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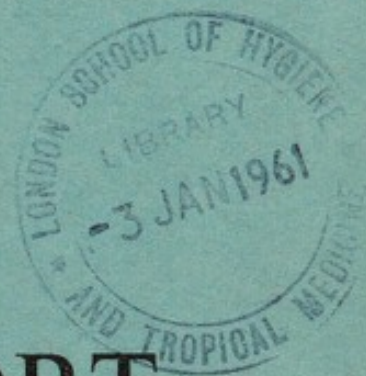


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COUNTY BOROUGH



OF SOUTHPORT



ANNUAL REPORT

of the

Medical Officer of Health

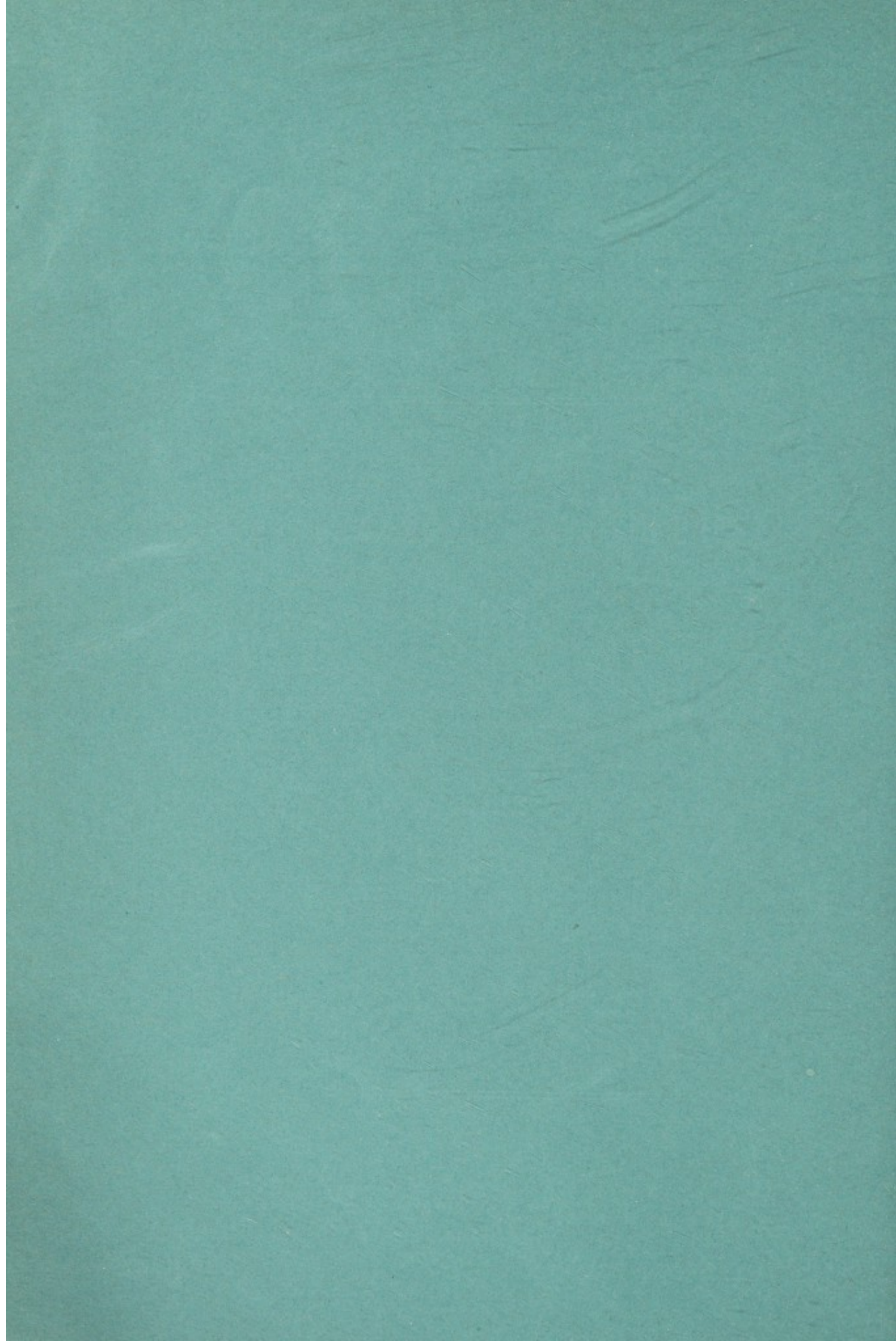
and

Principal School Medical Officer

for the Year 1959

Health Department,
2 Church Street,
Southport.

Telephone No.: Southport 5523.



COUNTY BOROUGH



OF SOUTHPORT



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Medical Officer of Health

and

Principal School Medical Officer


for the Year 1959

Health Department,
2 Church Street,
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Telephone No.: Southport 5523.

ROBT. JOHNSON & CO. LTD., TULKETH STREET
SOUTHPORT

1960



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THE HEALTH COMMITTEE

The Worshipful the Mayor
(Alderman W. BERWICK, J.P.)

Chairman: Councillor L. F. SPENCE

Vice-Chairman: Alderman W. PAULDEN

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

Alderman DR. H. COATES, J.P.

Alderman MRS. E. SMITH

Councillor J. CAMPION

Councillor R. B. HUGHES

Councillor G. W. KENDALL, J.P.

Councillor E. McCABE

Councillor R. MOLYNEUX

Councillor MRS. B. POGSON

Councillor W. PRESCOTT

Councillor MRS. I. D. SELL

Councillor MRS. F. M. TURNER

Councillor G. S. WILKINS

DR. P. Y. LYLE, M.C.

Mental Health Services

Chairman	Councillor G. W. KENDALL, J.P.
Vice-Chairman	Councillor R. MOLYNEUX
Alderman DR. H. COATES, J.P.	Councillor MRS. B. POGSON
Alderman MRS. E. SMITH	Councillor MRS. I. D. SELL
Councillor J. CAMPION	Councillor MRS. F. M. TURNER
Councillor R. B. HUGHES	Dr. P. Y. LYLE, M.C.

Joint Health and Education

The Worshipful the Mayor
(Alderman W. BERWICK, J.P.)

Chairman	Councillor G. W. KENDALL, J.P.
Vice-Chairman	Councillor MRS. F. M. TURNER

Home Nursing Joint Sub-Committee

Chairman	Councillor MRS. I. D. SELL
Vice-Chairman	Councillor G. W. KENDALL, J.P.
Councillor MRS. B. POGSON	Councillor MRS. F. M. TURNER

National Assistance Act, 1948

(Section 47 Cases)

Chairman	Councillor W. PRESCOTT
Vice-Chairman	Alderman MRS. E. SMITH
	Councillor Mrs. F. M. TURNER

Accounts

All Members of the Health Committee
(Except Councillor R. Molyneux)

Certificates of Disrepair

Chairman	Vice Chairman
----------	---------------

STAFF OF THE HEALTH DEPARTMENT ON THE

31st DECEMBER, 1959

Medical Staff (Full-Time)—

Medical Officer of Health and Principal School Medical Officer	G. N. M. WISHART, M.R.C.S., L.R.C.P., D.P.H.
Deputy Medical Officer of Health and School Medical Officer	J. A. G. WATSON, M.B., B.S., D.P.H.
Assistant Medical Officer of Health and School Medical Officer	ANNA I. DAVISON, M.B., CH.B.
Assistant Medical Officer of Health and School Medical Officer	BRENDA JONES, M.B., CH.B., D.P.H.

Medical Staff (Part-Time)—by arrangement with the Liverpool Regional Hosp. Brd.

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.
Eye Clinic	D. RANKINE, M.B., CH.B.
Ear, Nose and Throat Clinic	R. V. TRACY-FORSTER, F.R.C.S., M.B., CH.B., D.L.O.
Skin Clinic	—

Dental Staff—

Principal Dental Officer	W. MARTLAND, L.D.S., R.C.S. (Eng.)
Dental Officer	W. L. ROTHWELL, L.D.S. (Liv.)
Dental Officer	P. L. HEATHCOTE, L.D.S. (Liv.)
Orthodontist (part-time)	H. POGREL, L.D.S. (Liv.), L.D.S.R.C.S. (Eng.), D.Ortho.R.C.S. (Eng.)
Attendants	Mrs. M. E. BALL Mrs. A. D. MEADOWS and Mrs. S. F. CORNICK

Sanitary Staff—Chief Public Health Inspector, S. D. BURGE (a)(b)(h); Deputy Chief Public Health Inspector, G. E. HADLEY (a)(b); Meat and Food Inspector, W. FOSTER (a)(b); Food Hygiene Inspector, T. W. ROBERTSHAW (a)(b); Meat and Foods Sampling Officer, W. VICKERS (a)(b)(h); District Public Health Inspectors, J. BELL (a), G. CAYTON (a)(b), A. H. GELDER (a)(b); Pupil Public Health Inspector D. TABERON; Infectious Diseases Enquiry Officer, W. R. LLOYD; Rodent Officer, J. S. AMERY; Mortuary Technician, J. GOULDER.

Health Visiting and School Nursing Staff—Superintendent Health Visitor and School Nurse, Miss E. DOWD (c)(d)(e); Health Visitors/School Nurses, Misses J. HOLLIDAY (c)(f)(e), M. A. TURVEY (d)(e), A. COWPER (c)(d)(e), E. POTTS (c)(d)(e), A. MULLAN (c)(d)(e), Mrs. F. M. HOWARD (c)(f)(e), Mrs. A. GREGORY (c)(f)(e), Misses E. MURRAY (c)(d)(e), A. BIGGS (c)(f)(e)(n), Mrs. P. JACKSON (e), Misses G. SCHOLES (c)(d)(e), F. CURTIS (c)(d)(e), M. D. GRIFFITHS (c)(d)(e), Mrs. E. K. BRIGGS (c)(d)(e), Mrs. O. YATES (c)(d)(e) and Mrs. P. RIMMER (c)(d)(e).

Physiotherapist—Mrs. K. BYARS (m).

Speech Therapist—(Vacant)

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); and Mrs. E. SHAWCROFT (d) (part-time).

Mental Health Staff—Senior Mental Health Visitor and Duly Authorised Officer, K. BAIN (p)(j); Mental Health Visitors and Duly Authorised Officers, Miss A. L. BENNETT (p)(j) and K. W. HARWOOD (p)(e)(o); Teacher for Mentally Handicapped, Mrs. I. H. BAYLEY; Assistant Teachers for Mentally Handicapped, Mrs. M. A. TOWNLEY (q), H. G. TAYLOR-LOWE, Miss V. FLANAGAN and Mrs. M. B. BENTLEY (e). Temporary Assistant Teacher—Mrs. S. CUNNINGHAM.

Clerical Staff—Administrative Assistant, F. H. DIX, A.C.I.S., GRAD. A.C.C.A.; Chief Clerk, W. R. HOLGATE; Senior Clerks, Miss M. E. WELLS, Miss N. SOMECH; and D. C. EVANS. Clerks, Misses B. MALTBY, B. PARKER, H. SMITH, R. SHEPHERD, P. M. WHITAKER, A. STOTT, S. BRIDGE, S. COULTON, P. LOMAX, Mrs. B. S. HOLT and Mrs. K. HODKINSON.

Day Nurseries—

Southport Day Nursery Matron: MRS. A. WILLIAMS (e)

Bedford Park Day Nursery Matron: MISS A. K. BAXTER (e)(d)(l)

Notes re Qualifications:—

- (a) Public Health 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.
- (j) Royal Medico-Psychological Association's Certificate.
- (l) State Registered Children's Nurse.
- (m) Member of the Chartered Society of Physiotherapy.
- (n) Tuberculosis Association Certificate.
- (o) Queen's Nurse.
- (p) State Registered Mental Nurse.
- (q) State Enrolled Assistant Nurse.

Ambulance Service—

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

Public Analyst

G. H. WALKER, P.H.D., F.R.I.C.

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ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH

AND PRINCIPAL SCHOOL MEDICAL OFFICER

FOR THE YEAR 1959

TO THE MAYOR, ALDERMEN AND COUNCILLORS
OF THE COUNTY BOROUGH OF SOUTHPORT

Your Worship, Ladies and Gentlemen,

I have the honour to present my report for the year 1959.

In general, the health of the people of the town, as measured by the statistics required by law, has not only been well maintained but has been slightly better than in the previous year. The birth rate has risen (from 12.10 to 12.67 per thousand persons), the death rate has fallen (from 17.45 to 16.91 per thousand persons) and the infant mortality rate, i.e. the number of babies per 1,000 live births who died in the first year of life, has also fallen (from 21.23 to 20.37). There has been no epidemic disease of importance in the borough. No mother died in childbirth, no child died from measles or whooping cough, diseases which formerly claimed many children's lives and no case of diphtheria occurred. These are satisfying facts but were only achieved by constant endeavour by all who are engaged in the medical services.

Many people would agree that the most important Act of Parliament passed during the year was the Mental Health Act 1959. The sections of this Act are to be brought into force at dates to be determined, in order to allow the authorities concerned time to make provision to undertake new responsibilities now required by statute. In effect, patients suffering from mental disorder are to be retained in the community so far as is possible and will only be compulsorily admitted to hospital if they are a danger to themselves or to others and are in urgent need of hospital treatment. It is important to realise that advances in medical knowledge during the last decade have improved the treatment, both inside and outside of hospital, of patients suffering from mental disorder, and have made possible the liberal outlook which is evident in the new legislation. Nevertheless, much tolerance and understanding will be required by all concerned and not least by members of the general public, if this act is to achieve its full purpose. During the year the Minister of Health gave approval for tenders to be obtained for the erection of the new Training and Industrial Centre for mentally handicapped persons and it is hoped that building will commence next year. The Local Health Authority has responsibility not only for the care of patients suffering from mental disorder and their after-care, particularly from the social and rehabilitation aspects, after

leaving hospital, but also for the very difficult matter of the prevention of mental illness. Some mental disease is known to be preventable, but much more knowledge and research into this subject is required. It is hoped that the Child Guidance Service in Southport to which approval has now been given and which is the result of a combined effort by the Liverpool Regional Hospital Board and this Local Authority will, when it is established, help in the elucidation of some of these problems. It is increasingly being borne in upon us that that not very popular branch of medical science, psychological medicine, may shortly be able to provide more accurate answers as to the causation of behaviour disability, leading to anti-social acts, than we have at the moment. It is not generally realised that many delinquent youngsters are poorly equipped mentally. The new Act will lead to an upsurge of research and knowledge in the problems of mental disorder.

The new Crematorium began its work during the year, and Dr. J. A. G. Watson, my deputy, and I were glad to undertake the medical referee duties there; the woodland setting of the building is very beautiful and contributes to the aura of peace which is already evident there.

The work of the Health Department seems to increase year by year. In 1959 B.C.G. vaccination against tuberculosis was extended and is now available to all school children over twelve years of age and to students attending Universities, Teachers' Training Colleges and Technical Colleges. Proposals were accepted for a special chiropody service and increased responsibilities for teaching were undertaken, e.g. in the training of nurses in the public health part of the syllabus for State Registration.

There is now no room for expansion in the Health Department buildings, and it has been necessary during the year to abandon the scheme for improvement of 44/46 Hoghton Street because the age of these buildings did not justify the expenditure which the alterations would have cost. The alternative is to put a new building on the Health Department or other suitable site and instructions have been given for this to be planned. This beautiful town should have the best possible facilities for its health services, and there is no doubt that buildings should be designed for specific purposes, like the Southport Day Nursery, the new Schools and the proposed new Training and Industrial Centre for mentally handicapped persons.

The Sanitary Section of the Department has taken steps to put into practice the Slaughterhouses Act 1958, and considerable expenditure at the public Abattoir has resulted which will result in improved facilities there. It may be of interest to note that 1,993 enquiries asking for advice and help were received by this section of the Department and that no less than 1,756 drain stoppages were given attention. Recognition was given by the Royal Institute of Public Health and Hygiene during the year to the courses in Food Hygiene and in the Bacteriology of Food Hygiene held at the Technical College.

The School Health Service has functioned satisfactorily and is commented upon in detail in the body of the Report.

I wish particularly to draw attention to the opportunity which is now available for persons up to the age of 40 years to be protected against poliomyelitis; about three quarters of Southport children have been protected and all parents whose children have not had, or been registered for, a full course of vaccination should give serious consideration to the matter. In the older age groups only about fifteen per cent of those eligible have sought vaccination. To anyone who has personal knowledge of the crippling effects of this serious disease it seems strange that so many have not obtained adequate protection.

The staff have deserved my appreciation of the work they have done, and I would like to thank the members of Council and my medical colleagues in the town for their support and consideration throughout the year. I was particularly pleased to be asked in June to become a member of the Hospital Management Committee of the Southport Group of Hospitals, and hope that I shall be able to make a useful contribution to this important branch of the service.

I am,

Yours faithfully,

G. N. M. WISHART,

*Medical Officer of Health and
Principal School Medical Officer.*

Part I

STATISTICAL MEMORANDA

AND

VITAL STATISTICS

General Statistics

Vital Statistics

Births and Stillbirths

Deaths—

General

Infantile

Maternal

Mortality Trends

GENERAL STATISTICS

Area of County Borough (including Foreshore)	18,333 acres
Area of County Borough (excluding Foreshore)	9,426 acres
Population (1951 Census)	84,039
Population (estimated by the Registrar General), middle of 1959	81,370
Density of Population per acre (excluding Foreshore)	8.6
Number of Inhabited Houses, 1st April, 1959	26,417
Number of Permanent Houses and Flats erected and completed during 1959	214
Rateable Value, 1st April, 1959	£1,552,353
Sum represented by a penny rate	£6,144
Average domestic consumption of water per head per day (year ending 31/3/59)	32.48 galls.
Total consumption of water per head per day (year ending 31/3/59)	42.33 galls.

VITAL STATISTICS

Live Births	1031
Live birth rate per 1,000 population	12.67
	(Adjusted rate 14.32)
Illegitimate live births per cent of total live births	4.7%
Still-births	28
Still-births rate per 1,000 live and still-births	26.44
Total live and still-births	1059
Infant deaths	21
Infant mortality rate per 1,000 live births—total	20.37
Infant mortality rate per 1,000 live births—legitimate	18.30
Infant mortality rate per 1,000 live births—illegitimate	62.50
Neo Natal mortality rate per 1,000 live births	14.55
(first four weeks)	
Early Neo-natal Mortality Rate	11.64
Perinatal Mortality Rate	37.76
Maternal deaths (including abortion)	Nil
Maternal mortality rate per 1,000 live and still-births	—
Total Deaths (Males, 603; Females, 773)	1,376
Death Rate (per 1,000 population)	16.91
Adjusted Death Rate (per 1,000 population)	12.51
Maternal Deaths	Nil
Maternal Mortality Rate (per 1,000 total births)	—
Deaths from Whooping Cough (all ages)	Nil
Deaths from Measles, all ages	Nil
Deaths from Diarrhoea, under 2 years of age	2
Deaths from Pulmonary Tuberculosis (Males, 6; Females, 1)	7
Death Rate from Pulmonary Tuberculosis (per 1,000 population)	0.08
Deaths from Non-pulmonary Tuberculosis (Males, 1; Females, 1)	2
Death Rate from Non-pulmonary Tuberculosis (per 1,000 population)	0.02
Deaths from Cancer (Males, 91; Females, 149)	240
Death Rate from Cancer (per 1,000 population)	2.95

Births—The number of live births allocated to the area after adjustment for inward and outward transfers was 1031, an increase of 42 on the total for 1958.

Average number of births, 1949-1958	937
Births in 1959	1031
Average crude birth rate, 1949-1958	11.36 per 1,000 population
Crude birth rate, 1959	12.67 per 1,000 population
Birth rate, England and Wales (1959)	16.50 per 1,000 population

Stillbirths—

Average number of stillbirths, 1949-1958	...	...	...	26
Stillbirths in 1959	...	...	...	28
Average stillbirth rate, 1949-1958	...	...	...	26.70 per 1,000 total births
Stillbirth rate 1959	...	...	...	26.44 per 1,000 total births
Stillbirth rate, England and Wales (1959)	...	...	...	20.70 per 1,000 total births

Illegitimate Births—Illegitimate births account for 4.7% of the total births, compared with the national figure for 1959 of 5.1%.

Average number of illegitimate births, 1949-1958	...	...	...	...	53
Illegitimate births during 1959	...	...	...	...	48

Prematurity—(i.e., babies weighing $5\frac{1}{2}$ lbs. or less at birth, irrespective of the period of gestation).

During 1959, 96 premature births (9.3 per cent. of the total births) were notified in Southport, as follows:—

	Live	Stillborn	Total
Born at home	5	—	5
Born in hospital	70	16	86
Born in nursing homes	5	—	5
	80	16	96

A summary of the place of treatment of these small babies and the results obtained is shown on page 14.

WEIGHT AT BIRTH (1)	PREMATURE LIVE BIRTHS												PREMATURE STILLBIRTHS		
	Born in Hospital			Born at Home and Nursed entirely at Home			Born at Home and transferred to Hospital on or before 28th day			Born in Nursing Home and nursed entirely there			Born in Nursing Home and transferred to Hospital on or before 28th day		
	Total	Died within 24 hours	Survived 28 days	Total	Died within 24 hours	Survived 28 days	Total	Died within 24 hours	Survived 28 days	Total	Died within 24 hours	Survived 28 days	Total	Died within 24 hours	Survived 28 days
	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)	(15)	(16)
3 lbs. 4 ozs. or less	4	3	1	—	—	—	—	—	—	—	—	—	—	—	—
Over 3 lbs. 4 ozs. up to and including 4 lbs. 6 ozs.	11	1	10	—	—	—	—	—	—	—	—	—	—	—	—
Over 4 lbs. 6 ozs. up to and including 4 lbs. 15 ozs.	14	—	14	2	—	2	—	—	—	—	—	—	—	—	—
Over 4 lbs. 15 ozs. up to and including 5 lbs. 8 ozs.	41	—	41	2	—	2	1	—	—	5	—	5	—	—	—
TOTALS	70	4	66	4	—	4	1	—	—	5	—	5	—	16	—

Infant Mortality—During the year 21 infants died in the first year of life, giving an infant mortality rate of 20·37 per 1,000 live births.

Average infant mortality rate, 1949-1958 ... 30·16 per 1,000 live births

Infant mortality rate, 1959 ... 20·37 per 1,000 live births

Infant mortality rate, England and Wales (1959) ... 22·0 per 1,000 live births

Of the 21 infants, 15 died in their first month of life giving a neo-natal mortality rate of 14·55 per 1,000 live births as compared with a rate of 15·80 per 1,000 live births for England and Wales.

The following table gives the details of the total deaths registered under one year:—

CAUSE OF DEATH	AGE (weeks)								AGE (months)								ALL IN- FANT D'THS		
	Under 1 week		1 to 2		2 to 3		3 to 4		Total under 4 wks.	1 to 3		3 to 6		6 to 9		9 to 12		Total 1 to 12 mths.	
	M	F	M	F	M	F	M	F		M	F	M	F	M	F	M		F	
1. Prematurity Unqualified	2	1							3										3
Prematurity and Placental infection ...	1								1										1
TOTALS	3	1							4										4
2. Congenital Malformations:																			
(a) Nervous System							1		1	1		1						2	3
(b) Circulatory System	1								1										1
(c) Exomphalos ...							1		1										1
TOTALS	1						2		3	1		1						2	5
3. Infectious Diseases:																			
(a) Pneumonia ...										1		1						2	2
(b) Ac. Gastro Enteritis							1		1		1							1	2
(c) Acute Tracheo-Bronchitis														1				1	1
TOTALS							1		1	1	1	1		1				4	5
4. Others:																			
(a) Birth Injuries ...	3								3										3
(b) P.N. Asphyxia and Atalectasis		2							2										2
(c) Intestinal Obstruction ...	1								1										1
(d) Found dead on shore		1							1										1
TOTALS	4	3							7										7
GRAND TOTALS	8	4					3		15	2	1	2		1				6	21
TOTAL DEATHS UNDER ONE YEAR										Male 14		Female 7		Total 21					

Note: In addition to the six deaths from "prematurity" shown in (1) above, this was also a subsidiary cause in three other cases, viz.:—Gastro-enteritis 1; Hydrocephalus 1. Meningo-Myelocoele.

Maternal Mortality—The following table gives details of live births, live and still births and maternal deaths which have occurred within the Borough during the last 20 years, together with the rates per 1,000 live and stillbirths.

Year	No. of Live Births	No. of Live and Stillbirths	MATERNAL DEATHS RATES PER 1,000 LIVE AND STILLBIRTHS					
			Sepsis		Other Causes		Total	
			No.	Rate	No.	Rate	No.	Rate
1940	871	911	—	—	1	1.08	1	1.80
1941	949	989	1	0.88	2	1.77	3	2.65
1942	1075	1112	1	0.90	2	1.80	3	2.70
1943	1048	1083	—	—	1	0.92	1	0.92
1944	1168	1198	—	—	2	1.67	2	1.67
1945	1018	1058	1	0.95	3	2.83	4	3.78
1946	1237	1268	1	0.79	—	—	1	0.79
1947	1325	1351	—	—	2	1.48	2	1.48
1948	1167	1195	—	—	2	1.67	2	1.67
1949	986	1008	—	—	2	1.98	2	1.98
1950	890	907	—	—	—	—	—	—
1951	884	906	—	—	—	—	—	—
1952	957	991	—	—	2	2.02	2	2.02
1953	951	982	—	—	—	—	—	—
1954	890	908	—	—	—	—	—	—
1955	912	933	—	—	1	1.07	1	1.07
1956	945	984	—	—	1	1.02	1	1.02
1957	972	994	—	—	—	—	—	—
1958	989	1019	—	—	—	—	—	—
1959	1031	1059	—	—	—	—	—	—

PROPORTION OF DEATHS FROM PRINCIPAL CAUSES, 1959

Total Deaths — 1,376

CAUSE OF DEATH	1959		1958	
	Number	% of total deaths	Number	% of total deaths
Heart Disease including diseases of the circulatory system	533	38·74	597	41·96
Vascular Lesions of nervous system... ..	224	16·28	231	16·23
Cancer	240	17·44	210	14·75
Respiratory Diseases... ..	133	9·67	143	10·05
Violence, including suicide	61	4·43	52	3·66
Tuberculosis, all forms	7	0·51	7	0·49
Ulcer of Stomach and Duodenum	7	0·51	10	0·70
All Other Causes	171	12·42	173	12·16
	1,376	100·00	1,423	100·00

DEATHS (Table 1)
Causes of, and Ages at, Death for year 1959

CAUSES OF DEATH	Totals at all ages	AGE DISTRIBUTION																
		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	Totals	under 1 yr.	1 to 5	5 to 15	15 to 25	25 to 45	45 to 65	65 to 75	75 & over
1. Tuberculosis—Respiratory ...	7	—	—	—	—	1	1	2	2	6	—	—	—	—	—	—	1	—
2. Tuberculosis—Other ...	2	—	—	—	—	—	1	—	—	1	—	—	—	—	—	—	—	1
3. Syphilitic Disease ...	2	—	—	—	—	—	1	—	—	1	—	—	—	—	—	—	—	1
4. Diphtheria ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
5. Whooping Cough ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
6. Meningococcal Infections ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
7. Acute Poliomyelitis ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
8. Measles ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
9. Other Infective and parasitic diseases	2	—	—	—	—	—	1	—	—	1	—	—	—	1	—	—	—	—
10. Malignant Neoplasm, Stomach ...	32	—	—	—	—	—	3	5	6	14	—	—	—	—	4	8	6	—
11. Malignant Neoplasm, lung bronchus ...	37	—	—	—	—	—	22	9	1	32	—	—	—	—	3	1	1	—
12. Malignant Neoplasm, breast ...	28	—	—	—	—	—	—	—	—	—	—	—	—	3	10	6	9	—
13. Malignant Neoplasm, uterus ...	14	—	—	—	—	—	—	—	—	—	—	—	—	—	6	4	4	—
14. Other Malignant and Lymphatic Neoplasms ...	127	—	—	—	—	2	13	17	12	44	—	—	1	2	36	21	23	—
15. Leukaemia ...	2	—	—	—	—	—	—	—	1	1	—	—	—	—	—	—	1	—
16. Diabetes ...	7	—	—	—	—	—	1	—	1	2	—	—	—	—	—	3	2	—
17. Vascular lesions of Nervous System	224	—	—	—	—	1	8	28	46	83	—	—	—	1	15	32	93	—
18. Coronary Disease—Angina ...	242	—	—	—	—	3	48	37	50	138	—	—	—	—	14	39	51	—
19. Hypertension with Heart Disease ...	20	—	—	—	—	—	1	1	3	5	—	—	—	—	1	4	10	—
20. Other Heart Disease ...	205	—	—	—	—	1	6	12	39	58	—	—	—	2	9	16	120	—
21. Other Circulatory Disease ...	66	—	—	—	—	2	6	9	12	29	—	—	—	1	2	7	27	—
22. Influenza ...	15	—	—	—	—	—	—	4	2	6	—	—	—	—	2	2	5	—
23. Pneumonia ...	28	1	—	—	—	—	1	4	8	14	1	—	—	—	—	4	9	—
24. Bronchitis ...	82	—	—	—	—	—	13	29	19	61	1	—	—	1	4	5	10	—
25. Other Diseases of Respiratory System ...	8	—	—	—	—	—	3	2	—	5	—	—	—	1	1	1	—	—
26. Ulcer of Stomach and Duodenum ...	7	—	—	—	—	—	4	—	2	6	—	—	—	—	—	—	1	—
27. Gastritis, Enteritis and Diarrhoea ...	6	2	—	—	—	—	—	—	—	2	—	—	—	—	—	1	3	—
28. Nephritis and Nephrosis ...	13	—	—	—	1	—	2	3	4	10	—	—	—	—	1	2	—	—
29. Hyperplasia of Prostate ...	16	—	—	—	—	—	1	2	13	16	—	—	—	—	—	—	—	—
30. Pregnancy, Childbirth, Abortion ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
31. Congenital Malformations ...	5	3	—	—	—	—	—	—	—	3	1	—	—	1	—	—	—	—
32. Other defined and ill-defined Diseases ...	118	8	—	—	—	3	7	5	16	39	4	—	1	4	9	18	43	—
33. Motor Vehicle Accidents ...	10	—	—	1	—	—	3	2	2	8	—	—	—	—	—	1	1	—
34. All Other Accidents ...	32	—	—	1	—	—	3	2	2	8	—	—	—	—	3	4	17	—
35. Suicide ...	19	—	—	—	—	2	5	3	—	10	—	—	—	1	6	2	—	—
36. Homicide and Operations of War ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
TOTALS—(All Causes) ...	1376	14	—	2	1	15	154	176	241	603	7	—	—	2	18	126	182	438

DEATHS DUE TO VIOLENCE

Totals	Male	...	...	...	26
	Female	...	...	...	35
					<u>61</u>

Classification

					<i>Male</i>	<i>Female</i>	<i>Total</i>
Motor Vehicle Accidents	...	...	...		8	2	10
All other accidents	...	...	...		8	24	32
Suicide	...	...	...	...	10	9	19
					<u>26</u>	<u>35</u>	<u>61</u>

By Age Groups

				0—15 yrs.		15—65 yrs.		65 and over	
				<i>M.</i>	<i>F.</i>	<i>M.</i>	<i>F.</i>	<i>M.</i>	<i>F.</i>
Motor Vehicle Accidents	...			1	—	7	—	—	2
All other accidents	...	...		1	—	4	3	3	21
Suicide	...	...	...	—	—	9	7	1	2
				<u>2</u>	<u>—</u>	<u>20</u>	<u>10</u>	<u>4</u>	<u>25</u>

DEATHS (Table 3)

Numbers and Rates per 1,000 population and per 1,000 births—years 1940—1959

Year	Popu- lation	Male	Female	Total	Rate per 1,000 Popu- lation	Cor- rected for Age and Sex	INFANTS						Pulm'ry Tuber- culosis	Rate per 1,000 Popu- lation	Other Forms T.B.	Rate per 1,000 Popu- lation
							Under One Year	Rate per 1,000 Births	Legiti- mate	Rate per 1,000 Legiti- mate Births	Illegiti- mate	Rate per 1,000 Illegiti- mate Births				
1940	88550	608	810	1418	16.01	12.65	40	43	33	38	7	121	24	0.27	9	0.10
1941	95410	641	774	1415	14.80	11.69	65	57	58	54	7	115	38	0.40	7	0.07
1942	90480	584	739	1323	14.60	12.11	41	38	36	36	5	75	37	0.41	9	0.10
1943	85140	619	791	1410	16.60	13.77	49	47	43	45	6	67	43	0.50	9	0.10
1944	82860	565	739	1304	15.74	13.06	52	44	45	42	7	67	27	0.32	6	0.07
1945	81360	561	739	1300	15.98	12.63	29	28	25	27	4	35	36	0.44	5	0.06
1946	84010	470	686	1256	14.95	11.81	40	32	33	27	7	69	31	0.37	3	0.04
1947	84240	651	721	1372	16.29	12.87	55	42	50	40	5	64	39	0.46	5	0.06
1948	85800	566	706	1272	14.82	11.71	41	35	35	32	6	76	27	0.31	3	0.04
1949	85540	623	721	1344	15.71	12.10	38	39	33	35	*5	102	26	0.30	5	0.06
1950	85500	622	778	1400	16.37	12.44	24	27	22	26	2	34	15	0.17	5	0.09
1951	83400	737	876	1613	19.34	14.70	36	41	33	40	1	60	22	0.26	5	0.06
1952	82980	626	728	1354	16.32	12.32	29	20	28	30	1	20	12	0.15	6	0.07
1953	82400	606	704	1310	15.89	12.07	20	21	19	21	1	21	13	0.16	5	0.06
1954	82440	606	751	1357	16.46	11.34	31	35	29	34	2	39	16	0.20	—	—
1955	82240	682	870	1552	18.87	13.20	32	35	28	33	4	67	13	0.16	—	—
1956	82100	637	750	1387	16.89	12.16	26	27	25	28	1	21	6	0.07	—	—
1957	81900	636	708	1344	16.41	11.98	24	25	22	24	2	31	9	0.11	1	0.01
1958	81760	646	777	1423	17.45	12.74	21	21	20	21	1	18	6	0.07	1	0.01
1959	81370	603	773	1376	16.91	12.51	21	20	18	18	3	63	7	0.08	2	0.02

*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.

ENGLAND AND WALES—SOUTHPORT—CERTAIN VITAL STATISTICS

PERIOD	BIRTH RATE (per 1,000 population)		DEATH RATE (per 1,000 population)		INFANTILE MORTALITY RATE (per 1,000 live births)		EXPECTATION OF LIFE
	England & Wales	Southport	England & Wales	Southport	England & Wales	Southport	
1871—1880	35.4	30.69	21.4	23.43	149	161	M.—48; F.—52
1881—1890	32.4	24.37	19.1	17.78	142	132	
1891—1900	29.9	22.31	18.2	17.23	153	143	
1901—1910	27.2	17.49	15.4	14.43	128	121	
1911—1920	21.8	13.95	14.4	13.86	100	84	M.—59; F.—63
1921—1930	18.3	12.71	12.1	12.66	72	65	
1931—1940	14.9	10.30	12.3	15.07	59	56	
1941—1950	16.9	12.68	12.4	15.59	43	39	
1951	15.4	*11.96	12.5	*14.70	30	41	M.—66; F.—71
1952	15.3	*12.22	11.3	*12.32	28	30	
1953	15.4	*12.23	11.4	*12.07	27	21	
1954	15.1	*12.31	11.3	*11.34	25	35	
1955	15.0	*12.64	11.7	*13.20	24.9	35	M.—67; F.—73
1956	15.7	*13.12	11.7	*12.16	23.8	27	
1957	16.1	*13.41	11.5	*11.98	23.0	24	
1958	16.4	*13.67	11.7	*12.74	22.5	21	
1959	16.5	*14.32	11.6	*12.51	22.0	20	

*Corrected Rates

New Cases and Mortality.—The number of new cases of tuberculosis which came to the notice of the Department during the year was 44. Of these 40 were found in the following manner: 10 from primary disease and 3 from non-primary disease. The following table shows the age and sex of these patients together with similar information regarding the number of persons who died of tuberculosis during the year.

New Cases		Deaths	
Age	Sex	Age	Sex
0 to 1	—	0 to 1	—
1 to 2	—	1 to 2	—
3 to 4	—	3 to 4	—
5 to 9	—	5 to 9	—
10 to 14	—	10 to 14	—
15 to 19	—	15 to 19	—
20 to 24	—	20 to 24	—
25 to 29	—	25 to 29	—
30 to 34	—	30 to 34	—
35 to 39	—	35 to 39	—
40 to 44	—	40 to 44	—
45 to 49	—	45 to 49	—
50 to 54	—	50 to 54	—
55 to 59	—	55 to 59	—
60 to 64	—	60 to 64	—
65 to 69	—	65 to 69	—
70 and over	—	70 and over	—
Total	44	Total	10

Treatment Clinic.—The 44 new cases came to the notice of the Department in the following ways:—

Part II

INFECTIOUS DISEASES

Tuberculosis

Veneral Diseases

Infectious Diseases—Statistical Tables

All the cases for which primary treatment was given were reported to the Department. The total number of cases reported to the Department at the end of 1939 was 175. Of these 175 cases 100 were found to have primary tuberculosis and 75 of these patients were found to have primary tuberculosis during the year. 52 Treatment Clinics were held and 67 patients were treated by primary treatment. The number of 2-ray examinations of patients was 610.

It should be mentioned that the Department and District Medical Management Committee is responsible for the organization and administration of the Treatment Clinics in the Department. The following summary of statistics for the year 1939 is given in the table below.

The following summary of statistics for the year 1939 is given in the table below. The table shows the number of patients in the Department of primary tuberculosis, a gradual decline in the number of non-primary tuberculosis and a marked fall in the number of deaths from tuberculosis during the year.

New Cases		Deaths	
Year	Sex	Year	Sex
1939	—	1939	—
1938	—	1938	—
1937	—	1937	—
1936	—	1936	—
1935	—	1935	—
1934	—	1934	—
1933	—	1933	—
1932	—	1932	—
1931	—	1931	—
1930	—	1930	—
1929	—	1929	—

TUBERCULOSIS

New Cases and Mortality—The number of new cases of tuberculosis which came to the notice of the Department during the year was 44. Of these 40 were found to be suffering from pulmonary disease and 4 from non-pulmonary disease. The following table shows the age and sex of these patients together with similar 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 to 5 ...	—	—	—	—	—	—	—	—
5 to 15 ...	—	2	—	—	—	—	—	—
15 to 25 ...	4	2	—	—	—	—	—	—
25 to 45 ...	5	6	1	1	1	—	—	—
45 to 65 ...	12	2	1	1	1	—	1	—
65 to 75 ...	2	1	—	—	2	1	—	1
75 and over	3	1	—	—	2	—	—	—
TOTALS ...	26	14	2	2	6	1	1	1

Treatment Clinic—The 44 new cases came to the notice of the Department in the following ways:—

(a) By primary notifications ...	...	...	...	...	...	...	...	26
(b) By transfers from other areas ...	...	...	...	...	...	...	...	15
(c) From Death Returns ...	...	...	...	...	...	...	...	3
(d) Lost sight of cases returned ...	...	...	...	...	...	...	...	—
TOTAL ...								44

All the cases for which 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 1959 was 335, and 52 of these patients were found to have sputum containing tubercle bacilli. During the year, 52 Treatment Clinics were held and 673 visits were made by patients; the total number of X-ray examinations of patients was 616.

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

The following summary of notifications and deaths from tuberculosis during the last ten years shows little variation in the notifications of pulmonary tuberculosis, a gradual decline in the notifications of non-pulmonary tuberculosis and a marked fall in the number of deaths from both forms of the disease.

YEAR	NEW CASES		DEATHS	
	Respiratory	Non-Respiratory	Respiratory	Non-Respiratory
1949 ...	60	13	23	1
1950 ...	68	16	15	5
1951 ...	79	13	22	5
1952 ...	71	13	12	6
1953 ...	67	9	13	5
1954 ...	68	9	16	—
1955 ...	65	10	13	—
1956 ...	61	—	—	—
1957 ...	46	3	9	1
1958 ...	62	6	6	1
1959 ...	40	4	7	2

Contact Clinic—The Health Committee 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 43 clinics were held and 910 attendances were made by contacts of patients; the total number of X-ray examinations of contacts was 889. One contact was found to be suffering from pulmonary tuberculosis in 1959.

Domiciliary Visiting—A Health Visitor is employed by the Health Committee 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 this Health Visitor during the year:—

To Patients—	First Visits	...	...	...	...	...	...	...	26
	Re-Visits	...	...	...	...	...	...	...	1,058
To Contacts—	First Visits	...	...	...	...	...	...	...	169
	Re-Visits	...	...	...	...	...	...	...	710
									<hr/> 1,963
“No Access” Visits									<hr/> 248

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 Health Committee's Service.

During 1959, the Health Visitor made 91 attendances at the Tuberculosis Treatment and Contact Clinics.

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 tuberculosis. This concession is of benefit to those cases where improved housing accommodation is essential for the patient and his or her family.

During 1959, one case was referred to the Housing Department with a recommendation that alternative accommodation would be helpful.

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 Health Committee loan open-air chalets to suitable patients, thereby enabling treatment to be continued in a more satisfactory manner.

These chalets are equipped with Calor gas lighting and three were in use at the end of the year.

Mass Miniature Radiography Unit—The following statement shows the numbers of persons who attended for miniature X-ray examination and the results obtained when the No. 2 Mass Radiography Unit of the Liverpool Regional Hospital Board was in Southport during 1959.

						Male	Female	Total
(1)	Total number of persons x-rayed	...	...	...	...	1,909	2,461	4,370
(ii)	Classified Cases							
	Bronchiectasis	...	...	...	...	1	1	2
	Pneumonitis	...	...	...	...	5	1	6
	Tuberculosis—Occasional Outpatient supervision					7	10	17
	Malignant Neoplasms	...	...	...	...	—	1	1
	Congenital Cardiac Abnormalities	...	...	...	...	8	5	13
	Acquired Cardiac Abnormalities	...	...	...	...	9	16	25
	Pneumoconiosis	...	...	...	...	1	—	1
	Did not attend for appointment	...	...	...	...	2	3	5
	Awaiting Chest Clinic Reports	...	...	...	...	1	2	3

The year under review had two cardinal features in so far as Mass Radiography in Southport was concerned:—

- (a) This was the final year of x-raying Children under 15 years of age and ante-natal examinees.
- (b) The innovation of a Street by Street Survey. The Pilot scheme although of only half day duration produced 61 Male and 132 Female examinees.

Number of Patients on Register—The following table gives details of the patients on the register during the last five years and bears out the remarks made earlier in this Report regarding the incidence of notifications and deaths.

	1955			1956			1957			1958			1959		
	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	388	65	453	396	61	457	420	67	487	391	35	426	390	34	424
2. No. of patients added during the year:															
(a) primary notifications of new cases	41	4	45	42	10	52	30	1	31	34	5	39	22	4	26
(b) transfers from other areas	19	4	23	18	2	20	12	2	14	26	—	26	15	—	15
(c) lost sight of cases returned	1	—	1	1	1	2	1	—	1	2	—	2	—	—	—
TOTALS (1)	449	73	522	457	74	531	463	70	533	453	40	493	427	38	465
3. No. of patients deleted during the year:															
(a) died (from all causes)	12	—	12	8	—	8	10	1	11	14	—	14	4	—	4
(b) transferred to other areas	21	1	22	21	2	23	18	1	19	21	—	21	10	2	12
(c) recovered	7	8	15	6	5	11	29	24	53	26	6	32	84	12	96
(d) lost sight of or refused further assistance	13	3	16	2	—	2	15	9	24	2	—	2	6	1	7
(e) tuberculosis not primary cause of death	—	—	—	—	—	—	—	—	—	—	—	—	11	—	11
TOTALS (2)	53	12	65	37	7	44	72	35	107	63	6	69	115	15	130
4. No. of patients on register at the end of year (i.e., totals (1), less totals (2))	396	61	457	420	67	487	391	35	426	390	34	424	312	23	335
5. Summary of new patients found during the year:															
(a) Primary notifications of new cases	40	4	45	42	10	52	30	1	31	34	5	39	22	4	26
(b) Transfers from other areas	19	4	23	18	2	20	12	2	14	26	—	26	15	—	15
(c) Patients found from death returns (figures not included in items (1) to (4) above)	5	2	7	1	—	1	3	—	3	—	1	1	3	—	3
(d) Lost sight of cases returned	1	—	1	1	1	2	1	—	1	2	—	2	—	—	—
TOTAL NUMBER OF NEW PATIENTS	66	10	76	62	13	75	46	3	49	62	6	68	40	4	44

Voluntary Tuberculosis Care Committee—The Southport Voluntary Tuberculosis Care Committee continued as in previous years to provide patients and their families with financial and other assistance. The Committee forms an essential part of the general scheme for tuberculous patients and all the medical and nursing staff who are engaged in this service are members of the organisation. The administrative assistant in the Health Department acts as Hon. Case Secretary and the Chief Clerk undertakes the duties of Hon. Treasurer. Assistance is also received from other members of the staff of the Health Department in organising the Christmas Seal Sale.

During 1959 the Care Committee provided financial and other assistance to patients and their families to the value of £246 6s. 8d.

B.C.G. Vaccination—The number of persons vaccinated during the year 1959 is shown below:—

(1) (a) At B.C.G. Clinics	...	...	...	...	...	...	...	...	56
(b) Babies seen by the Consultant Paediatrician	...	...	...	...	...	...	...	...	35
(c) School children	...	...	...	...	...	...	...	...	698
TOTAL									789
(2) Number of B.C.G. Clinics	...	...	...	...	...	...	...	...	5
Number of attendances made by contacts	...	...	...	...	...	...	...	...	36
Number of Mantoux and Patch tests	...	...	...	...	...	...	...	...	91
Number of sessions by Tuberculosis Visitor at B.C.G. Clinics	...	...	...	...	...	...	...	...	3

VACCINATION SINCE SCHEME COMMENCED IN APRIL, 1951

	1951	1952	1953	1954	1955	1956	1957	1958	1959
(a) At B.C.G. Clinics	96	44	47	30	48	45	27	42	56
(b) Babies seen by the Consultant Paediatrician...	6	6	6	13	10	9	9	24	35
(c) School Children	—	—	—	79	427	391	500	497	698
TOTALS	102	50	53	122	485	445	536	563	789

VENEREAL DISEASES

At the end of the year, 71 new cases were under treatment at the clinic, as compared with 75 cases at the end of 1958.

These new cases were classified as follows:—

							Male		Female		Total
(1)	Syphilis	...	...	...	...	...	—	...	1	...	1
(2)	Gonorrhoea	...	...	...	...	...	8	...	2	...	10
(3)	Non-Venereal Infections	...	...	...	...	...	48	...	12	...	60
Totals							56		15		71

The following statement shows the number 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					
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
1954	1	6	7	57	1412	3	2	18
1955	1	7	8	56	1625	4	5	46
1956	3	7	10	49	1336	6	4	85
1957	—	7	7	55	1152	10	3	78
1958	—	5	5	48	1151	8	5	43
1959	—	1	1	45	657	10	4	73

During 1959 60 non-venereal cases made 392 attendances and there were 14 such cases on the register at the end of the year.

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 Physician, and the arrangement is of great value in maintaining a close liaison between the district and 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 on a repayment basis, and due to his efforts the number of male defaulters has been reduced to a minimum.

During the year the Health Visitor made 38 follow-up visits and also attended 46 V.D. Clinics. At the commencement of the year there were 9 male defaulters on the register and 51 other names were added during the course of the year. The male nurse dealt successfully with 66 of these, leaving 4 patients as defaulters at the end of the year. 63 home visits were made by the male nurse during the period under review.

INFECTIOUS DISEASES (Table 1)
Classification of Cases notified during the year 1959

NOTIFIABLE DISEASE	NUMBER OF CASES NOTIFIED Ages in Years								TOTAL CASES NOTIFIED IN EACH WARD															
	At all ages	Under 1	1 to 5	5 to 15	15 to 25	25 to 45	45 to 65	65 upwards	Central	Craven	Heskeith	Marine	Park	Scarisbrick	South	Sussex	Talbot	West	Birkdale East	Birkdale North	Birkdale South	Birkdale West	Ainsdale	Total No. of cases removed to Hospital
Chicken Pox	383	8	121	236	5	6	7	—	22	14	23	31	22	20	35	36	11	48	25	33	40	10	13	14
Dysentery	5	—	—	3	1	—	1	—	1	—	—	1	—	—	—	—	—	—	—	—	1	1	1	5
Erysipelas	5	—	1	—	—	1	1	2	—	—	—	—	—	—	1	—	—	2	1	1	—	—	—	2
Food Poisoning	3	—	1	—	—	1	—	1	—	—	—	—	1	—	—	—	—	—	2	—	—	—	—	—
German Measles	70	3	26	40	1	—	—	—	1	1	8	—	6	1	8	2	3	2	6	9	12	4	7	2
Measles	1554	28	705	811	4	6	—	—	63	76	248	94	190	119	87	161	97	63	72	50	106	40	88	52
Meningococcal Infection	2	2	—	—	—	—	—	—	—	—	2	—	—	—	—	—	—	—	—	—	—	—	—	—
Pneumonia	21	—	—	—	1	11	3	6	3	2	1	2	1	—	1	1	3	—	1	—	3	—	3	12
Polio myelitis	2	—	—	—	—	2	—	—	—	—	—	—	—	—	—	—	2	—	—	—	—	—	—	1
Puerperal Pyrexia	1	—	—	—	1	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—
Scarlet Fever	144	1	60	83	—	—	—	—	9	2	15	8	9	19	8	14	9	3	13	6	16	3	10	11
Whooping Cough	113	13	36	63	1	—	—	—	6	—	20	11	16	4	4	8	—	4	9	17	8	5	1	8
TOTALS	2303	55	950	1236	14	27	12	9	105	95	317	148	245	163	144	222	125	122	129	116	186	63	123	107

INFECTIOUS DISEASES (Table 2)
Number of Notified Cases and number of Deaths for the years 1950 to 1959 inclusive

NOTIFIABLE DISEASE	NUMBER OF CASES OF INFECTIOUS DISEASE NOTIFIED											DEATHS FROM INFECTIOUS DISEASE							Case Mortality for 10 years 1950—1959				
	1950	1951	1952	1953	1954	1955	1956	1957	1958	1959	Total Cases for 10 years 1950 to 1959	1950	1951	1952	1953	1954	1955	1956		1957	1958	1959	Total Deaths during 10 years 1950 to 1959
Chicken Pox	345	295	992	225	1395	286	498	746	173	383	5338	—	—	—	—	—	—	—	—	—	—	—	—
Diphtheria	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Dysentery	282	155	9	18	154	35	134	—	13	5	805	—	2	—	—	—	—	—	—	—	—	—	0.25%
Encephalitis	—	1	—	—	1	—	—	—	—	—	2	—	—	—	—	—	—	—	—	—	—	—	—
Erysipelas	24	15	17	22	10	9	12	6	6	5	126	—	—	—	—	—	—	—	—	—	—	—	—
Food Poisoning	23	4	—	26	2	16	5	—	26	3	105	1	—	—	—	—	—	—	—	—	—	—	—
German Measles	45	76	330	1505	60	57	110	169	86	70	2508	—	—	—	—	—	—	—	—	—	—	—	0.97%
Malaria	1	1	—	—	—	—	—	—	—	—	2	—	—	—	—	—	—	—	—	—	—	—	—
Measles	595	1272	345	1202	457	238	813	476	124	1554	7076	—	1	—	—	1	—	—	—	—	—	—	0.03%
Meningococcal Infect'n	3	4	4	—	1	3	3	1	—	2	21	1	—	—	—	1	—	2	—	—	—	—	19.05%
Ophthalmia Neonatorum	1	—	—	—	—	—	—	—	1	—	2	—	—	—	—	—	—	—	—	—	—	—	—
Other Forms of Tuberculosis	16	13	13	9	9	10	13	3	6	4	96	5	5	6	5	—	—	—	1	—	1	2	26.04%
Para-Typhoid Fever	2	1	—	—	—	1	1	—	—	—	5	—	—	—	—	—	—	—	—	—	—	—	—
Pneumonia	46	69	51	32	15	31	37	41	12	21	355	40	51	38	22	27	58	50	52	45	28	411	115.77%
Polioencephalitis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Polioomyelitis	2	2	1	7	2	9	6	4	3	2	38	—	—	—	—	1	1	—	—	1	—	—	7.89%
Puerperal Pyrexia	2	2	1	5	1	—	4	1	1	1	18	—	—	—	—	—	—	—	—	—	—	—	—
Pulmonary Tuberculosis	68	77	71	67	68	65	62	46	62	40	626	15	22	12	13	16	13	6	9	6	7	119	19.00%
Scarlet Fever	167	94	213	176	55	32	26	40	53	144	1000	—	—	—	—	—	—	—	—	—	—	—	—
Smallpox	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Typhoid Fever	—	—	1	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—
Typhus	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Whooping Cough	352	192	179	206	452	43	198	63	50	113	1848	2	—	1	—	—	—	—	—	—	—	3	0.16%

Part III

LOCAL HEALTH SERVICES

Special Survey of Local Health Services

Care of Mothers and Young Children

Welfare Foods

Midwifery

Health Visiting

Home Nursing

Vaccination and Immunisation

Ambulance

Prevention of Illness, Care and After-Care

Home Help

Mental Health

CARE OF MOTHERS AND YOUNG CHILDREN

Ante-Natal Care—A weekly Ante-Natal Clinic was held at 44 Hoghton Street during 1959 for those mothers who had booked to have their confinements 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. Mothers who attend have a blood test for Kahn reaction, haemoglobin estimation, blood grouping and are examined for Rhesus factor as a routine measure.

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

During the year, 51 clinic sessions were held and 27 mothers who had booked to have their confinements at home made a total of 58 attendances.

The town is unique in that all mothers wishing to have their babies in hospital are able to do so.

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 405 mothers attended during 1959. In addition, 238 re-visits were made, making a total of 643 visits during the year; 46 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 Clinic distributes the dried milk and vitamin foods issued by the Ministry of Health. As in the past the Ladies of the Voluntary Infant Welfare Committee provided clerical and other assistance at the Centres during 1959 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; one of the Lady Assistant Medical Officers 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 young children so that appropriate advice can be given when it is necessary.

The following statement shows the attendances made at the Welfare Centres during 1959:—

	Hamp- ton Road	High Park	Liver- pool Road	Cros- sens	Derby Road	Ains- dale	TOTALS
INFANTS — under 1 year—							
No. of New Cases ...	147	169	154	119	201	82	872
No. of Re-attendances	1632	2014	1649	1247	2054	880	9476
CHILDREN — over 1 and under 5 years—							
No. of Attendances ...	618	774	803	831	1011	640	4677
Total No. of Attendances	2397	2957	2606	2197	3266	1602	15025
No. of Sessions	47	94	46	47	47	47	328
Average Attendance per Session	51	31	57	47	68	34	46
Total No. of Children who attended during the year	399	438	418	343	448	282	2328
Average attendance per child	6.0	6.75	6.2	6.4	7.3	5.7	6.45
No. of attendances made by Health Visitors ...	142	188	134	99	141	95	799

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.

When dentures are required by expectant and nursing mothers, 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 ...	21	21	21	8
Children under 5	231	160	151	118
TOTALS	252	181	172	126

(b) Classification of Treatment provided

	Extractions	Anaesthetics		Fillings	Scalings or Scaling and Gum Treatment	Silver Nitrate Treatment	Dressings	Radiographs	Dentures provided	
		Local	General						Com- plete	Partial
Expectant and Nursing Mothers	32	12	4	31	9	—	22	—	3	2
Children under 5	146	14	60	266	1	75	27	—	—	—
TOTALS	178	26	64	297	10	75	49	—	3	2

Day Nurseries—There are two Day Nurseries in the town, one being in Talbot Street with accommodation for 60 children, and one in Bedford Park with accommodation for 40 children.

The following fees are 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 3/5d. for each child attending the Day Nurseries.

The Nursery Nurses' Training Scheme was continued in 1959 in conjunction with the Education Committee with 4 students who were appointed for the two year course which commenced in September 1958.

The following table shows the attendances at the Day Nurseries during 1959:—

	Southport	Bedford Park	Totals
(1) Number of places provided	60	40	100
(2) Mondays to Fridays—			
(a) Total attendances	13065	8939	22004
(b) Number of days open	255	255	255
(c) Average daily attendance	51	35	86
(3) Mondays to Saturdays—			
(a) Total attendances	14045	9307	23352
(b) Number of days open	305	305	305
(c) Average daily attendance	46	30	76

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 under the general direction of the family doctor.

Frequent visits are made by one of the district health visitors until the infant reaches normal weight and after this stage the usual routine visits are made as in other cases.

The table on page 14 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 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 Committee 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 56 new cases and the Health Committee paid the maintenance costs in voluntary homes for 6 mothers during the ante and post-natal period.

Prevention of the Break-Up of Families—A Sub-Committee with representatives from the Health, Estates, Welfare, Children's and Finance Committees, is available to consider serious individual family problems, when it seems probable that the best solution can only be found by concerted action by a number of Committees.

Welfare Foods.

DISTRIBUTION. Welfare foods were distributed from the Centre at the Health Department and the six Welfare Centres in the town.

The following figures show the amounts of welfare foods issued during 1959:—

ISSUED FROM	National Dried Milk	Orange Juice	Cod Liver Oil	Vitamin 'A' & 'D' Tablets
	Tins	Bottles	Bottles	Packets
HEALTH DEPARTMENT—				
(a) Counter Issues	4,935	14,426	1,453	1,979
(b) Issues to National Health Service Institutions	—	180	—	—
(c) Issues to Day Nurseries	—	48	72	—
Total Issues from Health Department...	4,935	14,654	1,525	1,979
WELFARE CENTRES—				
(a) Ainsdale	460	2,287	273	222
(b) Liverpool Road	482	3,584	463	344
(c) Crossens	211	2,679	287	285
(d) Poulton Road	352	3,506	395	329
(e) Hampton Road	294	3,182	452	394
(f) Derby Road	201	1,443	182	129
Total Issues from Welfare Centres	2,000	16,681	2,052	1,703
GRAND TOTALS	6,935	31,335	3,577	3,682

Domiciliary Midwifery

The Staff consists of a non-medical Supervisor of Midwives; two full-time midwives and one half-time midwife, appointed on April 1st, 1959, to relieve off-duty, holidays and sick leave. All the staff are fully qualified to administer analgesia, i.e. gas and air and trilene, and are in possession of the individual apparatus. Patients wishing to book for home confinement may do so at the Ante-Natal Clinic, 44 Hoghton Street, or directly with the midwife for the area in which they live. Arrangements can be made for patients who have not engaged the services of their own doctor to have ante-natal care from the obstetrician in attendance at the Clinic which is held on Thursday afternoons. Regular visits are made by the midwives irrespective of having engaged a doctor to attend under the Maternity Medical Service. Arrangements can also be made for all patients to have routine blood tests carried out. The domiciliary midwives also visit certain patients who have been delivered in hospital but have been discharged home before the 14th day. Notification of these discharges is sent to the Health Dept. by the Matrons of the individual Maternity hospitals. The number of these patients has increased in 1959; 30 were discharged and 153 visits made. The Gas and Air Analgesia apparatus has also been provided on two occasions for general practitioners for their private patients.

The case load is not considered to be large and no night rota system is in operation because it is felt that in these cases each midwife prefers to deal with her own patient.

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

					Doctor required to be present	Doctor not required to be present	Total
1. Number of deliveries attended:—							
(a) Doctor not booked	...	...	...	—	...	4	4
(b) Doctor booked	...	...	...	12	...	67	79
TOTALS	...	...	...	12		71	83*
2. Number of patients in (1) above who received:							
(a) gas and air analgesia	...	...	...	—	...	—	—
(b) pethidine	...	...	...	9	...	60	69
(c) trilene	...	...	...	10	...	63	73
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 medical services under the National Health Service Act	...	...	...			15	
(b) Others	...	...	...			—
TOTAL	...	...	...			15	
4. Number of visits made by the midwives during the year:—							
(a) Ante-natal visits	...	...	...	...	...	...	1263
(b) Nursing visits	...	...	...	...	...	...	1,524
TOTAL	...	...	...	...	...	...	2,787
5. Number of attendances made by the Supervisor at ante-natal clinics held at 44 Hoghton Street	...	...	...	...	...	...	45

6. Domiciliary Midwives also attend at Ante-Natal clinics conducted by private G.P's. :—

Attendance at these Clinics—total	...	...	...	...	...	...	68
Attendance at circumcision	...	...	...	...	...	...	4
Attendance at miscarriage	...	...	...	...	...	...	22
Number of visits paid by midwives	...	...	...	...	...	...	68

7. Premature Infants

5 Babies were born at home prematurely. One was transferred with its mother to hospital. The other premature babies were successfully nursed at home and made good progress.

*104 mothers were booked for home confinement. Of these, 1 left the district and 20 were transferred to hospital for reasons stated below:—

Toxaemia	...	...	...	...	...	...	...	2
Breech presentation	...	...	...	...	...	...	...	2
Uterine inertia	...	...	...	...	...	...	...	1
Doctor's recommendation	...	...	...	...	...	...	...	6
Obstructed labour	...	...	...	...	...	...	...	2
Changed to hospital	...	...	...	...	...	...	...	2
Caineous male	...	...	...	...	...	...	...	1
Agile-partum haemorrhage	...	...	...	...	...	...	...	1
Prematurity	...	...	...	...	...	...	...	1
Miscarriage	...	...	...	...	...	...	...	2

Midwives in Private Practice—During the year five private midwives notified their intention to practise on the district. Only one of these, however, was actually engaged in midwifery work and the following statement shows the work done in 1959. This midwife is qualified to administer gas and air analgesia.

					Doctor required to be present	Doctor not required to be present	Total
1. Number of deliveries attended:—							
(a) Doctor not booked	...	...			—	...	—
(b) Doctor booked	...	...	...	...	2	1	3
					2	1	3
2. Number of patients in (1) above who received:							
(a) gas and air analgesia	...	...			—	...	—
(b) pethidine	...	...	...	...	2	1	3
(c) trilene	...	...	...	...	2	1	3
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	...				...	—
(b) Others	...	...	...	...	...	1	
						1	
TOTAL	...	...				1	
4. Number of visits of inspection made by non-medical supervisor to midwives in their own homes	...	...	...	...	...	...	20

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

	Doctor required to be present	Doctor not required to be present	Total
1. Number of deliveries	6	—	6
2. Number of patients in (1) above who received gas and air analgesia	1	—	1
3. Number of patients in (1) above for whom medical aid was summoned	—	—	—
(a) Number of practising midwives employed at 31st December, 1959	4		
(b) Number of midwives in (a) above who are qualified to administer gas and air analgesia...	2		

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 during 1959. These figures are for residents and non-residents.

	Christiana Hartley Maternity Hospital	St. Katharine's Maternity Hospital	TOTAL
(1) Number of Patients	718	450	1168*
(2) Number of Patients in (1) above who received gas and air analgesia	620	435	1055
(3) Number of Patients in (1) above for whom medical aid was summoned	98	25	123
(4) Number of practising midwives on the staff at the end of the year	9	8†	17
(5) Number of Midwives in (4) above who are qualified to administer gas and air analgesia	9	7	16

*Includes 908 Southport residents and 260 non-residents.

†4 full-time and 4 part-time.

Distribution of Maternity Cases—The following table shows the percentage of maternity cases dealt with during 1959 by the various services, and similar figures are also shown for the previous year. These figures are for mothers who were resident within the area of the Southport County Borough.

	1959		1958	
	No. of Cases	%	No. of Cases	%
District				
Municipal Midwives	83	8.3	76	7.79
Private Midwives	3	0.3	5	0.51
TOTALS (a)	86	8.6	81	8.30
Institutions				
Christiana Hartley Mat. Hospital	532	53.2	509	52.20
St. Katharines Maternity Hospital	376	37.6	366	37.54
Nursing Homes	6	0.6	19	1.96
TOTALS (b)	914	91.4	894	91.70
GRAND TOTALS (a) and (b) ...	1000	100.0	975	100.00

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 establishment consists of a Superintendent Health Visitor, who also supervises the school nursing work, 2 Clinic Nurses, 1 Tuberculosis Health Visitor, 1 Health Visitor for Elderly People, and 12 Health Visitors/School Nurses, making a total of 17.

Each of the 12 Health Visitors/School Nurses is responsible for a district and based on the estimated figures for the year 1959, the average case load of the 0-14 years age group is 1,192.

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 and similar duties.

The following table shows the work done by the Health Visitors during 1959:—

	First Visits	Revisits	Total Visits
Expectant Mothers	529	715	1,244
Children under 1 year—			
Routine	917	6,161	7,078
Prematurity	6	3	9
Stillbirth	18	—	18
Illness	—	8	8
Miscellaneous	5	215	220
	946	6,387	7,333
Children 1 to 2 years—			
Routine	7	3,920	3,927
Illness	—	7	7
Miscellaneous	—	61	61
	7	3,988	3,995
Children 2 to 5 years—			
Routine	7	5,314	5,321
Illness	—	11	11
Miscellaneous	—	65	65
	7	5,390	5,397
Other Cases—			
Infectious Disease	—	12	12
Other Illness	4	18	22
Old People	447	1,620	2,067
Miscellaneous	222	90	312
	673	1,740	2,413
SUMMARY			
EXPECTANT MOTHERS	529	715	1,244
CHILDREN UNDER 1 YEAR	946	6,387	7,333
CHILDREN AGED 1 TO 2 YEARS	7	3,988	3,995
CHILDREN AGED 2 TO 5 YEARS	7	5,390	5,397
OTHER CASES	673	1,740	2,413
TOTALS	2,162	18,220	20,382

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

Attendances at Welfare Centres	...	...	...	...	...	...	...	781
Attendances at the Post-Natal Clinic, 44 Hoghton Street	...	...	...	...	...	...	...	48
Attendances at B.C.G. Clinics	...	...	...	...	...	...	...	14
Attendances at the Geriatric Out-Patients' Clinic, Promenade Hospital	...	...	...	...	...	...	...	36
Attendances at the Paediatric Clinic and	...	...	...	...	...	...	...	113
Attendances at the V.D. Clinic, both of which are held at the Southport Infirmary	...	...	...	...	...	...	...	27
								<hr/>
Total number of clinic attendances made by Health Visitors	...	...	...	...	...	...	...	1019
								<hr/>

HOME NURSING

The Southport and Birkdale District Nursing Society continued to provide the Home Nursing Service on behalf of the 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 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 Superintendent 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 Superintendent.

The Nursing Staff at the end of the year consisted of 1 Superintendent, 1 Assistant Superintendent, and 16 District Nurses. 4 Nurses, including the Superintendent and Assistant Superintendent were resident in the District Nurses' Home, while the remaining 14 were non-resident. Five motor cars are available, one being allocated to the Superintendent, the other four being used by the District Nurses. The remaining Nurses use bicycles.

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 home nursing of sick children is undertaken by the nurse for the particular district and no one nurse is required to specialise in children's work.

There is an increasing trend on the part of general medical practitioners to require district nurses to make visits for the purpose of giving injections, chiefly of antibiotics.

The following statement shows the work done during 1959:—

	Classification of Cases						TOTALS
	(1)	(2)	(3)	(4)	(5)	(6)	
No. of Cases on Register at commencement of period	446	106	—	9	—	—	561
Add No. of New Cases during period	1,576	289	11	16	2	—	1,894
TOTALS	2,022	395	11	25	2	—	2,455
Deduct No. of cases discontinued during period	1,561	248	11	20	2	—	1,842
No. of Cases on Register at end of period	461	147	—	5	—	—	613
Total No. of Visits made	55,314	8,293	63	1056	41	—	64,767

Classification of Cases:—

1. Medical. 2. Surgical. 3. Infectious Diseases. 4. Tuberculosis. 5. Maternal Complications. 6. Others.

	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	1,050	7,212
(b) Number of children included above who were under 5 years of age at the time of the first visit during the year	44	304
(c) Number of patients included above who have had more than 24 visits during the year	658	47,882

The following table records the visits made during the last six years:—

Year	Total number of patients visited				Total number of visits			
1954
1955
1956
1957
1958
1959

DIPHTHERIA IMMUNISATION

When a baby has attained the age of 4 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.

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	528	—
(b) 1 to 4 years	213	33
(c) 5 to 14 years	25	505
TOTALS	766	538
DONE BY:—		
(a) General Practitioners	318	226
(b) Health Department's Staff	448	312
TOTALS	766	538

The percentage of children immunised at the end of 1959 is shewn below, together with similar figures for the previous year:—

	1959			1958		
	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	2,825	7,969	10,794	2,767	8,118	10,885
Estimated child population (Mid-Year)	4,500	9,800	14,300	4,400	9,800	14,200
Percentage of children immunised...	62.77	81.32	75.48	62.90	82.84	76.65

Immunity Index

(i.e., Percentage of children fully protected at the end of the year)

Age Group	1959	1958
Under 1 year	20.42	16.14
1—4 years	74.13	76.83
5—14 years	47.68	47.41
0—14 years	52.44	52.18

SMALLPOX VACCINATION

Smallpox vaccination was continued by the General Medical Practitioners as in the previous year on the same lines as for the diphtheria immunisation scheme.

Vaccination was also carried out at Welfare Centres and at the Health Department.

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 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 1959 and the previous year:—

	1959						1958					
	Age Groups						Age Groups					
	Under 1 yr.	1—2	2—4	5—14	15 and over	Total	Under 1 yr.	1—2	2—4	5—14	15 and over	Total
Number of persons (a) Vaccinated	514	56	31	47	50	698	462	82	39	37	90	710
(b) Revaccinated	—	—	1	13	222	236	—	1	11	41	357	410

WHOOPING COUGH IMMUNISATION

Until 1954 whooping cough immunisation had been carried out at the Welfare Centres and the Health Department, but only at the specific request of the parents of the child.

Extended arrangements in co-operation with the General Medical Practitioners were first made during 1954 and 758 children have been immunised during the year under review.

POLIOMYELITIS VACCINATION

In January, 1956, poliomyelitis vaccination was introduced by the Ministry of Health, and since that date 15,154 persons have received two injections, and 9,382 have received a third injection.

During the first year, when the scheme was restricted to children born in specific months between 1947 and 1954, sufficient vaccine for 62 children was allocated to the borough, and all vaccinations were carried out by the medical staff of the department.

In January, 1957, the scheme was revised to enable general practitioners to administer the vaccine, and later in the year all children born in 1955, 1956, and all those born in the years 1947—1954 inclusive, who had not hitherto been registered, became eligible for inclusion in the scheme. During 1957, 436 vaccinations were completed, of which almost half were done by private practitioners.

Registration was extended in January, 1958, to include all children born between 1st January, 1943—30th June, 1957, and also mothers-to-be. This year also saw the introduction of Salk vaccine, and in October, all persons born after 1st January, 1933,

could also be vaccinated, and a total of 8,406 (all ages) for the year was achieved. In order that this protection may be brought to the notice of parents of young children a registration card is sent to them when their baby is six months old. In addition third injections were offered to persons who had received two injections not less than seven months previously, and a total of 1,161 took advantage of this offer. A registration card is now sent to everyone seven months after they receive their second injection to enable them to register for their third injection.

During the early months of 1959, registrations in the older age groups were few until after the death from poliomyelitis of a popular football player, which seemed to bring home to the young people the advisability of vaccination, and during this year a total of 6,250 persons received two injections and 8,221 received third injections.

The table below shews the number of persons vaccinated during the years 1956—1959 inclusive, classified in the various age groups.

	<i>Under 5</i>	<i>5—16</i>	<i>16—25</i>	<i>Over 25</i>	<i>TOTAL</i>
No. who have received two injections ...	2,679	8,066	3,568	841	15,154
No. who have received three injections ...	1,622	6,114	1,207	439	9,382

Schedule of Vaccination and Immunisation recommended for use in Welfare Centres in Southport.

2—3 months	Smallpox Vaccination.
4 months	Diphtheria, Whooping Cough and Tetanus.
5 „	
6 „	
7 „	Poliomyelitis.
8 „	
15 „	3rd Poliomyelitis.
(2—3 years)	(Optional not often carried out—Booster Diphtheria).
5 years	Booster Diphtheria.
11 „	Booster Diphtheria.

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 information 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 21 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 3 sitting case cars, and a summary of the work done, with comparative figures from 1954, is set out below.

	1954	1955	1956	1957	1958	1959
Total No. of Cases ...	28,651	29,303	28,845	28,399	34,220	42,216
Other Work	715	710	584	576	698	909
GRAND TOTAL ...	29,366	30,013	29,429	28,975	34,918	43,125
Mileage*	128,818	120,171	111,548	107,596	121,329	135,429

Until 1956 there was 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.

Some 100 cases are transported each weekday 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, discharge 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.

Sickroom Equipment—When a patient is being nursed at home sickroom equipment may be required for a temporary period. The smaller items such as bedpans, urinals, back rests, etc., are issued from the District Nurses' Home and the larger items such as hospital beds, wheel chairs, etc., are issued from the Health Department.

A small charge is made for the hire of the equipment but in cases of hardship the fee may be reduced or cancelled.

During 1959 sickroom equipment was supplied to 253 patients as compared with 259 in the previous year.

Diphtheria Immunisation—The publicity scheme in regard to diphtheria immunisation was continued throughout 1959 as in previous years. The arrangements are:—

- (a) Leaflets and posters are distributed to Welfare Centres and School Clinics.
- (b) When a baby has attained the age of 4 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

Alongside the Home Help Service is the Sick Room Helpers Scheme. This is a little known service which we are not often called upon to provide, and there are only 3 Sick Room Helpers on the staff. The purpose of these helpers is to give a night's relief to relatives of patients who are being nursed at home and awaiting admission to hospital. The helpers are directly responsible for the care of the patient during their time on duty and must be prepared to obtain medical help should the occasion arise and help in any other way to relieve the anxiety and distress of the patient and the burden on relatives.

The hours during which the Service is provided are 10 p.m. to 8 a.m., and the cost is 3/- per hour, but this may be reduced or even cancelled having regard to the financial circumstances of the person concerned.

During 1959, sickroom help was provided for 24 patients, as compared with 20 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.

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 189 patients was dealt with in this manner and the necessary help was arranged as compared with 186 patients in the previous year.

The 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 follows:—

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; the Deputy Medical Officer of Health and one of the two Lady Assistant Medical Officers helped with the fever hospital work. The other Assistant Medical Officer 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 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.

Convalescent Homes—In July, 1954, the Council agreed that the Section 28 Scheme should be extended to enable convalescent care to be provided. This service is only provided on the recommendation of the patient's General Practitioner and it is not intended for those patients who can be provided with convalescent care under the local Hospital Management Committee's scheme.

During the year, 8 patients were sent to Convalescent Homes, the details being as follows:—

1.	Male	4 weeks	General debility
2.	Female	2 "	Mild Parkinson's disease
3.	Male	3 "	General debility
4.	Female	2 "	Recuperative holiday
5.	Male	3 "	Spasticity
6.	Female	2 "	Hypertension
7.	"	2 "	Anaemia and debility
8.	"	2 "	Debility

HOME HELP SERVICE

The Home Help Service is designed to help those in urgent need of assistance in the home, such as expectant and nursing mothers who are unable to call on relatives to help; elderly persons who can no longer carry out all the work required; and homes where illness has so upset the normal routine that help is required.

The duties consist of keeping the house clean; sometimes doing the necessary cooking and shopping; and if there are young children, attending to their needs. It must be understood however, that the work done is that which is absolutely necessary to keep the home going during a difficult period, and therefore the help is only temporary.

The Home Helps take a great interest in their old people and do many personal things for them such as visiting them if in hospital; taking them out in bath chairs if the weather is good; doing their washing and mending, and even taking a cooked meal in to them during the weekends. All these duties are entirely voluntary and are done out of working hours. This Service has been growing steadily throughout the year and in consequence the number of Home helps on the staff has increased. The hours worked are as follows:—

Monday to	} 9 a.m. to 12 a.m. 2 p.m. to 5 p.m.	Saturday	9 a.m. to 12 a.m.
Friday			

The cost of the Service is 3/6 per hour, but this may be reduced or cancelled, having regard to the financial circumstances of the person concerned.

The following statement shows the work done by the Service during 1959:—

	Classification of Cases						Total
	Maternity	Sickness	Old Age	Infectious Disease	Mental Illness	Mental Deficiency	
No. of Cases on register at beginning of year	6	91	207	2	1	1	308
No. of New Cases during year	24	129	168	4	—	—	325
	30	220	375	6	1	1	633
No. of Cases discontinued during year	29	110	154	5	—	—	298
No. of Cases on register at end of year ...	1	110	221	1	1	1	335
No. of Applications received... ..	26	131	168	4	1	—	330
No. of Cases assisted	24	129	168	4	1	—	326
No. of Cases not assisted	2	2	—	—	—	—	4*

*In 4 Cases the request for help was withdrawn by the applicants.

Number of Helps employed at beginning of year (58 part-time and 2 full-time) ...	60
Number appointed during year (all part-time)	25
	85
Number leaving during year (all part-time)	20
Number of Helps employed at end of year (63 part-time and 2 full-time) ...	65
Number of visits to homes by Organiser	1,503
Number of persons interviewed at Office	1,029

The following statement shows how the work has increased during the last six years:

	1954	1955	1956	1957	1958	1959
Number of households provided with Home Helps	352	414	462	490	525	633
Number of hours worked by Home Helps	35,700	41,700	48,350	64,000	69,000	74,384

It will be seen that the number of households helped has increased by 79% from 352 in 1954 to 633 in 1959, and that the number of hours worked has increased by 108% from 35,700 to 74,384 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 102 hours per household in 1954 to 147 hours per household in 1959.

MENTAL HEALTH SERVICE

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

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

- (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 mentally handicapped persons and the supervision, guardianship and training of those mentally handicapped persons 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.

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, 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 are easily available, should they be required.

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

Mentally Handicapped—The shortage of institutional accommodation is still a grave problem throughout the country. Only the most urgent and difficult cases can therefore be admitted to Mental Deficiency Hospitals and delays occur causing hardship for parents and relatives. The Health Authority's responsibility for the ascertainment, supervision, guardianship and training of mentally handicapped persons is thus increased. Most Authorities now take the view that wherever possible mentally retarded persons should be kept at home rather than be cared for in hospitals. There is no doubt that in sheltered employment many such persons are able to do good work as is evident by the articles produced in the occupational therapy classes.

Regular medical and dental inspections of those attending for training were carried out.

Close co-operation is also maintained between the Health Authority staff and the Disablement and Re-Settlement Officers in order to rehabilitate those who can be trained to be self-supporting in the future.

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

In August, 1954, the Council agreed that the Section 28 Scheme should be extended to enable short-term care to be provided for mentally retarded persons. This service is intended to help parents and relatives when they are in urgent need of relief from caring for a mentally retarded person and temporary accommodation in a hospital or institution is not available.

During the year 1959, a boy aged 8 classified as an imbecile was provided with short-term care for 8 weeks.

The arrangements for short-term care in Hospital, by agreement with the Regional Hospital Board, are of great benefit.

The following statistics show the cases dealt with during 1959:—

(A) MENTAL ILLNESS (Lunacy and Mental Treatment Acts, 1890 to 1930)	Male	Female	Total
(1) Number of Admissions to Hospital:—			
for observation—Sec. 20 Lunacy Act, 1890... ..	57	94	151
for observation—Sec. 21(1) do.	7	20	27
as urgent patients—Sec. 11 do.	—	—	—
as certified patients—Sec. 16 do.	—	6	6
as certified private patients—Sec. 4, 5 and 6 do.	—	1	1
as voluntary patients—Sec. 1 Mental Treatment Act, 1930	32	88	120
as temporary patient—Sec. 5 do.	2	10	12
as informal patients	4	3	7
TOTALS	102	222	324
(2) Number of admissions to mental hospitals from observation wards at County Hospital, Ormskirk	26	37	63
(3) Number of certifications for continued detention of patients already in County Hospital, Ormskirk... ..	3	1	4
(4) Number of cases referred to the department for investigation during the year	170	338	508
(5) Action taken in regard to cases mentioned in (4) above:—			
admitted to hospital for observation	64	114	178
(of these, 77 were subsequently certified)			
direct admission to Hospital—Sec. 16 Lunacy Act, 1890 ...	—	6	6
admitted to hospital as voluntary patients	32	88	120
referred to Psychiatric Out-Patients' Clinic	27	31	58
referred to Welfare Service	7	10	17
admitted to hospital as senile dementia cases	8	12	20
no further action indicated after investigation	39	69	108
TOTALS	177	330	507
(6) Total number of visits made by Duly Authorised Officers:—			
(a) After-Care Visits	374	546	920
(b) All Other Visits	454	939	1393
TOTAL NUMBER OF VISITS	828	1485	2313
(7) Total number of discharges and deaths from mental hospitals notified during 1959:—			
(a) Discharges	69	152	221
(b) Deaths	32	41	73

In addition, the Duly Authorised Officers dealt with 615 enquiries at the Health Department.

(B) MENTALLY HANDICAPPED (Mental Deficiency Acts, 1913-1938)		Under age 16		Aged 16 and over	
		M.	F.	M.	F.
(1) PARTICULARS OF CASES REPORTED DURING 1959:—					
(a) Cases at 31st December, 1958, ascertained to be mentally handicapped "subject to be dealt with"					
Number in which action taken on reports by:—					
(1) Local Education Authorities on children					
(i) While at school or liable to attend school... ..	2	—	—	—	—
(ii) On leaving special schools... ..	—	—	—	—	—
(iii) On leaving ordinary schools	—	—	—	—	—
(2) Police or by Courts	—	—	—	—	—
(3) Other sources	1	—	3	2	
(b) Cases reported who were found to be mentally handicapped not, at 31st December, 1959, regarded as "subject to be dealt with" on any ground	2	—	1	1	
(c) Cases reported who were not regarded as mentally handicapped and excluded from (a) or (b)... ..	—	—	—	—	—
(d) Cases reported in which action was incomplete at 31st December, 1959, and are thus excluded from (a) or (b) ...	1	4	—	—	
TOTAL ...	6	4	4	3	
(2) DISPOSAL OF CASES REPORTED DURING 1959:—					
(a) Of the cases ascertained to be mentally handicapped "subject to be dealt with" (i.e., at (1)(a)), number:—					
(i) Placed under Statutory Supervision	2	—	2	—	
(ii) Placed under Guardianship	—	—	—	—	
(iii) Taken to "Places of Safety"	—	—	—	—	
(iv) Admitted to Hospitals... ..	1	—	1	2	
(b) Of the cases not ascertained to be mentally handicapped "subject to be dealt with" (i.e., at (1)(b)), number:—					
(i) Placed under Voluntary Supervision	—	—	—	—	
(ii) Action unnecessary	2	—	1	1	
TOTAL ...	5	—	4	3	
(3) NUMBER OF MENTALLY HANDICAPPED PERSONS FOR WHOM CARE WAS ARRANGED BY THE LOCAL HEALTH AUTHORITY UNDER CIRCULAR 5/52 DURING 1959, AND ADMITTED TO:—					
(a) National Health Service Hospitals	2	—	1	—	
(b) Elsewhere	1	—	—	—	
TOTAL ...	3	—	1	—	
(4) TOTAL CASES ON AUTHORITY'S REGISTER AT 31/12/59:—					
(i) Under Statutory Supervision	10	7	14	15	
(ii) Under Guardianship	—	—	—	1	
(iii) In "Places of Safety"	—	—	—	—	
(iv) In Hospital (including patients on licence)	6	1	68	51	
(v) Under Voluntary Supervision	—	—	6	7	
TOTAL ...	16	8	88	74	
(5) NUMBER OF MENTALLY HANDICAPPED PERSONS UNDER GUARDIANSHIP ON 31ST DECEMBER, 1959, WHO WERE DEALT WITH UNDER THE PROVISIONS OF SECTION 8 OR 9, MENTAL DEFICIENCY ACT, 1913 (included in (4)(ii)):					
	—	—	—	—	
(6) CLASSIFICATION OF MENTALLY HANDICAPPED PERSONS IN THE COMMUNITY ON 31/12/59 (according to need at that date):—					
(a) Cases included in (4)(i)—(iii) in need of hospital care and reported accordingly to the hospital authority					
(1) In urgent need of hospital care:—					
(i) "cot and chair" cases	2	—	—	—	
(ii) ambulant low grade cases	—	1	—	—	
(iii) medium grade cases	3	—	1	—	
(iv) high grade cases	—	—	—	—	
TOTAL urgent cases ...	5	1	1	—	

	Under age 16		Aged 16 and over	
	M.	F.	M.	F.
(2) Not in urgent need of hospital care:—				
(i) "cot and chair" cases	—	—	—	—
(ii) ambulant low grade cases	—	—	—	—
(iii) medium grade cases	1	—	—	—
(iv) high grade cases	—	—	—	1
TOTAL non-urgent cases ...	1	—	—	1
TOTAL urgent and non-urgent cases ...	6	1	1	1
(b) Of the cases included in items (4)(i), (ii) and (v), number considered suitable for:—				
(i) occupation centre	10	6	9	9
(ii) industrial centre	—	—	—	—
(iii) home training	—	—	—	—
TOTAL	10	6	9	9
(c) Of the cases included in (6)(b), number receiving training on 31/12/59:—				
(i) In occupation centre	10	6	9	9
(ii) In industrial centre	—	—	—	—
(iii) At home	—	—	—	—
TOTAL	10	6	9	9

(7) NUMBER OF HOME VISITS MADE BY MENTAL HEALTH VISITORS DURING 1959 TO CASES UNDER STATUTORY SUPERVISION, GUARDIANSHIP OR ON LICENCE FROM INSTITUTIONS 470

Training of Mentally Handicapped Persons

Woodvale Training Centre

Number of cases on Register at beginning of year	48
Number of cases added to Register during year	14
	62
Number of cases taken off Register during year	6
Number of cases on Register at end of year	56
Number of sessions held during year	208
Number of attendances at Centre during year	8,239
Average attendance per session	40

Kinds of training provided:—

Physical and rhythmic training, handwork, sense training, woodwork, singing, games, dramatisation, dancing and stories.

Two children were attending at the end of the year from the County area, for whom a charge is made by arrangement with the Lancashire County Council.

Part IV

SANITARY CIRCUMSTANCES

OF THE AREA

Water Supply	1
Public Baths	2
Public Mortuary	3
Sanitary Inspection	4
Factories	5
Rodent Control	6
Summary of Visits	7
Inspection of Rag Flock and other Filling Materials	8
Smoke Abatement	9
Housing	10

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.

Substantial progress is being made in connection with the Water Board's scheme for additional supplies from deep boreholes at Mill Brow (Scarisbrick) and Primrose Hill (Halsall). The continually increasing demand for water for domestic and other essential purposes can only be met by maintaining the ban on the use of hosepipes for gardens and car washing. The highest day's consumption ever recorded, 6,805,000 gallons, was on May 25th, 1959.

Examination of samples of water from the new borings indicate that the bacterial purity will be fully equal to the high standard of the existing sources.

Samples of the water are taken regularly.

Chemical Analysis, 29th December, 1959

										Parts per Million
Total solid matter in solution	...	...	...	...	...	...	...	...	...	392
Oxygen absorbed	}	in 15 minutes	...	...	...	...	...	...	...	0.04
from Permanganate		in 3 hours	...	...	...	...	...	...	...	0.08
Ammonia	...	...	...	...	...	...	...	...	...	Nil
Albuminoid Ammonia	...	...	...	...	...	...	...	...	...	Nil
Nitrogen as Nitrates	...	...	...	...	...	...	...	...	...	0.16
Nitrogen as Nitrites	...	...	...	...	...	...	...	...	...	Nil
Combined Chlorine	...	...	...	...	...	...	...	...	...	28
Free Chlorine	...	...	...	...	...	...	...	...	...	Nil
Lead	...	...	...	...	...	...	...	...	...	Nil
Copper	...	...	...	...	...	...	...	...	...	Nil
Total Iron	...	...	...	...	...	...	...	...	...	0.11
Carbonate Hardness (as Calcium Carbonate)	...	...	...	...	...	...	...	...	...	215
Total Hardness (as Calcium Carbonate)	...	...	...	...	...	...	...	...	...	285

(p.H. value: 7.3)

Bacteriological Examination, 26th September, 1959

Number of Bacteria per ml. on agar at 37° C.	...	...	...	=	Nil
B. Coli per 100 ml. in water examined	...	...	...	=	Nil
Total coliform organisms per 100 ml. in water examined	...	...	...	=	Nil
Class 1: Highly satisfactory.					

Thanks are due to Mr. N. B. Bennett, A.M.INST.C.E., M.INST.W.E., the Water Board Engineer and 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,
16th June, 1959.**

	Halsall Lane P.S.	Springfield P.S. (Filtered)	Bickerstaffe P.S. (Filtered)	Blundell House P.S. (Filtered)
Chemical Results in parts per million				
Appearance	Clear and bright	Clear and bright	Bright with a few particles	Clear and bright
Turbidity	Nil	Nil	Less than 3	Nil
Colour	Nil	Nil	Nil	Nil
Odour	Nil	Very slightly chlorinous	Nil	Nil
pH.	6.9	7.3	7.1	7.0
Free Carbon Dioxide	38	26	40	26
Electric Conductivity	475	645	755	380
Total Solids, dried at 180°C.	335	445	555	265
Chlorine as Chlorides	—	—	—	—
Alkalinity as Calcium Carbonate	190	260	305	140
Hardness: Total	245	335	425	185
Carbonate	190	260	305	140
Non-Carbonate	55	75	120	45
Nitrate Nitrogen	2.5	0.2	0.0	0.0
Nitrite Nitrogen	Absent	Absent	Absent	Absent
Ammoniacal Nitrogen	0.000	0.000	0.012	0.000
Oxygen absorbed	0.00	0.00	0.10	0.30
Albuminoid Nitrogen	0.000	0.000	0.000	0.000
Residual Chlorine	Absent	0.07	0.07	Absent
Metals: Iron	Absent	Absent	Absent	0.14
Zinc	Absent	Absent	Absent	Absent
Copper	Absent	Absent	Absent	Absent
Lead	Absent	Absent	Absent	Absent
Manganese	Absent	Absent	Absent	0.03
Flouride (F)	Less than 0.1	Less than 0.1	Less than 0.1	0.1

	Bacteriological Results			
Number of Colonies developing:—				
On Agar per c.c. in 3 days at 20°C.	1	0	1	0
1 day at 37°C.	0	0	1	0
2 days at 37°C.	0	0	1	0
Presumptive Coli-aerogenes Reaction				
Present in	—	—	—	—
Absent from	100 ml.	100 ml.	100 ml.	100 ml.
Probable Number for 10° ml.	0	0	0	0
Bact-coli (Type 1)	—	—	—	—
Present in	—	—	—	—
Absent from	100 ml.	100 ml.	100 ml.	100 ml.
Probable Number per 100 ml.	0	0	0	0
Clostridium Welchii Reaction				
Present in	—	—	—	—
Absent from	100 ml.	100 ml.	100 ml.	100 ml.
Probable Number per 100 ml.	—	—	—	—

Reports

Halsall Lane:

This sample is clear and bright in appearance.

The water is just on the acid side of neutrality and, from the aspect of corrosive activity, a higher pH would be desirable. The water is hard in character but not unduly so, contains no excess of mineral constituents and it is free from iron and other metals.

Organic and bacterial purity is of the highest standard.

These results are indicative of a pure and wholesome water suitable for public supply purposes.

Springfield:

This sample is clear and bright in appearance.

The water is neutral in reaction, very hard in character though not excessively so, contains no excess of mineral constituents and it is free from iron and other metals.

Organic and bacterial purity are of the highest standard.

These results are indicative of a pure and wholesome water suitable for public supply purposes.

Bickerstaffe:

This sample is practically clear and bright in appearance because it carries only a few particles of matter in suspension.

The water is neutral in reaction, very hard in character but not excessively so, and it contains no excess of mineral constituents. It is free from iron and other metals.

Organic and bacterial purity is of the highest standard.

These results are indicative of a pure and wholesome water suitable for public supply purposes.

Blundell House:

This sample is clear and bright in appearance.

The water is neutral in reaction, moderately hard in character, contains no excess of mineral constituents and it is free from metals apart from minute traces of iron and manganese.

Organic quality is of the highest standard.

From the aspects of the chemical analysis these results are indicative of a pure and wholesome water suitable for public supply purposes.

Houses supplied from other sources than the Town's supply: Four dwellings, three less than in the previous year, continue to be supplied from shallow wells adjacent to the premises.

Public Baths—The Victoria Baths near the Pier have ample bathing accommodation, which in addition to three 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 attendances during the twelve months ending 31st December, 1959, was 268,284.

The large Open-Air Bathing Lake in Princes Park is available for mixed bathing, and has a water surface of over 55,000 square feet. The Bathing Lake was visited by 416,160 persons during the year, of whom approximately 75% were bathers.

The sea water supplied to these baths is treated by filtration and chlorination.

The smaller Baths at Canning Road and Compton Road continued to be freely used.

The Canning Road Baths had an attendance of 5,739 during the year ending 31st December, 1959, and the Compton Road Baths an attendance of 5,650.

PUBLIC MORTUARY

The improvement of the Mortuary facilities in the town, completed in July, 1956, comprised adaptations to two buildings, one of which is used as a mortuary and the other for the purpose of carrying out post-mortem examinations. The modern equipment installed at the time has proved satisfactory but the site is not ideal.

The facilities were used on one hundred and seventy-eight occasions and one hundred and thirty-five post-mortem examinations were carried out during the year.

SANITARY INSPECTION OF THE AREA

Drainage—Complaints received regarding choked and defective drainage systems of houses numbered 1,993 and the necessary cleansing, repairs and alterations were supervised. A feature of the year's work in the field of environmental sanitation has been the acceleration of the scheme for the conversion of the Bristol ejector type of water closets into modern washdown pedestal water closets. Service of Notices under Section 47 of the Public Health Act, 1936, were authorised in 118 cases.

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

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.

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 Public Health Department and have been dealt with. The number of inspections made during the year totalled 41.

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 twenty-five 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 Public Health Inspectors).

Premises	Number on Register	Number of (3) Inspections (4) Written Notices (5) Owners Prosecuted		
(1)	(2)	(3)	(4)	(5)
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities ...	271	20	—	—
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority...	699	419	15	—
(iii) Other Premises in which Section 7 is enforced by the Local Authority* (excluding out-workers' premises)	5	2	2	—
TOTAL	975	441	17	—

*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.**

Particulars (1)	Number of cases in which defects were				Number of cases in which prosecutions were instituted (6)
	Found (2)	Remedied (3)	Referred To H.M. Inspector (4)	By H.M. Inspector (5)	
Want of cleanliness (S.1)	3	3	—	2	—
Overcrowding (S.2)	—	—	—	—	—
Unreasonable temperature (S.3)...	—	—	—	—	—
Inadequate ventilation (S.4) ...	—	—	—	—	—
Ineffective drainage of floors (S.6)	—	—	—	—	—
Sanitary Conveniences (S.7)					
(a) insufficient	1	1	—	1	—
(b) Unsuitable or defective ...	2	2	—	—	—
(c) Not separate for sexes ...	1	1	—	1	—
Other offences against the Act (not including offences relating to Outwork)	10	10	—	—	—
TOTAL	17	17	—	4	—

O U T W O R K						
Nature of Work	Section 110			Section 111		
	(2) Number of outworkers in August list required by Section 110(1)(c). (3) Number of cases of default in sending lists to the Council. (4) Number of prosecutions for failure to supply lists.			(5) Number of instances of work in unwholesome premises. (6) Notices served. (7) Prosecutions.		
(1)	(2)	(3)	(4)	(5)	(6)	(7)
Wearing Apparel:— Making, etc. ...	30	—	—	—	—	—
TOTAL	30	—	—	—	—	—

RODENT CONTROL

Apart from the vast amount of destruction caused by mice and rats, rodents may be carriers of disease germs, which can be transmitted to man by the contamination of food. It is consequently of the utmost importance that all practical steps be taken to eliminate these rodents.

Under the Prevention of Damage by Pests Act of 1949, the Local Authority is charged with the responsibility of carrying out such inspections and surveys as may be necessary to ascertain that land (which includes land covered with water and any building or part of a building) within their district is kept free of rodents. It is the duty of occupiers to notify the Local Authority in writing if rats or mice are found in substantial numbers on their premises or land. The occupier is responsible for the work of disinfestation of his property; the services of an operator are available on application.

Prevention of Damage by Pests Act, 1949

	TYPE OF PROPERTY				
	NON-AGRICULTURAL				(5) AGRI- CULTURAL
	(1) Local Authority	(2) Dwelling- Houses (including Council Houses)	(3) All Other (including Business Premises)	(4) Total of Columns (1), (2) and (3)	
I. Number of properties in Local Authority's District	236	26,480	4,640	31,356	44
II. Number of Properties inspected as a result of:					
(a) Notification	44 (44)	221 (185)	124 (105)	389 (334)	2 (2)
(b) Survey under the Act...	192 (192)	413 (283)	627 (424)	1370 (912)	41 (41)
(c) Otherwise (e.g., when visited primarily for some other purpose) ...	— (—)	252 (222)	274 (234)	526 (456)	1 (1)
III. Total inspections carried out — including re-inspections	533 (369)	886 (690)	1025 (763)	2442 (1822)	132 (101)
IV. Number of properties inspected (in Sec. II) which were found to be infested by:					
(a) Rats (Major)	—	—	—	—	—
(Minor)	37 (32)	83 (63)	31 (28)	151 (123)	3 (3)
(b) Mice (Major)	—	—	—	—	—
(Minor)	17 (10)	71 (60)	69 (54)	157 (124)	—
V. Number of infested properties (in Sec. IV) treated by the Local Authority ...	54 (42)	85 (70)	83 (68)	222 (180)	3 (3)
VI. Total treatments carried out — including retreatments	59 (44)	85 (70)	84 (69)	228 (183)	3 (3)
VII. Number of notices served under Section 4 of the Act:					
(a) Treatment	—	—	—	—	—
(b) Structural Work (i.e., Proofing) ...	—	—	—	—	—
VIII. Number of cases in which default action was taken following the issue of a notice under Sec. 4 of the Act... ..	—	—	—	—	—
IX. Legal proceedings ...	—	—	—	—	—
X. Number of "Block" control schemes carried out ...	8 (5)	—	—	8 (5)	—

NOTE: The figures in parentheses have been inserted at the request of the Ministry of Agriculture, Fisheries and Food, and cover the nine months ended 31st December, 1959.

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

Nuisances

COMPLAINTS—NUMBER INVESTIGATED:—

(1) Housing Defects	509
(2) Choked and Defective Drains	1993
(3) Emission of Smoke	38
(4) Accumulation of Offensive Matter	80
(5) Miscellaneous	518
TOTAL	3,138

VISITS:—

Dwelling Houses	955
Common Lodging Houses	25
Houses let in Lodgings	2
Common Yards, Back Roads and Passages	238
Horse-Manure Middensteads	47
Pigstyes	56
Offensive Trades	85
Rag Flock and Upholstery Premises	34
Places of Public Entertainment	20
Public Sanitary Conveniences	333
Tents, Vans and Sheds	36
Abattoir	922
Food Vehicles	13
Ashes Receptacles (Ashpits and Dustbins)	43
Conversions (Earth Closets and Bristol Ejects to W.C.'s)	442
Smoke Observations	79

Testing Drains:—

By Inspection	711
By Smoke	12
By Breaking Down	103
By Coloured Water	40
Insufficient Water Supply	5

Factories Acts, 1937/48:—

Factories with mechanical power	419
Factories without mechanical power	20
Outworkers' Premises	2
Workplaces	2
Shops Act, 1950	41
Fried Fish Shops	22
Fishmongers and Greengrocers	110
Butchers' Shops	183
Grocers' Shops	647
Bakehouses	185
Public Houses, Beer Houses, etc.	82
Food Preparing and Storing Places	2297
Dairies	499
Ice Cream Premises	495
Pet Animals Act, 1951	19
Infectious Disease Visits	469
Prevention of Damage by Pests Act, 1949	2695
Samples of Rag Flock, etc.	4
Clean Air Act—Samples of Gauge Deposits	24

Samples procured for Bacteriological Examination:—										
Milk	...	...	...	...	...	...	...	...	...	229
Ice Cream	...	...	...	...	...	...	...	...	...	57
Other Foodstuffs	...	...	...	...	...	...	...	...	...	60
Water	...	...	...	...	...	...	...	...	...	3
Samples of Milk procured for Biological Examination	...	...	...	...	...	...	...	...	...	19
Samples obtained under the Food and Drugs Acts, 1955:—										
Milk	...	...	...	...	...	...	...	...	...	166
Other Foodstuffs	...	...	...	...	...	...	...	...	...	143
Samples of Water (chemical analysis)	...	...	...	...	...	...	...	...	...	4
Samples of Swimming Bath Water (chemical analysis)	...	...	...	...	...	...	...	...	...	19
Samples of Water (bacteriological examination)	...	...	...	...	...	...	...	...	...	3
Samples of Sea Water (bacteriological examination)	...	...	...	...	...	...	...	...	...	45
Samples of Sewage Effluent (bacteriological examination)	...	...	...	...	...	...	...	...	...	4
Inspections of Dwelling Houses and other premises for vermin infestation	...	...	...	...	...	...	...	...	...	55
Visits to work in progress	...	...	...	...	...	...	...	...	...	1,306
Visits re Housing Survey	...	...	...	...	...	...	...	...	...	350
Miscellaneous Visits (Interviews, etc.)	...	...	...	...	...	...	...	...	...	2,606
TOTAL										17,485

Nuisances—The number of schedules of cases recorded for abatement was 2,743

In all cases the usual verbal request for the abatement of nuisances found was made, but in 1,091 instances it was necessary to serve written notices as follows:—

Preliminary	...	...	...	...	...	...	...	...	...	957
Statutory	...	...	...	...	...	...	...	...	...	134
TOTAL										1,091

The number of preliminary and statutory notices complied with during the year was 875.

Legal proceedings were instituted under the Public Health Act, 1936, against the owners of two properties. Abatement Orders were made in both instances.

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 five licences were granted for the storage of rag flock.

Four samples of rag flock and other filling materials were submitted for analysis during the year, and all were reported to be satisfactory.

SMOKE ABATEMENT

All the provisions of the Clean Air Act, 1956, are now in force, applying to chimneys a higher standard of "smokelessness" than hitherto.

It will be remembered that the Act virtually gave the occupiers of factories a period of grace of 7 years in which to put their houses in order, by providing them with a very strong defence in the event of legal proceedings for smoke emission which is caused by the nature of their buildings or equipment.

This period commenced in July, 1956, and the occupiers of premises whose chimneys occasionally give rise to complaint, have been made aware of the requirements of the Act, and have been urged to consider now what alterations and improvements to their buildings and equipment are necessary in order to enable them to comply fully with the new standards.

In fact, the number of chimneys in the Borough which give rise to complaint is very small and, during the period under review, the furnace served by one such chimney was converted at considerable expense from hand-firing with bituminous coal to fully automatic oil-burning, with a very great improvement in smoke emission.

It might be thought by many people that Southport is almost a smokeless town already and that little action need be taken under the Clean Air Act, but the two Standard Deposit Gauges which are maintained by the Department in the Borough tell a different story. Situated in the town centre and at Woodvale respectively, these gauges resemble ordinary rainfall gauges, but their contents are analysed monthly by the Public Analyst.

If it is accepted that our town is almost free from industrial smoke, it must follow that the chimneys of dwelling houses are to blame for most of this pollution. The open coal fire, beloved by so many, is a notorious producer of a particularly offensive type of smoke, and this position is greatly aggravated by the popular practice of "banking" overnight-burning fires with coal slack.

The housewife who complains bitterly of the condition of her washing on washing day must, before blaming her neighbours or the nearby factory, examine the contents of her own fuel store. If this contains bituminous coal, (as the vast majority do,) the smuts disfiguring the sheets are just as likely to have come from her own chimney as from any other source.

Seventy-nine observations of factory chimneys were made during the year. No legal proceedings were instituted.

During the year, publicity has been given to the advantages of the use of smokeless fuels in the home, and it is hoped that an increasing number of householders will be persuaded to use these fuels. Twenty-four samples of soot gauged deposits were submitted for examination.

HOUSING

General—The number of inhabited houses totalled 26,480.

The following table shows the number of houses built during the period 1950 to 1959, plus additional accommodation made available as a result of adaptations and additions to existing properties:—

Year	1950	1951	1952	1953	1954	1955	1956	1957	1958	1959
Number of Houses built	102	67	113	235	155	186	253	305	122	214

Fitness for habitation—In reports for previous years it has been stated that the fitness of houses in the Borough was generally fairly satisfactory.

This view appears to be confirmed by the result of the operations of the Rent Act which came into force on 6th July, 1957, as the following details show:—

Number of applications for certificates of disrepair: Year—1957: 119. 1958: 145. 1959: 33. Total: 297.

The 33 applications for certificates of disrepair under the Rent Act received during the year were dealt with as follows:—

Work done within the period allowed	...	...	...	...	0
Undertakings given by owners	...	...	...	...	18
Certificates not granted	...	...	...	...	3
Certificates granted	...	...	...	...	12
TOTAL	...	...	...	...	33

Overcrowding—The number of complaints regarding alleged overcrowding received during the year was 28, of which 17 were subsequently confirmed. 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.

Demolition and Closing Orders—The task of dealing with the houses in the Borough which appear to be unfit for human habitation, and which were the subject of a return to the Ministry of Housing and Local Government under Section 1 of the Housing Repairs and Rents Act, 1954, continued.

This work has been dealt with through the Housing Maintenance Committee which was specially formed for this purpose, and 44 further houses were represented to the Committee during the year under review.

During the year the formal procedure prescribed by the Housing Acts had been commenced in respect of 26 houses.

In 5 cases, owners of such houses came forward with proposals to make the house in all respects reasonably fit for human habitation and, after carefully considering the works proposed, the Committee accepted undertakings from the owners that they would satisfactorily carry out these works within a specified period.

In this way, 5 houses which would otherwise have been demolished or closed have been given a further useful life of at least 15 years, and the Department has been very pleased with the condition of the houses when the works had been completed.

The Local Authority are in favour of as many as possible of these houses being saved in this way, and it is hoped that the Improvement Grants and the new Standard Grants will encourage owners of old houses to bring them up to a reasonable standard and save them from Demolition or Closing Orders.

These hundred and nine samples of food were taken and submitted to the public for chemical analysis.

The results showed that the food was pure and contained no harmful substances. The results also showed that the food was pure and contained no harmful substances.

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Part V

INSPECTION AND SUPERVISION

OF FOOD

- Food Standards**
- Distribution of Milk**
- Food Inspection**
- Public Abattoir**
- Food Hygiene**
- Shellfish Industry**
- Ice Cream**
- Diseases of Animals**

FOOD STANDARDS

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

The results showed that 280 were genuine and 29 were adulterated or otherwise giving rise to irregularity; the latter being informal samples, except one.

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
3384 Informal ...	MILK Deficient 5 per cent. fat.	Same vendor. Further samples genuine. Vendor notified.
3410 Informal ...	MILK— Deficient 3.3 per cent. fat.	
3412 Informal ...	MILK— Contained traces of blood. Deficient 5 per cent. fat.	
3414 Informal ...	LIQUID PARAFFIN B.P.— Samples did not comply with B.P. limit test for carbonisable substances.	Same packers. Stock withdrawn. from sale and packers. communicated with.
3428 Informal ...	LIQUID PARAFFIN B.P.— Sample did not comply with B.P. limit test for carbonisable substances and sulphur com- pounds.	
3443 Informal ...	LIQUID PARAFFIN B.P.— Sample did not comply with B.P. limit test for carbonisable substances.	
3455 Informal ...	FLOUR— Creta Praeparata 220 milli- grammes per 100 grammes. Iron 1.6 milligrammes per 100 grammes.	No action advised.
3465 Informal ...	MILK— Deficient 20 per cent. fat.	Further samples to be taken.
3473 Formal ...	MILK— Deficient 10 per cent. fat.	Farmer interviewed; further samples genuine.
3479 Informal ...	MILK— Deficient 3.3 per cent. fat.	Farmer notified. Other samples taken at same time genuine.
3485 Informal ...	MILK— Deficient 3.3 per cent. fat.	Same vendor. Other samples taken at the same time genuine. Farmer notified.
3487 Informal ...	MILK— Deficient 3.3 per cent. fat.	

Reference Number and if formal or informal sample	Nature of sample and report of analysis	Particulars
3501 Informal ...	MILK— Deficient 8.3 per cent. fat.	Same Vendor. Farmer notified. Other samples taken at the same time genuine.
3503 Informal ...	MILK— Deficient 5 per cent. fat.	
3519 Informal ...	MILK— Deficient 15 per cent. fat.	
3531 Informal ...	SLICES OF BREAD— Contained 0.31 gramme of dough contaminated with used oil and some cotton fibres.	Vendor notified. Other samples taken at the same time genuine.
3532 Formal ...	MINCED TURKEY (part jar)— Contained a fragment of black pin-feather 5 millimetres long.	Bakers interviewed.
3546 Informal ...	SHREDDED BEEF SUET— Beef fat content only 79.5 per cent. Food standards (Suet) Order 1952 requires not less than 83 per cent.	Packers notified.
3561 Informal ...	ICE CREAM— Contained lead 1.3 parts per million. Recommended maxi- mum for lead in ice cream is 1 part per million.	Packers notified.
3573 Informal ...	MILK— Deficient 10 per cent. fat.	Makers interviewed and equip- ment inspected.
3586 Informal ...	COTTAGE CHEESE— Consisted of skimmed curd cheese.	Producer notified.
3594 Informal ...	SOFT DRINK, LEMON— Contained approximately 2 milli- grammes of black sediment of the nature of atmospheric dust with traces of fungus hyphae.	No action taken.
3595 Informal ...	LIQUID PARAFFIN— Sample consisted of two bottles. One was soiled about the neck and its cap had no liner. Its contents failed to comply with the B.P. limit test for carboni- sable substances. Other bottle and contents satisfactory.	Manufacturers interviewed and plant inspected.
3596 Informal ...	MILK— Deficient 8.3 per cent. fat	No further stock available.
3598 Informal ...	MILK— Freezing point indicated 0.5 per cent. extraneous water.	
3603 Informal ...	MILK— Deficient 1.6 per cent. fat.	Same vendor. Formal samples genuine.
3610 Informal ...	MILK— Contained 5.5 parts by volume of moist dirt of the nature of dung in 100,000 parts of milk and one small dead fly or midge.	
		Vendor notified. Other samples taken at the same time genuine.
		Producer interviewed and plant inspected.

Reference Number and if formal or informal sample	Nature of sample and report of analysis	Particulars
3645 Informal ...	MILK— Deficient 13.3 per cent. fat.	Farmer notified. Other samples taken at the same time genuine.
3683 Informal ...	MILK— Inside of bottle very slightly stained blue over area $1\frac{1}{2}$ in. x $\frac{1}{2}$ in. Blue pigment of nature of ultra- marine. Could be derived from poster paint.	Vendor notified.

One private sample of Lactation Food was found to have a distinctly nasty flavour and appeared to be old stock. The stock was withdrawn.

Food and Drugs Acts—Records, 1940—1959

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)
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	—
1954	27	474	501	14	427	441	13	47	60	11.97	4
1955	12	323	335	2	286	288	10	37	47	14.02	—
1956	1	341	342	1	318	319	0	23	23	6.72	—
1957	2	349	351	0	320	320	2	29	31	8.57	1
1958	1	300	301	1	273	274	0	27	27	8.97	2
1959	11	298	309	10	270	280	1	28	29	9.38	—

*Certified by the Public Analyst as being adulterated or otherwise giving rise to irregularity. In addition to the above, one sample of Lactation Food, submitted privately, proved to be from old stock which subsequently was withdrawn from supply.

Table showing particulars of the number of samples taken for Bacteriological Examination—Year 1959

Nature of Samples and Specimens	Number of Samples and 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	0	19	38	0	57
Milk	52	72	39	66	229
Other Foods	15	25	3	42	85
*Water	1	1	1	0	3
TOTALS	68	117	81	108	374
MISCELLANEOUS—					
†Water	18	16	11	4	49
GRAND TOTALS ...	86	133	92	112	423

*Intended for human consumption. All these samples were taken from the town's main supply.

† Includes four samples of mud (sewage effluent) and forty-five of sea and sluice waters.

DISTRIBUTION OF MILK

There were 161 distributors of milk on the register of the Local Authority of whom 159 have their premises inside the Borough. The premises were inspected regularly. Samples were frequently submitted for bacteriological examination, with the following results:—

CLASS OF MILK	Number of Samples Tested	Appropriate Tests	Number of Samples	
			Passed	Failed
Pasteurised **	130*	Phosphatase Methylene Blue	125 120	5 10
Sterilised	7	Turbidity	7	—
Tuberculin Tested ... (Pasteurised)	78**†	Phosphatase Methylene Blue	75 75	1 3
Turberculin Tested ... (Sterilised)	—	Turbidity	—	—

*Average shade Temperature more than 65°F in eight cases.

** " " " " " " " two cases.

†Result of phosphatase test not given in two cases.

** Excluding 15 samples submitted for biological examination.

In all instances where Pasteurised Milk failed the Phosphatase Test, the milk was examined by means of guineapig inoculation for Tubercle Bacilli. In addition, 19 samples of milk were submitted for biological examination, in no instance was Tubercle Bacilli found.

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

The number of samples taken for chemical analysis was 166, of which 18 were reported by the Public Analyst to be adulterated or otherwise giving rise to irregularity. Details of the 18 are given on pages 68 to 70. There is no doubt that many samples of milk giving rise to irregularity are due to the poor quality of milk supplied by the animals. In all instances where this is encountered, the Milk Production Officer of the Ministry of Agriculture, Fisheries and Food, is informed with a view to the quality of the milk being improved.

Sale of Milk under Designation

Classification of Licences issued	Number of Licences issued during the year	
	1958	1959
(1) Milk (Special Designation) (Raw Milk) Regulations.		
<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	32	32
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	2	2
(2) Milk (Special Designation) (Pasteurised and Sterilised Milk) Regulations.		
<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	5	5
Dealers' Licences authorising the use of the special designation <i>"Pasteurised"</i> in relation to milk sold from the holder's premises ...	103	102
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	2
<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	58	56
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	1	2
<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 ...	113	118
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	2
TOTALS	320	321

FOOD INSPECTION

Details of the food inspected and rejected as unfit for human consumption during 1959 are set out below:—

Carcases Inspected and Condemned

PARTICULARS	PUBLIC ABATTOIR					
	Cattle (exclg. Cows)	Cows	Calves	Sheep and Lambs	Pigs	Horses
Number of animals killed	3,109	199	58	17,549	5,495	—
Number of carcases inspected... ..	3,109	199	58	17,549	5,495	—
RESULTS						
All diseases except tuberculosis and cysticerci:—						
Number of whole carcases condemned	—	2	1	7	14	—
Number of carcases of which some part or organ was condemned	1,853	83	—	516	314	—
Percentage of the number inspected affected with disease other than tuberculosis and cysticerci	59·6	42·71	1·72	2·98	5·96	—
Tuberculosis only:—						
Number of whole carcases condemned	—	—	—	—	1	—
Number of carcases of which some part or organ was condemned	171	19	—	—	84	—
Percentage of the number inspected affected with tuberculosis	5·5	9·54	—	—	1·54	—
Cysticercosis:—						
Number of carcases of which some part or organ was condemned	—	—	—	—	—	—
Number of carcases submitted to treatment by refrigeration	—	—	—	—	—	—
Generalised and totally condemned	—	—	—	—	—	—

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

	Cwts.	Qrs.	Lbs.
Beef	216	3	10
Veal	—	—	24
Mutton	8	1	5
Pork	62	2	19
Fish	5	2	0
Poultry, Game and Rabbits...	—	2	13½

Tinned Goods

Milk	3	1	20
Meat	28	3	11½
Fish	22	0	2
Vegetables	20	1	17½
Fruit	48	1	17½
Miscellaneous	3	1	13¼
	<hr/> 420	<hr/> 2	<hr/> 13¼

TOTAL ... 21 tons 69¼ lbs.

Whenever possible, meat was sent for salvage and conversion into useful 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

The Abattoir is catering for the County Borough of Southport and for parts of the adjoining rural area. The total throughput during the year was 3,109 cattle (excluding cows), 199 cows, 58 calves, 17,549 sheep and lambs, and 5,495 pigs.

The Abattoir consists of one large slaughtering hall containing a two-way stunning pen which communicates with the dressing room. It is possible by means of the stunning pen to slaughter up to a maximum of 50 cattle per day, but this total has not been required since decontrol of livestock. By means of overhead runways, the carcasses can be cooled to a temperature of 45°F. in the cooling hall and this facility has been widely used. In addition two other stunning pens are available for use as required. There are abundant facilities for the slaughtering of sheep and lambs and the pig slaughtering hall is quite adequate for the needs of the area served. Each slaughtering room is provided with hot water and steam sterilisation points.

All the existing lairs are being provided with constant water supply and hay racks in compliance with the Slaughter of Animals (Prevention of Cruelty) (No. 2) Regulations, 1954, and plans for the provision of additional lairage facilities are well advanced.

In 1957 the local Authority passed a resolution under Section 75 of the Food and Drugs Act, 1955, determining that no fresh slaughterhouse licence shall be granted by them, on the grounds that they have provided a public slaughterhouse giving adequate facilities within their district.

After the Public Abattoir had been inspected by inspectors of the Ministry of Agriculture, Fisheries and Food, this resolution was approved by the Minister.

The area is well served by accommodation for the slaughtering of livestock and the facilities provided are of as high a standard as it is possible to provide in connection with old buildings.

FOOD HYGIENE

The summary of improvements effected during the period under review shows a close similarity to that of the previous year. The figures must be interpreted as indicating that the Department is keeping a watchful eye on the condition of utensils and equipment and calling for their replacement or renewal whenever usage and the passage of time has rendered them no longer hygienically satisfactory. Only in this way can high standards be maintained. Once again there has been a gratifying increase in the number of wash hand basins available for food handlers, and we are approaching the time when it can be said that all food premises are provided with adequate washing facilities for personnel. The provision of free washing facilities in some public conveniences is a step forward and undoubtedly plays its part in encouraging personal hygiene among the thousands of day visitors to Southport. Many of these visitors bring their food with them, and in the past it was inevitable that some should run the risk of infection because their hands were soiled after visiting a toilet.

In one case only was it found necessary to resort to legal action under the Food Hygiene Regulations, 1955, during the year, indicating the high degree of co-operation which exists between the Department and food traders generally.

Rodents and other vermin still give cause for anxiety and whilst increasing use is made of the advice and services of the staff in this connection, occupiers of food premises tend to delay seeking assistance until the infestation has spread.

Satisfactory premises and adequate equipment cannot, in themselves, guarantee hygienic food handling. The preparation and cooking of food necessitates the employment of large staffs who can only carry out their work efficiently and safely if they have a proper appreciation of the risks involved. Accordingly, it is pleasing to be able to report that the courses in elementary food hygiene held during the twelve months were attended by 90 students, of whom 60 were successful in examination. It is also encouraging to note that 11 students completed a course in Advanced Food Hygiene and 10 students attended the course in the Bacteriology of Food Hygiene.

It is felt that even more benefit would be derived from the various courses of lectures if more people responsible for supervising staffs themselves attended, thereby learning at first hand of the many steps which can be taken to improve their premises.

Tribute should be paid to the Southport Food Hygiene Association for its enthusiastic support of the Department's activities in this field.

(A) Summary of Food Hygiene Inspections

	INSPECTIONS							Number
Hotels, Restaurants and Kitchens	2,297
Bakehouses	185
Butchers' Shops	183
Confectioners' and Grocers' Shops	647
Fried Fish Shops	22
Fishmongers', Greengrocers' and Poulterers'	110
Public Houses, etc.	82
Miscellaneous	237
TOTAL	3,763

(B) Summary of Improvements Effected

	Number
Major reconstructions of cafe kitchens and bakehouses	2
Minor structural improvements, cleansing and repairs	92
Improved food storage facilities	10
Equipment renewed, repaired and cleansed	72
Improved washing-up facilities and procedure	9
Improved sanitary accommodation for staff including personal washing facilities	58
Improved sanitary accommodation for patrons	2
Improved refuse storage facilities	24
Vermin eliminated	16
Miscellaneous... ..	9
TOTAL	294

THE SHELLFISH INDUSTRY

Twenty-four wholesale shellfish premises have been registered under the Food and Drugs Act, 1955.

Notwithstanding frequent sampling of the shellfish and the securing of improvements in the bacteriological standard—a considerable amount of work has still to be carried out before all the shellfish premises in the Borough can be regarded as satisfactory.

During the Summer of 1957, members of the Food Hygiene Advisory Council visited Southport in connection with the proposed amendment to Regulation 7 of the Food Hygiene Regulations, 1955 which, in its original form, would have prohibited the giving out of shrimps to persons for “picking” in their own homes.

This regulation, the operation of which had been postponed, has been viewed with apprehension by everyone concerned with the Shellfish Industry; many people believing that if it eventually comes into force in its original form it will result in the death of Southport’s oldest industry.

By December of that year, the Food Hygiene (Amendment) Regulations, 1957, had been made. These have the effect of permitting the giving out of shrimps for “picking” on domestic premises if the premises are registered with the Local Authority, and certain other requirements are complied with.

In sending these new regulations to Local Authorities, however, the two Ministers concerned intimated that they intend to review the position with the object of re-considering the possibility of ending “home-picking”.

ICE CREAM

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	15
For the purpose of sale	194
For the purpose of storage	1
TOTAL	210

The bacteriological quality of ice cream on sale in the Borough was found in some respects to be less satisfactory than in certain previous years.

Year	Percentage of Samples found to be unsatisfactory								
1949	52.20
1950	26.95
1951	19.78
1952	22.90
1953	29.50
1954	9.17
1955	8.82
1956	19.04
1957	29.09
1958	10.00
1959	31.57

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.

Fifty-seven samples of ice cream were procured and submitted for bacteriological examination.

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 samples examined:—

YEAR	RESULTS OF SAMPLES TAKEN						GRAND TOTAL
	NUMBER SATISFACTORY			NUMBER UNSATISFACTORY			
	Grade I	Grade II	Total	Grade III	Grade IV	Total	
1949 ...	10	11	21	9	14	23	44
1950 ...	42	42	84	12	19	31	115
1951 ...	70	39	109	17	26	43	152
1952 ...	67	71	138	26	15	41	179
1953 ...	65	21	86	22	14	36	122
1954 ...	83	16	99	9	1	10	109
1955 ...	49	13	62	5	1	6	68
1956 ...	22	12	34	8	0	8	42
1957 ...	30	9	39	10	6	16	55
1958 ...	22	5	27	3	0	3	30
1959 ...	29	10	39	6	12	18	57
TOTALS	489	249	738	127	108	235	973

Overall Results: Satisfactory, 75.84%; Unsatisfactory, 24.16%.

DISEASES OF ANIMALS

An Order made in 1957 by the Minister of Agriculture, Fisheries and Food, imposed additional responsibilities on Local Authorities.

Known as "The Diseases of Animals (Waste Foods) Order, 1957", this legislation prohibits the feeding of unboiled waste foods to certain animals or to poultry.

Collectors of waste foods must boil them for one hour in a plant licensed by the Local Authority.

Nineteen licences have been granted, and twenty inspections of the plants were carried out by the Public Health Inspectors.

Part VI

OTHER INFORMATION

Health Education

Firearms

Cardinal Policy

Refugees

List of Councils and Clarks

Medical Examinations

Private Day Treatment

Working Hours

Public Assistance

Personneling Data and Activities

Highly Productive

Special Surveys

Civil Defence Ambulance Service

Work done on behalf of the Children's Corporation

Part VI

OTHER INFORMATION

Health Education

Blindness

Cerebral Palsy

Epilepsy

List of Centres and Clinics

Medical Examinations

Private Day Nursery

Nursing Homes

Nurses Agencies

Persons requiring Care and Attention

Riding Establishments

Special Surveys

Civil Defence Ambulance Service

Work done on behalf of the Children's Committee

HEALTH EDUCATION

1. General

Demonstrations have taken place in the Child Welfare Centres and leaflets have been made available for the general public both from the Health Department and the Central Library.

Lectures have been arranged from time to time to various organisations such as Young Wives Groups, Parent Teachers Associations, Schools, the Civil Defence Ambulance Section, etc.

The subjects included the work of the Health Department, Vaccination and Immunisation, Mentally Handicapped Children, and were illustrated by means of appropriate films.

2. Smoking and Lung Cancer

The action taken in this matter was to make available to the public through the normal channels for the distribution of health education literature, e.g. offices, clinics and public libraries, the Medical Research Council's Report on the subject. It was also agreed to make reference to the deleterious effect that smoking might have in relation to physical fitness as a whole, but not to lung cancer, in the letter which is sent annually by the Chairman of the Education Committee to all school leavers.

OTHER INFORMATION

Blindness, Cerebral Palsy and Epilepsy—I am indebted to Mr. J. Sinnott, the Senior Welfare Officer, for the following details:—

Blindness—There are 209 persons on the Blind Register and 53 others are classified as partially sighted. Many of these persons attend the Handicraft Classes and take part in other social activities at the Blind Social Centre, Gallie House, Hoghton Street, Southport.

Cerebral Palsy—There is one registered case, that of a boy 16 years of age, who is also included in the figures given for the partially sighted register.

Epilepsy—The following are the numbers of persons accommodated on account of epilepsy under arrangements made by the Welfare Committee:—

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

Centres and Clinics—The following list shows the Centres and Clinics which were in operation during 1959:—

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 Hoghton Street	Thursdays	2 to 4 p.m.
POST-NATAL CLINICS:—		
44 Hoghton 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 1959 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	Re-Examinations	Total
(a) CORPORATION DEPARTMENTS:—				
Borough Architect	3	—	—	3
Borough Engineer	5	51	4	60
Borough Treasurer	11	—	—	11
Children's	2	—	—	2
Education	54	18	2	74
Estates and Baths	—	1	—	1
Fire Service	2	—	3	5
Flower Show	—	—	—	—
Health	8	23	—	31
Libraries	7	—	1	8
Lighting	1	1	—	2
Police	—	1	—	1
Publicity	—	10	—	10
Parks and Cemeteries	—	11	3	14
Town Clerk's	4	2	—	6
Transport	3	15	5	23
Water Board	1	13	1	15
Weights and Measures	1	—	—	1
Welfare Services	3	14	—	17
(b) OTHER DEPARTMENTS:—				
Electricity	5	—	—	5
District Nursing Association	6	—	—	6
TOTALS	116	160	19	295

Private Day Nursery—One private day nursery consisting of 3 ground floor rooms of a private house continued with a maximum number of six children, the age range being 2 years to 5 years.

Nursing Homes—At the end of the year there were 14 Nursing Homes registered with the Local Authority.

Classification—3 Maternity Homes—accommodation 8 beds. 2 Homes—Maternity accommodation 4 beds—Medical and Surgical 23 beds. 9 Homes—accommodation 188 beds. Medical only.

Only Nursing Homes registered by the Local Authority under Section 187 of the Public Health Act, 1936, are permitted to admit patients requiring nursing and medical attention.

The number of inspections made to nursing homes during the year was 46.

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. No additional agencies were licensed during 1959, one existing agency closed during the year and inspection reports showed that the one remaining establishment was being conducted in a satisfactory manner.

Persons in need of Care and Attention—No cases were dealt with during 1959, under the powers contained in Section 47 of the National Assistance Act, 1948.

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 Health Authority to carry out the necessary inspections.

During the twelve months period to the 30th September, 1959, Mr. Hewetson made thirty-six visits to nine riding establishments and carried out two hundred 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 Medical Research Council's investigation on poliomyelitis.

CIVIL DEFENCE AMBULANCE and CASUALTY COLLECTING SECTION

During the year, 46 training sessions of 1½ to 2 hours' duration were held at the Civil Defence Headquarters, Birch Street.

First aid lectures and practical first aid, as usual, occupied the majority of time spent on training, but map reading exercises both indoor and outdoor were not neglected.

Time devoted to vehicle maintenance and the erection of stretcher fitments was well spent.

Evening outdoor exercises and two full-day exercises were arranged and well attended.

Lectures on Radiac instruments together with practical use of these instruments proved to be an added source of interest to the members.

The film "First Aid to Soldiers" was shown on several occasions and is considered to be a valuable aid to training.

Southport Civil Defence Corps entered for the Regional Tourney which was held at Belle Vue on 11th July. Each of the Sections competed, and the fact that the Southport Corps came in 4th in competition against such opposition as Liverpool, Manchester and Lancashire County, as well as second against other County Boroughs, gives proof that the interest of the members is satisfactorily maintained.

I am indebted to Dr. K. Rostron, whose lectures on First Aid are always well attended and appreciated; his lectures in November and December completed the training programme for the year.

Work done on behalf of Children's Committee—During the year, 73 examinations were carried out on behalf of the Children's Committee, the details being as follows:

Examination of children who are boarded-out in foster homes	...	...	...	62
Examination of children admitted to Institutions	...	...	...	4
Admissions to Links Avenue	...	...	...	4
Discharges from Links Avenue	...	...	...	2
Routine Medical Inspection of Children in Care	...	...	...	1

Dr. Davison, one of the lady Assistant Medical Officers, continued to be responsible for the medical care of the children in the Home administered by the Children's Committee.

Part VII

SCHOOL HEALTH SERVICE

(The Fifty-first Annual Report of the
Principal School Medical Officer)

EDUCATION COMMITTEE AS AT

31.12.59.

The Mayor, Alderman W. BERWICK

Alderman R. JOHNSON (*Chairman*)

Alderman R. WOOD (*Vice-Chairman*)

Alderman T. BALL, J.P.

Alderman MRS. E. SMITH

Alderman W. PAULDEN

Alderman W. TATTERSALL, J.P.

Councillor G. L. BEAMAN

Councillor J. CAMPION

Councillor H. H. GLAISHER

Councillor MRS. M. GOLDBERG

Councillor G. W. KENDALL, J.P.

Councillor J. A. P. LOWE

Councillor MRS. B. POGSON

Councillor MRS. F. M. TURNER

Mr. G. F. DIXON

Mr. E. FORMBY

The REV. O. TUDOR HUGHES

Mr. A. LOVERIDGE

The REV. F. H. PICKERING

MR. D. G. PRITCHARD

Representatives on Joint Health and Education Sub-Committee

Alderman R. JOHNSON

Alderman R. WOOD

Councillor J. CAMPION

Councillor H. H. GLAISHER

Councillor MRS. M. GOLDBERG

SCHOOL HEALTH SERVICE

The work of the School Health Service has proceeded satisfactorily during the year. This service is of great value to children and is complementary to the work of the family doctors. It is not generally realised how much is done to ensure that each child is able to obtain the utmost benefit according to his age, aptitude and ability from the education provided. Some of the medical work carried out is highly specialised in nature and requires an intimate knowledge of the educational system in this country. Increasing medical knowledge is enabling more children to survive during the first year of life, a dangerous period, but a proportion of such infants are either physically or mentally handicapped and require special care and attention. One important aspect of the School Health Service is that children requiring attention are followed up to ensure that, whenever possible, they obtain the necessary treatment.

The average number of children on the register of the Education Authority is listed below. The figures for the previous year are given for comparison.

	1958	1959
Primary Schools	5,880	5,684
Secondary Modern, Technical and Grammar Schools	3,717	4,046
	<u>9,597</u>	<u>9,730</u>

Routine Medical Inspections—The method used in previous years was continued. It ensures that children are examined by a school medical officer at least three times during their school life, viz.:—

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.

All schools were visited during the year and 3,384 children in the three groups mentioned above were listed for inspection, out of which number 224 were absent.

The Nursery School at Crossens is visited each term, and toddlers admitted to nursery classes in ordinary schools are examined on admission and again at five years when they enter the infant school.

The number of children in each age group is given below.

PRIMARY SCHOOLS—

	1959
Entrants	611
Leavers	928

SECONDARY MODERN, TECHNICAL AND GRAMMAR SCHOOLS—

Leavers	769
Additional Medical Inspections	852

In addition to these periodic examinations by the school medical officers, each child is inspected annually by the school nurse. The survey of the school children takes place just before the medical inspection. Each child is weighed and measured, eye sight tested and any other defect noted. Any child found to be suffering from a defect is later seen by

a school medical officer. This year the number of children examined by the school nurses was 9,286 and of these 745 were brought forward for further examination.

B.C.G. VACCINATION:—This is the fifth year that B.C.G. vaccination against tuberculosis has been offered to thirteen year old school children in all schools, maintained and independent, in the area.

The acceptance rate in 1959 was 71.4%.

Year	% Acceptance Rate	No. of children tested	% Positive Skin Test	% Negative Skin Test	No. Vaccinated
1955	73.7	695	35.5	61.9	427
1956	58.8	602	31.2	65.5	391
1957	71.5	756	30.0	66.3	500
1958	65.5	631	18.2	78.8	497
1959	71.4	848	11.9	82.9	698

A more detailed list is given in the statistical tables at the end of the report.

It is interesting to note that the percentage of positive skin tests, showing previous infection, has fallen from 35.5% in 1955 to 11.9% in 1959. This means that a higher percentage of children in this age group are skin test negative, and are, therefore, able to take advantage of the protection offered by B.C.G. vaccination. It may also indicate a decreasing reservoir of infectious cases in the community.

SKIN TESTING OF SCHOOL ENTRANTS:—This is the fourth year that new entrants to school have been offered skin tests to find if they have at any time been exposed to tuberculosis infection.

The percentages of positive skin tests, in children whose parents wished the test to be carried out, (excluding those due to previous B.C.G. vaccination) are shown below.

Year	No. tested	No. positive	%
1956	626	15	2.4
1957	719	17	2.3
1958	514	7	1.4
1959	570	5	0.9

The children with positive tests, their parents and the remainder of the family, are offered opportunity for chest X-ray. This year, no new cases of tuberculosis were revealed by the X-rays taken.

ROUTINE MEDICAL INSPECTIONS:—The usual pattern of inspection has been followed and parents have been notified of the time and place of medical inspections and invited to attend. Child welfare centres and church halls have been used when conditions in school have been unsuitable and the arrangements have, on the whole, worked well.

The percentage of parents attending with their children at examinations is given below with the figures of last year for comparison:—

	1958	1959
	%	%
PRIMARY SCHOOLS—		
Entrants	80.89	79.22
Leavers	55.13	53.66
SECONDARY MODERN, TECHNICAL AND GRAMMAR SCHOOLS—		
Leavers	8.42	8.19
ADDITIONAL MEDICAL INSPECTIONS	52.99	54.46

FINDINGS AT ROUTINE MEDICAL INSPECTIONS

Nutrition—Of the children examined only .32% were thought to be badly nourished, and these children were supervised at the Minor Ailment Clinic.

School Meals—During the year, 1,045,033 meals were given to Southport school children. About 6½% of these meals were supplied free or on partial payment. On an average 59% of the school children have dinner in school. This is understood to be one of the highest percentages in the country.

Cleanliness, Clothing and Footwear—The school nurses visit each school as early in the term as possible. Each child is examined for pediculosis, cleanliness of body, clothing and condition of footwear. 10,542 children were seen and 20 children were excluded during the year.

Defects found at Routine Medical Inspections. A detailed list of all defects is to be found at the end of this Report.

Below are the numbers of defects in each age group found to require treatment.

	Entrants	Primary Leavers	Secondary Modern Technical and Grammar School Leavers	Additional Inspections	TOTALS
Number of children examined ...	611	928	769	852	3160
Number of children requiring treatment	108	153	160	154	575
Percentage requiring treatment ...	17.68	16.49	20.81	18.08	18.2

HANDICAPPED PUPILS

Physically Defective Children—Very good liaison still continues between this department and Hawkshead Street Hospital Special School. Seven children were attending as day pupils at the end of the year. Some of these children are crippled by congenital defects, e.g., spasticity, and if such facilities were not available, would require residential care in special schools away from their homes. Most of the children are taken to and from the school by taxi. The school is a very happy one, and the staff do all in their power to make it so.

One girl, over 12 years of age, is leaving Hawkshead Street Hospital Special School to become a boarder in a special school for physically handicapped pupils in the Midlands. One boy from this area was admitted to this school last year. He is very happy and doing well.

Three children have had lessons while they have been patients at a local hospital, where treatment has been necessary for a long time. Parents appreciate this provision, as they realise that the children will not be so backward in lessons when they return to school.

Blind and Partially Sighted Children—One blind and one partially sighted child are accommodated in residential special schools.

Deaf and Partially Deaf Children—Seven deaf children and two partially deaf children are in residential schools. One child attends a special school for the partially deaf as a day pupil.

Educationally Sub-Normal Children—This group still presents difficulties. The Authority has no day special school, and there are some children for whom adequate arrangements cannot be made.

The "Opportunity" classes continued to do very good work, but these are not intended for severely sub-normal children, but for children who, after a period of special teaching, are able to return to their own age-groups and classes.

Five children are in residential schools for educationally sub-normal children. Places in such schools are difficult to find and this combined with the high cost makes some local provision desirable.

Maladjusted children—Proposals were made during this year for the establishment of a Child Guidance Clinic in Southport. Such an arrangement would solve many of our problems, and would enable children to be seen at the onset of any abnormal pattern of behaviour.

Treatment in the early stages of mal-adjustment might resolve their problems and obviate the need for residential care later.

At present there are five mal-adjusted children in special residential schools.

Arrangements for Treatment—Most of the clinics are held at 2 Church Street. The weekly time-table for the clinics is as follows:—

DAY	TIME	CLINIC
Monday	9.15 a.m. to 12.45 p.m.	Dressings Clinic
	9.30 a.m.... ..	*Ear, Nose and Throat Clinic
	2 p.m. to 4 p.m. 1.15 p.m. to 4.45 p.m.	Doctors' Minor Ailment Clinic Dressings Clinic
Tuesday	9.15 a.m. to 12.45 p.m.... ..	Dressings Clinic
	9 a.m.	*Eye Clinic
	1.15 p.m. to 4.45 p.m. 2 p.m.	Dressings Clinic *Eye Clinic
Wednesday	9.15 a.m. to 12.45 p.m.... ..	Dressings Clinic
	2 p.m. to 5 p.m.	*Chiropody Clinic
	1.15 p.m. to 4.45 p.m.	Dressings Clinic
Thursday	9.15 a.m. to 12.45 p.m.... ..	Dressings Clinic
	2.30 p.m. to 4 p.m.	Skin Clinic
	1.15 p.m. to 4.45 p.m.	Dressings Clinic
Friday	9.15 a.m. to 12.45 p.m.... ..	Dressings Clinic
	1.15 p.m. to 4.45 p.m.	Dressings Clinic
	2 p.m. to 3.30 p.m.	Immunisation
Saturday	9 a.m. to 12 noon	Dressings Clinic

*By Appointment only.

Remedial exercise clinic sessions at Hampton Road Child Welfare Centre are arranged by the physiotherapist, in addition to those held at 44 Hoghton Street.

The Ainsdale health visitor/school nurse continues to use part of the buildings at Woodvale as a centre and arranges with the local schools to see children there, instead of sending them on the long journey into town.

Nurses' Treatment Clinic—This clinic is open every day and arrangements for treatment ensure that every effort is made to try to reduce waiting time and time lost from school.

The numbers (8221) attending continue to be high and the clinic is obviously useful.

Minor Ailments Clinic—This is a weekly clinic and the children and parents are seen by the school medical officers. Parents are advised about their children and if further investigation or treatment is required, they are referred to hospital with the knowledge and consent of the child's general medical practitioner. The number of children seen at this clinic during the year was 844, and these children made 2697 attendances. 111 cases were referred to the Southport Infirmary for further investigation, 1 to the Royal Liverpool Children's Hospital, 1 to Alder Hey Children's Hospital, 1 to the Women's Hospital, 1 to the Royal Southern Hospital, and 1 to Walton Hospital.

Eye Clinic—Mr. D. Rankine, the Ophthalmologist, continued to attend on Tuesday morning and afternoon, and during the year he held 66 clinics. 309 new cases were examined and 543 were seen for supervision and revision of spectacles. 21 cases were referred for further treatment at the Southport Infirmary.

Skin Clinic—During the year 594 attendances were made. A wide variety of skin diseases, usually in the early stages, are treated at the clinic.

Chiropody Clinic—This clinic only began in November, 1959, but it has already proved its value, by providing an efficient service for the treatment of children suffering from verrucae, corns and like afflictions.

Ear, Nose and Throat Clinic—Mr. Tracy Forster, the Ear, Nose and Throat Surgeon, held a clinic each week for school children. Cases were referred to him from the minor ailment clinic, routine medical inspections and also from general practitioners.

Children with ear defects are seen in the very early stages and the effectiveness of modern therapy and the follow-up system is reflected in the small number of cases of gross otorrhoea in the school population.

In most cases treatment is required and this is given by the nurse at the school clinic; if an operation is necessary children are admitted to the Ear, Nose and Throat Ward at the Promenade Hospital.

In 1959, 311 new cases were examined and 117 attended for observation of progress from previous years. 110 cases were admitted to the Promenade Hospital for the removal of tonsils and/or adenoids.

Children who may have any loss of hearing are referred to the Liverpool School for the Partially Deaf, Birkdale, or to Professor Ewing in Manchester, for audiometric examination.

Artificial Sunlight—Children are referred from the chest clinic and the paediatric clinic of the Southport Infirmary, the school minor ailments clinic and from routine medical inspections. General medical practitioners also occasionally refer children to the department for artificial sunlight.

107 school children were treated; these children made a total of 2,259 attendances.

Tuberculosis—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.

Cases notified in 1959 were as under:—

Pulmonary 2

Speech Therapy—Treatment for defective speech is given at the North West School of Speech and Drama by arrangement with the Local Authority and 128 sessions were held during the year.

No. of children listed for treatment in 1959	...	...	...	...	...	31
No. of children admitted to regular classes in 1959	...	...	...	...	...	27
No. of children discharged as cured.	...	...	...	...	...	11

Fifty-eight children attended these classes; the reasons for the defects in speech were:—

Cleft Palate	...	...	...	...	...	1
Stammering	...	...	...	...	...	16
Slow and Abnormal Speech development	...	...	...	...	...	40
Lisp	...	...	...	...	...	1

Total attendances at the school were 1,062.

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—The physiotherapist continues to deal with the treatment of minor orthopaedic defects. Cases were also referred to the Promenade Hospital for opinion and advice and the physiotherapist attends this clinic and sees the cases along with the Orthopaedic Surgeon. There is in this way good co-operation between the two departments and a very easy exchange of information.

Remedial Exercises Clinic—Children are referred to this clinic by the Orthopaedic Surgeon at the Promenade Hospital and by the school medical officers. 2,727 attendances were made during the year.

Child Guidance—Children requiring treatment are usually referred to the Notre Dame Child Guidance Clinic or the psychiatric clinic at Alder Hey Children's 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 inspections. Some cases are also referred by the probation officer and by the children's officer. The number of cases referred in 1959 was 8. It is hoped that these children will be able to have treatment at our clinic in Southport in the near future.

Infectious Diseases—There were again no cases of diphtheria. Notifications were as follows, with figures for 1958 for comparison:—

	1958	1959
Measles	20	780
Rubella	18	41
Scarlet Fever	24	105
Chicken Pox	63	203
Diphtheria	—	—
Whooping Cough	20	54
Tuberculosis	4	2

Miscellaneous School Medical Work

	1959
Examination for fitness to take part in public entertainment	11
Examinations by nurses prior to admission to school	804

Home Visits by School Nurses

Follow-up of routine medical inspections	39
On account of illness	78
To infectious cases	28
To infectious contacts	9
About immunisation of children	73

Health Education in School

Regular mothercraft classes are held at all the Secondary Modern Schools at which girls attend, viz., Meols Cop, our Lady of Lourdes, Stanley and Birkdale.

The syllabus is a comprehensive one and includes hygiene, diet and nutrition of children, clothing and footwear, simple first-aid and home nursing, as well as practical classes in cot-making, baby bathing, dressing and feeding. The classes are very popular with the girls, and it is hoped that some of the knowledge gained will be useful to them in later life.

A number of girls were successful in passing a national examination in mothercraft.

In addition to this, one school nurse has also been helping with a pre-nursing course at one of the modern secondary schools.

PRINCIPAL SCHOOL DENTAL OFFICER'S REPORT, 1959

The authorised professional establishment of one principal school dental officer and two school dental officers has been maintained throughout the year.

All schools have been visited during the year for dental inspection, and in addition two of the schools have been re-visited.

As in previous years, the Day Nurseries, Occupation Centre and the Hospital Special School have been visited and all consenting to treatment have been made dentally fit. The period between inspection and re-inspection, and treatment and re-treatment of all the schools is approximately 48 weeks.

This is all to the good but it is not enough. Once a dentition has been made sound it must be maintained. It is now generally recognised that our present diet, consisting as it does of so much that is sweet, soft and sticky, is harmful to the teeth. In a matter of weeks gross caries can develop, and in as many months can break up a dentition beyond the point of restoration. Arrangements are made therefore to examine selected children at periods of 2, 3 or 4 months.

Because of the effect of modern diet on the tooth structure, the correct alignment of permanent teeth is particularly important. Stagnation areas develop wherever the teeth are overcrowded, even when the overlap is so slight as to be hardly noticeable. The timely and judicious extraction of selected teeth of the permanent dentition can do much to alleviate this danger and the figures below show how this procedure is progressively followed.

Extraction of sound or saveable teeth of the permanent dentition for regulation purposes

1956	1957	1958	1959
179	241	280	530

During the year, Mr. Pogrel, the consultant orthodontist, together with the department's dental officers have completed the treatment of 50 cases of irregularity of the teeth by appliances and 60 new cases have been accepted.

Instruction in dental hygiene was given by all members of the staff and much literature has been distributed. It would only be fair to state that the last two years have shown that the children are becoming more "tooth" conscious. The teeth are cleaner and patients question the merits of the various toothpastes. Television advertisements have undoubtedly played some part in this.

PART I
MEDICAL INSPECTION OF PUPILS ATTENDING MAINTAINED PRIMARY AND SECONDARY
SCHOOLS (INCLUDING NURSERY AND SPECIAL SCHOOLS)

TABLE A
PERIODIC MEDICAL INSPECTIONS

Age Groups Inspected (By years of birth) (1)	No. of pupils Inspected (2)	Physical Condition of Pupils Inspected			
		SATISFACTORY		UNSATISFACTORY	
		No.	% of Col. 2	No.	% of Col. 2
		(3)	(4)	(5)	(6)
1955 and later	175	175	100	—	—
1954	337	336	99·7	1	0·3
1953	487	485	99·59	2	0·41
1952	85	85	100	—	—
1951	48	48	100	—	—
1950	51	51	100	—	—
1949	84	84	100	—	—
1948	660	659	99·85	1	0·15
1947	340	339	99·71	1	0·29
1946	78	77	98·72	1	1·28
1945	585	582	99·49	3	0·51
1944 and earlier	230	229	99·57	1	0·43
TOTAL	3160	3150	99·68	10	0·32

TABLE B
PUPILS FOUND TO REQUIRE TREATMENT AT PERIODIC MEDICAL INSPECTIONS (excluding
Dental Diseases and Infestation with Vermin)

Age groups Inspected (by year of birth) (1)	For defective vision (excluding squint) (2)	For any of the other conditions recorded in Part II (3)	Total individual pupils (4)
1955 and later	—	40	30
1954	—	76	63
1953	3	98	79
1952	3	20	18
1951	2	7	6
1950	1	8	8
1949	3	16	13
1948	20	114	108
1947	8	66	67
1946	6	10	14
1945	17	126	127
1944 and earlier	11	39	42
TOTAL	74	620	575

TABLE C
OTHER INSPECTIONS

Number of Special Inspections	...	...	...	...	...	...	...	...	1369
Number of re-inspections	...	...	...	...	...	...	...	...	2188
							TOTAL		3557

TABLE D
INFESTATION WITH VERMIN

(a)	Total number of individual examinations of pupils in schools by school nurses or other authorised persons.....	7414
(b)	Total number of individual pupils found to be infested.....	60
(c)	Number of individual pupils in respect of whom cleansing notices were issued (Section 54(2), Education Act, 1944).....	—
(d)	Number of individual pupils in respect of whom cleansing orders were issued (Section 54(3), Education Act, 1944).....	—

PART II
DEFECTS FOUND BY MEDICAL INSPECTION DURING THE YEAR
TABLE A

Defect Code No. (1)	Defects or Disease (2)	Periodic Inspections							
		Entrants		Leavers		Others		Total	
		(T)† (3)	(O)* (4)	(T)† (5)	(O)* (6)	(T)† (7)	(O)* (8)	(T)† (9)	(O)* (10)
4	Skin	12	3	62	—	48	2	122	5
5	Eyes—a. Vision ...	2	—	24	2	48	7	74	9
	b. Squint ...	1	—	2	—	4	2	7	2
	c. Other... ..	—	—	2	—	13	1	15	1
6	Ears—a. Hearing ...	4	1	1	—	2	1	7	2
	b. Otitis Media...	8	2	1	—	5	1	14	3
	c. Other... ..	1	1	1	—	1	—	3	1
7	Nose and Throat ...	36	21	11	2	43	33	90	56
8	Speech	8	3	1	—	10	8	19	11
9	Lymphatic Glands ...	3	2	2	1	2	4	7	7
10	Heart	2	5	2	2	5	4	9	11
11	Lungs	10	3	2	—	14	4	26	7
12	Developmental—								
	a. Hernia ...	6	2	—	—	—	4	6	6
	b. Other... ..	4	10	18	2	37	26	59	38
13	Orthopaedic—								
	a. Posture ...	4	3	16	6	32	23	52	32
	b. Feet	7	5	12	6	37	33	56	44
	c. Other... ..	7	10	13	3	27	27	47	40
14	Nervous System—								
	a. Epilepsy ...	—	—	—	—	—	—	—	—
	b. Other... ..	—	1	—	—	2	—	2	1
15	Psychological—								
	a. Development	2	1	—	—	8	2	10	3
	b. Stability ...	1	—	1	—	8	1	10	1
16	Abdomen	3	—	4	—	9	—	16	—
17	Other	13	2	5	—	25	2	43	4
	TOTAL	134	75	180	24	380	185	694	284

† Treatment

* Observation

TABLE B

SPECIAL INSPECTIONS

Defect Code No. (1)	Defects or Disease (2)	SPECIAL INSPECTIONS	
		Pupils requiring Treatment (3)	Pupils requiring Observation (4)
4	Skin	210	11
5	Eyes— a. Vision b. Squint c. Other	24 1 53	14 1 6
6	Ears— a. Hearing b. Otitis Media c. Other	9 24 32	1 1 3
7	Nose and Throat	91	55
8	Speech	18	12
9	Lymphatic Glands	7	19
10	Heart	2	5
11	Lungs	12	10
12	Developmental— a. Hernia b. Other	— 22	— 91
13	Orthopaedic— a. Posture b. Feet c. Other	17 32 127	17 21 32
14	Nervous System— a. Epilepsy b. Other	— 4	1 3
15	Psychological— a. Development b. Stability	7 9	12 6
16	Abdomen	46	9
17	Other... ..	240	12
	TOTAL	987	342

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

TABLE A

EYE DISEASES, DEFECTIVE VISION AND SQUINT

	Number of cases known to have been dealt with
External and other, excluding errors of refraction and squint	159
Errors of refraction (including squint)	755
Total	914
Number of pupils for whom spectacles were prescribed	235

TABLE B

DISEASES AND DEFECTS OF EAR, NOSE AND THROAT

	Number of cases known to have been dealt with
Received operative treatment—	
(a) for diseases of the ear	16
(b) for adenoids and chronic tonsillitis	110
(c) for other nose and throat conditions	51
Received other forms of treatment	288
Total	465
Total number of pupils in schools who are known to have been provided with hearing aids—	
(a) in 1959	2
(b) in previous years	8

TABLE C

ORTHOPAEDIC AND POSTURAL DEFECTS

	Number of cases known to have been treated
(a) Pupils treated at clinics or out-patients departments—	
Specialist clinics	14
By Local Authority Medical Staff	222
(b) Pupils treated at school for postural defects	—
Total	236

TABLE D

DISEASES OF THE SKIN
(excluding uncleanness, for which see Table D of Part I)

										Number of cases known to have been treated
Ringworm—(a)	Scalp	...	...	...	...	...	...	...	...	—
	(b) Body	...	...	...	...	...	...	...	...	1
Scabies	...	...	...	...	...	...	...	...	...	6
Impetigo	...	...	...	...	...	...	...	...	...	34
Other skin diseases	...	...	...	...	...	...	...	...	...	382
Total										423

TABLE E

CHILD GUIDANCE TREATMENT

	Number of cases known to have been treated
Pupils treated at Child Guidance Clinics	8

TABLE F

SPEECH THERAPY

	Number of cases known to have been treated
Pupils treated by speech therapists	58

TABLE G

OTHER TREATMENT GIVEN

	Number of cases known to have been dealt with
(a) Pupils with minor ailments	844
(b) Pupils who received convalescent treatment under School Health Service arrangements	—
(c) Pupils who received B.C.G. vaccination	698
(d) Artificial Sunlight	107
(e) Remedial Exercises	254
(f) No. of 5 year old entrants who have had Skin Tests	570
Total	2473

PART IV

DENTAL INSPECTION AND TREATMENT CARRIED OUT

1.	Number of pupils inspected by the Dental Officers:—									
(a)	At Periodic Inspections	(469 re-insp.)	9265							
(b)	With Special Appointments		1444							
	TOTAL (1)		10709							
2.	Number found to require treatment		6233							
3.	Number offered treatment		6233							
4.	Number actually treated		2909							
5.	Number of attendances made by pupils for treatment, including those recorded at 11(h)		8590							
6.	Half days devoted to:—									
(a)	Periodic (School) Inspection		91							
(b)	Treatment (including 47 Orthodontic Sessions)		1240							
	TOTAL (6)		1331							
7.	Fillings:—									
(a)	Permanent Teeth		4211							
(b)	Temporary Teeth		1945							
	TOTAL (7)		6156							
8.	Number of Teeth filled:—									
(a)	Permanent Teeth		3769							
(b)	Temporary Teeth		1769							
	TOTAL (8)		5538							
9.	Extractions:—									
(a)	Permanent Teeth		769							
(b)	Temporary Teeth		2116							
	TOTAL (9)		2885							
10.	Administration of general anaesthetics for extraction by Dental Officers of the staff ...		472							
11.	Orthodontics:—									
(a)	Cases commenced during the year		60							
* (b)	Cases carried forward from previous year		65							
(c)	Cases completed during the year		50							
(d)	Cases discontinued during the year		7							
* (e)	Pupils treated with appliances		135							
(f)	Removable appliances fitted		100							
(g)	Fixed appliances fitted		7							
(h)	Total attendances		683							
12.	Number of pupils supplied with artificial teeth		15							
13.	Other operations:—									
(a)	Permanent teeth		874							
(b)	Temporary teeth		364							
	TOTAL (13)		1238							

* Re Orthodontics 11(b) and (e). Figures for 1958 should read 38 and 124 respectively—not 65 and 86 as recorded.

TABLE I
HANDICAPPED PUPILS

CATEGORY	NUMBER ASCERTAINED			TYPE OF EDUCATION PROVIDED			Requiring Special School Accommodation but unplaced at end of year		Refusal by Parent	Total
	Up to 31st Dec., 1958	During year 1959	Total on register at end of year	Ord. School (re-quiring observation)	Special Schools		DayClass or School	Sp. School		
					Day (Class) or School	Resi- dential				
Blind	1	—	1	—	—	1	—	—	—	1
Partially Sighted	2	3	5	3	—	1	—	1	—	5
Deaf	7	1	8	—	—	7	—	—	1	8
Partially Deaf ...	8	1	9	5	1	2	—	1	—	9
Delicate	16	—	16	5	11	—	—	—	—	16
Diabetic	1	—	1	1	—	—	—	—	—	1
Educationally Sub-Normal...	46	12	58	1	11	5	*38	2	1	58
Epileptic	5	2	7	6	—	1	—	—	—	7
Mal-Adjusted ...	11	2	13	6	1	5	—	1	—	13
Physically Handicapped	75	18	93	71	9	8	5	—	—	93
TOTALS	172	39	211	98	33	30	43	5	2	211

* This figure includes children in Opportunity Classes awaiting Day Special School accommodation—also children in a 'C' stream in a Senior School.

STATEMENT OF THE NUMBER OF CHILDREN NOTIFIED DURING THE YEAR ENDED 31ST DECEMBER, 1959, 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)	1
Section 57, Sub-Section (5)	4

The Sub-sections concerned read 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 purpose 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 II

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

Heights and Weights—Tables are also given which show the heights and weights of children in 1959 compared with those in 1938.

Age last Birthday	1938		1959	
	Height ft. ins.	Weight st. lbs.	Height ft. ins.	Weight st. lbs.
Age 5 years				
Boys	3 6	3 0	3 7	3 2
Girls	3 6	2 13	3 7	3 1
Age 10 years				
Boys	4 5	4 10	4 7	5 3
Girls	4 7	5 0	4 7	5 4
Age 14 years				
Boys	5 2	7 6	5 3	7 12
Girls	5 4	7 12	5 2	8 0
Age 15 years				
Boys	5 6	8 7	5 6	8 12
Girls	5 3	8 2	5 4	8 4

TABLE III

B.C.G. VACCINATION OF SCHOOLCHILDREN

	Maintained Schools	Independent Schools	Totals
1. No. of consent forms issued to parents	1024	287	1311
2. (a) No. of parental consents received	717	219	936 (71.4%)
(b) No. of definite refusals ...	88	20	108 (8.2%)
(c) No. of parents who did not reply	219	48	267 (20.4%)
TOTALS (to agree with No. 1)...	1024	287	1311 (100%)
3. (a) No. of children tested ...	639	209	848
(b) No. of children with consent forms but not tested	78	10	88
TOTALS (to agree with 2(a))...	717	219	936
4. No. of children tested and found to be:—			
(a) Positive reactors	69	32	101 (11.9%)
(b) Negative reactors	538	165	703 (82.9%)
(c) No. not read	32	12	44 (5.2%)
TOTALS (to agree with 3(a))	639	209	848 (100%)
5. No. of negative reactors vaccinated	535	163	698
6. No. of sessions in schools by:—			
(a) Medical staff	21	18	39
(b) Nursing staff	14	12	26
TOTALS	35	30	65

TABLE IV

TUBERCULIN SKIN TESTING OF ENTRANTS TO MAINTAINED
PRIMARY SCHOOLS

1. Number of eligible children	...	...	...	...	910
2. (a) No. of children already tested	...	...	...	31 (3.4%)	
(b) No. of "no replies"	...	...	...	109 (11.9%)	
(c) No. of definite refusals	...	...	...	97 (10.7%)	
(d) No. of consents received	...	...	...	673 (74.0%)	
TOTAL of (1)					910
3. (a) No. of children tested	...	...	...	570	
(b) No. of children absent	...	...	...	103	
TOTAL of 2 (d)					673
4. No. of children tested 3(a) above who were found to be:—					
(a) (i) positive	...	...	...	5 (0.9%)	
(ii) positive from previous B.C.G. Vaccination	...	...	...	4 (0.7%)	
(b) negative	...	...	...	491 (86.1%)	
(c) absent for reading	...	...	...	70 (12.3%)	
TOTAL of 3(a)					570
5. No. of children referred to the Chest Clinic	—	
6. No. of contacts found to have active disease	—	

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