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#### **Contributors**

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# Borough of East Retford



# ANNUAL REPORT

ON THE

# HEALTH OF THE BOROUGH

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 PUBLIC HEALTH INSPECTOR

F. R. SMITH, C.R.S.I. CERT. INSPECTOR OF MEAT



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#### PUBLIC HEALTH COMMITTEE

(from May 1958)

Chairman: Alderman A. Wilson, c.c.

Vice-Chairman: Alderman J. R. Waterfield, J.P.

Alderman F. Nettleton

Alderman E. E. Sutton

Alderman L. Tanner

Councillor Miss N. Bradshaw, J.P.

Councillor B. R. Pattison

Councillor J. W. Peatfield, c.c.

Councillor B. Pollard, c.c.

Councillor Mrs. M. E. Williamson

#### PUBLIC HEALTH DEPARTMENT STAFF

Medical Officer of Health: Dr. R. C. Barker

Public Health Inspector: F. R. Smith

Clerical:

Chief Clerk Miss M. Johnson

Mrs. J. Elsom

(resigned 15th Dec., 1958)

Miss B. Cross

Tel. No. Retford 561

# PUBLIC HEALTH DEPARTMENT, CHANCERY LANE, RETFORD.

July 1959

TO THE MAYOR, AND TO THE

Aldermen and Councillors of the Borough of East Retford

Mr. Mayor, 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 Borough, compiled in accordance with the instructions of the Minister of Health.

The mid-year population of the Borough as estimated by the Registrar General was 17,000, an increase of 60 on the previous year.

I have included this year (see Page No. 10) 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.

Excluding Tuberculosis, during the year, 63 cases of Infectious disease were notified. Of these, 18 were cases of Dysentery.

There were 3 deaths from infectious disease, 2 being caused by Pneumonia and 1 from Encephalitis.

Tuberculosis: The number of new cases notified during the year was 14 and in addition 7 cases came into the Borough from other parts of the country.

During July, 1958 due to heavy rains and the rising of the River Idle, certain parts of the town suffered from flooding. In one part of the town the inhabitants with their furniture had to be moved to the upstairs floors. Fortunately, however, the floods subsided with little damage or inconvenience to the residents.

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 Public Health Department in securing admission

to hospitals where necessary, though this is by no means easy nor does it solve the problem.

In November a National campaign with the message "Guard that Fire" was launched and the Borough of East Retford gave its support to the national effort. As District Organiser I would like to take this opportunity of thanking everyone who helped. The persons concerned are too numerous to mention individually and the jobs were many and varied, but I do thank everyone for all they did for this campaign to prevent the serious toll of life and disablement resulting from burning accidents.

During the year 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 that purpose, and the Minister has appointed 2nd November, 1959 for this purpose.

In connection with Meat Inspection there is a point of importance in relation to the need for additional Public Health Inspection Staff mentioned in my last Annual Report. It is that in the Borough an average of 3 hours per day (Monday - Saturday) is spent on meat inspection. As you know there is only one Public Health Inspector and he spends an average of just over 2 hours per day on this work. It will be apparent that his time for other duties must be limited and he himself makes mention of this. The other hour of meat inspection is carried out on behalf of the Borough Council by Public Health Inspectors of the Rural District Council by arrangement. In addition there is slaughtering at the weekend.

Since environmental health is a major function of a Local Authority I have this year given a brief account of the Environmental Health Services which will be found on pages 11 to 15.

I wish to express 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 Inspector and to the clerical staff.

I am,

Your obedient servant,

ROSETTA C. BARKER Medical Officer of Health

# SOCIAL CONDITIONS AND VITAL STATISTICS

Area		4,6	557 acres
Public Open Spaces			22 acres
Registrar General's estimated population mid-ye	ear 1958	17,0	000
Number of inhabited houses at end of 1958		5,4	150
Rateable Value, June 1959			
Sum represented by Penny Rate at 1st April, 1			
Vital statistics are calculated on estimated mi by the Registrar General, i.e. 17,000.			ion given
Live Births	69 M	142 I	F 127
Live birth rate per 1,000 population 15.82			
Still-Births T	7 M	2 I	F 5
Still Births rate per 1,000 live and still births	s 25.36		
Total Live and still-births T 27	76		
Infant deaths T	4 M	1 I	F 3
Infant mortality rate per 1,000 live births 14  ,, ,, ,, ,, Legitimate 1  ,, ,, ,, ,, Illegitimate	5.68		
Neo Natal mortality rate per 1,000 live births. (i.e. First 4 weeks) 11.1			
Illegitimate live births per cent of total live births 5.2	22%		
Maternal deaths (including abortion) N	il		
Maternal mortality rate per 1,000 live and still births	il		
Deaths from all causes 20	9 114	1	95
Death rate per 1,000 population 12	2.29		

# Causes of Death - 1958

Tuberculosis, respiratory			0
Tuberculosis, other			0
Syphilitic disease			1
Diphtheria			0
Whooping Cough			0
Meningo-coccal infections			0
Acute Poliomyelitis			0
Measles			0
Other infective and parasitic diseases			1
Malignant neoplasm, stomach			9
Malignant neoplasm, lung, bronchus			11
Malignant neoplasm, breast			2
Malignant neoplasm, uterus			1
Other malignant and lymphatic neop			22
Leukaemia and aleukaemia			0
Diabetes			2
Vascular lesions of nervous system			33
Coronary disease, angina			24
Hypertension with heart disease			5
Other heart disease			35
Other circulatory diseases			14
Influenza			2
Pneumonia			10
TO 111			11
Other diseases of the respiratory syst			1
Ulcer of stomach and duodenum			0
Gastritis, enteritis, and diarrhoea			0
Nephritis and nephrosis			1
Hyperplasia of prostate			2
Pregnancy, childbirth, and abortion			0
Congenital malformation			1
Other defined and ill-defined disease	9		15
Motor vehicle accidents			0
All other accidents			3
Suicide		I STUD	3
Homicide			0
Tronnerde			

# Causes of Death in Children under 1 year

			Under 1 mth.		3-6 mths.	6-9 mths.	9-12 mths.	Total
Prematurity	-	-	1	_	-	_	-	1
Virus Encephalitis	-	-	1	-	-	-	-	1
Hydrops Foetalis	1	-	-	-	1	-	-	1
Cerebral Thrombosis	-	-	-	-	-	_	1	1
1								

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

Year	1958	1957	1956	1955	1954
No. of deaths	4	5	5	4	12

# Table Showing Vital Statistics 1954 - 1958 (inclusive)

	1958	1957	1956	1955	1954
Population (Mid-Year population as estimated by the Registrar-General)	17,000	16,940	16,900	16,850	16,870
Births					
Live Births - Legitimate	255	251	259	268	229
Illegitimate	14	8	10	7	10
Still Births - Legitimate Illegitimate	7	4	7	_ 9	5
Thegraniac	1				
DEATHS					
All Causes	209	193	215	175	197
Maternal Death	-	_	_		_
Infantile Deaths (i.e. under 1		9.0			
year)	4	5	5	4	12
Neonatal (i.e. under 4 weeks)	3	2	4	-	11

#### 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 pre-requisite 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 ever 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 fluori-

dation 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 a 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 ininspection 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 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 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 also 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 the risk of tuberculous milk being consumed, 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	Pneumonia, Acute Primary
Diphtheria	Pneumonia, Acute Influenzal
Dysentery	Poliomyelitis
Encephalitis (Acute)	Puerperal Pyrexia
Enteric Typhoid or	Relapsing Fever
Paratyphoid Fever	Scarlet Fever
Erysipelas	Smallpox
Malaria	Tuberculosis
Measles	Typhus
Membranous Croup	Whooping Cough
Meningococcal Infection	Food Poisoning or suspected
Ophthalmia Neonatorum	Food Poisoning
Plague	

The number of cases of infectious disease (excluding Tuberculosis) notified during 1958 was 63. Details of these are as follows:

Disease	Number of Cases
Dysentery	18
Encephalitis	1
Food Poisoning	_
Measles	7
Meningoccocal Infection	1
Pneumonia	5
Scarlet Fever	30
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 21 cases of Tuberculosis notified during the year; of these 14 were primary notifications i.e. related to persons who had not previously been notified in the area of any authority, and 7 were non-primary notifications, these being transfers from other areas.

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

Laboratory Facilities. Bacteriological examinations were carried out by the Public Health Laboratory at Lincoln. 118 specimens comprising urine and faeces were submitted for examination.

Vaccination and Immunisation. This is a Personal Health Service and is the responsibility of the Notts. 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 P.H.	Dept	. By PP
Diphtheria Immunisation					
Primary Immunisation Reinforcing doses		::	112 162		188 53
Whooping Cough					
Primary Immunisation Reinforcing doses			95 —		175 29
Vaccination against Smallp	ox				
Primary Vaccination			17		181
Revaccination			4		16
Vaccination against Poliom	yelitis				
Primary Vaccination Reinforcing doses			1857	667	462

P.H. Dept. - Public Health Dept.

P.P. - Private Medical Practitioner

Infectious Diseases (Excluding Tuberculosis) Notified in Age Groups - Admitted to Hospital, and Deaths, 1958

Deaths	'	1	1	-	1	-	-	-	-	2	1	1	-	1	1		3	
Admitted to Hospital	1	ı	1	1	1	1	1	-	-		1	1	1	-	1	6	2	
65 & over	1	1	1	1	1	1	1	-	1	2	1	1	1	1	1		2	direc
45-65 years	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	F	-	n ka
5-10 10-15 15-20 20-35 35-45 45-65 years years years years	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1		1	991
20-35 years	1	9	-	1	1	1	1	1	1	1	1	1	1	1	1		7	n/mio
15-20 years	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1		1	alyilg
10-15 years	1	1	1	1	1	1	1	1	1	1	1	1	1	2	-		4	tidad
	1	2	1	-	1	1	1	1	1	1	1	1	1	18	1		25	nipál
4-5 years	1	1	1	1	1	1	1	1	1	1	1	1	1	9	1		1	poody
3-4 years	1	3	1	1	1	1	1	1	1	1	1	1	1	2	1	0	9	Rein
2-3 years	1	1	1	1	1	1	2	1	1	1	-	-	1	1	1	ac	3	neces Print
1-2 years	-	3	-	1	1	1	2	1	1	1	1	1	1	1	1		2	rishi.
Under 1-2 1 year years	-	-	1	1	1	1	-	1	1	1	-	1	1	1	1		3	nicein Prin
At all Under 1-2 ages 1 year years	1	18	1	-	1	1	7	1	1	20	1	1	1	30	1		63	
Diseases	Diphtheria	Dysentery	Encephalitis	Erysipelas	Food Poisoning	Malaria	Measles	Meningococcal Infection	Typhoid Fever	Acute Pneumonia	Puerperal Pyrexia	Paralytic Poliomyelitis	Non-paralytic Poliomyelitis	Scarlet Fever	Whooping Cough		Totals	

Infectious Diseases (Excluding Tuberculosis) Notified Month by Month -- 1958

Diseases	Diphtheria	Dysentery	Encephalitis	Erysipelas	Food Poisoning	Malaria	Measles	Meningococcal Infection	Paratyphoid Fever	Typhoid Fever	Pneumonia	Puerperal Pyrexia	Paralytic Poliomyelitis	Non-Paralytic Poliomyelitis	Scarlet Fever	Whooping Cough	Totals
Total	1	18	1	1	1	1	7	1	1	1	S	1	1	1	30	1	63
Jan.	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Feb.	1	-	1	1	1	1	1	1	1	1	1	1	1	1	1	1	4
Mar. Apr.	1	-	1	1	-	1	1	1	1	1	2	1	1	1	1	1	6
Apr.	1	3	1	1	1	1	1	1	1	1	1	1	1	1	1	1	4
May	1	1	1	1	-	-	1	1	1	1	1	1	1	1	1	1	3
June	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	-
July	- 1	1	-	1	1	-	1	1	-	1	1	-	1	1	-	. 1	1
Aug.	1	1	1	1	1	1	3	1	1	1	1	1	1	1	-	1	4
Sept	-	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Oct.	1	0	1	1	1		1	1	1		1			1	u	1	7
Nov.		3	0				3	)	1						0	0 1	14
Dec.		1		1	1	-	1	1	1	1	-	-			14	-	22

# Tuberculosis 1958

# Table (a) New Cases and Deaths

		New	Cases		Deaths					
	Pulm	onary		on- onary	Pulm	onary	Non- Pulmonary			
Age Periods	М	F	М	F	М	F	М	F		
Under 1 year	-	_	_	_	_	_	-	_		
1- 2 years	-	-	-	-	-	-	-	-		
2- 3 years	_	-	-	-	-	-	-	-		
3- 4 years	-	-	-	-	-	-	-	-		
4- 5 years	1	-	-	-	-	-	-	-		
5-10 years	-	1	_	_	-	-	-	_		
10-15 years	_	_	-	_	-	-	-	_		
15-20 years	-	-	-	_	_	-	_ *	-		
20-35 years	5	-	-	-		-	-	-		
35-45 years	2	-	-	_	-	-	- 1	_		
45-65 years	3	1	_	_	-	_	-	_		
65 and over	1	-	-	-	-	-3	- 9	-		
Totals	12	2	_	_	_	_	-	_		

#### SANITARY CIRCUMSTANCES OF THE BOROUGH

Water Supply, Sewage Disposal, and Refuse Disposal are under the control of the Borough Surveyor and Water Engineer, who has given me the following information.

# Water Supply

The East Retford Corporation is the Water Authority.

5,450 houses receive a supply direct from the Corporation's mains.

Approximately 13 houses are supplied from standpipes. One house is not supplied with Corporation water, the source of supply here being a well.

# Sewerage and Drainage

The older part of the Borough is on the combined system, that is to say the surface water and sewage discharge into the same drain and the majority of the houses have this service.

Conservancy System - a small number of houses are not connected to the sewers. Of these 14 houses have pail closets and 2 houses have privy middens; these 2 houses are subject to Orders under the Housing Act. The emptying of these closets and privy middens is carried out by the Corporation.

A few houses have cesspools and the emptying of these is the responsibility of the owner.

Work on the construction of a new sewage disposal works on the east side of Hallcroft Road is expected to be commenced in April 1959 and completed in April 1961.

# Refuse Collection and Disposal

- (a) Amount of refuse collected in 1958 10,000 tons approximately.
- (b) Disposal is by tipping into disused gravel working.

This is not an entirely controlled method of tipping but is carefully watched and no nuisance has arisen.

The Corporation provides and maintains dustbins at dwellinghouses at an annual charge.

# 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 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 23.

# **FACTORIES ACT, 1937**

The tables on pages 24 and 25 give a summary of the work with respect to matters under Part I 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 was necessary under the Acts during the year though assistance in getting persons into hospital on a voluntary basis was given.

# Food and Drugs Act, 1955

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

	Num	ber of Sa	mples	Adulterated or sub-star	ndard samples
Article	Obtained	Genuine	Adult. or Sub- Standard	Result of Examination and/or analysis	Remarks
Almond Marzipan	1	1			
Almond Paste	1	Î	-		
Apples	1	1	_		
Apple Slices	1	1	_		
Beef Suet	1	1	_		
Bread	2	1	1	Slightly contaminated with oil from bread	Manufacturers cautioned
Cheese	5	5	-	making machinery.	
Cheese Spread	3	3	-		
Chicken Cutlets	1	1	_		
Chop'd Chicken in Jelly	1	1	_		
Christmas Pudding	1	1	_		
Coffee Drink	1	1	-		
Cream Cheese	1	1	_		
Double Cream	1	1	_		
Fish Cakes	2	2	_		
Flour	1	1	_	2	
Gin	1	1	-		
Grapefruit Juice	1	1	_		
Greengages, canned	1	1	_		
Halibut Oil & Orange					
Capsules	2	2	_		
Ice Cream	4	4	_		
Jam	1	1	_		
Lemon Curd	1	1	_		
Margarine	2	2	_		
Marmalade	1	1	_		
Meat Pies	1	1	_		
Milk	306	292	14	The 14 sub-standard samples were found to be very slightly defi-	Appropriate action was taken in these
M:11 C 1 1				cient due to natural	cases
Milk, Condensed	1	1	-	causes.	
Oranges Peas, canned	1	1			
	1	1			
Pepper, White Pickle	1	1			
Potted Meat	1	1	1	Contained only 85.1%	Manufacturer
Totted Meat	1		1	meat and 14.9% excess	Cautioned
Rum	1	1	-	water	cadeloned
Sausage	6	6		l l	
Sandwich Cake	1	1			
Salad Cream	1	1			
Soft Cheese	1	1	_		
Steak Pie	1	1	_		
Stewed Steak with	1		1	Contained 57.2% meat	Particulars of
gravy	13.	8 8 8	1	but in absence of min-	these and simi-
8)	-8	1		imum standard no act-	lar samples hav
				ion against the seller	been brought to
					the notice of Min
					of Food through
Sweets	3	3	-		the County
Tomato Ketchup	1	1	_		Councils Ass-
Tomato Piquant	1	1	-		ociation.
Tomatoes, Canned	1	1	120-		
Table Jelly	3	3	_		
Vitamin Capsules	1	1	-		
Whisky	2	2	_		
Totals:	375	358	17		

FACTORIES ACT, 1937

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

Number of	Written Occupiers notices prosecuted	3	3		- 9
	Inspections	∞	77		85
Number	Register	7	98		93
	Premises	(i) Factories in which Sections 1, 2, 3, 4, and 6 are to be enforced by Local Authorities	(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	(iii) Other Premises in which Section 7 is enforced by the Local Authority (excluding outworkers' premises)	Total

FACTORIES ACT, 1937

2.-CASES IN WHICH DEFECTS WERE FOUND

	Number	Number of cases in which defects were found	ich defects wer	re found	Number of
Particulars	Found	Remedied	To H.M. B Inspector I	red By H.M. Inspector	which prosecutions were instituted
Want of cleanliness (S.1)	1	1	1	1	1
Overcrowding (S.2)	1				
Unreasonable temperature (S.3)	1		1	-	
Inadequate ventilation (S.4)	1	1		1	1
Ineffective drainage of floors (S.6)			-	-	1
Sanitary Conveniences (S.7)—  (a) Insufficient	2	-	1	_	1
(b) Unsuitable or defective	4	3		4	1
(c) Not separate for sexes	1	-			-
Other offences against the Act (not including offences relating to Outwork)	-	-	1	1	
TOTAL	9	4	ı	5	1

### REPORT OF THE PUBLIC HEALTH INSPECTOR

To the Medical Officer of Health in accordance with the Sanitary Officers' (outside London Regulations 1935-1951).

Madam,

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

The complaints received and investigated were 90, and nuisances were found to exist in 73 cases.

126 informal notices, requiring the abatement of nuisances or the remedying of defects, were served and in 8 cases these were followed up by statutory notices. In no case was it necessary to obtain a nuisance order as the works asked for were carried out by the owners without recourse to the Courts.

Details of the defects remedied will be found in a summary at the end of this report.

Housing. During 1958, 55 houses were represented as unfit for human habitation and were dealt with as follows:

As Compulsory Purchase Order	9
As Clearance Orders	42
As Demolition Order	1
As Undertakings by owners	3

The work of the clearance of unfit houses has made considerable progress. In 1955 the Town Council reported to the Ministry of Housing and Town Planning that the Council regarded 381 houses in the Borough as so unfit for human habitation that they should be demolished. At the end of 1958 orders for clearance, demolition or closing had been confirmed in respect of 173 and clearance orders had, been made by the Council but had not yet been confirmed by the Ministry against a further 42 houses.

As the agreed date for the clearance of all these unfit houses was the end of 1967 the work can be regarded as being well up to the schedule and provided that the building of new houses for re-housing purposes is kept up to approximately 40 per annum, we should have completed our original programme by the agreed date.

The Rent Act, 1957, has expedited the repair of the privately owned houses in the Borough. We had 37 applications for certificates of disrepair during 1958 and in all cases the owners were notified that the Council would issue a certificate unless the repairs were carried out within the time limit as laid down by the Act.

There is still a mass of houses in the town which are without modern amenities such as bathrooms, running hot water and internal water closets. It is to be hoped that the owners will provide these aids to a comfortable and healthy life without much further delay.

#### New Houses.

	By Borough Council	By Private Enterprise
New houses completed during the year	29	41
New houses under construction at the end of the year	54	42

#### Disinfection and Disinfestation

Infectious Diseases. Disinfection of houses and bedding were carried out in 4 cases, all for tuberculosis. During the year the Corporation made arrangements to have steam disinfection carried out at Doncaster and our old steam disinfector at the Gas Works was dismantled.

Destruction of Vermin. The number of houses treated for various insect pests by the Health Department was 61. The types of insect pests were:

Ants	 36	Fleas	2
Bugs	 1	Woodworm	5
Beetles	13	Wasp Nests	4

The standard of cleanliness is much higher today than it was earlier in this century.

The refuse tip and any other likely fly breeding dumps are treated with insecticide during the summer period to reduce the fly population.

# Prevention of Damage by Pests Acts, 1949.

During 1958, 136 complaints were received alleging infestation of land or property with rodents:

	Infested	Treated by Local Authority
Business Properties	18	17
Dwelling houses	112	112
Other premises	3	3

The town sewage system is usually free from rats but we do have some trouble in the top water drainage system especially in the central areas.

Although the rodent population is kept down by our present methods, total eradication is a dream of the future. The Corporation assist occupants to kill rats and mice in domestic properties, but a charge is made for work on other premises.

The poisons used are 'Warfarin' and Zinc Phosphide for rats and mice. Occasionally when rats are in holes out in the open Calcium Cyanide dust is placed in the holes with excellent results.

### Common Lodging House.

There is one registered house in the Borough with accommodation for about 40 persons. It is rarely more than half full. The premises are old but are in reasonable condition for their purpose. A bathroom with hot and cold water is provided but used rarely.

I made 18 visits during the year to supervise the house.

**Dustbins.** During 1958, 203 dustbins were supplied under the hire scheme which has proved very satisfactory, both to the Corporation and the public.

Mortuary. In the year under review 56 bodies were received in the Corporation mortuary, 25 from the Borough and 31 from the Rural areas. This is the largest number ever in one year and in my opinion the mortuary is inadequate. It is not suitable for more than two bodies at any one time and difficulties will arise until more commodious premises are provided.

# Meat Inspection

There are three slaughter houses in the Borough in use for the slaughter of animals for human consumption. The Grove Lane abattoir is controlled by a joint Sub-Committee of the Borough and Rural District Councils and the other two slaughterhouses are privately owned.

The Slaughterhouses Act, 1958, is now in force and the Council will have to report to the Ministry on the total slaughtering accommodation some time before the 1st November, 1960. The present premises are adequate for our needs but considerable work is required to bring them up to the modern standard.

We are able, with assistance from the staff of the East Retford Rural District Council, to inspect all the meat before removal from the slaughterhouses, but this necessitates work late at night and on every Sunday. There is an export of home killed meat out of Retford to areas other than our Borough and Rural area.

A comparison of the number of animals killed in Retford Borough during the last seven years, is as follows:-

	Cattle	Calves	Sheep	Pigs
1958	3,118	148	4,887	7,010
1957	3,546	166	3,768	6,867
1956	3,338	163	4,918	7,258
1955	2,633	144	3,862	6,255
1954	2,614	709	9,201	5,616
1953	3,521	1,026	10,635	3,775
1952	3,907	1,043	12,509	2,821

### Percentage affected with tuberculosis

	1952	1953	1954	1955	1956	1957	1958
Cattle	22.39	20.22	18.09	13.59	9.79	7.78	10.10
Pigs	6.94	5.72	5.72	3.27	2.41	1.77	1.76
Calves	0.47	0.28	0.42	0.69	0.61	1.8	2.70

The increase in the percentages of tuberculous cattle and calves is probably due to the activities of the Animal Health Division of the Ministry of Agriculture in weeding out these animals from the farms. It is anticipated that tuberculosis will be entirely eradicated from our cattle in another two years, with immense benefit to the meat traders, the farmers, and to the general public. It is of interest that when I commenced work in Public Health almost 50 years ago, over 30% of the cattle slaughtered, and 15% of the milk as sold to the public was tuberculous.

During 1958, 7 cases of viable Cysticercus Bovis were discovered and the carcases and organs were frozen for 3 week to render the meat safe for consumption.

The total weight of meat condemned in the slaughterhouses as unfit for human consumption was 96,878 lbs.

The previous six years were as follows:

1957	-	93,578 lbs.	1954	-	84,690 lbs.
1956	_	88,507 lbs.	1953	_	109,121
1955		64,497 lbs.	1952	-	139,368 lbs.

There is a large trade in casualty animals at one of the private slaughterhouses in Retford and this is the cause of the heavy condemnation of meat. The condemned meat is stained with a green dye and is sold for animal food or for fat extraction.

Tables giving details about this meat are given on pages 30 and 31.

# Carcases and Offal inspected and condemned in whole or part

	Heifers and Bullocks	Cows and Bulls	Calves	Sheep and Lambs	Pigs	
Number killed	2444	674	148	4887	7010	
Number inspected	2444	673	148	4887	7010	
All diseases except Tuberculosis and Cysticerci Whole carcases condemned  Carcases of which some part or organ	29	66	53	123	65	
was condemned*  Percentage of the number inspected affected with disease other than tuberculosis*						
Tuberculosis Only: Whole carcases condemned	9	15	3	Nil	4	
Carcases of which some part or organ was condemned	2	.91	1	Nil	120	
Percentage of the number inspected affected with tuberculosis	10.	10%	1.76%	Nil	2.70%	
Cysticercus: Carcases of which some part or organ was condemned	7	Nil	Nil	Nil	Nil	
Carcases submitted to treatment by refrigeration	7	Nil	Nil	Nil	Nil	
Generalised and totally condemned	Nil	Nil	Nil	Nil	Nil	
	* Accu	rate fig	ures can	not be	given	

# The causes for condemnation of whole carcases were as follows:

	Bullocks and Heifers	Cows and Bulls	Calves	Sheep	Pigs
Tuberculosis	9	15	3	_	4
Emaciation and/or Oedema	13	32	26	57	18
Pyaemia	1	3	5	1	3
Septic peritonitis	4	3 3 2	-	7	9
Septic metritis	-	2	-	5	1
Septic pericarditis	1	-	_	1	1
Other septic conditions	4	4	2 8	14	5
Immaturity	-	_	8	-	-
Injuries	1	3	1	3	1
Anaemia	-	-	-	8	10
Erysipelas	-	_	-	-	10
Congestion	2	3	8	14	3
Leukaemia	-	1	-	-	-
Parturition	-	10	-	2	_
Jaundice	_	1	1	-	2 2
Uraemia and/or Nephritis	2	4	1	1	2
Tumours	1	-	-	-	_
Swine Fever	-	-	-	-	1
Decomposition	_	-	1	10	9
Totals:	38	81	56	123	69

Inspections of Food Premises wer	e carr	ied ou	t as fo	ollov	ws:
Registered food premises					
<ul><li>(a) Ice Cream Premises</li><li>(b) Premises registered for manufa</li></ul>					22
preserved food					47
Other food premises					117
Markets					88
Dairies					16
Bakehouses					16
Inspection of Food during 1958. 37 for inspection of premises, were made of food usually after a request from the I append below a list of food condem Tinned foods . 270 tins Pork 30 lbs Ham 186 lbs.  Corned Beef 62 lbs.  Ox Tongue 78 lbs.  Jellied Veal 66 lbs.  Food condemned in the shops is straders and it is usually removed by the Nine samples of ice-cream were submination and all were satisfactory.	Importance Sausa Potate Melor	premi rader. ually for ted mu  e ges pes ered vo	ses for decontrol decontro	insp 56 c 6 ll 3 ll 42 ll 33 19 ily l al di	bs. bs. cwts bs. cwts bs. cwts
Premises registered under Section	n 16	Food 4	and D	ruó	e Act
(a) Meat Manufacturers (b) Ice Cream Makers					
( ) I - C D 1					56
Milk and Dairies Regulations.					
Dairies registered with the Boroug					2
(1) Dealers licences issued author	-				1
special designation 'Pasteurise' (2) Dealers licences issued author					-
designation 'Tuberculin Teste					2
(3) Dealers licences issued author special designation 'Sterilized'	ising ch	neese fo	or the		2
				2001	

# The Milk (Special Designation) (Pasteurised and Sterilised) Milk Regulations.

Pasteurised Milk and Sterilised Milk are submitted to prescribed tests. The Notts. County Council are responsible for this work. During the year 105 samples of pasteurised milk were obtained and submitted to these tests. All the samples complied with the tests.

Bacteriological examinations of the milk bottles was also carried out periodically during 1958. 30 bottles were examined and were satisfactory

Notices were served in accordance with the Food Hygiene Regulations. as below:

		No	tes sent	Complied *
Reg. 6.	Cleanliness of equipment etc.		5	4
8.	Food to be protected from contamination		1	2
9.	Personal cleanliness		1	1
14.	Sanitary Conveniences		7	13
16.	Washbasins to be provided		4	5
18.	Accommodation for clothing etc		1	6
19.	Facilities for washing food and equipment		1	2
23.	Cleanliness and repair of food rooms		11	13
26.	General requirements as to stall	S	1	1

<sup>\*</sup>Some of the figures in column 2 relate to notices outstanding from the previous year.

The Food Hygiene Regulations 1955. Owing to pressure of other work it is impossible for one public health inspector in a borough with a population of 17,000 to visit food premises as often as is desirable. During 1958 I made 306 visits specifically to inspect food premises. In addition there were visits to food shops and slaughterhouses for food inspection when the requirements of the Hygiene Regulations are borne in mind.

The standard of cleanliness and of the condition of the buildings is improving steadily. There were no cases of Food Poisoning in the Borough during the year.

Clean Air. This is another matter which could well receive more attention than it does get from me. There were six cases of nuisances from smoke or dust and in each instance the firms remedied the trouble on request. We have no apparatus in the Borough for recording pollution of the atmosphere.

On two occasions I gave talks to local groups on 'Clean Air' and it was obvious that considerable interest could be aroused by a publicity campaign.

F. R. SMITH Public Health Inspector

TOTAL	3,115
Other miscentaneous visits	
Pet Shops	50
re Clean Air Act	16
Mortuary	27
Caravans	29
Markets	88
Visits to inspect food	37
Other Food Rooms	117
Meat Preparation Rooms	47
Ice Cream Premises	22
Dairies	16
Bakehouses	16
	1,134
Re-visits to properties under notice	247
Interviews on sites etc	75
Petroleum Storage	77
Rat destruction	170
Offensive Trades	63
Infectious Disease	144
Factories	40
Visits, re Nuisances	53
Common Lodging House	18
Complaints investigated	82
Houses inspected, Rent Act	94
Houses inspected, Housing Acts	309
Houses inspected, Public Health Acts	135
Summary of visits made during the year	
Miscellaneous nuisances	28
Smoke and dust nuisances	6
Nuisances from animals	
Accumulations of refuse	10
Defective ventilation (Houses)	5
Dampness (Houses)	19
	22
Defective cooking ranges and fireplaces	38
Defective house plaster	23
Defective house doors	27
Defective house windows	46
Defective house floors	25
Defective house spouting	24
Defective house roofs	47
Foul or defective drains or closets	81
Summary of Nuisances abated during the year	

#### 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.

- Home Nursing.
   Health Visiting.
- 5. Vaccination and Immunisation.
- 6. Ambulance Service.
- Prevention of illness, care, and after-care of persons suffering from illness.
- 8. Home Help.
- 9. Mental Health.

# Care of Mothers and Young Children

(a) Infant Welfare Clinics are held at the Clinic, 22, Market Square, Retford, at the following times:

Mondays: 2 p.m. to 4.30 p.m. Thursdays: 2 p.m. to 4.30 p.m. Fridays: 2 p.m. to 4.30 p.m.

A Medical Officer is in attendance on Mondays and alternate Thursdays.

(b) Ante-Natal Clinics are also held at 22, Market Square, Retford, eachWednesday from 2 p.m. to 4.30 p.m. when a Medical Officer is in attendance.

Domiciliary Midwifery

Mothers who can, and wish to be confined at home, are attended by one of the County Midwives, of whom there are two in the Borough.

Mrs. J. L. Ashworth, 2, Fairway, Ordsall, Retford. Tel. No. Retford 2157

Mrs. Maltby, 125, Northfield Way, Retford. Tel. No. Retford 718

Home Nursing. This is a service which provides for the nursing of the chronically sick patients and of the less serious forms of acute illness where the family doctor requests it. This service is provided by the Retford and District Nursing Association, and the work is carried out on its behalf by:

Mrs. R. M. Coates, 16, Osberton Road, Retford. Telephone No. Retford 457

Mrs. L. N. Pearson, 12, Victoria Road, Retford Telephone No. Retford 545

Mrs. J. M. Wylie, 5, Millfield Close, Ordsall, Retford

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. The Health Visitors for the Borough are Miss Watson and Mrs. Worrall.

### Vaccination and Immunisation

The Vaccination and Immunisation service is organised 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. Home Help Supervisor Miss Turner.

(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.

Details of Attendance at the Centre duri		Child Welfare
	Total Attendances	Medical Consultations
Children Expectant Mothers Post-natal Cases	4,180 297 8	859







