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Contributors

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COUNTY BOROUGH OF SOUTHPORT



ANNUAL REPORT

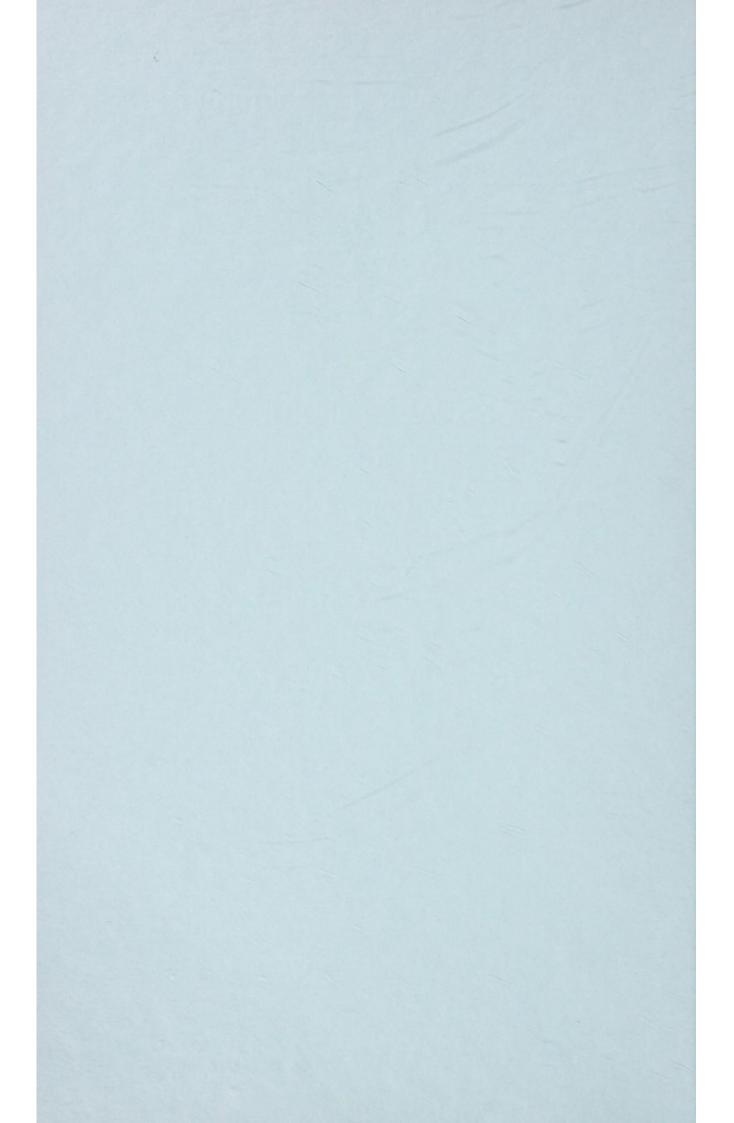
OF THE

MEDICAL OFFICER OF HEALTH

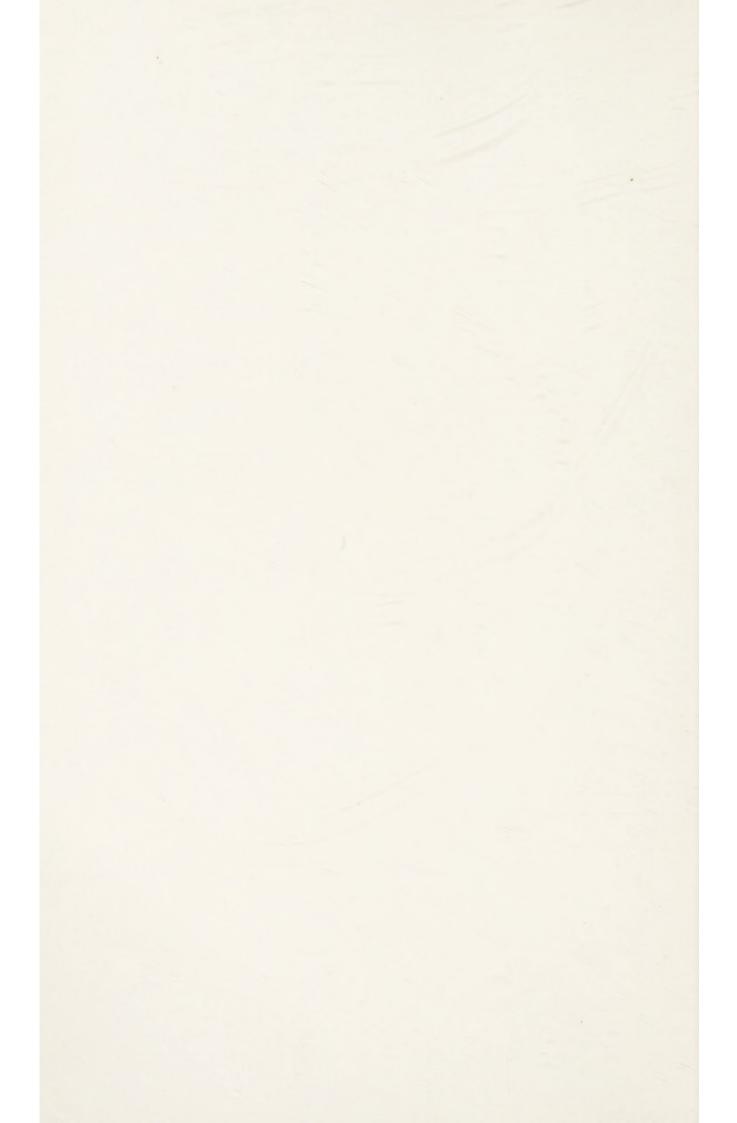
AND

PRINCIPAL SCHOOL MEDICAL OFFICER

FOR THE YEAR 1970



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ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH

AND

PRINCIPAL SCHOOL MEDICAL OFFICER

FOR THE YEAR 1970

Telephone No. Southport 5523.

Health Department, 2 Church Street, Southport. Manager and Haddensen Alking

ANNUAL REPORT

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PRINCIPAL SCHOOL MEDICAL OFFICER

FOR THE YEAR 1970

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HEALTH COMMITTEE

(31st December, 1970)

The Worshipful the Mayor Alderman Mrs. J. LEECH

Chairman Councillor H. MARTLAND

Senior Deputy Chairman ... Councillor R. E. EARP

Junior Deputy Chairman ... Councillor R. M. WATSON

Aldermen A. V. F. LANGFELD

E. McCabe, J.P.

Mrs. B. Pogson

G. S. WILKINS

Councillors R. T. CARR Mrs. C. KIRWAN

J. HARTLEY L. POTASH

R. B. Hughes J. H. Poynton

Co-opted Member ... Dr. L. M. MACKENZIE

SENIOR STAFF OF THE DEPARTMENT

(in post on 31st December, 1970—*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.

October 1970 Sept.

Deputy Medical Officer of Health ... Anna I. Davison, M.B., Ch.B., C.P.H.

(To 18.4.70)

P. W. LANG, L.R.C.P., L.R.C.S., L.R.F.P. & S., D.P.H. (From 7.10.70)

Medical Officer in Department ... M. C. Fell, M.B., Ch.B., D.P.H., D.C.H.

Medical Officer in Department ... 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.)

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. RAYNER, N.S.C.N.

Matron, Bedford Park Day Nursery ... Miss C. E. WALSH, N.S.C.N.

Senior Mental Welfare Officer ... F. TAYLOR, C.S.W., R.M.N., R.M.P.A.

Supervisor, Junior Training Centre for Mentally Handicapped Mrs	s. I. H. BAYLEY
Manager, Adult Training & Industrial Centre for Mentally Handicapped J. I	Dix, Diploma, National Assoc. for Mental Health
Superintendent, Springbrook Residential Home for Mentally Handicapped Children V.	Oldham
Superintendent, The Meadows Residential Home for Mentally Handicapped Adults B. 1	Holden
Matron, Brookdale Home for the Elderly Mentally Infirm Mis	ss L. Curnan, R.M.N., R.M.P.A.
Chief Fire & Ambulance Officer *J. F	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 1970

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

This is the last time that I have to present an Annual Report to the Southport Local Health Authority as I shall be retiring on 31st March, 1971. We are entering upon a time of great change both in local government and the National Health Service. There have been great social reforms before and each has brought improvement to the life and health of the nation. It is to be hoped that the expected present major unheaval will be beneficial: certainly much careful work will be necessary if all that is good in the present arrangements is to be retained.

Great strides have been made in preventive medicine in the last decade. The advances in medical science make possible almost yearly the control or elimination of one of the infectious diseases. In 1970, immunisation against german measles (rubella) was begun and schoolgirls in their early teens are now offered this protection. It is hoped that this will prevent these young mothers of the future from bearing severely handicapped, rubella infected, children.

A great deal remains to be done. In the field of child health closer integration of the hospital, family doctor and local health authority services is required and this should be facilitated if unification of the National Health Service is brought about. Our child care services, judged by statistical data are less effective in saving child lives than those of some other countries. There is overlapping of the present services for the handicapped child particularly those in the 2-5 year age group. This sometimes arises from the great difficulty which some parents have in accepting that they have a handicapped child and their desire to seek help from a number of different medical sources. Closer integration of the various services might lead to less need for children to be admitted to hospital, which is usually not a happy experience for a small child. The number of mothers now seeking hospital confinement is such that integration of the domiciliary midwifery service with the hospital maternity service might give a better service than the present arrangements provide. The early detection of congenital defects in the infant is of great importance and in Southport great care is given to this important aspect of child health. I include in the statistical section particulars of the Infant Mortality Rate in Southport during the last century to illustrate the great decline in the number of infant deaths.

The Medical Officer in charge of a Public Health Department has a great many duties in addition to those associated with Child Health. He must be aware of the incidence of infectious diseases in the area and on the look out to take steps to prevent epidemic spread when danger of this kind threatens. He must constantly monitor the environment for circumstances which might have harmful effects on the people in his area. There is now a good deal of public interest in environmental pollution: new chemicals, new drugs,

new processes of manufacture and the difficulty of disposal of waste products make it urgent that the staff of the public health inspectorate should be trained to higher standards than has been necessary in the past: encouragement should be given to attract able young people into this immensely important branch of hygiene. Only by this means can we ensure that the air we breathe, the water we drink and the food we eat is not polluted to an extent which will endanger health. Changing practices in food preparation and presentation particularly the increasing use of frozen and chilled foodstuffs, makes all the more important the teaching of food hygiene and it is pleasing to know that more than 2,000 students have taken the course in this subject at the Southport Technical College during the past 20 years, a course organised jointly by the St. John Ambulance Association and the Health Committee.

Not enough publicity is given in this country to the work of the World Health Organisation. Indirectly we all benefit by the actions of this organisation. Travel is becoming more and more within the reach of all of us and it is in our interests to improve the health of people in other countries and to help in the control of infectious diseases which can so quickly be imported into our country. The approved budget for W.H.O.'s operations in 1970 was 67,650,000 dollars, of which the United Kingdom's contribution was 4,147,000 dollars, not a large amount but exceeded by only three other countries, the U.S.A., the U.S.S.R., and the Federal Republic of Germany. Travel in certain parts of the world can be hazardous and exposure to very serious infections can result. Travellers should consider what steps need be taken before going abroad. Vaccination against small-pox, typhoid fever and poliomyelitis are obvious precautions and chemo-prophylaxis against malaria is advisable for people residing in or in transit through a malarious area.

The Social Services Act is to be implemented in 1971. Certain of the work now carried out by the Health Department will be added to the work of the present Children's and Welfare Departments, to form a new department for the Social Services under the control of a Director of Social Services. There are differing views as to whether this change will be for the benefit of all concerned: in particular the divorcing of the staff of the Mental Health Section of the Health Department from direct medical administrative control is viewed with apprehension by many doctors. The medical element in much social work will remain and it will be essential to ensure that effective medical advice is provided in all cases where there is need for such advice. Much will depend on the liaison which can be arranged between the professional staffs concerned. It is to be hoped that the Medical Officer of Health or the "Community Physician" as he will be termed under the anticipated reorganisation of the National Health Service, will continue to have a statutory duty to advise the Local Authority on matters of this kind. It will be interesting to observe whether the newly created organisation will have better success in eradicating the social evils of our time than those who have tried to deal with these difficult matters in the past.

The School Health Service work has gone on as usual during the year. There have been continuing staffing difficulties and it has not proved possible to appoint a dentist in the place of Mr. Leech who left the Department in June. Doctors, dentists, chiropodists and other professional staff can earn more outside local authority employment and those who remain usually do so because they have a vocational liking for their jobs. We were fortunate in filling the Speech Therapist post by Miss Wight who has already done very good work: the post she occupies had been vacant for a long time.

We do not yet know what place the School Health Service is likely to occupy in the projected reorganisation of the National Health Service. I do not think it is sufficiently appreciated in medical circles that the School Doctor has to do a good deal of highly specialised work. The handicapped child requires frequent supervision throughout his school life by a doctor who has intimate knowledge of the schools and education administration in his area. I think it of great importance that the School Health Service should remain an entity in any reorganisation and should not be divided between the hospital staffs and the Family Doctors as has been suggested in some quarters. It is necessary nowadays to take into account the reports and advice of a number of specialists both medical and lay when considering the future of a handicapped child and co-ordination

of such information can best be carried out by an experienced school doctor with knowledge of the educational facilities in his area. The Family Doctor should have the opportunity to help in the assessment of matters of this kind affecting his child patients.

I have very much enjoyed my professional work in Southport. I have been fortunate in having the support not only of the elected Members of the Council but also of my professional colleagues in the town and of a loyal and capable staff. I believe that in some small way, I have been able to aid the progress of preventive medicine in the town and this is very satisfying.

Southport has as its motto "Salus Populi". It is important that we should live up to this motto and much could be done which would benefit or preserve the health of the people of the town. I believe that when such matters are under consideration Dr. Lang, who is to succeed me, will give salutary and dependable advice.

I must conclude as I have done over the years by offering my grateful thanks to all those who have in any way supported the work of the Department during 1970.

I am, Yours faithfully,

G. N. M. WISHART,

Medical Officer of Health.



Section I

STATISTICS

GENERAL STATISTICS

GENERAL STATISTICS		1969	1970
Area of County Persuah (including Foreshore) (agree)		18,333	18,333
		9,426	9,426
			82,004
		82,004	
		79,430	83,000
Density of Population per acre (excluding Foreshore)		8.43	8.80
VITAL STATISTICS			
		942	929
Illegitimate		114	108
Total		1,056	1,037
Males		537	526
Eamelee		519	511
Total		1,056	1,037
Rate per 1,000 population		13.3	12.5
1 1 1		16.0	15.0
(area comparability factor)		(1.20)	(0.94)
Birth Rate for England and Wales		16.30	16.0
Illegitimate Live Births per cent of total live births		11%	10%
Stillbirths Number		15	14
Rate per 1,000 total live and stillbirths		14	13
		1,071	1,051
		21	15
Infant Mortality Rates:			
Total Infant Deaths per 1,000 total live births		20	14
Legitimate Infant Deaths per 1,000 legitimate live birth: Illegitimate Infant Deaths per 1,000 illegitimate live bir		21	13 28
Infant Mortality Rate per 1,000 births for England and Wale		18	18
Neo-natal Mortality Rate (deaths under 4 weeks per 1,000		10	10
births)	total live	12	8
do England and Wales		12	12
Early Neo-natal Mortality Rate (deaths under 1 week per 1,			
line hinths)		11	8
do. England and wales		10	11
Perinatal Mortality Rate (stillbirths and deaths under 1 week of	ombined		
per 1,000 total live and stillbirths)		25	21
9		23	23
Maternal Mortality (including abortion)			
Pate per 1 000 total live and stillhinths		none	none
Deaths of Infants under 1 day old		9	5
Year 1969 1970		,	
Deaths Males 671 640		1,530	1,488
Rate per 1,000 population		19.3	17.9
Adjusted death rate per 1,000 population		12.7	11.6
(area comparability factor)		(0.66)	(0.65)
Death Rate for England and Wales		11.9	11.7
Excess of Deaths over Pagistered Rieths		474	437

VITAL STATISTICS

Comparison of Birth, Death and Infant Mortality Rates for England, Wales and Southport for Period 1891 to 1970

Period	BIRTH RATE (per 1,000 population)	RATE oppulation)	DEATH RATE (per 1,000 population)	RATE ppulation)	INFANT MORTALITY RATE (per 1,000 live births)	ALITY RATE ve births)
	England & Wales	Southport	England & Wales	Southport	England & Wales	Southport
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	7.2	65
1931—1940	14.9	10.30	12.3	15.07	59	99
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
1969	16.3	16.00	11.9	12.7	18.0	20.0
1970	16.0	15.00	11.7	11.6	18.0	14.0

Corrected Rates for births and deaths are shown from 1951

REGISTRAR GENERAL'S SHORT LIST OF CAUSES OF DEATH, 1970

		all	4	cs 1 yr.				А	ge in	Yea	rs		
Causes of Death	Sex	Total :	Under	4 weeks under 1 y	1-4	5-14	15- 24	25- 34	35- 44	45- 54		65- 74	75+
B4 Enteritis and other Diarrhoeal Diseases	M F	-	=	<u> </u>	=	=	=	=	=	=	Ξ	Ξ	=
B5 Tuberculosis of Respiratory System	M F	1	=	=	=	=	=	=	=	=	1	=	=
B16 Malaria	M F	1	Ξ	=	=	=	=	1	=	=	=	=	=
B19(1) Malignant Neoplasm— Buccal Cavity etc	M F	1	=	Ξ	Ξ	Ξ	=	Ξ	=	=	1	=	=
B19(2) Malignant Neoplasm— Oesophagus	M F	4 5	=	Ξ	Ξ	_	=	Ξ	=	=	2	1 3	1 2
B19(3) Malignant Neoplasm— Stomach	M F	16 9	=	Ξ	=	=	=	=	-	4	1	5 2	6 4
B19(4) Malignant Neoplasm— Intestine	M F	10 31	=	Ξ	Ξ	=	=	=	2	<u></u>	1	5	2 17
B19(5) Malignant Neoplasm	M F	2	_	Ξ	Ξ	=	=	Ξ	=	Ξ	Ξ	Ξ	2
B19(6) Malignant Neoplasm— Lung, Bronchus	M F	32 19	_	Ξ	=	=	Ξ	Ξ	Ξ	5	12	11	4 5
B19(7) Malignant Neoplasm— Breast	M F		Ξ	Ξ	=	=	_	Ξ	<u>-</u>	4	-4	12	- 7
B19(8) Malignant Neoplasm— Uterus	F	11			_	+	_		_	2	3	3	3
B19(9) Malignant Neoplasm— Prostate	М	8	_			_			_	I	1	1	6
B19(10) Leukaemia	M F	2 3	=	Ξ	Ξ	=	Ξ	<u>-</u>	=	<u>-</u>	=	1	1
B19(11) Other Malignant Neoplasms	M	34 39	=	Ξ	1	=	1	1	=	4	9 7	10 16	12 12
B20 Benign and Unspecified Neoplasms	M F	3	1	=	1	=	<u>-</u>	Ξ	Ξ	<u></u>	1	Ξ	Ξ
B21 Diabetes Mellitus	M	3 10	_	=	=	=	=	=	1	=		2	
B22 Avitaminoses etc	M	1	_	=	=	=	=	=	=	Ξ	1	<u>-</u>	=
B46(1) Endocrine etc., Diseases	M	- 2	=	Ξ	Ξ	=	=	Ξ	=	=	Ξ	<u></u>	- 1
B23 Aneamias	M	-4	=	=	_	Ξ	=	=	=	=	Ξ	-	-3
B46(3) Mental Disorders	M	-	=	=	Ξ	=	=	Ξ	Ξ	=	Ξ	=	- 1
B46(4) Multiple Sclerosis	M		Ξ	Ξ	Ξ	=	_	Ξ	Ξ	Ξ	<u>_</u>	<u>-</u>	=
B46(5) Other Diseases of Nervous System	M	8 4	=	1	=	1	_	_	Ξ	=	=	1 3	5
B26 Chronic Rheumatic Heart Disease	M	4 8	=	Ξ	Ξ	_	=	Ξ	-	-	3	1 3	-3
B27 Hypertensive Disease	M	13	=	Ξ	=	=	=	Ξ	=	=	2	3 2	8 8
B28 Ischaemic Heart Disease	M	169 215	=	Ξ	Ξ	=	=	Ξ	3	13	27	63	63

REGISTRAR GENERAL'S SHORT LIST OF CAUSES OF DEATH, 1970-continued

		all	4	ks 1 yr.				Age	in Y	ears			
Causes of Death	Sex	Total	Under	4 weeks under 1 y	1-4	5- 14	15- 24	25- 34	35- 44	45- 54	55- 64	65- 74	75 -
B29 Other forms of Heart Disease	M F	41 66	Ξ	=	=	=	=	=	=	3	1 3	12	25 54
B30 Cerebrovascular Disease	M F	65 157	Ξ	<u>-</u>	Ξ	=	Ξ	=	2	1 2	10	17 37	35
B46(6) Other Diseases of Circulatory System	M F	27 45	Ξ	=	Ξ	=	=	Ξ	-	Ξ	3 2	8 12	16
B31 Influenza	M	15 11	Ξ	Ξ	Ξ	=	=	=	=	=	1	7 5	7
B32 Pneumonia	M	65 79	Ξ	2	Ξ	<u>_</u>	1	Ξ	1	2	5	21 15	33
B33(1) Bronchitis and Emphysema	M F	60 17	Ξ	=	Ξ	Ξ	=	Ξ	1	-	9	22 6	28
B33(2) Asthma	M F	1 2	Ξ	Ξ	=	Ξ	=	Ξ	Ξ	- 1	Ξ	1	-
B46(7) Other Diseases of the Respiratory System	M F	6 7	Ξ	<u>-</u>	Ξ	=	Ξ	Ξ	Ξ	1	2 2		3 2
B34 Peptic Ulcer	M F	3	Ξ	Ξ	Ξ	Ξ	_	=	=	=	_2	1	-
B35 Appendicitis	M F	-	Ξ	Ξ	Ξ	=	=	Ξ	=	=	-	=	=
B36 Intestinal Obstruction and Hernia	M F	1 4	=	=	Ξ	Ξ	=	Ξ	=	_	=	<u>_</u>	1
B37 Cirrhosis of Liver	M F	2	Ξ	Ξ	Ξ	Ξ	=	Ξ	=	=	-	2	=
B46(8) Other Diseases of Digestive System	M F	1 6	Ξ	Ξ	Ξ	1	=	Ξ	- 1			-	-1
B38 Nephritis and Nephrosis	M F	1 4	Ξ	Ξ	Ξ	=	=	Ξ	-	=	=	1 1	-
B39 Hyperlasia of Prostate	М	2	-	-	-	-	-	-	-	-	-	-	2
B46(9) Other Diseases of Genito— Urinary System	M F	7	=	=	Ξ	=	=	=	=	=	2	2	3
B46(11) Diseases of Musculo- Skeletal System	M F	2	=	=	_	Ξ	=	=	1	=	=	1	-1
B42 Congenital Anomalies	M F	3 2	1	1	=	=	1	=	=	-	=	Ξ	=
B43 Birth Injury, Difficult Labour etc	M F	3	3	=	=	=	=	=		=		=	=
B44 Other Causes of Perinatal Mortality	M F	1	1	=	Ξ	Ξ	=	=	Ξ	=	_	=	=
B45 Symptons and Ill Defined Conditions	M	2 6	Ξ	=	=	=	=	Ξ	=	=	1	=	1
BE47 Motor Vehicle Accidents	M F	8	=	=	=	<u></u>	3	=	=	1	_	2	2
BE48 All Other Accidents	M F	7 20	Ξ	=	Ξ	=	1	1	=	1	2	1	19
BE49 Suicide and Self Inflicted Injuries	M F	3 4	=	=	Ξ	=	-	2	=	=	1	1	-
BE50 All other External Causes	M F	2 4	=	=	1	=	-	=	=	1			=
TOTAL ALL CAUSES	M	640 848	6 2	4 3	3	2 2	7 3	5 2	11 8	32 24	101 73		268

PROPORTION OF DEATHS FROM PRINCIPAL CAUSES

Common Daves			19	069	19	70
Cause of Death			Number	% of total deaths	Number	% of total deaths
Heart Disease including diseases culatory system	of the	e cir-	555	36.27	599	40 · 26
Cancer			246	16.08	254	17 - 07
Cerebrovascular disease			254	16.60	222	14.92
Respiratory Diseases			194	12.68	263	17.67
Violence, including suicide			70	4.58	49	3.29
All Other Causes			211	13.79	101	6.79
	Т	`otals	1,530	100.00	1,488	100.00

DEATHS DUE TO VIOLENCE, Year 1970

Classification			Male	Female	Totals
Motor Vehicle Accidents	 		8	1	9
All other accidents	 		9	24	33
Suicide	 		3	4	7
		Totals	20	29	49

Age Groups	0—1	5 yrs.	15—6	5 yrs.	65 an	d over
	М.	F.	M.	F.	М.	F.
Motor Vehicle Accidents	0	1	4	0	4	0
All other accidents	1	0	6	3	2	21
Suicide & self inflicted injuries	0	0	3	3	0	1
Tota	als 1	1	13	6	6	22

DEATHS

Numbers and Rates per 1,000 population and per 1,000 births-years 1961-1970

	Rate per 1,000 Popu- lation	1	1	1	0.01	0.01	1	1	1	1	
	Other Forms T.B.	1	1	1	1	-	1	1	1		
	Rate per 1,000 Popu- lation	0.05	0.05	0.12	60.0	0.04	0.05	0.01	1	1	0.01
	Pulm'ry Tuber- culosis	4	4	10	7	3	4	1	1	1	1
	Rate per 1,000 li mate Births	45	1	13	14	55	26	18	32	6	28
	Illegiti- mate	3		1	1	5	3	2	4	1	3
INFANTS	Rate per 1,000 Legiti- mate Births	16	22	27	19	20	24	11	23	21	13
INF	Legiti- mate	16	22	28	20	20	25	12	24	20	12
	Rate per 1,000 Births	17	21	26	19	23	24	12	25	20	14
	Under One Year	19	22	29	21	25	27	14	28	21	15
	Corrected for Age and Sex	13.34	12.69	13.12	12.76	11.72	12.23	12.44	13.53	12.7	11.6
	Rate per 1.000 Popu- lation	18.27	17.24	18.74	18.23	17.76	17.99	18.56	20.19	19.3	17.9
	Total	1480	1492	1502	1460	1420	1439	1479	1614	1530	1488
	Male Female Total	824	831	800	819	758	803	794	915	859	848
	Male	959	199	702	641	662	636	685	669	671	640
	Popu- lation	81020	80730	80160	8008	79980	80000	79710	79940	79430	83000
	Year	1961	1962	1963	1964	1965	1966	1967	1968	6961	1970

CANCER

Localisation of Disease and Number of Deaths for years 1961 to 1970

Second S	Site	1961	1962	1963	1964	1965	1966	1967	1968	1969	1970
ronchus (Male 45) (Female 15) (Female 10) (Female 12) (Female 12) (Female 13) (Female	Stomach and Duodenum	28	38	24	33	26	33	24	30	21	25
25 31 26 18 25 26 30 25 21 10 13 9 7 10 8 12 11 14 98 113 112 122 118 121 118 129 120 6 6 7 9 7 11 8 9 12 1480 1492 242 234 247 251 250 259 246 1480 1492 1502 1460 1420 1439 1479 1614 1530 14-73 17-56 16-11 16-03 17-44 16-90 16-05 16-08 16-08	Lung Bronchus	51 (Male 43) (Female 8)	61 (Male 46) (Female 15)	64 (Male 54) (Female 10)		61 (Male 43) (Female 18)	52 (Male 42) (Female 10)	58 (Male 50) (Female 8)	- 1	58 (Male 47) (Female 11)	0
10 13 9 7 10 8 12 11 14 98 113 112 122 118 121 118 129 120 6 6 7 9 7 11 8 9 12 : 218 262 242 234 247 251 250 259 246 1480 1492 1502 1460 1420 1439 1479 1614 1530 14·73 17·56 16·11 16·03 17·40 17·44 16·90 16·05 16·08	Breast	25	31	26	18	25	26	30	25	21	28
98 113 112 122 118 121 118 129 120 6 6 7 9 7 11 8 9 12 218 262 242 234 247 251 250 259 246 1480 1492 1502 1460 1420 1439 1479 1614 1530 14·73 17·56 16·11 16·03 17·40 17·44 16·90 16·05 16·08	Uterus	10	13	6	7	10	∞	12	11	14	11
6 6 6 7 9 7 11 8 9 12 218 262 242 234 247 251 250 259 246 1480 1492 1502 1460 1420 1439 1479 1614 1530 14·73 17·56 16·11 16·03 17·40 17·44 16·90 16·05 16·08	Other Sites	86	113	112	122	118	121	118	129	120	134
218 262 242 234 247 251 250 259 246 1480 1492 1502 1460 1420 1439 1479 1614 1530 14·73 17·56 16·11 16·03 17·40 17·44 16·90 16·05 16·08	Leukaemia	9	9	7	6	7	11	œ	6	12	5
1480 1492 1502 1460 1420 1439 1479 1614 1530 14·73 17·56 16·11 16·03 17·40 17·44 16·90 16·05 16·08	Total Deaths From Cancer	218	262	242	234	247	251	250	259	246	254
14.73 17.56 16.11 16.03 17.40 17.44 16.90 16.05 16.08	Total Deaths All Causes	1480	1492	1502	1460	1420	1439	1479	1614	1530	1488
	% of Cancer Deaths	14.73	17-56	16-11	16.03	17.40	17.44	16.90	16.05	16.08	17.07

MATERNAL MORTALITY FOR YEARS 1961 TO 1970

				RATES P		AL DEATHS IVE AND ST	LLBIRTHS	
V	No. of	No. of	Se	psis	Other	Causes	Т	otal
Year	Live Births	Live and — Stillbirths	No.	Rate	No.	Rate	No.	Rate
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
1969	1056	1071	_	_	_	_		-
1970	1037	1051		_	_	_	_	_

LIVE PREMATURE BIRTHS FOR YEAR 1970

					PR	PREMATURE LIVE BIRTHS	LIVE BIRT	HS						
		D. C.					Born at	Born at home or in a nursing home	n a nursi	ng home			Donna	
1 1 101		hospital	ital		horr	Nursed, entirely at home or in a nursing home	ntirely at	ome	hospit	Transferred to hospital on or before 28th day	rred to efore 28th	ı day	STILL BIRTHS	HRTHS
Weight at birth			Died				Died				Died		1	Born
	Total births (1)	within 24 hours of birth (2)	In 1 and under 7 days (3)	in 7 and under 28 days (4)	Total births (5)	within 24 hours of birth (6)	in 1 and under 7 days (7)	in 7 and under 28 days (8)	Total births (9)	within 24 hours of birth (10)	in 1 and under 7 days (11)	in 7 and under 28 days (12)	hospital (13)	at home or in a nursing home (14)
2 lb. 3 oz. or less	2	1	1	1	1	1	1	1	1		1	1	1	1
Over 2 lb. 3 oz. up to and including 3 lb. 4 oz.	4	1	1	1	1	1	1	1	1	1	1	1	1	
Over 3 lb. 4 oz. up to and including 4 lb. 6 oz.	7	1	1	1	7	1	1	1	1	1	1	1	. 2	1
Over 4 lb. 6 oz. up to and including 4 lb. 15 oz.	17	1	1	1	1	1	-	1	1	1	1	1	2	1
Over 4 lb. 15 oz. up to and including 5 lb. 8 oz.	33	1	1	1	1	ı	1	1	1	1	1	1	1	1
Totals	63	1	1	1	1	1	ı	i	1	1	1	1	10	1

Number of Deaths from Stated Causes at Various Periods
Under 1 Year of Age for Year 1970

Total under 1 year	1	1	2	1	-	-	1	7	1	15
11 mths.	1	1	1	1	1	1	1	1	1	1
10 mths.	1	1	1	1	1	1	1	1	1	1
9 mths.	1	1	1	1	1	1	1	1	1	1
8 mths.	1	1	1	1	1	1	1	1	1	-
7 mths.	1	1	1	1	1	1	1	1	1	1
6 mths.	1	1	1	1	1	1	1	1	1	1
5 mths.	1	1	1	1	1	1	-	1	1	-
4 mths.	1	1	1	1	1	1	1	2	1	3
3 mths.	1	1	1	1	1	1	1	1	1	1
mths.	1	1	1	ı	1	1	1	1	1	1
28 days -2 mths.	1	1	1	i	i	-	1	1	1	-
21-28 days	1	1	1	1	1	1	1	1	1	1
14-20 days	1	1	1	1	1	1	1	1	1	1
7-13 days	1	1	1	1	1	1	1	1	ı	1
6 days	1	1	1	1	1	1	1	1	1	1
5 days	1	1	1	1	1	1	1	1	1	1
4 days	1	1	1	1	1	1	1	1	1	-
3 days	1	1	1	ı	1	1	1	1	1	2
2 days	1	1	1	1	1	1	1	1	1	1
1 day	1	1	1	1	1	1	1	1	1	1
Under 1 day	1		1	1	1	1	1	1	1	20
CAUSE OF DEATH	Asphyxia	Atelectasis	Congenital Abnormalities	Prematurity	Broncho-Pneumonia	Cerebral Hacmorrhage	Gastro-Enteritis	Respiratory Failure	Intestinal Obstruction	TOTALS

CONGENITAL MALFORMATIONS

During the year, 12 cases of congenital malformations occurring in Southport children were reported, 8 males and 4 females. Of these 4 males and 1 female were stillborn and 2 males and 1 female died. More than 1 malformation occured in 2 females.

The classification of these cases is shown below:-

				LI	VE	STILL	BORN	DE	ATHS
				M	F	M	F	M	F
SKELETEL DEFECTS									
Osteogenesis imp	perfecta			 -	_	1	-		-
CENTRAL NERVOUS SY	STEM								
Hydrocephalus a		a Bifid	a	 _	1	_	1	_	1
Anencephalus				 -	-	2	_	-	-
OTHER MALFORMATIC	NIC								
Unspecified cong		malforr	nations	 1	_	_	_	1	_
Mongalism				 1	1	-	-	-	-
LIMBS									
Webbed Toes				 -	1	-	-	-	_
URO-GENITAL SYSTEM	Л							1	
Hypospadias				 1	-	1	-	-	-
HEART AND GREAT VI	ESSELS						1		
Congenital heart				 1	_	_	_	1	_

This information is collected from the Matrons of the Maternity Hospitals and from the Local Authority Midwives.

Section II

PERSONAL HEALTH SERVICES

PROPOSED HEALTH CENTRE—CHURCHTOWN

The proposed Centre will be the base for the practices of eight local family doctors and it will also incorporate certain of the local authority's services such as child health clinic, health visitors, home nurses etc.

Formal approval was obtained from the Executive Council to pay the estimated costs as fixed by the District Valuer relative to the Doctors' accommodation in the proposed centre, and application was made to the Minister of Housing and Local Government for consent to borrow the necessary sum likely to be incurred.

In May the scheme, as approved by the Town Council, was sent by the Town Clerk to the Department of Health and Social Security for their approval. However, a reply was received in June suggesting certain amendments to the plan.

In due course a revised plan was approved by the Health Committee and submitted to the District Valuer and Executive Council.

Approval was received from the Executive Council in November, subject to costs not exceeding the amount recommended by the District Valuer and the amended proposals were forwarded by the Town Clerk to the Department of Health and Social Security.

The position at the end of the year was that the Borough Architect had been given Authority by the Health Committee in December to negotiate with the lowest tenderer in the event of it being in excess of the cost limit, and approval had been received from the Ministry of Housing and Local Government for reclamation work to proceed in advance of the determination of the Grant to be paid.

CARE OF MOTHERS AND YOUNG CHILDREN

Ante-Natal Care

Ante-Natal Services are provided either at the Christiana Hartley Maternity Hospital or in Family Doctors' surgeries. Most expectant mothers now prefer to have their babies in hospital. Because the number of beds in local maternity hospitals is limited, the early discharge of mothers and their babies from hospital is becoming the accepted practice. The number of mothers discharged before the tenth day in 1970 was 848 as compared with 684 during 1969.

Maternity outfits are supplied free of cost to those mothers who elect to have their babies at home.

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.

Physiotherapy

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

Statistics for Year 1970

	Ante-Natal	Post-Nata
No. of women who attended for the first time during the year:		
St. Katharine's Maternity Hospital	158	500
Christiana Hartley Maternity Hospital	11	2
District cases	2	_
Attended Physiotherapy only	13	11
Total No. of cases	184	513
No. of attendances during the year	849	549
No. of sessions held by physiotherapists during the year	144	145

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 Department of Health. As in the past the ladies of the Voluntary Infant Welfare Committee provided clerical and other assistance at the Centres during 1970 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.

It is the Council's policy to replace all temporary Child Health Centres by purposebuilt 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 1970

			CHILD	HEALTH (CENTRE			
	Marsh- side	Hamp- ton Road	Poul- ton Road	Lincoln House	Cros- sens	Derby Road	Ains- dale	TOTAL
No. of children who attended during the year who have not attended previously this year: Born in 1970 1969 1965-68	108 100 189	164 194 319	162 118 338	111 158 385	79 52 165	117 122 199	125 153 396	866 897 1,991
Totals	397	677	618	654	296	438	674	3,754
Total attendances during the year	1,715	3,926	3,100	2,997	1,488	2,218	2,646	18,090
No. of sessions during the year	48	97	96	95	47	49	95	527
Average attendances per session	36	40	32	33	32	45	27	34
No. of children referred for special treatment or ad- vice as a result of a medical examination		12	3	26	3		_	44
No. of children placed on "at risk" register	14	36	21	10	9	21	11	122
No. of sessions by: Medical Officers General Practitioners employed on sessional	46	97	96	94	47	49	95	524
basis Hospital Medical Staff Health Visitors	=	=	=	=	=	=	Ξ	=
(with doctor) Health Visitors	96 2	224	189	192 1	94	147	237	1,179

DENTAL SERVICES FOR EXPECTANT AND NURSING MOTHERS AND CHILDREN UNDER FIVE YEARS

No separate sessions are held for maternity and child welfare patients. Inspections and treatment are carried out during the normal school dental service sessions.

	Children 0-4 (incl.)	Expectant and Nursing Mothers
Attendances and Treatment		
First visits	121	15
Subsequent visits	104	5
Total visits	225	20
Number of additional courses of treatment other than		
the first course commenced during year	26	_
Number of fillings	211	11
Teeth filled	182	10
Teeth extracted	104	6
General anaesthetics given	46	2
Emergency visits by patients	12	
Patients X-Rayed	1	_
Patients treated by scaling and/or removal of stains		
from the teeth (prophylaxis)	1	_
Teeth otherwise conserved	10	_
Number of courses of treatment completed during the		
year	119	14
PROSTHETICS		
Patients supplied with full upper or full lower dentures		
(first time)	_	_
Patients supplied with other dentures	_	1
Number of dentures supplied	_	1
rumber of deficates supplied		
General anaesthetics administered by Dental Officers	4	1
Inspections		
Number of patients given first inspections during the year	360	20
Number of patients who required treatment Number of patients who were offered treatment	131 131	19 19
Sessions		
Number of Dental Officer sessions devoted to Maternity and Child Welfare patients	6	69

Care of Unmarried Mothers

Unmarried mothers who seek the help of the Department are referred to the Obstetric Specialist, 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 the 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 72 new cases and the Health Committee paid the maintenance costs in voluntary homes for 14 mothers during the ante and post-natal period.

Of the 72 new cases dealt with by the Moral Welfare Worker, 58 were expectant unmarried mothers as under:—

First Pregnancies 54 Second Pregnancies 4

Of the babies born in 1970:-

25 were placed for adoption; 13 were kept by mothers;

3 died;

1 taken into care.

Statistics for Year 1970

Quantities Sold	National Dried Milk	Orange Juice	Cod Liver Oil	Vitamin 'A' & 'D' Tablets
	Tins	Bottles	Bottles	Packets
HEALTH DEPARTMENT— Counter Issues Issues to Health Service Institutions Issues to Day Nurseries	409 1	5,533 36 100	134 72	1,581
Total sales from Health Department	410	5,669	206	1,581
CHILD HEALTH CENTRES— Ainsdale Lincoln House Crossens Poulton Road Hampton Road Marshside Road Derby Road	78 13 7 88 50 8 69	5,932 2,627 1,350 1,271 2,512 2,026 994	163 185 42 73 105 85 88	299 163 49 94 257 182 48
Total sales from Child Health Centres	313	16,712	741	1,092
GRAND TOTALS	723	22,381	947	2,673

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 20/- maximum from 1st September, 1970.

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 6/8d. for each child.

It is pleasing to note that the four students who completed the two years course which commenced in September, 1968 and terminated in 1970, were successful in obtaining the Certificate of the National Nursery Examination Board.

The Nursery Nurses' Training Scheme was continued in 1970 in conjunction with the Education Committee with 4 students who were appointed for the two year course commencing in September, 1970.

Statistics for Year 1970

				Southport	Bedford Park	Totals
Number of places provided	i		 	 60	40	100
Total attendances			 	 13455	9036	22491
Number of days open Average daily attendance		***	 	 254 53·0	254 35·5	254 88·5

MIDWIFERY

District Midwifery

Three full time midwives and one district/nurse midwife are employed. Each year the number of confinements carried out in the home falls and last year there were only fifty three such births. In no instance was a district midwife in sole charge as was at one time frequently the case. Not only do expectant mothers now usually expect to be delivered in hospital but they also prefer to stay there as short a time as they can after the birth of their babies. This situation seems likely to hasten amalgamation between the hospital and local authority maternity services which could result in considerable benefit to all concerned.

Statistics for Year 1970

Doctor not booked								1
Doctor booked		•••	•••		•••			33
			TOTAL					34
remature Babies (5½ lb.								y las
No. born at and beir								_
No. born at home ar	id tran	sierre	d to nosp	itai	•••	•••		_
			TOTAL					_
No. of mothers delivered charged and attended	d in h	ospital strict	s and otl midwives	ner in befor	stitution	ns but day	dis-	848
No. of home visits made l	by dist	rict mi	dwives					4576
No. of supervisory visits								6

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 1970. These figures are for residents and non-residents of Southport.

	Christiana Hartley Maternity Hospital	St. Katharine's Maternity Hospital	TOTAL
(1) Number of patients	1126	318	1444*
(3) Number of practising midwives on the staff at the end of the year	18	10	28†
(4) Number of midwives in (3) above who are qualified to administer gas and oxygen analgesia	18	10	28

^{*}Includes 955 Southport residents and 489 non-residents.

Distribution of Maternity Cases

The following table shows the percentage of maternity cases dealt with during 1970 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.

	19	069	19	70
	No. of Cases	%	No. of Cases	%
District				
Municipal Midwives	53	5.4	33	3.3
Private Midwives	_	_	_	_
TOTALS (a)	53	5.4	33	3.3
Institutions	600	70.0	720	72.0
Christiana Hartley Mat. Hospital	689	70.8	730	73.9
St. Katharines Maternity Hospital	232	23.8	225	22.8
Nursing Homes	_	_	_	_
Southport Infirmary	_		_	_
TOTALS (b)	921	94.6	955	96.7
GRAND TOTALS (a) and (b)	974	100.0	988	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.

^{†17} full-time and 11 part-time.

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, 15 Health Visitors/School Nurses and 2 Student Health Visitors, making a total of 27.

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 medicosocial 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.

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 Child Health Centres and other Centres.

Statistics for year 1970

HOME VISITS Expectant Mothers										774
Children under 5 ye	ears									21,293
Adults (excluding ex	xpectan				ulosis)					21,000
Under 65										1,115
65 and over		***		***		***			***	8,203
Others				***						1,253
Total No. of effective	ro wieite	made	by He	alth Vie	itare/S	chool N	Turcoc			32,638
Total Ivo. of effective	C VISIL	made	by 11c	MILLI VIS	situis o	CHOOL I	VUISUS	***	***	32,030

Sessions attended by Health Visitors and Nurses									
a) Local Health Authority									
Child Health Centres							1,212		
Miscellaneous							395		
Mothercraft					****		88		
B.C.G. and Heaf Testing							56		
Mothers Evening Clubs							42		
Hearing Tests							15		
Cytology at Health Departs	ment						8		
b) Hospitals									
Geriatric							183		
Paediatric							95		
Venereal Diseases							21		
Ante-Natal							3		
c) General Practitioners									
C Di C							150		
G.P's Cytology—at Child I							23		
							2 2		
CIA S CYLUIUEV - SUIECIV	***					***	2		

		D 1 66 1				
No.	No. positive	Results of further investigation				
of	to screening	Phenylketonuria	Phenylketonuria			
Tests	Tests	confirmed	not confirmed			
1038	None	None	None			

HOME NURSING

The staff of the Home Nursing Service at the end of the year was a Deputy Superintendent, 19 State Registered Nurses, 5 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.

Statistics for year 1970

Total no. of new patients visited during the year (i.e.	patien	ts who	have	
not been previously visited this year)				2,785
No. of patients who were aged:				
under 5 years at time of first visit this year				35
over 65 years at time of first visit this year				1,869
Total no. of visits made by nurses during the year				74,232

Injection Clinics 1970

	Local	Authority I	Premises	Doctors' Surgeries			
	Hoghton Street	Lincoln House Child Health Centre	Hampton Road Child Health Centre	66 Station Road	2 Leaming- ton Road	2 Leicester Street	
No. Clinics	102	16	22	50	152	33	
No. of attendances made by patients	2222	42	83	95	697	161	
Average No. of patients attending per Clinic Session	21.8	3	3.8	2	4.5	4.9	

GENERAL PRACTITIONER ATTACHMENT

Following the recommendation of the Department of Health and Social Security, the schemes for a closer working relationship between Health Visitors, District Nurses and General Practitioners are continuing to expand.

Health Visiting

Four Health Visitors, whilst retaining their geographical areas, are working within Group Practices.

Their duties include:-

- (a) Home visits.
- (b) Child Health Clinics at the Surgery.
- (c) Cytology Clinics.

Home Nursing

Four District Nurses are attached to four groups of General Practitioners but do not retain geographical areas.

Their duties include:-

- (a) Home Nursing.
- (b) Injection Clinics.

Midwives

The three Domiciliary Midwives having again less bookings were mainly concerned with Maternity Nursing cases and Ante-Natal Clinics within Group Practices.

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 "reinforcing" injections to maintain immunity throughout school life.

In addition to the work done by the General Medical Practitioners, children are also protected in this way at the Child Health Centres.

Vaccination against measles was introduced during 1968. This should eventually make a big contribution towards the prevention of disease in children. Up to the present time its acceptance by parents has not been such as to make possible the eradication of this disease from the community.

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)	
	Diphtheria / Tetanus / Whooping Cough and oral Polio Vaccine (Second Dose)	Preferably after an interval of 6-8 weeks
	Diphtheria / Tetanus / Whooping Cough and oral Polio Vaccine (Third Dose)	Preferably after an interval of six months.
During the second year of life	Measles vaccination Smallpox vaccination	After an interval of not less than 3-4 weeks. 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 ag the School Health Service).	ainst tuberculosis arranged by
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.

VACCINATION AND IMMUNISATION

Statistics for year 1970

Smallpox

Amat	Vaccinated (o	aged under 16 r revaccinated period)	Number of cases specially reported during period					
Age at date of Vaccination	Number vaccinated	Number revaccinated	Generalised Vaccinia	Post-Vaccinal Encephalo- myelitis	Death from other complications of vaccination			
0-3 months	_	_	_	-	_			
3-6 months	_	_	_	_	_			
6-9 months	3	_	_	-	_			
9-12 months	10	_ 77	_	-	_			
1	392	1	_	-	-			
2-4	114	13	-	-				
5-15	30	64			_			
Totals	549	78	_	_				

Diphtheria, Whooping Cough, Tetanus, Poliomyelitis, Measles and German Measles

Т	be of vaccine or dose		Y	ear of bir	th		Others	Total
1 1/1	be of vaccine of dose	1970	1969	1968	1967	1963-66	under age 16	under age 16
1 2	Quadruple:— Diphtheria, Whooping Cough, Tetanus and Poliomyelitis	_	-		-		_	_
3	Tetanus Diphtheria/Whooping Cough	31	630	164 —	3	10	-	838
4 5 6	Diphtheria/Tetanus Diphtheria Whooping Cough	Ξ	<u>-</u> 1		_1	5	8	16 -
7 8 9 10	Tetanus Salk (Poliomyelitis) Sabin (ditto Oral) Measles	_ 18 2	- 609 308				5 — 10 14	5 886 790
11 12 13	Lines 1+2+3+4+5 (Diphtheria) Lines 1+2+3+6 (Whooping cough) Lines 1+2+4+7 (Tetanus)	31 31 31	630 631 630	166 164 166	4 3	15 10	8 -	854 839
14	Lines 1+8+9 (Polio)	18	609	207	4 18	15 24	13 10	859 886
	German Measles	_	_	_		_	212	212

Reinforcing Doses

7	ype of vaccine or dose -		Y		Others	Total		
	ype of vaccine of dose -	1970 1969		1968 1967		1966	under age 16	under age 16
2 3	Quadruple:—Diphtheria Whooping Cough, Tet- anus and Poliomyelitis Triple:— Diphtheria, Whooping Cough and Tetanus	_	2 -	_ 	6		_ 16 _	348
4 5 6	Diphtheria/Tetanus Diphtheria Whooping Cough	Ξ	Ξ			388	51 —	443 —
7 8 9	Tetanus Salk (Poliomyelitis) Sabin (Poliomyelitis— Oral)	=	=			2 - 726	4 206	6 — 945
10 11 12 13	Lines 1+2+3+4+5 (Diphtheria) Lines 1+2+3+6 (Whooping cough) Lines 1+2+4+7 (Tetanus) Lines 1+8+9 (Polio)	-	2 2 2	27 25 27 6	8 6 8	687 299 689 726	67 16 71 206	791 348 797 945

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 1966 to 1970

	1966	1967	1968	1969	1970
No. of patients Other work	40,207 1,216	42,016 1,208	41,824 1,288	39,371 1,467	35,840 1,286
TOTALS	41,423	43,224	43,112	40,838	37,126
No. of miles	154,314	150,758	141,193	138,743	139,477

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 Blanket
Backrests Electric Page Turner
Bath Aids Elsan Closets

Bath Seats Enuresis Alarms
Beds—Cardiac Incontinence Pads and Liners

Beds—Hospital Helping Hands
Beds—Ripple 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

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 1970 nursing equipment was supplied to 1,001 patients.

Incontinence Pads

During 1970, 48,233 pads and 24,104 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 10/- 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,

Laundry Service for the Elderly

During the year 92 elderly persons were provided with a laundry service.

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 3/-d. per treatment; all other patients pay 5/- for treatments at the clinic at 44 Hoghton Street and 6/- 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 owing to inability to appoint a full-time chiropodist no patients were treated in their own homes during the year.

Statistics for years 1969 and 1970

	Year 1970	Year 1969
No. of clinics held	440 3,684	565 5,122
Average No. of treatments per clinic session	8.4	9.6
No. of treatments in patients' own homes	_	408

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 1970, 10 physically handicapped persons made 64 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 6/- per hour but this may be reduced or cancelled having regard to the financial circumstances of the person concerned.

During 1970, sickroom help was provided for 8 patients, as compared with 6 in the previous year. The number of hours worked by the helps during the year was 271.

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. This unit was closed in April, 1970 when the infectious disease work was transferred to Fazakerly Hospital.

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, 17 women and 2 men were sent to convalescent homes.

Cervical Cytology

During 1970, 8 Clinics were held by the Local Authority; 118 women attended and 115 smears were submitted for testing, all the results proving negative.

At the Family Planning Association's Clinic in Ash Street 1,486 smears were taken and of these, 2 were found to be positive.

Family Doctors sent 365 smears to the Department for transmission to Dr. C. J. Discombe, consultant pathologist, who arranges the necessary histological examination.

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 follows:—

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 7/0 per hour but this charge may be reduced or cancelled, where there is financial hardship.

Statistics for year 1970

		F	Help for per	rsons			
	aged 65 or	aged under 65 on first visit in 1970					Total hours
	over on first visit in 1970	Chronic sick and tuberculous	Mentally disordered	Maternity	Others	Total No. of cases	worked by helps during the year
Number of cases	830	77	3	14	60	984	109,750

No. of Stoff ampleyed at and of year	Whole	P	art time	Total Whole time
No. of Staff employed at end of year	time	No.	Whole time equivalent	
Home Helps	1	136	61 · 35	62.35
No. of visits to homes by Organiser during the No. of persons interviewed at office during the				1,322 877

MENTAL HEALTH SERVICE

I am indebted to Mr. F. Taylor, Senior Mental Welfare Officer, for the following report.

The staffing structure remains the same as that during the previous year. In July Mr. Taylor, having completed the course for the Certificate in Social Work, was successful in passing the final examination. On his return Mrs. S. M. Fowell, who had most ably directed the work of the section on a temporary basis, left the department on being appointed to a more senior post with the Lancashire County Council. Mr. Taylor was then appointed Senior Mental Welfare Officer. Mr. R. Michael was seconded to the Millbank College of Commerce, Liverpool, for full-time attendance on the two year course for the Certificate in Social Work. Mr. A. Barnes was appointed Mental Welfare Officer.

Dr. G. S. Cadogan, the Area Consultant Psychiatrist, has continued his most valuable help in dealing with mentally ill patients and Dr. Howie has continued to provide after-care services at the clinic for the mentally ill.

The craft sessions, industrial therapy and social club, have made full use of the former Nurses' Home (No. 52 Hoghton Street) for their sessions and the social club programmes seem to have been more varied than previously.

Springbrook

The junior home continues to meet a vital need and the demand for vacancies which continues to increase, indicates that consideration will need to be given for the provision of more extended facilities of this type. During the summer period short term care was provided for ten cases.

Brookdale

This home for psycho-geriatric cases is continuously full to capacity and there is always a waiting list. Staffing problems have continued but the quality of care remains high.

The Meadows

The pleasant and happy atmosphere in this home has continued. This has undoubtedly been attributable in some measure to the efforts of the staff. There are 18 residents and it is hoped that they will eventually become sufficiently trained to take their place in the community. Holidays were once again taken at Butlins Holiday Camp at Pwllheli and everyone had an enjoyable time; the weather was fortunately excellent.

Mental Illness

Statistics for Year 1970

	Males	Females	Total
Patients:			
No. of admissions and re-admissions to hospital			
(Mental Health Act, 1959):			
— as informal patients (Sec. 5)	61	97	158
— for observation (Sec. 25)	40	68	108
— for treatment (Sec. 26)	2	4	6
emergency application (Sec. 29)	32	19	51
— by court order (Sec. 60)	-	1	1
Total no. of admissions and re-admissions	135	189	324
No. of patients already in hospital under compulsory de-			
tention accented as informal natients	32	48	80
tention accepted as informal patients No. of patients transferred from the Ormskirk & Dis-	32	40	00
trict General Hospital to other hospitals		1	1
No. of day patients taken to Ormskirk & District		1	1
General Hospital		20	20
General Hospital No. of patients referred to Health Department reacute		20	20
mental illness	197	335	532
After-Care Clinic:			
No. of Consultant Psychiatrist's After-Care Clinics at		100000	
AA TToobean Course	2000		39
No. of patients seen at After-Care Clinics	29	202	231
140. of patients seen at After-Care Chines	29	202	251
Work done by Mental Welfare Officers:			
No. of home visits re acute mental illness	270	423	693
No. of domiciliary after-care visits	158	355	513
No. of visits to patients in hospital	53	174	227
No. of patients interviewed at the Office	271	197	468
No. of visits to the Psychiatric Clinic at the Southport			
Infirmary			111

Mental Illness

Occupational Therapy Work.

No. of patients			
No. on register at beginning of the year			40
No. added during the year			31
			71
No. deducted during the year			27
No. on register at end of the year			44
No. of Home Visits			63
Sessions			
Psychiatric Social Club and Outings			50
Craftwork—Lincoln House Centre			48
Craftwork—52 Hoghton Street			94
Industrial Therapy—52 Hoghton Street			151
Singing Group—52 Hoghton Street	***	***	53
Outings			7
Total No. of Sessions attended by Staff			403
No. of attendances made by patients			
Psychiatric Social Club and Outings			746
Craftwork—Lincoln House Centre			367
Craftwork—52 Hoghton Street			618
Industrial Therapy—52 Hoghton Street			1,118
Singing Group—52 Hoghton Street			654
Outings			120
Total No. of Attendances			3,623

Mental Subnormality

from the Local Education Authority under Sec. 57 Education Act, 1944 (amended) from other sources	1 11
Total	12
Number of patients admitted to hospital:— for permanent care for short term care	1 13
Total	14
Number of patients placed under Guardianship Work done by Mental Welfare Officers:	1
Number of patients seen at the Office Number of domiciliary visits	182 204
Number of visits to the Training and Industrial Centre and Residential Homes	165

Junior Training Centre (Sandbrook School)

Number on Register at beginning of year Number added to Register during year		 	:::	41 5
Number taken off Register during year		 		46 6
Number on Register at end of year		 		40
Number of sessions held during period Number of attendances at Centre during Average attendance per session	g peri			197 6505 33

Adult Training and Industrial Centre

Number of cases on Register at beginning of year Number of cases added to Register during year	 	40 10
Number of cases taken off Register during year		50 6
Number of cases on Register at end of year	 	44
Number of sessions held during period Number of attendances at Centre during period Average attendance per session	 	229 7903 34·5

Occupational Therapy

During the year one home visit was made to a mentally subnormal person. In addition to the home visit, mentally subnormal persons attended the following:—

Psychiatric Social Club and outings	 	74
Craftwork Session—Hoghton Street	 	63
—Lincoln House	 	18
Industrial Therapy—44 Hoghton Street	 	_
Singing Group—52 Hoghton Street	 	92
Total attendances	 	247

Social Club for Mentally Subnormal Adults

The evening social club continued with great success and 22 meetings were held during 1970 with 512 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 1970

		Ments	Mentally III			Psych	Psychopathic			Subnormal	rmal		Sev	rerely S	Severely Subnormal	la	
Referred by	Under Age 1	Age 16	6 16 and	Over	Under	Under Age 16	16 and Over	Over	Under	Under Age 16	16 and	Over	Under	Under Age 16	16 and Over	Over	Total
	W	F	M	H	W	H	M	F	M	H	M	H	M	H	W	F	
General Practitioners	1	2	98	177	1	1	1	ı	1	1	ı	1	-	1	3	-	272
Hospitals, on discharge from in-patient treat- ment	-1	1	125	172	1	1	62	-	1	1	1	- 1	1	- 1	1	1	300
Hospitals, after or during out-patient or day treatment	- 1	1	28	41	- 1	1	1	- 1	- 1	1	1	- 1	- 1	- 1	- 1	1	69
Local education authorities	1	1	1	1	1	1	1	1	1	ı	1	1	1	1	1	1	1
Police and courts	1	1	25	20	1	1	1	1	1	1	ı	1	1	1	1	1	45
Other sources	1	1	58	106	1	1	1	1	1	1	3	4	4	2	8	1	186
Total	1	2	322	516	1	1	2	1	1	1	3	4	10	3	111	1	872

Summary of Patients under Local Health Authority Care at 31st December, 1970. MENTAL HEALTH SERVICE

		Mentally III	lly III		Elderly	rly		Psychopathic	pathic			Subnormal	rmal		Sev	Severely	Subnormal	nal	
	Under,	Under Age 16 16 and Over	16 and	Over	Infirm		Under Age 16	Age 16	16 and Over	-	Under Age 16	\ge 16	16 and Over	-	Under Age 16	1ge 16	16 and Over	Over	Total
	M	F	M	F	M	F	W	il.	W	н	M	H	M	H	M	H	M	H	
Total number	1	1	54	114	-	43	1	1	1	1	8	2	23	32	22	00	17	18	342
Attending workshops, day centres, or training centres (including special units)	1	1	1	12	1	1	1	1	1	ı	œ	13	7	œ	21	œ	15	14	95
Awaiting entry to workshops, day centres or training centres (including special units)	1	1	1	1	1	1	1	1	1	1	1	ī	1	1	1	1	1	1	1
Receiving home training	1	1	1	1	1	ı	1	1	1	1	1	1	1	1	1	1	1	ı	-
Awaiting home training	1	1	1	ı	1	ı	1.	1	1	1	1	1	1	1	1	1	1	1	1
Resident in L.A. home/hostel	1	1	1	1	1	30	1	1	1	1	1	1	1	1	1	1	1	1	30
Awaiting residence in L.A. home/hostel	1	1	1	1	-	13	ī	ı	1	ı	1	1	1	1	1	1	1	-	15
Resident in other home/hostel	1	1	1	1	1	1	1	1	1	ı	1	1	1	1	1	1	-	1	cı
Boarded out in private household	1	1	1	1	1	1	1	1	1	1	1	1	1	L	1	1	1	ı	1
Attending day hospital	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Receiving home (a) Suitable to attend a visits and not training centre included in above (b) others	11	11	54	18	11	11	11	11	11	П	11	11	16	24	1-	11	1-	1 €	197

Admissions to Guardianship of Local Health Authority or other Guardian during 1970 MENTAL HEALTH SERVICE

		4	Mentally III	lly III			Psychopathic	pathic			Subnormal	rmal		Sev	Severely Subnormal	abnorma	7			. (
	Guardian	Under	Under Age 16 16 and Over Under Age 16 16 and Over	16 and	Over	Under	Age 16	16 and		Under Age 16 16 and Over	Age 16	16 and	Over	Under	Under Age 16 16 and Over	16 and	Over	Total subnormal and severely subnormal		Grand
	Com man	M	Н	M	H	M	H	W	н	M	H	M	H	M	H	M	H	Under Age 16 16 and Over	16 and Over	
Admissions so	L.H.A.	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	-	1
guardianship	Other	1	1	1	1	1	1	1	1	I	1	1	1	1	1	1	1	-	1	1
year	Total	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Total number under guard-	L.H.A.	1	1	1	1	1	ı	1	1	1	1	1	1	1	-	1	1	1	1	1
end of year	Other	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	-	1
	Total	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	-	1	1

Number of patients awaiting entry to hospital, or admitted for temporary residential care at 31st December, 1970

		Menta	Mentally III		Elderly	rrly		Psychopathic	pathic			Subnormal	mal	-	Severely Subnormal	y Sub	normal	-
	Under	Under Age 16 16 and Over	16 and	Over	Infirm	rm	Under	Under Age 16	16 and	Over	Jnder A	gc 16	16 and Over Under Age 16 16 and Over		Under Age 16 16 and Over	16 16	and Ov	er Total
	M	F	M	F	M	F	M	H	M	H	W	E	M	H	M F		M	LL.
In urgent need of hospital care	1	1	1	1	1	2	1	1	ı	1	1	1	1	1	2	-		1.
Not in urgent need of hospital care	1	1	I	1	1	11	1	1	1	1	1	1	1	1			2	- 13
Total	1	1	1	1	-	13	1	1	1	1	1	1	1	1	2	1.	2	18
Number of admissions for temporary residential care (e.g. to relieve the family). To N.H.S. hospitals	1	1	1	1	1	9	1	1	1	1	1	-	64	61	8	'		- 15
To L.A. residential accommodation	1	1	1	1	1	1	1	1	1	1	1	1	-	2	4 2	2	1	6
Elsewhere	1	1	1	1	1	1	1	1	1	1	1	1	1	1			1	
Total	1	1	ı	1	1	9	1	1	1	1	1	1	3	44	7	3	-	- 25

MENTAL HEALTH SERVICE

Premises provided at 31st December, 1970

Workshops or occupational centres for the mentally ill

Number of premises and places provided	Premises Places	2 30
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Training centres for the subnormal or severely Subnormal (including special units)

Aga group provided for	Number	Places			
Age group provided for	Premises	Junior	Adult		
Under 16		35	-		
16 and over	1	_	40		

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

Cassial Tinita within turining control	Premises	1
Special Units within training centres	Places	8
Salf annia dunia indunudant of the in-	Premises	-
Self contained units independent of training centres	Places	_

Places made available to or by other authorities or organisations

	Type of authority or organi-	Places in workshops or occupa- tional	Places in centres sub-nor seve subno	Places in special units for the severely	
		centres for the men- tally ill	Junior	Adult	subnormal
Places made available to other autho-	L.A.	_	-	1	_
rities or to hospitals included in preceding tables	Hospital	_	-	_	_
	Total	_	_	1	_
Places made available to the authority	L.A.	_	_	_	_
by other authorities or organisations (not included in preceding tables)	Hospital	_	-	-	_
	Other org- anisations	_	_	_	_
	Total	-	-	_	_

Home and hostels

	For the m	entally ill	For the subnormal or severely subnorma				
Age group provided for	Number of	Number of	Number of -	Number of places			
Under 16	premises	places	premises	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		
Number of premises and places provided	Places	30		

Places in homes/hostels made available to or by other authorities or organisations

	Hospital Total Local authority Hospital	For the	For the elderly	For the subnormal of severely subnormal		
	organisation	mentally ill	mentally infirm	Junior	Adult	
Plana mada amilabla ta	Local authority		_	_	_	
Places made available to other authorities or to hospitals.	Hospital	_	_	_	_	
	Total	_	_	_	_	
Diago mado quellable to	Local authority	2	_	_	_	
Places made available to the authority by other	Hospital		_	_	_	
authorities or organisa- tions.	Other organisations	2	_	_	4	
	Total	4	_	_	4	



Section III

CONTROL OF INFECTIOUS DISEASE

TUBERCULOSIS

New Cases and Mortality

The number of new cases of tuberculosis which came to the notice of the Department during the year was 19; of these 17 were found to be suffering from pulmonary disease, and 2 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 19 new cases came to the notice of the Clinic in the following ways:-

By primary notifications	 			 	 13
By transfers from other areas	 			 	 6
Lost sight of cases returned	 			 	 _
		T	OTAL	 	 19

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 1970 was 110, and 7 of these patients were found to have sputum containing tubercle bacilli. During the year, 48 treatment clinics were held and 170 visits were made by patients.

Statistics for Year 1970

		No. of No	ew Patient	s	No. of Deaths					
Age Periods (in years)	Pulm M.	onary F.		on- onary F.	Pulm M.	onary F.	Non- Pulmonary M. F			
0 to 1	1	_	_	_	_	_	_			
2 to 5	1		_	_	_			-		
6 to 15	1	1	_	_	-	_		_		
16 to 25	2	1	1	-	_	-	_	-		
26 to 45	3	1	_	_	_	_		_		
46 to 65	5	_		-	1	_	_	-		
66 to 75	1	_	1	-	_	_	_	-		
76 and over	-	-	-	-	-	-	-	_		
TOTALS	14	3	2	_	1	_	_	_		

Statistics for Years 1961 to 1970

			No. of N	lew Patients	No. of Deaths			
1	ear		Respiratory	Non-Respiratory	Respiratory	Non-Respiratory		
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	_	_		
1969			12	4	-	_		
1970			17	2	1	-		

Contacts

During the year 184 attendances were made by contacts of patients; the total number of X-ray examinations of contacts was 140. No contacts were found to be suffering from tuberculosis in 1970.

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	otal Vis	sits		 	379
To other chest patients	 				 	7
To contacts of tubercule	tients			***	 	187
To tuberculous patients					 	185

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 1970, the Health Visitor made 86 attendances at the tuberculosis clinics.

Immigration

25 immigrants coming to live in Southport were notified to by Port Health Authorities.

All these were successfully visited by the Tuberculosis Health Visitor, who arranged for them to have chest X-rays, where necessary, and advised them regarding health matters generally.

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 1970 the Care Committee provided considerable financial and other assist-

ance to patients and their families.

Mass Miniature Radiography Unit

The unit visited Southport in September for the purpose of X-raying Health Service and Corporation Staffs only, having discontinued surveys for members of the general public.

B.C.G. Vaccination against Tuberculosis
Statistics for Years 1961 to 1970

Year	1961	1962	1963	1964	1965	1966	1967	1968	1969	1970
No. Vaccinated: At. B.C.G. Clinics	36	34	35	28	23	30	27	26	8	22
Babies seen by the Consultant Paedia- trician	28	32	20	37	18	14	15	17	20	19
School Children	787	872	716	728	710	739	749	727	803	774
TOTALS	851	938	771	793	751	783	791	770	831	815

TUBERCULOSIS
Treatment Clinic—Statistics for years 1966 to 1970

	Total	105	13	124	140	-	4	14	110	13	11	19
1970	Non- Pul.	12		14	4	1	1	4	10		11	2
	Pul.	93	12 5	110	4 1	1	4	10	100	12 5	11	17
	Total	113	11 4	129	20 2	1	2	24	105	11 4	1-	16
1969	Non- Pul.	10	6	12	111	1	1	1	12	6	11	2
	Pul.	103	9 4 1	117	202	1	2	24	93	0.4	1-	14
	Total	118	061	130	140	1	7	17	113	9.6	11	12
1968	Non- Pul.	7	611	10	111	1	1		10	w	11	3
	Pul.	1111	98	120	140	1	7	17	103	9.6	11	6
	Total	135	17	159	1 4 4 27	1	00	41	118	71	11	24
1961	Non- Pul.	14	5	19	110	1	1	12	7	10	11	5
	Pul.	121	12	140	1 3 18	1	7	29	1111	12	11	19
	Total	184	15	206	94	9	5	71	135	15	1.1	22
1966	Non- Pul.	12	0	14	111	1	1	1	14	41	11	2
	Pul.	172	13	192	9 48	9	5	7.1	121	13	11	20
		1. No. of patients on register at beginning of year 2. No. of patients added during the year:	(a) primary notifications of new cases (b) transfers from other areas (c) lost sight of cases returned	Totals (1)	Sant .	(d) lost signt of or refused further assistance	(e) tuberculosis not primary cause of death	TOTALS (2)	4. No. of patients on register at the end of year (i.e., totals (1), less totals (2)	5. Summary of new patients found during the year: (a) Primary notifications of new cases (b) Transfers from other areas (c) Patients found from death re-	turns (ngures not included in items (1) to (4) above) (d) Lost sight of cases returned	TOTALS

VENEREAL DISEASES

At the end of the year, 132 new cases were under treatment at the clinic, as compared with 128 cases at the end of 1969. During 1970, non-venereal cases made 600 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 1970

No. of new Patients	Male	Female	Total	
Syphilis		2 28 118	2 35 97	4 63 215
	Totals	148	134	282

Statistics for Years 1961 to 1970

			Syph	ILIS			Gonorrhoe	4
YEAR	Number during	of new o		Number of cases on	number of		Number of cases on register	Total No. of attendance
	Congenital	Others	Total	register at end of year	attendances during year	during the year	at end of year	during year
1961	1	9	10	46	867	15	3	83
1962	_	5	5	47	922	15	6	71
1963	-	4	4	50	1105	16	8	117
1964	1	3	4	45	611	27	7	143
1965	1	1	2 3	42	263	22	13	110
1966	-	3	3	32	148	14	2 7	72
1967	_	7	7	28	113	13		50
1968	_	-	-	23	94	27	15	117
1969 1970	_	2 4	2	23 16	55 107	49 63	31 45	156 286

INFECTIOUS DISEASES

Statistics for year 1970

		N		OF CAGES IN				
Notifiable Disease	At All Ages	Un- der 1	1 to 5	5 to 15	15 to 25	25 to 45	45 to 65	65 Up- ward
Dysentery	-	_	-	_	_	-	_	_
Encephalitis	-	-	-	-	-	-	-	-
Erysipelas	-	-	-	-	-	-	-	-
Food Poisoning	6	-	-	2	-	3	1	-
Measles	108	13	62	30	3	-	_	_
Malaria	2	-	-	-	_	2	-	-
Meningococcal Infection	-	-	-	-	-	_	- /	-
Paratyphoid Fever	-	-	-	-	-	_	-	-
Poliomyelitis	1	-	-	-	-	1	-	-
Puerperal Pyrexia	-	-	-	-	-	_	-	-
Scarlet Fever	10	-	4	6	-	-	_	-
Tuberculosis	12		1	3	3	1	4	-
Whooping Cough	11	-	7	3	_	1	-	_
Infective Jaundice	20	-	2	6	3	6	2	1
Totals	170	13	76	50	9	14	7	

INFECTIOUS DISEASES

Number of Notified Cases and number of Deaths for the years 1961 to 1970

			NUMBE	R OF CA	SES OF	NFECTIO	NUMBER OF CASES OF INFECTIOUS DISEASE	INSE NO	NOTIFIED		-				DEATE	DEATHS FROM INFECTIOUS DISEASE	INFECT	TOUS D	ISEASE			
Notifiable Disease	1961	1962	1963	1964	1965	1966	1967	1968	1969	1970	Total Cases for 10 years 1961 to	1961	1962	1963	1964	1965	1966	1967	1968	1969	1970	Total Deaths during 10 years 1961 to 1970
Chicken Pox	445	269	333	926	258	999	587	376	267	1	5240	1	1	1	1	1	1	1	1	1	1	1
Diphtheria	1	1	1	1	1	1	1	1	1	1	ı	1	1	1	1	1	1	1	ı	1	1	1
Dysentery	26	69	4	2	18	3	11	1	63	1	173	1	1	1	1	1	1	1	1	1	1	1
Encephalitis	-	1	1	61	1	1	1	1	1	1	10	1	1	-1	1	1	1	1	1	1	1	1
Erysipelas	7	9	2	4	7	-	1	33	1	1	37	1	1	1	1	i	1	1	1	1	1	1
Food Poisoning	6	3	28	2	63	-	1	-	3	9	49	1	1	1	1	1	1	1	1	1	1	1
German Measles	231	2369	73	154	160	278	282	184	59	1	3790	1	1	1	1	1	1	1	1	1	1	1
Infective Jaundice	1	1	1	1	1	1	1	3	27	20	90	1	1	ı	1	1	1	1	ı	1	1	1
Malaria	1	1	1	1	1	1	1	1	1	2	61	1	1	1	1	1	!	1	1	1	1	1
Measles	1107	546	482	086	570	581	807	616	167	108	5867	1	1	1	1	1	1	1	1	1	1	1
Meningococcal Infect'n	-	-	73	-	1	1	1	1	1	1	10	1	1	1	1	1	1	1	1	1	1	1
Ophthalmia Neonatorum	1	1	1	1	1	- 1	1	1	1	1	1	1	1	1	1	, 1	1	- 1	1	1	-	1
Other Forms of Tuberculosis	-	6	-	2	1	2	10	1	=	1	26	1	-	-	-	1	-	1	1	1	1	61
Paratyphoid Fever	١	1	-	1	1	1	1	1	1	1	2	1	1	1	1	1	1	1	1	1	1	1
Pneumonia	17	32	7	10	6	14	80	1	1	1	97	29	99	88	47	99	16	82	66	95	144	829
Polioencephalitis	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Poliomyelitis	7	1	1	1	1	1	1	1	1	1	00	1	1	1	1	1	1	1	1	1	1	1
Puerperal Pyrexia	1	1	4	1	ı	73	1	1	1	1	7	1	1	1	1	1	1	1	1	1	1	1
uberculosis	31	27	23	10	10	13	12	6	1	12	147	4	4	10	7	60	4	1	1	1	1	34
Scarlet Fever	29	25	21	23	57	54	84	64	23	10	390	1	1	1	1	1	1	1	1	1	1	1
Smallpox	1	1	1	1	1	1	1	1	-1	1	1	1	1	1	1	1	1	1	1	1	1	1
Typhoid Fever	1	53	1	1	1	1	1	1	1	1	2	1	1	1	1	1	1	1	1	1	1	1
Typhus	1	ı	1	1	ı	1	1	1	1	1	1	ı	1	1	1	1	1	1	1	1	1	1
Whooping Cough	34	15	151	35	38	14	7.1	37	1	=	407	1	1	1	1	1	1	1	1	1	1	1
TOTALS	1940	3796	1132	2181	1126	1629	1868	1197	260	170 1	15599	71	102	66	55	59	95	83	93	95	145	865



Section IV

ADDITIONAL INFORMATION

ADDITIONAL INFORMATION

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.

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 Southport Council of Social Service continues to meet monthly at the Citizens Advice Bureau to assess the many applications received for help from the Southport Relief Society.

The objects of the charity are to apply the income arising in each year for the benefit of persons resident in the County Borough of Southport who, through physical or mental affliction or infirmity, are in need of financial assistance.

Many cases for help are referred by the Local Authority, this is a good example of liaison between voluntary and statutary services.

During the year patients have been admitted to Nursing Homes and Rest Homes for two-week periods, giving relatives the opportunity of a holiday. Money has been provided for coal and clothing. This year when the electricity cuts were in force, hot water bottles, vacuum flasks and blankets helped to meet the emergency.

Nurseries and Child Minders Regulation Act, 1948

In 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 thhe 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 1969 and 1970 is shown below:—

969 Year ended 1970 ces No. of places
119
165
73
255
357

Nursing Homes

At the end of the year there were 17 registered nursing homes in the area with a total of 247 beds.

The number of inspections made to nursing homes during the year was 82.

Nurses' Agencies

Any person who wishes to carry on an agency for the supply of nurses must be licensed in accordance with the requirements of the Nurses Act of 1943, and the Nurses Agencies Regulations of 1945, and reports showed that the single existing establishment was being conducted in a satisfactory manner.

Persons in need of Care and Attention

In 1970 four patients were removed to hospital under Section 47 of the National Assistance Act.

Two lived alone, and because of illness were unable to look after themselves. They were found to be living in extremely poor unsanitary conditions and had no known relatives.

In both cases they had refused attempts by the General Practitioner to admit them to hospital in the usual manner.

The other two ladies lived at the same address and had been known to the Health Department for at least two years. Support had been given during this period by the District Nursing and Home Help Services. Due to deterioration in their conditions, however, they were unable to cope and were found to be presenting a fire risk.

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, Fri-	2 to 4 p.m., 10-12
North Bood Crosses	days Wednesdays	noon.
North Road, Crossens Lincoln Road, Birkdale	 Tuesdays and	2 to 4 p.m. 2 to 4 p.m.
Zincom Road, Diredate	 Thursdays	2 to 1 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:—		
Christiana Hartley Maternity Hospital	 Tuesday	1.30 p.m. to 3 p.m.
Officialia Tartie, material, Trospital	 Friday	9.30 a.m. to 11 a.m
	Saturday	9.30 a.m. to 11 a.m
POST-NATAL CLINIC:—		
Christiana Hartley Maternity Hospital	 Tuesdays	9.30 a.m. to 11 a.m
TUBERCULOSIS CLINIC:—		
Southport Infirmary	 Mondays	2 to 4.30 p.m.
outside the second of the seco	 Thursdays	9 to 11 a.m.
CHIROPODY CLINICS FOR THE ELDERLY:-		
44 Hoghton Street	 Mondays, Tues-	9 to 12.0 noon
	days, Wednes-	2 to 4 p.m.
MENTAL HEALTH AFTER-CARE CLINIC:-	days, Thursdays	
44/46 Hoghton Street	 Tuesdays	2 to 5 p.m.
Tij to Trogitton Otteet	 1 desdays	a to 5 pinns
VACCINATION AND IMMUNISATION CLINIC:-		
2 Church Street	 Arranged as	2 to 4 p.m.
D C	necessary	
PHYSIOTHERAPY CLINIC:— 44 Hoghton Street	Thursdays	2 to 4 p.m.
Ainsdale Child Health Centre	 Tuesdays and	2 to 5 p.m.
misuale office freath office	 Thursdays	a to 5 pinn

Medical Examinations

The following table shows the work done by the medical staff of the department during 1970 in regard to the medical examination of employees for the purpose of the Superannuation and Sickness Pay Schemes.

	Numb	ER OF MEDI	CAL EXAMINA	TIONS
Department	Super- annuation Scheme	Sickness Pay Scheme	Re- Examina- tions	Total
Borough Treasurer Children's Education Estates and Baths Fire Service Flower Show Health Libraries Lighting Police Publicity Parks and Cemeteries Town Clerk's Transport Water Board. Weights and Measures	5 4 15 6 113 6 7 7 7 1 1		23 29 29 1 1 4 4 2	5 87 15 6 127 1 36
OTHER AUTHORITIES:— Electricity		_	-	
Totals	217	235	63	515

In addition, 117 examinations prior to entry to a Teacher's Training College, were made in 1970.

The Motor Vehicles (Driving Licences) Regulations 1970

The epilepsy and driving Regulation came into force on 1st June, 1970, as a result of a Ministry of Transport Circular.

In accordance with this new Regulation 10 persons suffering from epilepsey were seen by the Medical Officer of Health during 1970, who recommended that a driving license be issued in 9 of these cases.

Crematorium

The Medical Officer of Health continued to act as Medical Referee and the Deputy Medical Officer of Health carried out the duties of Deputy Medical Referee.

The number of certificates required in 1970 was 1317.

Work done on behalf of the Children's Committee

During the year, 170 examinations were carried out on behalf of the Children's Committee, the details being as follow:

Examination of children who are board	ied-out	in fost	er hom	es	 155
Admissions to Children's Homes					 13
Discharges from Children's Homes					 2

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 1970/71 subject to review at the end of that time.

During 1970, Southport residents made a total of 3,066 visits to the clinic and there were 715 new clients during this period.

The arrangements with the Voluntary Association appear to be working very satisfactorily.

Marie Curie Memorial Foundation

The aims of the Foundation cover all aspects of the problems associated with cancer. Appreciation of the services provided is seen by donations received locally and forwarded to the Foundation.

Marie Curie Day and Night Nursing Service

This is a voluntary service administered by the Local Authority acting as the Foundation's agents and enables patients of all ages with cancer to be nursed in their own homes. During the year more use has been made of the Day Service and the demand continues for Night Nursing. Help is given for two to three nights weekly.

Welfare Scheme of the Marie Curie Memorial Foundation

This scheme is operated exclusively for the benefit of patients suffering from cancer:—

Help is available for the admission of a patient to one of the Residential Homes and for assistance through the Area Welfare Grant Scheme.

Assistance is given "in kind" and it covers provision of special equipment, linen and bedding, extra nourishment, extra fuel and many miscellaneous needs.

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, 30th April, 1970

									arts per Million
Total solid n	natter i	n solu	ition				 	 	332
Oxygen abso		}		ninutes			 	 	0.12
from Perm	iangana	ne J	in 3 ho	ours			 	 	0.28
Ammonia							 	 	Nil
Albuminoid	Ammo	nia					 	 	0.005
Nitrogen as	Nitrate	S					 	 	0.04
Nitrogen as	Nitrites	· · · ·					 	 	Nil
Combined C	hlorine						 	 	33
Free Chlorin	ie						 	 	Nil
Lead							 	 	Nil
Copper							 	 	Nil
Zinc							 	 	Nil
Total Iron							 	 	0.02
Carbonate H	lardnes	s (as	Calcium	Carbon	nate)		 	 	120
Total Hardn	ess (as	Calci	um Car	bonate)			 	 	222
				(-II		7 2)			

(pH. value: 7.3)

Bacteriological Examination, 30th April, 1970

Faecal Coli per 100 ml. in water examined			 	 Nil
Total coliform organisms per 100 ml. in water	 	 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	29,159	83,000
Water supply from sources other than specified above	Nil	Nil
Totals	29,159	83,000

PUBLIC BATHS

Sea Bathing Lake, Marine Drive.

The attendance during the year was:—		
At the turnstiles	 	 185,600
Contracts sold (Adults and children)	 	 546
Plus children under 5 years of age.		

Improvements continued during the year, both to raise the standard of the bathing water and of the dressing accommodation. Priority was given to the need to be able to increase the chlorine dosage at peak periods of bathing and to the desirability of having the filtration and chlorination plant running over-night, when necessary. A new, portable suction cleaner was obtained for cleaning the bottom-centre of the pool. Additional steps were taken to combat the incidence of verrucae. Artificial lighting was improved and new fittings provided in the dressing and sanitary accommodation. Difficulty was experienced with the growth of a type of algae which can survive the maximum amount of chlorine which can safely be added to bath water. A specific algicide is to be added in future.

Victoria Baths, Promenade.

The attendance during the year Adult and Junior public a	dmission	ns				202,787
Scholars under instruction	n from	South	port,	Lanca	shire	
County and Private Sch						56,046
Southport Swimming Clu						11,113
Galas, etc						11,113
Spectators (excluding onlo	okers at	galas)				40,425
Private Baths						12,686
Turkish Baths						7,025

		Satisfactory	Unsatisfactory	Totals
Victoria Baths	Chemical Samples	3	_	3
	Bacteriological Samples	3	_	3
Sea Bathing Lake	Chemical Samples	3	_	3
	Bacteriological Samples	3	_	3

Chemical Sample of Bathing Water taken at the Victoria Baths on 19th May, 1970

Appearance			•••			Clear and bright. Colourless. Very minute trace of floccu- lent matter. Faint odour of chlorine.
pH. Value						6.9
Nitrite						Nil
Free Ammonia	a, parts	s per mil	lion			0.008
Free Residual	-	-		million		0.10
Total Residua Chlorami	l Chlo	orine (Fi	ree Cl	nlorine	plus 	0.26
		R	esult-	-Satisfa	ctory	

Chemical Sample of Bathing Water taken at the Sea Bathing Lake on 1st July, 1970

Appearance	•••	•••				Clear and bright. Colourless. Minute trace of flocculent matter. Odour of chlorine.
pH. Value						7.2
Nitrite						Nil
Free Ammoni	a parts	per 1	million			0.006
Free Residual	Chlori	ne, par	ts per n	nillion		1.36
Total Residua Chlorami					plus	1.43
		J	Result-	-Satisfa	actory	

Bacteriological Examination of Bathing Water at the Sea Bathing Lake on 1st July, 1970

Coliform bacilli	Bact. coli (type 1)	PLATE COUNT Organisms per ml.
0	0	0

Bacteriological Examination of Bathing Water at Victoria Baths taken on 1st July, 1970

Probable number	PLATE COUNT	
Coliform bacilli	Bact. coli (type 1)	Organisms per ml.
0	0	0

ATTENDANCES 1966 to 1970

	Indoor	OPEN AIR
Year	Victoria Baths (Opened 1836) (Remodelled 1926)	Bathing Lake (Opened 1928)
1966	325,591	154,791
1967	351,683	182,367
1968	338,582	211,028
1969	338,413	222,807
1970	351,699	185,600

The indoor Victoria Baths on the Promenade are now 134 years old and have been described as "Victorian and obsolete". During the year a special committee was formed to investigate and report to the Town Council on the question of providing new indoor swimming baths, together with an indoor sports centre.

SANITARY INSPECTION OF THE AREA

Land Charge Enquiries—Information has been supplied during the year on 1,970 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 is one of the very small number of seaside towns that give their sewage full treatment before discharging it into the sea.

There is a growing problem with regard to sludge disposal as there is much less demand for this by local farmers.

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

1970 being European Conservation Year, it was decided to carry out a spot-check on the condition of the sea off Southport. A number of samples of sea water were taken at different points and at various stages of the tide, together with a small number of samples of sand from the beach. These were submitted for chemical analysis and bacteriological examination and the results gave no cause for alarm. Indeed, the Director of the Public Health Laboratory at Preston commented that "the bacteriological results are first class (considering the Mersey and the Ribble) and compare most favourably with many other beaches in the country". Despite these favourable reports, by the end of the year adverse comment regarding the condition of the sea and the beach was beginning to appear in the local Press.

Drainage—Drain stoppages are now dealt with by the Borough Engineer's Department for which a charge of £2 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 11 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.

In the past, the Public Health Inspectors' Section has endeavoured to help house-holders who have a heavy infestation of ants, but a long, hot, dry spell during May and June brought such a flood of requests for help that the Section was unable to cope and applicants had to be advised on how to tackle this problem themselves. Any of the modern insecticides will kill, by direct contact, the ants who are abroad and visible but this is rarely sufficient. Far more effective is a poison which the ants will carry back to the nest, thereby destroying the queen. If the nest can be found by "tracking" the ants, paraffin or boiling water will put an end to the trouble.

Suspicion has grown that mice in the Borough are developing resistance to Warfarin.

Without reducing the continual work in Lord Street, the control of feral pigeons has been extended to help the occupiers of private property in all parts of the town. This task has proved to be more difficult than was anticipated, and the lack of any obvious sign of reduction in numbers has been disappointing. Private premises which have been completely cleared of pigeons have rapidly become re-infested. Various methods of extermination have been tried and it has become increasingly obvious that, in many cases, shooting is the only practical method. Experiments in shooting have aroused a certain amount of animosity from a small minority of the public but, on the whole, there is evidence that the public are gradually becoming aware of the filth and damage caused by these birds, and are beginning to accept the need for controlling the numbers.

Caravans

Number of licensed sites for holiday caravans	s	 	 	 4
Total number of caravans permitted		 	 	 113

Two of these sites are in use.

In addition to these licensed sites, the year under review saw the commencement of something which had long been desired in Southport, namely the provision of a first-class site for touring caravans. This new site is situated on local authority land on the landward side of the Esplanade and is provided and managed by The Caravan Club Ltd. It will cater only for touring caravans owned by members of the Caravan Club.

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.

During the year 231 bodies were received at the mortuary and, of these, 209 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	8	15
Factories where motive power is employed	342	243
Outworkers employed in finishing of wearing apparel	4	_
No. of building sites inspected	35	24

Prevention of Damage by Pests Act, 1949

Work done during year 1970

		Type of P	roperty
		Non Agricultural	Agricultural
Number of Properties in District		34,396	29
Fotal Number of Properties Inspecte Notification	d following	616	4
Number Infested by (i) Rats		205	4
(ii) Mice		411	_
Number of Properties Inspected Reasons	for other	758	25
Number Infested by (i) Rats		366	25
(ii) Mice		384	3

The work involved in dealing with the above mentioned properties resulted in 1,160 visits being made by the Rodent Officer and Public Health Inspectors.

Every infestation was dealt with, or supervised by members of the staff of the department, and all re-infestations treated similarly.

PUBLIC HEALTH INSPECTORS

Summary of Complaints and Visits made during year 1970:-

N	uisa	nces					
COMPLAINTS INVESTIGATED—							
Choked and defective drai	ns						92
Housing defects							196
Ditches and watercourses							14
Smoke emission							26
Noise							69
Other nuisances							1,569
		Total N	o. of co	omplair	nts		1,966
ACTION TAKEN: Notices served a					pated:		
Served Preliminary,			Statuto				
Abated Preliminary,	232		Statuto	ory, 52			
VISITS—							
To Premises:							
							5 913
Dwellinghouses							5,813
Shops							2,263
Offices			•••			•••	158
Factories and workshops			• • • •	•••			282
Dairies							130
Food preparing premises		***	***				1,949
Ice Cream premises							80
Other premises	•••	• • • •		•••			3,082
		Total N	o. of V	isits			13,775
Regarding:							
Drainage							380
Conversion of closets							89
Ditches and watercourses							49
Rats, mice and other vern	nin						1,633
Pigeons							165
The Housing Acts							1,697
Rent Acts							47
Food Hygiene Regulation							3,525
Milk Regulations							157
		7.55					
Food							285

SAMPLES OBTAINED	FOR	BACTE	RIOLOG	ICAL E	XAMINA	TION-		
Milk								 226
Ice Cream								 22
Other Foods	;							 9
Water								 47
					o. of S	amples		 304
SAMPLES OBTAINED	FOR	Снемі	CAL A	NALYSIS	_			
Milk							***	 58
Ice Cream								
Other Food		***						 75
Water								 41
	-250						***	 3
Rag Flock, Rainwater &								10

	FINE	Cost
	FINE	(

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.

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

CLEAN AIR

There were 26 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.

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 unsatisfactory position regarding the supply of solid smokeless fuels caused a further postponement of two new Smoke Control Areas and also left the local authority with no choice but to request the Department of Environment to suspend the Smoke Control Order in force in respect of the existing Area, thereby enabling residents in the Area to burn raw, bituminous coal during the winter of 1970/71.

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 28,663.

The following table shows the number of houses built during the period 1961 to 1970, plus additional accommodation made available as a result of adaptations and additions to existing properties:

Year	1961	1962	1963	1964	1965	1966	1967	1968	1969	1970
Number of houses built	102	255	252	298	549	416	283	251	201	247

In addition 54 flats have been built.

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.

The public health inspectors have the responsibility of collecting statements of evidence in this connection and this work is increasing.

Overcrowding—The number of complaints regarding alleged overcrowding received during the year was 14. 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 1970 23 houses were represented to the Health Committee. The formal procedure prescribed by the Housing Acts, was commenced in respect of 23 houses.

The new Housing Act, 1969 considerably increased the size of scope of Improvement Grants, with the object of encouraging the owners of older houses to prolong the life of the houses by carrying out repairs and improvements. The Act also makes it possible for landlords to obtain a better return on their property, after they have brought it up to a reasonable standard. It is hoped that many landlords will take advantage of these new incentives.

Improvements—Four 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, 5 Preliminary Notices and 3 Immediate Improvement Notices were served. Landlords' Undertakings were accepted in 3 cases.

OFFICES, SHOPS AND RAILWAY PREMISES ACT, 1963

Registrations and General Inspections during year 1970

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	25 94 2	285 804 45	60 227 1
Catering Establishments open to the public, Canteens Fuel Storage Depots	21 1	134 9	16
Totals	143	1,277	304

Number of Visits of all kinds by Inspectors to Registered Premises-818.

Analysis of Persons employed in Registered premises by workplace.

Class of workplace		Number of persons employed
Offices Retail Shops Wholesale departments and Warehouses Catering Establishments open to the public Canteens Fuel storage depots		2,161 3,861 411 { 1,737 34
To	otal	8,204
M	ales	2,975
Fe	males	5,229

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

Hoists and Lifts—The Offices, Shops and Railway Premises (Hoists and Lifts) Regulations require that all hoists and lifts in premises to which the Act applies should be examined at regular intervals by a "competent person". If any defects are found the competent person must notify the Local Authority, and it then becomes the responsibility of the Public Health Inspectors to see that the defects are remedied forthwith. Two inspectors attended a Ministry course in this connection. During the year ten notifications were received.

Towards the end of the year the Health Committee authorised the institution of legal proceedings under the above-mentioned legislation against the proprietors of an hotel in the town. Two lifts in this hotel had, for eleven months, been in need of urgent repair to enable them to continue to be used with safety. Nothing had been done to put these matters right and the lifts were still in use.

Accidents reported during the year 1970

	N6	N.	Re	sults followi	ng Investig	ation
Class of Workplace	No. of Accidents Reported	No. Requiring Investi- gation	Prosecu- tion	Formal Warning	Informal Advice	No Action Required
Offices	5	3	-	_	1	2
Retail Shops	15	14	-	-	3	11
Catering Establish- ments, Canteens	4	4	_	_	_	4
Wholesale Shops, Warehouses and Fuel Storage Depots		_	000			tare solio
TOTALS	24	21	_	_	4	17

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 1970, 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 2 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.

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

Action in connection with overcrowding and inadequate facilities is comparatively straightforward, but the securing of a proper standard of management is extremely difficult. Far too many people buy large, empty houses in good neighbourhoods and proceed to convert them into houses in multiple occupation, without realising the very serious responsibility which they are incurring. Inability properly to manage such houses results in the production of slums.

It is not widely appreciated that all the legislation in this connection is directed towards the health and well-being of the tenants in these houses and does little if anything to correct the matters which give concern to local residents.

NOISE ABATEMENT

During the year 69 complaints were received regarding noise, and all were carefully investigated. In the large majority of cases it was found that the noise complained of did not constitute a statutory nuisance. Many people are under the impression that any audible noise from, for example, a factory must be a public health nuisance, regardless of the fact that the noise in question may be considerably less than the normal background level of noise in the neighbourhood. A certain amount of noise is inevitable from any factory. It is quite a common occurrence for people to buy or rent houses immediately adjoining a large, busy factory, and then proceed to complain about the quite reasonable noise level from the factory.

Nevertheless, having said this, it has to be admitted that in Southport there are far too many small factories in very close proximity to dwelling houses.

Persons who are disturbed by the barking of dogs are advised to call at their nearest police station and ask for a "barking-dog form", which contains instructions as to the correct procedure to be followed.

SECTION VI

INSPECTION AND SUPERVISION OF FOOD

Food and Drugs Acts-Records, 1965-1970

V	Number of samples taken			N	Number	AL RESU]	Numbe ulterate		of lulterated
Year	Formal	Informal	Total	Formal	Informal	Total	Formal	Informal	Total	Ratio (%) of samples adulterated
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11
1965 1966 1967 1968 1969	9 5 7 2 3	271 228 213 192 159 131	280 233 220 194 162 131	8 5 7 1 2	226 206 198 172 141 105	234 211 205 173 143 105	1 0 0 1 1	45 22 15 20 18 26	46 22 15 21 19 26	16·4 9·4 6·8 10·8 11·7 19·0

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

Number of samples taken for Bacteriological Examination—Year 1970

Nature of	Nı		oles and Specin ological exami		
Samples and Specimens	First Quarter	Second Quarter	Third Quarter	Fourth Quarter	Total for the year
Ice Cream Milk Other Foods Town's Water	3 59 1	8 50 13 1	8 73 4	47 1	19 229 17 3
TOTALS	63	72	85	48	268

DISTRIBUTION OF MILK

There are 125 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 1970

For Bacteriological Examination

CLASS OF MILK		Number of Samples	Ammondata Tasta	Number of	of Samples	
CLASS	OF IV	IILK	Samples Appropriate Tests Tested		Passed	Failed
Pasteurised			 204	Phosphatase Methylene Blue	204 189	3
Sterilised			 16	Turbidity	16	_
Untreated			 9	Methylene Blue	7	2
				Totals	416	5

For Biological Examination

Decimation	No of	Tests	Results
Designation	No. of Samples	Tests Applied	Positive
Untreated	9	Ring Test for Br. Abortus	-
		Guinea Pig Inoculation for Br. Abortus	-
		Guinea Pig Test for R. Burneti	-
		Totals	_

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 58 samples of milk submitted for chemical analysis, 3 were reported as not complying with the prescribed standard laid down in the Sale of Milk Regulations, 1939. These results show that 5·1% 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 which cause this very unpleasant disease are still prevalent in milk emphasising 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 1970

Particulars	Cattle (exclg.) Cows	Cows	Calves	Sheep and Lambs	Pigs
Number of animals killed and inspected	144	2	2	430	2,091
RESULTS All diseases except tuberculosis and cysticerci:					
Number of whole carcases condemned	-	_	-	1	6
Number of carcases of which some part or organ was condemned	50	_	1	14	342

Summary of Meat and Other Articles of Food which were found to be diseased or unwholesome during year 1970

								Tons	Cwts.	Lbs.
Beef, Veal, Mu	ton,	Pork					,	1	14	861
Fish Poultry, Game	and	Rabb	its		 	 				
Tinned Goods					 	 	}	6	12	61
Fruit Miscellaneous					 	 				
			Т	otal	 	 		8	7	35½

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 Public Abattoir, which had served Southport faithfully for approximately 90 years, finally closed its doors on the 31st March and was demolished almost immediately. As its age indicates, the Abattoir was not merely obsolete in design but was in very poor structural condition, so much so that it was virtually impossible to comply with modern legislation regarding hygiene and the prevention of cruelty. About five years earlier it had become painfully obvious to everyone concerned that the only solution to this problem would lie in the construction of a new modern Abattoir. Before undertaking this, the local authority consulted the Ministry of Agriculture, Fisheries and Food, who stated that Southport was not bound to have its own Abattoir and that, in their opinion, the town could be adequately served by other abattoirs in the area. Accordingly, it was decided to close the Abattoir without replacing it. All the users were given ample warning and, so far as can be ascertained, no hardship was caused to anyone.

FOOD HYGIENE

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

Attendances at Food Hygiene Classes

Trade		Number attended 1970	Totals
71100		Elementary Course	to Date
Bakers and Confectioners	 	 13	237
Butchers and Meat Producers	 	 _	68
Catering I	 	 11	480
Catering II	 	 14	355
Fish Fryers and Fishmongers	 	 _	26
Fruiterers and Greengrocers	 	 _	5
Food and Fruit Preserving	 	 16	573
Grocers	 	 _	204
Ice Cream and Dairymen	 	 _	40
Nurseries	 	 7	147
Others	 	 13	113
TOTALS	 	 74	2,248

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 1,556 students (Elementary Course) who have done so, 1,098 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 mouse infestation continues to be a problem. It is difficult to eradicate these pests permanently as re-infestation 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.

An interesting visit was made to a butcher's shop which was having trouble with larvae in the sawdust. Upon investigation it was found that they were not just in the sawdust but also in some rather inaccessible corners of the shop. A large number of hiding places had been formed by the addition of a chip-board floor. It was decided to take up the floor to provide an effective treatment. When the floor was removed it revealed an amazing sight of larvae and insects in different stages of development. The insects were Dermestes lardarius (larder beetle) accompanied by a large number of D. Peruvianus. Peruvianus are a particularly serious infestation as they are able to eat their way through most materials including lead clad electric cables. Knowing the above facts it is essential to treat the infestation quickly and efficiently. A high level of control can be obtained using 0.5% gamma—BHC (Lindane).

Complaints—At least half of the complaints regarding unsound food were caused by the failure of the food trader to enforce an adequate system of stock rotation. Commenting on this same problem in my report for 1968, I stated "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". I regret to have to state that little general improvement can be recorded. When food traders are found to have out-of-condition foods on display they are very receptive to the advice given to them and it is gratifying that one rarely meets

with second offences from traders who have been warned. Against this, however, it must be understood that there are very many food shops in the area and so other instances of failure to supervise the condition of the stocks of food continue to occur. I feel that the time has come when the sale of food which is unfit due to inadequate supervision by the shopkeeper should be treated with the full severity of the legal powers which are available.

During the year a sample of dried apricots submitted to the public analyst proved interesting. The sample showed small patches of white powder on the surface which turned out in actual fact to be fruit mites (Carpoglyphus lactus). The half-pound sample contained some 20,000 of these mites and the stocks were withdrawn from sale. All dried fruit is fumigated prior to release for retail sale but if kept for long periods in shops re-infestation is possible.

The Spider Beetle (Ptinus tectus) reared its little head at the beginning of the year probably following the excess of Christmas spirit. They appeared in a complaint received regarding a bar of chocolate purchased by a member of the public. An inspection of the shop and the wholesalers revealed no further evidence of the insect and the exact source therefore remained a mystery.

Refrigeration—Refrigerated display cabinets are increasing in popularity. They are a valuable asset in food shops provided always that they are used with intelligence and with full regard to the known principles involved in the use of such equipment. Here again stock rotation is of paramount importance. Refrigeration does not kill germs, it merely makes them inactive and, of course, no degree of coldness will make good a product which has begun to deteriorate.

Frozen Poultry-Widespread publicity has been given to the potential danger from frozen chickens. The broiler industry has made tremendous strides in the last few years, producing many millions of birds per annum. In order to do this, a line system is in operation, in which birds enter alive, are stunned, bled, washed and de-feathered. The line of hooks travels on, successive workers taking out various organs. Then the birds are passed through a bath containing a sterilising fluid prior to being packed and frozen hard. It is widely known that germs of the Salmonella group are frequently found in the intestines of fowls and evisceration must be carried out at speed so as not to interfere with the flow of production. It is not surprising that the Salmonellae find their way out of the intestines and on to the carcase of the bird. Remembering that refrigeration does not kill germs it is clear that a high percentage of pre-packed frozen poultry is contaminated. The only protection which can be given by the housewife is to ensure that the bird is cooked completely. As a frozen bird takes longer to cook than one in unfrozen condition, it is essential that frozen poultry should be thoroughly and completely thawed out prior to cooking. This defrosting will take twelve hours at normal (not warm) room temperature. Cooking should be very thorough, with adequate heat penetration into every part of the bird.

ICE CREAM

The number of premises used in connection with the manufacture, sale and storage of ice cream is set out below:—

PARTICULARS					N	umber
For the purpose of manufacture and sale			 			10
For the purpose of sale and storage			 	• • • •	•••	288
	Тот	AL	 			298

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 ½ hour to 2 hours.
- 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 for Year 1970

		G	RAD	ES			
	Mo	biles			Pren	ises	
I	II	III	IV	I	II	III	IV
1	-	1	1	2	2	2	2
_	_	_	_	6	_	1	1

Soft Ice Cream ...

Other Ice Cream ...



COUNTY BOROUGH OF SOUTHPORT



ANNUAL REPORT

OF THE

PRINCIPAL SCHOOL MEDICAL OFFICER
FOR THE YEAR 1970

Telephone No. Southport 5523.

Health Department,
2 Church Street, Southport.

COUNTY BOROLGH OF SOUTHFOR

ANNUAL REPORT

HIT TO

PRINCIPAL SCHOOL MEDICAL OFFICER

FOR THE YEAR 1970

Health Department, Tourch Street, Southpoin Telephone No.

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EDUCATION COMMITTEE AS AT THE

31st December, 1970

The Mayor, Alderman Mrs. J. Leech

Councillor T. R. Glover (Chairman)

Councillor Mrs. E. M. Monk (Senior Deputy Chairman)

Councillor E. J. Downs, E.R.D., T.D., (Junior Deputy Chairman)

Alderman Mrs. B. Pogson

Alderman W. Prescott

Alderman P. R. Switzer

Councillor C. I. Anderson

Councillor R. Greenall

Councillor M. P. Halsall

Councillor Mrs. J. Lilley

Councillor J. H. Poynton

Councillor R. B. Tomlinson

Councillor E. White

Mrs. M. Bar

The Rev. E. Formby, M.Sc.

The Rev. D. S. Noel

Dr. D. G. Pritchard

Miss M. I. Randall

The Rev. Canon A. Thompson, M.B.E., M.A.

SCHOOL HEALTH SERVICE SENIOR STAFF,

(in post on 31st December, 1970—*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

P. W. LANG, I.R.C.P., L.R.C.S., L.R.F.P. & S., D.P.H.

School Medical Officer

MARGARET C. FELL, M.B., Ch.B., D.P.H., D.C.H.

School Medical Officer

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

VACANT

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

DR. KATHLEEN HENRY, B.A., M.A., Ph.D., DIP. ED., DIPLOMA IN CHILD DEVELOPMENT

Principal School Medical Officer's Annual Report

FOR 1970

TO THE CHAIRMAN AND MEMBERS OF THE EDUCATION COMMITTEE

Before this report is published, I shall have retired from my post as Principal School Medical Officer. I have spent twenty four years of my professional life trying to ensure that Southport children have been able to make the best possible use of the extensive educational facilities that are provided. It has been a most rewarding time. Great advances have been made in preventive medicine during the period and it has been possible to apply these to promote the health of children and to save them from distressing and sometimes crippling diseases.

The number of children in Southport schools increases each year and my successor, Dr. P. W. Lang, will need to review the situation in the light of existing medical and other resources. I am sure that he will have from you the same support that I have enjoyed.

I am delighted to see Presfield School about to open. It has taken many years of effort to obtain this special school and I feel sure that many children will benefit greatly by attendance there.

We need also a special school for children who are physically handicapped and I am pleased to know that steps are being taken to this end.

I should like to record my grateful thanks to the members of the Committee, to my medical colleagues in the town, to the staff of the department and to the teachers for their support and help during the year.

I am,

Yours faithfully,

G. N. M. WISHART, Principal School Medical Officer.

SCHOOL HEALTH SERVICE

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.

				Year 1969	Year 1970
Primary Schools Secondary Schools	 	 	 	7,641 4,674	7,744 5,050
				12,315	12,794

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 health 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					 	 	1228
Leavers					 	 	995
SECONDARY SCHOOLS-	-						
Leavers					 	 	858
Additional Medical	INSPECTI	ons (All	Scho	ools)	 	 	706
	TOTAL				 	 	3787

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 SCHOOL	OLS-							
Entrants						 	 	82.2%
Leavers						 	 	67.0%
SECONDARY SCI	HOOLS-							
Leavers						 	 	9.8%
ADDITIONAL M	EDICAL	INSPEC	TIONS (All Sc	hools)	 	 	61.3%

Defects found at Routine Medical Inspections.

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

	Primary	Schools	Secondary Schools	Additional Inspections	TOTALS
	Entrants	Leavers		(all schools)	TOTALS
Number of children examined	1228	995	858	706	3787
Number of children requiring treatment	93	104	84	75	356
Percentage requiring treatment	7.6	10.4	9.8	10.6	9.4

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 12,339 and of these 17 were referred for further examination, together with 668, 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, 4,994 attendances were made by children—4,832 at 2 Church Street Clinic, and 162 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 1,352, and these children made 2,067 attendances. 31 cases were referred to the Southport Infirmary for further investigation, and 12 to the Promenade Hospital.

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

During the year 38 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, 597 attendances were made at this clinic. 149 new cases were examined and 295 children attended for observation of progress from previous years. 237 children had spectacles prescribed for them and 41 children were referred to the Southport Infirmary for operative and orthoptic treatment.

Ear, Nose and Throat Clinic—In 1970, 323 attendances were made at this clinic. 299 new cases were examined and 13 children attended for observation of progress from previous years. 237 cases were admitted to the Promenade Hospital for the removal of tonsils and/or adenoids, and 105 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. 1,600 children were tested in school; 71 were referred to a school medical officer for further testing; 19 children were kept under observation and 33 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, 212 attendances were made. 41 new cases were examined and 29 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, 1,033 attendances were made and 211 new cases were examined. At the end of the year 33 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.

During the year 28 school children were treated at 2 Church Street and made 371 attendances; 13 children were treated at Lincoln House and made 215 attendances and 13 children were treated at Ainsdale and made 254 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.

During the year 252 children made 3,590 attendances at 2 Church Street, 107 children made 944 attendances at Lincoln House and 99 children made 583 attendances at Ainsdale.

In addition, group physiotherapy sessions were held once a week at the Hawkshead Hospital Special School and 1,448 group attendances were made. During the year, 12 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

In September a full-time speech therapist was appointed. From the beginning of September to the end of December 406 attendances were made by 52 Southport school children for the under-mentioned defects.

Retarded spee	ch and	langua	age	 5
Stammer				 6
Cleft Palate				 1
Sigmatism				 15
Dyslalia				 25

These children are all having regular therapy.

There are 21 children on the waiting list, who are having regular check-ups meantime.

CHILD GUIDANCE SERVICE

Dr. Naylor, the Consultant Child Psychiatrist, has asked me to include the following: "The service has had a further busy year and has provided assessment and treatment facilities for patients from Southport and the surrounding county areas.

A regular session is now conducted with the staff of the Children's Department for

children in care who show signs of emotional disturbance.

During the year there has been a change of educational psychologist. Mr. Forshaw left in September to take up a post in Scotland and in October we were fortunate in being able to welcome Dr. Kathleen Henry to this post.

Unfortunately the psychiatric social worker, Mrs. E. Winter, found it necessary to reduce her sessions to four per week, which has meant considerable curtailment of her

supportive work with the parents; this has proved so valuable in the past.

Remedial teaching for children with scholastic difficulties usually emotionally determined has been continued under the experienced and conscientious handling of Mrs. J. Smith.

	Southport	Lancs. C.C.	Total
No. of new cases seen	72	9	81
No of cases under treatment during the year	128	28	156
No. requiring in-patient treatment at Hawkshead Hospital	19	6	25
No. recommended for special place- ment—either residential or day	8	1	9
No. of clinic patients in residential placements	7	1	8

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 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. At the end of the year, 23 children with the following handicaps were receiving education in the school:—

Sex	Handicap
3 boys	Spastic paralysis
2 boys	Haemophilia
2 boys	Diplegia
1 boy	Spina bifida
1 boy	Right sided hemiplegia
1 boy	Congential hypercalcaemia and congenital heart disease
1 boy	Muscular dystrophy
1 boy	Congenital heart disease
1 boy	Cerebral tumour
1 boy	Congenital deformity of urethra
4 girls	Spastic paralysis
1 girl	Myelomeningocele
1 girl	Encephalocoele
1 girl	Right sided hemiplegia
2 girls	Congenital absence of sacrum

During the past year about twelve 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.

Partially Sighted Children—Two partially sighted Children were in residential schools.

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

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

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

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

Children Unsuitable for Education in School—During the year, no 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—Two cases of tuberculosis were found in school children during 1970.

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 3.5%. These parents were visited by members of the health visiting staff, 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
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
1969	89.7	1052	18.3	76.9	4.8	803
1970	90.4	1047	18.0	75.0	7.0	774

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
1966	718	7	1.0
1967	834	14	1.7
1968	1025	21	2.1
1969	941	32	3.4
1970	1145	35	3.1

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 1969 for comparison:-

	1969	1970
Measles	79	20
Scarlet Fever	15	6
Whooping Cough	-	6
Tuberculosis	1	2

MISCELLANEOUS SCHOOL MEDICAL WORK

Examination of so		n for fitnes	s to ta	ke par	t in p	oublic	
entertainment							24
Examination of sch	ool children	for part-tim	e emple	oyment			21
Children seen at 'fe	ollow-up' visi	ts to school	s by scl	hool nu	rses		289
Miscellaneous hom	e visits by sch	nool nurses					1314

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, 1,521,315 meals were given to Southport school children and 13% of these meals were supplied free of charge under the assessment of income scheme.

An average of 70% of children have dinner in school.

SCHOOL DENTAL SERVICE

Report of Mr. W. L. Rothwell, Principal Dental Officer.

Perhaps for the first time since the School Dental Service in Southport began, it was not possible to maintain the authorised professional establishment. Mr. Leech, the surgeon at the Lincoln House Dental Clinic, resigned in April but continued part time until the end of June. Since that time advertisements to replace him have been inserted on five occasions in the British Dental Journal as well as in local and national papers but without the desired result. This state of affairs exists throughout the whole country and it is difficult to see any permanent improvement in the staffing of the school dental service until some real indication is given that it is regarded as a priority service.

It was decided to close the Dental Clinic at Lincoln House and to offer dental treatment, for all the schools, at the Church Street Clinic. In September we were fortunate in being able to obtain the services of Dr. Bushby who now attends for one session each week to administer dental anaesthetics. It has also been decided to up-grade one of the School Dental Officer's posts to that of Senior Dental Officer with added responsibilities and it is hoped that, in 1971, this move will help to improve the staffing position.

A reduction of staff does of course mean a reduction in the amount of work done and this is shown in the number of fillings completed this year as compared with 1969. Unfortunately dental caries is most active in childhood and without regular examination many teeth would be irreparably damaged before being seen. It is therefore pleasing to be able to report that it was still possible to inspect all the schools during the year, although of course the period between inspections has increased from the very desirable one of eight to nine months in some cases. It is of interest to note from these inspections that the percentage of children requiring treatment is the lowest recorded for many years and would appear to indicate that the standard of dental health among the school children of Southport is on the whole good. It should be pointed out that the excellent work of the general dental practitioner contributes a great deal to this and in fact if Southport did not have such practitioners willing to treat school children, the school dental service would find it difficult to cope.

It has not been possible to show any dental health films to schools this year but dental health education nevertheless is not forgotten and every opportunity, either at the chair side or during a school inspection, is taken to press the point where this is seen to be necessary. Pamphlets with birthday cards continue to be sent out and also the invitation to attend at the age of three, although it is disappointing to find sometimes that an appointment for a re-examination is not always made without the parent being reminded, for after all the fundamental responsibility for seeing a child attends the dentist remains with the parent.

CLINICS AS AT THE 31st DECEMBER, 1970

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 (Formightly) Nurses* Dressings Clinic *Orthodontic Clinic (Formightly) Dental Clinic	*Remedial Exercises Clinic	Dental Clinic
TUESDAY	p.m.	*Orthopsedic (Periodically) Nurses* Dressings Clinic *Orthodontic Clinic Dental Clinic	*Psychiatric Clinic	Dental Clinic
WEDNESDAY	a.m.	*Bye Clinic (Fortnightly) Nurses* Dressings Clinic Dental Clinic	*Artificial Sunlight Clinic *Remedial Exercises Clinic	Dental Clinic *Artificial Sunlight Clinic *Remedial Exercises Clinic
WEDNESDAY	p.m.	Nurses' Dressings Clinic Dental Clinic	1	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	1	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.

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)	No. of pupils Inspected	Satisfactory	Unsatisfactory
1966 and later	235	235	
1965	473	472	1
1964	670	670	_
1963	128	128	_
1962	79	79	_
1961	75	75	-
1960	173	173	=
1959	634	634	
1958	313	313	_
1957	64	64	-
1956	626	626	_
1955 and earlier	317	317	_
TOTAL	3787	3786	1

Pupils found to Require Treatment at Periodic Medical Inspections (excluding Dental Diseases and Infestation with Vermin)

Age groups Inspected (by year of birth)	For defective vision (excluding squint)	For any of the other conditions recorded in Part II	Total individual pupils
1966 and later	_	12	12
1965	2	34	36
1964	1	48	49
1963	1	22	23
1962	1	7	8
1961	2	5	7
1960	3	20	23
1959	4	52	56
1958	_	40	40
1957	_	8	8
1956	4	56	60
1955 and earlier	3	31	34
TOTAL	21	335	356

OTHER INSPECTIONS

Number of Special Inspections Number of re-inspections	 	::)	 	 		997 1755
				 Тот	AL	2752

PART I (cont.) INFESTATION WITH VERMIN

Total number of individual examinations of pupils in schools by school nurses or other authorised persons
Total number of individual pupils found to be infested
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 O	5 6	26 10	25 9	56 25
Eyes—Vision		 T	3 14	6 37	12 41	21 92
Squint		 TO	7	2	4	13
Other		 TO	11 2 3	1	4	15 3 3
		0	3		_	3
Ears—Hearing		 T	14	2	15	31 29
Otitis Media		 T	22 3 3 1	2 2 1	15 5 2 2 2 1	6
Other		 T	1	=	2	6 5 3 4
		0	3		1	4
Nose and Throat		 T	12	5 9	6 17	23 58
		0	32	9	17	58
Speech		 T	5	1	2 5	8 26
		0	21	-	3	20
Lymphatic Glands		 T	2 5	-	-1	2 7
		0	,	1	1	1
Heart		 T	1 12	2 6	1 29	4 47
		0	12	0	29	47
Lungs		 T	2 16	1 1	1 12	4 29
		0	16	1	1.2	29
Developmental—Hernia		 TO	1	-	=	1 6
Other		 5787	2 8 48	4 3 8	11 38	22 94
		O	48	0	30	74
Orthopaedic-Posture		 Т	5 3	12	38 4	55 12
Feet		 O T O	14	12 5 21 2	35 12	70 40
Other			26 12 32	5 8	18 24	35 64
		0	32	8	24	0.4
Nervous System-Epiley	psy	 T	-	-	1 4	1 6
Other		 OTO	1 -2		-	3
		0	3	_	_	3
Psychological—Develop	ment	 T	-	-	-	-
Stability		 OTO	2 4	=	1	6 3 8
		0	4	1	3	
Abdomen		 T	1 3	-	_	1
		0	3	_	2	5
Other		 T	8 15	4 10	15 13	27 38
Outer III		 0	15	10	13	38

PART II (cont.)

(b) At Special Inspections

	Γ	efects	or Dise	eases			Pupils requiring Treatment	Pupils requiring Observation
Skin							229	34
Eyes-Vision	n						5	2
Squir							2	
Other							46	6
Ears—Heari	ng						36	37
Otitis	Media				***		14	2
Other							25	8
Other							~ ~	0
Nose and T	nroat						25	20
Speech							5	3
Lymphatic (Glands						1	-
Heart							1	-
Lungs							6	1
Developmen	tal							
Herni							_	1
Other							1	1 2
Other							1	4
Orthopaedic	_							
Postu	re						3	1
Feet							8	_
Other							132	53
Nervous Sys	tem—							
Epiler	osy					1000	_	_
Other								1
Psychologica	1—							
Devel	opment						30	2
Stabil							3	6
Abdomen							16	6
Other							70	
omei							79	68
			T	OTALS			667	253

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 Errors of refraction (including squint)		104 399
	Total	503
Number of pupils for whom spectacles were prescribed		237

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				 	64
for adenoids and chronic tonsillitis				 	237
for other nose and throat conditions				 	41
Received other forms of treatment				 	312
				Total	654
Number of pupils in schools who are kn- provided with hearing aids—	own	to have	been		
in 1970				 	7
in previous years				 	18

ORTHOPAEDIC AND POSTURAL DEFECTS

					Number of cases known to have been treated
Pupils treated at clinics or out-patient	s depa	rtmen	ts—	- 300	ner labitima
Specialist Clinics				 	-12
By Local Authority Medical Staff				 ***	205
Pupils treated at school for postural	defect	s		 	_
				Total	217

PART III (cont.)

DISEASES OF THE SKIN

(excluding uncleanliness, for which see Part I)

											Number of cases known to have been treated
Ringworm	_	Scalp Body									
Scabies						***		***	***		17
Impetigo		***									42
Orbertgo	45			***		***	***		***		525
Other skin	disea	ises	***		***						323
										Total	585

CHILD GUIDANCE SERVICE

						Number of cases known to have been treated
Pupils treated at Child Guidance C	linic:—					
Maintained school children					 	118
Pre-school children					 	5
Private school children					 	5
Lancashire County school childre	en and	pre-sch	ool chi	ldren	 	28
					Total	156

(For further details see Table VI)

SPEECH THERAPY

				Number of cases known to have been treated
Pupils treated by speech therapist	 	 	 	52

OTHER TREATMENT GIVEN

				Number of case known to have been dealt with
Pupils with minor ailments Pupils who received convalescent treatment under S	chool He	alth S	 ervice	475
arrangements				_
arrangements Pupils who received B.C.G. vaccination				774
Artificial Sunlight				59
Remedial Exercises				458
No. of 5 year old entrants who have had Skin Test	s			1145
			Total	2911

PART III (cont.)

SCHOOL DENTAL SERVICE

Dental Inspection and Treatment carried out during 1970

ATTENDANCES I TREATA	AFRIT						Total
ATTENDANCES and TREATA	MENI						0.472
First Visit							2473
Subsequent Visits							3105
Total Visits							5578
Additional courses of treatment	comme	nced					774
Total courses commenced							3247
Courses of treatment completed							3093
Fillings in permanent teeth							3178
Fillings in deciduous teeth							1742
Permanent teeth filled							2825
Deciduous teeth filled							1612
Permanent teeth extracted							629
Deciduous teeth extracted							1789
General Anaesthetics							821
Emergencies							55
Number of pupils X-rayed							98
Prophylaxis							78
Teeth otherwise conserved							
Teeth otherwise conserved		• • • •					67
OBTHODONTICE							
ORTHODONTICS							
New cases commenced during y	ear						75
Cases completed during year				***			63
Cases discontinued during year							9
Number of removable appliance	s fitted						117
Number of fixed appliances fitte	d						12
Pupils referred to Hospital Cons							_
PROSTHETICS							
Pupils supplied with F.U. or F.I	I. (first	time)					
Pupils supplied with other denti							13
Number of dentures supplied							17
ramoer of dentares supplied							11
ANAESTHETICS							
	. 1 L T	S1 (O				6.12
General Anaesthetics administer	ed by I	Dental (omcers				643
NICOTE CENTONIC							
INSPECTIONS							
(a) First inspection at school. No	umber (of pupi	ls				10039
(b) First inspection at clinic. Nu	mber o	f pupils	3				1760
Number of (a)+(b) found to	requir	e treatn	nent				4276
Number of (a)+(b) offered t	reatmen	nt					4276
(c) Pupils re-inspected at school	or clin	ic					3461
Number of (c) found to requ							1571
1							
SESSIONS							
Sessions devoted to treatment					2.00	1200	916
Sessions devoted to inspections		ntal hea	Ith edu	cation			97
ocosiono devoted to mapeetiona	and del	itul iled	cut	cation			2.0

CHILD GUIDANCE SERVICE

	S	Southport		Lanca County		
	School Children Pre- School		School	Тота		
	Maintained Schools	Private Schools	Children	Children	School Children	
Number of new children re- ferred	65	3	4	8	1	81
Number of children referred by:— Family Doctors	23	3	1	5		32
School Medical Officers	15	-	3	3	1	22
Juvenile Court & Probation Officers	1	_			_	1
Consultant Medical (in- cluding Hospital Staff)	3	_	_		_	3
Children's Officer	2	_		_	/	2
Chief Education Officer	2	-	-	-	_	2
Miscellaneous	19	_	_	_	_	19
TOTAL	65	3	4	8	1	81
Number of individual child- ren seen during year	118	5	5	25	3	156
Number of attendances made by:— Children	277	9	8	62	14	370
Parents	272	11	13	72	15	383
TOTAL	549	20	21	134	29	753
Number of children on wait- ing list at commencement of year	12	_	1	2		15
Number of children on wait- ing list at end of year	13	1	1	1	11 <u>1</u> 1 1 1 1	16

Number of sessions conducted by Consultant Child Psychiatrist 97

S	Southport		Lancashire County Counci		TOTAL
School Cl	nildren	D.		D	
Maintained Schools	Private Schools	Pre- School Children	School Children	Pre- School Children	
139	6	5	1	_	151

Number of home visits by Psychiatric Social Worker

HANDICAPPED PUPILS

		NUMBER ASCERTAINED	RTAINED		TYPE OI	TYPE OF EDUCATION PROVIDED	PROVIDED	REQUIR ACCOMMO AT THI	REQUIRING SPECIAL SCHOOL ACCOMMODATION BUT UNPLACED AT THE END OF THE YEAR	SCHOOL UNPLACED IE YEAR	
	No. on the	No added	No.	No. on the		Special	Special Schools				TOTALS
	the 1st Jan., 1970	during the year, 1970	drawn in 1970	31st Dec., 1970	Ordinary School	Day Class or School	Residential School	Day Class or School	Special	Refusal by Parents	
	-		1	-	1	-	1	1	1	1	-
PARTIALLY SIGHTED	7	1	1	7	5	1	2	1	1	1	7
:	2	1	1	2	1	1	2	1	-	1	2
PARTIALLY HEARING	17	9	1	23	10	14	4		1	1	23
::	1	1		1	1	1	1	1	1	1	1
	15	2	1	17	17	-	1	1	1	-	17
:	45	31	18	58	1	7	10	424	4	1	58
	30	5	1	34	34	-	1	1	1	1	34
	3	1	1	2	1	1	2	1	1	1	2
PHYSICALLY HANDICAPPED	182	23	21	184	154	23	5	1	2	1	184
Totals	301	69	43	327	215	44	20	42	9	-	327

† 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.

B.C.G. VACCINATION OF SCHOOL CHILDREN

	K	ind of Scho	ool	То	tals
	Local Authority Schools	Private Schools	St. Thomas More Approved School	No.	%
Number of consent forms issued to parents	1150	91	56	1297	_
Number of parental consents received	1042	75	56	1173	90 · 4
Number of definite refusals	68	11	-	79	6.1
Number of parents who did not reply	40	5		45	3.5
Totals	1150	91	56	1297	100
Number of Children tested	940	72	35	1047	89 - 3
Number of children with consent forms but not tested	102	3	21	126	10.7
Totals	1042	75	56	1173	100
Number of children tested and found to be:— Positive reactors Negative reactors	168 718	8 61	13 6	189 785	18·0 75·0
Number not read	54	3	16	73	7.0
Totals	940	72	35	1047	100
Number of negative reactors vaccinated	709	61	4	774	_

PREVENTION OF TUBERCULOSIS SKIN TESTING OF SCHOOL ENTRANTS

Number of children already tested					 	30
Number of 'no replies'					 	192
Number of definite refusals					 	60
Number of consents received					 	1258
Total number of eligible children					 	1540
Number of children tested	***				 	1145
Number of children absent from t	he test				 	113
Total number of children for who	om cons	ents we	ere rece	ived	 	1258
Number of children tested and for	and to b	e:				
(a) positive					 	35
(b) positive from previous B	.C.G. v	accinati	ion		 	36
(c) negative					 	1057
(d) absent from reading					 	17
Total number of children tested					 	1145
Number of children referred to th	e Chest	Clinic			 	35
Number of contacts found to have	active	disease			 	NIL



