

Annual report for the year 1960 / North Wales Mental Hospital Management Committee.

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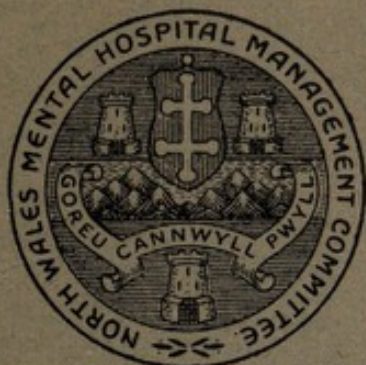
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**NORTH WALES MENTAL HOSPITAL
MANAGEMENT COMMITTEE**



ANNUAL REPORT

FOR THE YEAR

1960

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NORTH WALES MENTAL HOSPITAL
MANAGEMENT COMMITTEE




ANNUAL REPORT

FOR THE YEAR

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NORTH WALES MENTAL HOSPITAL MANAGEMENT COMMITTEE

Chairman:

Alderman DAVID TUDOR, M.B.E., J.P., Dilwyn, Trawsfynydd.

Vice-Chairman:

T. W. JOHNSON, Esq., Wynford, Rhyl Road, Denbigh
(Chairman of the Finance Sub-Committee).

Members:

Alderman O. R. E. JONES, J.P., Cafnan, Cemaes Bay
(Chairman of the Works, Engineering and Estate Sub-Committee).

Mrs. ELEANOR OWEN, Ty Ucha, Llanelltyd, Dolgellau.

Dr. T. GWYNNE WILLIAMS, Trefeirian, Denbigh.

Councillor EMYR HUGHES, Awelon, Maesdu Avenue, Llandudno.

Councillor the Rev. T. A. WILLIAMS, Hyfrydle, Betws Gwerfil Goch
(who are appointed for the period ending 31st March, 1962).

Dr. GEOFFREY WILLIAMSON, Bryn Pydew, Tynygroes, Conway.

Councillor W. R. WEBB, Ty'n Llwyn, Carrog, Corwen.

J. M. WATKINS, Esq., 29 New Street, Portmadoc.

Mrs. E. WYN JONES, J.P., Llety'r Eos, Llanfairtalhaiarn.

Councillor the Rev. D. J. M. WILLIAMS, The Rectory, Llansadwrn
(who are appointed for the period ending 31st March, 1963).

Councillor ERNEST PRICE, J.P., 65 Mold Road, Wrexham
(Chairman of the General Purposes Sub-Committee).

Dr. A. W. HILL, 36 Chester Road, Wrexham.

Mrs. FRANCIS WILLIAMS, J.P., Llys Meirchion, Henllan.

Councillor R. C. G. JONES, Llawndy Farm, Talacre, Holywell
(who are appointed for the period ending 31st March, 1964).

Secretary:

SIDNEY L. FROST, F.H.A.

Finance Officer and Deputy Secretary:

C. DEAKIN, B.A.(Admin.), F.H.A.

Supplies Officer:

ALFRED H. LUCAS, F.H.A., A.R.S.H.

Superintendent Engineer and Clerk of Works:

R. GLYN PRITCHARD, M.I.H.E., M.I.E.C.

HOUSE COMMITTEES

NORTH WALES HOSPITAL FOR NERVOUS AND MENTAL DISORDERS, DENBIGH, AND POOL PARK HOSPITAL, NEAR RUTHIN

T. W. JOHNSON, Esq. (Chairman).

Mrs. E. WYN JONES, J.P.	D. W. THOMAS, Esq.
Mrs. FRANCIS WILLIAMS, J.P.	Counc. the Rev. T. A. WILLIAMS.
E. H. CLEMENT, Esq., B.A., B.Litt.	Dr. T. GWYNNE WILLIAMS.
D. H. GRIFFITHS, Esq.	Dr. GEOFFREY WILLIAMSON.
C. GWYNN HUGHES, Esq., J.P.	

OAKWOOD PARK HOSPITAL, NEAR CONWAY.

Alderman DAVID TUDOR, M.B.E., J.P. (Chairman).

Miss NORA F. CHESTER, M.B.E.	Counc. EMYR HUGHES.
Mrs. OLWEN DAVIES.	Dr. M. T. ISLWYN JONES.
Mrs. E. WYN JONES, J.P.	Dr. D. E. PARRY-PRITCHARD,
Mrs. G. M. LLOYD JONES.	O.B.E.
Mrs. HUGH PRITCHARD.	Dr. J. H. O. ROBERTS, O.B.E., J.P.
Mrs. H. M. ROBERTS.	Mr. G. T. REES.
Miss DOROTHY STOKES.	

BROUGHTON HOSPITAL, NEAR CHESTER.

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Mrs. D. KENYON.	Counc. E. G. ROBERTS, J.P.
Miss W. YATES, J.P.	Dr. G. WYN ROBERTS.

COED DU HALL, RHYDYMWYN.

Mrs. FRANCIS WILLIAMS, J.P. (Chairman).

Mrs. P. R. DAVIES-COOKE.	Alderman H. HAMPSON, J.P.
Mrs. FLORENCE JONES.	Dr. M. T. ISLWYN JONES.
Miss W. YATES, J.P.	Dr. G. WYN ROBERTS.

LLWYN VIEW AND GARTH ANGHARAD, DOLGELLAU.

Alderman DAVID TUDOR, M.B.E., J.P. (Chairman).

Mrs. M. MAELOR JONES.	E. J. EVANS, Esq.
Mrs. ELEANOR OWEN.	Dr. W. F. GAPPER.
Mrs. E. ROBERTS.	D. R. MEREDITH, Esq.

NORTH WALES HOSPITAL FOR NERVOUS AND MENTAL DISORDERS

MEDICAL STAFF.

PSYCHIATRY.

Consultants:

J. H. O. ROBERTS, O.B.E., M.D. (Lond.), D.P.M., J.P.
(Medical Superintendent).

GEOFFREY WILLIAMSON, M.B., Ch.B. (Manchester), D.P.M.

T. GWYNNE WILLIAMS, M.D. (Lond.), D.P.M.

ALEXANDER CRAIG, M.B., Ch.B., (Edin.), D.P.M.

DAVID N. PARFITT, M.D. (Lond.), M.R.C.P., D.P.M.

Senior Hospital Medical Officers:

D. OWEN LLOYD, M.B., B.S. (Lond.), D.P.M.

G. S. FIDDLER, M.B., Ch.B. (Edin.), D.P.M.

P. HUGHES GRIFFITHS, B.Sc., M.B., Ch.B. (Wales).

Senior Registrar:

R. ELWY OWEN, M.B., B.S. (Lond.).

Registrar:

DAVID E. JONES, M.B., B.Ch., B.A.O. (Dublin).

Junior Hospital Medical Officers:

T. J. M. KIRBY, L.R.C.P., L.R.C.S. (Edin.), L.R.F.P.S. (Glasgow).

C. P. O'TOOLE, L.R.C.P.I. & L.M., L.R.C.S.I. & L.M. (R.C.S.I.).

ALEXANDER KING, M.B., Ch.B. (Glasgow).

CONSULTANTS IN OTHER SPECIALITIES.

Pathology:

J. T. ALBAN LLOYD, M.B., Ch.B., D.Path.

General Medicine:

GEOFFREY H. T. LLOYD, M.D. (Lond.).

Electroencephalography:

ROBERT R. HUGHES, M.D. (Liverpool), M.R.C.P.

General Surgery:

D. I. CURRIE, M.B., Ch.B. (Leeds), F.R.C.S. (Eng.).

Neuro-Surgery:

A. SUTCLIFFE KERR, M.C., Ch.B. (Liverpool), F.R.C.S. (Eng.).

Ear, Nose and Throat Surgery:

R. D. AIYAR, F.R.C.S. (Edin.).

Ophthalmology:

ELEANOR M. P. BROCK, M.B., Ch.B. (Liverpool), D.O.M.S.

Anaesthetics:

NANCY I. FAUX, M.B., B.S. (Lond.), D.A.

Radiology:

RODNEY I. GREEN, M.D., D.M.R.D.

Chief Pharmacist:

T. LLOYD JONES, M.P.S.

Dental Surgeon:

CHARLES HUBBARD, L.D.S.

OTHER STAFF:**Matron:**

ELEANOR G. GRIFFITH, S.R.N., R.M.N., R.M.P.A.(D.), S.T.D.

Chief Male Nurse:

S. G. BADLAND, S.R.N., R.M.N., R.N.M.D.

Psychologist:

WILFRED PEACE, B.A.

Senior Psychiatric Social Worker:

KATHLEEN M. JONES, B.A. (Wales).

Teacher Supervisor/Psychiatric Social Worker:

PAULINE M. HAMMOND.

Senior Occupational Therapist:

G. R. WILSON, R.M.P.A., M.A.O.T.

Chaplains:

Rev. H. DAVIES, B.A., Church in Wales.
Rev. J. H. GRIFFITH, M.A., Nonconformist.
Father JOSEPH WEDLAKE, Roman Catholic.

(Pool Park):

Rev. HENRY W. JONES, Church in Wales.
Rev. IVOR PLATT, Nonconformist.

OAKWOOD PARK HOSPITAL:

Secretary-Superintendent:

S. NEWBOULD, A.H.A., D.P.A.

Medical Officer:

H. R. G. DAVIES, M.B., Ch.B., D.P.H.

BROUGHTON HOSPITAL.

Matron-Superintendent:

J. E. LEWIS, R.M.P.A., R.M.N.

Medical Officer:

G. C. BOUGH, M.R.C.S., L.R.C.P.

COED DU HALL.**Matron-Superintendent:**

(Mrs.) IRENE TAYLOR, R.M.N.

Medical Officer:

K. A. BUTLER, M.B., B.S.

LLWYN VIEW, DOLGELLAU, AND GARTH ANGHARAD, DOLGELLAU.**Chief Male Nurse-Superintendent, Garth Angharad:**

T. A. JONES, S.R.N., R.M.P.A.

Matron-Superintendent, Llwyn View:

SYDNEY WILLIAMS, S.R.N., R.M.P.A., C.M.B.

Medical Officer:

H. D. OWEN, M.B., Ch.B.

CHILD GUIDANCE CLINICS.

Central Offices: Bod Difyr, Cefn Road, Old Colwyn.

Consultant Psychiatrist:

E. SIMMONS, M.D. (Bonn), L.R.C.P. & S. (Edin.), (Medical Director).

Senior Registrar in Psychiatry:

J. ALED WILLIAMS, M.B., Ch.B., D.C.H.

Senior Psychologist:

L. SCOBIE, M.A., B.Ed.

Psychologist:

P. J. MACDONALD, B.A.

Social Workers:

F. K. BALFOUR. V. FORD THOMPSON. S. MUNDLE, M.A.

Research Staff:

GWYNETH ROBERTS, LL.B., Dip. Soc. Science (Research Fellow).

Twelfth Annual Report of the North Wales Mental Hospital Management Committee for the Year 1960-61

The Committee have pleasure in presenting their Annual Report for the year 1960-61.

The hospitals entrusted to the Committee's care, providing mental health services, primarily for the North Wales Counties, are as follows:—

North Wales Hospital for Nervous and Mental Disorders, Denbigh	1,400 beds
Pool Park, Ruthin	105 beds
Oakwood Park, Conway	205 beds
Coed Du Hall, Rhydymwyn	80 beds
Garth Angharad, Dolgellau	74 beds
Broughton, Near Chester	70 beds
Llwyn View, Dolgellau	68 beds

Out-patient clinics are situated at Bangor, Wrexham, Rhyl and Dolgellau, and at Denbigh by appointment. The Committee are responsible also for the Child Guidance Services with headquarters at Old Colwyn and clinics at Bangor, Blaenau Ffestiniog, Dolgellau, Holyhead, Old Colwyn, Rhyl, Shotton and Wrexham.

MANAGEMENT COMMITTEE.

Four new members have been appointed to fill vacancies and they have shown a keen interest in the work and proved most helpful. They are:—

Mrs. E. Wyn Jones, J.P., Llanfair T.H., Abergele.
Councillor J. M. Watkins, Portmadoc.
Councillor W. R. Webb, Corwen.
Councillor the Rev. D. J. M. Williams, Anglesey.

Dr. D. E. Parry-Pritchard, of Caernarvonshire, and Dr. M. T. Islwyn Jones, of Denbighshire, have continued to represent the County Medical Officers of Health as observers and advisers at the Management Committee's monthly meetings and their help and guidance have been of still greater value in the discussions on matters arising from the Mental Health Act, 1959.

Regular monthly meetings of the Hospital Management Committee have been held throughout the year at Denbigh, the June meeting being held at Oakwood Park Hospital in accordance with the Committee's decision to hold one of their meetings at a hospital for the sub-normal.

House Committees have met regularly at the various hospitals and have devoted much time to securing good conditions for both patients and staff. Members have succeeded in fostering local interest in the affairs of the

hospitals, and the Committee feel that it is largely through their good offices that so many concerts, outings and visits are organised for the patients by local organisations and inhabitants.

MENTAL HEALTH ACT, 1959.

On 1st November, 1960, the Mental Health Act, 1959, came fully into force and on that day the remaining provisions of the Lunacy and Mental Treatment Acts and Mental Deficiency Acts were repealed. The Board of Control was dissolved and the Mental Deficiency Rules and Regulations, 1948, and all other regulations made under the repealed Acts lapsed.

Under the new Act hospitals for the reception and treatment of the mentally ill will no longer be "designated" and patients may now be admitted to any hospital. As far as possible there is to be no more formality about going into a psychiatric hospital than to a general hospital. "Certification" is modified and will be invoked only when absolutely necessary. The distinct division between hospitals for the mentally ill and hospitals for the sub-normal is to be relaxed and patients will in future be classified according to their clinical needs.

The Act suggests that many patients in psychiatric hospitals could be treated in the general community; in hostels; in psychiatric beds attached to general hospitals and in other ways and, in the course of time, implementation of these provisions will result in the disappearance of the very large psychiatric hospital as it is known today.

The new Act is considered to be the most important measure ever in the field of mental health, although its complete fulfilment cannot be realised for many years since an extensive and costly building programme and a major reorganisation are involved.

MINISTER'S VISIT.

The Minister of Health, the Rt. Hon. Enoch Powell, made a tour of hospitals in Wales immediately after his appointment, and the Committee are pleased to record that he spent a whole day inspecting the North Wales Hospital, Denbigh, and Oakwood Park Hospital, Conway.

PATIENT STATISTICS.

Full details of patient population are given elsewhere in this report. Numbers on the books at the North Wales Hospital at the beginning and end of the year 1960 are as follows:—

	Male	Female	Total
At 31st December, 1959	689	729	1418
At 31st December, 1960	685	739	1424

At the hospitals for the sub-normal the numbers on the books are as follows:—

	Oakwood Park	Garth Angharad	Coed Du	Brough- ton	Llwyn View	Total
At 31st December, 1959...	197	73	80	68	68	486
At 31st December, 1960...	202	72	66	67	66	473

FINANCES.

A summary of group expenditure during the year 1960-61 is given elsewhere in this report.

The Committee's total estimates of expenditure were £743,962, this figure being £53,000 more than that for the previous year, the increase being approximately accounted for by the following items:—

Salary awards	£22,200
Additional nursing staff	10,800
Modernisation programme	9,000
New drugs	5,000
Maintenance costs of "Gwynfa," Upper Colwyn Bay	3,000
Coal price increases	1,500
Patients' allowances	1,500

The cost of maintaining patients at the various hospitals is as follows:—

	£	s.	d.	
Denbigh	7	11	5	per week
Coed Du	6	14	4	per week
Oakwood Park	6	12	0	per week
Broughton	6	2	2	per week
Llwyn View	5	19	11	per week
Garth Angharad	5	1	2	per week

Having regard to the services provided the Committee feel that the costs are satisfactory and compare favourably with the Welsh Regional average of £7/11/10 and £6/10/10 for psychiatric and sub-normal hospitals respectively.

On the Hospital Endowments Fund the Committee have received £3,063, and have expended on amenities for patients and staff £3,008.

CHARITIES.

The new sports pavilion has been completed and formally handed over to the Hospital Management Committee by the Trustees under the subsisting 21 years' lease and the increased rent has been received from 1st June, 1960.

The remaining portion of the field is being laid out with the use of patient labour and the Trustees have authorised expenditure of £100 on drainage. The conversion of this agricultural land for sports purposes has proved of great benefit to the hospital and has provided a considerable increase in revenue.

Useful and helpful grants have been made to indigent persons, but disbursements continue to be appreciably lower than income.

SUPPLIES.

Joint contracts with the three other North Wales Hospital Management Committees have continued for selected commodities and the Committee are satisfied savings are effected in this way.

Modernisation of the hospital has proceeded and the refurnishing programme has included 50 staff rooms at the North Wales Hospital Nurses' Home and a number of wards and departments.

Additional electrically-heated food trolleys have been provided at Denbigh and dish-washing machines at all hospitals.

At Oakwood Park Hospital an upholstery and furniture repair department has been set up for occupational therapy purposes and much useful work has been done for the other hospitals throughout the Group.

PATIENTS' HOLIDAYS.

Patients' holidays, very successful last year, have been organised on an even larger scale and as many patients as possible have been provided with a holiday at the seaside. These arrangements are most popular amongst those patients who would never otherwise be able to leave the precincts of the hospital throughout their whole lives.

Parties have gone to Rhyl by arrangement with boarding house keepers during the early and late summer, and again the Cheshire County Council Children's Holiday Camp at Pensarn has been hired for three weeks.

WORKS.

Much work has been done in the modernisation of buildings to provide a higher standard of comfort and, as in the last few years, money has been specially allocated for this purpose.

Capital schemes for which the Regional Hospital Board have been directly responsible included the provision of much needed sanitary annexes to a number of wards and a new occupational therapy pavilion.

OAKWOOD PARK HOSPITAL.

The large-scale building scheme planned for this hospital has not yet started, but the planning stage is nearing completion and financial provision, amounting to £1,041,600, has been made covering the period 1st April, 1961, to 31st March, 1964.

However, a small contribution towards reducing the heavy waiting list of patients was made by internal reorganisation which increased the number of beds at present available from 187 to 205.

The Minister of Health, during his visit, showed great interest in all aspects of caring for the mentally sub-normal and inspected many sections and departments of the hospital.

Following his appointment as Medical Superintendent at Llanfrechfa Grange, Cwmbran, Dr. T. S. Davies paid his last visit as Visiting Consultant Psychiatrist to the hospitals for the mentally sub-normal administered by the North Wales Mental Hospital Management Committee. The Committee wish him every success in his new appointment and acknowledge with gratitude his valuable help and advice which have materially helped towards the smooth running of these smaller, and in some cases isolated, hospitals with their own special type of problems.

CHILD GUIDANCE SERVICE.

The Child Guidance Service, under the direction of Dr. E. Simmons, the Consultant Child Psychiatrist, continues its work in the five Counties and a detailed report is to be found elsewhere in this publication.

Demands for the services available have continued to come through doctors in the National Health and the Local Authority Services, teachers and administrators in the Educational Services, and the various workers in the social and community services of the area. The Principal School Medical Officers, as for many years past, have continued to show a keen interest in the work of the clinics and supported the staffs' efforts to put available resources to maximum use.

Unfortunately, considerable difficulties had to be coped with as a consequence of staff losses and delay in securing the services of qualified and experienced people, and some reduction in the work was unavoidable.

The "White House" in Upper Colwyn Bay (to be renamed "Gwynfa") was acquired, and is to open as a residential centre for the investigation and treatment of emotionally disturbed children during the coming year. The centre is to become an integral part of the Child Guidance organisation and its facilities should add greatly to the resources of the service. It is also intended to provide a two-year training course for workers with maladjusted children (Child Care Workers) jointly with University College, Bangor.

The research project, which aimed at the development of a fully standardised intelligence test for Welsh-speaking children, started on 1st September, 1957, reached its main objective at the end of the originally allotted period of three years. An extension by one year, with the possibility of an extension by a further year, was secured to enable the researchers to

extend the scale to cover all children of school age. The main work, when completed, and a number of by-products, should be of great value at the clinics and of no less interest to the Education Authorities of the area.

STAFF.

Mr. D. Basil Evans, the Finance Officer, retired after 27 years at the hospital and the Committee have thanked him for his services and wished him health and happiness in a well-earned retirement.

Mr. Evans has been succeeded by Mr. C. Deakin, Deputy Finance Officer with the South Manchester Hospital Management Committee, and the Committee wish him success and happiness in his new post.

Mr. C. H. Roberts, Senior Administrative Assistant in the Finance Department, has been promoted to the status of Deputy Finance Officer.

During the year the following long service employees have retired on Superannuation:—

Goronwy Owen	... ..	Higher Clerical Officer...	... ..	35 years
D. W. Roberts	... ..	Nursing Assistant	... ..	32 years
F. M. Wilbraham	... ..	Sempstress—Broughton	... ..	24 years
H. J. Williams	... ..	Nursing Assistant	... ..	20 years

Mr. Goronwy Owen had worked extremely hard and given yeoman service, particularly during the war years with depleted staffs, and the Committee were extremely sorry to find that he had been obliged to retire before completion of his full term owing to ill-health.

GENERAL.

The Management Committee wish to express their thanks to members of the House Committees and to the staffs throughout the whole Group who have worked so hard to promote the happiness and welfare of the patients.

DAVID TUDOR,

May, 1961.

Chairman.

NORTH WALES HOSPITAL, DENBIGH.**Medical Superintendent's Annual Report, 1960**

Mr. Chairman, Ladies and Gentlemen,

I have the honour to submit the Medical Superintendent's Report for the North Wales Hospital, Denbigh.

1960 will be memorable as being the year during which the main provisions of the new Mental Health Act became effective.

Whereas patients have been admitted on an informal basis throughout the year, the first of November was the appointed day for the introduction of the new procedures for compulsory detention. One of the most important new features is the elimination of the judicial order signed by a magistrate as required under the old Act. A compulsorily detained patient is now admitted on the application of the nearest relative or a Mental Welfare Officer of a local authority, supported by two medical recommendations. The first medical recommendation is signed by a doctor with previous knowledge of the patient—usually the family doctor; the second recommendation is signed by a doctor recognised as a specialist in Psychiatry. In emergencies, the second signature may be dispensed with, but, in such cases, it must be forthcoming within three days. In the majority of cases, the second recommendation is made by a psychiatrist on the staff of this hospital.

So far, the new arrangements have worked smoothly. As yet, we have had no experience of the Mental Health Review Tribunal to which patients compulsorily detained, or their relatives, may appeal.

It is my usual practice to comment in my Annual Report on the main trends shown by the hospital statistics which follow. This year, their interpretation is complicated by the fact that in many instances the 1960 figures are not strictly comparable with those of previous years due to changes of admission procedure which occurred on November 1st, consequent on the new Mental Health Act. Also, in August, Glan-y-Don Hospital, Colwyn Bay, closed down, necessitating our taking back ten patients previously housed here.

Looking at Graph I., it will be noted that there has been an increase of 6 in the total number of patients on the books of the hospital. A partial explanation of the interruption in the downward trend of the Curve A in Graph I. may be found in the fact that, in the figures for previous years, 13 patients, although resident under Section 20 of the old Act, were not included in our total, as neither were the 10 patients since returned from Glan-y-Don. This year's total includes both these categories.

When we come to examine Graph II., it will be seen that, while the admission curve continues its upward trend, the discharge curve fails to follow it for the first time for years. No sure explanation for this change is forthcoming and one hopes that it is fortuitous. However, one explanation could be that our admissions last year included a higher proportion than usual of cases unlikely to recover. A pointer in this direction was the increase in the number of deaths, and especially the fact that, of 44 additional deaths, 33 were accountable as occurring during the year of admission.

With regard to the admission of patients over the age of 65, whilst the figure for women fell slightly, this was offset by a considerable rise in that for men.

During 1960, Dr. Penrhyn Jones, recently appointed Geriatric Physician to the Caernarvonshire and Anglesey area, made considerable progress in reorganising the geriatric service in that area. It is yet too soon to assess the effect of his work on the number of elderly folk we are required to treat at the hospital, but it is anticipated that ultimately it will be reduced. In the meantime, it has been a very great pleasure for us to co-operate with Dr. Penrhyn Jones, and we are very pleased to gather that similar appointments to his are imminent in the other two General Hospital Management Committee areas covered by the North Wales Hospital, Denbigh.

Graph I.—Total Population of the Hospital.

In assessing the following graphs, regard must be had to the fact that population of the catchment area increased by 10 per cent. during the intercensal period 1931-51, and it is probably still going up. On the other hand, a proportion of our sub-normal patients have been transferred to more appropriate accommodation recently made available by the Board at Oakwood Park and elsewhere. These numbered 1 in 1959 and 3 in 1960.

Curve A shows that the total population of the hospital rose during 1960 by 6.

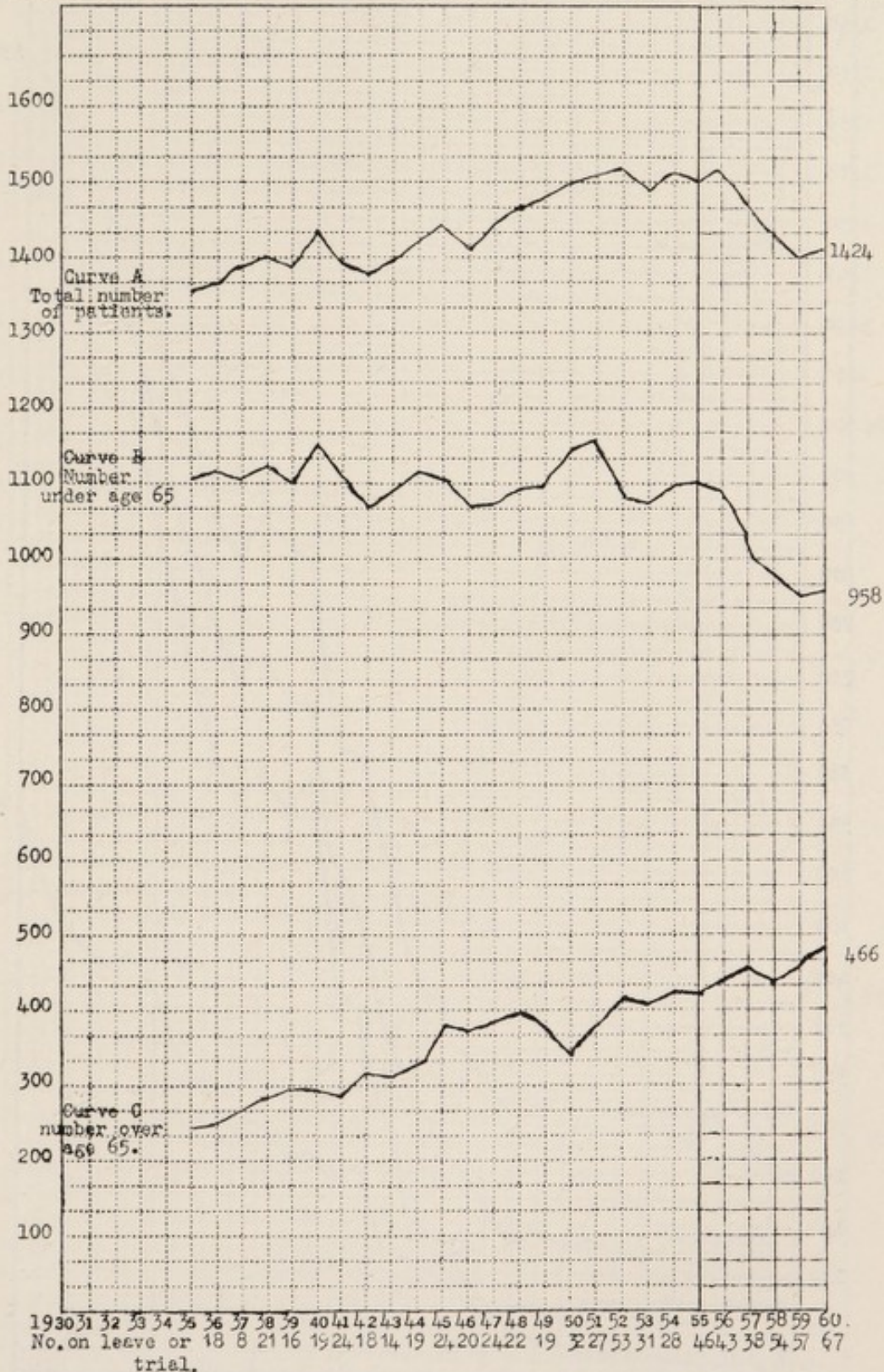
Curve B shows that the number of patients under 65 rose by 1.

Curve C shows that the number of patients resident over the age of 65 increased by 5.

GRAPH 1.

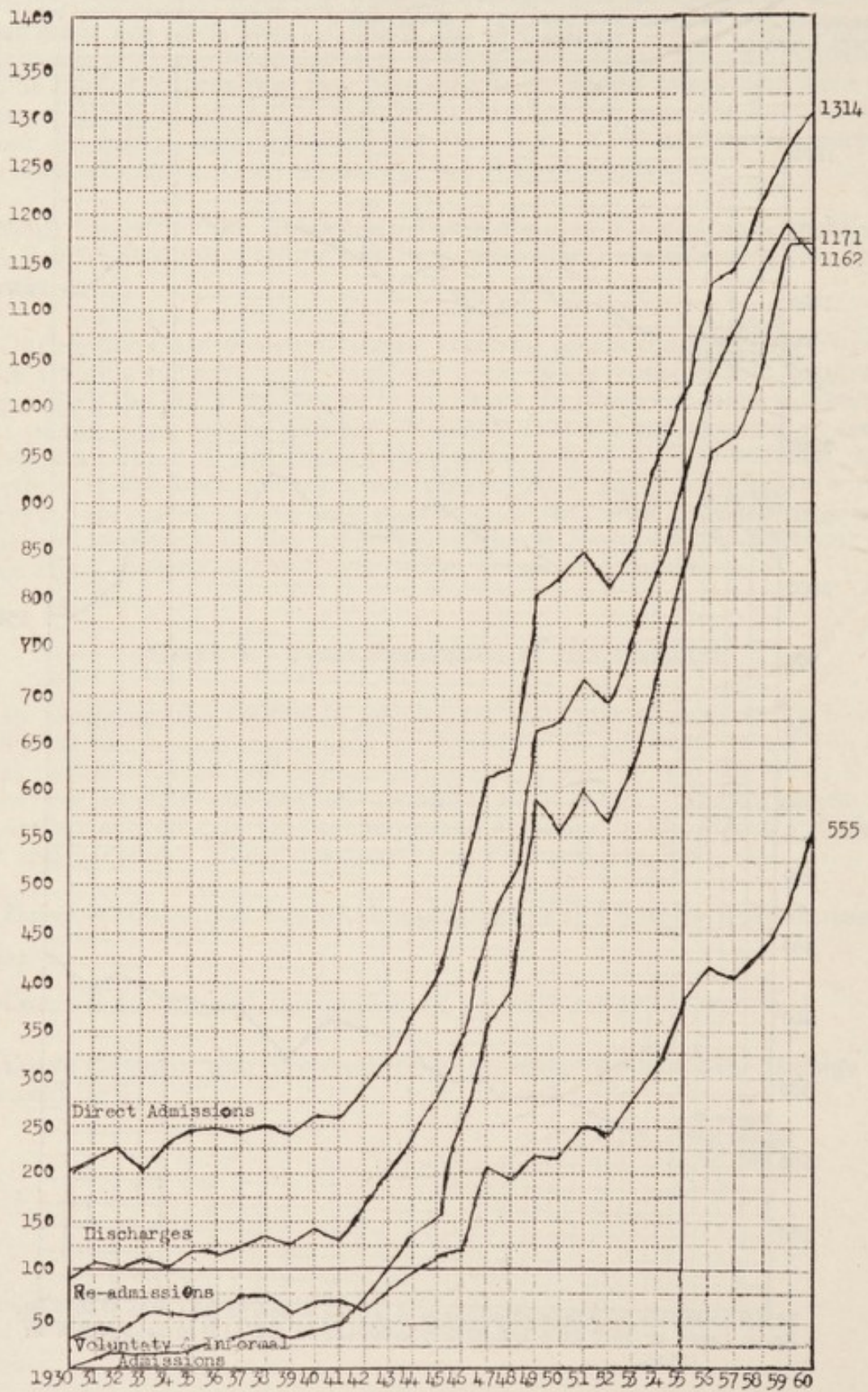
HOSPITAL POPULATION.

The figures on which this Graph is based refer to the number of patients on our books on 31st December each year but a small number of these patients were out on short leave or trial. The number of such patients is given at the foot of the Graph.



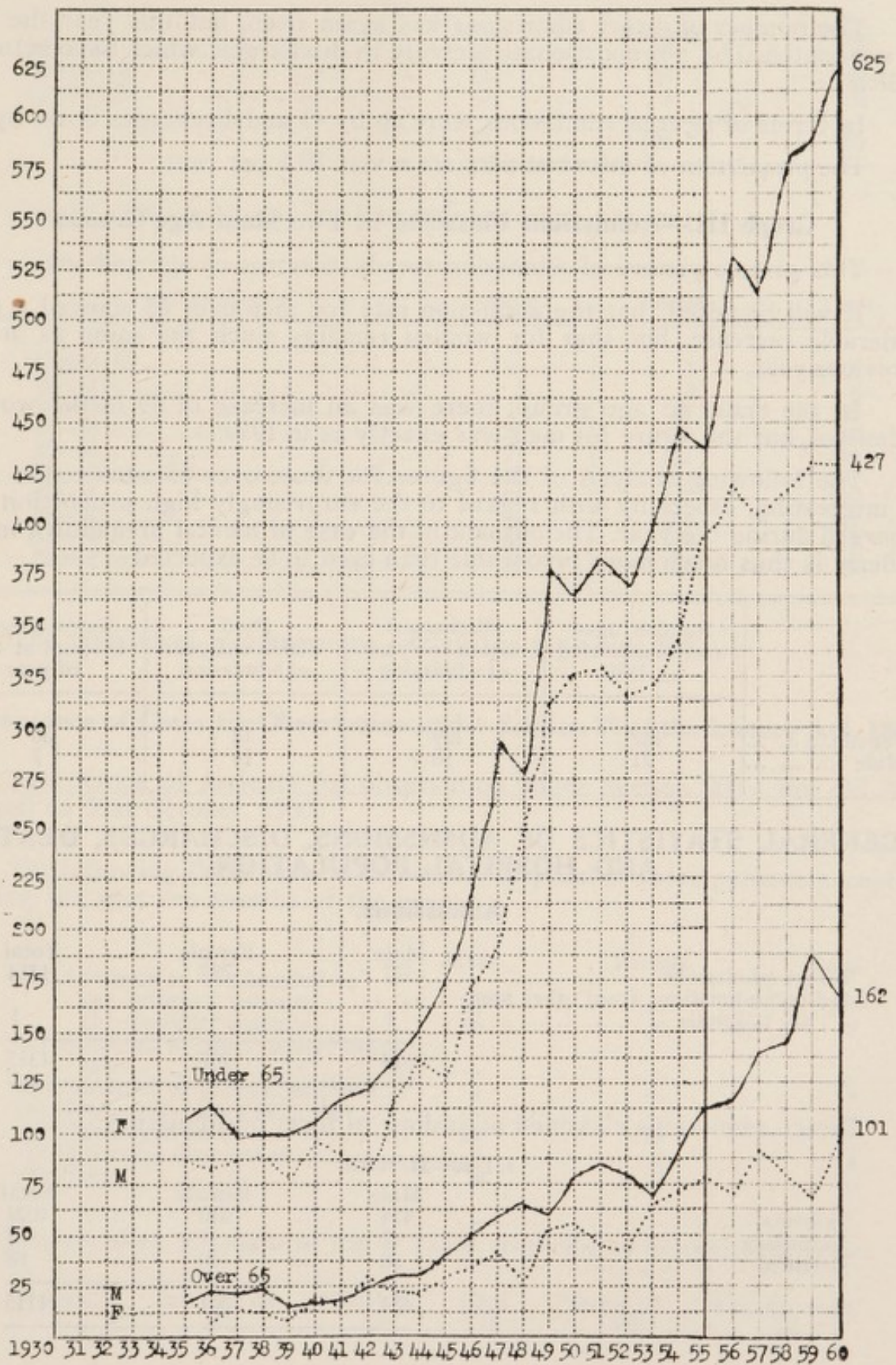
GRAPH 11.

ADMISSIONS AND DISCHARGES.



GRAPH 111.

Direct admissions according to sex and age group over or under 65 years.



Graph II.—Admissions and Discharges.

The number of direct admissions has again risen, but this year the rise is not matched by a proportionate increase in discharges, which have actually fallen.

In terms of figures, admissions were up by 41 and discharges down by 30. The proportion of informal admission was 89.1 per cent.

Graph III.—Admissions Classified in Two Main Age Groups.

This gives a picture of admission trends in terms of age and sex.

It will be noted that the admission rate for men over 65 showed a considerable increase, but that for women remains much the same as in the previous year.

In the under 65 age group, there was an increase of 39 in the women admitted, but the figure for men was exactly as in 1959.

The following analysis of the figures for those over 65 admitted in 1959 is interesting, especially with regard to the surprisingly high proportion discharged during the year. The outlook in the case of mental breakdown in the elderly is thus much more favourable than used to be expected.

	Number aged over 65 admitted in 1959	Discharged within one year of admission	Died within one year of admission	Remaining in hospital at end of year
Female... ..	187	139	18	30
Male	71	50	14	7

GENERAL STATISTICS OF ADMISSIONS, DISCHARGES, DEATHS AND HOSPITAL POPULATION.

Admissions.

	Male	Female	Total
Direct admissions	527	787	1314
Indirect admissions from other mental hospitals	1	—	1
	528	787	1315

Direct admissions classified according to form of admission:—

1/1/60—31/10/60.

	Male	Female	Total
Informal	414	610	1024
Voluntary	2	1	3
Certified	38	50	88
	454	661	1115

1/11/60—31/12/60.

	Male		Female		Total
Informal	55	...	89	...	144
Section 29	15	...	34	...	49
Section 25	3	...	3	...	6
	73	...	126	...	199

Direct admissions classified according to age groups:—

Age Group	Male	Female	Total
Under 10	—	1	1
10—15	5	3	8
16—19	14	21	35
20—24	34	26	60
25—34	74	102	176
35—44	105	132	237
45—54	95	177	272
55—64	97	164	261
65—74	65	110	175
75 and over	35	54	89

The number of re-admissions during the year was 555.

Acceptance of Cases for Observation under Section 20 of the Lunacy Act, 1890.

Acceptance of patients for observation under Section 20 of the old Act ceased on 31st October, 1960.

The following Table shows the mode of disposal of those patients accepted during the first ten months of the year:—

	Male		Female		Total
(1) Admitted to this hospital as					
(a) Informal patients	92	...	155	...	247
(b) Certified patients	16	...	31	...	47
(2) Admitted to other mental hospitals	—	...	—	...	—
(3) Admitted to general hospitals ...	1	...	—	...	1
(4) Dealt with under M.D. Act... ..	—	...	—	...	—
(5) Discharged home... ..	22	...	19	...	41
(6) Otherwise disposed of	3	...	1	...	4
(7) Died	4	...	2	...	6

The counties of origin of the 47 cases requiring to be certified were:—

Anglesey	Caernarvon.	Denbigh.	Flint.	Merioneth.	Out-Counties
5	11	13	18	Nil	Nil

Discharges.

	Male		Female		Total
Recovered	217	...	359	...	576
Relieved	215	...	323	...	538
Not improved	32	...	16	...	48
	464	...	698	...	1162

Transfers to other mental hospitals: Nil.
Discharge rate on direct admissions: 88.5%.

Deaths.

	Male		Female		Total
Under 65	22	...	21	...	43
65 and over	46	...	58	...	104
	68	...	79	...	147

The death rate was 10.5 per cent. of the average number resident.

Post-mortem examinations were conducted in 39.4 per cent. of the cases.

H.M. Coroner for West Denbighshire held inquests into the cause of 12 deaths. In no instance was any criticism made by H.M. Coroner touching our care of the cases enquired into.

Hospital Population.

	Male		Female		Total
Number of patients on hospital registers on 31st December, 1959...	689	...	723	...	1418
Number remaining on 31st December, 1960:—					
Informal	643	...	576	...	1219
Certified	35	...	143	...	178
Section 29	2	...	4	...	6
Section 25	5	...	12	...	17
Section 26	—	...	4	...	4
	685	...	739	...	1424

Forty patients are classified as Ministry of Pensions "Service" cases.

ACCOMMODATION OF THE HOSPITAL.

	Male	Sleeping	Female
Statutory Accommodation	591	...	579
Number of patients on register on night of 31/12/60 ...	685	...	739
Deficiency of Accommodation	94	...	160
Percentage Overcrowding	16%	...	27%

Note: The statutory accommodation is the accommodation of the hospital calculated in accordance with rules laid down by the Ministry of Health.

THE GENERAL HEALTH OF THE HOSPITAL.

The health of the patients generally has been satisfactory.

Pulmonary Tuberculosis: There are at present in the hospital 4 male and 1 female active cases. During the year, one patient died from the disease.

B.C.G. Vaccination: All nurses are Mantoux-tested on joining and, as a result, 4 required B.C.G. vaccination during 1960.

NURSING STAFF.

Matron and Chief Male Nurse report as follows:—

“ The hospital has continued its policy of providing the highest possible standard of nursing service for the patients. Recruitment to the nursing personnel has remained fairly satisfactory, although some increase in the intake of female nurses would do much to ease the shortage of staff on the female wards. The number of student nurses failing to complete their training has diminished. This fall in wastage is a pleasing and encouraging feature and is represented in the following Table:—

1956	...	...	...	...	...	...	...	55%	1959	...	...	...	...	...	...	...	...	30%
1957	...	...	...	...	...	...	...	66%	1960	...	...	...	...	...	...	...	...	25%
1958	...	...	...	...	...	...	...	30%										

“ Examination results have again been very satisfactory; 100 per cent. successes have been achieved in the Final examinations and 95 per cent. successes in the Preliminary and Intermediate examination. This has been the first complete year of nurse-training under the Nursing Council's Revised Syllabus for Psychiatric Nurse-training. It is felt that the introduction of this syllabus makes the training of the student more realistic and ensures a more complete training in preparation for posts of responsibility in the nursing field. In accordance with the General Nursing Council's recommendation an Education Committee has been formed to ensure constant consultation and co-operation between all who participate in the professional education of the nurse.

The importance of nurse training was, this year, underlined by the visit of the Nursing Council's Inspector of Training Schools, who undertook a thorough inspection of the school, wards and departments. Subsequently, the hospital received the Council's recommendation that it continue to be recognised as a complete training school for Psychiatric nurses.

Application has been made to the General Nursing Council seeking its approval to introduce here a shortened course of training which will enable nurses, already on the General part of the Nursing Register, to qualify as Psychiatric nurses in a reduced period of eighteen months.

The Nurses' Annual Prizegiving, held in October, was once again a most successful event. The Guest Speaker on this occasion was Professor Edwin Owen, whose wife, Mrs. Owen, presented the prizes.

The following Table illustrates the trend over recent years:—

Table I.

	31/12/55		31/12/57		31/12/58		31/12/59		31/12/60	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Qualified Mental Nurses... ..	70	19	65	19	58	23	62	26	65	26
Qualified, also S.R.N.	6	4	10	4	11	3	10	5	11	4
Student Nurses	11	13	24	17	26	24	37	19	41	22
Nursing Assistants... ..	37	40	34	33	33	40	36	46	35	42
Part-time Nurses (in terms of whole-time):										
Qualified	—	45	—	7	1	6	2	4	2	7
Assistant... ..	—	—	—	57	—	48	—	48	—	48
	124	121	133	137	129	144	147	148	154	149
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Nursing Cadets	—	—	2	2	6	3	6	4	4	7
Ward Orderlies	8	17	11	14	12	10	14	15	11	10

Table II.—Strength of Trained Female Staff.

	Whole-time	Part-time
December, 1944	33	—
" 1946	23	—
" 1948	24	—
" 1950	16	3
" 1952	16	6
" 1954	21	8
" 1956	24	9
" 1958	23	10
" 1959	31	7
" 1960	30	7

Table III.—Annual Intake of Student Nurses.

	Male	Female
1946	6	25
1947	5	40
1948	5	32
1949	5	32
1950	2	14
1951	2	17
1952	5	16
1953	10	17
1954	8	6
1955	6	6
1956	8	14
1957	15	6
1958	15	18
1959	20	9
1960	14	9

TREATMENT OF MENTAL ILLNESS.

The treatment of mental illness divides itself into the following categories:—

- 1—Measures directed to improving the patient's general health.
- 2—Measures directed to re-educating the patient. These include advice, psychotherapy and, upon discharge, follow-up care.
- 3—Occupational and recreational therapy and social rehabilitation. In all mental illnesses there is a tendency for the patient to withdraw into himself, and it is necessary to counteract this by every means in our power. It is not sufficient that the patient be given the right medical treatment. His faculties, as they recover, must be given carefully graded exercise and he must be encouraged to take part again in the daily round of social activities which make up life. This means that his day must be filled with work and recreation appropriate to his mental state, a task which calls for considerable resources.

In 1959, a new occupational and recreational centre was opened at Gwynfryn. Here, during the day, patients of both sexes occupy themselves, while, in the evening, various social functions take place. A Patients' Committee is encouraged to take as much responsibility as possible in organising all affairs of interest and importance to them.

At present, a further occupational and recreational centre is being built. This should be ready by the early summer of 1961. It is intended for acute patients under treatment in the main building and is to be run on similar lines to the centre at Gwynfryn. Pending its opening, mixed social functions are held at Brynhyfryd Villa.

So much for the acute and recent patients, but equally important are our efforts towards the socialization of our long-stay patients. Last year, I reported that we were using Bryn Golau, a villa for fifty patients, as a special unit for the rehabilitation of deteriorated male patients. The results have been most gratifying as evidenced by the fact that, in 1960, we were able to send the whole unit on a fortnight's exchange holiday to the Central Hospital, Warwick. This would have been impossible the previous year as most of the patients were then incontinent. It is a measure of the nursing success that only two patients broke down and were incontinent whilst away.

4—Special methods of treatment, of which the following are the most important in use at this hospital:—

- (i) **Electro Convulsive Therapy:** This is applied by passing an electric current through the brain.

- (ii) **Prefrontal Leucotomy:** This is a surgical procedure whereby nerve fibres passing from the frontal lobes to other parts of the brain are divided.
- (iii) **Tranquilliser Therapy:** The so-called tranquilliser drugs have received considerable publicity. Although unpredictable in their likely results in individual cases, they greatly benefit many patients and sometimes produce dramatic results. They are especially valuable in schizophrenic and disturbed senile states. While we have tried out most of the tranquillising drugs available, so far chlorpromazine and trifluoperazine have proved the most useful for our particular patients.
- (iv) **Anti-depressant Drugs:** During the last two years, a new class of drugs influencing depressive states has come into use. They include imipramine and the mono-amine oxidase inhibitors. While it is too soon to make any true assessment of their usefulness, results so far are encouraging.

The following Table shows the number treated by various physical methods during 1960:—

Treatment	Male	Female	Total
Electro Convulsive Therapy	—	2	2
Modified E.C.T.	205	172	377
Deep Insulin	—	—	—
Modified Insulin	2	—	2
Abreaction Techniques	—	—	—
Leucotomy	1	4	5
Narco-Analysis	1	1	2

Leucotomy Cases.

The following is the analysis of the results in all cases operated upon between April, 1942, and December, 1960:—

	Male	Female	Total
Total number of cases	158	137	295*
Discharged "Recovered" or "Relieved"	103	91	194
Improved in hospital	46	37	83
Unchanged	32	22	54
Died as a result of operation	5	7	12
Discharged, but since relapsed	31	21	52

*Includes 8 cases who have been operated on more than once.

Commentary: As leucotomy is only performed on cases which have not responded to other forms of treatment, and in which the outlook without operation is regarded as hopeless, the result shown in the above tables is regarded as satisfactory.

Surgical Operations.

The operation of leucotomy is performed by Mr. A. Sutcliffe Kerr in the hospital operating theatre, and 5 operations were carried out in 1960.

Most major general surgical operations are now performed at neighbouring general hospitals, straightforward cases returning to this hospital on the same day.

Consultants' Visits in Specialities other than Psychiatry.

Speciality	Consultant	Frequency of attendance	Number of patients seen
General Medicine	Dr. G. H. T. Lloyd	Weekly	191
Tuberculosis	Dr. J. F. Durrans	As required	161
General Surgery... ..	Mr. D. I. Currie	As required	115
Ophthalmology	Mrs. E. M. Brock	Monthly	120
Ear, Nose and Throat Surgery	Mr. R. D. Aiyar	Monthly	27
Neurosurgery	Mr. A. Sutcliffe Kerr ...	As required	17

Dental Department.

Mr. Charles Hubbard, the visiting dental surgeon, gives two sessions each week. All patients requiring treatment are seen as soon as possible after admission and their teeth put in order.

During 1960, 1,262 patients were examined. Extractions were carried out in 374 cases; 87 patients had teeth filled; 62 were provided with dentures; and 46 had their dentures repaired.

SPECIAL METHODS OF INVESTIGATION.

Pathological Laboratory.

Since the retirement of Dr. A. Ceinwen Evans as Consultant Pathologist in October, 1958, the pathology work required by the hospital has been carried out at Clwyd and Deeside H.M.C.'s laboratories at the Royal Alexandra Hospital, Rhyl, and H.M. Stanley Hospital, St. Asaph, except for post-mortems, which continue to be conducted here. The arrangement works well and I am grateful to Dr. T. Alban Lloyd and Dr. G. Hefin Roberts for their helpfulness.

X-ray Department.

During 1960, the following examinations were made;—

	Patients		Staff		Total
	Male	Female	Male	Female	
Chest	506	254	107	70	937
Skeletal	236	316	27	14	593
Total	742	570	134	84	1530

All Radiographs are seen and reported on by Dr. Rodney I. Green, Consultant Radiologist to the hospital.

Department of Psychology.

Mr. W. M. Peace reports as follows: "The main function of the psychologist is to give assessments of intelligence, personality and psychiatric disturbance with the aid of standard tests. All patients referred in the past year have been tested individually and this work falls under four headings. The figures in brackets refer to 1959:—

"In-patients: A total of 250 (137) in-patients were seen, and of these 159 (96) were referred for intelligence assessment alone, and 91 (41) for personality and/or diagnostic testing in addition.

"A full-scale intelligence test or slight abbreviation of this is used with practically all male patients soon after admission. The results of these tests may prove useful for re-test or diagnostic purposes.

"Out-patients: Fourteen patients (8) have been referred, 7 for intelligence testing and 7 for further diagnostic tests.

"Sub-normal cases: Sixty-eight (31) patients have been seen, in most cases for assessment of intelligence only. The majority of these cases were at Oakwood Park, the remainder being new admissions to the other hospitals in the area. Fifteen of the school children at Oakwood Park were tested, and it is hoped that the reports here will be of use in classification for training and for estimating progress in the future.

"Nursing Staff: Four (17) candidates for student nursing have been given intelligence tests individually."

Department of Electro-Encephalography.

The electro-encephalograph is an instrument for recording the electrical waves generated in the brain and is of assistance in the diagnosis of epilepsy, certain cases of tumour and other disorders of the brain. In 1956, a new 8-channel electro-encephalograph by Ediswan was installed in place of the old instrument, which had become obsolete and, in 1958, a wave analyser, also by Ediswan, was added to the Department's equipment.

The Department deals with not only our own cases but also with the cases referred by Physicians and Paediatricians in the general hospitals of the area.

I would once again express my appreciation of the kindness of Dr. Robert R. Hughes, of Liverpool, who visits us periodically to report on the more obscure records and to advise us generally on the work of the Department, and I am grateful also to the Liverpool Regional Hospital Board who have placed at our disposal the services of their Chief E.E.G. Technician, Mr. Banks, who visits us every fortnight.

During 1960, the Department dealt with the following cases:—

	First Attendance	Repeat	Total
In-patients at North Wales Hospital	287	145	432
From Psychiatric O.P. Clinic	78	35	113
From N.W. Child Guidance Clinics	—	—	—
From Paediatric Consultants	64	53	117
From Consultant Physicians	324	72	396
Total	753	305	1058

SOCIAL LIFE OF THE PATIENTS.

Religious Services.

Services at the hospital Chapel are conducted alternately in Welsh and English by the Church of England and Nonconformist Chaplains. They are held at 8.45 a.m. and 2.45 p.m. on Sundays, and at 9 a.m. on Wednesdays and Fridays. A Prayer Meeting is also held on Sunday evenings in which patients take part.

The Roman Catholic Chaplain holds a service every Thursday evening and attends whenever needed to minister to the seriously ill.

Employment of Patients.

Occupational therapy is carried out at six centres, of which three are for acute cases, one being located at Gwynfryn and two attached to the reception wards in the main hospital. The remaining three centres are for long-stay cases, one on each side of the hospital and one at Pool Park. That on the male side contains a printing department and a workshop equipped with metal and wood turning lathes and other modern machinery. Work done has included the following commercial propositions:—

Assembly of Bedside Lockers from prefabricated parts.
 Making of Potscourers in steel and copper.
 Repair of Chairs and Tables (for two firms).
 Dismantling Electric Meters.

Patients not employed in the Occupational Therapy Department are encouraged to take part in the ordinary necessary work of the hospital. This not only helps their mental condition, but gives them the sense of being useful members of the community.

Work in the grounds of the hospital is ideally suited to the patients and offers a variety of tasks. Work is now proceeding on the levelling of a new football pitch adjoining the cricket ground, which was made two years ago by the patients.

The Canteen.

The Hospital Canteen continues to provide a very satisfactory service, and patients who have not the privilege of town parole are there able to purchase such items as fruit, sweets, tobacco, etc.

Goods are paid for either in the normal currency of the realm or in the forms of tokens of varying value.

Patients who have no income from other sources are allowed up to 10/- per week pocket money, the actual amount varying according to their capacity to appreciate spending it. Patients are also remunerated for useful work in the hospital and in this way may earn up to an additional 10/- per week. Whilst free issues of tobacco and sweets have been reduced to a minimum, they are still available to patients unable to visit the canteen for physical or mental reasons.

Recently, a canteen has been opened at Pool Park, and this is very much appreciated by the patients there.

Patients' Library.

The Hospital library service is operated by the Red Cross Society. Their librarians visit certain wards to take books directly to such patients as are unable to use the central library. The latter is open on two evenings and one afternoon per week for the exchange of books.

Hairdressing Saloon.

There is a ladies' hairdressing saloon which provides permanent waves and sets and is staffed by two hairdressers. So far, we have been unable to provide a hairdressing saloon for the men, but a full-time barber attends to patients in the wards.

Recreation.

All wards are now provided with television and wireless.

Charge Nurse J. R. Roberts has been seconded to take charge of the men's social and recreational activities. Physical training classes have been introduced, and football, cricket and other sports stepped up. Mrs. Gabriel continues as P.T. instructress, and all suitable women patients now attend weekly classes for physical exercises and games.

Every Wednesday, there is a patients' dance in the main hall and every Monday evening a cinema show. During the winter months, whilst drives, social evenings and billiard tournaments are held. Nineteen concerts were presented during the year, including three by the Council for Music in Hospitals.

In the summer patients are taken to the seaside and to such local events as Sheepdog Trials and Flower Shows. I would record my appreciation of the kindness of the Denbigh Football Club in allowing our patients to attend all home matches free of charge.

We are again indebted to the W.V.S. In addition to a weekly social for younger patients in the main hospital, they run a Darby and Joan Club for the more elderly. Both ventures are a great success.

At Pool Park, the Clocaenog, Clawddnewydd and Gyffylliog Women's Institutes hold regular whist drives at the hospital, and also at their respective village halls to which patients are invited. The Ruthin Rotary Club also visit regularly and from time to time put on social evenings. Our indebtedness to these bodies is gratefully acknowledged as Pool Park, being more off the beaten track than Denbigh, its patients have fewer opportunities for making outside contacts.

Holidays.

During the year, 30 men and 60 women each had a week's holiday at Rhyl, staying at a boarding house. Also, 185 male patients spent a week at the Cheshire County Council holiday camp at Pensarn, which had been lent to the Committee for a period. Both these ventures proved a great success and our patients, most of whom had spent many years at Denbigh, greatly enjoyed the change.

For patients who would not normally have been considered fit for the holiday arrangements described above, a very worthwhile innovation was that of exchange visits of a fortnight's duration with two other hospitals. A party of 35 male patients went to De La Pole Hospital, Hull, and 25 to the

Central Hospital, Warwick. Both hospitals gave our patients and accompanying nurses a very warm welcome and entertained them most liberally. We, on our part, endeavoured to repay the hospitality when it came to our turn to be host.

OUT-PATIENT SERVICES.

(1) Out-Patient Clinics.

These clinics, held at general hospitals, provide facilities for the diagnosis and treatment of patients who do not require admission to a mental hospital.

Clinics are held at the following centres:—

Bangor	Caernarvonshire & Anglesey Hospital	Every Tuesday afternoon. Every Wednesday morning and afternoon.
Dolgellau	General Hospital	Fourth Tuesday in each month.
Rhyl	Royal Alexandra Hospital	Every Tuesday morning. Every Thursday afternoon.
Wrexham	Maelor General Hospital	Every Friday morning and afternoon.
Mold	Cottage Hospital	Every Wednesday afternoon.
Denbigh	North Wales Hospital	By appointment.

Table of Attendances 1960.

Clinic	First Attendance			All Other Attendances		
	Male	Female	Total	Male	Female	Total
Bangor	215	254	469	413	515	928
Dolgellau	17	19	36	34	37	71
Rhyl	147	210	357	283	488	771
Wrexham	205	276	481	652	901	1553
Mold	43	67	110	120	158	278
Denbigh	31	23	54	62	63	125
Total	658	849	1507	1564	2162	3726

The following are the figures of total attendances at all adult clinics during the past 16 years:—

1945	461	1953	2815
1946	576	1954	3630
1947	830	1955	3990
1948	1167	1956	4150
1949	1224	1957	4263
1950	1778	1958	4332
1951	2295	1959	4894
1952	2878	1960	5233

(2) Domiciliary Visits.

These are visits made at the request of general practitioners for a consultation in the patient's own home. The usual reason for the request is that the patient is too ill to attend at a clinic. The number of such visits made in 1960 was:—

Male: 106	...	Female: 249	...	Total: 355
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(3) Visits to Patients in Hospitals in other Management Committee Groups.

Specialists on the staff at Denbigh may be required to attend at any hospital in the following Groups:—

Group 12 (Caernarvon and Anglesey).
 Group 13 (Clwyd and Deeside).
 Group 14 (Wrexham).

The number of patients visited during the year in hospitals in these Groups amounted to:—

Male: 39	...	Female: 61	...	Total 100
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(4) Examination of cases referred by the Courts under the provision of the Criminal Justice Act, 1948.

During 1960, these numbered as follows:—

Male: 7	...	Female: 1	...	Total: 8
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(5) Psychiatric Social Work Department.

Mrs. Iolo Jones reports as follows: "The two major functions of this Department have always been the obtaining of the necessary information about the background of the patients' breakdown and the affording of such guidance and assistance as may enable a patient to remain out of hospital. Of recent years, in this hospital, a third function has become increasingly important, the function of teaching and training in the casework field.

"It was noted in the 1959 Report that the new Mental Health Act and the Younghusband Report made plain the urgent need for the recruitment and training of many additional Mental Health case-workers. In 1960, it was possible for this Department to make a practical contribution towards the fulfilling of this need. By arrangement with the County Medical Officers of Health, two in-service training courses were carried through under our Teacher/Supervisor, Miss P. M. Hammond. In addition to these, follow-up seminars are held periodically. One Mental Welfare Officer was seconded

to this department for three months. It is felt that these personal contacts between Local Authority officers and hospital workers are invaluable and form the foundation for a truly integrated mental health service.

"In addition to these courses, our University student intake increased. The senior workers in this department who are concerned with this supervisory and training work much appreciate the ready co-operation given by all hospital personnel, and it should be reported how students of all types appreciate the friendliness with which they are received in the wards.

" Students:—

In Service Training:

May Course—Denbighshire	3
" Flintshire	2
October Course—Anglesey	1
" Denbighshire	1
" Flintshire	2
" Merioneth	2

Psychiatric Social Work Students:

Manchester University	4
Liverpool University	2

Social Science Students:

Cardiff University College	2
Swansea University College	2
London School of Economics	4

Child Care Students:

Liverpool University	2
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" Staff: At the beginning of the year the department had four fully-qualified Psychiatric Social Workers and one Social Worker. In August, the Social Worker, Miss Dampier, left, and in September, Mrs. Barbara Howell was appointed in her place.

"Miss L. Roberts, our Secretary, continues to give the department the most loyal service.

" Note: A Psychiatric Social Worker is one who holds both a Social Science qualification and a certificate in Psychiatric Social Work, i.e., a fully-qualified member of the staff. A Social Worker has the Social Science qualifications only. Usually, Social Workers go on to take a Course in Psychiatric Social Work at an appropriate University after a preliminary training in the field.

" Rehabilitation and Employment: The close liaison with the Ministry of Labour has continued and the monthly conferences with the Group Disablement Resettlement Officers are most valuable. Mrs. Iolo Jones is a member of the Wrexham Disablement Advisory Committee and Miss Hammond of the Blaenau Ffestiniog one.

" Clubs: The establishment of social clubs under the Local Authority at Wrexham and Rhyl has proved a great help in the sphere of after-care. It has,

unfortunately, not been possible for members of the department to attend the Wrexham Club, but two or three workers have been able to share in the activities of the Rhyl Club.

"The following Table gives details of work done with adults during 1960. The services rendered are indicated as follows:—

HV—Home Visit.

OV—Other Visit.

I—Interview in hospital or out-patient clinic.

"These services are classified under two headings, according to whether they are the responsibility of the Board (Class I.) or the Local Health Authority (Class II.). In respect of Class II. Service, the Management Committee receives payment from the Local Authority concerned.

"**Class I.:** This class includes patients who are in hospital and attending an out-patient clinic for treatment or, in the case of detained patients, only at home on trial-leave.

"**Class II.:** This class, broadly speaking, is in receipt of 'after-care.' It includes all patients who have been discharged from hospital and out-patients who are no longer attending a clinic for treatment. It also includes a small number of 'pre-care' cases. These are patients who are referred from outside social agencies direct to the department."

Class I.

County	In-patients			Out-patients			Total
	HV.	OV.	I.	HV.	OV.	I.	
Anglesey	43	5	17	22	5	6	98
Caernarvon	140	19	46	110	8	8	331
Denbigh	85	37	69	209	32	20	452
Flint	101	12	41	295	12	126	587
Merioneth	38	6	9	35	8	3	99
Other Counties	4	1	—	3	—	—	8
	Total ...						1575

Class II.

County	In-patients			Out-patients			Pre-care			Total
	HV.	OV.	I.	HV.	OV.	I.	HV.	OV.	I.	
Anglesey	35	2	2	53	3	2	2	—	—	99
Caernarvon... ..	152	44	29	75	6	4	77	7	8	402
Denbigh... ..	135	21	6	63	11	8	67	7	—	318
Flint... ..	114	10	43	101	5	26	28	1	—	328
Merioneth	39	5	5	44	2	2	1	—	—	98
Other Counties ...	—	—	—	—	—	—	—	—	—	—
	Total ...									1245

Grand Total Class I. and Class II.: 2820.

SENIOR STAFF CHANGES.

Miss Margaret Wheldon resigned from the post of Deputy Matron and Miss Violet Edwards was appointed in her stead.

The senior medical staff remained unchanged during 1960.

CONCLUSION.

I would like to take this opportunity of paying tribute to the work of my nursing, lay and medical colleagues, whose co-operation and support I have highly valued.

To you, Mr. Chairman, Ladies and Gentlemen, I express my great appreciation of the courtesy and consideration which you invariably show me.

I am, Mr. Chairman, Ladies and Gentlemen,

Your obedient Servant,

J. H. O. ROBERTS,

Medical Superintendent.

REPORTS OF THE COMMISSIONERS OF THE BOARD OF CONTROL

NORTH WALES HOSPITAL, DENBIGH.

29th and 30th May, 1960.

I have today and yesterday paid the annual visit of my Board to this well-equipped and progressive hospital. I believe I have seen all the patients in residence and have given all those who wished to do so the opportunity of talking to me. Four had special interviews.

Although the hospital remains much overcrowded, there has been a welcome fall in the total number of patients resident. Except for the removal of 39 mental defectives to more appropriate care, this fall has been amongst those patients under 65 years of age. The number of patients over 65 has increased however and the worst state of overcrowding exists in the wards housing old and infirm patients.

The total number of patients in residence is today 1,415 (684 men, 731 women). Of the total, 845 are now informal patients (506 men, 339 women), 197 are voluntary (120 men, 77 women), and 373 (58 men, 315 women) remain under certificates. During 1959, 1,276 patients were admitted; 265 of them came in informally, 907 voluntarily and 104 under certificates. In the same period, 123 informal patients left and 1,066 patients under the Acts left or were discharged.

The state of the wards is good. They are for the most part in an excellent state of decorative repair. They are well-warmed and the furnishing is comfortable and homely. In certain dormitories in which patients are nursed in bed curtained cubicles are being put in. Many improvements to sanitary annexes have been made and new or enlarged sanitary spars are now to be built on to wards F7a and b and F8a and b.

The former general bathroom is now being converted into a central linen store and already a start has been made in several wards to provide individual marked underwear for the patients in them. In the laundry some new equipment, including a steriliser for infected linen, has been installed. There is no dry cleaning plant, but the better suits are sent out for dry cleaning.

Plans for a new kitchen and staff cafeteria have been approved, and the preliminary work on the new building is likely to start shortly. Meantime, the old kitchen continues to provide well varied and appetising meals for the patients.

The patients at this hospital are well occupied both in the utility departments and in the occupation centres, and in the past year there have been welcome developments in industrial employment both at Pool Park and at

the main hospital. Plans for a new occupation pavilion have been approved, and the building is to begin during the present financial year.

In connection with the rehabilitation of long-stay patients regular physical training classes are held on both sides. Bryn Golau Villa has now become the main rehabilitation unit on the men's side. Here, some 55 patients undergo intensive treatment and when they reach a certain stage of improvement are drafted on to another ward for a further course of rehabilitation. All wards, except two on each side, are open door wards; the ward gardens are being much extended and ward railings are being removed. The splendid sports ground recently laid out by patient labour is now included in the grounds and all patients with ground parole have a very large area for exercise and recreation. An excellent sports pavilion overlooking both the cricket ground and football field has been built during the past year and will soon be ready for use. Many patients on town parole walk into Denbigh in the afternoon and attend local churches and also the cinema. The scheme for seaside holidays has been much extended and many patients during the past year have enjoyed a week in a boarding house at Rhyl. Another interesting development has been the exchange of patients, not well enough for an ordinary holiday, with de la Pole Hospital, thus enabling such patients from each hospital to have a change of scene.

The nurses' training school has had excellent results and the new Mental Nursing Syllabus is to be introduced this year. Training is in the hands of a principal tutor and since September last a second tutor has been appointed.

The total nursing staff consists of 141 male and 89 female full-time and 4 male and 81 female part-time nurses. Sixty-eight male and 25 female nurses are certificated or registered as mental nurses and there are 41 male and 21 female student nurses. Four girls are now nursing cadets.

The standard of nursing care is high and the patients treatment kindly and understanding.

Few patients were being nursed in bed at the time of my visit.

Except for tuberculosis, the hospital has been free of infectious disorders. There is, however, one dysentery carrier.

At the present time 9 men and 2 women are suffering from tuberculosis in its active form, as well as one nurse of each sex. There are, in addition, 8 male quiescent cases. The patients are nursed on verandahs and all proper precautions are taken. The chest physician visits frequently. Recently a Mass X-Ray of all patients was done. There was no death from tuberculosis during 1959.

Since the last visit 15 serious but non-fatal casualties occurred (4 men, 11 women). All involved fractures, all of which were accidentally caused.

During 1959, 104 patients died (50 men, 54 women), giving a mortality rate of 7.75 per cent. Post-mortem examinations were held in 58 instances. Since the beginning of this year 55 further patients died.

Seven inquests have been held, full particulars of which have already been furnished to my Board.

Patients enjoy all modern methods of treatment at this hospital. When necessary, Consultants in all branches of medicine are available and regular visits by certain Consultants are paid.

The Dental Surgeon now holds a second dental session each week.

The Chiropodists hold in all 8 sessions each week.

The medical staff have many extra-mural duties throughout the wide catchment area. The Out-Patients Clinics are as set out in the last entry.

I have been much assisted throughout my visit by Dr. Roberts and Dr. Williamson and I am most grateful to them for their help.

(Signed) I. COFFIN DUNCAN,
Commissioner of the Board of Control.

COED DU HALL, RHYDYMWYN, NEAR MOLD.

26th September, 1960.

The patients in residence today numbered 70, of whom 33 were informal and 47 detained under certificates. I saw them all and found them very contented and happy. No one was being nursed in bed, and since the last visit some 16 months ago there has been no infectious disorder of any kind and health has been remarkably good.

Since the last visit there have been six admissions, all but one on an informal basis and three patients have been discharged. Three girls have been allowed out on licence and I was concerned to hear that one of these, licensed on 31st August, disappeared from her place of employment on 14th September and that so far the police have been unable to trace her movements since then.

Four patients have died—three from natural causes, but in the fourth case an inquest was held as the patient sustained a fracture of the spine when she fell out of bed. A verdict of "Accidental Death" was returned.

The patients are well occupied, although many of them are of very low grade. An occupation therapist divides her time between Broughton Hospital

and Coed Du. About nine girls are employed in the laundry and seven in the kitchen and scullery. The question of rewards and pocket money is at present being reviewed.

Some 11 girls were able to have a holiday at Portmadoc this summer—somewhat fewer than usual, but another 10 girls were able to go to their homes for a holiday.

Many outside bodies, such as "The Round Table," Toc H and W.V.S., take an interest in the patients and arrange outings and entertainments for them.

The house and grounds are now in very good order, and during the past year new flooring has been laid down in parts of the ground floor, fluorescent lighting has been introduced, and some new and comfortable furniture added.

The nursing staff consists, in addition to the matron and deputy matron, of a sister and 7 full-time and 6 part-time assistant nurses. There are now always two nurses on night duty.

I must thank Mrs. Taylor, the Matron, for her help during my pleasant visit.

(Signed) I. COFFIN DUNCAN,
Commissioner of the Board of Control.

BROUGHTON HOSPITAL, NEAR CHESTER.

27th September, 1960.

At my visit to this hospital today I found 64 patients in residence, of whom all but 9 were informal. In addition, there was one short-term case. They all appeared very cheerful, and I am glad to be able to record that there is a vastly improved atmosphere noticeable at Broughton, where, for many years, conditions have been a matter of some anxiety to me and my colleagues.

In July last year Miss Lewis took up duties as Matron. Miss Lewis, who was formerly at Springfield Hospital and more recently Deputy Matron at South Side, Streatham Common, has introduced a number of reforms which are much to be commended, and has been fortunate in having acquired a numerically stronger staff. There is now a deputy matron, a part-time qualified sister, a full-time staff nurse, and 5 full- and 7 part-time nursing assistants. It is, therefore, possible to leave 2 night nurses always on duty.

Although there is now an occupation therapist who visits Broughton for three sessions weekly, who is doing most valuable work, the time she can

devote to the hospital is inadequate to its needs. I visited the so-called schoolroom today and found between 30 and 40 of the patients in charge of a young assistant nurse. They were of all ages and many differing grades and included several small and I thought trainable children. They were all walking round the room to the music of the wireless. A full-time teacher and an extra session or two from the occupation therapist would improve the training facilities at Broughton very materially.

In the Cot Ward I was glad to be informed that the nets had been abolished. This dormitory has recently been redecorated and a door made to enable beds to be wheeled out of doors, and I was glad to find in the sanitary annexe a Plumstead foul washing machine, which has done away with one of the nurses' most distasteful tasks.

Pocket money and rewards for work done have now been put upon a reasonable basis, and I was glad to hear that 11 women went to Rhyl for a fortnight's holiday and that 10 more had visited Portmadoc for a week. The low grades and the children have been out for charabanc excursions to Delamere Forest and elsewhere. Indeed, many outside contacts have been made during the past year. It has been particularly pleasing to hear of several visits having been exchanged with Oakwood Park and that a number of outside bodies have arranged entertainment and parties for groups of patients. Patients now go to Broughton Parish Church for Evensong on Sundays and fortnightly visits to Chester are made.

The general health has been good, but there was an outbreak of whooping cough affecting 10 patients and an epidemic of chickenpox has occurred (9 patients) and 8 patients are now under treatment for this condition. There is no possibility of isolation. The short-term patient on admission was found to be suffering from impetigo. There have been no cases of dysentery or tuberculosis. In April last a Mass X-Ray examination was held but no new cases were discovered.

Since the last visit four patients have died. Death in each case was due to natural causes.

My thanks are due to Miss Lewis, the Matron, for her assistance during my interesting visit.

(Signed) I. COFFIN DUNCAN,

Commissioner of the Board of Control.

LLWYN VIEW HOSPITAL, DOLGELLAU.

28th September, 1960.

At my visit today the names of 67 patients were on the books, one of these is at present on licence and 11 are away on holiday at Rhyl. I saw and spoke to all those in residence and found them very contented. The majority of patients are informal—52 out of the total of 67.

Most of the patients are usefully employed on the work of the hospital and a teacher comes in for two sessions a week and classes likely to interest the girls are also held by the Red Cross. Pocket money and rewards vary from £1 to 1s. 6d. a week.

The recreational life of the patients is well cared for; 34 of the patients have been away for a holiday this year and outings are arranged for the others. Parties of male patients come over from Garth Angharad for dances and weekly cinema shows are given.

The general health has been good. Two patients were in bed with colds at the time of my visit. But there have been no infectious diseases and no tuberculosis. One patient has died since the last visit from natural causes.

One patient struck me as being very psychotic and I was informed she had been at Denbigh for a short time but had returned.

The nursing staff consists of a Deputy Matron and 9 nursing assistants; a ward orderly relieves for night duty.

Miss Williams, the Matron, gave me every assistance. She is shortly to retire and will be much missed.

(Signed) I. COFFIN DUNCAN,

Commissioner of the Board of Control.

GARTH ANGHARAD HOSPITAL, DOLGELLAU.

28th September, 1960.

At my visit today I found 74 patients in residence; all except 7 are now on an informal basis and all new admissions in 1959, 6 in number, came in informally.

No one was in bed at the time of my visit and the health generally has been remarkably good. There has been no outbreak of any epidemic disease and there have been no cases of active tuberculosis although two patients are under special observation, but in them the disease is quiescent. No patient has sustained a serious casualty. Two patients have died, death in each case being due to natural causes.

There is a serious shortage of nurses and the hospital is run at present with 1 charge nurse, 3 nursing assistants and 3 ward orderlies. One of the nursing assistants is on night duty and is relieved by a ward orderly.

The patients are extremely happy and much is done to make them so. They are well employed, many in the grounds and greenhouses as well as in the various domestic duties. Pocket money ranges from 1s. to 10s. a week.

About 40 of the men are on parole and go into Barmouth on Saturdays. During the summer the patients joined in local sports and played a cricket match with Denbigh Hospital and 15 of them spent a week in camp at Pensarn.

I was glad to hear that the schoolmaster from a neighbouring village visits on two evenings a week and holds classes for the patients.

Dr. Owen, of Dolgellau, visits weekly.

My visit was both interesting and pleasant, and I must thank Mr. Jones, the Superintendent, for his helpful assistance.

(Signed) I. COFFIN DUNCAN,

Commissioner of the Board of Control.

OAKWOOD PARK HOSPITAL, CONWAY.

30th September, 1960.

I paid an interesting visit to this hospital today. So far, none of the new buildings planned has been started and the number of patients in residence has not increased. The patients in residence number 186; all of these are informal, except 27. There are some 44 patients under the age of 16. Thirty of these are on the school register. The school is in the charge of a supervisor, who has one assistant and a vacancy for a second. I visited the school and realised how greatly needed another teacher was. As pointed out in the last entry the building used for the school has many drawbacks. The services of a speech therapist would be most valuable.

Occupation therapy is well developed and includes a small industrial unit. Indeed, the employment of the patients is excellently organised and the numbers occupied are most satisfactory.

In the foul laundry I noticed that preparations for morning tea were going on, on a table between the foul washing machine and the recesses in which the foul wash is dumped. This practice should cease.

The recreational life of the patient is a full one. Sixty patients went to camp at Pensarn this summer and there have also been several coach outings in big buses which are hired for the purpose. The women patients from Eryri Hospital come over for the dances and for sports day. Valuable help comes from local associations such as Toc H and Round Table with regard to outings and organised games.

The general health has been excellent and there have been no infectious diseases of any kind. Since the last visit three patients have died. Only one death calls for comment here. An inquest was held and a verdict of "Accidental Causes" returned. Full particulars have already been furnished to my Board. Two patients sustained fractures as a result of accidental falls.

The standard of nursing is good and the nursing staff is now numerically stronger than it was. In addition to a Chief Male Nurse and a Deputy Chief, there are now 23 male and 11 female nurses; six of the former and two of the latter are certificated or registered and one of the women nurses is generally trained. There are three women orderlies. Four nurses are always on duty at night, but this is not considered sufficient owing to the difficulties which might arise in case of fire.

Mr. Newbould gave me every assistance during my visit and I am grateful to him for his help.

(Signed) I. COFFIN DUNCAN,

Commissioner of the Board of Control.

**NORTH WALES
CHILD GUIDANCE CLINICS**

REPORT

for the Year ending

31st DECEMBER, 1960

NORTH WALES CHILD GUIDANCE CLINICS

REPORT FOR THE YEAR 1960.

Mr. Chairman, Ladies and Gentlemen,

It gives me great pleasure to present the report of the North Wales Child Guidance Clinics for 1960.

INTRODUCTION.

The year presented us with many difficulties, but it also offered us a variety of rewards.

Our difficulties arose from staff shortages and changes. For some years we had been able to secure the services of a sufficient number of staff with adequate experience to meet most of the ever-rising demands made on the clinic services. During the year under review our good fortune did not hold and we were obliged to re-arrange some of our activities and, with particular regret, to curtail treatment sessions at some clinics.

Output is, of course, related to availability of staff and numbers of attendances inevitably fell. Fortunately, thanks largely to the unremitting efforts of the remaining staff, we could, however, still meet very many of our commitments and there is reason to believe that our position will improve considerably in the course of the coming year.

Our rewards included continued and increasing evidence to suggest that the leading assumptions on which we base our work are valid.

Workers in Child Guidance, because of the nature of their work which brings them into contact with relatively large numbers of "ordinary people" and for historic reasons, are favourably placed to establish and strengthen the means which permit exchanges of ideas and increasing integration between workers in their own and in different disciplines operating in adjacent fields; and thus to ease what should be a two-way traffic between psychiatric and other medical workers within the hospital services, and between them and workers in non-hospital services. They can, thus, often contribute towards the better understanding of the principles underlying mental health work and the more effective prevention and treatment of mental ill-health in its varied aspects.

In this connection we have noted with particular interest requests for consultations and discussions on a large variety of general problems which have reached us from workers in all branches of the medical, social, educational and community services of the area. These requests have increased

considerably during the latter years and they are, frequently, quite unrelated to the "clinic cases" referred to us. They appear to reflect the increasing acceptance of the importance of mental health matters, and to justify our belief that we can make our most effective contribution to the health services of the area by functioning as a community service; having close links with the general practitioners, staffs of local authority services and other agencies concerned with the welfare, care and treatment of children, while maintaining the closest possible association with our colleagues in the hospital and specialist services of which, of course, we form a part.

The support we receive from these contacts and the opportunities with which they present us for fruitful work are particularly satisfying.

The table which follows will be of interest. In its perusal it should be recalled that we had no Child Therapist and that Social Workers were available for part of the year only.

It will be noted that the Psychiatrists and the Senior Psychologist interviewed quite a large number of parents, and it is to be pointed out that we chose to do this so that we could provide full treatment for those children whom we judged to require this most urgently.

The numbers of referrals and of diagnostic interviews, many of the latter extended beyond our usual practice in an attempt to provide worthwhile help as often as possible, were much as last year. Diagnostic waiting lists were thus kept short at most clinics but treatment lists lengthened very considerably at some clinics.

Table 1.

Year	1952	1957	1959	1960
New referrals	199	315	374	379
Number of individual children with whom one or more members of the clinic teams dealt...	256	541	545	511
Psychiatrists and Child Therapist—Attendances at clinics:				
Children	611	1236	1493	971
Parents	—	—	506	585
Psychologists—School and other visits	192	210	303	217
Psychologists—Interviews:				
Children	41	1035	950	684
Parents	—	—	101	314
Psychiatric Social Workers—Home and other visits	495	504	193	33
Psychiatric Social Workers—Attendances at clinics	306	1604	1196	265
Number of individual interviews by all Workers	1695	4590	4742	3069

"Gwynfa" Residential Clinic.

During the year, we spent a fair deal of time and effort on "Gwynfa," the residential clinic for the investigation and treatment of emotionally-disturbed children to be opened in 1961.

Negotiations regarding the staffing structure were afoot, and there were reasonable hopes that the Welsh Board of Health would consider favourably our suggestions regarding this. Alterations to the house itself were well advanced and plans made for the conversion of a large hutment in the grounds into two play therapy rooms and a consulting room.

It will be recalled that "Gwynfa" is to become an active treatment centre for children of average or higher intelligence. In due course we hope to be able to accept 20—24 boys and girls aged under 12 or 13 who will, normally, stay for periods of up to six to nine months. The work will form an integral part of the clinic services and clinic staff will be available in much the same way as they are at our other clinics.

The "house staff" will make a major contribution to the treatment of the children, and it is considered that this can in fact become effective only if they can create an environment in which every activity is orientated towards treatment. They will have the full support of the clinic staff and maximum opportunity for the discussion of all problems relating to their work.

A "Two-year Course of Training" has been arranged jointly with University College, Bangor. This will provide student workers with a broadly based theoretical background and wide opportunities for practical work under the guidance of experienced workers drawn from the disciplines represented in the clinic teams as well as from the fields of nursing and child care work. Every effort will be made to keep students in touch with the work of establishments and services in the community, and seminars (rather than lectures) and case discussions will form the basis of all teaching. The Regional Hospital Board will issue a "Certificate of Competence" to those completing the course satisfactorily.

There is a serious shortage of workers with professional, yet "on the job" training, in this and allied fields. Openings and prospects of promotion, and of a satisfying career, should exist in child care work, schools for handicapped and emotionally disturbed children, paediatric departments, special units for seriously maladjusted children and adolescents, as well as in local authority and hospital services concerned with mental ill-health in its many aspects.

Clinics and Education Services.

The closest possible co-operation was maintained between the clinics and the schools of the area. Difficulties in recruitment arising mainly from the existence of considerable differences in the salary scales of psychologists,

doing identical work in most Child Guidance Clinics, working under National Health Service and Education Authority conditions of employment, to the detriment of the former, were again given serious consideration. Finally, it was recommended that existing arrangements should be modified so that the Education Authorities would engage two psychologists, to be seconded to the clinics where they would work under the direction of the Medical Director and as full members of the clinic teams. The clinic staff, also of two psychologists, which includes the Principal Psychologist who is to be responsible for the co-ordination of the work of all psychologists, would be maintained.

It is gratifying to record that agreement on all points was reached and, in due course, appointments made, the Denbighshire Authority acting as the employing agency on behalf of the five counties concerned.

The Hospital Management Committee may wish to consider what might now be a most valuable development, namely that the Principal Education Officers should be co-opted to the Child Guidance Sub-Committee. This will therefore in future include them, the Principal School Medical Officers and members of the Management Committee. This Committee, it might be recalled here, also includes some members from the Colwyn Bay area on whose assistance we might call particularly in connection with the work of "Gwynfa."

Research.

The research project, which aims to adapt the "Wechsler Intelligence Scale for Children" for use with Welsh-speaking children between the ages of 6 and 12, entered its fourth year in September. We were able to secure an extension of the period of time allotted to the work and this will permit us to widen the age range and, ultimately, to standardise the Welsh version of the test to cover children up to school-leaving age.

Miss G. Roberts took over the direction of the work in September, 1960, and she has kindly provided the following report which covers the period to the end of March, 1961:—

"The administration of the provisional Scales to a sample of Welsh-speaking children, in the age range 6—12, was completed during the Summer Term of 1960, and the work involved in standardisation proceeded during the summer.

An extension of the original period of three years has made it possible to widen the scale to include a sample of 13 and 14 year old children. The individual testing of these children has been carried out during this school year. During this summer it is hoped to complete the statistical work involved in standardising the Scale for the age range 6—14."

INFORMATION ON CLINICS AND STAFF.

(1) Clinics.

Table 2.

Town	Address and Telephone	Day	Time	Sessions
Bangor	Sackville Road, Bangor. Tel. Bangor 2735.	Tuesday.	Mornings and Afternoons.	2 double sessions per week.
Bl. Ffestiniog ...	"Isallt," Bl. Ffestiniog. Tel. Bl. Ffestiniog 93.	2nd, 4th and 5th Mondays in month.	Mornings and Afternoons.	4-6 per month.
Colwyn	Bod Difyr, Cefn Road, Old Colwyn. Tel. C. Bay 55016.	Wednesday, Friday.	Mornings and Afternoons.	3-5 per week.
Holyhead	St. David's Priory, Holy- head. Tel. Holyhead 2255.	Thursday.	Mornings and Afternoons.	2 per f'night.
Rhyl	Fron Fraith, Boughton Avenue, Rhyl. Tel. Rhyl 1208.	Monday.	Mornings and Afternoons.	2 per week.
Shotton	Ash Grove, off Queens- ferry Road, Shotton. Tel. Con. Quay 383.	Friday.	Mornings and Afternoons.	2 per f'night.
Wrexham	Gatefield House, 32 Kings Mills Road, Wrexham. Tel. Wrexham 4048.	Thursday. Friday.	Mornings and Afternoons. By arrange- ment.	2 per week. approx. 2 per month.

All members of the staff meet at the central clinic in Old Colwyn on Wednesdays for office work and case discussions.

It should be noted that diagnostic interviews occupy approximately two hours in most instances. Three quarter hours are allowed for treatment interviews and for most re-examinations.

To enable us to co-ordinate the work of the staff, we have to work by a strict appointment system and our time-tables have normally to be prepared some weeks ahead. Considerations, arising out of our treatment method itself, further demand that we are available for the children and their parents at the times arranged.

(2) Staffing.

The posts of Registrar, Child Therapist and Senior Psychiatric Social Worker remained unfilled during the year.

Psychologists: Mr. L. Scobbie joined the staff as Principal Psychologist on 1/12/60, replacing Dr. G. A. V. Morgan who had left on 31/10/60 to take up an appointment as one of H.M. Inspectors of Schools.

Mr. P. J. Macdonald joined us on 4/7/60, and Mr. H. Karle left on 30/9/60 to take up a post as Psychologist with the East Sussex Education Authority.

Social Workers: Mrs. V. Ford Thomson joined the staff on 1/9/60. Miss F. K. Balfour, who will join the staff of "Gwynfa" in due course, started work as a temporary Social Worker on 1/12/60.

Research: Miss G. Roberts was appointed Research Fellow on 31/9/60, when she took over responsibility for the research project from Mr. U. William who left on 31/9/60 to take up a post as a Lecturer at the Training College, Carmarthen.

Secretarial: Mrs. E. Miller left on 30/9/60 and Miss J. Bowyer Sidwell was appointed as shorthand typist on 1/10/60.

Towards the end of the year the indications were that our staffing position would improve steadily, and the following table shows the position as it was expected to be about the middle of 1961:—

Table 3.

Staff and Name	Post	Attending clinics at
(1) Clinical:		
Dr. E. Simmons... ..	Consultant in Psychiatry ...	Bangor, Colwyn, Rhyl, Wrexham. Elsewhere by arrangement.
Dr. J. A. Williams ...	Senior Registrar	All clinics.
Mr. L. Scobbie	Principal Psychologist... ..	Bangor, Blaenau Ffestiniog, Colwyn, Holyhead. Others by arrangement.
Mr. P. J. Macdonald... ..	Psychologist	Colwyn, Rhyl, Wrexham.
Mr. T. R. Miles... ..	Psychologist (part-time) ...	Bangor.
Mrs. J. Sants... ..	Psychologist (part-time) ...	Bangor.
Mr. J. Sants	Psychologist (part-time) ...	Holyhead.
Mrs. C. L. Jones	Psychiatric Social Worker	Rhyl, Colwyn. Elsewhere by arrangement.
Miss G. Brown	Psychiatric Social Worker	Wrexham, Colwyn (provisionally).
Mrs. V. Ford Thomson	Social Worker	Colwyn, Shotton, Wrexham.
Mrs. S. Mundle	Social Worker (part-time)	Bangor.
(2) Research:		
Miss G. Roberts... ..	Research Fellow	Based on Colwyn Clinic. Field work in schools mainly in North Wales.
Miss E. Jones... ..	Research Assistant	
(3) Secretarial:		
Miss D. Harrison ...	Secretary	Secretarial and general administrative work of the clinics.
Mrs. G. S. Williams	Shorthand Typist	Clerical work of Social Work Department. Appointments Clerk.
Miss J. E. Bowyer Sidwell.	Shorthand Typist	Clerical work of Educational Psychological Department.

INFORMATION AND DATA IN RESPECT OF CHILDREN.

(1) Sources of referral.

In the following table, which is self-explanatory, all children referred during the year are included. Not all of them could be examined.

Table 4a.

Referring Agency	Counties						Total
	Angl.	Caerns.	Denbs.	Flints.	Mer.	Others	
School Medical Officers	16	33	25	74	17	2	167
General Practitioners	15	22	23	18	1	—	79
Consultant Paediatricians	5	6	11	6	2	1	31
Other Medical Specialists	1	1	2	7	—	1	12
Education Officers & Teachers...	2	15	4	16	—	2	39
Courts and Prob. Officers	2	—	3	6	—	—	11
Children's Officers	1	—	20	2	—	—	23
Other Social Workers	—	2	2	—	1	—	5
Parents	2	4	4	2	—	—	12
All Agencies 1960... ..	44	83	94	131	21	6	379

On 31st December, 1959, 58 children were on the waiting list, 22 of these were cancelled later and 36 were transferred to 1960; 379 new referrals were received during 1960; 35 of these were cancelled, 63 remained on the waiting list on 31st December, 1960.

The table of Referral Figures for the last nine years may be of interest.

Table 4b.

All Referring Agencies (numbers referred by School Medical Officers shown in brackets)

	Angl.	Caerns.	Denbs.	Flints.	Mer.	Others	Total
1952	22(13)	54(40)	73(38)	38(4)	12(10)	—	199
1953	18(13)	60(42)	67(31)	28(4)	10(7)	—	183
1954	21(10)	76(50)	71(23)	51(15)	16(16)	—	235
1955	33(24)	106(75)	97(23)	63(22)	18(13)	2	319
1956	61(43)	126(77)	91(38)	63(28)	22(22)	1	363
1957	30(13)	117(75)	88(35)	67(23)	13(7)	—	315
1958	50(31)	108(62)	122(40)	112(47)	19(10)	15(1)	426
1959	60(45)	105(49)	97(34)	88(56)	16(13)	8	374
1960	44(16)	83(33)	94(25)	131(74)	21(17)	6(2)	379

All figures in the tables of this report refer to children dealt with, or to be dealt with, individually. Group tests are not recorded here.

(2) Causes of referral.

The variety of difficulties for which children are referred may be gathered from Table 5, where they are, somewhat arbitrarily, sub-divided into those with a "clinical" and an "educational" bias. Only children who were seen during the year are included.

Table 5.

(a) Behaviour, difficult and aggressive (33), beyond control (3)	36
(b) Stealing (10), stealing with other symptoms (7)	17
(c) Enuresis (15), enuresis with other symptoms (8). Soiling (10), soiling with other symptoms (3)	36
(d) Temper outbursts (4), screaming (2). Severe nailbiting (2), retarded motor development (1)	9
(e) Habit spasms (2), night terrors (1), excessive crying (1). Pulling out hair (2), fear of dying (1). Very nervous (6), insomnia (1), solitary (1), depressed (1), peculiar (1)	17
(f) Problems associated with sexual development	4
(g) Various bodily symptoms, no adequate physical cause found: Abdominal pains (4), headaches, giddiness, breathlessness (1 each). Coughing, vomiting, spitting (1 each). Loss of power in one leg (1), inability to see (2)	13
(h) Tearing clothes, swallowing dangerous objects (1 each). Suicide threat (3), gesture (2), attempt (1)	8
(i) Stammer, stutter (5), retarded speech development with other symptoms (7). Asthma (4), ulcerative colitis (1). Non-sensical speech with attacks of pallor (1), sequelae to skull fracture (2)	20
(j) Reluctance to attend school (6), refusal to go to school (6). Severe nervousness and other symptoms in relation to school attendance (6). Truanting from school (5), truanting from home (2)	25
(k) Scholastic difficulties, specific (4), School failure, child not dull (4)	8
(l) For investigation, report and advice on schooling, training or treatment:—	
(i) Educational assessment (67)	67
(ii) Assessment of intelligence (18)	18
(iii) ? Sub-normal, sub-normal, seriously retarded (8)	8
(iv) General assessment, children in care of Children's Officer (10), for adoption or fostering (4)	14
(v) Children with special handicap: Spastic (2), Partially-deaf (3)	5
(vi) Children with epilepsy (3), ? epilepsy (2), Mongolism (2)	7
(m) For advice on choice of school (3), Vocational Guidance (2)	5

(3) Ages and Intelligence of Children.

The ages and intelligence of 317 children seen for the first time during 1960 are shown.

County of Origin	Ages	Intelligence Quotients													Totals		
		Boy	Girl	Boy	Girl	Boy	Girl	Boy	Girl	Boy	Girl	Boy	Girl	Both	Boys	Girls	Both
		—54	55-69	70-84	85-99	100-114	115-129	130 & over	No valid est.								
Anglesey	Under 5	—	—	—	—	—	—	—	—	—	—	—	—	—	1	1	2
	5-7	—	—	—	—	—	—	—	—	—	—	—	—	—	1	1	2
	7-10	—	—	—	—	—	—	—	—	—	—	—	—	—	11	1	12
	10-12	1	—	—	—	—	—	—	—	—	—	—	—	—	4	4	8
	12-15	2	—	—	—	—	—	—	—	—	—	—	—	—	8	3	11
Over 15	—	—	—	—	—	—	—	—	—	—	—	—	—	1	2	3	
		3	2	7	6	4	3	2	1	3	2	1	3	27	12	39	
Caerns.	Under 5	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	5-7	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	7-10	2	—	—	—	—	—	—	—	—	—	—	—	—	2	3	5
	10-12	1	—	—	—	—	—	—	—	—	—	—	—	—	13	6	19
	12-15	—	—	—	—	—	—	—	—	—	—	—	—	—	17	2	19
Over 15	—	—	—	—	—	—	—	—	—	—	—	—	—	19	9	28	
		3	4	18	15	9	5	4	1	2	1	2	55	22	77		
Denbighs.	Under 5	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	5-7	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	7-10	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	10-12	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	12-15	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Over 15	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
		—	—	10	11	6	7	9	2	14	7	9	48	26	74		
Flints.	Under 5	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	5-7	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	7-10	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	10-12	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	12-15	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Over 15	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
		3	4	14	19	12	15	9	7	15	9	2	69	40	109		
Merioneth.	Under 5	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	5-7	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	7-10	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	10-12	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	12-15	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Over 15	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
		1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
Others		1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
		1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Totals	All	11	8	16	11	51	20	55	29	45	26	4	4	1	8	4	103
	Counties	19	27	71	84	71	28	188	12	12	317						

Some Observations on Table 6.

(1) Likely scholastic success.

The children in the various I.Q. ranges used may be expected to succeed in their scholastic careers in keeping with the following observations:—

I.Q.—Under 55	Training, rather than education in the sense in which this word is normally used, likely to be of greatest value.
55 to 69... ..	In need of the educational and general social facilities of a school or special unit for educationally sub-normal children.
70 to 84... ..	In need of education in a special class.
85 to 114	Of low average, average and high average ability.
115 to 129	Of superior ability.
130 and over	Of outstanding ability.

(2) Value of "I.Q. Figure."

An "I.Q. figure" has only a limited value. It is used to express the result of a test given to a child, but it does not represent all that could be said about his intelligence and his abilities.

Group tests and non-verbal and performance tests can give extremely valuable information, but this needs careful and expert interpretation. Whenever necessary, they must be followed by individual tests and supplemented by whatever special tests may be available for the examination of specific abilities or disabilities.

In work with emotionally disturbed children, individual tests are given. Observation in the "standard test situation," and interpretation of his behaviour there, assumes considerable importance. The value which can safely be attached to the test results, and the conclusions for the future which may be drawn, may even then have to await the decision of the "case conference" at which all workers involved will each discuss their findings and views.

(4) Diagnoses.

The seriousness, or otherwise, of the conditions with which we are asked to deal, may be estimated from Table 7 which follows. In this, the children who were first examined during 1960, and on whom investigations were completed during the year, are grouped in broad diagnostic categories according to their ages.

Table 7.

Diagnostic Groups and Age Ranges	Under 5	5-7	7-10	10-12	12-15	Over 15	All Ages
A—Behaviour and Personality Difficulties (No. of dull children in brackets):							
1—Behaviour Disorder, simple... ..	—	—	1(1)	1(1)	—	—	2
Behaviour Disorder, with neurotic traits	3(1)	5	21(3)	18(3)	15(3)	3	65
Behaviour Disorder, with anti-social traits	—	—	—	2(2)	1	2	5
2—Adolescent Instability... ..	—	—	—	—	2	5(1)	7
3—Neurotic illness (Neurosis)	2(1)	7(1)	23(3)	13(2)	23(3)	6(3)	74
Depressive illness	—	—	3	4(2)	4	1	12
Psycho-somatic illness	—	1	—	—	2	1	4
Serious Disorder of Personality—							
Development	4(3)	2(1)	2	3(1)	6(1)	2	19
Psychosis	—	—	—	—	2	—	2
Intra-cranial Abscess/? Gilles de la Tourette Syndrome	—	—	1	—	1	—	2
B—Educational or Intellectual Difficulties:							
Children of average and above average intelligence	—	—	7	10	8	2	27
Dull children (I.Q. 70-84)	—	1	21	9	5	—	36
Dull children with epilepsy	—	—	—	3	2	—	5
Dull children with hemiparesis/severe speech defect	—	—	2	—	—	—	2
Very dull children (I.Q. 55-69)	—	2	3	6	1	—	12
Very dull children with spasticity... ..	1	—	—	—	—	—	1
Very dull children with severe emotional instability	2	2	4	1	1	1	11
Educability in doubt	—	1	—	2	1	—	4
C—Unsuitable for Education:							
Sub-normal children	—	2	4	4	1	—	11
D—Essentially Normal Children:							
General Assessment	—	1	—	—	3	—	4
Vocational Guidance	—	—	—	—	—	2(1)	2
Serious parental difficulties	2	—	—	—	—	1	3
E—Incomplete	2	—	—	3	2	—	7
Total number of Children	16	24	92	79	80	26	317

STATISTICS OF ATTENDANCES.

In the following tables information is given in respect of:—

- 1—The number of INDIVIDUAL CHILDREN who were dealt with during 1960 and the workers concerned in their cases.
- 2—The numbers of ATTENDANCES AT CLINICS which were recorded for each worker.
- 3—The numbers of VISITS to homes, schools and other social agencies which were made by the Psychologist and the Psychiatric Social Workers.
- 4—The nature of the investigations carried out by the Psychologist.

- Note**—(1) The number of children who were assessed by means of GROUP TESTS at schools are NOT recorded in these tables.
- (2) "Correspondence only" cases are not included either. They come from "open" and from otherwise "closed" files, are very numerous and, often, very time consuming.

SUMMARY of Attendances and Visits.

	First	Further	Total
1—(a) Attendances of children at clinics... ..	242	... 1458	... 1700
(in returns to the Regional Hospital Board one attendance only can be registered, even if two or more workers have interviewed the child and one or more adults on a particular occasion).			
(b) Examination of children elsewhere	75	... —	... 75
2—Psychiatrists:—			
Attendances of new referrals (first)	195	... —	...
Attendances for treatment and re-examinations	—	... 776	... 971
Interviews with mothers, fathers or guardians...	181	... 404	... 585
3—Psychologists:—			
Number of visits to schools ... ..	...	...	... 217
Interviews with children	212	... 472	... 684
Interviews with mothers, fathers or guardians...	45	... 269	... 314
4—Psychiatric Social Workers:—			
Number of visits to homes ... ..	...	...	... 30
Number of visits to other social workers ... ..	...	...	... 3
Interviews with mothers, fathers or guardians...	123	... 142	... 265

Table 8.

This table gives the numbers of individual children who were dealt with by one or more of the members of the clinic teams.

The figures refer to Psychiatrists (1), Psychologists (2) and Psychiatric Social Workers (3).

Clinic	First dealt with during 1960						First dealt with before 1960						Total
	Angl.	Caerns.	Denbs.	Flints.	Mer.	others	Angl.	Caerns.	Denbs.	Flints.	Mer.	Others	
Bangor													
1	2	2	—	—	—	—	4	5	—	1	—	—	14
2	4	7	—	—	—	—	6	22	—	—	—	—	39
3	1	—	—	—	—	—	—	—	—	—	—	—	1
1+2	9	10	—	—	—	—	1	8	—	—	1	—	29
1+3	2	2	—	—	—	—	—	1	—	—	—	—	5
2+3	1	4	—	—	—	—	1	4	—	—	—	—	10
1+2+3	13	18	—	—	1	—	—	1	—	—	—	—	33
Blaenau Ffestiniog													
2	—	—	—	—	3	3	—	3	—	—	2	7	18
1+2	—	1	—	—	6	—	—	1	—	—	6	—	14
Colwyn													
1	—	1	2	—	—	—	—	3	2	—	—	—	8
2	1	13	4	1	—	—	—	6	7	1	—	—	33
1+2	—	12	8	2	—	1	—	6	4	1	—	—	34
1+3	—	1	1	—	—	—	—	1	—	—	—	—	3
2+3	—	1	—	—	—	—	—	2	—	—	—	—	3
1+2+3	—	5	1	1	—	—	—	—	1	—	—	—	8
Holyhead													
1	—	—	—	—	—	—	1	—	—	—	—	—	1
2	1	—	—	—	—	—	2	—	—	—	—	—	3
1+2	5	—	—	—	—	—	8	—	—	—	—	—	13
Rhyl													
1	—	—	—	4	—	—	—	—	2	4	—	—	10
2	—	—	—	28	—	—	—	—	—	6	—	—	34
3	—	—	—	—	—	—	—	—	—	1	—	—	1
1+2	—	—	5	25	—	—	—	—	1	6	—	—	37
1+3	—	—	—	4	—	—	—	—	—	1	—	—	5
2+3	—	—	—	2	—	—	—	—	—	1	—	—	3
1+2+3	—	—	2	9	—	—	—	—	—	3	—	—	14
Shotton													
2	—	—	—	1	—	—	—	—	—	2	—	—	3
1+2	—	—	1	2	—	—	—	—	—	3	—	—	6
1+2+3	—	—	—	3	—	—	—	—	—	2	—	—	5
Wrexham													
1	—	—	1	2	—	—	—	—	5	1	1	—	10
2	—	—	13	17	—	1	—	—	13	4	1	1	50
3	—	—	—	—	—	—	—	—	2	—	—	—	2
1+2	—	—	21	2	—	1	—	—	6	4	—	—	34
1+3	—	—	2	1	—	—	—	—	1	—	—	—	4
2+3	—	—	1	—	—	—	—	—	2	1	—	—	4
1+2+3	—	—	12	5	1	1	—	—	1	—	—	—	20
Totals	39	77	74	109	11	7	23	63	47	42	11	8	
				317					194				511

Tables 9a and 9b refer to work of the PSYCHIATRISTS.

Table 9a.

Interviews with **children** only (in brackets, number of individual children).

Clinic	First Attendances (Referrals)							Further Attendances (Re-examinations and Treatments)							Number of Attendances		
	Angl.	Caerns.	Denbs.	Flints.	Mer.	Others	Angl.	Caerns.	Denbs.	Flints.	Mer.	Others	First	Further	Total		
Bangor																	
Boy	19	21	—	—	1	—	24(7)	111(16)	—	1	—	—	41	136			
Girl	6	10	—	—	—	—	23(5)	97(9)	—	—	—	—	16	120		313	
Blaenau Ffestiniog																	
Boy	—	1	—	—	3	—	—	8(1)	—	—	—	29(6)	4	37			
Girl	—	—	—	—	2	—	—	9(1)	—	—	—	18(4)	2	27		70	
Colwyn																	
Boy	—	13	10	2	—	1	—	52(11)	16(5)	1	—	—	26	69			
Girl	—	6	—	—	—	—	—	28(8)	7(3)	—	—	—	6	35		136	
Holyhead																	
Boy	—	—	—	—	—	—	—	—	—	—	—	—	—	—			
Girl	—	—	—	—	—	—	—	—	—	—	—	—	—	—			
Rhyl																	
Boy	—	—	5	27	—	—	—	—	18(2)	44(12)	—	—	32	62			
Girl	—	—	2	12	—	—	—	—	4(2)	26(6)	—	—	14	30		138	
Shotton																	
Boy	—	—	—	3	—	—	—	—	—	49(10)	—	—	3	49			
Girl	—	—	1	2	—	—	—	—	4(1)	34(4)	—	—	3	38		93	
Wrexham																	
Boy	—	—	24	7	1	2	—	—	81(10)	11(3)	—	—	34	105			
Girl	—	—	11	3	—	—	—	—	30(7)	32(3)	—	—	14	68		221	
All Clinics	25	51	53	56	7	3	47	305	160	198	66	—	195	776		971	

Table 9b.

Interviews with Parents, Guardians and other Social Workers

Clinic	First Interviews							Further Interviews							Totals		
	Angl.	Caerns.	Denbs.	Flints.	Mer.	Others	Angl.	Caerns.	Denbs.	Flints.	Mer.	Others	First	Further	Total		
Bangor																	
Mothers ...	15	22	—	—	—	—	46(8)	29(11)	—	—	—	—	37	75			
Fathers ...	3	4	—	—	—	—	4(3)	1	—	—	—	—	7	5			
Others ...	2	—	—	—	—	—	—	4(3)	—	—	—	—	2	4	130		
Blaenau Ffestiniog																	
Mothers ...	—	—	—	—	3	—	—	2(1)	—	15(1)	—	—	3	17			
Fathers ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—			
Others ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	20		
Colwyn																	
Mothers ...	—	12	9	1	—	1	—	25(10)	2(2)	—	—	—	23	33			
Fathers ...	—	4	1	1	—	—	—	6(1)	—	—	—	—	6	6			
Others ...	—	—	—	—	—	—	—	—	—	—	—	—	—	1	69		
Holyhead																	
Mothers ...	4	—	—	—	—	—	51(11)	—	—	—	—	—	4	51			
Fathers ...	1	—	—	—	—	—	2(2)	—	—	—	—	—	1	2			
Others ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	58		
Rhyl																	
Mothers ...	—	—	7	34	—	—	—	—	40(15)	—	—	—	41	68			
Fathers ...	—	—	2	5	—	—	—	—	4(3)	—	—	—	7	4			
Others ...	—	—	—	3	—	—	—	—	6(4)	—	—	—	3	7	130		
Shotton																	
Mothers ...	—	—	—	—	—	—	—	—	3(3)	—	—	—	—	3			
Fathers ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—			
Others ...	—	—	—	—	—	—	—	—	2(1)	—	—	—	—	2	5		
Wrexham																	
Mothers ...	—	—	23	7	1	1	—	—	16(6)	19(2)	—	—	32	106			
Fathers ...	—	—	6	2	—	1	—	—	2(1)	—	—	—	9	13			
Others ...	—	—	6	—	—	—	—	—	—	—	—	—	6	7	173		
Totals ...	25	42	54	53	4	3	103	67	75	34	—	—	181	404	585		

Tables 10a, 10b and 10c refer to work of the PSYCHOLOGISTS.
Table 10a.
 Interviews with **children** only (in brackets, number of individual children).

Clinic	First Examination							Further Examinations							Number of Examinations		
	Angl.	Caerns.	Denbs.	Flints.	Mer.	Others	Angl.	Caerns.	Denbs.	Flints.	Mer.	Others	First	Further	Total		
Bangor																	
Boy	22	23	—	—	1	—	65(7)	87(13)	—	—	—	—	46	152	276		
Girl	5	15	—	—	—	—	1	57(6)	—	—	—	—	20	58			
Blaenau Ffestiniog																	
Boy	—	—	—	—	4	3	—	—	—	—	—	—	7	—	26		
Girl	—	—	—	—	1	—	—	1	—	17(3)	—	—	1	18			
Colwyn																	
Boy	1	25	12	4	—	1	—	29(6)	4(3)	—	—	—	43	46	116		
Girl	—	5	1	—	—	—	—	11(5)	10(4)	—	—	—	6	21			
Holyhead																	
Boy	3	—	—	—	—	—	67(9)	—	—	—	—	—	3	67	77		
Girl	3	—	—	—	—	—	4(2)	—	—	—	—	—	3	4			
Rhyl																	
Boy	—	—	4	43	—	—	—	—	5(2)	—	—	—	47	28	122		
Girl	—	—	3	21	—	—	—	3(1)	20(60)	—	—	—	24	23			
Shotton																	
Boy	—	—	—	3	—	—	—	—	—	—	—	—	3	—	12		
Girl	—	—	—	1	—	—	—	—	8(1)	—	—	—	1	8			
Wrexham																	
Boy	—	—	25	18	1	3	—	—	14(7)	—	—	1	47	42	122		
Girl	—	—	22	6	—	—	—	—	5(4)	—	—	—	28	5			
Totals ...	34	68	67	96	7	7	137	185	41	91	17	1	279	472	751		

Table 10b.

Interviews with Parents, Guardians and other Social Workers

Clinic	First Interviews							Further Interviews							Totals		
	Angl.	Caerns.	Denbs.	Flints.	Mer.	Others	Angl.	Caerns.	Denbs.	Flints.	Mer.	Others	First	Further	Total		
Bangor																	
Mothers ...	2	6	—	—	—	—	13(2)	26(9)	—	—	—	—	8	39			
Fathers ...	1	3	—	—	—	—	1	14(3)	—	—	—	—	4	15			
Others ...	—	2	—	—	—	—	—	26(5)	—	—	—	—	2	26	94		
Blaenau Ffestiniog																	
Mothers ...	—	1	—	—	7	—	—	18(3)	—	—	—	—	8	62			
Fathers ...	—	—	—	—	1	—	—	2(2)	—	—	—	—	1	3			
Others ...	—	—	—	—	—	—	—	—	—	1	—	—	—	1	75		
Colwyn																	
Mothers ...	1	—	3	—	—	—	—	15(3)	—	—	—	—	4	28			
Fathers ...	—	—	1	—	—	—	—	8(2)	—	—	—	—	1	8			
Others ...	—	3	1	—	—	—	—	2(2)	—	—	—	—	4	5	50		
Holyhead																	
Mothers ...	1	—	—	—	—	—	1	—	—	—	—	—	1	1			
Fathers ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—			
Others ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	2		
Rhyl																	
Mothers ...	—	—	1	2	—	—	—	—	8(5)	—	—	—	3	8			
Fathers ...	—	—	1	—	—	—	—	—	—	—	—	—	1	—			
Others ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	12		
Shotton																	
Mothers ...	—	—	1	3	—	—	—	—	56(7)	—	—	—	4	60			
Fathers ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—			
Others ...	—	—	—	—	—	—	—	—	5(1)	—	—	—	—	5	69		
Wrexham																	
Mothers ...	—	—	2	—	—	1	—	—	—	—	—	1	3	5			
Fathers ...	—	—	1	—	—	—	—	—	1	—	—	1	1	2			
Others ...	—	—	—	—	—	—	—	—	—	—	—	—	—	1	12		
Totals ...	5	15	11	5	8	1	15	111	70	46	2	45	269	314			

Table 10c.

Not at Clinics							
Visits	Angl.	Caerns.	Denbs.	Flints.	Mer.	Others	Total
To Schools—Children discussed with teachers...	15	33	42	84	4	4	182
To Schools and Officials of Authority re. special testing of children	1	6	3	25	—	—	35
	Total number of visits ...						217

Tables 11a and 11b refer to work of the PSYCHIATRIC SOCIAL WORKERS.

Table 11a.

Interviews with Parents, Guardians and other Social Workers

Clinic	First Interviews						Further Interviews						Totals		
	Angl.	Caerns.	Denbs.	Flints.	Mer.	Others	Angl.	Caerns.	Denbs.	Flints.	Mer.	Others	First	Further	Total
Bangor															
Mothers ...	15	22	—	—	1	—	20(10)	44(15)	—	—	—	—	38	64	
Fathers ...	7	5	—	—	1	—	1	3(2)	—	—	—	—	13	4	
Others ...	1	—	—	—	—	—	—	—	—	—	—	—	1	—	120
Blaenau Ffestiniog															
Mothers ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Fathers ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Others ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Colwyn															
Mothers ...	—	7	—	—	—	—	—	16(6)	—	—	—	—	7	17	
Fathers ...	—	4	2	1	—	—	—	4(2)	—	—	—	—	7	4	
Others ...	—	—	—	—	—	—	—	1	—	—	—	—	—	1	36
Holyhead															
Mothers ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Fathers ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Others ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Rhyl															
Mothers ...	—	—	2	12	—	—	—	—	8(6)	—	—	—	14	13	
Fathers ...	—	—	1	7	—	—	—	—	3(2)	—	—	—	8	6	
Others ...	—	—	—	1	—	—	—	—	—	—	—	—	1	—	42
Shotton															
Mothers ...	—	—	—	2	—	—	—	—	17(7)	—	—	—	2	17	
Fathers ...	—	—	—	1	—	—	—	—	1	—	—	—	1	1	
Others ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	21
Wrexham															
Mothers ...	—	—	7	6	1	1	—	—	7(3)	—	—	—	15	15	
Fathers ...	—	—	4	2	1	—	—	—	—	—	—	—	7	—	
Others ...	—	—	7	—	—	—	—	—	—	—	—	—	7	—	44
Totals ...	23	38	23	32	4	1	21	68	17	36	—	—	121	142	263

Table 11b.

Not at Clinics							
Visits	Angl.	Caerns.	Denbs.	Flints.	Mer.	Others	Total
Home Visits	2	7	11	7	3	—	30
Visits to other Social Workers... ..	—	—	—	3	—	—	3
Total number of visits							33

CONCLUSION.

Once again I wish to record my gratitude to my co-workers in the service for their constant efforts to maintain a high standard of clinical work and for their willing co-operation with me in the day to day work of the clinics.

At the clinics and elsewhere we are greatly encouraged by the goodwill towards our work shown by medical specialists, general practitioners, and the personnel of medical, educational, social and community services. I am glad to have this opportunity to express to them our sincere appreciation of their co-operation.

Our liaison with the Principal School Medical Officers has remained a very close one. Our work could not be carried out successfully without their constant assistance, and I am grateful for their ready help on many occasions.

Dr. J. H. O. Roberts has always been ready to discuss problems with me and to give me his advice and support. I am very conscious of my indebtedness to him.

To Mrs. E. M. Jones, Chairman, and to the members of the Child Guidance Sub-Committee, I wish to express my thanks for the consideration they have shown me.

To you Mr. Chairman, Ladies and Gentlemen, I would convey my sincere appreciation of your unfailing support and your very real interest in the Child Guidance Clinics.

Your obedient, Servant,

E. SIMMONS,

September, 1961.

Consultant Child Psychiatrist.

SUMMARY OF GROUP EXPENDITURE

**NORTH WALES MENTAL HOSPITAL MANAGEMENT COMMITTEE.
YEAR ENDED 31/3/61.**

Revised Estimate 1960-61	Head of Expenditure	Previous Year 1959-60	Actual 1960-61	% of Total
£	Salaries and Wages:	£	£	
10274	Medical	6985	10237	1.38
241885	Nursing	225260	245784	33.05
40593	Works and Maintenance	39523	40015	5.38
31060	Admin. and Clerical	28205	30152	4.05
125946	Other Staff	115655	126723	17.04
449758	Total Salaries	415628	452911	60.90
118400	Provisions	111637	117762	15.84
19075	Uniform and Clothing	19319	18440	2.48
17285	Drugs, Dressings, Medical and Surgical Appliances and Equipment	17742	19994	2.69
52480	Fuel, Light, Heating, Water, Cleaning and Laundry	49960	58508	7.87
36090	Maintenance of Buildings, Plant and Grounds	34127	33425	4.49
25745	Domestic Repairs, Renewals and Re- placements	20689	21929	2.95
97960	All other Expenses	85609	101437	13.64
816793	Total	759711	824406	110.86
73115	Deduct Direct Credits	69475	81142	10.91
743678	Net Hospital Revenue Expenditure	690236	743264	99.95
427	Central Administrative Expenditure	359	395	.05
—	Other Expenditure	—	—	—
744105	Total Expenditure of H.M.C.	690595	743659	100.00

SUMMARY OF GROUP EXPENDITURE
 NORTH WALES MENTAL HOSPITAL MANAGEMENT COMMITTEE
 YEAR ENDED 31.3.51

Particulars	1950-51	1949-50
Salaries and Wages	1,100	1,050
Grants	2,000	1,900
Depreciation	100	100
Repairs and Maintenance	500	450
Light and Heat	300	280
Telephone	100	100
Printing and Stationery	50	50
Travel	20	20
Insurance	100	100
Interest	100	100
Other	100	100
Total	5,300	5,100

