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Contributors

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COUNTY BOROUGH OF SOUTHPORT



ANNUAL REPORT
OF THE
MEDICAL OFFICER OF HEALTH
AND
PRINCIPAL SCHOOL MEDICAL OFFICER
FOR THE YEAR 1967

Telephone No.
Southport 5523.

Health Department,
2 Church Street, Southport.



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HEALTH COMMITTEE

(31st December, 1967)

The Worshipful the Mayor Alderman J. S. MITCHELL, J.P.

Chairman	...	...	...	...	Alderman G. S. WILKINS
Vice-Chairman	...	...	...	...	Councillor N. JACKSON
Aldermen	...	...	...	...	J. CAMPION E. McCABE, J.P. Mrs. G. P. WILLIAMSON, J.P.
Councillors	...	...	...	...	C. W. HADFIELD, J.P. P. L. MARDON J. HARTLEY H. MARTLAND R. B. HUGHES L. POTASH Mrs. M. M. KERR R. RIGBY Mrs. C. KIRWAN E. WHITE
Co-opted Member	...	...	...	...	Dr. A. H. ROSCOE

SENIOR STAFF OF THE DEPARTMENT

(in post on 31st December, 1967—*indicates part-time staff)

Medical Officer of Health	...	...	...	G. N. M. WISHART, M.R.C.S., L.R.C.P., D.P.H., F.R.S.H.
Deputy Medical Officer of Health	...	...	...	ANNA I. DAVISON, M.B., Ch.B., C.P.H.
Assistant Medical Officer	...	...	...	M. C. FELL, M.B., Ch.B., D.P.H., D.C.H.
Consultant Obstetric Surgeon	...	...	...	*A. G. WILSON, D.obst., R.C.O.G., M.R.C.O.G.
Principal Dental Officer	...	...	...	W. L. ROTHWELL, L.D.S.(Liv.)
Dental Officer	...	...	...	P. L. HEATHCOTE, L.D.S. (Liv.)
Dental Officer	...	...	...	J. B. LEECH, L.D.S., R.C.S.(Eng.)
Public Analyst	...	...	...	A. C. BUSHNELL, F.R.I.C.
Chief Public Health Inspector	...	...	...	S. D. BURGE, F.R.S.H., M.A.P.H.I.
Superintendent Nursing Officer	...	...	...	Miss E. MITCHELL, S.R.N., S.C.M., H.V. Cert., Q.N.
Matron, Southport Day Nursery	...	...	...	Miss M. RAYNOR, N.S.C.N.
Matron, Bedford Park Day Nursery	...	...	...	Miss M. ROBERTS, S.E.N.
Senior Mental Welfare Officer	...	...	...	K. BAIN, R.M.N., R.M.P.A.

Supervisor, Junior Training Centre for Mentally Handicapped ...	...	Mrs. I. H. BAYLEY
Senior Craftsman/Teacher, Adult Training & Industrial Centre for Mentally Handicapped ...	...	J. DIX, Diploma, National Assoc. for Mental Health
Matron, Springbrook Residential Home for Mentally Handicapped Children		Miss V. L. SAMPSON
Warden, The Meadows Residential Home for Mentally Handicapped Adults ...	...	B. HOLDEN
Matron, Brookdale Home for the Elderly Mentally Infirm ...	...	Mrs. P. CLARE, R.M.N.
Chief Fire & Ambulance Officer	...	J. PERKINS, M.B.E., Grad. I. Fire E.
Administrative Assistant ...	...	F. H. DIX, A.C.I.S.

ANNUAL REPORT

OF THE MEDICAL OFFICER OF HEALTH FOR THE YEAR 1967

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

One of the duties of a Medical Officer of Health is to collect information from many different sources about the health of the people in the area for which he is responsible, so that he can report to his local health authority on any measures necessary to improve or safeguard the health of the community. There are certain figures referred to by statisticians as "vital statistics" which are of some help when comparing the state of health of different communities.

Some figures for Southport for 1967 are:—

Estimated population (Registrar General)	...	...	79,710
Total births	...	...	1,135
Total deaths	...	...	1,479

The tendency is still for the population of the town to become smaller but much will depend in the future on the numbers coming from other parts to live here and on the numbers leaving. The number of children born in the town has increased each year for some time.

Infant Mortality Rate 12.34

This is the figure of the number of children per 1,000 live births dying under 1 year of age. Though each infant death is a personal tragedy for a mother and father, our figure for 1967 is the lowest ever recorded in Southport and approaches that attained in some of the Scandinavian countries which have the lowest infant death rate in Europe. It is impossible to save some babies, particularly those born with severe congenital deformities. The comparable figure for England and Wales for 1967 was 18.30.

By the time an Annual Report of this kind can be prepared and printed much of the subject matter can be for the purpose of record only. Such records are important for they are one way by which we can measure over a period of years, the effectiveness of our efforts to improve the health of the people.

The department has been working during the year under considerable difficulties: the general shortage of doctors and the better financial rewards to doctors working in the general practice and hospital services have discouraged young men from seeking a career in the public health field and it did not prove possible to replace Dr. Dailey when he left at the end of May.

There are three major Government reports expected during 1968:—

1. The Report of the Committee on Local Authority and Allied Personal Social Services (the Seebohm Report).
2. The National Health Service. The Administrative Structure of the Medical and Related Services in England and Wales. (This is the 'Green Paper' to be issued by the Minister of Health and will in the first instance be for discussion only).
3. The Committee on Management of Local Government. (The Maud Report).

The indications are that the recommendations in these reports will have profound effects on the health services and on local government if they are accepted. Young doctors are not likely to want to specialise in preventive medicine in the future unless they can work on equal terms with their clinical colleagues. The medical staffs of public health departments are numerically small when compared with the total number of doctors in the country but because of their authority and influence they have been able to bring about great improvement in the health of the people. These unique powers must not be lost in any administrative changes which may come about. Though much has been achieved, a great deal more could be done given the staff and facilities.

A very important limiting factor in the present stress of steadily increasing costs is finance and it is becoming more difficult to maintain the existing services at their present level, let alone to bring about improvements that are desirable and are included in Southport's Ten Year Development Plan. Meantime, partly due to the large proportion of elderly people in the borough, the demand for certain of the local health authority services continues to grow. One has only to look at some of the remarkably good television medical programmes to realise how much drama appeals to people but few stop to consider the cost of such advances in surgical techniques as organ transplantation, or of new drugs: it is quite common nowadays to find patients taking a number of different drugs daily for long periods, and sometimes for the rest of their lives. These advances may be what we want but if so, we must pay for them and must be able to afford them. There is relatively little informed publicity about the value of preventive measures which may not only be life saving but which might show considerable cost benefit on analysis. Consider chest diseases alone. We continue to do great damage to our lungs by cigarette smoking. No intelligent person who has really examined the facts can fail to appreciate that this is so but we have not succeeded in bringing this home sufficiently strongly to influence the man in the street. The cost of treatment, which in many cases of lung cancer and chronic bronchitis can only be palliative, must be very large. The decision to smoke or not is a personal one. There are other more indirect ways by which the health of the community can be improved.

Though the Central Government provides a good proportion of the money required for the local health authority services, much of the money has to be found from the local rates. The hospital and general practitioner services are financed from general taxation. Local people can influence through their town council the standard and extent of their local health authority services to a considerable degree, subject to certain minimum standards which the Central Government can insist upon, and certain financial ceilings which in times of national stress may be necessary for the economy of the country, and to which local authorities are expected to adhere. Southport spends on its local health authority services a little more than the average of all county boroughs taking into account the size of our population. Charges can be made for some of the services, e.g. for day nursery and residential care in connection with mental disorder, but even when the maximum charge is made to a person who can afford to pay there is usually some additional subsidy from the rates. During the year a particular effort has been made to make the existing services as efficient and economical as possible but there are certain kinds of demand in a health service which must be met, such as home visits to the sick. These went up by 7,500 (about 10%) in 1967 as compared with 1966. Desirable improvements may have to wait for some time until expenditure can be allowed to rise. In the meantime

priority has to be given to the most essential services. Increasing demand for services cannot be met indefinitely without increase in staff and money.

Perhaps the most important change in outlook in the medical field during the year has been the tremendous increase in interest in Health Centre practice and it now seems certain that in the future many family doctors will work from Health Centre premises which will also be used by local authority medical, nursing and other staff: this should improve both these aspects of the National Health Service and benefit the patient and the general public. Discussions have taken place between the Health Committee, the local Executive Council and others interested, in the hope that the plan to provide a new Social Services building on the 2 Church Street, 44/46 Houghton Street site could be modified to include accommodation for those family doctors who want to practise from a central Health Centre. Unfortunately the present site is not large enough and it is unlikely that more land can be acquired, so that the opportunity for a really first class modern development of this kind has receded. It looks as though it will be necessary to abandon the present scheme and replan completely. The Ministry of Health is unlikely to approve new projects which do not provide accommodation for family doctors in areas where the doctors wish to practise from Health Centres. Some of the Health Department buildings are very old and unsuited to modern medical needs but they will now have to serve longer than was anticipated by the Council some four years ago.

The intention of the authority is to integrate and combine the supervision of the Health Visiting, Home Nursing, District Midwifery and Home Help Services. This was partly brought about during the year but will not be completed until next year. It has already resulted in a better service for those in need. The newly integrated services now work in teams, which are based on the Child Welfare Centres at Crossens, Poulton Road, Hampton Road and Ainsdale and the family doctors have been encouraged to make use of the staff at the nearest centre in their own practices.

Special mention should be made of the opening of the Brookdale Home for thirty elderly mentally infirm persons in April. The capital cost of this home was £88,000. A number of the residents had been waiting in hospital until the accommodation became available and the home was very soon full. This is another indication of the effect of a large elderly population on a local authority service.

I wish to record my thanks to the Members of the Council, to my medical colleagues in the town and to the staff of the Department for much support and help during the year.

I am,

Yours faithfully,

G. N. M. WISHART,

Medical Officer of Health.

GENERAL STATISTICS

			1966	1967
Area of County Borough (including Foreshore) (acres)	...	...	18,333	18,333
Area of County Borough (excluding Foreshore) (acres)	...	...	9,426	9,426
Population (1961 Census Report)	...	...	82,004	82,004
Population (estimated by the Registrar General) mid-year	...	...	80,000	79,710
Density of Population per acre (excluding Foreshore)	...	...	8.5	8.46

VITAL STATISTICS

Live Births Legitimate	...	...	...	...	...	...	1,008	1,025
Illegitimate	...	...	...	...	...	...	116	110
Total	...	...	...	...	...	...	1,124	1,135
Males	...	...	...	...	...	...	588	590
Females	...	...	...	...	...	...	536	545
Total	...	...	...	...	...	...	1,124	1,135
Rate per 1,000 population	...	...	...	...	...	...	14.05	14.24
Adjusted Birth Rate per 1,000 population (area comparability factor)	...	...	...	...	...	...	16.85 (1.20)	17.09 (1.20)
Birth Rate for England and Wales	...	...	...	...	...	...	17.7	17.2
Illegitimate Live Births per cent of total live births	...	...	...	...	...	...	10.3%	9.7%
Stillbirths Number	...	...	...	...	...	...	27	19
Rate per 1,000 total live and stillbirths	...	...	...	...	...	...	23.46	16.74
Total live and stillbirths	...	...	...	...	...	...	1,151	1,154
Infant Deaths (under 1 year)	...	...	...	...	...	...	27	14
Infant Mortality Rates:								
Total Infant Deaths per 1,000 total live births	...	...	...	...	...	...	24.02	12.34
Legitimate Infant Deaths per 1,000 legitimate live births	...	...	...	...	...	...	23.81	11.70
Illegitimate Infant Deaths per 1,000 illegitimate live births	...	...	...	...	...	...	25.87	18.18
Neo-natal Mortality Rate (deaths under 4 weeks per 1,000 total live births)	...	...	...	...	...	...	16.01	10.57
Early Neo-natal Mortality Rate (deaths under 1 week per 1,000 total live births)	...	...	...	...	...	...	13.34	7.93
Perinatal Mortality Rate (stillbirths and deaths under 1 week combined per 1,000 total live and stillbirths)	...	...	...	...	...	...	36.49	24.27
Maternal Mortality (including abortion)	...	...	...	...	...	...	Nil	Nil
Number of Deaths	...	...	...	...	...	...	—	—
Rate per 1,000 total live and stillbirths	...	...	...	...	...	...	—	—
Deaths of Infants under 1 day old	...	...	...	...	...	...	4	5
Infant Mortality Rate per 1,000 births for England and Wales	...	...	...	...	...	...	19.00	18.30
	1966	1967						
Deaths Males	636	685	...	...	...	...	1,439	1,479
Females	803	794						
Rate per 1,000 population	...	...	...	...	...	...	17.99	18.56
Adjusted death rate per 1,000 population (area comparability factor)	...	...	...	...	...	...	12.23 (0.68)	12.44 (0.67)
Death Rate for England and Wales	...	...	...	...	...	...	11.70	11.20
Excess of Deaths over Registered Births	...	...	...	...	...	...	315	344

VITAL STATISTICS
Comparison of Birth, Death and Infant Mortality Rates for England, Wales and Southport
for Period 1881 to 1967

PERIOD	BIRTH RATE (per 1,000 population)		DEATH RATE (per 1,000 population)		INFANT MORTALITY RATE (per 1,000 live births)	
	England & Wales	Southport	England & Wales	Southport	England & Wales	Southport
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
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
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
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
1960	17.1	14.87	11.5	12.84	21.7	34
1961	17.4	15.11	12.0	13.34	21.4	17
1962	18.0	14.86	11.9	12.69	20.7	20.7
1963	18.2	16.40	12.2	13.12	20.9	26.4
1964	18.4	16.55	11.3	12.76	20.0	19.0
1965	18.1	16.48	11.5	11.72	19.0	22.8
1966	17.7	16.85	11.7	12.23	19.0	24.0
1967	17.2	17.09	11.2	12.44	18.3	12.3

Corrected Rates for births and deaths are shown from 1951

REGISTRAR GENERAL'S SHORT LIST OF CAUSES OF DEATH, 1967

CAUSES OF DEATH	Sex	Total all Ages	Under 4 weeks	4 weeks under 1 yr.	Age in Years										75 & over
					1-	5-	15-	25-	35-	45-	55-	65-			
1 Tuberculosis—Respiratory...	M	1	—	—	—	—	—	—	—	—	—	—	1	—	
	F	—	—	—	—	—	—	—	—	—	—	—	—	—	
2 Tuberculosis—Other ...	M	—	—	—	—	—	—	—	—	—	—	—	—	—	
	F	—	—	—	—	—	—	—	—	—	—	—	—	—	
3 Syphilitic Disease ...	M	3	—	—	—	—	—	—	—	—	—	—	2	1	
	F	5	—	—	—	—	—	—	—	—	—	—	3	2	
4 Diphtheria ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
5 Whooping Cough ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
6 Meningococcal Infections ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
7 Acute Poliomyelitis ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
8 Measles ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
9 Other Infective and parasitic diseases ...	M	—	—	—	—	—	—	—	—	—	—	—	—	—	
	F	2	—	—	1	—	1	—	—	—	—	—	—	—	
10 Malignant Neoplasm, Stomach ...	M	14	—	—	—	—	—	—	—	1	4	4	5	—	
	F	10	—	—	—	—	—	—	—	—	4	1	5	—	
11 Malignant Neoplasm, lung bronchus ...	M	50	—	—	—	—	—	—	—	5	11	22	12	—	
	F	8	—	—	—	1	—	—	1	—	—	4	2	—	
12 Malignant Neoplasm, breast	M	—	—	—	—	—	—	—	—	—	—	—	—	—	
	F	30	—	—	—	—	—	—	2	3	6	5	14	—	
13 Malignant Neoplasm, uterus	F	12	—	—	—	—	—	—	1	2	3	4	2	—	
14 Other Malignant and Lymphatic Neoplasms ...	M	55	—	—	—	—	—	—	2	3	9	21	20	—	
	F	63	—	—	—	—	—	1	—	5	14	17	26	—	
15 Leukaemia ...	M	2	—	—	—	—	—	—	—	1	—	1	—	—	
	F	6	—	—	—	—	—	—	—	1	1	1	3	—	
16 Diabetes ...	M	4	—	—	—	—	—	—	1	—	—	2	1	—	
	F	10	—	—	—	—	—	—	—	—	1	5	4	—	
17 Vascular lesions of Nervous System ...	M	85	—	—	—	1	—	1	2	4	11	28	38	—	
	F	124	—	—	—	—	—	—	—	4	3	40	77	—	
18 Coronary Disease—Angina	M	192	—	—	—	—	—	1	3	24	42	62	60	—	
	F	146	—	—	—	—	—	—	1	1	12	41	91	—	
19 Hypertension with Heart Disease ...	M	7	—	—	—	—	—	—	—	—	—	4	3	—	
	F	10	—	—	—	—	—	—	—	—	1	1	8	—	
20 Other Heart Disease ...	M	54	—	—	—	—	—	1	—	—	2	15	36	—	
	F	138	—	—	—	—	—	—	1	2	2	19	114	—	

REGISTRAR GENERAL'S SHORT LIST OF CAUSES OF DEATH, 1967-continued

CAUSES OF DEATH	Sex	Total all Ages	Under 4 weeks	4 weeks under 1 yr.	Age in Years									
					1-	5-	15-	25-	35-	45-	55-	65-	75 & over	
21 Other Circulatory Disease ...	M F	23 47	— —	— —	— —	— —	— —	— —	— 1	— —	3 3	5 10	15 33	
22 Influenza	M F	— 1	— —	— —	— —	— —	— —	— —	— —	— —	— —	— —	— 1	
23 Pneumonia	M F	37 45	— —	— —	— 1	— —	— —	— 1	— —	2 1	3 3	13 10	19 29	
24 Bronchitis	M F	41 21	— —	— —	— —	— —	— —	— —	— —	2 1	7 2	18 6	14 12	
25 Other Diseases of Respiratory System	M F	11 7	— —	1 —	— —	— —	— —	— —	— —	— —	1 1	6 2	3 4	
26 Ulcer of Stomach and Duodenum	M F	9 5	— —	— —	— —	— —	— —	— —	1 —	— —	5 —	— 2	3 3	
27 Gastritis, Enteritis and Diarrhoea	M F	3 1	— —	— —	— —	— —	— —	— —	— —	— —	1 —	1 —	1 1	
28 Nephritis and Nephrosis ...	M F	2 6	— —	— —	— —	— —	— 1	— —	1 —	— —	— —	— 2	1 3	
29 Hyperplasia of Prostate ...	M	12	—	—	—	—	—	—	—	—	—	4	8	
30 Pregnancy, Childbirth, Abortion	F	—	—	—	—	—	—	—	—	—	—	—	—	
31 Congenital Malformations ...	M F	2 3	1 3	— —	— —	1 —	— —	— —	— —	— —	— —	— —	— —	
32 Other defined and ill-defined Diseases	M F	47 56	7 1	1 —	— —	— —	1 1	— 1	1 6	8 2	6 9	10 9	13 27	
33 Motor Vehicle Accidents ...	M F	7 3	— —	— —	— —	1 1	3 1	1 —	— —	— —	1 —	— —	1 1	
34 All Other Accidents ...	M F	13 27	— —	— —	— —	1 —	— —	— —	1 —	— 1	2 3	2 3	7 20	
35 Suicide	M F	11 7	— —	— —	— —	— —	— —	1 1	3 1	4 —	2 3	— 2	1 —	
36 Homicide and Operations of War	M F	— 1	— —	— —	— —	— 1	— —	— —	— —	— —	— —	— —	— —	
TOTALS—All Causes ...	M F	685 794	8 4	2 —	— 2	4 3	4 4	5 4	15 14	54 23	110 71	221 187	262 482	
TOTALS—MALE AND FEMALE ...	—	1479	12	2	2	7	8	9	29	77	181	408	744	

PROPORTION OF DEATHS FROM PRINCIPAL CAUSES

CAUSE OF DEATH	1966		1967	
	Number	% of total deaths	Number	% of total deaths
Heart Disease including diseases of the circulatory system	563	39·13	617	41·72
Cancer	251	17·44	250	16·90
Vascular Lesions of nervous system... ..	232	16·12	209	14·13
Respiratory Diseases... ..	176	12·23	163	11·02
Violence, including suicide	87	6·05	69	4·66
Ulcer of Stomach and Duodenum	15	1·04	14	0·95
Tuberculosis, all forms	4	0·28	1	0·07
All Other Causes	111	7·71	156	10·55
Totals	1,439	100·00	1,479	100·00

DEATHS DUE TO VIOLENCE, Year 1967

Classification	Male	Female	Totals
Motor Vehicle Accidents	7	3	10
All other accidents	13	27	40
Suicide	11	7	18
Homicide and Operations of War	—	1	1
Totals	31	38	69

Age Groups	0—15 yrs.		15—65 yrs.		65 and over	
	M.	F.	M.	F.	M.	F.
Motor Vehicle Accidents	4	2	2	—	1	1
All other accidents	1	—	3	4	9	23
Suicide	—	—	10	5	1	2
Homicide and Operations of War	—	1	—	—	—	—
Totals	5	3	15	9	11	26

DEATHS

Numbers and Rates per 1,000 population and per 1,000 births—years 1958—1967

Year	Popu- lation	Male	Female	Total	Rate per 1,000 Popu- lation	Cor- rected for Age and Sex	INFANTS				Rate per 1,000 Illegiti- mate Births	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 Births	Rate per 1,000 Legiti- mate Births	Illegiti- mate Births				
1958	81760	646	777	1423	17.45	12.74	21	21	20	21	1	6	0.07	1	0.01
1959	81370	603	773	1376	16.91	12.51	21	20	18	18	3	7	0.08	1	0.01
1960	81350	648	783	1431	17.59	12.84	36	34	33	32	3	4	0.05	2	0.02
1961	81020	656	824	1480	18.27	13.34	19	17	16	16	3	4	0.05	—	—
1962	80730	661	831	1492	17.24	12.69	22	21	22	22	—	4	0.05	—	—
1963	80160	702	800	1502	18.74	13.12	29	26	28	27	1	10	0.12	—	—
1964	80080	641	819	1460	18.23	12.76	21	19	20	19	1	7	0.09	1	0.01
1965	79980	662	758	1420	17.76	11.72	25	23	20	20	5	3	0.04	1	0.01
1966	80000	636	803	1439	17.99	12.23	27	24	25	24	3	4	0.05	—	—
1967	79710	685	794	1479	18.56	12.44	14	12	12	11	2	1	0.01	—	—

CANCER

Localisation of Disease and Number of Deaths for years 1958 to 1967

Site	1958	1959	1960	1961	1962	1963	1964	1965	1966	1967
Stomach and Duodenum	27	32	30	28	38	24	33	26	33	24
Lung Bronchus	54 (Male 45) (Female 9)	37 (Male 32) (Female 5)	39 (Male 32) (Female 7)	51 (Male 43) (Female 8)	61 (Male 46) (Female 15)	64 (Male 54) (Female 10)	45 (Male 33) (Female 12)	61 (Male 43) (Female 18)	52 (Male 42) (Female 10)	58 (Male 50) (Female 8)
Breast	13	28	28	25	31	26	18	25	26	30
Uterus	11	14	5	10	13	9	7	10	8	12
Other Sites	99	127	115	98	113	112	122	118	121	118
Leukaemia	6	2	7	6	6	7	9	7	11	8
Total Deaths From Cancer	210	240	224	218	262	242	234	247	251	250
Total Deaths All Causes	1428	1376	1431	1480	1492	1502	1460	1420	1439	1479
% of Cancer Deaths	14.75	17.44	15.65	14.73	17.56	16.11	16.03	17.40	17.44	16.90

MATERNAL MORTALITY FOR YEARS 1958 TO 1967

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
1958	989	1019	—	—	—	—	—	—
1959	1031	1059	—	—	—	—	—	—
1960	1071	1094	—	—	1	0.91	1	0.91
1961	1091	1121	—	—	—	—	—	—
1962	1062	1079	1	0.93	—	—	1	0.93
1963	1096	1116	—	—	—	—	—	—
1964	1105	1129	—	—	1	0.88	1	0.88
1965	1098	1117	—	—	—	—	—	—
1966	1124	1151	—	—	—	—	—	—
1967	1135	1154	—	—	—	—	—	—

LIVE PREMATURE BIRTHS FOR YEAR 1967

Weight at birth	PREMATURE LIVE BIRTHS											PREMATURE STILL BIRTHS		
	Born in hospital			Born at home or in a nursing home					Transferred to hospital on or before 28th day					
				Nursed, entirely at home or in a nursing home			Died							
	Total births (1)	within 24 hours of birth (2)	In 1 and under 7 days (3)	in 7 and under 28 days (4)	Total births (5)	within 24 hours of birth (6)	in 1 and under 7 days (7)	in 7 and under 28 days (8)	Total births (9)	within 24 hours of birth (10)	in 1 and under 7 days (11)		in 7 and under 28 days (12)	Born In hospital (13)	Born at home or in a nursing home (14)
2 lb. 3 oz. or less	5	2	—	—	—	—	—	—	—	—	—	—	5	—
Over 2 lb. 3 oz. up to and including 3 lb. 4 oz.	6	—	—	—	—	—	—	—	1	—	—	1	—	—
Over 3 lb. 4 oz. up to and including 4 lb. 6 oz.	11	1	1	—	1	1	—	1	1	1	—	—	2	—
Over 4 lb. 6 oz. up to and including 4 lb. 15 oz.	19	—	1	—	1	1	—	—	1	1	—	—	—	—
Over 4 lb. 15 oz. up to and including 5 lb. 8 oz.	39	1	—	—	2	—	—	—	—	—	—	—	4	—
Totals	80	4	2	—	4	2	—	1	3	2	—	1	11	—

INFANT MORTALITY

Number of Deaths from Stated Causes at Various Periods Under 1 Year of Age for Year 1967

CAUSE OF DEATH	Under 1 day	1 day	2 days	3 days	4 days	5 days	6 days	7-13 days	14-20 days	21-28 days	28 days -2 mths.	2 mths.	3 mths.	4 mths.	5 mths.	6 mths.	7 mths.	8 mths.	9 mths.	10 mths.	11 mths.	Total under 1 year
Prematurity	3	—	1	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	5
Atelectasis	1	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	3
Congenital Malformations	—	1	—	—	—	—	—	—	1	—	1	—	—	—	—	—	—	—	—	—	—	3
Asphyxia due to congestion of lungs	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	1
Pneumococcal meningitis	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	1
Broncho pneumonia	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	1
TOTALS	4	3	1	—	—	—	—	1	1	—	2	—	—	—	—	—	1	1	—	—	—	14

CONGENITAL MALFORMATIONS

During the year, 17 cases of congenital malformations occurring in Southport children were reported, 10 males and 7 females. Of these 1 male and 2 females were stillborn, and 1 male and 2 females died.

The classification of these cases is shown below:

	LIVE		STILLBORN		DEATHS	
	M	F	M	F	M	F
CENTRAL NERVOUS SYSTEM						
Anencephalus	—	—	1	2	—	—
Hydrocephalus	1	1	—	—	—	1
Defects of Spinal Cord NOS	—	1	—	—	—	1
Spina Bifida	—	1	—	—	—	1
ALIMENTARY SYSTEM						
Cleft Lip	1	1	—	—	—	—
Cleft Palate	1	—	—	—	—	—
Intestinal atresia	1	—	—	—	1	—
URO-GENITAL SYSTEM						
Hypospadias	1	—	—	—	—	—
Other defects of male genitalia	1	—	—	—	1	—
LIMBS						
Reduction deformities	2	—	—	—	—	—
Polydactyly	1	—	—	—	—	—
Dislocation of hip	—	1	—	—	—	—
OTHER SYSTEMS						
Vascular defects of skin	1	—	—	—	—	—
Other defects of skin	1	—	—	—	—	—
Exomphalos	1	—	—	—	1	—
OTHER MALFORMATIONS						
Mongolism	—	1	—	—	—	—

The arrangements for the collection of this information work well, due largely to the good co-operation with the staffs of the maternity hospitals, to the Matrons of which I am particularly indebted.

CARE OF SICKNESS AND YOUNG CHILDREN
 The following table shows the number of cases of sickness and young children who were treated in the hospital during the year 1917.

SICKNESS		YOUNG CHILDREN	
Male	Female	Male	Female
10	15	20	25
15	20	25	30
20	25	30	35
25	30	35	40
30	35	40	45
35	40	45	50
40	45	50	55
45	50	55	60
50	55	60	65
55	60	65	70
60	65	70	75
65	70	75	80
70	75	80	85
75	80	85	90
80	85	90	95
85	90	95	100
90	95	100	105
95	100	105	110
100	105	110	115
105	110	115	120
110	115	120	125
115	120	125	130
120	125	130	135
125	130	135	140
130	135	140	145
135	140	145	150
140	145	150	155
145	150	155	160
150	155	160	165
155	160	165	170
160	165	170	175
165	170	175	180
170	175	180	185
175	180	185	190
180	185	190	195
185	190	195	200
190	195	200	205
195	200	205	210
200	205	210	215
205	210	215	220
210	215	220	225
215	220	225	230
220	225	230	235
225	230	235	240
230	235	240	245
235	240	245	250
240	245	250	255
245	250	255	260
250	255	260	265
255	260	265	270
260	265	270	275
265	270	275	280
270	275	280	285
275	280	285	290
280	285	290	295
285	290	295	300
290	295	300	305
295	300	305	310
300	305	310	315
305	310	315	320
310	315	320	325
315	320	325	330
320	325	330	335
325	330	335	340
330	335	340	345
335	340	345	350
340	345	350	355
345	350	355	360
350	355	360	365
355	360	365	370
360	365	370	375
365	370	375	380
370	375	380	385
375	380	385	390
380	385	390	395
385	390	395	400
390	395	400	405
395	400	405	410
400	405	410	415
405	410	415	420
410	415	420	425
415	420	425	430
420	425	430	435
425	430	435	440
430	435	440	445
435	440	445	450
440	445	450	455
445	450	455	460
450	455	460	465
455	460	465	470
460	465	470	475
465	470	475	480
470	475	480	485
475	480	485	490
480	485	490	495
485	490	495	500
490	495	500	505
495	500	505	510
500	505	510	515
505	510	515	520
510	515	520	525
515	520	525	530
520	525	530	535
525	530	535	540
530	535	540	545
535	540	545	550
540	545	550	555
545	550	555	560
550	555	560	565
555	560	565	570
560	565	570	575
565	570	575	580
570	575	580	585
575	580	585	590
580	585	590	595
585	590	595	600
590	595	600	605
595	600	605	610
600	605	610	615
605	610	615	620
610	615	620	625
615	620	625	630
620	625	630	635
625	630	635	640
630	635	640	645
635	640	645	650
640	645	650	655
645	650	655	660
650	655	660	665
655	660	665	670
660	665	670	675
665	670	675	680
670	675	680	685
675	680	685	690
680	685	690	695
685	690	695	700
690	695	700	705
695	700	705	710
700	705	710	715
705	710	715	720
710	715	720	725
715	720	725	730
720	725	730	735
725	730	735	740
730	735	740	745
735	740	745	750
740	745	750	755
745	750	755	760
750	755	760	765
755	760	765	770
760	765	770	775
765	770	775	780
770	775	780	785
775	780	785	790
780	785	790	795
785	790	795	800
790	795	800	805
795	800	805	810
800	805	810	815
805	810	815	820
810	815	820	825
815	820	825	830
820	825	830	835
825	830	835	840
830	835	840	845
835	840	845	850
840	845	850	855
845	850	855	860
850	855	860	865
855	860	865	870
860	865	870	875
865	870	875	880
870	875	880	885
875	880	885	890
880	885	890	895
885	890	895	900
890	895	900	905
895	900	905	910
900	905	910	915
905	910	915	920
910	915	920	925
915	920	925	930
920	925	930	935
925	930	935	940
930	935	940	945
935	940	945	950
940	945	950	955
945	950	955	960
950	955	960	965
955	960	965	970
960	965	970	975
965	970	975	980
970	975	980	985
975	980	985	990
980	985	990	995
985	990	995	1000

Section II

PERSONAL HEALTH SERVICES

PERSONAL HEALTH SERVICES	
10	15
15	20
20	25
25	30
30	35
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45	50
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785	790
790	795
795	800
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805	810
810	815
815	820
820	825
825	830
830	835
835	840
840	845
845	850
850	855
855	860
860	865
865	870
870	875
875	880
880	885
885	890
890	895
895	900
900	905
905	910
910	915
915	920
920	925
925	930
930	935
935	940
940	945
945	950
950	955
955	960
960	965
965	970
970	975
975	980
980	985
985	990
990	995
995	1000

CARE OF MOTHERS AND YOUNG CHILDREN

Ante-Natal Care

A weekly Ante-Natal Clinic was held at 44 Hoghton Street during 1967 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. A. C. Wilson, one of the Obstetric Consultants 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 routine measures.

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

STATISTICS FOR YEAR 1967

(i) No. of women who attended the clinic for the first time during the year:—		
St. Katharine's Maternity Hospital cases	...	53
District cases	...	2
Total		55
(ii) No. of women included in (i) above who were sent by their family doctor or general practitioner obstetrician		25
No. of attendances made by mothers during the year:—		
St. Katharine's Maternity Hospital cases	...	281
District cases	...	2
Total attendances during year		283
No. of sessions held by hospital medical staff during the year		51
District Midwives' Sessions:		
at 44 Hoghton Street clinic	...	49
at Clinics held in general practitioners' surgeries	...	187

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 Christiana Hartley Maternity Hospital. The Clinic is also conducted by Mr. A. C. Wilson, the Consultant Obstetrician.

STATISTICS FOR YEAR 1967

No. of women who attended the clinic for the first time during the year ...	594
No. of attendances made by mothers during the year	696
No. of sessions held by hospital medical staff during the year	48
No. of sessions by health visitors during the year	48

There is a growing tendency for mothers to come home from maternity hospital before the tenth day after the birth.

The number of mothers discharged before the tenth day in 1967 was 535, as compared with 519 during 1966.

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 special incubator 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 Nursing Officer 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 Nursing Officer 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.

Child Welfare Centres

There are seven 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 1967 and their efforts and enthusiasm contributed in no small measure to the steady progress which was maintained throughout the year.

The seven Welfare Centres are so situated that they provide a convenient service for mothers living in any part of the town.

One session each week is held at the Centres at Ainsdale, Crossens, Derby Road and Marshside and two sessions each week are held at the Centres at Hampton Road, Lincoln House and Poulton Road.

It is the Council's policy to replace all temporary Child Welfare Centres by purpose-built Centres. The ones still to be dealt with in this way are those which are held in rented Church premises in Derby Road and Marshside Road.

STATISTICS FOR YEAR 1967

	CHILD WELFARE CENTRE							TOTAL
	Marsh-side	Hamp-ton Road	High Park	Lincoln House	Cros-sens	Derby Road	Ains-dale	
No. of children who attended during the year who have not attended previously this year:								
Born in 1967	81	190	137	129	69	136	182	924
1966	98	165	140	134	87	106	147	877
1962-65	153	243	241	338	139	204	274	1,592
TOTALS	332	598	518	601	295	446	603	3,393
Total attendances during the year	1,879	2,793	2,770	3,065	1 780	2,229	2,916	17,432
No. of sessions during the year	48	97	95	96	47	48	47	478
Average attendances per session	39	29	29	32	38	46	62	36
No. of children referred for special treatment or advice as a result of a medical examination ...	—	4	2	4	—	2	3	15
No. of children placed on "at risk" register	8	41	25	26	7	44	20	171
No. of sessions by:								
Medical Officers	47	95	93	90	47	48	47	467
General Practitioners employed on sessional basis	—	—	—	—	—	—	—	—
Hospital Medical Staff Health Visitors (with doctor)	96	214	190	192	96	136	95	1,019
Health Visitors (without doctor)	1	2	2	6	—	—	—	11

Dental Care and Treatment

Sessions are held each week at 2 Church Street 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 nursing mothers, arrangements are made with private dental mechanics in the town.

STATISTICS FOR YEAR 1967

Attendances and Treatment

	No. of Attendances during the year	No. of Courses of Treatment Com-menced during the year	No. of Courses of Treatment Com-pleted during the year
Children aged under 5	643	200	164
Expectant and Nursing Mothers	60	27	14

Classification of treatment provided

	Fillings	Extrac-tions	General Anaes-thetics	Patients X-rayed	Prophy-laxis	Teeth Other-wise Con-served	Teeth Root Filled	Crowns and Inlays	No. of Den-tures Sup-plied
Children aged under 5	282	115	50	—	3	72	/	/	/
Expectant and Nursing Mothers	28	16	1	1	6	/	—	—	1

DENTAL OFFICERS' SESSIONS

The number of dental officer sessions (i.e. equivalent complete half days) devoted to maternity and child welfare patients during the year was 96.

Physiotherapy

Physiotherapy classes were held throughout the year for expectant mothers and also for mothers attending the post-natal clinic.

Statistics for Year 1967

	Ante-Natal	Post-Natal
No. of women who attended for the first time during the year:		
St. Katharine's Maternity Hospital	66	498
Christiana Hartley Maternity Hospital	64	750
District cases	9	1
Attended Physiotherapy only	25	10
Total No. of cases	164	1,259
No. of attendances during the year	382	1,288
No. of sessions held by physiotherapist during the year ...	69	68

Care of 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 Nursing Officer, 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 60 new cases and the Health Committee paid the maintenance costs in voluntary homes for 12 mothers during the ante and post-natal period.

Further details about the 60 new cases dealt with by the Moral Welfare Worker during 1967 are shown below.

Expectant unmarried mothers	51
Married women expecting illegitimate children	9
	60
First pregnancy	54
Second pregnancy	5
Third pregnancy	1
	60
Placed for adoption	30
Kept by mother	24
Placed in the Church of England Children's Society Nursery	3
Died	3
	60

National Welfare Foods

Statistics for Year 1967

Quantities Sold	National Dried Milk	Orange Juice	Cod Liver Oil	Vitamin 'A' & 'D' Tablets
	Tins	Bottles	Bottles	Packets
HEALTH DEPARTMENT—				
Counter Issues	1,357	5,524	278	813
Issues to National Health Service Institutions	18	36	—	—
Issues to Day Nurseries	—	144	126	—
Total Sales from Health Department ...	1,375	5,704	404	813
CHILD WELFARE CENTRES—				
Ainsdale	263	3,993	213	179
Lincoln House	121	2,318	215	147
Crossens	56	1,119	50	45
Poulton Road	106	1,049	85	57
Hampton Road	215	1,796	114	234
Marshside Road	108	1,546	65	100
Derby Road	108	824	80	42
Total Sales from Child Welfare Centres ...	977	12,645	822	804
GRAND TOTALS	2,352	18,349	1,226	1,617

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 daily fees which had been charged since 1st June, 1966, viz: 2/- minimum and 11/6 maximum were amended to 2/6 minimum and 14/- maximum from 7th August, 1967.

These fees, however, may be reduced in cases of financial hardship and at the end of the year, the average daily payment made by the mothers was 5/10d. for each child.

It is pleasing to note that three of the four students who completed the two year course which commenced in September, 1965 and terminated in 1967, were successful in obtaining the Certificate of the National Nursery Examination Board. The remaining student being successful at the second attempt in November, 1967.

The Nursery Nurses' Training Scheme was continued in 1967 in conjunction with the Education Committee with 4 students who were appointed for the two year course commencing in September, 1967.

Statistics for Year 1967

	Southport	Bedford Park	Totals
Number of places provided	60	40	100
Total attendances	13190	9123	22313
Number of days open	253	253	253
Average daily attendance	52	36	88

MIDWIFERY

District Midwifery

Three full-time and one part-time midwives are employed. All the staff are fully qualified to administer analgesia, i.e. gas and air and trilene, and they have the necessary apparatus. Patients wishing to book for home confinement may do so at the ante-natal clinic, 44 Houghton Street, or directly with the midwife for the area in which they live. Regular visits are made by the midwives whether the mother has engaged a doctor to attend under the Maternity Medical Service or not. Arrangements can also be made for all patients to have routine blood tests carried out. The domiciliary midwives also visit patients who have been delivered in hospital but have been discharged home before the tenth day. Notification of discharges of these mothers is sent to the Health Department by the Matrons of the maternity hospitals.

A number of the doctors conducting their own ante-natal clinics have the assistance of the domiciliary midwives. In this way a firm liaison is formed between doctor, midwife and patient, which is invaluable to the patient's welfare.

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.

Statistics for Year 1967

No. of confinements attended by district midwives:								
Doctor not booked	...	...	...	...	...	...	...	1
Doctor booked...	...	...	...	...	...	...	...	82
TOTAL								83
Premature Babies (5½ lb. or under):								
No. born at and being nursed at home	...	...	...	...	...	...	...	—
No. born at home and transferred to hospital	...	...	...	...	...	...	...	2
TOTAL								2
No. of mothers delivered in hospitals and other institutions but discharged and attended by district midwives before tenth day								535
No. of home visits made by district midwives								4623
No. of supervisory visits								27

Midwives in Private Practice

During the year two private midwives notified their intention to practise on the district, but they did not deal with any confinements.

Maternity Nursing Homes—There was one delivery in a private nursing home during the year.

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 1967. These figures are for residents and non-residents of Southport.

	Christiana Hartley Maternity Hospital	St. Katharine's Maternity Hospital	TOTAL
(1) Number of patients	990	462	1452*
(2) Number of patients in (1) above for whom medical aid was summoned ...	219	4	223
(3) Number of practising midwives on the staff at the end of the year... ..	16	10	26†
(4) Number of midwives in (3) above who are qualified to administer gas and air analgesia	16	10	26

*Includes 968 Southport residents and 484 non-residents.

†16 full-time and 10 part-time.

Distribution of Maternity Cases

The following table shows the percentage of maternity cases dealt with during 1967 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.

	1967		1966	
	No. of Cases	%	No. of Cases	%
District				
Municipal Midwives	83	7.9	98	9.4
Private Midwives	—	—	—	—
TOTALS (a)	83	7.9	98	9.4
Institutions				
Christiana Hartley Mat. Hospital	654	62.2	653	62.3
St. Katharines Maternity Hospital	314	29.8	294	28.1
Nursing Homes	1	0.1	2	0.2
Southport Infirmary	—	—	—	—
TOTALS (b)	969	92.1	949	90.6
GRAND TOTALS (a) and (b)	1052	100.0	1047	100.0

Training for the Second Part of the Certificate of the Central Midwives Board

During the year, midwifery training of this kind was continued. The scheme is a combined one, operated by the Southport and District Hospital Management Committee and the Southport and Preston Local Authorities. Some of the students do their domiciliary training in Southport and some in Preston. The school has done well but there are certain inherent difficulties, one of which is the small number of Southport mothers who elect to have their babies at home.

Four pupils completed district training in the area during the year.

HEALTH VISITING

The present establishment consists of a Superintendent Nursing Officer, who also supervises the school nursing work, 1 Senior Health Visitor, 3 School Nurses, 1 Tuberculosis Health Visitor, 2 Nurses for Elderly People, 1 State Registered Nurse, 14 Health Visitors/School Nurses and 2 Student Health Visitors, making a total of 25.

The Health Visitor has duties in connection with the promotion of the health of the whole family though she exercises her influence chiefly through the mothers and young children. A most important aspect of her work lies in visiting homes where she can apply her skills in the physical, mental and social fields by helping to solve the difficulties and problems which afflict all families in some way. She has an excellent opportunity to do very valuable work in the preventive medical field and is slowly becoming more appreciated by her medical colleagues in hospital and general practice. As doctors and social workers become more closely concerned with individual and community medico-social problems so will the need for attachment of Health Visitors to general practitioners' surgeries and hospital clinics grow. Some of the Health Visitors' best work is better known to the public than to the majority of the medical profession because it is carried out in the Child Welfare Centres where few general practitioners or hospital doctors work. The attendances at the Welfare Centres, 17,432 as against 15,785 in 1966, are an indication of the concern that young mothers feel to safeguard the health of their children and of their need for guidance in sensible methods of child care.

Special attention has had to be given during the year to work with problem families and the aged.

Regular in-service training was given to staff by means of lectures and films. All Health Visitors are required to go to a refresher course at least once every five years. They also pay regular visits to special clinics of various kinds. Students working for a number of qualifications were attached to Health Visitors for part of their training and came from—

Southport Infirmary, Greaves Hall Hospital, Seafeld College, Crosby, Newton-le-Willows Technical College, Birkdale, Meols Cop and Stanley Secondary Modern Schools and also the High School for Girls.

Health Education is part of the regular work of the Health Visitor and this year teaching in Mothercraft and Hygiene in schools, lecturing to mothers in Child Welfare Centres and to young people in youth clubs has been carried out. Schoolgirls are tutored for the Child Care Examination of the National Association for Maternal and Child Welfare at four senior schools.

An increasing amount of direct help is being provided by the Health Visitors in various ways in the practices of some doctors and it is hoped that this aspect of the work will undergo further development.

Health Visiting to the elderly is a growing service and the need outruns the provision.

Supplementary high protein food is provided on sale to pensioners at the Welfare Centres.

Statistics for year 1967

No. of children born in 1967 visited	...	...	...	...	...	...	1,224
No. of children born in 1966 visited...	...	...	...	...	...	...	1,055
No. of children born in 1962-65 visited	...	...	...	...	...	...	2,400
Total number of children	...	...	...	...	...	...	4,679
Persons aged 65 or over visited	...	...	...	...	...	...	1,568
Mentally disordered persons visited	...	...	...	...	...	...	6
Expectant Mothers visited	...	...	...	...	...	...	398
Other cases visited	...	...	...	...	...	...	81
Persons, excluding Maternity cases, discharged from hospital (other than mental hospitals)	...	...	...	...	...	...	125
Number of tuberculous households visited by tuberculosis visitor	...	...	...	...	...	...	101
Total no. of effective visits made by Health Visitors & Nurses	...	...	...	...	...	...	21,815

Attendances at Clinics and Centres by Health Visitors and Nurses							No. of Attend'ces
Child Welfare Centres	...	...	...	...	...	...	1,042
Post-Natal Clinic, Christiana Hartley Maternity Hospital	...	...	...	...	...	...	49
B.C.G. Clinics	...	...	...	...	...	...	57
Geriatric Out-Patients' Clinic, Promenade Hospital	...	...	...	...	...	...	169
Paediatric Clinic, Southport Infirmary	...	...	...	...	...	...	105
V.D. Clinic, Southport Infirmary	...	...	...	...	...	...	26
Ante-Natal Clinic, St. Katharines Maternity Hospital	...	...	...	...	...	...	34
Mothercraft—Christiana Hartley Maternity Hospital	...	...	...	...	...	...	34
Cervical Cytology Clinics	...	...	...	...	...	...	18
General Practitioners: surgeries	...	...	...	...	...	...	124
Poliomyelitis Vaccination Clinics	...	...	...	...	...	...	2
Total							1,660

Screening for Phenylketonuria by urine and blood tests.			
No. of Tests	No. positive to screening Tests	Results of further investigation	
		Phenylketonuria confirmed	Phenylketonuria not confirmed
1131	nil	nil	nil

During the year a great effort has been made in conjunction with the staff of the Maternity Hospitals, to test all babies born for phenylketonuria by both the "Phenistix" and "Guthrie" tests to see which test is of most value. It is likely that the "Guthrie" test will be used in future.

HOME NURSING

The demand for the services of the district nurses increased during the year and the total number of visits was 10% more than the total in 1966. Further improvements were made in the service during 1967 in an attempt to provide more efficient help for the patients in an as economical a way as possible.

- (a) **Staff.** The staff was increased by two bath attendants who were appointed in September and their help has been invaluable in allowing the trained nurses to use their skills to the full and not to have to use their time on non-nursing work. One of the state registered nurses attended a refresher course in Leeds and one of the state enrolled nurses attended an instruction course at Liverpool during the year. A further nurse commenced her Queen's training in September and was still in training at the end of the year.

The work of the nurses was rearranged during the year and they now work in teams and use the child welfare centre as their office accommodation. By the end of the year teams of nurses were working from the child welfare centres at Crossens, Poulton Road, Hampton Road and Ainsdale, while the team for the central part of the town continued to work from 52 Houghton Street. This arrangement has enabled unnecessary travelling time to be eliminated and has also improved liaison between the district nurses and the health visitors who also use the child welfare centres.

- (b) **Equipment.** The use of disposable equipment was increased during the year and now includes catheters, dressing packs, enemas, syringes and spirit swabs.
- (c) **Injection Clinic.** In February an injection clinic was started at the Nurses' Home, 52 Hoghton Street, and clinic sessions are held every Monday and Thursday from 11 a.m. to 12.30 p.m. The total number of sessions held during this period was 93 and the total number of attendances made by patients was 1682.
- (d) **Transport.** During 1967 further improvements were made in the transport arrangements and the aim is to enable all nurses to either receive motor car allowances or use one of the cars which are available for the home nursing service. By the end of the year this aim had been accomplished with the exception of one nurse who was still using her bicycle for her official duties.
- (e) **Marie Curie Foundation Welfare Scheme for Patients Suffering from Cancer.** In April the local authority began to take advantage of the Marie Curie Foundation Welfare Scheme including the day and night service. By the end of the year 16 patients had been helped by the day and night nursing service at a total cost to the Marie Curie Foundation of £470. In addition 4 other patients received help from the welfare grant fund, the total expenditure being £41 14s. 9d. This scheme has been of great help to the district nurses during the year and the day and night nursing service has enabled patients to continue to be nursed at home who otherwise may have had to be admitted to hospital.

Statistics for year 1967

Total no. of new patients visited during the year (i.e. patients who have not been previously visited this year)	...	...	...	...	2,399
No. of patients who were aged:					
under 5 years at time of first visit this year...	...	...	...	...	29
over 65 years at time of first visit this year	...	...	...	...	1,683
Total no. of visits made by nurses during the year	...	...	...	...	77,604

STAFF EMPLOYED

Deputy Superintendent.
 19 State Registered Nurses.
 3 State Enrolled Nurses.
 2 Bath Attendants.
 Total—25

VACCINATION AND IMMUNISATION

When a baby has attained the age of 3 months, a letter is sent to the mother strongly advising her to arrange for the immunisation and vaccination of her child at the appropriate times against diphtheria, whooping cough, tetanus, poliomyelitis and smallpox. In addition, the Health Visitors are required to visit all mothers whose babies have not been immunised or vaccinated and to make every effort to ensure that the infant is protected against these diseases. 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 are the suggested ages when children may be vaccinated and immunised against certain diseases:—

<i>Age</i>	<i>Vaccine</i>	<i>How Given</i>
1 to 6 months	Diphtheria, Tetanus and Whooping Cough	Three injections at intervals of four to six weeks.
7 to 11 months	Poliomyelitis	Three doses by mouth at intervals of four to eight weeks.
18 to 21 months	Diphtheria, Tetanus and Whooping Cough	One 'booster' injection.
1 to 2 years	Smallpox	One injection.
4 to 5 years	Diphtheria and Tetanus	One 'booster' injection.
(School entry)	Poliomyelitis	One dose by mouth.
8 to 12 years	Diphtheria and Tetanus	One 'booster' injection.
Over 12 years	Smallpox	One re-vaccination injection.
Normally at 12 years or over	B.C.G. Vaccination against Tuberculosis	One injection if this is found necessary after a skin test.

Information with regard to B.C.G. protection against tuberculosis will be found on page 55 of this report.

In 1967, 11 men working at the public abattoir were vaccinated against anthrax.

In February, 1966 the Ministry of Health sent a circular to Local Authorities saying that measles vaccines had been developed to an extent which justified their being made available to doctors who wished to use them for their patients, but that it was not intended that Authorities should embark on a programme of general measles vaccination.

After discussing the information in this circular with the Local Medical Committee it was agreed that a limited measles vaccination scheme should be offered to parents of young children attending day nurseries, or who were in institutions of a kind where there is likely to be a high risk of infection, or who, in the opinion of their family doctors, were at special risk.

At the end of the year 23 children had been vaccinated against measles by the staff of the Health Department and 53 children had been vaccinated by their general practitioners.

Statistics for year 1967

Smallpox

Age at date of Vaccination	No. of persons aged under 16 Vaccinated (or revaccinated during period)		Number of cases specially reported during period		
	Number vaccinated	Number revaccinated	Generalised Vaccinia	Post-Vaccinal Encephalomyelitis	Death from other complications of vaccination
0-3 months	3	—	—	—	—
3-6 months	2	—	—	—	—
6-9 months	3	—	—	—	—
9-12 months	17	—	—	—	—
1	496	—	—	—	—
2-4	88	12	—	—	—
5-15	66	35	—	—	—
TOTALS	675	47	—	—	—

VACCINATION AND IMMUNISATION

Statistics for year 1967

Diphtheria, Whooping Cough, Tetanus and Poliomyelitis

Primary Courses

Type of vaccine or dose	Year of birth					Others under age 16	Total under age 16
	1967	1966	1965	1964	1960-63		
1 Quadruple, Diphtheria, Whooping Cough, Tetanus and Poliomyelitis ...	—	—	—	—	—	—	—
2 Triple Diphtheria, Whooping Cough and Tetanus ...	425	482	21	8	10	1	947
3 Diphtheria/Whooping Cough ...	—	—	—	—	—	—	—
4 Diphtheria/Tetanus	1	1	1	2	8	4	17
5 Diphtheria ...	—	—	—	—	—	—	—
6 Whooping Cough ...	—	—	—	—	—	—	—
7 Tetanus ...	—	—	—	—	—	54	54
8 Salk (Poliomyelitis)...	—	—	—	—	—	—	—
9 Sabin (Poliomyelitis—Oral) ...	148	620	75	20	21	44	928
10 Lines 1+2+3+4+5 (Diphtheria) ...	426	483	22	10	18	5	964
11 Lines 1+2+3+6 (Whooping cough) ...	425	482	21	8	10	1	947
12 Lines 1+2+4+7 (Tetanus) ...	426	483	22	10	18	59	1018
13 Lines 1+8+9 (Polio)	148	620	75	20	21	44	928

Reinforcing Doses

Type of vaccine or dose	Year of birth					Others under age 16	Total under age 16
	1967	1966	1965	1964	1960-63		
1 Quadruple, Diphtheria, Whooping Cough, Tetanus and Poliomyelitis	—	—	—	—	—	—	—
2 Triple, Diphtheria, Whooping Cough and Tetanus	—	137	331	19	271	74	832
3 Diphtheria/Whooping Cough	—	—	—	—	—	—	—
4 Diphtheria/Tetanus ...	—	13	20	1	260	67	361
5 Diphtheria	—	1	—	—	15	43	59
6 Whooping Cough ...	—	—	—	—	—	—	—
7 Tetanus	—	—	1	—	—	1	2
8 Salk (Poliomyelitis) ...	—	—	—	—	—	—	—
9 Sabin (Poliomyelitis—Oral)	—	3	10	4	545	60	622
10 Lines 1+2+3+4+5 (Diphtheria)	—	151	351	20	546	184	1252
11 Lines 1+2+3+6 (Whooping cough) ...	—	137	331	19	271	74	832
12 Lines 1+2+4+7 (Tetanus)	—	150	352	20	531	142	1195
13 Lines 1+8+9 (Polio)	—	3	10	4	545	60	622

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 22 men and 2 women 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 6 ambulances and 3 sitting case cars.

Every endeavour continues to be made to keep pace with demand. Any case which may not appear to necessitate an ambulance is checked and the fullest use is made of trains, joint journeys carrying several patients, and other Authorities' ambulances. Unfortunately a large amount of "out of town" work is done where the patient can travel by no means other than ambulance and this restricts one vehicle to one case for several hours, sometimes a whole day, leaving the ambulances left in the Borough working at increased pace to cope with the remainder of the cases.

Railway facilities are used whenever possible but the curtailment of railway services and also the design of new coaches which are difficult for the accommodation of stretcher cases and also for the reservation of compartments for sick persons, will reduce the availability for rail travel in future.

The Chief Officer, the Secretary of the Hospital Management Committee and his staff, meet periodically to solve mutual problems affecting the Service. These meetings, and good liaison with Family and Hospital Doctors have helped to keep up a satisfactory and efficient service.

Statistics for years 1963 to 1967

	1963	1964	1965	1966	1967
No. of patients	43,135	43,546	43,776	40,207	42,016
Other work	994	1,002	1,267	1,216	1,208
	44,129	44,548	45,043	41,423	42,219
No. of miles	137,006	142,520	153,785	154,314	150,758

PREVENTION OF ILLNESS—CARE AND AFTER-CARE

General

The general work done in regard to the 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.

Nursing Equipment

The following equipment is available on loan.

Air Rings	Dunlopillo mattresses
Backrests	Electric Blanket
Bath Aids	Electric Page Turner
Bath Seats	Elsan Closets
Beds—Cardiac	Enuresis Alarms
Beds—Hospital	Incontinence Pads and Liners
Bed Cradles	Helping Hands
Bed Pans	Lifting Gear
Bed Table	Polythene Sheets
Bells	Portable Oxygen Apparatus
Cantilever Table	Toilet Aids
Commodes	Urinals
Cot Sides	Walking Sticks
Crutches	Wheelchairs

A small charge is made for the more expensive kinds of equipment but this charge may be reduced or cancelled in cases of hardship.

During 1967 nursing equipment was supplied to 969 patients as compared with 848 in the previous year. This increase was mainly due to the large number of elderly patients who had to be supplied with wheelchairs, commodes and incontinence pads. Many of these elderly patients were referred to the Department for this kind of help after being seen by the Consultant in charge of the Geriatric Clinic at the Promenade Hospital.

The following table shows the number of patients helped during the last five years.

Year	No. of patients provided with equipment
1963	282
1964	507
1965	763
1966	848
1967	969

Incontinence Pads

During 1967, 51,464 pads and 5,370 liners were supplied to patients. The pads are only supplied at the request of either the patient's own doctor, the district nurse or by the two nurses responsible for the geriatric work. No charge is made to patients who are receiving supplementary pensions, but a charge of 3/6d. per week is made to other patients; this charge may be reduced or cancelled where there is financial hardship.

The increase in the demand for these nursing aids reflects the fact that a large number of incontinent patients had to be looked after on the district and indicates the way in which a service of this kind can increase in a town like Southport.

The disposal of the used pads has caused some difficulties and either the district nurse or the geriatric nurse has been made responsible for ensuring that satisfactory disposal arrangements are available for every patient using the service. The service has been of great help, both to the patients and relatives and also to the district nurses, and has made it possible for a number of these patients to be nursed at home when they would otherwise have had to have been admitted to hospital,

Chiropody for the Elderly

The chiropody service for the elderly continued to be provided by the Southport Old People's Welfare Committee as agents of the Local Health Authority. The service is available for Southport residents who are 60 years of age or over and who cannot afford to pay for private treatment. Those who are receiving supplementary pensions pay 1/6d. per treatment; all other patients pay 3/- for treatments at the clinic at 44 Hoghton Street and 5/- for treatments in their own homes. Home treatments are only provided for patients when there is some evidence to confirm that the person concerned is not able to come to the clinic.

The clinic sessions at 44 Hoghton Street are held on Mondays, Tuesdays, Wednesdays and Thursdays and two chiropodists are on duty during the mornings and afternoons. The total number of treatments given during 1967 was 8,205 as compared with 7,872 in the previous year.

Statistics for years 1966 and 1967

	Year 1967	Year 1966
No. of clinics held	717	693
No. of attendances made by patients	6615	6505
Average attendance per clinic session	9.2	9.3
No. of treatments in patients' own homes	1590	1367

Chiropody for Expectant Mothers and Handicapped Persons

The arrangements continued throughout the year whereby expectant mothers and handicapped persons in need of chiropody treatment and unable to afford to go to a private chiropodist, could be referred to Mr. W. Rogans who is also responsible for the School Health Service Chiropody Clinic.

During 1967, five physically handicapped persons made 52 attendances at Mr. Rogans' clinic. No expectant mothers were referred during the year.

Sickroom Helpers Scheme

Alongside the Home Help Service is the Sickroom Helpers Scheme. This is a little known service which is not often required, and there are only 4 casual sickroom Helpers on the staff. The purpose of these helpers is to give relief during the night to relatives of patients who are being nursed at home usually while 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 3/3 per hour but this may be reduced or cancelled having regard to the financial circumstances of the person concerned.

During 1967, sickroom help was provided for 15 patients, as compared with 24 in the previous year. The number of hours worked by the helps during the year was 483.

Co-operation with Hospitals

Throughout the year, the Medical Social Workers 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.

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 follow:—

Post-natal clinic held at Christiana Hartley Maternity Hospital.

Geriatric clinic held at the Promenade Hospital.

Paediatric clinic held at the Southport Infirmary.

V.D. clinic held at the Southport Infirmary.

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 Assistant Medical Officers helped with the fever hospital work.

By arrangement with the Liverpool Regional Hospital Board, Dr. Leeming, the Consultant Chest Physician, gave part 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.

Convalescent Home Care

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 Hospital Authority's arrangements. The period is usually two weeks.

During the year, 14 Women and 1 man were sent to convalescent homes, the details being as follow:—

Disability

Anxiety State

Anaemia and Arthritis

Bronchitis

Arthritis

Hemiplegia

Chronic Bronchitis

General Debility

Anaemia

Diverticulitis of the Descending Colon

General Debility

General Debility

Following Radical Mastectomy

General Debility

Following Coronary Thrombosis

Bronchitis and Asthma

Marriage Guidance

During the year the Health Committee agreed to renew the annual Grant to the Merseyside Marriage Guidance Council on which the Southport Corporation is represented by one of the lady members of the Health Committee.

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 voluntarily do many personal things for them such as visiting them if in hospital. The hours worked are as follow:—

Monday to } 9 a.m. to 12 noon. Saturday 9 a.m. to 12 noon.
Friday } 2 p.m. to 5 p.m., but it is sometimes possible to make other arrangements.

The cost of the Service is 4s. 6d. per hour but this charge may be reduced or cancelled, where there is financial hardship.

Statistics for year 1967

	Help for persons					Total No. of cases	Total hours worked by helps during the year
	aged 65 or over on first visit in 1967	aged under 65 on first visit in 1967					
		Chronic sick and tuberculous	Mentally disordered	Maternity	Others		
Number of cases	855	42	3	41	75	1,016	91,101

No. of Staff employed at end of year	Whole time	Part time		Total Whole time equivalent
		No.	Whole time equivalent	
Home Help Organiser	—	1	.66	.66
Home Helps	2	93	50	52
No. of visits to homes by Organiser during the year				1,451
No. of persons interviewed at office during the year				1,055

MENTAL HEALTH SERVICE

The work of this service was seriously impaired during the year by the illness of the Senior Mental Welfare Officer. As a result though it was possible to deal with all the admissions to hospital, the number of after care visits which the Mental Welfare Officers made was reduced as compared with the previous year.

It is not yet clear how much this service must be developed, to comply with all the provisions of the Mental Health Act, 1959 but it is clear that the local authority must play an increasing part in this. The after care of patients who have been mentally ill takes a great deal of time and needs highly trained staff. Dr. Howie continued to give consultant psychiatric oversight to the after care work.

The Meadows Home has had a successful year, a number of the residents being able to work full-time.

The Springbrook Home provides a very satisfactory haven for a small number of children.

"Brookdale" the Home for thirty elderly mentally infirm people was opened early in the year and, in spite of staffing difficulties, quickly became full. There is good liaison with the staff of the mental hospital from where about half the residents were admitted.

A major alteration was the division of the Combined Training and Industrial Centre into the Junior Training Centre and the Adult Training and Industrial Centre which took place on 1st June, 1967. The two Groups must continue to use the existing building at the moment but it is hoped eventually to build a new Centre to provide for the adults.

Mental Illness

Number of patients dealt with during 1967:

	Males	Females	Total
Patients:			
No. of admissions and re-admissions to hospital (Mental Health Act, 1959):			
— as informal patients (Sec. 5)	82	132	214
— for observation (Sec. 25)	34	61	95
— for treatment (Sec. 26)	3	5	8
— emergency application (Sec. 29)	26	35	61
— by court order (Sec. 60)	1	—	1
Total no. of admissions and re-admissions ...	146	233	379
No. of patients already in hospital under compulsory detention accepted as informal patients	31	41	72
No. of patients transferred from the Ormskirk & District General Hospital to other hospitals	3	6	9
No. of day patients taken to Ormskirk & District General Hospital	3	3	6
No. of patients referred to Health Department re acute mental illness... ..	207	408	615
After-Care Clinic:			
No. of Consultant Psychiatrist's After-Care Clinics at 44 Hoghton Street	—	—	69
No. of patients seen at After-Care Clinics	38	386	424
Work done by Mental Welfare Officers:			
No. of home visits re acute mental illness	443	813	1256
No. of domiciliary after-care visits	130	245	375
No. of visits to patients in hospital	—	—	318
No. of patients interviewed at the Office	107	186	293
No. of visits to the Psychiatric Clinic at the Southport Infirmary	—	—	130

Mental Illness

Occupational Therapy Work done during year 1967.

No. of patients				
No. on register at beginning of the year	...	...	...	66
No. added during the year	...	...	...	93
				159
No. deducted during the year	...	...	...	122
				37
No. on register at end of the year	...	...	...
No. of Home Visits				695
Sessions				
Consultant Psychiatrist's After-Care Clinic—44 Houghton Street				14
Psychiatric Social Club—Hampton Road Centre				60
Craftwork—Lincoln House Centre				46
Craftwork—44 Houghton Street				77
Industrial Therapy—44 Houghton Street				148
Drama Group—44 Houghton Street				14
Brookdale Home				15
Total No. of Sessions attended by Staff				374
No. of attendances made by patients				
Psychiatric Social Club—Hampton Road Centre				1,294
Craftwork—Lincoln House Centre				355
Craftwork—44 Houghton Street				229
Industrial Therapy—44 Houghton Street				1,013
Drama Group—44 Houghton Street				47
Total No. of Attendances				2,938

Mental Subnormality

Cases dealt with in 1967:

Number of cases notified to the Department:—				
from the Local Education Authority under Sec.				
57 Education Act, 1944 (amended) ...				1
from other sources				3
Total ...				4
Number of cases admitted to hospital:—				
for permanent care				3
for short term care				4
Total ...				7
Number of cases placed under Guardianship ...				1
Work done by Mental Welfare Officers:				
Number of patients seen at the Office				85
Number of domiciliary visits				129
Number of visits to the Training and Industrial Centre and Residential Homes... ..				112

Combined Junior and Adult Training and Industrial Centre

Report for period 1st January 1967 to 31st May, 1967

Number of cases on Register at 1st January	66
Number of cases added to Register up to 31st May	10
	76
Number of cases taken off Register up to 31st May	3
	73
Number of cases on Register at 31st May	
Number of sessions held during period	95
Number of attendances at Centre during period	5727
Average attendance per session	60

Junior Training Centre

Report for period 1st June 1967 to 31st December 1967

Number of cases on Register at 1st June	36
Number of cases added to Register up to 31st December	5
	41
Number of cases taken off Register up to 31st December	6
	35
Number of cases on Register at 31st December	
Number of sessions held during period	115
Number of attendances at Centre during period	3344
Average attendance per session	29

Adult Training and Industrial Centre

Report for period 1st June, 1967 to 31st December, 1967—

Number of cases on Register at 1st June	37
Number of cases added to Register up to 31st December ...	4
	41
Number of cases taken off Register up to 31st December ...	2
	39
Number of cases on Register at 31st December	
Number of sessions held during period	130
Number of attendances at Centre during period	4169
Average attendance per session	32

Occupational Therapy

During the year 142 home visits were made to 6 mentally subnormal persons. In addition to the home visits, mentally subnormal persons attended the following:—

Psychiatric Social Club	21
Craftwork Session—Hoghton Street	67
Industrial Therapy—44 Hoghton Street	—
	—
Total attendances	88
	—

Social Club for Mentally Subnormal Adults

The evening social club which was started in June 1966 continued with great success and 49 meetings were held during 1967 with 1,159 attendances. The activities included dancing, film shows, bingo sessions and birthday celebration parties.

MENTAL HEALTH SERVICE

Number of patients referred to Local Health Authority during 1967

Referred by	Mentally Ill						Psychopathic						Subnormal						Severely Subnormal						Total
	Under Age 16			16 and Over			Under Age 16			16 and Over			Under Age 16			16 and Over			Under Age 16			16 and Over			
	M	F		M	F		M	F		M	F		M	F		M	F		M	F		M	F		
General Practitioners	3	1		131	280		—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	416
Hospitals, on discharge from in-patient treatment	1	—		131	189		—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	323
Hospitals, after or during out-patient or day treatment	—	—		5	14		—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	19
Local education authorities	—	—		—	—		—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	1
Police and courts	—	—		11	14		—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	26
Other sources	1	—		56	99		—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	157
Total	5	1		334	596		—	—	—	—	—	—	1	—	—	1	—	—	2	1	—	—	1	—	942

MENTAL HEALTH SERVICE
Summary of Patients under Local Health Authority Care at 31st December, 1967

	Mentally Ill						Elderly Mentally Infirm		Psychopathic				Subnormal				Severely Subnormal				Total
	Under Age 16		16 and Over		M	F	M	F	Under Age 16		16 and Over		M	F	M	F	M	F			
	M	F	M	F					M	F	M	F									
Total number	1	—	131	189	—	28	—	—	—	—	8	4	25	31	25	11	22	18	493		
Attending training centre	—	—	—	—	—	—	—	—	—	—	6	1	9	14	19	9	8	9	75		
Awaiting entry to training centre	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
Receiving home training	—	—	1	36	—	—	—	—	—	—	—	—	1	3	—	—	—	—	41		
Awaiting home training	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
Resident in L.A. home/hostel	—	—	—	—	—	28	—	—	—	—	—	—	4	6	5	—	—	3	46		
Awaiting residence in L.A. home/hostel	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
Resident at L.A. expense in other homes/ hostels	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	2	—	3		
Resident at L.A. expense by boarding out in private household	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
Attending day hospitals	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
Receiving home visits and not included in above	1	—	130	153	—	—	—	—	—	—	2	3	10	8	1	2	12	6	328		
(a) Suitable to attend a training centre																					
(b) others																					

MENTAL HEALTH SERVICE
Admissions to Guardianship of Local Health Authority or other Guardian during 1967

	Mentally Ill								Psychopathic				Subnormal				Severely Subnormal				Total subnormal and severely subnormal		Grand Total
	Under Age 16				16 and Over				Under Age 16		16 and Over		Under Age 16		16 and Over		Under Age 16		16 and Over				
	M		F		M		F		M		F		M		F		M		F				
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F			
Guardian	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
L.H.A.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Other	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Admissions to guardianship during the year	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Total number under guardianship at end of year	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	

Number of patients awaiting entry to hospital, or admitted for temporary residential care at 31st December, 1967

	Mentally Ill						Elderly Mentally Infirm		Psychopathic						Subnormal						Severely Subnormal						Total
	Under Age 16			16 and Over			M	F	Under Age 16			16 and Over			M	F	M	F	Under Age 16			16 and Over			M	F	
	M	F	M	F	M	F			M	F	M	F	M	F					M	F	M	F	M	F			
In urgent need of hospital care	—	—	—	—	—	—	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	10
Not in urgent need of hospital care	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Total	—	—	—	—	—	—	—	—	—	9	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	10
Number of admissions for temporary resi- dential care (e.g. to relieve the family). To N.H.S. hospitals	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	6
To L.A. residential accommodation	—	—	—	—	—	—	—	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	13
Elsewhere	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Total	—	—	—	—	—	—	1	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	19

MENTAL HEALTH SERVICE

Premises provided at 31st December, 1967

Workshops or occupational centres for the mentally ill

Number of premises and places provided	Premises	3
	Places	32

Training centres for the subnormal or severely Subnormal (including special units)

Age group provided for	Number of Premises	Places	
		Junior	Adult
Under 16	—		
16 and over	—		
Junior and adult	1	34	40
Total	1	34	40

Special units (included in above) provided for the severely subnormal with gross physical handicaps or gross behaviour difficulties

Special Units within training centres	Premises	1
	Places	8
Self contained units independent of training centres	Premises	—
	Places	—

Places made available to or by other authorities or organisations

	Type of authority or organisation	Places in workshops or occupational centres for the mentally ill	Places in training centres for the sub-normal or severely subnormal		Places in special units for the severely subnormal
			Junior	Adult	
Places made available to other authorities or to hospitals included in above	L.A.	—	—	1	—
	Hospital	—	—	—	—
	Total	—	—	1	—
Places made available to the authority by other authorities or organisations (not included in above)	L.A.	—	—	—	—
	Hospital	—	—	—	—
	Other organisations	—	—	—	—
	Total	—	—	—	—

CONTROL OF INFECTIOUS DISEASE

TUBERCULOSIS

New Cases and Mortality

The number of new cases of tuberculosis which came to the notice of the Department during the year was 24; of these 19 were found to be suffering from pulmonary disease, and 5 from non-pulmonary disease.

Treatment Clinic

The Southport and District Hospital Management Committee is responsible for the organisation and administration of the Tuberculosis Treatment Clinics.

The 24 new cases came to the notice of the Clinic in the following ways :—

By primary notifications	17
By transfers from other areas	7
TOTAL	24

All the patients 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 1967 was 118, and 15 of these patients were found to have sputum containing tubercle bacilli. During the year, 51 Treatment Clinics were held and 196 visits were made by patients; the total number of X-ray examinations of patients was 160.

Statistics

(a) Year 1967

Age Periods (in years)	No. of New Patients				No. of Deaths			
	Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary	
	M.	F.	M.	F.	M.	F.	M.	F.
0 to 1 ...	—	—	—	—	—	—	—	—
2 to 5 ...	—	—	—	—	—	—	—	—
6 to 15 ...	—	—	1	—	—	—	—	—
16 to 25 ...	1	3	—	1	—	—	—	—
26 to 45 ...	4	3	1	1	—	—	—	—
46 to 65 ...	3	—	—	1	—	—	—	—
66 to 75 ...	2	3	—	—	1	—	—	—
76 and over	—	—	—	—	—	—	—	—
TOTALS ...	10	9	2	3	1	—	—	—

(b) Years 1958 to 1967

Year	No. of New Patients		No. of Deaths	
	Respiratory	Non-Respiratory	Respiratory	Non-Respiratory
1958	62	6	6	1
1959	40	4	7	2
1960	33	—	4	—
1961	31	1	4	—
1962	42	4	4	—
1963	31	1	10	1
1964	22	2	7	1
1965	19	1	3	—
1966	20	2	4	—
1967	19	5	1	—

Contacts

During the year 235 attendances were made by contacts of patients; the total number of X-ray examinations of contacts was 169. No contacts were found to be suffering from pulmonary tuberculosis in 1967.

Domiciliary Visiting

A Health Visitor is employed by the Local Health Authority for the purpose of visiting cases in their own homes to give help and advice to patients and their families.

The following are the number of home visits made by this Health Visitor during the year:—

To tuberculous patients	...	...	...	...	...	...	452
To contacts of tuberculous patients	...	...	...	...	...	...	294
To other chest patients	...	...	...	...	...	...	10
Total Visits	...	...	...	...	...	...	756

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

During 1967, the Health Visitor made 77 attendances at the Tuberculosis 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.

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 Tuberculosis Health Visitor in the Health Department acts as Hon. Case Secretary and the Chief Clerk undertakes the duties of Hon. Secretary and Treasurer.

During 1966 the Care Committee provided considerable financial and other assistance to patients and their families.

Mass Miniature Radiography Unit

The unit did not visit Southport during 1967, apart from one half day when staff of Corporation Departments were X-rayed.

B.C.G. Vaccination against Tuberculosis

Statistics for Years 1958 to 1967

Year	1958	1959	1960	1961	1962	1963	1964	1965	1966	1967
No. Vaccinated: At B.C.G. Clinics	42	56	43	36	34	35	28	23	30	27
Babies seen by the Consultant Paediatrician ...	24	35	27	28	32	20	37	18	14	15
School Children...	497	698	1037	787	872	716	728	710	739	749
TOTALS ...	563	789	1107	851	938	771	793	751	783	791

TUBERCULOSIS **Treatment Clinic—Statistics for years 1963 to 1967**

	1963			1964			1965			1966			1967		
	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	249	13	262	232	13	245	209	13	222	172	12	184	121	14	135
2. No. of patients added during the year:															
(a) primary notifications of new cases	23	1	24	10	2	12	10	1	11	13	2	15	12	5	17
(b) transfers from other areas	8	—	8	12	—	12	9	—	9	7	—	7	7	—	7
(c) lost sight of cases returned	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
TOTALS (1)	280	14	294	254	15	269	228	14	242	192	14	206	140	19	159
3. No. of patients deleted during the year:															
(a) died (from Tuberculosis)	6	—	6	5	—	5	3	—	3	3	—	3	1	—	1
(b) transferred to other areas	16	—	16	8	1	9	10	—	10	9	—	9	3	1	4
(c) recovered	7	—	7	24	1	25	37	2	39	48	—	48	18	9	27
(d) lost sight of or refused further assistance	10	—	10	1	—	1	3	—	3	6	—	6	—	1	1
(e) tuberculosis not primary cause of death	9	1	10	7	—	7	3	—	3	5	—	5	7	1	8
TOTALS (2)	48	1	49	45	2	47	56	2	58	71	—	71	29	12	41
4. No. of patients on register at the end of year (i.e., totals (1), less totals (2)	232	13	245	209	13	222	172	12	184	121	14	135	111	7	118
5. Summary of new patients found during the year:															
(a) Primary notifications of new cases	23	1	24	10	2	12	10	1	11	13	2	15	12	5	17
(b) Transfers from other areas	8	—	8	12	—	12	9	—	9	7	—	7	7	—	7
(c) Patients found from death returns (figures not included in items (1) to (4) above)	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
(d) Lost sight of cases returned	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
TOTALS	31	1	32	22	2	24	19	1	20	20	2	22	19	5	24

VENEREAL DISEASES

At the end of the year, 161 new cases were under treatment at the clinic, as compared with 168 cases at the end of 1966. During 1967, non-venereal cases made 446 attendances.

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.

Statistics

No. of new Patients for 1967	Male	Female	Total
Syphilis	6	1	7
Gonorrhoea	9	4	13
Non-Venereal Infections	79	62	141
Totals	94	67	161

YEAR	No. of patients and attendances at clinics during years 1958 to 1967							
	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					
1958	—	5	5	48	1151	8	5	43
1959	—	1	1	45	657	10	4	73
1960	2	6	8	47	769	14	5	92
1961	1	9	10	46	867	15	3	83
1962	—	5	5	47	922	15	6	71
1963	—	4	4	50	1105	16	8	117
1964	1	3	4	45	611	27	7	143
1965	1	1	2	42	263	22	13	110
1966	—	3	3	32	148	14	2	72
1967	—	7	7	28	113	13	7	50

INFECTIOUS DISEASES

Statistics for year 1967

NOTIFIABLE DISEASE	NUMBER OF CASES NOTIFIED AGES IN YEARS							
	At All Ages	Un- der 1	1 to 5	5 to 15	15 to 25	25 to 45	45 to 65	65 Up- wards
Chickenpox	587	12	209	333	22	8	2	1
Dysentery	11	—	3	6	—	1	1	—
Encephalitis	—	—	—	—	—	—	—	—
Erysipelas	—	—	—	—	—	—	—	—
Food Poisoning	—	—	—	—	—	—	—	—
German Measles	282	19	92	128	27	16	—	—
Measles	807	31	487	276	9	3	1	—
Meningococcal Infection	—	—	—	—	—	—	—	—
Paratyphoid Fever	—	—	—	—	—	—	—	—
Pneumonia	8	—	2	2	1	1	2	—
Poliomyelitis	—	—	—	—	—	—	—	—
Puerperal Pyrexia	1	—	—	—	1	—	—	—
Scarlet Fever	84	2	27	50	5	—	—	—
Tuberculosis	17	—	—	1	3	5	5	3
Whooping Cough	71	7	32	30	1	1	—	—
TOTALS	1868	71	852	826	69	35	11	4

INFECTIOUS DISEASES **Number of Notified Cases and number of Deaths for the years 1958 to 1967 inclusive**

NOTIFIABLE DISEASE	NUMBER OF CASES OF INFECTIOUS DISEASE NOTIFIED										Total Cases for 10 years 1958 to 1967	DEATHS FROM INFECTIOUS DISEASE										Total Deaths during 10 years 1958 to 1967
	1958	1959	1960	1961	1962	1963	1964	1965	1966	1967		1958	1959	1960	1961	1962	1963	1964	1965	1966	1967	
Chicken Pox	173	383	656	445	697	333	956	258	665	587	5153	—	—	—	—	—	—	—	—	—	—	—
Diphtheria	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Dysentery	13	5	37	26	69	4	2	18	3	11	188	—	—	—	—	—	—	—	—	—	—	—
Encephalitis	—	—	—	1	1	—	2	1	—	—	5	—	—	—	—	—	—	—	—	—	—	—
Erysipelas	6	5	12	7	6	2	4	2	1	—	45	—	—	—	—	—	—	—	—	—	—	—
Food Poisoning	26	3	4	3	3	28	2	2	1	—	72	—	—	—	—	—	—	—	—	—	—	—
German Measles	86	70	91	231	2369	73	154	160	278	282	3794	—	—	—	—	—	—	—	—	—	—	—
Malaria	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Measles	124	1554	348	1107	546	482	980	570	581	807	7099	—	—	—	—	—	—	—	—	—	—	—
Meningococcal Infect'n	—	2	1	1	1	2	1	—	—	—	8	—	—	—	—	—	—	—	—	—	—	—
Ophthalmia Neonatorum	1	—	1	—	—	—	—	—	—	—	2	—	—	—	—	—	—	—	—	—	—	—
Other Forms of Tuberculosis	6	4	—	1	3	1	2	1	2	5	25	1	2	—	—	1	1	—	—	—	—	5
Paratyphoid Fever	—	—	—	—	—	1	—	—	1	—	2	—	—	—	—	—	—	—	—	—	—	—
Pneumonia	12	21	14	17	32	7	10	9	14	8	144	45	28	51	67	66	88	47	56	91	82	621
Polioencephalitis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Poliomyelitis	3	2	—	7	—	—	—	—	—	—	12	1	—	—	—	—	—	—	—	—	—	1
Puerperal Pyrexia	1	1	1	—	—	4	—	—	2	1	10	—	—	—	—	—	—	—	—	—	—	—
Pulmonary Tuberculosis	62	40	33	31	27	23	10	10	13	12	261	6	7	4	4	4	10	7	3	4	1	50
Scarlet Fever	53	144	46	29	25	21	23	57	54	84	536	—	—	—	—	—	—	—	—	—	—	—
Smallpox	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Typhoid Fever	—	—	—	—	2	—	—	—	—	—	2	—	—	—	—	—	—	—	—	—	—	—
Typhus	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Whooping Cough	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
TOTALS	616	2347	1304	1940	3796	1132	2181	1126	1629	1868	17939	53	37	55	71	70	99	55	59	95	83	677

Section IV

ADDITIONAL INFORMATION

ADDITIONAL INFORMATION

Health Education

Regular health education was carried out during the year in Child Welfare Clinics and in the Schools: lectures and demonstrations were given to various organisations in the town by members of the medical, nursing and public health inspector staff, but much more could have been done if it had been possible to establish a Health Education Section in the Department: the need for such a section is increasingly evident each year.

Fluoridation of Water Supply

There is no change in the local position which is that the Council declared itself some time ago in favour of fluoridation. Until the authorities in the other areas supplied by the West Lancashire Water Board are prepared to go ahead with fluoridation, no scheme can be prepared.

Southport Relief Society

After the local authority accepted direct responsibility for the Home Nursing Service, the voluntary organisation known as the Southport and Birkdale District Nursing Society ceased to function. For many years the voluntary society had provided the home nursing service as agents of the local health authority and had made their income available to the local authority to set off against the expenditure of the service. Following this change the voluntary society decided that its fund should be transferred to a new voluntary organisation to be known as The Southport Relief Society, with the object of assisting any Southport residents who seemed to be in need of help which could not be provided from statutory sources. The Health Department is represented on this Society by Mrs. A. A. Gregory who is the Deputy Superintendent of the Home Nursing Service. During 1967, 68 patients were referred to this society by staff from the health department and help totalling £1,159 was provided. The following cases briefly illustrate the kind of help which has been made available:—

- (a) A male patient aged 30 years, married with two children, was found to have an inoperable brain tumour and soon became confined to bed. Domiciliary services were provided by the health department and in addition the relief society made a grant of £30 to provide clothing for the wife and the children.
- (b) A lady aged 86 years, housebound for 8 years and confined to her room for 2 years, was being looked after by her niece who was over 60 years of age. There were no other relatives to give help and no capital available. As the niece was also receiving medical treatment the relief society paid the fees to enable the old lady to be admitted to a nursing home for two weeks to give the niece much needed relief.
- (c) An old man who had been bedfast for 4 years following a stroke was being cared for by his wife. The wife subsequently became ill and had to be admitted to hospital but on discharge was not fit to look after her husband. Help was provided by the relief society towards the fees to enable the husband to be admitted to a nursing home for two weeks to give the wife a short period of relief.

Nurseries and Child Minders Regulation Act, 1948

Private Nurseries

At the end of the year, three day nurseries, three plays groups and two daily minders had been registered by the Council under this Act.

Nursing Homes

At the end of the year there were 17 Nursing Homes registered with the Local Authority, with 2 maternity beds and 232 others.

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 82.

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, and reports showed that the two existing establishments were being conducted in a satisfactory manner.

Persons in need of Care and Attention

No cases were dealt with during 1967 under the powers contained in Section 47 of the National Assistance Act, 1948.

Centres and Clinics

The following list shows the Centres and Clinics which were in operation at the end of the year:

ADDRESS	DAY	TIME
CHILD WELFARE CENTRES:—		
Sandbrook Road, Ainsdale	Mondays	2 to 4 p.m.
North Road, Crossens	Wednesdays	2 to 4 p.m.
Lincoln Road, Birkdale	Tuesdays and Thursdays	2 to 4 p.m.
Poulton Road, High Park	Tuesdays and Wednesdays	2 to 4 p.m.
Hampton Road	Tuesdays and Thursdays	2 to 4 p.m.
Methodist Church, Derby Road	Fridays	2 to 4 p.m.
Methodist Church, Marshside Road	Thursdays	2 to 4 p.m.
ANTE-NATAL CLINIC:—		
44 Hoghton Street	Fridays	9.30 a.m.
POST-NATAL CLINIC:—		
Christiana Hartley Maternity Hospital	Tuesdays	9.30 a.m.
TUBERCULOSIS CLINIC:—		
Southport Infirmary	Mondays Thursdays	2 to 4.30 p.m. 9 to 11.30 a.m.
CHIROPODY CLINICS FOR THE ELDERLY		
44 Hoghton Street	Mondays, Tues- days, Wednes- days, Thursdays	9 to 12.15 p.m. 2 to 4.0 p.m.
MENTAL HEALTH AFTER-CARE CLINIC:—		
46 Hoghton Street	Tuesdays and Wednesdays	2 to 5 p.m. 10 to 12 noon
VACCINATION AND IMMUNISATION CLINIC:—		
2 Church Street	Arranged as necessary	2 to 4 p.m.
PHYSIOTHERAPY CLINIC:—		
44 Hoghton Street	Thursdays	2 to 4 p.m.

Medical Examinations

The following table shows the work done by the medical staff of the department during 1967 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- Examina- tions	Total
CORPORATION DEPARTMENTS:—				
Borough Architect	6	—	—	6
Borough Engineer	6	56	15	77
Borough Treasurer	14	1	1	16
Children's	5	—	—	5
Education	60	26	1	87
Estates and Baths	—	4	—	4
Fire Service	4	1	3	8
Flower Show	—	—	—	—
Health	42	44	1	87
Libraries	8	5	—	13
Lighting	—	3	2	5
Police	2	3	—	5
Publicity	2	7	—	9
Parks and Cemeteries	—	16	1	17
Town Clerk's	5	—	1	6
Transport	1	27	3	31
Water Board... ..	2	9	—	11
Weights and Measures	1	—	—	1
Welfare Services	8	14	1	23
OTHER DEPARTMENTS:—				
Electricity	1	—	—	1
TOTALS	167	216	29	412

In addition, 102 examinations prior to entry to a Teacher's Training College, were made in 1967.

Crematorium

The Southport Crematorium was opened in September 1959. The Medical Officer of Health continued to act as Medical Referee and the Deputy Medical Officer of Health and one of the Assistant Medical Officers of Health each carried out the duties of Deputy Medical Referee.

The number of certificates required in 1967 was 1086.

Work done on behalf of the Children's Committee

During the year, 245 examinations were carried out on behalf of the Children's Committee, the details being as follow:

Examination of children who are boarded-out in foster homes	232
Admissions to Children's Homes	10
Discharges from Children's Homes	3

Section V

ENVIRONMENTAL HYGIENE

SANITARY CIRCUMSTANCES OF THE AREA

Geology—The area consists of a bed of blown sand resting on peat, below which lies a bed of laminated blue clay. While the lower strata appears to be undergoing an exceedingly slow subsidence, any loss which might result from that circumstance is much more than made good by the continual accretion of sand derived from the Mersey. Land is gradually being reclaimed, both by natural and artificial means. The overlying sand on the east and south borders gradually thins out, exposing a margin of peat within the boundary of the area.

The elevation of the built-upon area varies from about 12 feet to 38 feet above Ordnance Datum.

Water—The water supply is provided by the West Lancashire Water Board which is responsible also for the supply to several neighbouring local authorities.

All the water supplied is pumped from wells and boreholes sunk in the sandstone rocks to depths varying between 180 and 1,000 feet.

The five pumping stations which contribute to the supply of Southport are situated five to ten miles south-east of the town.

Owing to the depth of the wells and the control exercised over their surroundings, the water, though hard, is consistently of the highest standard of bacterial purity. As a precaution, however, all water is chlorinated at the source.

At four pumping stations filters are installed to remove the iron and manganese present in the water as it comes from the wells. After filtration and chlorination the water is stored in covered reservoirs.

Samples are taken for chemical and bacteriological examination at regular intervals.

Town's Water Chemical Analysis, 2nd October, 1967

								Parts per Million
Total solid matter in solution	...	...	...	...	...	...	...	376
Oxygen absorbed	}	in 15 minutes		...	...	...	...	0.24
from Permanganate		in 3 hours		...	...	...	...	0.40
Ammonia	...	...	...	...	...	...	...	Nil
Albuminoid Ammonia	...	...	...	...	...	...	...	0.01
Nitrogen as Nitrates	...	...	...	...	...	...	...	0.12
Nitrogen as Nitrites	...	...	...	...	...	...	...	Nil
Combined Chlorine	...	...	...	...	...	...	...	33
Free Chlorine	...	...	...	...	...	...	...	Nil
Lead	...	...	...	...	...	...	...	Nil
Copper	...	...	...	...	...	...	...	Nil
Zinc	...	...	...	...	...	...	...	Nil
Total Iron	...	...	...	...	...	...	...	0.05
Carbonate Hardness (as Calcium Carbonate)	...	...	...	...	...	...	...	146
Total Hardness (as Calcium Carbonate)	...	...	...	...	...	...	...	245

(PH. value: 7.5)

Town's Water, Bacteriological Examination, 2nd October, 1967

Faecal Coli per 100 ml. in water examined	...	...	...	...	...	Nil
Total coliform organisms per 100 ml. in water examined	...	...	...	...	...	Nil

This and other tests indicate that the water is highly satisfactory. Fluoride is present in quantities of approximately 0.1 parts per million.

Water supply to houses in the Borough—

Particulars	Number of houses	Mid Year Estimate of Population
Mains supply, provided by the West Lincs. Water Board	28,623	79,710
Water supply from sources other than specified above	Nil	Nil
TOTALS	28,623	79,710

Public Baths—The Victoria Baths near the Pier have ample bathing accommodation. There are three sea-water swimming baths, 40 slipper baths, "Bubble Baths" and a suite of Turkish and Russian Baths. The number of attendances during the twelve months ending 31st December, 1967 was 351,683.

Outdoor bathers are accommodated at the Sea Bathing Lake on the Marine Drive, which has a capacity of 1,400,000 galls. of filtered and purified sea water.

Before the Lake opened for the summer season, the floor of the pool was repaired to prevent leakage, and the chlorinating plant was thoroughly overhauled. As a result, the quality of the water, both chemically and bacteriologically, has been better.

The attendance during the year was 182,367.

		Satisfactory	Unsatisfactory	Totals
Victoria Baths ...	Chemical Samples	3	3	6
	Bacteriological Samples	3	3	6
Sea Bathing Lake ...	Chemical Samples	12	2	14
	Bacteriological Samples	11	3	14

Satisfactory Chemical Sample of Bathing Water

Taken at the Victoria Baths on 5th June, 1967

Appearance	...	...	...	...	...	...	Clear and bright. Colourless. Minute trace of flocculent matter. No deposit.
pH Value	...	...	...	...	...	...	7.28
Nitrite	...	...	...	...	...	...	Faint Trace
Free Ammonia, parts per million	...	...	...	...	...	...	2.0
Free Residual Chlorine, parts per million	...	...	...	...	...	...	0.17
Total Residual Chlorine (Free Chlorine plus Chloramines) parts per million	...	...	...	...	...	...	0.55

Result—Satisfactory

Satisfactory Chemical Sample of Bathing Water

Taken at the Sea Bathing Lake on 5th June, 1967

Appearance	...	...	...	...	...	...	Clear and bright. Colourless. Minute trace of flocculent matter. No deposit.
pH Value	...	...	...	...	...	...	7.50
Nitrite	...	...	...	...	...	...	Nil
Free Ammonia parts per million	...	...	...	...	...	...	Faint Trace (0.01)
Free Residual Chlorine, parts per million	...	...	...	...	...	...	0.84
Total Residual Chlorine (Free Chlorine plus Chloramines) parts per million	...	...	...	...	...	...	1.04

Result—Satisfactory

Report on Bacteriological Examination of Bathing Water at the Sea Bathing Lake on 7th June, 1967

Location of Sample	Probable numbers per 100 ml.		PLATE COUNT Organisms per ml.
	Coliform bacilli	Bact. coli (type 1)	
Centre of the Lake ...	0	0	3 Satisfactory

Report on Bacteriological Examination of Bathing Water at Victoria Baths taken on 7th June, 1967

Location of Sample	Probable numbers per 100 ml.		PLATE COUNT Organisms per ml.
	Coliform bacilli	Bact. coli (type 1)	
Premier Plunge ...	0	0	3 Satisfactory

PUBLIC BATHS—ATTENDANCES 1963 TO 1967

Year	NUMBER OF PERSONS ATTENDING	
	INDOOR	OPEN AIR
	Victoria Baths (Opened 1836) (Remodelled 1926)	Bathing Lake (Opened 1928)
1963	278,676	201,439
1964	311,201	179,297
1965	307,824	162,185
1966	325,591	154,791
1967	351,683	182,367

SANITARY INSPECTION OF THE AREA

Land Charge Enquiries—Information has been supplied during the year on 2,470 enquiries in respect of properties and sites in the Borough.

Sewage Disposal—The Sewage Works at Bank End, Crossens, deals with over two-thirds of the sewage passing into the system.

The Works at Ainsdale have materially helped in the development of the district.

The effluent from the Bank End Works is discharged into the sea and it is worthy of note that Southport's beach has been described in the National Press as one of the very few "clean" ones.

The sludge from both Works is disposed of by either drying and removal by farmers, etc., or lagooning, and subsequent ploughing.

The Borough Engineer is responsible for the operation of both these Works.

Drainage—A change in policy took place during the year. The free service previously given by the Health Department in connection with the clearing of simple drain stoppages was discontinued, and the responsibility for the work was transferred to the Borough Engineer's Department. Simple drain stoppages are now dealt with by that Department at the flat rate of £1 per stoppage. More difficult drainage work is undertaken on a "time and material" basis.

Improvements in Sanitation—During the year the task of abolishing Bristol Closets in the Borough has continued. In 20 cases, statutory notices were served requiring owners to carry out the conversions.

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

Pest Control—In addition to the destruction of rats and mice, the advice of the Health Department's technical staff is sought on many other occasions where pests such as cockroaches, crickets, flies, bugs, wasps and other insects are involved. Information has been given and in many cases the work of exterminating these pests has been undertaken for the complainants.

Work to reduce the number of Feral Pigeons in the town centre has continued.

Pet Animals—No contraventions of the Pet Animals Act were observed.

Schools—The regular inspection of sanitary arrangements at the schools has continued, and the standard of cleanliness has been well maintained. An improvement in the type of sanitary accommodation at some of the Church Schools, was achieved.

Hostel—The town's only common lodging house, in Boundary Street, has provided frugal accommodation for homeless men for a long time. The building is very old, and its deteriorating condition was giving rise to concern which was shared by the owners of the establishment. By mutual agreement it was decided that the house was coming to the end of its useful life and should be closed. By the end of the year the establishment was in the process of being "run down".

Caravans

Number of licensed sites for holiday caravans	...	...	...	...	...	4
Total number of caravans permitted	...	...	...	...	...	113
Two of these sites are in use.						

PUBLIC MORTUARY

The mortuary facilities in the town at Duke Street Cemetery, cannot be regarded as of the type and standard required in a modern County Borough. The buildings are old and have the disadvantage that the post-mortem room is separated by some distance from the mortuary so that it has proved to be difficult to screen the premises adequately. The provision of a modern mortuary is planned when the financial situation improves.

Throughout the year 293 bodies were received at the Mortuary and, of these, 248 were submitted to a post-mortem examination.

FACTORIES

Sections 1 to 7 of the 1961 Factories Act are administered by local authorities in all factories where mechanical power is not used, and Section 7 is administered by them in all factories.

Working conditions such as cleanliness, overcrowding, temperature, ventilation and drainage of floors are dealt with under these sections of the Act and sanitary conveniences are referred to specifically in Section 7 of the Act.

PREMISES	Number on Register	Number of inspections (1) Written intimations (2)	
		1	2
Factories (other than domestic factories) where motive power is not employed ...	15	10	—
Factories where motive power is employed ...	379	270	—
Outworkers employed in finishing of wearing apparel ...	4	1	—
No. of building sites inspected ...	29	2	—

Prevention of Damage by Pests Act, 1949

Work done during year 1967

	Type of Property	
	Non Agricultural	Agricultural
Number of Properties in District	32,993	29
Total Number of Properties Inspected following Notification	520	—
Number Infested by (i) Rats	133	—
(ii) Mice	146	—
Number of Properties Inspected for other Reasons	259	24
Number Infested by (i) Rats	63	3
(ii) Mice	111	—

The work involved in dealing with the above mentioned properties resulted in 2,004 visits being made by the Rodent Officer.

Treatments were carried out by him or under his supervision in each case, and any re-infestations were treated similarly.

PUBLIC HEALTH INSPECTORS

Summary of Complaints and Visits made during year 1967:—

Nuisances									
COMPLAINTS INVESTIGATED—									
Choked and defective drains	...	...	...	...	...	...	...	...	713
Housing defects	...	...	...	...	...	...	...	...	210
Ditches and watercourses	...	...	...	...	...	...	...	...	3
Smoke emission	...	...	...	...	...	...	...	...	39
Noise	...	...	...	...	...	...	...	...	55
Other nuisances	...	...	...	...	...	...	...	...	825
Total No. of complaints									1,845
NOTICES—									
Served	Preliminary, 353				Statutory, 100				
Abated	Preliminary, 325				Statutory, 77				
VISITS—									
To Premises:									
Dwellinghouses	...	...	...	...	...	...	...	...	6,508
Shops	...	...	...	...	...	...	...	...	2,030
Offices	...	...	...	...	...	...	...	...	85
Factories and workshops	...	...	...	...	...	...	...	...	347
Dairies	...	...	...	...	...	...	...	...	206
Food preparing premises	...	...	...	...	...	...	...	...	2,969
Ice Cream premises	...	...	...	...	...	...	...	...	78
Other premises	...	...	...	...	...	...	...	...	3,174
Total No. of Visits									15,397
Regarding:									
Drainage	...	...	...	...	...	...	...	...	782
Conversion of closets	...	...	...	...	...	...	...	...	207
Ditches and watercourses	...	...	...	...	...	...	...	...	6
Rats, mice and other vermin	...	...	...	...	...	...	...	...	2,293
The Housing Acts	...	...	...	...	...	...	...	...	1,303
Rent Acts	...	...	...	...	...	...	...	...	17
Food Hygiene Regulations	...	...	...	...	...	...	...	...	3,495
Milk Regulations	...	...	...	...	...	...	...	...	322
Food	...	...	...	...	...	...	...	...	950
Other matters	...	...	...	...	...	...	...	...	4,507

Food and Drug Samples—Year 1967

SAMPLES OBTAINED FOR BACTERIOLOGICAL EXAMINATION—

Milk	...	...	...	...	...	...	...	218
Ice Cream	...	...	...	...	...	...	...	22
Other Foods	...	...	...	...	...	...	...	21
Drinking Water (town's main)	...	...	...	...	...	...	...	4
Swimming Bath Water	...	...	...	...	...	...	...	22
Other Water	...	...	...	...	...	...	...	—

Total No. of Samples ... 287

SAMPLES OBTAINED FOR CHEMICAL ANALYSIS—

Milk	...	...	...	...	...	...	...	32
Other Food	...	...	...	...	...	...	...	91
Drinking Water (town's main)	...	...	...	...	...	...	...	4
Swimming Bath Water	...	...	...	...	...	...	...	22

Total No. of Samples ... 149

Legal Proceedings under Food and Drugs Act

Offence	Fine	Costs
First Aid dressing in a piece of rock ...	£10	6 Guineas
Dirty milk bottle ...	£20	6 Guineas
Cheese and Tomato Spread in a mouldy condition ...	£20	6 Guineas
Pieces of glass in a bottle of Mineral Water ...	£10	—
Jam mildewed and containing a foreign body ...	£10	7 Guineas
Milk containing foreign bodies ...	£50	5 Guineas

Rag Flock and Other Filling Materials Act, 1951

Registration of premises where the manufacture of upholstered articles of furniture is carried on as a business is required under this Act, and yearly licences to manufacture or store rag flock are necessary. In addition records of consignments of filling materials for use in the trade are required to be kept for inspection.

These measures are to assist in ensuring that only clean filling materials are used in the business, and to prevent undesirable practices which were alleged to have taken place formerly.

Ten premises are registered under the Act, and four of these were granted licences to store rag flock during the year.

Six samples were tested and all proved satisfactory.

CLEAN AIR

There were 39 complaints regarding nuisances from smoke. All were investigated and recommendations made. No legal proceedings were instituted.

There are indications that the national campaign for a really clean atmosphere is slowly succeeding. The problem of industrial smoke in Southport is not large and it follows that the vast majority of our atmospheric pollution must come from domestic chimneys.

Some improvement in this connection must be due to an increase in general standards of living rather than the effect of clean air legislation. Our whole approach to the question of heating our homes has undergone a drastic change in the last quarter of a century. No longer are we content with one coal fire to heat the entire house. The modern pace of living calls for something which is quick, clean and simple to operate. The affluent society has brought about a demand for a higher standard of comfort, and more and more families are coming to regard central heating as a necessity rather than a luxury. As a result, more and more homes are voluntarily becoming smokeless.

The open fire, burning coal, cannot be operated without making smoke. It is also the dirtiest and most wasteful method of space-heating.

The Chief Public Health Inspector would be glad to offer advice to any local resident who is contemplating installing a new space-heating appliance.

HOUSING

General—The number of inhabited houses was 27,914.

The following table shows the number of houses built during the period 1958 to 1967, plus additional accommodation made available as a result of adaptations and additions to existing properties:

Year	1958	1959	1960	1961	1962	1963	1964	1965	1966	1967
Number of houses built	122	214	115	102	255	252	298	549	416	283

Rent Act—There were no applications for Certificates of Disrepair.

Overcrowding—The number of complaints regarding alleged overcrowding received during the year was 18. In the instances where overcrowding was found to occur the matter was referred to the Housing Department requesting that assistance be granted.

Demolition and Closing Orders—The task of dealing with the houses in the Borough which appear to be unfit for human habitation continued and during 1967 30 houses were represented to the Health Committee. The formal procedure prescribed by the Housing Acts, was commenced in respect of 32 houses.

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

Improvements—During the year the Local Authority declared the town's first Improvement Area under the Housing Act, 1964. An Improvement Area is one in which a local authority may, subject to certain conditions, require the houses therein to be provided with the five "standard amenities". These are:—a bath, a wash-hand basin, hot and cold water, an internal water closet and a food store. The first Area was in the older part of Birkdale and contained 31 houses. In 12 of these the conditions necessary for compulsory improvement were not met and action was withdrawn. Suspended Improvement Notices were served in 5 cases, and in the remaining 14 cases the owners of the houses undertook to provide the standard amenities.

OFFICES, SHOPS AND RAILWAY PREMISES ACT, 1963

Registrations and General Inspections during year 1967

Class of Premises	Number of Premises Registered during the Year	Total Number of Registered Premises at End of year	Number of Registered Premises Receiving a General Inspection during the year
Offices	13	262	112
Retail Shops	25	719	282
Wholesale Shops and Warehouses	3	41	9
Catering Establishments open to the public, Canteens	5	113	15
Fuel Storage Depots	—	7	1
Totals	46	1,142	419

Number of Visits of all kinds by Inspectors to Registered Premises—1,152.

Analysis of Persons employed in Registered premises by workplace.

Class of workplace	Number of persons employed
Offices	2,035
Retail Shops	3,407
Wholesale departments and Warehouses	388
Catering Establishments open to the public	{ 1,441
Canteens	
Fuel storage depots	25
Totals	7,296
Males	2,707
Females...	4,587

On the whole, the Act is well received by occupiers of offices and shops, and no serious difficulties are encountered.

Contraventions—During the year 419 general inspections were made and contraventions found numbered 24, resulting in the service of informal intimations. In 118 cases the requirements had been met by the end of the year.

Accidents reported during the year 1967

Class of Workplace	No. of Accidents Reported	No. Requiring Investigation	Results following Investigation			
			Prosecution	Formal Warning	Informal Advice	No Action Required
Offices	—	—	—	—	—	—
Retail Shops ...	13	4	—	—	1	3
Catering Establishments Canteens	5	1	—	—	—	1
Wholesale Shops, Warehouses and Fuel Storage Depots	—	—	—	—	—	—
TOTALS	18	5	—	—	1	4

Animal Boarding Establishments—The purpose of the Act, is to control such establishments by licence, which must be renewed annually. Matters covered include: accommodation, overcrowding, exercising facilities, temperature, lighting, ventilation, cleanliness, food, drink, bedding, control of infection, fire precautions and the keeping of a register. During 1967, 4 licences were granted.

Riding Establishments

The Act introduces a system for licensing riding establishments and makes it an offence to keep such an establishment without a licence. The Act is not a public health measure. It is designed to prevent suffering to horses. The premises and the horses therein are inspected regularly by a veterinary surgeon.

By the end of the year four such licences had been issued.

Houses in Multiple Occupation—The Housing Act, 1961, and the Housing (Management of Houses in Multiple Occupation) Regulations, 1962, gave powers to local authorities to improve conditions in houses of this type, as follows:—

- to prevent overcrowding;
- to secure adequate facilities for the number of persons living in such a house;
- and
- to secure a proper standard of management.

Informal action to improve conditions in this type of house continued during the year.

NOISE ABATEMENT

The ever-growing problem of noise has now been included in the list of statutory nuisances which may be dealt with by a local authority under the Public Health Act. The only question which remains to be decided is when a particular noise becomes a public health nuisance. In the early days of this legislation no guidance on this point was given, but the Committee on the Problem of Noise has now presented its final report to Parliament and, for the first time, some guidance is available on this vexed question.

The report recommends that, in arriving at such a decision, certain factors should be taken into consideration, and these are:—A basic level of noise depending on the age of the factory and type of area in which it is situated; the nature of the noise; the time of day or night at which the noise occurs; the type of district; and a factor for noises which are not constant.

Each of these factors is given a noise-level value and, by a simple calculation, it is possible to arrive at a noise-level figure below which complaints are not likely to be received from "an ordinary reasonable person." This, of course, is not a legal standard but is merely a recommendation for our guidance. During the year under review 55 complaints were received regarding noise.

SECTION VI

INSPECTION AND SUPERVISION

OF FOOD

Food and Drugs Acts—Records, 1962—1967

Year	Number of samples taken			ANALYTICAL RESULTS OF SAMPLES						Ratio (%) of samples adulterated
				Number genuine			Number adulterated*			
	Formal	Informal	Total	Formal	Informal	Total	Formal	Informal	Total	
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)
1962	2	277	279	2	253	255	0	24	24	8·60
1963	0	177	177	0	164	164	0	13	13	7·34
1964	0	261	261	0	221	221	0	40	40	15·32
1965	9	271	280	8	226	234	1	45	46	16·4
1966	5	228	233	5	206	211	0	22	22	9·4
1967	7	213	220	7	198	205	0	15	15	6·8

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

Number of samples taken for Bacteriological Examination—Year 1967

Nature of Samples and Specimens	Number of Samples and Specimens taken for bacteriological examination				
	First Quarter	Second Quarter	Third Quarter	Fourth Quarter	Total for the year
Ice Cream	—	12	10	—	22
Milk	57	62	74	25	218
Other Foods	8	—	6	7	21
Town's Water	1	1	1	1	4
TOTALS	66	75	91	33	265

DISTRIBUTION OF MILK

There are 205 registered distributors of milk in the Borough, but as dealers in milk are only required to be registered by an appropriate Authority in one district, the number of persons selling milk in Southport exceeds this number.

Holders of licences registered to sell designated milk now hold such a licence for five years, but regular inspections are made of the premises, and samples of milk for chemical, bacteriological and biological examination are frequently submitted for the prescribed tests.

Samples of Milk taken during the Year 1967

For Bacteriological Examination

CLASS OF MILK	Number of Samples Tested	Appropriate Tests	Number of Samples	
			Passed	Failed
Pasteurised	132	Phosphatase Methylene Blue	132 119	— 2
Sterilised	16	Turbidity	16	—
Untreated	47	Methylene Blue	39	4
Totals			306	6

For Biological Examination

Designation	No. of Samples	Tests Applied	Results
			Positive
UNTREATED	169	Ring Test for Br. Abortus	8
		Guinea Pig Inoculation for Br. Abortus ...	1
		Guinea Pig Test for R. Burneti	2
TOTALS			11

The Methylene Blue test is an indication of the keeping quality of the milk which is greatly influenced by the manner in which it is handled during production at the farm and subsequently.

Where unsatisfactory samples were obtained, the premises were inspected and the equipment tested with a view to finding the source of the failure. In every case where such milk samples were obtained from producers outside the Borough, the information was submitted to the appropriate Authority.

Of the 133 samples of milk submitted for chemical analysis, 37 were reported as not complying with the prescribed standard laid down in the Sale of Milk Regulations, 1939. These results show that 27·8% of the milk sampled failed to comply with the standard, and indicates that vigilance is still required in respect of the production and sale of this very valuable food, to protect the consumers' interests. In addition very great care is necessary to ensure that it is 'safe' to drink, in spite of the fact that all liquid milk in England now is from Tuberculin Tested herds.

Brucella Abortus—The organisms of this disease were found in untreated milk which was being sold in the Borough. This disease of cattle, which is also known as Undulant Fever, can be transmitted to man and appears to be on the increase.

The farm in which the milk was produced was outside the Borough but, with the permission of the adjoining local authority, the subsequent investigation was carried out by our own Public Health Inspectors. After 114 special samples of milk had been taken, the infected cows were isolated and eliminated.

This more or less routine piece of work serves to emphasise that, despite the fact that bovine tuberculosis has been virtually eliminated, the heat treatment of milk is still highly desirable.

FOOD INSPECTION

Carcases Inspected and Condemned during year 1967

PARTICULARS	Cattle (exclg.) Cows	Cows	Calves	Sheep and Lambs	Pigs
Number of animals killed and inspected... ..	3,583	13	64	4,693	13,449
RESULTS					
All diseases except tuberculosis and cysticerci:					
Number of whole carcases condemned ...	1	1	6	40	144
Number of carcases of which some part or organ was condemned	1,972	3	1	243	1,835
Tuberculosis only:					
Number of whole carcases condemned ...	—	—	—	—	—
Number of carcases of which some part or organ was condemned	—	—	—	—	—
Cysticerci:					
Carcases of which some part or organ was condemned	26	—	—	—	—
Carcases submitted to refrigeration	3	—	—	—	—
Generalised and totally condemned	—	—	—	—	—

Summary of Meat and Other Articles of Food which were found to be diseased or unwholesome during year 1967

	Cwts.	Qtrs.	Lbs.
Beef, Veal, Mutton, Pork	536	—	1
Fish	5	2	22
Poultry, Game and Rabbits	2	3	2
Tinned Goods	55	2	7
Fruit	—	1	—
Miscellaneous	5	3	13
Total	606	—	17

Total ... 30 tons, 6 cwt., 0 qtr. 17 lb.

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

Though built more than 80 years ago, the abattoir continues to serve the needs of the Borough, and those of other districts on occasions. As with many old buildings of this kind the upkeep cost is high.

In 1967, the total number of animals slaughtered was 21,802 against 23,820 in 1966.

FOOD HYGIENE

The Education of food handlers has been continued and the following table clearly indicates the support that has been received from the food trade.

Attendances at Food Hygiene Classes

Trade	Number Attended 1967		Totals to Date
	Elementary Course	Advanced Course	
1 Bakers and Confectioners	13	—	200
2 Butchers and Meat Producers	1	—	67
3 Catering I	5	—	449
4 Catering II	36	—	293
5 Fish Fryers and Fishmongers	—	—	26
6 Fruiterers and Greengrocers	—	—	5
7 Food and Fruit Preserving	9	—	527
8 Grocers	9	—	185
9 Ice Cream and Dairymen	—	—	40
10 Nurseries	8	—	130
11 Others	3	—	89
TOTALS	84	—	2,011

Notes: Catering I — Guest houses, cafes and hotels.

Catering II — School Meals Service, canteens and hospitals.

Though the taking of examinations is voluntary, of the 1,350 students (Elementary Course) who did so, 982 were successful.

No student sat for the Certificate Examination in Food Handling conducted by the Royal Institute of Public Health & Hygiene but, of the 88 candidates who have taken this examination in previous years, 84 were successful.

Premises—During the year the occupiers of food premises carried out routine maintenance and cleansing work. The existing standard is satisfactory and it is gratifying to report that food traders make every effort to improve their accommodation and equipment. In the food industry equipment is constantly wearing out and in need of renewal and caterers continue to co-operate in these matters.

Vermin Infestation—Rat and mice infestation continues to be minimal. It is difficult to eradicate these pests permanently as re-infestation sometimes occurs. An increasing number of food traders take out contracts with firms specialising in the destruction of pests, and their efforts combined with those of the Department, ensure relative freedom from infestation.

Complaints—The majority of complaints received regarding the sale of unsound food were found to be due to bad stock rotation.

Grocers and confectioners should be particularly careful to ensure an efficient rotation of their stock.

With canned goods this ensures that the goods are sold rapidly and with less likelihood of the contents becoming unsound, resulting in blown tins.

Refrigerated cabinets should be capable of maintaining a temperature of 0°F. **JUST BELOW THE LOAD LINE.** Above this load line the temperature of the shop prevails. It is essential, therefore, to ensure that frozen foods are never stacked above the permitted level, and also the stock should be carefully rotated to ensure that the earliest deliveries are sold first.

It should be emphasised that quick frozen foods which have been subjected to a temperature rise should never be re-frozen and offered for sale. Insurance companies will give cover against this loss at a reasonable premium.

Made up meat products such as pies should be kept at a temperature of 45°F.—50°F. They should never be placed in an ice cream cabinet or a frozen food cabinet. Strict stock rotation is imperative with this class of goods because in warm, humid weather mould formation quickly takes place.

Summary of Food Hygiene Inspections for year 1967

INSPECTIONS										NUMBER
Hotels, Restaurants and Kitchens	...	...	...	...	...	...	...	...	...	1,546
Bakehouses	...	...	...	...	...	...	...	...	...	263
Butchers' Shops	...	...	...	...	} Retail Food Shops	...	...	...	...	1,361
Confectioners' and Grocers' Shops	...	...	...	...		...	...	...	...
Fried Fish Shops	...	...	...	...		...	...	...	...
Fishmongers', Greengrocers' and Poulterers'	...	...	...	...		...	...	...	...
Public Houses, etc.	...	...	...	...	...	...	...	...	...	420
Miscellaneous	...	...	...	...	...	...	...	...	...	142
Total										3,732

THE SHRIMPING INDUSTRY

There has been no great change in this section of the Department's duties in relation to the supervision of food supplies, and the industry follows closely to its traditional methods.

The considerable improvements effected on the coming into force of the Food Hygiene Regulations have been maintained throughout the year.

The shrimpers carry on their business very much in family units or groups, which may have some bearing on their objection to the establishment of a central or communal 'peeling' factory.

No change has been made in the Government's attitude to the peeling of shrimps on domestic premises which are registered with the local authority.

Due to the variation in the time when this process is being carried on visits to such premises are not easy to arrange.

Twenty-nine wholesale premises are now registered under the Food & Drugs Act, 1955, in addition to the houses at which shrimp peeling is permitted.

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	...	...	...	...	...	...	...	...	...	20
For the purpose of sale	...	...	...	...	...	...	...	...	...	256
For the purpose of storage	...	...	...	...	...	...	...	...	...	1
TOTAL										277

The bacteriological quality of ice cream on sale in the Borough is indicated by the results recorded below.

Year	Percentage of Samples found to be unsatisfactory								
1962	21·60
1963	22·50
1964	50·00
1965	37·00
1966	40·00
1967	21·73

The figure of 21·73% of unsatisfactory samples is not a fair indication of the standard of ice cream on sale in the Borough. In recent years it has been found that the wrapped product manufactured by the large ice-cream firms invariably passes the test. Consequently, in 1967, the number of samples taken of this type was reduced, and more attention was paid to the "soft freeze" variety.

The problems presented by the recent increase in the use of the "Soft Freeze" machine are due mainly to the inadequate cleansing and sterilising of the working parts. The cleansing and sterilising procedure is both time consuming and of a technical nature and the persons operating these machines are very often not properly instructed.

Due to constant sampling and supervision of general cleansing and sterilising practices by Public Health Inspectors, the general standard has improved somewhat, but still leaves a great deal to be desired.

In all instances where samples have failed the tests recommended to ensure a high standard, every effort has been made to help the producer to discover any fault in the method of manufacture. Where unsatisfactory samples have been obtained from manufacturers outside the Borough, the appropriate authority has been informed.

23 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:—

Ice Cream Samples—Results During Year 1967

YEAR	No. of Samples Taken	RESULTS OF SAMPLES TAKEN					
		NUMBER SATISFACTORY			NUMBER UNSATISFACTORY		
		Grade I	Grade II	Total	Grade III	Grade IV	Total
1962	...	36	5	41	5	5	10
1963	...	9	5	14	—	2	2
1964	...	10	5	15	7	8	15
1965	...	20	6	26	9	6	15
1966	...	11	2	13	5	4	9
1967	...	10	8	18	—	5	5

COUNTY BOROUGH OF SOUTHPORT



ANNUAL REPORT

OF THE

PRINCIPAL SCHOOL MEDICAL OFFICER

FOR THE YEAR 1967

Telephone No.
Southport 5523.

Health Department,
2 Church Street, Southport.

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EDUCATION COMMITTEE AS AT THE

31st December, 1967

The Mayor, Alderman J. S. Mitchell, J.P.

Alderman Mrs. B. Pogson, (Chairman)

Councillor T. R. Glover (Vice-Chairman)

Alderman J. Campion

Alderman W. Prescott

Councillor C. I. Anderson

Councillor J. R. Craig

Councillor E. J. Downs

Councillor L. Goldwater

Councillor Mrs. J. Lilley

Councillor P. L. Mardon

Councillor Mrs. E. M. Monk

Councillor R. B. Tomlinson

Councillor E. White

Councillor F. J. Wilde

Mr. G. F. Dixon

The Rev. E. Formby

Mr. J. Gavin

The Rev. D. S. Noel

Dr. D. G. Pritchard

The Rev. A. Thompson

Representatives on Joint Health and Education Sub-Committee

Alderman Mrs. B. Pogson, (Chairman)

Councillor T. R. Glover (Vice-Chairman)

Alderman J. Campion

Councillor E. J. Downs

Councillor Mrs. E. M. Monk

Councillor E. White

SCHOOL HEALTH SERVICE SENIOR STAFF,
as at 31st December, 1967

Medical Staff

Principal School Medical Officer	G. N. M. WISHART, M.R.C.S., L.R.C.P., D.P.H. F.R.S.H.
Deputy Principal School Medical Officer	ANNA I. DAVISON, M.B. Ch.B., C.P.H.
School Medical Officer	MARGARET C. FELL, M.B., Ch.B., D.P.H., D.C.H.
School Medical Officer	Vacant.

Visiting Medical Staff—

Eye Clinic	C. S. L. PEIRIS, F.R.C.S.(E), D.O. (Eng.), M.B. (Cey).
Ear, Nose and Throat Clinic	R. V. TRACY-FORSTER, F.R.C.S., M.B. Ch.B., D.L.O.
Skin Clinic	A. ROBY JONES, M.D.
Child Guidance Clinic	J. M. NAYLOR, M.B., Ch.B., D.C.H., D.P.M.

Dental Staff—

Principal Dental Officer	W. L. ROTHWELL, L.D.S. (Liv.)
Dental Officer	P. L. Heathcote, L.D.S. (Liv.)
Dental Officer	J. B. Leech, L.D.S., R.C.S. (Eng.)
Consultant Orthodontist (part time)	H. Pogrel, L.D.S. (Liv.), L.D.S., R.C.S. (Eng.), D.Ortho.R.C.S. (Eng.).

Nursing Staff—

Superintendent Nursing Officer	Miss E. MITCHELL, S.R.N., S.C.M., H.V. Cert., Q.N. Cert.
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Medical Auxiliary—

Senior Physiotherapist	Mrs. V. A. MACLEOD, M.C.S.P.
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Child Guidance Staff—

Educational Psychologist	L. J. C. MONK, B.Sc., Cert. Ed. Dip.Ex.Ed.Psy.
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Principal School Medical Officer's Annual Report

FOR 1967

TO THE CHAIRMAN AND MEMBERS OF THE
EDUCATION COMMITTEE

It is my privilege and duty to present a report on the work of the School Health Service in 1967.

Shortage of whole time medical staff and increased demand for the school health services due to the continuing increase in the number of children in our schools made 1967 a difficult year for the School Health Service. It was not possible to find a successor for Dr. T. J. Dailey by the end of the year and this has meant a 25% reduction in the number of full-time medical officers during many months. Fortunately a number of doctors in the town have been able to give part-time sessional help and this has enabled the routine school medical inspection to be adequately done. In circumstances like these the efficient co-ordination of the follow-up work by the clerical staff in the school health department is a very great help.

Parents whose children were found to have small errors of refraction and who could not be seen by the doctors doing specialised work in the school eye service, were advised to consult an optician of their choice in order to obtain spectacles for their children. The number of plantar warts requiring treatment resulted in heavy pressure on the school chiropody service and on the dressings clinics and did not seem to be influenced by experimental disinfection done in the schools. Much of the medical inspection work in schools is repetitive and the doctor may not find much disability or disease, particularly in children of junior school age, yet about 15% of the children examined in school in 1967 were noted to have had some kind of abnormality requiring attention. The school medical officer may often detect illness requiring treatment before parents are aware that there is anything wrong and at a time when treatment is likely to be very effective.

There is constant liaison between the family doctors in the town, the Consultant Paediatrician, and the school health service staff so as to ensure that everything possible is done to help any child in need. The school doctors and nurses are frequently called upon to advise parents on socio-medical problems affecting their children and the fact that large numbers of parents attend with their children at school medical inspections illustrates the need for health education work of this kind. It is not uncommon to see children who are overweight in schools and modern medical opinion is that though excess weight may be more important in the elderly than in the young it is a factor of some importance even in childhood. Opportunity is therefore taken in the schools to instruct children and parents about the importance of maintaining a normal average weight. This kind of information is, of course, taken into account when school meals are being planned and it is noticeable that teenage girls are showing more interest than they did in dietary matters in so far as they affect health and good appearance. Good health is a very precious possession and all children should be taught how it may be safeguarded and promoted. It seems to me that there is insufficient emphasis laid on prevention in medical matters and it is my view that all the major authorities should have a health education section in their departments. Though there are plans to provide such a section in the Health Department which would be available to the school health service here, financial stringency has so far made it impossible to develop the service in this way. The facilities for medical inspection in some of the schools are not adequate but it has been possible to compensate partly for this by the use of infant welfare centre buildings and in time as new

school buildings can be provided this difficulty will disappear.

I cannot complete this report without making reference to the sad loss of Mr. S. R. Hutton, the late Chief Education Officer. He was keenly interested in the health of school children and gave much encouragement to the work of the school health service.

I am,

Yours faithfully,

G. N. M. WISHART,

Principal School Medical Officer.

SCHOOL HEALTH SERVICE

A large part of the duties of the school health staff is aimed at helping each child to make the best of his opportunities at school, and of necessity much work of this kind, such as patient and accurate testing of eyesight and hearing, is unexciting: yet on the early detection of defects of this and other kinds may depend whether the child is able to make a success of his school and later life. The general public as a whole is now much more knowledgeable about such things, and parents are insisting that the health service provided by the Local Education Authority should be of a high standard. This is evident by the parents' attendance at medical inspections and by the questions they ask.

The school health service is largely an advisory and preventive medical one. When treatment other than of a minor kind is necessary, this is usually arranged through the family doctor or hospital services: there are excellent liaison arrangements between these three services. In the case of behavioural and emotional problems, the school doctor, because of his easy access to the child's teacher, may be in a particularly favourable position to help.

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

							<u>Year 1966</u>	<u>Year 1967</u>
Primary School	...	...	...	...	...	...	6,814	7,121
Secondary Schools	...	...	...	...	...	...	4,150	4,331
							<u>10,418</u>	<u>11,452</u>

ROUTINE MEDICAL INSPECTIONS

As usual all schools were visited during the year and parents were notified of the time and place of medical inspections and invited to attend.

Child welfare centre premises and church halls were used when conditions in school were unsuitable.

The method used in previous years was continued, ensuring that children are examined by a school medical officer at least three times during their school lives, viz:—

(a) Every pupil admitted for the first time to a maintained school is inspected as soon as possible after admission.

(b) Every pupil attending a maintained primary school is inspected during the last year of his attendance at that school.

(c) Every pupil attending a maintained secondary school is inspected during the last full year of his attendance at that school.

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

PRIMARY SCHOOLS—

Entrants	...	...	...	...	...	...	...	...	...	977
Leavers	...	...	...	...	...	...	...	...	...	843

SECONDARY SCHOOLS—

Leavers	766
---------	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----

ADDITIONAL MEDICAL INSPECTIONS (All Schools)	633
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TOTAL	3219
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The Nursery School at Crossens and the Hospital Special School in Hawkshead Street were visited each term.

The percentage of parents attending with their children at examinations is given below.

PRIMARY SCHOOLS—

Entrants	79.53%
Leavers	63.11%

SECONDARY SCHOOLS—

Leavers	10.18%
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ADDITIONAL MEDICAL INSPECTIONS (All Schools)	55.45%
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Defects found at Routine Medical Inspections.

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

	Primary Schools		Secondary Schools —Leavers	Additional Inspections (all schools)	TOTALS
	Entrants	Leavers			
Number of children examined ...	977	843	766	633	3219
Number of children requiring treatment	104	228	79	72	483
Percentage requiring treatment ...	10.65	27.04	10.33	11.37	15.00

A detailed list of all defects is to be found in the tables at the end of this report.

Before the school medical examination every child is inspected annually by the school nurse. Any pupil found to have a defect is later seen by a school medical officer, in addition to the children already listed for medical inspection. This year the number of children examined by the school nurses was 10,321 and of these 69 were referred for further examination, together with 954, from last year's medical inspection.

CLINICS

Nurses Treatment Clinics—These clinics are open every week day and arrangements for treatment ensure that every effort is made to reduce waiting time and time lost from school.

During the year, 5,500 attendances were made by children—4,787 at 2 Church Street Clinic, 498 at Lincoln House Clinic, and 215 at Ainsdale Clinic.

Minor Ailments Clinic—This is a weekly clinic at which children and parents are seen by the school medical officers. Parents are advised about their children and if further investigation 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 927, and these children made 1,146 attendances. 20 cases were referred to the Southport Infirmary for further investigation, 11 to the Promenade Hospital, and 1 to the University Department for the Deaf in Manchester.

54 children were referred to the Casualty Department at the Southport Infirmary by the school medical officers and the clinic nurses.

Eye Clinic—During the year, 816 attendances were made at this clinic. 211 new cases were examined and 344 children attended for observation of progress from previous years. 331 children had spectacles prescribed for them and 15 children were referred to the Southport Infirmary for operative treatment.

Ear, Nose and Throat Clinic—In 1967, 402 attendances were made at this clinic. 357 new cases were examined and 31 children attended for observation of progress from previous years. 205 cases were admitted to the Promenade Hospital for the removal of tonsils and/or adenoids, 2 for mastoidectomy and 152 for other forms of treatment.

Children who may have any loss of hearing are referred to the School for The Partially Hearing, Birkdale, or to the University Department for the Deaf in Manchester, for special examination.

Audiometric sweep testing of 5-year olds was carried out in all primary schools by the school nurses. Children who failed the test were invited to attend the school clinic for re-testing by one of the school medical officers. 1,261 children were tested in school; 53 were referred to a school medical officer for further testing; 52 children were kept under observation and 18 were found to require treatment. The majority of these children were referred to the Ear, Nose and Throat Specialist and were treated by him. Further audiometric testing was carried out after treatment to make sure that the hearing had improved.

Skin Clinic—During the year, 602 attendances were made. 140 new cases were examined and 58 were seen for observation of progress from previous years.

Chiropody Clinic—This clinic provided a service for the treatment of verrucae, corns and similar afflictions.

182 children made 1,036 attendances during the year. Of these 178 were discharged cured and 19 were still being treated at the end of the year. Verrucae formed the greater part of the defects treated, and each child attended the Chiropodist approximately five times before being discharged.

Enuresis Alarms—During the year 48 of these alarms were supplied to school children at the request of the school medical officers and general practitioners.

The majority of these children were cured or showed great improvement after using this apparatus.

Artificial Sunlight Clinic—Children were referred from the chest clinic and the paediatric clinic of the Southport Infirmary, the school minor ailments clinic, routine medical inspections and general medical practitioners.

33 school children were treated at 2 Church Street and made 782 attendances. 17 children were treated at Lincoln House and made 299 attendances. 8 children were treated at Ainsdale and made 62 attendances. Sessions at the Ainsdale Clinic commenced in September.

Orthopaedic and Remedial Exercises Clinic—Children were referred by the school medical officers and from the school children's consultant orthopaedic clinic at the Promenade Hospital.

239 children made 3,958 attendances during the year at 2 Church Street, 112 children made 1,086 attendances at Lincoln House and 41 children made 199 attendances at Ainsdale.

In addition, group physiotherapy sessions once a week commenced at Hawkshead Street Hospital School in September, and 570 group attendances were made between September and the end of December.

11 cases were referred to the Promenade Hospital for Consultant opinion. The physiotherapist attended this orthopaedic clinic, so that good liaison was maintained between the hospital and this department.

Speech Therapy—Treatment for defective speech was given at the North West School of Speech and Drama, and 142 sessions were held during the year.

No. recommended by the school medical officers for treatment in 1967	35
No. of new cases admitted to regular classes in 1967	29
No. of children discharged as cured	12

Forty-seven children attended these classes; the reasons for the defects in speech were:

(a) Slow and abnormal speech development	34
(b) Stammering	9
(c) Dyslalia	4

During the year 1069 attendances were made by children requiring treatment. This service is greatly appreciated by the parents as a speech defect is an obvious one and a great handicap in later life.

CHILD GUIDANCE SERVICE

Dr. I. Berman had to give up his work in Southport during the year and the Liverpool Regional Hospital Board seconded Dr. Jean Naylor as the Consultant Child Psychiatrist. She is also in charge of children admitted to Hawkshead Street Children's Hospital because of psychological or psychiatric difficulties and co-ordination between the hospital service and the clinic service is particularly good.

Mr. Monk, the Educational Psychologist, has been occupied for part of his time in the assessment of tests to evaluate individual intellectual strengths and weaknesses.

HANDICAPPED PUPILS

Physically Handicapped Children—The work in the Hospital Special School in Hawkshead Street deserves special mention. Though the majority of the pupils are children from other areas who are resident in the hospital, day scholars from Southport are also taught there. This has been of very great benefit to the town and has meant that children, who otherwise would have had to be educated at residential special schools, have been able to stay at home and that our own medical staff have been able to follow their progress. Some of these children were seriously physically handicapped and required the support and encouragement which their parents were able to give them in the circumstances. Most of them have to be taken to and from the school by taxi. The staff do all in their power to make the school a happy and efficient one.

18 children with the following handicaps were receiving education in the school at the end of the year:—

<i>Sex</i>	<i>Age (years)</i>	<i>Handicap</i>
Boy	5	Paralysis both legs
"	6	Right sided hemiplegia
"	6	Perthes disease
"	6	Spina bifida
"	7	Spastic paralysis
"	8	Rudimentary arms: Congenital defect
"	8	Muscular dystrophy
"	8	Muscular dystrophy
"	8	Spastic paralysis
"	9	Cerebral tumour
"	9	Congenital heart disease
"	10	Muscular dystrophy
"	10	Spastic diplegia
"	10	Congenital deformity of urethra
"	15	Sclero derma
Girl	6	Congenital absence of sacrum
"	7	Spastic paralysis
"	9	Mid-thoracic scoliosis

In addition to the above defects, one child was admitted on a temporary basis for correction of speech difficulties.

Two of the above children were weekly boarders, the remainder being day pupils.

One child was receiving home tuition.

Deaf and Partially Hearing Children—Two partially hearing children were in residential schools. Ten children attended special schools for the partially hearing as day pupils.

Educationally Sub Normal Children—Ten children were receiving special education in residential schools at the end of the year.

The construction of a day special school is now expected to begin early in 1969.

The nine 'Opportunity' Classes continued to do very good work during the year. In the present circumstances these classes admit children who are educationally sub-normal as well as those retarded in their studies from a variety of causes, e.g., due to absence from school because of illness.

Maladjusted Children—There were two children in residential special schools for maladjusted pupils.

Children Unsuitable for Education in School—During the year, 2 children were notified under Section 57 of the Education Act, 1944, as amended by the Mental Health Act, 1959.

One child, ascertained as unsuitable for school by another local authority, was re-assessed by one of the school medical officers and in the opinion of the examining doctor was found to be suitable to attend an "Opportunity" Class in an ordinary school.

PROTECTION OF SCHOOL CHILDREN AGAINST TUBERCULOSIS

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

Notifications—One case of tuberculosis of glands was notified; no cases of pulmonary tuberculosis were found in school children during 1967.

B.C.G. Vaccination—The B.C.G. vaccination scheme against tuberculosis was continued as in previous years and was brought to the notice of all parents with children aged thirteen years and over in maintained and independent schools in the area.

The percentage of parents who failed to reply to the letter was 2.5% as against 3.7% in the previous year. These parents were visited by members of the health visiting staff, so that no effort was spared to bring to their notice the importance of vaccination against tuberculosis.

The following table shows statistics for the last five years.

Year	Acceptance Rate %	No. of children tested	Positive Skin Test %	Negative Skin Test %	Results not read due to absence %	No. Vaccinated
1963	76.8	872	12.5	82.6	4.9	716
1964	85.5	887	12.9	83.2	3.9	728
1965	83.3	882	14.0	82.3	3.7	710
1966	88.5	958	12.7	77.7	9.6	739
1967	91.0	964	15.7	78.6	5.7	749

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

Tuberculin Skin Testing of School Entrants—All new entrants to school were offered skin tests to find out if they had at any time been exposed to tuberculous infection.

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

Year	No. tested	No. positive	% positive
1963	831	8	1.0
1964	832	3	0.4
1965	819	9	1.1
1966	718	7	1.0
1967	834	14	1.7

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

INFECTIOUS DISEASES

Notifications were as follows, with figures for 1966 for comparison:—

	1966	1967
Measles	226	305
Rubella	125	117
Scarlet Fever	35	55
Chicken Pox	323	336
Diphtheria	Nil	Nil
Whooping Cough	3	27
Tuberculosis of glands	2	1

MISCELLANEOUS SCHOOL MEDICAL WORK

Examination of school children for fitness to take part in public entertainment	...	...	...	...	...	...	...	16
Examination of school children for part-time employment	...	...	...	...	...	...	...	35
No. of children seen at 'follow-up' visits to schools by school nurses	...	...	...	...	...	...	...	187
Miscellaneous home visits by school nurses	...	...	...	...	...	...	...	891

HEALTH EDUCATION IN SCHOOL

Regular mothercraft classes were held at all the secondary modern schools at which girls attend, viz., Meols Cop, Christ the King, Stanley and Birkdale.

The syllabus is comprehensive 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 the knowledge gained will be useful to them in later life.

SCHOOL MEALS

During the year, 1,477,628 meals were given to Southport school children. About 10% of these meals were supplied free. On an average, 77% of the school children have dinner in school.

SCHOOL DENTAL SERVICE

Principal School Dental Officer's Report, 1967.

The authorised professional establishment of one Principal School Dental Officer and two School Dental Officers has been maintained throughout the year.

During the year a dental inspection has been carried out in all schools and treatment offered to all those children found to require it. In addition thirteen schools have been re-inspected, thus maintaining in some schools a period of less than one year between inspections.

Towards the end of the year a new Air-rotor was purchased for one of the surgeries at the Church Street clinic, the previous one having given continuous trouble. It is hoped that it will be possible to replace the one at the Lincoln House clinic which is also troublesome, in that the turbine heads are consistently sluggish and frequently need to be returned for re-conditioning. It is essential to have this equipment available and in working order whenever the dental surgeon considers its use an advantage.

The simple rules for a reasonable state of dental health continue to be stressed by literature and pamphlets being made available in the waiting room; by posters being taken to schools at the time of the dental inspections and by pamphlets included with birthday cards sent to children attending welfare centres.

During the year films on oral hygiene have been shown to twelve schools. This year a new scheme has been introduced whereby each new entrant to school takes home a dental health pack. This pack contains a 'Happy Smile' Club card, a card for the bathroom which stresses the rules of dental health, a toothbrush and a sample tube of toothpaste. The object of the pack is to impress on children at an early age the importance of looking after their teeth. Parents are asked to help their child mark the 'Happy Smile' card when brushing the teeth immediately after breakfast and last thing at night and to initial the card at the end of each week for a period of four weeks. When the card is returned to school, a 'Happy Smile' Club badge is given to each child who has thus observed the rules.

In conclusion, it is again encouraging to note that the percentage of pupils found to require treatment is less than the previous year, being at 45.6%, the lowest recorded for many years. However a large number of deciduous teeth are still found to be unsaveable and have to be extracted. It is therefore worth keeping in mind the fact that fluoridation could alter this and make it possible to save many of these teeth, thus eliminating a certain amount of suffering in the younger age groups.

CLINICS AS AT THE 31st DECEMBER, 1967

DAY	2 CHURCH STREET	46 HOGHTON STREET	LINCOLN HOUSE
MONDAY a.m.	*Ear, Nose and Throat Clinic (fortnightly) Nurses' Dressings Clinic Dental Clinic	*Artificial Sunlight Clinic *Remedial Exercises Clinic	Dental Clinic *Artificial Sunlight Clinic *Remedial Exercises Clinic
MONDAY p.m.	Doctors' Minor Ailment Clinic Nurses' Dressings Clinic Dental Clinic	—	Dental Clinic
TUESDAY a.m.	*Eye Clinic Nurses' Dressings Clinic Dental Clinic	*Remedial Exercises Clinic	Dental Clinic
TUESDAY p.m.	Nurses' Dressings Clinic Dental Clinic	*Psychiatric Clinic	Dental Clinic
WEDNESDAY a.m.	Eye Clinic (Fortnightly) Nurses' Dressings Clinic Dental Clinic	*Artificial Sunlight Clinic *Remedial Exercises Clinic	Dental Clinic *Artificial Sunlight Clinic *Remedial Exercises Clinic
WEDNESDAY p.m.	*Orthopaedic (Periodically) Nurses' Dressings Clinic *Orthodontic Clinic (fortnightly) Dental Clinic	—	Dental Clinic
THURSDAY a.m.	*Chiroprody Clinic Nurses' Dressings Clinic Dental Clinic	*Psychiatric Clinic *Remedial Exercises Clinic	Nurses' Dressings Clinic Dental Clinic
THURSDAY p.m.	*Skin Clinic (fortnightly) Nurses' Dressings Clinic Dental Clinic	*Remedial Exercises Clinic	Dental Clinic
FRIDAY a.m.	Chiroprody Clinic Nurses' Dressings Clinic Dental Clinic	*Artificial Sunlight Clinic *Remedial Exercises Clinic	Dental Clinic *Artificial Sunlight Clinic *Remedial Exercises Clinic
FRIDAY p.m.	Nurses' Dressings Clinic Dental Clinic	—	Dental Clinic
SATURDAY a.m.	*Orthodontic Clinic	—	—

* By Appointment Only.

In addition there are Physiotherapy sessions at the Ainsdale Welfare Centre on Monday morning and Wednesday and Friday afternoons.

YEAR 1967

Statistics of Medical Inspection of Pupils attending Maintained Primary, and Secondary Schools, the Nursery School and the Hospital Special School.

PART I

PERIODIC MEDICAL INSPECTIONS

Physical Condition of Pupils Inspected

Age Groups Inspected (by year of birth) (1)	No. of pupils Inspected (2)	SATISFACTORY (3)	UNSATISFACTORY (4)
1963 and later	111	111	—
1962	370	369	1
1961	542	541	1
1960	126	126	—
1959	86	86	—
1958	68	68	—
1957	140	140	—
1956	549	548	1
1955	327	327	—
1954	62	62	—
1953	556	556	—
1952 and earlier	282	282	—
TOTAL	3219	3216	3

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)
1963 and later	1	5	6
1962	1	35	36
1961	4	62	64
1960	—	16	16
1959	1	11	12
1958	2	5	7
1957	3	17	20
1956	20	67	79
1955	6	39	45
1954	2	8	10
1953	4	62	66
1952 and earlier	3	21	24
TOTAL	47	348	385

OTHER INSPECTIONS

Number of Special Inspections	591
Number of re-inspections	1578
TOTAL	2169

PART I (cont.)
INFESTATION WITH VERMIN

Total number of individual examinations of pupils in schools by school nurses or other authorised persons..... 10500
Total number of individual pupils found to be infested..... 108
Number of individual pupils in respect of whom cleansing notices were issued (Section 54(2), Education Act, 1944)..... None
Number of individual pupils in respect of whom cleansing orders were issued (Section 54(3), Education Act, 1944)..... None

PART II
DEFECTS FOUND BY MEDICAL INSPECTION
(a)—At Periodic Inspections

Defect or Disease						Entrants	Senior Leavers	Others	TOTAL
Skin	...	...	...	...	T	7	8	7	22
					O	8	3	12	23
Eyes—Vision	...	...	...	...	T	6	7	34	47
					O	8	2	19	29
Squint	...	...	...	...	T	1	3	5	9
					O	6	1	4	11
Other	...	...	...	...	T	3	15	15	33
					O	—	1	1	2
Ears—Hearing	...	...	...	...	T	11	2	17	30
					O	7	—	10	17
Otitis Media	...	...	...	...	T	2	—	4	6
					O	4	—	1	5
Other	...	...	...	...	T	—	2	—	2
					O	—	—	3	3
Nose and Throat	...	...	...	...	T	13	5	12	30
					O	65	5	36	106
Speech	...	...	...	...	T	5	1	—	6
					O	15	1	7	23
Lymphatic Glands	...	...	...	...	T	—	—	—	—
					O	8	—	3	11
Heart	...	...	...	...	T	6	2	3	11
					O	29	6	25	60
Lungs	...	...	...	...	T	8	1	4	13
					O	12	3	13	28
Developmental—Hernia	...	...	...	...	T	—	—	—	—
					O	5	—	4	9
Other	...	...	...	...	T	6	1	23	30
					O	41	1	39	81
Orthopaedic—Posture	...	...	...	...	T	5	24	39	68
					O	1	11	10	22
Feet	...	...	...	...	T	16	7	38	61
					O	21	3	16	40
Other	...	...	...	...	T	8	—	10	18
					O	27	5	17	49
Nervous System—Epilepsy	...	...	...	...	T	1	—	—	1
					O	—	—	—	—
Other	...	...	...	...	T	—	—	1	1
					O	3	—	2	5
Psychological—Development	...	...	...	...	T	2	—	2	4
					O	6	—	15	21
Stability	...	...	...	...	T	—	—	1	1
					O	—	—	3	3
Abdomen	...	...	...	...	T	—	1	2	3
					O	2	—	—	2
Other	...	...	...	...	T	10	7	12	29
					O	24	5	22	51

Key: T—For Treatment; O—For Observation. 15

PART II (cont.)

(b) At Special Inspections

Defects or Diseases								Pupils requiring Treatment	Pupils requiring Observation
Skin	...	...	...	...	...	...	...	79	2
Eyes—Vision	...	...	...	...	...	...	...	5	5
Squint	...	...	...	...	...	...	...	1	—
Other	...	...	...	...	...	...	...	9	1
Ears—Hearing	...	...	...	...	...	...	...	27	30
Otitis Media	...	...	...	...	...	...	...	7	—
Other	...	...	...	...	...	...	...	12	2
Nose and Throat	...	...	...	...	...	...	...	36	12
Speech	...	...	...	...	...	...	...	10	3
Lymphatic Glands	...	...	...	...	...	...	...	—	1
Heart	...	...	...	...	...	...	...	1	2
Lungs	...	...	...	...	...	...	...	7	3
Developmental—									
Hernia	...	...	...	...	...	...	...	—	—
Other	...	...	...	...	...	...	...	6	1
Orthopaedic—									
Posture	...	...	...	...	...	...	...	1	2
Feet	...	...	...	...	...	...	...	13	2
Other	...	...	...	...	...	...	...	57	10
Nervous System—									
Epilepsy	...	...	...	...	...	...	...	1	1
Other	...	...	...	...	...	...	...	—	—
Psychological—									
Development	...	...	...	...	...	...	...	6	2
Stability	...	...	...	...	...	...	...	1	3
Abdomen	...	...	...	...	...	...	...	14	—
Other	...	...	...	...	...	...	...	56	23
TOTAL								349	105

PART III

TREATMENT OF PUPILS

EYE DISEASES, DEFECTIVE VISION AND SQUINT

	Number of cases known to have been dealt with
External and other, excluding errors of refraction and squint	28
Errors of refraction (including squint)	550
Total	578
Number of pupils for whom spectacles were prescribed	331

DISEASES AND DEFECTS OF EAR, NOSE AND THROAT

	Number of cases known to have been dealt with
Received operative treatment—	
for diseases of the ear	84
for adenoids and chronic tonsillitis	205
for other nose and throat conditions	70
Received other forms of treatment	300
Total	659
Number of pupils in schools who are known to have been provided with hearing aids—	
in 1967	4
in previous years	14

ORTHOPAEDIC AND POSTURAL DEFECTS

	Number of cases known to have been treated
Pupils treated at clinics or out-patients departments—	
Specialist Clinics	11
By Local Authority Medical Staff	99
Pupils treated at school for postural defects	—
Total	110

PART III (cont.)

DISEASES OF THE SKIN

(excluding uncleanness, for which see Part I)

	Number of cases known to have been treated
Ringworm— Scalp	—
Body	—
Scabies	8
Impetigo	7
Other skin diseases	452
Total	467

CHILD GUIDANCE SERVICE

	Number of cases known to have been treated
Pupils treated at Child Guidance Clinic:—	
Maintained school children	73
Pre-school children	—
Private school children	5
Lancashire County school children	8
Total	86

(For further details see Table VI)

SPEECH THERAPY

	Number of cases known to have been treated
Pupils treated by speech therapists	47

OTHER TREATMENT GIVEN

	Number of cases known to have been dealt with
Pupils with minor ailments	447
Pupils who received convalescent treatment under School Health Service arrangements	—
Pupils who received B.C.G. vaccination	749
Artificial Sunlight	58
Remedial Exercises	392
No. of 5 year old entrants who have had Skin Tests	834
Total	2480

PART IV **SCHOOL DENTAL SERVICE**

	Health Depart- ment	Lincoln House	TOTALS
Inspections			
(a) Number of pupils having a first inspection during the year	7159	3486	10645
(b) Number of those pupils found to require treatment ...	2881	1928	4809
(c) Number of pupils re-inspected during the year ...	3417	2000	5417
(d) Number of those pupils found to require treatment ...	1605	915	2520
Number of individual pupils treated (i.e. first visits for treatment)	1802	722	2524
Number of attendances made by pupils for treatment or advice..	5198	3686	8884
Half days devoted to:—			
(a) Visits to schools (Inspections and Health Education)...	85	31	116
(b) Treatment (including 66 Orthodontic Sessions) ...	766	391	1157
Fillings—(a) Permanent Teeth	2883	687	3570
(b) Temporary Teeth	1477	888	2365
Total no. of fillings	4360	1575	5935
Number of Teeth filled—(a) Permanent Teeth	2524	670	3194
(b) Temporary Teeth	1369	837	2206
Total no. of teeth filled	3893	1507	5400
Extractions—(a) Permanent Teeth	431	330	761
(b) Temporary Teeth	1436	547	1983
Total no. of extractions	1867	877	2744
General Anaesthetic administered by Dental Officers	482	226	708
Orthodontics:			
(a) New Cases commenced	49	49	98
(b) Cases completed	37	22	59
(c) Cases discontinued	8	3	11
(d) Total attendances	806	157	963
Prosthetics —Number of dentures supplied	5	5	10
Other Operations (including X-rays, Prophylaxis, Teeth otherwise conserved, Root treatment, Inlays, Crowns, Dressings, etc.	765	1089	1854

TABLE V
AVERAGE HEIGHTS AND WEIGHTS

The table below shows the heights and weights of children in 1967.

Age last Birthday	1957	
	Height ft. ins.	Weight st. lbs.
Age 5 years		
Boys	3 7½	3 2½
Girls	3 7½	3 1½
Age 10 years		
Boys	4 7¼	5 8
Girls	4 7¼	5 8½
Age 14 years		
Boys	5 3	8 0½
Girls	5 2¼	8 2¼
Age 15 years		
Boys	5 7	9 2
Girls	*	*

*Not done due to building extensions and consequent curtailment of Survey.

TABLE VI
CHILD GUIDANCE SERVICE

	SOUTHPORT			LANCASHIRE COUNTY COUNCIL		TOTAL
	School Children		Pre- School Children	School Children	Pre- School Children	
	Maintained Schools	Private Schools				
Number of new children re- ferred	60	2	1	8	—	71
Number of children referred by:—						
Family Doctors	14	1	1	3	—	19
School Medical Officers...	1	—	—	—	—	1
Juvenile Court & Probation Officers	4	—	—	—	—	4
Consultant Medical (in- cluding Hospital Staff)	9	—	—	5	—	14
Children's Officer	3	—	—	—	—	3
Chief Education Officer...	1	—	—	—	—	1
Miscellaneous	28	1	—	—	—	29
TOTAL	60	2	1	8	—	71
Number of individual child- ren seen during year ...	73	5	—	8	—	86
Number of attendances made by:—						
Children	171	9	—	15	—	195
Parents	144	9	—	18	—	171
TOTAL	315	18	—	33	—	366
Number of children on wait- ing list at commencement of year	12	—	—	1	—	13
Number of children on wait- ing list at end of year ...	5	—	1	—	—	6

Number of sessions conducted by Consultant Child Psychiatrist 74

	SOUTHPORT			LANCASHIRE COUNTY COUNCIL		
	School Children		Pre- School Children	School Children	Pre- School Children	
	Maintained Schools	Private Schools				
	Number of home visits by Psychiatric Social Worker	—	—	—	—	—

TABLE VII
HANDICAPPED PUPILS

CATEGORY	NUMBER ASCERTAINED				TYPE OF EDUCATION PROVIDED			REQUIRING SPECIAL SCHOOL ACCOMMODATION BUT UNPLACED AT THE END OF THE YEAR			TOTALS
	No. on the register at the 1st Jan., 1967	No. added during the year, 1967	No. withdrawn in 1967	No. on the register at 31st Dec., 1967	Ordinary School	Day Class or School	Residential School	Day Class or School	Special School	Refusal by Parents	
BLIND	—	—	—	—	—	—	—	—	—	—	—
PARTIALLY SIGHTED ...	7	2	1	8	4	—	—	—	4	—	8
DEAF	—	1	—	1	—	—	—	—	1	—	1
PARTIALLY HEARING ...	17	3	3	17	5	10	2	—	—	—	17
DELICATE	1	—	1	—	—	—	—	—	—	—	—
DIABETIC	13	1	—	14	14	—	—	—	—	—	14
EDUCATIONALLY SUB-NORMAL ...	70	7	12	65	—	33	10	18†	4	—	65
EPILEPTIC	21	6	2	25	24	—	—	1	—	—	25
MALADJUSTED	6	—	2	4	1	—	2	—	1	—	4
PHYSICALLY HANDICAPPED	137	43	11	169	144	17	5	1	2	—	169
TOTALS ...	272	63	32	303	192	60	19	20	12	—	303

† This figure includes children in 'Opportunity' Classes awaiting Day Special School accommodation and also children recommended for 'Opportunity' Classes who have managed to cope in a 'C' stream in a senior school.

TABLE VIII

B.C.G. VACCINATION OF SCHOOL CHILDREN

	KIND OF SCHOOL			TOTALS	
	Local Authority Schools	Private Schools	St. Thomas More Approved School	No.	%
Number of consent forms issued to parents	951	173	48	1172	—
Number of parental consents received	863	155	48	1066	91·0
Number of definite refusals ...	72	5	—	77	6·5
Number of parents who did not reply	16	13	—	29	2·5
TOTAL	951	173	48	1172	100
Number of Children tested ...	783	151	30	964	90·0
Number of children with consent forms but not tested ...	80	4	18	102	10·0
TOTAL	863	155	48	1066	100
Number of children tested and found to be:—					
Positive reactors	95	38	18	151	15·7
Negative reactors	638	108	12	758	78·6
Number not read	50	5	—	55	5·7
TOTAL	783	151	30	964	100
Number of negative reactors vaccinated	630	107	12	749	—

TABLE IX

TUBERCULIN SKIN TESTING OF SCHOOL ENTRANTS

Number of children already tested	...	...	...	...	...	...	20
Number of 'no replies'	...	...	...	...	...	...	213
Number of definite refusals	...	...	...	...	...	...	48
Number of consents received	...	...	...	...	...	...	993
Total number of eligible children	...	...	...	...	...	...	1274
Number of children tested	...	...	...	...	...	...	834
Number of children absent from the test	...	...	...	...	...	...	159
Total number of children for whom consents were received	...	...	...	...	...	...	993
Number of children tested and found to be:—							
(a) positive	...	...	...	...	...	...	14
(b) positive from previous B.C.G. vaccination	...	...	...	...	...	...	23
(c) negative	...	...	...	...	...	...	785
(d) absent from reading	...	...	...	...	...	...	12
Total number of children tested	...	...	...	...	...	...	834
Number of children referred to the Chest Clinic	...	...	...	...	...	...	14
Number of contacts found to have active disease	...	...	...	...	...	...	NIL

