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COUNTY BOROUGH OF ST. HELENS



Annual Report
of the
Medical Officer of Health
for the Year 1970

J. H. E. BAINES, M.B., Ch.B., D.P.H.,

Medical Officer of Health
and Principal School Medical Officer

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TO THE MAYOR, ALDERMEN AND COUNCILLORS OF THE
COUNTY BOROUGH OF ST. HELENS

Mr. Mayor, Ladies and Gentlemen,

I beg to submit the Report on the health of St. Helens for the year 1970.

During this year I completed my first full year of office with the County Borough. My work I personally found enjoyable and stimulating, but with myself new to the post and only one other full-time Medical Officer, Dr. Walker, for much of that time, the pressure of work was frustration inducing. However, as I reported to the Committee in June, I felt that we were able to point to material progress in the increased liaison between our own services and with outside services and in co-operative procedures, but I will not dwell on them — for the most part they will be referred to in the appropriate sections of the report.

During the year decisions were being made at national level which were obviously going to determine the development of the health services for probably decades to come. These decisions are now history and my opinion on them was given to the Committee at some length, but it would be wrong to let the Annual Report go by without formally recording my views, even though the views of those few who thought like myself were completely uninfluential.

In February the Labour Government's second 'Green Paper' on Health Service Reorganisation proposed, as had the previous one, the combination of local authority personal health services with the Hospital and Executive Council services under one administrative umbrella, independent of local government. The later Redcliffe-Maud Report on the reorganisation of local government implicitly accepted the correctness of this view; mention was made of the possibility of the reorganisation of the health services within local government, only to be dismissed, though the only reason advanced for this was expected difficulty in financing the service. However, Mr. Derek Senior who presented a minority report on local government reorganisation argued for a two-tier structure for local government and envisaged within that the reorganisation of health services at the level of the upper-tier, thereby in his view, and mine, avoiding the financial and political difficulties which would otherwise arise. The personal health services of the type now provided by local authorities could have been organised at the lower tier level thereby achieving maximum identification with the community served. If coincidentally personal health and social services had been combined in one department at that lower level, then we would have had a really effective health and welfare organisation. However, the earlier report of the Seebom Committee had argued for the combination of the various social service functions within one Social Services Department independent of the local authority's personal health services. The acceptance of this latter principle by the government, and its enactment in its dying days (with the co-operation of the Conservative opposition) of the Social Services Act made it absolutely certain, in my view, that given an acceptance at national level of a pattern of local government reorganisation based on relatively small units, then the health services would be reorganised outside local government and the present personal health services provided by local government would pass from it. It would, incidentally, appear necessary to create other ad hoc bodies outside local government to provide for a variety of other functions at present undertaken by local authorities.

What was proposed for the future of the School Health Service was obscure and so the situation remains even at the time of writing when we have moved a lot closer to the actual implementation of the various reorganisations. There were other Medical Officers of Health who, like myself, believed that the health services should have been dealt with as I suggested, though this was very much a minority view, but I believe the feeling is universal that if the personal health services are to be removed from the orbit of local government, then the School Health Service cannot and should not remain an independent health service within local government; if it did so it could only be with the strongest possible links with the other health services; so strong as to make its independence dubious. The morale of lay and professional staff within local authority health departments has been considerably weakened by the barrage of changes and proposals for change that we have had in recent times and staff recruitment is a worsening problem for many authorities. The chances of an independent School Health Service being able to recruit staff of sufficient quantity and calibre would seem to be remote. Further, employment by local authorities of their own medical staff subsequent to reorganisation would begin to undermine even those benefits that we might expect from the proposed reorganisations.

I have always been more impressed by the difficulties resulting from the lack of contiguity of health services and local authority administrative boundaries than I have by the difficulties resulting from the tripartite organisation of the health services with its functional boundaries. We have had in recent years a quite impressive growth of co-operation between the different health services and it must be borne in mind that to place individuals with different professional disciplines within the same administrative organisation is a very long way from achieving the maximum in efficient co-operation unless individual attitudes are inclined to that co-operation. Yet attitudes are slowly but surely achieving remarkable changes without the benefits of unification. Consider that locally my department has to relate to hospitals within the town which also give services to a large number of people from outside our boundaries, those hospitals being administered from a centre within the area of another local authority (Lancashire) at Whiston Hospital which itself, although providing considerable services to our citizens nevertheless gives a greater part of its efforts to people from outside our boundaries. Additionally we have within the borough one of the few remaining voluntary hospitals which does not come within that particular administrative framework at all. Looked at from the hospital side they would see themselves as providing services primarily to St. Helens County Borough and two Lancashire divisions, the proportions of the different populations being served varying with the actual hospitals providing the services. Major policy decisions in Lancashire are taken at a point remote from us by officials and Councillors having to relate to the services of two different Regional Hospital Boards. There is considerable delegation, of course, to the divisions so that many services are effectively organised on a local basis, but there are exceptions to this. There is even within the area given services by St. Helens and District Hospital Management Committee, a district of Lancashire with delegated health powers, namely Huyton-with-Roby. It is needless to stress the point by going into further detail of the non-congruence between these and other services, but I believe that I have said enough to show reason why effective co-operation must be slow to achieve. These circumstances, repeated in many parts of the country lead me strongly to the view that at reorganisation there must be very considerable effort given to achieving maximum geographical equality between the health services and local government services —

co-operation will be necessary in many fields, but particularly with respect to environmental problems, services to school children and co-operation with the Social Services Department. This must mean not only that the administrative units of the health service and local government should be co-terminous, but that the bases, i.e. hospitals etc. from which those services are provided, should be serving catchment areas which are broadly the same.

During 1970 we also had the Education of Handicapped Children Act, leading to the transfer of Junior Training Centres from Local Health Authorities to Local Education Authorities, thus increasing the pressures towards the changes I have discussed above, but I have commented on this at greater length in my Annual Report as Principal School Medical Officer.

Locally we set in motion a significant reorganisation of our own, when responding to proposals put by me to the Committee and the St. Helens District Nursing Association, it was agreed that the time had come for the Home Nursing Service to end its status as an independent agency and to become a fully integrated part of the Health Department's services. On page 71 is reproduced a copy of my Annual Report for 1970 to the District Nursing Association which refers to some of the considerations which influenced this decision. Many problems were foreseen, such as the providing of accommodation by the Authority for the nurses, the continuing provision of transport and the means by which this should be done, the personal futures of those staff now resident at the Nurses' Home and the proper conduct of the business of the winding up of the Association and the disposal of the excellent Nurses' Home itself. Accordingly a slow and, hopefully, smooth transitional process was envisaged.

When considering the future of home nursing services and the other community nursing services, it seemed appropriate to think of the appointment of a Chief Nursing Officer who would be responsible in the authority for all our nursing services thus enabling one voice to speak for them, and achieving greater co-ordination which must become more necessary with eventual attachment to general practitioners and a closer relationship with hospital based nursing services. I am pleased to say that the Committee agreed to the establishment of such a post and that the members of the District Nursing Association agreed that their staff would work with her.

Family planning as an aid to personal and family welfare began to achieve greater prominence during the year with more attention being attracted too to the problems of population growth. Expansion of this service will certainly have my personal support and a small sign of this is mentioned on page 43 in the main body of the report.

I cannot close these introductory remarks without making reference to our infant mortality experience for 1970. The high rate we experienced in that year, the worse since 1961, was very disappointing indeed. It may be that this was due to a chance variation as is bound to happen from time to time — we would not expect in an Authority of this size to have such statistics following an unbroken downwards trend, nor would it be reasonable to expect that our experience would generally improve upon or even match the national experience. It may be too that there are contributory factors which are at the present completely outside our ability to control, obvious ones being the genetic or social composition of our population which could contribute to a locally increased incidence of congenital

abnormality. Nevertheless it could not be and was not ignored, and in the body of the report statistics and comments are provided at greater length. It must suffice to conclude that a very serious consideration of the situation could not lead to any indication of action to be taken by myself or the Authority, or our staff, or indeed of any other individual or organisation which would be likely to significantly affect the situation. One hopes for a subsequent improvement at the time of writing, but no confident statements can be made about the 1971 experience.

I am greatly indebted to the members of the staff and would express my gratitude to members of the Health Committee who have always been generous in their support, and to members of the Council for their help and encouragement during the year.

I have the honour to be,

Your obedient servant,

J.H.E. BAINES

HEALTH COMMITTEE, 1970/71

Chairman:

ALDERMAN J.F. McDONNELL

Deputy-Chairman:

ALDERMAN M.A. SHARD, J.P.

The Right Worshipful the Mayor

COUNCILLOR E. KERR.

Alderman W. Burrows, O.B.E., J.P.

Alderman T. Hignett

Councillor J. Cunliffe
 Councillor A. Luther
 Councillor M. McNamara
 Councillor R. T. Pardoe
 Councillor J. Tickle
 Councillor T. Wilcock
 Councillor W. H. Williams

Co-opted Members:

Dr. D. R. Holden (nominated by the Local Medical Committee).

Mr. W. Davies (nominated by the St. Helens Executive Council).

Mrs. E. M. L. Else, M.B.E., J.P. (nominated by St. Helens and District Hospital Management Committee).

STAFF

Medical Officer of Health and Principal School Medical Officer:

JULIAN H. E. BAINES, M.B., Ch.B., D.P.H.

Deputy Medical Officer of Health:

None

Senior Medical Officer: (General)

George Chandy, B.A., L.C.P.S., L.M.S.S.A., D.T.M.H., D.P.H. (from 1/5/70)

Senior Medical Officer (Maternal and Child Welfare):

Margaret M. Walker, M.B., Ch.B.

Medical Officers in Department:

None

Dental Officers:

James P. H. Donovan, L.D.S., R.C.S. (Principal School Dental Officer)

Annie Patricia Farrell, B.D.S., School Dental Officer

I. Lynton Jones, B.D.S., School Dental Officer (sessional)

Public Health Inspectors:

Chief Public Health Inspector: Nathaniel Birch

James R. R. Norris, *Deputy Chief Public Health Inspector*

Fred Platt, *Specialist Inspector*

Thomas Dean, *Specialist Inspector*

Norman Smith, *Specialist Inspector*

John B. Douglas, *Specialist Inspector*

John McConnell, *Specialist Inspector*

Leslie N. Biddulph, *Specialist Inspector*

Robert C. Woods, *Public Health Inspector*

William H. Jackson, *Public Health Inspector*

Eric Sawyer, *Public Health Inspector*

Roger Robson, *Public Health Inspector*

James Sandford, *Public Health Inspector*

Philip L. Gavin, *Public Health Inspector*

David McLoughlin *Public Health Inspector*

John Cowburn (from 12/10/70), *Public Health Inspector*

STAFF— continued*Health Visitors and School Health Visitors:**Superintendent:* Jennie Twist*Deputy Superintendent:* Margaret Cunliffe

Lilian S. Boardman	Jean Leahy (from 11/9/70)
Emily E. Cameron	B. P. Roe (from 1/4/70) (Specialist)
Teresa J. Howard	E. V. McDonald (part-time)
Constance M. Pennington	R. E. Jones
Leah Fazackerley (ceased 3/5/70)	M. Fairclough (part-time)
Margaret P. Heffernan	Jean Fairclough
Jean Highcock (part-time) (ceased 70)	Marjorie Forest
Barbara Middlehurst (part-time from 5/10/70)	Elsie Burrows (from 1/4/70)
Dylis M. Ashurst (from 11/9/70)	

Student Health Visitors :

M. E. Barnes (from 21/9/70)
 M. P. Coughlin (from 21/9/70)
 S. J. Pearson (from 21/9/70)

*Midwives:**Non-Medical Supervisor of Midwives:* Audrey I. Robinson

Margaret Boulton	Caroline Leonard (part-time) (ceased 22/3/70)
Ethel M. Burrows	Elsie A. Parr
Eileen Evans	Olwen Chisholm (ceased 28/2/70)
Kathleen O'Hara	Barbara Gilchrist
Sheila P. Caine	Jessie Turner
Bridget M. Hartley	Mary T. Bromilow
Olive M. Hardman	Maureen Boyle
Mary B. Crook	Hilda Williams (from 16/3/70)
Dorothy B. Latham	

Chief Administrative Assistant: J. J. Spencer, D.P.A.*Welfare Officer (Prevention of Illness, Care and After-Care):*

Mrs. Dorothy Lawless

Tuberculosis Health Visitor: (Part-Time): Mrs. Bridget Jackman*Home Help Organiser:* Mrs. Elizabeth Henton

STAFF—continued*Medical Welfare Officers:*

James. C. Ratcliffe, (*Senior Mental Welfare Officer*) ceased 9/1970.

John R. Bratt

Ernest J. Hill.

Michael Daybell

Brian Roberts

Junior Training Centre Supervisor: Miss Virginia Garston

Adult Training Centre Supervisor: Ronald Pardoe

Clerk/Dispenser:

Charles Watt (also part-time Welfare Officer, Special Treatment Centre)

Ambulance Service:

G. M. Norman (Ambulance Superintendent)

Day Nursery:

Margaret R. Ephgrave (Matron)

The following give consultant services to the authority:

Consultant Obstetricians:

Henry V. Corbett, M.Sc., M.D., CH.B., F.R.C.S., L.R.C.P., M.M.S.A.,
M.R.C.O.G. (ceased December 1970)

Cecil I. Moss, M.B., CH.B., M.R.C.O.G., D.obst. (ceased Dec 1970)

Area Chest Physician:

J. B. H. MacArthur, M.B., B.S., M.R.C.P.E.

Consultant Psychiatric Adviser:

John M. A. C. Stewart, M.B., CH.B.

Public Analyst and Agricultural Analyst:

J.G. Sherratt, B.SC., F.R.I.C.

I—GENERAL AND VITAL STATISTICS, 1970

Area (acres)	8,865
Population (estimated, mid-year 1970)	102,900
Rateable Value	£4,021,959
Product of a penny rate	16,210

STATISTICAL SUMMARY FOR 1970

	M	F	Total
Live Births—Legitimate	937	885	1,822
Illegitimate	60	51	111
Totals	997	936	1,933
Birth Rate per 1,000 of the estimated population			18.8
Still-Births—M. 27, F. 21 — Total 48			
Rate per 1,000 total (live and still) births			24.2
Total live and still births — Live			1,933
Still births			48
			1,981

Illegitimate live births: 111

Percentage of total live births: 5.7%

Deaths—M. 720, F. 604 — Total 1,324

Crude Death Rate per 1,000 of the estimated population			12.9
Deaths of infants under one year of age:	M.	F.	Total
Legitimate	24	27	51
Illegitimate	2	1	3
	26	28	54

Death Rate of infants under one year of age:

All infants per 1,000 live births	27.9
Legitimate infants per 1,000 legitimate live births	28.0
Illegitimate infants per 1,000 illegitimate live births	27.0

Neo-Natal Deaths: (i.e. deaths of infants under 4 weeks)

Deaths — M.20, F. 18 — Total 38	
Neo-Natal Death Rate (per 1,000 live births)	19.6

Early Neo-Natal Deaths (i.e. deaths of infants under one week)

Deaths) M. 16, F. 16 — Total 32	
Early Neo-Natal Death Rate (per 1,000 live births)	16.5
Peri-Natal Mortality Rate	40.0

Number of women dying from diseases and accidents of pregnancy and child-birth Nil

Maternal Mortality Rate per 1,000 total (live and still) births Nil

Deaths from Measles 1

Deaths from Whooping Cough Nil

Deaths from Gastritis, Enteritis and Diarrhoea 2

Deaths from Tuberculosis (all forms) 6

Table V.S.1 gives a summary of the vital statistics for the past 50 years

Table V.S.1
Statistics for St. Helens

YEAR	Population	Birth Rate	Crude Death Rate	Infant Mortality Rate	Deaths From					
					Measles	Scarlet Fever	Typhoid Fever	Diarrhoea	Whooping Cough	Diphtheria
1921	104,900	29.1	12.6	103	7	5	0	62	24	5
1922	106,400	26.4	13.4	115	60	4	2	28	3	5
1923	107,100	24.4	11.9	91	0	4	1	24	10	8
1924	108,700	24.1	12.0	103	29	1	2	36	11	4
1925	109,600	23.9	12.0	100	17	7	3	35	33	6
1926	110,000	23.2	12.0	102	27	1	0	43	4	6
1927	113,100	20.8	11.4	88	60	2	0	26	5	7
1928	110,500	21.8	12.0	98	15	5	1	29	21	10
1929	109,200	20.7	14.6	114	49	6	1	23	13	11
1930	109,200	21.5	11.4	80	7	2	0	4	8	4
1931	108,300	20.1	12.5	88	30	0	0	21	0	7
1932	107,600	20.1	11.4	89	1	1	0	26	4	0
1933	107,600	18.0	14.0	116	12	2	3	18	52	8
1934	*108,240	19.1	10.6	65	10	2	1	19	1	18
1935	108,100	18.7	12.2	94	14	2	1	21	15	17
1936	108,000	18.3	12.1	56	7	4	0	13	3	26
1937	107,400	18.6	12.1	88	3	2	0	12	7	15
1938	107,200	18.2	11.4	70	9	3	0	16	6	14
1939	106,600	17.3	11.6	79	1	3	0	18	4	23
1940†	103,300	18.0	13.4	78	10	0	0	8	5	19
1941†	102,750	18.6	11.4	71	2	1	1	13	15	13
1942†	101,500	17.7	10.6	65	6	0	1	13	1	11
1943†	99,410	19.8	13.0	72	0	1	0	16	4	6
1944†	98,410	20.5	11.3	57	4	0	0	21	2	1
1945†	99,150	20.3	11.3	60	0	0	0	17	0	0
1946†	104,740	22.2	11.0	60	2	0	0	26	3	2
1947†	105,790	25.2	12.7	70	10	0	0	44	1	0
1948†	110,100	21.3	10.2	61	0	0	0	14	1	1
1949	112,100	17.9	10.7	41	0	0	0	10	2	1
1950	112,500	17.9	10.1	39	0	0	0	21	2	0
1951	109,400	16.9	13.3	38	1	0	0	14	0	0
1952	109,100	17.8	10.4	38	0	0	0	11	0	0
1953	108,200	17.5	10.6	44	1	0	0	9	1	0
1954	*111,700	17.0	10.9	41	0	0	0	5	0	0
1955	111,900	16.0	11.0	33	0	0	0	3	0	0
1956	110,900	16.8	10.7	27	0	0	0	9	0	0
1957	110,900	17.2	10.7	31	0	0	0	8	0	0
1958	110,600	16.9	11.4	36	2	0	0	8	0	0
1959	110,700	17.1	10.8	24	1	0	0	4	0	0
1960	109,610	17.5	11.5	39	0	0	0	6	0	0
1961	108,480	17.6	12.7	28	0	0	0	6	0	0
1962	108,260	18.3	11.8	22	0	0	0	5	0	0
1963	107,480	17.7	12.4	27	0	0	0	6	0	0
1964	105,310	17.0	10.3	21	0	0	0	5	0	0
1965	104,440	17.6	12.2	19	0	0	0	6	0	0
1966	103,780	17.1	12.9	26	0	0	0	3	0	0
1967	103,320	16.9	12.8	24	0	0	0	1	0	0
1968	102,470	19.0	12.8	26	3	0	0	2	0	0
1969	102,770	17.7	13.7	19	0	0	0	2	0	0
1970	102,900	18.8	12.9	28	1	0	0	2	0	0

† Estimated civil population.

* Borough extended.

†† Gastritis, Enteritis and Diarrhoea from 1950 inclusive.

Population

The Registrar General's estimate of population for mid-year 1970 was 102,900 compared with 102,770 for mid-year 1969. During the year the natural increase in population (i.e. excess of births over deaths) was 609.

The population shows a small rise of 130 which is more in accord with our expectation that shortly influenced by immigration to new properties from Liverpool and surrounding areas, the number of St. Helens residents should rise.

Births

The number of live births registered during 1970 as belonging to St. Helens was 1,933, giving a birth rate of 18.8 per 1,000 of the estimated population. The area comparability factor was 1.00, thus, for national comparison, the birth rate remains at 18.8. The birth rate for England and Wales during 1970 was 16.0.

Of the 1,933 births, 997 were males and 936 females, a marked return to the usual sex distribution, there having been an excess of female over male births in the previous year.

There was an increase in the total number of births which could conceivably be attributable to young families moving into the town from the Liverpool area, but despite this there was a fall not only in the illegitimacy rate but in the total number of illegitimacies (142 to 111).

Deaths

During 1970 there were 1,324 deaths from all causes (720 males and 604 females), giving a crude death rate of 12.9 per 1,000 of the population, as compared with 13.7 in 1969. The adjusted death rate for the year (for national comparison) after applying the area comparability factor of 1.21 was 15.6 per 1,000 of the population. The death rate for England and Wales as a whole for 1970 was 11.7 per 1,000 of the population.

Table V.S.4 shows that of these deaths, 252 were due to cancer (excluding leukaemia) and 579 to diseases of the heart and circulatory system. These two causes, therefore, accounted for 831 out of a total of 1,326 deaths, i.e. approximately 63%. There were 6 deaths from tuberculosis (all forms) during the year which was the same number as for 1969.

The infant mortality rate was 27.9 per 1,000 live births, compared with 19.2 in the previous year. The rate for England and Wales was 18.0 per 1,000 live births.

The maternal mortality rate for the year 1970 was 0.0 per 1,000 live and still births.

Further reference to the infantile and maternal mortality death rates is made in the appropriate sections of this Report.

Deaths from Tuberculosis

Tuberculosis was the cause of 0.45% of all deaths that occurred during 1970. The corresponding percentage in 1969 was 0.42%. The ages of which these deaths occurred are shown in Table V.S.4. Further reference is made in the special section (VII) on Tuberculosis.

Malignant Diseases

The deaths from these diseases during the past five years were as follows:

Table V.S.2

Age Groups	1966	1967	1968	1969	1970
0-1	—	—	—	—	—
1-	—	1	—	—	—
5-	1	—	—	—	—
15-	1	2	1	—	1
25-	2	1	—	1	4
35-	11	10	5	4	5
45-	31	35	21	17	28
55-	60	66	73	54	71
65-	81	75	99	72	94
75-	47	52	58	48	49
Total	234	242	257	196	252
Percentage of total deaths	17.5	18.3	19.1	13.9	19.0
Death rate per 1,000 of population	2.3	2.3	2.5	1.9	2.5

The following table V.S.3, gives particulars of deaths due to specific malignancies during the last five years:

Table V.S.3

Cause	1966		1967		1968		1969		1970	
	M	F	M	F	M	F	M	F	M	F
Cancer:										
Stomach	27	17	27	17	22	23	24	24	17	15
Lung	54	6	55	5	67	10	64	7	66	9
Other	58	72	69	69	58	77	32	45	75	70
Total	139	95	151	91	147	110	120	76	158	94
	234		242		257		196		252	

Table V.S.4

Causes of, and ages at, death during 1970

Causes of Death	Sex	Total All Ages	4 wks. & under		Age in Years								
			Under 4 wks.	1 year	1-5	5-15	15-25	25-35	35-45	45-55	55-65	65-75+	
Enteritis and other Diarrhoeal Diseases	M	-	-	-	-	-	-	-	-	-	-	-	-
	F	2	-	2	-	-	-	-	-	-	-	-	-
Tuberculosis of Respiratory System	M	3	-	-	-	-	1	-	-	-	2	-	-
	F	1	-	-	-	-	-	1	-	-	-	-	-
Late effects of Respiratory Tuberculosis	M	2	-	-	-	-	-	-	1	-	1	-	-
	F	-	-	-	-	-	-	-	-	-	-	-	-
Measles	M	-	-	-	-	-	-	-	-	-	-	-	-
	F	1	-	-	1	-	-	-	-	-	-	-	-
Other Infective and Parasitic Diseases	M	1	-	-	-	-	-	-	-	1	-	-	-
	F	-	-	-	-	-	-	-	-	-	-	-	-
Malignant Neoplasm, Buccal Cavity etc.	M	3	-	-	-	-	-	-	-	-	-	3	-
	F	1	-	-	-	-	-	-	-	-	-	1	-
Malignant Neoplasm, Oesophagus	M	7	-	-	-	-	-	-	1	1	4	1	-
	F	3	-	-	-	-	1	-	-	-	-	2	-
Malignant Neoplasm, Stomach	M	17	-	-	-	-	1	-	1	6	5	4	-
	F	15	-	-	-	-	-	-	3	6	6	6	-
Malignant Neoplasm, Intestine	M	15	-	-	-	-	-	-	2	5	4	4	-
	F	14	-	-	-	-	-	1	1	2	5	6	-
Malignant Neoplasm, Larynx	M	3	-	-	-	-	-	-	1	-	-	2	-
	F	-	-	-	-	-	-	-	-	-	-	-	-
Malignant Neoplasm, Lung, Bronchus	M	66	-	-	-	1	-	-	6	18	31	8	-
	F	9	-	-	-	-	-	-	1	4	2	2	-

Table V.S.4 (continued)

Causes of Death	Sex	Total All Ages	Under 4 wks	4 wks. & under 1 year	Age in Years								
					1-5	5-15	15-25	25-35	35-45	45-55	55-65	65-75+	
Chronic Rheumatic Heart Disease	M	6	-	-	-	-	1	3	-	1	1	1	1
	F	16	-	-	1	3	5	2	3	2	3	3	3
Hypertensive Disease	M	10	-	-	-	-	-	1	4	3	2	2	2
	F	11	-	-	-	-	-	1	2	1	7	7	7
Ischaemic Heart Disease	M	177	-	-	-	5	24	48	64	36	36	36	36
	F	102	-	-	-	1	16	35	49	49	49	49	49
Other Forms of Heart Disease	M	17	-	-	-	1	1	3	5	6	6	6	6
	F	36	-	1	-	-	-	8	3	24	24	24	24
Cerebrovascular Disease	M	57	-	-	1	2	4	9	15	26	26	26	26
	F	95	-	-	-	1	3	11	28	52	52	52	52
Other Diseases of Circulatory System	M	20	-	-	-	1	1	3	4	11	11	11	11
	F	32	-	-	-	-	-	4	8	20	20	20	20
Influenza	M	13	-	-	-	-	-	3	6	4	4	4	4
	F	18	-	-	-	-	1	4	7	5	5	5	5
Pneumonia	M	72	-	2	-	2	3	13	18	33	33	33	33
	F	74	4	3	1	3	1	3	13	45	45	45	45
Bronchitis and Emphysema	M	62	-	-	-	2	4	11	29	16	16	16	16
	F	19	-	-	-	1	1	1	5	11	11	11	11
Asthma	M	1	-	-	-	1	-	-	-	-	-	-	-
	F	-	-	-	-	-	-	-	-	-	-	-	-
Other Diseases of Respiratory System	M	14	-	-	-	-	-	2	9	3	3	3	3
	F	4	-	-	-	-	-	-	1	1	1	1	1

II—METEOROLOGY

Rainfall

The total rainfall for 1970 as measured at the Victoria Park Observatory was 32.62 inches compared with 32.88 inches in 1969. At Eccleston Hill Waterworks 35.26 inches were recorded compared with 38.11 inches in the previous year. The highest day's rainfall of the year (0.81 in) occurred during the 24 hours period ending at 9 a.m. on 4th October. The average daily rainfall for May, June, July and August was 0.07 inches, compared with 0.08 inches for the corresponding period in 1969. The wettest month was November with 5.53 inches, and the driest month was May with 0.40 inches. Snow fell on 10 days during the year.

Sunshine

During the year 1,236.05 hours of sunshine were recorded, and the highest reading was 14.3 hours on the 7th June. The average daily sunshine during May, June, July and August was just over 5.58 hours.

Temperature

Temperatures of 70°F and over were recorded on 65 days during the year. The highest temperature recorded was 87.5°F on the 11th June and the lowest was 18.1°F on the 7th January

Wind Pressure

No adequate records were available due to a damaged instrument.

The following Table M.1 shows the maximum and minimum temperature recorded in each month and the distribution of sunshine and rainfall throughout the year.

Table M.1

Month	Maximum temperature recorded in shade	Minimum temperature recorded in shade	Sunshine	No. of sunless days	Rainfall	No. of days on which rain fell
1970	°F	°F	hrs.		ins.	
January	58.0	18.1	9.40	26	2.78	21
February	53.8	25.0	76.05	7	3.49	17
March	63.0	25.5	104.05	3	1.95	16
April	62.0	20.5	121.60	3	3.32	17
May	75.0	41.0	181.85	2	0.40	5
June	87.5	48.2	226.70	2	1.55	10
July	86.8	47.0	138.25	2	3.44	19
August	82.7	47.2	139.70	4	2.84	11
September	75.3	40.3	105.50	2	2.00	17
October	63.4	36.1	98.45	11	4.17	14
November	62.0	33.4	30.40	11	5.53	26
December	61.5	28.0	4.10	28	1.14	17
					32.62	190

III—INFECTIOUS DISEASES

There were 116 notifications of Scarlet Fever and 59 notifications of Whooping Cough during the year.

There were 837 cases of Measles notified during 1970 compared with 108 cases in 1969.

1969 had showed the lowest incidence of measles yet recorded, presumably being attributable largely to the influence of measles vaccination, but in 1970 there was a considerable increase to approaching the levels of some earlier years. This was also the experience elsewhere and was no doubt due to the biennial periodicity of measles combined with difficulties in supply of vaccine following the withdrawal of one brand after several cases of encephalitis had been connected with its use.

Infective Hepatitis showed a considerable decline from its peak of the previous year. It appeared unlikely that there would be a resurgence. In consequence of an approach made by me to the Director of the Regional Blood Transfusion Service, we adopted the procedure of notification of cases to the R.B.T.S. to ensure that infected persons would not subsequently be accepted as blood donors.

Table I.D.1

Notification of Infectious Diseases received
during the undermentioned years

Disease	1961	1962	1963	1964	1965	1966	1967	1968	1969	1970
Smallpox	—	—	—	—	—	—	—	—	—	—
Scarlet Fever	215	103	45	179	249	123	74	221	163	116
Diphtheria	—	—	—	—	—	—	—	—	—	—
Measles	1371	500	1692	1140	888	699	484	1575	108	837
Whooping Cough	34	16	149	33	42	81	39	73	5	59
Enteric Fever	—	—	—	—	—	—	—	—	—	—
Dysentery	21	39	58	2	17	19	29	—	29	—
Erysipelas	4	4	2	—	—	2	—	1	—	—
Typhus Fever	—	—	—	—	—	—	—	—	—	—
Puerperal Pyrexia	4	4	4	3	—	1	1	—	—	—
Ophthalmia	—	—	—	—	—	—	—	—	—	—
Neonatorum	—	—	—	—	—	—	—	—	—	—
Acute Poliomyelitis	7	—	1	—	—	—	—	—	—	—
Acute Encephalitis	1	2	2	—	3	—	—	—	—	—
Meningococcal	—	—	—	—	—	—	—	—	—	—
Infections	2	11	3	1	1	1	—	2	4	—
Malaria	1	—	—	—	—	—	—	—	—	—
Infective Hepatitis	—	—	—	—	—	—	—	85	416	94
Food Poisoning	2	64	12	—	3	—	14	—	9	—

Infectious Diseases

Total number of cases notified, number of cases admitted to isolation hospital, and the total deaths from each disease as shown in Registrar General's classification of deaths.

Table I.D.2

Year 1970

Disease	Notifications Received	Cases known to be admitted to hospital	Total Deaths
Smallpox	—	—	—
Scarlet Fever	116	—	—
Diphtheria	—	—	—
Measles	837	—	—
Whooping Cough	59	—	—
Enteric Fever	—	—	—
Dysentery	—	—	—
Erysipelas	—	—	—
Typhus Fever	—	—	—
Puerperal Pyrexia	—	—	—
Ophthalmia Neonatorum	—	—	—
Acute Poliomyelitis	—	—	—
Acute Encephalitis	—	—	—
Meningococcal Infections	—	—	—
Malaria	—	—	—
Food Poisoning	—	—	—
Paratyphoid Fever	—	—	—
Infective Hepatitis	94	—	—

Table I.D.3

Age distribution of cases of Infectious Diseases notified

Year 1970

Disease	Notifications received	Age groups												
		Under 1	1—	2—	3—	4—	5—	10—	15—	20—	35—	45—	65—	
Smallpox ?	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Scarlet Fever	116	1	3	9	12	15	64	11	1	—	—	—	—	—
Diphtheria	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Measles	837	41	103	137	128	138	280	7	3	—	—	—	—	—
Whooping Cough	59	7	3	6	5	7	30	1	—	—	—	—	—	—
Enteric Fever	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Dysentery	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Erysipelas	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Typhus Fever	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Puerperal Pyrexia	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Ophthalmia Neonatorum	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Acute Poliomyelitis	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Acute Encephalitis	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Meningococcal Infections	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Malaria	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Food Poisoning	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Paratyphoid Fever	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Infective Hepatitis	94	—	—	1	3	1	34	29	10	11	3	2	—	—

Disinfection and Disinfestation

By arrangements with the Liverpool Hospital Board the use of facilities for disinfection of personal articles of patients is retained at the St. Helens Peasley Cross Hospital. Facilities are also retained at the Hospital in the Cleansing Block for the treatment of scabies and the cleansing of verminous persons.

Laboratory Work

The following Table I.D.4, shows the number of specimens received by the Health Department for distribution to various laboratories during the year.

Table I.D.4

Specimens	Number Received	Results	
		Positive	Negative
Swabs for Diphtheria	3	—	3
Blood for Rh Factor	21	17	4
Gastro-Enteritis, Dysentery, and Food Poisoning	109	3	106
Typhoid and Paratyphoid	3	—	3
Total	136	20	116

IV—IMMUNISATION AND VACCINATION

Diphtheria Immunisation

In 1970 the Local Authority's Scheme for Diphtheria Immunisation of the child population was continued as previously. Table I.V.1, below, indicates the number of children in different age groups who received primary immunisation and reinforcing injections in 1970.

Table I.V.1

Number of children immunised against Diphtheria during 1970

Born:	1970	1969	1968	1967	1963— 1966	Under age 16	Total
Primary Immunisations							
Local Authority Medical Officers	2	600	118	15	102	3	840
Private Practitioners	24	232	30	3	4	1	294
Total	26	832	148	18	106	4	1134
Reinforcing Injections							
Local Authority Medical Officers	—	—	256	69	1169	—	1494
Private Practitioners	—	1	20	8	53	6	88
Total	—	1	276	77	1222	6	1582

The following shows the record of primary immunisations carried out since 1965:

1965	1966	1967	1968	1969	1970
1766	1642	1692	1649	783	1134

The figure of 1,134 represents all children up to 15 years of age. Of the children born in 1969/70 a total of only 858 children born in these two years were immunised during the year. As a threshold of immunity this is still much too low, when it is considered that there are over 1,900 births per year in the County Borough.

Vaccination against Whooping Cough

Table I.V.2

Number of children immunised against Whooping Cough during 1970.

	1970	1969	1968	1967	1963- 1966	Under age 16	Total
Primary Immunisations combined with other antigens							
Local Authority Medical Officers	2	599	118	15	9	3	746
Private Practitioners	24	232	30	3	4	1	294
Total	26	831	148	18	13	4	1040
Reinforcing Injections combined with other antigens							
Local Authority Medical Officers	-	-	256	69	24	-	349
Private Practitioners	-	1	20	8	53	6	88
Total	-	1	276	77	77	6	437

Vaccination against Smallpox

Table I.V.3

Number of Vaccinations against Smallpox during 1970

At Ages:	0-3 m'ths	3-6 m'ths	6-9 m'ths	9-12 m'ths	1 year	2-4 years	5-14 years	15 & over	Total
Vaccinations									
Local Authority Medical Officers	-	-	3	2	222	57	74	14	372
General Practitioners	-	-	1	2	157	31	20	65	274
	-	-	4	4	379	88	94	79	648
Re-Vaccinations									
Local Authority Medical Officers	-	-	-	-	-	-	86	14	100
General Practitioners	-	-	-	-	1	8	29	211	249
	-	-	-	-	1	8	115	225	349

Measles Vaccination, 1970

Table I.V.4

Year of Birth	1969	1968	1967	1963-66	Under 16	Total
Local Authority	185	170	47	40	1	443
General Practitioners	99	63	24	36	8	230
	284	233	71	76	9	673

Poliomyelitis Vaccination

During the year, 1,297 persons completed a full primary course of three oral doses of poliomyelitis vaccine. In addition, 3,293 persons were given reinforcing doses.

With regard to the 1-2 year age groups, 821 children in this group received three oral doses of vaccine during the year.

As with diphtheria immunisation, this figure is still too low, and it is again emphasised that the only way of preventing serious outbreaks of these diseases is for parents to have all children immunised and vaccinated.

German Measles (Rubella) vaccination, 1970

Rubella is a common infectious disease which usually gives rise to very little disability but, as is now common knowledge, the infection in women who are in the early stages of pregnancy can lead to abortion or to handicapping conditions (deafness, cataracts, mental retardation, congenital heart defect) in a proportion of surviving children. It became national policy to offer vaccination to school girls at age 13 thereby, it is hoped, allowing the majority of the population to acquire a solid natural immunity and yet giving protection against foetal damage in those women who had not gained a natural immunity. It would be technically feasible to determine which girls had previously undergone a natural infection but administratively this would have proved extremely difficult to cope with and since vaccination of the already immune is harmless, the vaccination is offered without discrimination to all girls of the appropriate age.

Vaccinations commenced at one school in December, 1970; 98 consent forms were returned and 86 girls were vaccinated, 8 being absent and 4 not vaccinated because of contra-indicating allergies. A fuller programme is being arranged for 1971.

Table I.V.5

Poliomyelitis Vaccination, 1970

		3 Oral Doses							Total
Year of Birth		1970	1969	1968	1967	1963-66	Under 16 years	Others	
Local Authority		2	612	116	16	96	185	-	1027
General Practitioners		16	191	48	3	7	1	4	270
		18	803	164	19	103	186	4	1297
		Reinforcing Doses							Total
Year of Birth		1970	1969	1968	1967	1963-66	Under 16 years	Others	
Local Authority		-	-	261	69	1294	1600	1	3225
General Practitioners		-	1	9	4	47	7	-	68
		-	1	270	73	1341	1607	1	3293

V-AMBULANCE SERVICE

Table A.S.1 gives the details of the work carried out by the Ambulance Service in St. Helens during 1969.

TABLE A.S.1. CALLS ATTENDED BY AMBULANCE SERVICE DURING 1970

1970 Month	Accidents			Emergency			General Service Removals				Out-Patients Total
	Street	Works	Home	Sudden Illness	Maternity	Hospital Admissions	Hospital Discharges	Hospital Transfers			
January	93	11	49	145	69	267	98	33		2466	3231
February	88	14	42	93	58	227	113	39		2721	3395
March	90	19	49	86	88	211	107	43		3037	3730
April	90	15	29	95	63	238	109	28		3248	3915
May	98	14	46	99	72	218	109	30		3072	3758
June	83	13	48	107	62	216	102	39		3315	3985
July	88	13	49	102	70	189	67	32		1613	2223
August	82	8	32	127	48	191	88	21		2334	2931
September	72	14	41	88	57	188	87	30		2760	3337
October	115	8	45	119	61	207	103	45		3062	3765
November	115	9	52	99	65	219	103	31		2902	3595
December	101	8	41	132	87	203	122	47		3023	3764
Total	1115	146	523	1292	800	2574	1208	418		33553	41629

TABLE A.S.2. AMBULANCE SERVICE MILEAGE DURING 1970

1970 Month	Dual Purpose Ambulances										Total	
	2/4 Stretcher Ambulances					Dual Purpose Ambulances						
	DDJ	EDJ	GDJ	RDJ	653F	UDJ	WDJ	GDJ	LDJ	WDJ	CDJ	
January	35	632	514	1101	625	1171	1343	1570	1862	1400		11199
February	29	395	941	771	807	1119	1582	1380	1796	1510		11536
March	461	469	1014	974	1382	1336	691	1848	1570	1794		12372
April	296	569	1180	1068	799	1385	644	1997	1821	1564		12368
May	175	521	997	1188	1257	1028	1262	1768	1894	1579		11669
June	460	673	892	1213	1266	484	1592	2088	286	1561	680	12846
July	-	856	425	644	617	14	896	814	1061	1163	925	8568
August	-	432	-	830	791	764	595	1277	1582	1152	1328	10322
September	-	637	-	912	859	86	1626	1623	1597	1614	1645	11421
October	-	517	-	877	978	-	1663	1539	1689	1579	2064	12281
November	-	532	613	1039	845	-	1398	1274	1846	1569	2083	12512
December	-	719	142	1383	952	278	1340	1442	1808	1407	1507	12396
Total	1456	6952	6718	12000	11178	7665	15924	18620	18812	17892	10232	139490

ST. HELENS COUNTY BOROUGH

AMBULANCE SERVICE.

ANNUAL REPORT – 1970.

Vehicles in Commission at 31st December, 1970

<i>Make</i>	<i>Registration No.</i>	<i>Year</i>	
Austin Sheerline	EDJ 411	1955	
Austin Princess	GDJ 111	1956	2/4 Stretcher
Austin Princess	RDJ 653 F	1967	Ambulances
Austin 152	NDJ 999	1960)
Austin J2	RDJ 766	1961)
Austin J2	UDJ 28	1962)
Austin J2	WDJ 704	1964)
Austin J2	GDJ 290 C	1965)
Austin J2	LDJ 443 E	1967)
Austin JU	WDJ 873 G	1969)
Austin JU	CDJ 257 H	1970)

Dual
Purpose
Ambulances

Comment

It will be remembered that in the previous year there had been a national "strike" of ambulancemen. The issues were complex but were concerned primarily with what they saw as inadequate representation at national level and an attempt to form a "breakaway" union, the Federation of Ambulance Personnel. A Dr. McCarthy was asked to enquire into the discontent and in mid-year produced a report which, in my view, assessed the situation very fairly. There arose from this report increased and better informed representation at national level, but the F.A.P. did not achieve recognition for negotiating purposes though Dr. McCarthy recommended that a future be considered for it as a professional association.

Locally, unease continued following last year's dispute and to the best of our knowledge most of the ambulancemen (but not the Supervisors) were not members of any Union other than the F.A.P. In Mid-year a dispute erupted over a disciplinary matter resulting in a withdrawal of service by the ambulancemen for over 2 weeks before they returned to work. However, the Superintendent, Supervisors and the Department's driver coped very well with emergencies arising at that time.

At the beginning of the year there was introduced nationally a new scheme relating pay to experience and training. In the short term this will represent a large expenditure on training for this and other Authorities, but in the longer term it ought to prove a very valuable means of improving the skill of ambulancemen, adding to their status and self respect and encouraging a good standard of recruitment.

In February the Committee agreed to my proposal that we attach our staff, in turn, to local hospitals both to increase the men's knowledge of hospital

procedures and to enhance practical working relationships. A programme of attachment at Whiston (mainly) and St. Helens Hospitals was worked out and a Supervisor was seconded. He was most enthusiastic about the value of his period in the hospitals, though naturally he made suggestions for amendment of the scheme, and the degree of interest he was shown by the consultants and other hospital medical staff was most encouraging.

To enable the men to have a proper say on procedures and equipment in the Ambulance Service, a Station Consultative Committee was set up, meeting for the first time in December. Its composition was two ambulancemen, one supervisor, the Ambulance Superintendent, and myself, and the Chief Administrative Assistant acted as Secretary.

VI—MENTAL HEALTH SERVICE

The Medical Officer of Health remained, of course, responsible for the organisation and control of the local services but the appointment of Dr. Chandy made it possible for a Senior Medical Officer to begin to take specific responsibilities in this field.

During the year the Senior Mental Welfare Officer left the Department. One Student Mental Welfare Officer qualified as a Mental Welfare Officer, one Student left in May and two Student Mental Welfare Officers supplemented the staff of three Mental Welfare Officers.

This really meant that all the staff were carrying too large a burden of work but recruitment and retention of staff in this particular field has locally been disappointing.

Despite the difficulties under which the staff laboured, there was a continuing improvement in the depth of co-ordination between the Officers of this Authority and the Regional Board's Psychiatrist of whom Dr. J. M. A. C. Stewart has a special advisory relationship with the Authority.

Co-ordination with Regional Hospital Board.

There are frequent consultations with the Board's Consultant Psychiatrists, and growing use is made of the Domiciliary Visiting Service whereby the Psychiatrists are called in and are able to visit patients in their own homes. In addition, one or other of the Mental Welfare Officers make frequent visits to the local Hospital Psychiatric Out-Patient sessions. The Local Health Authority is also undertaking, on request, the supervision of patients on trial or on licence from Psychiatric Hospitals.

Early in the year there was a meeting of Mental Welfare Officers with Consultants and the Medical Officer of Health at Rainhill which further facilitated work on both sides and had the specific positive result of enabling Mental Welfare

Officers to attend a weekly clinical meeting held at Rainhill Hospital to discuss the problems of, and help for, individual patients. These meetings have continued with a good attendance.

Duties Delegated to Voluntary Organisations

No duties of the Local Health Authority have been delegated to voluntary organisations. The St. Helens Mental Welfare Society, however, assist in Welfare activities among mentally subnormal persons and members of a psychiatric social club in connection with the provision of clothing and footwear, day outings, holidays, Christmas parties, etc. The Local Health Authority continued its grant to the funds of the Society for this work. The Women's Royal Voluntary Services also assist in the provision of clothing and footwear and the Dorcas Society supplies quantities of bedding for needy cases.

Social Clubs.

The club for mentally subnormal persons continues to meet at Peter Street and a variety of outings and entertainments were enjoyed throughout the year, under the direction of Mr. A. Phythian. The Psychiatric Social Club met every Thursday afternoon in premises in Birchley Street. Discharged patients derived a great deal of benefit from their weekly meetings.

Account of work undertaken in the community under Section 28, National Health Service Act, 1946.

Prevention.

In dealing with the problem of prevention of mental illness the activities of the Mental Welfare Officers were focussed mainly on domiciliary visiting and arranging contacts with suitable organisations for those in need of advice or early treatment.

Close co-operation has been maintained by the Mental Health Services with practitioners and Consultant Psychiatrists of the local psychiatric hospital. During the year 118 attendances were made by the Mental Welfare Officers of the Local Authority at the local Hospital Psychiatric Out-Patients Clinic.

In addition, a valuable link is provided by frequent case consultations between the Health Visitors of the various districts in the town, the officers of the many statutory bodies and the Mental Welfare Officers.

Inevitably some cases finished up by undergoing hospital treatment, but increasing emphasis on this type of work leads to much desired early diagnosis and early treatment. In many other cases assistance was given in the adjustment of social problems and the bulk of these cases were referred from Consultant Psychiatrists, General Practitioners, and even on requests from patients themselves. In dealing with prevention cases, the Mental Welfare Officers paid a total of 645 visits.

Care

In this sphere of activity it was found that the majority of the problems dealt with arise in family life as a result of the admission of a member of the family to hospital. Advice and assistance were sought from the Mental Health Department on many occasions by relatives and not infrequently by request of the patients themselves. In other instances, at the request of Hospital Consultants Psychiatrists in the area, home visits were paid to relatives of in-patients and social histories completed or clinic appointments arranged.

During the year 511 visits were made in connection with these cases.

After-care

The following summary gives the Local Health Authority's after-care record during 1970:-

Number on lists at 1/1/1970	484
Discharged persons requesting after-care	60
	544
Deleted from list during 1970	423
Number on list at 31/12/70	121

After-care continues to provide a constant sphere of activity and great use is made of psychiatric surveillance at the local hospital out-patient clinics. The Mental Health Service continues to be an integral part of the whole process for rehabilitation of discharged patients and close liaison is maintained with the disablement resettlement service of the Department of Health and Social Security, Welfare Officers of local firms, voluntary organisations, etc.

During the year, 1,659 home visits were made by the Mental Welfare Officers (1,455 in 1969).

During the year under review, a total of 487 interviews were conducted with people seeking the aid of the prevention, care and after-care services (784 in 1969).

It will be observed that visits have increased remarkably while interviews have decreased. This has been occasioned by greater mobility of officers as cars have become more available, the post of mental welfare officer has now been approved for essential use car allowances.

THE MENTAL HEALTH ACT, 1959.

The following two tables show the work undertaken by the Mental Welfare Officers under the above Act from 1st January, 1970, to 31st December, 1970.

Table A gives the sources of referral and classification of new patients, whilst Table B shows the disposal of cases which were referred with a view to Application for Admission being made.

Number of patients referred to Local Health Authority during year ended 31st December, 1970

Table A

Referred by	Mentally Ill		Psychopath		Sub-Normal		Severely Sub-Normal		Totals		Grand Total				
	-16	16+	-16	16+	-16	16+	-16	16+	-16	16+					
	M	F	M	F	M	F	M	F	M	F					
(a) General Practitioners	-	59	77	-	-	-	-	-	-	-	59	77	136		
(b) Hospitals, on discharge from in-patient treatment	-	129	163	-	-	-	-	-	-	-	129	163	292		
(c) Hospital, after or during out-patient or day treatment	-	47	61	-	-	-	-	-	2	-	49	61	110		
(d) Local Education Authorities	-	-	-	-	1	2	1	1	-	-	1	2	5		
(e) Police and Courts	-	22	15	-	-	-	1	-	-	-	23	15	38		
(f) Other sources	-	44	33	-	-	1	1	1	1	2	3	46	86		
Total number of patients referred during year											4	4	308	351	667

Table B.

1. Admitted to Psychiatric Hospitals:			
<i>St. Helens Patients.</i>			
	<i>Male</i>	<i>Female</i>	<i>Total</i>
(a) On Emergency Applications under Section 29	17	14	31
(b) On Applications for admission for Observation under Section 25	16	25	41
(c) On Applications for admission for Treatment under Section 26	5	4	9
(d) Under Section 60 Hospital Order	2	—	2
<i>For other Authorities.</i>			
(a) On Applications for admission for Observation under Section 25	4	1	5
(b) On Applications for admission for Treatment under Section 26	—	—	—
(c) On Emergency Applications under Section 29	1	—	1
2. Notified as an alleged person suffering from Mental Disorder and dealt with as follows:			
<i>St. Helens Patients.</i>			
(a) Informal Admissions (Section 5)	76	90	166
(b) No Application made	15	18	33

HOSPITAL RETURN FOR 1970.

The following summary gives the disposal of known St. Helens patients in Psychiatric Hospitals during the year:

	<i>Male</i>	<i>Female</i>	<i>Total</i>
Number of Health Service Patients in Psychiatric Hospitals on 1/1/1970	254	318	572
Admissions during the year	116	133	249
	370	451	821
Deaths during the year	15	8	23
Discharges during the year	97	134	231
	112	142	254
Number of Health Service Patients in Psychiatric Hospitals on 31/12/1970	258	309	567

The known number of patients in hospitals at the end of the year is at the rate of 5.5 per 1,000 of the population, 103,000.

MENTAL SUBNORMALITY.

Ascertainment.

The total number of cases reported and referred as Mentally subnormal from the 1st January, 1970, to 31st December, 1970.

Table M.H.1.
Cases Reported and Referred and their Disposal.

	Under 16 years		16 years and over		Total
	M	F	M	F	
Cases ascertained during 1970 as suffering from subnormality or severe subnormality. Action taken on reports from:—					
(1) Local Education Authorities on children whilst at school or liable to attend school	1	1	2	1	5
(2) Other sources	3	4	5	1	13
Total	4	5	7	2	18
DISPOSAL OF ABOVE					
(1) Placed under Supervision —					
(a) Day Training Centre	2	4	2	1	9
(b) Domiciliary	2	1	4	1	8
(2) Admitted to Hospitals	—	—	1	—	1
Total	4	5	7	2	18

Hospital Waiting List.

As at 31st December it will be noted from the following Table M.H.2. that 12 cases (9 males and 3 females) still awaited vacancies in hospitals.

Table M.H.2.

	Under 16 years		16 years and over		Total
	M	F	M	F	
1. 1. In urgent need of hospital care					
(i) Cot and chair cases	—	—	—	1	1
(ii) Ambulant low grade cases	3	—	1	1	5
(iii) Medium Grade cases	1	—	—	—	1
(iv) High Grade cases	—	—	—	—	—
2. 2. Not in urgent need of hospital care					
(i) Ambulant low grade cases	2	—	1	—	3
(ii) High grade cases	—	—	1	1	2
Total	6	—	3	3	12

None of the above cases is considered to be in need of hospital care solely because of poor environment.

Total number of Reported and Referred Cases at 31st December, 1970.

The total number of reported and referred cases for whom the Local Health Authority of the County Borough was responsible at the 31st December was as follows:-

Table M.H.3.

	Under 16 years		16 years and over		Total
	M	F	M	F	
Under Supervision	41	24	90	74	229
Under Guardianship	—	—	—	—	—
	41	24	90	74	229

SUPERVISION

This work was carried out by the Mental Welfare Officers who visited cases regularly and reported to the Medical Officer of Health. In this way, besides maintaining contact with the patient, it was possible for the Mental Welfare Officers to become aware of the changes in family and other circumstances. The visits occasionally bring to light domestic problems, and in some cases convalescent holidays have been arranged, hospital or general practitioner treatment obtained, and the help of various organisations sought for the patients and relatives. In this connection, much work has been done in co-operation with probation services, the N.S.P.C.C. and other bodies. Any special recommendations which have been made were noted and placed before the Health Committee.

Classification of Cases under Supervision.

In Section A of the following table, cases under supervision have been classified as to their suitability for various types of training, whilst those actually receiving such training at the 31st December, 1970, are shown in Section B.

Table M.H.4.

	Under 16 years		16 years and over		Total
	M	F	M	F	
Section A					
Considered suitable for:-					
(i) Training Centre	26	19	—	—	45
(ii) Industrial Centre	—	—	26	25	51
(iii) Home Training	—	—	2	2	4
	26	19	28	27	100
Section B					
Number of cases receiving training on 31.12.1970:					
(i) Training Centre	26	19	—	—	45
(ii) In Industrial Centre	—	—	25	25	50
(iii) At home	—	—	—	—	—
	26	19	25	25	95

Short-Term Care

Short-term care was arranged for a number of persons suffering from subnormality or severe subnormality while their families took their annual holiday or some member of the family was in hospital, etc.

	Under 16 years		16 years and over		Total
	M	F	M	F	
Admitted to National Health Service Hospitals	4	1	8	5	18
Admitted to Local Authority Hostel	20	14	—	—	34
	24	15	8	5	52

During the year 121 interviews took place in the Mental Health Department in dealing with parents and relatives of mentally subnormal persons seeking advice and assistance, and officers paid 1,296 visits to their homes.

Ashtons Green Junior Training Centre.

Guided activities are practised at the Centre such as P.T., story telling and singing. Most of the older children are proficient at swimming and attend weekly sessions at the local baths. Various sports are also practised regularly and football, netball, cricket and gardening are all included in the curriculum.

During the year, parents' evenings were held at regular intervals. Dance displays were given by the pupils and a Spring Fair was held in order to provide funds to help towards purchase of additional equipment.

Stanley House Adult Training Centre.

The trend for increased demand of places referred to in the 1969 Report continued, though it was still not yet critical. Reference was previously made to the decision to allow part-time attendance and a second trainee was so admitted. The emphasis of staff training continued and the Deputy Supervisor, Mr. Webster, was seconded to a course of study for "Teachers of the Mentally Handicapped Adult". Success in this should considerably augment the existing staff's capacity to do the best for and to get the best out of the trainees. An unfortunate side effect of this was that Mr. Twist's taking over some of Mr. Webster's responsibilities would temporarily have an adverse effect on relations with the Junior Training Centre by making it necessary for him to give up his sessions there.

Naturally the staff and trainees continue to look forward to much enhanced activities in the planned new Adult Training Centre but to date we are still only at the stage of drawing up suitable plans. Perhaps due to increased unemployment the availability of work for the trainees from commercial undertakings diminished despite the encouraging development of the previous year. However, there began to be seen increased emphasis of doing work for Corporation Departments.

Considering the increased liability of the mentally subnormal to illness and that many of the trainees have to take family holidays at times when the Centre is

open, the average attendance continued to be very good (79%).

If I may anticipate a little I should mention that Mr. Pardoe, the Supervisor, produced a very lengthy report for early 1971 prior to the transfer to the Social Services Department, and I hope that we may produce that report in full in the next Annual Report which gives a much more detailed picture of the Centre's activities than we are normally able to provide.

ASHTONS GREEN JUNIOR TRAINING CENTRE.

	M	F	Total
Number of pupils on Register, 1st January, 1970	31	19	50
New Admissions	2	2	4
Number ceased to attend	1	—	1
Number on Register at 31st December, 1970 .	32	21	53
Average Daily Attendance	24	14	38

ADULT TRAINING CENTRE, SINCLAIR STREET.

	M	F	Total
Number of pupils on Register at 1st January, 1970	25	26	51
New Admissions	4	5	9
Number ceased to attend	4	7	11
Number on Register at 31st December, 1970 .	25	24	49
Average Daily Attendance	21	19	40

MENTAL HEALTH HOSTELS.

Abbey Road Rehabilitation Hostel — 20 Places.

Good use continued to be made of the hostel by both St. Helens and Lancashire County residents as the following table shows. Fortunately, there is little sign of "silting up" with long-stay cases which has been the fate of many similar hostels elsewhere. The average length of stay was about 3 weeks.

	St. Helens			For Other Authorities			Grand Total
	M	F	Total	M	F	Total	
Number of residents at 1/1/1970	5	2	7	3	3	6	13
Number admitted during the year	8	7	15	2	4	6	21
	13	9	22	5	7	12	34
Number discharged during the year	8	6	14	4	3	7	21
Number of residents at 31.12.1970	5	3	8	1	4	5	13

Ashtons Green Hostel — 12 Places.

This hostel, which provides short-term care for mentally subnormal children up to the age of 16 years, has been used extensively by ourselves and the City of Liverpool. The following table summarises the use made of the hostel during 1970.

	St. Helens			For Other Authorities			Grand Total
	M	F	Total	M	F	Total	
Number of residents at 1/1/1970	3	3	6	—	—	—	6
Number admitted during year	20	11	31	5	2	7	38
	23	14	37	5	2	7	44
Number discharged during year	20	14	34	5	2	7	41
Number of residents at 31st December, 1970	3	—	3	—	—	—	3

VII—TUBERCULOSIS

In 1970, 16 persons were notified as suffering from pulmonary tuberculosis, and 1 from non-pulmonary tuberculosis, 11 less than in the previous year.

Mortality

Six deaths in 1970 were due to tuberculosis, 6 being caused by the pulmonary form of the disease, and nil being caused by the nonpulmonary form of the disease.

The death rate from tuberculosis was therefore 0.6 per 10,000 of the population.

Table T.B.2 shows the incidence and death rate figures from 1951.

Table T.B.1

Particulars of new cases and of deaths during 1970

Ages	New Cases				Deaths			
	Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary	
	M	F	M	F	M	F	M	F
0—	—	—	—	—	—	—	—	—
1—	—	—	—	—	—	—	—	—
2—	1	2	—	—	—	—	—	—
5—	—	—	—	—	—	—	—	—
10—	—	—	—	—	—	—	—	—
15—	—	—	—	—	—	—	—	—
20—	2	—	—	—	—	—	—	—
25—	—	—	—	—	—	—	—	—
35—	3	2	—	—	1	—	—	—
45—	1	—	—	—	—	1	—	—
55—	1	—	—	1	1	—	—	—
65—	2	—	—	—	3	—	—	—
75—	2	—	—	—	—	—	—	—
Totals	12	4	—	1	5	1	—	—

Table T.B.2
Number of cases notified and number of deaths each year, 1951 to 1970

Year	No. of Primary notifications received		Deaths		Death Rate per 10,000 of population	
	Pulmonary	Non-Pulmonary	Pulmonary	Non-Pulmonary	Pulmonary	Non-Pulmonary
1951	87	17	33	8	3.0	0.7
1952	99	17	37	3	3.4	0.3
1953	104	20	27	4	2.5	0.4
1954	109	3	28	1	2.5	0.1
1955	71	7	24	4	2.1	0.4
1956	116	6	12	3	1.1	0.3
1957	85	20	15	2	1.4	0.2
1958	79	5	17	2	1.5	0.2
1959	68	9	10	3	0.9	0.3
1960	62	6	10	—	0.9	0.0
1961	51	7	10	—	0.9	0.0
1962	49	10	12	—	1.1	0.0
1963	39	2	6	1	0.6	0.1
1964	40	3	11	1	1.0	0.1
1965	32	5	6	1	0.6	0.1
1966	23	3	8	—	0.8	0.0
1967	20	—	8	—	0.8	0.0
1968	13	1	6	—	0.6	0.0
1969	28	—	3	3	0.3	0.3
1970	16	1	6	—	0.6	0.0

Tuberculosis Dispensary and Chest Clinic

The administration and clinical work of the tuberculosis service is carried out at Bank House, Cloughton Street, under the supervision of the Area Chest Physician appointed by the Liverpool Regional Hospital Board. This officer is responsible to the Local Authority for work under that part of Section 28 of the National Health Service Act, 1946, which deals with the care and after-care of patients suffering from tuberculosis. The Welfare Officer is wholly employed by the Local Authority, and close liaison is maintained with the Regional Board.

During 1970, the following attendances were made at the Dispensary:

Tuberculous cases and contacts . . . 3,004

The number of St. Helens cases on the Dispensary Register on the 31st December 1970, was 731 (616 pulmonary and 115 non-pulmonary).

Institutional Treatment

Seventeen tuberculous patients from St. Helens were admitted to Eccleston Hall for treatment during the year 1970. There were 6 in-patient deaths of St. Helens cases during the twelve months.

VIII—PREVENTION OF ILLNESS, CARE AND AFTER—CARE SERVICE

As approved by the Health Committee various articles of Nursing Equipment are available, e.g. air rings, bed pans, urinals, back rests, commodes, bed cradles, hospital type beds, mattresses, and pulleys, wheelchairs, walking aids, crutches, plastic sheeting and disposable underpads.

The number of patients using the loan service during the year December 1969 – December 1970 was 169. The total fees during the year amounted to £3.77p.

Welfare

During the year the Welfare Officer advised and assisted patients and their relatives. Home visits were made; also visits to Eccleston Hall, Providence Hospital, St. Helens Hospital, Whiston Hospital and Sunny Bank Nursing Home Woolton.

Chronic Sick and Geriatric Cases

Close liaison between hospitals and the Welfare Officer has continued and many people coming out of the hospital have been loaned the necessary equipment.

Marie Curie Memorial Fund

Application for assistance was made on behalf of 16 patients and eight patients have been admitted to Sunny Bank Nursing Home for a period of one month at a time.

National Cancer Relief Fund

Forty five patients received grants from this fund. Seventeen patients received extra grants for fuel and bedding.

Convalescence

One female patient a spastic and her mother went to Ellerslie Court, Southport for two weeks. The District Nursing Association bore the cost of this.

Chest Clinic

Close liaison between the Chest Clinic and the Welfare Officer, has been of great assistance to a number of patients.

December 1969 – December 1970.

Nursing Aids Borrowed	Nursing Aids Returned	Home Visits	Officer Interviews
169	94	1466	808

A special thanks to all the various organisations for help given throughout the year.

Family Planning

Looking into the future it appears that family planning is likely to become accepted as a vital individual and community need; during 1970 there was little change in the services provided in St. Helens.

The bulk of the Corporation's service is provided by the Family Planning Association acting as our agent, using the premises provided by the Corporation at Bickerstaffe Street on agreed terms, but grants are also made to the St. Helens Catholic Marriage Advisory Council and the St. Helens and District Marriage Guidance Council in recognition of the family planning component of their activities. The grant arrangements with the Family Planning Association take account of the actual number of cases attending and include the provision by which the Local Authority pays for consultation and examination and for the issuing of contraceptive supplies to medical/social cases referred by the Authority's Officers.

In September, working in conjunction with the Regional Training Officer of the Family Planning Association, we mounted a "seminar" on one day with films, talks and audience discussion. There were contributions from the Catholic Marriage Guidance Council (Dr. Henley and Mrs. Gavin) and the St. Helens and District Marriage Guidance Council (Mrs. Morris) as well as from the Family Planning Association and myself. The seminar was primarily intended to produce an increased awareness of and interest in Family Planning problems across the whole range of our own staff and for various social workers also, but it had what I thought of as the very valuable secondary object of bringing together these many groups of people whose contact with each other is at other times often fleeting. Doctors, midwives, health visitors and mental welfare officers attended in strength from our own Department and welfare officers, probation officers and child care officers came in encouraging numbers with a total attendance of about 60. I am sure that with our staff the prime aim was achieved — there followed an increase in referrals to the Family Planning Clinic and 2 midwives and 2 health visitors and a senior medical officer were subsequently put through courses of training. Attachment of health visitors and midwives at the local clinic for an observation session was later arranged.

Bickerstaffe Street Clinic

Number of St. Helens Women Attending

Year	New Patients	Established Patients	Total	Referred by L.A.
1967	315	1168	1483	20
1968	305	1238	1543	45
1969	383	1121	1506	43
1970	502	1290	1792	51

B.C.G. VACCINATION

The scheme for the vaccination of school children against tuberculosis was continued during 1970. During the year, 1,257 were Heaf tested. Of these, 60 failed to keep their second appointment and will be followed up when the vaccination team again visits the school during the coming year. 164 pupils were found to be positive to the test and therefore did not require vaccination. The remaining 1,033 were successfully vaccinated with B.C.G. vaccine.

Pupils who were found to be strongly positive to the Heaf tuberculin test were referred to the Chest Clinic for further investigation. In the majority of these cases it was found that there was a history of contact with a known case of tuberculosis, usually a member of the family. No active cases were found in this group during 1970.

The 164 pupils found positive to the Heaf tuberculin test give a tuberculin positive rate of 13.7% for the groups tested during 1970.

B.C.G. vaccination, together with tuberculin testing of school children, has a vital part to play in the future struggle against a disease that has been largely controlled, but by no means eradicated.

CHIROPODY SERVICE

The scheme for the provision of chiropody treatment to elderly persons continued unchanged throughout the year. The service is free to persons aged 65 years and over, and treatments are given in the surgeries of practising Chiropodists who are registered with the Health Authority.

Prior authority for each treatment must first be obtained from the Health Department, but invariably the recommendation of the Chiropodist as to the date of the next treatment is accepted.

The total number of treatments provided, as shown in the following table, was 15,419. This compares with 15,576 in 1969, 16,747 in 1968, 21,515 in 1967 and 20,036 in 1966.

Chiropody Treatments, 1970

Month	Surgery		Domiciliary		Total		Grand Total
	M	F	M	F	M	F	
January	228	832	27	143	255	975	1230
February	223	843	23	141	246	984	1230
March	226	829	36	163	262	992	1254
April	255	946	26	151	281	1097	1378
May	232	897	31	146	263	1043	1306
June	252	933	29	158	281	1091	1372
July	238	921	33	185	271	1106	1377
August	212	758	20	134	232	892	1124
September	254	972	32	152	286	1124	1410
October	208	792	25	119	233	911	1144
November	269	957	22	169	291	1126	1417
December	212	773	34	158	246	931	1177
Total	2809	10453	338	1819	3147	12272	15419

In addition there were 69 treatments given to handicapped patients below the age of 65.

The age and sex distribution of patients included on the Chiropody Register, receiving treatment during the year was as follows:

Sex	Ages				Treatments							Grand Total			
	-65	65-69	70+	Totals	Surgery			Domiciliary			Totals				
					-65	65-69	70+	-65	65-69	70+	-65		65-69	70+	
Males	7	174	390	571	12	849	1960	33	56	282	45	905	2242	3192	
Females	6	510	1511	2027	-	2760	7693	24	95	1724	24	2855	9417	12296	
Total	13	684	1901	2598	12	3609	9653	57	151	2006	69	3760	11659	15488	
					13274			2214							

The total number of patients dealt with was 2,598 compared with 2,974 in 1969. Patients decreased by 13% over 1969 and treatments provided decreased by 1% in the same period.

The average number of treatments provided to individuals over the past five years is shown in the following table:

**AVERAGE NUMBER OF TREATMENTS PROVIDED TO EACH
INDIVIDUAL PATIENT.**

	Treatments per annum				
	1970	1969	1968	1967	1966
Males	5.6	4.4	4.5	6.9	6.5
Females	6.1	5.6	6.3	7.8	7.5

The above average include new patients commencing treatment and other patients discontinuing treatment during the year.

At a special Chiropody Clinic sited at the Welfare Foods Centre in Bickerstaffe Street, 88 treatments were provided to total of 52 patients, 33 being expectant mothers and 19 handicapped persons.

69 treatments were given to handicapped persons in their own homes or in Chiropodists' surgeries.

IX—VENEREAL DISEASES

The St. Helens Special Treatment Centre is under the administration of the Liverpool Regional Hospital Board, but the centre continues to be staffed by male and female nurses provided by the Corporation under agency agreements.

The following statement shows the number of cases dealt with at the Centre during the year 1970, in comparison with the previous year. This includes cases from outside the Borough who may receive treatment at the St. Helens Centre.

However, many of the cases were from St. Helens or nearby. The continuing increase in venereal disease incidence is a source of great disappointment, to say the least, but I feel unable to add anything of value to the massive attention which the subject has already achieved in all the media from laymen and from doctors.

Table V.D.1

	1969		1970	
	M	F	M	F
1. No. of cases under treatment or observation on 1st January	62	30	33	23
2. No. of new cases (including cases previously removed from the register who returned for further observation or treatment) and Transfers	199	133	244	162
3. No. of cases discharged after completion of treatment or transferred to other centres or ceased to attend . .	228	140	206	132
4. No. of cases remaining under treatment or observation on 31st December	33	23	71	53
5. No. of attendances	824	651	1176	648

Table V.D.2 shows the number of cases of definite venereal disease treated for the first time at the Centre during each of the past ten years. This table excludes cases which had received treatment previously at other Centres, and also cases removed from the register in previous years who returned for treatment or observation for the same infection.

Table V.D.2

Number of new cases of Venereal Diseases dealt with during 10 years, 1961 to 1970:

Year	Syphilis		Soft Chancre		Gonorrhoea		Total
	M	F	M	F	M	F	
1961	1	1	—	—	31	20	53
1962	1	—	—	—	24	15	40
1963	—	2	—	—	22	12	36
1964	1	1	—	—	38	15	55
1965	1	—	—	—	21	12	34
1966	—	—	—	—	24	11	35
1967	3	—	—	—	41	8	52
1968	3	—	—	—	37	10	50
1969	—	—	—	—	92	39	131
1970	—	—	—	—	100	75	175

The following table V.D.3 gives a summary of the services rendered at the treatment centre during the year, showing the areas in which the patients resided.

Table V.D.3

<i>Name of County, County Borough, etc.</i>	<i>Syphilis</i>	<i>Gonorrhoea</i>	<i>Other Conditions</i>	<i>Total</i>
St. Helens	—	126	151	277
Lancashire C.C.	—	25	15	40
Others	—	24	65	89
Total	—	175	231	406

Contact Tracing

During the year the welfare arrangements in connection with the Special Treatment Clinic were carried on as in previous years.

Gonorrhoea in Young People

Of the 100 males and 75 females who had contracted Gonorrhoea the age groups are as shown:

	1970	
	M	F
Under 16 years	—	3
16 to 17	2	1
18 to 19	28	2
20 to 24	30	57
25 and over	40	12
Total	100	75

X—MATERNITY AND CHILD WELFARE

Care of Mothers and Young Children

Notification of Births

Under Section 203 of the Public Health Act, 1936, 1,887 live births and 48 still-births were notified during 1970. The corresponding figures for 1969 were 1,810 live births and 33 still-births.

The total number of live births registered as belonging to St. Helens was 1,933 giving a birth rate of 18.8 per 1,000 of the population for the year 1970. The corresponding rates over the past 5 years were respectively, 17.0 in 1964, 17.6 in 1965, 17.1 in 1966, 16.9 in 1967, 19.0 in 1968, and 17.7 in 1969.

Infant Mortality

Reference has been made in my introduction to the disturbingly high Infant Mortality rate for 1970. In consequence of this, statistics have been subjected to much closer scrutiny than usual and the presentation of these is more detailed than has previously been the case. Table MCW 1 shows the various mortality rates over many years and compares them with the national infant mortality rate. It will be seen that there is considerable year to year variation and in the 1969 Report when I welcomed that year's good figures, I cautioned that not too much significance must be attached to figures from any one year.

In an attempt to iron out some of the wider variations resulting from the use of relatively small numbers, a Table MCW 2 was constructed to show how five-yearly averages had progressed from 1955 — 1969. This clearly showed a continued improvement in all the indices considered. However, if one takes five-yearly averages from 1956 — 1970, the picture would not be quite so pleasing as the last five-yearly period would then show a small improvement only in the infant mortality rate with small rises in the mortality rates among the youngest children.

It was noted that the figures for any one year could be considerably affected by the deaths of children born in a previous year, and this is shown in Table MCW 3. In 1969 when there was a favourable infant mortality experience, there was a very small "carry over" from the previous year, but a much larger one in 1970.

The causes of infant death and the relation with age and time of year have been presented in the usual way, but additionally compared with the previous year. Table MCW 4 shows causes related to age and in Table MCW 5, and Tables MCW 6 and 7 these factors are considered independently from 1955. One can see that we have a particular problem with deaths very early in life associated particularly with prematurity and congenital abnormalities.

M.C.W.1

Year	National Infant Mortality Rate	St. Helens Infants Mortality Rate	Absolute NO's			Neo-Natal Mortality Rate	Early Neo-Natal Mortality Rate	Peri-Natal Mortality Rate	Stillbirth Rate	Maternal Mortality Rate
			Total	M	F					
1950	29.8	38.6	78	44	34	-	-	-	29.3	1.92
1951	29.6	38.4	71	45	26	-	-	-	33.9	2.09
1952	27.6	37.6	73	40	33	-	-	-	29.0	0.50
1953	26.8	43.8	83	44	39	27.5	23.2	53.4	32.2	0.51
1954	25.5	41.0	77	47	30	28.2	23.4	57.4	31.4	1.55
1955	24.9	32.9	59	36	23	25.8	24.6	58.6	27.6	3.79
1956	23.8	27.4	51	27	24	17.5	15.9	42.6	35.8	1.04
1957	23.1	31.0	59	41	18	20.7	15.9	52.1	34.5	0.51
1958	22.5	35.8	67	45	22	20.5	17.9	50.7	37.6	0.51
1959	22.0	24.3	46	26	20	16.3	14.3	51.8	36.2	1.02
1960	21.9	39.2	75	47	28	23.5	20.4	51.8	36.7	0.50
1961	21.6	28.3	54	32	22	16.8	15.2	52.6	26.5	0.00
1962	21.4	22.2	44	18	26	12.6	10.7	31.7	21.3	1.00
1963	20.9	26.9	51	29	22	18.4	16.3	47.9	32.1	2.50
1964	20.0	21.2	38	28	10	15.1	14.5	41.5	27.7	1.08
1965	19.0	19.0	35	21	14	14.1	11.9	39.0	27.4	0.00
1966	19.0	25.9	46	24	22	15.8	13.0	37.3	24.7	0.00
1967	18.3	23.5	41	23	18	13.8	13.2	33.1	20.6	1.1
1968	18.3	25.7	50	31	19	19.1	17.0	33.9	17.2	0.00
1969	18.0	19.2	35	18	17	12.0	9.3	28.5	19.4	0.00
1970	18.0	27.9	54	26	28	19.6	16.5	40.0	24.2	0.00

Parity of the mother and Social Class are important factors. The information on the former could not be presented but it is worth noting that the proportion of persons in Social Class V in St. Helens is about twice that found nationally; the Infant Mortality Rate for this group is nearly twice that for Social Classes I and II in respect of which we are under-represented.

Table M.C.W.2

Years	Infant Mortality Rate	Neo-Natal Mortality Rate	Early Neo-Natal Mortality Rate	Peri-Natal Mortality Rate	Stillbirth Rate
1955-1959	30.3	20.1	17.7	51.2	34.3
1960-1964	27.6	17.3	15.4	45.1	28.9
1965-1969	22.7	14.9	12.9	34.4	21.9

	Infant Mortality Rate	Neo-Natal Mortality Rate	Early Neo-Natal Mortality Rate	Peri-Natal Mortality Rate	Stillbirth Rate
1956-1960	31.5	19.9	16.9	49.8	36.2
1961-1965	25.5	15.4	13.7	42.5	27.0
1966-1970	24.4	16.1	13.8	34.6	21.2

Table M.C.W.3

Number of infants who died in year following the year of their birth

Year	Number	Infant Mortality Rate	Year	Number	Infant Mortality Rate
1959	7	24.3	1965	2	19.0
1960	15	39.2	1966	7	25.9
1961	10	28.3	1967	9	23.5
1962	16	22.2	1968	7	25.7
1963	7	26.9	1969	2	19.2
1964	6	21.2	1970	7	27.9

Table M.C.W.4

Ages at which death occurred	1968						1969						1970								
	Causes of Death						Causes of Death						Causes of Death								
	Congenital Abnormalities	Prematurity	Pneumonia	Other Infection	Accidents	Other Causes	TOTAL	Congenital Abnormalities	Prematurity	Pneumonia	Other Infection	Accidents	Other Causes	TOTAL	Congenital Abnormalities	Prematurity	Pneumonia	Other Infection	Accidents	Other Causes	TOTAL
Birth to 24 hours	4	14	1	-	2	-	21	2	3	-	-	-	1	6	2	10	1	-	-	-	14
1-7 days	5	11	-	-	-	-	16	2	8	1	-	-	-	11	4	12	-	1	1	-	18
8 days to 1 month	1	-	1	-	-	1	3	2	-	2	-	-	1	5	4	-	3	-	-	-	7
1-3 months	1	-	2	1	1	-	5	2	-	2	1	1	-	6	2	-	1	-	-	1	4
3-6 months	-	-	1	2	-	-	3	1	-	-	-	1	1	3	1	-	2	-	1	-	4
6-9 months	1	-	-	-	-	-	1	-	-	3	-	1	-	4	-	-	-	-	-	-	-
9-12 months	-	-	-	-	1	-	1	-	-	-	-	-	-	-	4	-	-	1	1	1	7
All Ages	12	25	5	3	4	1	50	9	11	8	1	3	3	35	17	22	7	2	3	3	54

Table M.C.W.5

Year	Birth to 24 hrs.	1-7 days	8 days to 1 mth.	1-3 mths.	3-6 mths.	6-9 mths.	9-12 mths.	Total
1955	14	30	2	6	5	1	1	59
1956	11	19	3	11	6	-	1	51
1957	13	17	9	6	7	5	2	59
1958	21	14	5	5	16	3	3	67
1959	11	16	4	6	5	3	1	46
1960	19	20	6	12	9	6	3	75
1961	14	15	3	6	9	6	2	55
1962	10	11	8	5	8	1	1	44
1963	15	17	4	6	7	-	2	51
1964	16	10	1	2	7	2	-	38
1965	11	13	2	5	1	3	-	35
1966	15	9	6	8	4	3	1	46
1967	15	9	-	6	7	2	2	41
1968	21	16	3	5	3	1	1	50
1969	6	11	5	6	3	4	-	35
1970	14	18	7	4	4	-	7	54

Table M.C.W.6

Year	Congenital Abnormality	Prem- aturity	Pneu- monia	Infec- tion	Acci- dents	Other causes	Total
1955	12	26	3	5	4	9	59
1956	10	25	7	5	1	3	51
1957	11	21	8	8	2	9	59
1958	22	17	13	4	4	7	67
1959	14	15	3	4	1	9	46
1960	18	25	15	4	1	12	75
1961	16	16	6	10	2	5	55
1962	14	10	9	4	1	6	44
1963	10	22	11	4	-	4	51
1964	10	16	6	2	1	3	38
1965	5	12	10	1	1	6	35
1966	18	13	10	-	4	1	46
1967	9	15	14	-	1	2	41
1968	12	25	5	3	4	1	50
1969	9	11	8	1	3	3	35
1970	17	22	7	2	3	3	54

Table M.C.W.7

Month when death occurred	1968					1969					1970										
	Causes of Death					Causes of Death					Causes of Death										
	Congenital	Prematurity	Pneumonia	Infection	Accidents	Other Causes	TOTAL	Congenital	Prematurity	Pneumonia	Infection	Accidents	Other Causes	TOTAL	Congenital	Prematurity	Pneumonia	Infection	Accidents	Other Causes	TOTAL
January	1	5	1	-	1	-	8	-	1	-	-	-	-	1	-	2	1	-	-	-	3
February	1	1	1	-	-	-	3	2	-	1	1	1	-	5	4	4	-	-	-	-	8
March	1	3	-	1	1	-	6	2	-	-	-	1	-	3	3	1	-	-	1	-	5
April	2	1	2	1	-	-	6	1	1	2	-	-	-	4	1	2	1	-	-	1	5
May	-	1	-	-	-	-	1	1	1	-	-	-	-	2	2	4	2	-	-	-	8
June	-	-	-	-	-	-	-	-	2	2	-	-	-	4	-	-	-	1	-	-	1
July	1	1	-	-	-	-	2	-	1	-	-	-	-	1	-	1	-	-	1	1	3
August	1	5	-	-	-	1	7	1	2	2	-	1	1	7	2	4	-	-	1	1	8
September	2	2	-	-	-	-	4	-	1	-	-	-	1	2	1	-	1	1	-	-	3
October	-	3	-	1	1	-	5	-	1	-	-	-	1	2	1	1	-	-	-	-	2
November	2	1	1	-	1	-	5	1	1	1	-	-	-	3	2	2	1	-	-	-	5
December	1	2	-	-	-	-	3	1	-	-	-	-	-	1	1	1	1	-	-	-	3
TOTAL	12	25	5	3	4	1	50	9	11	8	1	3	3	35	17	22	7	2	3	3	54

Prematurity:

Special enquiry is routinely made into deaths from prematurity and in Table M.C.W.8 (formerly M.C.W.3) these are further analysed for 1970. (An infant of 5½ lbs or less at birth is classed as a premature birth for this purpose).

Table M.C.W.8
Analysis of Deaths of Premature Infants

(a) Weights at Birth of Premature Infants	
Less than 2 lb. 3 oz.	8
2 lb. 3 oz. to 3 lb. 4 oz.	6
3 lb. 4 oz. to 4 lb. 6 oz.	4
4 lb. 6 oz. to 4 lb. 15 oz.	3
4 lb. 15 oz. to 5 lb. 8 oz.	1
Total . . .	22
 (b) Periods of pregnancy at which premature births occurred (i.e. 5½ lb. or less at birth)	
Period of pregnancy:	
26 weeks	2
27 weeks	2
28/30 weeks	4
29 weeks	2
30 weeks	2
31 weeks	1
32 weeks	1
33 weeks	2
34/36 weeks.	3
37 weeks	1
38 weeks	2
Total . . .	22

Still Births

The number of still-births registered as belonging to the Borough was 48. The assignable causes for 1970 and for the two preceding years appear in Table M.C.W.9

M.C.W. 9.

Cause of Death	1968	1969	1970
Placental Insufficiency	2	9	9
A.P.H.	3	—	—
Toxaemia of Pregnancy	9	1	—
Concealed Accidental Haemorrhage	1	8	1
Essential Hypertension	1	—	—
Multiple Congenital Deformities	1	—	7
Anencephaly	1	6	8
Prematurity	3	2	—
Hydrocephaly	1	2	—
Intra-partum Asphyxia	1	1	—
Intra-uterine Asphyxia	—	1	6
Prolapsed Cord	1	—	—
Knot in Cord	1	—	—
Cord around neck	3	2	4
Rh. Incompatibility	2	1	2
Abruptis Placentae	—	—	4
Hydramnios	—	—	1
Post-maturity	—	—	1
Transverse lie	—	—	1
Cause unknown	4	—	4
TOTAL	34	33	48

Congenital Abnormalities

Congenital abnormalities noted in children residing within the Borough are notified to the Registrar General. During 1970 a total of 75 abnormalities were noted in a total of 60 live and still-births.

11 infants with congenital malformations were born at home, the remaining 49 St. Helens infants (of whom 15 were still-births) with congenital malformations were born in hospital.

Table M.C.W.10

Year	Total No. of babies born with Cong. Abnormalities	Congenital Abnormalities in Stillbirths	Deaths from Congenital Abnormalities in children under 1 year
1968	46	4	10
1969	46	7	10
1970	60	15	18 (5 born 1969)

75 congenital malformations (60 in live births and 15 in still-births) occurred in St. Helens infants, and these were notified to the Ministry monthly) by the Medical Officer of Health. The following tables give particulars of the site of the malformations and the months of birth throughout the year.

It is a simple fact that we have a relatively high incidence of congenital abnormality in St. Helens as compared with other areas. Table M.C.W.10 (H) compares our overall experience of abnormality for several recent years and Tables M.C.W.11 & 12 analyse those in greater detail for 1970.

It is my intention in the 1971 Report to consider the problem of congenital abnormality in this town at greater length. I must say, however, that there is no reason to believe that the preceding outbreaks of influenza and infective jaundice could have any measureable influence on our local statistics. National figures for 1970 did show a very small infant mortality increase for one quarter and an effect of the influenza epidemic must be suspected but such influence was certainly very very small.

Table M.C.W.11

CAUSES OF CONGENITAL ABNORMALITIES, 1970

	Home	Cowley Hill Hospital	Whiston Hospital	Others	Total	No. of these which were stillborn
C.N.S.	3	18	1	2	24	14
Eye and Ear	—	—	1	—	1	—
Alimentary System	3	2	2	—	7	—
Heart and Great Vessels	2	—	1	—	3	—
Respiratory System	1	—	—	—	1	—
Urogenital System	1	—	1	—	2	—
Limbs	3	11	6	1	21	—
Other Skeletal	—	1	2	—	3	—
Other malformations	2	7	1	—	10	1
Other systems	—	2	1	—	3	—
Total	15	41	16	3	75	15

Table M.C.W.12

NO. OF BABIES BORN WITH CONGENITAL ABNORMALITIES AND MONTH OF BIRTH

	Home	Cowley Hill Hospital	Whiston Hospital	Others	Total	Died as a result of Malformation	Stillborn
January	2	5	—	—	7	2	1
February	1	3	1	—	5	2	2
March	1	2	2	—	5	1	1
April	2	3	—	1	6	—	2
May	1	5	1	—	7	2	3
June	1	2	—	—	3	—	—
July	1	2	2	—	5	1	—
August	—	3	1	—	4	1	3
September	—	3	—	1	4	—	—
October	2	1	3	—	6	1	2
November	—	3	2	—	5	—	1
December	—	1	2	—	3	—	—
Total	11	33	14	2	60	10	15

	Births	Malformations
Babies born with 1 malformation	49	49
Babies born with 2 malformations	8	16
Babies born with 3 malformations	2	6
Babies born with 4 malformations	1	4
Total	LBs 60	75

MATERNAL DEATHS

There were no maternal deaths reported in 1970.

INFECTIOUS DISEASES IN MOTHERS AND CHILDREN

Puerperal Pyrexia

No case was reported during the year.

Pemphigus

No case was reported during the year.

Ophthalmia Neonatorum

No case was reported during the year.

Other Infectious Diseases

The following Table M.C.W.13 shows the number of cases of notifiable infectious diseases which occurred in children under 5 years of age, and the deaths resulting therefrom.

Table M.C.W.13

	Under 1 year		1 to 5 years	
	Cases	Deaths	Cases	Deaths
Scarlet Fever	—	—	32	—
Diphtheria	—	—	—	—
Measles	8	—	64	—
Whooping Cough	—	—	5	—
Ophthalmia Neonatorum	—	—	—	—
Meningococcal Infections	—	—	—	—
Dysentery	3	—	8	—
Food Poisoning	—	—	1	—
Infective Hepatitis	—	—	40	—

CLINIC SERVICES

Child Welfare Clinics

Clinics for children under 5 years of age are held on 9 sessions weekly at 8 centres.

The figures for attendances at Child Welfare Clinics showed a small but evident increase over those for the previous year which is, no doubt, associated with the increasing number of youngsters.

Guthrie testing for P.K.U. screening continued. By this method, infants' blood is collected by heel prick on to absorbent paper on the 10th. day. If this is not possible, a specimen of urine on filter paper is tested at three weeks of age.

Specimens are sent to the Department of Pathology, Alder Hey Hospital, and the Medical Officer of Health is notified of all results.

Specimens requiring further investigation

	Specimens having a Negative Result	No. of specimens	Specimens having Negative Result after investigation	Specimens having Positive Result after investigation	Total No. of Specimens examined
Blood tests	1710	6	6	—	1716
Urine tests	111	7	7	—	118
Total	1821	13	13	—	1834

Immunisation against diphtheria, whooping cough, tetanus and poliomyelitis, as well as smallpox vaccination, is carried out at the Child Welfare Clinics and at the special sessions held at the School Clinic in Cloughton Street (now Parade Street) and at the outlying district clinics.

During the year, health education activities in the various clinics were augmented by a series of film shows on appropriate subjects, which were shown regularly at the Central and District Clinics.

At some clinics trained Health Visitors were able to carry out routine hearing testing of babies aged 9 – 10 months using clinical methods to detect early signs of deafness.

As rehousing and clearance procedures began to take a grip in the Park Road area, it became more and more difficult to keep the Brookfield Mission Hall in a suitable state for Infant Welfare Clinics, and ultimately we terminated our rental agreement making an agreement with another church to rent the St. Mary's Church Hall at Blackbrook. In the long term there is still hope of a clinic, or more likely a Health Centre, being provided at Park Road on a site adjacent to other community facilities.

Ante-natal Clinics:

Attendance figures for our doctor staffed ante-natal clinics as provided under Section 22 of the National Health Service Act continued to decline, reaching very low levels at some clinics. The influence on this trend of the opening of ante-natal clinics at Cowley Hill Maternity Hospital was referred to in the last Annual Report, but there is a more significant trend for midwives, general practitioners

and hospital consultants to take over the care of pregnant mothers to the exclusion of Local Authority medical staff. Thus, although we received initial notification in late 1970 of the Board's intention to cease using the Cowley Hill Maternity Hospital on completion of the new Maternity Unit at Whiston Hospital, one would not expect any consequent increase in attendances at these particular ante-natal clinics. The Committee agreed that these various sessions should be withdrawn whenever it might seem appropriate, and so by the year's end they had ceased at Albion Street, Carr Mill, Jersey Street, Blackbrook, Lacey Street and Irwin Road Clinics. Facilities continued to be provided at Ashtons Green and Hardshaw Street.

Expectant mothers have routine blood tests carried out at these clinics. The tests are for blood grouping, Rhesus Factor and Kahn Reaction. During the year, 21 specimens were sent for examination. Of these, 17 were Rhesus positive and 4 were Rhesus negative.

The importance of this test lies in the fact that the doctor in charge of the confinement is forewarned that the baby may need an exchange transfusion immediately after birth. Rhesus Negative blood may be obtained from the Regional Blood Transfusion Centre before the confinement, in readiness for either the mother or the baby.

Routine Blood Counts and Haemoglobin estimations are carried out at all ante-natal clinics, the laboratory work in connection with this being conducted by the Pathologist at the St. Helens Hospital.

At the end of the year, there were 8 ante-natal sessions being held weekly, 2 of which were combined with infant welfare-sessions.

Table M.C.W.14
Attendances at Maternity and Child Welfare Clinics during 1970

Child Welfare Clinics:

Number who attended and who were born in:

(i)	1970	1459
(ii)	1969	1225
(iii)	1965-68	1014
	Number of attendances by children	18680

Ante-Natal Clinics:

Medical Officers' Sessions, including Specialist Ante-Natal Clinics:

Number of expectant mothers who attended		90
Number of attendances by expectant mothers		279

Midwives' Sessions (no medical officer being present):

Number of expectant mothers who attended		392
Number of attendances by expectant mothers		1252

Post-natal Examinations at Ante-natal Clinics:

Number of mothers who attended		1
Number of attendances		1

Gynaecological and Post-natal Clinic:

Number of mothers who attended		19
Number of attendances		34

During 1970, the number of patients attending the fortnightly Obstetric Consultant clinic at Hardshaw St. dropped to 3. No session was needed in March, April, May or August, and this clinic was therefore discontinued in December 1970, with very grateful acknowledgement to Mr. Corbett and Mr. Moss for their valuable help over many years.

During the year arrangements were made for the attachment of midwives to a fourth Group Practice in the Borough. In all, domiciliary midwives attended 401 sessions at the General Practitioners' Surgeries during the year.

Midwives' ante-natal sessions at District Clinics were conducted during the year as follows:

<i>Clinic</i>	<i>Patients Attending</i>	<i>No. of Attendances</i>
Albion Street	88	307
Ashtons Green Drive	89	354
Carr Mill	25	88
Irwin Road	60	241
Jersey Street	54	229
Lacey Street	76	448

Arrangements have been operative for many years whereby maternity and child welfare cases from the County districts adjoining St. Helens may attend any of the St. Helens clinics for advice and treatment.

Gynaecological and Post-Natal Clinic

This clinic is held once a week at the Hardshaw Street Centre and serves the double purpose of investigation of gynaecological conditions associated with pregnancy and as a clinic for post-natal supervision. During 1970, 6 patients visited this clinic for post-natal examination. Post-natal supervision is, however, also carried out at the Infant Welfare and Ante-Natal Clinics held in the outlying districts. The total number of women who received special post-natal supervision was 7.

The number of gynaecological patients attending this clinic was 13.

Patients who needed operative treatment were referred to the out-patient departments of the local hospitals.

At this clinic patients may also receive advice on birth control methods when such is desirable for medical reasons. These patients have been instructed in the use of the occlusive diaphragm. The Contraceptive Pill is not issued from this clinic. Patients who wish to use this method of contraception are referred to the St. Helens Branch of the Family Planning Association.

Relaxation and Mothercraft Classes

A class is held once a week at the Town Hall Clinic. The expectant mothers attend for the last two months of their pregnancy.

The first hour is spent doing breathing and relaxation exercises after which the mothers have a cup of tea. The next hour is spent in either an open discussion

with the health visitor in the chair, or in mothercraft instruction by the health visitor. The classes have proved very popular as evidenced by the attendance figures. In 1970, 96 women made 479 attendances.

No. of cases advised on contraception and the medical reasons which prompted such advice

Asthma	1
Multiple Pregnancies	4
	5

Cervical Smear Clinic

Cervical smear clinics are held at Hardshaw Street Clinic for the collection of cervical smears for cyto-diagnostic investigation and/or early detection of Cancer of the Cervix. Urine and breast examinations are offered with the smear test and these are welcomed by all patients.

The campaign to acquaint women with the medical services now available for early detection of cancer of the womb was continued.

In view of the waiting lists and the need to commence a "Recall Service" for patients seen in 1966, a second clinic was commenced in May, 1970, on Monday evening at Hardshaw Street Clinic.

Smears are also taken at Industrial Premises in the town.

St. Helens Hospital Laboratory continued to test approximately twenty smears per week and were able to call on the services of the Christie Hospital Laboratory, Manchester, for the testing of the others.

All results of cytology tests and findings on examination were notified direct to the general practitioner and to the Health Department by the hospital laboratories. In addition all positive and suspicious cases were notified by the department to the patient's general practitioner by letter or telephone.

Cytology Clinic times

Hardshaw Street Clinic – Thursday 9.30 a.m. to 11.30 a.m.

Hardshaw Street Clinic – Monday 6.30 p.m. to 8.30 p.m.

(by appointment)

Industrial sessions as arranged with individual factories

During 1970 a total of 1,260 smears were taken. This number includes 98 smears taken at cytology sessions held at industrial premises in the town.

Details of smears taken are given below:

Total number of women examined	1,227
Total number of smears taken:	
Number of routine smears	1,056
Number of repeat smears	59
Number of Re-call smears (3 yrs. and over)	145
Number of cases from the County	351
Number of positive cases	3
Number of Suspicious cases	6

A total of 236 cases were referred by letter to the general practitioners of other conditions found on examination at the screening clinics.

Smears taken at	Trichomonas, Monilial infections	Conditions of Breast	Glycosuria	Albuminuria	Erosions	Polyps	Others	Total
Hardshaw St. Clinic	39	4	3	4	89	22	14	175
During Industrial sessions	1	3	—	—	6	2	2	14
Re-calls	1	2	—	1	17	4	—	25
Repeats	3	—	—	—	12	1	6	22
	44	9	3	5	124	29	22	236

Monday evening clinics commenced at Hardshaw Street on Monday, 11th May, 1970. Re-call Service for patients (over three years, i.e. 1966 and 1967), started on 4th June, 1970.

The Services of the Christie Hospital Laboratory, Manchester, were used for the testing of the smears taken on Monday evenings.

Distribution of Welfare Foods

(a) National Welfare Foods Scheme.

The scheme for the distribution of national welfare foods was continued without alteration during 1970.

Table M.C.W.15

Receipts and issues of welfare foods for the period 1st January, 1970, to 31st December, 1970.

	National Dried Milk	Orange Juice	Cod Liver Oil	Vit. A.&D.
1. Stocks Received from Ministry of Food				
(a) In hand on 1/1/70	367	1797	299	294
(b) Received during period	2940	19750	1278	1440
Total	3307	21547	1577	1734
2. Disposal of Stocks				
(a) Issued against coupons				
(i) Paid for by cash	1652	20240	1370	1528
(ii) Free	533	55	21	5
(b) Issued at full fee	1024	—	—	—
Total issued to public	3209	20295	1391	1533
(c) Other issues	—	250	—	—
Total issues	3209	20545	1391	1533
3. Returned to Ministry of Food, Damaged, etc.	4	15	1	—
4. Stock in Hand 31/12/70	94	987	185	201

The issues of welfare foods from the various distribution centres during the period 1st January, 1970, to 31st December, 1970, are shown in Table M.C.W.16.

Receipts during this period amounted to £2022-4s-8d.

Table M.C.W.16

Issues of Welfare Foods to the public from various Distribution Centres 1970.

Distribution Centre	National Dried Milk	Orange Juice	Cod Liver Oil	Vit. A.&D.
Welfare Foods Centre	2213	10059	547	988
Albion Street Clinic	73	1901	164	129
Blackbrook Clinic	81	723	51	23
Irwin Road Clinic	233	1828	158	78
Hardshaw Street Clinic	88	1525	78	129
Carr Mill Clinic	138	960	58	25
Jersey Street Clinic	101	1058	91	40
Lacey Street Clinic	187	1543	166	44
Ashtons Green Drive Clinic	95	698	78	77
Total	3209	20295	1391	1533

Dental Treatment

Table M.C.W.17.

(a) Numbers provided with Dental Care

	Examined	Commenced Treatment	Completed Treatment
Expectant and Nursing Mothers	26	22	16
Children under 5	170	153	149

(b) Forms of Dental Treatment Provided

	Scalings & Gum Treatment	Fillings	Crowns or Inlays	Extractions	General Anaesthetics	Upper or Lower Dentures Provided		Radio-graphs
						Full	Partial	
Expectant and Nursing Mothers	6	26	—	32	4	6	2	1
Children under 5	2	2	—	278	127	—	—	—

Orthopaedic Defects.

Children under 5 years of age may be dealt with under the Council's Orthopaedic Scheme, which provides periodic supervision by the Consultant Orthopaedic Surgeon and the Physiotherapist.

During 1970, 162 infant welfare cases were dealt with at the Orthopaedic Clinic.

Day Care of Children

Day Nursery

The majority of children in the nursery are the children of unsupported mothers, i.e. the unmarried, the widowed and separated, but with the shortage of accommodation we have been able to do little to help other categories of children in special need, e.g. on account of illness in the family, social deprivation, mental or physical handicap in the child.

Progress was made during the year on planning for a new 70 place day nursery to be sited in College Street and I felt confident that we would eventually get loan sanction for the replacement, not least because during the year various Ministry Officers and an Under Secretary of State from the Department of Health and Social Security had been taken to see our existing unsatisfactory premises. However, it was apparent that for some time to come, we would be unable to satisfy local demand but the provision of private day care facilities (see below) continued to grow and it is impossible to forecast what might eventually appear.

During 1970 absences from the Day Nursery were reported as follows:

Bronchitis and Colds	38
Measles	16
Jaundice	1
Mumps	1
Impetigo	2
Gastro-enteritis	3
Chicken Pox	2
Whooping Cough	1

Particulars of attendances etc. at the Hall Street Day Nursery during 1970 are shown below:

No. of approved places at Day Nursery	No. of children on the register at the end of the year	Average daily attendance during the year
35	27	21.97

Child Minders, Playgroups, Private Nurseries etc.

Playgroups continued to come forward for registration and at the end of the year 12 were so registered.

Requests for formal registration of child minders under the Nurseries and Child Minders Regulation Act and Amendments continued. Enquiries were made into applications by Health Visitors and sometimes a Medical Officer; supervision is continued after registration. 16 applications were made and all were granted; at the year's end 18 persons were acting as registered child minders in St. Helens.

Obviously these private facilities can make a considerable contribution to the problem of providing day care, including that for children with social, mental and physical disabilities. During the year, the Authority sought approval from the Minister for power to make payments to child minders or groups, in respect of children in certain priority categories. The Minister's approval was given.

Play Facilities.

I drew the attention of the Health Committee to Circular 36/67 of the Ministry of Housing and Local Government on housing standards and the Ministry of Health Circular 37/68 emphasising the need for young children to have somewhere safe to play with others, and the Committee, I am pleased to say, not only confirmed its support for the recommendations but formally drew the attention of the Housing and Planning and Development Committees to the standards.

The Care of Premature Infants

Since 1944 special efforts have been directed towards preserving life in premature and/or immature infants. The birth weight is stated on every notification of birth form, and in those cases born at home where the birth weight was 5 lbs. 8 ozs. or less a special visit was immediately made by the Supervisor of Mid-wives, and, if necessary, arrangements made for admission to hospital. For infants remaining at home, special carry cots fitted with special lining, mattress and bedding, a Belcroy feeding bottle, room thermometers and hot water bottles are available, and have proved of value.

During 1970, 16 premature and/or immature babies were born at home, and 4 of these were transferred to Hospital. A further 140 were born in hospital. Particulars of these cases are given in Table M.C.W.18.

When these infants are discharged from hospital, or when the midwife has ceased to attend to those born at home, the Health Visitor concerned is immediately notified and pays special follow-up visits.

The Ambulance Service is equipped with a portable incubator which is used for the transport of premature infants to hospitals and has also proved very useful in the work of inter-hospital transfers. Many of these infants are now admitted to Alder Hey Hospital in Liverpool as transfers from Cowley Hill Hospital. The incubator is, by agreement with the Hospital Authorities, kept at Cowley Hill Hospital and when a request for its use should arise, the incubator is plugged in and electrically heated to the required temperature before being plugged into the electrical system in the Ambulance where the temperature is maintained during transport.

The Care of Unsupported Mothers

As in previous years, special consideration was given to the care of the unmarried or unsupported mother and her child.

The total number of illegitimate live births registered as belonging to St. Helens was 111.

A total of 73 unsupported mothers came to the knowledge of the Department through Health Visitors, Moral Welfare Workers, Municipal Midwives and other agencies. Of these 62 were unmarried mothers and 11 widows who were co-habiting.

In the majority of cases it was found that the parents were willing to keep the unmarried mother at home during the pregnancy if some arrangements could be made for the confinement.

The following list gives the places of confinement:

Cowley Hill Maternity Hospital	40
Whiston Hospital	21
Parents' homes	5
Other Hospitals	5
Hospitals used by patients from Mother and Baby Homes	2
Total	73

Mothers entering Homes are assisted by the Corporation in the payment of their fees. All the unmarried mothers were helped to take out Affiliation Orders.

Hospital Accommodation

The Cowley Hill Maternity Hospital, administered by the St. Helens and District Hospital Management Committee, is the only Maternity Hospital in St. Helens and has a complement of 50 beds and 5 special care cots.

Comment should be made here on the marked increase in early discharges from Maternity Hospitals. The following figures give some indication of the great change in the tempo and pattern of this work since 1962:

<i>Year</i>	<i>No. of women discharged early</i>
1962	46
1963	152
1964	228
1965	244
1966	933
1967	1,139
1968	1,290
1969	1,244
1970	1,391

Late in the year we were given an initial warning of the Board's intention to cease the use of Cowley Hill premises for maternity services on the opening of a new Maternity Unit at Whiston Hospital in 1972. It was in effect said for the Board that the premises are no longer really suitable (some parts being particularly so) that it would be expensive to maintain the services there and very expensive to bring the premises up to a suitable standard and that these are considerable difficulties in maintaining medical staffing at this isolated unit. Although the statement of intention aroused a lot of local feeling, the Board's arguments have considerable weight.

During 1970, 1,524 births (1,048 being St. Helens cases), took place in the Cowley Hill Maternity Hospital, 462 St. Helens births in the Whiston Hospital, Prescot, and 69 St. Helens births occurred in other hospitals.

Table M.C.W.18

PREMATURE LIVE BIRTHS

Weight at Birth	Born in Hospital						Born at home or in a nursing home									
	Born in Hospital			Died			Nursed entirely at home or in a nursing home			Died			Transferred to hospital on or before 28th day			
	Total births	Within 24 hours of birth	In 1 and under 7 days	In 7 and under 28 days	Total births	Within 24 hours of birth	In 1 and under 7 days	In 7 and under 28 days	Total births	Within 24 hours of birth	In 1 and under 7 days	In 7 and under 28 days	Total births	Within 24 hours of birth	In 1 and under 7 days	In 7 and under 28 days
2 lb. 3 oz. or less	9	5	3	-	-	-	-	-	-	-	-	-	-	-	-	-
Over 2 lb. 3 oz. up to and including 3 lb. 4 oz.	14	2	3	-	-	-	-	-	-	-	-	-	-	-	-	-
Over 3 lb. 4 oz. up to and including 4 lb. 6 oz.	21	2	2	-	2	2	-	-	1	2	-	-	1	-	-	-
Over 4 lb. 6 oz. up to and including 4 lb. 15 oz.	40	1	1	-	1	-	-	-	-	-	-	-	-	-	-	-
Over 4 lb. 15 oz. up to and including 5 lb. 8 oz.	56	-	1	-	9	-	-	-	3	-	-	-	3	-	-	1
Totals	140	10	10	-	12	2	-	-	4	2	-	-	4	-	-	1

XI—MIDWIFERY SERVICE

Municipal Midwifery Service

The staff establishment of the Municipal Midwifery Service is fifteen District Midwives and one Non-Medical Supervisor of Midwives.

During 1970, 1 midwife and the Supervisor attended Refresher Courses.

The midwives work from their own homes, and as far as their nursing duties are concerned, they are grouped in districts.

Midwives, however, are called out to attend deliveries by rotation and they do not stay in their own districts. The rota system has brought about an improvement in the service, because on any one night two midwives are available on call for deliveries.

All calls for the services of a domiciliary midwife in St. Helens are taken by the Ambulance Depot, who contact the midwife on call immediately a request is made to them by any member of the public.

The Domiciliary Midwifery Service made increasing use of disposable equipment during the year, and co-operation cards for the interchange of ante-natal information between the midwives and general practitioners continued during 1970.

Meetings of midwives for films and discussions were held regularly during the year.

The following table gives a summary of work done by the staff of the Municipal Midwifery Service during 1970.

Number of cases attended	312
Number of live births	308
Number of still-births	3
Number of abortions	1
Number of cases delivered in Hospitals but discharged and attended by Domiciliary Midwives before the 10th day	1391
Number of visits to these early discharges	6317
Number of cases in which midwife sent for medical assistance	119
Supervisor's visits	392

The domiciliary midwives are all trained in the use of Trilene Anaesthesia and the use of Pethidine and other drugs. There are 17 Trilene apparatus in the Midwifery Service — one for each of the fifteen midwives and two which are kept at the Ambulance Station.

During the year Trilene was administered to 258 patients, and Pethidine to 178 patients.

During 1970, by arrangement with the Local Management Committee, 8 pupil midwives were trained by domiciliary midwives. 7 were successful in the examination.

The staffing level during the year continued to be satisfactory, as in the previous year, which allowed an extension of the attachment of midwives to general practitioners but it appeared possible that the limits of extension would soon be reached because of the impossibility of spreading the available midwives around a large number of general practitioners' surgeries for their individual sessions.

The Table below shows the volume of work originating throughout the early discharge system which is now so firmly established. There was still evident a tendency of very early discharges to be increasing.

Early Discharge from Hospital, 1970.

1970	Whiston Hospital	Cowley Hill Hospital	Others	Total No. of Patients Discharged Early	No. of Visits
January	27 (20)	86 (60)	2 (2)	115 (82)	465 (280)
February	33 (29)	51 (75)	7 (-)	91 (104)	404 (394)
March	23 (28)	86 (84)	2 (1)	111 (113)	494 (497)
April	44 (38)	77 (74)	1 (1)	122 (113)	545 (476)
May	42 (25)	81 (64)	- (3)	123 (92)	565 (316)
June	29 (33)	72 (57)	12 (1)	113 (91)	491 (408)
July	38 (31)	97 (80)	8 (3)	143 (114)	592 (447)
August	34 (25)	71 (77)	11 (3)	116 (105)	534 (361)
September	31 (27)	63 (64)	4 (2)	98 (93)	449 (357)
October	30 (29)	77 (63)	9 (5)	116 (97)	539 (246)
November	35 (45)	67 (83)	3 (1)	105 (129)	519 (476)
December	39 (28)	93 (79)	6 (4)	138 (111)	711 (407)
	405 (358)	921 (860)	65 (26)	1391 (1244)	6308 (4765)

The figures in brackets are for 1969

Inspection of Midwives

During 1970, 46 midwives notified their intention to practise within the Borough. At the end of the year, 40 of these midwives were still practising within the Borough, and of these 18 were employed by the Local Health Authority, and 22 were engaged at the Cowley Hill Maternity Hospital.

The supervision and inspection of midwives is carried out by Medical Officers and by the Non-Medical Supervisor of Midwives. During 1970, 115 visits were made to the Council's midwives by the Supervisor.

XII—HEALTH VISITING

The duties of the Health Visitors include the general health and welfare of the family as a whole, as well as the specialised duties connected with the School Health Services and the Care of Mothers and Young Children. This means that time is given to home visiting in connection with the welfare of old people, the follow-up of patients discharged home from hospital, enquiries regarding home conditions of mothers requesting confinement in hospital, in addition to the routine and special visits required to be paid to mothers and young children under school age, and home visits directly connected with School Medical Inspections.

The Health Visitors also staff the various Ante-Natal Clinics and Child Welfare Clinics in the Borough, and are in attendance at the School Medical Inspections.

The Health Visiting Service continued considerably under strength. Reference was made in the 1969 report to the appointment of a Specialist Health Visitor working with handicapped children and to the attachment of all Health Visitors on a rotational basis to the paediatric out-patient clinic at St. Helens Hospital. The Health Visitor in attendance at this Clinic is of assistance in providing liaison with the Health Department and other agencies in the town and therefore can see that necessary services are provided to the patients and that there is a flow of useful information to the paediatrician. Reference was also made to arrangements for one Health Visitor to work in liaison with one group of general practitioners. This duly came into effect and two other similar arrangements were started during the year. These arrangements were most welcome to all parties but there are difficulties. The Health Visitors working such arrangements find that the burden of work grows and the lack of a geographical base to general practice makes it necessary to liaise with Health Visitors in other areas. However, these are important, if small steps.

The following statement shows the cases visited by Health Visitors during the year:

To children born in 1970	,1,905
To children born in 1969	1,987
To children born in 1965/1968	4,754
To persons aged 65 or over	669
To mentally disordered persons	40
To other persons excluding Maternity cases discharged from Hospital	42
Number of tuberculous households visited	37
Number of households visited on account of other infectious diseases	652
Other cases	419
Total	10,505

XIII—HOME NURSING SERVICE

St. Helens District Nursing Association

It is convenient to reproduce herewith my contribution to the Annual Report of the Association for 1970.

During 1970, Home Nursing Services in this town under Section 25 of the National Health Service Act continued to be provided by the St. Helens District Nursing Association acting as agent for the Local Health Authority. The latter

Authority is fully represented on the Executive Committee of the Association and there is every opportunity for close administrative contact between the Medical Officer of Health, who is a member of the Committee, and the Superintendent of the Nurses. Executive Committee meetings continued to be held monthly and the House Sub-Committee advised on the day to day administration of the Home and the nursing service itself.

The Annual General Meeting was held in March and the invited speaker on this occasion was Miss G. Ireland, Superintendent of Home Nursing and Midwifery for the County Borough of Blackpool, who addressed us on "Research - Community Care". She described a trial scheme in which very close links have been established between selected Home Nurses and the hospital service with impressive results in terms of early discharge of patients and the better provision of services to those patients on discharge. There is no doubt in my mind that no matter what the future organisation of the health services, such co-ordination will be more and more accepted as not only desirable, but essential, and such developments have relevance to my following observations.

The most significant events of the year for the Association were undoubtedly the discussions on the future organisation of the service which will almost certainly lead to a radical departure from our locally established pattern. The starting point of these discussions was a recommendation from Central Government that serious consideration be given to appointing a Chief Nursing Officer who would be responsible for the day to day administration of, and policy advice on all the community nursing services, i.e., Home Nursing, Domiciliary Midwifery, Health Visiting, and the nursing service provided in schools and clinics. This led inevitably to consideration of the relationship she (or he) would have with a service provided on an agency basis and beyond this to the future development of the various nursing services, and the expected re-organisations of Local Government and of the health services. In consequence of these discussions it was agreed in principle that the local authority would assume direct responsibility for the service, but it was appreciated that a lot of thought and a lot of work will be necessary to effect a smooth change-over. The Secretary of State would have to approve formally proposals by the authority; alternative arrangements would have to be made for the provision of the service; the future of the very fine Nurses' Home would have to be determined, and the futures of the staff living and working there would have to be provided for to the satisfaction of the Association. No immediate change was to be expected, but the proposals apparently gave rise to some mis-conceptions in persons not fully informed and I personally issued the following statement to the Press :-

STATEMENT ON CHANGES IN HOME NURSING SERVICE

"For over 86 years, the St. Helens District Nursing Association has provided an extremely valuable service which has, undoubtedly, been greatly appreciated by the people and doctors of this town. I do not believe it is necessary to explain the nature of the service because I am sure everyone will have a good idea of what the 'District Nurse' does, and many of them will have been attended by one in their own homes.

"When the National Health Service Act became effective in 1948, the Corporation was obliged to provide a nursing service for persons needing attention in their own homes and, as in some other towns, it was decided to ask the local

District Nursing Association to continue its good work on the Corporation's behalf. Since then, and particularly in the last few years, there have been big changes in the way in which medical and nursing services are organised and provided, and taking account of this and the expected further upheavals in the organisation of the health services and Local Authority boundaries, it has been decided by the District Nursing Association and the Corporation that the time has come for the Corporation to run the service itself, provided that suitable arrangements can be made.

"Apparently a few people having learned of these impending changes (which cannot be effective for some time), fear that the District Nursing Service is to disappear. Nothing can be further from the truth; it is inconceivable that such a vital public service could be discarded. At the time of any change-over, the same nurses will be giving the same attention to the same people. The hope is that eventually we can make the service even more effective through increased liaison with hospitals and by giving more direct help to family doctors.

"May I finally draw attention to the sterling work over these many years by the staff and by the many voluntary workers who conceived of and supported the Association. The St. Helens Association will have been among the longest lived — one of the first to be born and almost the last to retire."

In the meanwhile the Nurses themselves continue as ever their work in the homes of the ill. The trends of recent years continued with the diminution in the total number of visits re-appearing, but these changes were overall small. It is likely that some day, with even more effective co-ordination with the work of General Practitioners and hospitals, these trends will be reversed.

The staff in post at the end of the year was as follows:

- 1 Superintendent
- 1 Assistant Superintendent
- 1 Senior District Nurse
- 12 District Nurses (Full-Time)
- 10 District Nurses (Part-Time)

Number of cases attended and visits made by Home Nurses during 1970.

<i>Nature of Illness</i>	<i>Cases</i>	<i>Visits</i>
Medical	1,274	51,411
Surgical	264	8,038
Infectious Diseases	1	5
Tuberculosis	1	20
Maternal Complications	103	956
Others	24	484
Total	1,667	60,914

Patients (included in above totals) who were 65 years or over	908	40,413
Children (included in above totals) who were under 5 years of age	10	126
Patients (included in above totals) who had more than 24 visits during the year	505	48,977

XIV—HOME HELP SERVICE

The Home Help Service operating in St. Helens provides help in cases of maternity, sickness, convalescence, old age and infirmity, or any emergency in the household due to illness.

At the 31st December, 1970, there were 119 part-time Home Helps working an average of 28 hour week, representing an equivalent of approximately 75 whole-time Helps.

During the year the Home Helps attended 1,056 cases, 245 of whom were new cases and 811 old cases from previous years. An analysis of the cases dealt with is given below:—

Table H.H.1

Cases attended	No.	Approx. % of Total Cases	Recovery of Fees					
			Full Time	Part Time	Full Fee	Part Fee	Free	
Maternity Cases								
Domiciliary Confinements	7	0.66	5	2	1	6	—	—
Ante-natal cases	1	0.1	—	1	1	—	—	—
Sickness and Other Cases								
Chronic Illness	80	7.58	—	80	18	15	47	—
Acute Illness	8	0.75	—	8	4	1	3	—
Tuberculosis	1	0.1	—	1	—	—	1	—
Mental Illness	4	0.38	—	4	—	1	3	—
Old Age and Infirmity	923	87.4	—	923	132	112	679	—
Blind	32	3.03	—	32	3	2	27	—
Care of Young Children	—	—	—	—	—	—	—	—
TOTAL	1056	100.00	5	1051	159	137	760	—

Home Help Service for the 245 new cases during the year was recommended by the following:—

Welfare Service(including Pilkington Bros. and W.R.V.S.)	57
Ministry of Social Security	38
Health Visitors and Midwives	15
District Nursing Association	3
Hospitals	14
Personal Application, neighbours and relatives	103
General Practitioners	10
Society for the Blind	5
	245

The following statement shows the domiciliary visits paid by the Home Help Organiser during the year:—

Number of primary visits to cases	433
Number of return visits to cases	1,603
Number of visits to Home Helps	207
	2,243

The standard fee during the year for Home Help Service, as laid down by the Health Committee remained at 6/2d. per hour.

Once again during the year under review there was a gradual expansion of the work of the service which showed an increase in the number of cases attended from 1019 to 1969. This brought in its train an increase in the establishment, and at the 31st December the establishment had been expanded from the equivalent of 73 whole time helps to 75.

The outstanding increase in work done was in the category of old aged and infirmity, and the bulk of these cases, and certainly those persons receiving state pensions, were attended free of charge.

XV—INCIDENCE OF BLIND AND PARTIALLY SIGHTED PERSONS

Welfare of Blind and Partially Sighted Persons in St. Helens is the responsibility of the Welfare Services Committee of the Local Authority. Some of the activities in this sphere are undertaken by the St. Helens and District Society for the Welfare of the Blind.

The Medical Officer of Health is responsible for arrangements for certification for registration.

During 1970, 45 completed B.D.8 forms were received by the Medical Officer of Health. Of these 27 related to blind persons, 15 to partially sighted persons and 3 unclassified persons.

(a) Registered Blind Persons.

On the 1st January, 1970, there were 261 persons registered as blind in St. Helens. During the year 26 new cases were added to the register (including 4 cases formerly classed as partially sighted persons) and 22 names were removed from the register due to death, transfer out of the Borough or transferred to the partially sighted register. Thus at the end of 1970 there were 265 registered blind persons in St. Helens.

The following analysis gives the information as at the 31st December, 1970, concerning the number of blind persons of both sexes according to age groups.

<i>Age Distribution</i>	<i>M</i>	<i>F</i>	<i>Total</i>
Under 1 year	—	—	—
1—10	—	1	1
11—15	1	—	1
16—20	2	—	2
21—29	3	2	5
30—39	4	3	7
40—49	8	9	17
50—59	23	15	38
60—64	9	5	14
65—69	8	13	21
70—79	33	42	75
80—84	16	32	48
85—89	10	14	24
90 and over	4	8	12
	121	144	265

Educational and Occupational Distribution.

<i>Education</i>	<i>M</i>	<i>F</i>	<i>Total</i>
At School	1	—	1
Not at School	—	1	1
	1	1	2

The following analysis shows the occupational states of the employed registered blind persons.

<i>Employment — Workshops</i>	<i>M</i>	<i>F</i>	<i>Total</i>
Age 16—20	—	—	—
21—39	1	—	1
40—49	1	—	1
50—59	4	1	5
60—64	1	1	2
65 and over	—	—	—
	7	2	9

<i>Employment – elsewhere</i>		<i>M</i>	<i>F</i>	<i>Total</i>
Age	16–20	—	—	—
	21–39	4	3	7
	40–49	3	—	3
	50–59	1	—	1
	60–64	—	—	—
		8	3	11

Thus 20 were employed during the year (15 males and 5 females).

The following table indicates the different types of occupation of the 20 registered blind persons noted above.

<i>Occupation</i>	<i>Workshops</i>	<i>House</i>	<i>Elsewhere</i>	<i>Total</i>
Basket Workers	3	—	—	3
Mat Workers	—	—	—	—
Brush Makers	3	—	—	3
Viewers, Inspectors, Testers	—	—	—	—
Labourers	—	—	2	2
Machine Knitters	2	—	—	2
Telephone Operators	—	—	1	1
Typists	—	—	3	3
Machine Tool Operators	—	—	4	4
Miscellaneous Workers	1	—	1	2
	9	—	11	20

The following table indicates the position of the remaining 243 unemployed Registered Blind Persons with respect to training and capability of employment.

<i>Classification</i>	<i>M</i>	<i>F</i>	<i>Total</i>
Under Training & Further Education	1	—	1
Unemployed but capable of and available for work—			
Already trained	1	1	2
Subject to training	—	—	—
Without training	2	1	3
Not available for work	21	15	36
Not capable of work	9	12	21
Not working (all over 65 years of age)	71	109	180
	105	138	243

Sixty-nine of the people registered as blind also suffered additional disabilities as indicated in the table below.

	<i>M</i>	<i>F</i>	<i>Total</i>
Mentally ill	1	1	2
Mentally sub-normal	3	1	4
Physically defective	18	23	41
Deaf without speech	—	—	—
Deaf with speech	2	2	4
Hard of Hearing	5	8	13
Physically defective and Deaf or Partially Deaf	2	1	3
Physically defective and Deaf with speech	1	1	2
	32	37	69

Of the 32 persons maintained in homes and hospitals 5 are in homes for the Blind, 16 in other homes provided under Part III of the National Assistance Act 1948, 2 in hospitals for Mentally ill, 2 in hospitals for Mentally Sub-normal and 7 in another hospital.

(b) Registered Partially Sighted Persons

During the year 14 completed B.D.8 forms were received by the Medical Officer of Health in respect of partially sighted persons.

On 1st January, 1970, there were 79 persons registered as Partially Sighted. Ten new cases were admitted to the register during the year, and there was one removal into the area. Twelve names were removed from the register (8 deaths, 4 transferred to register of blindness). Thus on the 31st December, 1970, there were 78 persons registered as partially sighted within the Borough.

The following analysis gives the information concerning these persons by age groups.

<i>Age Distribution</i>	<i>M</i>	<i>F</i>	<i>Total</i>
2-4	—	—	—
5-15	3	4	7
16-20	1	—	1
21-49	14	8	22
50-64	1	1	2
65 and over	15	31	46
	34	44	78

Educational and Occupational Distribution.

The following analysis shows the different states of occupation of the 78 partially sighted persons.

(a) <i>Persons over 16 years of age</i>	<i>M</i>	<i>F</i>	<i>Total</i>
(i) Available for work	2	2	4
(ii) Not available for or not capable of work	4	17	21
(iii) Employed	5	2	7
(iv) Undergoing training	—	—	—
(v) Requiring observation only	20	19	39
	31	40	71
(b) <i>Persons under 16 years of age</i>	<i>M</i>	<i>F</i>	<i>Total</i>
(i) Attending Special School	2	3	5
(ii) Attending other school	—	2	2
(iii) Not at school	—	—	—
(iv) Ineducable	—	—	—
(v) Age 2-4	—	—	—
	2	5	7

Particulars of Cases Examined.

Source of Notification.

Of the 45 persons for whom new certificates B.D.8 were issued ascertainment of these cases was as follows:—

	Blind	Partially Sighted	Un-classified
Other Lay Sources Including Personal Requests			
Welfare, Mental Health Staffs and Home Teachers	18	5	—
Own General Practitioners	—	—	—
Ministry of Social Security	1	3	—
Hospitals and other Medical Sources	3	2	—
Re-Examination	5	5	3
	27	15	3

The following table shows the analysis of completed forms B.D.8 received by the Medical Officer of Health during 1970 in respect of Blind and Partially Sighted Persons:

1. No. of cases registered or re-examined during the year in respect of which para 7(c) of Forms B.D.8 recommends:	Cause of Disability							
	Cataract		Glaucoma		Retrolental Fibroplasia		Others	
	M	F	M	F	M	F	M	F
BLIND								
(a) No treatment	2	10	—	—	—	—	9	3
(b) Treatments (Medical, surgical or optical)	—	1	—	—	—	—	—	3
PARTIALLY SIGHTED								
(a) No treatment	—	—	—	—	—	—	—	1
(b) Treatment (Medical, surgical or optical)	1	7	—	1	—	—	3	2
2. No. of cases under 1 above which on follow-up action have received treatment:								
(a) Blind Cases	—	—	—	—	—	—	—	—
(b) Partially Sighted Cases	—	3	—	—	—	—	—	2

Acknowledgement is made to Mr. A.S. Underhill, Chief Welfare Officer, for the information in the above Section, supplied by the Welfare Services Department.

**XVI—GENERAL PROVISION BY THE HEALTH AND
WELFARE SERVICES FOR THE CARE OF HANDICAPPED
PERSONS INCLUDING EPILEPTIC AND SPASTIC PERSONS.**

The Welfare provision for the care of handicapped persons, including epileptics and spastics, is undertaken by the Welfare Services Committee of the Council in accordance with the scheme approved by the Ministry of Health on 24th May 1954.

At the end of 1969 there were 469 persons substantially and permanently handicapped on the register. Fifty new registrations were effected during the year. Deaths and removals from the register came to 62; making the resultant total of 457 at the end of December 1970.

HANDICAPPED PERSONS

(a) Classification in relation to defect

Details of the numbers and classification of known handicapped persons in St. Helens are given below. These are classified under the appropriate Medical Research Council and the figures shown in parentheses denote the numbers who suffer from dual disabilities.

Table H.P.1

**Details of registered handicapped persons in St. Helens
classified in accordance with disability.**

Disability	Code	Male	Female	Total
Amputation	A/E	29 (3)	7 (2)	36
Arthritis and Rheumatism	F	19 (5)	27 (4)	46
Congenital Malformations and Deformities	G	19	7 (1)	26
Diseases of the Digestive and Genito-Urinary Systems; of the Heart or Circulatory System; of the Respiratory System (other than T.B.); and of the skin	H/L	69 (5)	24 (3)	93
Injuries of the head, face, neck, thorax, abdomen, pelvis or trunk. Also injuries or diseases (other than T.B.) of the upper and lower limbs and of the spine	Q/T	58 (3)	17 (3)	75
Organic Nervous Diseases: Epilepsy, Disseminated Sclerosis, Poliomyelitis, Hemiplegia, Sciatica, etc.	V	61 (4)	55 (2)	116
Neuroses, Psychoses and other Nervous and Mental Disorders not included in V	U/W	24 (2)	10	34
Tuberculosis (Respiratory)	X	8	2 (1)	10
Tuberculosis (Non-Respiratory)	Y	2	2	4
Diseases and Injuries not specified above	Z	12	5	17
TOTAL		301 (22)	156 (16)	457

The Welfare Services Department acts as a liaison between statutory and voluntary services so that the registered handicapped persons derive maximum benefit. The Social Centre for Handicapped Persons continued each Monday afternoon, and attendances averaged 23, of whom an average of 16 were provided with transport to enable them to attend.

During the summer the Handicapped Persons attending the Social Centre were taken to Southport, where they had lunch and returned to tea at Helena House, which was followed by a social evening and concert.

The Christmas Party was also held at Helena House and, like the outing to Southport, was attended jointly with the residents of the Aged Persons Homes.

Each registered handicapped person who attended the Centre was provided with a gift by the Welfare Services Committee.

During 1970, 4 Handicapped Persons became in need of care and attention and were admitted to permanent Residential Accommodation in Homes outside the Borough. Another was admitted for a short period until his home circumstances returned to normal. At 31st December, 1970, there were 27 Handicapped Persons below the age of 65 in Residential Accommodation. 24 in Homes outside the Borough and 3 in St. Helens.

(b) Grouping in relation to employability.

The following Table H.P.2 shows the grouping of the handicapped persons in relation to their employability. These are classified by sex in the five recognised employability groups.

Table H.P.2

Age Group	Employability	Code	Male	Female	Total
Persons aged 16 and upwards	Capable of work under ordinary industrial conditions	A	150	31	181
	Incapable of work under ordinary industrial conditions but mobile and capable of work in sheltered workshops	B	66	28	94
	Incapable of work under ordinary industrial conditions and insufficiently mobile for work in sheltered workshops but capable of work at home	C	11	17	28
	Incapable of or not available for work	D	71	80	151
Children under the age of 16 years	Whose needs are likely to be met under other enactments but for whom the L.A. have a general responsibility under S.29 of the National Assistance Act, 1948	E	3	—	3
TOTALS			301	156	457

Transport.

Motorised tricycles and hand-propelled wheelchairs, together with garages, are provided free of charge by the Department of Health and Social Security. The St. Helens Welfare Services Committee provides the concrete base for the garage and the Department of Health and Social Security pay £15 towards the cost. Should further adaptations to the site be necessary these can be carried out by the Welfare Department, and it is a matter of regret that the Welfare Committee are under an obligation to make an assessment towards the recovery of the costs incurred. On the occasions when the adaptations are carried out privately by the disabled person he has to meet the entire cost.

Adaptations.

During the year adaptations were carried out at the homes of 15 handicapped persons to enable them to live more normal lives in their own surroundings. Gadgets can be loaned to assist the handicapped in overcoming their disability. Approval is in all cases required from the handicapped person's General Practitioner.

Wheelchairs.

Wheelchairs are available on loan from the Welfare Services Department for a limited period. No charge is made for this service.

Car Badges for Severely Disabled Drivers.

Car badges are issued at the Welfare Services Department to disabled persons who suffer from a permanent and substantial disability that causes severe difficulty in walking.

Epileptics.

During the year 12 epileptics were in accommodation provided by the Welfare Authority. Of these, 6 males and 3 females were in colonies administered by Voluntary Organisations and 1 male and 2 females in accommodation administered by the Local Authority. There were 39 known cases of epilepsy registered with the Department. Of these 22 were males and 17 females.

Table H.P.3

**Number of Registered Epileptics under
Classification V of Table H.P.1.**

	Employed	Unemployed	Total
Males	4	18	22
Females	1	16	17
TOTAL	5	34	39

CO-ORDINATION OF THE WELFARE OF AGED PERSONS

Since 1954 the Welfare Services Committee of the Council has operated a Scheme for the Care of the Aged living within the Borough. During the year under review a further 182 elderly persons were registered, 23 deaths were recorded of the registered aged, and 11 aged persons left the district to live with relatives or reside in other accommodation.

On the 31st December, 1970, the Department was responsible for the welfare of 1,901 elderly persons. Of these, 240 were in residential care, 151 deaf or hard of hearing, 223 registered blind or partially sighted, and the remaining 1,287 were visited in their homes by officers of the Welfare Services Department.

During 1970, the staff of the Welfare Services Department made 6,719 visits to the elderly. The elderly blind and partially sighted were visited in hospital by the Home Teachers and the elderly deaf and hard of hearing in hospital were visited by the Chaplain for the Deaf.

Residential Accommodation.

During 1970, 68 persons known to the Department became in need of care and attention and were admitted into residential accommodation, 12 having to be placed outside the Borough whilst the remaining 56 were provided with accommodation in local Homes. During the year under review, 7 persons were admitted to the Council's homes for a temporary period to enable their relatives who would normally care for them at home to take annual holidays or to enter hospital. At 31st December, 1970, there were 240 persons in Part III accommodation all of whom are visited at least once per year by the Welfare Services Visiting Sub-Committee.

The following table indicates the placement of persons in Residential Accommodation provided in compliance with Section 21 (1) (a) of the National Assistance Act, 1948.

	<i>M</i>	<i>F</i>	<i>Total</i>
St. Helens County Borough Council	69	95	164
Other Local Authorities	2	2	4
Voluntary Organisations	37	35	72
	108	132	240

Other Services.

As a result of regular visiting of the Aged, many instances came to light, where the needs could only be met by the Department of Health and Social Security, nationalised undertakings, various Corporation Departments or Voluntary Organisations. The co-operation of the Welfare Services Department with all these services is a regular feature of the Scheme and in this manner the varying needs of the Aged can be satisfied.

I should like to express appreciation to the General Practitioners who have willingly advised and sought the assistance of the Department concerning their patients welfare, also to the clergy who have at all times attended to the spiritual needs of the elderly whenever cases have been brought to their attention.

Meals on Wheels.

This continues to function on four days per week. Meals are prepared at the three Council's Old Persons Homes and the Town Hall Canteen. Transport is provided by the Rotary Club, St. Helens, the W.R.V.S. van and by paid taxi service. The Welfare Services Committee makes an annual grant towards the transport and other costs incurred by the W.R.V.S. who organise the service for the Local Authority. The charge per meal to the elderly is 1/5d. and Christmas Dinner was as usual supplied without charge. The Meals were supplied as follows:—

Ashtons Green Home	3,997
Moss Bank Home	3,891
Nutgrove Hall Home	4,064
Town Hall	2,356
	14,308

Luncheon Club.

This is held each Wednesday at the Institute for the Deaf, Dentons Green Lane and is attended by an average of twenty elderly persons. The cost of the meal is 3/—d. of which the old persons pay 2/—d. and the Welfare Services Committee the other 1/—d. During 1970, 1,102 meals were supplied.

Protection of Property.

Where an elderly person is admitted to hospital and no suitable arrangements can be made by the patients for the protection of the moveable property contained in the house, protection is undertaken by the Welfare Services Department.

Wheelchairs.

The Department has nineteen wheelchairs, which are available for use by aged and infirm persons or for loan to relatives who wish to take their parents out during holiday periods. The service is free and all that is asked is that the chairs are maintained in good condition when in use. During the year the chairs have been continually in use.

Pre-paid Postcards.

As each said person is registered they are issued with a pre-paid postcard in order to summon assistance before the next visit is due by the visitor. During the year many of the registered persons returned their cards to the Department for various needs and degrees of urgency.

Burials.

When a person dies in the St. Helens area and there is no one willing or able to

undertake the funeral arrangements, these are carried out by the Welfare Services Department.

Acknowledgement is made to Mr. A.S. Underhill, Chief Welfare Officer, for the information supplied in the above section by the Welfare Services Department.

XVII—INSPECTION AND SUPERVISION OF FOOD

Meat and Other Foods

The inspection and supervision of all meat at the Public Abattoir is carried out by qualified public health inspectors.

Table S.I.1
Carcases Inspected During 1970

	PUBLIC ABATTOIR					
	Cattle excluding Cows	Cows	Calves	Sheep and Lambs	Goats	Pigs
Number killed	3773	1808	27	6392	—	38661
Number inspected	3773	1808	27	6392	—	38661
Condemned:						
(a) All diseases except Tuberculosis and Cysticerci	1	—	2	—	—	98
(i) Whole carcasses condemned						
(ii) Carcasses of which some part or organ was condemned	918	861	—	1210	—	16614
(iii) Percentage of number inspected affected with disease other than tuberculosis	24.30%	47.60%	7.40%	19.08%	—	43.2%
(b) Tuberculosis only:	—	—	—	—	—	—
(i) Whole carcasses condemned	—	—	—	—	—	25
(ii) Carcasses of which some part or organ was condemned	—	—	—	—	—	—
(iii) Percentage of the number inspected affected with tuberculosis	—	—	—	—	—	0.15%
Cysticercosis:						
Carcasses of which some part or organ was condemned	—	—	—	—	—	—
Carcasses submitted to treatment by refrigeration	—	—	—	—	—	—
Generalised and totally condemned	—	1	—	—	—	—

Table S.I.1 gives details of the results of such inspection.

Under the Slaughter of Animals Act, 1958, 16 slaughtermen's licences were renewed for the year ended 31st December 1970.

At the end of the year, 160 premises were registered under Section 127 of the St. Helens Corporation Act, 1933, for the preparation or manufacture of potted, pressed, pickled or preserved meat, fish, or other food intended for the purpose of sale.

Food Hygiene

The Food Hygiene Inspectors examined fifty-three plans concerned with the construction or alteration of food premises. When necessary, the architect was contacted and agreement reached on the modification of plans to ensure compliance with current legislation.

It is a system appreciated by many of those involved, frequently saving subsequent expensive alterations to premises.

Eight suspected cases of food poisoning were investigated during the year and one proved to be Positive Salmonella B. Success in determining the origin of infection rests greatly on prompt notification.

Following a complaint by a resident of St. Helens that fumes from a nearby factory killed a number of his prize canaries, an intensive investigation was carried out. Faecal specimens were obtained from the birds' owner, his family and the individual birds. The birds' food and water supply were sampled. Laboratory tests revealed a Salmonella Typhimurium infection in the birds. The owner was advised to take appropriate steps to avoid the spread of infection.

Routine inspection of all food premises continued during the year. In many cases, on the spot verbal warnings were given, followed by a brief explanation as to the correct procedure to be employed.

The education of food handlers in the sound handling, storage and display of food is a continuous process as each year many school leavers enter the food trade.

Whenever applicable, the requirements of the Offices, Shops and Railway Premises Act, 1963, have been enforced with special reference to the Hoists and Lifts Regulations and the Prescribed Dangerous Machines Order. Whilst guards on horizontal food slicing machines were invariably found to be in place, a number of gravity feed food slicing machines were found to be in operation without a suitable guard. On an immediate request by the Public Health Inspector a suitable guard would be produced and fitted.

Only by constant and repeated visits to food premises of all classes can standards be maintained. The work of the Food Hygiene Inspector continues to increase and take on new facets.

The increase in the use of containers for the transportation of food continues and its impact is felt in the Borough as more containers arrive without inspection at the place of entry.

Poultry Inspection

There are no poultry processing plants in the Borough.

The sale of poultry, cooked and uncooked, is kept under regular observation.

Bakehouses

There are thirty-six bakehouses in St. Helens and mechanical power is employed in all instances.

Two hundred and twenty-eight visits of inspection to these premises were made during the year. Conditions were found to be satisfactory.

Washing Facilities

The following table indicates the position in regard to the provision of washing facilities in food premises in the Borough.

Type of premises	No.	No. complying with Reg. 16	No. to which Reg. 19 applies	No. complying with Reg. 19
Grocer/General Shops	324	316	316	319
Sweet Shops	69	66		26
Butchers Shops	79	79	79	79
Confectioners	53	53	53	53
Greengrocers/Wet Fish	67	65	67	67
Registered Clubs	69	69	69	69
Licenced Premises	165	165	165	165
Fried Fish Shops	85	85	85	85
Snack Bars – Cafes	45	45	45	45
Industrial Canteens	47	47	47	47
School Canteens	52	52	52	52
Food Preparing Premises	19	19	19	19
Food Warehouses	23	23	23	23
Market Stalls	42	16	—	13
Bakehouses	36	36	36	36
Ice Cream Manufacturers	3	3	3	3

Premises registered under Local Acts

The following are particulars of food premises in the Borough registered under local Acts, together with numbers of inspections made in respect of each of these classes of premises:

	<i>No. of Premises</i>	<i>No. of Inspections</i>
(a) St. Helens Corporation Act, 1933, Section 127. Premises used for the preparation and manufacturer of Potted, Pressed, Pickled or Preserved Meat, Fish or Other Foods.	159	1,342
(b) St. Helens Corporation Act, 1933, Section 133.		
(1) Premises used for the manufacture and sale of ice cream.	3	156
(2) Premises used for the sale of ice cream	218	1,266
(c) St. Helens Corporation (Electricity and General Powers) Act, 1948, Section 47. Premises used by Hawkers of food as storage accommodation.	48	198

Merchandise Marks Act, 1926 and Orders

Infringements of the Merchandise Marks Orders were dealt with by verbal warning.

Food Hawkers

Section 47 of the St. Helens Corporation (Electricity and General Powers) Act, 1948, requires the registration of any person (other than a person keeping open shop) who sells, offers or exposes for sale food from any vehicle or receptacle. The section also requires the registration of storage accommodation for any food intended for any of these purposes.

At the end of the year sixty-three persons, fifty-one separate premises were registered under this section.

As a routine measure during the year, night excursions were made to various districts in the Borough to locate and inspect mobile shops. Verbal warning proved on subsequent inspections to be effective.

Disposal of Food Surrendered as Unfit to the Local Authority

Foodstuffs surrendered voluntarily to the Local Authority which are found to be unfit for human consumption are dealt with by treatment with disinfectant for the purpose of rendering them unmarketable and along with canned goods are conveyed to the Municipal refuse tip and buried.

Strict supervision is maintained.

The following are the total quantities of various classes of foodstuffs examined by the Food Hygiene Inspectors during the year and found to be unfit for human consumption.

	lbs.
Meat	115,990
Canned Goods	3,265
Fish	196
Vegetables and Fruit	336
Miscellaneous Foodstuffs	564
	120,351

Foreign Bodies

During the year forty-three complaints were received from members of the public regarding foreign material in foodstuffs.

Each case was investigated in detail, the seller, and where applicable the manufacturer, interviewed.

When responsibility could be fairly ascertained the individual firm was cautioned of the consequences of any repetition.

St. Helens Show

Prior consultations with intending food stall proprietors were carried out to ensure that satisfactory hygiene standards would be observed.

Site visits by Public Health Inspectors prior to, and during, show days were carried out to confirm that such standards were maintained.

There were forty-four food stalls on the showground ranging from the main refreshment tents selling full meals to ice cream and hot dog vendors.

MILK AND MILK PRODUCTS

Milk and Dairies (General) Regulations, 1959

At the end of the year there were registered under these Regulations:

- 6 persons as distributors of milk from dairy premises;
- 226 persons as distributors of milk in sealed bottles or cartons only from shops; and
- 6 premises as dairies.

Most of the milk received into dairy premises in St. Helens is delivered to those premises in sealed bottles or cartons. The administration of these Regulations does not now, therefore, constitute a serious problem.

Public Health Inspectors paid 1,901 visits to these types of premises during the year.

MILK (Special Designation) Regulations, 1963**The Milk (Special Designation) (Amendment) Regulations, 1965**

The following licences were in operation during the year under these Regulations:

Dealers' Licences authorising the use of the special designation "STERILISED"	266
Dealers' Licences authorising the use of the special designation "PASTEURISED"	202
Dealers' Licences authorising the use of the special designation "ULTRA HEAT TREATED"	66

Biological Examination of Milk

In the routine examination of milk supplies 12 samples were examined by guinea-pig inoculation for the presence of tubercle bacilli. All were reported negative. 12 samples were also examined for brucella abortus. One sample, the product of a herd outside the Borough, was found to be positive; this authority was notified. A further sample was reported negative.

Bacteriological Examination of Milk

In addition to the samples of milk taken for examination for tubercle bacilli, 12 samples of untreated milk were also taken for the methylene blue reduction test. The results of these examinations showed that all the samples were satisfactory.

One hundred and thirty six samples of pasteurised milk were also examined for the methylene blue (30 minutes) test. Two samples failed to satisfy the test.

Examination of Milk for the presence of Phosphatase

One hundred and thirty six samples of milk were also examined during the year for the presence of phosphatase. All samples satisfied the test.

Turbidity Test for Sterilised Milk

During the year 68 samples were submitted for this test. All were reported to be satisfactory.

Colony Count for Ultra Heat Treated Milk

Three samples were taken for this test. These were reported satisfactory.

Milk-in-Schools Scheme

All milk supplied to schools is contained in wax paper cartons. A number of complaints were received regarding soiled and wet packs. These were due to unsatisfactory delivery service, the cartons being stacked in polythene bags in plastic crates, the necks of the bags not having been satisfactorily closed during inclement weather. Representations were made to the firm concerned to ensure

that this was carried out at all times before the milk left the producer. No further complaints of this nature were received.

Bacteriological Examination of Fresh Cream

For some years it has been the practice to obtain samples of cream for analysis. It has been considered that insufficient attention is given to the hygienic handling, storage during transit and at the retail outlet of this food.

Twenty samples of cream were obtained.

Three samples of cream were reported unsatisfactory.

Ice Cream Premises

The following are the particulars at the end of the year of registrations under the St. Helens Corporation Act, 1933, of manufacturers and vendors of ice cream and the premises used by them:

Manufacturers and Vendors	3
Vendors only	218
Premises for manufacture and sale	3
Premises for sale only	222

The 218 vendors mentioned above sell ice cream in wrapped packages only.

77 samples of ice cream were taken during the year for bacteriological examination by the Methylene Blue Test. These samples were taken from manufacturers and vendors whose premises are situate both inside and outside the Borough.

Results of Ice Cream Sampling

	Grade 1	Grade 2	Grade 3	Grade 4
Producers outside the Borough	12	12	2	—
Producers inside the Borough	36	8	5	2
	48	20	7	2

As in previous years, particular attention has been given to vehicles producing soft ice cream. Operators were regularly advised in the routine manner of cleansing of these vehicles, attention to satisfactory sterilising techniques of producer plant and thorough cleansing of the vehicle, the storage of raw materials at all stages prior to conversion, and the personal hygiene of staff.

Eighteen samples of soft ice cream were taken for bacteriological examination, three of which proved to be unsatisfactory. The driver/salesmen concerned were advised accordingly. Follow-up samples proved to be satisfactory.

Night excursions were again made to find these mobile producers, none of whom reside or have their place of business within the Borough.

Twenty-seven samples of lolly ices were taken during the year for bacteriological examination and were reported to be satisfactory.

The comparator test with litmus paper was applied during the year to twenty-seven samples of ice lollies as a check on their P.H. value.

All vehicles used for the sale of ice cream are provided with satisfactory supplies of hot water at a suitably controlled temperature and suitable washing facilities, soap, nailbrush and clean towels.

FOOD AND DRUGS

Food and Drugs Act, 1955

During 1970, fifty-nine formal samples and four hundred and eleven informal samples of food and drugs were submitted for analysis by the Public Analyst.

Of these, twelve samples were reported to be unsatisfactory. Included in these by reason of their nature of adulteration or irregularity were the following:—

Home Brew Beer Pack	The sample contained root ginger showing evidence of insect infestation.
Aspirin Spirit Liniment	The sample was found to be deficient in Menthol to the extent of 57.5%.
Proprietary Insect Bite Preparation	The sample was found to be deficient in calamine.
Chervil Powder	The sample contained copper to the extent of 45 parts per million.
Drinking Chocolate Concentrate	The sample did not contain a declared preservative.
Mashed Potato	A compound food incorrectly described as Calorie Reduced Mashed Potato.

The attention of the retailer and manufacturer were drawn to the results of analysis in each case, resulting in undertakings being given and corrections made. In regard to two of the above-mentioned samples, the manufacturer withdrew the product from sale.

The Liquid Egg (Pasteurisation) Regulations 1963

Two samples of liquid egg, produce of China, were sampled for the purpose of analysis by the Public Analyst and were found to satisfy the Alpha-Amylase test.

There are no egg pasteurisation plants in the Borough.

Imported liquid egg was in use in two bakehouses during the year, the majority of bakers using whole shell eggs.

Preservatives in Food Regulations, 1962

All samples submitted to the Public Analyst under the Food and Drugs Act, were also examined for the presence of preservatives.

Fertilizers and Feeding Stuffs Act, 1926

No samples of fertilizer were taken under the above Act during the year.

Pharmacy and Poisons Act, 1933

At the end of the year there were 21 persons entered in the Local Authority's list of persons entitled to sell poisons included in Part II of the Poisons List. The number of premises concerned was 40.

One hundred and ninety-nine visits were paid to these premises and no infringements of the Act were found.

Pharmacy and Medicines Act, 1941

No infringements of this Act were found during the year.

The Canned Meat Product Regulations 1967

Twenty-four samples of canned meat products were obtained during the year for analysis by the Public Analyst.

One sample was reported to be deficient in meat to the extent of 20% and the presence on the label of a pictorial device suggested that the meat was a major ingredient. The latter precluding it from application of exemption.

Resulting from this the manufacturers amended the label on this particular food in order to conform with the appropriate legislation.

The Meat Pie and Sausage Roll Regulations 1967

Twenty-three samples of meat pies and nine samples of sausage rolls were obtained for analysis by the Public Analyst.

These samples were reported to be genuine and satisfied the requirements of the Regulations.

Product	Meat Content	Product	Meat Content
Meat Pies	28.7%	Meat Pies	18.2%
Sausage Rolls	29.0%	Meat Pies	19.8%
Meat Pies	25.9%	Sausage Rolls	29.0%
Sausage Rolls	28.0%	Meat Pies	29.7%
Meat Pies	23.8%	Sausage Rolls	28.2%
Meat Pies	38.7%	Meat Pies	20.4%
Potato and Meat Pies	12.5%	Sausage Rolls	13.1%
Meat Pies	28.1%	Meat Pies	19.8%
Potato and Meat Pies	10.7%	Meat Pies	34.0%
Sausage Rolls	31.4%	Meat Pies	27.5%

Product	Meat Content	Product	Meat Content
Meat Pies	21.6%	Meat Pies	19.7%
Meat Pies	28.6%	Sausage Rolls	22.9%
Meat Pies	19.9%	Meat Pies	34.5%
Meat Pies	35.0%	Meat Pies	24.0%
Sausage Rolls	18.5%	Meat Pies	18.6%
Sausage Rolls	22.4%	Meat Pies	27.5%

The Sausage and Other Meat Products Regulations 1967

Seventy-five samples of sausages were obtained for analysis by the Public Analyst.

One sample was found to be deficient in lean meat. The manufacturer was warned in this instance and a follow-up sample was obtained which proved to be satisfactory.

Three samples were found to contain undeclared preservatives, the manufacturers were advised and follow-up samples proved satisfactory.

Results of analysis of sausage samples:—

Lean Meat Content	Total Meat Content	Lean Meat Content	Total Meat Content
46.6%	73.6%	47.5%	81.0%
68.5%	92.5%	38.1%	54.7%
62.9%	86.0%	51.0%	77.9%
57.6%	65.5%	58.3%	69.4%
58.2%	82.2%	49.9%	71.0%
38.8%	72.3%	50.9%	76.2%
35.5%	70.4%	54.7%	72.3%
40.8%	67.5%	52.2%	60.4%
40.5%	52.7%	49.5%	63.8%
39.9%	60.6%	39.5%	64.0%
44.0%	64.3%	36.0%	60.7%
61.7%	75.3%	39.5%	53.7%
52.2%	69.6%	44.5%	69.1%
39.2%	70.0%	48.1%	59.7%
40.4%	75.7%	46.7%	65.5%
35.7%	55.1%	44.0%	64.0%
58.7%	41.3%	64.9%	78.8%
49.2%	76.2%	39.9%	62.4%
40.2%	63.0%	12.5%	51.0%
17.8%	73.2%	41.9%	65.5%
55.0%	68.0%	52.0%	74.5%
28.2%	60.6%	44.9%	72.7%
43.9%	64.8%	55.8%	68.8%
39.2%	75.5%	48.9%	69.2%
49.4%	64.7%	59.1%	69.9%
44.6%	71.4%	38.8%	65.7%
40.0%	61.1%	29.6%	54.2%
43.6%	68.3%	35.4%	57.1%
74.9%	87.2%	49.5%	85.0%
44.3%	78.8%	52.6%	72.1%
43.0%	62.0%	37.8%	69.2%
45.3%	70.5%	42.5%	67.6%
49.4%	70.6%	50.7%	72.6%
49.4%	61.7%	41.3%	71.2%
51.5%	75.1%	43.5%	68.6%
41.6%	68.0%	40.2%	69.8%
43.6%	71.1%	44.9%	68.7%
38.7%	82.4%		

DISEASES OF ANIMALS ACT.

Tuberculosis Order, 1964

No cases under this order were reported during the year.

Anthrax

No suspected cases of Anthrax were reported during the year.

Swine Fever

No cases of suspected Swine Fever were reported during the year.

Foot and Mouth Disease

No cases of Foot and Mouth Disease were reported during the year.

Fowl Pest

No cases of Fowl Pest were reported during the year.

XVIII—SANITARY CIRCUMSTANCES OF THE AREA

Water

The three million gallons reinforced concrete Reservoir and ancillary trunk watermains which were the subject of an interim report the previous year, have now been brought into operation and have resulted in the Northern Area of St. Helens receiving increased pressures in all districts and have also stabilized the extreme fluctuation of pressures which previously obtained.

The 21" diameter trunk watermain from Knowsley Pumping Station to the Brown Edge Reservoirs which was also reported last year is now in operation, enabling an increased volume of water to be obtained from the Department's Pumping Stations if required and in addition providing a further duplication of the trunk mains network which minimises any reduction of quantity should a trunk main failure occur.

The following mains have been laid during 1970:—

<i>Site Location</i>	<i>Size</i>	<i>Length in Yards</i>
Four Acre Lane (Council development)	10"	198
	8"	66
	6"	252
	4"	722
	3"	314
Moss Bank (Trunk Main)	10"	890
Lancots Lane (Trunk Main)	12"	470

<i>Site Location</i>	<i>Size</i>	<i>Length in Yards</i>
Eltonhead Road (Renewal)	6"	432
	4"	203
	3"	112
Robins Lane School Reginald Road (Industrial development)	3"	25
	10"	100
	6"	5
Clock Face Road (Renewal)	4"	8
	10"	66
	8"	60
Hollybank Road (Renewal)	3"	94
	3"	12
Agnes Street (Renewal)	3"	12
	6"	414
Leach Lane (Private development)	4"	261
	6"	19
	4"	663
Chain Lane (Private development)	3"	80
	10"	40
	8"	394
Marshalls Cross Road (Trunk Main and Road Diversions)	6"	24
	6"	104
	4"	170
Laffak Road (Private development)	3"	88
	12"	400
	3"	156
Sherdley Road (Caravan Site)	3"	30
	4"	110
Taylor Street (Council development)		

Some 33,755 dwelling houses in the Borough (population 102,900) were supplied direct from public water mains throughout the year. There are no stand pipes in the area.

The supply has been satisfactory in both quality and quantity throughout the year. Bacteriological examinations of the water were made at regular intervals at the sources of supply, and at the reservoirs prior to distribution into supply, in all cases after chlorination. The number of samples examined during the year was 398 and all proved to be satisfactory.

One hundred samples of water taken for chemical analysis were reported satisfactory.

In addition, fifty samples of tap water were obtained by Public Health Inspectors for bacteriological examination.

These were procured from all types of food preparation premises and dwellinghouses. All were reported satisfactory.

Lead Determination

Nine samples of tap water were submitted to the Public Analyst for lead determination content;

Source	Result	Observations
1. Milk Distribution Depot	P.H. Value 6.9 Lead content 0.02 p.p.m.	The concentration of lead in sample does not exceed acceptable limits
2. Dwellinghouse	P.H. Value 6.85 Lead content 0.03 p.p.m.	The lead content of this water is satisfactory.
3. Dwellinghouse	P.H. Value 6.8 Lead content 0.02 p.p.m.	The lead content in this sample does not exceed acceptable limits.
4. Dwellinghouse	P.H. Value 7.0 Lead content 0.03 p.p.m.	The lead content does not exceed acceptable limits.
5. Dwellinghouse	P.H. Value 7.1 Lead content less than 0.01 p.p.m.	The concentration of lead in this sample does not exceed acceptable limits.
6. Dwellinghouse	P.H. Value 6.9 Lead content less than 0.01 p.p.m.	The concentration of lead in this sample is satisfactory.
7. Dwellinghouse	P.H. Value 7.2 Lead content 0.03 p.p.m.	The concentration of lead in this sample does not exceed acceptable limits.
8. Office	P.H. Value 6.3 Lead content 0.1 p.p.m.	The concentration of lead in this sample is excessive for water that has not been standing in lead pipes overnight.
9. Office	P.H. Value 6.05 Lead content 0.04 p.p.m.	The concentration of lead in this sample is satisfactory

Fluoridation.

Despite support from local doctors, dentists and the Executive Council, the Health Committee in 1969 decided not to fluoridate the water supply – disappointing to myself. The subject was not further considered by the Committee in 1970.

Rivers and Streams

The supervision of rivers and streams in St. Helens is carried out by the Mersey and Weaver River Board.

DRAINAGE AND SEWERAGE

During the year work has proceeded on the following schemes:

Computer Analysis

This is complete and the capacity and surcharge level of each trunk sewer are now known factors.

Infiltration Survey

Still proceeding.

Sutton Manor W.P.C.W.

It has been decided to abandon this works and to convey the intake flows via a proposed trunk sewer to Parr W.P.C.W. An initial design for this trunk sewer is complete.

Parr W.P.C.W.

Consultants are proceeding with extension designs which are to include for the volume of sewage anticipated to arrive from Sutton Manor.

Trade Wastes

Discussions are taking place between British Sidac, Mersey and Weaver River Authority and the Corporation to endeavour to find an alternative method of dealing with Sidac's effluent which at present discharges into the Sutton Brook.

Blackbrook

The surface water outfall between Woodlands Road and Blackbrook is now complete.

Reginald Road

A contract has been entered into for the construction of a surface water outfall between Reginald Road and Sutton Mill Brook to serve the industrial site.

Park Road

Work by contract is proceeding in respect of the construction of a surface water outfall to Rainford Brook to serve the redevelopment area and proposed dual carriageway.

Closet Accommodation

At the end of 1970 there were still in use 17 privy middens serving 23 premises, and 43 pail closets serving 33 premises.

PUBLIC CLEANSING

Refuse Collection

A further compression-type refuse collection vehicle purchased during the year has brought the total vehicles of this type to sixteen. An additional number of 21 bulk refuse containers has brought the total of these receptacles to 229.

Refuse Disposal

100% of domestic refuse is disposed of by controlled tipping, at present at the Southport Street Site.

Arrangements are, however, being made to temporarily close down the Controlled Tip at Southport Street in order to make a start at the new site at

Chester Lane during the next few months. The Local Government Operational Research Unit's Report on refuse disposal in the Merseyside sub-region has now been received by the Councils who are co-operating in the scheme and further progress is anticipated in this matter in the near future.

Public Conveniences

There is no improvement in the incidence of vandalism to these establishments. Haresfinch Public Convenience is still unopened.

Street Cleansing

A further mechanical sweeping machine has now been purchased, making the number now in use three.

Taylor Park Paddling Pool

4 samples were taken of the water in this pool for bacteriological examination, and all were reported to be satisfactory. The Town's water was used to fill the pool at intervals.

Swimming Baths

Both pools have been equipped with v notch chlorinators, a more efficient type than Bell jar, and bacteriological samples are satisfactory.

In addition, 22 samples were taken by Public Health Inspectors and proved to be satisfactory.

Atmospheric Pollution

For the measurement of atmospheric pollution in St. Helens, the following observation stations are now maintained:

Albion Street Clinic	8-port Valve Smoke and SO ₂ Sampler
Public Health Inspector's Office, Hardshaw Street	do.
Carr Mill Clinic	do.
Sutton Library	do.
Thatto Heath Library	do.
Jersey Street Clinic	do.

The first three stations are maintained in conjunction with the National Survey of Atmospheric Pollution being investigated by the Department of Scientific and Industrial Research. 501 observations were taken of industrial chimneys during the year.

The Atmospheric Pollution Inspector retired at the end of June, 1968, and unfortunately no satisfactory successor could be obtained. This vacancy occurred at a time when special emphasis was once again being placed on the need for

further improvement in the industrial aspects of atmospheric pollution. During the year the Public Health Inspector's staff was re-organised to cover this work full time.

Smoke Control

Further progress was made during 1970 on the Council's programme for declaring smoke control areas.

At 31st December, 1970, there were nine operative Smoke Control Orders in the Borough, comprising 10,348 dwellings, 777 commercial, industrial and other premises covering an area of 4,052 acres.

Included in the above was St. Helens (No.7) Smoke Control Order, confirmation of which was received on the 7th January, 1970. This Order became operative on the 1st December, 1970.

During the year considerable difficulty was caused in implementing the above Order due to constant changes in clerical staff.

Despite frequent rumours of local shortages of solid smokeless fuel a survey carried out in one of the most likely to be affected operative Smoke Control Areas did not substantiate this position. The Authority did not suspend any of the operative Smoke Control Orders. The latter was entirely dependent on the position that all the Smoke Control Areas were based on hard cokes instead of gas coke and suitable appliances had been fixed to use any fuel of this type.

Factories

A total of 464 visits of inspection were made to factories during 1970.

Table S.I.2 gives particulars of the administrative action taken under the Factories Act, 1961.

PART 1 OF THE ACT

Table S.I.2

1—INSPECTIONS for purposes of provisions as to health (including inspections made by Public Health Inspectors).

Premises	Number on Register	Inspections	Number of	
			Written notices	Occupiers prosecuted
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities	6	38	—	—
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	282	426	24	—
(iii) Other Premises in which Section 7 is enforced by the Local Authority excluding out-workers' premises	—	—	—	—
Total	288	464	24	—

2—CASES IN WHICH DEFECTS WERE FOUND.

(If defects are discovered at the premises on two, three or more separate occasions they are reckoned as two, three or more "cases").

Particulars	No. of cases in which defects were found				Number of cases in which prosecutions were instituted
	Found	Remedied	Referred to H.M. Inspector	by H.M. Inspector	
Want of cleanliness (S.1)	—	—	—	—	—
Overcrowding (S.2)	—	—	—	—	—
Unreasonable temperature (S.3)	—	—	—	—	—
Inadequate ventilation (S.4)	2	—	—	—	—
Ineffective drainage of floors (S.6)	—	—	—	—	—
Sanitary Conveniences (S.7)					
(a) Insufficient	—	—	—	—	—
(b) Unsuitable or defective	46	22	—	—	—
(c) Not separate for sexes	—	—	—	—	—
Other offences against the Act (not including offences relating to Outwork)	—	—	—	—	—
Total	48	22	—	—	—

PART VIII OF THE ACT

OUTWORK
(Sections 133 and 134)

Nature of Work	Section 133			Section 134		
	No. of out-workers in August list required by Sec. 113(1)(c)	No. of cases of default in sending lists to the Council	No. of prosecutions for failure to supply lists	No. of instances of work in unwholesome premises	Notices served	Prosecutions
Wearing apparel—making, etc.	5	—	—	—	—	—
Paper bags	—	—	—	—	—	—
Total	5	—	—	—	—	—

INSPECTIONS OF THE AREA

The total number of visits made by the Public Health Inspectors was 63,082. The nature of these inspections is shown in Table S.I.3, and Table S.I.4 contains a list of notices served and the results of such notices.

TABLE S.I.3

Number and Nature of Inspections made during 1970

Complaints investigated	2,057
Dwellings inspected	5,214
Visits to work in progress	3,226
Overcrowding, including permitted numbers	220
Common Lodging Houses	5
Houses in multi-occupation	13
Pigstyes	22
Waste Foods Order	25
Middensteads	58
Ashes Receptacles	11
Conversions	—
Insufficient Water Supply	1
Public Sanitary Conveniences	—
Places of Public Entertainment	31
Tents, Vans and Sheds	153
Hairdressers and Barbers' Premises	194
Brokers	6
Smoke Observations	501
Boilerhouses and Furnaces	78
Drager Tests	8
Atmospheric Pollution Gauges	320
Tips and Spoilbanks	32
Vermin Infestation	8,438
Rodent Infestation	7,928
Testing Drains:	
By Smoke	45
By Coloured Water	48
By Breaking Down	11
Factories Act, 1961:	
With Mechanical Power	464
Without Mechanical Power	38
Outworkers	11
Food-Hygiene:	
Bakehouses	228
Confectioners	1,296
Sweet Shops	1,413
Fried Fish Shops	387
Fishmongers Shops	432
Greengrocers Shops	1,422
Butchers Shops	1,451
Grocers and General Shops	2,329
Canteens	494
Restaurants	141
Cafes	254
Public Houses, Licensed Clubs	1,067
Food Preparing and Storage Places	2,287
Food Hawkers Premises	198
Food Hawkers Vans	612
Food Poisoning Enquiries	86
Carried forward	43,255

TABLE S.I.3—continued

Number and Nature of Inspections made during 1970

	Brought forward	43,255
Visits re Unfit Food		169
Dairies and Milk Shops		1,901
Ice Cream Premises		1,266
Market Stalls		1,130
Samples:		
Milk		219
Ice Cream		77
Ice Lollies		27
Other Foods		7
Water		88
Food and Drugs		411
Milk		59
Fertiliser and Feeding Stuffs Samples		—
Pesticide Residues Samples		—
Frozen Whole Hen egg		2
Fresh Cream		20
Lead Determination - water samples		9
Merchandise Marks Act		507
Pharmacy and Poisons Act		199
Schools		87
Offices, Shops and Railway Premises Act, 1963		2,529
Slum Clearance Premises		407
Certificates of Disrepair:		
Inspections		5
Re-Inspections		5
Improvement Grants:		
Discretionary Grant		159
Standard Grant		119
Re-Inspections		767
Qualification Certificates		20
Smoke Control Areas:		
Inspections		2,603
Re-inspections		113
Improvement Areas:		
Inspections		267
Re-Inspections		205
Noise Observations		105
Dust Observations		40
Asbestos Regulations		15
Pet Animals Act		4
Animal Boarding Establishments Act		2
Miscellaneous (Interviews, etc.)		6,255
Chemists		39
Midden Conversions		—
Mines and Quarries Act		—
	Total	63,082

Table S.I.4

Number of defects for which notices were served during 1970, and notices complied with during the year (including outstanding notices from previous year)

Subject of Notices	DEFECTS		
	Preliminary Notices	Statutory Notices	Number complied with
Dampness arising from defective roofs, eaves, gutters, rainwater pipes and pointing	635	265	369
Defective and choked drains, closets, cesspools, etc.	369	95	298
Absence of proper sink	5	7	7
Unsatisfactory yard paving	5	4	6
Filthy or verminous condition of premises	1	1	—
Accumulation of manure and offensive matter	29	6	23
Other housing defects	221	94	109
Excessive emissions of smoke	8	3	7
Miscellaneous	26	4	10
Contravention of:			
Factories Act, 1961	24	—	—
Food Hygiene Regulations, 1960	202	—	557
Unauthorised use of land for camping purposes	—	—	—
Clean Air Act, 1956 and 1968	—	—	—
Offices, Shops and Railway Premises Act, 1963	400	—	322
Totals	1925	479	1708

Referred to other departments:—

To Borough Engineer

Choked or defective sewers	2
Choked or defective street gullies	23
Accumulation of refuse	47
Dangerous structures	83
Defective street paving	8
Flooding	—
Miscellaneous	30

To Housing Manager

Choked drains and housing defects	210
Flooding	—
Overcrowding	—
Accumulation of refuse	—
Dirty conditions	—
Miscellaneous	3

To Water Engineer

Waste of water	23
Defective supply pipe	1
Other defects	3

To Director of Education

Choked or Defective Drains	1
--------------------------------------	---

Choked Drains

During the year 770 complaints of choked drains were made to the Department. Of this number 450 drains were freed from obstruction by members of the staff of the Public Health Inspector's Department thus obviating the necessity for serving notices upon the owners.

PREMISES AND OCCUPATIONS WHICH CAN BE CONTROLLED BY BYELAWS OR REGULATIONS

Offensive Trades

There are no offensive trades carried on in the Borough.

Houses in Multi-Occupation

There are 38 premises known to the Department to be used as Houses-let-in-lodgings.

Common Lodging Houses

There is now only one common lodging house in the Borough.

This is owned by the Council and administered on their behalf by the Salvation Army. This accommodation was purchased and improved by the Authority to set a high standard.

During the year 10 visits of inspection were made to the common lodging house.

Further discussions were held with the Salvation Army on the provision of a new hostel to replace the existing common lodging house which is in the Central Re-Development Area. A new site was allocated and an architect nominated.

Hairdressers and Barbers

There were at the end of the year 139 persons registered as hairdressers or barbers, and the number of premises registered was 133.

194 visits of inspection were made to these premises during the year.

Byelaws with respect to Nuisances

These byelaws prove very effective for the control of pig-keeping. There were 17 persons in the Borough known to be engaged in the keeping of pigs, at the end of the year. 32 visits of inspection were made to pig styes during the year.

St. Helens Corporation (Electricity & General Powers) Act, 1948. Noise Abatement Act, 1960

One hundred and five observations and interviews were made during the investigation of complaints of nuisances from noise during 1970.

Noise complaints during the year resulted from:—

- (a) Alleged noise late at night from handling beer crates at a club near residential property.
- (b) Noise from steam release valves on new boiler plant on several occasions.
- (c) Noise from a valve on the inlet to a large industrial compressor.
- (d) Noise in the evening from the repair of builders vehicles and equipment in a workshop in a residential area.
- (e) Noise from the use of a record player in a shop doorway in the town centre.
- (f) Alleged noise from a workshop attached to residential property.
- (g) Noise from the handling of metal cylinders in the early hours of the morning.
- (h) Alleged noise from refrigerators in a shop next to residential property.
- (i) Noise late at night from rotary pressers and fans in a factory close to houses.
- (j) Noise from fans serving machines in a new factory close to residential property.
- (k) Noise from fork lift trucks late at night in a factory near houses.
- (l) Alleged noise from a barking guard dog on industrial premises.
- (m) Alleged noise from automatic presses in the evening at a factory near houses.
- (n) Alleged noise from neighbours in a residential area.
- (o) Noise from a portable diesel air compressor used on a temporary job at a factory close to the houses.

Some of the complaints were not justified, some were very easily cured, but a few needed more substantial work to reduce the noise to a reasonable level. Industrialists co-operated when the matter was drawn to their notice and there was no need for any formal notice.

Again pneumatic drills were used by some contractors from time to time without adequate mufflers or silencers and letters were sent to several firms.

Routine checks on plans for new factories resulted in discussions with a number of industrialists on the steps needed to quieten noisy equipment before the factories came into operation.

Waste Foods Order, 1957

Agriculture (Safety, Health and Welfare Provisions) Act, 1958

Agriculture (Miscellaneous Provisions) Act, 1968

Routine inspections of these premises continued.

OTHER SANITARY CONDITIONS

Prevention of Damage by Pests Act, 1949

Table S.I.5 gives particulars of the work carried out under the above-mentioned Act during the year.

Table S.I.5

PREVENTION OF DAMAGE BY PESTS ACT, 1949

Report for year ended 31st December, 1970

	TYPE OF PROPERTY	
	Non-Agricultural	Agricultural
Properties other than Sewers		
1. Number of properties in district	39464	51
2. (a) Total number of properties (including nearby premises) inspected following notification	1229	—
(b) Number infested by:		
(i) Rats	465	—
(ii) Mice	373	—
3. (a) Total number of properties inspected for rats and/or mice for reasons other than notification	228	3
(b) Number infested by:		
(i) Rats	10	1
(ii) Mice	2	—
Sewers		
4. Were any sewers infested by rats during the year?	Yes	

OFFICES, SHOPS AND RAILWAY PREMISES ACT, 1963

The operation of the above-mentioned Act took up a large proportion of the time of the Public Health Inspectorate in 1970. 2,529 visits of all kinds were paid by Inspectors to registered premises. Included in this total are 2,461 general inspections.

Table S.I.4a

Class of premises	No. of premises registered during year	Total number of registered premises at end of year	No. of registered premises receiving a general inspection during year
Offices	24	239	239
Retail shops	75	612	612
Wholesale shops, warehouses	8	41	41
Catering establishments open to the public, canteens	9	140	140
Fuel storage depots	—	—	—
Totals	116	1032	1032

Places of Public Entertainment

31 visits were paid to places of public entertainment during 1970. The condition of these premises throughout the year was found to be generally satisfactory.

Mortuaries

A Public Mortuary with post-mortem room is maintained behind the Town Hall, and is under the supervision of the Medical Officer of Health. During the year 235 bodies were received into the mortuary and 208 post-mortem examinations were conducted.

Arrangements for the Disposal of the Dead

At the end of the year there were 16,976 acres of land available for burials at the Borough Cemetery. Of the land adjoining the cemetery available for extension purposes, consisting of 23.8 acres, 8.47 acres has been used for the Crematorium and a Garden of Remembrance, leaving 15.33 acres for future earth burials. During the year there were 1,026 cremations, making a total of 5,395 since the Crematorium was opened.

Rag Flock and Other Filling Materials Act, 1951

Owing to the continued shortage of Public Health Inspectors, no samples of rag flock or other filling materials were taken during the year.

Housing Acts 1957 to 1969 – Slum Clearance

Slum Clearance work continued with the commencement of a three-year programme, the object of which is to complete the demolition of all the houses remaining in the survey of unfit houses carried out in 1954.

The St. Helens (South Windle Ward 1 & 1A) Compulsory Purchase Order was confirmed in February, 1970, the St. Helens (Bewsey Street) Compulsory Purchase Order was confirmed in May, 1970, and the St. Helens (South Windle Ward No. 5) Compulsory Purchase Order was confirmed in August, 1970.

Under these orders 373 properties will be demolished and 380 dwellings will be required to re-house the persons displaced.

During the year six Clearance Areas were represented to the Health Committee – The Westfield Street Nos. 1 & 2 Clearance Areas comprising 304 houses, and the Westfield Street Nos. 3, 4, 5 and 6 Clearance Areas comprising 247 houses.

Consequent thereon the Council made the following orders – the St. Helens (Westfield Street Nos. 1 & 2) Compulsory Purchase Order and the St. Helens (Westfield Street Nos. 3 to 6) Compulsory Purchase Order.

No Closing Orders were made during the year.

An undertaking to demolish was accepted from the owners of one house and no certificates of unfitness were given in respect of houses owned by the Local Authority.

Work was commenced on the inspection of properties within the King Street Clearance Area with a view to representing this area to the Health Committee in 1971.

Work was also continued on the survey of properties suitable for inclusion in future clearance schemes to be carried out after all the houses in the survey of 1954 have been dealt with.

Demolition and re-housing continued during the year as follows:—

	<i>Houses Demolished</i>	<i>Persons Rehoused</i>	<i>Families Rehoused</i>
1. Clearance Areas	369	1,021	366
2. Undertakings to demolish from owners	3	8	3
3. Houses owned by the Local Authority	—	—	—
	372	1,029	369

XIX—HOUSING

Housing

(1) Number of dwellinghouses erected during 1970 in the various wards of the Borough.

	<i>N.E.</i>	<i>S.E.</i>	<i>C.</i>	<i>N.W.</i>	<i>S.W.</i>	<i>H.</i>	<i>E.S.</i>	<i>W.S.</i>	<i>P.</i>	<i>M.B.</i>	<i>Total</i>
Local Authority	—	—	—	—	—	—	26	177	88	53	344
Private Enterprise	—	8	—	2	—	1	119	85	276	24	515

(2) Total number of houses completed during the year within the Borough:

(a) with State assistance under Housing Acts

(i) Local Authority in Borough 344

(ii) Private Enterprise 22

(b) without State assistance

(i) Local Authority —

(ii) Private Enterprise 493

Housing Acts, 1949 and 1969—Improvement Grants and Areas

Inspections for Discretionary Improvement Grants and Standard Grants continued to be carried out by the Public Health Inspectors. 96 applications for Discretionary Grants and 44 for Standard Grants were dealt with in the year. 31 applications for loans and 18 provisional applications were also dealt with.

A large number of informal enquiries were also answered by the staff.

GENERAL IMPROVEMENT AREAS

Standish Street Improvement Area

During the year, preliminary surveys were carried out of the town's first proposed General Improvement Area. The area chosen contains 267 dwellinghouses and is bounded by Standish Street on the South, the embankment of the former L.N.E.R. railway line on the North and the boundary of Hardshaw Park on the East, and lies approximately 500 yards at the rear of the Town Hall.

Each house in the area was sent a letter, setting out the purpose of the exercise, enclosing a questionnaire to be completed, copies of Ministry of Housing leaflets and a diagrammatic sketch of environmental improvements proposed.

Returned questionnaires were recorded, analysed and a general picture was gained as to the types of improvements required in each individual dwellinghouse.

Many visits were made both to owner/occupiers and tenants to advise regarding the availability of Improvement Grants and the Environmental Improvements.

Specimen plans were produced and prices were obtained from local builders so that the occupiers would be aware of the level of financial commitment they would have to undertake to improve their homes.

All this activity culminated in a public meeting and exhibition which was held in a local school adjacent to the area. The meetings were held over three days and evenings during the December holidays. The purpose of the meetings was two-fold. Firstly, to obtain the opinions of the area residents on the proposed environmental improvements, and secondly to inform the residents of progress made in the area on the improvement of houses and advise on the types of improvements which would qualify for grant aid.

The exhibition consisted of three alternative schemes for the Environmental Improvement of the area, photographs and artists impressions of other areas similarly improved in other parts of the country, and plans showing alternative bathroom layouts. Hourly during the day and evening a Ministry of the Environment film was shown. Public Health Inspectors were on duty during the exhibition to advise on the various aspects of the work involved.

Rent Act, 1957

The following are particulars of applications received under this Act during the year:

(1) Number of applications for Certificates of Disrepair	5
(2) Number of decisions not to issue Certificates	—
(3) Number of decisions to issue Certificates	
(a) in respect of some but not all defects	3
(b) in respect of all defects	2
(4) Number of Undertakings given by landlords	2

(5) Number of Certificates of Disrepair issued	3
(6) Applications by landlords for cancellation of Certificates	—
(7) Objection by tenants to cancellation of Certificates	—
(8) Certificates cancelled by Local Authority	—
(9) Decisions by Local Authority to cancel Certificates in spite of objection	—

Housing Act, 1969 — Qualification Certificates

No. of applications received under Section 44(1)	199
No. of applications received under Section 44(2)	2
No. of applications referred back to applicants for repairs	—
No. of applications referred back to applicants for lack of amenities	—
No. of applications received with improvement grant	—
No. of certificates issued	—
No. of provisional certificates issued	—
No. of applications cancelled due to wrong submission	—

DISINFESTATION OF PREMISES AND HOUSEHOLD EFFECTS

A total of 8,438 inspections of dwellinghouses and food premises for vermin infestation were made during the year, and the following disinfection work was carried out:

(1) Privately owned dwellinghouses	303
(2) Occupied Council houses	538
(3) Food premises and other business premises	58
(4) Corporation buildings, other than dwellinghouses	82
(5) Other buildings	—
Total No. of premises treated	981

The insecticides used were either D.D.T., Gammexane or Chlordane.

All dwellinghouses infested with vermin are now sprayed free of charge. The service has also been extended in regard to the presence of cockroaches in that a routine follow up treatment is carried out after an interval of four months. Also if a complaint is received in respect of one house in a block, either the whole block or a number of adjacent houses are sprayed at the same time.

Nominal charges are still made in respect of business premises.





