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COUNTY BOROUGH OF DERBY

ANNUAL REPORTS

Medical Officer of Health

AND

Principal School Medical Officer

Year, 1953

V. M. LEVISON, M.D. (LOND.), D.P.H.

HEALTH REPORT

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HEALTH COMMITTEE.

18 members (including the Chairman and Deputy Chairman).

Functions :—

General Administration.

Ambulance Service.

To receive minutes of the Sanitary Sub-Committee and to confirm minutes of the Health Services Sub-Committee.

SUB-COMMITTEES.

1. Health Services :—

12 members (including the Chairman and Deputy Chairman), and 4 co-opted members.

Functions :—

Duties under the relevant Acts in relation to :—

Care of mothers and young children (including Day Nurseries).

Care and After Care.

Domestic Help.

Home Nursing.

Health Visiting.

Midwifery.

Vaccination and Immunisation.

Ascertainment of mental deficiency.

Care and After Care in Mental Health.

Certification, etc., under the Lunacy Acts.

Occupation Centre.

2. Sanitary :—

12 members (including the Chairman and Deputy Chairman).

Functions :—

Duties under the relevant Acts in relation to :—

Environmental Hygiene.

EDUCATION COMMITTEE.

22 members (including the Chairman and Deputy Chairman), and 6 co-opted members.

SUB-COMMITTEE.

Children's Care :—

11 members (including the Chairman and Deputy Chairman), and 4 co-opted members.

Functions :—

The School Health Service.

As at 31st December, 1953.

STAFF.**MEDICAL.**

Medical Officer of Health and Principal School Medical Officer :—

V. N. LEYSHON, M.D. (Lond.), D.P.H.

Deputy Medical Officer of Health and Senior Child Welfare and Senior School Medical Officer :—

ALEXANDER MORRISON, L.R.C.P. & S. (Ed.), L.R.F.P.S. (Glas.).

Senior Assistant Medical Officer of Health :—

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

Senior Assistant Medical Officer for Maternity and Child Welfare :—

MARGARET M. F. ROBINSON, M.D. (Belfast), B.A.O., D.P.H.,
L.M. (Belfast).

School Medical Officers :—

E. A. LAVELLE, M.B., Ch.B. (Vict., Manchester).

C. L. NOBLE, M.R.C.S., L.R.C.P.

R. E. DEAN, L.R.C.P. & S. (Ed.), L.R.F.P.S. (Glas.), M.R.C.V.S.,

R.S.I.

W. DRAWNEEK, M.B., B.S. (Lond.).

Chest Physician :—

*HUGH GERARD GRACE, M.B., Ch.B.

Consultant :—

*R. J. M. JAMIESON, M.B., B.Ch., M.R.C.O.G.

Obstetrician and Gynæcologist.

Psychiatrist :—

*T. A. RATCLIFFE, M.A., M.B., B.Ch., M.R.C.S., L.R.C.P., D.P.M.,
D.C.H.

DENTAL.

Principal School Dental Officer :—

ARTHUR STAFFORD, L.D.S., R.C.S. (Eng.).

Assistant Dental Officers :—

FREDERICK GROSSMAN, L.D.S. (Q.U. Belfast).

MOIRA RIGBY, L.D.S., R.F.P.S. (Glas.).

ELIZABETH S. WOOD, L.D.S. (Glas.).

BARBARA THORNHILL, B.Ch.D., L.D.S.

NON-MEDICAL.

Administrative Officer :—

W. T. PRITCHARD.

Clerks :—

HEALTH OFFICE 22, SCHOOL CLINIC 10, WELFARE CENTRES 3.

Almoners :—

RICHARD L. CARABINE, A.M.I.A.

MISS BRENDA BRATT, A.M.I.A.

Supervisor of Day Nurseries :—

MISS M. R. MOSS, S.R.N., Nursery Diploma.

*Day Nurseries :—*MATRONS 4, STAFF NURSERY NURSES 10, NURSERY ASSISTANTS 3,
PROBATIONER NURSES 36, WARDENS 2, DOMESTICS 10.*Duly Authorised Officers :—*

W. V. B. LUCAS.

F. F. WRIGHT.

MISS M. GODFREY, Diploma in Social Science.

Superintendent Health Visitor :—

MISS E. M. GARDINER, S.R.N., S.C.M.

Health Visitors, School Nurses and Tuberculosis Nurses :—25.
(including part-time)*Supervisor of Home Helps :—*

MRS. E. C. BAKER.

*Home Helps :—85 PART-TIME.**Superintendent of Home Nursing :—*

MISS D. M. CLEWES, S.R.N., S.C.M.

Home Nurses :—11 FULL-TIME, 8 PART-TIME.

*Non-Medical—continued.**Occupation Centre :—*

SUPERVISOR (Qualified) 1, ASSISTANT SUPERVISORS (Unqualified) 3,
DOMESTIC 1, *GUIDES 4.

*Domiciliary Midwives :—14.**Psychologist :—*

MISS E. S. BROUGHTON, M.A., Diploma in Psychology (Oxford)

Public Analyst :—

*R. W. SUTTON, B.Sc., F.R.I.C.

Remedial Teacher :—

MISS N. GATELEY, National Froebel Cert.

Chief Sanitary Inspector :—

S. PRIME, M.S.I.A.

Deputy Chief Sanitary Inspector :—

P. H. SHARDLOW, R.S.I.

Sanitary Inspectors (All Branches) :—10.

RODENT CONTROL OFFICER 1, RODENT OPERATORS 3.

Sewage Works Analyst :—

*G. GREEN, A.M.C.T., A.M.Inst.S.P., and three Assistants.

Speech Therapist :—

*MISS S. H. NORTH, L.C.S.T.

MISS M. L. UMPLEBY, L.C.S.T.

Remedial Gymnast :—

GEORGE SOMMERVILLE, M.S.R.G.

MEDICAL AND DENTAL ATTENDANTS 10, CLEANSING ATTENDANTS 4,
DISINFECTOR ATTENDANT 1, GENERAL LABOURER 1.

*WELFARE ASSISTANTS 3, WELFARE DOMESTIC 1.

*—Part-time.

As at 31st December, 1953.

Public Health Department,
The Council House,
Corporation Street,
Derby.

TO THE CHAIRMAN AND MEMBERS OF THE
HEALTH AND EDUCATION COMMITTEES.

Mr. Chairman, Ladies and Gentlemen,

I have the honour to present to you the Annual Report for the year 1953.

The estimated population has increased by 700 to 139,400. The birth rate has increased from 14.89 (1952) to 15.34 (1953). The death rate has risen slightly from 11.43 (1952) to 11.74 (1953). The stillbirth rate has decreased from 28.22 (1952) to 24.19 (1953). It will be noted in the report that one death occurred from maternal causes. The infantile death rate fell from 29.04 (1952) to 24.32 (1953).

During the year I am glad to report that friendly co-operation existed between the hospitals, General Practitioners and the local Health Authority.

Local problems were discussed at the local Medical Committee, and at various meetings attended by the Consultants immediately affected. In all cases discussion was friendly, constructive, and showed a desire by all concerned to try and get the best out of the National Health Service.

The work of the various services of the Department is described in detail in the reports.

I should like to close this Report on a personal note and to thank you Mr. Chairman, and all the members of the Health Committee for the assistance, encouragement and support I have invariably received from yourself and them. I should also like to add my appreciation of the friendly advice and help always freely available from the officers of other departments of the Corporation; and finally I wish to thank the entire staff for their willing co-operation and service during the year, which made the somewhat arduous work of the Department both exhilarating and pleasant.

I am,

Mr. Chairman, Ladies and Gentlemen,

Your obedient servant,

V. N. LEYSHON.

I—GENERAL.

STATISTICAL SUMMARY.

Area of Borough	8,116 Acres.						
Elevation above sea level—	<table border="0"> <tr> <td>{ highest, Burton Road ...</td> <td>325 ft.</td> </tr> <tr> <td>{ lowest, Alvaston Ward ...</td> <td>126 ft.</td> </tr> <tr> <td>{ Market Place</td> <td>157 ft.</td> </tr> </table>	{ highest, Burton Road ...	325 ft.	{ lowest, Alvaston Ward ...	126 ft.	{ Market Place	157 ft.
{ highest, Burton Road ...	325 ft.						
{ lowest, Alvaston Ward ...	126 ft.						
{ Market Place	157 ft.						
Population at Census, 1951	<table border="0"> <tr> <td>{ Males 68,604 }</td> <td>141,264</td> </tr> <tr> <td>{ Females 72,660 }</td> <td></td> </tr> </table>	{ Males 68,604 }	141,264	{ Females 72,660 }			
{ Males 68,604 }	141,264						
{ Females 72,660 }							
Estimated Population for 1953 (Mid-year)	139,400						
Number of Houses (1931 Census)	34,875						
„ Inhabited Houses at 31/3/1954 (according to Rate Books)	41,377						
No. of Uninhabited Houses at 31/3/1954 (according to Rate Books, including property scheduled for demolition)	105						
Number of Families or separate Occupiers (Census, 1931)	35,949						
Number of persons per acre at Census, 1921	24.6						
„ „ „ 1931	20.0						
Number of persons per House at Census, 1921	4.55						
„ „ „ 1931	3.97						
Rateable Value of the Borough (General Rate)	£1,065,362						
Estimated amount realised by a Penny Rate	£4,251						
	Rate per thousand						
	population.						
	1953						
Marriages	1,128 16.20						
	Total. Males. Females.						
Live Births,—Legitimate ... 2,019	1,041 978						
(Registered)—Illegitimate ... 119	70 49						
— Total ... 2,138	1,111 1,027						
Birth Rate adjusted by the Area Comparability Factor (0.99) supplied by the Registrar General	15.34						
Still Births (Registered) ... 53	25 28						
	Rate per 1,000						
	total births 24.19						
Live Births (notified) ... 2,152	1,130 1,022						
Deaths	1,636 869 767						
Death rate	11.74						
Death Rate adjusted by the Area Comparability Factor (1.02) supplied by the Registrar General	11.97						
Percentage of Total Deaths occurring in Public Institutions	53.79						
Excess of Births registered over Deaths	502						

Deaths from Puerperal Causes—				Rate per 1,000 total (live and still) births.			
				Deaths.			
Puerperal Sepsis	...	...	—	...	...	...	—
Other Puerperal Causes	...	...	1	...	...	...	·46
Total	...	...	1	...	...	...	·46

Deaths of Infants under one year of age—

Legitimate, 48. Illegitimate, 4. Total, 52.

Death Rate of infants under one year of age per 1,000 live births—

Legitimate, 23.8. Illegitimate, 33.6. Total, 24.32.

Deaths from Measles (all ages)	...	...	...	...	...	...	1
„ Whooping Cough (all ages)	...	...	...	...	...	...	—
„ Diarrhoea (under 2 years of age)	...	...	...	...	...	...	—

BIRTHS.

Birth-rate, 1953 15.34

The Births registered during the year numbered 2,138, as compared with 2,066 in 1952.

DEATHS.

				Rate per 1,000 population.	
Zymotic Diseases	...	...	...	1	0.007
Tuberculosis of Respiratory System	...	...	...	21	0.15
Other Tuberculous Diseases...	...	...	...	2	0.14
Respiratory Diseases	...	...	...	201	1.44

NATIONAL STATISTICS :—

	E. & W.	COUNTY BOROUGHES (including London).	SMALLER TOWNS.	LONDON ADMINISTRATIVE COUNTY.	DERBY.
Birth Rate ...	15.5	17.0	15.7	17.5	15.34
Death Rate ...	11.4	12.2	11.3	12.5	11.74
Infantile Mortality (per 1,000 Births)...	26.8	39.8	24.3	24.8	24.32

Causes of, and Ages at Death, during 1953.

CAUSES OF DEATH.	DEATHS IN OR BELONGING TO WHOLE DISTRICT AT SUBJOINED AGES.															TOTAL DEATHS IN PUBLIC INSTITUTIONS.				
	All Ages.	0-1	1-2	2-3	3-4	4-5	5-10	10-15	15-20	20-25	25-35	35-45	45-55	55-65	65-75	Residents.	Non-Residents.	Non-Civilians.	Non-Transferable.	
Tuberculosis, Respiratory	21	...	...	...	...	1	...	1	...	2	5	5	4	3	...	16	7	...	1
Tuberculosis, Other	2	...	1	...	...	...	...	1	...	...	...	...	...	...	...	2	3	...	...
Syphilitic Disease	8	...	...	...	...	...	...	...	...	1	...	2	1	3	1	3	1	...	4
Diphtheria	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Whooping Cough	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...
Meningococcal Infections	1	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	1
Acute Poliomyelitis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...
Measles	1	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	1	...	...
Other Infective and Parasitic Diseases	3	...	...	...	1	...	...	...	...	...	1	1	...	...	...	2	3	...	1
Malignant Neoplasm—																				
Stomach	43	...	...	...	...	...	...	...	...	...	2	6	13	12	10	18	18	...	7
Lung, Bronchus	39	...	...	...	...	...	...	...	...	...	1	6	16	14	2	11	11	...	5
Breast	25	...	...	...	...	...	...	...	...	...	4	5	5	8	3	8	5	...	3
Uterus	11	...	...	...	...	...	...	...	...	...	1	1	5	4	...	2	6	...	8
Other Malignant and Lymphatic Neoplasms	126	...	...	...	...	...	...	...	...	1	8	13	24	42	38	42	58	1	22
Leukæmia, Aleukæmia	7	...	...	...	...	...	...	...	...	1	...	3	...	1	2	5	11	...	1
Diabetes	5	...	...	...	...	...	...	...	...	1	...	1	1	1	1	3	6	...	...
Vascular Lesions of Nervous System	215	...	...	...	...	...	...	...	...	1	2	11	30	61	110	54	35	...	55
Coronary Disease, Angina	239	...	...	...	...	...	...	...	...	1	3	16	45	95	79	60	46	...	20
Hypertension with Heart Disease	58	...	...	...	...	...	...	...	...	...	...	1	8	14	35	12	6	...	17
Other Heart Disease	259	...	...	...	...	1	...	1	...	4	4	10	14	59	166	60	28	...	68
Other Circulatory Disease	103	...	...	...	...	...	...	...	...	...	3	2	8	18	72	31	26	...	31
Influenza	8	...	...	...	...	...	...	1	...	...	...	1	2	1	3	2	...	...	...
Pneumonia	110	12	...	1	...	...	...	...	...	2	1	4	10	25	55	41	31	...	45
Bronchitis	77	...	...	...	...	...	...	...	...	...	1	12	16	21	27	10	12	...	8
Other Diseases of Respiratory System	14	...	...	...	...	...	...	...	...	...	...	...	5	5	4	8	6	...	2
Ulcer of Stomach and Duodenum	26	...	...	...	...	...	...	...	...	...	...	4	3	9	10	19	19	...	2
Gastritis, Enteritis and Diarrhœa	5	...	...	...	...	...	...	...	...	...	1	...	2	1	1	5	7	...	3
Nephritis and Nephrosis	11	...	...	...	...	...	...	...	...	...	1	2	3	3	2	6	5	...	1
Hyperplasia of Prostate	9	...	...	...	...	...	...	...	...	...	...	...	1	3	5	5	12	...	2
Pregnancy, Childbirth, Abortion	1	...	...	...	...	...	...	...	...	1	...	...	...	...	...	1	1	...	...
Congenital Malformations	18	13	...	1	...	...	...	...	1	...	2	...	1	...	...	13	18	...	...
Other Defined and Ill-Defined Diseases	135	26	...	...	...	1	...	...	2	3	5	9	15	32	42	86	134	...	15
Motor Vehicle Accidents	18	...	...	...	...	1	...	...	3	3	...	1	6	2	2	15	25	...	...
All Other Accidents	21	2	...	...	...	2	...	...	2	1	1	2	2	2	7	11	11	...	...
Suicide	16	...	...	...	...	...	...	...	...	1	1	3	3	7	1	7	4	...	...
Homicide and Operations of War	1	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...
Totals	1636	53	1	2	...	1	7	1	3	9	23	47	121	243	447	678	558	558	1	322

Causes of Death during 10 Years, 1944—1953.

CAUSE OF DEATH.	YEARS.									
	1944	1945	1946	1947	1948	1949	1950	1951	1952	1953
Tuberculosis, Respiratory	65	70	55	55	58	71	38	52	25	21
Tuberculosis, Other	14	8	8	12	13	11	7	3	4	2
Syphilitic Disease	10	10	8	12	11	4	3	13	6	8
Diphtheria	4	...	...	1	...	...	...	...	...	...
Whooping Cough	5	1	4	1	3	3	5	...	...	...
Meningococcal Infections	1	3	...	1	1	4	...	1	1	1
*Acute Poliomyelitis ... ..	...	...	...	1	1	...	...	...	...	...
Measles	1	2	...	2	...	...	...	...	2	1
†Other Infective and Parasitic Diseases ... ..	...	...	...	...	...	...	3	4	1	3
Malignant Neoplasms	221	241	231	250	228	256	298	265	265	244
†Leukæmia, Aleukæmia ... ..	...	...	...	...	...	...	8	8	10	7
Diabetes	17	12	10	14	13	9	15	13	11	5
Vascular Lesions of Nervous System... ..	170	152	144	152	168	179	187	235	219	215
Heart Disease	406	458	422	504	442	533	455	535	566	556
Other Circulatory Disease	62	57	68	71	68	82	87	120	118	103
Influenza	10	18	13	10	...	8	6	50	...	8
Pneumonia	70	83	73	84	55	73	80	120	76	110
Bronchitis	89	67	90	106	70	81	87	113	50	77
Other Diseases of Respiratory System	19	26	20	22	23	19	10	13	12	14
Ulcer of Stomach and Duodenum	18	21	24	16	25	18	26	32	24	26
†Gastritis, Enteritis and Diarrhœa	20	20	9	42	16	8	13	6	5	5
Nephritis and Nephrosis	45	29	27	32	37	25	20	18	10	11
†Hyperplasia of Prostate ... ..	...	...	...	...	...	...	20	17	10	9
Pregnancy, Childbirth and Abortion	6	5	3	5	3	1	1	...	...	1
§Congenital Malformations	39	31	33	37	23	33	16	13	20	18
Other Defined and Ill-Defined Diseases	212	224	186	238	246	284	236	185	111	136
Motor Vehicle Accidents	10	18	15	11	4	12	11	6	8	18
All Other Accidents	33	44	24	26	33	27	17	21	17	21
Suicide	9	7	14	11	15	15	17	17	14	16
ALL CAUSES—TOTALS	1556	1607	1481	1716	1556	1756	1666	1860	1585	1636

† Included with "All Other Causes" prior to 1950.

* Combined with "Polio-Encephalitis" prior to 1950.

‡ "Diarrhœa (under 2 years of age)" only prior to 1950.

§ Combined with "Birth Injuries, etc." prior to 1950.

Burials.—The total burials in the Derby Cemeteries for the year 1953 were 1,443, 1,348 ordinary burials and 95 still-born.

Inquests held during 1953.—These numbered 94 — 67 males and 27 females.

Mortuary.—Dead bodies received during the year, 106. Post mortem examinations, 308.

THE PRINCIPAL CAUSES OF DEATH — 1953

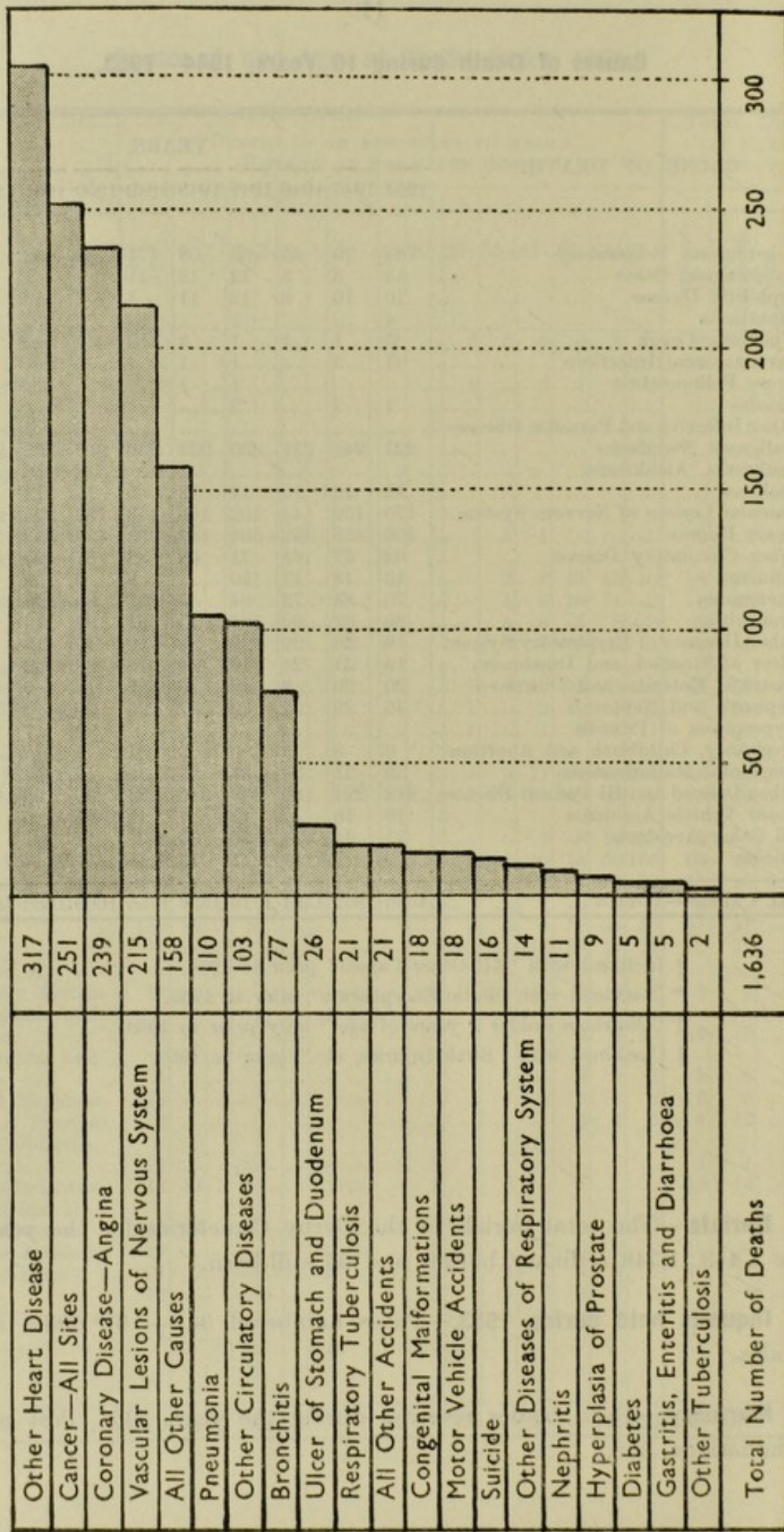


TABLE I

BIRTH RATE PER 1,000 LIVING ———

DEATH RATE PER 1,000 LIVING - - - - -

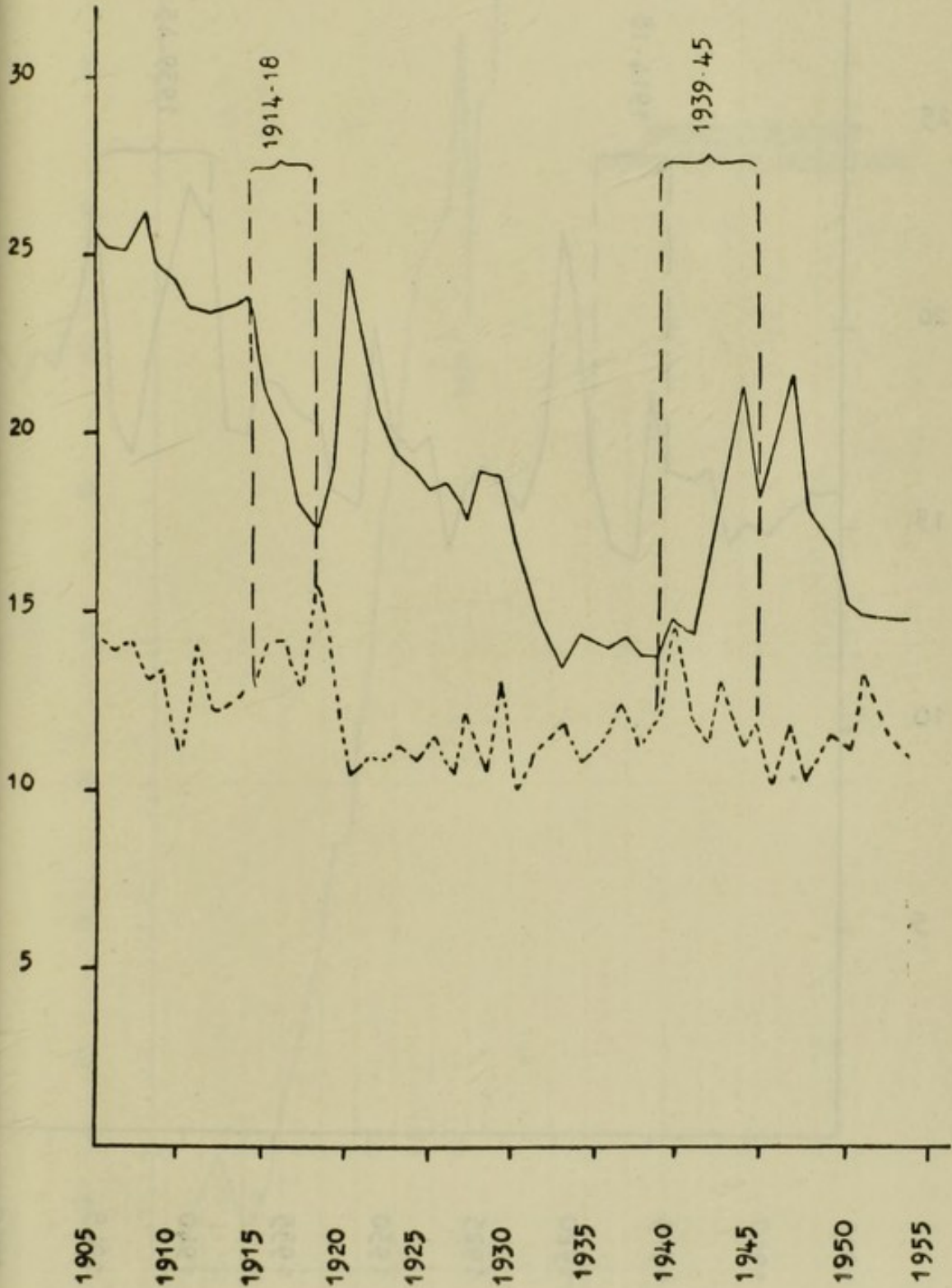
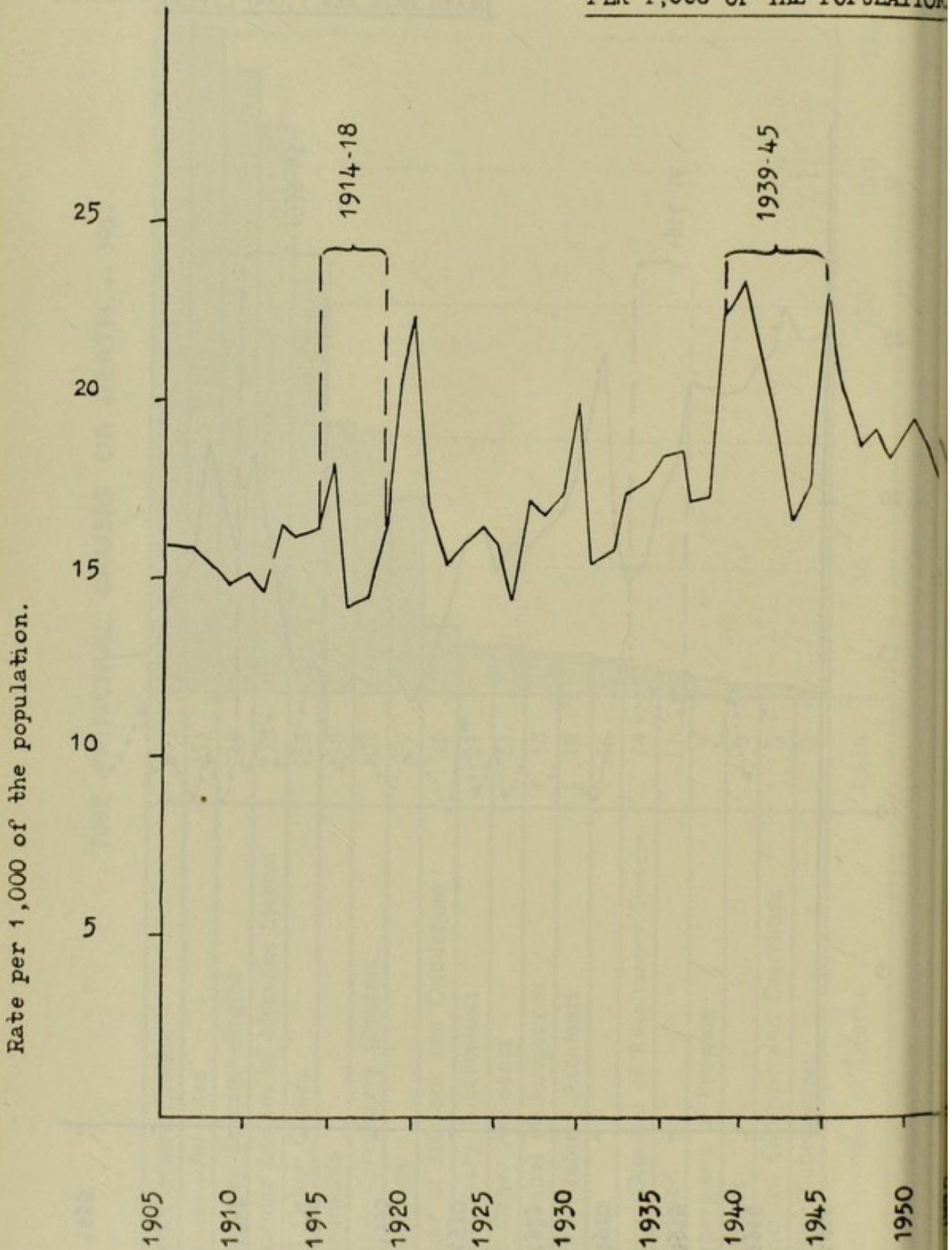


TABLE II

PERSONS MARRIED

PER 1,000 OF THE POPULATION



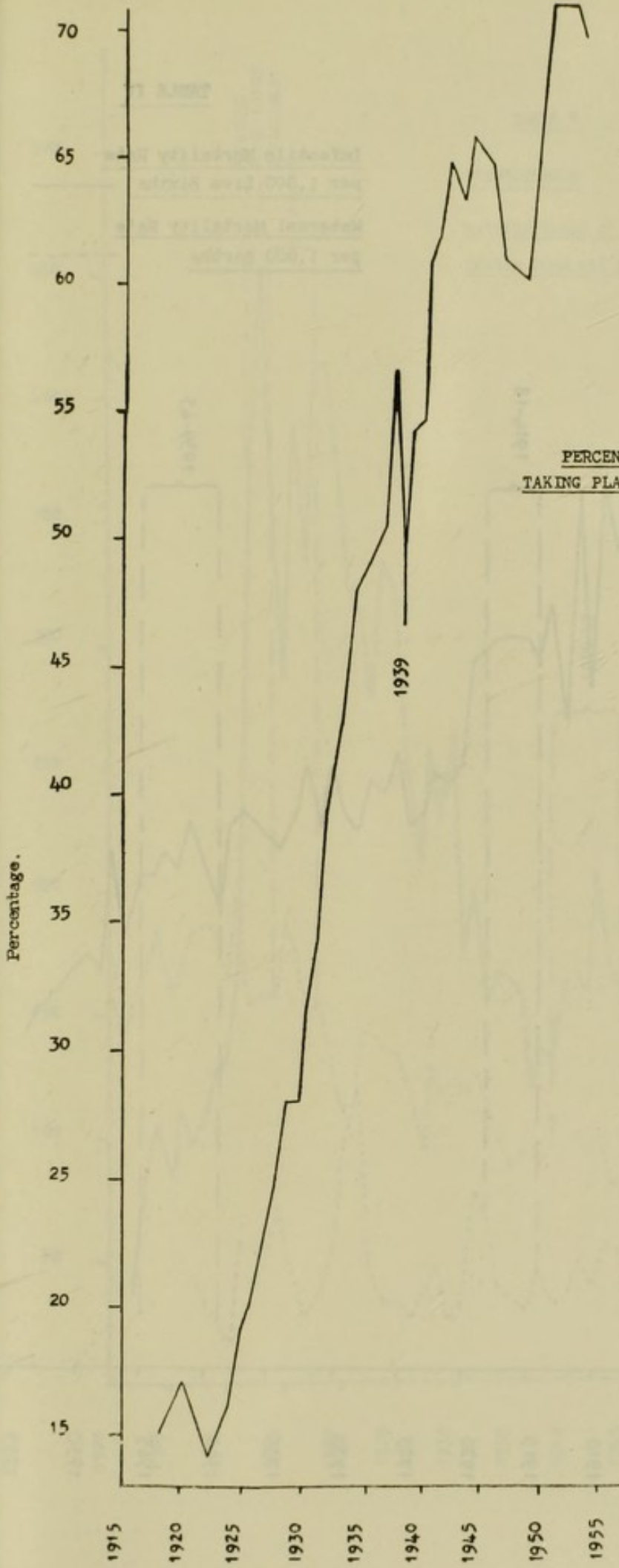


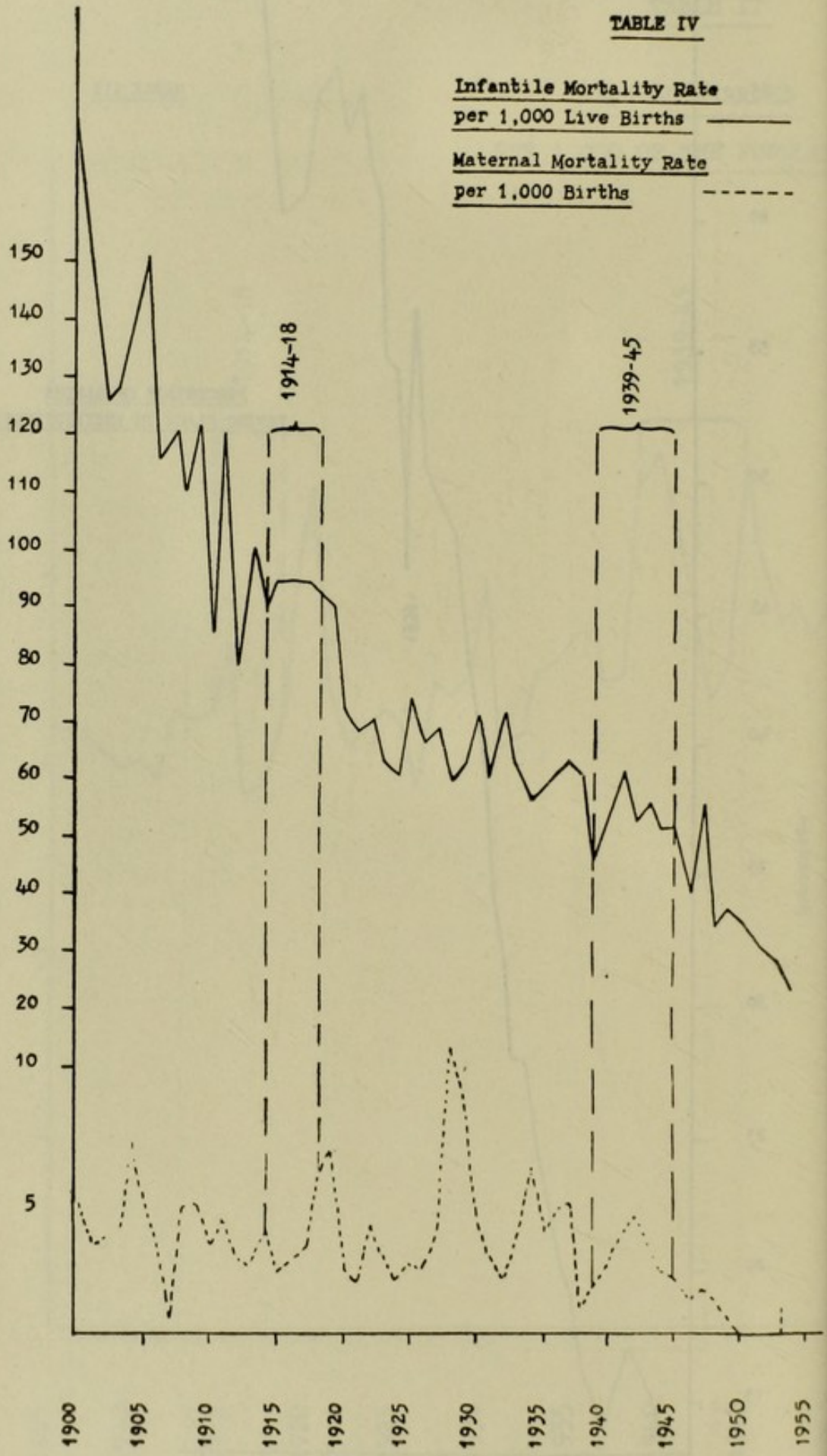
TABLE III

PERCENTAGE OF BIRTHS
TAKING PLACE IN INSTITUTIONS.

TABLE IV

Infantile Mortality Rate
per 1,000 Live Births ———

Maternal Mortality Rate
per 1,000 Births - - - - -



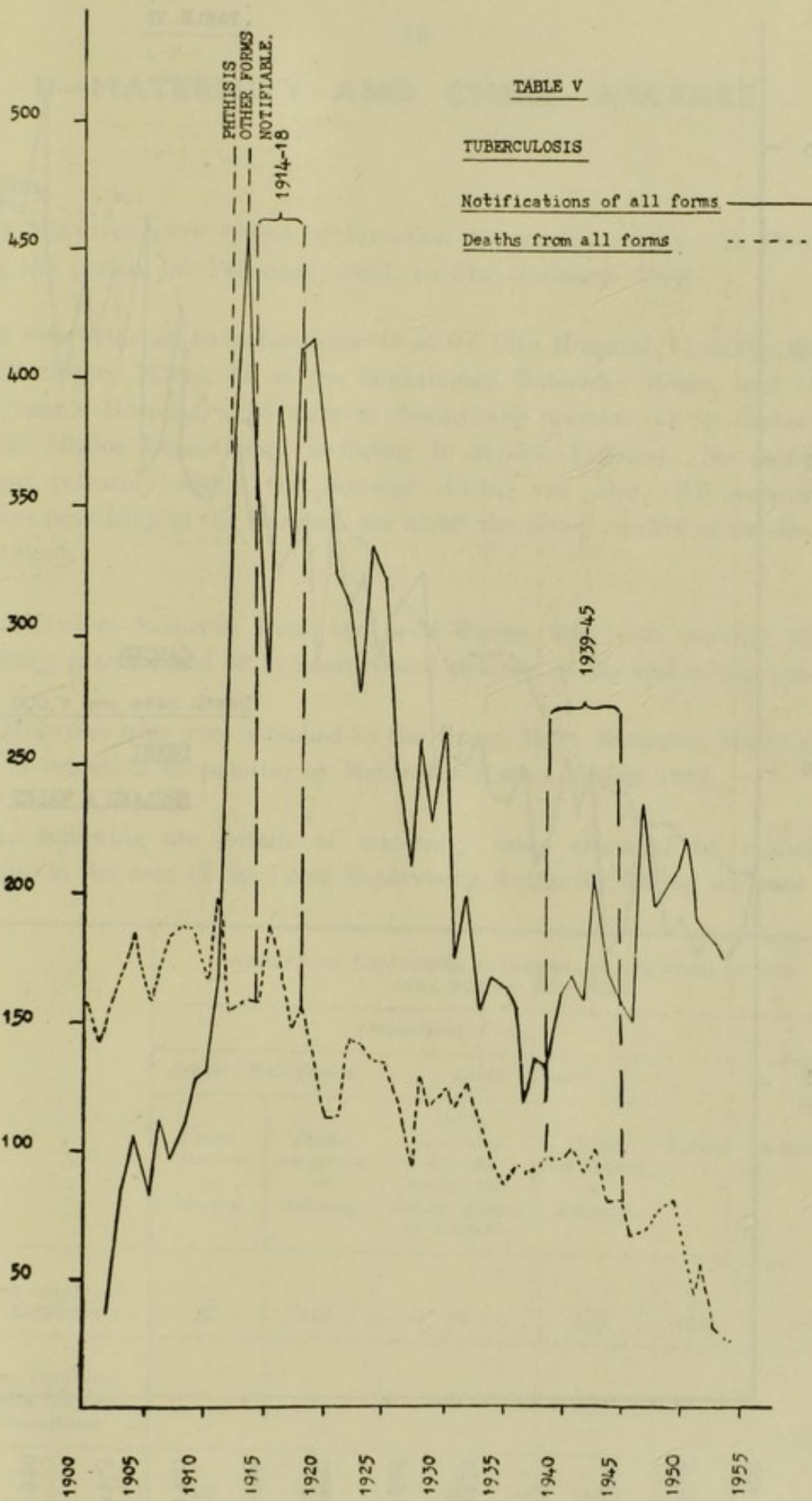
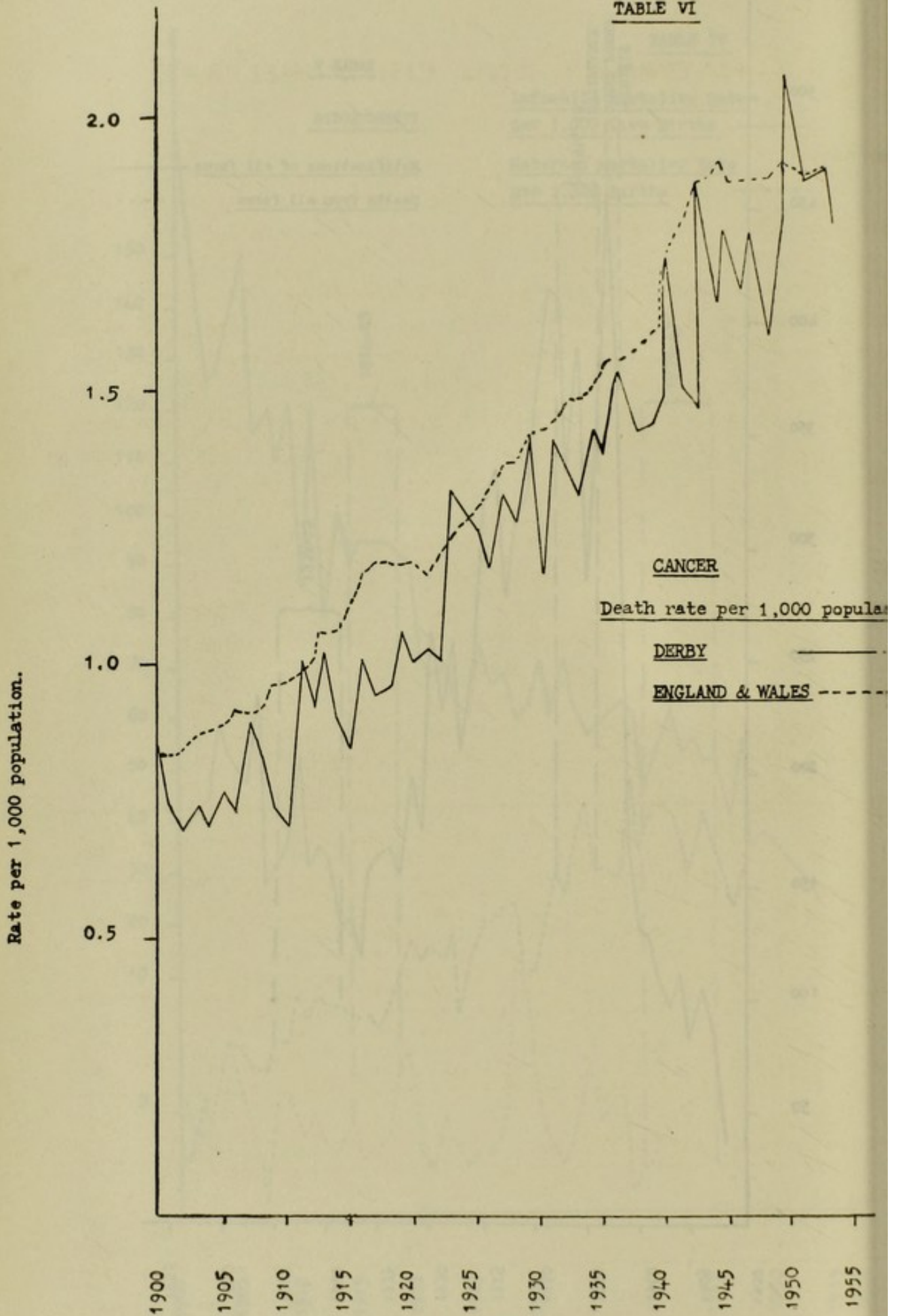


TABLE VI



II—MATERNITY AND CHILD WELFARE.

Midwives.

73 Midwives gave notice of intention to practise within the Borough during the period 1st February, 1953, to 31st January, 1954.

50 were attached to institutions (18 at the City Hospital, 11 at the Queen Mary Maternity Home, 11 at the Nightingale Maternity Home, and 10 at the Women's Hospital); 23 were in domiciliary practice (all in connection with the Health Department, including 10 Health Visitors). No midwives practised privately within the Borough during the year. All domiciliary midwives practising in the Borough are under the direct control of the Health Department.

4 Midwives removed from the area during the year, leaving 13 in domiciliary practice and 46 in institutional practice at the end of the year.

3 Midwives who were attached to the Queen Mary Maternity Home gave notice of intention to practise as Maternity Nurses during 1953.

The following are details of maternity cases attended by midwives practising in the area of the Local Supervising Authority during the year :—

	NUMBER OF DELIVERIES ATTENDED BY MIDWIVES IN THE AREA DURING THE YEAR.					
	<i>Domiciliary Cases.</i>					<i>Cases in Institutions.</i>
	<i>Doctor Not Booked.</i>		<i>Doctor Booked.</i>		<i>Totals.</i>	
	<i>Doctor present at delivery.</i>	<i>Doctor not present at delivery.</i>	<i>Doctor present at delivery (either the booked Doctor or another).</i>	<i>Doctor not present at delivery.</i>		
) Midwives employed by the Authority ...	23	410	76	159			668	Nil
) Midwives employed by Hospital Management Committees ...	—	—	—	—	—	1,498
TOTALS ...	23	410	76	159	668	1,498

Number of Cases delivered in institutions but attended on discharge from institutions and before the fourteenth day,

(a) by Domiciliary Midwives	278
(b) by Health Visitors	407
	<hr/>
	685
	<hr/>

Since March, 1953, it has been the normal procedure of this Authority to split these visits between the Domiciliary Midwives and the Health Visitors, the latter doing all visits at ten days and over, except stillbirth cases and baby deaths occurring in hospital, which are visited exclusively by Domiciliary Midwives.

A very high standard of service has been maintained by the Domiciliary Midwives during the year, in spite of extra work caused by the lying-in visits in respect of hospital cases discharged before the 14th day.

There were 14 Domiciliary Midwives practising in the Borough throughout the year.

All the Domiciliary Midwives have been approved, by the Central Midwives Board, as teachers of pupil midwives.

668 Confinements have been attended by Domiciliary Midwives.

274 Ante-natal and Post-natal Clinic sessions attended.

3,584 Domiciliary Ante-natal visits were made.

11,100 Domiciliary visits during the lying-in period were made.

1,174 Post-Natal visits to Institutional discharges.

The Domiciliary Midwives attended 668 confinements, including non-residents, and medical aid was sought in 111 cases as follows:—

89 on account of mother or expectant mother.

22 „ „ „ infant.

No maternal deaths occurred in cases attended by Domiciliary Midwives.

Medical Aid.

The following table shows the various reasons for the calling in of medical aid by domiciliary midwives.

Mothers.**ANTE-NATAL.**

Ante-partum hæmorrhage	...	...	...	...	...	...	6
Foetal Distress	...	...	...	...	...	...	5
Toxæmia of Pregnancy	...	...	...	...	...	...	2
Delayed onset of labour	...	...	...	...	...	...	1
Uterine inertia	...	...	...	...	...	...	1
Vaginal bleeding	...	...	...	...	...	...	1
							<hr/> 16

NATAL.

Delayed delivery (mainly second stage)	...	...	...	...	...	...	13
Retained Placenta	...	...	...	...	...	...	4
Breech presentation	...	...	...	...	...	...	2
Abnormal presentation	...	...	...	...	...	...	1
Stillbirth (Premature)	...	...	...	...	...	...	1
Rigid perineum	...	...	...	...	...	...	1
							<hr/> 22

POST-NATAL.

Lacerated perineum	...	...	...	...	...	...	34
Puerperal pyrexia	...	...	...	...	...	...	3
Post-partum hæmorrhage	...	...	...	...	...	...	2
Breast abscess	...	...	...	...	...	...	2
Mastitis	...	...	...	...	...	...	1
Various (Abdominal pain, Varicose veins, etc.)	...	...	...	...	...	...	9
							<hr/> 51

Babies.

Prematurity	...	...	...	...	...	...	4
Talipes	...	...	...	...	...	...	3
Vomiting	...	...	...	...	...	...	3
Asphyxia	...	...	...	...	...	...	4
Jaundice	...	...	...	...	...	...	1
Various (eye discharging, distressed breathing, etc.)	...	...	...	...	...	...	7
							<hr/> 22

Total Calls—Mothers	...	...	89
Babies	...	...	22

111

The following notifications were received from midwives in accordance with the Rules of the Central Midwives Board.

Notification of Artificial Feeding.

361 notifications were received, 55 from domiciliary midwives and 306 from institutions, as follows :—

	<i>Domiciliary.</i>		<i>Institutions.</i>	
	<i>Residents.</i>	<i>Non-Residents.</i>	<i>Residents.</i>	<i>Non-Residents.</i>
<i>Substitution on account of :—</i>				
Insufficient Lactation	25	—	47	67
Other Causes	12	—	55	63
<i>Supplementary on account of :—</i>				
Insufficient Lactation	18	—	30	43
Other Causes	—	—	—	1
Total	55	—	132	174

Notification of Liability to be a Source of Infection.

24 notifications were received, 7 from domiciliary midwives and 17 from institutions, as follows :—

	<i>Domiciliary.</i>		<i>Institutions.</i>	
	<i>Residents.</i>	<i>Non-Residents.</i>	<i>Residents.</i>	<i>Non-Residents.</i>
Mothers	4	—	4	12
Infants	3	—	1	—
Total	7	—	5	12

Notification of Death.

33 notifications were received, 2 from domiciliary midwives and 31 from institutions, as follows :—

	<i>Domiciliary.</i>		<i>Institutions.</i>	
	<i>Residents.</i>	<i>Non-Residents.</i>	<i>Residents.</i>	<i>Non-Residents.</i>
Mothers	—	—	—	—
Infants	2	—	8	23
Total	2	—	8	23

Notification of having Laid out a Dead Body.

3 notifications were received as follows :—

<i>Domiciliary.</i>		<i>Institutions.</i>	
<i>Residents.</i>	<i>Non-Residents.</i>	<i>Residents.</i>	<i>Non-Residents.</i>
2	—	1	—

Ante-Natal Clinics.

	<i>Sessions.</i>	<i>Women Attending.</i>	<i>First Attendances.</i>	<i>Total Attendances.</i>
Green Street	48	403	318	2,180
Boulton	48	130	95	657
Roe Farm	52	134	113	820
Amber Street	53	237	185	1,135
Temple House	50	367	277	1,724
Total	251	1,271	988	6,516

Post-Natal Clinics.**GREEN STREET.**

79 attendances were made at 48 post-natal sessions.

TEMPLE HOUSE.

41 attendances were made at ante-natal sessions.

ROE FARM.

45 attendances were made at ante-natal sessions.

AMBER STREET.

57 attendances were made at ante-natal sessions.

BOULTON.

25 attendances were made at ante-natal sessions.

Consultant Clinic.**GREEN STREET.**

23 attendances were made at 12 sessions.

Maternal Mortality.

The Maternal Mortality rate for 1953 was .46 per 1,000 total births (live and still). The form of questionnaire required by the Ministry of Health was completed in respect of this Maternal Death of a Derby resident.

<i>Age.</i>	<i>Cause of Death.</i>	<i>Institution.</i>	<i>Children, left.</i>
33	1 (a) Shock due to inversion of uterus due to retained placenta.	Derby City Hospital.	1
	(b) Toxæmia of pregnancy.		

Births.

3,724 notifications were received during 1953 under Sec. 203 Public Health Act, 1936. Of these, 2,152 were live births and 53 were still-births relating to Derby residents. 1,455 were live births and 64 were still-births relating to non-residents. The details were as follows:—

	LIVE BIRTHS.				STILLBIRTHS.				<i>Total Non-Residents.</i>	<i>Total Residents.</i>
	<i>Doctor</i>				<i>Doctor</i>					
	<i>Booked.</i>		<i>Not Booked.</i>		<i>Booked.</i>		<i>Not Booked.</i>			
	<i>Present.</i>	<i>Not Present.</i>	<i>Present.</i>	<i>Not Present.</i>	<i>Present.</i>	<i>Not Present.</i>	<i>Present.</i>	<i>Not Present.</i>		
RESIDENTS :—										
<i>Domiciliary</i> ...	76	160	21	412	2	1	2	2	—	676
NON-RESIDENTS :—										
<i>Domiciliary</i> ...	—	1	—	4	—	—	—	—	5	—
TOTAL ...	76	161	21	416	2	1	2	2	5	676

	LIVE BIRTHS.		STILLBIRTHS.		<i>Total Non-Residents.</i>	<i>Total Residents.</i>
	<i>Doctor</i>		<i>Doctor</i>			
	<i>Present.</i>	<i>Not Present.</i>	<i>Present.</i>	<i>Not Present.</i>		
RESIDENTS :—						
<i>Institutional</i> ...	270	1,213	17	29	—	1529 10
NON-RESIDENTS :—						
<i>Institutional</i> ...	413	1,037	24	40	1514	— 10
TOTAL ...	683	2,250	41	69	1514	1529 30

1,529, or 69.3%, of total births relating to residents took place in Institutions. 2,138 births were registered.

Still-Births.

117 Still-Births were notified. 53 were in respect of Derby residents and 64 non-residents. There were 95 burials of still-born children in the Derby cemeteries during the year. 53 still-births were registered in respect of Derby residents. Percentage of still-births to live births registered was 2.48.

53 Still-births were investigated.

Analgesia.

At the end of the year all of the 14 Domiciliary Midwives were qualified to administer analgesics in accordance with the requirements of the Central Midwives' Board. Twelve sets of apparatus were in use by these midwives.

During the year analgesics were administered in Domiciliary Confinements, as shown under, compared with previous years:—

<i>Year.</i>	<i>No. of Confinements.</i>	<i>Analgesics Administered.</i>	<i>Percentage.</i>
1949	1,001	561	56.04
1950	785	629	80.13
1951	628	520	82.80
1952	611	491	80.36
1953	668	525	78.59

Pethedine was administered in 370 domiciliary confinements.

Care of Premature Infants.

1. Total number of Premature Babies notified during year whose mothers are normally resident within the Borough	...	177
(a) Born at home	... ..	41
(b) Born in hospital	... ..	136

Weight at Birth.	PREMATURE LIVE BIRTHS.									PREMATURE STILLBIRTHS.	
	† Born in Hospital.			Born at home and nursed entirely at home.			Born at home and transferred to hospital on or before 28th day.			Born in Hos-	Born at Home
	Total.	Died within 24 hrs. of birth.	Survived 28 days.	Total.	Died within 24 hrs. of birth.	Survived 28 days.	Total.	Died within 24 hrs. of birth.	Survived 28 days.	pital.	Home
(a) 3 lb. 4 oz. or less... (1,500 gms. or less).	16	7	7	1	1	—	2	—	2	16	2
(b) Over 3 lb. 4 oz., up to and including 4 lb. 6 oz. ... (1,500—2,000 gms.)	23	4	17	1	—	—	6	—	5	14	1
(c) Over 4 lb. 6 oz., up to and including 4 lb. 15 oz. ... (2,000—2,250 gms.)	34	—	33	7	—	7	1	—	1	—	—
(d) Over 4 lb. 15 oz., up to and including 5 lb. 8 oz. ... (2,250—2,500 gms.)	63	—	62	22	—	22	1	—	1	2	1
Totals ...	136	11	119	31	1	29	10	—	9	32	4

†—The group under this heading will include cases which may be born in one hospital and transferred to another.

Premature babies born on the district have been visited by the Domiciliary Midwives until they have reached the weight of 6 lbs.

Infantile Mortality during the year 1953.

Deaths from stated Causes at various Ages under One Year of Age.

CAUSE OF DEATH.		Under 1 Week	1-2 Weeks	2-3 Weeks	3-4 Weeks	Total under 1 Month	1-3 Months	3-6 Months	6-9 Months	9-12 Months	Total Deaths under One Year.
Common Infectious Diseases.	Measles ... ..	...	...	...	...	...	...	...	...	...	...
	Scarlet Fever...	...	...	...	...	...	...	...	...	...	...
	Diphtheria: Croup ...	...	...	...	...	...	...	...	...	...	...
	Whooping Cough ...	...	...	...	...	...	...	...	...	...	...
	Erysipelas ... ..	...	...	...	...	...	...	...	...	...	...
	Influenza ... ..	...	...	...	...	...	...	...	...	...	...
Diarrhæal Diseases.	Diarrhœa, all forms including Enteritis, Muco-enteritis, Gastro-enteritis, &c. ...	...	...	...	...	...	...	...	...	...	...
	Gastritis ... ..	...	...	...	...	...	...	...	...	...	...
Fasting Diseases.	Premature Birth	3	...	...	...	3	...	...	...	...	3
	Congenital Defects ...	8	2	1	...	11	...	1	...	1	13
	Injury at Birth	2	...	...	...	2	...	...	...	...	2
	Atelectasis	16	...	...	...	16	...	...	...	...	16
Tuberculous Diseases.	Atrophy, Debility, Marasmus	...	...	...	...	...	...	...	...	...	...
	Tuberculous Meningitis ...	...	...	...	...	...	...	...	...	...	...
	Other Tuberculous Diseases...	...	...	...	...	...	...	...	...	...	...
	Abdominal Tuberculosis ...	...	...	...	...	...	...	...	...	...	...
Other Causes.	Meningitis (not Tuberculous)...	...	...	...	...	...	...	...	...	...	...
	Convulsions ... ..	...	...	...	...	...	...	...	...	...	...
	Bronchitis ... ..	...	...	...	...	...	...	...	...	...	...
	Pneumonia	1	1	...	...	2	3	6	1	...	12
	Suffocation, overlying	...	...	...	...	...	...	...	...	...	...
	Syphilis ... ..	...	...	...	...	...	...	...	...	...	...
	Laryngitis ... ..	...	...	...	...	...	...	...	...	...	...
	Other Causes	2	...	1	...	3	1	...	2	1	7
TOTALS		32	3	2	...	37	4	7	3	2	53

Births (Legitimate 2,019 Deaths { Legitimate Infants 48 Infantile Mortality 23.8 } 24.32
 Registered (Illegitimate 119 { Illegitimate ,, 4 ,, ,, 33.6 } per 1,000
 reg'd Births

Attendances at Welfare Centres in 1953.

CENTRE.	Sessions held.	No. of individual children attending.	Attendances.		Number of Children						First Attendances.						Babies entirely artificially fed at first visit.															
			Mothers.	Children.	Weighed.	Seen by Doctor.					Total.	Under 1 month.	1-3 months.	3-6 months.	6-9 months.	9-12 months.	Total under 1 year.	1-5 years.	Total.	Under 1 month.	1-3 months.	3-6 months.	6-9 months.	Total.								
						Under 1 year.	1-2 years.	2-3 years.	3-4 years.	4-5 years.															Under 1 month.	1-3 months.	3-6 months.	6-9 months.	9-12 months.	1-5 years.	Under 1 month.	1-3 months.
Boulton ...	100	257	2,437	1,954	472	176	58	15	2,675	2,642	412	82	59	23	8	584	83	42	8	3	1	137	3	140	16	21	1	—	—	—	38	
Nightingale Road	104	498	3,479	2,791	522	214	121	59	3,707	3,619	686	143	109	62	37	1,037	113	46	9	6	6	180	20	200	32	17	3	—	—	—	52	
Pear Tree ...	102	566	4,221	3,343	654	247	73	67	4,384	4,372	547	156	97	42	32	874	153	67	11	8	3	242	13	255	36	30	13	8	—	—	87	
Normanton ...	102	440	2,193	1,652	306	151	102	96	2,307	2,228	411	108	88	57	54	718	69	44	12	2	2	129	13	142	15	20	9	2	—	—	—	46
Temple House ...	100	632	4,058	3,433	428	177	75	33	4,146	4,139	454	80	83	45	14	676	159	106	14	10	8	297	16	313	52	54	10	10	—	—	—	126
Rykneld ...	81	281	2,060	1,707	273	92	38	8	2,118	2,060	312	77	44	24	6	463	64	59	4	5	5	137	5	142	17	14	—	—	—	—	—	31
Roe Farm ...	99	454	2,209	1,578	429	150	137	98	2,392	2,325	284	112	81	59	47	583	66	45	8	5	2	126	4	130	18	30	7	6	—	—	—	61
Green Street ...	153	852	3,999	3,335	412	188	68	48	4,051	4,046	635	110	89	32	27	893	169	134	29	13	8	353	16	369	65	70	24	8	—	—	—	167
Mackworth ...	2	18	11	11	—	—	—	—	11	11	—	—	—	—	—	—	—	2	—	—	2	—	—	2	—	3	—	—	—	—	—	3
TOTAL ...	843	3,998	24,667	19,804	3,496	1,395	672	424	25,791	25,442	3,741	868	650	344	225	5,828	876	545	95	52	35	1,603	90	1,693	251	259	67	34	611	611		

Ophthalmia Neonatorum.—Cases notified, 5.

Further information and the table required by the Ministry will be found on page 86.

Pemphigus Neonatorum.—No cases were notified during the year.

Children of Pre-School Age.

During the year under review, routine medical inspection was carried out in 1,080 children of two, three and four years of age. Of this number, 125 were admitted to school during the year and particulars of the treatment of those cases are included in that part of the Report dealing with school children. Of the remaining 955 routine medical inspections, 194 children were referred for treatment and 444 placed under observation. In a number of these cases, children with more than one defect are included under both headings. The number of individual children requiring treatment or observation, or both, was 563. In addition, 284 re-inspections and 46 special examinations were made.

Below is a statement of cases, showing the numbers of children of pre-school age which were referred to the various clinics during the year:—

Ultra-Violet Ray Clinic	...	...	...	...	...	37
Orthopædic Clinic	...	...	...	...	...	142
Aural Clinic	...	...	...	...	...	13
Dental Clinic	...	...	...	...	...	546

Attention has been paid by the Health Visitors throughout the year to the conditions of the children's hair. Once again we have to report a very low incidence of infestation among those examined.

Work of the Health Visitors.

Report by Miss E. M. Gardiner, Superintendent Health Visitor.

1953 has again been a successful year for Health Visiting in Derby. The staff position has been easier and, as a consequence, each infant has been visited at least monthly during its first year of life. 57,314 visits have been paid to approximately 10,995 pre-school children and extra work of various kinds has also been undertaken.

A new Welfare Centre has been opened in St. Francis' Hall, Mackworth, and has already proved its worth. The Health Educational work has gone steadily forward at each of the nine Welfare Centres and five Ante-natal Clinics and, with the advent of a film projector, this will be intensified.

5. MISCELLANEOUS.

Unsuccessful visits (out, removals, etc.)	9,009
Assisting at Infant Welfare Sessions	1,345
,, ,, Ante-natal Clinics	258
,, ,, Post-natal Clinics	46
,, ,, Consultation Clinics	12
Attending Committee meetings	24

The Unmarried Mother and Child.

The Derby and Derbyshire Association for the Help and Protection of Girls has been able to carry on with the hostel which was opened in 1944. A close liaison has been maintained between the Local Authority and the Association. In 1953, 3 Borough residents were cared for in the Hostel, and 12 expectant mothers were admitted to homes elsewhere.

I am indebted to Mrs. Mary Morling, Moral Welfare Worker, for the following Report on the work of the Diocesan Moral Welfare Association in the Borough.

"The case work during the last twelve months has not diminished or been less complicated than in 1952. Press publicity and personal recommendations have brought in cases in great variety.

"We are still deeply concerned at the number of carnal knowledge cases and often the attitude of the men involved is one of callous indifference. The greater number of men responsible for illegitimate children are married and, more often than not, have good wives, comfortable homes, and young children. They appear to have no concern for all the unhappiness which they cause by their actions. Broken homes mean insecurity for innocent children and we cannot stress too strongly the need for Christian homes where parents are practising Christians, and children are taught the Christian faith, self discipline, and obedience.

"We are still receiving applications from married couples for the adoption of their children who are stated to be a 'nuisance'. We do not accept this type of request, but advise the Children's Officers who see that the children are protected.

"The number of unmarried mothers keeping their babies has slightly increased. We do all we possibly can to help them by finding them posts with their babies, and giving them unceasing after-care.

"The work among the aliens has not increased, but inquiries have multiplied regarding children born of foreign women abroad by English fathers. It is difficult to approach the man concerned without perhaps breaking up a happy home. Fortunately in most cases the wife is ready to forgive and agrees to financial help for the child.

"We still urgently need a Home to which we can send women and girls who need immediate shelter. So many are turned out of their homes or lodgings and have nowhere to lay their heads.

"There is a great development in the work. People in all walks of life have grown to depend on us. The co-operation between ourselves and the Borough Authorities, the doctors, solicitors, hospital sisters and almoners, makes for efficiency and we greatly appreciate all the help they give us. The kindness and gentleness of the Police to the very young girl is outstanding. We are grateful to the W.V.S. who have helped us with some of our routine clerical work and we are also grateful to be given the opportunity to present this short report on the very important work of Moral Welfare."

Case Work, 1953.

Interviews at Derby Office	...	...	...	...	600
Telephone Calls	...	...	...	...	400
New Cases	...	...	...	...	42
Cases active from 1952	...	...	...	...	8
After-Care	...	...	...	...	8
Single Girls	...	...	...	...	38
Married Women	...	...	...	...	4
Matrimonial Cases	...	...	...	...	10
Carnal Knowledge	...	...	...	...	2
Alien Cases from Home Office	...	...	...	...	4
Putative Fathers :—					
Single Men	...	...	...	...	10
Married Men	...	...	...	...	9
Babies to Homes	...	...	...	...	2
Application to Adopt	...	...	...	...	5
For Adoption through Registered Societies	...	...	...	...	12
Affiliation Orders	...	...	...	...	6
Fathers paying for Children Overseas	...	...	...	...	1
Intermediary for Dr. Barnardos	...	...	...	...	5
Girls moved to Homes	...	...	...	...	28
Girls married	...	...	...	...	4
Girls confirmed	...	...	...	...	3

Day Nurseries.

Report by Miss M. R. Moss, Supervisor of Day Nurseries.

All the usual signs of activity and happiness for the children in the four Derby Day Nurseries continued during Coronation Year. The co-operation of the mothers, the vigilance of the medical officers in routine medical examination (including immunisation against diphtheria), plus the staff's painstaking daily care was rewarded by a good standard of health. The importance of this vigilance was shown in the excellent attendance by the children throughout the year.

Many mothers who were in distress were provided with accommodation for their children, amongst these being widows, unmarried mothers, and wives whose husbands were suffering poor health or were in H.M. Forces. Children of separated parents or of mothers who were in vital posts (e.g., teaching, nursing, etc.), and children living under poor home conditions (one or two rooms, no garden), were also provided for.

The demand for short term accommodation continued, e.g. confinements, illness of mother. Where there were no relatives to assist these children were admitted. These parents greatly appreciate the help extended to them by the Local Authority.

Waiting lists for all nurseries continued and the need for admission owing to financial difficulties appears to be increasing.

Children accommodated and number of children on the waiting lists for the year 1953 :—

	0—2 yrs.	2—5 yrs.
Number of approved places	65	105
Number of children on the register at 1st of January, 1953	57	139
Number of children admitted during the year ...	105	74
Number of children discharged during the year ...	55	113
Number of children on the register at 31st of December, 1953	58	140
Average daily attendance	52	108
Number of applications for admission		283
Number of applications for admission outstanding at the end of 1953		387

The number of students in training during the year for the Nursery Nurses Diploma (National Nursery Examination Board) was 18. Eight of these were "second year" students and ten were "first year". Five students

entered for the examination and four passed. Two of these students obtained posts privately and are both still very happy in this work. The other two students were promoted to Nursery Assistants and both are doing valuable work in the Derby Day Nurseries. The student who failed is re-sitting in the new year. Two of the eight second year students are specialising in "Infant Care" work and will be taking their Diploma examination early in the new year. The remaining student left prior to taking the examination as she was needed at home.

Naturally, the training of students is an important feature of this work and the benefit of this training to them is most apparent. They emerge as useful citizens with a good knowledge of many subjects, e.g. mothercraft and kindergarten work, cookery, household duties, art, handwork, etc. This experience helps them towards a better understanding of humanity in many ways, not only in the day-to-day work with the children and their colleagues, but in the knowledge of how other people live and work.

The number of staff employed at the end of the year was as follows:—

	<i>Ford</i>	<i>Kitchener</i>	<i>Beaufort</i>	<i>Osmaston</i>	
	<i>Street.</i>	<i>Avenue.</i>	<i>Street.</i>	<i>Road.</i>	<i>Total.</i>
Matrons	1	1	1	1	4
Staff Nursery Nurses...	3	2	2	3	10
Nursery Assistants ...	1	1	—	1	3
Wardens	1	—	—	1	2
Students	7	8	8	13	36

Two of the above students are worthy of mention in the fact that one was a nursery child attending from four years of age in 1942, and the other did 3½ years voluntary work in all school holidays until leaving school, when she did full time unpaid work prior to being absorbed as a member of the staff.

In March the fees were increased to 3/- per child per day, the old fee of 1/6 being resorted to only in extenuating circumstances.

Highlights of the year included the Derby Coronation Exhibition where we were privileged to have a stand. Here was displayed the work undertaken in the nurseries. A complete miniature of a nursery in action was shown and also many aspects of the staff's work, including all types of handworked garments and toys, works of art and puppet shows, etc. The public appeared to be particularly interested in large scale photographs of the children in their play and activities, which were taken by a very interested amateur photographer who is a member of the staff.

Two nurseries held garden parties, and an annual staff dance helped to raise money towards the purchase of toys at the end of the year, thus enabling Father Christmas to produce a gift for every child.

Nursing Homes.

Registered at 31st December, 1952	...	...	...	...	...	—
(1) Applications for registration	...	...	...	...	...	—
(2) Applications for registration withdrawn	...	...	...	...	...	—
(3) Homes registered	...	...	...	...	...	—
(4) Orders made refusing or cancelling registration	...	...	...	...	...	—
(5) Appeals against such Orders	...	...	...	...	...	—
(6) Cases in which Orders have been—						
(a) Confirmed on appeal	...	...	...	...	...	—
(b) Disallowed	...	...	...	...	...	—
(7) Number of applications for exemption from registration...						1
(a) Granted	...	...	...	...	...	1
(b) Withdrawn	...	...	...	...	...	—
(c) Refused	...	...	...	...	...	—
On register at end of year	...	...	...	...	...	Nil

Nurseries and Child-Minders Regulation Act, 1948.

Three daily minders are registered under the above Act, providing altogether for five children. These children have been visited at approximately fortnightly intervals.

During the year an application was received from the Derby and Derbyshire Association of Parents of Backward Children for registration, in accordance with the above Act, of a Nursery for 16 mentally defective children.

The application was granted and the premises have been visited.

III. —DENTAL SERVICES.

Report by Mr. A. Stafford, Principal School Dental Officer.

A satisfactory year's work was accomplished during 1953 under the authority's dental schemes, both in the School Dental Service and in the Priority Dental Services (for Expectant and Nursing Mothers and Pre-School Children). During the past year there have been steady and definite signs of the beginning of a revival in the public dental services as a whole, and local authority dental staffs are gradually regaining their former strength in numbers. This has been largely due to the improved conditions of service, which now compare much more favourably with those to be found in general practice, and which will surely stimulate that recruitment to the services which is so badly needed.

As in Derby we never lost much ground in the matter of personnel during the period since 1948, when so many dental surgeons drifted out of public work into private practice under the National Health Service, neither have we had much to recover in this revival, but we have the immense satisfaction of knowing that we have not the enormous amount of arrears to wipe off, and ravages to repair, with which so many other areas are still confronted.

This optimistic note, however, should not obliterate the fact that our approved establishment of staff is not yet sufficient to cover all requirements, and once again attention must be drawn to the point that in all groups receiving dental care through these services, there still continues to be an amount of dental disease—mainly of an incipient nature—left untreated, and it is plain that only an increase in staff and facilities can solve this problem. I submit that it is not sufficient to say—as I consider it can rightly be said—that this authority's dental services are as good as most, and possibly better than some of those in other areas, and therefore we should be content with this. I maintain, rather, that the two main objectives at which efforts should be aimed are, firstly, the full discharge of the duties placed upon the authority under the Education and Health Service Acts, namely, to give full and comprehensive treatment where needed to all those persons who come within that scope, and secondly, that this authority should be in the forefront with regard to the efficiency and achievements of its dental schemes—setting a lead, rather than running with the pack, and not the greatest degree of complacency would allow me to think that we are doing the former.

Dentistry has made rapid advances in recent years, but these have been almost entirely in the treatment of dental disease rather than in the prevention of its onset. Until science can unfold some of the mysteries of its

cause, and research workers can give some guidance in measures for its prevention—for example, investigations are being made at the present time into the possibilities that may lie in the fluoridation of water supplies as a deterrent to dental caries—those in the field must continue to follow the accepted methods of dealing with the disease which consist mainly of, on the one hand, the elimination of oral sepsis and the relief of pain by the removal of unhealthy teeth (at least this is of some benefit to the general health of the patient) which has frequently to be accompanied by the insertion of artificial substitutes, and on the other hand, such efforts at prevention as are at their disposal, viz., the filling of teeth and other methods of conserving them, the practice of orthodontics on the young, and the educating of the public of all ages in matters of oral hygiene and “tooth-mindedness”, and it is in these activities that the Borough’s dental services are being directed.

Personnel.

Although, as has already been stated, we have been able to maintain the greater part of our establishment of dental officers, last year was the first time since 1947 that we got through a whole year with a full complement. There were, however, two other changes in the staff, involving the replacement of one attendant and the dental clerk. As these require a period of training in their respective duties before they can be of reasonable use to the service, work was consequently slowed up to some extent on this account.

With regard to dental attendants, I feel that I should repeat a recommendation I have made on different occasions in the past, that an increase in their number would prove to be an economy in the long run—indeed, I go so far as to say that at any time in the future when any extension of the dental services were being considered, it is in this direction that the first increase in staff should be made, before embarking on the far more costly matter of more officers, with the necessary surgeries and equipment for them, that may ultimately be required. Here is a means of making some contribution towards catering for that treatment which is at present being neglected, at a lower salary cost and needing only a little more space in which to work.

The following two reasons are the main ones in support of this contention. (a) The use of a well-trained attendant relieves the officer of many simple duties, enabling him (her) to devote more of his time to those for which he is qualified. It is an economy, therefore, to employ sufficient assistance of this kind to permit the full use of an officer’s time in the work in which he alone is skilled, and after long experience I am of opinion that the ratio of officers

to attendants should not be less than two to three, and that one of one to two is more suitable, without being one that might lead to a wrong delegation of responsibility in the treatment and care of the patient. The existing ratio is five officers to six attendants. (b) Our records over a number of years show that absence from duty on account of sickness occurs much more amongst attendants than amongst officers. Much as in the case of hospitals, work at clinics cannot be completely held up in such circumstances, and most of that already arranged must go on. Clerical duties, chairside assistance, and the preparation and clearing of surgeries, work normally carried out by the attendant have perforce to be undertaken by the officer, and there have actually been occasions when the number of attendants has been so depleted that for a period an officer was fully occupied in these ancillary duties. When it is remembered that the cost of employing an officer can be from four to six times that of an attendant, it is apparent that such a situation should be remedied if at all possible, and a greater supply of attendants would allow the spread of the load on these occasions more economically.

Prominence has been given to this matter, and in detail, because I rate it as one of importance, and when we can be rid of the congestion existing in our present premises, it is one that should receive careful consideration.

Premises.

The unsuitability of the dental rooms at Temple House is a matter I have drawn attention to with a somewhat monotonous regularity in past annual reports, and thus it is with much pleasure that, at the time of writing, there is every promise of a move into more commodious premises in the near future. If these hopes materialise, this will mean a great improvement to the working conditions of the staff and to the comfort of patients and parents, all of which should result in a beneficial uplift to the dental services.

In the meantime, clinics for school work, as well as that for the Priority Classes, continue to be held at Temple House and at the branch clinic at the Derby City Hospital, while in connection with the latter group, dental inspections for Expectant Mothers are held fortnightly at five Ante-Natal Clinics.

THE SCHOOL DENTAL SERVICE.

Inspection.

All the Primary and Secondary Modern Schools were visited once during the year for routine dental inspection. With regard to the Grammar Schools (including the Joseph Wright School) all were visited with the exception of the Homelands School, which will receive priority for this purpose in 1954.

At these inspections children of all ages were examined, totalling 20,299, of which 20.8% were considered to be dentally sound, 21.3% slightly defective and 57.9% requiring treatment. Of the last named group, numbering 11,744, it was possible to refer 9,400, and of these 81.3% consented to treatment, 13.2% refused the offer, while from 5.5% there was no reply. Table 1 (page 41) gives these details of the children per age group as well as per school, and of the response to our offer of dental care in the case of each school.

Treatment.

13,357 attendances at the clinics were made by 9,146 children for the following types of treatment.

- (a) *Fillings.* 6,489 were inserted in 5,414 permanent teeth and 10 fillings in 8 temporary teeth.
- (b) *Extractions.* 10,803 temporary teeth and 1,941 permanent teeth were removed (229 of the latter being sound teeth extracted for orthodontic purposes).
- (c) *Anæsthetics.* 7,092 general anæsthetics (Nitrous Oxide and Oxygen) and 5 local anæsthetics were administered for the foregoing extractions.
- (d) *Other operations.* There was the normal small number of cases of dressings for gum conditions and for the scaling and polishing of teeth. 46 small dentures were provided for certain older scholars, and 13 similar dentures were repaired.

Table 2 (page 42) gives these details in tabulated form.

Specialised Treatment.

- (a) *Orthodontia.* 39 appliances for the correction of simple cases of irregularity of teeth were constructed, and overcrowded mouths were rectified by extraction treatment.
- (b) *Radiography.* 174 X-ray films were taken during the year, with great assistance to subsequent treatment.

Propaganda Work and Research.

As all available time was used in meeting the demands of inspection and treatment, no opportunity was afforded for efforts in this direction.

PRIORITY DENTAL SERVICES.

Inspection.

There was an increase in the number of patients inspected in each of the three groups of the Priority Classes as against last year's figures—9% in the case of Expectant Mothers, 28% for Nursing Mothers and 6% for Young Children. This tends to reaffirm the growing demand of these groups to avail themselves of the service, even in those cases where no treatment was found to be required, a really progressive sign.

Treatment.

In spite of the increase in the number of Expectant Mothers examined, there was a fall of 11% in the number treated by us. This could, of course, be an indication that dental conditions in this group may be improving, but data over a much longer period than one year, and covering a wider field, would be necessary to confirm this possibility. There was an increase of 28% in the number of Nursing Mothers treated, and one of 4% for Young Children, increases which correspond very closely to those in the numbers examined. Tables 3 and 4 (page 43 and 44) give these and other details in statistical form.

Propaganda Work and Research.

As in the past, almost a negative report on these activities, the issue of suitable pamphlets, published and supplied free by the Dental Board of the United Kingdom being the only measure that time would afford.

The year's work was carried out by a staff who constantly worked under the handicap of cramped space, and with interruptions due to sickness and changes of staff, and it is my pleasant duty to record that they accomplished it with dilligence, cheerfulness and loyalty, and also, I consider, with success.

TABLE 1. ROUTINE DENTAL PERCENTAGES, 1953.

SCHOOL.	Sound.	No Treatment.	Requiring Treatment.	RESULT OF M.14's.		
				Consent.	Refusal.	No Reply.
Abbey	32.7	5.3	62.0	84.7	13.5	1.8
Allenton	15.8	8.3	75.9	79.5	16.8	3.7
Ashgate	16.8	29.2	54.0	79.1	16.8	4.1
Beaufort	8.9	31.6	59.5	76.7	16.2	7.1
Becket... ..	11.4	31.9	56.7	80.6	11.4	8.0
Bemrose	44.0	2.6	53.4	86.6	9.1	4.3
Boulton	15.9	28.5	55.6	80.7	17.5	1.8
Brackensdale	30.2	34.9	34.9	93.0	7.0	—
Castle	17.0	30.9	52.1	69.1	23.9	7.0
Central	30.1	5.3	64.6	83.0	12.7	4.3
Christ Church	14.1	34.4	51.5	89.6	7.8	2.6
College	12.3	39.7	48.0	73.1	12.3	14.6
Dale	19.5	25.4	55.1	77.9	12.0	10.1
Derby	50.6	1.6	47.8	88.0	10.4	1.6
Derwent	18.5	14.9	66.6	80.0	13.3	6.7
Firs Estate	14.9	31.0	54.1	86.6	8.4	5.0
Hardwick	20.5	22.1	57.4	85.9	9.9	4.2
Homelands	—	—	—	—	—	—
Joseph Wright	55.9	—	44.1	98.0	2.0	—
King's Mead	15.2	31.8	53.0	53.3	33.6	13.1
Lancaster	37.3	2.2	60.5	42.1	26.3	31.6
Markeaton	33.6	12.4	54.0	82.3	14.6	3.1
Moorhead	19.0	38.0	43.0	90.9	7.3	1.8
Nightingale	9.6	27.2	63.2	86.2	11.9	1.9
Normanton	19.7	22.4	57.9	85.7	12.0	2.3
Parkfields Cedars	37.2	3.1	59.8	81.2	14.6	4.2
Pear Tree	22.9	17.9	59.2	80.6	10.2	9.2
Roe Farm	16.3	31.4	52.3	91.4	3.5	5.1
Rosehill	20.5	17.2	62.3	77.6	19.4	3.0
Rykneld	20.5	2.3	77.2	69.4	21.1	9.5
St. Chad's	43.6	42.1	14.3	84.2	15.8	—
St. Dunstan's	4.9	48.5	46.6	78.6	21.4	—
St. James' Church	9.1	28.3	62.6	86.0	11.0	3.0
St. John's	17.6	27.0	55.4	76.6	13.8	9.6
St. Joseph's	26.0	21.9	52.1	82.8	5.2	12.0
St. Luke's	19.7	41.8	38.5	63.9	30.6	5.5
St. Mary's	28.0	20.1	51.9	88.1	10.8	1.1
St. Paul's	10.4	29.0	60.6	84.3	9.0	6.7
St. Peter's	16.1	40.8	43.1	75.6	14.6	9.8
Sinfin	10.2	21.2	68.6	79.9	9.6	10.5
Southgate	26.4	16.9	56.7	70.7	14.8	14.5
Sturgess	31.7	5.3	63.0	78.0	22.0	—
Temple House	29.8	9.6	60.6	77.4	3.2	19.4
Wilmorton	12.1	30.5	57.4	88.2	8.1	3.7
PERCENTAGE	20.8	21.3	57.9	81.3	13.2	5.5
AGE GROUPS.						
5 years of age	25.9	42.2	31.9			
6 " " " "	16.3	41.7	42.0			
7 " " " "	10.4	33.5	56.1			
8 " " " "	10.3	23.6	66.1			
9 " " " "	10.6	20.2	69.2			
10 " " " "	13.8	17.6	68.6			
11 " " " "	22.0	11.7	66.3			
12 " " " "	32.1	4.9	63.0			
13 " " " "	32.3	2.0	65.7			
14 " " " "	30.8	1.1	68.1			
15 " " " "	36.2	0.2	63.6			
16 " " " "	51.0	—	49.0			
17 " " " "	48.8	—	51.2			
18 " " " "	40.0	—	60.0			
19 " " " "	—	—	100.0			

TABLE 2.

INSPECTION AND TREATMENT.

1. No. of pupils inspected by the Authority's Dental Officers :—		6. Half-days devoted to :—	
(a) Periodic Groups :—		(a) Inspection	151
Aged (up to)		(b) Treatment	1,704
5 years	2,730	TOTAL	1,855
6 „	2,358		
7 „	2,006	7. Fillings :—	
8 „	1,995	Permanent Teeth	6,489
9 „	2,037	Temporary Teeth	10
10 „	1,807	TOTAL	6,499
11 „	1,662		
12 „	1,528	8. No. of teeth filled :—	
13 „	1,747	Permanent Teeth	5,414
14 „	1,588	Temporary Teeth	8
15 „	522	TOTAL	5,422
16 „	196		
17 „	86	9. Extractions :—	
18 „	35	Permanent Teeth	1,941
19 „	2	Temporary Teeth	10,803
TOTAL	20,299	TOTAL	12,744
(b) Specials	44		
(c) TOTAL (Periodic and Specials)	20,343	10. Administration of Anæsthetics :—	
		General	7,092
2. No. found to require treatment	14,369	Local	5
		TOTAL	7,097
3. No. referred for treatment... ..	12,025		
		11. Other Operations :—	
4. No. actually treated	9,146	Permanent Teeth	980
		Temporary Teeth	5
		Dentures	46
		Orthodontic Appliances... ..	39
		Denture Repairs	13
		X-Rays	174
5. Attendances made by pupils for treatment	13,357	TOTAL	1,257

TABLE 3. SCHOOLS AND SCHOOL CHILDREN
 SHOWING INSPECTIONS AND TREATMENTS CARRIED OUT
 AT EACH OF THE DENTAL CENTRES.

1953.	TEMPLE HOUSE.				CITY HOSPITAL		ANTE-NATAL INSPECTION CLINICS.					TOTALS.
	Expectant Mothers.	Nursing Mothers.	Young Children.	Miscellaneous.	Expectant Mothers.	Nursing Mothers.	Roe Farm.	Boulton.	Temple House.	Green Street.	Amber Street.	
Attendances	64	113	664	28	898	108	79	70	165	213	143	2,545
Cases examined... ..	17	39	546	15	556	34	77	69	164	213	143	1,873
Needing treatment ...	16	38	507	14	323	34	45	37	100	126	81	1,321
Referred for treatment ...	14	36	507	14	162	34	26	25	56	61	55	990
„ to own dentist ...	1	—	—	—	118	—	9	6	29	39	17	219
Refused treatment ...	1	2	—	—	10	—	1	1	2	3	2	22
Treatment inadvisable... ..	—	—	—	—	33	—	9	5	13	23	7	90
Failed to attend	—	1	—	—	11	—	7	3	15	19	8	64
Treated	14	35	507	14	151	34	18	22	41	42	44	922
Made dentally fit	5	24	451	10	70	9	—	—	—	—	—	569
Awaiting treatment	—	—	—	—	—	—	1	—	—	—	3	4
Extractions	13	78	1,116	7	700	118	—	—	—	—	—	2,032
Local Anæsthetics	1	—	—	—	16	9	—	—	—	—	—	26
General Anæsthetics	9	25	588	6	282	20	—	—	—	—	—	930
Fillings	11	—	4	8	8	—	—	—	—	—	—	31
Scalings & Gum treatments ...	1	—	—	1	2	—	—	—	3	—	5	12
Silver Nitrate treatments ...	—	—	—	1	—	—	—	—	—	—	—	1
Dressings	38	65	4	14	35	73	—	—	—	—	—	229
Radiographs	2	1	—	4	1	1	—	—	—	—	—	9
Denture Patients	10	18	—	—	8	20	—	—	—	—	—	56
Full Dentures	2	10	—	—	4	18	—	—	—	—	—	34
Partial Dentures	7	12	—	—	7	5	—	—	—	—	—	31
Dentures Repaired	4	1	—	—	—	6	—	—	—	—	—	11

TABLE 4.

SHOWING THE NATURE OF THE TOTAL SERVICES GIVEN TO THE PRIORITY CLASSES AT ALL THE DENTAL CENTRES.

(a) Numbers provided with dental care :

	New Cases this Year.						Failed to keep appointment.	Treated by us.	Made dentally fit.	Awaiting Treatment.	Attendances made at Clinic.
	Examined.	Needing Treatment.	Referred to		Refused Treatment.	Treatment inadvisable.					
			Our Treatment Clinic.	Own Dentist.							
Expectant Mothers	1,239	728	399	219	20	90	63	332	81	4	1,632
Nursing Mothers	73	72	70	—	2	—	1	69	33	—	221
Children under five ...	546	507	507	—	—	—	—	507	451	—	664

(b) Forms of dental treatment provided :

	Extractions.	Anæsthetics.		Fillings.	Scalings and for Gum Treatments.	Silver Nitrate Treatments.	Dressings.	Radiographs.	Dentures.		
		Local.	General.						Provided.		Repaired.
									Complete.	Partial.	
Expectant Mothers	713	17	291	19	12	—	73	3	6	14	4
Nursing Mothers	196	9	45	—	—	—	138	2	28	17	7
Children under five ...	1,116	—	588	4	—	—	4	—	—	—	—

IV.—SCHOOLS AND SCHOOL CHILDREN.

Report by Dr. A. Morrison, Deputy Medical Officer of Health and Senior School Medical Officer.

GENERAL REVIEW.

Staff.

The work of the School Health Service continued to progress steadily during 1953, and it is pleasing to report that, for the first time for several years, we have had a full medical staff according to establishment. This has resulted in a large increase in the number of children examined at periodic medical inspections. Even so, there were still several schools which could not be covered during the year. We are still without a psychiatric social worker for the Child Guidance Clinic and once again the staff of the clinic has been greatly handicapped. Up to the middle of the year it was found impossible to secure the services of a physiotherapist, but in July we were able to appoint a remedial gymnast. In the short time that his services have been available he has been able to undertake most successfully practically all the specialised work which a local education authority might expect from a physiotherapist.

Developments.

The new clinic at Rykneld, designed mainly for the treatment of minor ailments, speech therapy and infant welfare, as well as other services, was opened at the beginning of May and replaced the old clinic at Firs Estate School. It is proving most acceptable. Plans have also been approved for the projected clinic at Normanton. Another clinic for the new Mackworth Estate, which has been developed very rapidly, has now become essential and plans are already being considered.

The appointment of the additional part-time speech therapist has resulted in a reduction of the waiting list and this should be further reduced in 1954. The details of the work of the remedial gymnast will be found in that section of the report dealing with the orthopædic clinic. No other developments have taken place in 1953 and all the ordinary services have been well maintained. It has been a year of non-spectacular but steady and satisfactory work. As in previous years, individual reports from the heads of the various special clinics and schools are included, and I am sure they will be found descriptive, personal and interesting. I recommend their careful perusal.

Findings of Medical Inspection.

There is little of note to record as a result of general medical inspection.

The nutrition of the children, as judged by their heights and weights, has remained almost steady for the past few years. After some years in which every analysis showed progressive increases, the rate has become, if not stationary, only slightly increased. It is possible that with our present standards of living, we have now reached a level above which, in general, children are not likely to rise unless some new factor in nutrition is discovered and applied.

Much has been written about the fall in the incidence of tuberculosis and there are justifiable hopes for the future with regard to this terrifying disease. Nevertheless, tuberculosis is still a great menace and 25 cases occurring in school children were notified during the year.

The percentage of children vaccinated against Small Pox remains low (11.3%). It is perhaps interesting to note however that the abolition of compulsory infant vaccination in 1948 has had little effect on the numbers of children vaccinated—as the figures listed in the appropriate section clearly show. Although the numbers are relatively small, they have probably been maintained by the arrangements made by Dr. Leyshon whereby vaccination is made available at the Infant Welfare Centres.

It is gratifying to record a very considerable diminution in the number of children found to have head infestation. Perhaps it is reasonable to hope that the long and persistent campaign of education in hygiene is now beginning to be really effective.

Parental Interest.

It is pleasant to record that after a series of years when the percentage of parents present at the periodic inspection in schools was rather low, the figures for 1953 are the highest ever recorded. The most important, from the value of the presence of the mother is of course the first examination, and the numbers of parents attending at this examination have seldom been less than 80%. For the last three years the figures have been 87%, and the percentage of parents attending for all examinations is most encouraging.

It has been long recognised that the influence of the home environment in the health of the child is paramount, and this recrudescence of interest in medical inspection on the part of the parents augurs very well for still greater domestic care. We find increasingly that mothers are eager for advice and are prepared to co-operate, and the opportunity for health education, so

valuable in every respect, has become greater. I attribute the highest importance to the increased percentage of parents coming to consult the school medical officer at these school examinations, and I hope the high numbers will continue.

Other Comments.

Special Consultations.—Special consultations are a little down on the previous year and this is probably accounted for by the increase in periodic examinations.

Minor Ailment Clinics.—The numbers attending the clinics for the treatment of minor ailments continue to decline. This, no doubt, is due, partly to better health, and partly to the family doctor being available under National Health Service arrangements.

Class for Partially Sighted Children.

In 1934 the Board of Education published the report of a committee of enquiry into problems relating to partially sighted children. One of the sections of this report dealt with the ophthalmic standards for the selection of children to attend special schools for the partially sighted. The recommendations of this section were, from that year, adopted as the criteria for the ascertainment and education of the partially sighted child in Derby. In 1936 the number ascertained was 17. Since that year, although there have been fluctuations from year to year, the general trend has been downwards, and in the past five years, in spite of a considerable increase in the total number of registered school pupils, the figures from 1949 to 1953 have been 10, 13, 11, 11, 10. The consistency of these figures does certainly suggest that the number of partially sighted children is declining—a very pleasing reflection. The “rough guide” estimate in pamphlet No. 5 of the Ministry of Education (1946) is one partially sighted child per 1,000 registered pupils.

Special Enquiry.

Included in the Report is an account of an investigation into two outbreaks in schools of Epidermophytosis (Athlete's Foot).

The Future.

In the Report for 1952 I reviewed the changes which have occurred in the care of school children consequent upon the operations of the National Health Services Act, and there is little to add to this review.

The immediate obligations which rest upon us concern the prevention of tuberculosis and the care of physically handicapped children. With regard

to tuberculosis, it is now commonly accepted that apart from treatment the earliest possible diagnosis is essential in order to prevent the spread of infection. This is the first line of defence as the majority of cases are from individual infections. Although early diagnosis is mainly the duty of the chest physicians, the School Health Services can give valuable assistance with skin tests and mass radiography, even if these measures are of limited value. The second line of defence is the strengthening against infection of the susceptible person. It is hoped that the large scale programme of protection by the use of the B.C.G. vaccine which is now being planned will have very successful results, but it must never be forgotten that tuberculosis is a Social disease, and all these measures will lose much of their value if housing, nutritional and occupational improvements are not carried out at the same time.

The emphasis on the care of physically handicapped has now moved to the *early* care of these children. This is of special importance in the case of children suffering from cerebral palsy, but it applies to all children with physical handicaps. In Derby we are hoping to embark shortly on improved arrangements for the special and appropriate treatment of children even before they reach their second birthday, and with the improved facilities now available in the country this may prove to be successful.

Within the last year more and more attention has been paid to health education. Nothing but good can come from this campaign and the introduction of more and better visual aids has made public appeals more interesting. It is generally agreed, however, that valuable as public meetings and newspaper articles are, these must be supplemented by group and individual teaching. The outstanding feature of group instruction is that each person in the audience can be made to feel an *active* member, a distinction which so often fails in large meetings. Probably nothing can excel the individual approach, and it is here, by frequent interviews with parents, that the Child Welfare and School Health Services have their greatest opportunity. The value of health education can never be overestimated, for the recognition and adoption by a parent of a principle in hygiene does not stop at that. It involves an advance in the receptivity of the mind, an extension of thinking, a more considerate parent, a more mature citizen, and a widening of this influence in the community. Along with all our other services we look to education to help us not only to build a healthy child, physically, mentally, emotionally and socially, but also to secure for him a better world to live in. There can be no higher ideal.

Once again I should like to tender my grateful thanks to the Education Committee for all their help, kindness and co-operation, and to my friends Mr. Middleton and Dr. Leyshon, who have always encouraged me in enterprise, given me unvarying support, and allowed me much liberty of action. This, I hope I have never abused. I should like also to place on record my gratitude and appreciation of the wonderful services of all my many colleagues, medical, nursing and clerical, who, by their loyalty and cheerful assistance, have made my official life a pleasure and never a burden. I should also like to mention the very fine response I have always obtained from the teachers in Derby Schools; many of these I regard as my very good friends, and I cannot speak too highly of their close and consistent co-operation during the years of our association. To all these and many others I feel I owe a debt of gratitude, since it is by their friendliness and goodwill that I have enjoyed so much my work in Derby.

SCHOOL ATTENDANCE.

The accommodation in Primary and Secondary Schools is 24,513. The number of names on the books is 22,576 and the average attendance 20,346.

THE SCHOOL HEALTH SERVICE IN RELATION TO MAINTAINED PRIMARY AND SECONDARY SCHOOLS.

Medical Inspection.

Number of children inspected.—The total number of children inspected was 8,499. Of these, 4,130 were boys and 4,369, were girls. In addition, 99 children were brought forward for special examinations by head teachers.

The number of entrants to the Junior Departments tested for vision and hearing was 2,052.

FINDINGS AT PERIODIC INSPECTION.

General Condition.

The general condition of the 8,499 pupils inspected in 1953 was classified as follows:—

A	(Good)	...	3,798
B	(Fair)	...	4,654
C	(Poor)	...	47

Heights and Weights.

Age.	Year.	BOYS.			GIRLS.		
		Number examined.	Average Height (inches).	Average Weight (lbs.).	Number examined.	Average Height (inches).	Average Weight (lbs.).
5 years ...	1912	440	40.27	39.42	462	40.16	35.56
	1915	443	40.6	38.9	464	40.5	38.04
	1919	499	40.7	39.4	496	40.3	39.1
	1925	851	41.3	40.4	838	41.0	39.3
	1935	842	41.8	41.6	779	41.7	40.6
	1946	466	42.3	43.0	439	41.8	41.3
	1952	750	43.3	43.8	737	42.9	42.0
	1953	992	43.1	43.2	914	42.8	42.2
8 years ...	1915	775	47.9	51.04	703	47.1	49.6
	1919	975	48.2	53.2	872	47.6	51.8
	1925	810	47.8	53.0	767	47.5	51.5
	1935	949	49.2	56.3	969	48.8	55.4
	1946	406	49.4	56.9	402	48.4	54.4
10 years ...	1947	854	53.5	68.8	768	53.5	67.1
	1952	477	53.5	70.4	510	53.4	68.1
	1953	892	53.7	70.2	791	53.7	68.6
12 years ...	1915	801	54.4	71.2	861	54.8	71.5
	1919	841	53.1	70.2	915	54.8	73.4
	1925	858	54.8	72.3	901	55.7	74.6
	1935	784	56.3	78.2	854	57.3	81.4
	1946	251	56.4	79.7	246	57.7	81.7
14 years ...	1947	425	62.8	104.4	364	62.0	106.3
	1952	770	62.9	107.2	644	62.0	107.7
	1953	599	63.4	108.3	817	62.0	107.5

Consequent upon the raising of the school leaving age from fourteen to fifteen in 1947, the ages for the intermediate and final periodic medical inspections were changed from eight and twelve to ten and fourteen respectively.

Visual Defects and External Eye Disease.

The percentage of children found to have defective vision was 24.0.

In the ten and fourteen year old groups, the percentages of children who were unable to read 6/6, 6/6, were :—

10 year boys.	10 year girls.	14 year boys.	14 year girls.
17.6	20.5	20.0	30.8

In the same age groups, the percentages of children with more serious defects (6/12 or worse in either one or both eyes) were :—

10 year boys.	10 year girls.	14 year boys.	14 year girls.
6.9	7.6	10.4	12.9

The total number referred for refraction was 561.

The number of partially sighted children as judged by the accepted criteria is 10.

Squint.

The number of children in the five year old group found to have a squint, even of the smallest degree, was 80.

External Eye Disease.

The following defects were found in the course of Periodic Medical Inspection :—

Blepharitis	... 47	Conjunctivitis	... 13
	Other defects	... 42	

Uncleanliness.

See report on page 70.

Minor Ailments and Diseases of the Skin.

The following skin diseases were recorded at the medical inspections :—

Urticaria...	... 42	Epidermophytosis	30
Dermatitis	... 28	Ichthyosis	... 8
Warts	... 20	Furunculosis	... 5
Seborrhoea	... 30	Psoriasis	... 15
Eczema	... 35	Ringworm, Body	7
Acne	... 45	Impetigo	... 17
Naevus	... 31	Other Diseases	... 97
Verrucae	... 18		

Nose and Throat Defects.

The number of children referred for treatment for enlarged tonsils and adenoids was 2.8 per cent. of the number examined. The percentage placed under observation was 6.4.

Ear Disease and Defective Hearing.

214 children were noted as suffering from Otorrhoea at periodic medical inspection.

Defective hearing, mostly of a slight character, was found in 64 cases.

Dental Defects.

785 children were found at the periodic medical inspection to have carious teeth.

Orthopaedic and Postural Defects.

The following deformities were noted at the periodic medical inspections :—

Flat Feet	... 198	Spinal Curvature	122
	Other Defects	... 353	

Heart Disease and Rheumatism.

1.3 per cent. of all children examined were listed as having heart defects. Few of these were organic, and the vast majority required only observation. The number of children found to be suffering from rheumatism was 26.

Tuberculosis.

Five cases were referred from routine medical inspection to the Chest Physician for advice during the year. In addition, 14 "specials" were referred to the Chest Physician for opinion. 25 school children were notified as suffering from tuberculosis (16 pulmonary and 9 non-pulmonary) during the year.

Vaccination.

963 (11.3 per cent.) of the 8,499 children medically inspected were recorded as having been vaccinated. The percentages in previous years were as follows :—

1938	... 10.8	1950	... 9.8
1945	... 8.0	1952	... 11.6
1948	... 9.7	1953	... 11.3

FOLLOWING UP.

The arrangements for the following up of children suffering from the various defects continued as outlined in a previous report.

ARRANGEMENTS FOR TREATMENT.

School Clinics.

	Monday.		Tuesday.		Wednesday.		Thursday.		Friday.		Saturday.
	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.
Central Clinic, Temple House ...	D. S. M.A. C.G. R.G.	D. S. C.G.	D. C.G. R.G.	D. C.G. U.V.R. R.G.	D. M.A. C.G. U.V.R.	D. C.G.	D. S. M.A. C.G. R.G.	D. S. C.G. R.G.	D. C.G. R.G.	D. C.G. U.V.R.	D. S. M.A. C.G. U.V.R.
<i>Branch Clinics.</i>											
Nightingale Road...				M.A.							M.A.
Boulton	M.A.				S.	S.	M.A.				
Pear Tree School...			M.A.	S.	M.A.					M.A.	
Rykneid			M.A.				S.	S.	M.A.		
Roe Farm	M.A.						M.A.		S.		
Green Street ...	U.V.R.		M.A. S.				U.V.R.		M.A. S.		

- M.A. ... Minor Ailments Clinic.
 S. ... Speech Clinic.
 U.V.R. ... Ultra Violet Rays Clinic.
 D.... ... Dental Clinic.
 C.G. ... Child Guidance Clinic.
 R.G. ... Remedial Gymnast's Class.

A Dental Clinic is also held at the City Hospital every day of the week (morning and afternoon).

In addition, the following Regional Hospital Board clinics are held in the Central Clinic premises :—

- Ophthalmic Clinic Five sessions per week.
 Orthopædic Clinic One session per week.
 Aural Clinic One session per week.
 Rheumatism and Heart Clinic ... As required.

Consultation Clinic, Mill Hill Lane.

1,425 attendances were made at this clinic during the year.

Minor Ailments Clinics.

The total number of children attending these clinics was 5,196, and the number of attendances was 29,543. Of this number, 7,130 examinations (inspections and re-inspections) were made by Medical Officers.

The following is a record of the number of cases and attendances at the minor ailments clinics since 1931 :—

<i>Year.</i>	<i>No. of children attending.</i>			<i>Attendances.</i>
1931	11,470	55,460
1935	19,240	62,436
1938	19,224	63,820
1943	18,342	63,395
1945	16,810	59,750
1948	10,593	47,959
1950	11,323	41,957
1951	8,004	32,986
1952	5,552	31,684
1953	5,196	29,543

Scabies.

The number of cases of scabies treated during the year was 27, as compared with 28 in 1952, 27 in 1951, 30 in 1950, 95 in 1949 and 190 in 1948.

Ultra-Violet Ray Clinic, Mill Hill Lane.

Total number of children attended	...	...	185
Total number of attendances	...	...	2,463

In addition, 37 cases referred from the Child Welfare Clinics made 665 attendances.

Ultra-Violet Ray Clinic, Green Street.

Total number of children attended	...	...	87
Total number of attendances	...	...	2,063

In both clinics, the types of cases treated were similar to the lists given in previous reports.

Dental Clinic, Mill Hill Lane.

The Dental Clinic is held every day of the week (morning and afternoon).

Total number of cases attended	...	...	9,146
Total number of attendances	...	...	13,357
Total number of clinics held	...	...	1,704

Aural Clinic, Mill Hill Lane.

The number of children who received operative treatment for tonsils and adenoids during 1953 was 156.

In addition, 6 children received operative treatment for ear conditions, and 4 for other conditions of the nose and throat.

Total number of cases attended	...	...	...	329
Total number of attendances	...	...	...	478

Included in these figures are 13 cases referred from Child Welfare Centres.

Orthopaedic Clinic, Mill Hill Lane.

Total number of cases attended	...	...	...	716
Total number of attendances	...	...	...	996

Included in these figures are 142 cases referred from Child Welfare Centres.

Number of X-ray examinations (at City Hospital)				56
Attendances at Splint Maker	518

Remedial Gymnast:

Total number of attendances (at Central Clinic)...				1,344
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AT ASHE HALL SPECIAL SCHOOL:—

Number of children treated	57
Number of treatments given	520
Number of visits to School	...	...	...	32

Heart and Rheumatism Clinic, Mill Hill Lane.

Number of children attended	...	...	...	20
Number of attendances	...	...	...	27

Includes 2 pre-school children who made 2 attendances.

Ophthalmic Clinic, Mill Hill Lane.

Total number of cases attended	...	...	...	1,679
Total number of attendances	...	...	...	2,680

Orthoptic Clinic.

I am indebted to Miss M. Aston, the Orthoptist in charge of the Department, for the following report:—

Number of cases dealt with during 1953 (including 34 new cases)	153
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CLASSIFICATION.

Under observation, on preliminary treatment, or actual treatment	110
Discharged	...	...	...	...	43
					— 153
Total number of attendances	...	...	...	...	914

During the year 17 cases received operative treatment.

Speech Therapy Clinic.

Report by Miss M. L. Umpleby, Speech Therapist.

"Work in the Speech Therapy Department has continued to progress. This year the most important improvement has been the increase in the number of clinics held, as Miss North has continued to work four sessions a week in the clinics in addition to my full-time work.

This has enabled us to reduce the waiting list considerably, but this is still long enough to cause some serious thought as to the priority list. Because the situation has been so difficult within the last few years, it has been found that some schools have felt that it was futile to refer cases as they were so seldom dealt with, and have even formed the erroneous impression that the Speech Therapists were only interested in the child of above average intelligence. Of the three main groups of defects, priority is generally given to the smaller groups of stammerers and cleft palate patients, as these are liable to suffer more seriously by the delaying of treatment. Of the remaining and by far the largest group, classified as speech defects, it is true that the Therapist has generally felt obliged to give priority to the brighter child—

(a) Because the brighter child can be dealt with more quickly, so that perhaps three such children can be dealt with satisfactorily in the time taken by one more backward child.

(b) In the case of the younger child, the defect in the slower child is more probably due to slower maturation of speech, and is more likely to disappear without assistance.

But as no two cases are alike, each is given careful consideration, and such factors as the anxiety of the child about his defect, the presence of harmful pressure on the child at home about his speech, the degree of anxiety in the patients concerning the defect, are taken into consideration.

"So even though it is still impossible at the moment to give all the children the immediate attention one would wish them to have, it is most

desirable that all cases should be referred to the Therapist when first noted. Undoubtedly many children do grow out of their defects, but experience shows that a word to relieve the anxiety of the parents, which can be given during the interview and the taking of the case history, can do much meanwhile to help the child.

“When the cases have once been seen they can then be dealt with as soon as possible, and this would avoid the unfortunate situation of grammar school children having the added time-consuming visits to the Speech Clinic to be made during their most important year in school, when their difficulty could have been dealt with so much earlier in their career.

“Another problem is deciding the time to discharge patients. The large number of patients kept under observation when weekly treatment is no longer necessary have often to be allotted time one would rather give to the new, more urgent, cases. Yet experience shows that if regular attention is not given to many of these cases, back-sliding will all too soon undo much of the previous work.

“This year for the first time, the clinics have been attended by two students from the Leicester College of Speech Therapy ; one spending a day with Miss North at the Mill Hill Lane Clinic, the other attending the Rykneld School Clinic. Their summer term was spent observing treatments, but they have recently been treating patients themselves under supervision.

“There have been various interested student visitors to the clinic from both universities and training colleges. Although in these days, when television and wireless broadcasts, magazine articles and newspapers have included information on Speech Therapy (it is now very rarely necessary to point out the fact that stammering is of nervous origin), opportunities for ‘spreading the gospel’ of Speech Therapy are still welcome.

“During the year, a very interesting refresher course was attended in Nottingham on ‘The Cerebral Palsied Child’, arranged by the Midland Area of the College of Speech Therapists. Other area meetings attended have also proved helpful and stimulating.

“Material improvements in the Clinic this year include the addition of a handsome new desk for the main Mill Hill Lane Clinic, which has been greatly appreciated in alleviating the singular unattractive dullness of the room.

“Although we have much for which to be grateful in the Department, it is hoped that one day we may realise the ideal conditions for the Clinic and that we may become proud possessors of our own special premises.

"This would be of enormous value, particularly in that it would make partial centralisation of the clinics possible. The great advantage of this is that it would afford a much wider scope for the use of group treatment. At the moment it has only been possible to form two small groups from among the children zoned to a particular clinic. However, this limited experience has shown that group treatment can be of immense value in some cases. With a larger number of children to choose from, many more groups could be selected, and so make it possible for more children to be dealt with at a time. Not only would wider use of group treatment reduce the waiting list, but also avoid the considerable amount of the Therapist's time now wasted due to absenteeism.

"We have been grateful for the interest and co-operation from schools, and help given by other departments, particularly the assistance received from the Child Guidance Clinic.

"Finally, I would like to take this opportunity of thanking Miss North for all her help given in handing over to me the work of full-time Speech Therapist."

Number of cases on record	...	...	...	...	205
Number of cases seen and treated	...	...	...	...	205
Number of Stammerers	...	...	...	...	61
Number of Speech Defects	...	...	...	...	120
Number of Cleft Palates	...	...	...	...	19
Number of Stammerers + Speech Defect...	...	...	...	...	1
Number of Voice Disorders	...	...	...	...	1
Number of Cerebral Palsy	...	...	...	...	2
Number of Deaf Cases	...	...	...	...	1
Number of cases discharged	...	...	...	...	65
(1) Number cured	...	...	...	...	24
(2) Number practically cured	...	...	...	...	8
(3) Very satisfactory progress	...	...	...	...	11
(4) Satisfactory progress + low I.Q.	...	...	...	...	2
(5) Left school and good progress	...	...	...	...	4
Transferred to Derbyshire Royal Infirmary if necessary.					
(6) Left district...	...	...	...	...	4
(7) Low I.Q.	...	...	...	...	2
(8) Interviewed and treatment found to be un- necessary	...	...	...	...	6
(9) Lack of co-operation	...	...	...	...	4
Number of cases under observation at end of year (not attending weekly)	...	...	...	...	98
Number of County cases at end of year	...	...	...	...	1
Number of cases referred to other Specialist Departments	...	...	...	...	14
Number of male patients	...	...	...	...	146
Number of female patients	...	...	...	...	59

Number of clinics held	...	...	...	...	...	543
Number of home visits	...	...	...	...	...	31
Number of school visits	...	...	...	...	...	21
Number of cases on waiting list at end of year	...	...	...	...	...	55
Total number of attendances	...	...	...	...	...	2,447

Child Guidance Clinic.

Report by Dr. T. A. Ratcliffe, Psychiatrist.

"There is little to report that is new to add to the general comments I made in my Annual Report for 1952. The Clinic is still without a Psychiatric Social Worker. This lack of an essential member of the Child Guidance team, and the existing limitations of my own sessional time at the Clinic, still gravely restrict our treatment programme. Our diagnostic service and our facilities for Remedial Teaching, more superficial treatment and advice still maintain a standard which compares favourably with that of any Local Authority Child Guidance Clinic in the area. But there remains an appreciable number of disturbed children who cannot be given the adequate treatment which they require. This is a serious limitation of our work; but it must continue until a Psychiatric Social Worker is obtained and until further Psychiatric sessional time becomes available. The country-wide shortage of Psychiatrists and Psychiatric Social Workers with adequate qualifications in Child Guidance makes it unlikely that a solution will be found in the near future.

"This Clinic has always been orientated more towards the Educational aspects of Child Guidance work—although the appended Tables show that, in 1953, the trend in the previous year towards a more total Child Guidance approach has continued. The Educational side of the Clinic has maintained the high standard of former years. Much credit and praise are due to Miss Broughton and Miss Gateley for this, as well as for their day-to-day administration of the Clinic. Miss Broughton's services were greatly missed during her period of illness.

"Our contacts with the Children's Officer remain excellent. Although we have modified the venue and structuring of our Case Conferences with her in the light of experience, these have continued and remained of material advantage to both sides.

"The Educational Psychologist continues to visit as many schools as possible, since the advantage of such informal discussions of mutual problems is very great. It is a matter of personal regret that my sessional time at this Clinic is so occupied by clinical work, that my own opportunity for such personal liaison is very limited.

"Once again our thanks are due to Dr. Morrison for his close co-operation and interest in our work, and to the office staff of the School Clinic for their clerical and administrative help."

Statistical Tables.

NOTE 1.—The figures in these Tables refer only to the actual work done in the Child Guidance Clinic during 1953. Since there is always a considerable carry-over of case-material under treatment and survey from one year to the next, it is inevitable that the totals given in the various Tables cannot tally with each other.

NOTE 2.—The corresponding figures for 1952 are given in brackets.

TABLE I. *Interviews carried out by Psychiatrist.*

New cases	...	...	...	...	...	...	65	(64)
Parents	...	...	...	...	...	...	131	(141)
Treatment interviews	...	...	...	...	...	...	82	(64)
Survey interviews	...	...	...	...	...	...	57	(61)
Others (Foster-parents, Probation Officers, etc.)	...	...	...	...	...	...	11	(12)
Mother Groups held	...	...	...	...	...	...	5	(4)
Discussions with Children's Officer	...	...	...	...	...	...	4	(4)
Visits (Ledston Hall, School for Maladjusted Pupils)	...	...	...	...	...	...	1	(0)

TABLE II. *Interviews by Educational Psychologist (10 months).*

Intelligence testing	...	...	...	...	...	...	70	(84)
Home visits	...	...	...	...	...	...	182	(188)
School visits	...	...	...	...	...	...	165	(164)
Play sessions	...	...	...	...	...	...	71	(73)
Parents and others	...	...	...	...	...	...	160	(249)

We were pleased to welcome Councillor Mrs. Harper on a short visit to the Clinic in August, and visits were also made during the year by an American Fulbright Scholar; Social Science University Students (4 degree and 4 diploma); One Art Student working on a specialised course; One French Research Student from the Sorbonne; and 16 Students working for the National Nursery Certificate.

TABLE III. *Interviews by Remedial Teacher.*

Remedial teaching	...	...	...	...	...	...	709	(669)
Home visits	...	...	...	...	...	...	467	(349)
Parents	...	...	...	...	...	...	56	(76)
School visits	...	...	...	...	...	...	19	(14)
Others	...	...	...	...	...	...	180	(97)

TABLE IV. *Social Worker.*

No Social Worker available during the year (or during 1952).

TABLE V. *Recommendations Made.*

New cases referred to the Clinic during 1953	...	...	78	(83)
New cases remaining 31st December where full diagnostic interviews are still incomplete	...	...	13	(18)
Cases closed, including those referred for initial diagnosis and report only	...	...	68	(87)
Recommended for—Intensive treatment	...	...	12	(22)
Survey	...	...	31	(26)
Remedial teaching	...	...	13	(10)
E.S.N. Special School	...	...	4	(5)
Other disposals	...	...	4	(8)
No specific recommendation or action advised	...	...	14	(11)

TABLE VI. *Sources of referral.*

Director of Education	...	...	1	(5)
School Medical Service	...	...	27	(19)
Schools	...	...	14	(22)
Parents	...	...	8	(9)
Juvenile Court and Probation Officer	...	...	1	(5)
Speech Therapist	...	...	4	(3)
Children's Officer	...	...	6	(5)
St. Christopher's	...	...	3	(2)
General Practitioners...	...	...	13	(9)
Hospital	...	...	1	(4)

TABLE VII. *Distribution of Schools.*

Pre-School	...	...	...	...	...	...	...	8	(5)
Infants	...	...	...	...	...	...	...	17	(13)
Junior	...	...	...	...	...	...	...	37	(37)
Secondary Modern	...	...	...	...	...	...	...	11	(24)
Grammar	...	...	...	...	...	...	...	2	(3)
Not at School	...	...	...	...	...	...	...	3	(1)

TABLE VIII. *Reasons for referral.*

(NOTE: The large variety of individual reasons are here grouped for convenience into four arbitrary and overlapping categories.)

Educational problems	...	...	...	...	...	...	...	20	(13)
Behaviour problems	...	...	...	...	...	...	...	24	(29)
Emotional (Nervous) problems	...	...	...	...	...	...	...	31	(34)
Other reasons	...	...	...	...	...	...	...	3	(7)

TABLE IX. *State of cases on closure.*

(a) Completed.

Much improved	...	...	...	...	...	...	...	19	(13)
Improved	...	...	...	...	...	...	...	22	(44)
No change	...	...	...	...	...	...	...	9	(8)

(b) Cases closed for other reasons.

(These include children who have left school, or the or the area before treatment was completed, cases closed because of lack of co-operation, and those in which only an initial diagnosis and recommendation was made.)

18 (22)

PROVISION OF MEALS.

The number of children on the Free Meal List is 474.

CO-OPERATION OF PARENTS.

The number of parents who attended with their children for periodic medical inspection, together with the figures available for previous years, was as follows :—

	<i>Number.</i>	<i>Total Percentage.</i>	<i>Percentage in Infant Group.</i>
1914	1,096	14.2	—
1924	1,464	24.8	—
1934	4,077	48.6	83.0
1938	3,783	54.0	80.0
1945	2,122	55.0	80.1
1947	3,859	48.3	73.4
1949	3,452	60.8	85.6
1951	3,488	60.3	87.0
1952	3,838	54.8	86.9
1953	5,371	63.2	87.0

Educationally Subnormal.

Notified under Section 57 (3), Education Act, 1944	...	10
Notified under Section 57 (4), Education Act, 1944	...	Nil.
Notified under Section 57 (5), Education Act, 1944	...	9

Temple House Special School for Educationally Subnormal Pupils.

During 1953, 55 children were referred for examination regarding their admission to the School. Of these, 27 were certified as capable of receiving benefit from instruction in the Special School. The remaining 28 children, after examination, were retained in the elementary school.

29 children were admitted to the Special School during the year (this figure includes six children referred for examination in 1952). 4 children referred for examination in 1953 were admitted early in 1954.

HANDICAPPED PUPILS.

PUPILS REQUIRING EDUCATION AT SPECIAL SCHOOLS OR BOARDING IN BOARDING HOMES :—

	Blind.	Partially Sighted.	Deaf.	Partially Deaf.	Delicate.	Physically Handicapped.	Educationally Sub-normal.	Maladjusted.	Epileptic.	Total.
In the calendar year :—										
A. Handicapped Pupils newly placed in Special Schools or Homes ...	—	—	2	—	54	2	29	—	2	89
B. Handicapped Pupils newly ascertained as requiring education at Special Schools or boarding in Homes ...	—	—	3	6	38	7	31	—	5	90
On or about December 1st, 1953.										
C. Number of Handicapped Pupils—										
(i) attending Special Schools as :—										
Day Pupils ...	—	9	—	—	48	—	111	—	—	168
Boarding Pupils ...	1	1	19	—	56	4	3	1	3	88
(ii) attending Independent Schools (under arrangements made by the Authority)...	—	—	—	—	—	—	1	1	—	2
(iii) Boarded in Homes...	—	—	—	—	—	—	—	—	—	—
Total (C) ...	1	10	19	—	104	4	115	2	3	258
D. Number of Handicapped Pupils being educated under arrangements made under Section 56 of the Education Act, 1944—										
(a) in hospitals ...	—	—	—	—	1	—	—	—	—	1
(b) elsewhere ...	—	—	—	—	—	5	—	—	—	5
E. Number of Handicapped Pupils requiring places in										

The following is a report by Miss M. Hayton, Dip. Psych., Headmistress.

"During 1953, 29 children were admitted to Temple House School, 29 left and one returned to a normal school.

"In February a general inspection was made by H.M. Inspectors. Much criticism was made about the premises, and of the inadequate provision for washing and general hygiene. Favourable comments were made regarding the standard of Reading reached amongst the older girls and of the good craftsmanship of the older boys. The general organisation of the Domestic Science room was also praised. With regard to Domestic Science we have tried out a new plan with the older girls. They now spend a whole day twice a week, instead of four half days in the Domestic Science room. By doing this they are able to carry out the routine followed in an ordinary house. They start with a discussion of the day's duties, and of the requirements of the dinner. This is followed by preparation and cooking of a dinner of two courses for the group. The table is laid and the group, together with Miss Preston, the Domestic Science mistress, have their mid-day meal. They then wash up and carry out such housewifery jobs as normally follow. In the afternoon they write up their notes and have Needlework. The girls are enjoying this very much. We hope to start a similar scheme with the older boys in the Handicraft room.

"We were very sorry to lose Mr. Crinage from the Staff at mid-summer. He has been appointed Deputy Head of a Residential School for educationally subnormal children. He had done excellent work with the boys in Handicraft and was a most keen sportsman, encouraging and helping the boys in all ways. So far we have not been able to get a suitable Handicraft master, and the boys sadly miss this important subject.

"During the Summer Term both boys and girls attended the Swimming Baths, and several won certificates. Two Cricket matches were played against the boys from the Royal Institution for the Deaf—we won one match and the other was a draw. We held a Sports afternoon towards the end of the Summer Term and this was entered into with enthusiasm by all classes.

"In the Autumn Term the boys were very keen on their football, and two or three matches were arranged with outside teams.

"There was much preparation for the Christmas festivities. During the week before Christmas, each class gave a very short entertainment to the other classes. Special mentions must be made of a Junior Class of girls, who, with the help of Mrs. Piggin, produced a puppet play of Cinderella. Puppets

—script—and scenery were all made by the girls. They worked very hard, produced a good show, and gave a great deal of pleasure to the other children.

“The Staff gave the children two parties—one for Juniors and one for Seniors. The Juniors had a Christmas Tree and presents, and the Seniors had simple competitions with prizes. As in previous years the older girls were most helpful and made cakes, jellies, etc., in the Domestic Science room, and the boys helped to decorate the rooms with holly and evergreens from the garden. The term ended with a Carol Concert in which all took part.”

Class for the Partially Sighted.

Report by Miss M. Copley, teacher in charge.

“During 1953 there were eleven pupils in the Partially Sighted Class with an age range of 7—16 years.

“The boy who left at the end of 1952 tried light engineering and a post as delivery-van assistant before settling happily as a van loader and checker. At the end of 1953 a boy left to train as a hotel porter and a girl left to learn floristry. A survey of the careers of former pupils shows that, except for about four cases, they have settled into the sighted population and are self-supporting industrially and socially.

“Outstanding events of the year include the children’s planning and carrying out of a Coronation celebration, which they afterwards recorded fully in the Souvenir Books they had been making. During the summer holiday, an outing to Dovedale was provided for them by the Welfare Committee, and in October they met the Sheffield Partially Sighted Class at Bakewell and together paid their annual visit to Lathkil Dale. Instead of a class Christmas Party, a Thanksgiving Day ‘feast’ was held, being worked into a dramatisation of the historical background of this celebration. It also provided an interesting project for handwork. At Christmas, the annual visit of mothers took place for the purpose of joining in the singing of carols prepared in school and taught by the children to their mothers. Afterwards, the children served tea and biscuits. The Welfare Committee’s Christmas lunch and social was thoroughly enjoyed by the children, especially as they were able to take an active part.

“Interest in written English has been maintained through individual correspondence with children in Partially Sighted Classes in Sheffield and in Canada, also with a former pupil of this class now working in South Africa. This correspondence stimulates a keen interest in spelling and handwriting because the need for efficiency is proved.

"A steady flow of suitably printed reading matter has come from New Zealand through the kindness of the Director of Education, Wellington, New Zealand.

"The Bulletin typewriter has been the means of building up a supply of arithmetic material and of hymn books.

"Local studies have been directed from the class room and supplemented by occasional free time visits.

"In conclusion, it is cause for gratitude to note the active interest between class, parents, Health Department, Children's Welfare Department, General Welfare Department and Juvenile Employment Department.

"The children's awareness of this co-operation gives them a sense of security which enables them to make the best of their own powers, and thus to fit themselves to become good citizens."

Ashe Hall Special School for Delicate Pupils.

Miss M. E. Curtis, Headmistress, reports as follows :—

"There are 104 pupils on the school roll, 56 of whom are resident and 48 day pupils, the ages ranging from 6 to 16 years.

"The five classes are made up of Infants, two Junior Classes, Senior Girls and Senior Boys, and during the morning sessions the emphasis is on the teaching of the three R's and Scripture. During the afternoon sessions, however, Art, Woodwork, Music, Rural Science, Needlework, Physical Training, History and Geography are taught. All children also go for a long walk on three afternoons a week. The school Young Farmers' Club has been in existence for eighteen months, and is affiliated to the National Federation of Y.F.Cs. Meetings are held every Friday evening, the club programme including lectures by visiting speakers, visits to farms and places of interest. Various classes are also held on week-day evenings in Physical Training and Games, Dancing, Woodwork and Art.

"Day pupils are brought to school on the school bus, which makes a circular tour of Derby, and arrives at Ashe Hall at 9.5 a.m. After registration, each child passes through the Medical Room for inspection and treatment by Nurse and to receive a dessertspoonful of an iron tonic, with vitamins added, before entering class. The return bus to Derby leaves school at 4.5 p.m.

"Two-thirds of the resident pupils and approximately a half of the day pupils suffer from respiratory complaints, all of whom receive treatment, whilst children who are prone to coughs and colds receive sun-ray treatment.

Resident children who suffer from chronic ailments, e.g., asthma and bronchiectasis, benefit from a long stay at Ashe Hall, and residents have shown a general average increase of $1\frac{3}{4}$ inches height, and 7 lbs. weight as a result of long hours of sleep and a well planned, regular diet. Resident children receive treatments and a spoonful of an iron tonic, with vitamins added, between 8.30 a.m. and 9 a.m. The Remedial Class, made up of 25 resident children who suffer from asthma or bronchiectasis, is taken by the P.T. master from 9—9.30 a.m. These exercises have proved of very great value.

“The school is also visited by the Remedial Gymnast for one morning and two afternoon sessions a week. Children suffering from postural complaints and respiratory and other troubles are treated, and all cases have shown improvement.

“Resident and day pupils receive two one-third pint bottles of milk each day, and all pupils have a very substantial well balanced mid-day meal. After lunch the children rest for nearly an hour before attending afternoon school.

“After high tea each day resident children either attend clubs or classes, or enjoy free play in the park, and supper commences for the infants at 6.15 p.m. This is followed by a bath and bed, with lights out at 7.15 p.m. The older children follow at half-hour intervals until 9 p.m., when the last lights are put out. The housemothers are responsible for the cleanliness of the children and also for their clothing. All clothing and linen is washed in the school laundry. A large proportion of the vegetables for school meals are grown in the kitchen gardens.”

Full-time Courses of Higher Education for Blind, Deaf, Defective and Epileptic Students.

There are no centres for Higher Education or Vocational Training in Derby. Suitable cases requiring such training are sent to recognised institutions elsewhere.

TEACHING IN HOSPITALS.

The following report has been received from Miss M. Turner, who is in the service of the Local Education Authority, and who undertakes the teaching of children of school age in the local hospitals:—

“92 Borough school children have received individual tuition during 1953 as follows :—

	<i>City Hospital.</i>	<i>Children's Hospital.</i>	<i>Draycott Hospital.</i>	<i>Derwent Hospital.</i>
Number of children ...	45	40	2	5
Average period of tuition ...	3.5 wks.	3.9 wks.	8 wks.	8 wks.
Average age	9 yrs. 11 mths.	9 yrs. 2 mths.	9 yrs. 6 mths.	6 yrs. 2 mths.
Age range	5—16 yrs.	5—14 yrs.	5—15 yrs.	5—11 yrs.
Period range	1—39 wks.	1—16 wks.	3—13 wks.	2—16 wks.

“In addition to individual lessons in Arithmetic, Reading, English, French and Handwork, group lessons have been given, wherever circumstances permitted, in Scripture, History, Geography and Nature Study.”

NURSERY SCHOOLS.

The three Nursery Schools (Central, Allenton and College) continue to function successfully on the lines indicated in previous reports. The children are visited regularly by the School Nurse and at frequent intervals by the Medical Officer. Every child is medically examined at least once per year and treatment inaugurated for any defects.

The number of children examined at the various schools was :—

<i>School.</i>	<i>Boys.</i>	<i>Girls.</i>	<i>Total.</i>
Central	52	40	92
Allenton	19	18	37
College	22	35	57
Totals	93	93	186

EMPLOYMENT OF SCHOOL CHILDREN.

During the year, 336 children were examined as to their fitness to undertake employment. Three were certified unfit.

THE WORK OF THE SCHOOL NURSES.

Five nurses are engaged entirely on the work of the School Health Services. In addition, six nurses are employed on half-time Health and half-time School Health Services.

Home visits	1,174
School visits	175

Visits to Nursery Schools.

Number of visits paid	286
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Clinics.**Sessions.**

Minor Ailments, Specialist Clinics and Ultra Violet Ray Clinics	2,158
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VERMINOUS CONDITIONS.

Routine Inspections of all children for the ascertainment of uncleanliness are carried out in schools twice a year by the Authority's Cleansing Attendants. In addition, frequent visits to schools for re-inspection of children listed as infested at previous inspections are made. All children who are found to be infested with lice or who appear to be seriously infested with nits, and those showing fewer nits but appearing to be neglected, are listed for cleansing. The parents of those children who require cleansing are immediately served with a notice requiring them to present the children at the cleansing centre. Children found at subsequent inspections to be re-infested are again required to attend for cleansing, and the parents are warned that, in the event of a recurrence, court proceedings will be instituted. Proceedings were taken in 63 such cases in 1953. Parents of those children who are slightly infested receive a notice notifying them of the condition of the child's head and instructions with regard to cleansing. These children are then kept under periodic review until found to be clean.

Number of individual children cleansed	275
----------------------------------------	-----	-----	-----

Number of sessions devoted to School Inspections	...	663
--------------------------------------------------	-----	-----

CHILDREN'S COMMITTEE WORK.

Special examinations of children committed to the care of the Local Authority are carried out by the medical staff of the School Health Service, and routine visits to the various Children's Homes are made monthly, and to the Remand Home once a week.

The following examinations were carried out during the year :—

Initial and routine examinations of Boarded-out children	118
Children for adoption	4
Examinations carried out at Children's Homes	71
Children for Approved Schools or Remand Homes (including examinations carried out at Remand Homes)	169
Other Examinations	3

MISCELLANEOUS WORK.

Medical examinations were also made as follows :—

Teachers	...	...	...	...	...	...	...	29
Before proceeding to Skegness Seaside Home	...	...	...	...	...	...	...	406
Before taking part in entertainments	...	...	...	...	...	...	...	2
Before taking part in School Journeys, Athletics, etc....	...	...	...	...	...	...	...	244
Before proceeding to School Camps	...	...	...	...	...	...	...	360
Before admission or return to Institutions, Boarding School, etc.	...	...	...	...	...	...	...	1
Intending Teachers	...	...	...	...	...	...	...	60

MASS RADIOGRAPHY OF SCHOOL CHILDREN.

Report by Dr. W. Guthrie, Director of Nottingham Area No. 2 Mass Radiography Unit, on the Mass Radiography Survey of school children, July, 1953.

Miniature Films.

	<i>Number X-rayed.</i>			<i>Number available.</i>			<i>% X-rayed.</i>		
	<i>M.</i>	<i>F.</i>	<i>Total.</i>	<i>M.</i>	<i>F.</i>	<i>Total.</i>	<i>M.</i>	<i>F.</i>	<i>Total.</i>
Over 14 years ...	1,306 (530)	1,140 (419)	2,446 (949)	1,325	1,355	2,680	98 (40)	84 (36)	91 (38)
Under 14 years...	19	14	33						
Total ...	1,325	1,154	2,479						

The figures in brackets show the numbers and percentages of children who had been previously X-rayed by the Mass Radiography Unit.

“The response this year on the part of the scholars was very good indeed, being 91%. The improved response seems to be due to an increase in the percentage of boys coming for X-ray. In any case the increased response on the part of the scholars year by year seems to indicate an improvement on the part played by parents in allowing their children to come for X-ray.

"One case of ? pulmonary tuberculosis was discovered from the group of school children examined. She is an observation case, and had been X-rayed in 1952 when her film was normal.

"The X-ray of one other child was normal, and arrangements were made for him to be examined on a large film. This boy did not come for the second X-ray, but this was because he had been sent for convalescence by his own doctor. Both parents and doctor were told of the advisability of another X-ray when the boy came back from his convalescence."

SPECIAL ENQUIRY.

Report by Dr. W. Drawneek, School Medical Officer :—

Outbreak of "Athlete's Foot" in Rykneld and Derby Schools.

RYKNELD SCHOOL.

At the routine medical inspection it was found that some 30% of the boys examined were suffering from epidermophytosis of the feet. In view of this, the whole school was examined for the condition. Out of 397 boys, 118 were found to be affected. Of these, 23 presented themselves with complaints of soreness, reddening and excoriation of the skin between and at the bases of the toes. The remaining 95 stated that they were unaware of anything amiss.

Treatment.

Two were treated by their own doctors. The remainder were treated at the school clinics. Special sessions and extra nursing staff were made available to treat the group "en masse" so as to avoid re-infection of cured cases.

The whole of both forefeet were liberally covered with a preparation of 1 in 750 phenylmercuric acetate in water soluble jelly and dressings were applied. The boys affected were told to paint their shoes with methylated spirit daily and to change and wash their socks too. They were warned of the infectious nature of the condition and were excluded from swimming, games and physical education.

After four days the feet were examined. Those showing a good response were painted with 2% aqueous gentian violet. These were 101 in number. The remainder were given a further application of jelly for a further four days. Of this group only one case required three applications. Similarly with the gentian violet, 70 required one application only, 36 two applications and 10 three or more applications. This last group were instructed to apply the paint twice daily at home.

By sixteen days the whole of the 116 children treated were back to normal routine with healed feet.

Recurrences.

Over the following five months, nine cases recurred and two further cases appeared. The latter two reported, the other nine were found on a second survey. It is interesting to note that each time these were mild cases in which the condition had not spread beyond the clefts between the toes. All have been treated and are now clear.

Complications.

Two cases had exacerbations of previously present eczema of the feet. These subsided shortly after the infection between the toes had cleared. One case had a fleeting macular rash over the whole body lasting two to three days. This was very mild and caused no undue symptoms. No untoward reactions to the treatment were observed.

Special Measures taken in School.

Sharing of plimsolls, though contrary to medical advice, had previously been common practice. This was stopped and periodic formalinisation of the whole supply was more strictly carried out. This is now being repeated for every change of user, and at the end of each term.

Extra care in the use of the showers after games and physical education has been taken. The sharing of foot towels has been stopped and the boys are no longer allowed to walk about in bare feet after showers.

Bare foot games or physical education has been stopped.

An attempt was made to correlate the incidence of the condition with the numbers wearing communal plimsolls, doing physical education together or attending swimming and games together. No correlation was found.

A similar attempt to correlate the incidence with the incidence of dirty feet was unsuccessful. (Many washed their feet for the occasion). The general impression conveyed was that dirty feet were not a predisposing cause, although the severity of the condition was obviously much worse in these cases.

DERBY SCHOOL.

A smaller outbreak occurred in Derby School. Out of 331 boys, 35 were affected. Again there appeared to be widespread unawareness of the condition. Similar measures were taken as in the Rykneld outbreak and in all but three cases rapid cure was obtained.

Complications.

In one case cellulitis of the feet required hospitalisation, and left a persistent residual eczema. In two cases other parts of the body were affected. One had other lesions on the ankle and foot, and the other on the ankle and hands.

In both outbreaks the lesions on the feet were invariably bilateral.

Recurrences.

After three months a survey was done. Two cases had recurred. During this period, six cases had occurred and been treated successfully. These recurrences have since been cleared up quickly.

Incidence in other Schools.

A careful search was made in other schools following these outbreaks. No other similar outbreaks were found. There was an occasional odd case detected. No cases were found among juniors or infants.

Conclusions.

Many observers report difficulty in clearing up this condition and a particular proneness to recurrence. Some even treat the condition for a prolonged period after signs and symptoms have ceased. In these two outbreaks this was not the case. The minimum treatment was given, conducive of satisfactory response. Treatment was discontinued when signs and symptoms had disappeared. The results seem to justify this policy.

No special claim was considered in the choice of local applications as this was considered of little importance. The salient requirements for dealing with this size of outbreak appeared to be in :—

- (1) Examination of the whole school rather than treating just those presenting with symptoms.
- (2) Treating the cases "en masse", where necessary adopting special sessions for the purpose.
- (3) Excluding cases from games, swimming and physical education.
- (4) Dealing with possible channels of cross infection in the school.
- (5) Frequent examinations of those being treated.
- (6) Making the school children conscious of their foot hygiene.

On this last point it was found that, in general, few boys washed their feet more frequently than once a week and many less frequently than once a fortnight. The need for further education in personal hygiene is obvious.

	<i>Rykneld School.</i>	<i>Derby School.</i>
Number examined	397	331
Number with Athlete's Foot ...	118	35
Number complaining of symptoms	23	4
Number of cases with minor complications	3	2
Number of cases with major complications	0	1
Number recurred on second survey...	9	2
Number not checked on second survey (left school)	16	0
Number presenting for treatment before second survey	2	6

APPENDIX.

**TABLE I.—MEDICAL INSPECTION OF PUPILS ATTENDING
MAINTAINED PRIMARY AND SECONDARY SCHOOLS.
(INCLUDING SPECIAL SCHOOLS).**

A.—PERIODIC MEDICAL INSPECTIONS.

Number of Inspections in the Prescribed Groups—

Entrants	3,176
Second Age Group...	2,822
Third Age Group	1,768
Total	7,766
Number of other Periodic Inspections	733
Grand Total	8,499

B.—OTHER INSPECTIONS.

Number of Special Inspections	3,580
Number of Re-Inspections	12,330
Total	15,910

C.—PUPILS FOUND TO REQUIRE TREATMENT.

NUMBER OF INDIVIDUAL PUPILS FOUND AT PERIODIC MEDICAL INSPECTIONS
TO REQUIRE TREATMENT
(excluding Dental Diseases and Infestation with Vermin).

GROUP.	<i>For defective vision (excluding squint).</i>	<i>For any of the other conditions recorded in Table IIa.</i>	<i>Total individual pupils.</i>
Entrants	26	611	631
Second Age Group	289	363	614
Third Age Group	272	230	461
Total (prescribed groups) ...	587	1,204	1,706
Other Periodic Inspections...	1	121	122
GRAND TOTAL	588	1,325	1,828

TABLE II.

A.—RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION IN THE YEAR ENDED 31ST DECEMBER, 1953.

DEFECT OR DISEASE.	PERIODIC INSPECTIONS.		SPECIAL INSPECTIONS.	
	<i>No. of defects.</i>		<i>No. of defects.</i>	
	<i>Requiring treatment.</i>	<i>Requiring to be kept under observation, but not requiring treatment.</i>	<i>Requiring treatment.</i>	<i>Requiring to be kept under observation, but not requiring treatment.</i>
Skin	209	219	2,964	242
Eyes— <i>a.</i> Vision	588	202	1,230	435
<i>b.</i> Squint	239	42	314	92
<i>c.</i> Other	43	59	862	72
Ears— <i>a.</i> Hearing... ..	33	31	70	70
<i>b.</i> Otitis Media ...	78	136	122	186
<i>c.</i> Other	22	53	227	131
Nose or Throat	292	678	626	1,265
Speech	53	109	162	194
Cervical Glands	12	328	50	506
Heart and Circulation ...	17	104	28	240
Lungs	94	336	202	626
Developmental—				
<i>a.</i> Hernia	16	51	32	78
<i>b.</i> Other	12	55	27	120
Orthopædic—				
<i>a.</i> Posture	39	83	75	145
<i>b.</i> Flat foot	78	120	263	261
<i>c.</i> Other	110	243	320	540
Nervous system—				
<i>a.</i> Epilepsy	16	7	26	11
<i>b.</i> Other	11	54	30	136
Psychological—				
<i>a.</i> Development ...	3	36	6	81
<i>b.</i> Stability	6	26	43	66
Other	150	509	6,941	1,712

B.—CLASSIFICATION OF THE GENERAL CONDITION OF PUPILS INSPECTED DURING THE YEAR IN THE AGE GROUPS.

AGE GROUPS.	Number of Pupils Inspected.	A. (Good).		B. (Fair).		C. (Poor).	
		No.	%	No.	%	No.	%
Entrants	3,176	1,312	41.31	1,845	58.09	19	0.6
Second Age Group	2,822	1,423	50.43	1,381	48.93	18	0.64
Third Age Group	1,768	795	44.97	968	54.75	5	0.28
Other Periodic Inspections ...	733	268	36.56	460	62.76	5	0.68
TOTAL	8,499	3,798	44.69	4,654	54.76	47	0.55

TABLE III.
INFESTATION WITH VERMIN.

(i) Total number of examinations in the schools by the school nurses or other authorised persons	67,070
(ii) Total number of <i>individual</i> pupils found to be infested ...	689
(iii) Number of individual pupils in respect of whom cleansing notices were issued (Section 54 (2), Education Act, 1944)	275
(iv) Number of individual pupils in respect of whom cleansing orders were issued (Section 54 (3), Education Act, 1944)	275

TABLE IV.
TREATMENT TABLES.

GROUP I.—DISEASES OF THE SKIN (excluding Uncleanliness, for which see Table III).

	Number of cases treated, or under treatment during the year.	
	By the Authority.	Otherwise.
Ringworm—		
(i) Scalp	—	2
(ii) Body	40	5
Scabies	27	4
Impetigo	350	34
Other skin diseases	2,193	249
TOTAL	2,610	294

GROUP II.—EYE DISEASES, DEFECTIVE VISION AND SQUINT.

	Number of cases dealt with	
	By the Authority.	Otherwise.
External and other, excluding errors of refraction and squint	764	83
Errors of refraction (including squint) ...	—	1,613
Total	764	1,696
Number of pupils for whom spectacles were		
(a) Prescribed	—	1,514
(b) Obtained... ..	—	1,441

GROUP III.—DISEASES AND DEFECTS OF EAR, NOSE and THROAT.

	Number of cases treated	
	By the Authority.	Otherwise.
Received operative treatment		
(a) For diseases of the ear	—	6
(b) For adenoids and chronic tonsillitis...	—	156
(c) For other nose and throat conditions...	—	4
Received other forms of treatment	238	255
Total	238	421

GROUP IV.—ORTHOPAEDIC AND POSTURAL DEFECTS.

(a) Number treated as in-patients in hospitals...	36	
	By the Authority.	Otherwise.
(b) Number treated otherwise, <i>e.g.</i> , in clinics or out-patient departments	41	550

GROUP V.—CHILD GUIDANCE TREATMENT.

	Number of cases treated	
	In the Authority's Child Guidance Clinics.	Elsewhere.
Number of pupils treated at Child Guidance Clinics	144	—

GROUP VI.—SPEECH THERAPY.

	Number of cases treated	
	By the Authority.	Otherwise.
Number of pupils treated by Speech Therapists	205	—

GROUP VII.—OTHER TREATMENT GIVEN.

	Number of cases treated	
	By the Authority.	Otherwise.
Miscellaneous minor ailments	5,191	381
Ultra-violet Rays	184	—
Orthoptic	—	153 (includes 17 cases who received operative treatment)
Total	5,375	534

V—PREVALENCE OF, AND CONTROL OVER, INFECTIOUS AND OTHER DISEASES.

Vaccination during 1953.

Age at Date of Vaccination...	Under 1 year.		1 year.		2—4 years.		5—14 years.		15 years or over.		Total.	
	Dept	G.P's	Dept	G.P's	Dept	G.P's	Dept	G.P's	Dept	G.P's	Dept	G.P's
PRIMARY VACCINATIONS.												
<i>Result of Inspection.</i>												
Typical Primary Vaccinia— Seventh—Tenth Day ...	284	60	15	6	11	11	3	17	2	63	315	157
Accelerated (Vaccinoid) Re- action— Fifth—Seventh Day ...	—	1	—	—	—	—	—	1	—	1	—	3
Maximum Local Reaction— Second—Third Day ...	1	—	—	—	—	—	—	—	—	—	1	—
No Local Reaction ...	15	6	1	—	—	—	—	1	—	1	16	8
TOTALS ...	300	67	16	6	11	11	3	19	2	65	332	168
RE-VACCINATIONS.												
<i>Result of Inspection.</i>												
Typical Primary Vaccinia— Seventh—Tenth Day ...	—	—	—	—	—	2	—	—	—	21	—	23
Accelerated (Vaccinoid) Re- action— Fifth—Seventh Day ...	—	—	—	—	—	—	—	—	1	10	1	10
Maximum Local Reaction— Second—Third Day ...	—	—	—	—	—	—	—	1	2	18	2	19
No Local Reaction ...	—	—	—	—	—	—	—	1	—	12	—	13
TOTALS ...	—	—	—	—	—	2	—	2	3	61	3	65

The number of children under the age of 5 years vaccinated during the year was slightly greater than in 1952 (411 as compared with 364). The percentage of infants under the age of one year who were vaccinated was 17.9.

Every opportunity is taken by members of the Health Department staff to stress the importance and advisability of infant vaccination.

Cases of Infectious Disease Notified during 1953

NOTIFIABLE DISEASE.	CASES NOTIFIED IN WHOLE DISTRICT.											TOTAL CASES NOTIFIED IN EACH WARD.											Total Cases removed to Isolation Hospital								
	At all ages	At Ages—Years.										Abbey.	Alveston.	Arboretum.	Babington.	Becket.	Bridge.	Castle.	Dale.	Derwent.	Friar Gate.	King's Mead.		Litchurch.	Normanton.	Osmaston.	Pear Tree.	Rowditch.	Non-Residents.		
		Under 1.	1-2	2-3	3-4	4-5	5-10	10-15	15-20	20-25	25-35																			35-45	45-65	65 and upwards.
Scarlet Fever ...	141	1	5	10	16	20	78	7	3	1	1	1	1	8	5	7	5	6	6	11	13	10	4	7	21	17	12	8	34		
Whooping Cough ...	525	56	58	76	59	57	206	10	1	...	...	...	...	48	11	11	16	7	6	25	43	81	33	26	39	60	27	39	42
Diphtheria (including Membranous Croup) ...	1	...	...	...	...	...	...	...	1	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1
Measles ...	1615	78	215	240	256	306	491	14	5	7	3	...	...	41	111	78	60	39	48	54	219	149	101	160	92	233	104	59	53
Acute Pneumonia ...	109	6	4	5	2	2	8	4	2	3	9	26	...	4	18	6	3	6	4	3	3	10	8	10	9	8	9	1	16		
Meningococcal Infection ...	3	...	...	...	1	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	...	...	...	...	...	3
Acute Poliomyelitis—Paralytic... ..	4	...	1	1	...	...	2	2	2	...	...	...	...	1	...	...	...	...	1	1	...	...	...	...	2	1	1	...	4
Non-paralytic ...	8	...	...	...	...	...	2	2	...	...	...	...	...	1	...	...	...	...	...	...	...	2	...	...	...	...	...	...	8
Acute Encephalitis—Infective ...	1	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1
Post-infectious ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Dysentery ...	27	3	4	3	5	3	2	2	2	2	1	...	...	2	...	...	...	3	2	1	...	4	1	4	2	1	5	...	19
Ophthalmia Neonatorum ...	5	5	1	2	1	1	1	1	1	1	...	1	
Puerperal Pyrexia ...	26	...	...	...	...	...	...	1	7	15	3	...	...	1	2	...	...	...	...	1	1	1	1	1	1	2	2	13	1
Smallpox	
Para-typhoid Fevers	
Typhoid Fever ...	27	...	...	...	...	...	1	1	1	1	5	7	...	4	...	...	...	1	3	...	...	2	...	2	2	4	3	...	4
Erysipelas ...	1	5	2	
Malaria ...	1	1	1	
*Rubella ...	6	1	1	1	1	1	1	1	1	2	1	1	1	1	1	1	1	1	1	1	
*Chicken Pox ...	55	1	4	...	1	3	46	...	...	...	...	...	...	3	2	4	8	1	...	23	3	2	3	1	1	3	1	1	1
Respiratory Tuberculosis... ..	125	1	3	...	...	2	11	5	13	22	24	15	8	11	3	7	3	1	10	7	15	8	9	11	7	14	4	4	146
Non-Respiratory Tuberculosis ...	17	...	...	1	2	...	5	3	1	2	...	2	1	1	1	1	2	...	1	...	1	1	1	1	2	3	...	2	...
Food Poisoning ...	5	1	4	1	
TOTALS ...	2701	153	295	336	343	395	852	49	30	48	57	41	60	42	116	211	110	96	83	84	81	125	317	262	166	220	178	349	158	123	335

* Not compulsorily notifiable.

COMMUNICABLE DISEASES.

Pneumonia.

The incidence followed the pattern of previous years. 104 cases of Primary Lobar Pneumonia were notified. There were 12 deaths from the disease during the year and most of these cases were elderly people.

Influenza and Influenzal Pneumonia.

Derby had no Influenza epidemic during 1953, and relatively few cases occurred. Only 5 cases of Influenzal Pneumonia came to the notice of the Health Department.

Home Nursing.

Trained nursing assistance for cases of notified Pneumonia was provided in 7 instances. For certain other cases the Works Welfare nurses were in attendance.

Scarlet Fever.

This disease was less prevalent in 1953 than in the preceding years and 141 cases were notified. (258 in 1952, 206 in 1951, 333 in 1950.)

The majority were mild and most of the 34 cases removed to hospital were from homes with unsuitable accommodation for isolation.

Erysipelas.

This disease followed the pattern of previous years and 27 cases were notified.

Diphtheria.

One case occurred during the year after the town had been completely free from the disease for five years. The patient was a youth aged 20 years who was infected with a gravis strain. His complete recovery from his illness was no doubt due in no small way to the fact that he had been immunised as a child.

The rest of his family, who had been immunised, escaped infection.

Diphtheria Prophylaxis.

The odd sporadic case, such as already mentioned, shows how important the Diphtheria immunisation programme is, and during the year propaganda has continued on the same lines as in previous years.

Clinics have been held at the Central Office, Child Welfare Centres, Day Nurseries, Primary and Junior Schools.

Number of sessions	...	...	...	...	355
First attendance of cases	...	...	...	...	1,799
Total number of attendances	...	...	...	...	7,124
Average attendance per session	...	...	...	...	20

The number of children under five years of age completing a full primary course of injections was 1,292. The number of children five to fourteen years who completed a full primary course was 428. In addition, 1,720 children received single reinforcing doses to boost their immunity.

In addition to the above, 259 children under the age of five years, and 9 between the ages of five and fourteen years have been completely immunised by private practitioners, and 37 have been given reinforcing doses, all under the National Health Service Act, 1946.

At the end of the year the position with regard to the immunisation of Borough children, in relation to the child population, under the Corporation scheme was :—

Number of Children at 31st December, 1953, who had completed a course of immunisation AT ANY TIME BEFORE THAT DATE (*i.e.* at any time since 1st January, 1939).

Age at 31/12/53	<i>Under 1</i>	1—4	5—9	10—14	<i>Under 15</i>
<i>i.e.</i> Born in Year	1953	1952—1949	1948—1944	1943—1939	TOTAL.
Last Complete Course of Injections (whether Primary or Booster)—					
A. 1949—1953... ..	123	4,940	6,152	2,677	13,892
B. 1948 or Earlier	—	—	3,020	7,266	10,286
C. Estimated Mid-year Child Population	2,040	8,640	19,100		27,780
IMMUNITY INDEX. 100 A/c....	5.9%	57.1%	46.2%		46.6%

Measles.

The Measles epidemic which started at the end of 1952 continued for the first few months of the year and 1,615 cases were notified. 53 cases were removed to hospital. One case, a child from the Deaf and Dumb Institute, proved fatal.

Whooping Cough.

525 cases were notified. The advisability of immunisation against Whooping Cough is gradually being realised by the public and during the year 1,194 children were protected (1,077 by the Health Department and 117 by General Practitioners).

This number is almost double the number immunised during 1952.

Meningococcal Meningitis.

Three cases only were notified during the year and none proved fatal.

Acute Poliomyelitis.

Twelve cases were notified during the year, but only four of the cases were paralytic. Eleven of the cases occurred during the second half of the year.

Acute Encephalitis.

One case, of virus origin which proved to be fatal, was notified. This case was a child aged four years.

Enteric Fever.

No cases of Typhoid or Para-typhoid were notified during the year.

Dysentery.

27 cases of Sonné Dysentery were notified during the year. The cases were scattered throughout the town and all were visited by a health visitor.

Food Poisoning.

Only five cases were notified, although it is believed that many more mild cases actually occurred and were not brought to the notice of the Department.

Gastro Enteritis.

It is pleasing to be able to report again that no babies died from this disease during the year.

Malaria.

One case only was notified during the year—a serviceman who returned from Korea and was infected before reaching this country.

Ophthalmia Neonatorum.

Cases notified 5

Three of the cases were males and two females.

<i>Cases.</i>		<i>Vision unimpaired.</i>	<i>Vision impaired.</i>	<i>Total Blindness.</i>	<i>Deaths.</i>	
<i>Notified.</i>	<i>Treated.</i>					
	<i>At Home.</i>	<i>In Borough Hospitals.</i>				
5	3	†2	5	—	—	—

†—In-patients of Nightingale Maternity Home.

The number of cases notified was eight less than in 1952.

DERWENT AND DRAYCOTT HOSPITALS.

Detailed Analysis of Admissions and Discharges during 1953 (Borough only)*

<i>Disease.</i>	<i>Remaining 31/12/52.</i>	<i>Admitted.</i>	<i>Discharged.</i>	<i>Dead.</i>	<i>Remaining 31/12/53.</i>
Scarlet Fever...	5	34	38	—	1
Whooping Cough ...	—	42	33	—	9
Diphtheria ...	—	1	1	—	—
Measles ...	28	53	80	1	—
Pneumonia ...	—	16	15	1	—
Cerebro-Spinal Fever ...	—	3	3	—	—
Acute Poliomyelitis—					
Paralytic ...	1	4	5	—	—
Non-Paralytic ...	—	6	6	—	—
Encephalitis Infective ...	—	1	—	1	—
Dysentery ...	3	19	22	—	—
Puerperal Pyrexia ...	—	1	1	—	—
Food Poisoning ...	—	1	1	—	—
Erysipelas ...	2	4	6	—	—
Chicken Pox ...	—	1	1	—	—
Rubella ...	—	1	1	—	—
Malaria (Post Vaccination) ...	—	1	1	—	—
Gastro-Enteritis ...	4	58	59	—	3
Enteritis ...	—	2	2	—	—
Cellulitis ...	—	5	5	—	—
Glandular Fever ...	—	5	4	—	1
Tonsillitis ...	—	4	4	—	—
Croup ...	—	1	1	—	—
Laryngo-Tracheitis ...	—	1	1	—	—
Quinsy ...	—	1	1	—	—
Adenitis Cervical ...	—	1	1	—	—
Pharyngitis ...	—	1	1	—	—
Mumps ...	—	1	1	—	—
Otitis Media ...	—	1	1	—	—
Ulcerative Stomatitis ...	—	4	4	—	—
Influenza ...	—	4	4	—	—
Meningismus ...	—	6	6	—	—
Streptococcal Meningitis ...	—	1	1	—	—
T.B. Meningitis ...	—	1	—	1	—
Bronchitis ...	—	9	8	—	1
Respiratory Catarrh... ..	—	4	4	—	—
Bronchial Catarrh ...	—	1	1	—	—
Acute Rheumatism ...	—	1	1	—	—
Fibrositis ...	—	1	1	—	—
Herpes ...	—	2	2	—	—
Urticaria ...	—	1	1	—	—
Impetigo ...	—	4	4	—	—
Scabies ...	—	1	1	—	—
Pyrexia Unknown Origin ...	—	2	2	—	—
Gullian Barrie Syndrome ...	—	1	1	—	—
Various ...	—	19	19	—	—
TOTAL ALL DISEASES ...	43	331	355	4	15

Cancer.

The recorded deaths from various types of malignant disease shows a decrease in number as compared with 1952, viz., 251 (275).

The Table shows the deaths by age distribution :—

<i>Age ...</i>	25—34 years.		35—44 years.		45—54 years.		55—64 years.		65—74 years.		75 years & upwards.		All Ages.		
	<i>Site.</i>	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	TOTAL	
Stomach ...	—	—	1	1	4	2	9	4	10	2	4	6	28	15	43
Lungs & Bronchus ...	—	—	1	—	5	1	14	2	12	2	1	1	33	6	39
Breast ...	—	—	—	4	—	5	1	4	—	8	—	3	1	24	25
Uterus ...	—	—	—	1	—	1	—	5	—	4	—	—	—	11	11
Leukæmia & Aleukæmia ...	1	—	—	—	2	1	—	—	1	—	1	1	5	2	7
All Others ...	1	—	6	2	5	8	11	13	23	19	25	13	71	55	126
Totals ...	2	—	8	8	16	18	35	28	46	35	31	24	138	113	251

FORM V.D. (R).—*continued.*

	Syphilis.		Gonorrhœa.		Other Conditions.		TOTALS		
	M.	F.	M.	F.	M.	F.	M.	F.	Totals
7. Number of patients who ceased to attend before completion of treatment and were suffering from:—									
(a) Acquired syphilis of less than 1 year's duration	—	1	—	—	—	—	—	1	1
(b) Acquired syphilis of more than 1 year's duration	1	4	—	—	—	—	1	4	5
(c) Congenital syphilis (under 1 year)	1	—	—	—	—	—	1	—	1
(d) " " (over 1 year) ...	1	1	—	—	—	—	1	1	2
(e) Gonorrhœa	—	—	8	2	—	—	8	2	10
8. Number of patients under treatment or observation <i>known</i> to have died:—									
(a) From syphilis	3	1	—	—	—	—	3	1	4
(b) From treatment	—	—	—	—	—	—	—	—	—
(c) From other causes	2	1	—	—	—	—	2	1	3
9. Number of patients transferred to other Centres or Institutions or to private practitioners	5	1	9	2	9	5	23	8	31
10. Number of patients remaining under treatment or observation on 31st December	112	110	72	22	80	39	264	171	435
TOTALS OF ITEMS 5, 6, 7, 8, 9 & 10 (These totals should agree with those of Items 1, 2, 3 and 4)	147	141	173	55	494	214	814	410	1224
11. Number of patients included in Item 7 who failed to complete one course of treatment of either penicillin or of arsenic and bismuth and were suffering from:—									
(a) Acquired syphilis of less than 1 year's duration	—	—	—	—	—	—	—	—	—
(b) Acquired syphilis of more than 1 year's duration	1	1	—	—	—	—	1	1	2
(c) Congenital syphilis of less than 1 year's duration	—	—	—	—	—	—	—	—	—
(d) Congenital syphilis of more than 1 year's duration	—	—	—	—	—	—	—	—	—
12. Number of attendances:—									
(a) For individual attention by the physician	1542	1415	877	240	2105	580	4524	2235	6759
(b) For intermediate treatment, <i>e.g.</i> , dressings, etc.	244	232	209	2	1110	4	1563	238	1801
TOTAL ATTENDANCES	1786	1647	1086	242	3215	584	6087	2473	8560

FORM V.D. (R).—continued.

		Under 1 year.		1 and under 5 years.		5 and under 15 years.		15 years and over.		Totals.	
		M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
13. Number of patients suffering from congenital syphilis in Item 3 above classified according to age		2	—	—	—	—	—	3	2	5	2
14. Pathological Work:—		Microscopical.		Cultural.	Serum.		†† Cerebro- spinal fluid.	Others.			
		For Syphilis.	For Gonorrhæa.		For Syphilis.	For Gonorrhæa.					
(a) Number of Specimens examined at, and by the Physician of, the Treatment Centre ...		30	1,628	—	—	—	—	171			
(b) Number of Specimens from patients at the Treatment Centre sent to a pathological laboratory		—	53	28	1,723	120	35	3			
5. Contacts attending for examination through the agency of:—		Syphilis (less than 1 year).		Syphilis (more than 1 year).		Gonorrhæa.		Other Conditions.			
		M.	F.	M.	F.	M.	F.	M.	F.		
(a) Patients		—	—	—	1	—	24	7	17		
(b) Health Visitor or Social Worker		—	—	—	—	—	—	—	8		
TOTALS		—	—	—	1	—	24	7	25		

Statement showing the services rendered at the Treatment Centre during the year, classified according to the areas in which the patients resided.

Name of County or County Borough (or Country in the case of persons residing elsewhere than in England and Wales) to be inserted in these headings:—	Derby Borough.	Derby County.	Staffs. County.	Leicester County.	Burton-on-Trent.	Notts. County.	Notts. Borough.	TOTAL.
Number of cases from each area included under the following headings in Item 3:—								
Syphilis	29	23	1	2	-	-	-	55
Gonorrhœa	101	48	3	4	4	-	-	160
Other Conditions	267	269	15	11	6	6	1	575
TOTAL	397	340	19	17	10	6	1	790

†—"Syphilis, latent in 1st year of infection" applies to cases presenting no clinical sign of syphilis but considered (by blood tests, etc.) to have contracted this disease within the preceding 12 months.

*—In order to avoid duplication, patients with cardio-vascular syphilis who are also suffering from syphilis of the nervous and/or other systems should be recorded as suffering from cardio-vascular syphilis alone.

††—The number of diagnostic lumbar punctures should be given, not the number of tests carried out.

25th January, 1954. (Signed) H. R. MORGAN RICHARDS,
Physician in Charge of the Treatment Centre.

VI.—TUBERCULOSIS.

Report by Dr. H. G. Grace, Consultant Chest Physician.

Incidence.

The total number of new cases of Tuberculosis notified during 1953 (Respiratory 124 and Non-respiratory 17) is slightly lower than the total for 1952, when the corresponding figures were 136 and 14 respectively, but, allowing for a normal yearly fluctuation, this reduction has little significance. The 124 new Respiratory notifications include 20 cases referred to the Chest Clinic by the Nottinghamshire Mass Radiography Unit, which was working in Derby during part of the year. The incidence of Tuberculosis in Derby, as shown by the number of notifications, is very much the same as that for England and Wales as a whole.

Mortality.

The decline in the Tuberculosis death rate, noted in recent years, continues, the 1953 total of deaths from Tuberculosis (Respiratory 21 and Non-respiratory 2) being the lowest figures yet recorded in Derby. The two deaths from Non-respiratory Tuberculosis were due to the following causes :—

Female, 18 years	...	Tuberculosis Meningitis.
„ 1 year	...	Tuberculous Meningitis and Miliary Tuberculosis.

In view of the steady rate of decline in the Tuberculosis death rate since 1949, both in Derby and in England and Wales, it seems reasonable to expect that numbers of deaths may continue to fall, but, until the incidence of this disease shows convincing signs of a similar decrease, facile optimism must be avoided.

Prevention.

The first visit to homes of newly-notified cases of Tuberculosis is made by a Health Visitor from the Chest Centre as soon as possible after notification and the patient is advised re precautions which must be taken to avert the spread of infection. The Health Visitor also arranges for contacts to attend a special weekly Contact session at the Chest Centre and she explains the advantages of BCG vaccination for younger members of the household. An explanatory leaflet regarding BCG vaccination is also left at the house. Subsequent routine visiting of the patient is made by the same Health Visitor to ensure that medical advice is being followed and proper precautions taken.

Contacts are asked to attend the Chest Clinic for examination by appointment, and the following is a summary of such work done during the past five years :—

YEAR.	<i>No. of New Cases of Tuberculosis notified.</i>	<i>No. of New Contacts examined.</i>	<i>No. of Old (or routine) Contacts re-examined.</i>	<i>Total Contact Attendances.</i>	<i>No. of Contacts found to be tuberculous.</i>
1949	197	440	267	997	16
1950	189	386	365	1,034	36
1951	149	329	266	871	13
1952	150	356	257	933	20
1953	141	359	244	953	30

BCG. Vaccination.

Contacts vaccinated at Chest Centre during 1953 under Local Health Authority's approved Scheme	102
New-born infants vaccinated in Maternity Hospitals ...	19
Total ...	121

(NOTE : Of the 359 New Contacts examined during 1953, 138 were children.)

It is the practice in Derby to arrange regular re-examinations for all home contacts of infective cases of Tuberculosis and these are continued for varying periods, according to circumstances, after the last exposure to infection. In certain cases, Chest Clinic supervision has been prolonged for one to two years after contact has ceased. The same rule is observed in households where death from Tuberculosis has occurred, without prior notification of the disease.

In a few instances, the source of infection of a new case has been found by these methods (in 1953, the number so found was 4), but this is exceptional and, normally, examination of new contacts fails to reveal an infective case, so that, however systematic the examination of contacts of known cases of Tuberculosis, this, in itself, is not sufficient. It is an undoubted fact that there are a number of undiscovered sources of tuberculous infection, i.e.,

"open" cases of Tuberculosis, in any large community, and the detection of these cases is of paramount importance if preventive measures are to be successful. Much excellent work has already been done in Derby by the Mass Radiography Unit from Nottingham but it can hardly be disputed that there is a need in the town for increased Mass Radiography services with a consequent acceleration in the rate of case finding.

Intensified efforts should be made to secure the Mass Miniature X-ray examination of greater numbers of industrial workers, and it should hardly need stating that regular X-ray examination of teachers and others in charge of the young should be a routine.

Another major factor in preventive work is BCG vaccination, and the recent Ministry of Health decision to allow the Local Authority to undertake BCG vaccination of all school children in their fourteenth year is welcome evidence that official approval may ultimately be forthcoming for a further extension of BCG vaccination to include all children under school leaving age.

Suitable employment and conditions for tuberculous patients returning to work are very carefully selected, and, in this connection, the chest service is indebted to the Medical Officers of the larger industrial undertakings in Derby for the interest they have shown and the assistance they have given. All patients who have recently returned to work are, of course, kept under close supervision at the Chest Centre.

Care and After-Care.

The excellent co-ordination which has been established in Derby between the Chest Centre and the Medical Officer of Health's Department was fully maintained during 1953, and co-operation between those concerned with the Care and After-Care of tuberculous patients has been notably successful. Details of assistance given to patients under this head appear in the Almoner's section of this Report.

Health Visiting.

During the year, 2,296 visits were made to patients' homes by the two Tuberculosis Health Visitors.

Dental Treatment for Tuberculous Patients.

Special arrangements are made to provide dental treatment for certain patients suffering from pulmonary tuberculosis, and during the year three patients were referred to the Dental Officer, Mr. A. Stafford, for advice and treatment at the Derwent Hospital.

Register of Notifications.

	RESPIRATORY.			NON-RESPIRATORY.			TOTAL CASES.
	Males.	Females.	Total.	Males.	Females.	Total.	
Number of cases of Tuberculosis remaining at 31/12/53 on the Register of Notifications kept by the Medical Officer of Health	542	397	939	57	65	122	1061
Number of cases removed from the Register during the year by reason of:—							
1. Withdrawal of notification ...	—	—	—	1	—	1	1
2. Recovery from the disease ...	9	9	18	7	5	12	30
3. Death (all causes)	16	6	22	2	1	3	25
4. Otherwise	22	14	36	1	4	5	41

Tuberculosis Notifications and Deaths, 1953.

AGE AND SEX INCIDENCE.

Age Periods.	New Cases.*				Deaths.			
	Respiratory.		Non-respiratory.		Respiratory.		Non-respiratory.	
	M.	F.	M.	F.	M.	F.	M.	F.
0—1 years ...	1	—	—	—	—	—	—	—
1—5 „ ...	2	3	1	2	—	—	—	1
5—10 „ ...	5	6	2	3	1	—	—	—
10—15 „ ...	2	3	—	3	—	—	—	—
15—20 „ ...	5	7	—	1	1	—	—	1
20—25 „ ...	12	10	2	—	—	—	—	—
25—35 „ ...	14	9	—	—	2	—	—	—
35—45 „ ...	16	6	—	—	3	2	—	—
45—55 „ ...	9	4	—	1	2	3	—	—
55—65 „ ...	3	1	—	1	4	—	—	—
65 and upwards	4	2	—	1	2	1	—	—
Totals ...	73	51	5	12	15	6	—	2

*New Cases.—Cases transferred to Derby during 1953 from other areas are not included.

New Cases and Deaths. Comparative Table for Years 1947—1953.

YEAR.	RESPIRATORY TUBERCULOSIS.		NON-RESPIRATORY TUBERCULOSIS.	
	<i>*New Cases.</i>	<i>Deaths.</i>	<i>*New Cases.</i>	<i>Deaths.</i>
1947	188	55	30	12
1948	146	58	35	13
1949	172	71	25	11
1950	172	38	17	7
1951	133	52	16	3
1952	136	25	14	4
1953	124	21	17	2

* Transfers from other areas (excluding Reg. Genl. Transferable Deaths) not included.

Form T. 137 (Revised)

1953.

Public Health (Tuberculosis) Regulations, 1952.**PART I.**

Summary of notifications of Tuberculosis during the period from the 1st January, 1953, to the 31st December, 1953, in the County Borough of Derby.

AGE PERIODS.....	FORMAL NOTIFICATIONS.														Total (all ages).
	Number of Primary Notifications of New Cases of Tuberculosis.														
	0-	1-	2-	5-	10-	15-	20-	25-	35-	45-	55-	65-	75-		
Respiratory, Males ...	1	1	1	5	2	4	11	14	16	8	1	2	-	66	
Respiratory, Females...	-	2	1	6	3	7	10	9	6	4	1	1	-	50	
Non-Respiratory, Males ...	-	-	1	2	-	-	1	-	-	-	-	-	-	4	
Non-Respiratory, Females ...	-	-	2	3	3	-	1	-	-	1	1	1	-	12	

PART II.

New cases of Tuberculosis coming to the knowledge of the Medical Officer of Health during the above-mentioned period, otherwise than by formal notification.

SOURCE OF INFORMATION.			NUMBER OF CASES IN AGE GROUPS.												TOTAL.	
			0-	1-	2-	5-	10-	15-	20-	25-	35-	45-	55-	65-		75-
Death Returns from Local Registrars.	Respiratory	M	-	-	-	-	-	1	1	-	-	1	2	2	-	7 (A)
		F	-	-	-	-	-	-	-	-	-	-	-	1	1 (B)	
	Non-Respiratory	M	-	-	-	-	-	-	-	-	-	-	-	-	-	(C)
		F	-	-	-	-	-	1	-	-	-	-	-	-	-	1 (D)
Death Returns from Registrar-General (transferable deaths).	Respiratory	M	-	-	-	-	-	-	-	-	-	-	-	-	-	(A)
		F	-	-	-	-	-	-	-	-	-	-	-	-	-	(B)
	Non-Respiratory	M	-	-	-	-	-	-	-	-	-	-	-	-	-	(C)
		F	-	-	-	-	-	-	-	-	-	-	-	-	-	(D)
Posthumous Notifications.	Respiratory	M	-	-	-	-	-	-	-	-	-	-	-	-	-	(A)
		F	-	-	-	-	-	-	-	-	-	-	-	-	-	(B)
	Non-Respiratory	M	-	-	-	-	-	-	-	-	-	-	-	-	-	(C)
		F	-	-	-	-	-	-	-	-	-	-	-	-	-	(D)

TOTALS (A)	7
(B)	1
(C)	-
(D)	1

VII.—MENTAL HEALTH.

I. Administration.

(a) All the functions of the Local Authority and the Local Health Authority under the Lunacy and Mental Treatment Acts, 1890–1930, the Mental Deficiency Acts, 1913–1938, and Section 51 of the National Health Service Act, 1946, stand referred to the Health Services Sub-Committee, consisting of 12 members of the Health Committee, which meets monthly.

(b) Mental Welfare is under the general supervision of the Medical Officer of Health.

The Medical Superintendent of the Kingsway Hospital and the Senior School Medical Officer are both approved by the Local Authority for the purpose of giving medical certificates under the Mental Deficiency Acts, 1913–1938.

The four Duly Authorised Officers now share the duties under both the Lunacy and Mental Treatment Acts and the Mental Deficiency Acts. A female Duly Authorised Officer was appointed in March and left in November so that there was still a vacancy for a further Duly Authorised Officer at the end of the year.

The two male Duly Authorised Officers were formerly qualified Relieving Officers and the female Duly Authorised Officer has a Diploma in Social Science and three years' experience in Mental Health work.

During the year the staff of the Occupation Centre was maintained at full establishment.

The qualified Supervisor holds the Diploma of the Central Association for Mental Welfare and, in addition, there are two female unqualified supervisors and a male unqualified supervisor, the latter taking the Senior Boys' Class.

(c) The Duly Authorised Officers supervise cases on licence from Stoke Park Colony, Whittington Hall, Farmfield Colony, Stretton Hall and Manor Hospital; Stallington Hall, however, where the Local Authority has a number of patients, employs its own Social Worker for placing cases on licence and visiting them.

Visits in connection with renewal of Orders under Section 11 and applications for holidays are paid on behalf of 21 institutions.

(d) No duties are delegated to Voluntary Organisations.

(e) One member of the staff attended a training course during the year.

II. Account of Work Undertaken in the Community.

(a) Under Section 28, National Health Service Act, 1946, Prevention, Care and After-care :—

Prevention.

The Duly Authorised Officers made 992 visits and dealt with 175 cases as follows :—

49 Neurotic and confusion cases with domestic difficulties :—

Following visits to each case and contact with employers and other officials, improvement in domestic relations was eventually brought about in all cases.

6 Males were found other employment.

2 Females found other employment.

39 Persons were persuaded and taken to undergo out-patient treatment at Kingsway Mental Hospital.

5 Males persuaded to attend rehabilitation centre.

4 Males found lodgings.

1 Female found lodgings.

44 Patients are receiving regular visits for observation.

2 Males persuaded to attend general practitioner for treatment and domestic problems solved.

2 Females persuaded to attend general practitioner.

6 Cases investigated proving to be caused mainly by neighbours' quarrels. Differences adjusted in many cases.

10 Arrangements made for elderly, mildly confused patients to be admitted to Manor Hospital or the Home of Rest.

1 Male refused outpatients' treatment and generally difficult to live with. Persuaded to undergo outpatients' treatment and domestic harmony restored.

1 Female suffering neurosis and extremely worried over quarrel with neighbour. Interviewed neighbour, differences settled and friendliness restored.

1 Female married with six children. Patient suffering from nervous breakdown owing to husband's failure to attend work with subsequent financial difficulties. Persuaded husband to attend work and obtained clothing for children.

- 1 Female aged 73 years, occasionally rather confused and noisy but otherwise could carry out the household duties efficiently. Was the subject of a neighbour's complaint to her doctor. Ensured that patient was properly cared for by husband and family. Explained to neighbours the probable consequences if the complaint was proceeded with. Neighbours fully understood and agreed to co-operate in every way. No further action was necessary.
- 1 Elderly female threatened suicide because she was lonely and her family were not visiting her. Saw several members of the family who admitted neglect and promised daily visits in the future.

Case of a single male person reported to Department on account of continual haranguing with mother. Upon investigation it was found that he had not been out of house for one year and was being fed and kept by his pensioner parents. Doctor was asked to visit and it was stated that case was one approaching malnutrition. National Assistance Board approached who visited and afforded financial help to case and parents whose mental and physical condition is now much improved.

Care.

The Duly Authorised Officers dealt with 136 cases as follows :—

38 Cases persuaded to undergo voluntary treatment.

23 Cases discharged by Justice.

72 Mental patients :—

Claiming of wages, National Insurance, National Assistance, Disability Pensions, and Retirement Pensions, the storing of personal property and communications with distant relatives on their behalf.

2 Female patients—assisted husbands to settle domestic affairs.

1 Female patient in mental hospital. Family in serious financial difficulties. Assisted husband to obtain employment; patient returned home to a settled domestic and financial situation.

After-Care.

The Duly Authorised Officers made 679 visits and dealt with 182 cases as follows :—

1 Female apart from husband—reconciliation effected.

15 Males were returned to regular employment, three of whom were found lodgings.

- 14 Females were returned to regular employment.
- 15 Males kept under constant supervision.
- 13 Females kept under constant supervision.
- 6 Males re-admitted to mental hospital.
- 10 Females re-admitted to mental hospital.
- 2 Males persuaded to attend Rehabilitation Centre.
- 3 Females sent to convalescent home.
- 14 Males found change of employment.
- 3 Females found change of employment.
- 6 Males persuaded to continue with outpatient treatment.
- 10 Females persuaded to continue with outpatient treatment.
- 66 Cases visited at regular intervals.
- 1 Female suffering from nerves and sleeplessness owing to husband working regular nights. Communicated with firm. Husband now working on day shift only. Patient appears more settled.
- 1 Female rather low mental condition and epileptic, continual domestic trouble with husband using occasional violence. Constant supervision maintained. Husband now more tolerant and sympathetic.
- 1 Male continual domestic strife requiring constant intervention to prevent patient's return to hospital. Wife persuaded to attend a clinic. In-laws interviewed and requested not to interfere. Man was persuaded to attend outpatients' clinic. Domestic harmony restored.
- 1 Male, widower, living with single daughter. Daughter found guilty of stealing from employer. Arranged with employer that money be repaid by patient and daughter in easy payments, thus preventing legal action.

Case of single female person mentally ill for three years, mainly due to domestic differences. After long and much persuasion decided to accept lodgings obtained for her also post much different to her usual occupation. Is now much improved.

Case of married man with one child mentally ill for two years. Long standing domestic differences mended. Lost his post while in hospital. Through departmental observations on losing his post he was awarded special grant of £150. Out-door work found for him and he is doing well.

(b) Under the Lunacy and Mental Treatment Acts, 1890-1930.

SECTION ...		LUNACY ACT, 1890.				MENTAL TREATMENT ACT, 1930.		TOTAL.
		20	21(1)	16	4	1	5	
Under 16 years	M.	—	1	1	—	3	—	5
	F.	—	—	—	—	1	—	1
16 to 25 years	M.	2	3	—	—	1	—	6
	F.	6	5	3	—	1	1	16
25 to 35 years	M.	8	2	4	—	2	—	16
	F.	12	4	4	—	4	—	24
35 to 45 years	M.	7	5	7	—	3	—	22
	F.	9	9	6	—	3	—	27
45 to 55 years	M.	5	4	4	—	—	—	13
	F.	9	7	7	—	4	—	27
55 to 65 years	M.	2	2	3	—	2	—	9
	F.	7	7	4	—	10	—	28
65 to 75 years	M.	2	2	3	—	—	—	7
	F.	7	4	9	—	1	2	23
75 to 85 years	M.	1	—	1	—	—	—	2
	F.	1	—	1	—	—	—	2
TOTAL ...	M.	27	19	23	—	11	—	80
	F.	51	36	34	—	24	3	148

11 Aliens are included in the above.

172 PSYCHIATRIC SOCIAL HISTORIES were supplied by the Duly Authorised Officers.

Dr. Barbour, Medical Superintendent, Kingsway Hospital, Derby, holds a weekly meeting each Monday, at which his medical staff, the Occupational Therapists and the Duly Authorised Officers are present. The admissions and discharges during the previous week are discussed and information exchanged regarding patients as to their future, after-care and rehabilitation in civil and industrial life. In between meetings the Superintendent maintains contact by seeking the aid of the Duly Authorised Officers with regard to any enquiry he wishes to be made and by obtaining and forwarding to him any patient's social history.

By permission of the Medical Superintendent, the Duly Authorised Officers are allowed to see patients on any day with a view to relieving them of domestic, financial and other matters which may be causing them concern.

Co-operation is readily given by all concerned.

Thanks are tendered to the Medical Superintendent, doctors, and staff of Kingsway Mental Hospital, also to the Magistrates, doctors and police for their help and co-operation in carrying out the difficult duties under the Lunacy and Mental Treatment Acts.

(c) Under the Mental Deficiency Acts, 1913-1938.

(i) ASCERTAINMENT, Etc.	During 1953.				Total cases on Authority's registers as at 1st January, 1954.			
	Under age 16.		Aged 16 and over.		Under age 16.		Aged 16 and over.	
	M.	F.	M.	F.	M.	F.	M.	F.
1. PARTICULARS OF CASES REPORTED DURING 1953.								
(a) Cases at 31st December ascertained to be defectives "subject to be dealt with". Action taken on reports by:—								
(i) Local Education Authorities on children								
(1) While at school or liable to attend school 4 6 — — — — — —								
(2) On leaving special schools — — 4 5 — — — —								
(3) On leaving ordinary schools — — — — — — — —								
(ii) Police or by Courts — — 1 — — — — — —								
(iii) Other Sources — 1 — — — — — —								
(b) Cases reported but not regarded at 31st December as defectives "subject to be dealt with" on any ground 1 1 1 1 — — — —								
(c) Cases reported but not confirmed as defectives by 31st December and thus excluded from (a) or (b) — — — — — — — —								
Total number of cases reported during the year 5 8 6 6 — — — —								
2. DISPOSAL OF CASES.								
(a) Of the cases ascertained to be defectives "subject to be dealt with" number:—								
(i) Placed under Statutory Supervision 4 6 4 5 39 24 119 109								
(ii) Placed under Guardianship — — — — — — 3 7								
(iii) Taken to "Places of Safety" — — — — — — — —								
(iv) Admitted to Institutions — 1 1 — 3 6 72 92								
(b) Of the cases not ascertained to be defectives "subject to be dealt with" number:—								
(i) Placed under Voluntary Supervision 1 1 1 1 3 8 13 27								
(ii) Action unnecessary — — — — — — — —								
Total of Item 2 5 8 6 6 45 38 207 235								
3. CLASSIFICATION OF DEFECTIVES IN THE COMMUNITY ON 1st JANUARY, 1954.								
(a) Cases included in item 2 (a) (i) to (iii) above in need of institutional care:—								
(1) In urgent need of institutional care:—								
(i) cot and chair cases — — — — 4 3 — —								
(ii) ambulant low grade cases — — — — 1 — — —								
(iii) medium grade cases — — — — 3 2 1 —								
(iv) high grade cases — — — — — — — —								
(2) Not in urgent need of institutional care:—								
(i) cot and chair cases — — — — — — — —								
(ii) ambulant low grade cases — — — — 2 — 1 —								
(iii) medium grade cases — — — — 6 — 1 1								
(iv) high grade cases — — — — — — 1 1								
Total of Item 3 (a) — — — — 16 5 4 2								

	Under age 16.		Aged 16 and over.	
	M.	F.	M.	F.
3. (b) Of the cases included in items 2 (a) (i) and (ii) and 2 (b) (i) above, number considered suitable for :—				
(i) occupation centre	21	20	10	7
(ii) industrial centre	—	—	—	—
(iii) home training	—	—	—	—
Total of Item 3 (b)	21	20	10	7
(c) Number of cases included in item 3 (b) receiving training on 1st January, 1954 :—				
(i) in occupation centre	15	14	6	6
(ii) in industrial centre	—	—	—	—
(iii) at home	—	—	—	—
Total of Item 3 (c)	15	14	6	6

4. Number of Mental Defectives who were in Institutions, under Community Care (including Voluntary Supervision) or in "Places of Safety" on 1st January, 1953, who have ceased to be under any of these forms of care during 1953.

	M.	F.	T.
(a) Ceased to be under care	113	102	215
(b) Died, removed from the area, or lost sight of	13	24	37
TOTAL	126	126	252

5. Of the total number of mental defectives under Supervision or Guardianship or no longer under care.

(a) Number who have given birth to children while unmarried during 1953 ... Nil

(b) Number who have married during 1953 *Males.* Nil *Females.* Nil

(ii) GUARDIANSHIP AND SUPERVISION.

At the end of 1953 there were 291 mental defectives under Statutory Supervision, 63 being under the age of 16 years, also 51 were under Voluntary Supervision, 11 being under the age of 16 years.

In addition 10 defectives over the age of 16 years were under Guardianship.

The Duly Authorised Officers carried out 1,301 domiciliary visits during the year and 106 cases were found to be socially stabilised and no longer in need of care.

Also as a result of these visits it has been possible to assist many defectives in employment, domestic and financial problems.

14 defectives, 13 of them under the age of 16 years were in urgent need of institutional care at the end of the year.

3 Certified Defectives were admitted to Ridgeway Hospital.

2 Certified Defectives were admitted to Aston Hall Hospital.

(iii) TRAINING.

The Occupation Centre continues to provide training for 40 children, including a nursery group of ten children aged from 6-10 years. In this group speech and sense training are given and kindergarten apparatus is used for the teaching of colour, size, and shape. The children are also taught to solve simple jig-saw puzzles, and enjoy musical activities such as percussion band and folk dancing.

The junior group, composed of boys and girls from 10-14 years of age, continue to use more advanced sense training apparatus. A beginning is made in this class to teach simple handwork, painting, and picture making with coloured paper. In addition, there are such activities as rhythmic and folk dancing and more advanced percussion band.

The two senior groups, where sexes are divided, are composed of boys and girls over 16 years of age. The boys make such saleable articles as stools and door mats, as well as cultivating an allotment, while the girls specialise in embroidery, canework, knitting, and domestic activities. These two groups combine for such activities as percussion band, country dancing and singing.

The children were taken by coach for a day at Rhyl during the summer. A Christmas Party, with suitable gifts, was provided and a visit was paid to the pantomime. These social activities are greatly appreciated by the children.

VIII.—SOCIO-MEDICAL WORK

Report by Mr. R. L. Carabine, Almoner.

General Illness.

It is pleasant to report that 1953 was a year of great interest and steady progress. That this was so was largely due to the willing co-operation of all concerned, both in the statutory and voluntary social services and to the confidence placed in the Care and After-care service by Hospitals, Clinics, Doctors and Social Workers.

An impression of the year is that there was a greater emphasis on sociological factors, both in the prevention of illness and in the Care and After-care of those suffering ill health.

As in former years, every assistance has been given by the Hospitals within the area whose Almoners have excelled in referring those cases most in need of Care and After-care. This has also applied to those specialist units outside the immediate area, i.e., the paraplegic, plastic surgery, thoracic surgery and orthopædic hospitals.

This flow of information from the hospital has been reciprocated by the Authority's workers supplying either spontaneously, or upon request, social reports and other relevant information. In this way a sense of partnership has developed and a frank exchange of views been encouraged.

The process of building up a more personal contact with doctors in general practice has continued and many interesting cases have been referred by these doctors. In this connection, the writer notes that a recent survey of patients attending surgeries points to a high proportion of "stress" cases and is bold enough to suggest that these are the very cases Almoners may be able to assist most. Stress has appeared as a factor in many of the cases met with during the past year and whilst it would be foolish to claim one hundred per cent. success, there can be no disputing the fact that much has been done to relieve both "causative" and "resultant" stress. This latter has been found most difficult to eradicate in those long term or chronic conditions, i.e., Parkinson's Disease, Disseminated Sclerosis, etc., where patients are aware of the inconvenience and hardship they cause to members of their family. Since convalescence is not easily arranged for such cases, efforts have been made to arrange temporary admission to hospital, thus allowing a wife or husband a breathing spell and the opportunity of taking a well earned holiday or rest. This can rightly be claimed as preventive socio-medical work, and it is an aspect of the care and after-care service which

can easily be lost sight of in the general "hurly-burly" of everyday work. Frequently the sole contribution the Almoner can make is that of being a good listener and allowing a patient or relative to unburden and thus release pent up emotion. Whilst no practical suggestion may be possible to relieve the lot of these patients, several General Practitioners have commented on the psychological value of these interviews.

Generally speaking, the problems encountered have been those long associated with ill health, i.e., financial, occupational, and environmental, and every use has been made of the statutory and voluntary agencies to bring aid in such cases.

Tuberculosis.

As in former years the Almoners have again been afforded every opportunity and encouragement by the Chest Physician and staff of the Chest Centre. It cannot be too strongly emphasised that here is the ideal medical-social team—employed by two separate authorities, but functioning as one unit.

Financial aid, housing, family problems, training and resettlement, etc., are the aspects which most concern the social worker and despite the advances made in the clinical treatment of this disease, at no time has the importance of social therapy been lost sight of. Each new notification has been followed up by the Almoners, and every effort made to ensure that patients are aware of the services available to them.

Financial Aid.

The closest co-operation exists with the National Assistance Board, and the results of each application for National Assistance at the higher rates have been notified by the Board's officers to the Almoners within a few days of the application being made. This is of no little importance, since it enables the Authority's workers to see at a glance how each individual patient and family are to be affected during the long period of treatment.

Free milk, clothing, bed-linen, etc., are frequently granted by the Health Committee. The former is granted at the discretion of the Almoners in accordance with scales laid down by the Authority and is available at the rate of two pints per day within a few days of notification. On average, some sixty persons are receiving this aid every day of the year at an annual cost of over £1,200. In addition to this help provided by the Health Committee, free school meals, help with clothing for children and assistance to patients undertaking further education has been given by the Education

Committee, from whose officers the Almoners have received willing collaboration.

In the voluntary field considerable assistance, both financial, material and in the form of services has been obtained and acknowledgments to the various bodies concerned is made at the conclusion of this report.

Housing.

Whilst the provision of twenty-five houses per year for tuberculous cases is at present adequate for the smaller families, attention must be drawn to the fact that large families are not being rehoused with sufficient speed. Indeed, there are cases for whom repeated recommendations have been made to no avail. The reason given that there are no four-bedroomed houses available cannot be accepted as adequate. Obviously, families requiring four-bedroomed houses, but at present living in houses possessing only two bedrooms, will have their conditions improved if they are rehoused in modern three-bedroomed dwellings. This criticism is not made lightly or without some realisation of the difficulties confronting the Housing Authority, as no doubt other Authorities are faced with a similar problem. It is a fact, however, that the members of these families are subject to a constant weighted risk, they are, therefore, a risk to the community and there is evidence that this risk has become an accomplished fact in more than one instance.

In all other respects the housing of cases recommended by the Chest Physician and the Medical Officer of Health has been satisfactory. There have been isolated cases of patients misusing their new homes, but it is remarkable how few these have been in number.

Resettlement.

From the early days of diagnosis, the future employment of patients is a matter of concern. Whilst it may only be possible for the Chest Physician to give an estimate of the degree of recovery, it is frequently possible for him to advise that a change of employment will be necessary. Without alarming the patient or causing despondency, it is possible to so discuss the question that in due course he comes to see the necessity for such a change. The lengthy period of treatment, so often a handicap in other respects, is in this instance an asset enabling the patient, as it does, to think calmly over his future. No hurried decisions are made and as treatment progresses and a clearer and more definite forecast is arrived at, various possibilities are examined. It is not the duty of a social worker to prevent a patient from carrying out any plans he may make—but it is a duty, with the guidance of the Chest Physician—to so advise him that he becomes aware of his capabilities and inabilities, that he is made aware of the advantages of a certain course and the pitfalls of an alternative course of action. It is satisfactory to report that the overwhelming majority of patients are only too willing to

be guided by consideration for their own health and the health of others. In this respect mention must be made of the willing co-operation given by the Disablement Officers of the Ministry of Labour. No patient is returned to work through the Almoner-Disablement Officer service without the Chest Physician's approval and the number of relapses occurring over the past few years has been so low that not more than two cases can be called to mind.

Some concern was expressed in Derby during the past year on the question of patients returning to work and the risk of their spreading infection. It can only be stated that every care is taken to obviate all risk, and as all patients continue to be under the Chest Physician's observation after their return to work, this assurance should be adequate, nevertheless every effort has been made and will continue to be made to re-assure both employers and employees on this point. On the general question of employment, it can only be reported that Derby is most fortunate in that its mixed industries offer such scope that the problem of unemployed ex-tuberculous patients simply does not exist.

Conclusion.

In concluding these reports on the Care and After-care services, thanks must be extended to the Women's Voluntary Services, the British Red Cross Society, and to all those numerous other bodies who have so willingly given assistance.

Number of New Patients referred to Almoners.

Hospitals	...	...	...	...	...	604
Chest Centre	...	...	...	...	...	130
General Practitioners	...	...	...	...	...	82
Health Workers	...	...	...	...	...	35
Non-Medical Sources	...	...	...	...	...	43
						<hr/>
						894
						<hr/>
Old Cases arising and continued from previous years	...	...	...	...	...	301
Total number of cases dealt with during year	...	...	...	...	...	1,195
						<hr/>

The 894 New Cases referred were classified as suffering from :—

Cancer	...	...	...	100	Nervous Conditions	...	...	23
Cardiac and Circulatory Con- ditions	...	...	...	76	Orthopædic Conditions (non T.B.)	...	...	53
Cerebral Tumours	...	...	...	2	Forms of Paralysis	...	...	30
Chest Conditions (non T.B.)	...	...	...	55	Rheumatism, etc.	...	...	31
Debility	...	...	...	11	Tuberculosis	...	...	148

Diabetes	...	...	...	15	Venereal Disease	...	...	7
Gastric Conditions	...	...	...	73	Other Medical and Surgical	...	...	270
					Conditions	...	...

Provision of Free Milk, Clothing, etc.

116 Patients were provided with free milk—approximate cost to Authority, £1,214 16s. 0d.

17 Patients were assisted with clothing at a cost of £60 17s. 6d.

41 " " loaned invalid wheel chairs.

19 " " " beds.

Housing.

Recommended for priority housing	...	...	20
housed	...	...	13

Convalescence.

Ten patients were sent for Preventive and Recuperative convalescence at a total cost of £82 4s. 6d.

Forty patients were also sent for similar convalescence through voluntary and other agencies.

Rehabilitation—Tuberculosis.

31 Patients were registered as Disabled Persons.

6 " " sent for Rehabilitation through the Ministry of Labour.

3 " " " Training through the Ministry of Labour.

38 " returned to employment.

General Care.

Evidence of the widespread nature of problems encountered is given by the number of patients assisted through the following sources:—

155 Patients were referred to the National Assistance Board.

45 " " " " " Ministry of Labour.

7 " " " " " Ministry of Pensions and National Insurance.

30 " " " " " Hospitals.

19 " " " " " General Practitioners.

52 " " " " " Voluntary Agencies.

5 " " " " " Employers.

1	Patients were referred to the	Legal Aid Committee.
6	„ „ „ „ „	School Medical Officer.
11	„ „ „ „ „	Welfare Department.
8	„ „ „ „ „	Education Department.
6	„ „ „ „ „	Housing Department. (Does not include those housed on recommendation of Chest Physician.)
2	„ „ „ „ „	Probation Officer.
1	„ „ „ „ „	Children's Officer.
47	„ „ „ „ „	other sections of Health Department, i.e., Sanitary Inspector, Home Help, District Nurse, etc.

The following Chronic Sick Cases were visited by the Authority's Health Visitors to ascertain suitability for Hospital Care.

Number of Chronic Sick Cases visited during the year	...	...	274
Number recommended—"Removal Essential"	...	...	248
"Removal Desirable"	...	...	14
"Can be cared for at home"	...	...	12

The following visits to expectant mothers desiring hospital confinement were carried out by Domiciliary Midwives.

Number of Expectant Mothers visited during the year	...	...	241
Number recommended—"Hospital Essential"	...	...	129
"Hospital Desirable"	...	...	28
"Can be cared for at home"	...	...	84

IX.—MISCELLANEOUS

Home Nursing.

The arrangements made for the provision of a Home Nursing Service, as required by the National Health Service Act, 1946, continued to work satisfactorily during 1953.

An analysis of the numbers and types of cases dealt with during the years 1949–1953 is appended.

	1949	1950	1951	1952	1953
Number of cases on Register at beginning of the period ...	178	243	240	250	277
New cases during the period ...	1,218	1,487	1,487	1,600	1,693
Total number of cases attended during the period ...	1,396	1,730	1,727	1,850	1,970
Total number of visits during the period ...	41,060	44,467	46,402	52,783	55,133

The new cases during 1953 were referred from the following sources:—

Doctors ...	1,161	Neighbours ...	5
Hospitals ...	443	Tuberculosis Health Visitor ...	2
Relatives ...	34	Personal application by Patient	7
Midwives ...	20	Bed Bureau ...	4
Welfare Officers ...	17		

A quantity of home nursing equipment is kept in stock at the Central Office and the Royal Nursing Institution and is issued on loan at the request of nurses, doctors or relatives, no charge being made provided the equipment is returned intact. The British Red Cross Society assist with items temporarily out of stock or when the Local Authority is unable to supply the item requested.

The following equipment was loaned out during 1953 :—

	<i>Stock.</i>	<i>Cases Assisted.</i>
Bedpans, Stainless Steel and Porcelain	91	241
Back Rests	61	160
Air Rings	49	138
Mackintosh Sheets	32	85
Bed Cradles	24	41
Urinals, Male	16	43
Urinals, Female	8	12
Feeding Cups	14	12
Rubber Bedpans	8	10
Breast Pumps	1	1
Hot Water Bottles	6	—
Air Beds	3	11
Douche Cans	3	—
Night Commodes	2	2
Dunlop Mattress	1	2

Home and Domestic Helps.

During the year, 691 applications were received, compared with 656 during 1952.

Details are as follows :—

	No. of applications received.	No. of cases attended.	Assessed at			No. of applications withdrawn.	Assessed at	
			Full Fee.	Reduced Fee.	Free.		Full Fee.	Reduced Fee.
Home Helps—Maternity ...	47	22	14	8	—	25	14	11
Domestic Helps—								
Illness	96	85	40	45	—	11	5	6
Tuberculosis	8	8	2	6	—	—	—	—
Aged and Blind ...	540	528	45	481	2	12	2	10
TOTAL	691	643	101	540	2	48	21	27

The detailed comparison for the years 1949–1953 is as follows :—

Year.	Applications Received (inc. old cases).	Applications Withdrawn.	Full Fee Charged.	Reduced Fee Charged.	No Fee Charged.	Home Helps Employed.	Attendances Made.
1949	520	64	44	389	23	56	4,817
1950	632	86	48	476	22	64	14,786
1951	651	51	56	533	11	69	18,599
1952	656	31	78	538	9	75	19,027
1953	691	48	101	540	2	85	20,313

This service is usually requested by Doctors, Hospital Almoners, Welfare Officers, Health Visitors, Women's Voluntary Services and the general public.

In each case a visit is made by the Supervisor to establish the degree of help necessary, to arrange and explain the duties of a Home Help, and to assess the charge. A suitable Home Help is then assigned. Visits are made periodically to determine the necessity for the continuation of the service or

any change in circumstances. A charge is made according to the Ministry of Health Circular 110/46, and in all cases an application form for this service is completed and sent to the office.

The number of three-hourly attendances made by the 85 part-time Helps employed was 20,313, and 794 visits were made by the Supervisor. Help is sent into approximately 460 homes each week.

There is increased demand generally for this service, due mainly to an increase in the number of hospital discharge cases and the greater demands of the old-age pensioners. These two types of case, together with chronic invalids, account for 90% of the total cases. This year, particularly during the winter, more of the regular cases have been in hospital and have required additional help when discharged.

Illness did not leave the Home Helps themselves unaffected in that there was an increase in the number of cases of absence due to illness. In this respect, as for other employees, sickness benefit is now being paid after the first six months' service. Holiday pay has also been granted.

The demand for help for maternity cases is still small and in our opinion the reason is purely financial.

It should be mentioned that the quality of the Home Help Service has been maintained. In some cases interest and sympathy have prompted extra duties being carried out by the Helps in their own time.

Epileptics and Spastics.

Incidence :—

YEAR.	EPILEPTICS.		SPASTICS.	
	Male.	Female.	Male.	Female.
1949	1	1	—	—
1950	2	1	1	1
1951	1	—	—	1
1952	—	—	1	—
1953	3	2	2	3
Total number of cases in the Borough (age 0—15 years) known to the Medical Officer of Health at 31/12/53...	*8	4	*10	7

* One Male included who is both Spastic and Epileptic.

It is not possible to give the precise number of persons suffering from epilepsy and cerebral palsy but, having regard to the information contained in Ministry of Health Circular 26/53, it is estimated that there may be up to 28 epileptics and possible up to 50 spastics over the age of 15 years in the Borough.

Briefly, the facilities available under the local Health Services for the area are as follows :—

Diagnosis, treatment and assessment are available from General Practitioners and hospitals. Children under 15 automatically come to the notice of the School Health Service, and this Service maintains close supervision over the cases, and where necessary, contacts General Practitioners and the hospitals in cases of difficulty. Furthermore, there is a local arrangement whereby the School Health Service contacts the Welfare Department at least 12 months before the child reaches the age of 16 years, so that the Welfare Department is brought into the picture at an early age. Responsibility for the liaison between the School Health Service and the Welfare Department has been given to the Senior School Medical Officer, and this arrangement appears to be working quite satisfactorily. The main difficulty with spastics lies in accommodation, and at the time of writing plans are afoot to see whether a small unit can be provided for those spastic children capable of benefiting from treatment and education.

There is excellent co-operation between the School Health Service and the Pediatric Services of the hospitals.

Blind Welfare.

The following information is supplied by Mr. L. W. Horton, Chief Executive Officer, Welfare Department.

Number of Blind Persons on register during 1952	...	...	240
New patients added to register during 1953	...		40
Transfers in to the Borough from other areas	...		5
Number of Blind Persons reported as having died...			15
Transfers out of the Borough to other areas	...		4
Number of Blind Persons on register during 1953	...	...	266
Number of children of school age included in above...			2
Number of Partially Sighted Persons on register			
during 1953	...	...	42

Details of Blind Persons on register are as follows :—

Age Periods of Registered Blind Persons.

<i>Age</i>	0-	1-	2-	3-	4-	5-	11-	16-	21-	31-	40-	50-	60-	65-	70+	<i>Total.</i>
M.	—	—	—	—	—	1	—	1	4	6	10	13	11	13	61	120
F.	—	—	—	—	—	—	1	1	5	4	7	12	12	19	85	146
TOTAL	—	—	—	—	—	1	1	2	9	10	17	25	23	32	146	266

Age at Onset of Blindness.

<i>Age.</i>	0-	1-	2-	3-	4-	5-	11-	16-	21-	31-	40-	50-	60-	65-	70+	Un- known	<i>Total.</i>
M.	12	—	1	1	—	6	2	3	8	6	9	15	12	11	34	—	120
F.	14	—	—	—	—	10	4	—	2	2	16	18	11	15	54	—	146
TOTAL	26	—	1	1	—	16	6	3	10	8	25	33	23	26	88	—	266

Children, Age under 16.

	Under 2.		Age 2—4.				Age 5—15.								TOTAL.
	Resident in/at		Educable.	In-educable.		Educable.				Ineducable.					
	Sunshine or Residential Homes.	Home or Elsewhere.		Attending Nursery Schools or in Residential Homes.	At Home or Elsewhere.	In Mental Hospitals or M.D. Institutions.	At Home or Elsewhere.	Attending Schools.	Not at School.	In Mental Hospitals or M.D. Institutions.		At Home or elsewhere.			
						Blind but no other Defects.	Blind with other Defects.	Blind but no other Defects.	Blind with other Defects.	Blind.	Blind with multiple Defects.	Blind.	Blind with multiple Defects.		
M.	—	—	—	—	—	—	—	—	—	—	—	—	1	1	
F.	—	—	—	—	—	1	—	—	—	—	—	—	—	1	
TOTAL	—	—	—	—	—	1	—	—	—	—	—	—	1	2	

Education, Training and Employment. Age Periods, 16 years and upwards.

	Employed.					Under-going Training.		Unemployed.						(m)	(n)
	(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	(j)	(k)	(l)	GRAND TOTAL.	No. of Persons registered under the Disabled Persons (Employment) Act, 1944, included in Col. (m).	
	In Workshops for the Blind.	As Approved Home Workers.	All Others not included in either (a) or (b).	TOTAL EMPLOYED.	No. of Women over 60 and Men over 65 who are employed included in (d).	For Sheltered Employment.	For Open Employment.	Trained but unemployed.	No Training but trainable.	Not available for employment.	Not Capable of Work.	Not Employed over 65.			
M.	—	—	21	21	1	—	—	—	—	—	11	14	73	119	18
F.	—	—	4	4	—	—	1	—	—	—	22	14	104	145	4
TOTAL	—	—	25	25	1	—	1	—	—	—	33	28	177	264	22

Occupations of Employed Blind Persons.

	<i>Basket Workers.</i>	<i>Clerks and Typists.</i>	<i>Newsagent.</i>	<i>Factory Operatives.</i>	<i>Massage and Physio-Therapy.</i>	<i>Newsvendors.</i>	<i>Piano Tuners.</i>	<i>Packers.</i>	<i>Telephone Operators.</i>	<i>Other Open Employment.</i>	<i>Gardener.</i>	<i>Miscellaneous.</i>	TOTAL.
Within Workshops for the Blind	—	—	—	—	—	—	—	—	—	—	—	—	—
In Approved Home Workers Schemes	—	—	—	—	—	—	—	—	—	—	—	—	—
Others not Pastime Workers ...	1	2	1	—	1	1	1	—	2	14	1	1	25
TOTAL	1	2	1	—	1	1	1	—	2	14	1	1	25

Physically and Mentally Defective and Mentally Disordered—All Ages.

	(a) <i>Mentally Disordered.</i>	(b) <i>Mentally Defective.</i>	(c) <i>Physically Defective.</i>	(d) <i>Deaf without Speech.</i>	(e) <i>Deaf with Speech.</i>	(f) <i>Hard of Hearing.</i>	<i>Not included in (a) to (f) but combination of :-</i>		TOTAL.
							<i>(b), (c) and (f)</i>	<i>(a) and (c)</i>	
M. ...	4	1	8	—	—	10	—	1	24
F. ...	6	—	19	—	5	15	1	—	46
TOTAL ...	10	1	27	—	5	25	1	1	70

Blind Persons age 16 and upwards—resident in

	<i>Residential Accommodation provided under Part III of the 1948 Act, viz.: Section 21.</i>		<i>Other Residential Homes.</i>	<i>Mental Hospitals.</i>	<i>Mental Deficiency Institutions</i>	<i>Chronic Wards of Hospitals.</i>
	<i>Homes for the Blind.</i>	<i>Other Homes.</i>				
M. ...	—	11	2	4	—	4
F. ...	—	6	2	6	—	8
TOTAL ...	—	17	4	10	—	12

Miscellaneous Information—Number of

Social Centres	1
Handicraft Classes	2
Special Classes and Socials for the Deaf-Blind ...	1
Persons newly employed in open industry during the year	1
Persons discharged from open industry during the year	—
St. Dunstaners	6

Blind Persons Registered as New Cases (not transfers) during the Year—Age Periods.

	0-	1-	2-	3-	4-	5-	11-	16-	21-	31-	40-	50-	60-	65-	70+	Total
M.	—	—	—	—	—	—	—	—	—	1	1	—	1	2	12	17
F.	—	—	—	—	—	—	—	—	1	—	—	—	1	4	17	23
TOTAL	—	—	—	—	—	—	—	—	1	1	1	—	2	6	29	40

**Blind Persons Registered as New Cases (not transfers) during the Year—
Age at Onset of Blindness.**

	0-	1-	2-	3-	4-	5-	11-	16-	21-	31-	40-	50-	60-	65-	75+	Total.
M.	—	—	—	—	—	—	—	—	1	—	1	1	2	1	11	17
F.	2	—	—	—	—	—	—	—	—	—	—	1	2	4	14	23
TOTAL	2	—	—	—	—	—	—	—	1	—	1	2	4	5	25	40

The Local Authority employs three Visitors and Teachers of the Blind, all holding the qualifications of the Association of Colleges for Teachers of the Blind.

Every effort is made to discover and assist any new cases of blindness. Home visiting and practical help is given to all blind persons known to us and residing within the Borough. Social amenities are made known and used whenever possible. Extra attention is given to the Deaf-Blind and any who may be suffering from some other form of handicap the nature of which is such as to increase the disability of blindness. For a small charge a Home Help is provided where necessary. Arrangements are also made for the provision, licensing and maintenance of wireless sets, and also the provision of Dog Licences and Omnibus Passes.

Each Tuesday and Thursday afternoon is devoted to work at the Social Centre, Guildhall, Market Place, where instruction is given in pastime occupations, or a game of dominoes, cards or draughts may be enjoyed.

The additional room at the Centre, is light and warm and contains a number of easy chairs. Here, with this added comfort, our older people spend many happy hours, and each Tuesday afternoon a reader, kindly recruited by the W.V.S., comes along to give a short session of interesting stories. An instruction class in Old Tyme Dancing is held on alternate Thursdays.

Teaching of the following subjects and handicrafts is carried out by the Staff: Braille reading and writing, Moon reading, sea-grass seating, rush seating, cane seating, rug making, hand knitting, bead work, chain ball craft, etc.

Theatre parties and amateur shows are arranged throughout the year. Motor coach outings are arranged throughout the summer. The two most important events of the year are the Annual Outing and Christmas Party which are provided by the Local Authority.

Registration of blind persons is carried out through the medium of a private Eye Clinic, which is arranged once monthly in conjunction with the Ophthalmologist, and which is in accordance with the Ministry of Health requirements, Form B.D. 8 being completed in all cases. In the case of bedridden patients, and others so physically handicapped as to be unable to attend the clinic in person, arrangements are made for the Ophthalmologists to visit them in their homes.

Records are now kept of all observation cases, i.e., persons likely to go blind within the next four years following the date of examination.

The many demands in the field of Blind Welfare seem to be ever increasing, and some of our duties must be left with seemingly insufficient attention, but we are, nevertheless, happy to report that despite the many office and routine tasks which must be carried out, we were able to make a large number of visits. These include visits to blind persons in their homes, visits to various hospitals, and numerous appointments with doctors and dentists on behalf of blind persons.

Follow-up of Registered Blind and Partially Sighted Cases.

(i) Number of cases registered during the year in respect of which para. 7 (c) of Forms B.D.8 recommends:—	Cause of Disability.			
	<i>Cataract.</i>	<i>Glaucoma.</i>	<i>Retrolental Fibroplasia.</i>	<i>Other.</i>
(a) No treatment:—36	7	7	—	22
(b) Treatment (medical, surgical or optical):—6	1	—	—	5
(ii) Number of cases at (i) (b) above which on follow-up action have received treatment	—	—	—	4

General Remarks.

In all cases of Glaucoma, treatment had been received. Of the six cases recommended for treatment, the two declining did so on the grounds of age and general health.

Section 47, National Assistance (Amendment) Act, 1951.

Three cases were admitted to Manor Hospital under this Section.

Ambulance Service.

Mr. A. Connor, Transport Manager, reports as follows :—

Use of Service.

The demand on the service continues to increase, the number of patients carried being 7.7% above that for 1952, but it was possible to keep the increase in mileage down to 5.4%.

Out-patients from within the Borough were mainly responsible for the extra work, the mileage outside our boundary increasing by only 1.1% above 1952.

The number of patients carried by ambulance showed a greater proportionate rise than car cases, but this was partly because it was frequently possible to use an ambulance instead of two cars to take a group of sitting cases to or from one district.

Vehicles.

There have been no alterations in the fleet during 1953; eleven ambulances and five cars are in use. Repairs continued to be carried out by the Central Workshops of the Transport Department.

Personnel.

The staff remained at an average level of 22 driver-attendants, three shift leaders and a Deputy Ambulance Officer.

Patients carried.

					<i>Ambulances.</i>	<i>Cars.</i>
Emergency calls ...	...	...	...	...	980	200
Other cases ...	...	...	...	...	15,052	22,285
					<hr/>	<hr/>
				Total ...	16,032	22,485
					<hr/>	<hr/>

Journeys.

					<i>Ambulances.</i>	<i>Cars.</i>
Patient-carrying ...	...	...	...	...	6,831	6,592
Midwifery apparatus, etc.	...	...	...	...	31	525
Fruitless and service	...	...	...	...	55	158
					<hr/>	<hr/>
				Total ...	6,917	7,275
					<hr/>	<hr/>

Mileage.

Ambulances ... 93,305 ; Cars ... 112,893 ; Total ... 206,198.

Co-operation, etc.

During the year, 95 patients travelling to distant points were taken to train or bus, and where necessary, arrangements were made for them to be met at the other end of the journey and conveyed to their destinations.

The railways, hospitals and other Local Authorities have continued to give their ready co-operation in this respect.

X.—SANITARY CIRCUMSTANCES AND AND FOOD INSPECTION.

BY

MR. S. PRIME, CHIEF SANITARY INSPECTOR.

SANITARY INSPECTION OF THE TOWN.

The number of complaints received and investigated during the year was 1,938, chiefly relating to housing disrepair.

INSPECTIONS AND NOTICES.

Informal and Statutory Action.

During the year, 1,257 Preliminary and 106 Statutory Notices were served under the provisions of the Public Health Act upon owners, agents and tenants, requiring the repair of dwellings, drains, sanitary conveniences, etc., and the abatement of nuisances.

Visits and Remedies.

7,655 visits were made under the Public Health Acts, Housing Acts or Local Acts, and particulars of the work that has been carried out in compliance with the requirements of either Preliminary or Statutory Notices are contained in the following table:—

Dwelling Houses.

Roofs	...	...	Stripped and re-slatted	...	...	26
			Repaired	...	...	233
Chimney stacks	...		Rebuilt	...	...	18
			Repaired	...	...	43
			Pots renewed	...	...	38
Eavesgutters	...		Provided	...	...	11
			Renewed	...	...	30
			Repaired	...	...	87
Rainwater pipes	...		Provided	...	...	7
			Renewed	...	...	59
			Repaired	...	...	68

Walls...	...	Rebuilt	...	...	...	18
		Repaired	...	...	...	16
Plaster	...	Ceilings renewed	...	...	...	18
		Ceilings repaired	...	...	...	67
		Walls plastered	...	...	...	82
Floors	...	Relaid	...	...	...	14
		Repaired	...	...	...	28
Stairs	...	Repaired	...	...	...	14
Firegrates	...	Renewed	...	...	...	27
		Repaired	...	...	...	24
		Domestic smoke nuisances abated	...	...	...	6
Windows	...	Renewed	...	...	...	22
		Repaired	...	...	...	49
		Sashcords renewed	...	...	...	185
Doors	...	Repaired	...	...	...	4
Wash coppers	...	Repaired	...	...	...	9
Water supply	...	Town supply provided	...	...	...	12
		Fittings repaired or renewed	...	...	...	18
Sinks	...	Provided	...	...	...	11
		Renewed	...	...	...	5
Waste pipes...	...	Renewed	...	...	...	33
		Repaired	...	...	...	7
Drains	...	Provided	...	...	...	49
		Reconstructed	...	...	...	36
		Repaired	...	...	...	27
		Cleansed	...	...	...	336
		Manholes provided	...	...	...	39
		Soil pipes provided	...	...	...	25
		Soil pipes renewed or repaired	...	...	...	3
		Ventilation shafts renewed or repaired	...	...	...	16
		Inspection chamber covers renewed...	...	...	...	34
Water closets	...	Additional provided	...	...	...	31
		W.C. structures rebuilt	...	...	...	13
		W.C. structures repaired	...	...	...	74
		Fittings renewed	...	...	...	101
		Fittings repaired	...	...	...	118
Paving	...	Yard paving repaired	...	...	...	14
		Yard surfaces repaired	...	...	...	9
Dust bins	...	Provided	...	...	...	136
Offensive accumulations removed	...	...	...	...	...	13

HOUSING.**Housing Act, 1936, Section 11.**

Number of dwelling houses for which Official Representations were made	24
Number of houses for which Demolition Orders were served...	35
Number of families re-housed	26
Number of houses demolished	18

The following information is supplied by Mr. J. P. Moyle, Estates and Housing Director :—

(a) Number of houses owned by the Local Authority on a weekly rental	11,101
Being purchased on the instalment system	34
(b) 1. Held under Part III of the Housing Act, 1925 ...	8,813
2. Held under Part II of the Housing Act, 1925 ...	1,248
3. Held under other powers :—Housing Act, 1919 ...	709
Housing Act, 1923 ...	187
Other Acts Non-Assisted	144
(c) Houses built in the last two years :—	
1. Held under Part III of the Housing Act, 1925	
Built during 1952 ...	606
Built during 1953 ...	858
2. Held under Part II of the Housing Act, 1925	
Built during 1952 ...	—
Built during 1953 ...	—
3. Held under other powers	—

Number of New Houses erected during the Year 1953.

(a) Total including numbers given separately at (b) :—	
1. By the Local Authority	858
2. By other Local Authorities	—
3. By other bodies and persons	79
(b) With State Assistance under the Housing Acts :—	
1. By the Local Authority	858
(a) For the purpose of Part II of the Act of 1925...	—
(b) For the purpose of Part III of the Act of 1925...	858
(c) For other purposes	—
2. By other bodies or persons	—

Houses Allocated during the Year for the following purposes.

Condemned individual unfit houses under section 11, Housing Act, 1936	27
Overcrowding	—
Tuberculosis... ..	18
Town Improvements	10

COMMON LODGING HOUSES.

Number on Register	...	...	...	...	...	3
Number of rooms registered for sleeping	...	...	...	...	...	36
Number of lodgers provided for	...	...	...	...	...	258

These premises have been regularly inspected throughout the year and they are being maintained in a satisfactory condition.

VERMINOUS PREMISES.

Forty-five houses were disinfested during the year. No charges are made for this service.

OFFENSIVE TRADES.

The number of offensive trades carried on within the Borough is eleven, registered as follows :—

Fat Extractor	...	...	...	...	...	1
Fat Melter	...	...	...	...	...	1
Fellmonger	...	...	...	...	...	1
Gut Scraper	...	...	...	...	...	1
Rag and Bone Dealer	...	...	...	...	...	4
Soap Boiler	...	...	...	...	...	1
Tripe Boiler	...	...	...	...	...	2

These trades have been closely supervised and no nuisance has arisen.

SMOKE ABATEMENT AND ATMOSPHERIC POLLUTION.

Some progress has been made throughout the year towards a cleaner atmosphere. Sixty-six observations of chimneys were made and in cases where an excessive amount of smoke was continually being emitted the question of reducing it was taken up with the firms concerned. It should be said that it is not always an easy matter to secure improvements to bring about the elimination of smoke where money has to be spent, and a great deal of time is often taken with shrewd business people before they can be persuaded to spend money on new plant and equipment. However, new boilers fitted with mechanical stokers have been provided at five factories in the town, and I trust that more manufacturers will soon follow this example.

The average monthly deposits collected in the atmospheric pollution gauges, which are maintained by the Health Department in co-operation with the Department of Scientific and Industrial Research, are shown in the following summary :—

Investigation of Atmospheric Pollution in connection with the Department of Scientific and Industrial Research.

Summary of Observations for the Year 1953.

Month	DERWENT HOSPITAL			SINFEN			OSMASTON			CENTRAL POLICE STATION						
	Rainfall in Inches	Monthly Deposit in Tons per Square Mile		Rainfall in Inches	Monthly Deposit in Tons per Square Mile		Rainfall in Inches	Monthly Deposit in Tons per Square Mile		Rainfall in Inches	Monthly Deposit in Tons per Square Mile					
		Total Soluble Matter	Total Insoluble Matter		Total Solids	Total Soluble Matter		Total Insoluble Matter	Total Solids		Total Soluble Matter	Total Insoluble Matter	Total Solids			
January ...	0.40	4.47	3.86	8.33	0.43	3.40	7.39	10.79	0.43	13.81	71.42	85.23	0.47	5.88	11.66	17.54
February	1.70	7.01	5.32	12.33	2.16	10.17	14.12	24.29	2.07	17.25	75.63	92.88	2.37	9.42	14.17	23.59
March ...	1.20	4.67	5.28	9.95	1.52	5.11	15.69	20.80	1.54	10.58	49.82	60.40	1.65	7.53	16.74	24.27
April ...	1.74	8.57	5.15	13.72	1.89	7.35	6.81	14.16	2.01	11.12	34.16	45.28	2.24	9.08	7.74	16.82
May ...	2.01	8.33	12.09	20.42	1.82	5.75	14.36	20.11	1.75	9.40	27.12	36.52	2.22	6.05	15.13	21.18
June ...	3.33	15.94	9.72	25.66	2.57	8.98	7.08	16.06	2.37	12.29	31.60	43.89	2.70	8.91	14.20	23.11
July ...	2.81	5.21	3.15	8.36	2.33	3.81	5.48	9.29	2.48	9.00	38.88	47.88	3.00	4.02	5.88	9.90
August ...	2.11	7.72	2.24	9.96	2.21	5.62	2.62	8.24	2.00	7.95	34.60	42.55	2.02	4.02	4.57	8.59
September	1.36	3.08	3.18	6.26	1.69	5.41	20.18	25.59	—	—	—	—	1.47	4.99	10.52	15.51
October ...	1.77	8.26	3.86	12.12	1.80	8.85	8.92	17.77	1.71	15.26	28.80	44.06	1.80	8.87	12.76	21.63
November	1.85	6.23	4.40	10.63	1.77	6.40	5.38	11.78	1.87	19.64	83.01	102.65	2.11	10.11	10.55	20.66
December	0.91	7.11	4.81	11.92	0.97	7.01	6.26	13.27	0.91	10.14	46.46	56.60	0.97	8.39	12.69	21.08

FACTORIES ACT, 1937.

There are 634 mechanical and 74 non-mechanical factories, including bakehouses, at present on the Register.

A summary of the particulars in compliance with Section 128 of the Act is shown in the following tables:—

Inspections.—Inspections made by Sanitary Inspectors.

<i>Premises</i>	<i>Number of</i>		
	<i>Inspections</i>	<i>Written Notices</i>	<i>Prosecutions</i>
Factories without mechanical power	87	5	—
Factories with mechanical power	674	29	—
Other premises under the Act (including works of building and engineering construction but not including out-workers' premises)...	—	—	—
TOTAL	761	34	—

Defects Found.

<i>Particulars</i>	<i>Number of Defects</i>				<i>Number of Prosecutions</i>
	<i>Found</i>	<i>Remedied</i>	<i>Referred</i>		
			<i>To H.M. Insp.</i>	<i>By H.M. Insp.</i>	
Want of cleanliness	4	4	—	—	—
Overcrowding	—	—	—	—	—
Unreasonable temperature	—	—	—	—	—
Inadequate ventilation	1	1	—	—	—
Ineffective drainage of floors	1	1	—	—	—
Sanitary Conveniences—					
(a) insufficient	10	7	—	—	—
(b) unsuitable or defective	89	71	—	4	—
(c) not separate for sexes... ..	1	1	—	—	—
Other offences against the Act (not including offences relating to out-work)	—	—	—	—	—
TOTAL	106	85	—	4	—

SHOPS ACT, 1950.

During the year, 407 visits were made to shops under Section 38 of this Act which relates to ventilation, temperature, sanitary conveniences, lighting, washing facilities, and provisions for the taking of meals.

The following statement shows the work that has been done :—

Additional sanitary conveniences provided	...	...	...	5
Sanitary conveniences screened to secure privacy	...	...	...	1
Washing facilities provided	...	...	...	5
Instantaneous water heaters provided	...	...	...	7
Staff rooms provided	...	...	...	1
Staff rooms redecorated	...	...	...	12

SEWERAGE.

The following information is supplied by Mr. M. L. Francis, Borough Engineer and Surveyor :—

New Sewers laid during the year.

Mackworth Estate (9" Foul Sewers)	...	...	...	287 yards.
" " (9" Surface Water)	...	...	...	270 "
Harvey Road/Cockayne Street (9" Foul Sewers)	...	...	...	243 "
" " " (12" to 6" Surface Water)	...	...	...	344 "
Breadsall Housing Site—				
Off-Site Works, Little Eaton Canal (48" Surface Water)	...	...	...	532 "
Ingleby Avenue Housing Site (4" to 6" Surface Water)	...	...	...	253 "
Sinfin Relief Sewer (Combined 51" to 9")	...	...	...	2,354 "
" " (39" Surface Water)	...	...	...	10 "

Manholes constructed during the year.

Mackworth Estate	...	...	...	...	7
Harvey Road/Cockayne Street Housing Site	...	...	...	...	2
Sinfin Relief Sewer (Combined)	...	...	...	...	14
Breadsall Housing Site—					
Off-Site Works, Little Eaton Canal	...	...	...	...	6
Ingleby Avenue Housing Site	...	...	...	...	3

Sewers cleaned out during the year.

The total length of sewers cleaned out represents 1,370 yards.

Number of Loads 87

Manholes cleaned out during the year 125

WATER SUPPLY.

The following information is supplied by Mr. I. G. Edwards, Water Engineer :—

The water supplied to the area has been satisfactory in quality, but, owing to the inadequate capacity of certain trunk mains, pressures have been poor in various high points in the area of supply.

Regular examination is made of the raw water and of the water going into supply. As all water is treated, the majority of samples are taken after treatment. A total of 617 Bacteriological, 94 Chemical and 600 pH and Hardness samples were taken, both at the Works and from various points in the area of supply. The results of a Chemical Analysis are attached hereto.

Only that portion of the supply obtained from the Derwent Valley Water Board is liable to plumbo-solvent action. Under the Derwent Valley Water Act, 1899, water supplied by the Board is required to be treated by them for the prevention of such action before the water is delivered to any of the constituent Undertakings.

All water is chlorinated before being passed into supply.

Example of recent chemical analysis of water supplied to the area.

	<i>Parts per Million.</i>
pH Value	8.85
Total Solid Matter (dried at 180° C.)	125
Free and Saline Ammonia	0.002
Albuminoid Ammonia	0.025
Nitrogen as Nitrites	<i>very faint trace.</i>
Nitrogen as Nitrates	0.4
Chlorine (present as Chloride)	19
Oxygen absorbed in four hours at 80° F.	0.38
— Temporary	20
Hardness — Permanent	45
— Total	65
Metals—Iron	—
Free Chlorine	—

(Signed) R. W. SUTTON,

Borough Analyst.

Supply.

Number of gallons of water supplied to Derby Water Area from Public Supply	3,356,729,000
Number of gallons per day per head of population ...	44.94
Percentage of total quantity from Derwent Valley Supply	73%

Used during the year.

	<i>Gallons.</i>
Sewer flushing... ..	215,000
Street watering	1,067,700
Steam rolling	7,200

REFUSE COLLECTION AND DISPOSAL.

The following information is supplied by Mr. A. Connor, Director of Public Cleansing :—

Refuse Collection.

House and Trade Refuse collected	37,321 tons.
Nightsoil	10 "
Trade Refuse delivered by tradesmen	—
Total	<hr/> 37,331 tons. <hr/>

Refuse Disposal.

Refuse Disposal Works	17,154 tons.
Controlled Tipping—Alvaston Tip	24,538 "
Total	<hr/> 41,692 tons. <hr/>

Extracted from Refuse and Sold.

Tins	384 tons.	Cinders	651 tons.
Iron	157 "	Food Waste	1,373 "
Waste Paper	603 "	(Concentrated)	
Textiles	20 "		

Moveable Ashbins provided.

Housing Committee	1,283
Private Owners	282
	—
Total	1,565
	—
Number of cats, dogs, etc., disposed of	2,372

Power Vehicles utilised for Cleansing Purposes.

1. Collection of Refuse and Salvage :—	
Petrol Motor	19
2. Street Cleansing and Watering :—	
Petrol Motor	2
Mechanical Gully Emptiers	2
Sweepers (Lacre)	2
Street Washing Machine	1

Rodent Control.

There has been close co-ordination between the Ministry of Agriculture and Fisheries and this department throughout the year in the matter of rodent control.

The work of the Corporation Rodent Control Staff is becoming more widely known and consequently the number of people who seek the advice of this department when their premises are infested with rats or mice is steadily increasing. Rats and mice get into premises in various ways, through faulty drains, broken ventilators, defective doors, and worn steps, and food premises are very often infested through rats and mice entering with packages of goods.

During the year, 982 infestations were dealt with, 270 at food premises, warehouses, works canteens, other business premises and hospitals; 81 at Corporation surface properties, retail and wholesale markets, refuse disposal works and tips, sewage works, schools, etc.; 8 at agricultural properties and 623 at private and Corporation dwelling-houses.

Bi-annual treatment of all the sewers in the Borough was also carried out. The following table shows the results of the test baiting and maintenance treatment of the sewers :—

Test Baiting		Maintenance Treatment No. 1										Maintenance Treatment No. 2											
Test Baited	Number of Manholes	Test Bait Results			Number of Manholes					Prebaited	1st day					2nd day					Number poison baited		
		Complete take	Partial take	No take	Complete take	Partial take	No take	Complete take	Partial take		No take	Complete take	Partial take	No take	Complete take	Partial take	No take						
Osmaston Ward...	25	4	2	19	67	13	6	48	17	2	48	19	57	27	6	24	27	6	24	27	6	24	33
Alvaston	35	6	2	27	81	16	10	55	21	5	55	26	72	26	—	46	24	2	46	24	2	46	26
Pear Tree	19	6	—	13	69	17	6	46	15	8	46	23	55	23	5	27	18	10	27	18	10	27	28
Arboretum	10	4	1	5	33	7	6	20	10	7	16	17	34	13	13	8	12	12	10	12	10	26	26
Normanton	35	4	2	29	62	15	6	41	16	7	39	23	47	21	13	13	18	16	13	18	16	13	34
Litchurch	15	5	1	9	60	23	8	29	23	8	29	31	60	25	13	22	24	13	23	24	13	23	38
Dale	27	5	1	21	63	11	10	42	4	17	42	21	46	23	9	14	21	8	17	21	8	17	32
Babington	12	3	1	8	46	11	6	29	11	6	29	17	45	26	7	12	26	7	12	26	7	12	33
Castle	15	5	1	9	62	9	5	48	12	2	48	14	50	24	11	15	27	8	15	27	8	15	35
Abbey	10	1	2	7	33	10	5	18	9	7	17	16	52	33	—	19	30	3	19	30	3	19	33
Rowditch	23	2	2	19	53	17	5	31	20	3	30	23	98	31	20	47	32	20	46	32	20	46	52
King's Mead	15	7	4	4	129	36	13	80	40	10	79	50	113	31	14	68	36	14	63	36	14	63	50
Bridge	21	3	2	16	51	19	6	26	18	8	25	26	66	28	10	28	27	12	27	27	12	27	39
Friar Gate	15	2	2	11	54	22	4	28	19	7	28	26	64	26	15	23	26	14	24	26	14	24	41
Derwent	57	3	7	47	113	13	8	92	14	7	92	21	70	19	12	39	22	9	39	22	9	39	31
Becket	34	2	6	26	80	21	16	43	28	9	43	37	87	28	14	45	28	13	46	28	13	46	43
Victoria Street Culvert	—	—	—	—	—	—	—	—	—	—	—	—	99	31	22	46	39	12	48	39	12	48	53
TOTALS	368	62	36	270	1,056	260	120	676	277	113	666	390	1,115	435	184	496	437	179	499	437	179	499	627

MEAT AND FOOD INSPECTION.**Meat.**

The whole of the slaughtering arrangements in the Borough relevant to meat inspection are under the control of sanitary inspectors who are qualified inspectors of meat and other foods. The guidance given by the Ministry of Food in their Memorandum regarding the methods and criteria of meat inspection is closely followed out.

The following tables show the number of animals slaughtered and also the number found to be affected with disease which necessitated complete or partial condemnation. The percentage of animals affected with tuberculosis showed a slight decrease compared with the previous year. The number of pigs slaughtered rose from 19,707 in 1952 to 43,200 in 1953 and the number of calves slaughtered showed a decrease of about 5,000.

Twenty-two cows were slaughtered under the Tuberculosis Order, 1938, and the post-mortem examinations revealed that five were affected with a generalised condition of tuberculosis and in the others the disease was localised.

Carcases Inspected and Carcasses Condemned during 1953.

	<i>Cattle excluding Cows.</i>	<i>Cows.</i>	<i>Calves.</i>	<i>Sheep and Lambs.</i>	<i>Pigs.</i>
Number Killed	11,818	6,756	5,203	63,920	43,200
Number Inspected	11,818	6,756	5,203	63,920	43,200
<i>All Diseases except Tuberculosis :</i>					
Whole carcasses condemned ...	5	41	323	126	90
Carcasses of which some part or organ was condemned ...	5,254		8	2,285	1,211
Percentage of the number in- spected affected with disease other than tuberculosis ...	28.53		6.36	3.77	3.01
<i>Tuberculosis only :</i>					
Whole carcasses condemned ...	48	128	1	—	57
Carcasses of which some part or organ was condemned ...	3,626		—	—	1,778
Percentage of the number in- spected affected with tuber- culosis	20.47		0.019	—	4.24

**Classification of Diseases other than Tuberculosis in whole carcasses and parts
of carcasses condemned.**

Cattle.

	<i>Totally Condemned.</i>		<i>Part Condemned.</i>	
	<i>Cattle excluding Cows.</i>	<i>Cows.</i>	<i>Cattle excluding Cows.</i>	<i>Cows.</i>
Oedema and Emaciation	3	21	6	30
Cachexia and Slimy Degeneration	—	5	—	—
Septicæmia	—	3	—	—
Injury and Bruising	—	3	105	112
Septic Metritis	—	2	—	—
Moribund	—	2	—	—
Septic Pericarditis	—	2	—	—
Medicinal Odour	1	1	—	—
Malignant Neoplasms	1	—	—	1
Septic Peritonitis	—	1	—	—
Leukæmia	—	1	—	—
Abscess Adhesions	—	—	11	25
Bone Taint	—	—	25	1
Cysticercus Bovis	—	—	1	—
Fat Necrosis	—	—	1	—
Fatty Infiltration of Musculature	—	—	1	—
Peritonitis	—	—	—	2
TOTALS	5	41	150	171

Sheep.

	<i>Totally Condemned.</i>	<i>Part Condemned.</i>
Oedema and Emaciation	72	132
Moribund	37	—
Septic Metritis	2	—
Septic Peritonitis	2	—
Injury and Bruising	3	35
Hydræmia	1	—
Immaturity	1	—
Incipient Putrefaction	1	13
Pyæmia	1	—
Rodent Contamination	1	—
Pregnancy Toxæmia	1	—
Sarcocysts	1	—
Septic Mastitis	1	—
Septic Pneumonia	1	—
Uræmia	1	—
Abscess Adhesions	—	82
Arthritis	—	5
Difficult Parturition	—	4
Parasitic Infection	—	1
TOTALS	126	272

Pigs.

	<i>Totally Condemned.</i>	<i>Part Condemned.</i>
Oedema	19	16
Moribund	15	—
Swine Fever	15	—
Putrefaction	14	5
Septicæmia	11	—
Septic Peritonitis	3	—
Septic Pericarditis	2	—
Swine Erysipelas	2	—
Pyæmia	2	—
Injury and Bruising	2	81
Emaciation... ..	1	—
Jaundice	1	—
Leukæmia	1	—
Neoplasms	1	2
Septic Metritis	1	—
Abscess Adhesions	—	36
Arthritis	—	44
Blood Splashing	—	6
Malformation	—	1
Peritonitis	—	11
Pleurisy	—	1
Pyelonephritis	—	2
Urticaria	—	12
TOTALS	90	217

Calves.

	<i>Totally Condemned.</i>	<i>Part Condemned.</i>
Immaturity	276	—
Emaciation... ..	11	—
Moribund	11	—
Umbilical Pyæmia	8	—
Oedema	5	1
Joint Ill	3	—
Pneumonia	3	—
Injury and Bruising	1	3
Jaundice	1	—
Leukæmia	1	—
Malformation	1	—
Medicinal Odour	1	—
Uræmia	1	—
TOTALS	323	4

Weight of Meat Condemned.

	<i>Tons.</i>	<i>cwt.</i>	<i>qrs.</i>	<i>lbs.</i>
Beef	74	17	—	25
Mutton	4	5	3	25
Pork	11	10	—	15
Veal	4	18	2	—
Offal	106	15	—	2
Imported Meat ...	—	6	2	27
TOTAL ...	202	13	2	10

Since the 1st August, 1953, all meat and offal, which has been found unfit for human consumption and condemned in slaughterhouses occupied by the Ministry of Food, has been sold by public auction at monthly intervals.

The conditions under which such meat and offal are offered for sale are subject to such control as the local authority may impose in the exercise of its statutory powers for the prevention of danger to public health.

Previous to the 1st August, all condemned meat and offal was processed for industrial purposes at local premises.

SLAUGHTER OF ANIMALS ACT, 1933.

Particular supervision is maintained at all slaughterhouses to ensure the compliance with the provisions of the above act relating to the humane handling and slaughtering of all animals. Stunning is carried out by the captive bolt pistol or the electrical method.

LICENSED SLAUGHTERMEN.

New licences granted during 1953	...	...	...	4
Licences renewed during 1953	...	...	...	47
Licensed in operation at end of the year	...	...	...	51

GENERAL FOOD INSPECTION.

The wholesale provision stores and the wholesale fish and fruit markets have been regularly inspected throughout the year. The following statement shows the food stuffs condemned as unfit for human consumption.

	Tons.	Quantity.		lbs.
		cwts.	qrs.	
Bacon	—	—	1	16
Biscuits	—	2	2	23
Cake	—	1	—	3
Cereals	—	5	3	9
Cheese	—	3	1	19
Confectionery	—	2	3	22
Dried Fruit	—	5	—	19
Dried Peas	—	—	—	18
Fish	—	7	3	27
Flour	—	—	1	15
Fruit	—	12	—	20
Meat Products	—	5	3	14
Poultry	—	1	1	14
Rabbits	—	2	1	—
Sausages	—	6	2	9
Semolina	—	—	1	15
Suet	—	—	—	16
Tea	—	—	—	8
Tomatoes	—	4	2	—
Miscellaneous Items	—	2	—	4
Oysters	6 dozen.	
Lettuce	20 crates.	
Canned Goods	11,593 cans.	
Bottled Goods	1,115 bottles.	

The Corporation has a scheme for the sterilisation of kitchen waste, and all condemned food which is considered suitable for animal feeding is treated for this purpose.

Legal Proceedings taken during the Year ending December, 1953.

Date.	Offence.	Result.
6/5/53 (2 counts).	Selling synthetic cream in bottles not clearly and legibly marked as required by Article 2, Labelling of Food Order, 1950. (Article 3, Labelling of Food Order, 1950).	Charges dismissed.
6/5/53	Selling synthetic cream as cream (Section 3 of the Food and Drugs Act, 1938).	Case dismissed on payment of costs and Analyst's Certificate £1 10s. 0d.
6/5/53	Selling synthetic cream as cream (Section 3 of the Food and Drugs Act, 1938).	Fined £2 0s. 0d. Advocate's Fee £3 3s. 0d. Analyst's Certificate £1 10s. 0d.
26/6/53	Selling milk which contained 13%, 12%, and 10% of added water. (Section 3 of the Food and Drugs Act, 1938).	Fined £5 0s. 0d. Advocate's Fee £3 3s. 0d. Analyst's Certificate £3 3s. 0d.
18/11/53	Selling ice cream deficient of 20% of the proper proportion of fat. (Section 3 of the Food and Drugs Act, 1938).	Fined £3 0s. 0d. Advocate's Fee £3 3s. 0d. Analyst's Certificate £1 1s. 0d.

FOOD AND DRUGS ACT, 1938.**Inspection of Food Premises.**

The number of premises registered for the preparation or manufacture of sausages or potted, pressed, pickled or preserved food under section 14 of the Food and Drugs Act, 1938, is as follows:—

Number of premises on Register at end of year	...	...	85
Number of premises registered during the year	...	...	3
Number of premises closed during the year	...	...	3

The inspectorial staff made 1,877 visits to food preparing premises, bake-houses, restaurants, snackbars, works canteens, and butchers, grocers, fishmongers', confectioners', and fruiterers' shops and the following is a summary of the work which has been carried out:—

Instantaneous water heaters provided	...	...	27
Washhand basins provided	...	...	5
Soap and towels provided	...	...	22
New sinks provided and water laid on	...	...	6
Additional sanitary conveniences provided	...	...	2
Refrigerators provided	...	...	8
New equipment provided	...	...	10
Walls and floors of food preparation rooms repaired	...	...	35
Protective glass display cabinets provided	...	...	8
Additional means of ventilation provided	...	...	4
Shops, food preparation and staff rooms redecorated	...	...	215
Staff cloakroom facilities provided	...	...	1
Minor defects remedied	...	...	34

MILK.

One hundred and ninety-nine samples of pasteurised milk, including 82 tuberculin tested (pasteurised) milk, were submitted for both the Phosphatase and Methylene Blue Tests. Four samples failed to pass the Phosphatase Test but two of these samples were processed outside the Borough. One hundred and sixty-one samples satisfied the Methylene Blue Test, but the test for the remaining 38 samples could not be carried out owing to the shade temperature in the laboratory exceeding 65° Fahrenheit.

School milk in the Borough is supplied from three different sources, and samples have been taken for both the Phosphatase and the Methylene Blue Tests at least twice every month, and all the samples satisfied the tests.

Bacteriological Examination of Milk.

The following are the details of the tests which have been carried out during the year.

Designation of Milk.	Number of Samples taken and Results.						
	Phosphatase.		Methylene Blue.			Turbidity.	
	Passed.	Failed.	Passed.	Failed.	Not carried out owing to shade temperature exceeding 65° F.	Passed.	Failed.
Pasteurised... .. Tuberculin Tested (Pasteurised) ...	114	3	95	—	22	—	—
Sterilised Tuberculin Tested...	—	—	61	3	—	30	—

Tubercle Bacilli Biological Tests.

Thirty-four samples of milk were submitted to the laboratory for examination for the presence of tubercle bacilli and all were found to be tubercle free.

THE MILK AND DAIRIES REGULATIONS, 1949.

THE MILK (SPECIAL DESIGNATION) (RAW MILK) REGULATIONS, 1949.

THE MILK (SPECIAL DESIGNATION) (PASTEURISED AND STERILISED MILK) REGULATIONS, 1949.

Summary of Registrations and Licences issued under the above Regulations.

Milk and Dairies Regulations, 1949.

Number of distributors on register year ending, 1953 ...	49
Number of dairy premises on register year ending, 1953 ...	9

Milk (Special Designation) (Raw Milk) Regulations, 1949.

T.T. Milk—Dealers Licensed	37
Dealers (Supplementary) Licences	4

Milk (Special Designation) (Pasteurised and Sterilised Milk) Regulations, 1949.

Pasteurised Milk—Dealers (Pasteurisers) Licences	...	...	...	...	4
Dealers Licences	...	...	...	...	110
Dealers (Supplementary) Licences	...	...	...	...	3
Sterilised Milk—Dealers Licences	...	...	...	...	32
Dealers (Supplementary) Licences	...	...	...	...	1

ICE CREAM.

The number of premises registered for the manufacture, storage and sale of Ice Cream under section 14 of the Food and Drugs Act, 1938, is as follows :—

Number of premises registered for manufacture and sale during the year	...	...	...	...	...	...	...	Nil
Number of premises registered for sale only during the year	...	...	...	...	...	...	...	50
Number of registered premises for manufacture and sale discontinued during the year	...	...	...	...	...	...	...	4
Number of registered premises for sale only discontinued during the year	...	...	...	...	...	...	...	Nil
Number of premises registered for manufacture and sale at the end of year	...	...	...	...	...	...	...	14
Number of premises registered for sale only at end of year...	...	...	...	...	...	...	...	467

Nine of the above manufacturers use a pasteurised mix and five use a complete cold mix.

One hundred and two samples submitted for the Methylene Blue Test were classified as follows :—

Grade I	...	...	...	...	76
Grade II	...	...	...	...	15
Grade III	...	...	...	...	7
Grade IV	...	...	...	...	4

Thirty-two samples were submitted for analysis and the fat content varied from 4 per cent. to 12.7 per cent., which gives an average fat content of 8.6 per cent.

Two samples showed a deficiency of 6.7 and 13 per cent. of sucrose respectively and in two other samples the fat content was deficient to the extent of 16 and 20 per cent. respectively. Legal proceedings were taken against the manufacturer in the case of the sample which showed a deficiency of 20 per cent. of fat, and he was fined £3 and £4 4s. 0d. costs. The manufacturers were cautioned in the other three cases.

PUBLIC HOUSES.

Continued progress has been made during the year towards bringing these premises up to a satisfactory standard of hygiene, although perhaps at a somewhat slower pace than before owing to a certain amount of reconstruction work that has had to be done.

Attention has been directed to the adequacy and condition of the sanitary accommodation, the facilities available for cleansing drinking vessels, and the general hygienic conditions in the beer cellar. As noted in my previous report, a number of licensed houses still depend on the living room firerange back boiler for the hot water supply to the bar washing sink, this is definitely far from satisfactory, particularly during the summer months when fires are not generally in use, but I trust that we shall eventually overcome this problem.

The following summary gives some idea of the hygienic improvements which have been carried out through our efforts :—

A constant supply of hot water provided over the existing sink in the bar for cleansing drinking vessels	34
Complete washing facilities provided in bars, including sink, drainage and a supply of both hot and cold water ...	18
Drainage provided to existing sinks	3
Lead beer supply pipes replaced with pipes of a non-metallic contamination-resisting material	3
Food storage provided for use of licensee	4
New or additional water closets constructed	43
New or additional urinals constructed	10
Urinals reconstructed	18
Sanitary conveniences screened to ensure privacy	28
Water supply laid on in urinals for cleansing purposes ...	27
Water supply laid on in cellars for cleansing purposes ...	17
Beer cellar floors relaid in concrete	25

REPORT OF THE BOROUGH ANALYST.

The following is a summary of the Report of the Borough Analyst, Mr R. W. Sutton, B.Sc., F.R.I.C., for the year 1953.

1. During the year 1953, 391 samples were submitted under the Food & Drugs Act, 1938, consisting of 37 Formal and 354 Informal samples. This represents sampling at the rate of about 2.8 per 1,000 population.

2. Of the samples submitted, 12 were classed as adulterated or below standard, or as failing to comply with the Food Standards (Labelling of Food) Order.

3. The various articles are listed in Table 1, which also includes a statement of the number reported against.

TABLE 1.

<i>Article.</i>	<i>Formal.</i>	<i>Informal.</i>	<i>Total.</i>	<i>Adulterated or not up to standard.</i>	<i>% Adulterated.</i>
Almonds, Ground		2	2		
Aspirin Tablets		3	3		
Barley, Pearl		1	1		
Bicarbonate of Soda		4	4		
Borax		1	1		
Cake & Pudding Mixtures		16	16		
Canned Foods: Fish		36	36	1	
Meat		1	1		
Soup		5	5		
Vegetables		15	15		
Castor Oil		2	2		
Cheese, Processed		3	3		
Chutney		1	1		
Coffee & Chicory Extract		4	4		
Coco-nut, Desiccated		1	1		
Coco-nut, Sugared		2	2		
Cream	2	1	3	2	
Cream, Synthetic		1	1		
Cream Powder, Synthetic		1	1		
Cream, Tinned & Sterilised		12	12		
Cream of Tartar		1	1		
Custard Powder		2	2		
Dripping		2	2		
Epsom Salts		2	2		
Essences: Almond		2	2		
Brandy		1	1		
Fish Paste		5	5		
Flour, Self Raising		7	7		
Food Beverages:					
Coffee Preparations		2	2		
Fruit, Crystallised		8	8		

<i>Article.</i>	<i>Formal.</i>	<i>Informal.</i>	<i>Total.</i>	<i>Adulterated or not up to standard.</i>	<i>% Adulterated.</i>
Fruit, Dried		7	7		
Fruit Curd		13	13		
Fruit Juices: Tomato		2	2		
Gelatine		1	1		
Glycerine		4	4		
Glucose		1	1		
Honey		1	1		
Ice Cream	32		32	4	
Jam		1	1		
Jelly Compounds:					
Table Cream		2	2		
Jelly Crystals		1	1		
Jelly Tablets		5	5		
Lemonade Crystals		1	1		
Meat Paste		3	3		
Milks	3	78	81	4	4.9
Milk, Condensed:					
Full Cream, Sweetened		1	1		
Full Cream, Unsweetened		5	5		
Skimmed		2	2		
Milk Whipping Compound		1	1		
Minicemeat		7	7		
"Morfat"		1	1		
Olive Oil		3	3		
Paraffin, Medicinal		1	1		
Pepper		9	9		
Pepper Compound		3	3		
Pickles		1	1		
Pie Filling		1	1	1	
Rennet, Essence of		1	1		
Rice		4	4		
Rice, Ground... ..		3	3		
Saccharin Tablets		2	2		
Sago		3	3		
Salad Cream		1	1		
Sauce: Fruit... ..		4	4		
Tomato		3	3		
Sauce Powder		1	1		
Soft Drinks: Orange Crush		1	1		
Orange Drink		1	1		
Soft Drink Powder		1	1		
Soup Powder		3	3		
Spices: Ginger, Ground		2	2		
Mixed		2	2		
Nutmegs		2	2		
Suet		1	1		
Sugar		1	1		
Tapioca		5	5		
Tartaric Acid		1	1		
Tea		10	10		
Vegetables, Dried: Peas		1	1		
Mixed		1	1		
Vinegar, Malt		1	1		
TOTALS	37	354	391	12	3.1

4. Milk Samples.

Of the 81 samples examined, four (4.9 per cent.) were classed as adulterated or below standard. Details are given in Table 2.

TABLE 2.

<i>Serial No.</i>	<i>Formal or Informal.</i>	<i>Nature of Adulteration.</i>	<i>Observations.</i>
1469	Informal	14 per cent. added water.	Formal samples taken Nos. 1470, 1471 and 1472. Follow No. 1469. Fine ... £5 0s. 0d.; Costs ... £6 6s. 0d.
1470	Formal	13 per cent. added water.	
1471	Formal	10 per cent. added water.	
1472	Formal	12 per cent. added water.	

Samples deficient in non-fatty solids.

Twelve samples were deficient in non-fatty solids but application of the Freezing Point Test showed the samples to be free from added water.

The average composition of all Milks examined during the year was as follows:—

Non-fatty solids ...	8.60 per cent.
Fat	3.63 per cent.
Total solids ...	12.23 per cent.

5. Samples other than Milk.

During the year, 310 samples other than Milk were examined. Eight samples, listed in Table 3, were reported against and a few notes on the irregularities follow the table.

TABLE 3.

<i>Serial No.</i>	<i>Formal or Informal.</i>	<i>Article.</i>	<i>Nature of Adulteration.</i>	<i>Observations.</i>
1345	Formal	Cream	Consisted of Imitation or Synthetic Cream and did not comply with the requirements of the Labelling of Food Order.	Proceedings against Packers dismissed. Charge against Retailer dismissed on payment of £1 10s. 0d. Costs.
1346	Formal	Cream	Consisted of Imitation or Synthetic Cream and did not comply with the requirements of the Labelling of Food Order.	Proceedings against Packers dismissed. Retailer fined £2 0s. 0d., together with £4 13s. 0d. Costs.

<i>Serial No.</i>	<i>Formal or Informal.</i>	<i>Article.</i>	<i>Nature of Adulteration.</i>	<i>Observations.</i>
1452	Informal	Sardines in Oil and Tomato.	Excessive Tin contamination.	Stocks surrendered and destroyed.
1572	Formal	Ice Cream	Deficient in Fat.	Further sample No. 1607.
1574	Formal	Ice Cream	Deficient in Sugar.	} From same Vendor. Cautioned.
1606	Formal	Ice Cream	Deficient in Sugar.	
1607	Formal	Ice Cream	20 per cent. deficient in Fat.		Repeat sample following No. 1572. Defendant Fined £3, together with £4 4s. 0d. Costs.
1668	Informal	Lemon Flavour Pie Filling.	Lemon flavour and Citric Acid (declared constituents) omitted from the packet.	Further enquiry and representations to the manufacturers.

Cream.

Now that cream is again available, it is important, for the protection of the purchaser, to distinguish between cream and synthetic cream.

Under the Labelling of Food Order, a pre-packed article such as Synthetic Cream, in addition to the name and address of the packer, should be labelled with the common or usual name of the food, and a statement of the ingredients. It is necessary for the statement to be clearly legible and to appear conspicuously in a prominent position on the label.

The two samples which were reported against were supplied to the Sampling Officer in response to a request for "Cream," and proved on analysis to be Imitation or Synthetic Cream prepared, using a small amount of gum as an emulsifying agent, from a mixture of water, vegetable fat, sugar and salt. The articles were sold in one-third pint glass bottles bearing the name of a Dairy Company, and the bottles were capped with metal foil caps. By careful inspection it was possible to discern that these caps did in fact carry in very small stamped letters a description and a statement of ingredients. The lettering on some of the caps could not be deciphered and it is quite likely that many people handling the bottles would not notice that the caps carried any statement at all.

Proceedings were taken against the packers for contravention of Article 3 of the Labelling of Food Order, but these cases were dismissed on the evidence which was adduced to show that when the bottles were despatched from the Dairy Company the embossing on the metal foil caps was clearly legible. Cases against the retailers for contravention of Section 3 of the Food & Drugs Act were found proved.

Canned Foods.

With the increasing availability and use of canned foods it is, of course, very necessary to increase the sampling of this type of product. Generally the packs are satisfactory, but defects are to be found, particularly with certain foods and with prolonged storage. Defective stock is sometimes noticeable by evidence of gas pressure inside the cans—these being known in the trade as “springers” or “blown” cans. Gas formation may be due to decomposition of the food or to attack on the metal plate of the can, which is accompanied by undue metallic contamination of the product.

Fifty-seven samples of canned foods (36 Fish, 1 Meat, 5 Soup and 15 Vegetables) were submitted for examination, and with the exception of one, the tin contamination was not excessive, the amount present being below the limit of 250 parts per million recommended. The one sample reported against was a sample of Sardines in Oil and Tomato which was seriously contaminated with tin. The stock was surrendered for destruction and further attention to the examination of stocks of this type was put in hand.

Ice Cream.

The Food Standards (Ice Cream) Order, 1952, was operative until 31st May and required the presence of 4 per cent. of fat, 10 per cent. of sugar (including $7\frac{1}{2}$ per cent. of sucrose) and 5 per cent. of milk solids other than fat. In a new Order, operative from the 1st June, the minimum requirements for fat and milk solids other than fat were increased to 5 per cent. and $7\frac{1}{2}$ per cent. respectively.

Thirty-two samples of Ice Cream were submitted for examination during the year and the results were generally satisfactory. Two samples (from the same vendor) were deficient in fat to the extent of 16 per cent. and 20 per cent. of the minimum requirements and proceedings on the second sample resulted in a fine of £3 together with £4 4s. 0d. costs. Two samples (also from one vendor) were deficient in cane sugar. The deficiency on the second visit was not a serious one and was dealt with by caution notice.

Food Standards Orders.

Food Standards Orders are in force for various other foods and samples of Coffee and Chicory Extract, Cream, Fish Paste, Fruit Curd, Gelatine, Jelly Tablets, Meat Paste, Mincemeat, Saccharin Tablets, Salad Cream, Tomato Sauce, Self Raising Flour and Soft Drinks all complied with the requirements of the Orders.

A standard for Sausage and Sausage Meat was contained in the Meat Products (No. 3) Order, but this Order was revoked as from the 1st March, 1953, and no statutory standard for these products now exists. This seems to be a retrograde step. Manufactured foods, the composition of which can be controlled quite closely, are the ones for which standards are desirable, and without standards and without proper activity by the Food & Drugs Authorities, the quality of such foods can easily deteriorate.

No samples of Sausage or Sausage Meat were submitted for examination during the year.

Preservatives.

The Public Health (Preservatives, Etc., in Food) Regulations prohibit the use of preservatives generally, but permit the use of Sulphur Dioxide and Benzoic Acid in limited amounts in certain specified foods. In some instances the presence of these preservatives has to be declared either on the label or by notice exhibited at the time of sale. Certain additional provisions were made during the war under Regulation 60 CAA of the Defence (General) Regulations. This regulation has now been revoked but some of the provisions, including that allowing the use of Sulphur Dioxide in various dehydrated vegetables, have been retained in an amendment to the Preservatives in Food Regulations.

All appropriate samples of foods submitted during the year were examined for the presence of preservatives and all found to comply with the Regulations.

6. Fertilisers & Feeding Stuffs Act, 1926.

During the year, 29 samples, listed below, were submitted for examination under the above Act.

Fertilisers.

Basic Slag	1
Compound Fertiliser	9
Dried Blood	3
Muriate of Potash	1
Nitro Chalk	1
Steamed Bone Meal	1
Sulphate of Ammonia	1
Sulphate of Potash	1
Superphosphate	1

Feeding Stuffs.

Compound Cake	...	...	...	3
Compound Meal	...	...	...	3
Molassed Palm Kernel Meal	...	...	...	1
Palm Kernel Cake Meal	...	...	...	1
Poultry Food	...	...	...	1
White Fish Meal	...	...	...	1

 29

Fertilisers.

Of the 19 samples examined, two were reported against. A *Steamed Bone Meal* was deficient in Phosphoric Acid and a sample of *Sulphate of Ammonia* contained an excessive proportion of Free Acid.

Feeding Stuffs.

Two samples of Feeding Stuffs were reported against. One *Poultry Food* contained an excessive proportion of Fibre and a sample of *High Protein Nuts* had a wrong declaration of composition.

7. Miscellaneous.

The miscellaneous work included samples of Medicinal Glucose and Canned Beans in Tomato Sauce which were the subject of complaint by purchasers. These complaints did not appear to be justified since the Medicinal Glucose proved to be of satisfactory quality and complied with all the tests for purity specified in the British Pharmacopœia, and no defect could be found in the Canned Beans.

Two samples of Brook Water showed evidence of sewage contamination

(Signed) R. W. SUTTON,

Borough Analyst.

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