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Contributors

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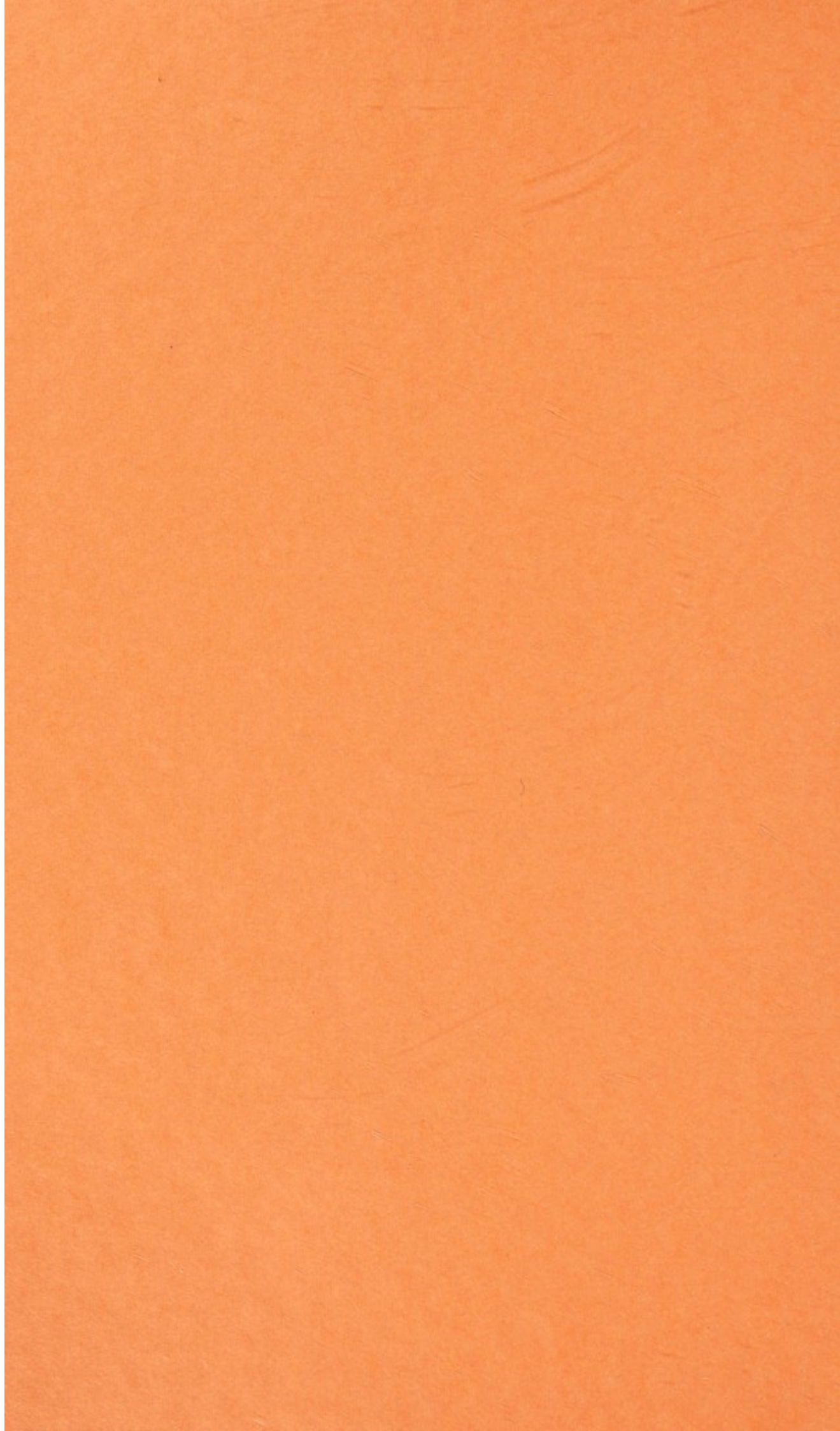
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COUNTY BOROUGH OF SOUTHPORT



ANNUAL REPORT
OF THE
MEDICAL OFFICER OF HEALTH
AND
PRINCIPAL SCHOOL MEDICAL OFFICER
FOR THE YEAR 1971

Health Department
2 Church Street, Southport





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Health Department
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HEALTH COMMITTEE

(31st December, 1971)

The Worshipful the Mayor Alderman A. V. F. LANGFELD

Chairman	...	...	...	...	Councillor H. MARTLAND	
Senior Deputy Chairman	...	...	...	...	Councillor R. E. EARP	
Junior Deputy Chairman	...	...	...	...	Councillor J. H. POYNTON	
Aldermen	...	...	...	...	E. McCABE, J.P.	
					Mrs. B. POGSON	
					G. S. WILKINS	
Councillors	...	...	...	...	J. R. CORCORAN	Mrs. C. KIRWAN
					J. HARTLEY	D. T. NICHOLSON
					R. B. HUGHES	L. POTASH
						R. M. WATSON
Co-opted Member	...	...	...	...	Dr. L. M. MACKENZIE	

SENIOR STAFF OF THE DEPARTMENT

(in post on 31st December, 1971—*indicates part-time staff)

Medical Officer of Health	...	...	P. W. LANG, L.R.C.P., L.R.C.S., L.R.F.P. & S., D.P.H.
Deputy Medical Officer of Health	...	VACANT	
Senior Medical Officer in Department	E. LOSONCZI, M.B.E., M.D., D.P.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.)
Senior Dental Officer	...	...	J. D. M. KIDNEY, B.D.S. (Nat. Univ. of Ireland)
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.	
Chief Nursing Officer	...	...	Miss E. MITCHELL, S.R.N., S.C.M., H.V. Cert., Q.N.
Chief Fire & Ambulance Officer	...	*J. PERKINS, M.B.E., Grad. I. Fire E.	
Administrative Assistant	...	...	F. H. DIX, A.C.I.S.

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.

Head Supervisor/Teacher, Junior
Training Centre for Mentally Handi-
capped §Mrs. I. H. BAYLEY

Manager, Adult Training & Industrial
Centre for Mentally Handicapped ... †J. Dix, Diploma, National Assoc. for Mental
Health

Superintendent, Springbrook Resident-
ial Home for Mentally Handicapped
Children †V. OLDHAM

Superintendent, The Meadows Resi-
dential Home for Mentally Handi-
capped Adults †B. HOLDEN

Matron, Brookdale Home for the
Elderly Mentally Infirm †Miss. L. CURNAN, R.M.N., R.M.P.A.

† Transferred to Social Services Department on 1st April, 1971.

§ Transferred to Education Department on 1st April, 1971.

ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH

FOR THE YEAR 1971

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

The year has been an eventful one. At the end of March Dr. G. N. M. Wishart retired from the post of Medical Officer of Health after 19 years in office and his service with the Health Department totalled 23 years. I am sure that it will be generally agreed that the public health interests of the town were most ably served during this period. Dr. Wishart's special expertise in the field of infectious diseases has benefited both patients and family doctors over the years and many sufferers from infectious diseases were able to occupy a bed in New Hall Hospital directly under his control until quite recently. The loss of these infectious disease beds, which is greatly to be regretted, occurred in the year prior to Dr. Wishart's retirement. Infectious disease patients requiring hospital treatment are now admitted to Fazakerley Hospital and there is no dispute that they receive first class care. The disadvantage is that the hospital is situated 15 miles from Southport and the visiting of patients is therefore a matter of some difficulty.

Dr. Wishart's contribution to the health of the Southport community over the years has been a very considerable one and many projects have come to fruition in his years of office. In this connection I believe that particular mention should be made of the number of establishments providing services for mental health, all of which came into being during his period of office and which have covered an admirable range of facilities. Other matters affecting community health in which Dr. Wishart held a special interest were quality of water supplies, food hygiene, environmental pollution, the health of the school child with particular reference to children with handicaps, and the problems of the older members of the community. His involvement in these topics has been of great benefit to the local population. Dr. Wishart's standards were invariably of the highest throughout his period of office and it will not be easy to follow him.

It has often been said that a major shortcoming of the National Health Service has been its tripartite structure. This separate existence of the Hospital, Executive Council and Local Authority Health Services has resulted in communication difficulties in many parts of the country. That these difficulties are less in Southport than elsewhere is, I am sure, attributable in some measure to the excellent relationship Dr. Wishart held with his colleagues in the hospital and general practitioner services. The tripartite structure is to be replaced in the near future. Plans are now afoot for the reorganisation of the National Health Service and during the year a Consultative Document was published by the Department of Health and Social Security. Whatever the eventual pattern of the reorganisation, and we shall know more about this in the year to come, the task will certainly be facilitated by the good relationship which already exists amongst the various members of the medical and allied professions locally.

A major event and an innovation in 1971 was the establishment of Departments of Social Services throughout England. This measure, the result of the Social Services Act of 1970, brought together social workers in the fields of child care, welfare and mental health, together with the various establishments involved in these services. Inevitably this resulted in the transfer to the newly formed Social Services Committee the Health Committee's responsibility for day nurseries, child minders and play groups, residential homes for mentally handicapped children and adults, the training and industrial centre for mentally handicapped adults, the hostel for mentally disordered elderly persons and, certainly not least, the highly organised home help services. The Health Department greatly regretted the loss of these services but was aware of the objectives underlying the recommendations made in the Seebohm Report of 1968. We wish the emergent Department of Social Services well in its future undertakings which will be so vital to the social welfare of the population and hope that the existing close links between the two departments will continue when the present local authority health services are united with the other branches of the National Health Services in the year 1974.

A major change took place in the field of immunisation against infectious disease as a result of the guidance issued by the Chief Medical Officer of the Department of Health and Social Security, that smallpox vaccination was no longer to be regarded as a necessary component of the immunisation programme for infancy and that it should be discontinued; this recommendation was put into effect in August and vaccination is now no longer recommended to the public. Certain categories of persons will, however, continue to require vaccination, for example, members of the medical and nursing professions, public health inspectors and ambulance personnel, who would all be at special risk in the event of a local outbreak of smallpox. In addition travellers to certain countries overseas are obliged to produce a valid certificate of vaccination. In the future the Health Services will rely upon local control of outbreaks on the rare occasions when smallpox gains entry to this country. This changed policy can be regarded as a measure of the success achieved by the World Health Organisation in its campaign directed towards eradication of the disease.

A notable advance in protective immunisation was the recent development of a vaccine effective against rubella (German measles). It has been known for several years that the causative virus can infect an unprotected expectant mother and through her the unborn baby, resulting in severe damage. Many cases of deafness, blindness and grave heart defects have resulted from maternal infection during pregnancy. In October 1970 a campaign was launched to vaccinate all girls aged 11 to 14 years, the intention being to ensure protection from the disease before child-bearing age was reached. A large number of girls aged 12 and 13 were vaccinated during the initial campaign and by the end of 1971 1,276 girls had been protected. This immunisation has since become a routine procedure available to all 11 year old girls.

A comment about measles is necessary. The number of cases of the disease notified in the town during the year was 124; in my opinion this indicates a far from satisfactory state of affairs. The conclusion to be drawn is that despite the ready availability of measles vaccine, a vaccine which offers excellent protection against the disease, there remained 124 children whose parents had declined the offer of this protective immunisation for their child. Measles is not a grave illness though its effects are extremely unpleasant to the sufferer, but there are numerous complications these including damage to the ears, chest diseases and more rarely, brain involvement sometimes resulting in death. Until this immunisation procedure is fully accepted the disease will not be eradicated, as it should have been by now.

During the year the town was the subject of unwelcome publicity when some doubts were expressed in various quarters as to whether the local sea front presented a health hazard in the form of bacterial pollution. This topic was highlighted in a television programme towards the end of 1970 and continued to attract publicity for some months afterwards. Detailed consideration of the results of regular sampling of sea water and sand, together with a study of the epidemiological aspects of the situation, made

it clear that no evidence existed to justify the implication of a hazard to human health. Department of Health and Social Security representatives paid a short visit to the town and their report which was drawn up after consultation with Sir James Howie, Director of the Public Health Laboratory Service, supported the view taken by this department that users of the beach were not in any danger on this account. It is quite certain that apprehensions had arisen as a consequence of the disposal of untreated sewage and sewage sludge in the Liverpool Bay. It is hoped that this method of disposal of waste, which is undoubtedly regarded as an undesirable practice by the population as a whole, will eventually be replaced throughout the region by a method of sewage disposal which ensures full treatment before the effluent is discharged into sea and river. Southport's own sewage is fully treated in this way.

The planning stage of the Churchtown Health Centre project having been completed, work on the preparation of the site commenced early in the year. The major problem was the removal of an embankment on which was formerly situated the Churchtown Railway Station. The work proceeded smoothly and towards the end of the year the building of the walls of the Health Centre had commenced. This project, when completed, will I am sure be of great benefit to the community in the northern part of the town and to those concerned in its operation.

An active programme of Health Education was satisfactorily completed during the year. Intensive health education on an individual basis is a feature of the work of the health visitor in the child health clinic. In addition to this talks were given to a number of organisations and some health education was undertaken by members of the department in schools. The town's newspaper was extremely co-operative in featuring items of vital importance in the health education field throughout the year and the department acknowledges its indebtedness for the publicity which was made available and which played a significant part in local health education.

In conclusion I should like to express my thanks to the members of the Council and to the staff of the Health Department who have frequently been submitted to very heavy pressure during the year, for all the support and encouragement which has been forthcoming during 1971.

I am,

Yours faithfully,

P. W. LANG

Medical Officer of Health.

Section I

STATISTICS

GENERAL STATISTICS

	1970	1971
Area of County Borough (including Foreshore) (acres)	18,333	18,333
Area of County Borough (excluding Foreshore) (acres)	9,426	9,426
Population (1971 Census Report)	—	84,349
Population (estimated by the Registrar General) mid-year	83,000	84,870
Density of Population per acre (excluding Foreshore)	8.80	9.00

VITAL STATISTICS

Live Births Legitimate	929	958
Illegitimate	108	108
Total	1,037	1,066
Males	526	541
Females	511	525
Total	1,037	1,066
Rate per 1,000 population	12.5	12.6
Adjusted Birth Rate per 1,000 population	15.0	15.1
(area comparability factor)	(0.94)	1.20
Birth Rate for England and Wales	16.0	16.0
Illegitimate Live Births per cent of total live births	10%	10%
Stillbirths Number	14	11
Rate per 1,000 total live and stillbirths	13	10
Total live and stillbirths	1,051	1,077
Infant Deaths (under 1 year)	15	24
Infant Mortality Rates:		
Total Infant Deaths per 1,000 total live births	14	23
Legitimate Infant Deaths per 1,000 legitimate live births	13	24
Illegitimate Infant Deaths per 1,000 illegitimate live births	28	9
Infant Mortality Rate per 1,000 births for England and Wales	18	18
Neo-natal Mortality Rate (deaths under 4 weeks per 1,000 total live births)	8	17
do. England and Wales	12	12
Early Neo-natal Mortality Rate (deaths under 1 week per 1,000 total live births)	8	14
do. England and Wales	11	10
Perinatal Mortality Rate (stillbirths and deaths under 1 week combined per 1,000 total live and stillbirths)	21	24
do. England and Wales	23	22
Maternal Mortality (including abortion)		
Number of Deaths	none	none
Rate per 1,000 total live and stillbirths	—	—
Deaths of Infants under 1 day old	5	11
Year 1970 1971		
Deaths Males 640 652 }	1,488	1,423
Females 848 771 }		
Rate per 1,000 population	17.9	16.8
Adjusted death rate per 1,000 population	11.6	10.9
(area comparability factor	(0.65)	(0.65)
Death Rate for England and Wales	11.7	11.6
Excess of Deaths over Registered Births	437	357

VITAL STATISTICS
Comparison of Birth, Death and Infant Mortality Rates for England, Wales and Southport
for Period 1891 to 1971

PERIOD	BIRTH RATE (per 1,000 population)		DEATH RATE (per 1,000 population)		INFANT MORTALITY RATE (per 1,000 live births)	
	England & Wales	Southport	England & Wales	Southport	England & Wales	Southport
1891—1900	29.9	22.31	18.2	17.23	153	143
1901—1910	27.2	17.49	15.4	14.43	128	121
1911—1920	21.8	13.95	14.4	13.86	100	84
1921—1930	18.3	12.71	12.1	12.66	72	65
1931—1940	14.9	10.30	12.3	15.07	59	56
1941—1950	16.9	12.68	12.4	15.59	43	39
1951—1960	15.8	13.07	11.6	12.58	24.79	28.8
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	25.4
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
1971	16.0	15.10	11.6	10.9	18.0	23.0

Corrected Rates for births and deaths are shown from 1951

REGISTRAR GENERAL'S SHORT LIST OF CAUSES OF DEATH, 1971

CAUSES OF DEATH	Sex	Total all Ages	Under 4 weeks	4 weeks under 1 yr.	Age in Years								
					1-4	5-14	15-24	25-34	35-44	45-54	55-64	65-74	75+
B4 Enteritis and other Diarrhoeal Diseases	M F	2 —	— —	1 —	— —	— —	— —	— —	— —	— —	1 —	— —	— —
B19(1) Malignant Neoplasm—Buccal Cavity etc.	M F	1 4	— —	— —	— —	— —	— —	— —	— —	— 1	— 1	— 1	1 1
B19(2) Malignant Neoplasm—Oesophagus	M F	4 3	— —	— —	— —	— —	— —	— —	— —	1 —	2 1	1 —	— 2
B19(3) Malignant Neoplasm—Stomach	M F	20 7	— —	— —	— —	— —	— —	— —	— —	3 1	5 1	5 1	7 4
B19(4) Malignant Neoplasm—Intestine	M F	16 22	— —	— —	— —	— —	— —	— —	— —	1 —	4 6	4 4	7 12
B19(5) Malignant Neoplasm—Larynx	M F	— 1	— —	— —	— —	— —	— —	— —	— —	— —	— 1	— —	— —
B19(6) Malignant Neoplasm—Lung, Bronchus	M F	48 12	— —	— —	— —	— —	— —	— —	1 —	5 1	14 6	21 4	7 1
B19(7) Malignant Neoplasm—Breast	M F	— 28	— —	— —	— —	— —	— —	— —	— 1	— 4	— 5	— 8	— 10
B19(8) Malignant Neoplasm—Uterus	F	6	—	—	—	—	—	—	1	—	1	2	2
B19(9) Malignant Neoplasm—Prostate	M	12	—	—	—	—	—	—	—	—	—	6	6
B19(10) Leukaemia	M F	2 2	— —	— —	— —	— —	1 —	— —	— 1	— —	— —	1 —	— 1
B19(11) Other Malignant Neoplasms	M F	32 47	— —	— —	— 1	— —	1 —	— —	1 3	3 2	5 12	15 18	7 11
B20 Benign and Unspecified Neoplasms	M F	1 3	— —	— —	— —	1 —	— —	— —	— —	1 —	— —	— —	— 2
B21 Diabetes Mellitus	M F	3 12	— —	— —	— —	— —	— —	1 —	— 1	1 —	1 2	— 6	— 3
B46(1) Endocrine etc., Diseases	M F	— 1	— —	— —	— —	— —	— —	— —	— —	— —	— 1	— —	— —
B23 Aneamias	M F	— 5	— —	— —	— —	— —	— —	— —	— —	— —	— —	— 2	— 3
B46(2) Other Diseases of Blood, etc.	M F	1 —	— —	— —	— —	— —	— —	1 —	— —	— —	— —	— —	— —
B46(3) Mental Disorders	M F	3 2	— —	— —	— —	— —	— —	— —	— —	— —	— —	1 —	2 2
B24 Meningitis	M F	1 1	— —	— —	— —	— —	— —	— —	— —	— —	— —	1 1	— —
B46(4) Multiple Sclerosis	M F	1 1	— —	— —	— —	— —	— —	— —	— —	— —	— 1	— —	— —
B46(5) Other Diseases of Nervous System	M F	2 5	— —	— —	— —	— —	— —	— —	— —	— 2	1 —	— 1	1 2
B26 Chronic Rheumatic Heart Disease	M F	3 12	— —	— —	— —	— —	— —	— —	— —	— —	— 3	1 3	2 6
B27 Hypertensive Disease	M F	10 12	— —	— —	— —	— —	— —	— —	— 1	— —	2 2	3 —	5 9
B28 Ischaemic Heart Disease	M F	203 190	— —	— —	— —	— —	— —	2 —	3 1	22 3	44 11	63 49	69 126

REGISTRAR GENERAL'S SHORT LIST OF CAUSES OF DEATHS, 1971—continued

CAUSES OF DEATH	Sex	Total all Ages	Under 4 weeks	4 weeks under 1 yr.	Age in Years								
					1-4	5-14	15-24	25-34	35-44	45-54	55-64	56-74	75 +
B29 Other forms of Heart Disease	M F	44 59	— —	— 1	— —	— —	— —	— —	— 1	— —	8 1	12 13	24 43
B30 Cerebrovascular Disease ...	M F	76 139	— —	— —	— —	— —	1 —	— —	— —	2 1	7 7	28 31	38 100
B46(6) Other Diseases of Circula- tory System	M F	27 40	— —	— —	— —	— —	— —	1 —	— —	— —	1 2	5 6	20 32
B31 Influenza	M F	2 2	— —	— —	— —	— —	— —	— —	— —	— —	— —	2 —	— 2
B32 Pneumonia	M F	26 39	— —	1 —	— —	— —	— —	— —	— —	1 1	2 1	6 10	16 27
B33(1) Bronchitis and Emphysema	M F	41 15	— —	— —	— —	— —	— —	— —	— —	— 1	5 3	20 4	16 7
B33(2) Asthma	M F	— 3	— —	— —	— —	— —	— —	— —	— 1	— 1	— —	— 1	— —
B46(7) Other Diseases of the Respiratory System	M F	6 5	1 —	— —	— —	— —	— —	— —	— —	1 —	— —	— 1	4 4
B34 Peptic Ulcer	M F	7 4	— —	— —	— —	— —	— —	— —	— —	— —	1 —	3 1	3 3
B36 Intestinal Obstruction and Hernia... ..	M F	1 4	— —	— —	— —	— —	— —	— —	— —	— —	— —	— —	1 4
B37 Cirrhosis of Liver	M F	2 2	— —	— —	— —	— —	— —	— —	— —	— —	1 1	— 1	1 —
B46(8) Other Diseases of Digestive System	M F	3 11	— —	— —	— —	— —	— —	— —	— —	— 1	— 1	— 2	3 7
B38 Nephritis and Nephrosis ...	M F	3 3	— —	— —	— —	— —	— —	— —	— —	— —	— 1	1 —	2 2
B39 Hyperlasia of Prostate ...	M	3	—	—	—	—	—	—	—	—	1	—	2
B46(9) Other Diseases of Genito— Urinary System	M F	1 3	— —	— —	— —	— —	— —	— —	— 1	— —	— —	1 —	— 2
B46(10) Diseases of Skin, Sub- cutaneous Tissue	M F	1 —	— —	— —	— —	— —	— —	— —	— —	— —	— —	— —	1 —
B46(11) Diseases of Musculo- Skeletal System	M F	1 5	— —	— —	— —	— —	— —	— —	— —	— —	— —	— 2	1 3
B42 Congenital Anomalies ...	M F	5 2	2 1	1 —	— —	1 —	— —	1 —	— —	— —	— —	— 1	— —
B43 Birth Injury, Difficult Labour etc.	M F	4 4	4 4	— —	— —	— —	— —	— —	— —	— —	— —	— —	— —
B44 Other Causes of Perinatal Mortality	M F	3 3	3 3	— —	— —	— —	— —	— —	— —	— —	— —	— —	— —
B45 Symptoms and Ill Defined Conditions	M F	10 5	— —	— —	— —	— —	— —	— —	— —	— —	— —	2 —	8 5
BE47 Motor Vehicle Accidents ...	M F	8 11	— —	— —	— —	— —	3 —	1 —	1 —	2 1	— 5	1 1	— 4
BE48 All Other Accidents ...	M F	7 27	— —	1 —	— —	— —	— —	1 1	— —	1 —	— —	— 4	4 22
BE49 Suicide and Self Inflicted Injuries	M F	3 5	— —	— —	— —	— —	1 —	— —	1 —	— 1	— —	1 4	— —
BE50 All other External Causes ...	M F	3 4	— —	1 —	— —	— —	1 —	— —	1 1	— 1	— 1	— 1	— —
TOTAL ALL CAUSES	M F	652 771	10 8	5 1	— 1	1 1	8 —	8 1	8 13	44 22	105 77	205 183	258 464

PROPORTION OF DEATHS FROM PRINCIPAL CAUSES

CAUSE OF DEATH	1970		1971	
	Number	% of total deaths	Number	% of total deaths
Heart Disease including diseases of the circulatory system	599	40.26	600	42.16
Cancer	254	17.07	267	18.76
Cerebrovascular disease	222	14.92	215	15.11
Respiratory Diseases	263	17.67	139	9.77
Violence, including suicide	49	3.29	61	4.29
All Other Causes	101	6.79	141	9.91
Totals ...	1488	100.00	1423	100.00

DEATHS DUE TO VIOLENCE, Year 1971

Classification	Male	Female	Totals
Motor Vehicle Accidents	8	11	19
All other accidents	7	27	34
Suicide	3	5	8
Totals	18	43	61

Age Groups	0—15 yrs.		15—65 yrs.		65 and over	
	M.	F.	M.	F.	M.	F.
Motor Vehicle Accidents	0	0	7	6	1	5
All other accidents	1	0	2	1	4	26
Suicide & self inflicted injuries ...	0	0	2	1	1	4
Totals	1	0	11	8	6	35

DEATHS

Numbers and Rates per 1,000 population and per 1,000 births—years 1962—1971

Year	Popu- lation	Male	Female	Total	Rate per 1,000 Popu- lation	Cor- rected for Age and Sex	INFANTS						Pulm'ry Tuber- culosis	Rate per 1,000 Popu- lation	Other Forms T.B.	Rate per 1,000 Popu- lation
							Under One Year	Rate per 1,000 Births	Legiti- mate Births	Rate per 1,000 Legiti- mate Births	Illegiti- mate Births	Rate per 1,000 Illegiti- mate Births				
1962	80730	661	831	1492	17.24	12.69	22	21	22	22	—	—	4	0.05	—	—
1963	80160	702	800	1502	18.74	13.12	29	26	28	27	1	13	10	0.12	—	—
1964	80080	641	819	1460	18.23	12.76	21	19	20	19	1	14	7	0.09	1	0.01
1965	79980	662	758	1420	17.76	11.72	25	23	20	20	5	55	3	0.04	1	0.01
1966	80000	636	803	1439	17.99	12.23	27	24	25	24	3	26	4	0.05	—	—
1967	79710	685	794	1479	18.56	12.44	14	12	12	11	2	18	1	0.01	—	—
1968	79940	699	915	1614	20.19	13.53	28	25	24	23	4	32	—	—	—	—
1969	79430	671	859	1530	19.3	12.7	21	20	20	21	1	9	—	—	—	—
1970	83000	640	848	1488	17.9	11.6	15	14	12	13	3	28	1	0.01	—	—
1971	84870	652	771	1423	16.8	10.9	24	23	23	24	1	9	—	—	—	—

CANCER

Localisation of Disease and Number of Deaths for years 1962 to 1971

Site	1962	1963	1964	1965	1966	1967	1968	1969	1970	1971
Stomach and Duodenum	38	24	33	26	33	24	30	21	25	27
Lung Bronchus	61 (Male 43) (Female 15)	64 (Male 54) (Female 10)	45 (Male 33) (Female 12)	61 (Male 43) (Female 18)	52 (Male 42) (Female 10)	58 (Male 50) (Female 8)	55 (Male 49) (Female 6)	58 (Male 47) (Female 11)	51 (Male 32) (Female 19)	60 (Male 48) (Female 12)
Breast	31	26	18	25	26	30	25	21	28	28
Uterus	13	9	7	10	8	12	11	14	11	6
Other Sites	113	112	122	118	121	118	129	120	134	142
Leukaemia	6	7	9	7	11	8	9	12	5	4
Total Deaths From Cancer	262	242	234	247	251	250	259	246	254	267
Total Deaths All Causes	1492	1502	1460	1420	1439	1479	1614	1530	1488	1423
% of Cancer Deaths	17.56	16.11	16.03	17.40	17.44	16.90	16.05	16.08	17.07	18.76

MATERNAL MORTALITY FOR YEARS 1962 TO 1971

Year	No. of Live Births	No. of Live and Stillbirths	MATERNAL DEATHS RATES PER 1,000 LIVE AND STILLBIRTHS					
			Sepsis		Other Causes		Total	
			No.	Rate	No.	Rate	No.	Rate
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	—	—	—	—	—	—
1971	1066	1077	—	—	—	—	—	—

LIVE PREMATURE BIRTHS FOR YEAR 1971

Weight at birth	PREMATURE LIFE BIRTHS													PREMATURE STILL BIRTHS
	Born in hospital			Born at home or in a nursing home						Transferred to hospital on or before 28th day				
				Nursed, entirely at home or in a nursing home			Died							
	Total births (1)	within 24 hours of birth (2)	In 1 and under 7 days (3)	in 7 and under 28 days (4)	Total births (5)	within 24 hours of birth (6)	in 1 and under 7 days (7)	in 7 and under 28 days (8)	Total births (9)	within 24 hours of birth (10)	in 1 and under 7 days (11)	in 7 and under 28 days (12)	Born In hospital (13)		at home or in a nursing home (14)
2 lb 3 oz or less	4	1	—	—	—	—	—	—	—	—	—	—	2	—
Over 2 lb 3 oz. up to and including 3 lb. 4 oz.	12	2	—	—	—	—	—	—	—	—	—	—	2	—
Over 3 lb. 4 oz. up to and including 4 lb. 6 oz.	16	7	—	1	2	1	—	—	—	—	—	—	1	—
Over 4 lb 6 oz. up to and including 4 lb. 15 oz.	20	2	—	—	1	1	—	—	—	—	—	—	3	—
Over 4 lb. 15 oz. up to and including 5 lb. 8 oz.	34	1	—	—	—	—	—	—	—	—	—	—	—	—
Totals	86	13	—	1	3	2	—	—	—	—	—	—	8	—

INFANT MORTALITY
Number of Deaths from Stated Causes at Various Periods
Under 1 Year of Age for Year 1971

CAUSE OF DEATH	Under 1 day	1 day	2 days	3 days	4 days	5 days	6 days	7-13 days	14-20 days	21-28 days	28 days -2 mths.	2 mths.	3 mths.	4 mths.	5 mths.	6 mths.	7 mths.	8 mths.	9 mths.	10 mths.	11 mths.	Total under 1 year
Asphyxia	1	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	2
Atelectosis	5	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	5
Congenital Abnormalities	1	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	2
Prematurity	3	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	4
Broncho-Pneumonia	1	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	2
Respiratory Failure	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	1
Hydrocephalus	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	1
Intra-Ventricular Haemorrhage	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1
Acute Myocarditis	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	1
Atypical Pneumonia	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	1
Septicaemia	—	—	—	—	—	—	—	2	—	—	—	—	—	—	—	—	—	—	—	—	—	2
Cerebral Agensis	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	1
Medullary Failure	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	1
TOTALS	11	—	2	—	1	—	—	4	—	—	1	2	2	—	—	—	—	—	—	—	1	24

CONGENITAL MALFORMATIONS

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

The classification of these cases is shown below:—

						LIVE		STILLBORN		DEATHS	
						M	F	M	F	M	F
CENTRAL NERVOUS SYSTEM											
	Hydrocephalus	...	...	...	...	1	—	—	—	—	—
	Anencephalus	...	...	...	...	—	—	2	—	—	—
LIMBS											
	Talipes	...	...	...	...	2	—	—	—	—	—
	Absence of fingers	...	...	...	...	1	—	—	—	—	—
	Dislocation of hip	...	...	...	...	—	1	—	—	—	—
	Deformity of hand	...	...	...	...	1	—	—	—	—	—
HEART AND GREAT VESSELS											
	Congenital heart defect	...	...	...	...	—	2	—	—	—	1
OTHER MALFORMATIONS											
	Unspecified congenital malformations	...	...	...	...	—	1	—	—	—	1
	Mongolism	...	...	...	...	1	—	—	—	—	—

Section II

PERSONAL HEALTH SERVICES

PROPOSED HEALTH CENTRE, CHURCHTOWN

Loan sanction was received from the Department of Environment and work commenced in June, on the new Churchtown Health Centre which will be the base for the practices of seven local family doctors and will serve about 18,000 patients.

This Centre will also incorporate certain of the Local Authority's Services such as a Child Health Clinic, Health Visitors, Home Nurses, etc.

Meetings were held during the year and attended by representatives of the Executive Council and Local Health Authority, together with the General Practitioners concerned.

Much progress had been made by the end of the year.

CARE OF MOTHERS AND YOUNG CHILDREN

Ante-Natal Care

Ante-Natal Services are provided either at the Christiana Hartley Maternity Hospital or in Family Doctor's 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 1971 was 944 as compared with 848 during 1970.

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 1971

	Ante-Natal	Post-Natal
No. of women who attended for the first time during the year:		
St. Katharine's Maternity Hospital	126	458
Christiana Hartley Maternity Hospital	14	13
District cases	1	—
Attended Physiotherapy only	8	4
Total No. of cases	149	475
No. of attendances during the year... ..	722	525
No. of sessions held by physiotherapists during the year ...	136	140

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 Chief 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 1971 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 purpose-built Centres. The ones still to be dealt with in this way are those which are held in rented Church premises in Derby Road and Marshside Road.

Statistics for Year 1971

	CHILD HEALTH CENTRE							TOTAL
	Marsh-side	Hamp-ton Road	Poul-ton Road	Lincoln House	Cros-sens	Derby Road	Ains-dale	
No. of children who attended during the year who have not attended previously this year:								
Born in 1971	102	191	184	124	90	140	107	938
1970	124	186	161	158	85	111	174	999
1966-69	192	290	323	438	135	179	465	2,022
TOTALS	418	667	668	720	310	430	746	3,959
Total attendances during the year	2,312	3,903	4,309	3,643	1,778	2,480	2,525	20,950
No. of sessions during the year	52	103	102	103	50	50	98	558
Average attendances per session	44	38	22	35	35	50	26	37
No. of children referred for special treatment or advice as a result of a medical examination ...	12	47	1	26	8	3	7	104
No. of children placed on "at risk" register	12	20	44	21	7	7	12	123
No. of sessions by:								
Medical Officers ...	52	99	101	102	49	50	98	551
General Practitioners employed on sessional basis	—	—	—	—	—	—	—	—
Hospital Medical Staff	—	—	—	—	—	—	—	—
Health Visitors/School Nurses (with doctor)	103	224	213	208	100	150	231	1,229
Health Visitors ...	—	4	1	1	1	—	—	7

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

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	103	10
Subsequent visits	90	4
Total visits	193	14
Number of additional courses of treatment other than the first course commenced during year ...	44	—
Number of fillings	165	4
Teeth filled	158	4
Teeth extracted	107	14
General anaesthetics given	48	4
Emergency visits by patients	3	—
Patients X-Rayed	—	—
Patients treated by scaling and/or removal of stains from the teeth (prophylaxis)	3	—
Teeth otherwise conserved	27	—
Number of courses of treatment completed during the year	133	5
PROSTHETICS		
Patients supplied with full upper or full lower dentures (first time)	—	—
Patients supplied with other dentures	—	—
Number of dentures supplied	—	—
General anaesthetics administered by Dental Officers	15	
INSPECTIONS		
Number of patients given first inspections during the year	339	9
Number of patients who required treatment	93	8
Number of patients who were offered treatment	93	8
Number of patients re-inspected during year... ..	84	—
SESSIONS		
Number of Dental Officer sessions devoted to Maternity and Child Welfare patients	67	

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 first quarter, the Moral Welfare Worker dealt with 25 new cases and the Health Committee paid the maintenance costs in voluntary homes for 3 mothers during the ante and post-natal period.

Details of the 25 new cases are as follows:—

1st Pregnancies	16
2nd Pregnancy	1
Married, 1st Illegitimate child	1
Married, 2nd Illegitimate child	1
Family Problems	2
Financial problem	1
Accommodation problems	3

National Welfare Foods

Statistics for Year 1971

Quantities Sold	National Dried Milk	Orange Juice	Cod Liver Oil	Vitamin A & D Tablets	Vitamin A, D & C Drops
	Tins	Bottles	Bottles	Packets	Bottles
HEALTH DEPARTMENT—					
Counter Issues	240	5,690	62	1,161	257
Issues to Health Service Institutions	—	—	—	—	—
Issues to Day Nurseries ...	—	90	72	—	—
Total sales from Health Department	240	5,780	134	1,161	257
CHILD HEALTH CENTRES—					
Ainsdale	6	5,680	50	251	267
Lincoln House	51	2,595	52	157	230
Crossens	57	1,092	16	28	148
Poulton Road	106	1,848	29	165	225
Hampton Road	21	2,377	42	255	221
Marshside Road	8	2,148	27	166	202
Derby Road	73	1,163	27	71	215
Total sales from Child Health Centres	322	16,903	243	1,093	1,508
GRAND TOTALS	562	22,683	377	2,254	1,765

The issue of Cod Liver Oil was discontinued during the year and of Orange Juice at the end of the year. These items were replaced by A.D.C. drops.

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 1971

No. of confinements attended by district midwives:								
Doctor not booked	...	...	...	...	...	...	...	6
Doctor booked	...	...	...	...	...	...	...	10
TOTAL								16
Premature Babies (5½ lb. or under								
No. born at and being nursed at home	...	...	...	...	...	...	...	—
No. born at home and transferred to hospital	...	...	...	...	...	...	...	—
TOTAL								—
No. of mothers delivered in hospitals and other institutions but discharged and attended by district midwives before tenth day								944
No. of home visits made by district midwives								4280
No. of supervisory visits								—

Midwives in Private Practice

There were no notifications of intention to practise on the district received during the year.

Maternity Nursing Homes—There were no deliveries in private nursing homes during the year.

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

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

HEALTH VISITING

The present establishment consists of a Chief Nursing Officer, 1 Deputy Principal Nursing Officer, 1 Assistant Principal Nursing Officer, 4 School Nurses, 1 Tuberculosis Health Visitor, 2 Nurses for Elderly People, 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 medico-social problems so will the need for attachment of Health Visitors to general practitioners' surgeries and hospital clinics grow. Some of the Health Visitors' best work is better known to the public than to the majority of the medical profession because it is carried out in the Child Health Centres where few general practitioners or hospital doctors work.

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 1971

HOME VISITS										
Expectant Mothers	...	...	...	...	...	...	...	...	...	694
Children under 5 years	...	...	...	...	...	...	...	...	...	18,617
Adults (excluding expectant mothers and tuberculosis)										
Under 65	...	...	...	...	...	...	...	...	...	839
65 and over	...	...	...	...	...	...	...	...	...	7,420
Others	...	...	...	...	...	...	...	...	...	1,930
Total No. of effective visits made by Health Visitors/School Nurses										29,500

Sessions attended by Health Visitors and Nurses									No. of Sessions
Local Health Authority									
Child Health Centres	...	...	...	...	...	...	...	...	1,249
Miscellaneous	...	...	...	...	...	...	...	...	579
Mothercraft	...	...	...	...	...	...	...	...	62
B.C.G. and Heaf Testing	...	...	...	...	...	...	...	...	56
Mothers Evening Clubs	...	...	...	...	...	...	...	...	38
Hearing Tests	...	...	...	...	...	...	...	...	8
Cytology at Health Department	...	...	...	...	...	...	...	...	8
Hospitals									
Geriatric	...	...	...	...	...	...	...	...	264
Paediatric	...	...	...	...	...	...	...	...	98
Venereal Diseases	...	...	...	...	...	...	...	...	11
Ante-Natal	...	...	...	...	...	...	...	...	13
General Practitioners									
G.P.'s Surgeries	...	...	...	...	...	...	...	...	138
G.P.'s Cytology—at Child Health Centre	...	...	...	...	...	...	...	...	18
G.P.'s Cytology—Surgery	...	...	...	...	...	...	...	...	1
G.P. at Child Health Centre	...	...	...	...	...	...	...	...	1

Screening for Phenylketonuria by 'Guthrie' blood test.			
No. of Tests	No. positive to screening Tests	Results of further investigation	
		Phenylketonuria confirmed	Phenylketonuria not confirmed
1052	None	None	None

HOME NURSING

The staff of the Home Nursing Service at the end of the year was a Deputy Superintendent, 1 Senior District Nurse, 19 State Registered Nurses, 6 State Enrolled Nurses and 2 Bath Attendants.

Statistics for year 1971

Total no. of new patients visited during the year (i.e. patients who have not been previously visited this year)	3,084
No. of patients who were aged:	
under 5 years at time of first visit this year	55
over 65 years at time of first visit this year	1,899
Total no. of visits made by nurses during the year	85,577

Injection Clinics 1971

	Local Authority Premises			Doctors' Surgeries			
	Hoghton Street	Lincoln House Child Health Centre	Hampton Road Child Health Centre	66 Station Road	21 Station Road	2 Leaming-ton Road	2 Leicester Street
No. Clinics	98	53	53	106	12	171	32
No. of attendances made by patients	1904	192	143	178	13	718	84
Average No. of patients attending per Clinic Session	19.4	3.6	2.7	1.6	1.1	4.2	2.6

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

In an effort to obtain better liaison, Nurses are now working from individual general Practitioner case loads.

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

During the year computerisation of part of the vaccination and immunisation scheme was commenced for all children born on or after the 1st of October 1971. This method is expected to produce a higher percentage of protected children in the town and in time it is hoped to extend these arrangements to other vaccination and immunisation records.

The new schedule, shown below, allows for immunisation to start at six months of age instead of three months as previously.

Because of instructions received from the Department of Health and Social Security in July 1971, vaccination against smallpox was discontinued as a routine procedure for all children. Those travelling abroad to endemic areas are of course still advised to be vaccinated.

Vaccination against measles which was introduced in 1968 continues to have a rather disappointing acceptance rate although it has improved this year.

The response to German Measles (Rubella) vaccination which was introduced last year continues to be excellent. All parents of 12 and 13 year old girls have had the opportunity of protecting their daughters before they become of child-bearing age. It is a fact that if an expectant mother in the first weeks of pregnancy catches German measles there is a strong possibility of the developing baby having some form of deformity. Most parents realise this danger and have shown a great deal of interest in vaccination. Next year and each ensuing year protection will be offered to 11 year old girls.

VACCINATION SCHEDULE

Recommended Age	Timing of Doses	Vaccine
During first year of life preferably commencing at 6 months.		Diphtheria / Tetanus / Whooping Cough and Oral Polio.
	8 weeks later	Diphtheria / Tetanus / Whooping Cough and Oral Polio.
	6 months later	Diphtheria / Tetanus / Whooping Cough and Oral Polio
During second year of life preferably at 15 months.	1 month after completion of above.	Measles.
At 4½ years or school entry.		Diphtheria / Tetanus and Oral Polio (Booster doses)
At 15 years or on leaving School.		Tetanus, Polio (Booster doses).

VACCINATION AND IMMUNISATION

Statistics for year 1971

Smallpox

The following smallpox vaccinations were carried out. In accordance with national policy, routine smallpox vaccination was discontinued from August.

Age at date of Vaccination	No. of persons aged under 16 Vaccinated (or revaccinated during period)		Number of cases specially reported during period		
	Number vaccinated	Number revaccinated	Generalised Vaccinia	Post-Vaccinal Encephalomyelitis	Death from other complications of vaccination
0-3 months	—	—	—	—	—
3-6 months	2	—	—	—	—
6-9 months	3	—	—	—	—
9-12 months	2	—	—	—	—
1	283	—	—	—	—
2-4	89	7	—	—	—
5-15	16	48	—	—	—
TOTALS	395	55	—	—	—

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

Type of vaccine or dose	Year of birth					Others under age 16	Total under age 16
	1971	1970	1969	1968	1964-67		
1 Quadruple:— Diphtheria, Whooping Cough, Tetanus and Poliomyelitis ...	—	—	—	—	—	—	—
2 Triple:— Diphtheria, Whooping Cough and Tetanus ...	25	620	218	18	18	8	907
3 Diphtheria/Whooping Cough ...	—	—	—	—	—	—	—
4 Diphtheria/Tetanus...	—	1	2	2	3	31	39
5 Diphtheria ...	—	—	—	—	—	1	1
6 Whooping Cough ...	—	1	1	—	—	—	2
7 Tetanus ...	—	—	—	—	—	—	—
8 Salk (Poliomyelitis) ...	—	—	—	—	—	—	—
9 Sabin (ditto Oral) ...	18	666	186	25	25	13	933
10 Measles ...	—	397	295	118	111	22	943
11 Rubella ...	—	—	—	—	—	1064	1064
12 Lines 1+2+3+4+5 (Diphtheria) ...	25	621	20	20	21	40	947
13 Lines 1+2+3+6 (Whooping cough) ...	25	621	219	18	18	8	909
14 Lines 1+2+4+7 (Tetanus) ...	25	621	220	20	21	39	946
15 Lines 1+8+9 (Polio)	18	666	186	25	25	13	933

Reinforcing Doses

Type of vaccine or dose	Year of birth					Others under age 16	Total under age 16
	1971	1970	1969	1968	1964-67		
1 Quadruple:-Diphtheria Whooping Cough, Tetanus and Poliomyelitis	—	—	—	—	—	—	—
2 Triple:-Diphtheria, Whooping Cough and Tetanus	—	4	3	2	201	12	222
3 Diphtheria/Whooping Cough	—	—	—	—	—	—	—
4 Diphtheria/Tetanus ...	—	1	—	3	536	47	587
5 Diphtheria	—	—	—	—	—	4	4
6 Whooping Cough ...	—	—	—	—	—	—	—
7 Tetanus	—	—	—	—	1	3	4
8 Salk (Poliomyelitis) ...	—	—	—	—	—	—	—
9 Sabin (Poliomyelitis—Oral)	—	2	4	9	726	64	805
10 Lines 1+2+3+4+5 (Diphtheria)	—	5	3	5	737	63	813
11 Lines 1+2+3+6 (Whooping cough) ...	—	4	3	2	201	12	222
12 Lines 1+2+4+7 (Tetanus)	—	5	3	5	738	62	813
13 Lines 1+8+9 (Polio)	—	2	4	9	726	64	805

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 1967 to 1971

	1967	1968	1969	1970	1971
No. of patients	42,016	41,824	39,371	35,840	38,717
Other work	1,208	1,288	1,467	1,286	1,702
TOTALS	43,224	43,112	40,838	37,126	40,419
No. of miles	150,758	141,193	138,743	139,477	145,244

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 rails	Elsan Closets
Bath Mats	Enuresis Alarms
Bath Seats	Fire Guards
Beds—Cardiac	Incontinence Pads and Liners
Beds—Hospital	Helping Hands
Beds—Ripple	Lifting Gear
Bed Cradles	Polythene Sheets
Bed Pans	Portable Oxygen Apparatus
Bells	Rollators
Cantilever Table	Spastic chair
Commodes	Toilet Aids
Cot Sides	Urinals
Crutches	Walking Sticks
Dunlopillo mattresses	Walking Frames
	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 1971 nursing equipment was supplied to 1,168 patients.

Incontinence Pads

During 1971, 44,957 pads and 40,592 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 one of the nurses responsible for the geriatric work. No charge is made to patients who are receiving supplementary pensions, but a charge of 50p per week is made to other patients; this charge may be reduced or cancelled where there is financial hardship.

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 service has been of great help, both to the patients and relatives and also to the district nurses, and has made it possible for a number of these patients to be nursed at home when they would otherwise have had to have been admitted to hospital.

Chiropody for the Elderly

The chiropody service for the elderly continued to be provided by the Southport Old People's Welfare Committee as agents of the Local Health Authority. The service is available for Southport residents who are 60 years of age or over and who cannot afford to pay for private treatment. Those who are receiving supplementary pensions pay 15p per treatment; all other patients pay 25p for treatments at the clinic at 44 Hoghton Street and 30p for treatments in their own homes or in institutions. Home treatments are only 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 session at 44 Hoghton Street are held on Mondays, Tuesdays, Wednesdays and Thursdays and 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 1970 and 1971

	Year 1971	Year 1970
No. of clinics held	416	440
No. of treatments for patients at 44 Hoghton Street ...	3,578	3,684
Average No. of treatments per clinic session	8.6	8.4
No. of treatments in patients' own homes	—	—

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 1971, 8 physically handicapped persons made 75 attendances at Mr. Rogans' clinic. No expectant mothers were referred during the year.

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 health visitors seemed to be required.

The members of the health visitors staff attended certain hospital clinics and these arrangements have formed an invaluable link between the hospital service and the home visiting. The hospital clinics concerned are as follows:—

Mothercraft classes 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.

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.

Cervical Cytology

During 1971, 12 Clinics were held by the Local Authority; 123 women attended and 123 smears were submitted for testing, all the results proving negative.

At the Family Planning Association's Clinic in Ash Street 1,589 smears were taken and of these 1 was found to be positive.

Family Doctors sent 263 smears to the Department for examination by the consultant pathologist.

Section III

SERVICES TRANSFERRED TO SOCIAL SERVICES AND EDUCATION DEPARTMENTS

SERVICES TRANSFERRED TO SOCIAL SERVICES AND EDUCATION DEPARTMENTS

As a result of the Local Authorities Social Services Bill, 1970, the Services contained in this section were transferred to the new Social Services Department on 1st April 1971 and in consequence the statistics relate to the first three months of the year only.

Included in this Section are statistics relating to the Junior Training Centre which was transferred to the Education Department on 1st April 1971.

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 35p per hour but this charge may be reduced or cancelled, where there is financial hardship.

Statistics for 3 months ended 31st March, 1971

over on	Help for persons					Total No. of cases	Total hours worked by helps during the quarter
	aged 65 or over on first visit in 1971	aged under 65 on first visit in 1971					
		Chronic sick and tuberculous	Mentally disordered	Maternity	Others		
Number of cases	681	41	1	2	20	745	29,164

No. of Staff employed at 31st March 1971	Whole time	Part time		Total Whole time equivalent
		No.	Whole time equivalent	
Home Helps	1	129	59	60
No. of visits to homes by Organiser during the quarter				329
No. of persons interviewed at office during the quarter				184

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 was only 1 casual sickroom Helper 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 30p per hour but this may be reduced or cancelled having regard to the financial circumstances of the person concerned.

During the three months ended 31st March, 1971, sickroom help was provided for 2 patients, as compared with 2 in the corresponding period last year. The number of hours worked by the helps during this period was 41.

Laundry Service for the Elderly

During the first quarter 35 elderly persons were provided with a laundry service.

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, normally between Easter and the end of the year.

No patients were sent for convalescence during the period 1st January to 31st March, 1971.

Mental Illness

Statistics for 3 months ended 31st March, 1971

	Males	Females	Total
Patients:			
No. of admissions and re-admissions to hospital (Mental Health Act, 1959):			
— as informal patients (Sec. 5)	16	16	52
— for observation (Sec. 25)	10	11	21
— for treatment (Sec. 26)	—	1	1
— emergency application (Sec. 29)	6	9	15
— by court order (Sec. 60)	—	—	—
Total no. of admissions and re-admissions ...	32	37	69
No. of patients already in hospital under compulsory detention accepted as informal patients	10	10	20
No. of patients transferred from the Ormskirk & District General Hospital to other hospitals	—	—	—
No. of day patients taken to Ormskirk & District General Hospital	4	4	8
No. of patients referred to Health Department re acute mental illness	46	73	119
After-Care Clinic:			
No. of Consultant Psychiatrist's After-Care Clinics at 44 Hoghton Street	—	—	11
No. of patients seen at After-Care Clinics	3	58	61
Work done by Mental Welfare Officers:			
No. of home visits re acute mental illness	75	120	195
No. of domiciliary after-care visits	57	93	150
No. of visits to patients in hospital	29	61	90
No. of patients interviewed at the Office	37	48	85
No. of visits to the Psychiatric Clinic at the Southport Infirmary	—	—	28

Mental Illness

Occupational Therapy Work.

No. of patients						
No. on register at beginning of the year	...	...	...	...	...	44
No. added during the first quarter	...	...	...	...	...	4
						48
No. deducted during the first quarter	...	...	...	...	...	13
No. on register at 31st March, 1971	...	...	...	...	...	35
No. of Home Visits	...	...	...	...	...	22
Sessions						
Psychiatric Social Club and Outings	...	...	...	...	...	12
Craftwork—Lincoln House Centre	...	...	...	...	...	12
Craftwork—52 Hoghton Street	...	...	...	...	...	23
Industrial Therapy—52 Hoghton Street	...	...	...	...	...	38
Singing Group—52 Hoghton Street	...	...	...	...	...	13
Outings	...	...	...	...	...	—
Total No. of Sessions attended by Staff	...	...	...	...	...	98
No. of attendances made by patients						
Psychiatric Social Club and Outings	...	...	...	...	...	176
Craftwork—Lincoln House Centre	...	...	...	...	...	43
Craftwork—52 Hoghton Street	...	...	...	...	...	168
Industrial Therapy—52 Hoghton Street	...	...	...	...	...	302
Singing Group—52 Hoghton Street	...	...	...	...	...	159
Outings	...	...	...	...	...	—
Total No. of Attendances...	...	...	...	...	...	848

Mental Subnormality

Statistics for 3 months ended 31st March, 1971

Number of patients notified to the Department:—							
from the Local Education Authority under Sec. 57 Education Act, 1944 (amended)							—
from other sources							1
Total							1
Number of patients admitted to hospital:—							
for permanent care							—
for short term care							4
Total							4
Number of patients placed under Guardianship							—
Work done by Mental Welfare Officers:—							
Number of patients seen at the Office							79
Number of domiciliary visits							91
Number of visits to the Training and Industrial Centre and Residential Homes							43

*Junior Training Centre (Sandbrook School)

Number on Register at beginning of year							41
Number added to Register during first quarter							2
							43
Number taken off Register during first quarter							4
Number on Register at 31st March, 1971							39
Number of sessions held during period							60
Number of attendances at Centre during period							1947
Average attendance per session							32·4

*Transferred to Education Department on 1st April, 1971.

Adult Training and Industrial Centre

Number of cases on Register at beginning of year	...	...	...	44
Number of cases added to Register during first quarter	...	...	...	5
				49
Number of cases taken off Register during first quarter	...	...	...	3
				46
Number of cases on Register at 31st March, 1971	...	...	...	46
Number of sessions held during period	...	...	...	62
Number of attendances at Centre during period	...	...	...	2375
Average attendance per session	...	...	...	38

Social Club for Mentally Subnormal Adults

The evening social club continued with great success and 7 meetings were held during the first quarter with 187 attendances. The activities included dancing, film shows, bingo sessions and birthday celebration parties.

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 12½p minimum and £1 maximum from 1st September, 1970.

The Nursery Nurses Training Scheme was continuing at the date of transfer in conjunction with the Education Committee with 4 students who were appointed for the two year course commencing in September, 1970.

Statistics for 3 months ended 31st March, 1971

	Southport	Bedford Park	Totals
Number of places provided	60	40	100
Total attendances	3699	2158	5857
Number of days open	63	63	63
Average daily attendance	59	34	93

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 the requirements of the 1948 Act to be applied to premises and persons who had previously been exempt from registration and also increased the amount of the fine to be paid by those who did not comply with the provisions of the amended Act. Briefly the amended Act requires application for registration to be made by persons using premises (other than those used wholly or mainly as private dwellings) in which children under five years of age are received for a total of two hours or more in the day and persons who, in their own homes and for reward, look after children under five years old to whom they are not related, for similar periods or for any longer periods not exceeding six days in any one week.

The numbers of registered places at the time of transfer were:—

	<i>No. of places</i>
Day Nurseries	119
Play Groups	165
Child Minders	73
Total	<u>357</u>

The following report was prepared by the Committee on the Control of Infectious Disease, and is submitted to the Board of Health for their consideration and action. The Committee has the honor to acknowledge the assistance and cooperation of the various departments of the City of New York, and the many individuals and organizations who have aided in the work of the Committee. The Committee has the honor to acknowledge the assistance and cooperation of the various departments of the City of New York, and the many individuals and organizations who have aided in the work of the Committee.

Section IV

CONTROL OF INFECTIOUS DISEASE

DISEASE		1910		1911		1912		1913		1914		1915		1916		1917		1918		1919		1920	
No. of cases		No. of deaths		No. of cases		No. of deaths		No. of cases		No. of deaths		No. of cases		No. of deaths		No. of cases		No. of deaths		No. of cases		No. of deaths	
Typhoid		100		120		150		180		200		220		250		280		300		320		350	
Dysentery		50		60		70		80		90		100		110		120		130		140		150	
Scarlet fever		30		40		50		60		70		80		90		100		110		120		130	
Measles		20		30		40		50		60		70		80		90		100		110		120	
Whooping cough		10		20		30		40		50		60		70		80		90		100		110	
Total		190		230		270		310		350		390		430		470		510		550		590	

TUBERCULOSIS

New Cases and Mortality

The number of new cases of tuberculosis which came to the notice of the Department during the year was 9; all these were found to be suffering from pulmonary disease.

Treatment Clinic

The Southport and District Hospital Management Committee is responsible for the organisation and administration of the tuberculosis treatment clinics.

The 9 new cases came to the notice of the Clinic in the following ways:—

By primary notifications	...	...	...	...	...	4
By transfers from other areas	...	...	...	...	...	5
Lost sight of cases returned	...	...	...	...	...	—
Total						9

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 1971 was 105, and 6 of these patients were found to have sputum containing tubercle bacilli. During the year, 49 treatment clinics were held and 178 visits were made by patients.

Statistics for Year 1971

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

Statistics for Years 1962 to 1971

Year	No. of New Patients		No. of Deaths	
	Respiratory	Non-Respiratory	Respiratory	Non-Respiratory
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	—
1971	9	—	—	—

Contacts

During the year 256 attendances were made by contacts of patients; the total number of X-ray examinations of contacts was 211. No contacts were found to be suffering from tuberculosis in 1971.

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:—

Tuberculous patients	...	...	...	...	...	157
To contacts of tuberculous patients	...	...	...	...	...	129
To other chest Patients	...	...	...	...	...	4
Total Visits						290

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 1971, the Health Visitor made 78 attendances at the tuberculosis clinics.

Immigration

17 immigrants coming to live in Southport were notified to the Local Authority by Port Health Authorities.

16 of 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 1971 the Care Committee provided considerable financial and other assistance to patients and their families.

B.C.G. Vaccination against Tuberculosis

Statistics for Years 1962 to 1971

Year	1962	1963	1964	1965	1966	1967	1968	1969	1970	1971
No. Vaccinated: At B.C.G. Clinics	34	35	28	23	30	27	26	8	22	19
Babies seen by the Consultant Paedia- trician	32	20	37	18	14	15	17	20	19	13
School Children ...	872	716	728	710	739	749	727	803	774	832
TOTALS	938	771	793	751	783	791	770	831	815	864

TUBERCULOSIS

Treatment Clinic—Statistics for years 1967 to 1971

	1967			1968			1969			1970			1971		
	Pul.	Non-Pul.	Total	Pul.	Non-Pul.	Total	Pul.	Non-Pul.	Total	Pul.	Non-Pul.	Total	Pul.	Non-Pul.	Total
1. No. of patients on register at beginning of year	121	14	135	111	7	118	103	10	113	93	12	105	100	10	110
2. No. of patients added during the year:															
(a) primary notifications of new cases	12	5	17	6	3	9	9	2	11	12	1	13	4	—	4
(b) transfers from other areas	7	—	7	3	—	3	4	—	4	5	1	6	5	—	5
(c) lost sight of cases returned	—	—	—	—	—	—	1	—	1	—	—	—	—	—	—
TOTALS (1)	140	19	159	120	10	130	117	12	129	110	14	124	109	10	119
3. No. of patients deleted during the year:															
(a) died (from Tuberculosis)	1	—	1	—	—	—	—	—	—	—	—	—	—	—	—
(b) transferred to other areas	3	1	4	4	—	4	2	—	2	4	—	4	4	—	4
(c) recovered	18	9	27	5	—	5	20	—	20	1	4	5	6	—	6
(d) lost sight of or refused further assistance	—	1	1	1	—	1	—	—	—	1	—	1	—	—	—
(e) tuberculosis not primary cause of death	7	1	8	7	—	7	2	—	2	4	—	4	4	—	4
TOTALS (2)	29	12	41	17	—	17	24	—	24	10	4	14	14	—	14
4. No. of patients on register at the end of year (i.e., totals (1) less totals (2)	111	7	118	103	10	113	93	12	105	100	10	110	95	10	105
5. Summary of new patients found during the year:															
(a) Primary notification of new cases	12	5	17	6	3	9	9	2	11	12	1	13	4	—	4
(b) Transfers from other areas	7	—	7	3	—	3	4	—	4	5	1	6	5	—	5
(c) Patients found from death returns (figures not included in items (1) to (4) above)	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
(d) Lost sight of cases returned	—	—	—	—	—	—	1	—	1	—	—	—	—	—	—
TOTALS	19	5	24	9	3	12	14	2	16	17	2	19	9	2	9

VENEREAL DISEASES

At the end of the year, 286 new cases were under treatment at the clinic, as compared with 132 cases at the end of 1970. During 1971, non-venereal cases made 988 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 1971

No. of new Patients						Male	Female	Total
Syphilis	...	...	...	...	...	Nil	Nil	Nil
Gonorrhoea	...	...	...	...	...	24	17	41
Non-Venereal Infections	...	...	...	...	...	163	82	245
Totals ...						187	99	286

Statistics for Years 1962 to 1971

YEAR	No. of patients and attendances at clinics							
	SYPHILIS					GONORRHOEA		
	Number of new cases during the year			Number of cases on register at end of year	Total number of attendances during year	Number of new cases during the year	Number of cases on register at end of year	Total No. of attendances during year
	Congenital	Others	Total					
1962	—	5	5	47	922	15	6	71
1963	—	4	4	50	1105	16	8	117
1964	1	3	4	45	611	27	7	143
1965	1	1	2	42	263	22	13	110
1966	—	3	3	32	148	14	2	72
1967	—	7	7	28	113	13	7	50
1968	—	—	—	23	94	27	15	117
1969	—	2	2	23	55	49	31	156
1970	—	4	4	16	107	63	45	286
1971	—	—	—	17	64	41	48	152

INFECTIOUS DISEASES

Statistics for year 1971

NOTIFIABLE DISEASE	NUMBER OF CASES NOTIFIED AGES IN YEARS							
	At All Ages	Un- der 1	1 to 5	5 to 15	15 to 25	25 to 45	45 to 65	65 Up- wards
Dysentery	19	1	6	6	2	4	—	—
Food Poisoning	3	—	2	—	1	—	—	—
Measles	124	10	49	63	2	—	—	—
Scarlet Fever	3	—	—	3	—	—	—	—
Tuberculosis	6	—	—	1	—	—	4	1
Whooping Cough	16	—	10	6	—	—	—	—
Infective Jaundice	16	—	1	4	2	6	3	—
TOTALS	187	11	68	83	7	10	7	1

INFECTIOUS DISEASES
Number of Notified Cases and number of Deaths for the years 1962 to 1971

NOTIFIABLE DISEASE	NUMBER OF CASES OF INFECTIOUS DISEASE NOTIFIED										DEATHS FROM INFECTIOUS DISEASE											
	1962	1963	1964	1965	1966	1967	1968	1969	1970	1971	Total Cases for 10 years 1962 to 1971	1962	1963	1964	1965	1966	1967	1968	1969	1970	1971	Total Deaths during 10 years 1962 to 1971
Chicken Pox	697	333	956	258	665	587	376	267	—	—	4139	—	—	—	—	—	—	—	—	—	—	—
Dysentery	69	4	2	18	3	11	1	2	—	19	129	—	—	—	—	—	—	—	—	—	—	—
Encephalitis	1	—	2	1	—	—	—	—	—	—	4	—	—	—	—	—	—	—	—	—	—	—
Erysipelas	6	2	4	2	1	—	3	—	—	—	18	—	—	—	—	—	—	—	—	—	—	—
Food Poisoning	3	28	2	2	1	—	1	3	6	3	49	—	—	—	—	—	—	—	—	—	—	—
German Measles	2369	73	154	160	278	282	184	59	—	—	3559	—	—	—	—	—	—	—	—	—	—	—
Infective Jaundice	—	—	—	—	—	—	3	27	20	16	66	—	—	—	—	—	—	—	—	—	—	—
Malaria	—	—	—	—	—	—	—	—	2	—	2	—	—	—	—	—	—	—	—	—	—	—
Measles	546	482	980	570	581	807	519	167	108	124	4884	—	—	—	—	—	—	—	—	—	—	—
Meningococcal Infect'n	1	2	1	—	—	—	—	—	—	—	4	—	—	—	—	—	—	—	—	—	—	—
Other Forms of Tuberculosis	3	1	2	1	2	5	—	11	—	—	25	—	1	1	—	—	—	—	—	—	—	2
Paratyphoid Fever	—	1	—	—	1	—	—	—	—	—	2	—	—	—	—	—	—	—	—	—	—	—
Pneumonia	32	7	10	9	14	8	—	—	—	—	80	66	88	47	56	91	82	93	95	144	65	827
Poliomyelitis	—	—	—	—	—	—	—	—	1	—	1	—	—	—	—	—	—	—	—	—	—	—
Puerperal Pyrexia	—	4	—	—	2	1	—	—	—	—	7	—	—	—	—	—	—	—	—	—	—	—
Pulmonary Tuberculosis	27	23	10	10	13	12	9	—	12	6	122	4	10	7	3	4	1	—	—	1	—	30
Scarlet Fever	25	21	23	57	54	84	64	23	10	3	364	—	—	—	—	—	—	—	—	—	—	—
Typhoid Fever	2	—	—	—	—	—	—	—	—	—	2	—	—	—	—	—	—	—	—	—	—	—
Whooping Cough	15	151	35	38	14	71	37	1	11	16	389	—	—	—	—	—	—	—	—	—	—	—
TOTALS	3796	1132	2181	1126	1629	1868	1197	560	170	187	13846	70	99	55	59	95	83	93	95	145	65	859

Section V

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 statutory 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.

Nursing Homes

At the end of the year there were 19 registered nursing homes in the area with a total of 294 beds.

The number of inspections made to nursing homes during the year was 88.

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 1971 three patients were removed from their homes 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, and they refused offers of help from the supportive services.

In both cases attempts to admit them to hospital in the normal manner by their General Practitioners were refused.

The third person aged 91 years was bedfast, incontinent and requiring constant nursing attention. Relatives gave what support they could but eventually had to return to their own immediate family commitments. The lady was, therefore, left alone all day apart from the visits paid by the home help, Geriatric nurse and district nurse, As she was not fit to be left alone she was visited by the Consultant Geriatrician who advised hospital admission in the normal manner but this was refused.

Centres and Clinics

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

ADDRESS	DAY	TIME
CHILD HEALTH CENTRES:—		
Sandbrook Road, Ainsdale	Mondays, Fridays	2 to 4 p.m., 10-12 noon
North Road, Crossens	Wednesdays	2 to 4 p.m.
Lincoln Road, Birkdale	Tuesdays and Thursdays	2 to 4 p.m.
Poulton Road, High Park	Tuesdays and Wednesdays	2 to 4 p.m.
Hampton Road	Tuesdays and Thursdays	2 to 4 p.m.
Methodist Church, Derby Road	Fridays	2 to 4 p.m.
Methodist Church, Marshside Road	Thursdays	2 to 4 p.m.
ANTE-NATAL CLINIC:—		
Christiana Hartley Maternity Hospital ...	Tuesday	1.30 p.m. to 3 p.m.
	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.
	Thursdays	9 to 11 a.m.
CHIROPODY CLINICS FOR THE ELDERLY:—		
44 Hoghton Street	Mondays, Tuesdays, Wednesdays, Thursdays	9 to 12.0 noon 2 to 4 p.m.
VACCINATION AND IMMUNISATION CLINIC:—		
2 Church Street	Arranged as necessary	2 to 4 p.m.
PHYSIOTHERAPY CLINIC:—		
44 Hoghton Street	Thursdays	2 to 4 p.m.
Ainsdale Child Health Centre	Tuesdays and Thursdays	2 to 5 p.m.

Medical Examinations

The following table shows the work done by the medical staff of the department during 1971 in regard to the medical examination of employees for the purpose of the Superannuation and Sickness Pay Schemes.

Department	NUMBER OF MEDICAL EXAMINATIONS			
	Super-annuation Scheme	Sickness Pay Scheme	Re-Examinations	Total
CORPORATION DEPARTMENTS:—				
Borough Architect	8	—	—	8
Borough Engineer	4	49	26	79
Borough Treasurer	12	—	—	12
Children's (to 31st March 1971) ...	3	—	—	3
Education	100	22	—	122
Estates and Baths	4	1	—	5
Fire Service	6	—	24	30
Flower Show	1	—	—	1
Health	19	8	—	27
Libraries	11	—	—	11
Lighting	—	—	—	—
Police	—	—	—	—
Publicity	2	6	—	8
Parks and Cemeteries	1	13	1	15
Social Services (from 1st April 1971)	23	50	2	75
Town Clerk's	8	3	—	11
Transport	1	22	6	29
Water Board	12	15	1	28
Weights and Measures	—	—	—	—
Welfare Services (to 31st March 1971)	2	5	—	7
OTHER AUTHORITIES:—				
Electricity	—	—	—	—
TOTALS	217	194	60	471

In addition, 91 examinations prior to entry to a Teacher's Training College, were made in 1971.

The Motor Vehicles (Driving Licences) Regulations 1970

The epilepsy and driving Regulation came into force on 1st June, 1971, as a result of a Ministry of Transport Circular.

In accordance with this new Regulation 12 persons suffering from epilepsy were seen by the Medical Officer of Health during 1971, who recommended that a driving licence be issued in 10 of these cases, five of which were renewals.

Crematorium

The Medical Officer of Health continued to act as Medical Referee and the medical Officer in Department was authorised by the House Office to act as Deputy Medical Referee whilst the post of Deputy Medical Officer of Health remained vacant.

The number of certificates required in 1971 was 1,319.

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 the sum of £2,830 should be included in the estimates for the financial year 1971/72 subject to review at the end of that time.

Whereas formerly the service had been provided for both medical and social cases as from 1st April, 1971, when the Family Planning Association introduced National Family Planning Agency Schemes the Southport Local Health Authority decided that they would accept responsibility for the cost of providing free consultation and free supplies to medical cases only attending the Ash Street Clinic. They would not, however, accept responsibility for non-medical or social cases as from this date.

During 1971, 1,512 women made a total of 5,208 visits to the clinic and there were 614 new clients. The Local Authority accepted financial responsibility for 229 cases between April and December.

In addition the Southport Health Authority also arranged for a new domiciliary planning service for medical cases, for the benefit of those women who required family planning advice but who are unwilling to visit the clinic for this purpose.

There were 8 of these cases between April and December.

Marie Curie Memorial Foundation

The aims of the Foundation cover all aspects of the problems associated with cancer. Appreciation of the services provided as 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 VI

ENVIRONMENTAL HYGIENE

SANITARY CIRCUMSTANCES OF THE AREA

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

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

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

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

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

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

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

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

TOWN'S WATER

Chemical Analysis, 2nd August, 1971

								Parts per Million
Total solid matter in solution	...	...	...	...	...	...	...	432
Oxygen absorbed	}	in 15 minutes		...	...	...	...	0.16
from Permanganate		in 3 hours		...	...	...	...	0.32
Ammonia	...	...	...	...	...	...	...	Nil
Albuminoid Ammonia	...	...	...	...	...	...	...	0.01
Nitrogen as Nitrates	...	...	...	...	...	...	...	0.16
Nitrogen as Nitrites	...	...	...	...	...	...	...	Nil
Combined Chlorine	...	...	...	...	...	...	...	29
Free Chlorine	...	...	...	...	...	...	...	0.01
Lead	...	...	...	...	...	...	...	Nil
Copper	...	...	...	...	...	...	...	0.02
Zinc	...	...	...	...	...	...	...	Nil
Total Iron	...	...	...	...	...	...	...	0.06
Carbonate Hardness (as Calcium Carbonate)	...	...	...	...	...	...	...	184
Total Hardness (as Calcium Carbonate)	...	...	...	...	...	...	...	280

(pH. value: 7.4)

Bacteriological Examination, 28th July, 1971

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

This and other tests indicate that the water is highly satisfactory. Natural 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	29,734	84,870
Water supply from sources other than specified above	Nil	Nil
TOTALS	29,734	84,870

PUBLIC BATHS

Sea Bathing Lake, Marine Drive.

The attendance during the year was:—

At the turnstiles	...	...	...	...	...	134,845
Contracts sold (Adults and children)	...	...	...	...	...	142
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.

Victoria Baths, Promenade.

The attendance during the year was:—

Adult and Junior public admissions	...	...	...	...	182,753
Scholars under instruction from Southport, Lancashire					
County and Private Schools	...	...	...	...	124,638
Southport Swimming Club	...	...	...	...	10,858
Private Hire	...	...	...	...	11,210
Spectators	...	...	...	...	33,194
Private Baths	...	...	...	...	11,362
Turkish Baths	...	...	...	...	6,581

		Satisfactory	Unsatisfactory	Totals
Victoria Baths	Chemical Samples	2	—	2
	Bacteriological Samples	1	—	1
Sea Bathing Lake...	Chemical Samples	7	—	7
	Bacteriological Samples	4	—	4

**Chemical Sample of Bathing Water taken at
the Victoria Baths on 14th May, 1971**

Appearance	...	...	...	...	...	Clear and bright. Colourless. Very minute trace of floccu- lent matter.
pH. Value	...	...	...	...	...	6.90
Nitrite	...	...	...	...	...	Nil
Free Ammonia, parts per million	...	...	...	...	...	0.06
Free Residual Chlorine, parts per million	...	...	...	...	...	0.21
Total Residual Chlorine (Free Chlorine plus Chloramines) parts per million	...	...	...	...	...	0.32

Result—Satisfactory

**Chemical Sample of Bathing Water taken at
the Sea Bathing Lake on 14th May, 1971**

Appearance	...	...	...	...	...	Clear and bright. Colourless. Minute trace of flocculent matter. No deposit.
pH. Value	...	...	...	...	...	7.2
Nitrite	...	...	...	...	...	Nil
Free Ammonia parts per million	...	...	...	...	...	0.004 (Minute trace)
Free Residual Chlorine, parts per million	...	...	...	...	...	0.13
Total Residual Chlorine (Free Chlorine plus Chloramines) parts per million	...	...	...	...	...	0.17

Result—Satisfactory

**Bacteriological Examination of Bathing Water at
the Sea Bathing Lake on 24th July, 1971**

Probable numbers per 100 ml.		PLATE COUNT Organisms per ml.
Coliform bacilli	Bact. coli (type 1)	
0	0	10

**Bacteriological Examination of Bathing Water at
Victoria Baths taken on 24th July, 1971**

Probable numbers per 100 ml.		PLATE COUNT Organisms per ml.
Coliform bacilli	Bact. coli (type 1)	
0	0	0

ATTENDANCES 1967—1971

Year	NUMBER OF PERSONS ATTENDING	
	INDOOR	OPEN AIR
	Victoria Baths (Opened 1836) (Remodelled 1926)	Bathing Lake (Opened 1928)
1967	351,683	182,367
1968	338,582	211,028
1969	338,413	222,807
1970	351,699	185,600
1971	380,596	149,728

The indoor Victoria Baths on the Promenade are now 137 years old and have been described as "Victorian and obsolete".

During the year the Special Committee formed to go into the question of providing new indoor swimming baths continued its work.

SANITARY INSPECTION OF THE AREA

Land Charge Enquiries—Information has been supplied during the year on 3,202 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.

The work of sampling seawater and the sand from the beach, which commenced in 1970, was continued. Although the results of the samples indicated that, as elsewhere in the British Isles, the condition of the sea was not perfect, there was no indication that people using the beach and the sea for recreation were in any danger of contracting disease.

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 25 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.

Caravans

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

Two of these sites are in use.

In addition to these licensed sites, a new site situated on local authority land on the landward side of the Esplanade was opened. This site is managed by the Caravan Club Ltd. and caters 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 334 bodies were received at the mortuary and, of these, 329 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	29
Factories where motive power is employed ...	321	160
Outworkers employed in finishing of wearing apparel	5	1
No. of building sites	34	30

Prevention of Damage by Pests Act, 1949

Work done during year 1971

					Type of Property	
					Non Agricultural	Agricultural
Number of Properties in District	...	...			34,656	26
Total Number of Properties Inspected following Notification	...	...	...	...	875	2
Number Infested by (i) Rats	...	...			246	2
(ii) Mice	...	...			629	—
Number of Properties Inspected for other Reasons	...	...	...	...	73	26
Number Infested by (i) Rats	...	...			53	26
(ii) Mice	...	...			20	9

The work involved in dealing with the above mentioned properties resulted in 1,622 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 1971:

Nuisances									
COMPLAINTS INVESTIGATED—									
Choked and defective drains ...	...	...	...	...	...	...	...	...	103
Housing defects ...	...	...	...	...	...	...	...	...	292
Ditches and watercourses ...	...	...	...	...	...	...	...	...	6
Smoke emission ...	...	...	...	...	...	...	...	...	55
Noise ...	...	...	...	...	...	...	...	...	91
Other nuisances ...	...	...	...	...	...	...	...	...	1,411
Total No. of complaints ...									1,958
ACTION TAKEN: Notices served and results in nuisances abated:									
Served	Preliminary, 218				Statutory, 53				
Abated	Preliminary, 157				Statutory, 33				
VISITS—									
To Premises:									
Dwellinghouses ...	...	...	...	...	...	...	...	...	7,034
Shops ...	...	...	...	...	...	...	...	...	2,450
Offices ...	...	...	...	...	...	...	...	...	57
Factories and workshops ...	...	...	...	...	...	...	...	...	271
Dairies ...	...	...	...	...	...	...	...	...	201
Food preparing premises ...	...	...	...	...	...	...	...	...	1,816
Ice Cream premises ...	...	...	...	...	...	...	...	...	162
Other premises ...	...	...	...	...	...	...	...	...	3,760
Total No. of Visits ...									15,751
Regarding:—									
Nuisances ...	...	...	...	...	...	...	...	...	2,833
Drainage ...	...	...	...	...	...	...	...	...	500
Conversion of closets ...	...	...	...	...	...	...	...	...	136
Ditches and watercourses ...	...	...	...	...	...	...	...	...	28
Rats, mice and other vermin ...	...	...	...	...	...	...	...	...	839
Pigeons ...	...	...	...	...	...	...	...	...	353
The Housing Acts ...	...	...	...	...	...	...	...	...	2,628
Rent Acts ...	...	...	...	...	...	...	...	...	109
Food Hygiene Regulations ...	...	...	...	...	...	...	...	...	3,707
Milk Regulations ...	...	...	...	...	...	...	...	...	241
Food ...	...	...	...	...	...	...	...	...	519
O.S.R. ...	...	...	...	...	...	...	...	...	384
Infectious Diseases ...	...	...	...	...	...	...	...	...	528
Other matters ...	...	...	...	...	...	...	...	...	3,294

Food and Drug Samples—Year 1971

SAMPLES OBTAINED FOR BACTERIOLOGICAL EXAMINATION—

Milk	254
Ice Cream	19
Other Foods	7
Water	99

Total No. of Samples	379
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SAMPLES OBTAINED FOR CHEMICAL ANALYSIS—

Milk	34
Ice Cream	—
Other Food	101
Water	51
Rag Flock, etc.	—
Rainwater & Atmospheric Deposit	12
Lead in toys	4

Total No. of Samples	202
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Legal Proceedings under Food and Drugs Act, 1955

OFFENCE	FINE	ADVOCATES FEE
Use of Premises not registered under Section 16 for Shrimp Boiling	£50	} £15
Contraventions under Food (General) Regulations, 1970	£140	

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 55 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 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 28,661.

The following table shows the number of houses built during the period 1962 to 1971, plus additional accommodation made available as a result of adaptations and additions to existing properties:

Year	1962	1963	1964	1965	1966	1967	1968	1969	1970	1971
Number of houses built	255	252	298	549	416	283	251	201	247	288

In addition 74 flats have been built, 36 of these being Corporation property.

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 18. In the instances where overcrowding was found to occur the matter was referred to the Housing Department requesting that assistance be granted.

Demolition and Closing Orders—The task of dealing with the houses in the Borough which appear to be unfit for human habitation continued and during 1971 30 houses were represented to the Health Committee. The formal procedure prescribed by the Housing Acts, was commenced in respect of 28 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—Seventeen 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, 17 Preliminary Notices and 4 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 1971

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	12	297	60
Retail Shops	36	832	157
Wholesale Shops and Warehouses	1	46	—
Catering Establishments open to the public, Canteens	2	136	3
Fuel Storage Depots	—	9	—
Totals	51	1,320	220

Number of Visits of all kinds by Inspectors to Registered Premises—1,009.

Analysis of Persons employed in Registered premises by workplace.

Class of workplace	Number of persons employed
Offices	2,212
Retail Shops	3,964
Wholesale departments and Warehouses	412
Catering Establishments open to the public }	{ 1,744
Canteens	
Fuel storage depots	34
Total ...	8,367
Males ...	3,018
Females ...	5,349

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.

The owners of an hotel in the town were fined £100 for failing to maintain a passenger lift and a goods lift in the hotel. This is believed to have been the first legal proceedings under this legislation in England and Wales.

Accidents reported during the year 1971

Class of Workplace	No. of Accidents Reported	No. Requiring Investigation	Results following Investigation			
			Prosecution	Formal Warning	Informal Advice	No Action Required
Offices	2	1	—	1	—	—
Retail Shops ...	8	7	—	1	1	5
Catering Establishments, Canteens	5	3	—	—	—	3
Wholesale Shops, Warehouses and Fuel Storage Depots	—	—	—	—	—	—
TOTALS	15	11	—	2	1	8

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 1971, 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 91 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 VII

INSPECTION AND SUPERVISION OF FOOD

Food and Drugs Acts—Records, 1966-1971

Year	Number of samples taken			ANALYTICAL RESULTS OF SAMPLES						Ratio (%) of samples adulterated
				Number genuine			Number adulterated*			
	Formal	Informal	Total	Formal	Informal	Total	Formal	Informal	Total	
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)
1966	5	228	233	5	206	211	0	22	22	9.4
1967	7	213	220	7	198	205	0	15	15	6.8
1968	2	192	194	1	172	173	1	20	21	10.8
1969	3	159	162	2	141	143	1	18	19	11.7
1970	—	131	131	—	105	105	—	26	26	19.0
1971	—	132	132	—	110	110	—	22	22	10.6

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

Number of Samples taken for Bacteriological Examination—Year 1971

Nature of Samples and Specimens	Number of Samples and Specimens taken for bacteriological examination				
	First Quarter	Second Quarter	Third Quarter	Fourth Quarter	Total for the year
Ice Cream ...	—	19	5	—	24
Milk	73	61	66	53	253
Other Foods ...	1	—	—	—	1
Town's Water ...	—	1	1	—	2
TOTALS	74	81	72	53	280

DISTRIBUTION OF MILK

There are 126 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 1971

For Bacteriological Examination

CLASS OF MILK	Number of Samples Tested	Appropriate Tests	Number of Samples	
			Passed	Failed
Pasteurised	203	Phosphatase Methylene Blue	201 191	2 2
Sterilised... ..	33	Turbidity	33	—
Untreated	17	Methylene Blue	9	2
TOTALS			434	6

For Biological Examination

Designation	No. of Samples	Tests Applied	Results
			Positive
UNTREATED	17	Ring Test for Br. Abortus	3
		Guinea Pig Inoculation for Br. Abortus ...	2
		Guinea Pig Test for R. Burneti	—
TOTALS			5

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.

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

Summary of Meat and Other Articles of Food which were found to be diseased or unwholesome during year 1971

								Tons	Cwts.	Lbs.
Beef, Veal, Mutton, Pork	}			5	16	52
Fish	...	...	...	...		
Poultry, Game and Rabbits	...	...	...	...		
Tinned Goods	...	...	...	...		
Fruit	...	...	...	...		
Miscellaneous	...	...	...	...		
TOTAL					5	16	52

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.

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 1971		Totals to Date
	Elementary Course		
Bakers and Confectioners	4	241	
Butchers and Meat Producers	1	69	
Catering I	7	487	
Catering II	9	364	
Fish Fryers and Fishmongers	2	28	
Fruiterers and Greengrocers	1	6	
Food and Fruit Preserving... ..	—	573	
Grocers	4	208	
Ice Cream and Dairymen... ..	—	40	
Nurseries	4	151	
Others	4	117	
TOTALS	36	2,284	

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 1,584 students (Elementary Course) who have done so, 1,163 were successful.

Premises—I am able to report that progress is being maintained in this vital section of the department's activities. Food premises are inspected frequently and improvements are readily obtained. There is a gratifying indication that the food traders themselves are becoming more aware of the responsibilities laid upon them by the nature of their trade. This manifests itself in the keenness encountered amongst traders to discuss the very many problems which they encounter and in their readiness to seek advice.

Mouse infestation remains a problem but it is a problem which is being dealt with by the efforts of this department, coupled with those of firms which specialise in the business of pest eradication. Permanent freedom from infestation is impossible to maintain and constant vigilance must be maintained.

Hygienic handling of food largely comes down to individual human behaviour—the human element. Undoubtedly the continued support for instructional courses proves their value to the participants. This, in turn, must lead to a raising of standards in the food trade.

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.

ICE CREAM

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

PARTICULARS							Number
For the purpose of manufacture and sale	...	...	...	...	...	...	10
For the purpose of sale	...	...	...	...	...	...	206
TOTAL							216

The Ministry of Health Provisional Grading of Ice Cream is divided into four grades as follows:—

GRADE I the ice cream, after incubation, does not decolourise Methylene Blue in 4 hours.

GRADE II the ice cream, after incubation, decolourises Methylene Blue in 2 hours to 4 hours.

GRADE III the ice cream, after incubation, decolourises Methylene Blue in $\frac{1}{2}$ hour to 2 hours.

GRADE IV the ice cream, after incubation, decolourises Methylene Blue immediately.

Grades I and II are regarded as satisfactory; Grades III and IV as unsatisfactory.

The following table shows the gradings of the samples examined:—

Ice Cream Samples—Results for Year 1971

		GRADES							
		Mobiles				Premises			
		I	II	III	IV	I	II	III	IV
Soft Ice Cream	...	—	—	—	1	10	2	2	4
Other Ice Cream	...	—	—	—	—	5	—	—	—

COUNTY BOROUGH OF SOUTHPORT



ANNUAL REPORT
OF THE
PRINCIPAL SCHOOL MEDICAL OFFICER
FOR THE YEAR 1971

Telephone No.
Southport 5523.

Health Department,
2 Church Street, Southport.

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EDUCATION COMMITTEE AS AT THE

31st December, 1971

The Mayor, Alderman A. V. F. Langfeld
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 Mrs. M. Fearn
Councillor R. Greenall
Councillor M. P. Halsall
Councillor J. H. Poynton
Councillor H. J. Sainsbury
Councillor R. B. Tomlinson
Councillor E. White
Mrs. M. Bar
Professor B. Collinge
The Rev. E. Formby, M.sc.
The Rev. W. C. Lazenby
Miss M. I. Randall
The Rev. Canon A. Thompson, M.B.E., M.A.

SCHOOL HEALTH SERVICE SENIOR STAFF,
(in post on 31st December, 1971—*indicates part-time staff)

Principal School Medical Officer	P. W. LANG, L.R.C.P., L.R.C.S., L.R.F.P.&S., D.P.H.
Deputy Principal School Medical Officer	VACANT
School Medical Officer	E. LOSONCZI, M.B.E., M.D., D.P.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.
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.)
Senior Dental Officer	J. D. M. KIDNEY, B.D.S. (Nat. University of Ireland).
Dental Officer	P. L. HEATHCOTE, L.D.S. (Liv.)
Consultant Orthodontist	*H. POGREL, L.D.S. (Liv.), L.D.S., R.C.S. (Eng.), D.ORTHO.R.C.S. (Eng.)
Chief 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 (to 31.8.1971). W. TURNER, B.A. (Hons.) PSYCHOLOGY (from 1.12.1971).

Principal School Medical Officer's Annual Report

FOR 1971

TO THE CHAIRMAN AND MEMBERS OF THE
EDUCATION COMMITTEE

Dr. G. N. M. Wishart retired from the post of Principal School Medical Officer at the end of March 1971 having provided the town with a first class School Health Service for many years. During that period he made a highly effective contribution to the health of the school child in Southport. He will be remembered affectionately by the many who came into contact with him, both children and parents, for his skilful, compassionate and sympathetic handling of their cases. I am certain that his helpful approach will be familiar to the teaching staffs of the many schools in the borough.

It has not been easy to follow a man of Dr. Wishart's competence as Head of the School Health Service and the difficulties have been greatly added to by the lack of a Deputy Principal School Medical Officer throughout the remainder of the year.

Among the highlights of the year was the official opening of Presfield School. It has already established itself as an effectively functioning special school for educational subnormality. As often happens in such schools a number of the children attending present problems of maladjustment in addition to their intellectual retardation and this can rapidly lead to disruption of the work of the class. I am sure that there is a need in the town for the provision of a unit for disturbed children who really require care of a highly specialised nature quite apart from the treatment of any existing educational subnormality.

With the implementation of the Education (Handicapped Children) Act 1970, Sandbrook School ceased to be classed as a training centre and was designated an educational establishment on the 1st April 1971; it was thereupon transferred to the Education Committee. This wise and thoughtful piece of legislation was widely welcomed by all concerned with mentally handicapped children. Parents are now encouraged to have greater hopes for their children's future and this more optimistic approach to the severely handicapped will surely be of benefit both to the children and to their parents. The task of certifying a child as unsuitable for education in school was the duty of the School Medical Officer and was always undertaken with the greatest reluctance; one is grateful for the abolition of this procedure. I should like to record this department's appreciation for the splendid work which has been carried out by the staff of Sandbrook School for so many years. The handling of the children has been skilful and dedicated and it was indeed fortunate that the centre was so ably staffed.

May I express my gratitude to the members of the Committee, to all my medical and educational colleagues, and in particular to the staff of my department who have given such valiant help during such a difficult year.

I am,

Yours faithfully,

P. W. LANG,

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 1970	Year 1971
Primary Schools	...	...	...	...	...	...	7,744	7,951
Secondary Schools	...	...	...	...	...	...	5,050	5,283
							<u>12,794</u>	<u>13,234</u>

ROUTINE MEDICAL INSPECTIONS

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

Child 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	...	...	...	...	...	...	...	...	...	1061
Leavers	...	...	...	...	...	...	...	...	...	1001

SECONDARY SCHOOLS—

Leavers	915
---------	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----

ADDITIONAL MEDICAL INSPECTIONS (All Schools)...	866
---	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----

TOTAL	3843
-------	-----	-----	-----	-----	-----	-----	-----	-----	-----	------

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

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

PRIMARY SCHOOLS—

Entrants	...	...	...	...	...	...	...	...	...	88.8%
Leavers	...	...	...	...	...	...	...	...	...	65.4%

SECONDARY SCHOOLS—

Leavers	9.7%
---------	-----	-----	-----	-----	-----	-----	-----	-----	-----	------

ADDITIONAL MEDICAL INSPECTIONS (All Schools)	46.8%
--	-----	-----	-----	-----	-----	-----	-----	-----	-----	-------

Defects found at Routine Medical Inspections.

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

	Primary Schools		Secondary Schools —Leavers	Additional Inspections (all schools)	TOTALS
	Entrants	Leavers			
Number of children examined ...	1061	1001	915	866	3843
Number of children requiring treatment	136	104	66	93	399
Percentage requiring treatment ...	12.8	10.4	7.2	10.7	10.4

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 13,050 and of these 20 were referred for further examination, together with 623, 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, 5,416 attendances were made by children—4,808 at 2 Church Street Clinic, and 608 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 1,205, and these children made 2,150 attendances. 34 cases were referred to the Southport Infirmary for further investigation, and 4 to the Promenade Hospital.

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

During the year 27 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, 532 attendances were made at this clinic. 124 new cases were examined and 286 children attended for observation of progress from previous years. 194 children had spectacles prescribed for them and 44 children were referred to the Southport Infirmary for operative and orthoptic treatment.

Ear, Nose and Throat Clinic—In 1971, 360 attendances were made at this clinic. 319 new cases were examined and 32 children attended for observation of progress from previous years. 118 cases were admitted to the Promenade Hospital for the removal of tonsils and/or adenoids, and 131 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. 1,594 children were tested in school; 43 were referred to a school medical officer for further testing; 14 children were kept under observation and 16 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.

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

During the year, 1,041 attendances were made and 170 new cases were examined. At the end of the year 34 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 401 attendances; 12 children were treated at Lincoln House and made 227 attendances and 10 children were treated at Ainsdale and made 305 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 225 children made 3,535 attendances at 2 Church Street, 94 children made 897 attendances at Lincoln House and 80 children made 571 attendances at Ainsdale.

In addition, group physiotherapy sessions were held once a week at the Hawkshead Hospital Special School and 1,959 group attendances were made. During the year, 2 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.

The physiotherapist also visited the School for the Partially Hearing once a week, giving treatment to 10 children attending the School.

Sandbrook School was also visited, treatment being given to 4 children who have physical handicaps, in addition to mental handicaps.

SPEECH THERAPY

154 school children have made regular attendances over the year with the following speech disorders.

Retarded speech and language	...	30
Dyslalia	... ..	58
Sigmatism	... ..	44
Voice and Resonance	... ..	8
Stammers	... ..	12
Cleft Palate	... ..	2
		<hr/>
		154
		<hr/>

A further 34 have been assessed.

There is a waiting list of 15.

CHILD GUIDANCE SERVICE

Dr. Naylor, the Consultant Child Psychiatrist, has asked me to include the following: "The service has had a busy, if somewhat disrupted year because of staff changes.

Dr. Kathleen Henry resigned in August and the newly appointed Educational Psychologist, Mr. William Turner commenced his duties on December 1st. Dr. Henry's work was of an exceptionally high standard and we are grateful for the very valuable contribution she made.

Mrs. J. Smith curtailed her sessions during the year and this, unfortunately, led to interruption of remedial teaching for many children. We are glad that she has now been able to increase her sessions again and once more provide skilled help for children in need.

There have been changes of secretary also during the year, but we were able to welcome Mrs. Riley to this post at the end of December.

Mrs. E. Winter, the Psychiatric Social Worker has continued her very valuable work with the families and has tried to maintain contact with the newly formed Social Services Department.

The usual number of children have been referred to me by the General Practitioners in the Borough and adjacent County areas, as well as from the Educational Psychologist."

HANDICAPPED PUPILS

Physically Handicapped and Delicate 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, 25 children with the following physical handicaps, together with 3 delicate children were receiving education in the school:—

<i>Sex</i>	<i>Handicap</i>
3 boys	Spastic paralysis
2 boys	Haemophilia
2 boys	Diplegia
1 boy	Spina bifida
1 boy	Right sided hemiplegia
1 boy	Muscular dystrophy
2 boys	Congenital heart disease
1 boy	Cerebral tumour
1 boy	Congenital deformity of urethra
4 girls	Spastic paralysis
1 girl	Myelomeningocele
1 girl	Encephalocele
1 girl	Right sided hemiplegia
2 girls	Congenital absence of sacrum
2 girls	Congenital heart disease

During the past year about sixteen of our severely handicapped children have been taken to the Victoria Baths by the physiotherapist for hydro-therapy. Most of these children are spastic 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.

14 children from the School were taken to the Formby Riding School each week. Great improvement has been noticed both mentally and physically after these sessions. The children look forward to these riding dates which are greatly enjoyed. We are indebted to the ladies of the Southport & Formby District Riding for the Disabled for the voluntary help given at these lessons.

Five physically handicapped children and one delicate child were at residential Special Schools.

Partially Sighted Children—Three partially sighted children were in residential schools.

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

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

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

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

PROTECTION OF SCHOOL CHILDREN AGAINST TUBERCULOSIS

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

Notifications—No case of tuberculosis was found in school children during 1971.

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 6.2%. 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
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
1971	89.6	1133	19.2	74.3	6.5	832

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
1967	834	14	1.7
1968	1025	21	2.1
1969	941	32	3.4
1970	1145	35	3.1
1971	955	21	2.0

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 1970 for comparison:—

	1970	1971
Measles	20	60
Scarlet Fever	6	3
Whooping Cough	6	5
Tuberculosis	2	—

MISCELLANEOUS SCHOOL MEDICAL WORK

Examination of school children for fitness to take part in public entertainment	21
Examination of school children for part-time employment	35
Children seen at 'follow-up' visits to schools by school nurses	164
Miscellaneous home visits by school nurses	954

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, 1,341,918 meals were given to Southport school children and 23% of these meals were supplied free of charge under the assessment of income scheme.

An average of 57% of children have dinner in school.

PRINCIPAL SCHOOL DENTAL OFFICER'S REPORT

In the report for 1970, mention was made of the post at the Lincoln Road Dental Clinic being upgraded to that of Senior Dental Officer. After a period of more than one year without a Dental Officer, it was pleasing to be able to welcome the appointment of Mr. Kidney as Senior Dental Officer.

Mr. Kidney did not commence his duties with us until September so that the professional establishment was under strength for some nine months, but in spite of this, I am able to report that during the year all the schools were inspected and that in addition five of the schools were re-inspected. In addition to these school inspections it will be noticed from the statistical section, that in Southport, a large number of children are re-inspected at the clinic by means of a regular recall system. The annual figures also show the small number of emergency treatments that occur—again possibly a direct result of regular inspections but the responsibility for seeing a child attends the dental clinic remains with the parent and this does sometimes leave much to be desired. I am sure however that regular inspections prevent many teeth from being damaged beyond repair, for without them the early onset of caries can go unnoticed and eventual pain can often be a sign of seeking attention too late.

In comparison with the previous year there was an increase in the number of fillings completed but there was also an increase in extractions. A record was kept this year of the number of extractions carried out for regulation purposes as opposed to extraction for caries. The result of this was that 58% of permanent teeth and 38% of deciduous teeth were extracted for regulation purposes.

When dealing with statistics it should be remembered that it is not possible to show the time taken to introduce young children to the operative side of dental treatment. The fact that time may be absorbed in nothing more than gaining the confidence of the child cannot be demonstrated in dental returns, yet the importance of that time cannot be over estimated.

Dental health continues to be stressed on all occasions either when it can be seen to be necessary at a school inspection or at the chairside. A dental health kit is given to each child attending school for the first time but the price charged by the manufacturer for this kit was doubled this year. This was a result of purchase tax being imposed on the toothpaste content of the kit and it is difficult to understand the logic behind this when such a comparatively small amount of tax is involved—hardly an encouragement to dental health. Articles on various aspects of health have appeared in the local newspaper the Southport Visiter, this year—two such articles dealt with dental problems; one referring to caries and its prevention and the other to fluoridation mentioning the disadvantages of its addition to milk as an alternative to water.

In conclusion it is well known that some changes are inevitable by 1974, but in my opinion it should be remembered that a specialised dental service for children still has a place in any dental scheme serving the community. There is a need to strengthen it in order that it may play a further part in ensuring that dental treatment is available to all children who seek its aid.

CLINICS AS AT 31st DECEMBER, 1971

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

* By Appointment Only.

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

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
1967 and later	240	240	—
1966	401	400	1
1965	572	569	3
1964	133	133	—
1963	100	99	1
1962	100	97	3
1961	216	216	—
1960	653	652	1
1959	290	289	1
1958	77	76	1
1957	437	437	—
1956 and earlier	624	624	—
TOTAL	3843	3832	11

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
1967 and later	2	18	20
1966	2	41	43
1965	3	76	79
1964	—	13	13
1963	1	18	19
1962	—	11	11
1961	1	25	26
1960	—	70	70
1959	5	24	29
1958	5	4	9
1957	18	41	59
1956 and earlier	3	18	21
TOTAL	40	359	399

OTHER INSPECTIONS

Number of Special Inspections	...	...	...	...	...	...	...	972
Number of re-inspections	...	...	...	...	...	...	...	1821
TOTAL								2793

PART I (cont.)

INFESTATION WITH VERMIN

Total number of individual examinations of pupils in schools by school nurses or other authorised persons.....	12913
Total number of individual pupils found to be infested.....	108
Number of individual pupils in respect of whom cleansing notices were issued (Section 54(2), Education Act, 1944).....	None
Number of individual pupils in respect of whom cleansing orders were issued (Section 54(3), Education Act, 1944).....	None

PART II

DEFECTS FOUND BY MEDICAL INSPECTION

(a)—At Periodic Inspections

Defect or Disease						Entrants	Senior Leavers	Others	TOTAL
Skin	...	...	...	...	T	20	4	26	50
					O	4	1	4	9
Eyes—Vision	...	...	...	...	T	6	9	16	31
					O	21	2	36	59
Squint	...	...	...	...	T	15	—	7	22
					O	7	—	5	12
Other	...	...	...	...	T	2	1	2	5
					O	1	—	—	1
Ears—Hearing	...	...	...	...	T	12	5	11	28
					O	14	—	6	20
Otitis Media	...	...	...	...	T	2	—	—	2
					O	6	—	1	7
Other	...	...	...	...	T	1	—	1	2
					O	2	—	—	2
Nose and Throat	...	...	...	...	T	10	—	10	20
					O	22	1	16	39
Speech	...	...	...	...	T	9	—	8	17
					O	15	—	7	22
Lymphatic Glands	...	...	...	...	T	1	—	—	1
					O	6	—	2	8
Heart	...	...	...	...	T	—	—	1	1
					O	15	2	17	34
Lungs	...	...	...	...	T	5	—	9	14
					O	13	—	14	27
Developmental—Hernia	...	...	...	...	T	2	—	3	5
					O	2	—	—	2
Other	...	...	...	...	T	6	—	13	19
					O	54	—	58	112
Orthopaedic—Posture	...	...	...	...	T	1	1	10	12
					O	1	—	4	5
Feet	...	...	...	...	T	29	7	39	75
					O	23	—	15	38
Other	...	...	...	...	T	13	1	22	36
					O	20	2	18	40
Nervous System—Epilepsy	...	...	...	...	T	1	—	1	2
					O	—	2	1	3
Other	...	...	...	...	T	—	—	—	—
					O	1	1	1	3
Psychological—Development	...	...	...	...	T	—	1	1	2
					O	1	—	2	3
Stability	...	...	...	...	T	—	—	2	2
					O	5	—	5	10
Abdomen	...	...	...	...	T	—	1	—	1
					O	2	—	1	3
Other	...	...	...	...	T	13	3	23	39
					O	19	3	15	37

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

PART II (cont.)
(b) At Special Inspections

Defects or Diseases								Pupils requiring Treatment	Pupils requiring Observation
Skin	...	...	...	...	...	...	...	195	15
Eyes—Vision	...	...	...	...	...	...	...	5	4
Squint	...	...	...	...	...	...	...	9	1
Other	...	...	...	...	...	...	...	48	7
Ears—Hearing	...	...	...	...	...	...	...	54	78
Otitis Media	...	...	...	...	...	...	...	8	—
Other	...	...	...	...	...	...	...	21	3
Nose and Throat	...	...	...	...	...	...	...	35	13
Speech	...	...	...	...	...	...	...	14	—
Lymphatic Glands	...	...	...	...	...	...	...	1	—
Heart	...	...	...	...	...	...	...	—	1
Lungs	...	...	...	...	...	...	...	6	8
Developmental—									
Hernia	...	...	...	...	...	...	...	—	—
Other	...	...	...	...	...	...	...	8	6
Orthopaedic—									
Posture	...	...	...	...	...	...	...	3	—
Feet	...	...	...	...	...	...	...	14	1
Other	...	...	...	...	...	...	...	40	26
Nervous System—									
Epilepsy	...	...	...	...	...	...	...	—	1
Other	...	...	...	...	...	...	...	—	—
Psychological—									
Development	...	...	...	...	...	...	...	11	3
Stability	...	...	...	...	...	...	...	8	5
Abdomen	...	...	...	...	...	...	...	9	5
Other	...	...	...	...	...	...	...	138	127
TOTALS								627	304

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	110
Errors of refraction (including squint)	378
Total	488
Number of pupils for whom spectacles were prescribed	194

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	81
for adenoids and chronic tonsillitis	118
for other nose and throat conditions... ..	50
Received other forms of treatment	435
Total	684
Number of pupils in schools who are known to have been provided with hearing aids—	
in 1971	6
in previous years	24

ORTHOPAEDIC AND POSTURAL DEFECTS

	Number of cases known to have been treated
Pupils treated at clinics or out-patients departments—	
Specialist Clinics	2
By Local Authority Medical Staff	95
Pupils treated at school for postural defects	—
Total	97

PART III (cont.)

DISEASES OF THE SKIN

(excluding uncleanness, for which see Part I)

	Number of cases known to have been treated
Ringworm—Scalp	—
Body	1
Scabies	7
Impetigo	51
Other skin diseases	298
Total	357

CHILD GUIDANCE SERVICE

	Number of cases known to have been treated
Pupils treated at Child Guidance Clinic—	
Maintained school children	117
Pre-school children	10
Private school children	—
Lancashire County school children and pre-school children	32
Total	159

(For further details see Table VI)

SPEECH THERAPY

	Number of cases known to have been treated
Pupils treated by speech therapist	154

OTHER TREATMENT GIVEN

	Number of cases known to have been dealt with
Pupils with minor ailments	433
Pupils who received convalescent treatment under School Health Service arrangements	—
Pupils who received B.C.G. vaccination	832
Artificial Sunlight	40
Remedial Exercises	399
No. of 5 year old entrants who have had Skin Tests	955
Total	2659

PART III (cont.)

SCHOOL DENTAL SERVICE

Dental Inspection and Treatment carried out during 1971

ATTENDANCES and TREATMENT

First Visit	2354
Subsequent Visits	3307
Total Visits	5661
Additional courses of treatment commenced	950
Total courses commenced	3304
Courses of treatment completed	3149
Fillings in permanent teeth	3695
Fillings in deciduous teeth	1356
Permanent teeth filled	3152
Deciduous teeth filled	1292
Permanent teeth extracted	880
Deciduous teeth extracted	1935
General Anaesthetics	862
Emergencies... ..	31
Number of pupils X-rayed	82
Prophylaxis	123
Teeth otherwise conserved	48

ORTHODONTICS

New cases commenced during year	70
Cases completed during year	51
Cases discontinued during year	8
Number of removable appliances fitted	109
Number of fixed appliances fitted	11
Pupils referred to Hospital Consultant	—

PROSTHETICS

Pupils supplied with F.U. or F.L. (first time)	—
Pupils supplied with other dentures (first time)	4
Number of dentures supplied	5

ANAESTHETICS

General Anaesthetics administered by Dental Officers	357
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INSPECTIONS

(a) First inspection at school. Number of pupils	10817
(b) First inspection at clinic. Number of pupils	1249
Number of (a)+(b) found to require treatment	4652
Number of (a)+(b) offered treatment	4652
(c) Pupils re-inspected at school or clinic	3704
Number of (c) found to require treatment	1975

SESSIONS

Sessions devoted to treatment	904
Sessions devoted to inspections and dental health education	105

CHILD GUIDANCE SERVICE

	Southport		Lancashire County Council		TOTAL	
	School Children		Pre- School Children	School Children		Pre- School Children
	Maintained Schools	Private Schools				
Number of new children re- ferred	81	1	3	19	2	106
Number of children referred by:—						
Family Doctors	26	1	2	7	1	37
School Medical Officers ...	11	—	—	3	—	14
Juvenile Court & Proba- tion Officers	1	—	—	—	—	1
Consultant Medical (in- cluding Hospital Staff)	6	—	1	9	1	17
Children's Officer ...	3	—	—	—	—	3
Chief Education Officer ...	9	—	—	—	—	9
Miscellaneous	25	—	—	—	—	25
TOTAL	81	1	3	19	2	106
Number of individual child- ren seen during year ...	117	—	10	27	5	159
Number of attendances made by:—						
Children	263	5	7	68	9	352
Parents	251	5	9	84	9	358
TOTAL	514	10	16	152	18	710
Number of children on wait- ing list at commencement of year	13	1	—	2	—	16
Number of children on wait- ing list at end of year ...	16	—	—	3	—	19

Number of sessions conducted by Consultant Child Psychiatrist 97

Number of home visits by Psychiatric Social Worker	Southport			Lancashire County Council		TOTAL
	School Children		Pre- School Children	School Children	Pre- School Children	
	Maintained Schools	Private Schools				
	87	—	17	—	—	104

HANDICAPPED PUPILS

CATEGORY	NUMBER ASCERTAINED				TYPE OF EDUCATION PROVIDED			REQUIRING SPECIAL SCHOOL ACCOMMODATION BUT UNPLACED AT THE END OF THE YEAR			TOTALS
	No. on the register at the 1st Jan., 1971	No. added during the year, 1971	No. with- drawn in 1971	No. on the register at 31st Dec., 1971	Ordinary School	Special Schools		Day Class or School	Special School	Refusal by Parents	
						Day Class or School	Residential School				
BLIND	—	—	—	—	—	—	—	—	—	—	—
PARTIALLY SIGHTED ...	7	1	—	8	5	—	3	—	—	—	8
DEAF	2	—	—	2	—	1	1	—	—	—	2
PARTIALLY HEARING ...	23	6	1	28	7	18	3	—	—	—	28
DELICATE	—	5	—	5	1	3	1	—	—	—	5
DIABETIC... ..	17	—	2	15	14	1	—	—	—	—	15
EDUCATIONALLY SUB-NORMAL	58	37	10	85	1	58	4	19‡	2	1	85
EPILEPTIC	34	2	5	31	31	—	—	—	—	—	31
MALADJUSTED	2	5	1	6	1	—	5	—	—	—	6
PHYSICALLY HANDICAPPED	184	11	18	177	144	28	5	—	—	—	177
Totals ...	327	67	37	357	204	109	22	19	2	1	357

‡ 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

	Kind of School			Totals	
	Local Authority Schools	Private Schools	St. Thomas More Approved School	No.	%
Number of consent forms issued to parents	1246	103	65	1414	—
Number of parental consents received	1116	86	65	1267	89.6
Number of definite refusals... ..	55	5	—	60	4.2
Number of parents who did not reply	75	12	—	87	6.2
TOTALS	1246	103	65	1414	100
Number of Children tested ...	1004	84	45	1133	89.4
Number of children with consent forms but not tested	112	2	20	134	10.6
TOTALS	1116	86	65	1267	100
Number of children tested and found to be:—					
Positive reactors	174	22	21	217	19.2
Negative reactors	764	59	19	842	74.3
Number not read	66	3	5	74	6.5
TOTALS	1004	84	45	1133	100
Number of negative reactors vaccinated	756	58	18	832	—

**PREVENTION OF TUBERCULOSIS
SKIN TESTING OF SCHOOL ENTRANTS**

Number of children already tested	20
Number of 'no replies'	146
Number of definite refusals	40
Number of consents received	1083
Total number of eligible children	1289
Number of children tested	955
Number of children absent from the test	128
Total number of children for whom consents were received	1083
Number of children tested and found to be:—	
(a) positive	21
(b) positive from previous B.C.G. vaccination	29
(c) negative	897
(d) absent from reading... ..	8
Total number of children tested	955
Number of children referred to the Chest Clinic	21
Number of contacts found to have active disease	NIL

