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COUNTY BOROUGH OF SOUTHPORT



Forty-fourth Annual Report

of the

School Medical Officer

for the year

1953



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Vice-Chairman: Alderman WORSWICK

Councillor GREAVES

STAFF OF THE SCHOOL HEALTH SERVICE

on the

31st DECEMBER, 1953

Medical Staff

Principal School Medical Officer	G. N. M. WISHART, M.R.C.S., L.R.C.P., D.P.H.
School Medical Officer	J. ARDLEY, M.B., B.S., D.P.H.
School Medical Officer	ANNA I. DAVISON, M.B., CH.B.

Visiting Medical Staff

Ophthalmic Surgeon	D. RANKINE, M.B., CH.B.
Aural Surgeon	R. V. TRACY-FORSTER, M.B., CH.B., D.L.O.
Dermatologist	H. BARDSLEY, M.R.C.S., L.R.C.P.

Dental Staff.

Principal Dental Officer	W. MARTLAND, L.D.S., R.C.S. (Eng.)
Dental Officer	W. L. ROTHWELL, L.D.S. (Liv.)
Attendants	MRS. M. E. BALL and Miss M. J. F. HAYES

School Nursing Staff—Superintendent School Nurse, Miss E. DOWD (a)(b)(c); School Nurses, Mrs. W. WATKINSON (a)(b)(c); Misses M. E. BRETT (a)(b)(c); J. HOLLIDAY (a)(b)(d); M. K. DONAGHEY (a)(b)(c); K. A. R. TAYLOR (a)(b)(c); D. C. ASHTON (a)(b)(d); M. A. TURVEY (b)(c); A. COWPER (a)(b)(c); A. TOALE (a)(b)(c); A. GOUGH (a)(b)(c); E. POTTS (a)(b)(c); M. J. HAINSWORTH (a)(b)(c); A. MULLAN (a)(b)(c); F. GARNER (a)(b)(c); Mrs. F. M. HOWARD (a)(b)(d).

(Certain of the above Staff also have duties in other branches of the Local Authority's medical, dental and visiting services)

Physiotherapist—(Vacant)

Speech Therapist—Vacant

Clerical Staff—Senior Clerk, Miss N. SOMECH; Clerks, Misses H. SMITH, B. PARKER, P. OLVERSON.

Notes re Qualifications

- | | |
|----------------------------------|--|
| (a) Health Visitor's Certificate | (c) State Certified Midwife |
| (b) State Registered Nurse | (d) Part I Certificate—Central Midwives' Board |

REPORT

OF THE

Principal School Medical Officer

FOR THE YEAR 1953

TO THE CHAIRMAN AND MEMBERS
OF THE EDUCATION COMMITTEE

MR. CHAIRMAN, LADIES AND GENTLEMEN,

I have pleasure in presenting the Annual Report on the work of the School Health Service for the year 1953.

In the past it has been the custom to publish the Annual Report on the school work combined with that of the public health service. It is, however, possible to provide information for the former at an earlier date than that required for the latter, and the Minister of Education has requested that the school reports should be published as early as possible.

Details of the medical and dental work carried out during the year are included in the Report, and indicate the value of this type of care for the school children in the town. The provision for educationally sub-normal children is insufficient, and reference to this problem is made within the Report.

I wish to express my thanks to the members of the Education Committee for their support and encouragement during the past year. I would also like to pay tribute to the staffs of the Education and School Health Departments for the conscientious way in which they have carried out their work in so far as it relates to the health of the school children in the Borough.

I am,

Yours faithfully,

G. N. M. WISHART

Principal School Medical Officer

SCHOOL HEALTH SERVICE

The number of children attending Local Authority Schools in Southport in 1953 was 9,144. Of these 5,857 were in Primary Schools and 3,287 were in the Technical, Grammar and Secondary Modern Schools.

Routine Medical Inspection. The arrangements for Routine Medical Inspections ensure that all children are examined by the School Medical Officer at least three times during their school life:—

- (1) Every pupil admitted for the first time to a maintained school is inspected as soon as possible after admission.
- (2) Every pupil attending a maintained primary school is inspected during the last year of his attendance at that school.
- (3) Every pupil attending a maintained secondary school is inspected during the last full year of his attendance at that school.

Owing to recent changes in the dates of examinations in the senior schools, it was decided to alter the times of our visits there so that the Medical Inspections should interfere as little as possible with the school routine. This led to a complete re-organisation of the rota of visits to all the schools and accounts for the big variation in the number of senior students examined.

The number of Routine Medical Inspections carried out were:—

PRIMARY SCHOOLS

Entrants	620
Leavers	485

SECONDARY AND GRAMMAR SCHOOLS

Leavers	1,350
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In the past year it was possible by the co-operation of the Mass Radiography Unit to arrange for the X-Ray examination of all children over the age of 14 years. Most of the pupils took advantage of this opportunity and it is hoped that these arrangements will continue to be possible every year in the future.

Attendance at Examination. Parents are notified of the time and place of the School Inspections and are invited to attend. The usefulness of the examination is increased if the child is accompanied by someone who can give an accurate history of the child.

The number of parents attending varies from year to year and this year shows an increase in the number attending at all ages.

Percentage Attendance of Parents at Examination:—

	1952	1953
PRIMARY SCHOOLS	%	%
Entrants ...	66·9	79·84
Leavers ...	38·1	40·42
SECONDARY AND GRAMMAR SCHOOLS		
Leavers ...	5·0	7·55

Findings at Routine Medical Inspections

Nutrition. It is rather disappointing to find that about 5% of the children attending school are described as poorly nourished. It is difficult to assess the reason for this. It may be linked up with the increase of infectious disease occurring in school children during the past year. If so, the poor nutritional state would be temporary only and should not occur next year. The figures must be watched during the coming year.

The following table gives the figures for this year, with those of the past three years for comparison:—

Year	Children examined during the year	A Good %	B Fair %	C Poor %
1950	2,593	27·96	70·20	1·85
1951	2,912	32·73	64·10	3·15
1952	2,862	49·08	48·5	2·34
1953	2,455	45·91	49·13	4·96

Schools Meals and Milk. For the first time there has been a decrease in the numbers taking advantage of the School Meals Service. This was most probably due to the increased cost of the meals. Free meals were supplied to 430 children.

The attention of the Education Authority is drawn to children whose health would benefit from participation in the School Meals Service and free meals can be provided when the parental circumstances justify.

Below are given the numbers of children receiving milk and/or meals in one day in October, 1953, with the four previous years for comparison:—

Year				Dinners				Milk
1949	...	...	...	4,023	...	...	...	7,065
1950	...	...	...	4,593	...	...	...	6,910
1951	...	...	...	4,862	...	...	...	7,028
1952	...	...	...	5,429	...	...	...	7,160
1953	...	...	...	4,901	...	...	...	7,115

Cleanliness, Clothing and Footwear

It is very rare now to see children in school dirty, badly clothed or wearing bad footwear.

In 1953, only ·04 children were excluded because of uncleanliness, a decrease since last year. The School Nurses continue to supervise closely the condition of the children's hair and the result of this supervision is undoubtedly good.

Vaccination against Smallpox. The number of children vaccinated continues to fall and is now 29·93%. This low percentage would cause concern should an outbreak occur in the town.

Diphtheria Immunisation. In contrast we can continue to be proud, although not complacent, about our rate of immunisation. 95·26% of the children attending Local Authority Schools are immunised. Most school children have also had a re-inforcing dose of the prophylactic.

Defects found at Routine Medical Inspection. Detailed lists of defects found at Inspection are given in statistical tables at the end of this Report.

Some of the defects found do not necessarily require treatment but only supervision and observation. Below are the numbers found to require treatment:—

	Entrants	Primary Leavers	Secondary and Grammar School Leavers	Totals
No. of Children examined	620	485	1,350	2,455
No. of Children requiring treatment	124	86	171	381
Percentage requiring treatment	20·0	17·73	12·67	15·47

Handicapped Pupils. There has been little change in this group since last year. Most of the physically handicapped children are being provided with the type of education best suited to them. The three deaf children who were unplaced at the end of 1953 are to be admitted to special schools early in 1954.

A teacher has given lessons at home to three severely ill children, one of whom died suddenly towards the end of the year.

The biggest problem is still that of the educationally sub-normal child. Although the Education Authority's Development Plan provides for a Day Special School for Educationally Sub-Normal Children and for the joint provision with other Authorities of a Residential Special School, it has not yet been possible to implement this part of the Plan. It has now become extremely difficult to find places for these children in suitable residential schools and in ordinary schools it is impossible to give them the special attention that they need, while their presence obviously makes very much harder the task of the teachers dealing with normal children. The Authority have established six Opportunity Classes which are doing very good work with backward children, but these are not really intended for children with a severe degree of inherent sub-normality.

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 ...	9.15 a.m. to 12 noon ... 10 a.m.	Dressings Clinic *Ear, Nose and Throat Clinic	2 Nurses 1 Doctor 1 Nurse
	2 p.m. to 4 p.m. ... 2 p.m. to 4.30 p.m. ...	Doctors' Minor Ailment Clinic Dressings Clinic	2 Doctors 3 Nurses
Tuesday ...	9.15 a.m. to 12 noon ... 9 a.m.	Dressings Clinic *Eye Clinic	1 Nurse 1 Doctor 1 Nurse
	2 p.m. to 4.30 p.m. ... 2 p.m.	Dressings Clinic *Eye Clinic	1 Nurse 1 Doctor 1 Nurse
Wednesday	9.15 a.m. to 12 noon ...	Dressings Clinic	2 Nurses
	2 p.m. to 4.30 p.m. ...	Dressings Clinic	1 Nurse
Thursday	9.15 a.m. to 12 noon ...	Dressings Clinic	2 Nurses
	2.30 p.m. to 4 p.m. ... 2 p.m. to 4.30 p.m. ...	Skin Clinic Dressings Clinic	1 Doctor 4 Nurses
Friday ...	9.15 a.m. to 12 noon ...	Dressings Clinic	2 Nurses
	2 p.m. to 4.30 p.m. ... 2 p.m. to 3.30 p.m.	Dressings Clinic Immunisation	1 Nurse 1 Nurse
Saturday ...	9 a.m. to 12 noon ...	Dressings Clinic	2 Nurses

* By Appointment only.

Ultra Violet Light Clinics are held on Mondays, Wednesdays and Fridays at 44 Houghton Street between 9 a.m. and 12 noon, by appointment only.

Nurses' Treatment Clinic. The Clinic is open each day from 9.15 a.m. to 4.30 p.m. and an attempt is made to spread the work over the day and to reduce waiting time in the clinic and also time lost from school. Children 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, high school and technical school students attend after school hours.

There can be little doubt as to the usefulness of the Clinics when the list of attendances is studied.

CLINIC	Attendances	
	1952	1953
Nurses' Treatment Clinic	8130	7195
Minor Ailment Clinic	2405	2499
Skin Clinic	1185	1086
Tonsils and Adenoids Clinic	316	272
Ophthalmic Clinic	1658	1379
Orthopaedic Clinic	—	140
Doctors' Sunlight Clinic	125	109
Artificial Sunlight Clinic...	1544	2116
Aural Clinic	733	528
Dental Clinic	6636	6245
Immunisation Clinic (complete course—5 in 1953, 59 in 1952)	209	136
Immunisation Clinic (re-inforcing dose)	279	204
TOTAL NUMBER OF ATTENDANCES	23220	21909

Minor Ailment Clinic. Cases seen here may be referred to the family doctor or to hospital with his knowledge and consent. The clinic is also used for supervision and observation of children with defects found at Routine Medical Inspection.

The numbers attending continue to be high; this year 2,499. 103 cases were referred to Southport Infirmary, 4 to the Royal Southern Hospital and 3 to Alder Hey Children's Hospital.

Skin Clinic. Dr. Bardsley attends at one weekly specialist clinic. Most cases are sent in the early stages and a wide variety is seen. During the year, 1,086 attendances were made.

Eye Clinic. This is a valuable and much appreciated clinic. Mr. Rankine attends twice weekly and this service is greatly liked by parents. They know that the school nurses test the vision of each child over the age of 8 years and that advice may be obtained on any abnormality, however slight. Parents realise also that the school nurses know which children ought to wear spectacles in school and that they can ask for the co-operation of the school teachers if they feel that this treatment is not being carried out.

86 specialist clinics were held during the year, 225 new cases were examined and 609 were seen for supervision and revision of their spectacles. 31 cases were referred for further treatment at the Southport Infirmary. Most of these were cases of squint.

Ear, Nose and Throat Clinic. Mr. Tracy Forster continues to hold a clinic each week for school children. Cases are referred to him from the Minor Ailment Clinic, Routine Medical Inspection, and also from General Practitioners.

Ear cases especially are seen in the very early stages and the effectiveness of modern therapy and the follow-up system for these children is reflected in the small number of cases of gross otorrhoea in the present school population.

In most cases treatment is given by the school nurses, but if an operation is required, children are admitted to the Ear, Nose and Throat Ward at the Promenade Hospital.

In 1953, 369 new cases were examined and 68 attended for observation of progress from previous years. 209 cases were admitted to Hospital for the removal of tonsils and/or adenoids.

Artificial Sunlight. Because of the installation of a new Ultra-Violet Light Lamp last year, it has been possible to treat more cases in 1953 than previously. Children attending were referred from the Chest and Paediatric Clinic of the Southport Infirmary, the School Minor Ailments Clinic and from Routine Medical Inspections.

91 school children were treated; these 91 children made a total of 2,116 attendances

Tuberculosis. 2 new cases were notified in 1953, as under:—

Pulmonary	...	...	...	...	...	...	...	...	1
Joints	...	...	...	...	...	...	...	...	1

There is good liaison between the School Health Service and the Hospital Service so that there is an adequate exchange of information regarding contacts of this disease.

Speech Therapy. Treatment for defective speech is given at the North-West School of Speech and Drama by arrangement with the Local Authority and 85 sessions were held during the year.

41 children attended classes; the reasons for the defects in speech were:—

Cleft Palate	...	...	...	...	...	...	...	...	3
Dyslalia	...	...	...	...	...	...	...	...	6
Stammering	...	...	...	...	...	...	...	...	12
Slow and Abnormal Speech Development	...	...	...	...	...	...	...	...	19
Lisp	...	...	...	...	...	...	...	...	1

Total attendances at the school were 650.

This service is greatly appreciated by the parents, as a speech defect is an obvious one and a great handicap in later life.

Orthopaedic Cases. A physiotherapist was appointed in January, 1953, so that it has been possible to resume treatment of minor orthopaedic defects. Cases were also referred to the Promenade Hospital for opinion and advice.

Child Guidance. Children requiring treatment are usually referred to the Notre Dame Child Guidance Clinic or the Psychiatric Clinic at Alder Hey Hospital. These children are brought to the notice of the School Medical Officers, either by the school teachers or parents at the Minor Ailments Clinic, or at Routine Medical Inspection. Some cases are also referred by the Probation Officer and by the Children's Officer. The number of cases referred in 1953 was 18.

Infectious Diseases. There was a big variation from last year in that there was an increase in the number of cases of Measles and Rubella. A fair number of mild cases of Scarlet Fever continued to be notified, while the number of cases of Chicken Pox suddenly decreased.

There were again no cases of diphtheria.

Notifications were as follows, with figures for 1952 for comparison:—

	1952	1953
Measles	52	634
Rubella	195	904
Scarlet Fever	147	128
Chicken Pox	623	96
Diphtheria	—	—
Whooping Cough	59	99
Tuberculosis	6	2

Miscellaneous School Medical Work

Examination for Scholarships	96
„ „ Entertainment	27
National Survey Examinations	5
Examination of children going away with the school	19
Admissions to Nursery Class	743

Home Visits by School Nurses

Follow-Up R.M.I.	3
On Account of Illness	36
To Infectious Cases	8
To Infectious Contacts	—
Re immunisations... ..	293

PRINCIPAL DENTAL OFFICER'S REPORT, 1953

The authorised professional establishment has been increased from one Principal Dental Officer and one Assistant Dental Officer, to one Principal Dental Officer and two Assistant Dental Officers. It has not yet been possible to fill the vacancy so created.

As mentioned in the Report of 1952, a main concern of the Department is the reduction of the period between inspection and re-inspection in the schools, which is still greater than twelve months; this aim should be achieved in 1954.

A second surgery has been equipped with a modern dental unit with X-Ray attachment, and a room has been fitted up for the processing of X-Ray films.

A third surgery is a recent addition to the Department. It is a modern dental surgery and is fitted with good equipment. It is in readiness for occupation.

The method of recording statistics has been revised and will be followed from the 1st January, 1954. It will show in greater detail the work done by the Department other than fillings and extractions. It is hoped by this means to recognise more easily progress in the dental health of the school children in the Borough.

During the year, 37 orthodontic appliances have been made and inserted, and 29 children have had their malformation satisfactorily corrected. The operation of Frenectomy has been performed for 9 patients.

The appended tables are most encouraging in that they show a further increase in the ratio of teeth saved compared with teeth extracted, and that the conservative work done for children under 5 years is steadily increasing.

Ratio of Teeth Saved compared with Teeth Extracted

Year	Temp. teeth Filled	Temp. teeth extracted (Unsaveable)	Ratio	Perm. teeth Filled	Perm. teeth Extracted (Unsaveable)	Ratio
1952	1526	2027	.75	2507	361	6.94
1953	2043	2111	1.0	3059	378	8.0

Children under 5 years

Year	Teeth Filled	% Increase Teeth Filled
1952	183	8.2%
1953	198	

STATISTICAL TABLES

TABLE I

MEDICAL INSPECTIONS OF CHILDREN ATTENDING PRIMARY,
SECONDARY AND GRAMMAR SCHOOLS

Year ended 31st December, 1953

A—Routine Medical Inspections

Number of Inspections in the prescribed Groups:—

Entrants	620
Primary Leavers	485
Secondary and Grammar Leavers	1350
TOTAL	2455

B—Other Inspections

Number of Special Inspections	1156
Number of Re-Inspections	3725
TOTAL	4881

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	2	122	124
Primary Leavers	10	76	86
Secondary and Grammar Leavers	20	151	171
Total (Prescribed Groups)	32	349	381
Other Routine Inspections	—	—	—
TOTALS	32	349	381

TABLE II

A—Return of Defects found by Medical Inspection in the year ended 31st December, 1953

DEFECT OR DISEASE	Routine Inspections		Special Inspections	
	Number of Defects		Number of Defects	
	Requiring Treatment	Requiring to be kept under observation but not requiring treatment	Requiring Treatment	Requiring to be kept under observation but not requiring treatment
(1)	(2)	(3)	(4)	(5)
SKIN:—				
Ringworm: Scalp	—	—	—	—
do. Body	—	—	1	—
Scabies	2	—	3	—
Impetigo	—	—	39	—
Other Diseases (non-T.B.)	29	2	262	10

(continued overleaf)

DEFECT OR DISEASE	Routine Inspections		Special Inspections	
	Number of Defects		Number of Defects	
	Requiring Treatment	Requiring to be kept under observation but not requiring treatment	Requiring Treatment	Requiring to be kept under observation but not requiring treatment
(1)	(2)	(3)	(4)	(5)
EYE:—				
Blepharitis	7	—	19	—
Conjunctivitis	1	—	7	—
Keratitis	—	—	—	—
Corneal Opacities	—	—	—	—
Other Conditions (excluding Defective Vision and Squint)... ..	—	—	32	3
Defective Vision (excluding Squint)	32	1	26	1
Squint	7	3	7	—
EAR:—				
Defective Hearing	—	3	2	—
Otitis Media	2	3	4	2
Other Ear Diseases	—	—	45	7
NOSE AND THROAT:—				
Chronic Tonsillitis only	33	62	31	16
Adenoids only	1	2	—	—
Chronic Tonsillitis and Adenoids	8	13	9	6
Other Conditions	11	15	107	24
Enlarged Cervical Glands (Non-T.B.)	8	7	15	6
Defective Speech	3	6	12	5
HEART AND CIRCULATION:—				
HEART DISEASE:—				
Organic	2	1	—	—
Functional	—	1	—	—
Anaemia	1	1	6	—
LUNGS:—				
Bronchitis	4	1	5	1
Other Non-Tuberculous Diseases	10	3	6	—
TUBERCULOSIS:—				
Pulmonary:—Definite	—	—	—	—
Suspected	—	—	—	—
Non-Pulmonary:—Glands	—	—	—	—
Bones and Joints	—	—	—	—
Skin	—	—	—	—
Other Forms	—	—	—	—
NERVOUS SYSTEM:—				
Epilepsy	—	—	—	—
Chorea	—	—	1	—
Other Conditions	1	—	—	—
ORTHOPAEDIC:—				
Posture	56	12	32	10
Flat Foot	104	23	35	10
Other Forms	31	11	157	26
DEVELOPMENTAL:—				
Hernia	3	1	1	4
Other	1	12	1	—
PSYCHOLOGICAL:—				
Development	2	—	8	5
Stability	—	—	5	—
Other Diseases and Defects (excluding Uncleanliness and Dental Diseases)	29	10	381	174
TOTALS	388	193	1259	310

*B—Classification of the General Condition of Pupils Inspected
during the year in the Routine Age Groups*

AGE GROUPS	Number of Pupils Inspected	A Good		B Fair		C Poor	
		No.	%	No.	%	No.	%
Entrants	620	362	58·39	243	39·20	15	2·41
Primary Leavers	485	218	44·95	243	50·10	24	4·95
Secondary and Grammar Leavers	1350	547	40·53	720	53·33	83	6·14
Other Routine Inspections ...	—	—	—	—	—	—	—
TOTALS	2455	1127	45·91	1206	49·12	122	4·97

**TABLE III
INFESTATION WITH VERMIN**

(i) Total Number of Examinations in the schools by the School Nurses ...	21373
(ii) Total Number of Individual Pupils Examined	7058
(iii) Total Number of Individual Pupils found to be infested	69
(iv) Number of Individual Pupils in respect of whom cleansing notices were issued (Section 54(2), Education Act, 1944)	—
(v) Number of Individual Pupils in respect of whom cleansing orders were issued (Section 54(3), Education Act, 1944)	—
(vi) Number of Cases in which legal proceedings were taken under the Education Act, 1944	—

**TABLE IV—CLEANLINESS INSPECTIONS
CONDITION OF CHILDREN IN DECEMBER, 1953**

No.	Boys			Girls		
	Clean	Nits	Vermin	Clean	Nits	Vermin
1	100·	—	—	100·	—	—
2	100·	—	—	100·	—	—
3	97·90	2·10	—	100·	—	—
4	100·	—	—	100·	—	—
5	99·47	0·53	—	97·40	2·60	—
6	96·94	3·06	—	99·06	0·94	—
7	100·	—	—	93·33	6·67	—
8	100·	—	—	—	—	—
9	100·	—	—	100·	—	—
10	100·	—	—	100·	—	—
11	100·	—	—	99·30	0·70	—
12	100·	—	—	100·	—	—
13	100·	—	—	100·	—	—
14	100·	—	—	100·	—	—
15	99·34	0·66	—	97·63	2·37	—
16	99·53	0·47	—	97·90	2·10	—
17	99·34	0·66	—	98·77	1·23	—
18	100·	—	—	99·40	0·60	—
19	99·19	0·81	—	96·83	3·17	—
20	—	—	—	98·22	1·78	—
21	99·65	0·35	—	—	—	—
22	98·35	1·10	0·55	97·18	2·82	—
23	96·74	3·26	—	100·	—	—
24	100·	—	—	96·77	3·23	—
25	98·90	1·10	—	97·53	2·47	—
26	100·	—	—	100·	—	—
27	100·	—	—	100·	—	—
28	100·	—	—	100·	—	—
29	100·	—	—	96·49	3·51	—
30	100·	—	—	99·42	0·58	—

% Clean=99·03; % Nits=0·96; % Vermin=0·01

TABLE VI (continued)

Group I—Diseases of the skin (excluding uncleanness, for which see Table III)

								Number of cases treated or under treatment during the year	
								By the Authority	Otherwise
Ringworm—(i) Scalp	...	...	...	...	...	...	...	—	—
(ii) Body	...	...	...	...	...	...	...	1	—
Scabies	...	...	...	...	...	...	...	3	—
Impetigo	...	...	...	...	...	...	...	40	—
Other Skin Disease	...	...	...	...	...	...	...	356	—
								400	—

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								198	—
Errors of Refraction (including Squint)	...	...	...	...	...	...	...	*725	—
TOTAL	...	...	...	...	...	...	...	923	—
Number of Pupils for whom Spectacles were:—									
(a) Prescribed	...	...	...	...	...	...	...	*253	—
(b) Obtained	...	...	...	...	...	...	...	*231	—
								484	—

*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:—									
(a) For Diseases of the Ear	...	...	...	...	...	...	...	16	—
(b) For Adenoids and Chronic Tonsillitis	...	...	...	...	...	...	...	209	—
(c) For other Nose and Throat Conditions	...	...	...	...	...	...	...	47	—
Received other forms of Treatment	...	...	...	...	...	...	...	292	—
TOTAL	...	...	...	...	...	...	...	564	—

TABLE VI (continued)

Group 4—Orthopaedic and Postural Defects

(a) Number treated as in-patients in hospitals	Nil
	Number of Cases treated
	By the Authority Otherwise
(b) Number treated otherwise, <i>e.g.</i> , in clinics or out-patient departments	291 18

Group 5—Child Guidance Treatment

	Number of Cases treated	
	In the Authority's Child Guidance Clinics	Elsewhere
Number of Pupils treated at Child Guidance Clinics	—	18

Group 6—Speech Therapy

	Number of Cases treated	
	By the Authority	Otherwise
Number of Pupils treated by Speech Therapists	—	41

Group 7—Other Treatment given

	Number of Cases treated	
	By the Authority	Otherwise
Miscellaneous Minor Ailments	1272	—

TABLE VII
HANDICAPPED PUPILS

CATEGORY	NUMBER ASCERTAINED			TYPE OF EDUCATION PROVIDED			Requiring Special School Accommodation but unplaced at end of year		Totals
	Up to 31st Dec., 1953	During year 1953	Total on register at end of 1953	Ordinary School (re-quiring observa-tion)	Special Schools		Day Class	Special School	
					Day (Class)	Resi-dential			
					Day Class	Special School			
Blind	1	—	1	—	—	1	—	—	1
Partially Sighted	—	1	1	—	1	—	—	—	1
Deaf	13	1	14	2	—	9	—	3	14
Partially Deaf	8	2	10	4	—	6	—	—	10
Delicate	52	4	56	7	1	1	—	47	56
Diabetic	—	—	—	—	—	—	—	—	—
Educationally Sub-Normal	76	12	88	2	17	5	48	16	88
Epileptic	8	—	8	6	—	1	—	1	8
Maladjusted	16	3	19	13	—	3	—	3	19
Physically Handicapped ...	52	4	56	31	4	3	—	18	56
Defective Speech	28	17	45	45	—	—	—	—	45
TOTALS	254	44	298	110	23	29	48	88	298

TABLE VIII

STATEMENT OF THE NUMBER OF CHILDREN NOTIFIED DURING THE YEAR ENDED 31st DECEMBER, 1953, 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)	—
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 IX
PRIMARY, SECONDARY AND GRAMMAR SCHOOLS
FINDINGS AT ROUTINE MEDICAL INSPECTIONS

	Entrants		Primary Leavers		Secondary & Grammar Leavers		Total	
	No.	%	No.	%	No.	%	No.	%
Listed for Inspection	—	—	—	—	—	—	2571	—
Absent from Inspection	—	—	—	—	—	—	116	—
Parent refused Inspection	—	—	—	—	—	—	—	—
Actually Inspected	620	—	485	—	1350	—	2455	—
Parent or Guardian present	495	79·84	196	40·42	102	7·55	793	32·29
Unvaccinated	421	67·90	313	64·54	986	73·05	1720	70·04
Unsatisfactory Clothing	—	—	—	—	—	—	—	—
Unsatisfactory footwear	—	—	—	—	—	—	—	—
Malnutrition	15	2·41	24	4·94	83	6·14	122	4·96
Nits in the Hair	—	—	—	—	—	—	—	—
Verminous Hair	—	—	—	—	—	—	—	—
Verminous Clothing	—	—	—	—	—	—	—	—
Bodies Dirty	—	—	—	—	—	—	—	—
Defective Teeth	14	2·25	8	1·65	14	1·03	36	1·46
NOSE AND THROAT:—								
Enlarged Tonsils and Ade- noids	68	10·96	30	6·19	21	1·55	119	4·85
Other Conditions	22	3·55	4	0·82	—	—	26	1·06
Glands in the Neck	11	1·77	1	0·21	3	0·22	15	0·61
EYE:—								
External Eye Disease	3	0·48	1	0·21	4	0·30	8	0·33
Defective Vision	2	0·32	11	2·27	20	1·48	33	1·34
Squint	8	1·29	1	0·21	1	0·07	10	0·41
EAR:—								
Defective Hearing	2	0·32	—	—	1	0·07	3	0·12
Ear Disease	4	0·65	1	0·21	—	—	5	0·20
Speech Defects	8	1·29	1	0·21	—	—	9	0·36
HEART AND CIRCULATION:—								
Cardiac Disease	1	0·16	3	0·62	—	—	4	0·16
Anaemia	1	0·16	1	0·21	—	—	2	0·08
Lung Disease	14	2·26	3	0·62	1	0·07	18	0·73
Nervous Disease	1	0·16	—	—	—	—	1	0·04
Tuberculosis	—	—	—	—	—	—	—	—
Rickets	—	—	—	—	—	—	—	—
DEFORMITIES:—								
Posture, Flat Feet, etc.	61	9·84	66	13·61	110	8·15	237	9·65
Skin Disease... ..	10	1·61	10	2·06	13	0·96	33	1·34
DEVELOPMENT:—								
Hernia	3	0·48	1	0·21	—	—	4	0·16
Others	11	1·77	2	0·41	—	—	13	0·53
PSYCHOLOGICAL:—								
Development	—	—	2	0·41	—	—	2	0·08
Stability	—	—	—	—	—	—	—	—
Other Disease or Defect	11	1·77	5	1·03	23	1·70	39	1·59

TABLE X

PRIMARY, SECONDARY AND GRAMMAR SCHOOLS
 AVERAGE HEIGHTS AND WEIGHTS (Age last birthday)

Heights and Weights—Tables are also given which show the weight and height of children in 1953 compared with those in 1938.

Age last Birthday						1938		1953	
						Height ft. ins.	Weight st. lbs.	Height ft. ins.	Weight st. lbs.
Age 5 years									
Boys	...	...	...	...	...	3 6	3 0	3 7	3 1
Girls	...	...	...	...	...	3 6	2 13	3 7	3 1
Age 10 years									
Boys	...	...	...	...	...	4 5	4 10	4 6	5 2
Girls	...	...	...	...	...	4 7	5 0	4 6	5 1
Age 14 years									
Boys	...	...	...	...	...	5 2	7 6	5 2	7 6
Girls	...	...	...	...	...	5 4	7 12	5 2	7 8
Age 16 years									
Boys	...	...	...	...	...	5 6	8 8	5 7	9 3
Girls	...	...	...	...	...	5 3	8 5	5 4	8 7

SCHOOL DENTAL SERVICE

Report for the Year 1953

					Primary Schools	Secondary and Grammar Schools	Total
1. Number of children on Register	...	...	...	...	5857	3043	8900
2. Total Number of Schools	...	...	...	...	24	8	32
3. Half-days devoted to	(a) Inspection...	...	...	...	28	9	37
	(b) Treatment	...	...	...	617	316	933
TOTALS (3)					645	325	970
4. Number of Children examined at:—					schools	schools	schools
	(a) Schools	...	...	...	(16) 3566	(3) 1049	(19) 4615
	(b) Special Inspections at Clinic	...	...	...	926	262	1188
TOTALS (4)					4492	1311	5803
5. Number of Children found to require treatment at:—	(a) Schools	...	...	...	2520	560	3080
	(b) Special Inspections at clinic	...	...	...	829	232	1061
TOTALS (5)					3349	792	4141
6. Number of Children actually treated	...	...	...	...	1627	680	2307
7. Number of attendances made at Clinic by Children mentioned in (6) above:—							
NEW	(a) Routine	...	...	...	790	445	1235
	(b) Special	...	...	...	837	235	1072
RE-VISITS	(a) Routine	...	...	...	697	567	1264
	(b) Special	...	...	...	1569	598	2167
Number of Children examined and treatment deferred	...	...	...	...	359	148	507
Total visits made by Children to Clinic during the year	...	...	...	...	4252	1993	6245
Kinds of treatment provided for Children mentioned in (6) above:—							
8. Number of teeth filled:—							
	(a) Permanent Teeth	...	...	...	1325	1734	3059
	(b) Temporary Teeth	...	...	...	2014	29	2043
TOTALS (8)					3339	1763	5102
9. Number of fillings:—							
	(a) Permanent Teeth	...	...	...	1440	1828	3268
	(b) Temporary Teeth	...	...	...	2090	30	2120
TOTALS (9)					3530	1858	5388
10. Extractions:—							
	(a) Ordinary:—						
	(1) Permanent Teeth	...	...	...	127	251	378
	(2) Temporary Teeth	...	...	...	1989	122	2111
	(b) For regulation purposes:—						
	(1) Permanent Teeth	...	...	...	32	90	122
	(2) Temporary Teeth	...	...	...	504	80	584
TOTALS (10)					2652	543	3195
11. Miscellaneous:—							
	(a) Dressings	...	...	...	514	123	637
	(b) Scalings	...	...	...	62	129	191
	(c) Root Treatments	...	...	...	2	1	3
	(d) Oral Affections	...	...	...	—	—	—
	(e) Other Operations	...	...	...	133	55	188
TOTALS (11)					711	308	1019
12. Administration of Anaesthetics:—							
	(a) General	69	6	75
	(b) Local	2094	486	2580
TOTALS (12)					2163	492	2655

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COUNTY BOROUGH



OF SOUTHPORT

REPORT

UPON THE

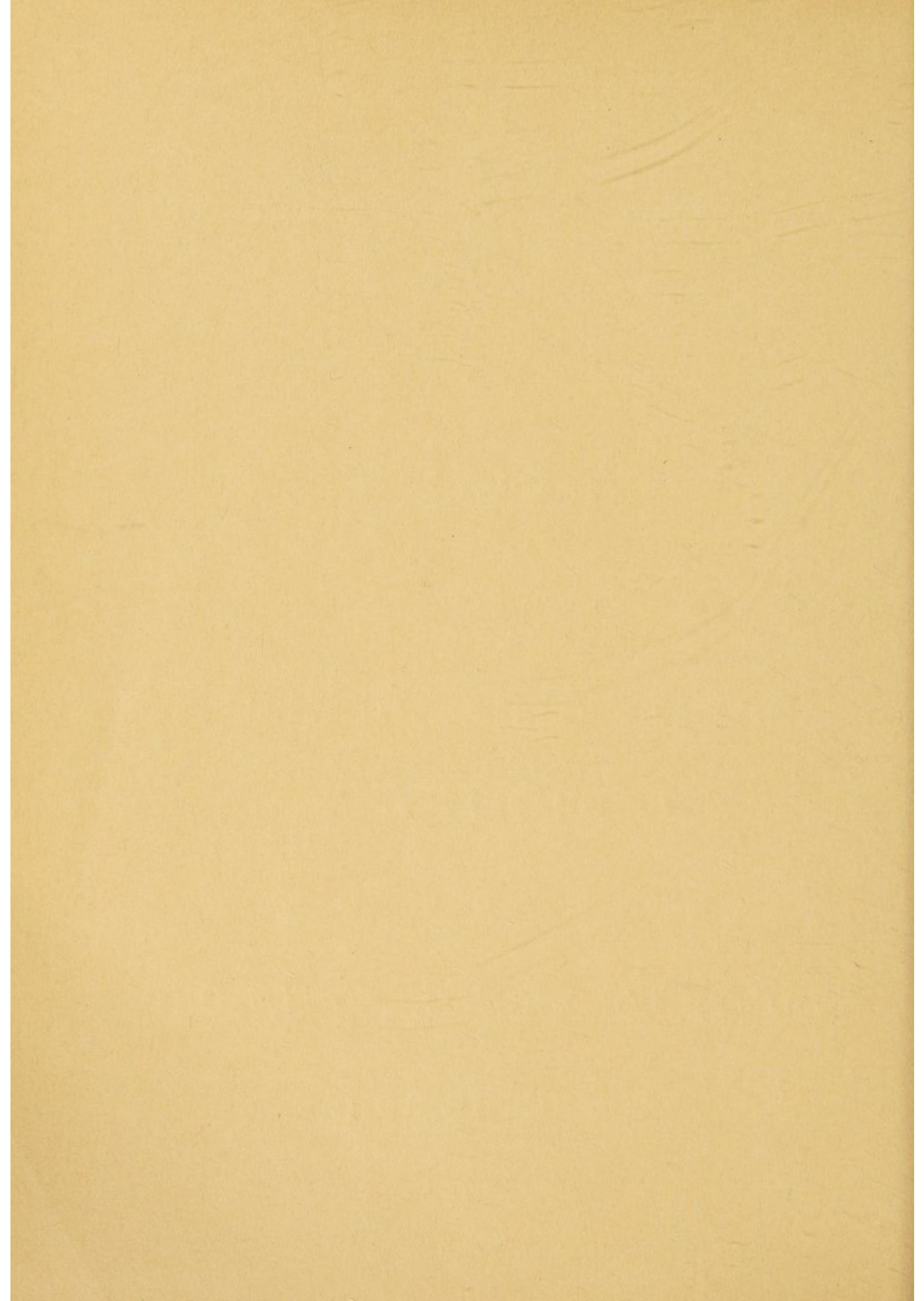
HEALTH AND SANITARY

CONDITIONS

OF THE

COUNTY BOROUGH OF SOUTHPORT

FOR THE YEAR 1953



22/4/53

COUNTY BOROUGH



OF SOUTHPORT

REPORT

UPON THE

HEALTH AND SANITARY

CONDITIONS

OF THE

COUNTY BOROUGH OF SOUTHPORT

FOR THE YEAR 1953

THE HEALTH COMMITTEE

The Worshipful the Mayor
(Alderman W. TATTERSALL)

Chairman: Councillor W. BERWICK

Vice-Chairman: Councillor L. F. SPENCE

Alderman Sir H. W. BARBER, J.P.

Alderman Dr. H. COATES, J.P.

Alderman W. PAULDEN

Councillor Mrs. R. G. HARVEY-KELLY

Councillor Dr. S. J. HEPWORTH

Councillor M. N. HILLS

Councillor R. E. HINDS

Councillor G. W. KENDALL, J.P.

Councillor D. C. MACNICOL

Councillor W. PRESCOTT

Councillor Mrs. E. SMITH

Councillor J. WOODS

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

Mental Health Service

Chairman	Councillor M. N. HILLS
Vice-Chairman	Councillor G. W. KENDALL, J.P.
Alderman Dr. H. COATES, J.P.	Councillor D. C. MACNICOL
Councillor Mrs. R. G. HARVEY-KELLY	Councillor Mrs. E. SMITH
Councillor Dr. S. J. HEPWORTH	Councillor J. WOODS
Dr. P. Y. LYLE, M.C.	

Joint Health and Education

The Worshipful the Mayor
(Alderman W. TATTERSALL)

Chairman	Councillor Mrs. R. G. HARVEY-KELLY
Vice-Chairman	Councillor Mrs. E. SMITH
Alderman W. PAULDEN	Councillor J. WOODS

Home Nursing Joint Sub-Committee

Chairman	Councillor W. PRESCOTT
Vice-Chairman	Councillor Mrs. E. SMITH
	Councillor J. WOODS

National Assistance Act, 1948

(Section 47 Cases)

Chairman	Alderman W. PAULDEN
Vice-Chairman	Councillor Mrs. E. SMITH

Accounts

All Members of the Health Committee

STAFF OF THE HEALTH DEPARTMENT ON THE

31st DECEMBER, 1953

Medical Staff (Full-Time)—

Medical Officer of Health	G. N. M. WISHART, M.R.C.S., L.R.C.P., D.P.H.
Deputy Medical Officer of Health	J. ARDLEY, M.B., B.S., D.P.H.
Assistant Medical Officer of Health	ANNA I. DAVISON, M.B., CH.B.

Medical Staff (Part-Time)—

Medical Officer for Mental Health Service	Vacant
Medical Officer for Tuberculosis Service	R. S. COOK, M.B., CH.B.

Visiting Medical Staff—

Ante-Natal and Post-Natal Clinic	N. E. LAURENCE, F.R.C.S.
----------------------------------	--------------------------

Dental Staff—

Principal Dental Officer	W. MARTLAND, L.D.S., R.C.S.(ENG.)
Dental Officer	W. L. ROTHWELL, L.D.S. (LIV.)
Attendants	Mrs. M. E. BALL and Miss M. J. F. HAYES

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)(b); W. VICKERS (a)(b)(h); R. W. EASTON (a)(b) (from 2/2/53); Infectious Diseases Enquiry Officer, W. RIGBY; Rodent Officer, J. S. AMERY.

Health Visiting Staff—Superintendent Health Visitor, Miss E. DOWD (c)(d)(c); Health Visitors, Mrs. W. WATKINSON (c)(d)(e); Misses M. E. BRETT (c)(d)(e); J. HOLLIDAY (c)(f)(e); M. K. DONAGHEY (c)(d)(e); K. A. R. TAYLOR (c)(d)(e); D. C. ASHTON (c)(f)(e), A. COWPER (c)(d)(e); A. TOALE (c)(d)(e), A. GOUGH (c)(d)(e); E. POTTS (c)(d)(e); M. J. HAINSWORTH (c)(d)(e); A. MULLAN (c)(d)(e); F. GARNER (c)(d)(e); Mrs. F. M. HOWARD (c)(f)(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 MIDWIFE, Mrs. E. SHAWCROFT (d).

Mental Health Staff—*Senior Mental Health Visitor and Duly Authorised Officer, J. SINNOTT (i); Mental Health Visitors and Duly Authorised Officers, Miss A. L. BENNETT (e)(j) and K. BAIN (e)(j). Home Teacher for Mental Defectives, Miss J. ROWLANDS (p).

* *Also acts as Senior Welfare Officer.*

Clerical Staff—Administrative Assistant, F. H. DIX, A.C.I.S., GRAD. A.C.C.A.; Chief Clerk, W. R. HOLGATE; Senior Clerk, Miss M. E. WELLS; Clerks, D. C. EVANS, B. FORSHAW, J. D. FARRINGTON, K. HOWARTH, R. SHEPHERD.

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.
- (p) Diploma of National Association for Mental Health.

Ambulance Service—

Chief Fire Officer and Ambulance Officer, J. PERKINS, Grad. I. FIRE E.

Public Analyst

J. F. CLARK, M.SC., F.R.I.C.

Pathologist

J. G. BENSTEAD, M.D., M.A., B.CHIR.

ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH
AND SCHOOL MEDICAL OFFICER

FOR THE YEAR 1953

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 1953. The Registrar General's estimate of the population for the middle of 1953 was 82,400, as compared with 82,980 in the previous year. The birth rate after adjustment by the Registrar General's factor of correction was 12·23 per thousand of the population. The infantile mortality rate was 21·30 per thousand live births, a figure which is lower than the average for the country. In a residential borough with good medical facilities it is to be expected that few infants should die from causes which could be prevented and indeed, the figure for the year must be considered very good indeed. A study of the case histories of children dying during the first year of life does, however, indicate that it might be possible in future years to reduce the mortality rate for infants to below the 20 level as has been done in some Scandinavian cities. If this is to be achieved, co-operation of a very high standard between the three branches of the National Health Service, the Hospitals, the General Medical Practitioners and the Local Health Authority Staff, must be brought about. In this particular work, a Medical Officer of Health can, I believe, if he wishes, play a large part. It is interesting to note that only ten years ago the infantile mortality rate was 47, i.e., more than twice the present rate.

The crude death rate was 15·89 per thousand of the population, compared with 16·32 in the previous year. The rate when corrected for age and sex distribution was 12·07 per thousand of the population.

The work of the Health Department is extremely varied and is profoundly influenced by the number of people aged 65 years and over who require help of some kind. Great difficulty has been experienced during the year in the finding of suitable accommodation for those persons who are not properly hospital cases and yet who are not suitable for accommodation in homes for the elderly provided either by statutory or voluntary authorities. Every endeavour is made to help these elderly persons to maintain their independence for as long a period as possible and full use is made to this end of the Home Nursing, Health Visiting, Home Help and Sickroom Attendant Services. The calls made by this type of case are extremely exacting on the staff and require the exercise of a great deal of time, tact and patience.

For many years it has been the custom in this town for the Mental Health Staff to give all assistance possible to general medical practitioners in obtaining admission of non-certifiable cases of senile dementia to hospital, although this is not a duty required of the Local Health Authority by law. It is, however, a real service to the community and the doctors. The Duly Authorised Officers are well equipped by training and experience to carry it out.

The accommodation for certain parts of the department is very bad and strenuous efforts must be made to provide adequate interviewing rooms for members of the public to discuss personal problems in private and also to improve the housing of the Mental Health Section.

There was no major epidemic of infectious disease during the year. The number of infants vaccinated against smallpox was 115, as compared with 106 last year.

The work of the Sanitary Section again shows an increase. Steady progress has been made in the promotion of higher standards in Food Hygiene and good co-operation has been obtained from the food traders in the town. The courses in Food Hygiene promoted jointly by the Health Committee and the St. John Ambulance Association have continued and an Advanced Course has been instituted at the Southport Technical College by the Education Committee. The lecturers for these courses are supplied chiefly by the Sanitary Staff.

I would like to express my appreciation of the work done during the year by all members of the department and my thanks to the members of the Health Committee for their support and consideration throughout the year.

I am,

Yours faithfully,

G. N. M. WISHART,

Medical Officer of Health.

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Part I

STATISTICAL MEMORANDA

AND

VITAL STATISTICS

Statistical Memoranda

Vital Statistics

Birth Rates and Death Rates and Analyses of Mortality

Causes of, and Ages at Death

Deaths in Various Age Groups

Infant Mortality—Causes and Ages

Births and Stillbirths

Maternal Mortality

STATISTICAL MEMORANDA

Area of Borough (including Foreshore)	18,333 acres
Area of Borough (excluding Foreshore).....	9,426 acres
Population (1951 Census)	84,057
„ (Estimated by the Registrar-General), middle of 1953	82,400
Density of Population	8·7
Number of inhabited houses, 1st April, 1953	25,175
Number of permanent houses erected and completed during 1953	235
Rateable Value, 1st April, 1953	£977,492
Sum represented by a Penny Rate	£3,888
Number of births registered	951
Legitimate	904
Illegitimate.....	47
Crude birth rate (per 1,000 of the population)	11·54
Corrected birth rate (per 1,000 of the population)	12·23
Average Crude birth rate, preceding 10 years	12·62
Number of infant deaths (under one year)	20
Infant Mortality Rate (per 1,000 live births)	21·30
(19) Legitimate (rate per 1,000 legitimate live births).....	21·02
(1) Illegitimate (rate per 1,000 illegitimate live births) ...	21·28
Average Infantile Mortality Rate, preceding 10 years	34
Number of deaths registered	1,310
Crude death rate (per 1,000 of the population)	15·89
Corrected death rate (per 1,000 of the population)	12·07
Average corrected death rate, preceding 10 years	12·57
Number of deaths from tuberculosis (all forms)	18
Tuberculosis death rate (per 1,000 of the population).....	0·22
Average tuberculosis death rate, preceding 10 years	0·35
Number of deaths from Zymotic diseases	7
Death rate from Zymotic diseases (per 1,000 of the population)	0·08
Average death rate from Zymotic diseases, preceding 10 years	0·06
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	30·39 galls.
Total consumption of water per head, per day.....	39·43 galls.
Rainfall during 1953	26·86 inches
Hours of sunshine during 1953	1,644

VITAL STATISTICS

Population—The Registrar-General's estimate of the population for the middle of 1953 is 82,400. The comparable figure for the middle of 1952 was 82,980.

Birth Rate—The total number of live births registered in the Borough during 1953 was 951. Of these 509 were males and 442 females. The crude birth rate for the year was 11·54 per 1,000 of the estimated civilian population, and the adjusted birth rate was 12·23. 47 (5%) of the births were illegitimate. The number of still births registered was 31, giving a rate of 0·38 per 1,000 of the civilian population as compared with the rate of 0·35 for England and Wales.

Death Rate—The number of deaths occurring amongst the residents of the town was 1,310. Of these 606 were in respect of males and 704 females. The decrease in the number of deaths compared with the previous year was 44.

73% of all deaths were of persons aged sixty-five years and over and 45% of all deaths were of persons of seventy-five years and over.

The gross death rate was 15·89 per 1,000 of the civilian population and the rate corrected for age and sex was 12·07 per 1,000 of the population.

Principal Causes of Death—

	1953		1952	
	Number	% of total Deaths	Number	% of total Deaths
Heart Disease, including diseases of the Circulatory System ...	547	41·75	585	43·21
Cancer	211	16·11	215	15·88
Vascular lesions of nervous system...	208	15·11	202	14·91
Respiratory Diseases	87	6·64	100	7·38
Violence, including Suicide...	57	4·35	40	3·72
Tuberculosis (all forms)	18	1·37	18	1·33
Ulcer of stomach and duodenum ...	18	1·37	13	0·96
Influenza	8	0·61	9	0·66
Acute and Chronic Nephritis ...	8	0·61	9	0·66

Deaths from Violence—There were 57 deaths from violence and these were classified as follows:—

	Males	Females	Total
Suicide	10	4	14
Motor Vehicle Accidents	3	5	8
Falls—At Home	2	17	19
In Street	1	—	1
In Hospital	1	—	1
From Buildings	1	—	1
Burns	1	—	1
Asphyxia—due to faulty gas pipe ...	5	2	7
due to faulty gas appliance ...	1	—	1
due to gas tap being turned on accidentally	1	—	1
Railway—crossing line	1	1	2
Carried down	27	29	56

	Males	Females	Total
Brought forward ...	27	29	56
Intestinal Obstruction caused by war wound (shrapnel in abdomen) ...	1	—	1
TOTALS ...	28	29	57

Zymotic Death Rate—

Diphtheria ...	Nil	Measles ...	Nil
Scarlet Fever ...	Nil	Diarrhoea ...	7
Typhoid ...	Nil	Whooping Cough ...	Nil
Total Deaths—7.	Rate per 1,000 of the population—0·08		

Infantile Mortality Rate—

Total Deaths ...	20	Rate per 1,000 births ...	21·30
Legitimate ...	19	do. legitimate births	21·02
Illegitimate...	1	do. illegitimate births	21·28

BIRTH-RATES, AND DEATH-RATES AND ANALYSIS OF MORTALITY IN THE YEAR 1953

England and Wales, 160 County Boroughs and Great Towns, 160 Smaller Towns and London Administrative County
(Provisional figures, based on Weekly and Quarterly Returns)

	Rate per 1,000 civilian population		Annual Death-Rate per 1,000 civilian population										Rate per 1,000 Live Births	
	Live Births	Still Births	All Causes	Typhoid and Paratyphoid Fevers	Small-pox	Whooping Cough	Diphtheria	Tuberculosis	Ac. Polio-myel. & Polio-enceph.	Influenza	Pneumonia	Diarrhoea & Enteritis (under 2 years)	Total Deaths under 1 year	
England and Wales ...	15.5	0.35	11.4	0.00	0.00	0.01	0.00	0.20	0.01	0.16	0.55	1.1	26.8*	
160 County Boroughs and Great Towns, including London ...	17.0	0.43	12.2	0.00	0.00	0.01	0.00	0.24	0.01	0.15	0.59	1.3	30.8	
160 Smaller Towns (Estimated Resident Population 25,000 to 50,000 at Census, 1951) ...	15.7	0.34	11.3	—	0.00	0.00	0.00	0.19	0.01	0.17	0.52	0.9	24.3	
London Administrative County ...	17.5	0.38	12.5	—	—	0.00	—	0.24	0.01	0.15	0.64	1.1	24.8	
Southport ...	12.23	0.38	12.27	—	—	—	—	0.22	—	0.10	0.27	0.01	21.3	

A dash (—) signifies that there were no deaths.

* Per 1,000 related births.

	Puerperal Sepsis	Others	Total
The maternal mortality rates for England and Wales are as follows per 1,000 Total Births ...	0.10	0.66	0.76
The maternal mortality rates for Southport are as follows per 1,000 Total Births ...	—	—	—

VITAL STATISTICS

For years 1934 to 1953 inclusive

YEAR	Popu- lation esti- mated to Middle of each year	Uncor- rected Number (Regis- tered)	BIRTHS		TOTAL DEATHS REGISTERED IN DISTRICT		TRANSFERABLE DEATHS**		NET DEATHS BELONGING TO DISTRICT			
			Net		Number x	Rate	of Non- residents regist'd in the District	of Resi- dents not regist'd in the District	Under 1 yr. of age		At all ag	
			Number	Rate					Number x	Rate per 1,000 Net Births	Number x	
1	2	3	4	5	6	7	8	9	10	11	12	13
1934	79,100	918	860	10.87	998	12.62	61	153	40	46	1070	1338
1935	79,300	872	808	10.19	1104	13.92	63	143	52	64	1161	1418
1936	79,280	880	804	10.14	1105	13.94	81	182	41	51	1189	1415
1937	78,960	914	837	10.60	1143	14.48	63	205	56	67	1266	1372
1938	78,600	870	802	10.20	1157	14.65	84	159	56	70	1215	1272
1939	* 78,900											
	* 81,840	925	752	9.53	1271	15.53	101	168	41	52	1338	1418
1940	88,550	1147	871	9.84	1385	15.64	115	148	40	43	1418	1415
1941	95,410	1455	949	9.94	1375	15.53	171	211	65	68	1415	1323
1942	90,480	1371	1075	11.90	1213	13.41	108	218	41	38	1323	1410
1943	85,140	1283	1048	12.30	1237	14.53	73	246	49	47	1410	1304
1944	82,860	1484	1168	14.09	1150	13.88	87	241	52	44	1304	1300
1945	81,360	1314	1018	12.51	1121	13.73	62	241	29	28	1300	1256
1946	84,010	1557	1237	14.72	1073	12.77	63	246	40	32	1256	1372
1947	84,240	1569	1325	15.73	1268	15.52	114	218	55	42	1372	1272
1948	85,800	1317	1167	13.60	1126	13.12	58	204	41	35	1272	1344
1949	85,540	1155	986	11.53	1269	14.84	89	164	38	39	1344	1400
1950	85,500	1020	890	10.41	1339	15.66	90	151	24	27	1400	1613
1951	83,400	1063	884	10.60	1523	18.26	88	178	36	41	1613	1354
1952	82,980	1164	957	11.53	1301	15.68	92	145	29	30	1354	1310
1953	82,400	1133	951	11.54	1277	15.50	95	128	20	21	1310	

x 78,900 for Birth Rate—81,840 for Death Rate.

x in Column 6 are included the whole of the deaths registered during the year as having actually occurred within the district, military 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 the addition of the deaths under 1 included in the number given in Column 9.

** "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.

Census	Year	1911	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

DEATHS (Table 1)

Causes of, and Ages at, Death for year 1953

CAUSES OF DEATH	Totals at all ages	AGE DISTRIBUTION																Totals	
		MALES									FEMALES								
		under 1 yr.	1 to 5	5 to 15	15 to 25	25 to 45	45 to 65	65 to 75	75 & over	under 1 yr.	1 to 5	5 to 15	15 to 25	25 to 45	45 to 65	65 to 75	75 & over		
Tuberculosis—Respiratory ...	13	—	—	—	—	1	4	2	1	8	1	—	—	1	—	2	1	—	5
Tuberculosis—Other ...	5	—	—	1	—	—	1	—	—	2	—	—	—	—	1	1	1	—	3
Phylitic Disease ...	4	—	—	—	—	—	1	1	1	3	—	—	—	—	—	1	—	—	1
Diphtheria ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Whooping Cough ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
D meningococcal Infections ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Acute Poliomyelitis ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Measles ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Other Infective and parasitic diseases	3	—	—	—	—	1	—	—	—	1	—	—	—	1	1	—	—	—	2
Malignant Neoplasm, Stomach ...	38	—	—	—	—	—	7	5	6	18	—	—	—	—	2	11	7	—	20
Malignant Neoplasm, lung bronchus ...	40	—	—	—	1	3	12	17	3	36	—	—	—	—	1	3	—	—	4
Malignant Neoplasm, breast ...	19	—	—	—	—	—	1	—	—	1	—	—	—	—	8	5	5	—	18
Malignant Neoplasm, uterus ...	7	—	—	—	—	—	—	—	—	—	—	—	—	1	3	1	2	—	7
Other Malignant and Lymphatic Neoplasms ...	105	—	—	—	1	3	14	18	14	50	—	—	—	2	17	11	25	—	55
Leukaemia, Aleukaemia ...	2	—	—	—	—	—	—	—	1	1	—	—	—	—	1	—	—	—	1
Diabetes ...	14	—	—	—	—	—	—	—	5	5	—	—	1	—	1	2	5	—	9
Vascular lesions of Nervous System	208	—	—	—	—	—	17	20	36	73	—	—	—	3	18	38	76	—	135
Coronary Disease—Angina ...	227	—	—	—	—	7	47	44	37	135	—	—	—	—	11	37	44	—	92
Hypertension with Heart Disease ...	30	—	—	—	—	—	—	4	5	9	—	—	—	1	2	5	13	—	21
Other Heart Disease ...	242	—	—	—	—	1	15	19	55	90	—	—	—	2	9	29	112	—	152
Other Circulatory Disease ...	48	—	—	—	1	2	9	6	4	22	—	—	1	—	3	8	14	—	26
Influenza ...	8	—	—	—	—	1	—	—	2	3	—	—	—	—	—	2	3	—	5
Pneumonia ...	22	2	1	—	—	—	4	3	—	10	1	1	—	—	1	2	7	—	12
Bronchitis ...	46	—	—	—	1	—	4	13	11	29	—	—	—	—	5	5	7	—	17
Other Diseases of Respiratory System ...	11	—	1	—	—	—	3	1	2	7	—	—	—	—	—	1	3	—	4
Ulcer of Stomach and Duodenum ...	18	—	—	—	—	1	6	3	2	12	—	—	—	—	—	2	4	—	6
Gastritis, Enteritis and Diarrhoea ...	7	—	—	—	—	—	—	—	1	1	1	—	1	—	—	—	—	4	6
Nephritis and Nephrosis ...	8	—	—	—	1	1	—	1	2	5	—	—	—	—	3	—	—	—	3
Hypertrophy of Prostate ...	22	—	—	—	—	—	—	7	15	22	—	—	—	—	—	—	—	—	—
Pregnancy, Childbirth, Abortion ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Congenital Malformations ...	5	—	1	—	—	—	—	—	—	1	2	—	2	—	—	—	—	—	4
Other defined and ill-defined Diseases ...	101	11	—	—	1	1	9	6	6	34	2	1	—	5	12	13	34	—	67
Motor Vehicle Accidents ...	8	—	—	2	—	1	—	—	—	3	—	1	1	—	—	—	2	—	5
All Other Accidents ...	34	—	—	2	—	2	3	—	7	14	—	—	—	1	2	5	12	—	20
Suicide ...	14	—	—	—	—	1	4	5	—	10	—	—	—	2	2	—	—	—	4
Homicide and Operations of War ...	1	—	—	—	—	—	—	1	—	1	—	—	—	—	—	—	—	—	—
Total—(All Causes) ...	1310	13	3	5	6	26	161	177	215	606	7	3	6	1	19	105	183	380	704

DEATHS (Table 2)
Number of Deaths in Various Age Groups for years 1943 to 1953 inclusive

Year	Total No. of Deaths	Under 1		1—5		5—15		15—45		45—65		65—75		75 and over	
		No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
1943 ...	1410	49	3.48	10	0.70	6	0.42	106	7.52	348	24.68	383	27.17	508	36.03
1944 ...	1304	52	3.98	13	0.99	7	0.54	60	4.60	306	23.47	397	30.46	469	35.96
1945 ...	1300	29	2.23	6	0.46	12	0.92	78	6.00	270	20.77	383	29.47	522	40.15
1946 ...	1256	40	3.18	5	0.39	6	0.48	67	5.33	286	22.78	338	26.90	514	40.94
1947 ...	1372	55	4.01	6	0.44	4	0.29	71	5.17	315	22.96	366	26.68	555	40.45
1948 ...	1272	41	3.22	4	0.31	2	0.16	54	4.25	302	23.74	422	33.15	447	35.17
1949 ...	1344	38	2.83	6	0.45	1	0.08	60	4.46	289	21.50	419	31.18	531	39.50
1950 ...	1400	24	1.71	6	0.43	5	0.37	67	4.78	293	20.93	415	29.64	590	42.14
1951 ...	1613	36	2.23	4	0.25	4	0.25	47	2.91	346	21.45	445	27.59	731	45.32
1952 ...	1354	29	2.15	6	0.45	2	0.14	54	4.00	291	21.50	403	29.77	569	41.99
1953 ...	1310	20	1.53	6	0.45	11	0.84	52	3.97	266	20.30	360	27.49	595	45.42

DEATHS (Table 3)
Rates per 1,000 population and per 1,000 births—years 1934 to 1953 inclusive

Year	Popu- lation	Male	Female	Total	Rate per 1,000 Popu- lation	Cor- rected for Age and Sex	Under One Year	Rate per 1,000 Births	Legiti- mate	Rate per 1,000 Births	Illegiti- mate	Rate per 1,000 Births	Pulm'y Tuber- culosis	Rate per 1,000 Popu- lation	Other Forms T.B.	Rate per 1,000 Popu- lation	Zymotic Diseases	Rate per 1,000 Popu- lation
1934	79100	481	589	1070	13.53	11.23	40	46	37	45	3	79	38	0.48	9	0.11	11	0.14
1935	79300	500	661	1161	14.64	12.15	52	64	51	68	1	18	31	0.39	4	0.05	9	0.11
1936	79280	557	632	1189	15.00	12.45	41	51	37	49	4	68	33	0.42	8	0.10	9	0.11
1937	78960	566	700	1266	16.03	13.30	56	67	50	64	6	120	33	0.42	8	0.10	16	0.20
1938	78600	565	650	1215	15.46	12.83	56	70	49	65	7	132	25	0.32	9	0.11	11	0.14
1939	81840	606	732	1338	16.34	13.56	41	52	37	47	4	70	40	0.49	7	0.09	17	0.21
1940	88550	608	810	1418	16.01	12.65	40	43	33	38	7	121	24	0.27	9	0.10	3	0.03
1941	95410	641	774	1415	14.80	11.69	65	57	58	54	7	115	38	0.40	7	0.07	9	0.09
1942	90480	584	739	1323	14.60	12.11	41	38	36	36	5	75	37	0.41	9	0.10	8	0.09
1943	85140	619	791	1410	16.60	13.77	49	47	43	45	6	67	43	0.50	9	0.10	8	0.09
1944	82860	565	739	1304	15.74	13.06	52	44	45	42	7	67	27	0.32	6	0.07	6	0.07
1945	81360	561	739	1300	15.98	12.63	29	28	25	27	4	35	36	0.44	5	0.06	7	0.08
1946	84010	570	686	1256	14.95	11.81	40	32	33	27	7	69	31	0.37	3	0.04	5	0.06
1947	84240	651	721	1372	16.29	12.87	55	42	50	40	5	64	39	0.46	5	0.06	7	0.08
1948	85800	566	706	1272	14.82	11.71	41	35	35	32	6	76	27	0.31	3	0.04	5	0.06
1949	85540	623	721	1344	15.71	12.10	38	39	33	35	*5	102	26	0.30	5	0.06	6	0.07
1950	85500	622	778	1400	16.37	12.44	24	27	22	26	2	34	15	0.17	5	0.06	2	0.02
1951	83400	737	876	1613	19.34	14.70	36	41	33	40	3	60	22	0.26	5	0.06	3	0.04
1952	82980	626	728	1354	16.32	12.32	29	30	28	30	1	20	12	0.15	6	0.07	1	0.01
1953	82400	606	704	1310	15.89	12.07	20	21	19	21	1	21	13	0.16	5	0.06	7	0.08

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 would be 82.
*In addition, another of these infants was allocated to Southport in error and excluding this death also, the rate per 1,000 births for the remaining 3 deaths would be 61.

DEATHS (Table 4)
Infant Mortality—Year 1953

CAUSE OF DEATH	AGE (weeks)				Total under 4 weeks	AGE (months)				Total 1 to 12 months	Grand Total of infant deaths
	Under 1 week	1 to 2	2 to 3	3 to 4		1 to 3	3 to 6	6 to 9	9 to 12		
Asphyxia	1	—	—	—	1	—	—	—	—	—	1
Congenital Malformation	—	1	—	—	1	1	—	—	—	1	2
Cerebral Haemorrhage	3	—	—	—	3	—	—	—	—	—	3
Fibroblastosis	1	—	—	—	1	—	—	—	—	—	1
Gastro-Enteritis	—	—	—	—	—	—	—	1	—	1	1
Pneumonia	—	1	—	—	1	2	—	—	—	2	3
Prematurity	6	1	—	—	7	—	—	1	—	1	8
Pulmonary Tuberculosis	—	—	—	—	—	—	—	1	—	1	1
TOTALS	11	3	—	—	14	3	1	2	—	6	20

BIRTHS AND STILLBIRTHS
For years 1934 to 1953 inclusive

Year	Estimated Mid-Year Population	Males	Females	Total	Legitimate	Illegitimate	Crude Rate per 1,000 Population	Corrected Rate per 1,000 Population	Stillbirths
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	*11·03	17
1951	83400	453	431	884	834	50	10·60	11·23	22
1952	82980	480	477	957	907	50	11·53	12·22	34
1953	82400	509	442	951	904	47	11·54	12·23	31

* A comparability factor for births was issued by the Registrar-General in 1950; similar information for previous years has not been issued.

MATERNAL MORTALITY
For years 1934 to 1953 inclusive

Year	No. of Live and Stillbirths	RATES PER 1,000 LIVE AND STILLBIRTHS					
		Sepsis		Other Causes		Total	
		No.	Rate	No.	Rate	No.	Rate
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	—	—	—	—	—	—
1951	906	—	—	—	—	—	—
1952	991	—	—	2	2·02	2	2·02
1953	982	—	—	—	—	—	—

Part II

LOCAL HEALTH SERVICES

Care of Mothers and Young Children

Midwifery

Health Visiting

Home Nursing

Vaccination and Immunisation

Ambulance

Prevention of Illness, Care and After-Care

Home Help

Mental Health

Although there are six Welfare Centres so placed that they cover the area advantageously, it has been necessary to hold two sessions each week at the Health Centre in the High Park district. The work of these centres is chiefly educational and advisory in character and is directed towards the welfare of the mothers and young children. The sessions at the High Park and Ancliffe Centres are conducted by three medical practitioners, two of whom give general medical services in the town, the remaining two sessions are conducted by the Health Department's medical staff, the lady Assistant Medical Officer of Health being responsible for the Centre at Ancliffe. The sessions at the High Park and Ancliffe Centres are in attendance at each Welfare Centre and the medical and nursing staff maintain a general supervision over the progress of the Centre and infants so that appropriate advice can be given when this is considered necessary.

Ante-Natal Care—A weekly Ante-Natal Clinic was held at 44 Hoghton Street during 1953 for those mothers who had booked to have their confinement at home and also for mothers who were to be admitted to the St. Katharine's Maternity Hospital. This clinic is conducted by Mr. N. E. Laurence, who is the Obstetric Consultant for the two Maternity Hospitals in the town; the Matron or Deputy Matron of the St. Katharine's Maternity Hospital and the non-medical Supervisor of Midwives also do duty at this clinic. In addition, the Domiciliary Midwives attend in rotation to meet their own patients.

Subject to the consent of the general practitioner concerned, mothers who have booked with their family doctor may attend this clinic, to obtain additional ante-natal care. Some mothers in this category attend for blood testing only and in these cases, the results of the tests are forwarded to the patient's own doctor. All mothers who attend this clinic have a blood test for Kahn reaction, haemoglobin estimation, blood grouping and for Rhesus factor as a routine measure.

Maternity outfits are supplied free of cost to all mothers who are having their confinements at home.

During the year, 51 clinic sessions were held and 39 mothers who had booked to have their confinements at home made a total of 122 attendances.

Post-Natal Care—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 403 mothers attended during 1953. In addition, 236 re-visits were made, making a total of 639 visits during the year; 49 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 1953 and their efforts and enthusiasm contributed in no small measure to the steady progress which was maintained throughout the year.

Although there are six Welfare Centres so placed that they cover the area adequately, it has been necessary to hold two sessions each week at the centre in the High Park district. The work of these centres is chiefly educational and is aimed at the improvement of the standard of mothercraft.

The sessions at the High Park and Ainsdale Centres are conducted by three medical practitioners, two of whom give general medical services in the town; the remaining four sessions are conducted by the Health Department's medical staff, the lady Assistant Medical Officer of Health being responsible for the Centres at Crossens, Hampton Road and Derby Road, while the Deputy Medical Officer of Health is responsible for the Liverpool Road Centre. Two Health Visitors are in attendance at each Welfare Centre session and the medical and nursing staff maintain a general supervision over the progress of the babies and infants so that appropriate advice can be given when this is considered necessary.

The following statement shows the attendances made at the Welfare Centres during 1953:—

	Ainsdale	Crossens	Derby Road	Hampton Rd.	High Park	Liverpool Rd.	TOTALS
INFANTS—under 1 year—							
No. of New Cases ...	93	83	179	189	118	151	913
No. of re-attendances	1316	1180	2391	2526	2566	1960	11839
CHILDREN—over 1 and under 5 years—							
No. of New Cases ...	200	194	316	263	307	243	1423
No. of re-attendances	892	620	783	638	775	667	4475
Total No. of attend'c's	2501	2077	3669	3616	3766	3021	18650
No. of Sessions ...	46	45	45	46	93	45	320
Average Attendance per Session... ..	54	46	82	78	40	67	58
Total No. of children who attended during the year	293	277	395	452	425	394	2236
Average Attendance per child	8.5	6.5	9.8	8.0	8.9	7.6	8.3
No. of Attendances made by Health Visitors	92	90	135	138	178	90	723
No. on register at:—							
(a) Beginning of year: aged—							
Under 1 year ...	52	68	143	153	145	87	648
Over 1 and under 5 years ...	155	178	253	267	323	270	1446
TOTALS ...	207	246	396	420	468	357	2094
(b) End of year: aged							
Under 1 year ...	80	77	143	160	105	138	703
Over 1 and under 5 years ...	200	174	237	281	308	221	1421
TOTALS ...	280	251	380	441	413	359	2124

Maternity Dental Clinic—This clinic is held at 2 Church Street and there are sessions each week for expectant and nursing mothers and children under 5 years of age who are not attending primary schools maintained by the local Education Authority. In the past, patients requiring X-ray examination have been referred to the Southport Infirmary, but in future this work will be dealt with at the dental clinic as the necessary apparatus was installed in December of this year.

When dentures are required by expectant and nursing mothers the necessary arrangements are made with private dental mechanics in the town.

The following tables show the work done during the year:—

(a) Number of Cases Treated:—

	Examined	Found to be in need of Treatment	Treated	Made Dentally Fit
Expectant and Nursing Mothers ...	12	11	11	6
Children under 5	124	94	97	92
TOTALS	136	105	108	98

(b) Classification of Treatment provided:—

	Extractions	Anaesthetics		Fillings	Scalings or Scaling and Gum Treatment	Silver Nitrate Treatment	Dressings	Radiographs	Dentures provided	
		Local	General						Complete	Partial
Expectant and Nursing Mothers	17	6	2	14	7	—	3	—	1	1
Children under 5...	103	74	11	203	—	77	—	—	—	—
TOTALS ...	120	80	13	217	7	77	3	—	1	1

Day Nurseries—There are two Day Nurseries in the town, one being in King Street with accommodation for 60 children, and one in Bedford Park with accommodation for 40 children. The King Street Day Nursery is held in Church premises which were originally requisitioned during the war. Early in 1953, however, the Ministry of Health gave the necessary approval for the erection of a new sixty-place Day Nursery on the land in Talbot Street which was purchased by the Corporation for this purpose in 1950. Final approval was obtained in November, 1953, when the Ministry of Health authorised the acceptance by the Council of the tender of Messrs. F. Gatley Ltd. of Lydiate to carry out the work.

When the new Day Nursery is completed it will accommodate the children who at present attend the King Street Day Nursery, thereby enabling the latter mentioned premises to be released by the Corporation.

The need for the Day Nursery Service is shown by the fact that 50% of the mothers are the sole support of their families and that 30% are the main support of their families; the remaining 20% relates to families whose children are in need of day nursery accommodation either because the general health of the children is not satisfactory or where there are bad housing conditions. It should also be pointed out that approximately two-thirds of the parents whose children are attending the Day Nurseries live in rooms which are often overcrowded.

During 1953, the fee for Day Nursery accommodation was reviewed, as the Ministry of Health advised local health authorities that they could charge the full cost of providing the service; prior to this, local health authorities could only charge for food and other articles provided. The Corporation finally decided that the following fees should be charged:—

	Full Day	Half Day
(a) Minimum Fee	1/6	1/-
(b) Maximum Fee	6/3	3/3

These fees, however, may be reduced in cases of financial hardship and in this regard it is interesting to note that at the end of the year, the average daily payment made by the mothers was only 2/2d. for each child attending the Day Nurseries.

Although the King Street and Bedford Park Nurseries are approved as training units, it was not possible to engage any students during 1953, as training was temporarily discontinued. It is intended that the provision of tuition for the Nursery Nurses' Certificate should be considered next year.

The following table shows the attendances at the Day Nurseries during 1953:—

	King Street	Bedford Park	Totals
(1) Number of places provided	60	40	100
(2) Mondays to Fridays:—			
(a) Total attendances	11246	7195	18441
(b) Number of days open	254	254	254
(c) Average daily attendance	44	28	72
(3) Mondays to Saturdays:—			
(a) Total attendances	12126	7442	19568
(b) Number of days open	304	304	304
(c) Average daily attendance	40	24	64

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 the 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 table overleaf shows the number of premature infants born during the year.

Unmarried Mothers—Unmarried Mothers who seek the help of the Department are referred to the Obstetric Specialist at the ante-natal clinic at 44 Hoghton Street and arrangements are then made for the confinement to take place either in the girl's own home or in a Maternity Hospital. She is also advised to continue to attend either the ante-natal clinic at 44 Hoghton Street or the appropriate hospital ante-natal clinic.

At the same time, the mother is seen by the Moral Welfare Worker so that if necessary, appropriate arrangements can be made for residential ante- and post-natal care. In such cases the local Health Authority will accept responsibility for the maintenance of the mother in a voluntary home usually for 6 weeks during the ante-natal period and up to 13 weeks during the post-natal period. The amount paid by the Health Department to the voluntary home is the total cost of the maintenance less any payment which the mother is able to make towards her keep.

The Moral Welfare Worker co-operates with the Superintendent Health Visitor so that the Health Visiting Staff can keep in touch with the girl both before and after the baby is born. During the year, the Moral Welfare Worker dealt with 24 mothers and the Health Department paid the maintenance costs in voluntary homes for 12 mothers during the ante- and post-natal period.

Domiciliary Midwifery—The staff consists of a non-medical supervisor and two district midwives. The supervisor acts as relief when either of the domiciliary midwives are on annual leave or are ill.

The general medical supervision of the domiciliary midwifery staff is undertaken by the Medical Officer of Health while the non-medical supervisor deals with all day-to-day administration including control of work, allocation of duties, etc. All the staff are qualified to administer gas and air analgesia and they possess the apparatus.

As a general rule, the domiciliary midwives visit their cases once every two weeks from the date of the booking to the date of the confinement. Visits are often made weekly during the last month. This applies both to mothers who have not booked a doctor and also to those mothers who have engaged the services of their own doctor or a general practitioner obstetrician and who have requested the help of the domiciliary midwife to act as a maternity nurse. The number of visits in each individual case is, of course, varied to suit the needs of the particular patient concerned.

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

	Doctor present	Doctor not present	Total
1. Number of deliveries attended:—			
(a) Doctor not booked	—	30	30
(b) Doctor booked	14	43	57
	<u>14</u>	<u>73</u>	<u>87</u>
2. Number of patients in (1) above who received:—			
(a) gas and air analgesia	8	61	69
(b) pethidine	9	64	73
	<u>9</u>	<u>64</u>	<u>73</u>
3. Number of patients in (1) above for whom medical aid was summoned:—			
(a) Where the medical practitioner had arranged to provide the mother with maternity medical services under the National Health Service Act ...	—	5	5
(b) Others	—	4	4
		<u>9</u>	<u>9</u>
TOTAL			
4. Number of visits made by midwives during the year:—			
(a) ante-natal visits	1150		1150
(b) nursing visits	1686		1686
	<u>1150</u>		<u>1686</u>
TOTAL	<u>2836</u>		<u>2836</u>
5. Number of attendances made by midwives to ante-natal clinics held at 44 Houghton Street		51	51
		<u>51</u>	<u>51</u>

Midwives in Private Practice—During the year, twelve private midwives notified their intention to practice on the district. Only five of these, however, were actually engaged in midwifery work and the following statement shows the work done in 1953. Two of the five midwives mentioned above are qualified to administer gas and air analgesia.

	Doctor present	Doctor not present	Total
1. Number of deliveries attended:—			
(a) Doctor not booked	2	5	7
(b) Doctor booked	9	4	13
	<u>11</u>	<u>9</u>	<u>20</u>
2. Number of patients in (1) above who received:—			
(a) gas and air analgesia	2	1	3
(b) pethidine	7	4	11
	<u>9</u>	<u>5</u>	<u>14</u>
3. Number of patients in (1) above for whom medical aid was summoned:—			
(a) Where the medical practitioner had arranged to provide the mother with maternity medical services under the National Health Service Act	—	5	5
(b) Others	—	None	—
	<u>—</u>	<u>5</u>	<u>5</u>
4. Number of visits of inspection made by non-medical Supervisor to midwives in their own homes		20	20

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

	Doctor present	Doctor not present	Total
1. Number of deliveries	36	5	41
	<u>36</u>	<u>5</u>	<u>41</u>
2. Number of patients in (1) above who received gas and air analgesia	12	—	12
	<u>12</u>	<u>—</u>	<u>12</u>
3. Number of patients in (1) above for whom medical aid was summoned	2	—	2
	<u>2</u>	<u>—</u>	<u>2</u>
4. Number of practising midwives employed at 31st December, 1953	6	—	6
	<u>6</u>	<u>—</u>	<u>6</u>
5. Number of midwives in (4) above who are qualified to administer gas and air analgesia	3	—	3
	<u>3</u>	<u>—</u>	<u>3</u>

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 patients dealt with during 1953:—

	Christiana Hartley Maternity Hospital	St. Katharine's Maternity Hospital	Total
(1) Number of Deliveries			
(a) Doctor present	84	224	308
(b) Doctor not present	460	245	705
TOTALS	544	469	1013
(2) Number of Patients in (1) above who received gas and air analgesia			
(a) Doctor present	26	196	222
(b) Doctor not present	404	206	610
TOTALS	430	402	832
(3) Number of Patients in (1) above for whom medical aid was summoned	89	16	105
(4) Number of practising Midwives 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	5	10

Distribution of Maternity Cases—The following table shows the percentage of maternity cases dealt with during 1953 by the various services, and similar figures are also shown for the previous year:—

	1953		1952	
	No. of Deliveries	%	No. of Deliveries	%
(a) District				
Municipal Midwives	87	7·51	71	5·66
Private Midwives	20	1·73	20	1·62
TOTALS	107	9·24	91	7·28
(b) Institutions				
Christiana Hartley Maternity Hospital	544	46·84	567	45·20
St. Katharine's Maternity Hospital	469	40·39	553	44·09
Nursing Homes	41	3·53	43	3·43
TOTALS	1054	90·76	1163	92·72
GRAND TOTALS (a) and (b) ...	1161	100·00	1254	100·00

SUMMARY OF MIDWIFERY STATISTICS FOR YEAR 1953

	No. of Deliveries			No. of Patients in Column (3) who received gas and air analgesia			No. of Patients in Column (3) for whom medical aid was summoned
	As Midwife (Doctor present)	As Maternity Nurse (Doctor not present)	Total	As Midwife (Doctor present)	As Maternity Nurse (Doctor not present)	Total	
DISTRICT CASES:—							
Municipal Midwives	14	73	87	8	61	69	9
Private Midwives	11	9	20	2	1	3	5
TOTALS (a)	25	82	107	10	62	72	14
INSTITUTIONAL CASES:—							
Christiana Hartley Maternity Hospital ...	84	460	544	26	404	430	89
St. Katharine's Maternity Hospital ...	224	245	469	196	206	402	16
Nursing Homes	36	5	41	12	—	12	2
TOTALS (b)	344	710	1054	234	610	844	107
GRAND TOTALS (a) and (b)	369	792	1161	244	672	916	121

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 present staff consists of a Superintendent Health Visitor, who also supervises the school nursing work, 2 School Nurses, 1 Tuberculosis Health Visitor, 1 Health Visitor for Elderly People and 11 Health Visitors/School Nurses, making a total of 16. The appropriate allocation of salaries to Local Health Authority work is 9½ Nurses, leaving 6½ Nurses chargeable to the School Health Service.

Each of the 11 Health Visitors is responsible for a district and based on the estimated figures for the year 1953, the average case load of the 0 to 14 years age group is 1,263.

Other work which falls to the lot of the Health Visitor is that of dealing with the non-medical after-care of patients discharged from hospital, the arranging of home help of a domestic nature and similar duties.

There is good linkage of the hospital work with that of the Health Visitors but linkage with the general practitioner service is not yet well developed and much work requires to be done to strengthen the bonds between these parts of the Health Service.

The following table shows the work done by the Health Visitors during 1953:—

	First Visits	Re- Visits	Total Visits
EXPECTANT MOTHERS	766	682	1448
<hr/>			
CHILDREN UNDER 1 YEAR:—			
Routine	944	5474	6418
Prematurity	24	147	171
Stillbirth	24	—	24
Immunisation	—	61	61
Illness	—	40	40
Miscellaneous	15	251	266
	<hr/>	<hr/>	<hr/>
	1007	5973	6980
<hr/>			
CHILDREN 1 TO 2 YEARS:—			
Routine	22	4287	4309
Immunisation	—	51	51
Illness	—	9	9
Miscellaneous	5	90	95
	<hr/>	<hr/>	<hr/>
	27	4437	4464
<hr/>			
CHILDREN 2 TO 5 YEARS:—			
Routine	51	5799	5850
Immunisation	—	37	37
Illness	—	18	18
Miscellaneous	—	181	181
	<hr/>	<hr/>	<hr/>
	51	6035	6086
<hr/>			

	First visits	Re-visits	Total visits
OTHER CASES:—			
Infectious Disease	4	6	10
Other Illness	13	16	29
Old People	239	1254	1493
Miscellaneous	383	323	706
	<hr/>	<hr/>	<hr/>
	639	1599	2238

Summary

EXPECTANT MOTHERS	766	682	1448
CHILDREN UNDER 1 YEAR	1007	5973	6980
CHILDREN AGED 1 TO 2 YEARS	27	4437	4464
CHILDREN AGED 2 TO 5 YEARS	51	6035	6086
OTHER CASES	639	1599	2238
	<hr/>	<hr/>	<hr/>
TOTALS	2490	18726	21216

(During the year, a total of 2921 "no access" visits were made)

In addition, the Health Visitors made the following attendances at Clinics and Centres:—

723 attendances at Welfare Centres.

49 attendances at the Post-Natal Clinic which is held at 44 Houghton Street.

36 attendances at the Geriatric Out-Patients' Clinic which is held at the Promenade Hospital.

34 attendances at the Paediatric Clinic, and

40 attendances at the V.D. Clinic which is held at the Southport Infirmary.

—
882 Total number of clinic attendances made by Health Visitors.
—

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 Local Health Authority is responsible for the reimbursement of all expenditure incurred by the Society in providing the service. The general direction is controlled by a Joint Sub-Committee, five members being appointed by the Society, and five members by the local Health Authority. The Joint Sub-Committee meets at intervals to receive reports of the work done and to approve the refund of expenditure to the Society. The advice of the Medical Officer of Health is always available to the Matron and there is close co-operation, particularly in regard to the appointment of nursing staff; monthly reports of the work done and staff available are sent to the Medical Officer of Health by the Matron.

The Nursing Establishment consists of 1 Superintendent, 1 Assistant Superintendent and 14 District Nurses; 9 Nurses, including the Superintendent and her Assistant are resident in the District Nurses Home, while the remaining 7 are non-resident. Four motor cars are available, one being allocated to the Superintendent and her Assistant, the other three being used by the District Nurses. The remaining Nurses use bicycles and public transport.

Requests for nursing assistance are made direct to the Superintendent of the Home Nursing Service at the Nurses' Home or to the Superintendent Health Visitor at the Health Department. No arrangements exist to provide a night service but urgent calls out of ordinary working hours are attended to.

The following statement shows the work done during 1953:—

	Classification of Cases					TOTALS
	(1)	(2)	(3)	(4)	(5)	
No. of Cases on Register at commencement of period	241	47	—	5	1	294
Add number of new cases during period	1652	228	31	37	14	1962
TOTALS	1893	275	31	42	15	2256
Deduct number of cases discontinued during period	1601	225	31	34	14	1905
Number of Cases on Register at end of period	292	50	—	8	1	351
Total number of visits made ...	38528	8777	243	1643	96	49287

Classification of Cases:—

1. Medical. 2. Surgical. 3. Infectious Diseases. 4. Tuberculosis. 5. Maternal Complications.

	No. of Cases	No. of Visits
(a) Number of new patients included above who were aged 65 or over at the time of the first visit during the year	1153	19557
(b) Number of children included above who were under 5 years of age at the time of the first visit during the year	92	482
(c) Number of patients included above who have had more than 24 visits during the year	465	18657

The following table shows how the work has increased during the last five years:—

Year	Total number of patients visited		Total number of visits	
1949	...	1767	...	35301
1950	...	1955	...	40890
1951	...	2162	...	41208
1952	...	2189	...	43585
1953	...	2256	...	49287

It will be seen that since 1949, the number of patients has increased by 28% and the number of visits by 39%; during this same period, the number of District Nurses has been increased from 13 to 16.

DIPHTHERIA IMMUNISATION

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 to make every effort to ensure that the infant is protected against this disease. Posters and leaflets are displayed at Welfare Centres and all children admitted to the Day Nurseries must be immunised. Special attempts are also made to immunise all children admitted to the Homes administered by the Children's Committee.

Follow-up letters are sent at the appropriate times, stressing the need for "re-inforcing" injections to maintain immunity throughout school life. Particulars are obtained from the schools each year showing the names of children not immunised and the School Nurses visit the mothers of such children with a view to persuading them to accept immunisation.

In addition to the work done by the General Medical Practitioners, regular immunisation sessions are held at the Health Department and children are also protected in this way 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
CHILDREN AGED:—							
(a)	Under 1 year	...	...	...	...	547	None
(b)	1 to 4 years	...	...	...	...	120	273
(c)	5 to 14 years...	...	...	...	...	24	240
TOTALS						691	513
DONE BY:—							
(a)	General Practitioners	...	...	...	...	348	246
(b)	Health Department's Staff...	...	...	...	...	343	267
TOTALS						691	513

The percentage of children immunised at the end of 1953 is shewn below, together with similar figures for the previous year:—

	1953			1952		
	Age Groups			Age Groups		
	0—4	5—14	Total 0—14	0—4	5—14	Total 0—14
Total number of children who had completed full course of primary immunisation at any time up to the 31st December	2686	8592	11278	2908	8702	11610
Estimated child population (Mid-Year)	4300	9600	13900	4600	9400	14000
Percentage of children immunised	62.46	89.50	81.14	63.22	92.58	82.94

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.

During the course of their normal visits, the Health Visitors are required to stress the importance of smallpox vaccination when the baby has attained the age of 3 months. Similar advice is also given at the appropriate times to any mothers attending the Welfare Centres; information leaflets are distributed at the Centres and also during the course of home visits.

The following table shows the number of persons vaccinated and re-vaccinated in 1953 and the previous year:—

	1953						1952					
	Age Groups						Age Groups					
	Un-der 1 yr.	1—2	2—4	5—14	15 and over	Total	Un-der 1 yr.	1—2	2—4	5—14	15 and over	Total
Number of persons (a) Vaccinated ...	115	132	61	38	102	448	106	90	24	13	84	317
(b) Re-vaccinated	—	2	7	30	302	341	—	—	5	18	257	280

WHOOPIING COUGH IMMUNISATION

Throughout the year, whooping cough immunisation was carried out at the Welfare Centres and the Health Department, but only at the specific request of the parents of the child.

During 1953, however, this arrangement was reviewed and it was decided that sufficient evidence was available from the Medical Research Council's trials to justify an extension of the whooping cough immunisation scheme. In September, therefore, a recommendation was made to the Health Committee that the whooping cough arrangements should be amended to allow general practitioners to take part in the scheme and this recommendation was subsequently approved by the Council.

At the end of the year all arrangements had been completed with the general practitioners to enable the extended scheme to commence on the 1st January, 1954.

During 1953, 288 children were immunised against whooping cough.

AMBULANCE SERVICE

The Ambulance Service continues to be operated by the Fire Brigade under the direct control of the Fire and Ambulance Service Committee, although matters of policy are referred to the Health Committee and monthly informative reports in respect of the Ambulance Service are submitted to that Committee.

The Chief Fire Officer is also the Chief Ambulance Officer. The Fire Brigade establishment is augmented by 16 men in consequence of the Ambulance Service commitments, but all personnel of the Brigade take part in both fire and ambulance duties.

The Service operates a fleet of 5 ambulances and 2 sitting case cars, and a summary of the work done, with comparative figures from 1949, is set out below.

	1949	1950	1951	1952	1953
Total number of Cases	10,443	14,404	18,863	23,499	26,275
Other Work	375	608	652	612	654
GRAND TOTAL	10,818	15,012	19,515	24,111	26,929
*Mileage	82,602	95,816	111,073	122,395	123,554
*Analysis of Mileage:—					
(a) Inside the Borough	41,782	53,848	62,321	71,374	77,040
(b) Outside the Borough	40,820	41,968	48,752	51,021	46,514
	82,602	95,816	111,073	122,395	123,554

There has been a steadily increasing demand on the Service since 1949, but some success has been achieved in reducing the mileage in relation to the number of patients by the installation of radio control, and the establishment of a close liaison between the control room attendants at the Fire Station and the Almoner's Departments at the Infirmary and Promenade Hospital.

Requests for ambulance transport from hospitals are usually directed through the Almoner's office and written certification is required in respect of all out-patient journeys, although for the sake of convenience weekly certification sheets are accepted.

Requests for ambulance transport from doctors are accepted by telephone and written certification is not normally required, although the right is reserved to request written certification in unusual cases. These are usually referred by the Chief Ambulance Officer to the Medical Officer of Health for investigation. In respect of emergency cases, however, calls are accepted without question from any source.

There has been comment in the town on the use that is made of the Ambulance Service.

Some 100 cases are transported each week day and by far the largest number of these are out patients travelling to and from the Promenade Hospital and General Infirmary for treatment. The volume of these cases depends on the incidence of clinics and the attendance of specialists. There are certain busy days and certain busy times on those days. To be able to operate a fixed time schedule a considerable number of vehicles and men would be required: the personnel would be very much occupied at the busy times but at others the service would be overstaffed. For example there are heavy commitments at approximately 9 a.m. each morning taking patients to treatment centres, at lunch time taking them home, immediately after lunch for the afternoon patients and again at tea time.

To use the men and vehicles to the best advantage a priority system is operated, namely, emergency cases first, admissions to hospital second, discharges from hospital third, out patients to hospital fourth and out patients to their homes last. Persons in the last two categories may experience some delay. There are many factors outside the control of the watchroom staff which influence the availability of ambulances, e.g. emergency calls, vehicle breakdowns, etc.

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 1953 sick-room equipment was supplied to 249 patients as compared with 290 in the previous year.

Diphtheria Immunisation—The publicity scheme in regard to diphtheria immunisation was continued throughout 1953 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 at the time of the routine medical inspections and these cases are followed-up by the staff of the department.

Sick Room Helpers' Scheme—The object of this 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 2/- per hour, but this fee may be reduced or cancelled in cases of financial hardship.

During 1953, sickroom help was provided for 30 patients, as compared with 21 in the previous year.

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.

The "Mothers' Club" at Hampton Road Welfare Centre held regular evening meetings during the winter months and in addition to social activities, various classes were organised dealing with subjects which are of special interest to mothers who have young children in their families, e.g. cooking, sewing and dressmaking, etc.

In November, the Mothers' Choir gave a concert for their friends and relatives and they also visited a number of the local hospitals at Christmas to sing carols.

This Club forms a useful link with the normal medical and nursing work which is done at the Centre and it is hoped that this scheme will be extended to other Centres in the future.

Co-operation with Hospitals—Throughout the year, the Almoners of the local Hospitals continued to refer the names of patients to the Health Department where the services of a district nurse or home help seemed to be required. A total of 142 patients was dealt with in this manner and the necessary help was arranged as compared with 110 patients in the previous year.

Throughout the year, members of the Health Visiting Staff attended certain hospital clinics and these arrangements have formed an invaluable link between the hospital service and the home visiting which is done by the Health Visitors. The hospital clinics concerned are as follow:—

1. Post-natal clinic held at 44 Hoghton Street.
2. Geriatric clinic held at the Promenade Hospital.
3. Paediatric clinic held at the Southport Infirmary.
4. V.D. Clinic held at the Southport Infirmary.
5. Tuberculosis (Patients) clinic held at the Southport Infirmary.

The Medical Officer of Health continued to be in consultant charge of the infectious disease beds at the New Hall Hospital and the Deputy Medical Officer of Health also assisted with this work.

The Assistant Medical Officer of Health attended the Paediatrician's Clinic at the Southport Infirmary at weekly intervals and the exchange of information has been very helpful.

By arrangement with the Liverpool Regional Hospital Board, the Senior Hospital Medical Officer at the New Hall Sanatorium continued to give three-elevenths of his time to the preventive medical work in connection with tuberculosis.

The Medical Officer of Health and the Deputy Medical Officer of Health are members of the Medical Advisory Board to the Local Hospital Management Committee and the Medical Officer of Health also acts as Honorary Secretary to the Medical Advisory Board.

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 2/9d. per hour, but on application being made this fee may be reduced or cancelled in cases of financial hardship. All the helps are 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 1953:—

	Classification of Cases			Total
	Maternity	Sickness	Old Age	
Number of Cases on register at beginning of year	—	32	74	106
Number of New Cases during year	22	88	88	198
	22	120	162	304
Number of Cases discontinued during year ...	22	100	55	177
Number of Cases on register at end of year ...	—	20	107	127
Number of Applications received	23	85	80	188
Number of Cases assisted	22	82	76	180
Number of Cases not assisted	1	3	4	8*

(*In 8 Cases the request for help was withdrawn by the Applicants).

Number of Helps employed at beginning of year (All Part-Time)	23
Number Appointed during year	8
	31
Number leaving during year	10
	21
Number of Helps employed at end of year	21
Number of Visits to homes by Organiser	650
Number of Persons interviewed at Office	804
Number of Hours worked by Helps	22923

The following statement shows how the work has increased during the last five years.

	1949	1950	1951	1952	1953
No. of households provided with Home Helps	185	249	246	272	304
No. of hours worked by Home Helps	11701	17822	20864	20392	22923

It will be seen that the number of households helped has increased by 65% from 185 in 1949 to 304 in 1953 and that the number of hours worked has increased by 96% from 11,701 to 22,923 in the same period. It should also be noticed that the average amount of help supplied to each household has also increased during this period from 63 hours per household in 1949 to 75 hours per household in 1953.

MENTAL HEALTH SERVICE

Sub-Committee—Ten members of the Council serve as a Mental Health Sub-Committee and two of these members are doctors; in addition, a medical practitioner has also been co-opted onto this Sub-Committee to provide a link between the general medical service of the town and the local Health Authority's service.

Duties of the local Health Authority: The duties of the local Health Authority in regard to mental health are as follow:—

- (a) The initial care and removal to hospital of persons who are suffering from mental illness and who are dealt with under the Lunacy and Mental Treatment Acts.
- (b) The ascertainment and, where necessary, removal to institutions of mental defectives and the supervision, guardianship and training of those mental defectives who remain in the community and
- (c) The care and after-care of all types of patient, including arrangements for the prevention of mental illness.

Staff—The staff available for this service at the end of the year was a part-time Senior Duly Authorised Officer, two full-time Duly Authorised Officers and a Home Teacher for Mental Defectives; all the Duly Authorised Officers are also appointed as Mental Health Visitors.

The position of part-time Medical Officer for the Mental Health Service remained vacant throughout the year as no suitable applications were received for the vacancy. For this reason, the medical supervision has been undertaken by the Deputy Medical Officer of Health but this is only intended to be a temporary arrangement and the staffing position for the Mental Health Service as a whole is to be reviewed in the coming year.

Mental Illness—Although difficulties were experienced from time to time during the year in obtaining hospital accommodation for patients suffering from mental illness, the general arrangements were adequate. The Duly Authorised Officers have to maintain a twenty-four hour service as a request for help may be received at any time of the day or night. It will also be realised that when the initial enquiries are made by the Duly Authorised Officers much tact and patience is required and for this reason, one case may occupy their time for many hours before it is brought to a satisfactory conclusion.

When patients have been discharged from hospital, a notification is sent to the Health Department so that the necessary arrangements can be made for "follow-up" visits. This is an important feature of the work of the Duly Authorised Officers as they can make sure that the patient is aware of the help which can be given. Through his or her contact with the Health Department's staff, the patient also realises that friendly advice and assistance is easily available, should this be required.

The work in regard to mental illness also includes the preparation of case notes for the hospital on the admission of a patient and home reports before discharge are also required on occasions.

Mental Deficiency—Much improvement is still needed by the provision of more beds before it will be possible to arrange admissions without the considerable delays and difficulties which are experienced at the present time. It is realised that the shortage of institutional accommodation is common throughout the country and there is no doubt that the Regional Hospital Boards and the Ministry of Health are fully aware of the situation. Even so, it should be mentioned that when a bed is required in an urgent manner, any undue delay in admission causes grave hardship for the parent or relative who is caring for the defective and the Local Health Authority's responsibility is also increased.

The Mental Health Visitors' supervisory work in connection with mental defectives on the district was continued as in the previous year and periodical progress reports were also prepared for those defectives who were on licence from institutions.

(B) MENTAL DEFICIENCY (Mental Deficiency Acts, 1913 to 1938)	During 1953				Total Cases on Authority's registers as at 1/1/1954			
	Under age 16		Aged 16 and over		Under age 16		Aged 16 and over	
	M.	F.	M.	F.	M.	F.	M.	F.
(1) PARTICULARS OF CASES REPORTED DURING 1953:—								
(a) Cases at 31st December ascertained to be defectives "subject to be dealt with." Action taken on reports by:—								
(i) Local Education Authorities on children								
(1) While at school or liable to attend school	—	2	—	—	—	—	—	—
(2) On leaving special schools	—	1	—	—	—	—	—	—
(3) On leaving ordinary schools... ..	—	—	—	—	—	—	—	—
(ii) Police or by Courts	—	—	1	—	—	—	—	—
(iii) Other sources	1	—	1	—	—	—	—	—
(b) Cases reported but not regarded at 31st December as defectives "subject to be dealt with" on any ground	—	—	—	—	—	—	—	—
(c) Cases reported but not confirmed as defectives by 31st December and thus excluded from (a) or (b)	—	—	—	—	—	—	—	—
Total number of cases reported during the year ...	1	3	2	—	—	—	—	—
(2) DISPOSAL OF CASES:—								
(a) Of the cases ascertained to be defectives "subject to be dealt with" number								
(i) Placed under Statutory Supervision ...	1	—	1	—	6	2	8	9
(ii) Placed under Guardianship	—	—	—	—	—	—	—	—
(iii) Taken to "Places of Safety"	—	—	—	—	3	—	1	1
(iv) Admitted to Institutions	—	—	1	—	3	4	53	40
(b) Of the cases not ascertained to be defectives "subject to be dealt with" number:—								
(i) Placed under Voluntary Supervision ...	—	3	—	—	1	3	5	6
(ii) Action unnecessary	—	—	—	—	—	—	—	—
Total of Item 2	1	3	2	—	13	9	67	56
(3) CLASSIFICATION OF DEFECTIVES IN THE COMMUNITY ON 1/1/54:—								
(a) Cases included in Item 2(a)(i) to (iii) above in need of institutional care:—								
(1) In urgent need of institutional care:—								
(i) "cot and chair" cases	—	—	—	—	1	—	1	—
(ii) ambulant low grade cases	—	—	—	—	4	—	—	—
(iii) medium grade cases	—	—	—	—	—	1	—	—
(iv) high grade cases	—	—	—	—	—	—	—	—
(2) Not in urgent need of institutional care:—								
(i) "cot and chair" cases	—	—	—	—	—	—	—	—
(ii) ambulant low grade cases	—	—	—	—	—	—	1	—
(iii) medium grade cases	—	—	—	—	—	—	—	—
(iv) high grade cases	—	—	—	—	—	—	—	—
Total of Item 3(a)... ..	—	—	—	—	5	1	2	—

	Under age 16		Aged 16 and over	
	M.	F.	M.	F.
(3)(b) Of the cases included in items 2(a)(i) and (ii) and 2(b)(i) overleaf, number considered suitable for:—				
(i) occupation centre	4	2	3	4
(ii) industrial centre	—	—	—	—
(iii) home training	—	—	1	4
Total of item 3(b)	4	2	4	8
(c) Of the cases included in Item 3(b) number receiving training on 1/1/54:—				
(i) in occupation centre	—	—	—	—
(ii) in industrial centre	—	—	—	—
(iii) at home	4	2	4	8
Total of Item 3(c)	4	2	4	8

(4) Number of Mental Defectives who were in Institutions, under Community Care (including Voluntary Supervision) or in "Places of Safety" on 1st January, 1953, who have ceased to be under any of these forms of care during 1953.

	M.	F.	T.
(a) Ceased to be under care	1	2	3
(b) Died, removed from area, or lost sight of ...	—	—	—
TOTAL	1	2	3

(5) Number of visits made by Mental Health Visitors during 1953 to cases under Statutory Supervision, Guardianship or on Licence from Institutions 135

Training of Mental Defectives

Summary of work for 1953:—

(1) Number on register:—

Number of cases on register at beginning of period	19
Number of new cases added	1
	<hr/>
	20
	<hr/>
Number of cases taken off register	2
	<hr/>
Number of cases on register at end of period	18
	<hr/>

(2) Training at Homes of Mental Defectives:—

(a) Number of visits made to mental defectives in their own homes 776

(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.

(3) At the Centre:—

(a) Number of sessions held 139

(b) Total number of attendances made by mental defectives during the period 1604

(c) Number of defectives attending Centre at end of the period ... 13

(d) Kinds of training provided:—

Physical and rhythmic training, handwork, sense training, singing and games.

SANITARY CIRCUMSTANCES OF THE AREA

Water—The water supply is maintained by the Board, which is a combination of the local authorities of the County Borough of Southampton, the Urban District of Fareham, and the West Hampshire Rural District. The Board supplies water within the area of these three authorities and also in part of the 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 South Hill does not come into Southampton.

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 an orange-yellow color, and although somewhat hard is exceptionally pure, both chemically and bacteriologically. The water from the Mitchell House pumping station (opened in July, 1924) shows a marked difference from the others, being a much better supply.

During 1929 a new deep borehole at Southwick 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.

Part III

SANITARY CIRCUMSTANCES OF THE AREA

439.2	Total solid matter in solution
0.13	Oxygen required in 15 minutes
0.21	in 4 hours
None	Ammoniacal Nitrogen as N.
None	Albuminoid Nitrogen as N.
None	Nitrous Nitrogen as N.
None	Nitric Nitrogen as N.
30.0	Combined Chlorine

Bacteriological Examination, 3rd December, 1923

Number of bacteria on agar at 37° C. for 24 hours

B. Coll in water examined

Total coliform organisms in water examined

Class I: Highly satisfactory

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, 9th December, 1953

The water is hard with a temporary hardness of 258 parts per million and a permanent hardness of 88 parts. It therefore has a total hardness of 346 parts per million.

	Parts per Million
Total solid matter in solution	439·2
Oxygen required } in 15 minutes	0·13
to oxidise } in 4 hours	0·21
Ammoniacal Nitrogen as N.	None
Albumoid Nitrogen as N.	None
Nitrous Nitrogen as N.	None
Nitric Nitrogen as N.	None
Combined Chlorine	30·0

Bacteriological Examination, 9th December, 1953

Number of Bacteria on agar at 37° 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.

Thanks are due to Mr. N. B. Bennett, A.M.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,
26th March, 1953**

	Halsall Lane P.S.	Springfield P.S. (Filtered)	Bickerstaffe P.S. (Filtered)	Blundell House P.S. (Filtered)
Chemical Results in parts per million				
Appearance	Bright	Bright	Clear and Bright	Bright
Colour	Nil	Nil	Nil	Nil
Odour	Nil	Nil	Nil	Nil
Reaction pH	6.9	7.4	7.3	6.9
Free Carbon Dioxide	34	15	21	25
Electric Conductivity at 20° C. ...	470	660	780	360
Total Solids dried at 180° C. ...	310	440	565	235
Chlorine in Chlorides	24	34	24	25
Nitrogen in Nitrates	3.0	0.0	0.0	0.0
Nitrites	less than 0.01	Absent	Absent	less than 0.01
Metals	Manganese 0.03	Absent	Absent	Manganese 0.05
	Iron: 0.03			Iron: less than 0.03
	Other metals absent			Other metals absent
Free Ammonia	0.000	0.000	0.021	0.000
Albuminoid Ammonia	0.000	0.000	0.000	0.000
Oxygen absorbed in 4 hours at 27° C.	0.10	0.05	0.00	0.30
Hardness: Permanent	65	85	130	40
Temporary	185	270	300	140
Total	250	355	430	180
(Total Hardness: Degrees Clarks Scale)	17.5	24.85	30.2	12.6
Bacteriological Results				
Number of Colonies developing:—				
On Agar per c.c. in 3 days at 20° C.	1	0	0	0
1 day at 37° C.	0	0	0	0
2 days at 37° C.	0	0	0	0
Presumptive Coli-aerogenes Reaction				
Present in	—	—	—	—
Absent from	100 c.c.	100 c.c.	100 c.c.	100 c.c.
Bact-coli (Type 1)				
Present in	—	—	—	—
Absent from	100 c.c.	100 c.c.	100 c.c.	100 c.c.
Clostridium Welchii Reaction				
Present in	—	—	—	—
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, 1953, was 202,993.

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 Bathing Lake was used by 160,500 bathers during the year.

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 27th July, 1953, are as follows:—

Summary of Findings	Bathing Lake	Victoria Baths
Organisms at 37° C.	22 per c.c.	8 per c.c.
Organisms at Room Temperature	31 per c.c.	8 per c.c.
Coliform Bacilli	Nil	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 6,131 during the year, and the Compton Road Baths an attendance of 5,937.

SANITARY INSPECTION OF THE AREA

Drainage—Complaints received regarding choked and defective drainage systems of houses numbered 1,476 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 38 of the Shops Act, 1950, have been referred to the Sanitary Department, and have been dealt with.

Schools—The regular inspections 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 thirty-four occasions. The conditions under which this house is conducted have on the whole been satisfactory.

FACTORIES

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

Factories Acts, 1937 and 1948 (Part I).

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

Premises (1)	Number on Register (2)	Number of		
		Inspections (3)	Written notices (4)	Owners prosecuted (5)
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities	351	240	6	—
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	719	492	36	—
(iii) Other Premises in which Section 7 is enforced by the Local Authority* (excluding out-workers' premises)	15	15	—	—
TOTAL	1085	747	42	—

* *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").

Particulars (1)	Number of cases in which defects were				Number of cases in which prosecutions were instituted (6)
	Found (2)	Remedied (3)	Referred To H.M. Inspector By H.M. Inspector (4) (5)		
Want of cleanliness (S.1.)	21	26	—	—	—
Overcrowding (S.2.)	—	—	—	—	—
Unreasonable temperature (S.3.)	—	—	—	—	—
Inadequate ventilation (S.4.)	—	—	—	—	—
Ineffective drainage of floors (S.6.)	—	—	—	—	—
Sanitary Conveniences (S.7.)					
(a) insufficient	4	2	—	—	—
(b) Unsuitable or defective	17	19	—	4	—
(c) Not separate for sexes	3	3	—	—	—
Other offences against the Act (not including offences relating to Outwork)	26	22	—	—	—
TOTAL	71	72	—	4	—

OUTWORK

Nature of Work (1)	Section 110			Section 111		
	No. of out-workers in Aug. list required by Sect. 110 (1) (c) (2)	No. of cases of default in sending lists to the Council (3)	No. of prosecutions for failure to supply lists (4)	No. of instances of work in un-wholesome premises (5)	Notices served (6)	Prosecutions (7)
Wearing Apparel:— Making, etc. ...	19	—	—	—	—	—
TOTAL	19	—	—	—	—	—

Smoke Abatement—One hundred and fifty-two 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; 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 only by means of motor transport. The staff of Sanitary Inspectors also survey 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 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.

The following table shows the work done during the year:—

Prevention of Damage by Pests Act, 1949
Report for the Year, 1953

1. PREVALENCE OF RATS AND MICE

TYPE OF PROPERTY	Number of Properties in Local Authority's Area				Analysis of Column (iv)		
	Total	In which Infestation was:			Number Infested by:		
		Notified by Occupier	Other-wise Discovered (iii)	Recorded Total of (ii) and (iii) (iv)	RATS		MICE ONLY (vii)
					Major (v)	Minor (vi)	
(i)	(ii)	(iii)	(iv)	(v)	(vi)	(vii)	
Local Authority Property ...	192	18	41	59	—	15	44
Dwelling Houses ...	24626	100	65	165	—	97	68
Business Premises ...	3636	67	42	109	—	51	58
Agricultural Property	44	4	1	5	—	5	0
TOTALS ...	28498	189	149	338	—	168	170

In addition 18 infestations proved to be rabbits and moles.

2. MEASURES OF CONTROL BY LOCAL AUTHORITY

Type of Property	No. of Properties Inspected	No. of Inspections made	Number of Notices Served Under Section 4		Number of Treatments carried out:—					Block Treatment of Properties in Different Occupancies Under Section 6(i) or by Informal Arrangement		
			Treatments	Works	By arrangement with Occupier		Under Section 5 (i)			No. of Blocks	No. of Separate Occupancies	Associated Sewers
					Rats	Mice Only	Rats		Mice Only			
							Major	Minor				
Local Authority's Property	249	467	—	7	16	39	—	—	—	3	150	3
Dwelling Houses ...	407	483	—	16	26	42	—	—	—	1	10	2
Business Premises ...	544	762	2	24	43	36	—	—	—	1	6	2
Agricultural Property ...	62	37	—	3	—	—	—	—	—	—	—	—
TOTALS ...	1262	1749	2	50	85	117	—	—	—	5	166	7

Summary of Visits—During the year the total number of visits made by the Inspectors was 24,957, classified as follows:—

Nuisances

COMPLAINTS—NUMBER INVESTIGATED:—

(1) Housing Defects ...	467
(2) Choked and Defective Drains ...	1476
(3) Emission of Smoke ...	41
(4) Accumulation of Offensive Matter ...	67
(5) Miscellaneous ...	628
TOTAL ...	2,679

INSPECTIONS:—

Dwelling Houses	...	...	...	...	...	...	1121
Common Lodging Houses	...	...	...	...	...	...	34
Houses let in Lodgings	...	...	...	...	...	...	3
Common Yards, Back Roads and Passages	...	...	...	...	...	...	293
Horse-Manure Middensteads	...	...	...	...	...	...	49
Pigstyes	...	...	...	...	...	...	148
Offensive Trades	...	...	...	...	...	...	699
Rag Flock and Upholstery Premises	...	...	...	...	...	...	67
Places of Public Entertainment	...	...	...	...	...	...	22
Public Sanitary Conveniences	...	...	...	...	...	...	473
Tents, Vans and Sheds	...	...	...	...	...	...	24
Abattoir	...	...	...	...	...	...	855
Ashes Receptacles (Ashpits and Dustbins)	...	...	...	...	...	...	759
Conversions (Earth Closets and Bristol Ejects to W.C.'s)	...	...	...	...	...	...	34
Smoke Observations	...	...	...	...	...	...	152

Testing Drains:—

By Smoke	...	...	...	...	...	...	432
By Breaking Down	...	...	...	...	...	...	33
By Water	...	...	...	...	...	...	4
By Coloured Water	...	...	...	...	...	...	36
Insufficient Water Supply	...	...	...	...	...	...	2

Factories Act, 1937/48:—

Factories with mechanical power	...	...	...	...	...	...	507
Factories without mechanical power	...	...	...	...	...	...	240
Outworkers' Premises	...	...	...	...	...	...	14
Workplaces	...	...	...	...	...	...	2
Shops Act, 1950	...	...	...	...	...	...	4
Fried Fish Shops	...	...	...	...	...	...	88
Fishmongers and Greengrocers	...	...	...	...	...	...	1001
Butchers' Shops	...	...	...	...	...	...	1726
Grocers' Shops	...	...	...	...	...	...	1958
Bakehouses	...	...	...	...	...	...	255
Public Houses, Beer Houses, etc.	...	...	...	...	...	...	78
Food Preparing and Storing Places	...	...	...	...	...	...	1788
Dairies	...	...	...	...	...	...	693
Ice Cream Premises	...	...	...	...	...	...	447
Pet Animals Act, 1951	...	...	...	...	...	...	22
Infectious Disease Visits	...	...	...	...	...	...	230
Prevention of Damage by Pests Act, 1949	...	...	...	...	...	...	3102
Diseases of Animals Acts and Orders	...	...	...	...	...	...	6

Inspections of Dwelling Houses and other premises for vermin infestation	...	...	...	...	...	155
Visits to work in progress	...	...	...	...	...	4515
Visits re Housing Survey	...	...	...	...	...	113
Miscellaneous Visits (Interviews, etc.)	...	...	...	...	...	2773
TOTAL	...	...	...	...	...	<u>24,957</u>

Nuisances—The number of schedules of cases recorded for abatement was 2,679.

In all cases the usual verbal request for the abatement of nuisances found was made, but in 1,519 instances it was necessary to serve written notices as follows:—

Preliminary	...	...	...	1415
Statutory	...	...	...	104
TOTAL	...	...	...	<u>1519</u>

The number of preliminary and statutory notices complied with during the year was 1,348.

Rag Flock and other Filling Materials Act, 1951—The purpose of the Act is to secure the use of clean filling materials in upholstered articles which are stuffed or lined.

Fourteen premises were registered under the Act and 6 licences were granted for the storage of rag flock.

Twenty-two samples of rag flock and other filling materials were submitted for analysis during the year and one was reported to be unsatisfactory. The necessary action was taken.

General—The number of inhabited houses totalling 22,172. The following table shows the number of houses built during the period 1938 to 1957. It should be noted that no houses were built in the years 1941 to 1945 inclusive.

Year	1938	1939	1940	1941	1942	1943	1944	1945	1946	1947	1948	1949	1950	1951	1952	1953
Number of houses built	249	308	42	310	163	150	126	103	67	113	332					

Fitness for Habitation—The standard of fitness of houses in the Borough con- sidered to be generally good. Owing to the increased cost of materials and labour, it has been found that far more inquiries with owners and tenants to properties than was formerly the case, have had to be made to see that notices were complied with and this has drawn greater work on to the Inspectors of the department.

Overcrowding—The number of complaints regarding alleged overcrowding received during the year was 75, of which 35 were subsequently found to be overcrowded by visitation of the Sanitary Inspector. 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

Part IV

HOUSING

1. Inspection of dwelling houses	(a) Total number of houses inspected for housing defects	1,136
	(b) Number of inspections completed	4,312
(2) Number of dwelling houses found not to be in all respects reasonably fit for human habitation		1,092
2. Remedy of defects during the year without service of formal notices—	Number of defective dwelling houses remedied in the absence of formal action by the Local Authority or their officers	1,070
3. 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		104
(2) Number of dwelling houses in which defects were remedied after service of formal notices—		
(a) By Owners		82
(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		1
(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 yet demolished		3

HOUSING

General—The number of inhabited houses totalled 25,175.

The following table shows the number of houses built during the period 1938 to 1953. It should be noted that no houses were built in the years 1941 to 1945 inclusive.

Year ...	1938	1939	1940	1946	1947	1948	1949	1950	1951	1952	1953
Number of Houses built	249	308	42	310	163	156	126	102	67	113	235

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 than was formerly the case, 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 53, of which 35 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

1. Inspection of dwelling houses during the year:—
 - (1) (a) Total number of dwelling houses inspected for housing defects (under the Public Health and Housing Acts) 1,126
 - (b) Number of inspections made for the purpose 4,515
 - (2) Number of dwelling houses found not to be in all respects reasonably fit for human habitation 1,092
2. 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 1,050
3. 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 104
 - (2) Number of dwelling houses in which defects were remedied after service of formal notices:—
 - (a) By Owners 85
 - (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 1
 - (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 yet demolished 3

FOOD STANDARDS

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

The results showed that 379 were genuine and 24 were adulterated or otherwise giving rise to irregularity; the latter included 5 formal and 19 informal samples.

All the samples certified as not genuine were followed up, and appropriate action was taken.

List of samples found to be adulterated or otherwise giving rise to irregularity

Reference Number and if formal or informal sample	Nature of sample and report of analysis	Particulars
1122 Informal ...	BREAD— Contained a piece of foreign matter which consisted of wheat flour, black oily matter and a few cotton fibres.	The representatives of the firm concerned in the manufacture of this bread were interviewed, and since the irregularity occurred, new plant has been installed to eliminate any oil or grease being deposited in the bread during manufacture. No signs of rodent contamination were found in this foreign matter.
1136 Informal ...	MILK— Deprived of 32% of its original fat.	Two informal samples, numbered 1144 and 1145 taken in course of delivery from the same producer proved to be genuine.
1236 Informal ...	ICE CREAM ("CHOC ICE")— Deficient of milk solids not fat to the extent of at least 80% (Milk solids not fat—less than 1%).	Formal sample to be taken.
1270 Informal ...	PORK SAUSAGE— Contained an excessive proportion of fat (fat, 46%; lean meat, 19%).	Formal sample taken and found to be satisfactory.
1276 Informal ...	NON-BREWED CONDIMENT— Deficient of acetic acid to the extent of 12.5%.	Formal sample, numbered 1317, taken.
1284 Informal ...	CORNED BEEF— Contained an excessive amount of zinc. (Zinc, 200 parts per million).	Taken on complaint of causing sickness. Two further samples of this product reported to be free from excessive metallic contamination.
1291 Informal ...	CANNED CHERRIES IN SYRUP— Canned Cherries in an unsatisfactory condition. (Hydrogen, 22 mls.; Iron, 250 parts per million; Tin, 150 parts per million).	Old stock. 38 tins voluntarily surrendered. Wholesaler notified.
1293 Informal ...	LEMONADE CRYSTALS— In a damp condition (Water, 11%).	Advice given on more suitable storage conditions.
1317 Formal ...	NON-BREWED CONDIMENT— Deficient of acetic acid to the extent of 12.5%. (Acetic acid, 3.5%).	This matter was referred to the Town Clerk's Department, with a view to legal proceedings being instituted, but the Department was advised against such proceedings in this case.

Reference Number and if formal or informal sample	Nature of sample and report of analysis	Particulars
1322 Informal ...	CANNED RED CHERRIES— (In Light Syrup). Can in "blown" condition. Iron, 180 parts per million.	This sample was submitted by the School Meals Department and as a result of this unsatisfactory sample, all remaining "blown" tins were voluntarily surrendered for destruction.
1336 Informal ...	BISCUIT— Slightly rancid.	This sample was submitted in view of the abnormal taste of the biscuit. It was found on investigation that certain biscuits in this particular tin had been contaminated by detergent. The remaining biscuits were destroyed and the retailer advised on this matter.
1372 Informal ...	CANNED MILK— (Sweetened Skimmed Condensed Milk). In an unpalatable condition due to abnormal flavour.	This case was referred to the Milk Production Division of the Ministry of Food.
1426 Informal ...	CANNED CHERRIES IN SYRUP— Contained an excessive quantity of lead. Lead, 40 parts per million.	The tins containing these cherries had been punctured and re-soldered and small particles of solder were found in the syrup and embedded in the cherries. As a result of these unsatisfactory findings, 6,281 tins were voluntarily surrendered by the wholesaler who co-operated fully with the Department in withdrawing from sale this particular commodity.
1427 Informal ...	MINCEMEAT— Possessed a slight "off" flavour but not sufficient to make it unpalatable.	In view of the Public Analyst's statement that the flavour did not render it unpalatable, no further action was taken in this matter.
1434 Informal ...	FLOUR CONFECTIONERY (ICED CAKE)— Possessed a "fishy" taste and smell.	This sample was submitted in view of a complaint that it possessed a "fishy" taste and smell. In view of the Public Analyst's findings, an investigation was carried out at the bakery where it was manufactured and samples of raw materials submitted for analysis. The results were that the ingredients were satisfactory.
1436 Informal ...	EMULSIFIED FAT PREPARATION ("FULACREAM")— Misleading label. Total fat content of sample, 4%. A product described as "Fulacream" should contain an appreciable amount of fat with a minimum of 24%.	This informal sample was taken from a catering establishment. In view of the poor fat content of this product, further supplies were discontinued and formal sampling was impossible. A copy of the Public Analyst's certificate was forwarded to the Authority where the product was manufactured.

Reference Number and if formal or informal sample	Nature of sample and report of analysis	Particulars
1437 Informal ...	CONDENSED MILK (SKIMMED)— Possessed an unpleasant flavour.	As a result of this unsatisfactory sample the Town Clerk wrote to the manufacturers and asked for an explanation of the cause of the unpleasant taint. The producers replied to the effect that such a condition could have originated due to considerable storage time over which they had no control but otherwise they were at a loss to explain this unsatisfactory condition. The matter was also referred to the Condensed Milk Pool Limited.
1454 Informal ...	CANNED CHERRIES IN SYRUP— Contained an excessive quantity of lead. Average lead content, 10·5 parts per million. (Six cans).	Similar to sample numbered 1426.
1476 Informal ...	MILK— Deficient of fat to the extent of 11%.	Formal sample, numbered 1525, taken.
1500 Formal ...	SAUSAGE (PORK)— Contained a preservative; slightly deficient of meat — total meat, 60%. Sulphur dioxide, 200 parts per million.	In view of the slight deficiency, further formal samples taken from each producer. In all cases, the presence of preservative was declared by notice.
1501 Formal ...	SAUSAGE (PORK)— Contained a preservative; slightly deficient of meat — total meat, 60%. Sulphur dioxide, 160 parts per million.	ditto
1504 Formal ...	SAUSAGE (PORK)— Slightly deficient of meat — total meat, 60%.	ditto
1514 Informal ...	CHEESE PREPARATION (SAVOURY SPREAD WITH GORGONZOLA)— Infected with mould.	Three jars of this preparation voluntarily surrendered.
1525 Formal ...	MILK— Contained 4% added water. Freezing Point (Hortvet) — 0·525°C.	This was a bulk sample from three churns of milk from a herd which has consistently given milk of abnormal composition. Chief Milk Production Officer of the Ministry of Agriculture and Fisheries notified. Further formal samples to be obtained from the producer.

Food and Drugs Acts—Records, 1921–1953

Year	Number of samples taken			ANALYTICAL RESULTS OF SAMPLES						Ratio (%) of samples adulterated	Number of Prosecutions
				Number genuine			Number adulterated*				
	Formal	Informal	Total	Formal	Informal	Total	Formal	Informal	Total		
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
1921 ...	143	73	216	130	64	194	13	9	22	10.18	8
1922 ...	142	59	201	129	52	181	13	7	20	9.95	2
1923 ...	135	65	200	128	58	186	7	7	14	7.00	3
1924 ...	118	65	183	110	63	173	8	2	10	5.46	3
1925 ...	118	67	185	116	60	176	2	7	9	4.86	—
1926 ...	142	60	202	128	58	186	14	2	16	7.92	4
1927 ...	130	70	200	121	69	190	9	1	10	5.00	—
1928 ...	142	60	202	123	60	183	19	—	19	9.40	11
1929 ...	142	57	199	130	51	181	12	6	18	9.04	3
1930 ...	146	73	219	136	69	205	10	4	14	6.39	4
1931 ...	127	95	222	122	79	201	5	16	21	9.45	5
1932 ...	118	105	223	108	103	211	10	2	12	5.38	1
1933 ...	195	106	301	175	101	276	20	5	25	8.30	3
1934 ...	177	108	285	173	101	274	4	7	11	3.85	—
1935 ...	198	108	306	179	100	279	19	8	27	8.82	7
1936 ...	212	112	324	198	100	298	14	12	26	8.02	3
1937 ...	201	151	352	185	139	324	16	12	28	7.95	1
1938 ...	213	169	382	198	131	329	15	38	53	13.87	1
1939 ...	203	158	361	183	131	314	20	27	47	13.01	2
1940 ...	181	182	363	156	161	317	25	21	46	12.67	9
1941 ...	161	212	373	146	197	343	15	15	30	8.04	11
1942 ...	168	199	367	161	184	345	7	15	22	5.99	2
1943 ...	172	191	363	157	156	313	15	35	50	13.77	9
1944 ...	178	203	381	163	178	341	15	25	40	10.49	6
1945 ...	75	305	380	68	275	343	7	30	37	9.73	1
1946 ...	50	291	341	48	269	317	2	22	24	7.03	1
1947 ...	50	280	330	48	262	310	2	18	20	6.06	—
1948 ...	44	291	335	42	275	317	2	16	18	5.37	1
1949 ...	48	334	382	35	312	347	13	22	35	9.16	10
1950 ...	92	227	319	86	216	302	6	11	17	5.32	3
1951 ...	131	237	368	123	221	344	8	16	24	6.52	—
1952 ...	103	386	489	88	362	450	15	24	39	7.97	8
1953 ...	26	377	403	21	358	379	5	19	24	5.95	—
TOTALS	4481	5476	9957	4114	5015	9129	367	461	828	8.31	122

*Certified by the Public Analyst as being adulterated or otherwise giving rise to irregularity.

**Table showing particulars of the number of samples taken for
Bacteriological Examination—Year 1953**

Nature of Samples and Specimens	Number of Specimens procured for submission to bacteriologist for bacteriological examination				
	First Quarter	Second Quarter	Third Quarter	Fourth Quarter	Total for the year
FOOD AND DRINK—					
Ice Cream ...	17	30	56	20	123
Milk ...	104	109	121	131	465
Other Foods ...	51	—	97	33	181
*Water ...	2	9	4	1	16
TOTALS	174	148	278	185	785
MISCELLANEOUS—					
†Water ...	—	2	2	—	4
GRAND TOTALS ...	174	150	280	185	789

*Intended for human consumption.

†Swimming Baths.

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.

DISTRIBUTION OF MILK

There are 123 distributors of milk on the register of the local authority of whom 119 have their premises inside the Borough. The premises are inspected regularly and samples are frequently submitted for bacteriological examination. During the year, 465 samples of milk were submitted to the Bacteriologist for examination, of which 327 were Pasteurised, 8 Sterilised, 65 Tuberculin Tested (Pasteurised), 49 Undesignated, 1 Tuberculin Tested Certified, 12 Tuberculin Tested and 3 Certified. Of these samples, 4 Pasteurised samples failed the Phosphatase Test; 1 T.T. (Pasteurised) Milk failed the Phosphatase Test; 16 Undesignated samples 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 Tubercle Bacilli. In addition, 64 samples of raw milk were submitted for biological examination and in one instance T. Bacilli was found. All the milk from the herd was pasteurised until the herd was declared free of tuberculous cows by the Veterinary Surgeon.

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 only 1.22% of the samples were found to be unsatisfactory.

The number of samples taken for chemical analysis was 171, of which 3 were reported by the Public Analyst to be adulterated or otherwise giving rise to irregularity. Details of the three are given on pages 60 and 62. In addition, six samples of milk of abnormal composition were reported upon and the County Milk Production Officer of the Ministry of Agriculture and Fisheries was advised of the matter.

Sale of Milk under Designation

Classification of Licences issued	Number of Licences issued during the year	
	1952	1953
(1) Milk (Special Designation) (Raw Milk) Regulations, 1949		
<i>"Tuberculin Tested"</i>		
Dealers' Licences authorising the use of the special designation <i>"Tuberculin Tested"</i> in relation to milk sold from the holder's premises	20	30
Supplementary Licences authorising the use of the special designation <i>"Tuberculin Tested"</i> in relation to milk sold by retail from the holder's premises outside the Borough	1	1
(2) Milk (Special Designation) (Pasteurised and Sterilised Milk) Regulations, 1949		
<i>"Pasteurised"</i>		
Dealers' (Pasteurisers') Licences authorising the use of the special designation <i>"Pasteurised"</i> in relation to milk treated by the pasteurising process at the holder's premises	10	11
Dealers' Licences authorising the use of the special designation <i>"Pasteurised"</i> in relation to milk sold from the holder's premises	60	68
Supplementary Licences authorising the use of the special designation <i>"Pasteurised"</i> in relation to milk sold by retail from the holder's premises outside the Borough	3	1
<i>"T.T. Pasteurised"</i>		
Dealers' Licences authorising the use of the special designation <i>"Tuberculin Tested (Pasteurised)"</i> in relation to milk sold from the holder's premises	50	48
Supplementary Licences authorising the use of the special designation <i>"Tuberculin Tested (Pasteurised)"</i> in relation to milk sold by retail from the holder's premises outside the Borough	2	1
<i>"Sterilised"</i>		
Dealers' Licences authorising the use of the special designation <i>"Sterilised"</i> in relation to milk sold from the holder's premises	62	67
Supplementary Licences authorising the use of the special designation <i>"Sterilised"</i> in relation to milk sold by retail from the holder's premises outside the Borough	3	3
TOTALS	211	230

FOOD INSPECTION

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

Carcases Inspected and Condemned

PARTICULARS	PUBLIC ABATTOIR					PRIVATE
	Cattle (excl'n'g Cows)	Cows	Calves	Sheep and Lambs	Pigs	Pigs
Number of animals killed	2111	1554	1466	15392	1507	85
Number of carcasses inspected	2111	1554	1466	15392	1507	85
RESULTS						
All diseases except tuberculosis:—						
Number of whole carcasses condemned	1	3	10	34	29	15
Number of carcasses of which some part or organ was condemned	664	660	—	1793	84	9
Percentage of the number inspected affected with disease other than tuberculosis	31·50	43·66	0·68	11·86	7·49	28·02
Tuberculosis only:—						
Number of whole carcasses condemned	11	32	—	—	1	—
Number of carcasses of which some part or organ was condemned	303	579	—	—	41	—
Percentage of the number inspected affected with tuberculosis	14·87	39·31	—	—	2·78	—

The condemnations of whole carcasses shown in the above table were due to tuberculosis (forty-four), fevered (twenty-nine), peritonitis (twenty-four), septicaemia (eighteen), oedema (nine), pyaemia (eight), emaciation (three), and jaundice (one).

All the animals, except twenty-two, were brought from outside the Borough.

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

	Cwts.	Qrs.	Lbs.
Beef... ..	711	1	14
Veal... ..	4	3	7
Mutton	47	0	7
Pork	47	0	25
Fish... ..	16	2	10
Poultry, Game, Rabbits	3	1	6
Fruit	0	3	12

Tinned Goods:—

	Cwts.	Qrs.	Lbs.
Milk	19	3	27
Meat	37	2	11
Fish... ..	6	0	16
Vegetables	11	0	13
Fruit	35	3	7
Cereals	0	2	26
Jam	1	1	11
Fruit Puddings	2	1	26
Miscellaneous	9	0	20
	955	2	14
TOTAL	47 tons	15 cwts.	70 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 surrendered and no legal action was necessary to safeguard public health.

PUBLIC ABATTOIR

Early in the year the Ministry of Food, after many requests, agreed to the provision of a stunning pen and modern overhead runways in the beef slaughtering section at the Abattoir. This will enable 50/60 cattle to be slaughtered daily.

The provision of this equipment has eliminated cruelty in the slaughtering of cattle as far as is practicable and the Abattoir can now be regarded as an efficient unit in the production of home killed meat. There is no doubt that the considerable amount of money expended on the Abattoir since the Ministry of Food's control commenced has been justified and the Abattoir has been converted on the lines of modern design, from individual slaughtering booths.

It is now possible to slaughter sufficient livestock for the requirements of the whole of the County Borough and also certain rural areas adjoining.

FOOD HYGIENE

Although the standard of hygiene on the whole has continued to improve there is still much room for further advancement. The good co-operation between the representatives of the Department and the various food organisations has continued and reasonable support has been afforded to the Food Hygiene lectures organized jointly by the St. John Ambulance Association and the Health Committee. During the season when the food trades are expanded to meet the requirements of the holiday visitors, a considerable number of seasonal workers have to be employed. It is difficult to arrange educational courses for these seasonal workers who are probably in greatest need of advice and instruction. However, it is encouraging to record that with very few exceptions, the permanent staffs of the catering establishments in the town have attended the food hygiene lectures. Since the inauguration of the lectures in the autumn of 1950, 510 persons have attended, 304 persons have sat for the examination and 201 of these were successful. These courses of instruction, supplemented by short lectures in the kitchens and food factories, have shown good results. The lectures have now been supplemented by an Advanced Course consisting of 26 lectures suitable for supervisors and employers in the food industries who have attended the elementary course in food hygiene. It is hoped by this means to enable the supervisory staff to carry out their duties more efficiently.

The food hygiene discussion group which was inaugurated last year, from students who had attended the elementary courses is still very active, meeting once each month and receiving lectures and talks from members of the food industries, bacteriologists and members of trades closely allied to the food industries. These lectures are supplemented by monthly visits to modern premises for the production of all kinds of food. Such visits are particularly valuable in showing the great care taken in producing food, with particular reference to food hygiene and the considerable expense involved in the production of clean food.

Legal proceedings were instituted in one instance under the Food and Drugs Act and the Food Byelaws regarding unsatisfactory premises and the defendant was fined a total of £36.

THE SHELLFISH INDUSTRY

The Sub-Committee of the Health Committee appointed to discuss hygiene with representatives of the Shellfish trades met on a number of occasions and it is hoped, as a result of these meetings, to raise the standard of all premises used for the preparation of shrimps and cockles for human consumption. It is disappointing to note that the cockle beds on the Southport shore are almost denuded of shellfish and, unless there is a distinct improvement, the beds will have to be restocked in order to enable the cockle industry to continue.

Frequent sampling of the products, both from the pickers' premises and from the wholesalers' premises has shown a considerable bacteriological improvement.

A great deal of work will have to be carried out before the Shellfish premises can be said to comply with the requirements of the Food and Drugs Act, 1938.

(A) Summary of Food Hygiene Inspections

	INSPECTIONS	Number
Hotels, Restaurants and Kitchens		1175
Bakehouses		242
Butchers' Shops		239
Confectioners' and Grocers' Shops		944
Fried Fish Shops		88
Fishmongers', Greengrocers' and Poulterers'		244
Ice Cream Premises		330
Miscellaneous		1082
TOTAL		4344

(B) Summary of Improvements Effected

	Number
Major reconstructions of cafe, kitchens and bakehouses ...	15
Minor structural improvements, cleansing and repairs ...	142
Improved food storage facilities	21
Equipment renewed, repaired and cleansed	38
Improved washing-up facilities and procedure	14
Improved sanitary accommodation for staff including personal washing facilities	20
Improved sanitary accommodation for patrons	6
Improved refuse storage facilities	12
Vermin eliminated	18
TOTAL	286

ICE CREAM

The bacteriological quality of Ice Cream on sale in the Borough was found to be slightly less satisfactory than in 1952 as 29·5% of the samples as against 22·9% were found to be unsatisfactory. Comparisons with previous years are 19·78% in 1951, 26·95% in 1950, and 52·2% in 1949.

In all instances where unsatisfactory samples are obtained from local manufacturers energetic steps are taken, including sampling of the product at various stages of production and investigation into the methods of cleansing and sterilisation. Where unsatisfactory samples are obtained from manufacturers outside the Borough, the appropriate authority is informed.

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	13
For the purpose of sale	212
TOTAL	225

One hundred and twenty-three samples of ice cream were procured and submitted for bacteriological examinations, including one which was reported to be unsuitable for test.

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 122 samples examined:—

GRADE I	GRADE II	GRADE III	GRADE IV	TOTAL
65	21	22	14	122

PET ANIMALS ACT, 1951

The premises used in the Borough for the sale of pet animals are of a reasonably high standard for this type of trade and nine premises were licensed during the year.

In order to obtain efficient supervision they are visited twice each year by a Veterinary Surgeon and from time to time by the District Sanitary Inspector. No real reconstruction was necessary at these premises and in no instance has it been necessary to take legal action.

New Cases and Mortality.—The number of new cases of tuberculosis which came to the notice of the department during the year was 76. Of these 67 were found to be suffering from pulmonary disease and 9 from non-pulmonary disease. The following table shows the age and sex of these patients together with information regarding the number of patients who died of tuberculosis during the year.

Age Period (in years)	Pulmonary		Non-pulmonary		Total
	M.	F.	M.	F.	
0 to 1	—	—	—	—	—
1 to 2	—	—	—	—	—
2 to 3	—	—	—	—	—
3 to 5	—	—	—	—	—
5 to 10	—	—	—	—	—
10 to 15	—	—	—	—	—
15 to 20	—	—	—	—	—
20 to 25	—	—	—	—	—
25 to 30	—	—	—	—	—
30 to 35	—	—	—	—	—
35 to 40	—	—	—	—	—
40 to 45	—	—	—	—	—
45 to 50	—	—	—	—	—
50 to 55	—	—	—	—	—
55 to 60	—	—	—	—	—
60 to 65	—	—	—	—	—
65 to 70	—	—	—	—	—
70 and over	—	—	—	—	—
Total	41	35	4	3	83

Part VI

INFECTIOUS DISEASES

General

Tuberculosis

Venereal Disease

Statistical Tables

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 1955 was 475 and 38 of these patients were found to have sputum containing tubercle bacilli. During the year 31 Treatment Clinics were held and 801 visits were made by patients; the total number of X-ray examinations of patients was 813.

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

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

During the year 50 clinics were held and 718 attendances were made by contacts of patients; the total number of X-ray examinations of contacts was 758. Three contacts were found to be suffering from pulmonary tuberculosis in 1955.

B.C.G. Vaccination.—It became possible in April 1955 to introduce vaccination against tuberculosis using a special vaccine prepared abroad and named after the French scientists Calmette and Guérin. It can be used at present within certain limitations imposed by the Ministry of Health and under controlled conditions. 4,591 children

TUBERCULOSIS

New Cases and Mortality—The number of new cases of tuberculosis which came to the notice of the department during the year was 76. Of these 67 were found to be suffering from pulmonary disease and 9 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 (in years)	New Cases				Deaths			
	Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary	
	M.	F.	M.	F.	M.	F.	M.	F.
0 to 1	1	—	—	—	—	1	—	—
1 to 5	1	—	1	—	—	—	—	—
5 to 15	—	2	1	2	—	—	1	—
15 to 25	7	11	—	—	—	1	—	—
25 to 45	11	9	1	2	1	—	—	—
45 to 65	18	3	1	—	4	2	1	1
65 to 75	1	1	—	1	2	1	—	1
75 and over	2	—	—	—	1	—	—	1
TOTALS ...	41	26	4	5	8	5	2	3

Treatment Clinic—The 76 new cases came to the notice of the Department in the following ways:—

(a) By primary notifications	56
(b) By transfer from other areas	14
(c) From Death Returns	6
TOTAL	76

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 1953 was 472 and 38 of these patients were found to have sputum containing tubercle bacilli. During the year, 51 Treatment Clinics were held and 801 visits were made by patients; the total number of X-ray examinations of patients was 857.

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 Clinic and this is also held at the Southport Infirmary by arrangement with the Hospital Management Committee.

During the year, 50 clinics were held and 716 attendances were made by contacts of patients; the total number of X-ray examinations of contacts was 728. Three contacts were found to be suffering from pulmonary tuberculosis in 1953.

B.C.G. Vaccination—It became possible in April, 1951, to introduce vaccination against tuberculosis using a special vaccine prepared abroad and named after the French scientists, Calmette and Guerin. It can be used at present within certain limitations imposed by the Ministry of Health and under controlled conditions.

This form of inoculation is the same in principle as for instance small-pox vaccination—namely to produce in the human body an artificially acquired resistance to the disease by injecting its casual organism in a form which does not cause active development of the disease itself. It is not yet certain to what degree B.C.G. vaccination gives protection against tuberculosis and only experience will show how far it is effective in this country. Most authorities now consider that the risk of contracting tuberculosis, particularly in childhood, is less in the vaccinated than in the unvaccinated person. Abroad, particularly in the Scandinavian countries, B.C.G. vaccination is being widely used with reported success in combating tuberculosis. At home, it is now offered to those at special risk, particularly child contacts of a known tuberculous person. Not all such children require to be protected in this way since some have already developed resistance to tuberculosis when first examined. It is possible to differentiate between those with little or no resistance and those with acquired immunity, by means of a skin test called the Mantoux Test. It is advisable that those persons reacting negatively to the Mantoux Test and who are in contact with known cases of tuberculosis, should be vaccinated with B.C.G. vaccine. Certain other groups of individuals at special risk as regards tuberculosis, e.g., medical students and nurses are offered this form of protection through the hospital services, but it is not yet available generally for members of the public.

(1) The total number of persons vaccinated during the year 1953 is shown below:—

(a) At B.C.G. Clinics	47
(b) Babies seen by the Consultant Paediatrician	6
TOTAL	53

(c) Total number vaccinated since scheme commenced in April, 1951 205

(2) Number of B.C.G. Clinics	7
Number of attendances made by contacts	42
Number of Mantoux and patch tests	169
Number of sessions by Tuberculosis Visitor at B.C.G. Clinic	7

Housing—The Points Scheme which is used for the purpose of selecting tenants for Corporation houses, makes special provision for tuberculous patients. Additional points are awarded when either the applicant or his wife, or any of their children are known to be suffering from infectious tuberculous and this concession is of benefit to those cases where improved housing accommodation is desirable for the patient and his family.

During 1953, seven cases were referred to the Housing Department with a recommendation that alternative accommodation would be helpful. One of these cases was re-housed and one other case who had been referred in 1952 was also found accommodation.

Domiciliary Visiting—A Health Visitor with special qualification 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:—	First Visits	57
	Re-Visits	1259
To Contacts:—	First Visits	279
	Re-Visits	957
	Total Number of Visits	2552

In addition, the Health Visitor also attends at the Tuberculosis Treatment and Contact Clinics and this arrangement is very satisfactory as it provides a useful link between the Hospital Service and the Local Health Authority's Service.

During 1953, the Health Visitors made 195 attendances at the Tuberculosis Treatment and Contact Clinics.

Mass Miniature Radiography Unit—The following statement shows the numbers of persons who attended for miniature X-ray examinations when the No. 2 Mass Radiography Unit of the Liverpool Regional Hospital Board was in Southport from the 4th November to the 28th December.

	Male	Female	Total
(1) Total number of persons examined	3066	4450	7516
(2) Age Groups of persons examined:—			
Under 14 years	351	76	427
15 years to 24 years	540	1041	1581
25 years to 34 years	661	853	1514
35 years to 44 years	561	814	1375
45 years to 59 years	663	1160	1823
60 years and over	290	506	796
TOTALS	3066	4450	7516
(3) Classifications of cases diagnosed:—			
Active pulmonary tuberculosis	9	4	13
Inactive pulmonary tuberculosis (post primary)... ..	24	639	63
Bronchiectasis	4	7	11
Neoplasm	—	1	1
Cardiac abnormalities	32	82	114
Other abnormalities	129	102	231
No abnormality	2868	4215	7083
TOTALS	3066	4450	7516

Of the total numbers examined, 7,083 or 95·5% showed no radiological evidence of disease of the chest at the time of examination. Excluding the 5 cases not yet diagnosed, previously unsuspected active tuberculosis of the lungs was revealed in 13 cases giving an incidence of 1·8 per 1,000 of the population as compared with 3·5 per 1,000 for the country as a whole.

The Unit last visited Southport in 1949 for the purpose of X-raying the general public but it is hoped that the next visit will be made in the autumn of 1954.

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.

These chalets are equipped with Calor gas lighting and four were being used by patients at the end of the year.

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 £262.

The following statement shows the numbers of patients on the register during the last five years:—

NUMBER OF PATIENTS ON THE REGISTER
during the last five years

	1949			1950			1951			1952			1953		
	Pul.	Non-Pul.	Total	Pul.	Non-Pul.	Total	Pul.	Non-Pul.	Total	Pul.	Non-Pul.	Total	Pul.	Non-Pul.	Total
1. No. of patients on register at beginning of year	261	86	347	281	93	374	292	92	384	326	89	415	367	96	463
2. No. of patients added during the year:—															
(a) primary notifications of new cases	60	13	73	37	11	48	46	4	50	51	12	63	51	5	56
(b) transfers from other areas	8	6	14	5	1	6	16	3	19	18	1	19	11	3	14
(c) lost sight of cases returned... ..	—	—	—	1	—	1	2	—	2	—	—	—	2	—	2
TOTALS (1)	329	105	434	324	105	429	356	99	455	395	102	497	431	104	535
3. No. of patients deleted during the year:—															
(a) died (from all causes)	24	1	25	11	2	13	22	1	23	12	6	18	14	5	19
(b) transferred to other areas	11	3	14	13	1	14	6	—	6	9	—	9	15	—	15
(c) recovered	9	5	14	1	5	6	1	4	5	5	—	5	6	15	21
(d) lost sight of or refused further assistance	4	3	7	7	5	12	1	5	6	2	—	2	8	—	8
TOTALS (2)	48	12	60	32	13	45	30	10	40	28	6	34	43	20	63
4. No. of patients on register at the end of year (i.e., totals (1), less totals (2))	281	93	374	292	92	384	326	89	415	367	96	463	388	84	472
5. Summary of new patients found during the year:—															
(a) Primary notifications of new cases	60	13	73	37	11	48	46	4	50	51	12	63	51	5	56
(b) Transfers from other areas	8	6	14	5	1	6	16	3	19	18	1	19	11	3	14
(c) Patients found from death returns (figures not included in items (1) to (4) above)	3	—	3	3	1	4	2	—	2	2	—	2	5	1	6
(d) Lost sight of cases returned	—	—	—	1	—	1	2	—	2	—	—	—	2	—	2
TOTAL NUMBER OF NEW PATIENTS	71	19	90	46	13	59	66	7	73	71	13	84	67	9	76

At the beginning of 1949, there were 261 pulmonary cases and 86 non-pulmonary cases on the Chest Clinic's register, making a total of 347 cases; at the end of 1953, the corresponding numbers were 388 pulmonary cases and 84 non-pulmonary making a total of 472 cases.

During this five year period, the number of non-pulmonary patients has remained fairly constant, varying between 80 and 90. The number of pulmonary patients, however, has increased by 127 (or 49%) from 261 in 1949 to 388 in 1953. This increase is mainly due to the fact that following the use of the new drugs such as Streptomycin, P.A.S., and Isoniazid, there have been fewer deaths in the last five years when compared with the figures for the years prior to 1949. Another reason for the increase is the smaller number of patients who were classified as cured in the years 1949 to 1953.

In this regard the following table shows the number of deaths and cured cases during the period from 1934 to 1953. The number of primary notifications is also shown.

PULMONARY TUBERCULOSIS						Number of primary notifications	Number of deaths	Number of Cases classified as cured
5 year period								
(a)	1934 to 1938	...	...	...	...	240	160	56
(b)	1939 to 1943	...	...	...	...	255	182	22
(c)	1944 to 1948	...	...	...	...	301	160	45
	(Average for 3 periods above)	...	...	...	...	(265)	(167)	(41)
(d)	1949 to 1953	...	...	...	...	245	88	22

It should be noted that, while the number of primary notifications has approximately remained the same, the number of pulmonary deaths has been reduced by one half when comparing the five year average for the period 1934 to 1948 with the figures for 1949 to 1953.

A further point to be mentioned in regard to the use of the new drugs and the improved methods of diagnosis and treatment is the decrease in the number of patients on the register whose sputum contained tubercle bacilli. For example, at the end of 1948, of the 261 patients on the register with pulmonary disease, 147, or 56%, had sputum containing tubercle bacilli whereas at the end of 1953 only 38 patients, or 10%, from a total of 388, had sputum containing tubercle bacilli on examination during the last six months of the year.

VENEREAL DISEASES

At the end of the year 1953, 70 patients (including 6 non-venereal infections) were under treatment at the clinic, as compared with 96 patients at the end of 1952.

The new cases dealt with during the year were classified as follows:—

	Male	Female	Total
(1) Syphilis	6	6	12
(2) Gonorrhoea	8	—	8
(3) Non-Venereal Infections	32	13	45
(4) Not yet diagnosed	—	1	1
	46	20	66
(4) Cases transferred from other clinics			
Syphilis	1	3	4
TOTALS	47	23	70

The following statement shows the numbers of cases of syphilis and gonorrhoea during the last fifteen years:—

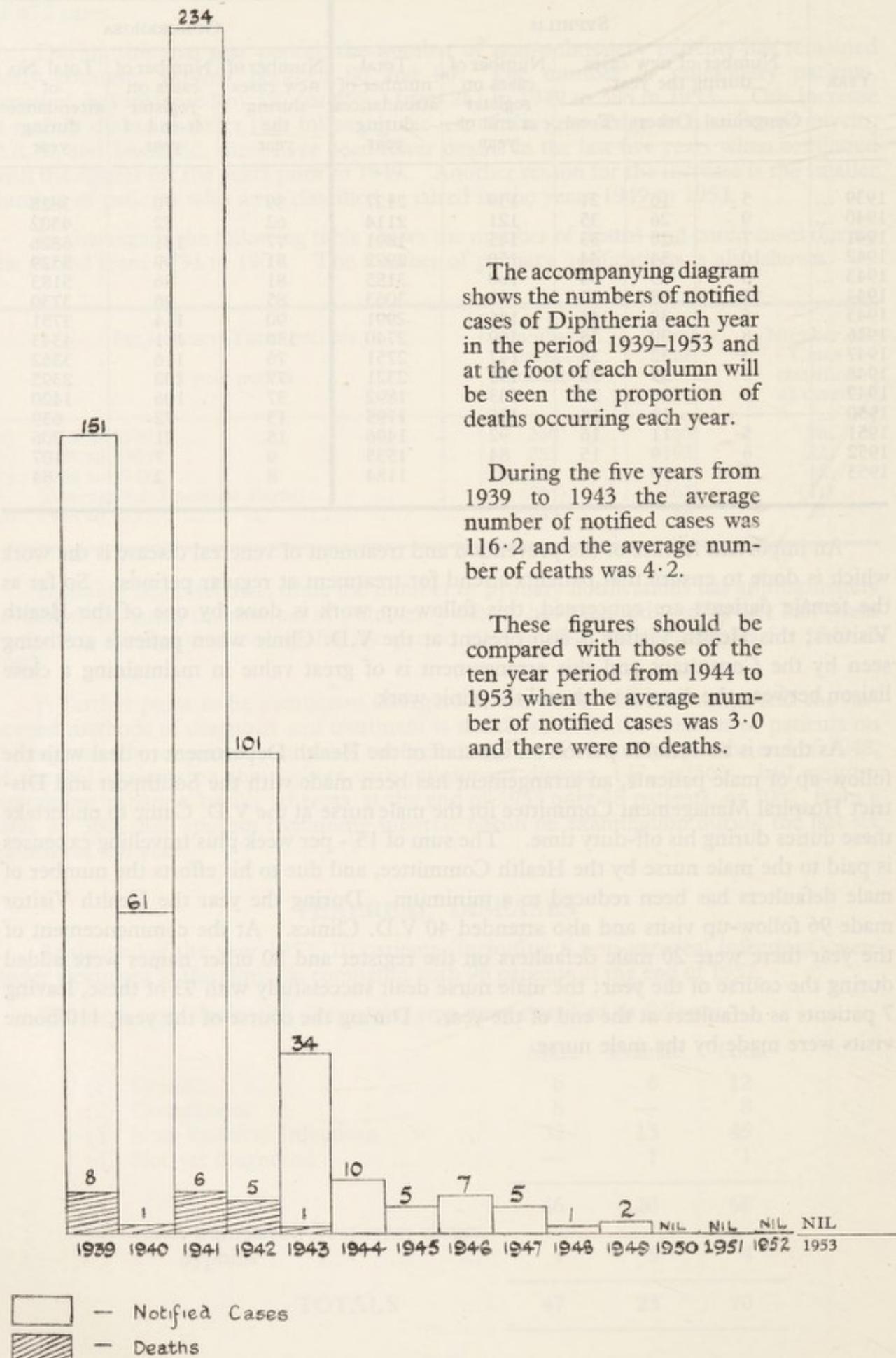
YEAR	SYPHILIS				GONORRHOEA			
	Number of new cases during the year			Number of cases on register at end of year	Total number of attendances during year	Number of new cases during the year	Number of cases on register at end of year	Total No. of attendances during year
	Congenital	Others	Total					
1939 ...	5	16	21	139	2127	39	70	3828
1940 ...	9	26	35	121	2114	62	72	4302
1941 ...	7	26	33	145	1891	77	121	6826
1942 ...	10	34	44	150	2972	81	99	5529
1943 ...	8	45	53	160	3185	81	86	5183
1944 ...	12	38	50	182	3063	85	96	3730
1945 ...	6	39	45	156	2991	90	114	3751
1946 ...	8	30	38	169	2740	130	111	4343
1947 ...	3	32	35	147	2751	76	116	3362
1948 ...	6	29	35	151	2321	77	102	2395
1949 ...	3	26	29	163	1892	37	106	1420
1950 ...	—	16	16	155	1795	15	72	639
1951 ...	5	11	16	92	1496	15	21	206
1952 ...	6	9	15	84	1535	9	7	107
1953 ...	2	10	12	62	1184	8	2	84

An important feature of the prevention and treatment of venereal disease is the work which is done to ensure that patients attend for treatment at regular periods. So far as the female patients are concerned, this follow-up work is done by one of the Health Visitors; this Health Visitor is also present at the V.D. Clinic when patients are being seen by the Consultant and this arrangement is of great value in maintaining a close liaison between the district work and the clinic work.

As there is no suitable person on the staff of the Health Department to deal with the follow-up of male patients, an arrangement has been made with the Southport and District Hospital Management Committee for the male nurse at the V.D. Clinic to undertake these duties during his off-duty time. The sum of 15/- per week plus travelling expenses is paid to the male nurse by the Health Committee, and due to his efforts the number of male defaulters has been reduced to a minimum. During the year the Health Visitor made 96 follow-up visits and also attended 40 V.D. Clinics. At the commencement of the year there were 20 male defaulters on the register and 80 other names were added during the course of the year; the male nurse dealt successfully with 93 of these, leaving 7 patients as defaulters at the end of the year. During the course of the year, 110 home visits were made by the male nurse.

DIPHTHERIA

**Number of notified cases and number of deaths
during years 1939 to 1953 inclusive**



The accompanying diagram shows the numbers of notified cases of Diphtheria each year in the period 1939-1953 and at the foot of each column will be seen the proportion of deaths occurring each year.

During the five years from 1939 to 1943 the average number of notified cases was 116.2 and the average number of deaths was 4.2.

These figures should be compared with those of the ten year period from 1944 to 1953 when the average number of notified cases was 3.0 and there were no deaths.

INFECTIOUS DISEASES (Table 1)
Classification of Cases notified during the year 1953

NOTIFIABLE DISEASE	NUMBER OF CASES NOTIFIED Ages in Years										TOTAL CASES NOTIFIED IN EACH WARD												Total No. of cases removed to Hospital		
	At all ages	Under 1	1 to 5	5 to 15	15 to 25	25 to 45	45 to 65	65 upwards	Central	Craven	Heslith	Marine	Park	Scarlsbrick	South	Sussex	Talbot	West	Birkdale East	Birkdale North	Birkdale South	Birkdale West		Ainsdale	
Diphtheria ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Scarlet Fever ...	176	1	39	126	7	3	—	—	9	7	33	6	11	10	8	21	10	8	10	12	18	4	9	41	
Measles ...	1202	45	525	618	8	6	—	—	25	27	174	39	39	110	71	116	54	20	112	115	221	26	53	34	
German Measles ...	1505	20	206	940	214	106	16	3	82	80	231	75	112	103	85	220	94	57	111	94	78	57	26	6	
Chicken Pox ...	225	3	70	123	16	12	1	—	11	12	22	26	22	6	18	20	16	4	20	7	19	16	6	14	
Whooping Cough ...	206	8	105	92	—	1	—	—	2	4	51	9	30	22	7	31	19	5	7	3	12	3	1	12	
Pneumonia ...	32	2	8	2	1	3	8	8	3	2	—	3	3	—	1	3	—	3	—	2	3	2	7	3	
Erysipelas ...	22	—	—	1	—	5	12	4	1	1	1	4	—	—	—	1	3	3	—	1	—	—	7	1	
Dysentery ...	18	1	5	6	1	2	3	—	—	—	8	—	—	1	1	—	—	—	—	—	3	3	1	5	
Encephalitis ...	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	1	
Poliomyelitis ...	7	1	3	—	3	—	—	—	—	1	—	1	—	—	—	1	—	—	2	1	1	—	—	6	
Puerperal Pyrexia ...	5	—	—	—	2	3	—	—	—	3	—	—	—	—	—	—	1	—	—	1	—	—	—	—	
Food Poisoning ...	26	—	—	4	6	9	6	1	11	4	—	—	—	2	2	2	1	2	2	—	—	—	—	6	
	3425	82	961	1912	258	150	46	16	145	141	512	171	217	254	193	415	198	102	264	236	356	111	110	129	

INFECTIOUS DISEASES (Table 2)
Number of Notified Cases and number of Deaths for the years 1944 to 1953 inclusive

	NUMBER OF CASES OF INFECTIOUS DISEASE NOTIFIED										DEATHS FROM INFECTIOUS DISEASE											
	1944	1945	1946	1947	1948	1949	1950	1951	1952	1953	1944	1945	1946	1947	1948	1949	1950	1951	1952	1953		
	Total Cases for 10 years 1944 to 1953										Total Deaths during 10 years 1944 to 1953											
Pneumonia ...	61	81	78	93	82	70	46	69	51	32	663	32	31	27	23	31	31	40	51	38	22	326
Food Poisoning ...	—	—	—	—	—	1	23	4	—	26	54	—	—	—	—	—	1	—	—	—	—	1
Scarlet Fever ...	140	93	62	167	210	125	167	94	213	176	1447	—	—	—	—	—	—	—	—	—	—	—
Smallpox ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Diphtheria ...	10	5	7	5	1	2	—	—	—	—	30	—	—	—	—	—	—	—	—	—	—	—
Typhus ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Typhoid Fever ...	—	—	—	—	—	2	—	—	1	—	3	—	—	—	—	1	—	—	—	—	—	—
Para-Typhoid Fever ...	—	—	2	—	—	6	2	1	—	—	11	—	—	—	—	—	—	—	—	—	—	—
Erysipelas ...	28	26	32	25	33	34	24	15	17	22	256	—	—	—	—	—	—	—	—	—	—	—
Malaria ...	—	—	—	—	—	1	1	1	—	—	3	—	—	—	—	—	—	—	—	—	—	—
Dysentery ...	18	20	36	4	3	6	282	155	9	18	551	—	—	1	—	—	—	—	2	—	—	—
Puerperal Pyrexia ...	5	10	—	2	—	2	2	2	1	5	29	—	—	—	—	—	—	—	—	—	—	—
Meningococcal Infection ...	1	4	4	4	—	1	3	4	4	—	25	—	—	—	—	—	1	—	—	—	—	—
Poliomyelitis ...	—	—	4	8	3	1	2	2	1	7	28	—	—	1	2	—	—	—	—	—	—	—
Polioencephalitis ...	—	—	—	—	—	1	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—
Pulmonary Tuberculosis ...	63	69	56	62	51	58	68	77	71	67	642	27	36	31	39	27	15	22	12	13	248	
Other Forms of Tubercul's	26	26	16	22	17	13	16	13	13	9	171	6	5	3	5	3	5	5	5	6	5	48
Ophthalmia Neonatorum	2	3	3	1	—	—	1	—	—	—	10	—	—	—	—	—	—	—	—	—	—	—
Chicken Pox ...	326	274	598	234	506	543	345	295	992	225	4338	—	—	—	—	—	—	—	—	—	—	—
Measles ...	741	546	228	1000	788	896	595	1272	345	1202	7613	3	1	—	2	1	—	—	1	—	—	10
German Measles ...	230	52	83	462	161	55	45	76	330	1505	2999	—	—	—	—	—	—	—	—	—	—	—
Whooping Cough ...	301	278	76	500	457	277	352	192	179	206	2818	1	2	—	1	1	2	—	—	1	—	9
Encephalitis ...	—	—	—	—	—	—	—	1	—	—	1	—	—	—	—	—	—	—	—	—	—	—

Part VII

OTHER INFORMATION

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BLINDNESS

The large number of persons in the 70+ age group in the Borough results inevitably in a high incidence of cataract and to a much smaller extent of glaucoma. The Hospital Management Committee found it necessary in 1952 to open an Ophthalmic Department in the Southport General Infirmary and there is at present an increasing list of cases of cataract awaiting operative treatment.

Arrangements for the welfare of blind persons are the responsibility of the Welfare Committee and I am indebted to Mr. J. Sinnott, the Senior Welfare Officer, for the following details:—

The number of persons on the Blind Register is 172 at the moment, while 42 persons are classified as partially sighted.

There is a Social Centre where welfare facilities are available and training in various crafts such as rug making, etc., is carried out by the two Home Teachers for the Blind. Instruction in Braille and typing is also carried out.

Cerebral Palsy—It has not been possible to obtain accurate information as to the number of cases of cerebral palsy in the Borough, but it is believed that there are not more than 15 of the “congenital spastic type” below the age of thirty years.

Epilepsy—I am indebted to the general medical practitioners for the information that there were seventy epileptics under treatment during the year. Some required regular sedation; others were not in need of drugs; the majority were able to work and many were in full-time employment. Only one man was reported to need the facilities of a Remploy Factory. An occasional case requires accommodation in a special home for epileptics such as the “Maghull Homes” provide.

There are at present no special arrangements for the welfare of epileptic persons in the town though an attempt is made to find suitable employment for children suffering from this condition when they leave school.

I am indebted to Mr. Sinnott, the Senior Welfare Officer, for the following numbers of cases placed in suitable colonies:—

	Female	Male
David Lewis Colony, Alderly Edge	2	—
Maghull Homes, Maghull	3	5
Langho Colony, Manchester	1	1
	—	—
	6	6
	—	—

OTHER INFORMATION

Centres and Clinics—The following list shows the Centres and Clinics which were in operation during 1953:—

ADDRESS	DAY	TIME
CHILD WELFARE CENTRES:—		
1. Methodist Church, Ainsdale	Mondays	2 to 4 p.m.
2. North Road, Crossens	Wednesdays	2 to 4 p.m.
3. Methodist School, Liverpool Road	Tuesdays	2 to 4 p.m.
4. Poulton Road, High Park	Tuesdays	2 to 4 p.m.
do. do. ...	Wednesdays	2 to 4 p.m.
5. Hampton Road	Thursdays	2 to 4 p.m.
6. Methodist School, Derby Road	Fridays	2 to 4 p.m.
ANTE-NATAL CLINICS:—		
44 Houghton Street	Thursdays	2 to 4 p.m.
POST-NATAL CLINICS:—		
44 Houghton Street	Mondays	2.30 to 3.15 p.m.
TUBERCULOSIS CONTACT CLINIC:—		
Southport Infirmary	Mondays	2 to 5 p.m.

Medical Examinations—The following table shows the work done by the medical staff of the department during 1953 in regard to the medical examination of employees for the purpose of the Superannuation and Sickness Pay Schemes.

Department	NUMBER OF MEDICAL EXAMINATIONS		
	Super- annuation Scheme	Sickness Pay Scheme	TOTAL
(a) CORPORATION DEPARTMENTS:—			
Borough Architect	1	—	1
Borough Engineer	7	36	43
Borough Treasurer	5	2	7
Children's	12	1	13
Education	63	11	74
Fire Service	1	—	1
Flower Show	1	1	2
Health	9	6	15
Libraries	—	1	1
Lighting	—	1	1
Police	2	—	2
Publicity	1	4	5
Parks and Cemeteries	3	11	14
Town Clerk's	6	—	6
Transport	1	13	14
Water Board	1	4	5
Weights and Measures	—	—	—
Welfare Services	7	3	10
(b) OTHER DEPARTMENTS:—			
Electricity	5	—	5
Gas	—	—	—
TOTALS	125	94	219

Meteorology—Records for the years 1934 to 1953 inclusive

YEAR	Temperature of the air				Bright Sunshine			Ozone (O ₃)	Rainfall				Humidity		Subsoil Water Level			
	Mean Temperature °F	Deviation from Normal °F	Absolute Extremes		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 Measurable 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)	Highest °F	Lowest °F													(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)	(15)	(16)	(17)
1934	50.2	+0.8	88	23	1479	- 28	69	3.7	30.70	-2.47	203	563.3	82	0	—	†		
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	—	§		
1938	50.4	+1.0	76	25	1477	- 30	55	3.9	36.64	+3.47	201	485.8	80	-2	—	§		
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	††	36.51	+3.34	204	577.0	79	-3	68.0	+0.2		
1951	48.7	-0.7	76	23	1575	+ 67	63	††	39.83	+6.66	209	655.2	79	-3	63.3	-4.5		
1952	48.5	-0.9	84	20	1544	+ 36	52	††	30.59	-2.58	190	539.6	79	-3	65.1	-2.7		
1953	50.0	+0.6	87	24	1644	+136	72	††	26.86	-6.31	167	494.1	81	-1	75.3	+7.5		

† 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.

Nursing Homes—At the end of the year there were 14 nursing homes on the Council's register, the total number of beds provided being as follows:—

Maternity Cases	...	...	...	...	...	12 beds
Medical, Surgical and General Cases	...	...	...	...	...	132 beds
						<hr/>
TOTAL	...	...	...	...	...	144 beds
						<hr/>

During the year the Supervisor of Nursing Homes made 43 visits of inspection and all her reports were satisfactory.

Nurses' Agencies—Any person who wishes to carry on an Agency for the supply of nurses must be licensed in accordance with the requirements of the Nurses Act of 1943 and the Nurses Agencies Regulations of 1945. During 1953, two agencies were licensed and all the inspection reports showed that the establishments were being conducted in a satisfactory manner.

Persons in need of Care and Attention—During 1953 one patient was dealt with under the powers contained in Section 47 of the National Assistance Act, 1948. This was a woman aged 79 years who was living alone and suffering from hemiplegia. As she did not appear to be able to care for herself and as there were no friends or relatives to help, the Court considered that it would be advisable to arrange for her admission to a hostel and an order to this effect was made for a period of 3 months. The first order had been made in December of the previous year but it was renewed in March, 1953, for a further period of 3 months. It was not necessary, however, to obtain additional Court Orders after this date as the patient had settled down in the hostel and was quite happy to stay there.

Riding Establishment 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, 1953, Mr. Hewetson made thirty-four visits to nine riding establishments and carried out one hundred and seventy-seven inspections.

Mr. Hewetson's report stated that the general standard of care, stabling and use of the animals continued to be satisfactory.

Special Surveys—During the year, the Department provided information for the following special surveys:—

- (a) the Medical Research Council's investigation on poliomyelitis.
- (b) the Ministry of Health's investigation into virus infections during pregnancy; and
- (c) the British Empire Cancer Campaign's investigation in regard to deaths from malignant growths in the North Wales, West Cheshire and South West Lancashire Areas.

Civil Defence Ambulance Service—On the 31st May, 1950, the Medical Officer of Health assumed responsibility for the organisation and training of the Civil Defence Ambulance Section. At this date 41 persons had enrolled in the Ambulance Section, some of whom had already commenced their pre-section training, i.e., General Basic Training and would be ready for Section Training early in 1951.

The appointment of a part-time Assistant to the Medical Officer of Health in March, 1951, enabled Section Training to be commenced in accordance with the syllabus laid down by the Home Office. This training, which comprises in the main, lectures and practical work on such subjects as First Aid, Map Reading, Peace-time Ambulance Service, Routine and Operational Duties, Vehicle Maintenance, Driving Instruction and Exercises, has been continuous.

The peace-time strength of the Section is 51, but by the end of December, 1953, enrolments numbered 104. Of this number, 25 have not attended for any kind of training. Of the remaining 79, 53 have completed their General Basic Training, but only 37 have attended for Section Training.

It can be assumed that this Section has at the moment 37 really interested members with a good record of training behind them. 35 members have successfully passed an examination in First Aid and are now in possession of the St. John Ambulance Association Certificate. 16 members are fully qualified drivers with current certificates, 13 members are undergoing driving instruction.

Three exercises have taken place during this year to test First Aid, Map Reading, Ambulance Driving and the loading of casualties, with good results. It is intended in 1954 to hold exercises in conjunction with the other sections of the Civil Defence Corps to test co-operation and operational duties.

Social activities have not been neglected and several successful evenings have been enjoyed at the Civil Defence Headquarters in Birch Street.

It is hoped that during the coming year a fully qualified peacetime strength of 51 really interested and efficient members will be available for this important service.

Work done on behalf of Children's Committee—During the year, a total of 237 examinations were carried out on behalf of the Children's Committee, the details being as follow:—

Examination of children who are boarded-out in foster homes	41
Examination of children admitted to Institutions	25
Examination of children discharged from Institutions	3
Admission to Children's Homes, Eversley House and 53 Scarisbrick New Road	32
Discharge from Children's Homes ... ditto	35
Admission to Residential Nursery	47
Discharge from Residential Nursery	23
Routine Medical Inspection of Children in Care	31

Dr. Davison, the lady Assistant Medical Officer of Health, continued to be responsible for the medical care of all the children in the Homes administered by the Children's Committee.

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