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Contributors

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COUNTY BOROUGH OF SOUTHPORT

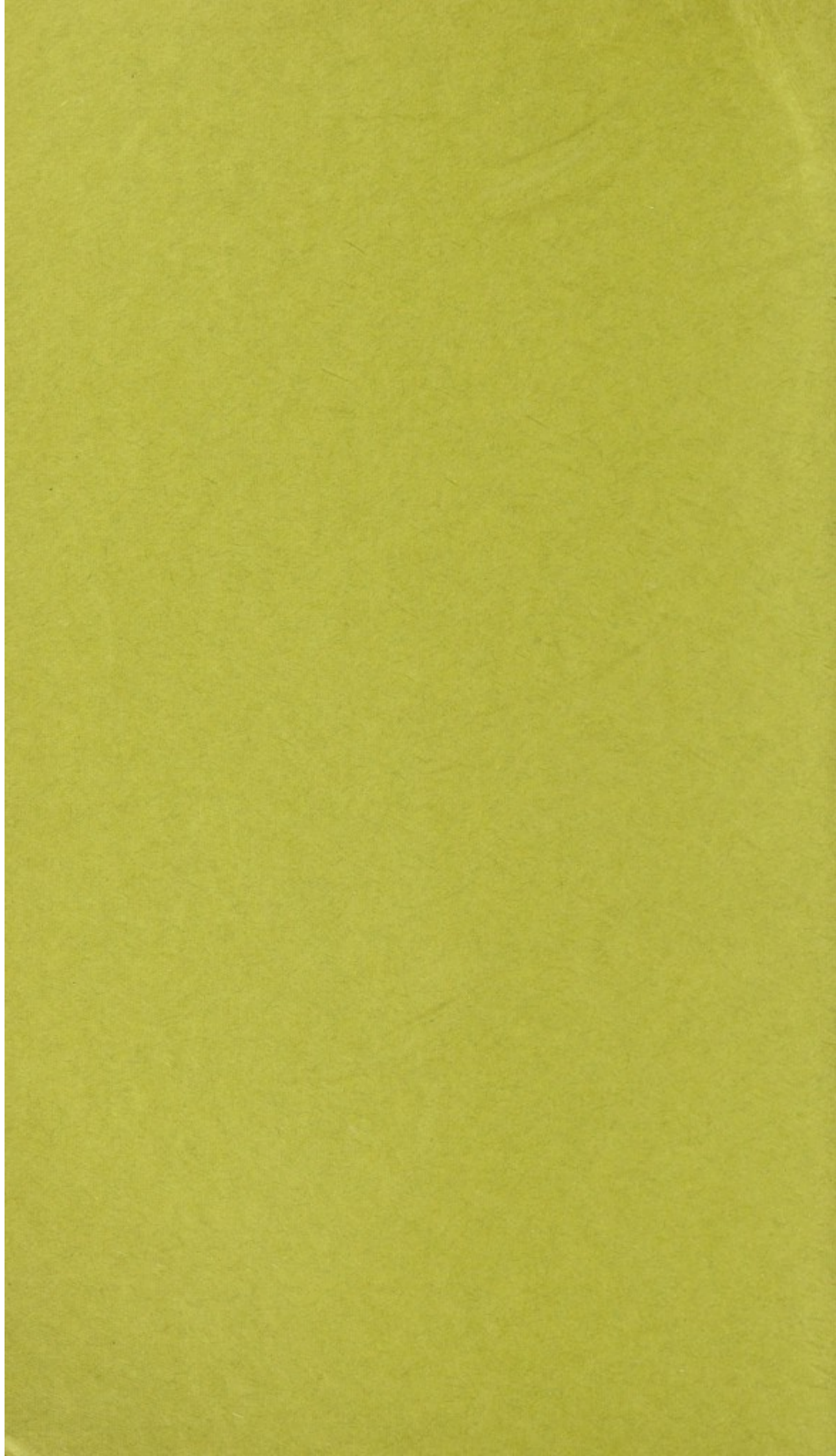


ANNUAL REPORT
OF THE
MEDICAL OFFICER OF HEALTH
AND
PRINCIPAL SCHOOL MEDICAL OFFICER
FOR THE YEAR 1968



Telephone No.
Southport 5523.

Health Department,
2 Church Street, Southport.



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HEALTH COMMITTEE

(31st December, 1968)

The Worshipful the Mayor Councillor G. TAYLOR, J.P.

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

SENIOR STAFF OF THE DEPARTMENT

(in post on 31st December, 1968—*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.
Assistant Medical Officer	...	...	K. ABRAHAM, M.B., Ch.B.
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.
Principal 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
Manager, 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	Miss L. CURNAN, R.M.N., R.M.P.A.
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 1968

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

I have little comment to make this year on the statistical information which is given in the body of the report: I mention only that the mid-year estimated population has gone up a little from 79,710 in 1967 to 79,940, a small but welcome rise, and that the illegitimate birth rate has risen again, this time from 9.7% in 1967 to 11.04% this year which can provide no satisfaction.

It is my duty to collect information of different kinds and from many sources about the health of the people living in the County Borough. We are in a period of rapid change in our way of living and though many of the old hazards to health have been largely overcome, others have arisen to take their place. It is perhaps not generally appreciated that constant and continuing efforts are necessary to maintain control of those infectious diseases which formerly led to so much loss of life and health. In this regard it is heartening to see the gradual reduction in tuberculosis and for the first time NO deaths due to this disease were recorded during the year. There is constant war between man and microbe and we are only just beginning to learn about the very large group of viruses which are responsible for a great deal of ill health. A great step forward has been taken by the introduction this year of vaccination against measles.

We do not really appreciate the value of good health, which is priceless, until we begin to lose it. We do not make sufficient positive efforts to encourage our people to avoid injury to health and to develop habits of living, conducive to a good state of health. There are, however, some encouraging signs that people are much more knowledgeable than they used to be about, e.g. the dangers of allowing themselves to become overweight and are taking steps to watch their weights and diet accordingly.

It has seemed to me for a long time that health education both from the aspects of preventive medicine and biology, should be available to children at school, using a carefully graduated syllabus at different ages so that all children could have some simple knowledge of bodily processes and could be given information about healthy living. Teaching of this kind is very varied and fragmented at present and cannot really be done satisfactorily by staff of the school health department, though some teaching is carried out by the school nurses. I should like to see teachers in training given more instruction in this subject and make use of it in schools later on with the help and encouragement of the school medical and nursing staff.

Of the three major Government Reports to which I made reference in the foreword to my last Annual Report, the contents of two are known and the third is expected to be published early in 1969.

The Report of the Committee on Local Authority and Allied Personal Social Services (the Seebohm Report) which recommends the setting up of new Social departments under a Chief Officer trained in social work has had a mixed reception. There is much of value in this report but medical opinion is strongly against some of the recommendations. Two matters give particular concern, firstly the suggested removal from direct medical control, of mental welfare officers and psychiatric social workers in local health authorities, secondly the difficulty that all doctors would have in preserving the confidential character of information about their patients; without such information social workers may be unable to make correct assessments of clients' problems. At the moment the Central Government is considering what action should be taken on the recommendations in this Report in conjunction with those expected about the future of local government as a whole, and those finally agreed about the future administration of the National Health Service.

The second Report to which I made reference last year was published as a Green Paper on the Administrative Structure of the Medical and Related Services in England and Wales, and called for unification of the administration of the three parts of the National Health Service, the Hospital Service, the Local Executive Council Services and the Local Health Authority Services. Opinion was against the means suggested in this report to bring about unification of these three parts, and the Secretary of State for the Health Services has announced that the Government will not implement the recommendations but will publish a further Green Paper on the subject in 1969.

It is not yet known what action the Government will take when the recommendations about the reform of Local Government are under discussion as they must be soon, but it seems likely that whatever change comes about as a result of all these deliberations, it will have far reaching effects on the health of the people for many years to come. It is of first importance that the decisions to be made are wise so that the elected representatives of the people and the staffs concerned, can have confidence in them, and can make them work in an efficient and democratic way.

The routine work of the department continues to increase and this is, to some extent, due to the age structure of the population and the resultant numbers of elderly people in the town. It has been possible to improve the Home Nursing, Home Help, and Nursing Equipment Services during the year, but the demand for them has also become greater. Artificial dialysis has been arranged in one patient's home where, in collaboration with the Liverpool Regional Hospital Board, an artificial kidney machine was installed.

Discussions have continued throughout the year on the question of Health Centre Development in the town, where staff of the local Health Authority and Family Doctors could work together in the same buildings. There are a great many problems in a town of this kind where practices are already well established and suitable building sites are few. There now seems to be some chance of a development of this kind in the Churchtown area where the Family Doctors would like to work in a Health Centre. Financial considerations weigh heavily and there is some feeling that any cost for accommodation provided for Family Doctors should not come from the rates. This is a matter for local agreement between the Family Doctors, the Local Executive Council and the Local Authority. It seems to me that since the local Health Authority is responsible for the promotion of health and the prevention of disease, and the Family Doctor is to be expected to take a greater interest in the future in preventive medicine, money expended on a Health Centre in the Churchtown area would be well spent. It would improve considerably the present services and would be a valuable community development. I hope very much that the many difficulties can be overcome.

Finally, the basic environmental health work, which goes on from day to day, must be noted again. In this the duties of the Public Health Inspectors are of prime value. In food hygiene matters, where a very great deal of work has been done, much remains undone: shops retailing food must keep pace with the demand for higher standards in the fittings and refrigeration used, or eventually they will lose business. Many of the houses in the borough are showing signs of poor maintenance and it is to be hoped that all owners of houses which are capable of improvement to modern standards will take steps to put such houses into a good state of repair, and at the same time install modern bathing and toilet facilities: substantial financial grants are available in certain circumstances but not all owners who might do so, have taken advantage of them.

I wish to express my thanks to the members of Council, my medical colleagues in the town, the staff of the department, and all those who have given me support and encouragement during the year.

I am,

Yours faithfully,

G. N. M. WISHART,

Medical Officer of Health.

Section I

STATISTICS

GENERAL STATISTICS

	1967	1968
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	79,710	79,940
Density of Population per acre (excluding Foreshore)	8.46	8.48

VITAL STATISTICS

Live Births Legitimate	1,025	1,015
Illegitimate	110	126
Total	1,135	1,141
Males	590	607
Females	545	534
Total	1,135	1,141
Rate per 1,000 population	14.24	14.27
Adjusted Birth Rate per 1,000 population	17.09	17.12
(area comparability factor)	(1.20)	(1.30)
Birth Rate for England and Wales	17.2	16.9
Illegitimate Live Births per cent of total live births	9.7%	11.04%
Stillbirths Number	19	13
Rate per 1,000 total live and stillbirths	16.74	11.26
Total live and stillbirths	1,154	1,154
Infant Deaths (under 1 year)	14	28
Infant Mortality Rates:		
Total Infant Deaths per 1,000 total live births	12.34	24.54
Legitimate Infant Deaths per 1,000 legitimate live births	11.70	23.64
Illegitimate Infant Deaths per 1,000 illegitimate live births	18.18	31.75
Neo-natal Mortality Rate (deaths under 4 weeks per 1,000 total live births)	10.57	18.41
do. England and Wales	—	12.30
Early Neo-natal Mortality Rate (deaths under 1 week per 1,000 total live births)	7.93	14.90
do. England and Wales	—	10.50
Perinatal Mortality Rate (stillbirths and deaths under 1 week combined per 1,000 total live and stillbirths)	24.27	26.00
do. England and Wales	—	25.00
Maternal Mortality (including abortion)		
Number of Deaths	Nil	1
Rate per 1,000 total live and stillbirths	—	0.9
Deaths of Infants under 1 day old	5	11
Infant Mortality Rate per 1,000 births for England and Wales	18.30	18.00
Year 1968 1967		
Deaths Males 699 685	1,479	1,614
Females 915 794		
Rate per 1,000 population	18.56	20.19
Adjusted death rate per 1,000 population	12.44	13.53
(area comparability factor)	(0.67)	(0.67)
Death Rate for England and Wales	11.20	11.90
Excess of Deaths over Registered Births	344	473

VITAL STATISTICS
Comparison of Birth, Death and Infant Mortality Rates for England, Wales and Southport
for Period 1881 to 1968

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
1968	16.9	17.12	11.9	13.53	18.0	24.5

Corrected Rates for births and deaths are shown from 1951

REGISTRAR GENERAL'S SHORT LIST OF CAUSES OF DEATH, 1968

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	
B4 Enteritis and other Diarrhoeal Diseases	M F	— 1	—	— 1	—	—	—	—	—	—	—	—	—	—
B19(1) Malignant Neoplasm—Stomach	M F	19 11	—	—	—	—	—	—	1	2	5	6	5	6
B19(2) Malignant Neoplasm—Lung, Bronchus	M F	49 6	—	—	—	—	—	1	—	2	18	21	8	2
B19(3) Malignant Neoplasm—Breast	M F	1 24	—	—	—	—	—	1	2	1	4	1	8	8
B19(4) Malignant Neoplasm—Uterus	F	11	—	—	—	—	—	—	1	2	4	2	2	2
B19(5) Leukaemia	M F	7 2	—	—	2	2	—	1	—	—	1	1	—	—
B19(6) Other Malignant Neoplasms	M F	62 65	—	—	—	—	—	—	1 2	3 4	9 13	29 23	20 23	20 23
B20 Benign and Unspecified Neoplasms	M F	2 —	—	—	—	—	—	—	1	—	1	—	—	—
B21 Diabetes Mellitus	M F	7 10	—	—	—	—	—	—	—	2	1	2	2	6
B22 Avitaminoses, etc.	M F	— 1	—	—	—	—	—	—	—	—	—	—	—	1
B46(1) Other Endocrine, etc. Diseases	M F	— 3	—	—	—	—	—	—	—	—	—	—	—	3
B23 Anaemias	M F	1 1	—	—	—	—	—	—	—	—	—	1	—	1
B46(2) Other Diseases of Blood, etc.	M F	1 —	—	—	—	—	—	—	—	—	—	1	—	—
B46(3) Mental Disorders	M F	— 1	—	—	—	—	—	—	—	—	—	—	—	1
B46(4) Other Diseases of Nervous System etc.	M F	7 8	—	—	—	1	1	—	—	1	1	1	2	2
B26 Chronic Rheumatic Heart Disease	M F	3 3	—	—	—	—	—	—	—	—	—	1	2	1
B27 Hypertensive Disease	M F	4 24	—	—	—	—	—	—	—	1	—	1	2	17
B28 Ischaemic Heart Disease	M F	212 244	—	—	—	—	—	1 2	3 1	12	51 18	67 55	78 168	78 168
B29 Other Forms of Heart Disease	M F	38 80	—	—	—	—	—	—	1	1	6 5	8 11	22 64	22 64
B30 Cerebrovascular Disease	M F	80 172	—	—	—	—	—	2	1 1	6 2	6 9	24 33	41 127	41 127
B46(5) Other Diseases of Circulatory System	M F	29 45	—	—	—	—	—	—	—	1	3 3	5 11	20 30	20 30
B31 Influenza	M F	1 5	—	—	—	—	—	—	—	—	—	1	—	5
B32 Pneumonia	M F	39 54	1	2	—	—	—	—	1	2	2 4	13 10	18 39	18 39

REGISTRAR GENERAL'S SHORT LIST OF CAUSES OF DEATH, 1968-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
B33(1) Bronchitis and Emphy- sema	M	59	—	—	—	—	—	—	—	2	12	18	27
	F	20	—	—	—	—	—	—	—	—	4	7	9
B33(2) Asthma	M	2	—	—	—	1	—	—	—	—	1	—	—
	F	3	—	—	—	—	—	—	1	—	1	—	1
B46(6) Other Diseases of the Respiratory System	M	3	—	—	—	—	—	—	—	—	1	1	1
	F	6	—	—	—	—	—	—	1	—	1	1	3
B34 Peptic Ulcer	M	4	—	—	—	—	—	—	—	—	1	2	1
	F	5	—	—	—	—	—	—	—	—	—	2	3
B35 Appendicitis	M	1	—	—	—	—	—	—	—	—	—	1	—
	F	—	—	—	—	—	—	—	—	—	—	—	—
B36 Intestinal Obstruction and Hernia	M	—	—	—	—	—	—	—	—	—	—	—	—
	F	6	—	—	—	—	—	—	—	—	1	1	4
B37 Cirrhosis of Liver	M	1	—	—	—	—	—	—	—	—	1	—	—
	F	2	—	—	—	—	—	—	—	1	—	—	1
B46(7) Other Diseases of Diges- tive System	M	6	—	—	—	—	—	—	—	—	3	2	1
	F	8	—	—	—	—	—	—	—	—	1	5	2
B38 Nephritis and Nephrosis ...	M	3	—	—	—	—	—	—	—	—	2	1	—
	F	7	—	—	—	—	—	—	—	—	1	2	4
B39 Hyperplasia of Prostate ...	M	7	—	—	—	—	—	—	—	—	—	1	6
B46(8) Other Diseases, Genito— Urinary System	M	2	—	—	—	—	—	—	—	—	—	1	1
	F	4	—	—	—	—	—	—	—	1	—	1	2
B41 Other Complications of Pregnancy, etc.	F	1	—	—	—	—	1	—	—	—	—	—	—
B46(9) Diseases of Skin, Sub- cutaneous Tissue	M	2	—	—	—	—	—	—	—	—	1	1	—
	F	—	—	—	—	—	—	—	—	—	—	—	—
B46(10) Diseases of Musculo- Skeletal System	M	1	—	—	—	—	—	—	—	—	1	—	—
	F	5	—	—	—	—	—	—	—	—	2	1	2
B42 Congenital anomalies ...	M	3	1	—	1	—	—	—	—	1	—	—	—
	F	5	3	1	—	—	—	—	—	—	1	—	—
B43 Birth Injury, Difficult Labour, etc.	M	5	5	—	—	—	—	—	—	—	—	—	—
	F	5	5	—	—	—	—	—	—	—	—	—	—
B44 Other Causes of Perinatal Mortality	M	4	3	1	—	—	—	—	—	—	—	—	—
	F	3	3	—	—	—	—	—	—	—	—	—	—
B45 Symptoms and Ill-Defined Conditions	M	—	—	—	—	—	—	—	—	—	—	—	—
	F	3	—	—	—	—	—	—	—	—	—	—	3
BE47 Motor Vehicle Accidents	M	6	—	—	—	—	1	—	1	—	1	3	—
	F	7	—	—	1	1	1	—	—	1	2	1	—
BE48 All Other Accidents ...	M	14	—	—	—	1	—	1	—	1	1	3	7
	F	46	—	—	—	—	—	—	1	2	4	5	34
BE49 Suicide and Self Inflicted Injuries	M	10	—	—	—	—	1	2	1	—	1	3	2
	F	6	—	—	—	—	—	—	—	1	1	2	2
BE50 All Other External Causes	M	4	—	—	—	—	—	—	1	—	2	1	—
	F	2	—	1	—	—	—	—	—	—	—	1	—
TOTAL ALL CAUSES	M	699	10	3	3	5	3	7	12	37	132	221	266
	F	915	11	4	1	3	2	7	10	15	84	202	576

PROPORTION OF DEATHS FROM PRINCIPAL CAUSES

CAUSE OF DEATH	1968		1967	
	Number	% of total deaths	Number	% of total deaths
Heart Disease including diseases of the circulatory system	682	42.26	617	41.72
Cancer	259	16.05	250	16.90
Cerebrovascular disease	252	15.61	209	14.13
Respiratory Diseases	192	11.89	163	11.02
Violence, including suicide	89	5.51	69	4.66
All Other Causes	140	8.68	171	11.57
Totals	1,614	100.00	1,479	100.00

DEATHS DUE TO VIOLENCE, Year 1968

Classification	Male	Female	Totals
Motor Vehicle Accidents	6	7	13
All other accidents	14	46	60
Suicide	10	6	16
Totals	30	59	89

Age Groups	0—15 yrs.		15—65 yrs.		65 and over	
	M.	F.	M.	F.	M.	F.
Motor Vehicle Accidents	0	2	3	4	3	1
All other accidents	1	0	3	7	10	39
Suicide & self inflicted injuries ...	0	0	5	2	5	4
Totals	1	2	11	13	18	44

DEATHS

Numbers and Rates per 1,000 population and per 1,000 births—years 1959—1968

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	Rate per 1,000 Legiti- mate Births	Illegiti- mate Births	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								
1959	81370	603	773	1376	16.91	12.51	21	20	18	18	3	63	18	3	3	7	0.08	1	0.01
1960	81350	648	783	1431	17.59	12.84	36	34	33	32	3	55	32	3	4	4	0.05	2	0.02
1961	81020	656	824	1480	18.27	13.34	19	17	16	16	3	45	16	3	4	4	0.05	—	—
1962	80730	661	831	1492	17.24	12.69	22	21	22	22	—	—	22	—	4	4	0.05	—	—
1963	80160	702	800	1502	18.74	13.12	29	26	28	27	1	13	27	1	10	10	0.12	—	—
1964	80080	641	819	1460	18.23	12.76	21	19	20	19	1	14	20	1	7	7	0.09	1	0.01
1965	79980	662	758	1420	17.76	11.72	25	23	20	20	5	55	20	5	3	3	0.04	1	0.01
1966	80000	636	803	1439	17.99	12.23	27	24	25	24	3	26	24	3	4	4	0.05	—	—
1967	79710	685	794	1479	18.56	12.44	14	12	12	11	2	18	11	2	1	1	0.01	—	—
1968	79940	699	915	1614	20.19	13.53	28	25	24	23	4	32	23	4	—	—	—	—	—

CANCER

Localisation of Disease and Number of Deaths for years 1959 to 1968

Site	1959	1960	1961	1962	1963	1964	1965	1966	1967	1968
Stomach and Duodenum	32	30	28	38	24	33	26	33	24	30
Lung Bronchus	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)	55 (Male 49) (Female 6)
Breast	28	28	25	31	26	18	25	26	30	25
Uterus	14	5	10	13	9	7	10	8	12	11
Other Sites	127	115	98	113	112	122	118	121	118	129
Leukaemia	2	7	6	6	7	9	7	11	8	9
Total Deaths From Cancer	240	224	218	262	242	234	247	251	250	259
Total Deaths All Causes	1376	1431	1480	1492	1502	1460	1420	1439	1479	1614
% of Cancer Deaths	17.44	15.65	14.73	17.56	16.11	16.03	17.40	17.44	16.90	16.05

MATERNAL MORTALITY FOR YEARS 1959 TO 1968

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
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	—	—	—	—	—	—
1968	1141	1154	—	—	1	0.90	1	0.90

LIVE PREMATURE BIRTHS FOR YEAR 1968

Weight at birth	PREMATURE LIVE BIRTHS												PREMATURE STILL BIRTHS	
	Born in hospital				Born at home or in a nursing home									
					Nursed, entirely at home or in a nursing home				Transferred to hospital on or before 28th day					
	Total births (1)	within 24 hours of birth (2)	In 1 under 7 days (3)	in 7 and under 28 days (4)	Total births (5)	within 24 hours of birth (6)	in 1 under 7 days (7)	in 7 and under 28 days (8)	Total births (9)	within 24 hours of birth (10)	in 1 under 7 days (11)	in 7 and under 28 days (12)	In hospital (13)	Born at home or in a nursing home (14)
2 lb. 3 oz. or less	6	3	2	—	—	—	—	—	—	—	—	—	1	—
Over 2 lb. 3 oz. up to and including 3 lb. 4 oz.	5	1	2	—	—	—	—	—	—	—	—	—	2	—
Over 3 lb. 4 oz. up to and including 4 lb. 6 oz.	10	3	1	—	—	—	—	—	—	—	—	—	1	—
Over 4 lb. 6 oz. up to and including 4 lb. 15 oz.	11	1	1	—	—	—	—	—	—	—	—	—	2	—
Over 4 lb. 15 oz. up to and including 5 lb. 8 oz.	29	1	4	—	4	—	—	—	—	—	—	—	2	—
Totals	61	9	10	—	4	—	—	—	—	—	—	—	8	—

INFANT MORTALITY
Number of Deaths from Stated Causes at Various Periods
Under 1 Year of Age for Year 1968

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
Broncho-Pneumonia	—	—	—	—	1	—	—	—	—	—	1	—	—	—	—	—	1	1	1	—	—	5
Prematurity	5	—	1	1	—	—	—	2	—	—	1	—	—	—	—	—	—	—	—	—	—	10
Atelectasis	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	2
Lacerated Liver	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1
Subdural Haematoma	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	1
Congenital Abnormalities	2	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	3
Meconium Pneumonitis	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1
Respiratory Failure Intracranial Pressure	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1
Respiratory Distress Syndrome Birth by Caesarean Section	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1
Cerebral Haemorrhage	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	1
Intraventricular Brain Haemorrhage	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1
Gastro-Enteritis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	1
TOTALS	11	1	1	1	1	2	—	2	1	1	2	—	—	—	—	1	2	1	1	—	—	28

CONGENITAL MALFORMATIONS

During the year, 16 cases of congenital malformations occurring in Southport children were reported, 9 males and 7 females. Of these 2 males and 1 female were still-born, and 1 male and 3 females died, three malformations occurring in the male death.

The classification of these cases is shown below:—

					LIVE		STILLBORN		DEATHS	
					M	F	M	F	M	F
CENTRAL NERVOUS SYSTEM										
Anencephalus	...	...	...	...	—	—	1	1	—	—
Hydrocephalus	...	...	...	...	1	1	1	—	1	1
Defects of spinal cord	...	...	...	...	1	—	—	—	1	—
Spina Bifida	...	...	...	...	—	1	—	—	—	—
ALIMENTARY SYSTEM										
Cleft Palate	...	...	...	...	—	1	—	—	—	—
URO-GENITAL SYSTEM										
Hypospadias	...	...	...	...	4	—	—	—	—	—
LIMBS										
Reduction deformities	...	...	...	...	—	1	—	—	—	1
Syndactyly	...	...	...	...	1	—	—	—	—	—
Talipes	...	...	...	...	1	—	—	—	1	—
Dislocation of hip	...	...	...	...	—	1	—	—	—	—
OTHER SYSTEMS										
Vascular defects of skin	...	...	...	...	1	—	—	—	—	—
Exomphalus	...	...	...	...	—	2	—	—	—	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.

Section II

PERSONAL HEALTH SERVICES

CARE OF MOTHERS AND YOUNG CHILDREN

Ante-Natal Care

A weekly Ante-Natal Clinic was held at 44 Hoghton Street during 1968 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.

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 1968

(i) No. of women who attended the clinic for the first time during the year:—								
St. Katharine's Maternity Hospital cases	...	...	...	...	...	...	...	38
District cases	...	...	...	...	...	...	...	—
Total								38
(ii) No. of women included in (i) above who were sent by their family doctor or general practitioner obstetrician								
	...	...	...	...	...	...	...	19
No. of attendances made by mothers during the year:—								
St. Katharine's Maternity Hospital cases	...	...	...	...	...	...	...	191
District cases	...	...	...	...	...	...	...	—
Total attendances during year								191
No. of sessions held by hospital medical staff during the year								
	...	...	...	...	...	...	...	50
District Midwives' Sessions:								
at 44 Hoghton Street clinic	...	...	...	...	...	...	...	4
at Clinics held in general practitioners' surgeries	...	...	...	...	...	...	...	188

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 1968

No. of women who attended the clinic for the first time during the year ...	690
No. of attendances made by mothers during the year	750
No. of sessions held by hospital medical staff during the year	52
No. of sessions by health visitors during the year	52

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 1968 was 617, as compared with 535 during 1967.

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 Principal 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 Principal 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 Health Centres

There are seven Centres in the town and in addition to the normal work, each Centre distributes the dried milk and vitamin foods issued by the Ministry of Health. As in the past the ladies of the Voluntary Infant Welfare Committee provided clerical and other assistance at the Centres during 1968 and their efforts and enthusiasm contributed in no small measure to the success of the work.

The seven Child Health 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 Crossens, Derby Road and Marshside and two sessions each week are held at the Centres at Hampton Road, Lincoln House, Poulton Road and Ainsdale. The second weekly Session at Ainsdale was started in March 1968.

It is the Council's policy to replace all temporary Child Health 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 1968

	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 1968	88	173	121	140	75	137	149	883
1967	101	185	137	184	83	101	195	986
1963-66	191	266	307	335	157	182	390	1,828
TOTALS	380	624	565	659	315	420	734	3,697
Total attendances during the year	1,682	3,163	2,669	3,441	1,358	2,203	3,203	17,719
No. of sessions during the year	48	97	95	97	47	48	84	516
Average attendances per session	35	33	28	35	29	46	37	34
No. of children referred for special treatment or advice as a result of a medical examination ...	—	14	—	14	—	3	1	32
No. of children placed on "at risk" register ...	11	35	26	28	9	34	14	157
No. of sessions by:								
Medical Officers ...	47	93	92	95	47	47	84	505
General Practitioners employed on sessional basis	—	—	—	—	—	—	—	—
Hospital Medical Staff Health Visitors (with doctor)	96	234	190	196	94	136	222	1,168
Health Visitors ...	1	4	3	2	—	1	—	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 1968 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	772	244	191
Expectant and Nursing Mothers	64	22	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 ...	418	140	61	—	2	20	/	/	/
Expectant and Nursing Mothers ...	32	14	4	2	7	/	—	—	—

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 119.

Physiotherapy

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

Statistics for Year 1968

	Ante-Natal	Post-Natal
No. of women who attended for the first time during the year:		
St. Katharine's Maternity Hospital	85	542
Christiana Hartley Maternity Hospital	28	28
District cases	12	5
Attended Physiotherapy only	14	15
Total No. of cases	139	590
No. of attendances during the year	588	694
No. of sessions held by physiotherapists during the year...	91	95

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 Principal 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 66 new cases and the Health Committee paid the maintenance costs in voluntary homes for 15 mothers during the ante and post-natal period.

Further details about the 66 new cases dealt with by the Moral Welfare Worker during 1968 are shown below.

First Pregnancies	56
Second Pregnancies	9
Third Pregnancies	1

Included in the above were 5 married women expecting illegitimate children.

Of the babies born:

- 33 were placed for adoption;
- 18 were kept by mothers;
- 2 died;
- 1 was taken into care of Local Authority;
- 5 were taken into care of Church of England Nurseries;
- 3 moved out of the area;

and in 4 cases the Moral Welfare Worker lost touch with the mothers.

National Welfare Foods

Statistics for Year 1968

Quantities Sold	National Dried Milk	Orange Juice	Cod Liver Oil	Vitamin 'A' & 'D' Tablets
	Tins	Bottles	Bottles	Packets
HEALTH DEPARTMENT—				
Counter Issues	751	4,823	238	672
Issues to National Health Service Institutions	7	42	—	—
Issues to Day Nurseries	—	116	72	—
Total Sales from Health Department ...	758	4,981	310	672
CHILD WELFARE CENTRES—				
Ainsdale	147	4,557	199	238
Lincoln House	170	2,445	194	107
Crossens	35	1,002	44	25
Poulton Road	45	1,265	111	123
Hampton Road	149	1,697	151	234
Marshside Road... ..	75	1,554	101	100
Derby Road	74	879	84	65
Total Sales from Child Welfare Centres ...	695	13,399	884	892
GRAND TOTALS	1,453	18,380	1,194	1,564

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 were amended to 2/6 minimum and 16/- maximum from 1st June, 1968.

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 7/3d. for each child.

It is pleasing to note that the four students who completed the two years course which commenced in September, 1966 and terminated in 1968, were successful in obtaining the Certificate of the National Nursery Examination Board.

The Nursery Nurses' Training Scheme was continued in 1968 in conjunction with the Education Committee with 4 students who were appointed for the two year course commencing in September, 1968.

Statistics for Year 1968

	Southport	Bedford Park	Totals
Number of places provided	60	40	100
Total attendances	13302	8909	22211
Number of days open	254	254	254
Average daily attendance	52.4	35.0	87.4

MIDWIFERY

District Midwifery

Three full-time Midwives and one District Nurse/Midwife 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 clinic, 44 Hoghton Street, Midwifery Office, 2 Church 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 1968

No. of confinements attended by district midwives:								
Doctor not booked	...	...	...	...	...	...	...	nil.
Doctor booked...	...	...	...	...	...	...	...	69
TOTAL								69
Premature Babies (5½ lb. or under):								
No. born at and being nursed at home	...	...	...	...	...	...	...	3
No. born at home and transferred to hospital	...	...	...	...	...	...	...	1
TOTAL								4
No. of mothers delivered in hospitals and other institutions but discharged and attended by district midwives before tenth day								621
No. of home visits made by district midwives								5056
No. of supervisory visits								12

Midwives in Private Practice

During the year one private midwife notified her intention to practise on the district, but did not deal with any confinements.

Maternity Nursing Homes—There were no deliveries in private nursing homes 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 1968. These figures are for residents and non-residents of Southport.

	Christiana Hartley Maternity Hospital	St. Katharine's Maternity Hospital	TOTAL
(1) Number of patients	1088	418	1506*
(3) Number of practising midwives on the staff at the end of the year... ..	21	9	30†
(4) Number of midwives in (3) above who are qualified to administer gas and air analgesia	21	9	30

*Includes 993 Southport residents and 513 non-residents.

†18 full-time and 12 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.

	1968		1967	
	No. of Cases	%	No. of Cases	%
District				
Municipal Midwives	69	6.5	83	7.9
Private Midwives	—	—	—	—
TOTALS (a)	69	6.5	83	7.9
Institutions				
Christiana Hartley Mat. Hospital	704	66.2	654	62.2
St. Katharines Maternity Hospital	289	27.2	314	29.8
Nursing Homes	—	—	1	0.1
Southport Infirmary	1	0.1	—	—
TOTALS (b)	994	93.5	969	92.1
GRAND TOTALS (a) and (b)	1063	100.0	1052	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.

HEALTH VISITING

The present establishment consists of a Principal Nursing Officer, 1 Deputy Principal Nursing Officer, 1 Assistant Principal Nursing Officer, 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 26.

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 Health Centres where few general practitioners or hospital doctors work. The attendances at these Centres, 17,719 as against 17,432 in 1967, 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.

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 Health 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 and other Centres.

Statistics for year 1968

No. of children born in 1968 visited	...	...	...	...	...	...	1,053
No. of children born in 1967 visited...	...	...	...	...	...	...	1,208
No. of children born in 1963-66 visited	...	...	...	...	...	...	3,825
Total number of children	...	...	...	...	...	...	6,086
Persons aged 65 or over visited	...	...	...	...	...	...	2,061
Mentally disordered persons visited	...	...	...	...	...	...	83
Other cases visited	...	...	...	...	...	...	1,271*
Persons, excluding Maternity cases, discharged from hospital (other than mental hospitals)	...	...	...	...	...	...	294
Number of tuberculous households visited by tuberculosis visitor	...	...	...	...	...	...	76
Total no. of effective visits made by Health Visitors & Nurses	...	...	...	...	...	...	28,526

* This increase is due to the inclusion in this line of ante-natal cases, adults under 65 with social problems etc. which have not been included in previous years.

Sessions Attended by Health Visitors and Nurses	No. of Attend'ces
Geriatric	189
Ante-Natal	41
Post-Natal	52
Child Health Centres	1,195
G.P. Surgeries	103
G.P. at Child Health Centre	20
G.P.'s Cytology—Surgery	—
G.P.'s Cytology—at Child Health Centre	9
Cytology at Health Department	8
V.D. Clinic	16
Paediatric	99
B.C.G. and Heaf Testing	25
Clerical	652
Miscellaneous	344
Mothercraft	91
Mothers Evening Clubs	8
Total	2,879

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
2019	1	1	nil

Testing for phenylketonuria was carried out during the year chiefly by the use of the 'Guthrie' test.

HOME NURSING

The staff of the Home Nursing Service at the end of the year was a Deputy Superintendent, 19 State Registered Nurses, 3 State Enrolled Nurses and 2 Bath Attendants.

The use of presterilized disposable equipment was increased during the year and now includes catheters, dressing packs, enemas, syringes and spirit swabs.

In February 1967, 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 1968 was 103 and the total number of attendances made by patients was 2,415.

During the year, 14 patients suffering from cancer were helped by the day and night nursing service at a total cost to the Marie Curie Foundation of £290. In addition 1 other patient received help from the welfare grant fund, the total expenditure being £7 6s. 8d. 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 1968

Total no. of new patients visited during the year (i.e. patients who have not been previously visited this year)	...	...	...	...	2,421
No. of patients who were aged:					
under 5 years at time of first visit this year...	...	...	...	...	42
over 65 years at time of first visit this year	...	...	...	...	1,674
Total no. of visits made by nurses during the year	...	...	...	...	76,570

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 Child Health 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 Child Health Centres.

Vaccination against measles was introduced during the year and should make a big contribution towards the prevention of disease in children. Mothers have welcomed this new addition to the immunisation armamentarium.

The following are the suggested ages when children may be vaccinated and immunised against certain diseases:—

Age	Vaccine	Interval
During the first year of life	Diphtheria / Tetanus / Whooping Cough and oral Polio Vaccine (First Dose)	Preferably after an interval of 6-8 weeks Preferably after an interval of six months.
	Diphtheria / Tetanus / Whooping Cough and oral Polio Vaccine (Second Dose)	
	Diphtheria / Tetanus / Whooping Cough and oral Polio Vaccine (Third Dose)	
During the second year of life	Measles vaccination	After an interval of not less than 3-4 weeks.
	Smallpox vaccination	After an interval of not less than 3-4 weeks.
At 5 years of age or school entry	Diphtheria / Tetanus and oral Polio Vaccine Smallpox revaccination	
Between 10 and 13 years of age	B.C.G. Vaccination (Protection against tuberculosis arranged by the School Health Service).	
At 15-19 years of age or on leaving school	Polio vaccine Tetanus Toxoid Smallpox revaccination	

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

Statistics for year 1968

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 Encephalo-myelitis	Death from other complications of vaccination
0-3 months	2	—	—	—	—
3-6 months	2	—	—	—	—
6-9 months	1	—	—	—	—
9-12 months	32	—	—	—	—
1	463	—	—	—	—
2-4	95	6	—	—	—
5-15	23	53	—	—	—
TOTALS	618	59	—	—	—

VACCINATION AND IMMUNISATION

Statistics for year 1968

Diphtheria, Whooping Cough, Tetanus and Poliomyelitis

Primary Courses

Type of vaccine or dose	Year of birth					Others under age 16	Total under age 16
	1968	1967	1966	1965	1960-64		
1 Quadruple:— Diphtheria, Whooping Cough, Tetanus and Poliomyelitis ...	—	—	—	—	—	—	—
2 Triple:— Diphtheria, Whooping Cough and Tetanus ...	356	510	27	7	18	2	920
3 Diphtheria/Whooping Cough ...	—	—	—	—	—	—	—
4 Diphtheria/Tetanus	—	3	1	2	7	1	14
5 Diphtheria ...	—	—	—	—	—	—	—
6 Whooping Cough ...	—	1	—	—	—	—	1
7 Tetanus ...	—	—	—	—	—	6	6
8 Salk (Poliomyelitis)...	—	—	—	—	—	—	—
9 Sabin (ditto Oral) ...	147	703	86	23	38	6	1003
10 Measles ...	2	313	321	271	617	320	1844
11 Lines 1+2+3+4+5 (Diphtheria) ...	356	513	28	9	25	3	934
12 Lines 1+2+3+6 (Whooping cough) ...	356	511	27	7	18	2	921
13 Lines 1+2+4+7 (Tetanus) ...	356	513	28	9	25	9	940
14 Lines 1+8+9 (Polio)	147	703	86	23	38	6	1003

Reinforcing Doses

Type of vaccine or dose		Year of birth					Others under age 16	Total under age 16
		1968	1967	1966	1965	1961-64		
1	Quadruple:—Diphtheria Whooping Cough, Tetanus and Poliomyelitis	—	—	—	—	—	—	—
2	Triple:— Diphtheria, Whooping Cough and Tetanus	—	149	372	21	368	93	1003
3	Diphtheria/Whooping Cough	—	—	—	—	—	—	—
4	Diphtheria/Tetanus ...	—	4	30	5	337	71	447
5	Diphtheria	—	—	—	1	3	15	19
6	Whooping Cough ...	—	—	—	—	—	—	—
7	Tetanus	—	—	—	—	2	6	8
8	Salk (Poliomyelitis) ...	—	—	—	—	—	—	—
9	Sabin (Poliomyelitis—Oral)	—	3	8	8	702	46	767
10	Lines 1+2+3+4+5 (Diphtheria)	—	153	402	27	708	179	1469
11	Lines 1+2+3+6 (Whooping cough) ...	—	149	372	21	368	93	1003
12	Lines 1+2+4+7 (Tetanus)	—	153	402	26	707	170	1458
13	Lines 1+8+9 (Polio)	—	3	8	8	702	46	767

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 19 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 7 ambulances and 3 sitting case cars.

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 1964 to 1968

	1964	1965	1966	1967	1968
No. of patients	43,546	43,776	40,207	42,016	41,824
Other work	1,002	1,267	1,216	1,208	1,288
	44,548	45,043	41,423	42,219	43,112
No. of miles	142,520	153,785	154,314	150,758	141,193

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

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 1968 nursing equipment was supplied to 1,101 patients as compared with 969 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
1964	507
1965	763
1966	848
1967	969
1968	1,101

Incontinence Pads

During 1968, 62,350 pads and 10,582 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 2/6d. per treatment; all other patients pay 4/- 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, but there were staffing difficulties during the year resulting in a smaller number of treatments in 1968.

Statistics for years 1967 and 1968

	Year 1968	Year 1967
No. of clinics held	642	717
No. of treatments for patients at 44 Hoghton Street	5,858	6,615
Average No. of treatments per clinic session	9.1	9.2
No. of treatments in patients' own homes	947	1,590

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 1968, five physically handicapped persons made 54 attendances at Mr. Rogans' clinic. No expectant mothers were referred during the year.

Sickroom Helpers Scheme

Supplementary to 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 4/6 per hour but this may be reduced or cancelled having regard to the financial circumstances of the person concerned.

During 1968, sickroom help was provided for 18 patients, as compared with 15 in the previous year. The number of hours worked by the helps during the year was 272.

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 patients who can be provided with convalescent care under the Hospital Authority's arrangements. The period is usually two weeks and during the year, 16 women and 2 men were sent to convalescent homes.

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

Statistics for year 1968

	Help for persons					Total No. of cases	Total hours worked by helps during the year
	aged 65 or over on first visit in 1968	aged under 65 on first visit in 1968					
		Chronic sick and tuberculous	Mentally disordered	Maternity	Others		
Number of cases	755	56	Nil	19	52	882	96,021

No. of Staff employed at end of year	Whole time	Part time		Total Whole time equivalent
		No.	Whole time equivalent	
Administration	—	3	.85	.85
Home Helps	2	95	47	47
No. of visits to homes by Organiser during the year				1,417
No. of persons interviewed at office during the year				818

MENTAL HEALTH SERVICE

The staff consists of a Senior Mental Welfare Officer and three Mental Welfare Officers. During the year, a part-time Psychiatric Social Worker was appointed to help in the Mental Health Service and also in the Child Guidance Clinics. A trainee Mental Welfare Officer was also appointed.

Dr. Cadogan the Consultant Psychiatrist for the area has been most helpful in dealing with the mentally ill patients and Dr. Howie has continued to act as Consultant at the after care clinic. Mrs. Smith has organised the social club and sessions for crafts and industrial therapy. At the end of the year it was possible for all sessions to be held at the Nurses home and with kindly co-operation from the home nursing service all has gone well. An innovation is the "singing" on a Tuesday afternoon—this is led by Mrs. Pinch and a member of the Bowland House Choir. It is obviously enjoyed by all and seems a valuable form of therapy.

Junior Training Centre (Sandbrook School). It was impossible to fill a supervisor's post as there was no applicant who held a recognised qualification. A trainee was appointed and it is hoped that she will be suitable for secondment to a suitable course of training in the future.

Mr. and Mrs. Bayley took nine boys from the top class on holiday to the Christian Endeavour Holiday Home at Kents Bank for one week. They had a happy time and were congratulated on their behaviour by the warden and other guests.

Adult Centre. There continued to be a good variety of work coming in to the centre and there has been more interest shown in the garden and the greenhouse. On two sessions each week the younger trainees have lessons in cooking from a teacher who has had previous experience in this type of work.

One member of staff was accepted for training at the Harris College, Preston and started there in September.

Springbrook. Miss Sampson has continued to run Springbrook as a family home though most of the time she has been short of staff. She took all the children to Hollybrook Guest House in Ilkley for two weeks and the children greatly enjoyed themselves walking over the hills and visiting many places nearby.

The Meadows. The residents here have had a happy year fitting well into the community—all the boys have been in full time work most of the year and it is hoped that one or two of the girls will soon be able to take a job.

The high-light of the year was one week's holiday at a holiday camp at Pwllheli. It has been talked of ever since and everyone is saving for their next visit.

Brookdale. Staffing trouble continued throughout the year but in spite of this the home has had its full quota of residents.

Mental Illness

Statistics for Year 1968

	Males	Females	Total
Patients:			
No. of admissions and re-admissions to hospital (Mental Health Act, 1959):			
— as informal patients (Sec. 5)	87	134	221
— for observation (Sec. 25)	28	46	74
— for treatment (Sec. 26)	1	7	8
— emergency application (Sec. 29)	37	20	57
— by court order (Sec. 60)	1	1	2
Total no. of admissions and re-admissions ...	154	208	362
No. of patients already in hospital under compulsory detention accepted as informal patients	19	16	35
No. of patients transferred from the Ormskirk & District General Hospital to other hospitals	2	1	3
No. of day patients taken to Ormskirk & District General Hospital	3	2	5
No. of patients referred to Health Department re acute mental illness... ..	222	391	613
After-Care Clinic:			
No. of Consultant Psychiatrist's After-Care Clinics at 44 Houghton Street	—	—	69
No. of patients seen at After-Care Clinics	69	314	383
Work done by Mental Welfare Officers:			
No. of home visits re acute mental illness	388	654	1042
No. of domiciliary after-care visits	200	285	485
No. of visits to patients in hospital	—	—	242
No. of patients interviewed at the Office	183	263	446
No. of visits to the Psychiatric Clinic at the Southport Infirmary	—	—	71

Mental Illness

Occupational Therapy Work.

No. of patients					
No. on register at beginning of the year	...	...	...	...	38
No. added during the year	...	...	...	...	82
					120
No. deducted during the year	...	...	...	...	70
					50
No. on register at end of the year	...	...	...	...
No. of Home Visits	...	...	...	...	125
Sessions					
Psychiatric Social Club—Hampton Road Centre and Outings	...	...	...	...	59
Craftwork—Lincoln House Centre	...	...	...	...	46
Craftwork—44 Hoghton Street	...	...	...	...	51
Industrial Therapy—44 Hoghton Street	...	...	...	...	150
Singing Group—52 Hoghton Street	...	...	...	...	9
Brookdale Home	...	...	...	...	17
					332
Total No. of Sessions attended by Staff	...	...	...	...
No. of attendances made by patients					
Psychiatric Social Club	...	...	...	...	1,072
Craftwork—Lincoln House Centre	...	...	...	...	379
Craftwork—44 Hoghton Street	...	...	...	...	171
Industrial Therapy—44 Hoghton Street	...	...	...	...	1,216
Singing Group—52 Hoghton Street	...	...	...	...	130
					2,968
Total No. of Attendances	...	...	...	...

Mental Subnormality

Number of patients notified to the Department:—					
from the Local Education Authority under Sec.					
57 Education Act, 1944 (amended) ...					1
from other sources					13
Total ...					14
Number of patients admitted to hospital:—					
for permanent care					7
for short term care					12
Total ...					19
Number of patients placed under Guardianship ...					—
Work done by Mental Welfare Officers:					
Number of patients seen at the Office					104
Number of domiciliary visits					188
Number of visits to the Training and Industrial Centre and Residential Homes... ..					85

Junior Training Centre (Sandbrook School)

Number on Register at beginning of year					35
Number added to Register during year					6
					41
Number taken off Register during year					4
Number on Register at end of year					37
Number of sessions held during period					198
Number of attendances at Centre during period					5992
Average attendance per session					30

Adult Training and Industrial Centre

Number of cases on Register at beginning of year	...	...	39
Number of cases added to Register during year	...	...	14
Number of cases taken off Register during year	...	...	53
Number of cases on Register at end of year	...	...	11
Number of sessions held during period	...	...	229
Number of attendances at Centre during period	...	...	8085
Average attendance per session	...	...	35

Occupational Therapy

During the year 44 home visits were made to 6 mentally subnormal persons. In addition to the home visits, mentally subnormal persons attended the following:—

Psychiatric Social Club	...	...	35
Craftwork Session—Hoghton Street	...	...	43
Industrial Therapy—44 Hoghton Street	...	...	—
Singing Group—52 Hoghton Street	...	...	6
Total attendances	...	...	84

Social Club for Mentally Subnormal Adults

The evening social club continued with great success and 37 meetings were held during 1968 with 966 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 1968

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	M	F	M	F	M	F			
	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
General Practitioners	—	—	113	205	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	319	
Hospitals, on discharge from in-patient treatment	—	—	125	177	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	302	
Hospitals, after or during out-patient or day treatment	—	—	70	85	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	155	
Local education authorities	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	1	
Police and courts	—	—	18	24	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	42	
Other sources	—	—	62	36	—	—	—	—	—	—	—	—	—	—	—	5	—	—	1	—	—	11	4	119	
Total	—	—	388	527	—	—	—	—	—	—	—	—	—	—	—	5	—	—	2	—	—	11	5	938	

Summary of Patients under Local Health Authority Care at 31st December, 1968.

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MENTAL HEALTH SERVICE
Admissions to Guardianship of Local Health Authority or other Guardian during 1968

	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			Under Age 16		16 and Over		
	M	F	M	M	F	M	M	F	M	F	M	M	F	M	F	M	M	F	M	F	M	M	F	M	F	M	F		
Guardian	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
L.H.A.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
Other	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
Total	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
Total number under guardianship at end of year	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
L.H.A.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
Other	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
Total	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—		

Number of patients awaiting entry to hospital, or admitted for temporary residential care at 31st December, 1968

	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	Under Age 16		16 and Over				
	M	F	M	F			M	F	M	F			M	F					
In urgent need of hospital care	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	5	
Not in urgent need of hospital care	—	—	1	2	—	1	—	—	—	—	—	—	—	—	—	—	—	5	
Total	—	—	1	2	—	1	—	—	—	—	—	—	—	—	—	—	—	10	
Number of admissions for temporary residential care (e.g. to relieve the family). To N.H.S. hospitals	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	12	
To L.A. residential accommodation	—	—	—	—	—	2	—	—	—	—	—	—	—	—	—	—	—	12	
Elsewhere	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Total	—	—	—	—	—	2	—	—	—	—	—	—	—	—	—	—	—	24	

MENTAL HEALTH SERVICE

Premises provided at 31st December, 1968

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	37	42
Total	1	37	42

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 preceding tables	L.A.	—	—	1	—
	Hospital	—	—	—	—
	Total	—	—	1	—
Places made available to the authority by other authorities or organisations (not included in preceding tables) ...	L.A.	—	—	—	—
	Hospital	—	—	—	—
	Other organisations	—	—	—	—
	Total	—	—	—	—

Home and hostels

Age group provided for	For the mentally ill		For the subnormal or severely subnormal		
	Number of premises	Number of places	Number of premises	Number of places	
				Junior	Adult
Under 16	—	—	1	10	—
16 and over	—	—	1	—	18
Junior and adult	—	—	—	—	—
TOTAL	—	—	2	10	18

Homes and hostels for the elderly mentally infirm provided under the National Health Service Act, 1946

Number of premises and places provided	Premises	1
	Places	30

Social centres and clubs provided under the National Health Service Act, 1946

Category of person catered for	Number of centres or clubs			
	Junior	Adult	Mixed	Total
Mentally ill	—	—	1	1
Subnormal or severely subnormal... ..	—	—	1	1
Elderly mentally infirm	—	—	—	—
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Section III

CONTROL OF INFECTIOUS DISEASE

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TUBERCULOSIS

New Cases and Mortality

The number of new cases of tuberculosis which came to the notice of the Department during the year was 12; of these 9 were found to be suffering from pulmonary disease, and 3 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 12 new cases came to the notice of the Clinic in the following ways :—

By primary notifications ...	...	...	...	...	...	...	...	9
By transfers from other areas ...	...	...	...	...	...	...	...	3
TOTAL								12

All the patients for whom primary notifications were received and all patients transferred from other areas were seen at the treatment clinic which is held at the Southport Infirmary. The total number of cases on the clinic register at the end of 1968 was 113, and 7 of these patients were found to have sputum containing tubercle bacilli. During the year, 49 treatment clinics were held and 197 visits were made by patients; the total number of X-ray examinations of patients was 152.

Statistics for Year 1968

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	1	2	—	—	—	—
26 to 45 ...	5	—	—	—	—	—	—	—
46 to 65 ...	2	—	—	—	—	—	—	—
66 to 75 ...	—	—	—	—	—	—	—	—
76 and over	—	—	—	—	—	—	—	—
TOTALS ...	8	1	1	2	—	—	—	—

Statistics for Years 1959 to 1968

Year	No. of New Patients		No. of Deaths	
	Respiratory	Non-Respiratory	Respiratory	Non-Respiratory
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	—
1968	9	3	—	—

Contacts

During the year 176 attendances were made by contacts of patients; the total number of X-ray examinations of contacts was 107. No contacts were found to be suffering from pulmonary tuberculosis in 1968.

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 were the number of home visits made by this Health Visitor during the year:—

To tuberculous patients	260
To contacts of tuberculous patients	192
To other chest patients	4
Total Visits	456

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 1968, the Health Visitor made 66 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 1968 the Care Committee provided considerable financial and other assistance to patients and their families.

Mass Miniature Radiography Unit

The unit visited Southport in the beginning and latter part of 1968.

B.C.G. Vaccination against Tuberculosis

Statistics for Years 1959 to 1968

Year	1959	1960	1961	1962	1963	1964	1965	1966	1967	1968
No. Vaccinated: At B.C.G. Clinics	56	43	36	34	35	28	23	30	27	26
Babies seen by the Consultant Paediatrician	35	27	28	32	20	37	18	14	15	17
School Children...	698	1037	787	872	716	728	710	739	749	727
TOTALS	789	1107	851	938	771	793	751	783	791	770

TUBERCULOSIS **Treatment Clinic—Statistics for years 1964 to 1968**

	1964			1965			1966			1967			1968		
	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	232	13	245	209	13	222	172	12	184	121	14	135	111	7	118
2. No. of patients added during the year:															
(a) primary notifications of new cases	10	2	12	10	1	11	13	2	15	12	5	17	6	3	9
(b) transfers from other areas	12	—	12	9	—	9	7	—	7	7	—	7	3	—	3
(c) lost sight of cases returned	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
TOTALS (1)	254	15	269	228	14	242	192	14	206	140	19	159	120	10	130
3. No. of patients deleted during the year:															
(a) died (from Tuberculosis)	5	—	5	3	—	3	3	—	3	1	—	1	—	—	—
(b) transferred to other areas	8	1	9	10	—	10	9	—	9	3	1	4	4	—	4
(c) recovered	24	1	25	37	2	39	48	—	48	18	9	27	5	—	5
(d) lost sight of or refused further assistance	1	—	1	3	—	3	6	—	6	—	1	1	1	—	1
(e) tuberculosis not primary cause of death	7	—	7	3	—	3	5	—	5	7	1	8	7	—	7
TOTALS (2)	45	2	47	56	2	58	71	—	71	29	12	41	17	—	17
4. No. of patients on register at the end of year (i.e., totals (1), less totals (2)	209	13	222	172	12	184	121	14	135	111	7	118	103	10	113
5. Summary of new patients found during the year:															
(a) Primary notifications of new cases	10	2	12	10	1	11	13	2	15	12	5	17	6	3	9
(b) Transfers from other areas	12	—	12	9	—	9	7	—	7	7	—	7	3	—	3
(c) Patients found from death returns (figures not included in items (1) to (4) above)	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
(d) Lost sight of cases returned	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
TOTALS	22	2	24	19	1	20	20	2	22	19	5	24	9	3	12

VENEREAL DISEASES

At the end of the year, 84 new cases were under treatment at the clinic, as compared with 63 cases at the end of 1967. During 1968, non-venereal cases made 168 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 for Year 1968

No. of new Patients	Male	Female	Total
Syphilis	Nil	Nil	Nil
Gonorrhoea	16	11	27
Non-Venereal Infections	99	69	168
Totals	115	80	195

Statistics for Years 1959 to 1968

YEAR	No. of patients and attendances at clinics					
	SYPHILIS			GONORRHOEA		
	Number of new cases during the 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			
1959	—	1	1	45	657	73
1960	2	6	8	47	769	92
1961	1	9	10	46	867	83
1962	—	5	5	47	922	71
1963	—	4	4	50	1105	117
1964	1	3	4	45	611	143
1965	1	1	2	42	263	110
1966	—	3	3	32	148	72
1967	—	7	7	28	113	50
1968	—	—	—	23	94	117

INFECTIOUS DISEASES

Statistics for year 1968

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	376	13	123	218	13	9	—	—
Dysentery	1	—	—	—	—	1	—	—
Encephalitis	—	—	—	—	—	—	—	—
Erysipelas	3	—	—	—	—	1	2	—
Food Poisoning	1	—	—	—	1	—	—	—
German Measles	184	8	43	104	15	13	1	—
Measles	519	19	308	188	3	1	—	—
Meningococcal Infection	—	—	—	—	—	—	—	—
Paratyphoid Fever	—	—	—	—	—	—	—	—
Pneumonia	—	—	—	—	—	—	—	—
Poliomyelitis	—	—	—	—	—	—	—	—
Puerperal Pyrexia	—	—	—	—	—	—	—	—
Scarlet Fever	64	—	10	49	2	2	1	—
Tuberculosis	9	—	—	—	2	2	4	1
Whooping Cough	37	6	18	12	—	—	—	1
Infective Jaundice	3	—	—	1	1	—	1	—
TOTALS	1197	46	502	572	37	29	9	2

INFECTIOUS DISEASES

Number of Notified Cases and number of Deaths for the years 1959 to 1968

NOTIFIABLE DISEASE	NUMBER OF CASES OF INFECTIOUS DISEASE NOTIFIED										Total Cases for 10 years 1959 to 1968	DEATHS FROM INFECTIOUS DISEASE										Total Deaths during 10 years 1959 to 1968
	1959	1960	1961	1962	1963	1964	1965	1966	1967	1968		1959	1960	1961	1962	1963	1964	1965	1966	1967	1968	
Chicken Pox	383	656	445	697	333	956	258	665	587	376	5356	—	—	—	—	—	—	—	—	—	—	—
Diphtheria	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Dysentery	5	37	26	69	4	2	18	3	11	1	176	—	—	—	—	—	—	—	—	—	—	—
Encephalitis	—	—	1	1	—	2	1	—	—	—	5	—	—	—	—	—	—	—	—	—	—	—
Erysipelas	5	12	7	6	2	4	2	1	—	3	42	—	—	—	—	—	—	—	—	—	—	—
Food Poisoning	3	4	3	3	28	2	2	1	—	1	47	—	—	—	—	—	—	—	—	—	—	—
German Measles	70	91	231	2369	73	154	160	278	282	184	3892	—	—	—	—	—	—	—	—	—	—	—
Infective Jaundice	—	—	—	—	—	—	—	—	—	3	3	—	—	—	—	—	—	—	—	—	—	—
Malaria	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Measles	1554	348	1107	546	482	980	570	581	807	519	7494	—	—	—	—	—	—	—	—	—	—	—
Meningococcal Infect'n	2	1	1	1	2	1	—	—	—	—	8	—	—	—	—	—	—	—	—	—	—	—
Ophthalmia Neonatorum	—	1	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—
Other Forms of Tuberculosis	4	—	1	3	1	2	1	2	5	—	19	2	—	—	1	1	—	—	—	—	—	4
Paratyphoid Fever	—	—	—	—	1	—	—	1	—	—	2	—	—	—	—	—	—	—	—	—	—	—
Pneumonia	21	14	17	32	7	10	9	14	8	—	132	28	51	67	66	88	47	56	91	82	93	669
Polioencephalitis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Poliomyelitis	2	—	7	—	—	—	—	—	—	—	9	—	—	—	—	—	—	—	—	—	—	—
Puerperal Pyrexia	1	1	—	—	4	—	—	2	1	—	9	—	—	—	—	—	—	—	—	—	—	—
Pulmonary Tuberculosis	40	33	31	27	23	10	10	13	12	9	208	7	4	4	4	10	7	3	4	1	—	44
Scarlet Fever	144	46	29	25	21	23	57	54	84	64	547	—	—	—	—	—	—	—	—	—	—	—
Smallpox	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Typhoid Fever	—	—	—	2	—	—	—	—	—	—	2	—	—	—	—	—	—	—	—	—	—	—
Typhus	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Whooping Cough	113	60	34	15	151	35	38	14	71	37	568	—	—	—	—	—	—	—	—	—	—	—
TOTALS	2347	1304	1940	3796	1132	2181	1126	1629	1868	1197	18520	37	55	71	70	99	55	59	95	83	93	717

ADDITIONAL INFORMATION

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Health Education

Regular health education was carried out during the year in Child Health 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

The work of this voluntary society is extremely valuable.

The Relief Society continued to provide nursing home accommodation for two week periods and this allowed relatives to make holiday arrangements for a given date.

The following are examples of the kind of help provided during 1968:—

Ten people in the age range 75-93 years with physical handicaps were supplied with Wirex fireguards.

A young patient suffering from chronic illness was helped by small grants for extras over the Christmas period.

In several cases family breakdown has been avoided by supplying money for a holiday (i.e. fares and spending money) to enable them to stay with relatives.

Patients in the outsize figure measurements find difficulty in obtaining clothing through the normal voluntary services and have had financial aid from the Society for this purpose.

A lady aged 85 years, living alone, having had a hemiplegia four years previously from which she had made a fairly good recovery, developed pneumonia. There were no relatives: domiciliary services were involved and neighbours were extremely helpful. As progress was slow and the neighbours began to feel the strain the patient was admitted for two weeks to a nursing home.

A wife who was chair and bed bound following a stroke, was admitted for a two week period to a nursing home while the son-in-law decorated the patient's ground floor bedroom.

In all cases brought to the notice of the Southport Relief Society financial help was given following income assessment. During the year 78 patients received help at a cost of £1,179 17s. 9d.

Nurseries and Child Minders Regulation Act, 1948

As from the 1st November, 1968, the Nurseries and Child Minders Regulation Act was amended to give local health authorities stronger powers to ensure reasonable standards in the private day care of children under 5 years of age. These amendments enabled the requirements of the 1948 Act to be applied to premises and persons who had previously been exempt from registration and also increased the amount of the fine to be paid by those who did not comply with the provisions of the amended Act. Briefly the amended Act requires application for registration to be made by persons using premises (other than those used wholly or mainly as private dwellings) in which children under five years of age are received for a total of two hours or more in the day and persons who, in their own homes and for reward, look after children under five years old to whom they are not related, for similar periods or for any longer periods not exceeding six days in any one week.

The number of registered places at the end of 1967 and 1968 is shown below:—

				Year ended 1967	Year ended 1968
				No. of places	No. of places
Day Nurseries	...	...		32	55
Play Groups	...	...		108	190
Child Minders	...	...		43	52
Totals	...	...	...	183	297

Nursing Homes

At the end of the year there were 18 registered nursing homes in the area with a total of 245 beds.

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 100.

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

One case was dealt with during 1968 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 HEALTH CENTRES:—		
Sandbrook Road, Ainsdale	Mondays, Fridays	2 to 4 p.m., 10-12 noon.
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. to 11.30 a.m.
POST-NATAL CLINIC:—		
Christiana Hartley Maternity Hospital ...	Tuesdays	9.30 a.m. to 11 a.m.
TUBERCULOSIS CLINIC:—		
Southport Infirmary	Mondays Thursdays	2 to 4.30 p.m. 9 to 11 a.m.
CHIROPODY CLINICS FOR THE ELDERLY:—		
44 Hoghton Street	Mondays, Tuesdays, Wednesdays, Thursdays	9 to 12.0 noon 2 to 4 p.m.
MENTAL HEALTH AFTER-CARE CLINIC:—		
44/46 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.
Ainsdale Child Health Centre	Tuesdays and Thursdays	2 to 5 p.m.

Medical Examinations

The following table shows the work done by the medical staff of the department during 1968 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	5	61	19	85
Borough Treasurer	10	—	—	10
Children's	5	1	—	6
Education	76	21	4	101
Estates and Baths	—	1	—	1
Fire Service	—	1	3	4
Flower Show	—	—	—	—
Health	22	52	1	75
Libraries	10	1	—	11
Lighting	—	—	—	—
Police	2	7	1	10
Publicity	2	5	1	8
Parks and Cemeteries	1	13	3	17
Town Clerk's	8	1	1	10
Transport	2	7	4	13
Water Board... ..	4	9	—	13
Weights and Measures	—	—	1	1
Welfare Services	5	16	—	21
OTHER AUTHORITIES:—				
Electricity	6	—	—	6
TOTALS	164	196	38	398

In addition, 115 examinations prior to entry to a Teacher's Training College, were made in 1968.

Crematorium

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 1968 was 1342.

Work done on behalf of the Children's Committee

During the year, 268 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	242
Admissions to Children's Homes	20
Discharges from Children's Homes	3
Routine Medical Inspections of Children in Homes	3

Family Planning Act 1967:—

This Act conferred on Local Health Authorities the power to make arrangements for the giving of advice on contraception, the medical examination of persons seeking such advice and the supply of contraceptive substances and appliances on social as well as medical grounds, and the Health Committee and Council agreed that as from the 1st April 1968 these services should be made available to Southport residents by the local Voluntary Family Planning Association from their clinic at 41 Ash Street. It was agreed that a grant of £1,250 should be paid for the financial year 1968/69 subject to review at the end of that time.

During the 9 months from the 1st April 1968 to the 31st December 1968, Southport residents made a total of 1,779 visits to the clinic and there were 496 new cases during this period.

The arrangements with the voluntary association appear to be working very satisfactorily.

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, 1st October, 1968

										Parts per Million
Total solid matter in solution	...	...	...	...	...	...	...	...	...	360
Oxygen absorbed	}	in 15 minutes	...	...	...	...	...	...	...	0.12
from Permanganate			...	...	...	...	...	...	...	0.28
Ammonia	...	...	...	...	...	...	...	...	...	Nil
Albuminoid Ammonia	...	...	...	...	...	...	...	...	...	0.005
Nitrogen as Nitrates	...	...	...	...	...	...	...	...	...	0.06
Nitrogen as Nitrites	...	...	...	...	...	...	...	...	...	Nil
Combined Chlorine	...	...	...	...	...	...	...	...	...	32
Free Chlorine	...	...	...	...	...	...	...	...	...	Nil
Lead	...	...	...	...	...	...	...	...	...	Nil
Copper	...	...	...	...	...	...	...	...	...	Nil
Zinc	...	...	...	...	...	...	...	...	...	Nil
Total Iron	...	...	...	...	...	...	...	...	...	0.03
Carbonate Hardness (as Calcium Carbonate)	...	...	...	...	...	...	...	...	...	116
Total Hardness (as Calcium Carbonate)	...	...	...	...	...	...	...	...	...	214

(PH. value: 7.5)

Town's Water, Bacteriological Examination, 4th October, 1968

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 Lancs. Water Board	28,852	79,940
Water supply from sources other than specified above	Nil	Nil
TOTALS	28,852	79,940

Public Baths—Sea Bathing Lake, Marine Drive. This year the lack of growth of algae was very noticeable. This has been due to additional plant which has resulted in more efficient chlorination of the water and a shorter turnover period.

The attendance during the year was:—

Bathers	...	...	...	...	140,680
Spectators	...	...	...	...	70,348

The Victoria Baths, Promenade. There are three sea water swimming baths and the total attendances for the year were 280,185 of which 65,024 were scholars from schools for organized swimming instruction. Spectators to the baths totalled 37,499, use of Private Baths 14,535 and patrons to the Turkish Baths 6,363. The total admittances were 338,582.

		Satisfactory	Unsatisfactory	Totals
Victoria Baths ...	Chemical Samples	5	1	6
	Bacteriological Samples	5	—	5
Sea Bathing Lake ...	Chemical Samples	6	—	6
	Bacteriological Samples	4	1	5

Satisfactory Chemical Sample of Bathing Water

Taken at the Victoria Baths on 24th June, 1968

Appearance	...	...	...	...	...	...	Clear and bright. Colourless. Minute trace of flocculent matter.
pH Value	...	...	...	...	...	...	7.2
Nitrite	...	...	...	...	...	...	Nil
Free Ammonia, parts per million	...	...	...	...	...	...	0.084
Free Residual Chlorine, parts per million	...	...	...	...	...	...	0.23
Total Residual Chlorine (Free Chlorine plus Chloramines) parts per million	...	...	...	...	...	...	0.34

Result—Satisfactory

Satisfactory Chemical Sample of Bathing Water

Taken at the Sea Bathing Lake on 24th June, 1968

Appearance	...	...	...	...	...	...	Clear and bright. Colourless. No sediment.
pH Value	...	...	...	...	...	...	7.4
Nitrite	...	...	...	...	...	...	Nil
Free Ammonia parts per million	...	...	...	...	...	...	0.004
Free Residual Chlorine, parts per million	...	...	...	...	...	...	0.32
Total Residual Chlorine (Free Chlorine plus Chloramines) parts per million	...	...	...	...	...	...	0.36

Result—Satisfactory

Report on Bacteriological Examination of Bathing Water

at the Sea Bathing Lake on 16th August, 1968

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	5

Report on Bacteriological Examination of Bathing Water

at Victoria Baths taken on 26th June, 1968

Location of Sample	Probable numbers per 100 ml.		PLATE COUNT Organisms per ml.
	Coliform bacilli	Bact. coli (type 1)	
Premier Plunge ...	0	0	2

PUBLIC BATHS—ATTENDANCES 1964 TO 1968

Year	NUMBER OF PERSONS ATTENDING	
	INDOOR	OPEN AIR
	Victoria Baths (Opened 1836) (Remodelled 1926)	Bathing Lake (Opened 1928)
1964	311,201	179,297
1965	307,824	162,185
1966	325,591	154,791
1967	351,683	182,367
1968	338,582	211,028

SANITARY INSPECTION OF THE AREA

Land Charge Enquiries—Information has been supplied during the year on 2,635 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 rest is treated at Ainsdale where the new Works 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—Simple drain stoppages are now dealt with by the Borough Engineer's Department for which a charge of £1 is made for stoppages which are easily freed. 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 17 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 pigeons in the town centre has continued, and a sum of money was included in the Rate Estimates for 1969/70 for the employment of an additional assistant whose duties will be mainly concerned with the reduction of the pigeon population which is undoubtedly getting out of hand.

Towards the end of the year, the Department became aware of an exceptionally heavy rat infestation in the areas of Marshside and Crossens, which amounted almost to an invasion. Work of extermination commenced immediately, and the advice of the Ministry of Agriculture, Fisheries and Food was sought. The increasing use and efficiency of combine harvesters leave little winter food in the fields and on the farms, with the result that rats tend to move in large numbers in the early winter from agricultural areas into urban areas.

Schools—Complaints have been received regarding poor sanitary accommodation and inadequate heating in a few schools. It is true that the sanitary provision in some of the older schools falls below modern standards. Additionally, in the case of one new school, a temporary bulge in roll has strained facilities. Steps have been taken to improve sanitation and heating as far as national economic circumstances will allow.

Hostel—The town's only privately owned common lodging-house, in Boundary Street, which has provided accommodation for homeless men for a long time, closed during the year. The reason for its closing was the age and deteriorating condition of the building. Almost immediately the effects of this were felt by the Civic Welfare Services Department, the Police, and the Probation Service, and representations were made to the Local Authority for consideration to be given to the provision of a replacement hostel. It is not however a local authority duty to provide accommodation of this kind. In the course of their work, the Public Health Inspectors came across former inmates of the hostel living under worse conditions than they had had in Boundary Street. It is hoped that some better accommodation might become available for homeless men, including temporary accommodation for discharged prisoners.

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.

During the year 262 bodies were received at the mortuary and, of these, 236 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
Factories (other than domestic factories) where motive power is not employed ...	14	4
Factories where motive power is employed ...	392	201
Outworkers employed in finishing of wearing apparel ...	3	1
No. of building sites inspected ...	35	—

Prevention of Damage by Pests Act, 1949

Work done during year 1968

	Type of Property	
	Non Agricultural	Agricultural
Number of Properties in District	33,242	29
Total Number of Properties Inspected following Notification	667	4
Number Infested by (i) Rats	227	4
(ii) Mice	261	—
Number of Properties Inspected for other Reasons	52	26
Number Infested by (i) Rats	32	8
(ii) Mice	3	—

The work involved in dealing with the above mentioned properties resulted in 1,915 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 1968:—

Nuisances									
COMPLAINTS INVESTIGATED—									
Choked and defective drains	...	...	...	...	...	...	...	...	105
Housing defects	...	...	...	...	...	...	...	...	236
Ditches and watercourses	...	...	...	...	...	...	...	...	5
Smoke emission	...	...	...	...	...	...	...	...	48
Noise	...	...	...	...	...	...	...	...	87
Other nuisances	...	...	...	...	...	...	...	...	1,150
Total No. of complaints									1,631
ACTION TAKEN: Notices served and results in nuisances abated:									
Served	Preliminary, 272				Statutory, 78				
Abated	Preliminary, 215				Statutory, 59				
VISITS—									
To Premises:									
Dwellinghouses	...	...	...	...	...	...	...	...	5,538
Shops	...	...	...	...	...	...	...	...	1,630
Offices	...	...	...	...	...	...	...	...	110
Factories and workshops	...	...	...	...	...	...	...	...	232
Dairies	...	...	...	...	...	...	...	...	171
Food preparing premises	...	...	...	...	...	...	...	...	2,535
Ice Cream premises	...	...	...	...	...	...	...	...	95
Other premises	...	...	...	...	...	...	...	...	3,298
Total No. of Visits									13,609
Regarding:									
Drainage	...	...	...	...	...	...	...	...	312
Conversion of closets	...	...	...	...	...	...	...	...	86
Ditches and watercourses	...	...	...	...	...	...	...	...	19
Rats, mice and other vermin	...	...	...	...	...	...	...	...	1,915
The Housing Acts	...	...	...	...	...	...	...	...	1,004
Rent Acts	...	...	...	...	...	...	...	...	3
Food Hygiene Regulations	...	...	...	...	...	...	...	...	3,149
Milk Regulations	...	...	...	...	...	...	...	...	182
Food	...	...	...	...	...	...	...	...	512
Other matters	...	...	...	...	...	...	...	...	2,870

Food and Drug Samples—Year 1968

SAMPLES OBTAINED FOR BACTERIOLOGICAL EXAMINATION—

Milk	210
Ice Cream	18
Other Foods	20
Water	47

Total No. of Samples	295
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SAMPLES OBTAINED FOR CHEMICAL ANALYSIS—

Milk	103
Other Food	93
Rag Flock, etc.	—
Rainwater & Atmospheric Deposit	11

Total No. of Samples	...	207
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Legal Proceedings under Food and Drugs Act

OFFENCE							FINE	COSTS
Adulterated Sherry	£15	—
Adulterated Milk	...	...	...	...	...	...	£10	£8
Adulterated Milk	...	...	...	...	...	...	£10	

Rag Flock and Other Filling Material Act, 1951

Ten premises are registered under this Act for the use of rag flock and other filling materials in the upholstering of articles of furniture. There are now no premises in the Borough in which such materials are manufactured, or stored in bulk.

Five samples of the materials in use were taken and submitted for analysis, and all proved to be satisfactory.

CLEAN AIR

There were 48 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.

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

A weakness in the Clean Air legislation was corrected during the year, when it became an offence to sell raw bituminous coal in a smoke control area.

Towards the end of the year, a sum of money was included in the Rate Estimates for 1969/70 for the declaration of two more Smoke Control Areas adjoining the existing one in Fylde Road. In the existing Area, a small number of firegrates were discovered which did not appear in the official "List of Approved Domestic Solid Fuel Appliances," and these were replaced by the builders. Houses built after August, 1964, are not eligible for a grant if firegrates have to be converted to smokeless combustion at a later date. The occupiers of all new houses should, therefore, make certain that their firegrates are of the approved type.

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 28,165.

The following table shows the number of houses built during the period 1959 to 1968, plus additional accommodation made available as a result of adaptations and additions to existing properties:

Year	1959	1960	1961	1962	1963	1964	1965	1966	1967	1968
Number of houses built	214	115	102	255	252	298	549	416	283	251

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

Under this legislation it is a criminal offence unlawfully to evict a person from a dwelling, and/or to harass tenants with the object of driving them out of a dwelling. Proceedings were instituted in one case under this Act, when the owner of the house was fined £10 for turning a family out into the street.

Overcrowding—The number of complaints regarding alleged overcrowding received during the year was 3. 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 1968 25 houses were represented to the Health Committee. The formal procedure prescribed by the Housing Acts, was commenced in respect of 19 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—Ten representations under Section 19, Housing Act, 1964, were received from the tenants of individual houses, (not being houses in Improvement Areas), requiring the Local Authority to exercise their powers to secure the improvement of the houses by the provision of the five standard amenities.

To this end, 9 Preliminary Notices and 7 Immediate Improvement Notices were served. Landlords' Undertakings were accepted in 2 cases.

In the No. 1 Improvement Area, containing 31 houses, the work of installing the amenities continued.

Legal Proceedings under Public Health Act, 1936

OFFENCE	FINE	COSTS
Defective plaster ceiling	£3	6 Guineas
Defective Guttering—	—	2 Guineas
Defective Guttering—	—	2 Guineas

OFFICES, SHOPS AND RAILWAY PREMISES ACT, 1963

Registrations and General Inspections during year 1968

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	1	260	13
Retail Shops	10	724	45
Wholesale Shops and Warehouses	2	43	4
Catering Establishments open to the public, Canteens	2	115	5
Fuel Storage Depots	—	7	—
Totals	15	1,149	67

Number of Visits of all kinds by Inspectors to Registered Premises—286.

Analysis of Persons employed in Registered premises by workplace.

Class of workplace	Number of persons employed
Offices	2,059
Retail Shops	3,549
Wholesale departments and Warehouses	401
Catering Establishments open to the public	{ 1,498
Canteens	
Fuel storage depots	24
Totals	7,531
Males	2,765
Females...	4,766

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

Contraventions— During the year 67 general inspections were made and contraventions found numbered 3, resulting in the service of informal intimations. In all cases the requirements had been met by the end of the year.

Accidents reported during the year 1968

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	8	—	1	—	7
Catering Establishments Canteens	6	3	—	—	—	3
Wholesale Shops, Warehouses and Fuel Storage Depots	1	1	—	—	—	1
TOTALS	20	12	—	1	—	11

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 1968, 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 3 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.

Once again it was found that, when everything possible had been done under these headings, certain houses still remained slums and continued to cause distress to local residents.

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. The worst problem which arose under this heading during the year was in connection with private clubs which receive Planning approval from the Local Authority, and licences for drink and music from the Magistrates, and which are situated in positions in which annoyance to local residents is almost inevitable. When everything possible has been done to reduce the amount of noise which escapes from these establishments, the departure of over-excited young people in the early hours of the morning can be very disturbing. During the year under review 77 complaints were received regarding noise.

STAFF

The two Pupil Public Health Inspectors were successful in obtaining their statutory qualifications at the first attempt. Before the end of the year they both took up appointments with other local authorities at salaries higher than they could immediately obtain in Southport.

Two further pupils were appointed.

SECTION VI

INSPECTION AND SUPERVISION OF FOOD

Food and Drugs Acts—Records, 1963—1968

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)
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
1968	2	192	194	1	172	173	1	20	21	10·8

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

Number of samples taken for Bacteriological Examination—Year 1968

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	—	6	12	—	18
Milk	19	90	52	52	213
Other Foods	7	7	11	3	28
Town's Water	—	6	2	2	10
TOTALS	26	109	77	57	269

DISTRIBUTION OF MILK

There are 211 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 1968

For Bacteriological Examination

CLASS OF MILK	Number of Samples Tested	Appropriate Tests	Number of Samples	
			Passed	Failed
Pasteurised	152	Phosphatase Methylene Blue	152 144	— 4
Sterilised	21	Turbidity	21	—
Untreated	38	Methylene Blue	33	2
Totals			350	6

For Biological Examination

Designation	No. of Samples	Tests Applied	Results
			Positive
UNTREATED	38	Ring Test for Br. Abortus	1
		Guinea Pig Inoculation for Br. Abortus ...	1
		Guinea Pig Test for R. Burneti	—
TOTALS			2

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 96 samples of milk submitted for chemical analysis, 6 were reported as not complying with the prescribed standard laid down in the Sale of Milk Regulations, 1939. These results show that 6.25% 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 very unpleasant disease were again found in untreated milk which was coming into the Borough from outside. In this particular case the offending cow was not isolated, but the farmer elected to send all his milk for heat-treatment, thereby rendering it safe for human consumption.

This occurrence again emphasises 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 1968

PARTICULARS	Cattle (exclg.) Cows	Cows	Calves	Sheep and Lambs	Pigs
Number of animals killed and inspected... ..	2,820	13	5	3,419	15,225
RESULTS					
All diseases except tuberculosis and cysticerci:					
Number of whole carcases condemned ...	2	—	—	4	203
Number of carcases of which some part or organ was condemned	1,047	2	—	516	3,985
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	10	—	—	—	—
Carcases submitted to refrigeration	9	—	—	—	—
Generalised and totally condemned	—	—	—	—	—

Summary of Meat and Other Articles of Food which were found to be diseased or unwholesome during year 1968

	Tons	Cwts.	Lbs.
Beef, Veal, Mutton, Pork	23	—	17
Fish	—	13	42
Poultry, Game and Rabbits	—	—	—
Tinned Goods	1	15	67
Fruit	—	1	—
Miscellaneous	—	12	95
Total	26	2	9

Whenever possible, meat was sent for salvage and conversion into useful substances. The remaining diseased or unsound food was destroyed.

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

PUBLIC ABATTOIR

The persons and firms who use the Public Abattoir were again reminded that the Abattoir is due to close on the 31st March, 1970.

In 1968, the total number of animals slaughtered was 21,482, compared with 21,802 in 1967 and 23,820 in 1966.

An interesting case of extensive haemorrhage in the outer fatty tissue of a pig carcase was referred to the Ministry of Agriculture, Fisheries and Food, who suggested that the animal had been poisoned with either a bitumen product or with Warfarin. Subsequent enquiries revealed no connection with Warfarin, but the pig had been fed on pig-nuts on a floor composed of railway sleepers which were almost certain to contain a bitumen product.

Generalised cysticercus ovis was found in a lamb carcase.

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

	Number attended 1968	Totals to Date
Trade	Elementary Course	
Bakers and Confectioners	8	208
Butchers and Meat Producers	1	68
Catering I	7	456
Catering II	13	306
Fish Fryers and Fishmongers	—	26
Fruiterers and Greengrocers	—	5
Food and Fruit Preserving	17	544
Grocers	5	190
Ice Cream and Dairymen... ..	—	40
Nurseries	2	132
Others	—	89
TOTALS	53	2,064

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 1,394 students (Elementary Course) who did so, 1,002 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—A disturbing food complaint received during the year concerned a packet of baby-food which had been contaminated with carbon tetrachloride. Exhaustive enquiries failed to establish the source of the contamination.

Each year, an increasing variety of foodstuffs is being prepacked by the suppliers and arrives at the retailer's premises ready to be put on display for sale. Each time a different type of food is prepacked its behaviour on display and its shelf life should be the subject for intense scrutiny. In other words, the retailer must institute and enforce a foolproof system of stock rotation. The principle of "first in, first out" is absolutely essential. Too many complaints are being received concerning foods which are out of condition simply because they have been slow to sell and have been left on the shelves too long, without the trader troubling to examine them at brief intervals. Mould formation is a particular hazard, the time taken for mould to form varying in accordance with such weather factors as temperature, and humidity. Cheese, bread, pies and sausages are particularly prone to mould and trouble will be avoided if the retailer, on receipt of the articles, adopts his own system of coding and insists that it is rigorously enforced.

It is surprising how many food traders—some of many years standing—have no idea of the shelf life of the products which they are offering for sale. In other words, they do not know the length of time different types of food can be expected to remain in good condition. With such ignorance, it is not surprising that complaints are received from aggrieved customers.

Similarly, the use of refrigerated display is not fully understood by many retailers. It must be stressed that the best storage temperature differs with different foods. Hard frozen foods, such as fruit, vegetables and poultry should be kept at a much lower temperature than, for example, sausages or cooking fats, yet all too often one can see foods which should be merely kept under mild refrigeration being displayed frozen rock-hard.

Both these subjects, stock rotation and the correct use of refrigeration facilities are of great importance to food retailers. They are emphasized in the Courses on Food Hygiene and the Public Health Inspectors will gladly advise on these matters.

Summary of Food Hygiene Inspections for year 1968

INSPECTIONS										NUMBER
Hotels, Restaurants and Kitchens	...	...	...	...	...	...	...	...	...	1,357
Bakehouses	...	...	...	...	...	...	...	...	...	164
Butchers' Shops	...	...	...	...	} Retail Food Shops	...	...	...	...	1,215
Confectioners' and Grocers' Shops	...	...	...	...		...	...	...	...
Fried Fish Shops	...	...	...	...		...	...	...	...
Fishmongers', Greengrocers' and Poulterers'	...	...	...	...		...	...	...	...
Public Houses, etc.	...	...	...	...	...	...	...	...	...	415
Miscellaneous	...	...	...	...	...	...	...	...	...	140
Total										3,291

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	...	...	...	...	...	...	...	...	...	264
For the purpose of storage	...	...	...	...	...	...	...	...	...	2
TOTAL										286

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									
1963	22.50
1964	50.00
1965	37.00
1966	40.00
1967	21.73
1968	33.33

The figure of 33.33% 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 1968, 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.

18 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 1968

YEAR	No. of Samples Taken	RESULTS OF SAMPLES TAKEN					
		NUMBER SATISFACTORY			NUMBER UNSATISFACTORY		
		Grade I	Grade II	Total	Grade III	Grade IV	Total
1963 ...	16	9	5	14	—	2	2
1964 ...	30	10	5	15	7	8	15
1965 ...	41	20	6	26	9	6	15
1966 ...	22	11	2	13	5	4	9
1967 ...	23	10	8	18	—	5	5
1968 ...	18	4	8	12	4	2	6

COUNTY BOROUGH OF SOUTHPORT



ANNUAL REPORT

OF THE

PRINCIPAL SCHOOL MEDICAL OFFICER

FOR THE YEAR 1968

Telephone No.
Southport 5523.

Health Department,
2 Church Street, Southport.

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EDUCATION COMMITTEE AS AT THE

31st December, 1968

The Mayor, Councillor G. Taylor, J.P.
Alderman Mrs. B. Pogson (Chairman)
Councillor T. R. Glover (Vice-Chairman)
Alderman J. Champion
Alderman W. Prescott
Councillor C. I. Anderson
Councillor E. J. Downs
Councillor L. Goldwater
Councillor Mrs. J. Leech
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. Canon A. Thompson

Representatives on Joint Health and Education Sub-Committee

Alderman Mrs. B. Pogson (Chairman)
Councillor T. R. Glover (Vice-Chairman)
Alderman J. Champion
Councillor E. J. Downs
Councillor Mrs. J. Leech
Councillor E. White

SCHOOL HEALTH SERVICE SENIOR STAFF,
(in post on 31st December, 1968—*indicates part-time 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 (as from 1/7/68)	KATHLEEN ABRAHAM, M.B., Ch.B.
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.
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	*H. POGREL, L.D.S. (Liv.), L.D.S., R.C.S. (Eng.), D.ORTHO.R.C.S. (Eng.)
Principal Nursing Officer	Miss E. MITCHELL, S.R.N., S.C.M., H.V. Cert., Q.N.
Senior Physiotherapist	Mrs. V. A. MACLEOD, M.C.S.P.
Educational Psychologist	Vacant.

Principal School Medical Officer's Annual Report

FOR 1968

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.

The difficulties of 1967 which were due to the shortage of whole time medical staff and the increased demand for the School Health Services continued into the summer of 1968, when we were fortunate in obtaining Dr. K. Abraham as a full time Medical Officer and regular sessional help from Dr. Rodger, a family doctor of experience.

I am pleased to report an improved co-ordination in the Child Guidance Services and parents of children with emotional and behaviour problems now have the benefit of concerted advice from Dr. Jean Naylor, the Consultant Child Psychiatrist, from the Educational Psychologist and from a Psychiatric Social Worker.

For many years the North-West School of Speech and Drama provided an excellent Speech Therapy Service for our school children, but this came to an end during the year. Efforts are being made to appoint a full time Speech Therapist, so far without success. The salaries which can be paid to Speech Therapists, Physiotherapists, Occupational Therapists and some other similar kinds of staff are not sufficient to attract able young people to enter these professions.

During the year there has been a good deal of interest, locally and also nationally, in medical practice from Health Centres where there could be concentration of the work of many branches of the medical, dental, nursing and allied professions. Modern medical practice requires good buildings, expensive equipment and first class supporting services if it is to be done in the best way possible. There is already in Southport good co-operation between the staffs of the Hospital, Family Doctor and Local Education Authority's Services, but much of the work is being done in buildings which cannot be called modern in design. If it is decided to develop Health Centre medical practice in Southport, more efficient co-operation between the Family Doctors working in a Health Centre and the Local Authority Staff of the particular area should be possible. The projected major building development on the 2 Church Street/44/46 Hoghton Street site, which would provide amongst other improvements better School Health Service accommodation, is held up until a decision can be reached as to whether Family Doctors' surgeries should be incorporated in the new building.

The continuing rise for some years in the number of children attending our schools inevitably generates more work for the School Health Service. Such are the present pressures on staff, that it may be necessary to review the working of the department and its establishment in the coming year.

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. 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 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 1967</u>	<u>Year 1968</u>
Primary School	...	...	...	...	...	...	7,121	7,518
Secondary Schools	...	...	...	...	...	...	4,331	4,497
							<u>11,452</u>	<u>12,015</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	...	...	...	...	...	...	...	...	...	1000
Leavers	...	...	...	...	...	...	...	...	...	968
SECONDARY SCHOOLS—										
Leavers	...	...	...	...	...	...	...	...	...	725
ADDITIONAL MEDICAL INSPECTIONS (All Schools)										774
TOTAL										3467

The Nursery School at Crossens and the Hawkshead Hospital Special School were visited each term.

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

PRIMARY SCHOOLS—										
Entrants	...	...	...	...	...	...	...	...	...	78.1%
Leavers	...	...	...	...	...	...	...	...	...	56.3%
SECONDARY SCHOOLS—										
Leavers	...	...	...	...	...	...	...	...	...	15.6%
ADDITIONAL MEDICAL INSPECTIONS (All Schools)										49.0%

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 ...	1000	968	725	774	3467
Number of children requiring treatment	108	115	59	88	370
Percentage requiring treatment ...	10.8	11.9	8.1	1.1	10.7

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 11,981 and of these 50 were referred for further examination, together with 1,045, from last year's medical inspection.

CLINICS

Nurses Treatment Clinic—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, 6,676 attendances were made by children—5,880 at 2 Church Street Clinic, 605 at Lincoln House Clinic, and 191 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 1,322, and these children made 1,776 attendances. 19 cases were referred to the Southport Infirmary for further investigation, 7 to the Promenade Hospital, and 1 to the Childrens Hospital at Alder Hey.

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

During the year 30 alarms were supplied to enuretic school children. The majority of these children were cured or showed great improvement after using this apparatus.

Eye Clinic—During the year, 899 attendances were made at this clinic. 202 new cases were examined and 401 children attended for observation of progress from previous years. 327 children had spectacles prescribed for them and 20 children were referred to the Southport Infirmary for operative and orthoptic treatment.

Ear, Nose and Throat Clinic—In 1968, 327 attendances were made at this clinic. 280 new cases were examined and 32 children attended for observation of progress from previous years. 207 cases were admitted to the Promenade Hospital for the removal of tonsils and/or adenoids, 2 for mastoidectomy and 96 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. 1,408 children were tested in school; 68 were referred to a school medical officer for further testing; 20 children were kept under observation and 26 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, 564 attendances were made. 129 new cases were examined and 73 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.

During the year, 1,096 attendances were made and 238 new cases were examined. At the end of the year 20 children were attending for treatment.

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

33 school children were treated at 2 Church Street and made 438 attendances. 13 children were treated at Lincoln House and made 177 attendances. 11 children were treated at Ainsdale and made 104 attendances.

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.

259 children made 4,098 attendances during the year at 2 Church Street, 103 children made 856 attendances at Lincoln House and 135 children made 847 attendances at Ainsdale.

In addition, group physiotherapy sessions are held once a week at Hawkshead Hospital Special School and 1478 group attendances were made during the year.

7 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—The arrangements which existed for many years between the North West School of Speech and Drama and the School Health Service came to an end in October. The speech therapist employed by the North West School obtained another appointment, and the School found it impossible to appoint a replacement.

The following statistics are for the period from January to October:—

No of sessions held	69
No. recommended by the school medical officers for treatment...	19
No. of new cases admitted to regular classes	10
No. of children discharged as cured	16

Forty-one children made 482 attendances at these classes; the reasons for the defects in speech were:—

Slow and abnormal speech development	27
Stammering	9
Dyslalia	4
Lisp	1

The Local Authority is hoping to appoint a full-time speech therapist but is having difficulty in filling the vacancy, and at the end of the year no appointment had been made.

HANDICAPPED PUPILS

Physically Handicapped Children—The work in the Hawkshead Hospital Special School 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. Transport is provided for the majority of these children. The staff do all in their power to make the school a happy and efficient one.

19 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	6	Paralysis both legs
"	7	Right sided hemiplegia
"	7	Haemophyliac
"	7	Spina Bifida
"	8	Spastic paralysis
"	9	Muscular dystrophy
"	9	Muscular dystrophy
"	9	Paralysis both legs
"	9	Congenital heart disease
"	10	Cerebral tumour
"	11	Muscular dystrophy
"	11	Congenital deformity of urethra
Girl	5	Spastic paralysis
"	5	Congenital heart disease
"	6	Right sided hemiplegia
"	6	Congenital absence of sacrum
"	7	Congenital absence of sacrum
"	10	Spastic
"	10	Mid-thoracic scoliosis

During the past year about ten of our severely handicapped children have been taken to the Victoria Baths by the physiotherapist for hydro-therapy. Most of these children are confined to wheel chairs or have muscular defects, and they get great joy from their visits to the baths. This is one time in the week when supported by the water their limbs can move freely. Voluntary help is given at these sessions by members of the Ladies Circle, and this service is greatly appreciated.

One child was receiving home tuition and five were at Residential Special Schools.

Deaf and Partially Hearing Children—One deaf and three partially hearing children were in residential schools. Six children attended special schools for the partially hearing as day pupils.

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

The construction of a day special school will 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 was one child in a residential special school for maladjusted pupils, and one an in-patient in a children's hospital.

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.

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—No cases of tuberculosis were found in school children during 1968.

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 3.0% as against 2.5% 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
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
1968	91.7	1012	20.7	72.7	6.6	727

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
1964	832	3	0.4
1965	819	9	1.1
1966	718	7	1.0
1967	834	14	1.7
1968	1025	21	2.1

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 1967 for comparison:—

	1967	1968
Measles	305	176
Rubella	117	86
Scarlet Fever	55	45
Chicken Pox	336	185
Whooping Cough	27	12
Tuberculosis of glands	1	Nil

MISCELLANEOUS SCHOOL MEDICAL WORK

Examination of school children for fitness to take part in public entertainment	...	...	...	...	...	...	...	5
Examination of school children for part-time employment	...	...	...	...	...	...	...	60
Children seen at 'follow-up' visits to schools by school nurses	...	...	...	...	...	...	...	513
Miscellaneous home visits by school nurses	...	...	...	...	...	...	...	1162

HEALTH EDUCATION IN SCHOOL

Regular mothercraft classes were held at all the secondary modern schools at which girls attend, that is 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, 1,497,162 meals were given to Southport school children. 11% of these meals were supplied free of charge under the assessment of income scheme, and 4% of these meals were supplied free under the fourth child scheme. An average of 76% of children have dinner in school.

SCHOOL DENTAL SERVICE

Principal School Dental Officer's Report, 1968.

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 was carried out in all but two schools and treatment offered to every child found to require it. In addition six schools have been re-inspected, thus maintaining in some schools a period of less than one year between inspections. The inspections of the two schools omitted in 1968 have been arranged for January, 1969. The delay results from re-arrangement of inspections to ensure that secondary modern schools are visited early in the school year. This ensures that cases can be followed up before children leave school.

A new Air-rotor was purchased for the Lincoln House Clinic, the existing one having given continuous trouble. It is hoped that the new one will prove more reliable and be in working order whenever the dental surgeon considers its use an advantage.

The simple rules of dental health continue to be stressed by the use of packs for new entrants to school, literature in the waiting room, posters taken to schools and pamphlets included with birthday cards sent to children attending child health centres. A new scheme has been introduced this year whereby a letter is sent to parents at the time of the child's third birthday pointing out the way to prevent tooth decay and urging them to have regular dental examinations for their child—a tear off portion is attached and if this is returned an appointment is sent for them to bring the child to the clinic.

In June, a circular from the Minister of Health again strongly urged all local health authorities, who had not already done so, to adopt fluoridation at the earliest possible date. Since agreement has not been reached by all the Authorities supplied by the Water Board, it seems that Southport will be unable to adopt this measure at an early date.

CLINICS AS AT THE 31st DECEMBER, 1968

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' Audio Clinic Doctors' Minor Ailment Clinic Nurses' Dressings Clinic Dental Clinic	—	Dental Clinic
TUESDAY a.m.	*Eye Clinic Nurses' Dressings Clinic *Orthodontic Clinic Dental Clinic	*Remedial Exercises Clinic	Dental Clinic
TUESDAY p.m.	Nurses' Dressings Clinic *Orthodontic Clinic (Fortnightly) 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 Dental Clinic	—	Dental Clinic
THURSDAY a.m.	*Chiropody 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.	*Chiropody 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

* By Appointment Only.

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

YEAR 1968

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)
1964 and later	95	95	—
1963	372	372	—
1962	587	586	1
1961	127	126	1
1960	99	99	—
1959	110	110	—
1958	185	185	—
1957	625	625	—
1956	370	370	—
1955	83	83	—
1954	751	751	—
1953 and earlier	63	62	1
TOTAL	3467	3464	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)
1964 and later	—	5	5
1963	3	30	33
1962	4	67	70
1961	—	20	20
1960	1	9	10
1959	1	10	11
1958	5	14	19
1957	3	77	79
1956	5	37	40
1955	1	9	10
1954	13	55	66
1953 and earlier	2	5	7
TOTAL	38	338	370

OTHER INSPECTIONS

Number of Special Inspections	898
Number of re-inspections	1973
TOTAL	2871

PART I (cont.)
INFESTATION WITH VERMIN

Total number of individual examinations of pupils in schools by school nurses or other authorised persons..... 10775
Total number of individual pupils found to be infested..... 113
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	6	12	7	25
					O	5	8	17	30
Eyes—Vision	...	...	...	...	T	5	11	22	38
					O	1	4	2	7
Squint	...	...	...	...	T	7	—	5	12
					O	—	—	2	2
Other	...	...	...	...	T	1	1	19	21
					O	1	—	2	3
Ears—Hearing	...	...	...	...	T	18	2	20	40
					O	6	1	4	11
Otitis Media	...	...	...	...	T	1	—	—	1
					O	1	—	1	2
Other	...	...	...	...	T	1	—	1	2
					O	2	—	3	5
Nose and Throat	...	...	...	...	T	10	2	9	21
					O	47	2	23	72
Speech	...	...	...	...	T	3	1	5	9
					O	18	—	3	21
Lymphatic Glands	...	...	...	...	T	—	—	—	—
					O	6	—	2	8
Heart	...	...	...	...	T	7	1	6	14
					O	19	8	25	52
Lungs	...	...	...	...	T	10	—	3	13
					O	13	5	10	28
Developmental—Hernia	...	...	...	...	T	—	1	—	1
					O	1	—	—	1
Other	...	...	...	...	T	3	2	9	14
					O	72	—	37	109
Orthopaedic—Posture	...	...	...	...	T	4	16	45	65
					O	1	2	9	12
Feet	...	...	...	...	T	17	7	42	66
					O	15	—	12	27
Other	...	...	...	...	T	5	2	13	20
					O	14	6	7	27
Nervous System—Epilepsy	...	...	...	...	T	3	1	—	4
					O	—	—	1	1
Other	...	...	...	...	T	—	4	—	4
					O	—	1	—	1
Psychological—Development	...	...	...	...	T	2	—	1	3
					O	3	—	1	4
Stability	...	...	...	...	T	—	—	1	1
					O	3	1	—	4
Abdomen	...	...	...	...	T	2	—	6	8
					O	—	3	2	5
Other	...	...	...	...	T	14	9	18	41
					O	8	8	24	40

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	...	...	...	...	...	...	...	177	11
Eyes—Vision	...	...	...	...	...	...	...	2	—
Squint	...	...	...	...	...	...	...	—	—
Other	...	...	...	...	...	...	...	31	4
Ears—Hearing	...	...	...	...	...	...	...	23	49
Otitis Media	...	...	...	...	...	...	...	5	—
Other	...	...	...	...	...	...	...	13	3
Nose and Throat	...	...	...	...	...	...	...	47	9
Speech	...	...	...	...	...	...	...	4	2
Lymphatic Glands	...	...	...	...	...	...	...	—	—
Heart	...	...	...	...	...	...	...	—	2
Lungs	...	...	...	...	...	...	...	1	1
Developmental—									
Hernia	...	...	...	...	...	...	...	—	—
Other	...	...	...	...	...	...	...	3	1
Orthopaedic—									
Posture	...	...	...	...	...	...	...	5	1
Feet	...	...	...	...	...	...	...	26	5
Other	...	...	...	...	...	...	...	120	21
Nervous System—									
Epilepsy	...	...	...	...	...	...	...	—	—
Other	...	...	...	...	...	...	...	—	3
Psychological—									
Development	...	...	...	...	...	...	...	12	1
Stability	...	...	...	...	...	...	...	5	2
Abdomen	...	...	...	...	...	...	...	24	6
Other	...	...	...	...	...	...	...	73	43
TOTALS								571	164

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	101
Errors of refraction (including squint)	540
Total	641
Number of pupils for whom spectacles were prescribed	327

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	50
for adenoids and chronic tonsillitis	207
for other nose and throat conditions	48
Received other forms of treatment	440
Total	745
Number of pupils in schools who are known to have been provided with hearing aids—	
in 1968	2
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	7
By Local Authority Medical Staff	174
Pupils treated at school for postural defects	—
Total	181

PART III (cont.)

DISEASES OF THE SKIN

(excluding uncleanliness, for which see Part I)

	Number of cases known to have been treated
Ringworm—	—
Scalp	2
Body	9
Scabies	19
Impetigo	623
Other skin diseases	
Total	653

CHILD GUIDANCE SERVICE

	Number of cases known to have been treated
Pupils treated at Child Guidance Clinic:—	
Maintained school children	106
Pre-school children	4
Private school children	6
Lancashire County school children and pre-school children	21
Total	137

(For further details see Table VI)

SPEECH THERAPY

	Number of cases known to have been treated
Pupils treated by speech therapists	41

OTHER TREATMENT GIVEN

	Number of cases known to have been dealt with
Pupils with minor ailments	484
Pupils who received convalescent treatment under School Health Service arrangements	—
Pupils who received B.C.G. vaccination	727
Artificial Sunlight	57
Remedial Exercises	497
No. of 5 year old entrants who have had Skin Tests	1025
Total	2790

PART IV

SCHOOL DENTAL SERVICE

	Health Depart- ment	Lincoln House	TOTALS
Inspections			
(a) Number of pupils having a first inspection during the year	7335	3157	10492
(b) Number of those pupils found to require treatment ...	2739	1892	4631
(c) Number of pupils re-inspected during the year ...	2963	1766	4729
(d) Number of those pupils found to require treatment ...	1472	881	2353
Number of individual pupils treated (i.e. first visits for treatment)	1630	826	2456
Number of attendances made by pupils for treatment or advice..	4884	3576	8460
Half days devoted to:—			
(a) Visits to schools (Inspections and Health Education)...	78	15	93
(b) Treatment (including 66 Orthodontic Sessions) ...	742	415	1157
Fillings—(a) Permanent Teeth	2510	1057	3567
(b) Temporary Teeth	1299	1231	2530
Total no. of fillings	3809	2288	6097
Number of Teeth filled—(a) Permanent Teeth	2121	974	3095
(b) Temporary Teeth	1175	1072	2247
Total no. of teeth filled	3296	2046	5342
Extractions—(a) Permanent Teeth	360	308	668
(b) Temporary Teeth	1248	523	1771
Total no. of extractions	1608	831	2439
General Anaesthetic administered by Dental Officers	437	219	656
Orthodontics:			
(a) New Cases commenced	61	20	81
(b) Cases completed	48	26	74
(c) Cases discontinued	4	7	11
(d) Total attendances	886	162	1048
Prosthetics —Number of dentures supplied	7	4	11
Other Operations (including X-rays, Prophylaxis, Teeth otherwise conserved, Root treatment, Inlays, Crowns, Dressings, etc.	597	1046	1643

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 referred	87	3	7	13	1	111
Number of children referred by:—						
Family Doctors	14	3	2	3	—	22
School Medical Officers...	12	—	1	1	—	14
Juvenile Court & Probation Officers	1	—	—	—	—	1
Consultant Medical (including Hospital Staff)	2	—	3	9	1	15
Children's Officer ...	5	—	1	—	—	6
Chief Education Officer...	4	—	—	—	—	4
Miscellaneous	49	—	—	—	—	49
TOTAL	87	3	7	13	1	111
Number of individual children seen during year ...	106	6	4	18	3	137
Number of attendances made by:—						
Children	247	9	8	58	10	332
Parents	260	9	13	68	11	361
TOTAL	507	18	21	126	21	693
Number of children on waiting list at commencement of year	5	—	1	—	—	6
Number of children on waiting list at end of year ...	15	—	2	1	—	18

Number of sessions conducted by Consultant Child Psychiatrist 93

	SOUTHPORT			LANCASHIRE COUNTY COUNCIL		
	School Children		Pre- School Children	School Children	Pre- School Children	
	Maintained Schools	Private Schools				
	26	3					5	1	—
Number of home visits by Psychiatric Social Worker						35

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., 1968	No. added during the year, 1968	No. withdrawn in 1968	No. on the register at 31st Dec., 1968	Ordinary School	Special Schools	Day Class or School	Day Class or School	Special School	Refusal by Parents	
BLIND	—	—	—	—	—	—	—	—	—	—	—
PARTIALLY SIGHTED ...	8	1	—	9	5	—	—	—	1	2	9
DEAF	1	1	—	2	—	1	—	—	1	—	2
PARTIALLY HEARING ...	17	3	6	14	3	6	3	1	1	—	14
DELICATE	—	—	—	—	—	—	—	—	—	—	—
DIABETIC	14	3	2	15	15	—	—	—	—	—	15
EDUCATIONALLY SUB-NORMAL ...	65	4	12	57	—	22	9	21†	5	—	57
EPILEPTIC	25	6	5	26	26	—	—	—	—	—	26
MALADJUSTED	4	2	2	4	1	—	2	—	1	—	4
PHYSICALLY HANDICAPPED	169	38	21	186	160	19	6	—	1	—	186
TOTALS ...	303	58	48	313	210	47	22	22	10	2	313

† 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 small remedial classes in Secondary Schools.

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	997	148	64	1209	—
Number of parental consents received	910	135	64	1109	91·7
Number of definite refusals	58	6	—	64	5·3
Number of parents who did not reply	29	7	—	36	3·0
TOTALS	997	148	64	1209	100
Number of Children tested	830	127	55	1012	91·3
Number of children with consent forms but not tested	80	8	9	97	8·7
TOTALS	910	135	64	1109	100
Number of children tested and found to be:—					
Positive reactors	148	31	30	209	20·7
Negative reactors	629	94	13	736	72·7
Number not read	53	2	12	67	6·6
TOTALS	830	127	55	1012	100
Number of negative reactors vaccinated	622	92	13	727	—

TABLE IX

TUBERCULIN SKIN TESTING OF SCHOOL ENTRANTS

Number of children already tested	...	...	...	...	...	...	24
Number of 'no replies'	...	...	...	...	...	...	160
Number of definite refusals	...	...	...	...	...	...	70
Number of consents received	...	...	...	...	...	...	1132
Total number of eligible children	...	...	...	...	...	...	1386
Number of children tested	...	...	...	...	...	...	1025
Number of children absent from the test	...	...	...	...	...	...	107
Total number of children for whom consents were received	...	...	...	...	...	...	1132
Number of children tested and found to be:—							
(a) positive	...	...	...	...	...	...	21
(b) positive from previous B.C.G. vaccination	...	...	...	...	...	...	43
(c) negative	...	...	...	...	...	...	939
(d) absent from reading	...	...	...	...	...	...	22
Total number of children tested	...	...	...	...	...	...	1025
Number of children referred to the Chest Clinic	...	...	...	...	...	...	21
Number of contacts found to have active disease	...	...	...	...	...	...	NIL

