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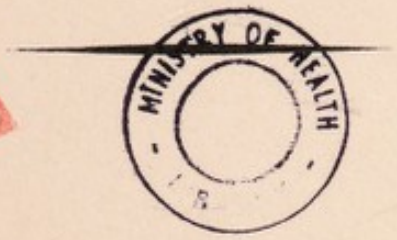
East Retford Rural District



ANNUAL REPORT

ON THE

HEALTH OF THE RURAL DISTRICT

FOR THE YEAR 1958

BY

R. C. BARKER, M.B, B.Ch, B.A.O, D.P.H.

MEDICAL OFFICER OF HEALTH

INCLUDING

REPORT OF THE CHIEF PUBLIC HEALTH INSPECTOR

J. HUNT, C.R.S.I. AND MEAT AND FOODS INSP. CERT.

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(from June 1958)

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Chief Public Health Inspector : J. Hunt, C.R.S.I., and Meat and Food Insp. Cert. of Roy. San. Inst.

Additional Public Health Inspectors : D. Roberts, C.R.S.I.

E. Storr, C.R.S.I. and Meat and Food Insp. Cert. of Roy. San. Inst.

Clerical Staff :

Chief Clerk : Miss M. Johnson

Mrs. J. Elsom (*resigned 15th Dec.* 1958)

Miss B. Cross

Miss J. Smithson (*part time*)

Tel No. PUBLIC HEALTH DEPARTMENT,
RETFORD 561 CHANCERY LANE,
RETFORD.

July 1959

TO THE CHAIRMAN AND MEMBERS OF THE
EAST RETFORD RURAL DISTRICT COUNCIL :

Mr. Chairman, Ladies and Gentlemen,

I have the honour to present to you my Annual Report for the year 1958 on the health and sanitary circumstances of the East Retford Rural District compiled in accordance with the instructions of the Minister of Health.

The mid-year population of the Rural District as estimated by the Registrar General was 22,990 persons, an increase of 1,170 on the previous year.

I have included this year a comparative table giving the statistics over the last 5 years and from this it will be seen that there was no great variation for the year 1958. (See page 10).

Excluding Tuberculosis there were during the year 199 cases of infectious disease notified. Of these 43 and 41 were cases of Food Poisoning and Dysentery respectively.

The cases of dysentery occurred in one of the schools in the Rural District. This outbreak caused considerable disquiet among the parents as they felt that it was due to the unsatisfactory sanitary accommodation and lack of adequate facilities for handwashing at the school, and there is no doubt that this was a contributory cause in the spread, together with the rather congested accommodation, particularly in one class-room. Faecal specimens were obtained from all the children and also from the members of the Teaching Staff and of the Canteen Staff. 24 children were found to be excreting the organism. The staff were free from infection. Extra hygienic methods as far as possible, were put into operation and the outbreak was soon brought under control, though

a number of children continued to excrete the organism for some time and unfortunately lost some schooling, since in the circumstances it was felt unwise that they should return until free of infection. This outbreak was beneficial in that it expedited the provision of the long awaited water closets which at the time of going to press are nearing completion.

Tuberculosis : The number of new cases notified during the year was 10 and in addition 2 cases came into the Rural District from other parts of the country.

On page 29 is given the position as regards housing in the Rural District. It will be seen that in the Survey submitted to the Minister of Housing in 1955, the number of houses regarded as suitable for being dealt with in the Slum Clearance Programme was 981. The rate of progress can be seen from the particulars. Many families are still living under grossly unsatisfactory housing conditions. The houses are dark and damp and have no proper sanitation or other amenities. Many are faulty in original construction and may be incapable of being made fit at any expense. The House Purchase and Housing Bill published on 2nd December, 1958, introduced a new system of standard improvement grants for the provision of four "standard amenities", bath, hot water supply, water closet and food store.

Unfortunately, however, the above houses would not qualify for this grant since one of the conditions of the grant being given is that the house will be fit to live in for at least 15 years.

Once again I have to report that our greatest environmental problem lies in the field of sewage disposal. The progress that has been made is seen on Page 23 of this report and where schemes have been completed, the villages are now pleasanter places to live in as has been remarked by the residents. It will also be seen, however, that a large number of the Parishes of the Rural District are still unsewered and the problem is being made more acute every year because people, taking advantage of the piped water supply, convert their pail or earth closets to water closets. This, while very desirable for the individual family, can only, in the absence of proper drainage arrangements in the parish, aggravate the position for the community as a whole. There are, of course, still many houses with pail and earth closets.

In a large sparsely populated district such as the East Retford Rural District, sewage disposal must always present a serious problem because for some parishes, not only would the cost of a complete scheme be prohibitive, but the scheme would not be efficient because of the small flow of sewage. It is therefore, very important that a long term view of

the problem be taken with this in mind so that the smaller more isolated parishes can be considered in conjunction with the bigger schemes, instead of being left to the last when it would be too late.

The old and infirm have again presented problems especially those bedridden and those living alone. Visits have been made with the District Welfare Officer to a number of these people and assistance has been given by the Department in securing admission to hospitals where necessary, though this is by no means easy, nor does it solve the problem.

In 1958 The Slaughterhouse Act, 1958, was passed. This is an Act to make provision with respect to Slaughterhouses and Knackers Yards and the slaughter of animals, and for purposes connected therewith.

Amongst other provisions every local authority is required to carry out a review of, and after consultation with such organisations as appear to the authority to represent the interests concerned, submit to the Minister of Agriculture, Fisheries and Food a report on :

(a) the existing and probable future requirements of their district for slaughterhouse facilities, and

(b) the facilities which are, or likely to become, available to meet these requirements.

The report must be submitted to the Minister within 12 months (or such longer period as the Minister may in any particular case allow) from a date appointed by him for the purpose, and the Minister has appointed 2nd November, 1959 for this purpose.

Since the Environmental Health Services are a major function of this Council I have this year given a brief account of these Services which will be found on pages 11 to 15.

I take this opportunity of expressing my thanks to the Chairman and Members of the Public Health Committee and to the Members of the Council for their interest and support. I would also like to acknowledge my thanks to the Chief Officers of the other Departments and in my own Department to the Public Health Inspectors and to the clerical staff.

I am,

Your obedient servant,

ROSETTA C. BARKER

Medical Officer of Health

SOCIAL CONDITIONS AND VITAL STATISTICS

Area	111,024 acres
Registrar General's estimated population, mid-year 1958	22,990
Number of inhabited houses at end of 1958 ..	6,605
Rateable Value, June, 1959	£218,574
Sum represented by Penny Rate at 1st April, 1959	£807

Vital statistics are calculated on the estimated population given by the Registrar General.

Live Births	T308	M159	F149
Live birth rate per 1,000 population	13.39		
Still-Births	T 9	M 2	F 7
Still-Births rate per 1,000 live and still-births	28.39		
Total live and still-births ..	317		
Infant Deaths	T 7	M 3	F 4
Infant mortality rate per 1,000 live births	22.72		
,, ,, Legitimate	24.05		
,, ,, Illegitimate	—		
Neo Natal mortality i.e. (first 4 weeks)	9.74		
Illegitimate live births per cent of tital live births	5.51		
Maternal deaths (including abortion)	—		
Maternal mortality rate per 1,000 live and still births	—		
Deaths from all causes	T226	M121	F105
Death rate per 1,000 population	9.83		

T—Total M—Males F—Females

Tuberculosis, respiratory	1
Tuberculosis, other forms	0
Syphilitic disease	0
Diphtheria	0
Whooping Cough	0
Meningo-coccal infections	0
Acute Poliomyelitis	0
Measles	0
Other infective and parasitic diseases	1
Malignant neoplasm, stomach	3
Malignant neoplasm, lung, bronchus	4
Malignant neoplasm, breast	4
Malignant neoplasm, uterus	1
Other malignant and lymphatic neoplasms	14
Leukaemia and aleukaemia	1
Diabetes	2
Vascular lesions of nervous system	49
Coronary disease, angina	30
Hypertension with heart disease	2
Other heart disease	35
Other circulatory disease	14
Influenza	1
Pneumonia	7
Bronchitis	10
Other diseases of the respiratory system	4
Ulcer of stomach and duodenum	2
Gastritis, enteritis, and diarrhoea	1
Nephritis and nephrosis	1
Hyperplasia of prostate	3
Pregnancy, childbirth, and abortion	0
Congenital malformation	1
Other defined and ill-defined diseases	19
Motor vehicle accidents	5
All other accidents	8
Suicide	3
Homicide	0
Total	226

Causes of Death in Children under 1 year

	Under 24 hrs.	Under 1 week	Under 1 mth.	1-3 mths.	3-6 mths.	6-9 mths.	9-12 mths.	Total
Prematurity	–	1	1	–	–	–	–	2
Upper respiratory infection	–	–	–	1	–	–	–	1
Bronchitis	–	–	–	2	–	–	–	2
Tuberose sclerosis ..	–	–	–	1	–	–	–	1
Cerebral oedema	–	–	–	–	–	1	–	1

Table showing Deaths of Children under 1 year over the last five years

Year	1958	1957	1956	1955	1954
No. of deaths	7	7	5	8	6

Table Showing Vital Statistics 1954 - 1958 (Inclusive)

	1958	1957	1956	1955	1954
POPULATION (*Mid-year population as estimated by the Registrar General*).	22,990	21,820	21,160	21,110	21,760
BIRTHS					
Live Births- *Legitimate*	291	283	301	291	274
Illegitimate	17	20	18	14	11
Still Births- *Legitimate*	9	6	6	7	5
Illegitimate	—	—	1	—	—
DEATHS					
All Causes	226	198	237	219	215
Maternal Death	—	1	—	—	1
Infantile Deaths (*i.e. under 1 year*)	7	7	5	8	6
Neonatal (*i.e. under 4 weeks*)	3	5	4		

THE ENVIRONMENTAL HEALTH SERVICES

Over a century ago Sir Edwin Chadwick, a great pioneer in Public Health, set out to protect the health of the public by improving man's physical environment and while there have been significant changes since that time, environment is as important a factor as ever in promoting the health of a community.

The definition of environment is given as "the condition under which any person or thing lives or is developed; the sum total of influences which modify and determine the development of life or character". Man's environment is something that is always with him - it includes his house, his place of work, the people he meets, the food he eats, the water he drinks, the air he breathes, the germs he comes into contact with, the stresses and strains of modern life and now the hazards of radiation. Man's environment can be divided into social environment and physical environment. Here we are concerned with the physical environment which the Environmental Health Services aim at keeping in a condition such as will prevent illness and promote health. The fundamentals of a good physical environment are good housing conditions, adequate wholesome water supply, safe food, sanitary disposal of refuse and sewage, clean atmosphere, prevention of spread of infection and healthy conditions of working. The Environmental Health Services are the responsibility of the Local Authority.

Now to take the factors of the Physical Environment in turn.

Housing. I think everyone would agree that good housing is a prerequisite for the promotion of good health.

The history of the house is an interesting one. In prehistoric times it provided shelter at night and during bad weather and against wild beasts. Since then, with the development of a more complex civilisation, house design has changed throughout the centuries, being closely dependent on social conditions. In recent times the need to provide, in a house, conditions for comfort, health, enjoyment and safety has been appreciated, and the importance of these factors cannot be too strongly stressed. Standards of fitness of houses have been recommended but in this short account it would not be possible to discuss all the factors necessary for healthful housing, but certain of them deserve mention. Good ventilation is of major importance since lack of ventilation is a prime cause of spoiling one's sense of well being and of lowering one's resistance to disease. Another very important related factor from the point of view of health is that the size of the rooms shall be adequate. There are other factors which make for comfort and enjoyment in a house and which are apt to be overlooked. They are provision of adequate space for the exercise and play of children, provision of facilities which make possible the performance of the tasks of the household without undue physical and mental fatigue, e.g. placement of doors,

height of work surfaces, cupboards etc. Again, since home accidents are coming into even more prominence, protection against these must be thought of - safe electrical fittings and safe stairs, height of window sills etc.

Water Supplies. Water is a very important constituent of our diet and it is, therefore, essential that the supply is pure and wholesome.

Formerly before water supplies came under public health legislation much disease, particularly typhoid was caused by the drinking of contaminated water. Fortunately, while this can still occur, it is now rare owing to supervision of the origins of supply, chlorination of supplies, attention to the health of the workers and bacteriological examination of samples.

A new feature in connection with water supplies has been the flouridation of water as a factor in the prevention of dental caries.

Sewerage and Sewage Disposal. This is a very important public health problem. In the less developed countries of the world a vast amount of disease and mortality is caused through the lack of hygienic methods of sewage disposal.

A water carriage system of drainage is necessary in the protection of the community health. With other methods there is always potential risk to health, e.g. to water, by contamination of the earth, and to food by flies carrying infected material on their feet. Pollution of the air in the form of smells is also very liable to occur, so making the countryside unpleasant. Where conservancy or semi-conservancy methods do exist, then there must be skilled supervision and maintenance if nuisance and danger are to be avoided.

Refuse Disposal and Control. Correct storage and disposal of refuse is another factor which is fundamental to the health of a community.

The condition in which refuse is kept at the doors of houses, restaurants etc while awaiting removal is most important and is closely linked with fly control.

The house fly has been accused of carrying many diseases, and moist or wet refuse is an excellent breeding gound for flies. Refuse must be kept dry during storage and if every household disposed of the refuse neatly and in a dry condition into a dustbin with the lid securely fastened a great reduction in flies and consequent illness could be achieved.

Local Authorities may provide and maintain dustbins to householders at an inclusive annual charge, and this service helps to raise the standard of hygiene.

The ultimate disposal of refuse by a Local Authority will depend on a number of factors, but crude dumping should be avoided, since it is inseparable from nuisance and rat and fly infestation. A satisfactory system of refuse disposal impairs the environment for rats and flies and so improves it for man.

Clean Air. Seven centuries ago coal smoke had come to be regarded in England as menace to health. For this reason in 1306 the burning of coal was prohibited by Edict of the King. However, it is only in recent years that there has been a positive approach to the problem, this being brought about by the death roll of 4,000 people in the Great Smog of London in December, 1952, which stirred public opinion. Following this, the Government set up a Committee under the chairmanship of Sir Hugh Beaver to examine the problem and to consider what further preventive measures could be taken. Their report was published in November 1954 and following their recommendation the Clean Air Act, 1956 was passed. This is an Act to make provision for abating the pollution of the air by smoke.

In addition to its effects on health, smoke means costly laundering bills, more cleaning and more work for the housewife, dirty buildings and other annoyances. It also effects and damages vegetation.

Clean Air is essential for the protection and improvement of man's environment. It is to be hoped that the present and future pace will be quicker than it has been in the past.

Abatement of Nuisances. In 1866 the Sanitary Act was passed and by this Act a duty was laid on Local Authorities to arrange for an in-inspection of their districts and the abatement of nuisances. This duty was repeated in the Public Health Act, 1936. Nuisances under the Public Health Acts are known as "Statutory Nuisances" a term which has been defined as :

"Something which either injures or is likely to injure health and which admits of a remedy either by the individual whose act or omission causes the nuisance or by the local authority".

Trades which are declared "offensive trades" are also subject to special provisions contained in the Public Health Acts. The removal of nuisances makes the physical environment more pleasant and therefore more favourable to individual public health.

Control of Infectious Diseases.

In the latter part of the 19th Century the control of infectious diseases was in the forefront of the responsibilities of Local Authorities. Epidemics of plague, typhus, smallpox, scarlet fever, and cholera swept the country with heavy loss of life. In order that measures for their control could be operated, notification of Infectious Diseases was recommended by the Royal Commission of 1881 and later this was made compulsory. Following the introduction of notification, preventive measures were instituted and the above diseases, apart from Scarlet Fever have virtually disappeared from these islands, though since they are prevalent in other parts of the world, care is still necessary. The great decrease in the death rate this century has largely been due to the conquest of infectious disease. The list of infectious diseases now notifiable to the Medical Officer of Health are on page 20.16.

In the past, the main measures of control have been isolation and disinfection. While these are still necessary with some diseases, there are now other methods of control. In the case of such diseases as Food Poisoning, Dysentery, Paratyphoid, Typhoid and other similar diseases, personal hygiene is a very important preventive measure and the success of this measure depends on health education. For other diseases e.g. Diphtheria, Whooping Cough, Poliomyelitis, prevention can be achieved by protection of the individual by means of injection. The value of Diphtheria immunisation and Poliomyelitis vaccination will be known to everyone.

The Control of Food and Food Premises.

In the promotion of health, the part that food plays is obvious and local authorities have a duty to prevent the sale of meat and other food which is diseased, unsound, unwholesome or unfit for the food of man. They must also ensure that hygienic methods are used in the preparation, handling, transport, storage etc. of food.

There are other provisions for the prevention of the sale of articles of food to which any improper addition has been made or from which a material or essential constituent has been removed, or which is not of the nature, substance, or quality demanded.

A very important step in the control of food has been the introduction of safe milk.

In Great Britain in the years before the last war, there were many out-breaks of milk-borne disease including scarlet fever, paratyphoid fever and gastro enteritis. There was also much Tuberculosis due to the consumption of milk. During the years 1912-35 about 150,000 persons contracted Tuberculosis of bovine origin of whom over 60,000 died.

The importance of milk in the diet of children meant that the exposure to Tuberculosis was great.

To ensure safe milk i.e. milk free from the risk of conveying Tuberculosis or other infections, pasteurisation and sterilisation were introduced. In small rural districts, however, where milk which had not been pasteurised or sterilised might be consumed by individual families and supplied to village communities the risk of infection still remained. To prevent this, legislation has been introduced to ensure that milk, if not pasteurised or sterilised must be tuberculin tested, i.e. from an attested herd which means a herd certified as free from tuberculosis.

In addition to tuberculous milk, a great amount of carcase meat has had to be condemned in the past on account of tuberculosis. Now, however, a programme of eradication of bovine tuberculosis known as the Area Eradication Plan and nearing its completion throughout the country will put an end to this. In 1935 the first attempt was made to

eradicate bovine tuberculosis in Great Britain by the introduction of the Voluntary Attested Herds Scheme. The progress of this was slow, so in 1950 the Area Eradication Plan was put into effect.

The progress of this has been good and in a Report on the Animal Health Services in Great Britain 1955 (Ministry of Agriculture Fisheries and Food and Department of Agriculture for Scotland) it is stated "there is every reason to hope that by the early 1960s bovine tuberculosis in Great Britain will, for all practical purposes, be a thing of the past".

Industrial Hygiene.

A healthy working environment is an essential to the prevention of illness. There is legislation for the protection of factory and shop workers. Local Authorities, or "District Councils" as they are called in the Factories Act, 1937 are responsible for administering provisions of the Act. In non-power factories i.e., factories in which power is not used, these relate to cleanliness, overcrowding, temperature, ventilation, drainage of floors and sanitary conveniences. In power factories the duty of the District Council is in connection with sanitary conveniences, the other health provisions being the responsibility of Her Majesty's Inspector of Factories, who is also responsible in both types of factory for the requirements relating to provision and maintenance of sufficient lighting. Under the Shops Act there are also certain provisions for the protection of the health of the shop workers.

Radiation.

The control of the potential environmental hazards will become an increasingly important responsibility of public health departments.

The legislation for the Environmental Health Services is found in many Acts, Regulations, and Orders. Chief amongst them are :-

The Public Health Act, 1936.
The Housing Act, 1957.
The Food and Drugs Act, 1955.
The Food Hygiene Regulations 1955.
The Milk and Dairies Regulations.
The Clean Air Act, 1956.
The Factories Act, 1937.
The Slaughterhouse Acts, Regulations, etc.

In the following pages is set out the work of the Department in carrying out the Environmental Health Services in the East Retford Rural District for the year 1958.

PREVALENCE AND CONTROL OF INFECTIOUS DISEASES

The following diseases are notifiable to the Medical Officer of Health :

Cholera
Diphtheria
Dysentery
Encephalitis (Acute)
Enteric Typhoid or Paratyphoid Fever
Erysipelas
Malaria
Measles
Membranous Croup
Meningococcal Infection
Food Poisoning or suspected Food Poisoning
Ophthalmia Neonatorum
Plague
Pneumonia, Acute Primary
Pneumonia, Acute Influenzal
Poliomyelitis
Puerperal Pyrexia
Relapsing Fever
Scarlet Fever
Smallpox
Tuberculosis
Typhus
Whooping Cough

The number of cases of infectious disease (excluding Tuberculosis) notified during 1958 was 199. Details of these are as follows :

Disease	*Number of Cases*
Dysentery	41
Food Poisoning	43
Measles	99
Meningococcal Infection	1
Acute Pneumonia	6
Scarlet Fever	8
Whooping Cough	1

Tables showing various details about notifiable infectious diseases during the year 1958 are given on pages 18 and 19.

Tuberculosis. There were 12 cases of Tuberculosis notified during the year, of these 10 were primary notifications, i.e. related to persons who had not previously been notified in the area of any authority, and 2 were non-primary notifications, these being transfers from other areas.

A table giving details of new cases and deaths from Tuberculosis is given on page 20.

Mass Radiography Survey at premises in the District. In view of the fact that two cases of active tuberculosis were discovered within a few weeks of each other on premises where many persons are employed, it was felt wise to consider a Mass Radiography Survey. On being approached about this the Medical Director of the Mass Radiography Unit (S. Yorkshire Area) willingly agreed to arrange (I know at some considerable trouble in re-arrangement of his planned programme) to visit the premises and carry out a Survey. The management

of the firm were also most helpful. The Unit visited the premises in July 1958. 872 persons (808 males and 64 females) attended for X-Ray, of these, four persons were found to have inactive tuberculosis, ten others were found to have other diseases and abnormalities of the chest. The persons concerned were referred for treatment.

Food Poisoning. The notified cases of Food Poisoning comprised 2 outbreaks at a canteen in the district, one family outbreak and sporadic cases. No organism was isolated from the faecal specimens of the affected persons but the illness corresponded with food poisoning associated with infection by Staphylococcus toxin. In one of the outbreaks at the canteen the staphylococcus organism was found on bacteriological examination of a sample of some jelly which had been eaten.

Laboratory Facilities. Bacteriological examinations were carried out by the Public Health Laboratory at Lincoln. 794 specimens comprising urine and faeces were submitted for examination.

Vaccination and Immunisation. This is a personal Health Service and is the responsibility of the County Council. The work is organised by the District Medical Officer of Health as agent for the County Council. Protective injections are given against Smallpox, Diphtheria, Whooping Cough and Diphtheria (combined), and Poliomyelitis.

Sessions are held at schools and clinics, the work being done by medical officers working for the Public Health Dept. Private medical practitioners also give the injections in their own practices.

Below are the figures showing the number of children who have received protection against Diphtheria, Whooping Cough, Smallpox, and Poliomyelitis :

Prophylactic Measure	By PH Dept.	By PP
Diphtheria Immunisation		
Primary Immunisation	152	114
Reinforcing doses	130	42
Whooping Cough		
Primary Immunisation	128	111
Reinforcing doses	—	17
Vaccination against Smallpox		
Primary vaccination	36	88
Revaccination	11	7
Vaccination against Poliomyelitis		
Primary vaccination	2035	379
Reinforcing doses	693	

PH Dept – Public Health Dept.

PP – Private Medical Practitioner.

Infectious Diseases Notified in Age Groups — Admission to Hospital, and Deaths, 1958

Diseases	At all ages	Under 1 year	1–2 years	2–3 years	3–4 years	4–5 years	5–10 years	10–15 years	15–20 years	20–35 years	35–45 years	45–65 years	65 & over	Age Un-known	Admitted to Hospital	Deaths
Diphtheria	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–
Dysentery	41	2	1	3	3	–	11	3	3	9	3	–	–	3	–	–
Encephalitis	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–
Erysipelas	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–
Food Poisoning	43	4	1	–	–	–	1	2	1	15	9	3	–	7	–	–
Malaria	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–
Measles	99	2	3	5	13	11	55	10	–	–	–	–	–	–	–	–
Meningococcal Infection	1	–	–	–	–	–	–	–	–	–	–	1	–	–	–	–
Paratyphoid Fever	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–
Typhoid Fever	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–
Acute Pneumonia	6	–	–	–	–	–	–	1	–	–	1	4	–	–	–	0
Puerperal Pyrexia	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–
Paralytic Poliomyelitis	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–
Non-paralytic Poliomyelitis	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–
Scarlet Fever	8	–	–	1	1	1	4	1	–	–	–	–	–	–	1	–
Whooping Cough	1	–	1	–	–	–	–	–	–	–	–	–	–	–	–	–
Totals	199	8	6	9	17	12	71	17	4	24	13	8	–	10	1	0

(a) Lodgemoor Isolation Hospital, Sheffield; (b) Tickhill Road Isolation Hospital, Doncaster;

Transferred deaths are included in this table.

Infectious Diseases Notified Month by Month — 1958

Diseases	Total	Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.	Sept	Oct.	Nov.	Dec.
Diphtheria	–	–	–	–	–	–	–	–	–	–	–	–	–
Dysentery	41	–	–	–	–	–	–	1	1	–	7	2	30
Encephalitis	–	–	–	–	–	–	–	–	–	–	–	–	–
Erysipelas	–	–	–	–	–	–	–	–	–	–	–	–	–
Food Poisoning	43	–	–	1	6	–	25	1	–	–	5	–	5
Malaria	–	–	–	–	–	–	–	–	–	–	–	–	–
Measles	99	–	–	1	1	1	–	2	2	2	8	21	61
Meningococcal Infection	1	–	–	1	–	–	–	–	–	–	–	–	–
Paratyphoid Fever	–	–	–	–	–	–	–	–	–	–	–	–	–
Typhoid Fever	–	–	–	–	–	–	–	–	–	–	–	–	–
Pneumonia	6	3	1	1	–	–	–	–	–	–	–	–	1
Puerperal Pyrexia	–	–	–	–	–	–	–	–	–	–	–	–	–
Paralytic Poliomyelitis	–	–	–	–	–	–	–	–	–	–	–	–	–
Non-Paralytic Poliomyelitis	–	–	–	–	–	–	–	–	–	–	–	–	–
Scarlet Fever	8	–	–	1	–	–	–	–	–	–	1	3	3
Whooping Cough	1	–	–	–	–	–	–	–	–	–	–	1	–
Totals	199	3	1	5	7	1	25	4	3	2	21	27	100

Tuberculosis - 1958

Table (a) New Cases and Deaths

Age Periods	New Cases				Deaths			
	Pulmonary		Non-pulmonary		Pulmonary		Non-pulmonary	
	M	F	M	F	M	F	M	F
Under 1 year	—	—	1	—	—	—	—	—
1-2 years	—	—	—	—	—	—	—	—
2-3 years	—	—	—	—	—	—	—	—
3-4 years	—	—	—	—	—	—	—	—
4-5 years	—	—	—	—	—	—	—	—
5-10 years	—	—	—	—	—	—	—	—
10-15 years	—	—	—	1	—	—	—	—
15-20 years	—	—	—	—	—	—	—	—
20-35 years	1	2	—	—	—	—	—	—
35-45 years	1	—	—	—	—	—	—	—
45-65 years	3	—	—	—	1	—	—	—
65 and over	—	—	—	1	—	—	—	—
Totals	5	2	1	2	1	—	—	—

SANITARY CIRCUMSTANCES OF THE RURAL DISTRICT

Water Supplies, Sewerage, Sewage Disposal and Refuse Disposal are the responsibility of the Surveyor, but these services have a very great public health importance. The Surveyor has supplied me with the information about these services for the year.

Public Water Supply.

A piped water supply is available for the built-up areas in all parishes in the Rural District. At the end of the year approximately 93% of the dwelling-houses in the Rural District were supplied with piped water, equivalent to approximately 94% of the population.

There are no public standpipes in the Rural District, and the following table give the details of water supplies :

Water Supplies	*Population* 22,990	*No. of dwelling houses* 6,651
With piped water supply	21,653	6,205
Without piped water supply	1,337	446

This total includes houses on Crown Property at Rampton Hospital, Mattersey Thorpe, and Daneshill R.O.F.

The supply for most of the area north of Retford Borough and also for the majority of the Trentside district is from boreholes in the red sandstone at Everton, and for a large part of the southern area by metered bulk supplies from eight connections with the Lincoln Corporation rising main, which passes through the southern area from Elkesley Waterworks. In addition, small bulk supplies are taken from the Don Valley Water Board, the Isle of Axholme Rural District Council and the Southwell Rural District Council to supply certain properties on the extreme edges of the District.

A bulk water supply of from 30,000 - 60,000 gallons per day is supplied to the adjacent Rural District of the Isle of Axholme.

The quantity of water pumped from Everton Pumping Station was 181,575,000 gallons, compared with 172,032,000 gallons during the previous year.

In addition to the quantity pumped from Everton, 127,698,000 gallons were purchased in bulk from Lincoln Corporation, the Don Valley Water Board, and Southwell Rural District Council.

The four outstanding post-war agricultural main extensions in Marsh Lane, Saundby; Old Trent Road, Beckingham; Sutton to Botany Bay, and Woodcotes to Tuxford, were completed early in the year, and supplies have been laid on to 26 houses in addition to field cattle

troughs and other agricultural purposes. These extensions were carries out with financial assistance from the Ministry of Agriculture, Fisheried and Food.

Authority was received to proceed with the sinking of the second borehole at Grove, and this work was also completed (depth 1100 feet).

Authority was also received for the first part of the main-laying from Grove to East Drayton (towards the High Marnham Power Station), the construction of a 1,000,000 gallon reservoir and pumping station at Grove, and by the end of the year, a substantial part of the main-laying had been completed. With the completion of the reservoir and pumping station, a considerable part of the southern area of the district will be able to be supplied with water from Grove instead of by bulk supplies taken from the Lincoln Corporation main, although over half a million gallons per day will be required for the new power station.

As the construction of the power station is proceeding to schedule and it is anticipated that the first of five turbo-generators should be commissioned by September/October 1959, the necessity of completing the headworks at Grove and the 12″ and 9″ main-laying between East Drayton and Marnham is urgent, to offset trouble and difficulty which may otherwise be caused to the maintenance of supplies and pressures by the Lincoln Corporation.

Eighty-one samples of water were taken during the year for routine bacteriological examination from the following sources :

Chlorinated water from East Retford R.D.C. mains	43
Chlorinated water from Don Valley Water Board	12
Chlorinated water from Lincoln Corporation Supply	13
Unchlorinated water from East Retford R.D.C. Pumping Station at Everton	11
Unchlorinated water from New Borehole at Grove taken during Pumping Test	2
Total	81

Three of the above samples were unsatisfactory as follows :

1. Sample taken almost immediately after carrying out repairs to a burst main in the vicinity. Subsequent samples following flushing of the main proved satisfactory.
2. Sample taken from a new main not in service. Subsequent samples following flushing and chlorination of the main proved satisfactory.
3. Sample taken from "dead-end" main. Subsequent samples following flushing of the main proved satisfactory.

Sewerage and Sewage Disposal

During 1957 the Sewerage snd Sewage Disposal Scheme for North and South Leverton was completed and at the end of the year a contract for the connection of approximately 224 houses at North and South Leverton to the new sewers was commenced. This has now been satisfactorily completed, and owners are quickly taking advantage of this by carrying out extensive sanitary accommodation conversion schemes.

The Council decided, in approved cases, to make a contribution of £12 or half the cost, whichever is the less, to owners of properties who voluntarily proceed with schemes of conversion of privies or pail closets to water closets.

Work was commenced in February 1958 on the new sewerage and sewage disposal scheme for the parishes of Everton and Mattersey, but progress has been slow due to excavation in rock sand, and the extremely bad winter and wet weather during the first half of the year. As the sewers in Mattersey and the sewage disposal works in this scheme can be brought into operation without regard to completion of the work in Everton Parish, the Council invited tenders for the house connection work in Mattersey, and as soon as the Ejector Station can be commissioned in this village, a commencement will be made with this work.

Tenders were invited in respect of the new sewerage and sewage disposal scheme for Tuxford and East Markham, and work commenced in August 1958. Satisfactory progress has been maintained on this contract, but it is doubtful if the work will be sufficiently advanced to allow of more than the first 20 houses under construction for employees at the new High Marnham Power Station, to be connected to the new sewers before the autumn of 1959.

Authority was received from the Ministry to proceed with the preparation up to tender stage of the remainder of the sewerage scheme for the parishes of Misterton, Walkeringham and Beckingham (at an estimated cost of approximately £197,000) work on this was well advanced by the end of the year, and it is anticipated that tenders can be invited by May/June 1959, with a view to a commencement being made during the summer months.

With the completion of the above schemes, deep drainage will have been provided for 2,500 houses out of the 6,651 houses in the Rural District, at an approximate cost of £468,000.

Of the remaining 4,151 houses, small sewage disposal plants serve over 690 houses on Council Estates and similar property leaving approximately 3,500 houses or 52% of the houses covering 45 parishes in the Rural District still requiring adequate deep drainage facilities.

Public Cleansing.

Complete scavenging by contract, including the emptying of dustbins, privies and ashpits, pan closets and cesspools, is carried out in the parish of Tuxford.

This work cannot be considered satisfactory in a large urbanised parish, in view of the difficulty in maintaining a satisfactory labour force for the emptying of privies, ashpits and pail closets, but this problem should be resolved within the next eighteen months when the sewerage scheme at present in hand for Tuxford and the adjacent parish of East Markham is completed.

House refuse collection is carried out throughout the remaining 53 parishes in the Rural District where a collection is made approximately every 8 working days.

The position with regard to labour has slightly deteriorated, due no doubt to more remunerative employment and better working conditions in the district, particularly in connection with the new High Marnham Power Station and Bevercotes Colliery, both of which are now in an advanced stage of constructional development.

An alternative tipping site is now in use at Walkeringham, which is conveniently situated for the larger urbanised parishes in the Misterton area. Other tips are in use at Ranskill, Finningley, Haughton and Headon, but no suitable site is available for the scattered Trentside villages. All tips are semi-controlled, and with their scattered nature and intermittent use, difficulty arises in their proper maintenance.

Three vehicles are in use, one 18 cube yard fore and aft tipper and two 10 cube yard side loaders, with an old side loader in emergency reserve.

The approximate total quantity of refuse collected and disposed of on tips was 5,350 tons.

INSPECTION AND SUPERVISION OF FOOD AND FOOD PREMISES

Food and Drugs Act, 1955

Details of the work carried out by the Public Health Department during the year are given in the report of the Chief Public Health Inspector.

The Food and Drugs Act, 1955 provides for the sampling of food and drugs for analysis or for bacteriological or other examinations. The Notts County Council is the authority responsible for these duties and I am grateful to Mr. Gregory, Chief Inspector, Foods and Drugs for a report of the Public Analyst upon articles analysed during the year. Samples were obtained and the results are given on page 28.

FACTORIES ACT, 1937

The tables on pages 26 and 27 give a summary of the work with respect to matters under Part 1 of the Factories Act, 1937.

NATIONAL ASSISTANCE ACT (1948) AND NATIONAL ASSISTANCE (AMENDMENT) ACT 1951

These Acts provide for the removal to suitable premises of persons in need of care and attention. No action under these Acts was taken during the year but assistance in getting persons into hospital on a voluntary basis was given.

FACTORIES ACT, 1937

1.– **INSPECTIONS** for purposes of provisions as to health

Premises	Number on Register	Number of		
		Inspections	Written notices	Occupiers prosecuted
(i) Factories in which Sections 1, 2, 3, 4, and 6 are to be enforced by Local Authorities	24	14	–	–
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	59	29	2	–
(iii) Other Premises in which Section 7 is enforced by the Local Authority (excluding outworkers' premises)	–	–	–	–
TOTAL	83	43	2	–

FACTORIES ACT, 1937

2.-CASES IN WHICH DEFECTS WERE FOUND

Particulars	Defects				Number of cases in which prosecutions were instituted
	Found	Remedied	Referred To H.M. Inspector	Referred By H.M. Inspector	
Want of cleanliness (S.1)	–	–	–	–	–
Overcrowding (S.2)	–	–	–	–	–
Unreasonable temperature (S.3) ..	–	–	–	–	–
Inadequate ventilation (S.4)	–	–	–	–	–
Ineffective drainage of floors (S.6) ..	–	–	–	–	–
Sanitary Conveniences (S.7)— (*a*) Insufficient	–	–	–	–	–
(*b*) Unsuitable or defective	1	2	–	1	–
(*c*) Not separate for sexes	–	–	–	–	–
Other offences against the Act (not including offences relating to Outwork) ..	–	–	–	–	–
TOTAL ..	1	2	–	1	–

Food and Drugs Act, 1955

Particulars of samples examined and/or analysed during the year ended 31st December, 1958

Article	*Number of Samples* Obtained	Genuine	*Adulterated or Sub-standard Samples* Adult. or Sub-Standard	*Result of Exam and/or analysis*	*Remarks*
Almonds, Ground	1	1	—		
Demerara Sugar	1	1	—		
Imitation Liqueur Chocolates	1	1	—		
Lard	1	1	—		
Lemon Barley	1	1	—		
Lemon Curd	1	1	—		
Meat Paste	1	1	—		
Milk	122	111	11	*The 11 sub-standard samples were found be very slightly deficient due to natural causes.*	*Appropriate action was taken in these cases.*
Milk Shake Powder	1	1	—		
Mincemeat	1	1	—		
Peas, canned	1	1	—		
Pepper, White	1	1	—		
Sausage, Pork	2	1	1	*Slightly deficient in meat.*	*Manufacturer cautioned*
Sausage Rolls	1	1	—		
Shepherds Pie, canned	1	1	—		
Squash	1	1	—		
Vinegar, Malt	1	1	—		
	139	127	12		

REPORT OF THE CHIEF PUBLIC HEALTH INSPECTOR

To the Medical Officer of Health :

Madam,

I hereby present to you my report on the work done during 1958.

Housing

Inspections, etc., were carried out under the Housing Acts for the following purposes :

1.	Repair and demolition of houses	433
2.	Improvement Grants	470
3.	Applications for Council Houses	9
4.	Interviews with owners other than at office	170
5.	Inspections in connection with Certificates of Disrepair	52

Housing Act, 1957

Section 9

No. of houses dealt with formally under Section 9.	0
No. of houses dealt with by informal action	113

Section 16

1.	No. of dwellings represented prior to 1st January 1958, upon which no formal action had been concluded	43
2.	No. of Demolition Orders made in respect of dwellings included in (1) above	23
3.	No. of Undertakings to Re-construct accepted in respect of dwellings included in (1) above	8
4.	No. of Undertakings included in (3) above complied with (Conversion of two dwellings into one)	2
5.	No. of Undertakings not to use for human habitation accepted in respect of dwellings included in (1) above	2
6.	No. of dwellings included in (1) above which the Council are negotiating to purchase	5
7.	No. of dwellings included in (1) above on which formal action has not been concluded	5
8.	No. of dwellings represented as unfit to Council between 1st January, 1958, and 31st December, 1958	92
9.	No. of Demolition Orders made in respect of dwellings included in (8) above	45

10. No. of Undertakings to re-construct accepted in respect of dwellings included in (8) above 1
11. No. of Undertakings not to use for human habitation accepted in respect of dwellings included in (8) above 2
12. No. of dwellings included in (8) above which the Council are negotiating to purchase 2
13. No. of dwellings included in (8) above upon which consideration has been deferred 13
14. No. of dwellings included in (8) above in respect of which "Time and Place" notices have been served 2
15. No. of dwellings included in (8) above in respect of which "Enquiries" have been served..... 27
16. No. of houses demolished as a result of Demolition Orders and Representations 4
17. No. of houses closed as a result of Representations 1

Summary of Slum Clearance Programme.

In 1955 proposals were submitted to the Minister for dealing with unfit houses within a period of 12-14 years and on the list the number of dwellings was 981.

No. of houses already dealt with up to December, 1958.

	Confirmed	*Awaiting Confirmation*
(a) As Clearance Areas	NIL	NIL
(b) As individual unfit houses	162	50

No. of houses remaining to be dealt with.

769 less 17 voluntarily reconstructed i.e. 752

No. of houses still occupied with confirmed Demolition Orders. 81

Overcrowding

One case of overcrowding was reported and abated as a result of informal action during the year.

Improvement Grants

1. No. of applications for grants received 52
2. No. of applications approved 48
3. No. of applications rejected 2
4. No. of applications referred back for revision 5

5. No. of applications approved after re-submission included in (2) above 3
6. Total value of grants approved .. .. £12,392 (£15,692. 10*s*. 0*d*. in 1957)
7. Average grant per dwelling .. .. £258/3/1½ (£307/14/0*d*. in 1957)
8. No. of improvement schemes certified complete 56
9. Average grant in respect of schemes completed in (8) above £283/4/5½

Of the 48 grants approved during the year 29 (60.42%) were in respect of dwellings which were let or intended to be let.

Of the 56 schemes which were certified as completed during the year 36 (64.29%) were in respect of dwellings which were let or intended to be let.

New Houses.

The following additional units of housing accommodation were completed during the year.

(a) Council Houses 27
(b) Private Enterprise Houses including provision with subsidy 36
(c) Units by conversion schemes 0

Total 63

At the end of the year 45 Council Houses and/or Bungalows were under construction and 28 Private Enterprise Houses or Bungalows.

Housing (Financial Provisions) Acts.

Two applications for subsidy in respect of agricultural workers' dwellings were approved; four applications for loans to build new houses or acquire existing houses were also approved, and three applications for guarantees through Building Societies were accepted.

Public Health Act, 1936 - Sections 268 and 269.

Temporary Moveable Dwellings.

1. New licences issued during the year 11
2. Existing licences renewed 36
3. Licences refused 2

The increase in new licences issued is primarily due to the demand by employees of Contractors at the High Marnham Power Station requiring temporary housing accommodation.

Sanitary and Housing Repairs and Improvements Effected.

*These included notices outstanding.

	Notices Served	**Complied with*
Housing Defects		
Structural repairs to roofs, walls etc.	7	6
Defective eavespouts and fallpipes	43	39
Defective chimney-stacks	33	31
Floors repaired or renewed	93	92
Defective roofs	42	38
Cooking ranges and fireplaces renewed or repaired	60	61
Washing coppers renewed or repaired ..	8	7
Defective outbuildings	8	8
Pointing to external brickwork	28	28
Windows repaired, renewed or made to open	121	123
Sinks renewed or provided	45	45
Wall plaster repaired	71	76
Paving repaired or renewed	20	20
Doors and staircases repaired	48	49
Drainage		
Obstructed drains liberated	16	30
Defective drains repaired	15	13
Leaking or overflowing cesspools and septic tanks	5	5
Drains renewed	53	52
Septic tanks provided.....	20	19
Sanitary Conveniences		
Pan closets converted to water closets ..	32	31
Privies and ashpits repaired	—	1
Privies converted to water closets.....	12	12
New Water Closets.....	3	3
Closets cleansed	7	5
Water		
Water services repaired	9	10
New piped water supplies	4	4
Miscellaneous		
Offensive accumulations removed	22	16
Verminous premises disinfested	2	3
Smoke nuisance abated	1	1

Foods and Drugs Act, 1955

Food Hygiene Regulations, 1955

The following is a summary of the various food premises in the Rural District :

Grocers and General Shops	86
Bakehouses	3
Butchers	17
Fried Fish and Chips	9
Greengrocers and Fruiterers	3
Sweets, Minerals etc	11
Ice Cream Manufacturers	1
Ice Cream Roundsmen	2
Private Hotels, Guest Houses	2
Clubs and Institutes	3
Cafes, Tearooms	9
H.M. Forces Canteens	2
Works Canteens	5
School Meals Service	34
Private Schools	2
Hotels, Public Houses, Inns etc.	72
TOTAL	261

Of these premises, 67 are registered for the retail sale of wrapped ice-cream, compared with 60 in 1957.

Fifty-four inspections and 235 re-inspections were made of food premises.

The following table summarises the progress with this work and also indicates an overall picture of the improvements effected :-

Informal Notices requiring attention to	*Outstanding from last year*	*Served During year*	*Complied with*
Provision of impervious surfaces to walls and/or ceilings	1	—	1
Provision of light and ventilation	2	—	1
Provision of sinks and drainage ..	13	—	5
Provision of hot and/or cold water	14	—	4
Provision of impervious work tables	—	1	1
Provision of sanitary accommodation	1	—	1
Provision of "Wash Your hands" notices	—	1	1
Provision of Clothes Lockers ..	—	1	1
Provision of Soap, Towels etc ..	—	1	1
Provision of covered display cabinets	—	1	—
Provision of storage containers (inedible offal etc.)	—	—	—
Provision of sanitary accommodation to licensed premises	5	4	5
Cleansing of choked drains ..	—	—	—
Clearing accumulation of refuse ..	1	1	2
Exclusion of domestic animals ..	—	—	—
Ratproofing food rooms	—	—	—
Smoking in food room	—	1	1
Provision of First-Aid Equipment	—	1	1
Unclean Premises	—	—	—
Unclean Equipment	—	—	—
Disposal of Steam or Effluvia ..	—	—	—
Defective cooking range	1	—	—
Structural Repairs	—	2	2
Damp/Defective wall plaster ..	—	3	1
Defective floors	1	1	1
	—	—	—
	39	18	29
	—	—	—

Due to the very scattered nature of the rural district, it has not been possible to arrange lectures on Clean Food campaigns collectively to food handlers.

Excluding village public houses and 34 school premises, there are 155 food premises in the district including small one-man village shops; 289 visits have been made to these, and in almost every case appropriate advice has been given regarding the clean and safe handling of food.

A series of talks with film strips were given to approximately 60 kitchen and canteen staff in the Rural District.

Milk and Dairies Regulations.

(a) *Food and Drugs* (*Milk and Dairies*) *Act*, 1949–54.

No. of Milk Distributors (being persons trading as dairymen from premises other than dairy farms) 12

No. of dairies (not being dairy farms) . . . . . Nil

(b) *The Milk* (*Special Designations*) (*Pasteurised and Sterilised Milk*) *Regulations*, 1949-1953.

(i) Pasteurised Milk

No. of Supplementary licences for the sale of pasteurised milk issued in the year 3

No. of Dealers licences for the sale of pasteurised milk issued in the year 9

(ii) Sterilised Milk

No. of Supplementary licences for the sale of sterilised milk issued in the year 3

No. of Dealers licences for the sale of sterilised milk issued in the year 6

(c) *The Milk* (*Special Designations*) (*Raw Milk*) *Regulations* 1949-54

(i) No. of Dealers licences for the sale of Tuberculin Tested Raw Milk issued in the year 6

(ii) No. of Supplementary licences for the sale of Tuberculin Tested Raw Milk issued in the year 3

Slaughterhouses

There are no slaughterhouses in the Rural District.

Prevention of Damage by Pests Act, 1949

No. of Properties inspected as a result of –	Local Authority	Dwelling Houses	Business Premises	Total
(a) Notification and/or complaint	11	77	9	97
(b) Survey under Act	25	—	61	86
(c) Otherwise (when visited primarily for other purposes)	36	206	172	414
Total inspections and re-inspections *	151	417	245	813

*This number includes inspections of a part-time rodent officer in addition to those by Public Health Inspectors.

No. of infested properties treated	36	98	3	137

A charge of 8/- per hour to include cost of labour, materials and travelling is made in respect of business premises.

Infectious Diseases

All houses at which cases of notifiable Infectious Disease requiring investigation have occurred have been visited and disinfection has been arranged in appropriate cases.

Disinfection in appropriate cases is carried out on an agency basis by the East Retford Corporation, bedding etc., being removed where necessary to the steam disinfector in the Borough.

Six-hundred-and-twenty-four visits and re-visits were made to premises from which suspected or notifiable diseases were received during the year, but by far the greatest number of these were in connection with follow-up work following cases of food poisoning or suspected food poisoning and dysentery.

Forty-one cases of dysentery and forty-three cases of food poisoning were notified, and from the total number of visits it will be seen to what extent even a small number of such cases cause a large amount of work, with consequent travelling, and it is more than ever necessary to attempt to improve the standards of food hygiene both at food premises and householders in the private home.

Summary of Inspections and Visits made during 1958.

Houses (Public Health Acts)	189
Houses (Housing Act, 1956 - Repair and Demolition)	433
Houses (Housing Act, 1956 - Improvement Grants)	470
Houses (Applications for tenancies)	9
Houses (Housing Act, 1957 - Certificates of Disrepair)	52
Temporary Moveable Dwellings	142
Food Premises	289
Food Complaints	3
Complaints and Nuisances investigated	245
Unsound Food	2
Knackers Yards	19
*Meat Inspection	367
Offensive Trades	24
Factories and Workshops	43
Refuse Collection and Disposal	124
Infectious Diseases	624
Infestation	46
Atmospheric Pollution	2
Water, Watercourses (including samples)	147
Drainage (including drain tests)	601
Interviews on sites : Housing	170
Food Premises	65
Others	116
Petrol Regulations	29
Attendances at Court, Inquiries etc.	2
Miscellaneous	38
Total	4,251

*This work was carried out for the East Retford Borough.

J. HUNT

Chief Public Health Inspector

SERVICES PROVIDED BY OTHER AUTHORITIES

NATIONAL HEALTH SERVICE

(a) **Hospital and Specialist Services (Part II National Health Service Act, 1946).**

The Sheffield Regional Hospital Board is responsible for the hospitals serving East Retford Borough and Rural District through a Hospital Management Committee. There are three hospitals :

Victoria Hospital, Worksop.

Kilton Hospital, Worksop.

Retford and District Hospital, Retford.

and the Worksop and Retford Hospital Management Committee carries out the day to day administration of these hospitals.

(b) **Health Services provided by Local Health Authorities.**

The Nottinghamshire County Council provides the following services under Part III of the National Health Service Act, 1946 (Dr. C.W.W. Jeremiah, County Medical Officer and Principal School Medical Officer).

1. Care of Mothers and Young Children.
2. Domiciliary Midwifery.
3. Home Nursing.
4. Health Visiting.
5. Vaccination and Immunisation.
6. Ambulance Service.
7. Prevention of illness, care, and after-care of persons suffering from illness.
8. Home Help.
9. Mental Health.

Care of Mothers and Young Children.

Antenatal and Child Welfare Clinics were held in eight villages.

A list of the villages at which Clinics are held can be seen on page 40.

The Maternity and Child Welfare Centre in the Market Square, Retford, is available to those parents living in nearby villages.

Your Medical Officer of Health attends some of the Centres.

Domiciliary Midwifery.

Mothers may have their babies at home or in hospital, this depending on various factors, medical and social. If the mother has her baby at home, then she is usually attended by a midwife who will call in a doctor if required, this usually being the family doctor.

Home Nursing.

This is a service which provides for the nursing at home of chronic patients and of the less serious forms of acute illness where the family doctor requests it. It is carried out by the Retford and District Nursing Association.

Health Visiting.

Health Visitors are State Registered Nurses with knowledge of midwifery, who have attended a whole-time course in Public Health work and received the Health Visitor's Certificate. Their duties are in respect of the Personal Health Services. They work in the Maternity and Child Welfare Clinics and do routine visiting of their districts, advising on prevention of illness and maintenance of health.

Vaccination and Immunisation.

The Vaccination and Immunisation Service is administered for the County Council by the District Medical Officer of Health, acting as the agent of the County Council.

Ambulance Service.

The main ambulance station is situated in the Retford Borough and the vehicles comprise four ambulances and two dual purpose vehicles, which will carry six sitting cases or three sitting cases and one stretcher.

The Station Supervisor is Mr. G. West. Office : Exchange Street, Retford. Telephone No. Retford 400.

Home Help.

The Office is in Chancery Lane, Retford. This most useful service provides domestic help where, on account of illness, age, or other domestic reasons, it is required.

(c) Provision of General Medical and Dental Services, Pharmaceutical Services, and Supplementary Ophthalmic Services (Part IV National Health Service Act, 1946).

THE SCHOOL HEALTH SERVICE

The School Health Service (known as the School Medical Service until 1945) started officially in 1908, but its growth was greatly increased by the Education Act of 1944 and the National Health Service Act of 1946.

The County Council as the local Education Authority is responsible for the School Health Service.

NATIONAL ASSISTANCE ACT, 1948

The County Council provides a welfare service for the aged and handicapped persons. The District Welfare Officer is Mr. J. Barrow, Grove Street, Retford. Telephone No. Retford 232.

Attendances at Maternity and Child Welfare Centres 1958

Village	Attendances			Medical Consultations
	Children	Expectant Mothers	Post-Natal Cases	
Dunham-on-Trent	398	2	1	115
Gringley-on-the-Hill	243	3	—	79
Mattersey	313	32	—	117
Misterton	461	4	—	114
Ranskill	239	12	1	82
South Leverton	394	1	2	138
Tuxford	976	18	1	180

Times of Clinics can be obtained from the Health Visitor or the Maternity and Child Welfare Centre, The Market Square, Retford.

INFECTIOUS DISEASES 1958

Notifiable Diseases	Total Notified	Askham	Apley Head	Babworth	Bevercotes	Bothamsall	Barnby Moor	Bole	Beckingham	Bilby	Clarborough	Clayworth	Cottam	Darlton	Dunham-on-Trent	Drayton West	Drayton East	Elkesley	Everton	Eaton	Finningley	Fledborough	Gamston	Gringley-on-the-Hill	Grove
Diphtheria																									
Dysentery	41			4														1							
Encephalitis																									
Polio-encephalitis																									
Erysipelas																									
Food Poisoning..	43																								
Malaria																									
Measles	99					1	1	2								2		7	1		6			44	
Meningococcal Infection ..	1																				1				
Paratyphoid Fever																									
Typhoid Fever..																									
Pneumonia	6																								
Puerperal Pyrexia																									
Paralytic Poliomyelitis.. ..																									
Non-Paralytic Poliomyelitis ..																									
Scarlet Fever	8																							1	2
Whooping Cough	1																								
Totals	199			4		1	1	2								2		8	1		7			45	2

Notifiable Diseases	Haughton	Hayton	Headon	Leverton Nth.	Leverton Sth.	Littleborough	Lound	Laneham	Markham Clinton	Markham East	Markham West	Markham Moor	Mattersey	Mattersey Thorpe	Marnham	Milton	Misson	Misterton	Morton	Nether Headon	Newington	Normanton	Ragnall	Rampton	Ranskill	Ranby
Diphtheria																										
Dysentery													1						14							15
Encephalitis																										
Polio-encephalitis																										
Erysipelas																										
Food Poisoning..															28											
Malaria																										
Measles										1							3	3							1	10
Meningococcal Infection ..																										
Paratyphoid Fever																										
Typhoid Fever..																										
Pneumonia										1												1				1
Puerperal Pyrexia																										
Paralytic Poliomyelitis.. ..																										
Non-Paralytic Poliomyelitis ..																										
Scarlet Fever																	1	1								1
Whooping Cough																										
Totals										2			1		28		4	4	14			1			1	27

Notifiable Diseases	Rockley	Saundby	Scaftworth	Stokeham	Sturton-le-Steeple	Sutton	Scrooby	Tiln	Torworth	Treswell	Tuxford	Upton	Walkeringham	West Burton	Wheatley North	Woodbeck	Wiseton	Welham	West Stockwith	Wheatley South	West Woodside	Trent Port
Diphtheria																						
Dysentery																3		3				
Encephalitis																						
Polio-encephalitis																						
Erysipelas																						
Food Poisoning..									1		14											
Malaria																						
Measles		2	1								1	1	4		8							
Meningococcal Infection ..																						
Paratyphoid Fever																						
Typhoid Fever..																						
Pneumonia											2					1						
Puerperal Pyrexia																						
Paralytic Poliomyelitis.. ..																						
Non-Paralytic Poliomyelitis ..																						
Scarlet Fever			1										1									
Whooping Cough																			1			
Totals		2	2						1		17	1	5		8	4		3	1			