Hours of sunshine during 1950	1,556

#### VITAL STATISTICS

**Population.**—The Registrar-General's Estimate of the population for the middle of 1950 is 85,500. The comparable figure for the middle of 1949 was 85,540.

**Birth Rate.**—The total number of live births registered in the Borough during 1950 was 890. Of these 472 were males and 418 females. The birth rate for the year was 10.41 per 1,000 of the estimated civilian population. 59 (7%) of the births were illegitimate. The number of still births registered was 17, giving a rate of 0.19 per 1,000 of the civilian population as compared with the rate of 0.26 for England and Wales.

**Death Rate.**—The number of deaths occurring amongst the residents of the town was 1,400. Of these 622 were in respect of males and 778 females. The crude death rate for the year was 16.37 per 1,000 of the civilian population. 42.14% of the deaths registered were in respect of persons aged 75 years and over.

Princip	oal Causes	of Deat	h.—
---------	------------	---------	-----

Heart Disease inc. diseases of the Circulatory System	610
Cancer	216
Cerebral Haemorrhage, etc.	181
Respiratory Diseases	135
Violence, including Suicide	44
Tuberculosis (all forms)	20
Acute and Chronic Nephritis	12
Ulcer of Stomach and duodenum	10

**Deaths from Violence.**—There were 44 deaths from violence and these were classified as follows:—

Road Accidents	6
Falls	15
Suicide	13
Burns	1
Asphyxia	5
Drowning	2
Poisoning (Chloral Hydrate and Potassium Bromide)	1
Perforation of Oesophagus during Operation	1

#### Zymotic Death Rate.—

Diphtheria	Nil	Measles	Nil
Scarlet Fever	Nil	Diarrhoea	Nil
Typhoid	Nil	Whooping Cough	2
Total deaths, 2.	Rate	per 1,000 of the population, (	0.02

## Infantile Mortality Rate.—

Total Deaths	24	Rate per	1,000 births	27
Legitimate	22	do.	legitimate births	26
Illegitimate	2	do.	illegitimate births	34

BIRTH-RATES, AND DEATH-RATES AND ANALYSIS OF MORTALITY IN THE YEAR 1950

England and Wales-126 County Boroughs and Great Towns, and 148 Smaller Towns

(Provisional figures, based on Weekly and Quarterly Returns)

	Rate p civi popu	Rate per 1,000 civilian population			Annual I	Annual Death-rate per 1,000 civilian population	per 1,000	civilian p	population			Rate per 1,000 Live Births	r 1,000 3irths
	Live Births	Still Births	All	Typhoid and Para- typhoid Fevers	Small- pox	Whoop- ing Cough	Diph- theria	Tuber- culosis	Ac. Polio- myel. & Polio- enceph.	In- fluenza	Pneu- monia	Diarrhoea & Enteritis (under 2 years)	Total Deaths under 1 year
England and Wales	. 15.8	0.37	11.6	0.00	1	0.01	0.00	0.36	0.02	0.10	0.46	1.9	29.8‡
126 County Boroughs and Great Towns, including London	. 17.6	0.45	12.3	0.00	1	0.01	0.00	0.42	0.02	60.0	0.49	2.2	33.8
148 Smaller Towns (Estimated Resident Population 25,000 to 50,000 at Census, 1931)	16.7	0.38	11.6	0.00	1	0.01	0.00	0.33	0.02	0.10	0.45	1.6	29.4
London	. 17.8	0.36	11.8	0.00	1	0.01	0.00	0.39	0.01	0.07	0.48	1.0	26.3
Southport	. 10.41	0.19	16.37	ı	1	0.05	1	0.23	1	0.17	0.47	1	27
	A	dash ()	signifies t	A dash () signifies that there were no deaths.	were no d	leaths.	† Per	† Per 1,000 related births.	ted births.				

Puerperal Sepsis 0.09 The maternal mortality rates for England and Wales are as follows per 1,000 Total Births ........

Total 0.86

## VITAL STATISTICS

### For years 1931 to 1950 inclusive

	Donul		BIRTHS		TOTAL I	RED IN	Transf Deat	ERABLE HS **	NET D	EATHS BEL DISTI	ONGING TO	) THE
	Popul- ation esti-		Ne	et	DIST	RICT			Under 1	yr. of age	At all	ages
EAR	mated to Middle of each year	Uncor- rected Number	Number 4	Rate 5	Number x	Rate 7	of Non- residents regist'd in the District	of Residents Not regist'd in the District 9	Number x	Rate per 1,000 Net Births	Number x	Rate
31	77,280	877	824	10.66	1062	13.74	67	185	56	68	1157	14.97
32	78,770	915	886	11.25	1019	12.94	68	150	40	45	1079	13.70
33	78,980	805	769	9.51	1128	14.28	73	157	44	57	1189	15.05
34	79,100	918	860	10.87	998	12.62	61	153	40	46	1070	13.53
35	79,300	872	808	10.19	1104	13.92	63	143	52	64	1161	14.6
36 37	79,280	880	804	10.14	1105	13.94	81	182	41	51	1189	15.00
38	78,960 78,600	914 870	837 802	10.60 10.20	1143 1157	14.48 14.65	63 84	205	56	67	1266	16.0
39	*78,900	010	002	10.20	1157	14.00	04	159	56	70	1215	15.4
) >	*81,840	925	752	9.53	1271	15.53	101	168	41	52	1338	16.3
10	88,550	1147	871	9.84	1385	15.64	115	148	40	43	1418	16.0
11	95,410	1455	949	9.94	1375	15.53	171	211	65	68	1415	14.8
12	90,480	1371	1075	11.90	1213	13.41	108	218	41	38	1323	14.6
13	85,140	1283	1048	12.30	1237	14.53	73	246	49	47	1410	16.6
14	82,860	1484	1168	14.09	1150	13.88	87	241	52	44	1304	15.7
15	81,360	1314	1018	12.51	1121	13.73	62	241	29	28	1300	15.9
16	84,010	1557	1237	14.72	1073	12.77	63	246	40	32	1256	14.9
17	84,240	1569	1325	15.73	1268	15.52	114	218	- 55	42	1372	16.2
18	85,800	1317	1167	13.60	1126	13.12	58	204	41	35	1272	14.8
49 50	85,540 85,500	1155 1020	986 890	11.53 10.41	1269 1339	14.84 15.66	89 90	164 151	38 24	39 27	1344 1400	15.7 16.3

<sup>\* 78,900</sup> for Birth Rate - 81,840 for Death Rate

## \*\* "Transferable Deaths" are deaths of persons who, having a fixed or usual residence in England or Wales die in a district other than that in which they resided.

The following Special Cases arise as to Transferable Deaths :-

- (1) Persons dying in Institutions for the sick or infirm, such as hospitals and nursing homes have been regarded as residents of the district in which they had a fixed or usual residence at the time of admission. If the person dying in an Institution had no fixed residence at the time of admission the death is not transferable.
- (2) The deaths of infants born and dying within the year of birth in an Institution to which the mother was admitted for her confinement have been referred to the district of fixed or usual residence of the parent.
- (3) Deaths from violence have been referred (a) to the district of residence, under the general rule; (b) if this district is unknown, or the deceased had no fixed abode, to the district where the accident occurred, if known: (c) failing this, to the district where the death occurred, if known: and (d) failing this, to the district where the body was found.

	1911	Census 1921	1931
Total population at all ages	69,643	71,900	78,927
Number of inhabited houses	15,676	16,314	20,388
Average number of persons per house	4.44	4.41	3.87
Area of District in acres (land and inland water)	9,426	9,426	9,426

x In Column 6 are included the whole of the deaths registered during the year as having actually occurred within the district, military deaths excepted.

In Column 12 is entered the number in Column 6, corrected by subtraction of the number in Column 8 and by the addition of the number in Column 9. Deaths in Column 10 are similarly corrected by subtraction of the deaths under 1, included in the number given in Column 8, and by addition of the deaths under 1 included in the number given in Column 9.

## DEATHS (Table 1)

## Causes of, and Ages at, Death for year 1950

_										Ac	E DIST	RIBUT	ION	7						
	Causes of Deaths	Totals at all					M	ALES							FE	MALE	s			
	CAUSES OF DEATHS	ages	under 1 yr.	to 5	5 to 15	15 to 25	25 to 45	45 to 65	65 to 75	75 & ovr	Totals	under 1 yr.	to 5	5 to 15	15 to 25	25 to 45	45 to 65	65 to 75	75 & ovr	Totals
1.	Tuberculosis—Respiratory	15	_	1		1	1	2	_	_	5	_	_	_	2	3	5	_	_	10
2.	Tuberculosis-Other	5	_	1	_	1	_	1	_	_	3	_	_	1	_	1	_		_	2
3.	Syphilitic Disease	3	_	_	-	_		1	1	1	3	_	_	_	_	_	_	_	_	_
4.	Diphtheria	-	_	_	_	_	_	_	_	_	_	_	_	-	_	_		_	_	_
5.	Whooping Cough	2	1	_	_	_	_	_	-	-	1	1	_	-	_	_	_	_	_	1
6.	Meningococcal infections	1	_	-	_	_	-	-	_	_	_	1	_		_	-	-	_	-	1
7.	Acute Poliomyelitis	-	-		_	_	_	_	_	_	_	-	_	_	_	_	-	_	_	_
8.	Measles		-	_	_	_	_	_	_	_	_	_	_	_		-		_	_	-
9.	Other infective & parasitic diseases	4	-	1	1	_	_	-	_	_	2	_	_	_	_	_	_	_	2	2
10.	Malignant Neoplasm, Stomach	47	_	_	-	-	_	8	11	4	23	-	_	_	_	_	7	7	10	24
11.	Malignant Neoplasm, lung bronchus	29	_	_	_	_	_	11	10	2	23	_	_	_	_	_	4	1	1	6
12.	Malignant Neoplasm, breast	19	-	-	-	-	-	-	-	-	-	-	-	-	-	2	10	5	2	19
13.	Malignant Neoplasm, uterus	11	-	-	_	-	-	-	-	-	-	-	-	-	-	1	5	1	4	11
14.	Other Malignant and Lymphatic Neoplasms	110	-	_	_	1	4	14	21	15	55	-	_	_	1	3	18	14	19	55
15.	Leukaenia, Aleukaemia	2	-	-	-	-	-	1	1	-	2	-	-	-	-	-	_	-	-	-
16.	Diabetes	10	-	-	-	-	1	1	1	-	3	-	-	-	-		-	5	2	7
17.	Vascular lesions of Nervous System	181	_	_	_	_	3	15	24	23	65	_	_	_	_	2	15	45	54	116
18.	Coronary Disease—Angina	199	-	-	-	-	2	47	41	32	122	-	-	-	-	1	15	22	39	77
19.	Hypertension with Heart Disease	39	-	-	-	-	-	5	10	5	20	-	-	-	-	-	4	9	6	19
20.	Other Heart Disease	335	-	-	-	1	3	9	35	66	114	-	_	-	_	5	14	42	160	221
21.	Other Circulatory Disease	37	-	-	-	-	-	2	6	6	14	-	-	-	-	-	2	8	13	23
22.	Influenza	15	-	-	-		1	1	1	-	3	-	-	-	-	1	3	1	7	12
23.	Pneumonia	40	2	1	-	-	1	4	5	3	16	2	1	-	-	-	2	9	10	24
24.	Bronchitis	66	1	-	-	-	1	7	7	15	31	-	-	-	-	1	6	13	15	35
25.	Other Diseases of Respiratory System	14	-	_	_	_	2	4	2	1	9	_	-	_		_	2	1	2	5
26.	Ulcer of Stomach and Duodenum	10	-	-	-	-	-	3	3	-	6	-	-	-	-	-	1	1	2	4
27.	Gastritis, Enteritis and Diarrhoea	7	-	-	1	-	-	-	1	1	3	-	-	-	-	1	-	1	2	4
28.	Nephritis and Nephrosis	12	-	-	-	-	-	3	-	2	5	-	-	-		-	3	3	1	7
29.	Hyperplasia of Prostate	17	-	-	-	-	-	2	7	8	17	-	-	-	-	-	-	=	-	-
30.	Pregnancy, Childbirth, Abortion	1	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	1
31.	Congenital Malformations	5	1	-	-	-	-	-	-	-	1	1	-	1	1	-	-	-	1	4
32.	Other defined and ill-defined Diseases	120	8	_	-	-	5	8	17	15	53	3	_	_	-	3	17	19	25	67
33.	Motor Vehicle Accidents	6	-	-	-	2	-	1	1	-	4	-	-	1	-	1	-	-	-	2
34.	All Other Accidents	25	1	1	-	1		4	-	4	11	2	-	-	1	1	_	1	9	14
35.	Suicide	13	-	-	-	-	3	3	1	1	8	-	-	-	-	1	3	1	_	5
36.	Homicide and Operations of War	-	_	-	_	_	-	_	-	_	_	-	-	_	-	-	-	-	-	_
	TOTALS—(All causes)	1400	14	5	2	7	27	157	206	204	622	10	1	3	6	27	136	209	386	778

DEATHS (Table 2)

Number of Deaths in Various Age Groups for years 1940 to 1950 inclusive

1.												
75 and over	%	35.47	31.31	33.03	36.03	35.96	40.15	40.94	40.45	35.17	39.50	42.14
75 aı	No.	503	443	437	508	469	522	514	555	447	531	290
65—75	0/0	29.69	27.42	30.23	27.17	30.46	29.47	26.90	26.68	33.15	31.18	29.64
9	No.	421	388	400	383	397	383	338	366	422	419	415
45—65	%	23.27	26.15	24.41	24.68	23.47	20.77	22.78	22.96	23.74	21.50	20.93
45	No.	330	370	323	348	306	270	286	315	302	289	293
15—45	%	7.05	7.70	7.11	7.52	4.60	00.9	5.33	5.17	4.25	4.46	4.78
15-	No.	100	109	94	106	09	78	29	71	54	09	29
5—15	%	0.85	1.20	1.44	0.42	0.54	0.92	0.48	0.29	0.16	0.08	0.37
7	No.	12	17	19	9	7	12	9	4	2	-	5
-5	%	0.85	1.63	89.0	0.70	0.99	0.46	0.39	0.44	0.31	0.45	0.43
1-	No.	12	23	6	10	13	9	5	9	4	9	9
Under 1	%	2.82	4.59	3.10	3.48	3.98	2.23	3.18	4.01	3.22	2.83	1.71
Unc	No.	40	9	. 41	49	52	29	40	55	41	38	24
Total	Deaths	1418	1415	1323	1410	1304	1300	1256	1372	1272	1344	1400
Vear	1 Cal	1940	1941	1942	1943	1944	1945	1946	1947	1948	1949	1950

DEATHS (Table 3)

Rates per 1000 population and per 1000 births-years 1931 to 1950 inclusive

	Rate per 1,000 Popu- lation	0.21	01.0	60'0	0.14	0.11	0.11	0.20	0.14	0.21	0.03	60.0	60.0	60.0	0.07	80.0	90.0	80.0	90.0	0.07	0.02
	Zymotic	16	00	7	11	6	6	16	111	17	3	6	80	8	9	7	20	7	5	9	2
	Rate per 1,000 Popu- lation	0.12	60'0	0.11	0.11	0.05	0.10	0.10	0.11	60.0	0.10	0.07	0.10	0.10	0.07	90.0	0.04	90.0	0.04	90'0	90.0
	Other Forms T.B.	6	7	6	6	4	8	00	6	7	6	7	6	6	9	5	3	5	3	2	5
	Rate per 1,000 Popu- lation	0.52	0.42	0.51	0.48	0.39	0.42	0.42	0.32	0.49	0.27	0.40	0.41	0.50	0.32	0.44	0.37	0.46	0.31	0.30	0.17
200	Pulm'ry Tuber- culosis	40	33	40	38	31	33	33	25	40	24	38	37	43	27	36	31	39	27	26	15
	Rate per 1,000 Births	55	62	115	62	18	89	120	132	7.0	121	115	75	19	29	35	69	64	76	102	34
2	Illegiti- mate	60	5	9	3	1	4	9	7	4	7	7	5	9	7	4	7	5	9	*5	2
	Rate per 1,000 Births	89	42	53	45	89	49	64	65	47	38	54	36	45	42	27	27	40	32	35	26
	Legiti- mate	53	35	38	37	51	37	50	49	37	33	58	36	43	45	25	33	50	35	33	22
1	Rate per 1,000 Births	89	45	57	46	64	51	19	20	52	43	89	38	47	44	28	32	42	35	39	27
	Under One Year	56	40	44	40	52	41	99	99	41	40	99	41	49	52	29	40	55	41	38	24
F - F	Cor- rected for Age and Sex	12.69	11.62	12.76	11.23	12.15	12.45	13.30	12.83	13.56	12.65	11.69	12.11	13.77	13.06	12.63	11.81	12.87	11.71	12.10	12,44
1	Rate perl,000 Popu- lation	14.97	13.70	15.05	13.53	14.64	15.00	16.03	15.46	16.34	16.01	14.80	14.60	16.60	15.74	15.98	14.95	16.29	14.82	15.71	16.37
1	Total	1157	1079	1189	1070	1161	1189	1266	1215	1338	1418	1415	1323	1410	1304	1300	1256	1372	1272	1344	1400
	Female	647	584	672	589	199	632	700	650	732	810	774	739	162	739	739	989	721	200	721	778
-	Malc	510	495	517	481	200	557	999	592	909	809	641	584	619	595	561	570	651	999	623	622
	Popu- lation	79280	78770	78980	79100	79300	79280	78960	78600	81840	88550	95410	90480	85140	82860	81360	84010	84240	85800	85540	85500
	Year	1931	1932	1933	1934	1935	1936	1937	1938	1939	1940	1941	1942	1943	1944	1945	1946	1947	1948	1949	1950

One of these infants was an unknown child found in a garden; this child may or may not have belonged to Southport. Excluding this death the rate per 1,000 births for the remaining 3 deaths would be 61.

DEATHS (Table 4) Infant Mortality — Year 1950

		A	AGE (weeks)				AGE	AGE (months)		Total
CAUSE OF DEATH	Under 1 week	1 to 2	2 0 0 0 0	3 to 4	Total under 4 weeks	1 to	6 to 6	6 9	9 to 12	Number of infant deaths
Accidential Asphyxia	1	1	1	1	1	2	1	1	1	3
Bronchitis	1	1	1	1	ı	1	Ī	1	1	1
Cerebral Abscess	1	1	1	1	1	1	1	1	1	1
Congenital Malformation	1	1	1	1	1	1	1	1	1	2
Congenital Haemolytic Disease	1	1	1	1	1	1	1	1	1	1
Meningoccal Infection	i	1	1	1	1	1	1	1	1	1
Pneumonia	1	1	1	1	1	1	1	1	1	4
Prematurity	5	. 3	1	1	6	1	1	1	1	6
Whooping Cough	1	1	1	1	1	1	7	1	1	2
TOTALS	7	3	1	1	11	2	4	-	3	24

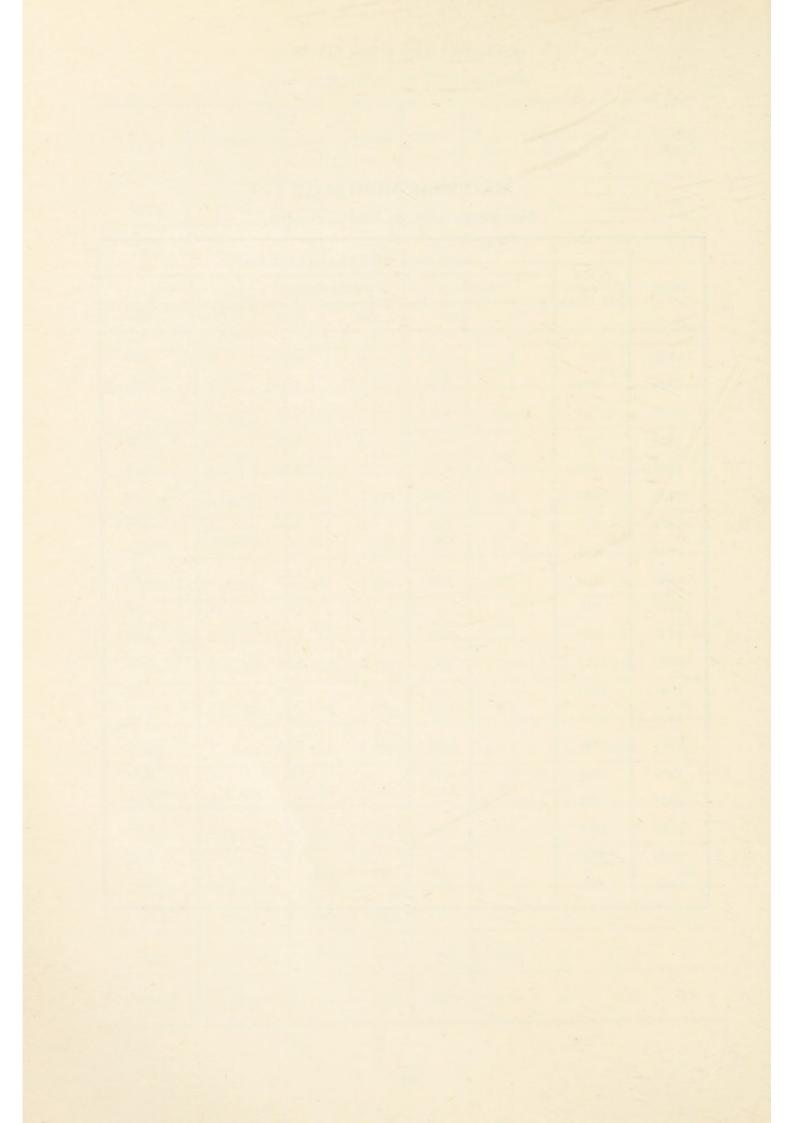
## BIRTHS AND STILLBIRTHS

## For years 1931 to 1950 inclusive

Year	Population	Males	Females	Total	Legiti- mate	Illegiti- mate	Rate per 1,000 Popu- lation	Still Births
1931	77280	403	421	824	769	55	10.66	42
1932	78770	450	436	886	823	63	11.25	63
1933	78980	390	379	769	717	52	9.74	24
1934	79100	477	383	860	822	38	10.87	45
1935	79300	426	382	808	754	54	10.19	41
1936	79280	412	392	804	745	59	10.14	34
1937	78960	388	449	837	787	50	10.60	35
1938	78600	402	400	802	749	53	10.20	41
1939	78900	382	370	752	700	52	9.53	28
1940	88550	448	423	871	820	51	9.84	40
1941	95410	494	455	949	892	57	9.94	40
1942	90480	555	520	1075	1008	67	11.88	37
1943	85140	558	490	1048	958	90	12.30	35
1944	82860	590	578	1168	1065	103	14.09	30
1945	81360	536	482	1018	906	112	12.51	40
1946	84010	628	609	1237	1135	102	14.72	31
1947	84240	692	633	1325	1247	78	15.73	26
1948	85800	582	585	1167	1088	79	13.60	28
1949	85540	532	454	986	937	49	11.53	22
1950	85500	472	418	890	831	59	10.41	17

MATERNAL MORTALITY
For years 1931 to 1950 inclusive

	No. of		RATES PER	1,000 LIVE A	ND STILL B	IRTHS	
Year	Live and Still Births	S	epsis	Other	Causes	To	otal
	Still Births	No.	Rate	No.	Rate	No.	Rate
1931	866	1	1.15	4	4.62	5	5.77
1932	949	1	1.06	6	6.32	7	7.38
1933	793	_	-	3	3.78	3	3.78
1934	905	-	-	3	3.31	3	3.31
1935	849	1	1.18	3	3.53	4	4.71
1936	838	1	1.19	2	2.39	3	3.58
1937	872	2	2.29	2	2.29	4	4.58
1938	843	_	_	_	_	-	_
1939	780	2	2.44	1	1.22	3	3.66
1940	911	_	-	1	1.08	1	1.08
1941	989	1	0.88	2	1.77	3	2.65
1942	1112	1	0.90	2	1.80	3	2.70
1943	1083	_	-	1	0.92	1	0.92
1944	1198	_	_	2	1.67	2	1.67
1945	1058	1	0.95	3	2.83	4	3.78
1946	1268	1	0.79	_	_	1	0.79
1947	1351	_	_	2	1.48	2	1.48
1948	1195	_	-	2	1.67	2	1.67
1949	1008	_	_	2	1.98	2	1.98
1950	907	_		_	_	_	-



## Part II

# GENERAL PROVISION OF HEALTH SERVICES FOR THE AREA

## GENERAL PROVISION OF HEALTH SERVICES

#### FOR THE AREA

Medical Staff.—The whole time medical staff of the Health Department and School Medical Service remained the same as in the previous year. The Medical Officer of the Mental Health Service continued on a half-time basis and the visiting consultants continued to attend the specialist clinics as in the previous year.

The arrangements as regards the specialists' clinics serve to form an effective link with the hospital services which is valuable in ensuring the efficiency and smooth running of the work.

Dr. E. K. Quigley, the Senior Resident Medical Officer at the New Hall Sanatorium continued to be responsible for the district Tuberculosis Service by an arrangement with the Liverpool Regional Hospital Board.

The Deputy Medical Officer of Health continued to act as Clincial Medical Officer to the Infectious Diseases Hospital at New Hall.

This arrangement between the local authority and the Liverpool Regional Hospital Board, is a very happy one, and greatly helps in regard to the admission and discharge of cases of infectious disease.

This is important for with the help of the general practitioners a continuity of supervision and care can be ensured and a greater degree of control effected.

The arrangement also continued whereby the Medical Officer of Health acted as consultant in regard to cases of infectious disease admitted to the New Hall Hospital.

Dr. Christie of Fazackerley Hospital, Liverpool continued to be responsible for cases of infectious disease in the district when a specialist opinion was required by the general practitioners.

Towards the end of the year, the Health Committee gave approval for Dr. Davison, the lady Assistant Medical Officer of Health, to undertake the general medical care of children in all the homes administered by the Children's Committee. At the same time, the local Executive Council and the Central Medical Practices Committee agreed that Dr. Davison's name should be added to the medical practitioners' list to enable her to treat any sick children in these homes. It is obviously desirable that, if possible, one doctor should be responsible for all the medical care and treatment of such children, and in this connection it is believed that the arrangements agreed by the Children's Committee and the Health Committee in regard to Dr. Davison will prove most helpful. A further advantage arising from the appointment of Dr. Davison for this work will be the close liaison which can be maintained between the two departments concerned, particularly in regard to medical matters and the staffing of the Children's Homes.

Medical Examinations.—The following table shows the work done by the medical staff of the department during 1950 in regard to the medical examination of employees for the purpose of the Superannuation, Sickness Pay and Re-Examination Schemes:—

	Nun	MBER OF MEDIC	AL EXAMINATION	ONS
Department	Super- annuation Scheme	Sickness Pay Scheme	Re- Exam- ations	TOTAL
Borough Architect Borough Engineer Borough Treasurer Education Health Libraries Police Publicity Parks and Cemeteries Town Clerk's Transport Water Board Weights and Measures Welfare Services Fire Service Lighting Children's Electricity Gas District Nurses Estates		37 5 21 5 1 11 7 3 4 — 5 1 — 2	11             -	1 54 20 77 12 5 3 14 15 10 7 5 4 - 5 - 10 2 2 2
TOTALS	122	102	24	248

Laboratory Facilities.—The same arrangements as in previous years were continued. Specimens for pathological examination are sent to the laboratory of the Southport Infirmary and samples of food and drugs requiring chemical analysis are sent to the City Analyst of Liverpool, who also acts as the Public Analyst for Southport. The bacteriological examinations of milk, food and water supplies are done by the Liverpool City Bacteriologist by arrangement with the City of Liverpool Authority.

**Private Nursing Homes.**—During the year one new Nursing Home was registered by the Council with accommodation for four maternity cases. At the end of the year there were 15 nursing homes on the Council's register, the total number of beds provided being as follows:—

Maternity Cases	15 beds
Medical, Surgical and General Cases	92 beds
TOTAL	107 hade
TOTAL	107 beds

During the year the Supervisor of Nursing Homes made 64 visits of inspection and all her reports were satisfactory.

Persons in need of care and attention.—Prior to the 5th July, 1948 arrangements for the removal to suitable premises of persons in need of care and attention were made under Section 92 of the Southport Corporation Act 1930. As from

that date, however, such persons have been dealt with in accordance with Section 47 of the National Assistance Act 1948 which provides that the Order of the Court requiring the removal of a person to suitable premises shall only remain in force for a period of three months. On application being made, however, the Court may renew the Order to enable further care and attention to be provided if this is considered necessary.

No new cases were dealt with under this Section during 1950. The Court, however, renewed an order on four occasions in regard to a man, aged 88 years, who had been removed to the County Hospital at Ormskirk in 1949 due to the fact that he was not able to care for himself. The reports received from the Medical Superintendent of the County Hospital during 1950 showed that this man was still in need of care and attention and he was still in hospital at the end of the year.

Riding Establishments Act, 1939.—The purpose of this Act is to prevent the ill-treatment of horses used in riding establishments and Mr. H. R. Hewetson is the registered Veterinary Surgeon appointed by the local authority to carry out the necessary inspections on their behalf.

During the twelve months period to the 30th September 1950, Mr. Hewetson made 43 visits of inspection to thirteen riding establishments and all the reports on the premises were satisfactory. Two riding establishments ceased to operate during the period mentioned, leaving eleven on the register at the end of the year.

### MATERNITY AND CHILD WELFARE

Notification of Births.—During 1950 a total of 1057 births were notified. This figure included 1033 live births and 24 still births, the corresponding figures for 1949 being 1152 live and 26 still births making a total of 1178. The number of births occurring in the Maternity Hospitals in 1950 was 870 as compared with 929 in the previous year.

Ante-Natal Service.—Two ante-natal clinics were held each week throughout 1950 at 44 Hoghton Street for domiciliary cases, one being conducted by Mr. N. E. Laurence, the Obstetrician in charge of the Christiana Hartley Maternity Hospital, and the other by Miss M. McAleavy, the Supervisor of Midwives. In the first instance the mother is seen by Mr. Laurence, and then, in normal circumstances, she makes alternative visits to the Nurses' and Doctors' Clinics at weekly intervals.

In addition to the domiciliary cases, mothers who have booked to have their confinements in the St. Katharine's Maternity Hospital also attend the ante-natal clinic at 44 Hoghton Street.

The attendances made by domiciliary cases at these Ante-Natal Clinics during 1950 were as follows:—

	First Visits	Re-Visits	Total	
Doctors' Clinics	. 37	84	121	
Nurses' Clinics	_	84	84	
Totals	. 37	168	205	

Post-Natal Services.—All mothers who have not made arrangements to be examined by their own doctors are invited to attend the Post-Natal Clinic which is held each week at 44 Hoghton Street. The Clinic is conducted by Mr. N. E.

Laurence, the Obstetric Specialist, and 354 mothers attended during 1950. In addition 315 re-visits were made making a total of 669 visits during the year; 48 attendances were made by Health Visitors at Post-Natal Clinics.

Child Welfare Centres.—There are six Centres in the town and in addition to the normal work, each Centre distributes the dried milk and vitamin foods issued by the Ministry of Food. As in the past the ladies of the Voluntary Infant Welfare Committee provided clerical and other assistance at the Centres during 1950 and their efforts and enthusiasm contributed in no small measure to the steady progress which was maintained throughout the year.

Since the inauguration of the National Health Service, there has been a tendency for Voluntary Societies to cease or limit their interest and help in the various branches of the service.

The efforts of the Infant Welfare Centre Committee, however, shows an appreciation of the need for a continuance and development of voluntary work of this kind. The Medical Officers and Health Visitors working in the Centres have the highest regard for the co-operation of the voluntary workers and the freer outlook and wider scope possible to the Voluntary Society is of great help. This is especially evident in the instructional side of the work. The teaching of parent-craft and the annual display of articles, together with the presentation of prizes to the winning Centres creates wide interest amongst the parents.

The commencement of clubs for the mothers attending the Centres is also a progressive development and gives opportunities not only for Social events, but for the training of mothers in the care of their children.

The following statement shows the attendances made at the Centres during 1950:—

	Hamp- ton Rd.	High Park	Liver- pool Rd.	Cros- sens	Derby Road	Ains- dale	Totals
INFANTS — First Visits Re-visits	126 1997	131 2226	121 2043	71 1337	159 2120	56 1099	664 10822
CHILDREN OVER 1 AND UNDER 5 YEARS— First Visits Re-Visits	988	1077	956	868	841	1 805	1 5535
Total Attendances	3111	3434	3120	2276	3120	1961	17022
No. of Sessions	46	94	46	47	47	46	326
Average No. of Attendances per Session	67.6	36.5	67.8	48.4	66.4	42.6	52.2

During the year the Health Visitors made 690 attendances at the Welfare Centres.

Maternity Dental Clinic.—This Clinic is held at 2 Church Street and there are two sessions each week for expectant and nursing mothers and children under five years of age who are not attending primary schools maintained by the local Education Authority. When dentures are required by expectant and nursing mothers the necessary arrangements are made with private dental mechanics in the town. Patients requiring X-ray examination are referred to the Dentist at the Southport Infirmary.

The following tables show the work done at the Maternity Dental Clinic during 1950:—

## (a) Number of Cases Treated :-

	Examined	Found to be in need of Treatment	Treated	Made Dentally Fit
Expectant and Nursing Mothers	18	18	18	18
Children under 5	241	211	211	211
TOTALS	259	229	229	229

## (b) Forms of dental treatment provided:-

		Anaest	thetics		r and reatment	te It		S		tures ided
	Extractions	Local	General	Fillings	Scalings or Scaling at Gum Tre	Silver Nitrate Treatment	Dressings	Radiographs	Complete	Partial
Expectant and Nurs- ing Mothers	6	6	_	2	9	_	3	-	_	_
Children under 5	58	50	_	59	6	132		-	_	_
TOTALS	64	56		61	15	132	3	_	_	_

Day Nurseries.—There are two Day Nurseries in the town, one being in King Street with accommodation for 60 children and one at Bedford Park with accommodation for 40 children. Since the 5th July, 1948 when the maximum daily charge was reduced from 4/2d. to 1/6d. the demand for day nursery accommodation has increased considerably and it has been necessary to examine the family circumstances of each particular case before arranging for admission. For this purpose preference is given to the following classes of mothers:—

- (a) Mothers who are the sole support of the family, e.g. widows, unmarried mothers, and cases where the husband is not able to work.
- (b) Mothers who are working and whose husbands are unemployed.
- (c) Cases where there is sickness in the home and
- (d) Mothers who are employed in hospitals, laundries, factories, hotels, shops, etc. and there is financial hardship in the family.

Despite this system of priority there is always a waiting list at both nurseries of mothers coming within one of the categories mentioned above.

It will be remembered that in 1949 the Council approved the purchase of a plot of land between Part Street and Talbot Street to be used as a site for a new 60 place Day Nursery to enable the King Street premises to be released to the

Church Trustees. Towards the end of 1950 the District Valuer informed the Council that he had reached an agreement with the owners for the sale of the land and the Ministry of Health subsequently approved the purchase of the site and the erection of the new nursery. It is hoped that the building of this Nursery will be commenced early in the year 1952.

The Nursery Nurses Training Scheme was continued in 1950 and a further ten students were appointed to take the course. During their two years of training the students receive practical and theoretical instruction which qualifies them for more senior appointments in nurseries. The training is also helpful to those students who intend to take up hospital nursing as a career. This scheme is organised by the Education Department and Health Department and the students receive their practical training in the Day Nurseries and the Nursery Schools and Classes. By arrangement with the Lancashire County Council, the theoretical training is done at the Penwortham Centre.

At the end of the year there were twelve trainees employed at the Day Nurseries; six being first year students and six second year students.

The following table shows the attendances at the Day Nurseries during 1950 :-

		King Street	Bedford Park
(1)	Number of places provided	60	40
(2)	Mondays to Fridays—  (a) Attendances  (b) Number of days open  (c) Average daily attendance	13453 253 53.2	8722 253 34.5
(3)	Mondays to Saturdays  (a) Attendances  (b) Number of days open  (c) Average daily attendance	14546 304 47.8	8897 302 29.4

Care of Premature Infants.—The decision as to whether a premature infant can be nursed satisfactorily in its own home lies with the doctor in attendance and if he considers that removal of the infant to one of the Maternity Hospitals is advisable, this step is carried out, the infant being removed in a warmed cot which is available for the purpose. Special cots are also supplied on loan to mothers who are nursing their infants at home.

A close liaison is maintained between the matrons of the lying-in hospitals and Superintendent Health Visitor in respect of premature births and before such an infant is discharged from the maternity hospital, the necessary information is passed on to the Superintendent Health Visitor who, with her staff, accepts responsibility for the care of the child after discharge.

Frequent visits are made by the District Health Visitor until the infant reaches normal weight and after this stage the usual routine visits are made as in other cases.

The following table shows the number of premature infants born during the year:—

PREMATURE INFANTS BORN DURING 1950

(Premature infants are babies whose weight at birth is  $5\frac{1}{2}$  lbs. or less)

	Totals	63	1	4	1	4	54	63	%98
	Totals	59		3	1	3	52	- 59	%88
ITAL	4—5½ lbs.	49		1	1	1	48	49	%86
Ноѕрітаг	3—4 Ibs.	9		1	ì	1	4	9	%99
	Under 3-lbs.	4		1	1	2	1	4	None
	Totals	73		1	1	1	67	2	100%
OME	4—5½ lbs.	2		1	1	1	2	2	100%
NURSING HOME	3—4 Ibs.	1		1	1	1	1	1	1
4	Under 3-lbs.	1		1	1	1	1	1	1
	Totals	2		1	1	1	1	* 2	None
ME	4-5½ lbs.	1		1	1	-	1	1	None
Номе	3—4 Ibs.	1		1	1	1	1	1	1
	Under 3-lbs.	-		1	1	ı	1	1	None
Born at :—	Weight at Birth :	1. No. Notified (After adjustments for transfers)	2. No. in (1) above who	(a) Died within 24 hours	(b) Died 2nd to 7th day	(c) Died 8th to 28th day	(d) Survived 28 days	Totals	3. Percentage who survived 28 days

\*(Note.-The two premature infants born at home were transferred to hospital).

Care of Unmarried Mothers and their Babies.—Unmarried Mothers are usually found, before the birth of the child, either by the Health Visiting or Midwifery Staff or by the mother approaching the Health Department for help and advice. In the first instance the mother is seen by the Obstetric Specialist at the Central Ante-Natal Clinic and, having regard to the circumstances of the particular case, a decision is made as to whether the confinement shall take place in one of the Maternity Hospitals or in the girl's own home. At the same time, arrangements are made for her to attend one or other of the Ante-Natal Clinics at regular intervals.

In addition, the services of the Voluntary Moral Welfare Committee's Social Worker are available to the Department and the Social Worker maintains a close contact with the Superintendent Health Visitor.

A register of illegitimate children in the borough is kept and this is reviewed at regular intervals by the Superintendent Health Visitor, her staff, and the Moral Welfare Worker. In this way the individual circumstances of each child are examined from time to time and the necessary action is taken to improve unsatisfactory conditions where these exist.

During 1950 there were 32 illegitimate births and details of these are shown below:—

below.	Southport	Others	Total
Remained with parent or relative	20	2	22
With foster-mother	2	_	2
Admitted to Children's Home	1	_	1
Adopted	4	2	6
Died	1	_	1
TOTALS	28	4	32

Municipal Midwifery Service.—Throughout the year the staff consisted of the Supervisor of Midwives, who worked half-time on the district, and two full-time midwives. As in the previous year, the services of one of the private midwives in the town were also available for relief work when necessary. All the midwives mentioned above are qualified to administer gas and air analgesia.

The following statement shows the work done by the department's midwives during the year.

	ing the year.	As Midwife	As Maternity Nurse	Total
(1)	Number of cases attended	50	24	74
(2)	Number of cases in (1) above who received gas and air analgesia	32	7	39
(3)	Number of cases in (1) above for summoned during the year (a) Where the medical practitioner	had arrange		
	the mother with maternity med			
	National Health Service Act			33
				33 6
	National Health Service Act			6
	National Health Service Act			6

(4)	Nui	mber of visits made by municipal midwives during the year :-	
	(a)	Ante-Natal	756
	(b)	Nursing	1330
		Total Number of Visits	2086

In addition, the midwives made a total of 143 attendances at the Ante-Natal Clinics which were held at 44 Hoghton Street.

Midwives in Private Practice.—During the year fourteen private midwives notified their intention to practise on the district. Only seven of these, however, were actually engaged in midwifery work and the following statement shows the work done in 1950. Three of the seven midwives mentioned above are qualified to administer gas and air analgesia.

		As Midwife	As Maternity Nurse	Totals
(1)	Number of cases attended	27	37	64
(2)	Number of cases in (1) above who received gas and air analgesia	1	8	9
(3)	Number of cases in (1) above for summoned  (a) Where the medical practitioner the mother with Maternity Med National Health Service Act	had arranged	d to provide	7
	(b) Other Cases			3
		TOTAL	***************************************	10
(4)	Number of visits of inspection made visor to Midwives in their own homes	by non-me	dical Super-	70

Maternity Nursing Homes.—The following table shows the number of maternity cases dealt with by private Nursing Homes during the year:—

		As Midwife	As Maternity Nurse	Total
(1)	Number of Cases	22	40	62
(2)	Number of cases in (1) above who received gas and air analgesia	_	3	3
(3)	Number of cases in (1) above for summoned	whom med	ical aid was	7
(4)	Number of practising midwives emp homes at the 31st December, 1950	loyed in pri	vate nursing	6

(5) Number of midwives in (4) above who are qualified to administer gas and air analgesia

1

Maternity Hospitals.—The two Maternity Hospitals in the town are administered by the Southport and District Hospital Management Committee and the following table shows the number of cases dealt with during 1950:—

		Christiana Hartley Maternity Hospital	St. Katharine's Maternity Hospital	Total
(1)	Number of cases attended (a) As Midwife (b) As Maternity Nurse	389 119	307 80	696 199
	TOTALS	508	387	895
(2)	Number of cases in (1) above who received gas and air analgesia  (a) As Midwife  (b) As Maternity Nurse	345 79	202 40	547 119
	TOTALS	424	242	666
3)	Number of cases in (1) above for whom medical aid was summoned	134	52	186
4)	Number of practising Mid- wives on the staff at end of year	6	5	11
(5)	Number of Midwives in (4) above who are qualified to administer gas and air analgesia	5	4	9

**Distribution of Maternity Cases.**—The following table shows the percentage of maternity cases dealt with during 1950 by the various services and similar figures are also shown for the previous year:—

Service	1950		1949	
	No. of Cases	%	No. of Cases	%
Municipal Midwives	74	6.7	77	6.5
Private Midwives	64	5.8	62	5.5
Nursing Homes	62	5.6	104	8.8
Christiana Hartley Maternity Hospital	508	46.1	541	46.4
St. Katharine's Maternity Hospital	387	35.1	381	32.5
Others	8	0.7	4	0.3
TOTALS	1103	100.0	1169	100.0

SUMMARY OF MIDWIFERY STATISTICS FOR YEAR 1950

		No. of Cases		No. of	No. of Cases in Column (3)	mn (3)	No. of Cases in Column (3)
	As Midwife	As Maternity Nurse	Total	As	As	Total	for whom medical aid was
	(1)	(2)	(3)	(4)	Nurse (5)	(9)	(7)
DISTRICT CASES—							
Municipal Midwives	50	24	74	32	7	39	39
Private Midwives	27	37	64	1	80	6	10
TOTALS	77	61	138	33	15	48	49
INSTITUTIONAL CASES—							
Christiana Hartley Maternity Hospital	389	119	508	345	79	424	134
St. Katharine's Maternity Hospital	307	80	387	202	40	242	52
Nursing Homes	22	40	62	1	3	(1)	7
TOTALS	718	239	957	547	122	699	193
GRAND TOTALS	795	300	1095	580	137	717	242
	-	The residence of the last of t	-	THE RESIDENCE AND PARTY OF THE	-	Control of the Party and the Party of the Pa	-

#### HEALTH VISITING

The Health Visiting Service provides general care for nursing and expectant mothers and young children and in addition, is available for the purpose of giving advice to persons of all ages in the town who are suffering from illness. The Health Visitors also assist families by providing them with information concerning the other health services which are available.

The following table shows the work done by the Health Visitors during 1950 :-

	First Visits	Re-Visits	Total Visits
EXPECTANT MOTHERS	771	427	1198
CHILDREN UNDER 1 YEAR—		Marate Sas	
Routine	973	6255	7228
Prematurity	28	_	28
Stillbirth	17		17
Immunisation	_	63	63
Illness	-	38	38
Miscellaneous	_	21	21
	1018	6377	7395
CHILDREN 1 TO 5 YEARS—			
Routine	_	9962	9962
Infectious Disease	'/-	13	13
Other Illness	_	35	35
Miscellaneous	_	164	164
		10174	10174
OTHER CASES—			
Infectious Disease	_	7	7
Old People	181	554	735
Miscellaneous	31	_	31
	212	561	773
	Summary		
EXPECTANT MOTHERS	771	427	1198
CHILDREN UNDER 1 YEAR	1018	6377	7395
CHILDREN AGED 1 TO 5 YEARS	_	10174	10174
OTHER CASES	212	561	773
TOTALS	2001	17539	19540

In addition the Health Visitors made 690 attendances at Welfare Centres and 48 attendances at the Post-Natal Clinics during the year.

The work done by the Health Visiting Service in regard to tuberculous patients is shown in the section of this Report dealing with Infectious and Other Diseases.

#### HOME NURSING

The Southport and Birkdale District Nursing Society continued to provide the Home Nursing Service on behalf of the Local Health Authority under the arrangements which were agreed when the National Health Service came into operation in July, 1948. This service is noteworthy for the friendly spirit of co-operation which exists between the Voluntary Society and the local Health Authority and there is no doubt that the District Nurses are making a very valuable contribution to the town's Health Services. The Joint Home Nursing Sub-Committee comprising members of the Voluntary Society and the Local Health Authority met on a number of occasions during the year to discuss various matters concerning the administration of the Service and these meetingsproved very helpful.

The table shows the work done by the service in 1950:-

			Classi	fication	of Case	es		Tomir
	A	В	С	D	Е	F	G	TOTAL
No. of Cases on Register at beginning of year No. of cases added during year	149 1239	40 273	4 9	1 35	<del>-</del> 60	3 128		197 1758
No of Complete State of Land	1388	313	13	36	60	131	14	1955
No. of Cases discontinued dur- ing year	1200	284	8	32	56	126	14	1720
No. of Cases on Register at end of year	188	29	5	4	4	5	_	235
No. of Visits made during year:- (a) By District Nurses (b) By Corporation Midwives	31562	7219	499	262	340	809	113	40804 86
Total No. of Visits	31648	7219	499	262	340	809	113	40890

#### CLASSIFICATION OF CASES

A	Medical—Adults	E	Schoolchildren
В	Surgical—Adults	F	Children under 5 years of age

C Tuberculosis Cases G Complications of pregnancy

D Notifiable Diseases

#### STAFF

AFF		Total
Full Time	Part Time	Equivalent to Full Time
11	3	131
4	1	41/2
15	4	18
4	-	4
11	4	14
	11 4 15 4	Full Time Part Time  11

#### DIPHTHERIA IMMUNISATION

The diphtheria immunisation scheme continued as in previous years and, in addition to the work done by general practitioners, regular immunisation sessions were held at the Health Department and also at the Welfare Centres.

The following table shows the number of children who received a full course of primary immunisation or a re-inforcing injection during the year:—

	Primary Immunisations	Re-Inforcing Injections
(a) CHILDREN AGED—	545	
(1) 0 to 4 years (2) 5 to 14 years	767	13
(2) 5 to 14 years	63	515
TOTALS	830	528
b) Done By—		
(1) General Practitioners	331	288
(2) Health Department's Staff	499	240
TOTALS	830	528

The percentage of children immunised at the end of 1950 is shewn below together with similar figures for the previous year:—

		1950			1949	
	P	ge Group	os	- A	ge Group	s
	0-4	5—14	Total 0—14	0—4	5—14	Total 0—14
Total No. of children who had com- pleted full course of primary immun- isation at any time up to the 31st December	3327	8685	12012	3267	8814	12081
Estimated child population (Mid-Year)	5137	9601	14738	5117	9623	14740
Percentage of children immunised	64.76	90.46	81.50	63.84	91.60	81.90

#### SMALL POX VACCINATION

The smallpox vaccination scheme was continued by the general practitioners as in the previous year on the same lines as for the diphtheria immunisation scheme.

The following table shows the number of persons vaccinated and re-vaccinated in 1950:—

		19	50			19	149	
	1/6	Age C	Groups			Age (	Groups	
Number of persons:	0—4	5—14	Over 14	Total	0—4	5—14	Over 14	Total
(a) Vaccinated	229	28	47	304	154	11	35	200
(b) Re-vaccinated	8	25	183	216	2	9	97	108

#### AMBULANCE SERVICE

The Service continued to be organised in conjunction with the Fire Service, as in the previous year. The Ambulance Depot is situated at the Fire Station in Manchester Road and the arrangements for the administration of the two services have proved to be most satisfactory.

Although the work of the Ambulance Service increased considerably during 1950 the work was at all times carried out in a prompt and efficient manner and reflects credit on all those engaged in the service.

During the year the Fire and Ambulance Committee considered the possibility of installing radio apparatus in two of the ambulances and it was hoped that this matter would be dealt with early in 1951. It is believed that this arrangement would enable a more efficient and economical service to be provided and would obviate the necessity of ambulances having to return to the station on the completion of each journey.

Throughout the year the number of vehicles available for the service was five ambulances and one sitting-case car.

The following statement shows the work done by the Service in 1950 and similar figures are also given for the previous year.

		19	50	19	949
		No. of Cases	Mileage	No. of Cases	Mileage
(1)	Removal of Cases—				
	Accident	836	4162	679	3319
	Maternity	256	1704	253	1595
	Sickness	12570	76194	8840	65926
	Infectious Disease	188	3129	243	4217
	Mutual Assistance to other				
	Local Authorities	57	1625	161	1580
	Inter-Hospital Removals	497	6532	267	4331
	T 111 60 .	14404	00046	10110	00000
	Total No. of Cases removed	14404	93346	10443	80968
(2)	OTHER WORK—				
(2)		99	453	68	406
	Removal of bodies to Mortuary	409	1221	237	704
	Ambulance not required	100	796	70	524
	Wiscenaneous	100	190	70	324
	TOTALS	608	2470	375	1634
HMM	ARY—				
(1)	Removal of Cases	14404	93346	10443	80968
(2)	Other Work	608	2470	375	1634
(-)			2110	3.3	
	*	15012	95816	10818	82602
ANAT	YSIS—				
	Inside Borough	14121	53848	9953	41782
	Outside Borough	891	41968	865	40820
			11700	003	10020
		15012	95816	10818	82602

#### PREVENTION OF ILLNESS—CARE AND AFTER-CARE

General.—The general work done in regard to prevention of illness, care and after-care, is shown in the sections of this report dealing with the Health Visiting, Mental Health and Tuberculosis Services.

**Sick-Room Equipment.**—As in the previous year, this Service continued to be dealt with by the Southport and Birkdale District Nursing Society. This method of organisation has proved both efficient and economical as the majority of cases requiring sickroom equipment are already being visited by the District Nurses and the articles required can be supplied at the same time. A small charge is made for the hire of the equipment, but in cases of hardship the fee may be reduced or cancelled.

During 1950 sick-room equipment was supplied to 230 patients as compared with 164 in the previous year.

**Diphtheria Immunisation.**—The publicity scheme in regard to diphtheria immunisation was continued throughout 1950 as in previous years. The arrangements are as follows:—

- (a) Leaflets and Posters are distributed to Welfare Centres and School Clinics.
- (b) When a baby has attained the age of 8 months a letter is sent to the mother strongly advising her to arrange for the immunisation of her child. In addition, the Health Visitors are required to visit all mothers whose babies have not been immunised and make every effort to ensure that the infant is protected against the disease.
- (c) In regard to children who have already been immunised, further letters are sent to the parents at the appropriate times stressing the importance of "re-inforcing" injections being given to maintain the state of immunity throughout the years the child is attending school.
- (d) Particulars of schoolchildren who have not been immunised are also obtained from the Head Teachers and these cases are followed-up by the staff of the department.

Welfare Centres.—Posters, leaflets and other publicity material relating to general health and hygiene measures were supplied to all the Welfare Centres during the year. As an experiment, the ladies of the Voluntary Infant Welfare Committee commenced a "Mothers Club" at the Hampton Road Welfare Centre in January and regular weekly evening sessions were held during the winter months. Towards the end of the year a similar Club was also commenced in Ainsdale for the benefit of mothers living in that area. In addition to social activities, various classes have been organised dealing with subjects which are of special interest to mothers who have young children in their families, e.g. cookery, sewing and dressmaking, etc. Instructional film shows have also been arranged and talks have been given by members of the department's Health Visiting Staff. There is no doubt that Clubs of this kind form a very useful link with the normal work which is done at the Welfare Centres and it is to be hoped that the scheme may be extended to other parts of the town in the future.

Co-operation with Hospitals.—During the year the Almoners of the local Hospital Service referred a number of cases to the department where the services of a district nurse or home help seemed to be indicated. All these cases were visited and the necessary help was provided.

As mentioned elsewhere in this report, the Tuberculosis Visitor continued to attend the Tuberculosis Treatment Clinics which are held at the Southport Infirmary, thereby maintaining an effective liaison between the hospital and district work in regard to the service.

This method of co-operation is of the greatest value, both to the hospital and district service, and for this reason it is hoped that it will be possible to extend this scheme by making arrangements for one of the Health Visiting staff to attend the Geriatric Out-Patient Clinic which is to be commenced at the Promenade Hospital early in the year.

**Sick Room Helpers' Scheme.**—The object of this new service is to provide assistance to households where one of the family is ill and the responsibility of caring for the patient is causing anxiety and distress to the other member of the home. In particular, this service is intended to give help in the following circumstances:—

- (a) Where a patient is living alone and there is no help, or where nursing care is only available at odd times, e.g. from neighbours.
- (b) Where the responsibility for the nursing of the patient falls entirely on one other member of the household.

In such cases the patient may be seriously ill, and yet for one reason or another early admission to hospital may not be possible. The nursing of the patient may then be a considerable strain on the other member or members of the household, and any relief which can be given, even if only of a temporary nature, may be of considerable help.

The Sick Room Helper takes her instructions from the doctor or district nurse attending the case, and she carries out the normal nursing care which ordinarily would be done by relatives or friends if they were available.

The full cost for the service is 1/9d. per hour, but this fee may be reduced or cancelled in cases of financial hardship.

The service was commenced in April, and although only a small amount of work was done in 1950, it is hoped that it will be possible to develop the scheme more satisfactorily during the coming year.

The following table shows the number of cases assisted during the nine months from April to December.

Number of cases at commencement of period	_
Add—Number of new cases	18
	18
Deduct—Number of cases discontinued	15
Number of cases at end of period	3
	-
Number of Applications received	*21
Number of cases assisted	18
(*In three cases the request for help was withdrawn by the applic	ants.)
Number of hours worked by Helps	1395

Number at commencement of period	Staff (all Part-time)
Add—Number engaged during period	6
	6
Deduct—Number leaving	3
Number of Staff at end of period	3
Number of Visits to Homes by Organiser	50
Number of Persons interviewed at Office	69

#### HOME HELP SERVICE

The Services of a Home Help can be provided in the following circumstances:—

- (a) When a person is ill.
- (b) For expectant and nursing mothers.
- (c) For elderly persons who are infirm or ill.
- (d) To households where there is a mental defective in the family and
- (e) In any case when it is considered that the services of the Home Help would relieve anxiety and distress.

The maximum charge for the service is 2/6d. per hour, but on application being made this fee may be reduced or cancelled in cases of financial hardship. All the helps so far enrolled have been part-time; the amount of time each can devote to the work has varied according to their domestic circumstances, as many of them are married women with families.

The following statement shows the work done by the Service during 1950:-

	Classif	ication of	Cases	Totale
	A	В	С	Totals
Number of cases on register at beginning of year Number of new cases during year	14 28	33 58	23 93	70 179
Number of cases discontinued during year	42 39	91 75	116 66	249 180
Number of cases on register at end of year	3	16	50	69
Number of applications received	27 24	64 58	105 98	196 180
Number of cases not assisted	3	6	7	16*
Number of hours worked by helps	1539	6379	9904	17822

<sup>\*</sup>In 16 cases the request for help was withdrawn by the applicants.

#### Classification of Cases

A.—Maternity

B.—Sickness.

C.—Old Age.

#### Staff (All Part-Time)

Number of helps employed at beginning of year	17
Number appointed during year	20
	37
Number leaving during year	17
Number of helps employed at end of year	20
Number of visits to homes by Organiser	636
Number of persons interviewed at Office	1318

#### MENTAL HEALTH SERVICE

The work of this department continued steadily throughout the year. In the main the work done comprises that of ascertainment, certification and the domiciliary care of mental defectives, and the procedures connected with the ascertainment and admission to hospital of patients who are mentally ill. The aftercare of patients discharged from hospital and arrangements designed towards the prevention of mental illness are also duties which belong to this service.

In June, the staff was increased by the appointment of a teacher of handicraft who visits the mentally defective persons in their own homes. For one session each week a group of the children attend at 44 Hoghton Street where they receive instructions in handicrafts. This work has been a great help to the parents and relatives who know that for a short time each week the child is cared for, instructed and interested in the various kinds of work.

The training varies according to the age and ability of the patients. Some have simple exercises in sense training. Others are occupied in more advanced work such as embroidery, rug-making, reading and writing.

A summary of this work is given later in this section of the report.

During the year the Education Committee referred six cases under Section 57(3) of the Education Act 1944. These children are referred to the Mental Health Department owing to the fact that they have been found to be suffering from a disability of mind which renders them incapable of receiving education in the ordinary schools.

Similarly three children were referred to the Mental Health Service under the terms of Section 57, para. 5 of the Education Act 1944 intimating that for the purposes of the Mental Deficiency Act 1913, they were suffering from a disability of mind which might warrant the need for supervision after leaving school.

In Southport on 31st December, 1950, the cases of Mental Deficiency being dealt with were as follows:—

40 under supervision at home;

4 under guardianship;

88 in institutions.

Six cases, of which three were in "a place of safety," were awaiting admission to Institutions.

It is realised that there is a lack of accommodation in suitable institutions for these cases. This applies not only to this area but all over the country, and is due not only to insufficient beds, but also to lack of staff.

The responsibility to provide this accommodation lies at present with the Regional Hospital Boards and the appropriate department of the Ministry of Health.

Mental Deficiency.—Table Showing number of Southport patients in Mental Deficiency Institutions as at the 31st December, 1950:—

	Male	Female	Total
Calderstones	17	15	32
Brockhall	12	12	24
Royal Albert	4	1	5
Liseaux Hall	6	_	6
Greaves Hall	5	-	5
Moss Side (State)	1	1	2
Swinton Home	1	_	1
Ashton House	_	1	1
Gillibrand Hall	-	1	1
Newchurch Homes	_	6	6
Whitecross Homes	2	1	3
St. Lawrence's Hospital	1	_	1
The Ellen Terry Home	1	-	1
	50	38	88
_	-		

#### Home Teacher for Mental Defectives

#### Summary of work for period 12th June to 31st December, 1950

Number of cases on register at beginning of period	10
Number of new cases added	9
	19
Number of cases taken off register	1
Number of cases on register at end of period	18

#### Details of Training

#### (1). At Homes of Mental Defectives :-

- (a) Number of visits made to mental defectives in their own homes 579
- (b) Kinds of training provided:— Physical work, speech, sense and number training, money and time values, eurhythmics, painting, modelling, basketry, music, embroidery, knitting and sewing.

#### (a) Number of sessions held during period 6th October to 31st (b) Total number of attendances made by mental defectives during the period 42 (c) Number of defectives attending Centre at end of the period.... 4 (d) Kinds of training provided :-Physical and rhythmic training, handwork, sense training, singing and games. Mental Illness Lunacy Act 1890 and Mental Treatment Act, 1930 (a) Admissions— No. Ormskirk Mental Hospital (Sec. 20 Lunacy Act 1890) 81 Ormskirk Mental Hospital (Sec. 21(1) Lunacy Act 1890) ..... 6 Rainhill Mental Hospital (Sec. 16 Lunacy Act 1890) ..... 2 Rainhill Mental Hospital (Sec. 1 Mental Treatment Act 1930) ......... 11 2 Winwick Mental Hospital (Sec. 20 Lunacy Act 1890) ..... 1 Winwick Mental Hospital (Sec. 21(1) Lunacy Act 1890) ..... 7 Winwick Mental Hospital (Sec. 16 Lunacy Act 1890) Winwick Mental Hospital (Sec. 1 Mental Treatment Act 1930) ..... 3 3 Whiston Mental Hospital (Sec. 20 Lunacy Act 1890) Upton Mental Hospital (Sec. 20 Lunacy Act 1890) 1 Whittingham Mental Hospital (Sec. 16 Lunacy Act 1890) 1 1 Sefton Park General Hospital (Sec. 21(1) Lunacy Act 1890) 1 Cheadle Royal Hospital (Sec. 16 Lunacy Act 1890) 1 Cheadle Royal Hospital (Sec. 4-5-8 Lunacy Act 1890) TOTAL ..... 121 (b) Admissions to Mental Hospitals from observation wards at the County Hospital, Ormskirk:-Section 16—Lunacy Act, 1890 5 Sections 4, 5 and 8—Lunacy Act, 1890. 1 TOTAL ..... 6 (c) Certifications for continued detention at Ormskirk Mental Hospital:-Section 16—Lunacy Act 1890 5

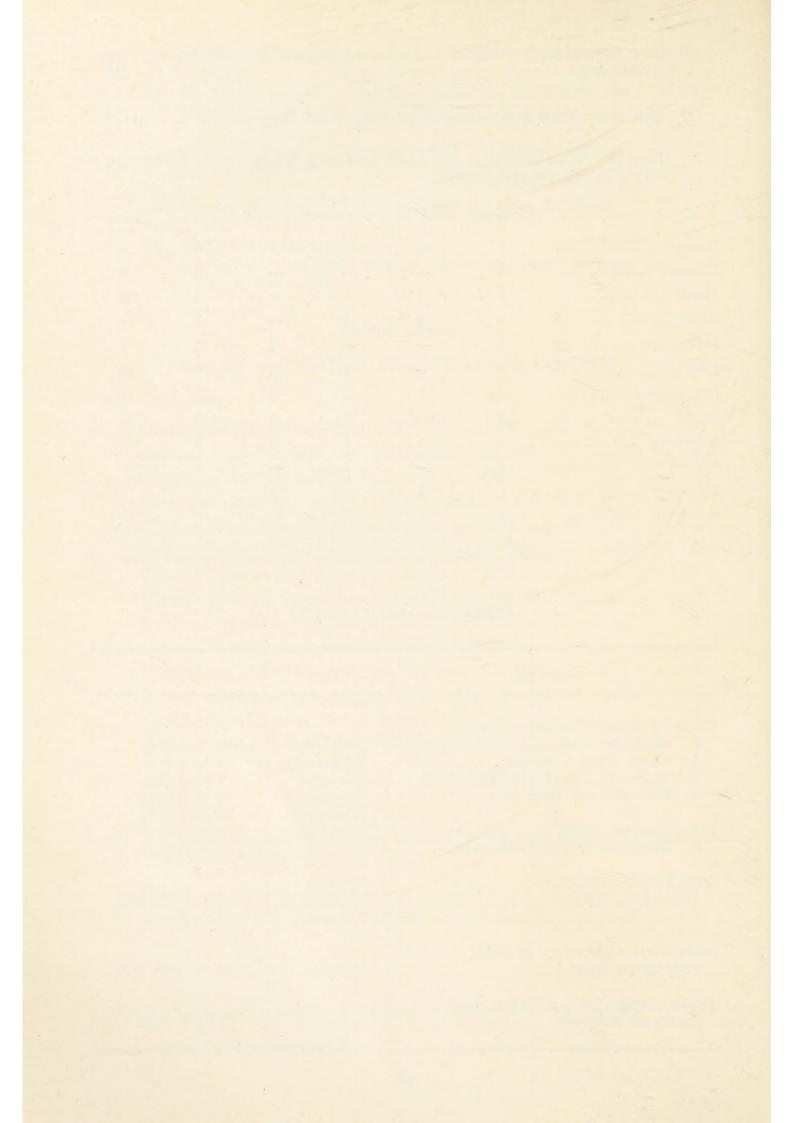
(2). At the Centre:-

- (f) Total of notified discharges and deaths in mental hospitals from 1st January 1950 to 31st December 1950.:—

	Discharged	Departed	Relieved	Recovered	Died	Total
January	6	_	_	1	2	9
February	4	-	_	_	2	6
March	1	1	1	-	5	8
April	6	1	1	_	3	11
May	5	-	_	1	1	7
June	5	_	5	2	4	16
July	3	1	2	2	3	11
August	4	_	1	2	5	12
September	1	1	1	1	5	9
October	4	_	2	_	5	11
November	1	1	2	1	1	6
December	4	2	3	_	1	10
	44	7	18	10	37	116

#### CENTRES AND CLINICS

Address	DAY	Тіме
CHILD WELFARE CENTRES—		
1. Methodist Church, Ainsdale		2 to 4 p.m.
North Road, Crossens     Methodist School, Liverpool Road		2 to 4 p.m. 2 to 4 p.m.
4. Poulton Road, High Park		2 to 4 p.m.
Do. do.	TWT 1 1	2 to 4 p.m.
5. Hampton Road		2 to 4 p.m.
6. Methodist School, Derby Road		2 to 4 p.m.
Ante-Natal Clinics :—		
44 Hoghton Street	Wednesdays	9-30 to 10-30 a.m.
Do	Thursdays	2 to 4 p.m.
POST-NATAL CLINICS :—		
44 Hoghton Street	Mondays	2-30 to 3-45 p.m.
TUBERCULOSIS CONTACT CLINIC:— Southport Infirmary	Mondays	2 to 5 p.m.



# Part III SANITARY CIRCUMSTANCES OF THE AREA

#### SANITARY CIRCUMSTANCES OF THE AREA

Water.—The water supply is maintained by the Southport and District Water Board, which is a combination of the local authorities of the County Borough of Southport, the Urban District of Formby, and the West Lancashire Rural District. The Board supplies water within the area of these three authorities and also in part of the Ormskirk Urban District.

There are five pumping stations owned by the Water Board, and these are situated six to ten miles south-east of the town. The water from Scarth Hill does not come into Southport.

The wells and boreholes are all over 200 feet deep. Owing to the depth of the wells and the nature of the strata the possibilities of contamination are remote. The water has no plumbo-solvent action, and although somewhat hard is exceptionally pure, both chemically and bacteriologically. The water from the Blundell House pumping station (opened in July, 1934) shows a marked difference from the others, being a much softer supply.

During 1949 a new deep borehole at Scarisbrick was completed. Samples of water taken during the Yield Test showed a notably high standard of bacteriological purity for a water from a newly completed borehole.

Samples of the water are taken regularly.

#### Chemical Analysis, 23rd February, 1950

The water is hard with a temporary hardness of 255 parts per million and a permanent hardness of 102 parts. It therefore has a total hardness of 357 parts per million.

	Parts per Million
Total solid matter in solution	456
Oxygen required in 15 minutes to oxidise in 4 hours	0.10
to oxidise \int in 4 hours	0.27
Ammoniacal Nitrogen as N.	None
Albumoid Nitrogen as N.	None
Nitrous Nitrogen as N.	None
Nitric Nitrogen as N. Minu	te trace
Combined Chlorine	28.3

## Bacteriological Examination, 27th February, 1950

Number of Bacteria on agar at 37°C, for 48 hours	=	0 per 1 c.c.
Number of Bacteria on agar at 22°C. for 48 hours	=	0 per 1 c.c.
B. Coli in water examined	=	0 per 100 c.c.
Total coliform organisms in water examined	=	0 per 100 c.c.
Class 1 : Highly satisfactory		

Class 1: Highly satisfactory.

Thanks are due to Mr. N. B. Bennett, AM.Inst.C.E., M.Inst.W.E., the Water Board Manager, for providing the following statement of analyses made of the water obtained from the various pumping stations.

# Analyses of Samples of Water taken from the Pumping Stations 15th November, 1950

	Halsall Lane P.S.	Springfield P.S. (Filtered)	Bickerstaffe P.S. (Filtered)	Blundell House P.S (Filtered)	
The state of the s	Chemi	cal Results i	n parts per n	nillion	
Appearance  Colour Odour Reaction pH Free Carbon Dioxide Electric Conductivity at 20°C. Total Solids dried at 180°C. Chlorine in Chlorides Nitrogen in Nitrates Nitrites  Metals  Free Ammonia Albuminoid Ammonia Oxygen absorbed in 4 hours at 27°C. Hardness: Permanent Temporary	Clear and Bright Nil Nil 7.0 26 485 325 22 1.2 Absent Manganese 0.03 0.000 0.000 0.000 60 185	Clear and Bright Nil Nil 7.3 19 650 435 32 0.0 Absent Iron less than 0.03 0.000 0.000 0.000 80 260	Clear and Bright Nil Nil 7.2 28 770 515 18 0.0 Absent Absent 0.064 0.000 0.50 125 310	Clear and Bright Nil Nil 6.9 24 360 240 23 0.0 Absent Iron 0.04 Manganese 0.03 0.000 0.000 0.35 45 130	
Total(Total Hardness : Degrees Clarks Scale)	245 17.2	340 23.8	435 30.5	175 12.3	
The second secon		Bacteriolog	ical Results		
Number of Colonies developing— On Agar per c.c. in 3 days at 20°C 1 day at 37°C 2 days at 37°C Presumptive Coli-aerogenes Reaction	0 0 1	0 0 0	0 0 0	5 0 0	
Present in Absent from Bact-coli (Type 1) Present in	100 c.c.	100 c.c.	100 c.c.	100 c.c.	
Absent from	100 c.c.	100 c.c.	100 c.c.	100 c.c.	
Absent from	100 c.c.	100 c.c.	100 c.c.	100 c.c.	

### Report:

The samples were reported as being clear and bright in appearance and free from metals, excepting negligible traces of iron and manganese. The waters vary from hard to very hard in character but contain no excess of saline or mineral constituents in solution. They are of the highest standard of organic and bacterial purity.

Houses supplied from other sources than the Town's supply:—Eight houses continue to be supplied from seven shallow wells adjacent to the premises.

Public Baths.—The Victoria Baths near the Pier have ample bathing accommodation, which in addition to three open sea-water swimming baths, comprises 45 Slipper baths, two "Zotofoam" and "Pine Bubble" baths, and a suite of Turkish and Russian baths. The number of bathers attending during the twelve months ending 31st March, 1950, was 190,945.

The large Open-Air Bathing Lake in Princes Park is available for mixed bathing, and has a water surface area of over 55,000 square feet.

The sea water supplied to these baths is so treated by filtration and chlorination that the bath water proves to be of exceptional purity. The bacteriological findings in regard to samples from these baths taken on 26th June, 1950, are as follow:

Summary of Findings	Bathing Lake	Victoria Baths
Organisms at 37°C.	6 per c.c.	8 per c.c. 6 per c.c.
Organisms at Room Temperature  B. Coli	8 per c.c. Nil	o per c.c. Nil
Streptococci	Nil	Nil
Cl. Welchii	Nil	Nil

With regard to the smaller baths at Canning Road and Compton Road these continued to be freely used.

The Canning Road Baths had an attendance of 5,712 during the year, and the Compton Road Baths an attendance of 6,836.

#### SANITARY INSPECTION OF THE AREA

**Drainage.**—Complaints received regarding choked and defective drainage systems of houses numbered 1,101, and the necessary cleansing, repairs and alterations were supervised.

Household Refuse.—The work of collection and disposal of refuse is the responsibility of the Borough Engineer's Department.

**Shops.**—The administration of the Shops Act is carried out by the Weights and Measures Department. Defects under Section 10 of the Shops Act, 1934, have been referred to the Sanitary Department, and have been dealt with.

**Schools.**—The regular inspection of the sanitary arrangements at the schools have continued, and the standard of cleanliness has been well maintained.

Hostel.—One common lodging house exists in the Borough, and has been visited on forty-five occasions. The conditions under which this house is conducted have on the whole been satisfactory and considerable improvements are being carried out.

#### **FACTORIES**

Statistical information, prepared in the manner required by the Ministry of Labour and National Service is shown as follows:—

Factories Act, 1937 (Part I).

 INSPECTIONS for purposes of provisions as to health (including inspections made by Sanitary Inspectors).

Premises (1)		Number		Number of		
		on Register (2)	Inspections (3)	Written notices (4)	Owners prose- cuted (5)	
(i)	Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities	476	27	1		
(ii)	Factories not included in (i) in which Section 7 is enforced by the Local Authority	772	89	4	_	
(iii)	Other Premises in which Section 7 is enforced by the Local Authority † (excluding out-workers' premises)	2	2	_	_	
	TOTAL	1250	118	5	-	

<sup>†</sup> i.e. Electrical Stations [Section 103(1)], Institutions. (Section 104) and sites of Building Operations and Works of Engineering Construction (Sections 107 and 108).

#### 2.—CASES IN WHICH **DEFECTS** WERE FOUND

(If defects are discovered at the premises on two, three or more separate occasions they should be reckoned as two, three or more "cases")

	Number of cases in which defects were				Number of cases in which
Particulars	Found	Remi- edied	Refe To H.M. Inspector		
(1)	(2)	(3)	(4)	(5)	instituted (6)
Want of cleanliness (S.1.)	4	4	_	3	-
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	_	_	_	_	_
(c) Not separate for sexes	-	_		-	_
Other offences against the Act (not including offences relating to Outwork)	6	6	_	4	
TOTAL	13	13	-	9	_

		OUTW	VORK			
		Section 110		Section 111		
Nature of Work (1)	No. of out- workers in Aug. list re- quired by Sect. 110 (1) (c) (2)	No. of cases of default in send- ing lists to the Council	No. of prosec- utions for fail- ure to supply lists (4)	No. of instances of work in un- whole- some prem- ises (5)	Notices served	Prosecutions (7)
Wearing Apparel— Making, etc	16	_	_	_		_
Total	16	_	_	_	_	_

Smoke Abatement.—Forty-eight observations were made during the year, and in no case was it found necessary to institute legal proceedings.

**Pest Control.**—Vermin (other than rodents). The department has continued throughout the year to assist and advise on the control of insect pests. The measures employed included spraying with insecticides, and the use of powder insecticides.

#### RODENT CONTROL

The Rodent Control Service started in March 1944 as a result of the Infestation Order 1943 continued to operate throughout the year.

The Prevention of Damage by Pests Act 1949 became operative on the 31st March 1950 and repealed the Rats and Mice Destruction Act 1919. The principal differences under this Act are that the local authority is now charged with the responsibility of carrying out such inspections and surveys as may be necessary to ascertain that land within their district is kept free of rats; and, the local authority is also responsible for the supervision of all land which includes agricultural holdings previously supervised by the County Agricultural Executive Committee.

There is one Rodent Operator and he is able to cover the work by means of motor transport. The staff of Sanitary Inspectors assist him in surveying the areas in their own districts. The services of the operator are available on application being made by occupiers of premises which are infested and a duty is laid upon them to notify the Local Authority, in writing, if rats or mice are found on land in substantial numbers. The occupier of premises or land is still responsible for the work of disinfestation of his property.

The definition of land in the act includes land covered with water and any building or part of a building.

It should be remembered that apart from the vast amount of destruction caused by rats and mice, these rodents may also be carriers of disease germs which can be transmitted to man by the contamination of food. It is important, therefore, to take all steps which are possible to assist the department in this work.

# Prevention of Damage by Pests Act, 1949 Report for the Year 1950

	1.	PREVALENCE	OF RATS	AND MICE			
	1	Number of P Autho	Analysis of Column (iv)				
		in wh	nich infest	Number Infested by			
Type of Property	Total	by w Occupier Dis	Other-	Recorded	RATS		Mron
	(i)		Discov- ered (iii)	Total of (ii) and (iii) (iv)	Major (v)	Minor (vi)	MICE ONLY (vii)
ocal Authority Property Owelling Houses Business Premises Agricultural Property	169 24604 3611 44	18 92 64 1	12 20 31 1	30 112 95 2		25 59 58 2	5 53 37
TOTALS	28428	175	64	239	_	144	95

#### 2. Measures of control by Local Authority

		Number of Number of Tre Notices carried ou							Block Treatment of Properties in Diff-				
		Ins- pect- ions					Served Under Section 4 By arrange- ment with Occupier		Under Section 5 (i)			erent Occupancies Under Section 6(i) or by Informal Arrangement	
Type of Property	Ins-		Ins- pect-									Sur- face	Associated Sew- ers
	pected		Treat-	Works	Rats	Mice		Mice Only		No. of Blocks	No. of Sepa- 1		
			ments	WOLKS	Rats	Olly	Major	Minor		DIOCKS	rate Occu- pan- cies	Man-	
Local Authority's Property	85	119	_	_	25	5	-	_	-	-	_	_	
Dwelling Houses	489	665	-	-	59	53	-	-	_	-	-	-	
Business Premises	368	499	1	-	58	37	-	_	-	2	42	-	
Agricultural Property	40	131	-	_	2	-	-	_	_	-	_	-	
TOTALS	982	1414	1	_	144	95	-	_	_	2	42	-	

Summary of Visits.—During the year the total number of visits made by the Inspectors was 20,161 classified as follows:—

#### Nuisances

#### COMPLAINTS-NUMBER INVESTIGATED-

(1).	Housing Defects	872
(2).	Choked and Defective Drains	1078
(3).	Emission of Smoke	20
(4).	Accumulation of Offensive Matter	77
(5).	Miscellaneous	440
	TOTAL	2487

### INSPECTIONS-

Dwelling houses	1396
Common Lodging Houses	43
Common Yards, Back Roads and Passages	114
Horse-manure Middensteads	13
Pigstyes	165
Offensive Trades	288
Rag Flock Premises	10
Places of Public Entertainment	3
Public Sanitary Conveniences	208
Tents, Vans and Sheds	25
Abattoir	722
Broker's Premises	_
Ashes Receptacles (Ashpits and Dustbins)	75
Conversions (Earth Closets and Bristol Ejects to W.C.'s)	43
Smoke Observations	48
Testing Drains:	
By Smoke	44
By Breaking down	104
Insufficient Water Supply	5
Factories Act, 1937:	
Factories with mechanical power	131
Factories without mechanical power	14
Shops Act, 1934	64
Fried Fish Shops	105
Fishmongers and Greengrocers	647
Butchers' Shops	1263
Grocers' Shops	1299
Bakehouses	212
Canteens	2
Public Houses, Beer Houses, etc.	15
Food Preparing and Storing Places	1271
Dairies	413
Ice Cream Premises	697
Samples procured for Bacteriological Examination:	
Milk	449
Ice Cream	115
Other Foodstuffs	16
Water	24
Samples of Milk procured for Biological Examination	6
Samples obtained under the Food and Drugs Act, 1938:	
Milk	131
Other Foodstuffs	188
Samples of Water (Chemical)	12
Infectious Disease Visits	747
Diseases of Animals Acts and Orders	4
Prevention of Damage by Pests Act, 1949	2070

Inspections of Dwellinghouses and other premises for	
vermin infestation	162
Visits to work in progress	4644
Visits re Housing Survey	219
Miscellaneous Visits (Interviews, etc.)	1935
TOTAL	20161

Nuisances.—The number of schedules of cases recorded for abatement was 2,248.

In all cases the usual verbal request for the abatement of nuisances found was made, but in 1151 instances it was necessary to serve written notices as follows:—

Preliminary		 1076
Statutory		 75
	TOTAL	 1151



# Part IV HOUSING

#### HOUSING

General.—The number of inhabited houses totalled 24,626.

The following table shows the number of houses built during the period 1935 to 1950. It should be noted that no houses were built in the years 1941 to 1945 inclusive.

Year	1935	1936	1937	1938	1939	1940	1946	1947	1948	1949	1950
Number of houses built	420	384	385	249	308	42	310	163	156	126	102

Fitness for Habitation.—The standard of fitness of houses in the Borough continued to be generally good. Owing to the increased cost of materials and labour, it has been found that far more interviews with owners and revisits to properties have had to be made to see that notices were complied with and this has thrown greater work on to the Inspectors of the department.

Overcrowding.—The number of complaints regarding alleged overcrowding received during the year was 51, of which 22 were subsequently found to be overcrowded by visitation of the Sanitary Inspectors. In all instances where overcrowding was found to occur the matter was referred to the Housing Department requesting that assistance be granted in these cases.

#### HOUSING STATISTICS

Inspection of dwelling houses during the year :-	
defects (under the Public Health and Housing Acts)	1,615 4,644
	1,151
Remedy of defects during the year without service of formal notices :-	
Number of defective dwelling houses rendered fit in consequence of informal action by the Local Authority or their officers	1,379
Action under statutory powers during the year :-	
A.—Proceedings under the Public Health Act :—	
(1) Number of dwelling houses in respect of which notices were served requiring defects to be remedied	75
(2) Number of dwelling houses in which defects were remedied after service of formal notices:—	
(a) By owners	65
(b) By Local Authority in default of owners	Nil
B.—Proceedings under Sections 9 to 12, Housing Act, 1936 :—	
(1) Number of dwelling houses demolished as a result of formal procedure under Section 11	Nil
	(1) (a) Total number of dwelling houses inspected for housing defects (under the Public Health and Housing Acts)

(2)	Number of dwelling houses demolished as a result of Informal notices preliminary to formal procedure under Section 11	Nil
(3)	Number of dwelling houses closed but not demolished as a result of undertakings (which have not been cancelled) by owners under Section 11 not to use the houses for human habitation	Nil
(4)	Parts of buildings closed (Section 12)	Nil
(5)	Number of persons displaced as a result of action under (1) to (4) above	Nil
(6)	Number of dwelling houses made fit—	
	(i) as a result of formal notices under Sections 9 to 12	Nil
	(ii) as a result of informal notices preliminary to formal procedure under Sections 9 to 12	Nil

# Part V INSPECTION AND SUPERVISION OF FOOD

#### FOOD STANDARDS

Three hundred and nineteen samples of food were taken and submitted to the Public Analyst for chemical analysis.

The results showed that 302 were genuine and 17 were adulterated or otherwise giving rise to irregularity; the latter included 6 formal and 11 informal samples.

All the samples certified as not genuine were followed up, and appropriate action was taken. Full details were forwarded to the Ministry of Food.

List of Samples Found to be Adulterated or otherwise giving rise to irregularity

ar	erence Number ad if formal or formal sample	Nature of sample and report of analysis	Particulars
29 2	Informal}	Thyme— Contained a slight excess of sand.	Formal sample taken. Slight excess of sand. Letter sent to packer drawing his attention to this.
35	Informal	Dessicated Soup— Contained lead equivalent to 14 parts per million.	No legal proceedings taken. Formal sample taken and found to be free from excessive metallic contamination, viz. Lead 2 parts per million.
4	Informal	Milk— Deficient of fat to the extent of 10% (Fat 2.70) (3% of which is due to added water) and of solids, not fat, to the extent of 1% (Total solids 8.40%). The Freezing Point depression indicates the presence of 3% of added water (Freezing Point (Hortvet)—0.527° C.)	Formal sample taken—Fat 3.05%, Solids, not fat 8.30%. Milk of abnormal composition.
15	Formal	Milk— Contained 4½% added water.	Two "Appeal to Cow" samples taken—one contained 2.60% fat and 8.10% solids not fat and the other contained 2.50% fat and 8.00% solids not fat—Milks of abnormal composition.
71	Formal	Beef Sausages— Deficient of meat to the extent of 16% (Total meat 42%).	Case dismissed. Defence produced certificate from independent Analyst showing 50% meat, in the third portion.
113	Informal	Orange Squash— Consisted of ready-to-drink orange drink. The description "squash" implies a soft drink intended for consumption after dilution.	Attention of packer drawn to this description. Label altered to "Orange Drink."

Reference Number and if formal or informal sample	Nature of sample and report of analysis	Particulars
129 Informal	Synthetic Cream— Synthetic Cream containing 110 parts of Formaldehyde per million.	Formal Sample No. 130 taken at the place of delivery. (See below).
130 Formal	Synthetic Cream— contained 110 parts of Form- aldehyde per million.	The third portion was submitted to the manufacturers. Legal advice obtained to the effect that proceedings could not be instituted against the manufacturers whose factory was situated in Belfast, Northern Ireland. The Town Clerk contacted the Ministry of Food who undertook to take action in Northern Ireland. The manufacturers stated that the presence of formaldehyde was due to the sterilising agent used in the plant and undertook to change this agent.
131 Informal	Milk— Deprived of 18% of its original milk fat.	This information was forwarded to the M.O.H. of the Lancs. County with the request for a follow up sample. The County M.O.H. reported that the follow up sample was found to be genuine.
138 Informal	Aberdeen Emulsion— Consisted of an emulsion of arachis oil in a rancid condition. The free acid present makes the sample unpalatable.	This was a consignment of Emulsion which had been presented by the Voluntary Maternity and Child Welfare Organisation to the Department and which was known to be old stock. The entire stock has been disposed of for animal feeding stuffs.
163 Informal	Tomato Soup— Contained 230 parts of tin per million, equivalent to 1 3/5 grains per lb. The accepted maximum limit of tin in canned goods is 2 grains per lb.	The attention of the canners was drawn to the undesirable quantity of tin in the soup. The remainder of the stock was surrendered and destroyed.
176 Informal	Crab Paste— Slightly deficient in fish.	No further sample available
214 Informal	Cake Flour Mixture— Deficient of sugar to the extent of 38%.	Formal sample taken. (See below).
245 Formal	. Sweetened Cake Flour Mixture— Deficient of sugar (total sugar 16%) and infested with living mites.	Legal proceedings instituted against vendor. Summons concerning sugar deficiency dismissed. Summons concerning mite infestation—Fine of £5 No costs awarded in either case.

Reference Number and if formal or informal sample	Nature of sample and report of analysis	Particulars		
249 Formal	Milk— Contained 5½% added water.	Warning letter issued by the Town Clerk.		
252 Informal	Sausage— Contained insect.	Legal proceedings taken. Case dismissed.		

#### Table showing particulars of the number of samples taken for Bacteriological Examination—Year 1950

Nature of	Number of specimens procured for submission to bacteriologist for bacteriological examination					
Samples and Specimens	First Quarter	Second Quarter	Third Quarter	Fourth Quarter	Total for the year	
FOOD AND DRINK—						
Ice Cream		67	41	_7	115	
Milk	50	187	137	75	449	
Other Foods	1	5	9	1	16	
*Water	1	1	17	5	24	
TOTALS	52	260	204	88	604	

<sup>\*</sup>Intended for human consumption.

#### DISTRIBUTION OF MILK

There are 110 distributors of milk on the register of the local authority of whom 108 have their premises inside the Borough. The premises are inspected regularly and samples are frequently submitted for bacteriological examination. During the year 449 samples of milk were submitted to the Bacteriologist for examination of which 315 were Pasteurised, 22 Sterilised, 46 Tuberculin Tested (Pasteurised), 34 Heat treated, 28 Undesignated and 2 Tuberculin Tested Certified. Of these samples six Pasteurised samples failed the Phosphatase Test and three failed the Methylene Blue Test; one T.T. (Pasteurised) Milk failed the Phosphatase Test and one failed the Methylene Blue Test and the remainder proved to be satisfactory. In all instances where the Pasteurised Milk Samples failed the Phosphatase Test, the milk was examined by means of guinea pig inoculation for T. Bacilli. In addition six samples of raw undesignated milk were submitted for biological examination but in no instance was T. Bacilli found.

In all instances where unsatisfactory samples were obtained the premises were thoroughly examined and the equipment tested with a view to finding the source of the failure. In every case where unsatisfactory milk samples were obtained from producers outside the Borough, the information was submitted to the appropriate authority.

It will be seen that the quality of milk sold in the Borough has maintained a very high level in that 4% only were found to be unsatisfactory.

The number of samples taken for chemical analysis was 130, of which 4 were reported by the Public Analyst to be adulterated or otherwise giving rise to irregularity. Details of the four are given on pages 62 and 63.

Classification of Licences issued		Number of Licences issued during the year	
		1949	1950
(1)	Milk (Special Designation) (Raw Milk) Regulations 1949		
	"Tuberculin Tested"		
	Dealers' Licences authorising the use of the special designation "Tuberculin Tested" in relation to milk sold from the holder's premises	49	49
	Supplementary Licences authorising the use of the special designation "Tuberculin Tested" in relation to milk sold by retail from the holder's premises outside the Borough	3	1
(2)	Milk (Special Designation) (Pasteurised and Sterilised Milk) Regulations 1949—		
	"Pasteurised"		
	Dealers' (Pasteurisers') Licences authorising the use of the special designation "Pasteurised" in relation to milk treated by the pasteurising process at the holder's premises	2	6
	Dealers' Licences authorising the use of the special designation "Pasteurised" in relation to milk sold from the holder's premises	8	53
	Supplementary Licences authorising the use of the special designation "Pasteurised" in relation to milk sold by retail from the holder's premises outside the Borough	1	1
	"Sterilised"		
	Dealers' Licences authorising the use of the special designation "Sterilised" in relation to milk sold from the holder's premises	13	15
	Supplementary Licences authorising the use of the special designation "Sterilised" in relation to milk sold by retail from the holder's premises outside the Borough		1
	TOTALS	78*	126

<sup>\*</sup>Two licences re "Accredited" Milk were issued in 1949 under the previous regulations.

#### FOOD INSPECTION

Details of the food inspected and rejected as unfit for human consumption are set out below:—

# Carcases Inspected and Condemned Public Abattoir

Particulars	Cattle (excluding Cows)	Cows	Calves	Sheep and Lambs	Pigs
Number of animals killed	442	1	2990	14780	349
Number of carcases inspected	442	1	2990	14780	349
RESULTS					
All diseases except tuberculosis:—					
Number of whole carcases condemned	-	1	19	25	22
Number of carcases of which some part or organ was con- demned	915	761	12	1037	40
Percentage of the number in- spected affected with disease other than tuberculosis	37.	93	1.03	7.18	17.77
Tuberculosis only :					
Number of whole carcases con- demned	5	53	-	-	4
Number of carcases of which some part or organ was con- demned	503	811	_	_	34
Percentage of the number in- spected affected with tuber- culosis	31.	03	Nil.	Nil.	10.88

The condemnations of whole carcases shown in the above table were due to tuberculosis(sixty-two), septicaemia(one), oedema(nine), peritonitis(fifteen), pyaemia (seventeen), pneumonia (three), moribund (seven), fevered (five), erysipelas (three), spetic peritonitis (two), pleurisy (two), jaundice (one), septic metritis (one), and melanosis (one). All the animals, except four, were brought into the abattoirs from outside the Borough.

# Summary of meat and other articles of food which were found to be diseased or unwholesome

	Cwts.	Qrs.	Lbs.
Beef	833	3	6
Veal	7	3	23
Mutton	28	3	15
Pork	53	3	25

	Cwts.	Qrs.	Lbs.
Fish	16	3	1
Poultry, Game, Rabbits	1	1	21
Fruit	-	3	7
Tinned Goods.—			
Milk	30	2	20
Meat	22	0	5
Fish	1	2	23
Vegetables	11	3	11
Fruit	25	1	6
Cereals	-	3	25
Jam	3	0	2
Miscellaneous	9	3	20
	1049	0	14
TOTAL	52 tons,	9 cwts,	14 lbs.

All the meat was sent for salvage and converted into technical/industrial substances. The remaining diseased or unsound food was destroyed.

The whole of the food listed was voluntarily surrended and no legal action was necessary to safeguard public health.

#### FOOD HYGIENE

The appointment of a designated post of Food Hygiene Officer in the latter part of last year has proved of the greatest value.

This step allows for concentration of effort in regard to the subject of Food Hygiene and as a result the progress gained during the year has been very satisfactory.

Traders dealing with food stuffs in any way have, when it has been desired, received help and advice regarding their premises and working conditions which has been valuable.

The department has received a great measure of co-operation from those engaged in such trades. Some difficulty has been experienced by the proprietors of firms in obtaining licences to carry out improvements in their premises. It has been possible for the department to assist in this respect by officially supporting approved schemes and where this procedure has been adopted licences have been granted.

Lectures on the subject of Food Hygiene have been given to various voluntary organisations by the Chief Sanitary Inspector and the Food Hygiene Officer. The latter also gives short talks to workers in kitchens, bakeries, etc., when he visits the various premises.

To assist the trades in the interpretation of the existing laws relating to food, Codes of Practice were prepared for each food industry and these have been distributed to all traders.

For some years the Department had been considering the necessary steps which should be taken to improve the methods of handling, storing and distributing foodstuffs.

Fortunately the town has been singularly free from serious outbreaks of poisoning due to contaminated food but it is common knowledge today that improvements in the methods of handling food are urgently needed. The importance of hygienic methods as these relate to food requires to be understood by everyone who handles or prepares food for consumption.

It was felt that in order to obtain this some course of teaching on the subject should be available. Two years previously a short four lecture course on Food Hygiene had proved reasonably successful but a broader outlook on this matter seemed indicated.

The Principal of the Technical College was approached to see if the course could be held in the College. He explained that the St. John Ambulance Association intended to hold a course of lectures in Personal Hygiene along the lines of the syllabus in use by the association. As a consequence the Medical Officer of Health, and other members of the staff met representatives of the local branch of the St. John Ambulance Association.

After some discussion it was obvious that the best way of dealing with the matter would be by creating a combined course under the aegis of the St. John Ambulance Association, but staffed by the Health Department.

This arrangement was submitted to the County Director of the Association who approved and undertook to obtain the approval of the Central Committee.

The Health Committee fully endorsed these arrangements and agreed to make a grant towards the cost of each course.

A Syllabus of Lectures was prepared by the department and this was approved by the Association.

The course is a comprehensive one and consists of eight lectures and demonstrations. Lectures are given by the Deputy Medical Officer, the Chief Sanitary Inspector and the Food Hygiene Officer. The Pathologist and Bacteriologist of the Southport Infirmary gave a lecture on bacteriology as this applies to Food Hygiene and the Public Analyst, came from Liverpool to give a lecture and demonstration on his branch of the subject.

One hundred and twenty-seven students attended the course and eighty-three of these sat for an examination on the subject, 69% passed and were granted certificates by the St. John Ambulance Association.

The numbers enrolling were sufficient to warrant a second course in the early months of the present year.

The arrangement with the Association appears to be a very happy one and works smoothly. There is an advantage it is believed in so far as the certificate granted by the Association should be recognised in other areas.

The following tables show the number of inspections made in regard to premises dealing with foodstuffs and the improvements so far effected.

#### (A) Summary of Inspection

Inspections	Number
Hotels, Restaurants, Kitchens and Fried Fish Shops	638
Bakehouses	205
Butchers Shops	74
Confectioners' Shops	24
Cockle and Shrimp Boilers	49
Fishmongers', Greengrocers' and Poulterers'	108
Food Factories	44
Food Vehicles	4
Grocers	180
Ice Cream Premises	321
Snack Bars	167
Miscellaneous	414
TOTAL	2228
(B) Summary of Improvements Effected	
Major structural improvements and reconstruction e.g. new	
kitchens provided or kitchens completely reorganised	4
Minor structural improvements, cleansing and repairs	193
Improved food storage facilities	13
Equipment renewed, repaired and cleansed	44
Improved washing-up facilities and procedure	40
Improved sanitary accommodation for staff including personal	10
washing facilities	12
Improved sanitary accommodation for patrons	7
Improved refuse storage facilities	16
Vermin eliminated	6
TOTAL	335
	-

The Bacteriological quality of Ice Cream on sale throughout the Borough has continued to improve and the percentage of unsatisfactory samples, 26.95%, compares very favourably with 52.2% unsatisfactory samples in 1949. In all instances where unsatisfactory samples are obtained the premises are visited and energetic steps are taken, including samples of the product at various stages of production, to endeavour to find the cause for the unsatisfactory product. The number of premises used in connection with the manufacture, sale and storage of Ice Cream is set out below:—

Particulars	Number	
For the purpose of manufacture and sale	25	
For the purpose of sale		
TOTAL	198	
	-	

One hundred and fifteen samples of ice-cream were procured and submitted for bacteriological examinations.

The Ministry of Health Provisional Grading of Ice-Cream is divided into four grades as follows:—

- GRADE I the ice-cream, after incubation, does not decolourise Methylene Blue in 4 hours.
- GRADE II. the ice-cream, after incubation, decolourises Methylene Blue in 2 hours to 4 hours.
- Grade III the ice-cream, after incubation, decolourises Methylene Blue in  $\frac{1}{2}$  hour to 2 hours.
- Grade IV. the ice-cream, after incubation, decolourises Methylene Blue immediately.

Grades I and II are regarded as satisfactory: Grades III and IV as unsatisfactory.

The following table shows the gradings of the 115 samples taken:-

GRADE I	GRADE II	GRADE III	GRADE IV	TOTAL
42	42	12	19	115

# Part VI

# PREVALENCE OF, AND CONTROL OVER, INFECTIOUS AND OTHER DISEASES

INFECTIOUS DISEASES (Table 1)
Classification of cases notified during the year 1950

	Total No. of cases re- moved to Hospital	1	57	7	6	-	1	10	1	49	1	1	1	1	2	1	1	128
	Ainsdale	1	21	10	9	1	28	60	4	63	1	1	1	1	-	1	1	70
	Birkdale West	- 1	4	63	30	1	20	10	-	60	1	1	1	1	1	1	1	11
	Birkdale	1	32	63	28	Ξ	38	18	4	10	1	1	-	1	-	1	1	140
	Birkdale	1	73	9	10	7	14	12	7	00	1	1	1	1	1	-	1	62
WARD	Birkdale East	1	00	6	91	4	14	12	1	6	1	1	1	-	1	1	1	73
Елсн	West	1	7	2	33	7	28	27	-	20		1	1	1	1	1	1	121
Z	Talbot	1	-	1	27	2	13	27	60	13	1	1	1	1	1	1	1	86
TIPLE	Sussex	1	9	3	80	2	19	28	-	16	1	1	1	1	62	1	1	187
CASES NOTIFIED	gonth	. 1	00	1	37	2	28	29	1	19	1	1	1	1	-	1	1	125
	Scarisbrick	1	22	-	6	2	19	23	3	41	1	1	1	1	9	1	1	210
TOTAL	Park	-1	10	2	34	2	28	21	-	9/	1	1	1	-	4	1	1	179
1	Marine	1	7	10	21	-	17	15	1	16	1	1	1	1	1	1	1	82
	Hesketh	1	29	10	139	7	42	29	3	29	1	1	1	-	-	1	1	323
	Стачеп	-	4	2	19	2	23	17	1	16	1	1	-	1	2	-	1	87
	Central	1	9		23	1	14	13	-	6	1	1	1	1	10	1	1	74
	spaewqu 65	- 1	1	6	1	I	1	1	00	47	1	61	1	1	1	1	1	65
	€8 of €₽	1	2	12	1	-	1	1	00	32	1	-	1	1	-	1	1	57
CASES NOTIFIED n Years	25 to 45	1	33	10	3	2	10	2	7	59	1	-	63	1	1	-	1	66
s No	15 to 25	1	6	10	10	63	12	7	1	12	1	1	1	-	1	1	1	47
	51 01 5	1	123	10	254	19	216	155	1	26	1	1	1	1	-	-	1	830
Ages	2 of 1	1	30	10	319	20	103	177	-	9	1	1	1	-	1	1	1	722
NUMBER OF Ages	Under 1	1	1	-	14	-	4	17	1	9		1	1	П	10	1	-	49
1	Age unknown	1	-	1	1	1	1	1	1	10	1	1	1	1	16	1	1	21
	Ils 1A. sags	1	167	46	595	45	345	352	24	282	1	2	2	3	23	2	-	1890
	NOTIFIABLE DISEASE	Diphtheria	Scarlet Fever	Pneumonia	Measles	German Measles	Chicken Pox	Whooping Cough	Erysipelas	Dysentery	Ophthalmia Neonatorum	Paratyphoid Fever	Puerperal Pyrexia	Meningococcal Infection	Food Poisoning	Poliomyelitis	Malaria	

# INFECTIOUS DISEASES (Table 2)

Number of notified cases and number of deaths for the years 1941 to 1950 inclusive

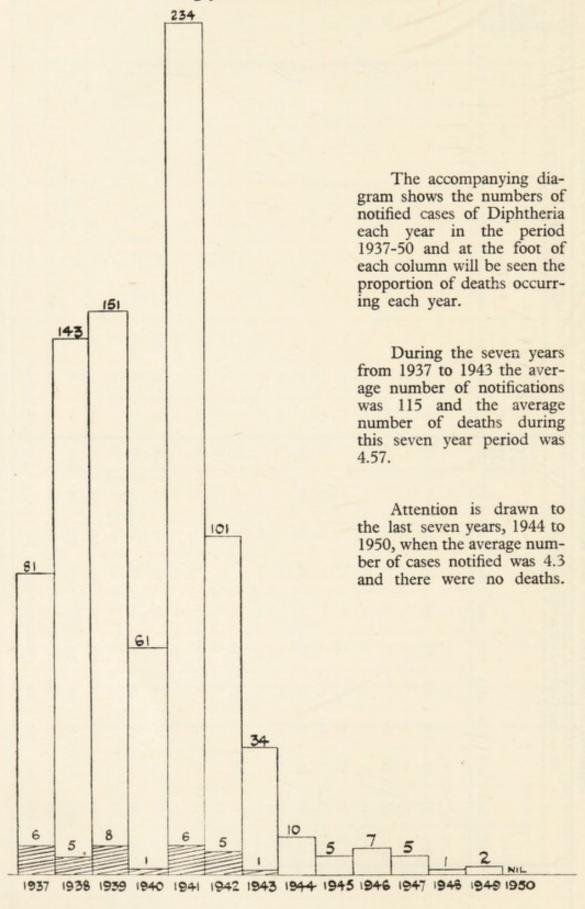
			Num	BER OF	CASES OF	INFECT	NUMBER OF CASES OF INFECTIOUS DISEASE NOTIFIED	SEASE N	OTIFIED					II.	DEATHS FROM INFECTIOUS DISEASE	ROM IN	FECTIOUS	S DISEA	59				
	1041	1942	1043	1944	1945	1946	1947	1948	1949	1050 1950 1	Total Cases for 10 years 1941 to	1941	1942 19	1943 1	1944	1945	1946 19	1947	1948 1949		Total Deaths during 10 years 1950 1950	-	Case Mortality (of all cases) in Borough and Isolation Hosp. for 10 years 1941—1950
	12.41	1772	1	1		-	-	-	-	+	+	+	+	+	+	+	1	+	+	+	1		-
Food Poisoning	1	1	1	1	1	1	1	1	1	23	24	1	1	1	1	ſ	1	-	-	-	1 1	4.1	4.17%
Scarlet Fever	381	117	151	140	93	62	167	210	125 1	167 1	1613	1	1	1	1	1	1	1	-	-	- 1	0.0	0.06%
Small-pox	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	-	1	1	,
Diphtheria	234	101	34	10	20	7	20	1	53	1	399	9	in	1	1	1	1	-	-	-	- 12	3.2	3.26%
Typhus	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
Typhoid Fever	60	1	1	1	1	1	1	1	2	1	10	1	1	1	1	-	1	1		-	- 2	40.00%	%0
Para-typhoid Fever	28	7	1	1	1	2	1	1	9	61	41	1	1	1	1	1	1	1	1	-	1	1	
Erysipelas	35	24	25	28	26	32	25	33	34	24	286	1	1	1	1	1	1	1	1		1	1	
Malaria	1	1	1	1	1	1	1	1	1	1	2	1	1	1	1	1	1	1	1	-	1	1	
Puerperal Fever	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1		- 1	100.00%	%0
Puerperal Pyrexia	12	25	10	10	10	1	7	1	2	2	89	2	1	1	1	1	1	'		-	- 2	2.9	2.94%
Menincoccal Infection	36	13	1	1	4	4	4	1	П	3	29	4	2	1	-	61	1	1	1		1 12	17.91%	1%
Poliomyelitis	1	1	1	1	1	4	00	3	-	63	18	1	1	1	1	1	1	1	2	1	- 4	22.22%	2%
Polioencephalitis	1	1	1	1	1	1	1	1	-	1	1	1	1	1	1	1	1	1			1	1	
Pulmonary Tuberculosis	99	74	52	63	69	99	62	51	58	89	609	38	37 4	43	27	36	31 3	39 2	27 26	5 15	5 319	52.37%	700
Other Forms of Tuberculosis	31	28	51	26	26	16	22	17	13	16	246	7	6	6	9	20	3	10	3		5 57	23.17%	7%
Ophthalmia Neonatorum	-1	1	2	2	3	10	1	1	1	1	13	1	1	1	1	1	1	1	1	-	1	1	
Chicken Pox *	564	929	414	326	274	869	234	909	543 3	345 4	4480	1	1	1	1	1	1	1	1		1	I	
Measles *	780	1001	742	741	546	228 1	1000	788	968	595 7	7407	1	3	2	3		1	2	1 2	-	- 14	0.19	0.19%
German Measles	748	122	157	230	52	83	462	191	55	45 2	2115	1	1	1	1	1	1	1	1	1	1	1	
Whooping Cough *	531	160	368	301	278	92	200	457	277 3	352 3	3300	3	1	4	-	23	1	1	1 1		2 15	0.4	0.46%
			-	-						1	1			1		-					-		

The following additional notifications were received during 1950-Pneumonia (all forms) 46; Dysentery 282.

Chicken-pox, Measles and Whooping Cough were made compulsorily notifiable in Southport in May, 1902, and Cerebro-Spinal Meningitis, Poliomyelitis and Ophthalmia Neonatorum in February, 1912.
 Measles, German Measles and Whooping Cough: — Only the first case in a house in two months is notifiable.

#### DIPHTHERIA

Number of notified cases and number of deaths during years 1937 to 1950 inclusive



— Notified Cases

— Deaths

**Diphtheria.**—In 1935 a clinic was started at which children could be immunised against Diphtheria. In 1938 the Health Committee passed a scheme whereby the local authority undertook to pay fees to the doctors in private practice for immunisation. The scale of fees was approved by the local branch of the British Medical Association.

The aim was to immunise 50% or more of the children in the town against diphtheria.

For the first time it is possible to record that in the year 1950 there were no cases of diphtheria. If this is compared with the year 1941, ten years ago, then in that year there were 234 cases and six deaths. We have had no deaths in Southport from this disease during the past seven years. The present position regarding immunisation is that 65% of children under the age of four are protected and 90% of children aged 5 to 14.

In future it is important that this standard should be maintained. We are indebted to the doctors in general practice for their ready acceptance of the scheme in 1938 and the steady work carried on since then. It has been shown that by continued propaganda and advice the percentage protected can be almost 100% with the result that this disease which once was responsible for so much anguish and misery can be virtually abolished. In England and Wales there were 980 cases of Diphtheria in the year 1950 and 49 deaths.

Scarlet Fever.—167 cases were notified during the year, and of these 57 were removed to the Isolation Hospital. Though the majority of the cases admitted to hospital were mild in type and were sent there because they could not be satisfactorily isolated or nursed at home, it was noted that some were more severe than those occurring in 1949. One child had an attack complicated by endocarditis, but after six months in bed made a complete recovery.

A few comments on this infection may not be out of place in this report.

The severity of the disease is now generally much less than it was at the beginning of this century. The medicaments available for its treatment have progressively improved with the advent of antitoxin, the "suplha" drugs and penicillin. The result has been that the duration of the illness and the incidence of complications, particularly severe complications, are now much less than formerly. In addition, the general state of nutrition of children developing the infection is better than it used to be and so they are better equipped to combat the disease.

Much has been learned of late years as to the causation of scarlet fever, and it is now clear that the same strain of haemolytic streptococcus which in one person will produce typical scarlet fever, may in another give rise only to tonsillitis or to a sore throat—passed on again, however, it may be the cause of what is called scarlet fever in yet another individual. This explains why the notification and isolation of cases of scarlet fever in hospital has not been as successful as was hoped for in reducing the number of cases and in preventing the spread of the infection. It is for this reason that it is now the practice to admit cases, particularly severe cases, of throat infection to infectious diseases hospitals, whether or not they have a rash and whether or not they fall into the category of notifiable disease.

From the public health and preventive medical standpoint it is just as important to move a case of streptococcal throat infection without a rash out of a house in which a baby is shortly to be born, as it is to move a case of scarlet fever; either case could be the source of puerperal sepsis in the mother and of danger to the baby.

Chicken Pox.—345 cases were notified as compared with 543 in the previous year. One case was removed to hospital under circumstances which did not allow for adequate isolation at home.

Dysentery.—The increase in intestinal infections caused by the dysentery group of organisms has been general throughout the country since the end of hostilities, and the return of many soldiers from abroad. There were 282 cases notified in the town in 1950, as against only 6 in 1949, and at one time it seemed likely that the incidence might become epidemic in character. Forty-nine of the cases were admitted to hospital as against four in the previous year. All, except a small group of cases infected with the Flexner organism in the Southport Infirmary, were infections of the Sonne type.

**Erysipelas.**—24 cases were notified but none required hospital treatment. The greatly decreased call on hospital accommodation for these cases arises from the improvement in treatment which has been brought about by the sulphonamide group of drugs and by penicillin.

Measles.—The number of cases notified during the year was 595 as compared with 896 in 1949. Nine cases were admitted to hospital either on account of the severity of the disease or lack of facilities for isolation at home. No deaths occurred which were ascribable to this disease.

**German Measles.**—45 cases were notified as compared with 55 in the previous year. One case was removed to hospital.

Whooping Cough.—352 cases were notified and five of these were admitted to hospital. Two deaths which were due to this complaint occurred during the year.

Pneumonia.—46 cases were notified to the department.

Food Poisoning.—Twenty-three cases of this condition were notified and two were admitted to hospital.

The increased incidence of cases of food-poisoning which has occurred since the war has made it evident that standards of cleanliness in the handling and preparation of food are not as high as they should be. Most of these cases are due to contamination of food with germs, particularly staphylococci and those of the salmonellae group. The dangerous foods are those composed of made up-meat products, such as meat roll, brawn, etc., particularly when they have been kept overnight after preparation and before use. The strictest cleanliness must be observed by those engaged in this trade, and all prepared foods of this kind should be kept in a refrigerator until just before use. It is obvious that one contaminated dish in a restaurant or hotel may be responsible for a large number of cases.

Acute Anterior Poliomyelitis and Polio-Encephalitis.—Two cases were notified one of which was admitted to hospital; the other case was notified when out of the infectious stage.

During 1950 no notifications were received of the following diseases:-

Undulant Fever, or Puerperal Fever.

General.—During 1950 the Infectious Diseases Enquiry Officer made 2,533 visits to cases and contacts. In addition 248 houses in which there had been a cases of infectious disease were disinfected. The Health Visitors also made 20 visits to cases of infectious disease.

#### TUBERCULOSIS

New Cases and Mortality.—The number of new cases of tuberculos is which came to the notice of the department during the year was 84. Of these, 68 were found to be suffering from pulmonary disease and 16 from non-pulmonary disease. The following table shows the age and sex of these patients together with information regarding the number of persons who died of tuberculosis during the year.

Age Periods		New	Cases			Dea	iths	
(in years)		onary F.	Pulm	on- onary F.		onary F.	Pulm M.	
0-	_	_	1		_	_	_	_
1-	1	_	1	1	1	_	1	-
5	_	1	1	5	_	_	_	1
15	3	10	1	1	1	2	1	-
25-	5	10	2		1	2	_	1
35	6	9	-	1	_	1	-	_
15-	9	5		-	2	5	1	-
55	2	3	-	-	_	-	-	-
55 and over	1	3	_	2	-	-	-	-
Totals	27	41	6	10	5	10	3	2

**Treatment Clinic.**—The 84 new cases came to the notice of the Department in the following ways:—

(a)	By primary notifications	45
(b)	By transfer from other areas	19
(c)	From Death Returns	17
	TOTAL	84

All the cases for whom primary notifications were received and all patients transferred from other areas were seen at the Treatment Clinic which is held at the Southport Infirmary. The total number of cases on the Clinic Register at the end of 1950 was 396 and 70 of these patients were found to have sputum containing tubercle bacilli. During the year 50 Treatment Clinics were held and 782 visits were made by patients; the total number of X-ray examinations of patients was 891.

It should be mentioned that the Southport and District Hospital Management Committee are responsible for the organisation and administration of the Tuberculosis Treatment Clinics.

**Contact Clinic.**—The local Health Authority is responsible for the Contact Clinics and these are also held at the Southport Infirmary by arrangement with the Hospital Management Committee.

During the year 49 clinics were held and 150 attendances were made by contacts of patients; the total number of X-ray examinations of contacts was 407. Only two contacts were found to be suffering from pulmonary tuberculosis in 1950.

**Domiciliary Visiting.**—A Health Visitor with special qualifications is employed by the local Health Authority for the purpose of visiting cases in their own homes to give help and advice to patients and their families. The following table shows the number of visits made by the Tuberculosis Visitor during the year.

To Patients:	1st Visits	48
	Re-Visits	1700
To Contacts:-	1st Visits	118
	Re-Visits	473
	Total No. of Visits	2339
		-

In addition, the Health Visitor also attends at the Tuberculosis Treatment and Contact Clinics and this arrangement is of great importance for the following reasons:—

- (a) The Visitor has the opportunity of seeing all new patients at the Clinic and this enables her to obtain valuable information in regard to the medical and social circumstances of each individual case. It also ensures that the advice and help given by the Visitor to the domiciliary cases is in accordance with the instructions of the medical staff concerned.
- (b) In regard to cases who attend the clinic at intervals for review, the Tuberculosis Visitor is in a position to obtain the results of the examinations without delay and she can then satisfy the patient on her next visit, as to the progress being made.
- (c) The Visitor's attendance at the clinics also allows her to effect a close liaison with the contacts of patients and assist them with the many problems which often arise when one of the household is found to be suffering from tuberculosis.

During 1950, the Health Visitor made 198 attendances at the Tuberculosis Treatment and Contact Clinics.

Open Air Chalets.—In some cases the Tuberculosis Officer may advise the patient that separate sleeping accommodation is desirable, particularly when there are young children in the family, but on occasions the home circumstances may be such that this cannot be arranged.

To meet this special need the local Health Authority loan open-air chalets to suitable patients on the advice of the Tuberculosis Officer, thereby enabling the treatment to be continued in a more satisfactory manner. During 1950 six chalets were being used by patients on the district.

Care Committee.—The Southport Voluntary Tuberculosis Care Committee continued as in previous years, to provide patients and their families with financial and other assistance. This Committee forms an essential part of the general scheme for tuberculosis patients and all the medical and nursing staff who are engaged in the service are members of this voluntary organisation. During the year the Care Committee provided financial and other assistance to patients and their families to the value of £275. In conjunction with the Tuberculosis Officer and the Health Visitor, the Care Committee are also developing an occupational therapy scheme and suitable patients are provided with the necessary materials, free of charge, to enable them to make various articles at home, such as wool rugs and embroidered tablecloths.

Housing.—In April, the Council approved a revision of the Points Scheme for the purpose of selecting tenants for Corporation houses and, in the amended regulations, special provision was made in regard to tuberculous patients. Additional points are now awarded when either the applicant or his wife, or any of their children are known to be suffering from infectious tuberculosis and this concession should be of some benefit to those cases where improved housing accommodation is desirable for the patient and his family.

During the year nine cases were reported to the Housing Department with a recommendation that special consideration be given in view of the unsatisfactory home conditions of the patients concerned. Although it was not found possible to provide any of these cases with alternative accommodation in 1950, the Housing Department indicated that every effort would be made to re-house them as soon as this became practicable.

#### VENEREAL DISEASES

At the end of the year 277 patients were under treatment at the clinic as compared with 317 at the close of 1949. The new cases dealt with during the year were classified as follows:—

omea do r		Male	Female	Total
Syphilis		7	9	16
Gonorrh	oea	11	4	15
Non-Ven	ereal Infections	46	20	66
Cases tra	nsferred from other clinics—			
(a	Syphilis	1	1	2
(b	) Gonorrhoea	3	_	3
(c	Observation	2	2	4
		70	36	106
		-	-	-

#### In-Patient Treatment

OPHTHALMIA NEONATORUM.-No cases were treated during the year.

MATERNITY.-No cases were treated during the year.

Penicillin was again used extensively during the year, and the following number of patients were treated with the drug:—

	Male	Female	Total
Syphilis	6	9	15
Gonorrhoea	11	4	15
Investigation	20	8	28
	37	21	58
	-		-

**Examination of contacts.**—This was carried out again where necessary and 2 Males and 2 Females were found to be suffering from Gonorrhoea, and 1 Male and 1 Female from Syphilis; they were still under treatment at the end of the year. 14 children were examined but were found to be free from infection and were discharged.



# Part VII METEOROLOGY

METEOROLOGY

Records for the years 1931 to 1950 inclusive

		Tempo of th	erature e air		Brig	ht Suns	hine	Ozone (O3.)		Rai	nfall		Hun	idity		soil r level
			Abs	olute		а	ays	-10)		la la	Rain			Te le	ll nce	7
YEAR	Mean Temperature °F	Deviation from Normal °F	Highest 9F	Lowest °F	Duration of Bright Sunshine (Hours)	Deviation from Normal (Hours)	Number of Sunless Days	Mean Daily Ozone (0—10)	Total Rainfall (inches)	Deviation from Normal (inches)	Number of Days with Rain	Duration of Definite Rainfall (hours)	Humidity of the Air at 9 a.m. (%of Saturation)	Deviation from Normal (% of Saturation)	Mean Level of Subsoil Water (inches). Distance below Well-mouth	Deviation from normal (inches)
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)	(15)	(16)	(17)
1931	48.4	-1.0	76	20	1362	-145	78	3.8	38.56	+5.39	208	733.6	84	+2	33.2	-6.8
1932	49.3	-0.1	84	21	1407	-100	74	3.4	33.57	+0.40	195	590.6	82	0	63.4	-4.4*
1933	50.0	+0.6	85	19	1618	+111	58	3.1	23.71	-9.46	161	440.0	81	-1	71.9	+4.1
1934	50.2	+0.8	88	23	1479	-28	69	3.7	30.70	-2.47	203	563.3	82	0	-	t
1935	49.8	+0.4	85	19	1573	+66	59	3.9	34.11	+0.94	200	626.1	81	-1	72.1	+4.3
1936	49.1	-0.3	84	22	1331	-176	64	3.6	33.89	+0.72	193	608.1	83	+1	66.6	-1.2
1937	49.1	-0.3	82	21	1344	-163	73	3.1	25.00	-8.17	172	469.2	83	+1	-	5
1938	50.4	+1.0	76	25	1477	-30	55	3.9	36.64	+3.47	201	485.8	80	-2	-	5
1939	49.6	+0.2	82	18	1484	-23	68	3.6	33.91	+0.74	186	555.1	81	-1	66.3	-1.5
1940	48.5	-0.9	83	7	1527	+20	74	3.6	31.69	-1.48	184	583.8	79	-3	70.3	+2.5
1941	48.6	-0.8	88	11	1424	-83	81	3.6	26.91	-6.26	175	528.3	80	-2	70.5	+2.7
1942	48.3	-1.1	78	18	1342	-165	73	3.6	31.30	-1.87	182	617.9	81	-1	73.5	+5.7
1943	49.9	+0.5	88	21	1665	+158	62	4.2	37.88	+4.71	199	614.0	81	-1	67.6	-0.2
1944	49.0	-0.4	78	21	1413	-94	70	3.9	35.41	+2.24	202	587.1	81	-1	68.0	+0.2
1945	50.3	+0.9	81	9	1508	+1	60	3.9	29.46	-3.71	181	446.9	81	-1	67.6	-0.2
1946	48.9	-0.5	77	17	1537	+30	72	3.6	38.42	+5.25	194	623.9	80	-2	66.5	-1.3
1947	49.0	-0.4	86	14	1444	-63	77	††	30.40	-2.77	184	549.5	81	-1	65.1	-2.7
1948	50.0	+0.6	89	25	1511	+4	69	††	35.26	+2.09	191	521.7	80	-2	68.9	+1.1
1949	50.9	+1.5	83	24	1729	+222	58	††	30.24	+2.93	174	504.2	78	-4	72.3	+4.5
1950	49.1	-0.3	91	19	1556	+49	73	tt	36.51	+3.34	204	577.0	79	3	68.0	+0.2

<sup>\*</sup> New site and well commenced 1931. † Well dry frequently. § Well dry at times. †† Observation ceased.

The information necessary to compile the above table was kindly provided by George A. Lidster, Esq., F.R.Met.S., Borough Meteorologist.

# Part VIII

# SCHOOL HEALTH SERVICE

(The Forty-second Annual Report of the School Medical Officer)

#### **EDUCATION COMMITTEE**

The Mayor (Councillor R. FLEETWOOD-HESKETH, T.D., J.P., D.L.)

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Alderman T. Ball, J.P. (Vice-Chairman)

Alderman Dr. A. W. LIMONT, J.P.

Alderman F. W. REDDAWAY, J.P.

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#### SCHOOL HEALTH SERVICE

Routine Medical Inspection.—The arrangements for the Routine Medical Inspection ensure that all children are seen three times during their school life.

During 1950, all junior schools were visited, and the entrants and leavers were examined. The senior schools, King George V, the Girls' High School, Technical College and Art School, also the Modern Secondary Schools were visited, and special attention was given to the leaver group.

Entrants to the senior group schools were examined, prior to admission, at the school clinic.

As in previous years, all children not in one of the three main groups, are examined by the school nurse. Any child who appears to need further examination is then seen by the School Medical Officer. Often such special examinations are also requested by the Head Teacher because of poor school attendance or recent ill-health. The number of such special medical examinations made in school at the time of the routine inspection was 1,253. An innovation this year was the examination of 600 pupils of King George V School by the Mass Radiography Unit.

In Crossens Nursery School, which is recognised for the training of nursery nurses, examination of all children takes place each school term.

The numbers of full routine inspections carried out were:-

Primary Schools—	1950
Entrants	990
Leavers	942
SECONDARY SCHOOLS AND GRAMMAR SCHOOLS—	
Leavers	661

Attendance at Examination.—The parents of each child are notified of the place and time of examination. The presence of a parent is helpful to the examining Medical Officer, who may want a fuller and more accurate medical history than can be given by the child and the school teacher. In such cases, if the parent does not attend at the school examination, the mother is asked later to come to the school clinic with her child.

It is disappointing this year to find that there is a big decrease in the number of parents attending at all examinations. One reason for this may be the increasing number of mothers who, for economic reasons, take on full-time or part-time work, as soon as their children are of school age. When questioned about their non-attendance, the reply usually is that they realise that they will be sent for if anything abnormal is suspected, so they do not bother to come.

#### Percentage Attendance at Examination.

PRIMARY SCHOOLS—	1938	1949	1950
Entrants	79.9	77.5	60.7
Leavers	70.3	37.3	25.8
SECONDARY AND GRAMMAR SCHOOLS—			
Leavers	40.8	9.0	1.6

Refusal of Examination.—It is not yet understood by all the parents of the children attending the Local Authority Schools, that under Section 48 of the Education Act, 1944, there is a duty imposed upon them to present their children for examination at the Routine Medical Examination. Only four parents did not want to have their children examined, but after explanation it was agreed to in all cases.

#### Findings at Routine Medical Inspections

**Nutrition.**—At the Routine Inspection, all children are weighed and measured, and this, along with the clinical findings, leads to an assessment of the nutritional state.

When watching a group of modern school children at play, it would seem obvious that most of them are healthy and well fed. The observation is amply justified by the following figures, which give the nutritional state of the children who were examined this year and those of the two previous years for comparison.

	Children examined during the year	A. Good	B. Fair	C. Poor
1948	2,633	23.70	69.58	6.72
1949	2,903	25.73	71.03	3.24
1950	2,593	27.96	70.20	1.85

Heights and Weights.—Tables are also given which show the weight and height of children in 1950 compared with those in 1938. It is interesting to note that while the height remains fairly constant, the weights, expecially in the older children, show a big increase.

Aga last hinth day	19	938	- 19	950
Age last birthday	Height Ins.	Weight Lbs.	Height Ins.	Weight Lbs.
Age 5 years		11-11-11		-
Boys	42.6	42.4	43.2	43.3
Girls	42.3	41.2	42.0	42.1
Age 11 years				
Boys	54.8	76.6	55.1	78.8
Girls	57.0	77.7	55.4	76.7
Age 13 years				
Boys	59.4	90.3	60.5	94.3
Girls	61.3	90.6	62.5	95.9
Age 16 years				
Boys	66.3	120.7	66.1	133.9
Girls	63.6	117.7	63.5	123.7

School Meals and Milk.—There can be little doubt that the observations in the previous paragraph owe something to the provision of milk and meals for school children. A satisfying and balanced mid-day meal can be had at low cost by all who ask for it, and milk is provided free to all who want it.

Below are given the numbers of children receiving milk and/or meals in one day in October, 1950, with the four previous years for comparison:—

Year	Dinners	Milk
1946	2,593	7,365
1947	3,325	7,112
1948	4,212	7,414
1949	4,023	7,065
1950	4,593	6,910

Some children are provided with free meals. The families to which these children belong are usually suffering some hardship, such as illness or unemployment, and there is a danger of malnutrition in the family. Such mal-nurtition may also result from faulty food habits in the child or mis-management at home. Free meals may be recommended by the Medical Officer in all such cases, and supplied after investigation into the family circumstances. In 1950 free meals were supplied to 567 children.

#### Cleanliness, Clothing and Footwear

Cleanliness.—It is most unusual to find children who are dirty. Such children usually belong to the problem families of the borough and are persistent offenders.

Below are given tables showing the state of the cleanliness of hair, body and clothing in all groups of school children, along with the figures of last year for comparison.

	Ent	rants		nary	or Gr	ndary ammar vers		all
	1938	1950	1938	1950	1938	1950	1938	1950
Uncleanliness (Body) ,, (Head) Clothing Unsatisfactory Footwear Unsatisfactory	0.1 5.5 0.1 0.1	0.8	0.5 6.3 0.2 0.4	1.5 0.1	0.6 7.0 0.3 0.5	3.0	0.4 6.2 0.2 0.3	2.0 0.03

Clothing and Footwear.—It is very rare to find children with unsuitable clothes and footwear. This is very gratifying, especially as the prices of children's wear continue to rise. Parents are anxious and eager to have their children well and suitably dressed, and readily accept suggestions which may be made.

**Hair.**—The school nurses spend much time trying to improve the standards of hair cleanliness, and the results show that this is worth while.

During the school year the school nurses paid an average of 6.6 visits of inspection per school. They made 6,546 primary inspections and 13,010 re inspections of children from families where re-infestation was likely to occur. 204 children were excluded during the year for uncleanliness of the head.

#### Percentage of Children found at R.M.I. with nits in the hair

1938	1949	1950
6.0	2.5	2.0

#### Condition of Children in December, 1950

Corroca	D		Boys			Girls	
SCHOOL	Dept.	Clean	Nits	Vermin	Clean	Nits	Vermin
		%	%	%	%	0/	%
All Saints, C.E	Mixed	100.	-	_	94.44	5.56	-
Do	Infants	97.78	2.22	-	97.37	2.63	-
Ainsdale, C.E	Mixed	100.		-	100.	-	-
Ainsdale, R.C.	33	100.			94.12	5.88	-
Birkdale Mod. Sec	22	100.	_	-	93.72	6.28	-
Birkdale Council	,,	95.61	2.63	1.76	92.08	6.93	.99
Do	Infants	98.46	1.54	/_	98.46		1.54
Christ Church, C.E	Boys	99.45	.55	_	_		
Churchtown Council	Mixed	99.63	.37	_	97.33	2.67	-
Do	Infants	100.	_	-	97.09	2.91	_
Crossens, C.E	Mixed	97.97	2.03		98.80	1.20	_
Do. Nursery	Infants	100.	_	_	100.		-
Dean Cooke, R.C	Mixed	97.10	2.90		98.08	1.92	_
Emmanuel, C.E	Infants	100.		_	95.70	4.30	-
Farnborough Road	Mixed	98.75	1.25	_	95.51	3.93	.56
Do	Infants	100.	_	_	97.50	2.50	_
Holy Trinity	Mixed	100.	_	_	98.91	1.09	-
Linaker Street	Infants	96.84	1.05	2.11	97.44	2.56	_
Do	Mixed	100.	_		98.36	.82	.82
Meols Cop Mod. Sec	Girls	_	_		96.58	1.71	1.71
Ďo	Boys	99.74	.26	_	_		
Norwood Road Council	Mixed	99.39	.61	_	97.66	2.34	-
Do	Infants	100.	_	_	98.51	1.49	_
Our Lady of Lourdes	Senior	97.68	1.16	1.16	91.62	7.78	.60
Do	Junior	100.			97.30	2.70	_
St. Marie's R.C.	Mixed	100.	_	_	98.36	1.64	_
St. Philip's, C.E	33	100.	-	_	99.18	.82	-
SS. Simon and Jude	33	97.37	2.63	_	92.91	6.30	.79
St. Teresa's, R.C	22	93.05	4.17	2.78	98.59	-	1.41

#### Summary of Cleanliness Examinations-December, 1950

	Во	YS	Gn	RLS	To	TAL
	No.	%	No.	%	No.	%
Nits	24 8	0.7	92 14	3.0 0.4	116 22	1.8
Clean	3440	99.1	2968	96.6	6408	97.9

Vaccination.—The number of children vaccinated continued to be low. Of the 2,593 children who were examined at the Routine Inspections, only 34.2% were found to be vacinated.

**Immunisation.**—This year we have reason to be pleased with the results of the Immunisation Drive. The following table shows that 93.5% of the children in the Local Authority schools are now immunised.

Summary of Immunisation Returns-November, 1950

SCHOOL	Dept.	Number on Roll	Number Immun- ised	Number Unimmu- nised	Immun- ised
All Saints', C.E.	Mixed	132	122	10	92.4
Do	Infants	113	100	13	88.5
Ainsdale, C.E.	Mixed	192	172	20	89.6
Ainsdale, R.C.	,,	48	46	2	95.8
Birkdale Modern Secondary	33	475	468	7	98.5
Birkdale Council	"	212	208	4	98.1
Do	Infants	201	179	22	89.1
Christ Church Mod. Sec	Boys	200	191	9	95.5
Churchtown Council	Mixed	544	525	19	96.5
Do	Infants	204	199	5	97.5
Crossens, C.E.	Mixed	336	312	24	92.9
Crossens Nursery	"	40	39	1	97.5
Dean Cooke, R.C.	"	136	122	14	89.7
Emmanuel, C.E.	Infants	228	221	7	96.9
Farnborough Road Council	Mixed	459	408	51	88.8
Do	Infants	381	352	29	92.4
Holy Trinity, C.E.	Mixed	331	270	61	81.6
Linaker Street Council		317	285	32	89.9
Do	Infants	268	237	31	88.4
Meols Cop Modern Secondary	Girls	476	457	19	96.0
Do	Boys	414	395	19	95.4
Norwood Road Council	Mixed	316	292	24	92.4
Do.	Infants	219	214	5	97.7
Our Lady of Lourdes Mod. Sec	Mixed	389	380	9	97.7
Do. R.C	Junior	185	171	14	92.4
St. Marie's, R.C.	Mixed	116	96	20	82.8
St. Philip's, C.E.	22	273	253	20	92.7
SS. Simon and Jude's, C.E	33	194	180	14	92.8
St. Teresa's, R.C.	33	184	180	4	97.8
High School for Girls		488	467	21	95.7
King George V	_	568	531	37	93.5
Fechnical College	_	200	189	11	94.5
Arts and Crafts	_	30	28	2	93.3
TOTALS		8869	8289	580	93.5

#### Findings at Routine Inspection

Below is given a table showing a summary of defects found at the Routine Inspections. This year, as in the previous two years, defective teeth have taken second place to defects of the Nose and Throat, as the most common ailments of school children.

#### Summary of Defects found at Routine Inspection (Percentages)

Dunners	Entrants	Primary Leavers	Secondary and Grammar Leavers	All Groups
DEFECTS	Boys and Girls	Boys and Girls	Boys and Girls	Boys and Girls
Malnutrition Defective Teeth Defects of Nose and Throat Enlarged Cervical Glands Defects of Vision ,, Speech ,, Hearing ,, Circulation ,, Respiration ,, Nervous System Skin Disease Deformities	3.0 9.4 16.4 1.7 2.5 0.4 1.5 1.1 3.0 0.4 2.2 7.6	1.6 7.3 8.6 1.0 7.6 0.4 0.9 1.2 0.8 0.2 1.4 12.4	0.3 5.5 3.3 4.8 - 1.5 0.9 1.2 0.2 3.3 10.2	1.8 7.7 10.6 1.1 5.0 0.3 1.1 1.1 1.7 0.2 2.2 10.6

Not all of the defects found at Inspection require treatment. Below is given a table showing the number of children requiring, treatment

Number of Children found to be requiring Treatment

	Entrants	Primary Leavers	Secondary and Grammar School Leavers
No. of children examined No. of children requiring treatment	990 205	942 200	661 80
Percentage Requiring treatment	20.7	21.2	12.1

A further table gives a more detailed list of the findings, and the incidence per 1,000 inspections.

	Incidence per 1,000 inspections		
	1949	1950	
Skin Diseases	17.2	22.2	
Defects of Vision (Entrant Group not counted)	35.1	26.6	
Squint	4.9	1.2	
Other Eye Diseases	5.5	7.7	
Defects of Hearing	4.8	2.3	
Otitis Media	3.1	1.5	

	Incidence per 1	,000 inspections
	1949	1950
Chronic Tonsillitis	22.4	14.6
Adenoids	0.1	3.4
Adenoids and Chronic Tonsillitis	4.1	13.1
Other Nose and Throat Defects	16.2	11.57
Defects of Speech	4.5	1.9
Organic Heart Disease		3.0
Orthopaedic :-		
Posture	59.6	21.2
Flat foot	05.0	12.7
Other forms	1 = =	13.9
Developmental:—		
Hernia	3.8	1.1
Others	3.4	0.7
Psychological:—		
Development	2.1	0.7
Stability		

#### Ascertainment of Children requiring Special Educational Treatment

In the 1944 Education Act, it is particularly emphasised that Authorities should aim at making provision for these children who, by reason of physical or mental handicap, cannot benefit from education in an ordinary school.

Below are given the several categories of defect which require special educational treatment, and the number of children in Southport for whom provision must be made.

Category	Ascertained in 1950	Previously known to Department	In Special School
Blind	1	1	2
Partially sighted	_	_	
Deaf	1	8	9
Partially Deaf	_	8	7
Delicate	1	18	1
Diabetic	_	_	_
Educationally sub-normal:— (Recommended Special School) Educationally sub-normal -:—	5	32	2
(Recommended Special Teaching in Special Class at Ordinary School)	7	96	_
Epileptic	_	6	2
Maladjusted	3	13	3
Physically handicapped	10	67	7
Defective Speech	16	33	-

As will be seen the greatest need is for some provision for the educationally sub-normal child, as it is almost impossible to obtain a vacancy in a residential school.

#### Arrangements for Treatment

All the clinics are held at the Central Clinic at 2 Church Street, and the weekly time-table is as follows:—

DAY	TIME	CLINIC	
Monday	9-30 am to 12 noon.	Dressings Clinic	2 Nurses
	2-0 p.m. to 4 p.m.	Doctors' Minor Ailment Clinic	{2 Doctors 3 Nurses
Tuesday	9-30 a.m. to 12 noon 9-30 a.m. 10-45 a.m. 9 a.m.	Dressings Clinic Sunlight Clinic (Boys) " (Girls) "Eye Clinic"	1 Nurse 1 Nurse 1 Doctor 1 Nurse
	2 p.m. to 4 p.m. 2 p.m. to 4 p.m. 2 p.m.	Sunlight Clinic (Babies)	1
Wednesday	9-30 a.m. to 12 noon	Dressings Clinic	2 Nurses
	2 p.m. to 4 p.m. 2 p.m. to 4 p.m. 2 p.m <sup>*</sup>	Dressings Clinic	1 Nurse 1 Nurse 1 Doctor 1 Physio- therapis
Thursday	9-30 a.m. to 12 noon 9-30 a.m. 10-45 a.m.	Dressings Clinic Sunlight Clinic (Boys) ,, (Girls)	1 Nurse 1 Nurse
	2 p.m. to 4 p.m.	Skin Clinic	{1 Doctor 3 Nurses
Friday	9-30 a.m. to 12 noon 9-30 a.m.	Dressings Clinic*Ear, Nose and Throat Clinic	1 Nurse {1 Doctor 1 Nurse
	2 p.m. to 4 p.m.	Dressings Clinic Immunisation.  Sunlight (Babies)	1 Nurse 1 Doctor 1 Nurse 1 Nurse
Saturday	9 a.m. to 12 noon 9 a.m. 10-30 a.m.	Dressings Clinic	1 Nurse 1 Nurse

<sup>\*</sup> By appointment only.

Dental Clinics are held daily by two dentists.

A summary of the attendances at these clinics shows the large amount of work, which, year by year, passes through the hands of the medical, dental and nursing staff.

Canada	Attendances		
CLINIC	1949	1950	
Nurses Treatment Clinic	8891	8532	
Minor Ailment Clinic	2997	2717	
Skin Clinic	910	1216	
Tonsils and Adenoids Clinic	300	227	
Tonsils and Adenoids (Southport Infirmary)	198	88	
Ophthalmic Clinic	1154	1129	
Artifical Sunlight Clinic	2735	2399	
Aural Clinic	1441	1282	
Dental Clinic	6945	5947	
Immunisation Clinic (complete course— 84 in			
1950, 182 in 1949)	594	264	
Immunisation Clinic (re-inforcing dose)	970	244	
Total Number of Attendances	27133	24045	

Nurses' Treatment Clinic.—The scheme inaugurated in 1945 is still followed. Children who are absent from school, and children from junior schools attend for treatment in the morning, while those from senior schools come in the afternoon—grammar school and high school students coming after school hours. This scheme works well with the co-operation of the school authorities, and excessive loss of school time is avoided, and the time spent in the clinic by parents accompanying children is reduced to a minimum.

Minor Ailment Clinic.—This clinic continues to be well attended, and in the winter months tends to be too busy.

In addition to minor ailments, cases may be seen here before being directed to attend hospitals, etc. for more specialised treatment. Some cases, which are seen at Routine Inspection, must also be followed up for some months, and these cases are supervised at the Minor Ailment Clinic, along with other classes of handicapped children.

In 1950, 2,717 children attended the clinic; 97 cases were referred to the Southport Infirmary for a specialist opinion, 6 to the Royal Liverpool Children's Hospital and 2 to the Royal Southern Hospital.

**Skin Clinic.**—One specialist clinic is held each week with a dermatologist in attendance. It is a busy clinic, and a great variety of skin diseases are treated, many in the early stages. During the year 1,216 attendances were made at the clinic; one child was admitted to the Skin Department at the Southport Infirmary from the clinic. 8 children were notified as suffering from scabies this year as compared with 13 last year.

Eye Clinic.—This is a very valuable clinic, as a specialist opinion of an eye defect can be obtained as soon as one is detected. 78 specialist clinics were held during the year; 249 new cases were inspected and 448 cases were seen for supervision and revision of their spectacles. 53 cases were given further treatment at the Southport Infirmary.

Ear, Nose and Throat Clinic.—One specialist clinic is held weekly and the clinic is a busy one. Cases are referred to this clinic from the Minor Ailment Clinic, the Routine Medical Inspections at school and sometimes by general practitioners.

Any operative treatment or further hospital treatment is carried out at Southport Infirmary. Other cases are given treatment at the Nurses' Treatment Clinics.

In 1950 333 children attended for the first time, 88 attended for observation of progress from previous years and 32 children under five years of age were also seen. In 88 cases, operations were performed for diseased tonsils and/or adenoids. Other cases included acute and sub-acute inflammation of the mastoid air cells, otitis media, sinus infections, defective hearing, etc., and other defects.

Artificial Sunlight Clinic.—Clinics are held in the mornings for school children, and in the afternoons for children under five years of age. A wide variety of complaints are treated at this clinic; these include tuberculous glands, bronchitis, general debility, rachitic conditions, catarrhal defects and certain skin complaints.

96 school children made a total of 1,555 attendances; 33 children under school age were also treated—total attendances at the clinic were 2,399.

#### Treatment of Other Conditions

Orthopaedic Conditions.—A physiotherapist was on the staff until the end of July, 1950. During this time she supervised the artificial sunlight clinics for school children and also held Remedial Exercise Clinics for children found to be suffering from a variety of orthopaedic conditions. The clinic was held at Hampton Road Welfare Centre and 207 children attended for exercises.

In addition, 44 cases were sent to the Southport Infirmary and the Promenade Hospital for specialist opinion and treatment.

Tuberculosis.—8 new cases of tuberculosis in school children were notified during 1950.

Cases were as follows:-

Pulmonary	1
Cervical Glands	4
Abdominal Glands	1
Shoulder	1
T.B. Meningitis	1

School children suspected to be suffering from tuberculosis are sent to the various clinics at Southport Infirmary for examination and treatment.

**Delicate Children.**—There are 19 children suffering from asthma, bronchitis, rheumatism, etc., who do not respond well to ordinary school life. It is almost impossible to find accommodation in Residential Special Schools and meantime much school time is lost with retardation in school work for the children.

Infectious Diseases.—Notifications were as follows with figures for 1949 for comparison:—

	1949	1950
Measles	360	257
Rubella	23	16
Scarlet Fever	83	123
Chicken Pox	346	151
Diphtheria	_	_
Whooping Cough	82	167
Whooping Cough	5	8

The minimum periods of exclusion from school of persons suffering from infectious diseases and of persons who have been in contact with such cases are as follow:—

Disease	Period of Exclusion of Children Suffer- ing from Infectious Disease	Period of Exclusion of Children living in a house in which there is or has recently been Infectious Disease
*SCARLET FEVER	5 weeks	<ol> <li>Children living in a house in which there is, or has recently been, a case of Scarlet Fever must be excluded from School for 7 days after the removal of the patient to the Isolation Hospital and for a further 7 days after the return of the patient from the Hospital, or</li> <li>If the patient is nursed at home, until 7 days after the disinfection of the premises.</li> </ol>
*DIPHTHERIA	4 weeks	<ol> <li>Children living in a house in which there is, or has recently been, a case of <b>Diphtheria</b> must be excluded for 7 days after the removal of the patient to the Isolation Hospital, or</li> <li>While the patient is being nursed at home. Contacts of <b>Diphtheria</b> carriers go to school.</li> </ol>
MEASLES	2 weeks from the date of appear- ance of the rash	Children under 7 living in a house in which there is a case of <b>Measles</b> must stay away from school, whether they have had the disease or not, for 2 weeks from the appearance of rash in the last case. Children over 7, if they have had the disease, may go to school, but if not they must stay at home for 2 weeks from the commencement of the last case.
WHOOPING COUGH	5 weeks.	Children under 7 years of age, for 3 weeks from the commencement of the last case.
RUBELLA(German Measles)	10 days.	Children not themselves suffering must attend school.
CHICKEN POX	3 weeks and till all scabs have disappeared.	Children not themselves suffering must attend
MUMPS	3 weeks.	school.

Note.—The above periods of exclusion apply also to teachers, caretakers or other persons attending the school.

\*No child is to be re-admitted after suffering from Scarlet Fever or Diphtheria, or after having been a carrier of Diphtheria till he or she has been passed by the School Medical Officer.

Ringworm or Scabies.—No child is to be re-admitted after suffering from either of these diseases without a Doctor's Certificate.

#### Miscellaneous School Medical Work

Examination of Boarded-out Children	25
" for Scholarships	102
" " " Institutions	19
" ,, Children's Sanatorium	3
" Free Meals and/or Milk	4
Entertainments	25
Admission to Residential Nursery	27
Admission to Children's Home, Eversley House	24
Admission to Training Ship	-
Form completed for Adoption	_
Children notified to the local Mental Deficiency Authority	9
Employment Examinations	165
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MEDICAL INSPECTIONS OF CHILDREN ATTENDING PRIMARY,	
MEDICAL INSPECTIONS OF CHILDREN ATTENDING PRIMARY,	
MEDICAL INSPECTIONS OF CHILDREN ATTENDING PRIMARY, SECONDARY AND GRAMMAR SCHOOLS	
Medical Inspections of Children Attending Primary, Secondary and Grammar Schools Year ended 31st December, 1950	
Medical Inspections of Children Attending Primary, Secondary and Grammar Schools  Year ended 31st December, 1950  A.—Routine Medical Inspections	990
Medical Inspections of Children Attending Primary, Secondary and Grammar Schools  Year ended 31st December, 1950  A.—Routine Medical Inspections  Number of Inspections in the prescribed Groups:— Entrants Primary Leavers	990 942
Medical Inspections of Children Attending Primary, Secondary and Grammar Schools  Year ended 31st December, 1950  A.—Routine Medical Inspections  Number of Inspections in the prescribed Groups:— Entrants	
Medical Inspections of Children Attending Primary, Secondary and Grammar Schools  Year ended 31st December, 1950  A.—Routine Medical Inspections  Number of Inspections in the prescribed Groups:— Entrants Primary Leavers Secondary and Grammar Leavers	942 661
Medical Inspections of Children Attending Primary, Secondary and Grammar Schools  Year ended 31st December, 1950  A.—Routine Medical Inspections  Number of Inspections in the prescribed Groups:— Entrants Primary Leavers	942 661
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Medical Inspections of Children Attending Primary, Secondary and Grammar Schools  Year ended 31st December, 1950  A.—Routine Medical Inspections  Number of Inspections in the prescribed Groups:— Entrants Primary Leavers Secondary and Grammar Leavers  Total  Number of other Routine Inspections	942 661
Medical Inspections of Children Attending Primary, Secondary and Grammar Schools  Year ended 31st December, 1950  A.—Routine Medical Inspections  Number of Inspections in the prescribed Groups:— Entrants Primary Leavers Secondary and Grammar Leavers  Total	942 661
Medical Inspections of Children Attending Primary, Secondary and Grammar Schools  Year ended 31st December, 1950  A.—Routine Medical Inspections  Number of Inspections in the prescribed Groups:— Entrants Primary Leavers Secondary and Grammar Leavers  Total  Number of other Routine Inspections	942 661
Medical Inspections of Children Attending Primary, Secondary and Grammar Schools  Year ended 31st December, 1950  A.—Routine Medical Inspections  Number of Inspections in the prescribed Groups:— Entrants Primary Leavers Secondary and Grammar Leavers  Total  Number of other Routine Inspections  B.—Other Inspections	942 661 2,593
Medical Inspections of Children Attending Primary, Secondary and Grammar Schools  Year ended 31st December, 1950  A.—Routine Medical Inspections  Number of Inspections in the prescribed Groups:— Entrants Primary Leavers Secondary and Grammar Leavers  Total  Number of other Routine Inspections  Number of Special Inspections	942 661 2,593 —

#### TABLE I (continued)

#### C .- Children found to Require Treatment

Number of Individual Children found at Routine Medical Inspection to require treatment (excluding Defects of Nutrition, Uncleanliness and Dental Diseases).

	For defective Vision (excluding squint)	For all other conditions recorded in Table IIa	Total
Prescribed Groups :— Entrants Primary Leavers Secondary and Grammar Leavers	9 60 26	196 140 54	205 200 80
Total (Prescribed Groups) Other Routine Inspections	95	390	485 —
Totals	95	390	485

TABLE II

A.—Return of Defects found by Medical Inspection in the year ended 31st December, 1950

	Routine	Inspections	Special Inspections		
	Number	of Defects	Number of to Requiring Treatment t	of Defects	
Defect or Disease	Requiring Treatment	Requiring to be kept under ob- servation but not re- quiring treatment		Requiring to be kept under ob- servation but not re- quiring treatment	
(1)	(2)	(3)	(4)	(5)	
SKIN:— Ringworm: Scalp do. Body Scabies	=	=	1 2 5	=	
Impetigo Other Diseases (non-T.B.)	33	25		16	
Blepharitis	10	5		1 1	
Keratitis		-	_	=	
Other Conditions (Excluding Defec- tive Vision and Squint)	- 10	4	32	3	
Defective Vision (excluding Squint) Squint	75 10	5 8		1 2	
EAR:— Defective Hearing Otitis Media Other Ear Diseases	6 4 4	3 4 8	8 7 49	1 5 3	
Nose and Throat:— Chronic Tonsillitis only Adenoids only	38	109	57	22	
Chronic Tonsillitis and Adenoids Other conditions	35 30	18 34	13 104	18	

(continued overleaf)

	Routine I	inspections	Special I	nspections	
	Number	of Defects	Number of Defects		
Defective Speech  HEART AND CIRCULATION:—  HEART DISEASE:—  Organic  Functional  Anaemia  LUNGS:—  Bronchitis  Other Non-Tuberculous Diseases  TUBERCULOSIS:—  Pulmonary:—Definite  Suspected  Non-Pulmonary:—Glands  Bones and Joints  Skin  Other Forms  HERVOUS SYSTEM:—  Epilepsy  Chorea  Other Conditions	Requiring Treatment	Requiring to be kept under ob- servation but not re- quiring treatment	Requiring Treatment	Requiring to be kept under ob- servation but not re- quiring treatment	
Enlarged Cervical Glands (Non-T.B.) Defective Speech	(2) 5 5	(3) 24 3	(4) 15 5	(5) 10 2	
Organic	<u>8</u> 	8 1 7	1 1 4		
Lungs:— Bronchitis Other Non-Tuberculous Diseases	7 17	15 7	21 14	2	
Pulmonary :—Definite	=	=	=	=	
Bones and Joints	Ξ	Ξ	<sup>2</sup>	=	
Nervous System :— Other Forms	_	_	_	_	
Chorea Other Conditions		5	3 4	=	
Orthopaedic :— Posture Flat Foot	54 33	39 42	91 69	87 51	
Other Forms	36	48	84	67	
Hernia Other PSYCHOLOGICAL:—	2 2	5 2	1	=	
Development Stability	5	=	12 11	2	
Other Diseases and Defects (excluding Uncleanliness and Dental Diseases)	40	58	511	174	
Totals	485	491	1640	472	

# B.—Classification of the General Condition of Pupils Inspected during the Year in the Routine Age Groups

AGE GROUPS	Number of	A Good		B Fair		C Poor	
AGE GROUPS	Pupils Inspected	No.	%	No.	%	No.	%
Entrants	990 942 661	303 272 150	30.61 28.87 22.70	656 653 511	66.27 69.31	30 16	3.03 1.69 0.30
Other Routine Inspections	- 001	-	-	-	77.31	_	- 0.30
Totals	2593	725	27.96	1820	70.20	48	1.85

#### TABLE III

#### INFESTATION WITH VERMIN

(i)	Total number of examinations in the schools by the School Nurses	19556
(ii)	Total number of individual pupils found to be infested	138
(iii)	Number of individual pupils in respect of whom cleansing notices were issued (Section 54(2), Education Act, 1944)	21
(iv)	Number of individual pupils in respect of whom cleansing orders were issued (Section 54(3), Education Act, 1944)	_
(v)	Number of cases in which legal proceedings were taken under the Education Act, 1944	_

#### TABLE IV

TREATMENT OF PUPILS ATTENDING MAINTAINED PRIMARY AND SECONDARY SCHOOLS
(INCLUDING SPECIAL SCHOOLS)

#### NOTES-

- (a) Treatment provided by the Authority includes all defects treated or under treatment during the year by the Authority's own staff, however brought to the Authority's notice, *i.e.* whether by periodic inspection, special inspection, or otherwise, during the year in question or previously.
- (b) Treatment provided otherwise than by the Authority includes all treatment known by the Authority to have been so provided, including treatment undertaken in school clinics by the Regional Hospital Board.

Group I.—Diseases of the Skin (excluding uncleanliness, for which see Table III)

	Number of or under trea	tment during
	By the Authority	Otherwise
Ringworm—(i) Scalp	1	
(ii) Body		_
Impetigo	12	_
Other Skin Disease	496	
	518	_

#### TABLE IV (continued)

# Group 2.- Eye Diseases, Defective Vision and Squint

	Number of Cases dealt with		
	By the Authority	Otherwise	
External and other, excluding Errors of Refraction and Squint	164		
Errors of Refraction (including Squint)	638*		
TOTAL	802	_	
Number of Pupils for whom Spectacles were—  (a) Prescribed  (b) Obtained	217* 176*	= =	
TOTAL	393		

<sup>\*</sup>Including cases dealt with under arrangements with the Supplementary Ophthalmic Services.

Group 3.—Diseases and Defects of Ear, Nose and Throat

	Number of Cases treated	
	By the Authority	Otherwise
Received Operative Treatment :-		
	21	_
(a) For Diseases of the Ear (b) For Adenoids and Chronic Tonsillitis (c) For other Nose and Throat	88	_
Conditions	3	_
Received other forms of treatment	8	_
TOTAL	118	

#### Group 4.—Orthopaedic and Postural Defects

(a)	Number treated as in-patients in hospitals1						
		By the Authority	Otherwise				
(b)	Number treated otherwise, e.g., in clinics or out-patient departments	519	44				

# TABLE IV (continued)

# Group 5.—Child Guidance Treatment

	Number of C	ases treated
	In the Authority's Child Guidance Clinics	Elsewhere
Number of Pupils treated at Child Guidance Clinics	_	15
Group 6.—Speech The	erapy	
	Number of Ca	ases Treated
	By the Authority	Otherwise
Number of Pupils treated by Speech Therapists	_	-
Group 7.—Other Treatme	ent given	
	Number of C	Cases treated
	By the Authority	Otherwise
Miscellaneous Minor Ailments	1182	
TABLE V		
DENTAL INSPECTION AND	ГREATMENT	
1. Number of pupils inspected by the Author	ity's Dental Office	ers:—
(a) Routine Age Groups—		
	12 676	
	13 701	
5 386	14 587	
	15 239	
	16 161	
	17 65 18 41	
	19 8	
11 (10	TOTAL	5646
(b) Specials		1070
(c) Total (Routine and Specials)		
		0/10

#### TABLE V (continued)

2.	Found to require treatment		4251
3.	Number referred for treatment		4015
4.	Number actually treated		. 2925
5.	Attendances made by pupils for treatm	nent	. 5149
6.	Half-days devoted to-Inspection		. 50
	Treatment		. 727
		Total (6)	. 777
7.	Fillings-Permanent Teeth	979	
	Temporary Teeth	1696	
	1	Total (7)	2675
8.	Number of teeth filled—	20111 (1)	
-	Permanent Teeth	1552	
	Temporary Teeth	938	
	Temporary Teem	Total (8)	2490
9.	Extractions—	10tai (0)	. 2100
	Permanent Teeth	622	
	Temporary Teeth	3565	
		Total (9)	4187
10.	Administration of general anaesthetics	for extraction	
10.	ridininistration of general anaestricties	TOT CALIBOTION	
11.	Other Operations—		
	Permanent Teeth	538	
	Temporary Teeth	552	
		Total (11)	. 1090

#### TABLE VI

STATEMENT OF THE NUMBER OF CHILDREN NOTIFIED DURING THE YEAR ENDED 31ST DECEMBER, 1949 BY THE LOCAL EDUCATION AUTHORITY TO THE LOCAL MENTAL DEFICIENCY AUTHORITY, UNDER SECTION 57, SUB-SECTIONS (3) AND (5) OF THE EDUCATION ACT, 1944.

Total number of children notified :-

Section 57, Sub-section (3)	 6
Section 57, Sub-section (5)	 3

Section 57 of the Education Act, 1944, is as follows:-

Sub-section (3).—If, after considering the advice given with respect to any child by a medical officer in consequence of any such medical examination as aforesaid and any reports or information which the local education authority are able to obtain from teachers or other persons with respect to the ability and aptitude of the child, the authority decide that the child is suffering from a disability of mind of such a nature or to such an extent as to make him incapable of receiving education at school, it shall be the duty of the authority to issue to the local authority for the purposes of the Mental Deficiency Act, 1913, a report that the child has been found incapable of receiving education at school. Provided that, before issuing such a report with respect to any child, the local education authority shall give to the parent of the child not less than 14 days' notice in writing of their intention to do so, and

if within that period the parent refers to the Minister the question whether such a report should be issued, the report shall not be issued except by direction of the Minister.

Sub-section (5).—If the local education authority are satisfied that any child in attendance at a school maintained by them or at any special school not so maintained is suffering from a disability of mind of such a nature or to such an extent that he will, in their opinion, require supervision after leaving school, the authority shall before the child ceases to be of compulsory school age issue to the local authority for the purposes of the Mental Deficiency Act, 1913, and to the parent of the child, a report that by reason of a disability of mind the child may require supervision after leaving school.

TABLE VII
PRIMARY, SECONDARY AND GRAMMAR SCHOOLS
FINDINGS AT ROUTINE MEDICAL INSPECTION

	Entrants		Primary Leavers		Secondary & Grammar Leavers		Total	
	No.	%	No.	%	No.	%	No.	%
Listed for Inspection	_	_	_	_	_	_	2780	_
Absent from Inspection	_	_	-	-	-		187	
Parent refused Inspection	-	-	_	-	_	-	-	
Actually Inspected	990	_	942	-	661	-	2593	-
Parent or Guardian present	608	61.4	249	26.4	11	1.6	868	33.4
Unvaccinated	541	54.7	685	72.7	481	72.7	1707	65.8
Unsatisfactory clothing	_		1	0.1	_	-	1	0.0
" footwear	-	-		-	-	-	-	-
Malnutrition	30	3.0	16	1.6	2	0.3	48	1.8
Nits in the Hair	7	0.7	22	2.3	19	2.8	48	1.8
Verminous Hair	1	0.1	3	0.3	1	0.1	5	0.2
,, Clothing	3	0.3	1	0.1	-	-	4	0.2
Bodies Dirty	-	_	-			=	-	
Defective Teeth	91	9.8	69	7.3	37	5.5	197	7.5
Nose and Throat :-								
Enlarged Tonsils and Adenoids	75	7.5	48	5.0	24	3.6	147	5.6
Other Conditions	34	3.4	22	2.3	8	1.2	64	2.4
Glands in the Neck	19	1.9	10	1.1	-	-	29	1.1
Eye:-		0.0	20	0.1	2	0.4	20	
External Eye Disease	6	0.6	20	2.1	3	0.4	29	1.1
Defective Vision	7	0.7	49	5.2	24	3.6	80	3.0
Squint	12	1.2	3	0.3	3	0.4	18	0.6
EAR :—	2	0.2	2	0.2	5	0.7	9	0.3
Defective Hearing	13	1.3	2 5	0.5	2	0.7	20	0.3
Ear Disease Speech Defects	4	0.4	4	0.4	4	-	8	0.3
HEART AND CIRCULATION :—	4	0.4	4	0.4		1	0	0.5
Cardiac Disease	6	0.6	6	0.6	5	0.7	17	0.6
Anaemia	5	0.5	6	0.6	1	0.1	12	0.4
Lung Disease	30	3.0	8	0.8	8	1.2	46	1.7
Nervous Disease	4	0.4	2	0.2	1	0.1	7	0.3
Tuberculosis		-						
Rickets	_	_	_	_	_	_	_	_
Deformities :—								
Posture, Flat Feet, etc	74	7.4	110	11.6	68	10.1	252	9.7
Skin Disease	22	2.2	14	1.5	22	3.3	58	2.2
DEVELOPMENT :—	1000000	1000	100	1000				
(a) Hernia	6	0.6	1	0.1	_	_	17	0.3
(b) Others	3	0.3	1	0.1		-	4	0.2
PSYCHOLOGICAL :-		188						
(a) Development	2	0.2	3	0.3	-	_	5	0.2
(b) Stability		_	-	_	-	-	_	-
Other Disease or Defect		3.6	38	4.0	14	2.1	88	3.3

TABLE VIII

PRIMARY, SECONDARY AND GRAMMAR SCHOOLS

AVERAGE HEIGHTS AND WEIGHTS (Age last Birthday)

		BOYS		1938	(	GIRLS	
No. Inspected	Age last birthday	Ft. In.	St. Lbs.	No. Inspected	Age last birthday	Ft. In.	St. Lbs.
32	3	3- 1.7	2- 7.8	33	3	2-10.3	2 6.9
88	4	3-4.6	2-11.3	80	4	3-4.0	2- 9.1
171	5	3- 6.6	3-0.4	175	5	3- 6.3	2-13.2
64	6	3- 8.7	3- 3.8	60	6	3- 8.9	3-4.1
28	7	3-10.5	3- 9.9	37	7	3-10.9	3- 7.4
281	8	4-1.4	4- 0.0	291	8	4- 1.6	3-13.2
59	9	4- 3.3	4- 4.5	54	9	4- 3.9	4- 7.8
40	10	4- 5.3	4-10.0	42	10	4- 7.1	5- 0.5
83	11	4- 6.8	5- 6.6	55	11	4- 9.0	5— 7.7
362	12	4- 8.6	5-10.7	324	12	4-10.5	5-10.7
148	13	4-11.4	6 6.3	110	13	5- 1.3	7- 0.6
107	14	5- 2.3	7— 6.2	79	14	5 4.5	7-12.1
91	15	5- 5.7	8- 7.2	107	15	5- 3.4	8- 1.6
43	16	5- 6.3	8 8.7	25	16	5- 3.6	8- 5.7
23	17	5— 7.7	9 6.6	15	17	5— 5.5	8-4.9
11	18	5— 7.6	9— 5.9	2	18	5- 3.8	8- 6.6
1,631				1,489			
		BOYS		1950	G	IRLS	
No.	Age last	Ft. In.	St. Lbs.	No.	Age last	Ft. In.	St. Lbs.
Inspected	birthday		Ot. 2503.	Inspected	birthday	14. 111.	Ot. 203.
Inspected 50		3— 2.3	2—10.1			3— 2.3	2— 7.2
	birthday			Inspected	birthday		
50	birthday 3	3— 2.3	2—10.1	Inspected 58	birthday 3	3— 2.3	2— 7.2
50 147	birthday 3 4	3— 2.3 3— 4.7	2—10.1 2—12.5	Inspected 58 113	birthday 3 4	3— 2.3 3— 4.8	2— 7.2 2— 9.6
50 147 189	birthday 3 4 5	3— 2.3 3— 4.7 3— 7.2	2—10.1 2—12.5 3— 1.3	Inspected 58 113 139	birthday 3 4 5	3— 2.3 3— 4.8 3— 6.0	2— 7.2 2— 9.6 3— 0.1
50 147 189 57	birthday 3 4 5 6	3— 2.3 3— 4.7 3— 7.2 3— 9.1	2—10.1 2—12.5 3— 1.3 3— 4.1	113 139 56	birthday 3 4 5	3— 2.3 3— 4.8 3— 6.0 3— 9.2	2— 7.2 2— 9.6 3— 0.1 3— 3.9
50 147 189 57 15	birthday 3 4 5 6 7	3— 2.3 3— 4.7 3— 7.2 3— 9.1 3—11.4	2—10.1 2—12.5 3— 1.3 3— 4.1 3—11.0	Inspected 58 113 139 56 25	birthday 3 4 5 6 7	3— 2.3 3— 4.8 3— 6.0 3— 9.2 3—10.0	2— 7.2 2— 9.6 3— 0.1 3— 3.9 3—10.1
50 147 189 57 15 27	birthday 3 4 5 6 7 8	3— 2.3 3— 4.7 3— 7.2 3— 9.1 3—11.4 4— 2.5	2—10.1 2—12.5 3— 1.3 3— 4.1 3—11.0 4— 5.5	Inspected 58 113 139 56 25 32	birthday 3 4 5 6 7 8	3— 2.3 3— 4.8 3— 6.0 3— 9.2 3—10.0 4— 2.6	2— 7.2 2— 9.6 3— 0.1 3— 3.9 3—10.1 4— 1.9
50 147 189 57 15 27	birthday 3 4 5 6 7 8	3— 2.3 3— 4.7 3— 7.2 3— 9.1 3—11.4 4— 2.5 4— 4.9	2—10.1 2—12.5 3— 1.3 3— 4.1 3—11.0 4— 5.5 5—11.5	Inspected 58 113 139 56 25 32 16	birthday 3 4 5 6 7 8	3— 2.3 3— 4.8 3— 6.0 3— 9.2 3—10.0 4— 2.6 4— 3.6	2— 7.2 2— 9.6 3— 0.1 3— 3.9 3—10.1 4— 1.9 4— 8.3
50 147 189 57 15 27 15 205	birthday 3 4 5 6 7 8 9	3— 2.3 3— 4.7 3— 7.2 3— 9.1 3—11.4 4— 2.5 4— 4.9 4— 5.8	2—10.1 2—12.5 3— 1.3 3— 4.1 3—11.0 4— 5.5 5—11.5 5— 1.6	Inspected 58 113 139 56 25 32 16 184	birthday 3 4 5 6 7 8 9 10	3— 2.3 3— 4.8 3— 6.0 3— 9.2 3—10.0 4— 2.6 4— 3.6 4— 6.1	2— 7.2 2— 9.6 3— 0.1 3— 3.9 3—10.1 4— 1.9 4— 8.3 4— 0.1
50 147 189 57 15 27 15 205 572	birthday 3 4 5 6 7 8 9 10 11	3— 2.3 3— 4.7 3— 7.2 3— 9.1 3—11.4 4— 2.5 4— 4.9 4— 5.8 4— 7.1	2—10.1 2—12.5 3— 1.3 3— 4.1 3—11.0 4— 5.5 5—11.5 5— 1.6 5— 8.8	Inspected 58 113 139 56 25 32 16 184 252	birthday 3 4 5 6 7 8 9 10 11	3— 2.3 3— 4.8 3— 6.0 3— 9.2 3—10.0 4— 2.6 4— 3.6 4— 6.1 4— 7.4	2— 7.2 2— 9.6 3— 0.1 3— 3.9 3—10.1 4— 1.9 4— 8.3 4— 0.1 5— 6.7
50 147 189 57 15 27 15 205 572 29	birthday 3 4 5 6 7 8 9 10 11	3— 2.3 3— 4.7 3— 7.2 3— 9.1 3—11.4 4— 2.5 4— 4.9 4— 5.8 4— 7.1 4—10.3	2—10.1 2—12.5 3— 1.3 3— 4.1 3—11.0 4— 5.5 5—11.5 5— 1.6 5— 8.8 5— 7.6	Inspected 58 113 139 56 25 32 16 184 252 39	birthday 3 4 5 6 7 8 9 10 11 12	3— 2.3 3— 4.8 3— 6.0 3— 9.2 3—10.0 4— 2.6 4— 3.6 4— 6.1 4— 7.4 4— 9.6	2— 7.2 2— 9.6 3— 0.1 3— 3.9 3—10.1 4— 1.9 4— 8.3 4— 0.1 5— 6.7 6—11.0
50 147 189 57 15 27 15 205 572 29 26	birthday 3 4 5 6 7 8 9 10 11 12 13	3— 2.3 3— 4.7 3— 7.2 3— 9.1 3—11.4 4— 2.5 4— 4.9 4— 5.8 4— 7.1 4—10.3 5— 0.5	2—10.1 2—12.5 3— 1.3 3— 4.1 3—11.0 4— 5.5 5—11.5 5— 1.6 5— 8.8 5— 7.6 6—10.3	Inspected 58 113 139 56 25 32 16 184 252 39 63	birthday 3 4 5 6 7 8 9 10 11 12 13	3— 2.3 3— 4.8 3— 6.0 3— 9.2 3—10.0 4— 2.6 4— 3.6 4— 6.1 4— 7.4 4— 9.6 5— 2.5	2— 7.2 2— 9.6 3— 0.1 3— 3.9 3—10.1 4— 1.9 4— 8.3 4— 0.1 5— 6.7 6—11.0 6— 0.6
50 147 189 57 15 27 15 205 572 29 26 72	birthday 3 4 5 6 7 8 9 10 11 12 13 14	3— 2.3 3— 4.7 3— 7.2 3— 9.1 3—11.4 4— 2.5 4— 4.9 4— 5.8 4— 7.1 4—10.3 5— 0.5 5— 2.5	2—10.1 2—12.5 3— 1.3 3— 4.1 3—11.0 4— 5.5 5—11.5 5— 1.6 5— 8.8 5— 7.6 6—10.3 7— 7.3	Inspected 58 113 139 56 25 32 16 184 252 39 63 101	birthday 3 4 5 6 7 8 9 10 11 12 13 14	3— 2.3 3— 4.8 3— 6.0 3— 9.2 3—10.0 4— 2.6 4— 3.6 4— 6.1 4— 7.4 4— 9.6 5— 2.5 5— 1.7	2— 7.2 2— 9.6 3— 0.1 3— 3.9 3—10.1 4— 1.9 4— 8.3 4— 0.1 5— 6.7 6—11.0 6— 0.6 7— 7.1
50 147 189 57 15 27 15 205 572 29 26 72 86	birthday 3 4 5 6 7 8 9 10 11 12 13 14 15	3— 2.3 3— 4.7 3— 7.2 3— 9.1 3—11.4 4— 2.5 4— 4.9 4— 5.8 4— 7.1 4—10.3 5— 0.5 5— 2.5 5— 4.0	2—10.1 2—12.5 3— 1.3 3— 4.1 3—11.0 4— 5.5 5—11.5 5— 1.6 5— 8.8 5— 7.6 6—10.3 7— 7.3 8— 1.7	Inspected 58 113 139 56 25 32 16 184 252 39 63 101 40	birthday 3 4 5 6 7 8 9 10 11 12 13 14 15	3— 2.3 3— 4.8 3— 6.0 3— 9.2 3—10.0 4— 2.6 4— 3.6 4— 6.1 4— 7.4 4— 9.6 5— 2.5 5— 1.7 5— 2.8	2— 7.2 2— 9.6 3— 0.1 3— 3.9 3—10.1 4— 1.9 4— 8.3 4— 0.1 5— 6.7 6—11.0 6— 0.6 7— 7.1 8— 0.6
50 147 189 57 15 27 15 205 572 29 26 72 86 47	birthday 3 4 5 6 7 8 9 10 11 12 13 14 15 16	3— 2.3 3— 4.7 3— 7.2 3— 9.1 3—11.4 4— 2.5 4— 4.9 4— 5.8 4— 7.1 4—10.3 5— 0.5 5— 2.5 5— 4.0 5— 6.1	2—10.1 2—12.5 3— 1.3 3— 4.1 3—11.0 4— 5.5 5—11.5 5— 1.6 5— 8.8 5— 7.6 6—10.3 7— 7.3 8— 1.7 9— 7.9	Inspected 58 113 139 56 25 32 16 184 252 39 63 101 40 22	birthday 3 4 5 6 7 8 9 10 11 12 13 14 15 16	3— 2.3 3— 4.8 3— 6.0 3— 9.2 3—10.0 4— 2.6 4— 3.6 4— 6.1 4— 7.4 4— 9.6 5— 2.5 5— 1.7 5— 2.8 5— 3.5	2— 7.2 2— 9.6 3— 0.1 3— 3.9 3—10.1 4— 1.9 4— 8.3 4— 0.1 5— 6.7 6—11.0 6— 0.6 7— 7.1 8— 0.6 8—11.7
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# SCHOOL DENTAL SERVICE

# Report for the year 1950

		Primary Schools	Secondary and Grammar Schools	Total
Number of School	ls visited	13	9	22
Number of Childr	en examined	2677	2969	5646
Children needing	treatment	1805	1586	3391
Appointments		4271	1951	6222
Special Inspection	s—			
Number inspe	ected	800	270	1070
Number four	nd to require treat-			
ment		674	186	860
Extractions—				
* *		2464	211	2675
Permanent		143	194	337
Local Anaesthetic		2680	604	3284
Fillings—				
		968	11	979
Permanent		694	1002	1696
Dressings		546	85	631
Scalings		66	68	134
Root Treatment		18	65	83
Teeth Extracted for	or Regulation Purposes-	_		
Temporary		801	89	890
Permanent		86	199	285
Oral Affections		87	62	149
Other Operations		68	104	272
Consultation with	Parent	134	24	158
Examined, treatme	ent deferred	531	320	851
Number of Treatr	nents—			
Routine	New	1375	536	1911
	Re-Visits	514	326	840
Specials	New	765	249	1014
	Re-Visits	950	434	1384

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