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COUNTY OF SUTHERLAND

ANNUAL REPORT

ON THE

HEALTH, VITAL STATISTICS, and SANITARY

CONDITIONS of the COUNTY

(Including the Burgh of Dornoch)

For the Year Ended 31st DECEMBER, 1952

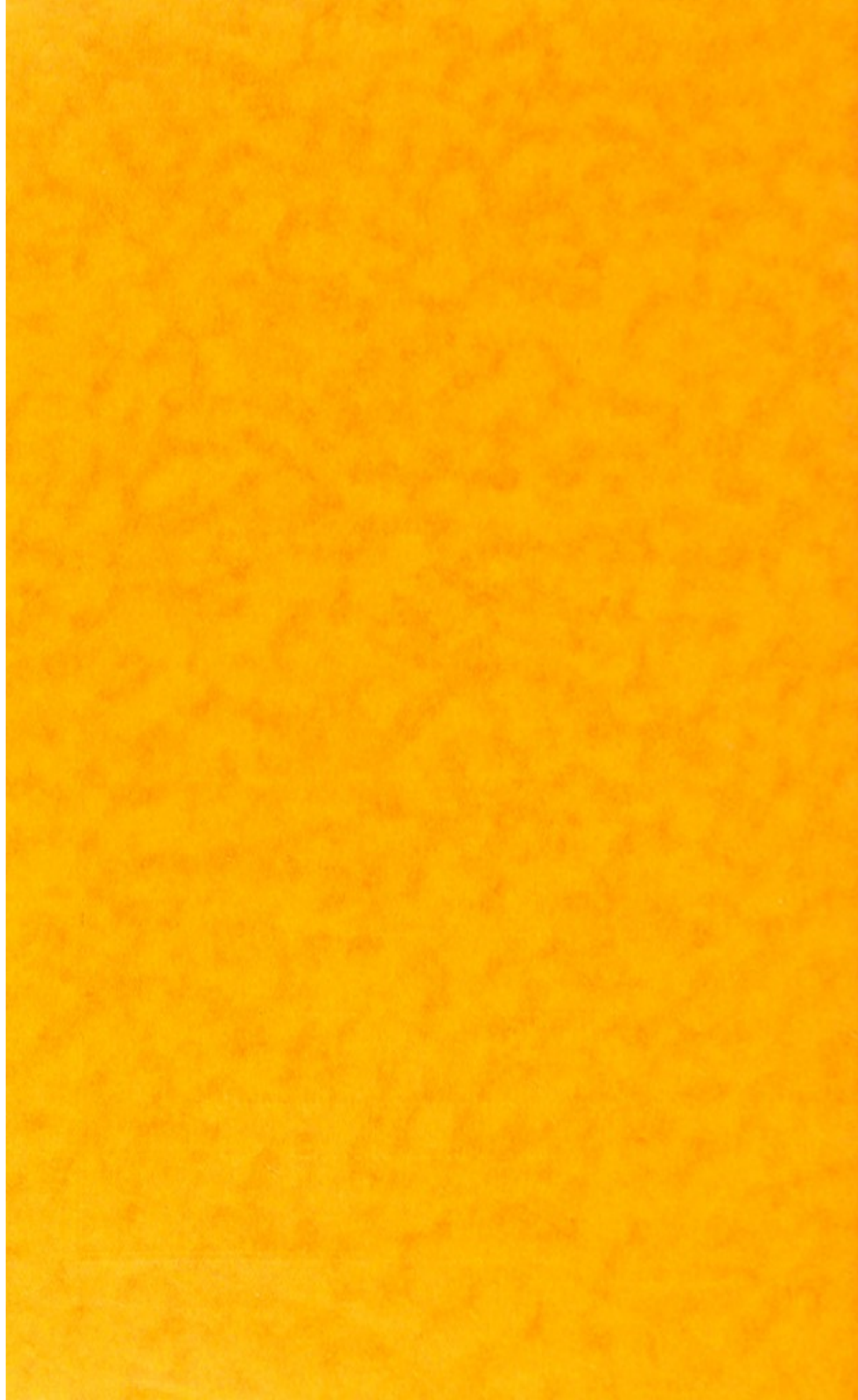
AND ON

SCHOOL HEALTH ADMINISTRATION

For the Year Ended 31st JULY, 1952

By K. A. MACRAE, M.B., Ch.B., D.P.H.

Medical Officer of Health



Public Health Office,
Bonar-Bridge,
17th August, 1953.

To
The Department of Health for Scotland
and
The Local Authority, County of Sutherland.

ANNUAL REPORT BY MEDICAL OFFICER OF HEALTH

GENTLEMEN,

I have the honour to submit my Annual Report on the Health Services and Vital Statistics of the County of Sutherland for the year ended 31st December, 1952.

I resumed active duty as Medical Officer of Health on 1st April, 1952, and would like to thank the Council for the kind welcome I received on my return.

I have the honour to be,

Gentlemen,

Your obedient servant,

K. A. MACRAE,

Medical Officer of Health.



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LIST OF STAFF

Medical Officer of Health—

K. A. MACRAE, J.P., M.B., Ch.B., D.P.H.

County Dental Officer—

C. C. FORSYTH, L.R.C.S., L.D.S.

Superintending Nursing Officer—

Miss D. G. MILLER.

District Nursing Sisters—

Name—	District—
Mrs KENNEDY	LOCHINVER
Mrs MACLEOD	STOER
Miss CAMPBELL	KINLOCHBERVIE
Mrs CAMPBELL	DURNESS
Miss MACKAY	TONGUE
Mrs BUDGE	BETTYHILL
Miss ROSS	MELVICH
Miss MACPHERSON	HELMSDALE
Miss GILCHRIST	BRORA
Miss MUNRO	GOLSPIE
Miss REID	ROGART
Miss RANKIN	LAIRG
Miss GRAHAM	DORNOCH
Miss VASS	BONAR-BRIDGE
Miss MACDONALD	Relief Duty

PUBLIC HEALTH STAFF

County Sanitary Inspector—

E. W. BRANNEN, L.R.I.B.A., M.R.San.I.

Assistant Sanitary Inspector—

H. STEELE, M.R.S.A.S.

SOCIAL WELFARE

Chief Officer—

D. J. MACKAY, Bonar-Bridge

District Officers—

H. W. MACKAY, Lochinver

A. C. MACKAY, Strathy

C. B. MACKAY, Scourie

A. MACLEOD, Rogart

O. ARMSTRONG, Helmsdale

Children's Officer—

ALEXANDER SUTHERLAND, Brora

VITAL STATISTICS

COUNTY DISTRICT (Including Burgh of Dornoch)

TABLE I.

POPULATION

As estimated by General Registrar

1943	..	..	..	..	..	13,458
1944	..	..	..	..	..	13,350
1945	..	..	..	..	..	13,352
1946	..	..	..	..	..	14,035
1947	..	..	..	..	..	14,443
1948	..	..	..	..	..	14,393
1949	..	..	..	..	..	14,420
1950	..	..	..	..	..	13,951
1951	..	..	..	..	..	13,686
1952	..	..	..	..	..	13,519

BIRTHS

During the year the births of 224 children were credited to the County (173 being registered in the district, 12 transferred out, and 63 transferred in).

TABLE II.

The following table shows the Birth Rates for the past 10 years:—

BIRTH RATES

						Rate per 1000.
1943	..	..	..	..	..	17.6
1944	..	..	..	..	..	16.2
1945	..	..	..	..	..	12.5
1946	..	..	..	..	..	17.8
1947	..	..	..	..	..	17.7
1948	..	..	..	..	..	14.9
1949	..	..	..	..	..	15.8
1950	..	..	..	..	..	16.8
1951	..	..	..	..	..	17.0
1952	..	..	..	..	..	16.6

Scotland 1952

17.7

Of the 224 Births, 14 were illegitimate—6.3 per cent. of total.

TABLE III.

MARRIAGES

	Number.	Rate per 1000.
County	53	3.9
Scotland	—	8.0

DEATHS

During 1952, 194 persons died in the County. Six deaths were transferred to other districts, and 26 deaths which occurred outside the County were transferred in, making a total of 214. The resulting Death Rate was 15.8 per 1000 of the estimated population.

TABLE IV.

DEATH RATES

						Rate per 1000.
1943	..	..	..	..	..	19.1
1944	..	..	..	..	..	16.9
1945	..	..	..	..	..	17.5
1946	..	..	..	..	..	15.4
1947	..	..	..	..	..	17.0
1948	..	..	..	..	..	14.3
1949	..	..	..	..	..	16.9
1950	..	..	..	..	..	14.4
1951	..	..	..	..	..	16.7
1952	..	..	..	..	..	15.8

Scotland 1952

12.0

Owing to the small population of the County the Death Rate as calculated fluctuates greatly from year to year, as is evident from the preceding table.

The Death Rate for the County is considerably greater than that for Scotland, but when adjusted for age and sex distribution it falls to 10.1 per 1000 of population, which is less than that for Scotland as a whole.

TABLE V.

DEATHS IN EACH AGE GROUP

Age	-1	1-	5-	10-	15-	25-	35-	45-	55-	65-	75-	85 & over
Number ...	9	—	—	—	1	5	9	9	22	44	75	40
Per Cent...	4.2	—	—	—	.5	2.3	4.2	4.2	10.3	20.6	35.0	18.7

TABLE VI.

CAUSES OF DEATH

Typhoid Fever (including Paratyphoid)	..	..	..	—
Measles	..	..	..	—
Scarlet Fever	..	..	..	—
Whooping Cough	..	..	..	1
Diphtheria	..	..	..	—
Influenza	..	..	..	—
Cerebro-Spinal Fever	..	..	..	—
Other Epidemic Diseases	..	..	..	—
Tuberculosis of Respiratory System	..	..	..	2
Other Tuberculosis Diseases	..	..	..	—
Other Infectious and Parasitic Diseases	..	..	..	—
Cancer, Malignant Disease	..	..	..	30
Diabetes Mellitis	..	..	..	1
Other General Diseases: Chronic Poisonings	..	..	..	3
Cerebral Haemorrhage, etc.	..	..	..	28
Other Diseases of Nervous System and Sense Organs	..	..	..	3
Heart Disease	..	..	..	73
Other Circulatory Disease	..	..	..	10
Bronchitis	..	..	..	2
Pneumonia (all forms)	..	..	..	3
Other Respiratory Diseases	..	..	..	1
Gastric and Duodenal Ulcer	..	..	..	1
Diarrhoea, etc., all ages	..	..	..	—
Appendicitis	..	..	..	1
Cirrhosis of Liver, etc.	..	..	..	1
Other Diseases of Liver, etc.	..	..	..	4
Other Digestive Diseases	..	..	..	1
Acute and Chronic Nephritis	..	..	..	2
Other Diseases of Genito-Urinary System	..	..	..	6
Puerperal Sepsis	..	..	..	—
Other Puerperal Causes	..	..	..	1
Diseases of Skin and Locomotor System	..	..	..	2
Congenital Debility, Premature Birth, Malformations, etc.	..	..	..	8
Old Age	..	..	..	19
Suicide	..	..	..	1
Other Violence	..	..	..	8
Causes ill-defined or unknown	..	..	..	2

INFANTILE MORTALITY

During 1952 nine children under 1 year of age died in the County—an Infantile Mortality Rate of 40 per 1000 births.

The Infantile Mortality Rates for the past ten years are shown in the following table;—

TABLE VII.

INFANTILE MORTALITY

						Rate per 1000.
1943	..	..	..	..	..	55.0
1944	..	..	..	..	..	51.0
1945	..	..	..	..	..	11.0
1946	..	..	..	..	..	20.0
1947	..	..	..	..	..	43.0
1948	..	..	..	..	..	51.0
1949	..	..	..	..	..	4.0
1950	..	..	..	..	..	55.0
1951	..	..	..	..	..	39.0
1952	..	..	..	..	..	40.0
Scotland 1952	..	..	..	..	..	35.0

The average Infantile Mortality Rate in Sutherland over the past 10 years has been 36.9 per 1000 births, and this year it stands at 40.0, this being due chiefly to the occurrence of several premature births and congenital deformities. The rate, however, fluctuates considerably, and in 1949 it was the lowest ever recorded for the County.

Infantile deaths were due to the following causes:—

Premature Birth and Congenital Debility	..	..	3
Congenital Deformity	..	..	3
Whooping Cough	..	..	1
Other Diseases	..	..	2

TUBERCULOSIS

One Male and One Female died from Pulmonary Tuberculosis during the year, giving a Phthisis Death Rate of 0.15 per 1000.

The Death Rate for this Disease for the last ten years is shown in Table VIII.

TABLE VIII.

PHTHISIS DEATH RATE

						Rate per 1000.
1943	..	..	..	..	..	0.74
1944	..	..	..	..	..	0.22
1945	..	..	..	..	..	0.30
1946	..	..	..	..	..	0.70
1947	..	..	..	..	..	0.55
1948	..	..	..	..	..	0.14
1949	..	..	..	..	..	0.49
1950	..	..	..	..	..	0.14
1951	..	..	..	..	..	0.44
1952	..	..	..	..	..	0.15
Scotland 1952	..	..	..	..	..	0.27

The Phthisis Death Rate for 1952 is fortunately low, but again there is some fluctuation in this death rate on account of the small population from which the calculation is made. However, as will be seen in the section of the report dealing with tuberculosis, the average for the decade at 0.39 is about one-third of what the average was in the decade ended 1932.

TABLE IX.

NON-PULMONARY T.B. DEATH RATE

						Rate per 1000.
1943	..	..	..	..	..	0.08
1944	..	..	..	..	..	0.08
1945	..	..	..	..	..	0.07
1946	..	..	..	..	..	0.29
1947	..	..	..	..	..	0.07
1948	..	..	..	..	..	0.07
1949	..	..	..	..	..	0.06
1950	..	..	..	..	..	0.00
1951	..	..	..	..	..	0.00
1952	..	..	..	..	..	0.00
Scotland 1952	..	..	..	..	..	0.05

DEATHS FROM EPIDEMIC DISEASES

One death from Epidemic Disease occurred in the County during the year, giving a rate per thousand of population of 0.07, compared with that for Scotland of 0.08.

The only death in this group was due to whooping cough in a young baby.

In previous years influenza used to take quite a heavy toll of the older people, but no person is recorded as having died of influenza in 1952, although pneumonia and bronchitis accounted for four deaths in the older age groups.

NATIONAL HEALTH SERVICE (SCOTLAND) ACT, 1947 LOCAL HEALTH AUTHORITY FUNCTIONS

Review of Services under Part III. of the National Health Service (Scotland) Act, 1947—5th July, 1948, to 31st December, 1952.

When the Sutherland County Council assumed the responsibilities of Local Health Authority under the National Health Service (Scotland) Act, 1947, they took over all the Nursing personnel and equipment of the Sutherland Nursing Association and employed this staff directly for the Midwifery, Home Nursing, and Health Visiting Services required of the Local Health Authority. A County Superintending Nursing Officer and fifteen District Nursing Sisters (all Queen's Nurses) have since 5th July, 1948, been employed to undertake these combined duties. This staff, for ordinary purposes, has proved reasonably adequate, but on certain occasions, when there was sickness of personnel or additional pressure of work in certain districts, temporary additional staff was employed.

Care of Mothers and Young Children

Regular home visitation of expectant Mothers and young Children is undertaken by the District Nursing Sisters, and as these District Nursing Sisters also act as Midwives, conducting domiciliary Midwifery, there is the closest liaison between the Health Visiting Service and that for Midwifery. In addition, every endeavour is made to co-operate to the fullest extent with all Medical Practitioners in the area, and with Consultants and Specialists appointed by the Regional Hospital Board. Since the Service came into operation on 5th July, 1948, 13,718 visits were paid to Infants under one year, 13,614 to Children from one to five years of age, and 6,769 visits to expectant Mothers.

A priority Dental Service to expectant and nursing Mothers and young Children is provided in association with the Dental Service to School Children. Every endeavour has been made to encourage Mothers to make use of this service for themselves and their young Children. The use made of School Clinics, however, by this section of the Community has been disappointing. In the four and a half years to 31st December, 1952, twenty-four Mothers were treated, and fifty-five young Children. Although the figures of persons treated by the Council's Dental Officer are small they represent only a small proportion of the dental treatment actually carried out for Mothers and young Children, as visiting Dentists undertaking service under the National Health Service Act undertake treatment for a good many more.

Midwifery

The Local Health Authority have appointed their Superintending Nursing Officer to be Supervisor of Midwives, and practically all domiciliary cases conducted in the County are undertaken by the Local Authorities' District Nursing Sisters. Since 5th July, 1948, 568 cases of domiciliary Midwifery have been undertaken. During this period the working of the various Midwifery Acts has continued to be carried out in a satisfactory manner, and I have received no complaints regarding any Midwife discharging duties under the service.

Health Visiting

In close association with the Authority's arrangements for the care of Mothers and young Children, Midwifery, and Home Nursing the Superintending Nursing Officer and all district Nursing Sisters undertake the duties of health visiting, which include:—

- 1—Visitation of persons in their homes for the purpose of giving advice on:—
 - (a) Care of young Children. Persons suffering from illness. Expectant and Nursing Mothers.
 - (b) Methods necessary to promote health and to prevent the spread of infection.
- 2—Home visitation of cases of Tuberculosis and others within the scope of the arrangements made under Section 27 of the Act.

This arrangement, owing to the very scattered nature of the population in Sutherland, and the large amount of travelling required, has proved quite satisfactory. The number of visits paid is mentioned under each section served.

Home Nursing

All District Nursing Sisters undertake this work in their respective districts, in very close co-operation with Medical Practitioners, under whose instructions they act when carrying out their nursing duties to patients. Standing rules for Nurses in the conduct of cases were drawn up in consultation with the Local Executive Council, and these are in operation. During the period from 5th July, 1948, to 31st December, 1952, Home Nursing visits, exclusive of Tuberculosis, amounted to 105,333.

Vaccination and Immunisation

Vaccination.—The arrangements for Vaccination provide for this service being carried out by Medical Practitioners throughout the County, the Vaccination Lymph being supplied by the Local Health Authority through the Medical Officer of Health, and, during the period under review, the following Vaccinations were carried out:—Primary 477, Re-Vaccination 182.

Diphtheria Immunisation.—The arrangements for Immunisation against Diphtheria are the same as those described for Vaccination, Medical Practitioners throughout the County carrying out the necessary procedure. During the period under review, 625 pre-school children and 123 school children received full primary Immunisation.

In 1950, special attention was directed to the provision of "Boosting" Doses of Diphtheria Prophylactic, particularly for children entering school for the first time, and all parents have since the beginning of 1951, been circularised, recommending this procedure when their children are receiving final visits under the Health Visiting Scheme. An effort is also being made to have school children, who have not already been treated on entering school, immunised. From 1/1/51 to 31/12/52, 537 Maintenance Doses are recorded.

Parents, on the recommendation of their Doctor, have the opportunity of receiving for their children Whooping Cough immunisation, combined with that for Diphtheria.

Prevention of Illness, Care and After Care

The work in this sphere, in addition to the usual steps taken by the Medical Officer of Health in the control of Infectious Diseases generally, is directed chiefly against Tuberculosis. District Nursing Sisters carry out regular advisory visits to cases on the County Tuberculosis Register, and make monthly reports on each case to the Medical Officer of Health. In addition, they give home nursing service to Tuberculosis patients requiring it. The average number of cases of Tuberculosis on the Register has been, during the period under review, 119, and the advisory visits to patients under supervision at home during the four and half years from 5/7/48 to 31/12/52 were 6,184. During the same period, an additional 708 Nursing visits were paid.

By arrangement between the Regional Hospital Board, and the Local Health Authority, the services of the Medical Officer of Health have been enlisted whereby he acts as Tuberculosis Officer for the County, and in close co-operation with Medical Practitioners and Health Visitors he carries out medical supervision of Tuberculosis patients in their homes.

In order to give a reasonably good opportunity for the re-housing of families in which there is a case of Tuberculosis, the Medical Officer of Health and County Sanitary Inspector have been appointed to each

Local Housing Sub-Committee of the Council in considering the letting of County Council houses which become available from time to time. A proportion of "points" have been allocated to the Medical Officer of Health, which he may use to assist Tuberculosis patients to obtain tenancy.

Boarding out of children living in a home where there is an open case of Tuberculosis has received attention, and, since 1949, nine such children have been boarded out with relatives, or at the Seaforth Home, Canon-Bridge, for varying periods.

The British Red Cross Medical Loan Depot has been used to provide domestic equipment, nursing requisites, and clothing to needy persons suffering from illness. All articles have been supplied free of charge to those patients who are certified by the Superintending Nursing Officer as in need. Extra nourishment in the form of milk and malt preparations is issued, as considered necessary by the Medical Officer of Health, to patients on home treatment.

So far as re-employment of ex-Tuberculosis patients is concerned, there has been full co-operation between the Medical Officer of Health and the Ministry of Labour in assisting persons to secure suitable employment.

Domestic Help

A scheme of Domestic Help for Households where such help is required because of illness, infirmity, or confinement has been evolved. The Local Authority provide domestic helps by the employment of part-time workers on a weekly or hourly basis, whereby they give an agreed number of hours per week when local demand requires. The standard charge to the householder is the actual cost of the domestic help, but there is a scheme for the remission of this charge when application for such is made by the householder, who is required to give a full statement of household income. This scheme came into operation and was first advertised on 4th August, 1949. It has continued in operation with some minor changes in assessment of charges. Since August, 1949, altogether 105 households have been served under the domestic help scheme up until 31/12/52. Thirty-nine of the households served were on account of confinement.

General

The Local Health Authority have, from the commencement of the National Health Service Scheme, worked in the closest possible co-operation with all Medical Practitioners in the area, and with other health service organisations. A Local Advisory Co-ordinating Committee for Health Services for the County of Sutherland, consisting of Representatives of the County Council as Local Health Authority, Representatives of the Local Executive Council, and of the Northern Regional Hospital Board, was formed, and had its first meeting on 24th March, 1949.

In the autumn 1952, on the recommendation of the Medical Officer of Health, in order to bring about an even closer liaison between Medical Practitioners and the Local Health Authority services, and so enable the work entailed by the various schemes to be more effectively carried out, a specific agreement was concluded between the Sutherland County Council and Medical Practitioners, whereby the latter assist in their Practices with Local Health Authority services. In respect of this an annual sum of £20 is paid to Medical Practitioners agreeing to undertake the service.

As mentioned earlier in this report, the Medical Officer of Health, by arrangement between the County Council and the Northern Regional Hospital Board, acts as Tuberculosis Officer for the County. In addition to this, he is Superintendent of the Sutherland Group of Hospitals run by the Regional Hospital Board, so that there is a close liaison between the Local Health Authority, the Medical Services in various districts, and the Hospitals.

Home Visitation of Mothers and Young Children

	Number of Infants under 1 year visited	Number of visits paid to Infants under 1 year	Number of Children 1 to 5 years visited	Number of visits paid to Children 1 to 5 years	Number of Expectant Mothers visited	Number of visits to Expec- tant Mothers
Lochinver ..	13	77	32	132	8	32
Stoer ..	5	36	9	66	7	18
Eddrachilles ..	40	205	77	487	24	116
Lairg ..	25	177	53	183	22	169
Melvich ..	21	137	50	196	10	52
Golspie ..	37	245	109	259	45	241
Bettyhill ..	18	121	32	149	9	50
Kildonan and Loth	43	264	95	258	27	177
Brora ..	63	372	111	342	35	257
Rogart ..	15	74	26	99	9	62
Tongue ..	27	163	64	202	14	86
Dornoch and Embo	59	411	137	117	35	195
Creich ..	35	246	103	255	17	92
Durness ..	14	74	28	72	8	64
Total ..	415	2602	926	2817	270	1611

Home Nursing from 1/1/52 to 31/12/52

District.	General Cases.	General Nursing Visits.
Bettyhill ..	128	1046
Clyne ..	163	2015
Creich ..	73	776
Dornoch and Embo	122	2175
Durness ..	42	583
Eddrachilles ..	131	2318
Golspie ..	203	2981
Kildonan and Loth	142	1893
Lairg ..	113	1858
Lochinver ..	194	2225
Melvich ..	109	1769
Rogart ..	120	1581
Tongue ..	86	729
Stoer ..	135	2700
Total ..	1761	24649

DOMESTIC HELP

See Table V. of General Statistics relating to Local Health Authority Services.

VACCINATION AND IMMUNISATION

The facilities for vaccination and immunisation against diphtheria have continued to be provided by general practitioners throughout the County. Table overleaf.

Diphtheria Immunisation—1/1/52 to 31/12/52

	New Cases.	Maintenance Innoculations.
Pre-School Children ..	135	2
School Children ..	14	51
Total ..	149	53

VACCINATION, 1952

Year of birth of persons.	Number of persons primarily vaccinated during period				Number of persons re-vaccinated during period				Number of persons specially reported during period because of actual or alleged complication of vaccination.
	Typical vaccinia greatest at 7th-10th day.	Accelerated (vaccinoid) Reaction 5th-7th day.	Reaction greatest at 2nd-3rd day.	No local reaction.	Typical vaccinia greatest at 7th-10th day.	Accelerated (vaccinoid) reaction 5th-7th day.	Reaction greatest at 2nd-3rd day.	No. local reaction.	
1952	52	2	2	3					
1951	24								
1950	2								
1949	—								
1948	2								
1947	1								
1946	1								
1945	—							2	
1944	—								
1943	—								
1942	—								
1941	—								
1940	—								
1939	—								
1938	—								
1937	4				2	3	2	2	
or earlier									
TOTALS	86	2	2	3	2	3	2	4	

Tuberculosis Visiting and Nursing for Year 1952

District.	No. of Cases.	Advisory Visits.	Nursing Visits.	Total.
Lochinver	5	55	—	55
Eddrachilles	11	120	—	120
Stoer	5	20	6	26
Lairg	6	67	—	67
Melvich	8	87	96	183
Golspie	7	82	2	84
Bettyhill	6	72	—	72
Kildonan and Loth ..	11	122	7	129
Brora	12	127	—	127
Rogart	4	33	—	33
Tongue	15	154	4	158
Dornoch and Embo ..	11	108	—	108
Creich	3	25	—	25
Durness	3	36	—	36
Total	107	1108	115	1223

MENTAL HEALTH SERVICE

The following is a list of the Authorised Officers appointed under the Local Authority's arrangements for the care of mental defectives and persons of unsound mind.

District—	Authorised Officer—
Assynt	H. W. Mackay, Lochinver.
Eddrachilles and Durness ..	G. B. Mackay, Scourie.
Tongue and Farr	A. C. Mackay, Strathy.
Kildonan, Loth, and Clyne ..	Ormston Armstrong, Helmsdale.
Golspie, Rogart, and Lairg ..	A. Macleod, Rogart.
Dornoch and Creich	D. J. Mackay, Bonar-Bridge.

There is no change in the arrangements since my Report of 1948, and lunacy cases requiring hospital care have ready access to Craig Dunain Mental Hospital, Inverness. There is, however, a great and pressing need for institutional accommodation for mental defectives in the whole of the northern region and this problem, in my opinion, can only be overcome by the joint efforts of the Northern Counties. There are at present young persons on the waiting list of special institutions in the South for many years without there appearing to be any hope of securing their early admission. Some of these have simply had to wait at home doing nothing, as they have shown themselves unsuitable for attendance at an ordinary public school.

GENERAL STATISTICS RELATING TO LOCAL HEALTH AUTHORITY SERVICES

I. CARE OF MOTHERS AND YOUNG CHILDREN (Section 22)

(1) Ante-Natal and Post-Natal Service

	No. of clinics provided at end of year whether held at Child Welfare Clinics or other premises.
Local Health Authority Clinics :	
Ante-natal Clinics	NIL
Post-natal Clinics	NIL
Clinics provided by Voluntary Organisations :	
Ante-natal Clinics	NIL
Post-natal Clinics	NIL

(2) Child Welfare Clinics

	No. of clinics provided at end of year.
Local Health Authority Clinics	NIL
Clinics provided by Voluntary Organisations	NIL

(3) Dental Care

	No. Inspected by Dental Officers during the year.	No. found to require treatment during the year.	No. accepting treatment during the year.	No. actually treated by Dental Officers during the year.
(1)	(2)	(3)	(4)	(5)
Expectant Mothers	3	3	3	3
Nursing Mothers .....	....	....	....	....
Pre-School Children	14	13	13	13

(4) Mother and Baby Homes—None provided

(5) Day Nurseries (including 24-hour Nurseries) as at end of year—None provided

(6) Residential Nurseries and Children's Homes provided as part of the Authority's arrangements under Section 22 of the National Health Service (Scotland) Act, 1947—None provided

II. MIDWIFERY (Section 23)

- (1) Total number of Births occurring in the area during year—that is before correction for mother's residence :
 Live Births, 172 ; Still Births, 0 ; Total 172
- (2) Total number of births in (1) occurring in institutions (including private maternity homes) 80
- (3) Total number of births in (1) occurring at home .. 92
- (4) Number of births in (3) classified to show nature of attendance at birth:—

(1)	Cases dealt with under Section 23(2) of the National Health Service (Scotland) Act 1947			Other domiciliary cases.			Total.
	Doctor engaged and present at confinement.	Doctor engaged and not present at confinement.	Midwife alone—no doctor engaged.	Doctor engaged	Midwife alone—no doctor engaged.	Without doctor or midwife.	
(2)	(3)	(4)	(5)	(6)	(7)	(8)	
(a) Midwives employed by the Authority (including those engaged on a fee-per-case basis)	52	38	2	....	....	....	92
(b) Midwives employed by Voluntary Organisations ....	....	....	....	....	....	....	....
(c) Midwives employed by Hospital Boards of Management ....	....	....	....	....	....	....	....
(d) Private practising midwives ....	....	....	....	....	....	....	....
(e) Totals	52	38	2	....	....	....	92

(5) Medical Aid under Section 22(1) of the Midwives (Scotland) Act, 1915

Number of cases in which medical aid was summoned during the year under Section 22(1) of the Midwives (Scotland) Act, 1915, by a Midwife:—

(a) For Domiciliary Cases:—

- (1) Where the medical practitioner had arranged to provide maternity medical services under the National Health Service NIL
- (2) Others NIL

(b) For Cases in Institutions NIL

(6) Administration of Analgesics

(a) Number of midwives in practice in the area qualified to administer Analgesics in accordance with the requirements of the Central Midwives Board for Scotland:—

- (1) Domiciliary 14
- (2) In Institutions NIL

- (b) Number of domiciliary midwives who received their training during the year —
- (c) Number of sets of Apparatus for the administration of Analgesics in use at 31st December, 1952, by Domiciliary Midwives employed by the Authority, or employed by voluntary organisations in the Authority's area 8
- (d) Number on order at 31st December, 1952 —
- (e) Number of cases in which Analgesics were administered by Midwives in Domiciliary Practice during the year 67
- (f) Number of cars in use by Midwives at 31st December, 1952 17

III. HEALTH VISITING (Section 24)

(1)	No. of Visits paid by Health Visitors during Year									Total Visits Paid (12)	
	+ Expectant Mothers	Children under 1 year of age		Children between the ages of 1 and 5		Tuberculosis Cases		Other Cases			
		No. Visited (2)	Total Visits (3)	No. Visited (4)	Total Visits (5)	No. Visited (6)	Total Visits (7)	No. Visited (8)	Total Visits (9)		No. Visited (10)	Total Visits (11)
Health Visi- tors employed by the Auth- ority	143	912	415	2602	926	2817	107	1223	27	63	7617
Health Visi- tors employed by Voluntary Organisations											

+ These visits do not include visits paid by a midwife health visitor who is to attend the confinement as a midwife or maternity nurse.

IV. HOME NURSING (Section 25)

(1)	No. of Cases attended by Home Nurses under arrangements made under this Section. (2)	No. of Visits paid by Nurses to these Cases. (3)
Home Nurses employed directly by the Authority	1,761	24,649
Home Nurses employed by Voluntary Organisations	NIL	NIL

V. DOMESTIC HELP (Section 28)

(1) Number of Domestic Helps employed during the year:	
(a) Whole-time	—
(b) Part-time (have enrolled for service and are employed when required)	11
(c) Retaining fee basis	—
(2) Number of cases for which Helps were provided during year	32
(3) Number of cases in (2) provided on account of confinement:—	
(a) At home	8
(b) In hospital	2
(4) Number of cases in (2) provided on account of chronic sick, including aged and infirm (if available) ..	18

CONTROL OF INFECTIOUS DISEASES

The following table shows cases of Infectious Disease notified during the year 1952:—

Chicken Pox	1
Cerebro-Spinal Fever	—
Continued Fever	1
Diphtheria	—
Dysentery	—
Encephalitis Lethargica	—
Enteric Fever	—
Erysipelas	1
Infective Jaundice	—
Malaria	—
Ophthalmia Neonatorum	—
Acute Influenzal Pneumonia	—
Acute Primary Pneumonia	1
Acute Poliomyelitis	—
Puerperal Fever	—
Puerperal Pyrexia	1
Scarlet Fever	3
Whooping Cough	23
Pulmonary Tuberculosis	9
Non-Pulmonary Tuberculosis	2
	—
	42

Of the total number of cases notified 12 were treated in hospital, arrangements being made for the isolation and treatment of the other 30 cases at home.

Apart from the occurrence of whooping cough cases, which numbered 23, it is gratifying to note that so far as notifiable infectious disease is concerned, only a few small outbreaks occurred.

Diphtheria

I am pleased to be able to report that no case of Diphtheria was notified in the County in 1952. Immunisation against this disease has continued to be carried out as in previous years, and the work done is described under an earlier section of the report.

Scarlet Fever

Three cases of Scarlet Fever were notified during the year, one from Brora in February, one from the Invershin district in August, and one other from Brora in October. All cases were of a mild type and only one was required to be removed to hospital for isolation.

Poliomyelitis

I am glad to be able to report that no case of Poliomyelitis was notified in the County during 1952, but this is an illness that quite often suddenly makes its appearance without any warning and suspected cases will always require close observation.

Acute Influenzal Pneumonia and Acute Primary Pneumonia

Only one case of Acute Primary Pneumonia was notified during the year and removed to hospital for treatment. No cases of Influenzal Pneumonia were reported, and as noted in a previous section of this report no deaths from Influenza were recorded by the Registrar General.

Puerperal Fever and Puerperal Pyrexia

No case of the former but one of the latter was notified, which turned out to be an intercurrent infection having no direct connection with the patient's confinement.

Ophthalmia Neonatorum

No cases were reported.

Whooping Cough

Twenty-three cases of Whooping Cough were notified during the year, all of which occurred in the Parish of Tongue, mainly in the Skerry district.

Erysipelas

One case was notified and treated at home.

Continued Fever

The one case notified under this category showed a chest condition, which after a considerable period of treatment recovered satisfactorily.

Non-Notifiable Infectious Disease

Cases of Measles were prevalent during the latter part of the year in Rogart and Blarich. Outbreaks of German Measles occurred in Dornoch and in Brora, and several cases of Chickenpox were reported from Strathy in December. No schools were required to be closed on account of infectious disease during 1952.

TUBERCULOSIS

Nine notifications of Pulmonary Tuberculosis and two of Non-Pulmonary Tuberculosis were received during the year and the following table shows the distribution of the cases in the different districts of the County:—

Parish.	Pulmonary.	Non-Pulmonary.
Assynt	—	—
Clyne	4	1
Creich	2	—
Dornoch	—	—
Durness	2	—
Eddrachilles	—	—
Farr	—	1
Golspie	—	—
Kildonan	—	—
Lairg	—	—
Loth	—	—
Rogart	1	—
Tongue	—	—
Total	9	2

Of the cases notified the following received Institutional treatment:—

Pulmonary	8
Non-Pulmonary	2

Two deaths occurred during the year from Pulmonary Tuberculosis.

In the County at 31st December, 1952, there were known to the Public Health Authority 117 cases of Tuberculosis (all forms) and the following table shows the type, age, and sex distribution of the cases:—

Pulmonary—									
Age in Years.	-5	5-10	10-15	15-25	25-35	35-45	45-65	65	Total.
Males ..	—	—	—	7	11	7	8	1	34
Females ..	—	—	—	11	9	9	9	1	39
Total ..	—	—	—	18	20	16	17	2	73
Non-Pulmonary—									
Males ..	—	2	5	4	1	3	1	—	16
Females ..	2	3	5	6	4	2	6	—	28
Total ..	2	5	10	10	5	5	7	—	44
Combined Total..	2	5	10	28	25	21	24	2	117

TUBERCULOSIS STATISTICS FOR YEARS 1932-1952

NOTIFICATIONS AND DEATH RATES

	1932	1933	1934	1935	1936	1937	1938	1939	1940	1941	1942
Pulmonary											
Notifications ..	24	21	18	15	13	14	13	11	14	22	25
Death Rate ..	1.01	0.57	0.56	1.14	0.63	0.58	0.33	0.46	0.77	0.78	0.65
Non-Pulmonary											
Notifications ..	14	17	22	8	8	24	18	12	12	15	16
Death Rate ..	0.13	0.32	0.25	0.13	0.38	0.19	0.14	0.00	0.07	0.41	0.07
	1943	1944	1945	1946	1947	1948	1949	1950	1951	1952	
Pulmonary											
Notifications ..	27	21	12	15	16	17	10	8	8	9	
Death Rate ..	0.74	0.22	0.30	0.70	0.55	0.14	0.49	0.14	0.44	0.15	
Non-Pulmonary											
Notifications ..	22	9	5	9	10	12	10	8	5	2	
Death Rate ..	0.09	0.08	0.06	0.07	0.29	0.07	0.06	0.00	0.00	0.00	

Treatment

The following table shows the number of cases who received treatment in Sanatoria and Hospitals during the year:—

	In Hospital 1-1-52.	Admitted.	Discharged.	Died.	In Hospital 31-12-52.
Pulmonary:—					
Males ..	5	9	6	—	8
Females ..	9	5	5	1	8
Non-Pulmonary:—					
Males ..	—	2	2	—	—
Females ..	—	4	4	—	—
Total ..	14	20	17	1	16

Surgical Treatment—

During the year, Tuberculosis patients continued to benefit by the facilities provided by the Surgical Consultant Service.

Death Rate from Phthisis over three Decades

The number of deaths registered as due to Phthisis during the year 1952 was two, a death rate of 0.15 per 1000. The death rate from this disease over the past three decades is shown in the following table:—

1923	1.04	1933	0.57	1943	0.74
1924	1.4	1934	0.56	1944	0.22
1925	1.52	1935	1.14	1945	0.30
1926	0.64	1936	0.63	1946	0.70
1927	1.39	1937	0.58	1947	0.55
1928	0.74	1938	0.33	1948	0.14
1929	0.81	1939	0.46	1949	0.49
1930	1.39	1940	0.77	1950	0.14
1931	0.88	1941	0.78	1951	0.44
1932	1.01	1942	0.65	1952	0.15
Average for Decade .. 1.08		Average for Decade .. 0.65		Average for Decade .. 0.39	

The Phthisis death rate for 1952 is considerably less than the death rate from Phthisis in Scotland as a whole. The average for the decade ended 1952 is considerably less than the average for the decade ended 1942, and only slightly more than one-third of the average death rate in the decade ended 1932.

SCHOOL HEALTH SERVICE

GENERAL STATISTICS

Population of the area 13,686

Number of Schools:—

(a) Primary (under Education Authority)	24
(b) Secondary (under Education Authority)	2 (Sen.)
	10 (Jun.)
(c) (1) Special Schools	1
(2) Special Classes in ordinary Schools	—
(d) In receipt of grant from Education Authority and under medical inspection	—
Number of children on the Registers (i.e. for whole area—not individual schools)	2,127
Number of children in average attendance (i.e. for whole area—not individual schools)	2,044

TABLE I.

Total number of children examined at—

Ordinary Schools.		(a) Systematic Examinations (Age Groups)	(b) Other Systematic Examinations at Schools with roll under 30 where all children are fully examined.
Entrants	.. ..	199	
Second Age Group	.. ..	201	
Third Age Group	.. ..	155	
Fourth Age Group	.. ..	21	
Total	.. ..	576	144

(c) Other Examinations—

Special Cases	.. ..	86
Vision & Hearing (Born 1944)	.. ..	147
Re-inspection by Medical Officer	.. ..	153
Total	.. ..	386

Number of individual children inspected at Systematic Examinations, who were notified to parents as requiring treatment, including eye defects, but excluding uncleanness and dental caries:—

Entrants	.. ..	46
Second Age Group	.. ..	30
Third Age Group	.. ..	18
Fourth Age Group	.. ..	1
Other Systematic Examinations	.. ..	29
Total	.. ..	124
Notices to Special Cases	.. ..	24

Average Heights and Weights of Children in Systematic Age Groups

Weighed and Measured during Year 1951-52.

Boys.				Girls.			
No. Exd.	Average Age	Height in Ins.	Weight in Lbs.	No. Exd.	Average Age	Height in Ins.	Weight in Lbs.
80	5 $\frac{1}{2}$	43.71	44.93	78	5 $\frac{1}{4}$	42.80	42.16
78	9 $\frac{5}{12}$	50.90	65.32	81	9 $\frac{1}{3}$	51.13	62.00
66	13 $\frac{1}{3}$	58.25	89.51	60	13 $\frac{5}{12}$	59.07	92.70

NOTE.—The "numbers examined" in above table do not correspond with the figures given in the main statistical tables of the Annual Report on School Medical Inspection as it was not feasible to have all children in the age groups weighed and measured.

TABLE II.

Systematic Examination of Age Groups,															Other Systematic Examinations.	
Number Examined - 576.																
Number Found with Defects.																
Entrants.		2nd Age Group.		3rd Age Group.		4th Age Group.		Total in Age Group.				All Other Ages.				
102	97	102	99	79	76	6	15	289	287	76	68					
Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.					
No. %	No. %	No. %	No. %	No. %	No. %	No. %	No. %	No. %	No. %	No. %	No. %					
1		1	1.0	1	1.3			1	.34	2	.68					
		2	2.0					1	.34	2	.68					
1								1	.34							
		1	1.0					1	.34	1	.34					
		2	2.0					2	.68	1	.34					
1								2	.68	1	.34					
2	4	1	2.0	2	2.53	1	1.31	5	1.73	8	2.8					
2	5	1	5.2	2	2.53	1	1.31	3	1.73	1	.34					
1		1	.98	1	1.3			2	.68	2	.68					
		1	.98	1	1.3			3	1.73	1	.34					
1	1.0	1	.98	1	1.3			2	.68	2	.68					
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1		1	.98	1	1.3			2	.68	2	.68					
		1	.98	1	1.3			3	1.73	1	.34					
1		1	.98	1	1.3			2	.68	2	.68					
		1	.98	1	1.3			3	1.73	1	.34					
1		1	.98	1	1.3			2	.68	2	.68					
		1	.98	1	1.3			3	1.73	1	.34					
1		1	.98	1	1.3			2	.68	2	.68					
		1	.98	1	1.3			3	1.73	1	.34					
1		1	.98	1	1.3			2	.68	2	.68					
		1	.98	1	1.3			3	1.73	1	.34					

TABLE II. (Cont.)

[illegible]

TABLE II. (a)

CONDITION	Examination—Vision and Hearing (Children Born 1944)		Examination of Special Cases		
	Number Examined—147		Number Examined—86		
	Boys	Girls	Boys	Girls	Total
	No.	No.	No.	No.	No.
No Defect Found	63	71	19	24	43
Uncleanliness	—	—	—	1	1
Mouth and Teeth Unhealthy	—	—	1	—	1
Impetigo	—	—	—	—	—
Scabies	—	—	—	—	—
Slightly Defective Nutrition	—	—	—	—	—
Adenoids	—	—	1	—	1
Enlarged Tonsils (Observation)	—	—	3	2	5
Enlarged Tonsils (Operation)	—	—	—	2	—
Glands (requiring observation)	—	—	4	—	4
Glands (requiring treatment)	—	—	2	—	2
Eyes—Corneal Opacities	—	—	—	—	—
Strabismus	2	—	—	—	—
Blepharitis	—	—	—	—	—
Defective Vision—Fair	5	4	1	7	1
Bad	4	3	3	3	10
Recommended for Refraction	6	—	4	2	6
Defective Hearing	—	—	—	—	—
Otorrhoea	—	—	—	—	—
Defective Speech	—	—	—	—	—
Cardiac Defect	—	—	—	1	—
Mentally Defective	—	—	1	—	—
Lungs (other diseases)	—	—	—	—	—
Abdominal Tuberculosis	—	—	2	—	2
Deformities	—	—	—	—	—
Infectious Diseases	—	—	—	2	—
Other Diseases or Defects	—	—	—	2	—
	—	—	5	—	7

TABLE III.

Group Classification	Systematic Examination of Age Groups										Other Systematic Exams. at schools where all children are examined	
	Entrants		2nd Age Group		3rd Age Group		4th Age Group		Total in Age Groups			
	No.	%	No.	%	No.	%	No.	%	No.	%		
I. No Defect	139	69.8	144	71.7	119	76.8	19	90.4	421	73.1	841	77.1
II. (a) 6/12+ (Better Eye) with or without glasses	4	2.0	7	3.5	6	3.9	1	4.8	18	3.1	12	8.3
(b) Mouth or teeth likely to cause ill-health....	1	0.5	2	1.0	1	0.6	—	—	4	0.7	—	—
(c) Both (a) and (b)	—	—	1	0.5	—	—	—	—	1	0.2	—	—
Total	5	2.5	10	5.0	7	4.5	1	4.8	23	4.0	12	8.3
III. Temporary Illness only	33	16.6	21	10.4	9	5.8	—	—	63	10.9	8	5.6
IV. (a) Cure expected by treatment	18	9.1	21	10.4	13	8.4	—	—	52	9.0	10	6.9
(b) Improvement only by treatment	4	2.0	5	2.5	7	4.5	1	4.8	17	3.0	3	2.1
Total	22	11.1	26	12.9	20	12.9	1	4.8	69	12.0	13	9.0
Total number of children examined	199	100	201	100	155	100	21	100	576	100	144	100

TABLE IV.

Return of Exceptional Children of School Age in the Area

	At Ordinary Schools.	At Special Schools or Classes.	At no School or Institution.	Total.
1. Blind	—	—	—	—
2. Partially Sighted—				
(a) Refractive errors in which the curriculum of an ordinary school would adversely affect the eye condition	—	—	—	—
(b) Other conditions of the eye, e.g., cataract, ulceration, etc., which render the child unable to read ordinary school books or to see well enough to be taught in ordinary school	—	—	—	—
3. Deaf—				
Grade I.	4	—	—	4
Grade IIa.	1	—	—	1
Grade IIb.	1	—	—	1
Grade III.	—	3	1	4
4. Defective Speech—				
(a) Defects of articulation requiring special educational measures	9	4	2	15
(b) Stammering, requiring special educational measures	4	4	—	8
5. Mentally Defective—				
(Children between 5 and 16 years)				
(a) Educable (I.Q. approx. 50-70)	10	9	1	20
(b) Ineducable (I.Q. generally less than 50)	2	4	3	9
6. Epilepsy—				
(a) Mild and occasional	1	—	—	1
(b) Severe (suitable for care in a residential school)	—	—	—	—
7. Physically Defective—				
(Children between 5 and 16 years)				
(a) Non-pulmonary Tuberculosis (excluding cervical glands)	4	—	—	4
(b) General Orthopaedic condition	11	3	—	14
(c) Organic Heart Disease	5	1	1	7
(d) Other causes of ill-health	4	—	—	4
8. Multiple Defects—				
(a) 3 and 7(c)	—	1	—	1
(b) 3 and 4(a)	1	—	—	1
(c) 4(a) and 5(a)	2	—	5	7
(d) 4(a) and 5(b)	2	—	2	4
(e) 5(a) and 7(b)	—	2	—	2
(f) 5(a) and 7(c)	—	—	1	1
(g) 5(a) and 7(d)	—	1	—	1

MEDICAL TREATMENT OF SCHOOL CHILDREN

a. Minor Ailments

These are attended to by the District Nurses under the supervision of the child's Family Doctor.

The following table shows the work done by the District Nurses in the various districts during the year. Columns 1 and 2 show routine visits paid by Nurses to the schools for the purpose of School Medical Inspection. Column 3 shows visits paid to the homes of children for purpose of follow-up and treatment.

	Number of visits paid to Schools with S.M.O. or Dentist	Number of visits paid to Schools by Nurses themselves	Number of visits paid to homes of School Children
Bettyhill	7	25	26
Clyne	22	23	56
Creich	17	40	22
Dornoch	35	25	31
Durness	7	20	34
Eddrachilles	11	40	14
Golspie	48	20	105
Kildonan and Loth ..	25	39	52
Lairg	17	11	17
Lochinver	7	26	23
Melvich	12	40	50
Stoer	2	16	36
Tongue	5	30	16
Rogart	16	21	11
Total	231	376	493

b. Nose and Throat (Operative Treatment)

(a) Enlarged Tonsils and Adenoids—	Boys.	Girls.	Total.
Treated under the Education Committee's Scheme at the Lawson Memorial Hospital, Golspie	20	20	40
Treated otherwise (so far as known),	7	8	15
(b) Complicated Cases for whom consultation or in-patient treatment was arranged with the E.N.T. Surgeon, Inverness—			
Consultations	—	2	2
Admissions to Hospital	—	1	1
Re-admissions to Hospital	1	—	1

c. Orthopaedic and Postural Defects

Cases are seen by the Orthopaedic Surgeon at the Lawson Memorial Hospital, Golspie, during routine visits, or as required at Raigmore Hospital, Inverness, or, in special circumstances, at their homes.

The following school children received consultation or treatment during the year:—

	Boys.	Girls.	Total.
Admitted Lawson Memorial Hospital, Golspie	14	8	22
Admitted Raigmore Hospital, Inverness ..	1	—	1
Admitted Other Orthopaedic Hospitals ..	1	1	2
Consultations at Lawson Memorial Hospital and treated as Out-patients ..	7	3	10

d. Defective Vision and Squint

Cases in this connection are notified to parents to consult their Doctors, who refer the children to the Eye Clinics at Golspie or to the Ophthalmic Medical Practitioners.

e. Ultra Violet Light Clinic

In the summer of 1951 the Education Committee came to an agreement with the Northern Regional Hospital Board whereby the services of the Board's Physiotherapist at the Lawson Memorial Hospital, Golspie, were made available three afternoons per week, on two-hour sessions, for the conduct of Mobile U.V.R. School Clinics, the equipment being provided by the Education Committee.

The Clinics ran in turn for about six weeks at each of the larger schools on the east coast, and the following children, mainly between the ages of five and twelve years, received courses of U.V.R. during the Year 1951-52 as follows :—

Golspie	..	..	..	..	..	80
Brora	..	..	..	..	..	74
Helmsdale	..	..	..	..	..	73
Dornoch	..	..	..	..	..	68
Bonar-Bridge	..	..	..	..	..	70
Lairg	..	..	..	..	..	62
Total	..	..	..	..	..	427

In addition, remedial exercises were given by the Physiotherapist at these schools for certain children suffering from orthopaedic and chest conditions.

f. Special Schools and Classes

Miss Kerr, Specialist Teacher for mentally handicapped children, took up duty in August, 1951, and, pending the establishment of a small Special School at Brora, a classroom at Clyne Junior Secondary School was made available to her for the instruction of mentally handicapped children in the Brora District. Three children were enrolled. In addition to this work, Miss Kerr undertook the ascertaining and testing of backward children at various points throughout the County, devoting two days a week to this work and on one day each week she visited the homes of handicapped children. The work in these spheres of activity has been most efficiently and patiently carried out.

Later Tordale Special School, for the instruction of mentally handicapped children, was acquired by the Education Committee, and, although small, should prove of great benefit to those needy children whose home circumstances and aptitude make it feasible for them to attend. No residential accommodation is, however, so far envisaged for Tordale School where children from outlying parts of the County could reside while obtaining special instruction, but even if this were provided it would not be enough to meet the needs of all cases, and I am still of the opinion that the Education Committee should take every opportunity of making a joint effort with other Northern Counties' Authorities to promote a scheme for the establishment of a Central Special Institution for the care, training, and education of mentally handicapped children, in which scheme the work done at Tordale School might well be incorporated.

During the year under review we were able to gain the admission to the Rudolf Steiner School, Aberdeen, of two mentally handicapped children.

g. Feeding of School Children

The arrangements for the provision of a mid-day meal for school children are being maintained at a high standard, great credit for this being due to the untiring efforts of Miss Morrison, School Canteen Organiser, who must have many difficulties to face, particularly in securing staff at so many different points who can do this very important job hygienically and well.

SCHOOL DENTAL SERVICE—1951-52

- | | |
|--|---|
| (a) Total number of whole-time School Dental Officers employed under the Authority's School Health Service, showing separately unfilled vacancies at 31/7/52 | 1 |
| (b) Total number of part-time Dentists employed on School Dental Work at 31/7/52 | — |
| (c) Approximate equivalent as whole-time Dental Officers of the part-time appointments referred to in (b) above, if any .. | — |
| (d) Total number as at 31/7/52 :— | |
| 1. Whole-time Dental Officers | 1 |
| 2. Part-time Dental Officers | — |
| 3. Unfilled Vacancies | — |

Annual Report by School Dental Surgeon for 1951-52

There is again a steady improvement in the dental health of the children. There has been excellent co-operation and encouragement from the teaching staffs and I wish to convey my thanks to them.

Again each child has had the offer of treatment, where required, twice during the year. Sixty-four per cent. accepted treatment during the second visit.

(Sgd.) C. C. FORSYTH,
School Dental Surgeon.

DENTAL INSPECTION AND TREATMENT, 1951-52

Age	5	6	7	8	9	10	11	12	13	14	15	16	17	18	Total
Inspected....	248	159	177	199	192	208	187	171	173	151	57	29	15	3	1969
With Decayed Teeth ...	124	94	101	118	101	109	118	81	83	80	33	29	15	3	1080
Requiring Treatment	118	86	78	112	99	103	108	68	79	74	33	28	14	3	1023
Accepting Treatment	85	63	73	75	66	73	51	38	30	33	20	8	4	1	620
Treated	77	57	70	68	58	68	44	36	26	28	20	8	4	1	565
Fillings, Permanent	...	10	38	67	55	64	69	56	36	51	39	18	6	1	510
Fillings, Temporary	32	66	28	27	22	8	1	...	...	...	...	...	...	...	164
Extractions, Permanent	...	6	12	12	15	28	19	12	10	8	5	...	1	...	128
Extractions, Temporary	190	60	85	34	27	54	8	7	2	1	...	...	...	...	468
General Anaesthetics	52	17	25	12	10	21	6	5	4	4	2	...	1	...	159
Sundries	1	5	3	2	3	16	20	20	14	11	18	4	6	1	123
Attendances	71	59	75	71	60	71	55	46	36	45	34	10	9	3	645
Extractions, Gen. Anaes.	174	61	76	25	25	80	18	14	9	8	4	...	1	...	495
Extractions, Local Anaesthetics....	16	5	21	21	17	2	9	5	3	1	1	...	...	...	101

DENTAL RE-INSPECTION AND TREATMENT, 1951-52

Age	5	6	7	8	9	10	11	12	13	14	15	16	17	18	Total
Inspected	245	173	156	191	197	215	197	200	182	180	64	34	13	6	2053
With Decayed Teeth	112	69	76	116	103	93	98	115	106	110	29	16	8	3	1054
Requiring Treatment	111	66	73	114	103	90	92	107	106	110	29	16	8	3	1028
Accepting Treatment	77	43	57	82	84	63	54	53	55	55	17	11	6	1	658
Treated	72	40	52	82	77	63	49	52	52	52	15	11	6	1	624
Fillings, Permanent	2	8	43	63	78	79	64	72	95	88	32	22	9	1	656
Fillings, Temporary	37	14	10	26	3	2	2	....	....	....	....	....	....	....	94
Extractions, Permanent	2	....	4	10	22	14	26	36	20	7	8	4	....	....	153
Extractions, Temporary	126	45	33	53	53	25	16	8	4	2	1	....	....	....	366
General Anæsthetics	39	12	11	13	13	7	12	10	6	2	3	2	....	....	130
Sundries	3	4	2	7	7	18	12	10	31	23	6	5	1	....	129
Attendances	72	40	54	83	79	73	56	60	69	67	32	16	6	1	708
Extractions—Gen. Anæ.	121	34	32	45	57	25	33	31	16	6	9	4	....	....	413
Extractions—Local Anæsthetics	7	11	5	18	18	14	9	13	8	3	....	....	....	....	106

PUBLIC HEALTH AND SANITARY SERVICES

Annual Report by E. W. BRANNEN, L.R.I.B.A., F.R.I.A.S., and
M.R.San.I., County Architect and Sanitary Inspector.

GENTLEMEN,

I have the honour of submitting my Twenty-third Annual Report for the year ended 31st December, 1952.

GENERAL SANITATION

WATER SUPPLIES.—The improvements at Helmsdale, Loth, Shinness, Elphin, Bonar-Bridge, and Melness have now been completed.

The supply at Tongue, for which the Council assumed liability, proved unsatisfactory. I suggested a temporary lin. alkathene pipe be laid on the surface from Loch Craisg to service tank at Braetongue. This work was carried out and an ample supply maintained.

DURNESS.—The supply was well maintained, due to improvements carried out in 1951, but the distribution pipes to Lerin are defective and require to be renewed.

EMBO.—The intake pipe of this supply was damaged during the storms in January. Temporary repairs were carried out and the supply was restored. It will, however, require extensive reconstruction and this work will be included when Messrs Babbie, Shaw and Morton carry out the major schemes to supply Embo, Dornoch, and surrounding area.

LOCHINVER.—The 3in. diameter pipe from the intake at Loch Goibhre was scraped and this considerably improved the supply.

LAIRG.—This supply was short on several occasions due to burst pipes both in the old supply and the new branch to Shinness. The need for increased storage is, in my opinion, a matter of urgency.

All other supplies were well maintained throughout the year.

SCAVENGING

The bi-weekly collection of refuse at Golspie, Brora, Helmsdale, Bonar-Bridge, Lairg, and Embo is performed by private contractors.

Efforts are being made to form Special Scavenging Districts at Scourie and Lochinver, but at the end of the year no definite decision had been come to in either case.

The refuse dumps still leave much to be desired, although a vast improvement was effected on the one at Lower Brora. Here a calf-dozer was used to level the ground and provide a tipping face for the new contractor.

No proper scavenging service exists for Council housing schemes at Melvich, Bettyhill, Tongue, Durness, and Camore. I suggested that the housing schemes in the various districts should be formed into a Scavenging Area. These are all crofting areas, and present difficulties, if the whole of these villages were included, are:—

- (a) The crofts cover a fairly wide area and any collection of refuse will necessitate high transport charges.
- (b) The crofts are de-rated so that if included in the Scavenging Area their contribution to the cost would be negligible.
- (c) Hotels, Schools, and Council Houses will have to carry the burden.

It may appear that with a fixed maximum rate for scavenging this would solve the problem, but the balance between income and expenditure must be met out of the General Public Health Fund. The cost, therefore, will be borne by the hotels, schools, and council houses, and also villages which have scavenging areas and are already contributing for this service.

The crofter has no difficulty in disposing of refuse and, in my opinion, should not be included in Special Scavenging Districts.

OFFENSIVE TRADES

There are no offensive trades carried on in the county.

SPECIAL DRAINAGE SYSTEMS

The existing schemes at Brora, Helmsdale, and Embo are working satisfactorily. Some trouble has been experienced with the Golspie Sewer silting up, but the contract for the cleaning of the sewer has now been let, the work to proceed in the Spring of 1953.

In my last annual report I stressed the fact that proper drainage schemes for Lairg, Bonar-Bridge, Pittentrail, and Portgower were long overdue. Another year has passed and still nothing definite has been done.

SCHOOLS

These buildings are being well maintained and the sanitary accommodation is in good order.

The Technical School Sewer has given a considerable amount of trouble over the past few years, but arrangements for construction of a new outfall sewer were well in hand at the end of the year.

The disposal of the effluent from the septic tank at Earl's Cross Hostel has given rise to a number of complaints. As this constitutes a Public Health nuisance, urgent measures will have to be adopted. Plans and proposals for a new outfall were under discussion and it was hoped to have some remedial measure put in hand at an early date.

FACTORIES

There are sixty-eight registered factories, fifty-eight in the County and ten within the Burgh of Dornoch. Thirty visits were made during the year and in all cases the sanitary accommodation generally was found to be in good order. No defects were found and no cases were referred to me by H.M. Factories Inspector.

BURIAL GROUNDS

These are administered by the District Councils. Extensions are to be made at Loth and Melness.

FOOD SUPPLY

MILK.—The number of registered producers still remains at twenty-three, with, in addition, three retailers. Fifteen producers hold Tuberculin Tested Licences and of the remainder five have attested herds and other two are in the process of "cleaning up." This means that 87 per cent. of our registered producers are supplying milk from tubercle free herds. The progress in this respect during the last two years has been very rapid indeed.

Milk sampling continues to occupy most of the time spent on milk and dairies. The following table gives the number of samples taken throughout the year:—

	Bacteriological		Chemical		Special Samples	Biological		Totals
	Passed	Failed	Passed	Failed		Passed	Failed	
Designated Milk ..	135	7	73	6	—	—	—	221
Non-designated Milk..	56	15	34	11	7	6	1	130
School Milks ..	90	6	29	3	—	2	—	130
Pasteurised ..	10	1	4	1	—	—	—	16
Total samples taken ..	..	..	..	..	..	..	..	497

All Schools receiving liquid milk continue to be supplied from "Tuberculin Tested" herds. For some of the small schools off the beaten track I would like a more rapid delivery service, but it is difficult to see how this can be done without involving any further expense.

Compared to last year there is a slight drop in the total number of sample failures. For 1952 the failures were 10.30 per cent. of the total while the previous year they were 17.1 per cent. of the total. On the whole, I find the farmers are very co-operative and anxious to do their best, but there are a few, a very few, who I feel sure lapse into their own rough and ready ways of working as soon as I leave their premises. There has been quite a decided improvement in the general standard over the past few years.

It will be noted that one biological sample was found to contain tubercle bacilli. This was reported to the Ministry of Agriculture, who took immediate action. One cow from the herd concerned was slaughtered under the Tuberculosis Order of 1938; an individual sample from this cow was Positive microscopically.

The number of samples which were tested by the Milk Officer amounted to 161. While this involved a considerable amount of extra work it also meant a saving to the Council of approximately £150.

The following table gives an overall picture of the percentage of attested cattle in this and the two adjoining counties:—

	Total Cattle at 4-6-52.	No. of Cattle in Attested Herds.	Percentage of Attested to Total Cattle	Percentage at 31-12-51.
Sutherland	9,068	5,930	65.4	35.9
Caithness	26,691	6,820	25.5	18.0
Ross-shire	38,623	14,180	36.7	—

These figures show a remarkable improvement from a year ago and Sutherland's percentage of attested cattle is now above the average for the whole of Scotland which at the end of 1952 stood at 58.1 per cent. The average percentage figure for England is 34.1 per cent. and for Wales 59.8 per cent.

ICE CREAM

There are now only seven vendors who require to be licensed under the Ice Cream (Scotland) Regulations, 1948. This figure includes one vehicle. Of the seven, only five manufacture their own product. Twelve samples, including one formal sample, were taken during the year and of these two showed a deficiency in fat. This was brought to the attention of the manufacturer and subsequent samples proved satisfactory.

There is now a tendency for a large number of shopkeepers to sell pre-packed ice cream and, provided the containers and wrappers are not broken in the shop, the premises are exempt from the Regulations. I am not at all sure that this is a good thing, since any sort of shop could, and very often does, sell ice cream. So long as the person behind the counter is clean and takes all possible steps to avoid any risk of contamination then everything may be all right, but there is always the chance of coming across a careless person when the risk of contamination becomes much greater. The premises of the large manufacturers who supply the pre-packed ice cream are

nearly all in first-class order and the product is made under ideal conditions. It is regrettable, therefore, if a weak link in the distribution chain is allowed to set at naught the precautions taken during manufacture.

MEAT

The one slaughter-house which is situated within the Royal Burgh of Dornoch continues to be kept in a very clean condition.

TRANSPORT

I have to report considerable headway in the method of transporting meat from the slaughter-house to the retailers' shops. The Lochbroom Agricultural Co., Ltd., Bonar-Bridge, have taken over the contracts for both Tain and Dornoch slaughter-houses and have provided an insulated box-type metal container with two sliding doors, one at each end on opposite sides. The container is so constructed that it is easily cleaned and hosed out, and it is always kept in a very clean condition. Further, the container, which is fitted to an ordinary lorry body, is used for no other purpose.

All carcasses and offals are inspected for evidence of disease or other abnormalities before leaving the slaughter-house.

The following table gives the number of animals slaughtered and carcasses, etc., condemned at Dornoch Abattoir for the year 1952:—

Class.	Slaughtered	No. of Animals		Weight (in lbs.) of Condemned	
		Whole Condemned	Partially Condemned	Meat	Offals
Cattle ..	490	10	2	4,737	3,574
Sheep ..	3,042	8	3	330	1,378
Calves ..	203	—	—	—	—
Pigs ..	104	—	—	—	—

FOOD HYGIENE

Food premises continue to receive attention and although time does not permit of routine inspection work, opportunity is taken to examine premises when making inspections under Section 43 of the Public Health (Scotland) Act, 1897.

Following upon examination, sixty-six certificates were issued in connection with foodstuffs found to be unfit for human consumption. All were voluntarily surrendered and condemned with the owners' consent. The undernoted summary shows the types and amounts of the foodstuffs condemned:—

	lb. oz.		lb. oz.
Boneless cooked ham ..	185 9	52 tins strained foods ..	14 10
38 tins luncheon meat ..	82 9	38 tins soup ..	37 10
Smoked ham ..	14 0	41 tins plums ..	49 15
Pork sausages ..	40 0	13 tins cherries ..	16 4
Frozen eggs ..	11 0	1 tin greengages ..	— 15
23 rabbits ..	51 4	3 tins pears ..	3 5
Fillets of sole ..	14 0	12 tins prunes ..	22 8
1 tin stewed steak ..	1 0	5 tins grapefruit ..	4 14
1 turkey ..	8 0	2 tins strawberries ..	2 7
3 chickens ..	15 8	1 tin pineapple juice ..	1 4
1 hen ..	3 4	4 tins pear pulp ..	40 0
2 stags ..	285 0	1 tin coconut in syrup ..	— 10
Self-raising flour ..	18 0	3 tins spaghetti ..	2 0
Skim milk powder ..	112 0	3 tins pilchards ..	2 4
4 tins beans ..	3 8	Half case oranges.	
4 tins peas ..	3 7	1 tin full cream condensed	
1 tin carrots ..	1 3	milk ..	2 pints
2 tins mixed vegetables..	2 6	3 tins evaporated milk ..	6 pints

In addition to above list, the carcasses of twelve hinds and two stags, the haul of a poaching gang, were examined and condemned as unfit for human consumption. The killing took place "out of season" and in addition ten of the hinds were in-calf or newly calved.

FOOD AND DRUGS (ADULTERATION) ACT, 1928

The work of administration under above Act continues to receive a fair amount of attention. During the year sixty-seven informal samples of various articles were submitted to the Public Analyst and all proved genuine. The following table gives particulars of the articles sampled:—

	No. of Samples.		No. of Samples.
Cream of Tartar	3	Butter beans	1
Baking Soda	3	Table Jelly	1
Vi-Cream-O	1	Salad Cream	1
Tomato Puree	1	"Chico"	1
Chutney	1	Fried fish cake	1
Tomato Ketchup	3	Beef paste	5
Banana flavouring	1	Glycerine	1
Peppermint flavouring	1	Pineapple flavour	1
Raspberry flavouring	2	Vapour Rub ointment	1
Custard powder	1	Pepper Compound	3
Junket	1	Mixed Spice	1
Black pepper	1	Cornflour	1
Rennet extract	1	Ground Cinnamon	1
Apricot Puree	1	Tinned Rabbit	1
Tomato soup	1	Tomato Paste	1
Curry powder	1	Au gourmet sauce	1
Malt and cod liver oil	1	Beans in sauce	1
Fish paste	1	Pineapple	1
Tapioca Dessert	1	Prepared mustard	1
Lemon Curd	1	Castor Oil	1
Spaghetti in sauce	1	Tea cake mixture	1
Gravy Salt	3	Marshmallow creme	1
Epsom Salts	2	Soroma mock cream	1
Chewing gum	1	Sweet mincemeat	1
Condensed milk	1	Olive Oil	1
Processed peas	1		

INFECTIOUS DISEASES

In this connection every assistance is given to the Medical Officer of Health and acting on his instructions a number of houses were disinfected.

VERMINOUS HOUSES

During the year two houses were found to be infested with fleas. The houses were disinfested by spraying with D.D.T. solution.

HOUSING

The scheme for improvement of houses by aid of grant under Part VII. of the Housing (Scotland) Act, 1950, is now well established and seems to be generally known throughout the County. Up to the end of the year a total of 28 applications were received; of these 20 were approved by the Council, involving a total estimated expenditure of £11,903. Four applications were withdrawn, three were refused by the Council, and the remaining one was approved by the Council, but the certificate of approval has not yet been issued owing to the ownership being in dispute. Work has been completed in fifteen cases out of the twenty approved, making a total sum of £3982 payable by way of grant.

The advent of the Housing (Scotland) Act, 1952, which extends the scope of the Housing (Scotland) Act, 1950, to include tied houses occupied by members of the agricultural population, has already brought a number of enquiries. It is to be hoped that farmers and others will take advantage of it to improve their workers' houses.

NUISANCES

The inspections required under Section 17 of the Public Health (Scotland) Act, 1897, have received the necessary attention. Only two Intimations and one Statutory Notice required to be sent. These had the desired effect.

UNFIT HOUSES

During the year a Demolition Order was served on one house and Closing Orders on three houses, the tenants having already been rehoused.

Notices requiring the provision of (1) inside water and sink, (2) water closet, and (3) general repairs, were served in three instances. The time allowed had not expired at the end of the year.

During the year under review the number of new houses completed was:—Golspie 12, Brora 4, Durness 2, and Camore 4, making a total of twenty-two traditional houses.

(Sgd.) E. W. BRANNEN,

County Sanitary Inspector.

Dornoch, 11th September, 1953.

