

[Report 1945] / Medical Officer of Health and School Medical Officer of Health, East Riding of Yorkshire County Council.

Contributors

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EAST RIDING COUNTY COUNCIL

ANNUAL REPORTS

OF THE

Medical Officer of Health


AND

School Medical Officer

For the Year 1945.

Beverley :

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To the Chairman and Members of the County Council.

I beg to present my Annual Reports as County Medical Officer of Health and County School Medical Officer for the year 1945.

The year to which this report refers saw the successful conclusion of the war both in Europe and Asia, but that happy occurrence has not unfortunately resulted in my being able to report any quickening in the hoped for progress towards improved health services in the County. Some progress indeed there has been, as a perusal of this report will, I hope, demonstrate, but in most cases it has been irritatingly slow and hard of achievement, and many of the schemes approved by the County Council still appear to be far removed from being transformed from hopes to entities.

The most serious difficulties experienced have been those in connection with the provision of hospital beds of all types. Demands for beds have continued to increase, but even when beds have been available it has been increasingly difficult to bring them into use owing to the continuing reduction in the numbers of persons available to undertake nursing and domestic duties in hospitals. Now that there appears some chance of improving the position as regards the supply of beds, it is regrettable to have to contemplate that this provision may bring no relief to the urgent need unless some unexpected change takes place in the staff position.

Available statistics show no indication that continuing difficulties have had any deteriorating effect on the health of the population, and the infectious diseases rates continued at a low level. The birth rate dropped from 19·2 per 1,000 population to 17·0. It is unfortunate to have to note that the illegitimate birth rate again rose slightly, and that approximately one-tenth of the births in the County were illegitimate. The death rate has risen slightly. It was 13·1 per 1,000 population as compared with 13·0 for 1944.

I desire to take this opportunity to express my thanks to the members of the Council, and especially to the members of the Public Health and Housing and Education Committees, for the continued help and support they have extended to me both individually and collectively. I also wish to record my appreciation of the way in which all members of the staff of the Public Health and School Medical Departments have carried out their duties during the year.

I have the honour to be,

Your obedient Servant,

R. WATSON.

County Hall,

Beverley,

July, 1946.

**STAFF OF PUBLIC HEALTH AND SCHOOL MEDICAL
DEPARTMENTS, 1945.**

COUNTY MEDICAL OFFICER OF HEALTH, SCHOOL MEDICAL OFFICER, AND
TUBERCULOSIS OFFICER.

R. Watson, M.A., M.B., B.Ch., M.R.C.S., L.R.C.P., D.P.H.

DEPUTY COUNTY MEDICAL OFFICER OF HEALTH.

G. Holroyd, M.R.C.S., L.R.C.P., D.P.H.

DISTRICT SCHOOL MEDICAL OFFICER, BEVERLEY.

P. C. McKinlay, M.D. (part-time).

DISTRICT SCHOOL MEDICAL OFFICER, BRIDLINGTON.

E. T. Colville, M.D., B.Hy., D.P.H.

ASSISTANT TUBERCULOSIS OFFICER AND MEDICAL SUPERINTENDENT, RAYWELL
SANATORIUM.

T. S. Townsend, M.A., B.M., B.Ch., D.P.H.

ASSISTANT MEDICAL OFFICERS AND ASSISTANT SCHOOL MEDICAL OFFICERS.

Helen Moffat, M.B., Ch.B., D.P.H.

Pushpa M. Shankland, M.R.C.S., L.R.C.P., L.M., D.C.H., from 30th
April, 1945.

MEDICAL OFFICER, DRIFFIELD INFECTIOUS DISEASES HOSPITAL.

J. W. Thomas, M.R.C.S., L.R.C.P. (part-time).

MEDICAL OFFICER, "THE AVENUE" HOSPITAL, BRIDLINGTON.

H. Broadbent, M.D., D.R.C.O.G. (part-time).

RESIDENT MEDICAL OFFICER, BEVERLEY EMERGENCY HOSPITAL.

W. H. James, M.R.C.S., L.R.C.P.

RESIDENT MEDICAL OFFICER, DRIFFIELD EMERGENCY HOSPITAL.

R. A. Russell Taylor, B.Sc., M.B., Ch.B.

SENIOR SCHOOL DENTAL OFFICER.

P. S. Spence, L.D.S., R.F.P.S.

ASSISTANT SCHOOL DENTAL OFFICERS.

J. Rothera, L.D.S. (temporary).

G. Fleming, L.D.S. (in H.M. Forces).

C. Millar, L.D.S. (in H.M. Forces).

E. Beddoes, L.D.S., R.C.S. (part-time).

J. A. Stout, L.D.S., U. (part-time).

COUNTY HEALTH INSPECTOR.

G. J. Peters, A.M.I.S.E., M.R.San.I., M.S.I.A. (From 1st March,
1945.)

SUPERVISER OF MIDWIVES.

Miss E. M. Bailey, S.R.N., S.C.M., H.V.Cert.

COUNTY WELFARE VISITOR.

Miss D. M. Armstrong.

HEALTH VISITORS AND SCHOOL NURSES.

- Miss M. Anderson, S.R.N., S.C.M., H.V. Cert. (from May 1st, 1945).
 Miss E. M. Barnby, S.R.N., S.C.M.
 Mrs. O. Booth, S.R.N., S.C.M., H.V.Cert. (temporary).
 Miss M. Briggs, S.R.N., S.C.M., H.V. Cert. (from 1st January, 1945).
 Miss D. Hart, S.R.N.
 Miss F. A. Hoggard, S.R.N., S.C.M.
 Miss H. H. G. M'Donald, S.R.N., S.C.M., H.V.Cert.
 Miss N. Pinchbeck, S.R.N., S.C.M., H.V.Cert.
 Miss E. M. E. Roddis, S.R.N., S.C.M., H.V.Cert.
 Miss C. M. Taylor, S.R.N., S.C.M.
 Miss C. H. Walker, S.R.N.
 Miss M. M. Williams, S.R.N., S.C.M.

COUNTY DISTRICT MIDWIVES.

- Miss P. Bennett, S.R.N., S.C.M.
 Mrs. E. Bishop, S.C.M. (commenced 5th March, 1945).
 Mrs. I. Burrill, S.R.N., S.C.M. (left 28th February, 1945).
 Miss D. Dove, S.C.M.
 Mrs. M. E. Everingham, S.C.M.
 Miss N. Fenton, S.C.M. (commenced 1st September, 1945).
 Miss F. V. Fish, S.R.N., S.C.M.
 Miss M. E. Fisher, S.C.M. (left 16th February, 1945).
 Mrs. J. E. Fraser, S.C.M.
 Miss N. Grantham, S.C.M.
 Miss B. E. Hicks, S.C.M.
 Miss E. F. Jones, S.C.M.
 Miss E. Parkinson, S.C.M. (commenced 19th March, 1945).
 Mrs. W. A. Place, S.C.M. (commenced 12th March, 1945).
 Mrs. E. A. Seal, S.R.N., S.C.M.
 Mrs. M. A. Skinner, S.C.M.
 Miss M. Smith, S.R.N., S.C.M.
 Mrs. G. M. Spieght, S.C.M.
 Mrs. A. Sutton, S.R.N., S.C.M. (left 22nd May, 1945).
 Miss M. West, S.C.M. (left 30th July, 1945).
 Miss E. E. Wilson, S.R.N., S.C.M. (commenced 1st January, 1945).
 Mrs. A. Wood, S.R.N., S.C.M. (left 30th November, 1945).

MATRONS.

- "The Avenue" Hospital, Bridlington: Miss W. A. Schofield, S.R.N., S.C.M. Midwives Teachers Cert., Inst. Housekeeping Cert. (commenced 7th April, 1945).
 Infectious Diseases Hospital, Driffield: Miss E. Williams, S.R.N.
 Raywell Sanatorium, Cottingham: Miss H. R. Todd, S.R.N.
 Driffield Maternity Home: Miss E. M. Done, S.R.N., S.C.M.
 Beverley Emergency Hospital: Miss E. Lee, S.R.N., S.C.M.
 Driffield Emergency Hospital: Mrs. M. E. Steventon, S.R.N., S.C.M.
 Westow Croft Maternity Home: Miss C. L. Johns, S.R.N., S.C.M.
 Newstead House Ante-Natal Hostel: Miss J. Sullivan, S.R.N., S.C.M.
 Stamford Bridge Ante-Natal Hostel: Miss F. A. Millard, S.R.N., S.C.M., S.R.F.N. (Hostel closed 30th September, 1945).

REPORT OF THE COUNTY MEDICAL OFFICER OF HEALTH

**Medical Officers of Health of the several Local Authorities at
31st December, 1945.**

Local Authority.	Name of Medical Officer.
MUNICIPAL BOROUGHES.	
Beverley	P. C. McKinlay, M.D.*
Bridlington	E. T. Colville, M.D., B.Hy., D.P.H.*
Hedon	H. Marshall, M.B., Ch.B.
URBAN DISTRICTS.	
Driffield	J. W. Thomas, M.R.C.S., L.R.C.P.
Filey	G. A. Dibb, M.B., Ch.B.
Haltemprice	J. M. Hermon, M.D.
Hornsea	L. French, M.B., B.S., M.R.C.S., L.R.C.P.
Norton	J. A. Adams, M.B., Ch.B.
Withernsea	F. R. Cripps, M.D., D.P.H.
RURAL DISTRICTS.	
Beverley	G. Thompson, M.B., Ch.B.
Bridlington	P. D. H. Chapman, M.B., B.Ch., M.R.C.S., L.R.C.P.
Derwent	W. B. Hill, M.D., D.P.H.
Driffield	A. Milner, M.B., Ch.B.
Holderness	F. R. Cripps, M.D., D.P.H.
Howden	F. Wigglesworth, M.B., Ch.B.
Norton	W. Thistlethwaite, M.B., Ch.B.
Pocklington	A. F. A. Fairweather, M.D.

*Also District School Medical Officer.

REPORT OF THE COUNTY MEDICAL OFFICER OF HEALTH.

Section 1.—Vital Statistics.

POPULATION.

Districts.	Census, 1931.	Estimated.	
		1944.	1945.
Administrative County	169,287	185,940	183,450
Urban Districts	75,206	88,350	89,360
Rural Districts.....	94,081	97,590	94,090

BIRTHS AND BIRTH RATES

(Birth rate per 1,000 of the Population).

Districts.	Average rate for the ten years.		1939	1940	1941	1942	1943	1944	1945
	1921—1930	1931—1940							
	Administrative County	17·9								14·8	14·9	14·3	15·8	17·0	16·6	19·2	17·0
Urban Districts..	16·6	14·4	16·3	14·7	16·5	17·4	17·6	19·4	16·9
Rural Districts...	18·8	14·9	13·5	13·8	15·2	16·6	15·7	18·9	17·0

The birth rate for the whole of England and Wales was 16·1, compared with 17·6 in the previous year.

There were 3,109 live births and 77 stillbirths registered in the County during the year, making a total of 3,186. Of this number, 642 occurred in the Boroughs of Beverley and Bridlington, leaving a total of 2,544 in the area administered by the County Council.

The number of births notified to my Office by practitioners, midwives, etc., was 2,258, whilst the Registrars in the County sent particulars of 74 births which had been registered but not notified. In the previous year, the figures were 2,823 and 140 respectively.

ILLEGITIMATE LIVE BIRTHS.

Districts.	1938	1939	1940	1941	1942	1943	1944	1945
Administrative County	178	173	156	212	253	246	313	326
Urban Districts..	77	90	78	90	111	110	152	165
Rural Districts..	101	83	78	122	142	136	161	161

The illegitimate birth rate was 1·8 per 1,000 of the population, compared with 1·7 in the previous year. The proportion of illegitimate births to legitimate was again 1 to 10, the same as in the previous year.

DEATH RATES FROM ALL CAUSES (ALL AGES) (per 1000 of the Population).

Districts.	Average rate for the ten years.		1939	1940	1941	1942	1943	1944	1945
	1921—1930	1931—1940							
Administrative County	12·2	12·3	11·8	12·6	12·1	11·1	12·5	13·0	13·1
Urban Districts..	13·2	13·0	12·8	13·0	13·1	12·0	13·8	14·3	14·0
Rural Districts..	11·6	11·6	10·8	12·2	11·2	10·4	11·3	11·7	12·1

There were 2,396 deaths registered in the County in 1945, a decrease of 13 on the figure for the previous year. The death rate of 13·1 per 1,000 population is higher than the death rate of 11·4 for England and Wales, which was a decrease on the 1944 figure of 11·6.

The principal causes of death in the County were once again heart disease (625), cancer (423), and intra-cranial vascular lesions (273), which again accounted for over 50% of the total deaths.

The following table shows the figures for comparison for various causes for the years 1944 and 1945:—

Cause of Death.	1944.	1945.
Cerebro-spinal Fever	5	—
Scarlet Fever	2	—
Whooping Cough	6	8
Diphtheria	2	—
Tub. of Resp. Sys.	79	67
Other Forms of Tuberculosis	22	23
Syphilitic Disease	12	11
Influenza	25	17
Measles	—	—
Ac. Poliomyel. and Polioenceph.	—	—
Ac. Inf. Enceph.	2	6
Cancer	313	423
Diabetes	20	18
Intracranial Vascular lesions	311	273
Heart Disease	641	625
Other dis. of circ. system	118	122
Bronchitis	126	97
Pneumonia	80	76
Other Res. Diseases	33	23
Ulcer of Stomach or Duodenum	20	21
Diarrhœa, under 2 years	10	15
Appendicitis	9	12
Other Dig've Diseases	70	64
Nephritis	62	61
Puer. and Post-abort. Sepsis	2	—
Other Maternal Causes	8	8
Premature Birth	40	28
Con. mal. birth inj. infant. dis.	52	49
Suicide	22	20
Road Traffic Accidents	23	16
Other Violent Causes	60	67
All Other Causes	236	246
All Causes	2409	2396

DEATHS AMONGST CHILDREN UNDER ONE YEAR.

Death rate amongst Infants per 1,000 Live Births.

Districts.	Average rate for the ten years.		1939	1940	1941	1942	1943	1944	1945
	1921—1930	1931—1940							
Administrative County	61	51	49	43	50	40	51	44	43
Urban Districts..	59	50	46	42	55	43	54	47	41
Rural Districts..	63	53	53	44	45	38	47	41	46

There were 135 deaths of children under the age of one year in 1945 as compared with 156 in 1944, and the infant mortality rate has decreased from 44 to 43. The rate for England and Wales for 1945 was again 46. The distribution of these infant deaths between various grouped causes is shown in the following table. It is pleasing to note a further marked decrease in the number of deaths due to prematurity.

INFANT DEATHS FOR THE YEARS 1944 AND 1945.

	Urban.		Rural.		Total.	
	1944.	1945.	1944.	1945.	1944.	1945.
Infectious Diseases	10	5	1	4	11	9
Repiratory Diseases	16	11	16	13	32	24
Digestive Diseases	10	11	3	5	13	16
Prematurity	16	12	24	16	40	28
Birth Injury, Infantile Diseases and Congenital Malformations	23	17	23	28	46	45
Other Causes	5	6	9	7	14	13
Totals	80	62	76	73	156	135

INQUESTS.

The causes of death returned by the Coroners were as follows:—

Cause of Death.	East Riding District.	Holderness District.	Howdenshire District.	Escrick District.	Totals for 1945.	Totals for 1944.
Natural Causes ...	12	—	—	2	14	15
Accidental Death.	48	17	8	6	79	94
Suicide	15	4	2	3	24	24
Found drowned ...	3	1	1	1	6	7
Other verdicts	5	—	1	—	6	7
Totals	83	22	12	12	129	147

Section 2.—General Provision of Health Services for the Area.

LABORATORY FACILITIES.

The work of dealing with the examination of bacteriological specimens for patients living in the County was continued at the Area Laboratory at the Driffield Emergency Hospital. The bacteriological and biological examination of milk continues to be undertaken at the North Riding Laboratory at Scarborough, and the examination for specimens in connection with the Venereal Diseases Scheme is carried out at the Laboratory at the Hull Royal Infirmary and at the North Riding Laboratory.

Chemical examinations of milk and other foods and examination of water samples is undertaken by the Public Analyst.

Details of the bacteriological work carried out in 1945 are shown in the following table:—

BACTERIOLOGICAL EXAMINATIONS.

	Throat Swabs		Sputum.		Water	Milk.	Other Examinations.
	Pos.	Neg.	Pos.	Neg.			
URBAN DISTRICTS.							
Beverley	1	13	4	6	...	...	35
Bridlington ...	23	84	9	53	...	99	248
Driffield	7	74	1	13	...	...	60
Filey ... ..	...	7	...	1	...	...	2
Haltemprice ...	76	745	3	29	...	...	2
Hedon	1	...	1	5	...	...	...
Hornsea ... ..	...	2	...	7	...	...	8
Norton ... ..	...	5	...	2	...	...	6
Withernsea ...	...	...	1	3	...	...	2
RURAL DISTRICTS.							
Beverley	1	9	4	2	4	...	5
Bridlington ...	...	10	1	19	8	...	21
Derwent ... ..	...	11	3	14	...	...	3
Driffield ... ..	...	21	3	13	22	...	32
Holderness ...	...	20	6	14	...	...	14
Howden ... ..	...	12	1	5	...	...	90
Norton ... ..	...	6	1	3	...	...	6
Pocklington ...	2	25	...	9	...	...	13
E. R. C. C.							
'Avenue' Hosp.	...	4	...	1	...	...	39
Isolation Hosp.	20	59	...	...	...	...	1
T.B. Services	...	...	268	241	...	...	2
Sub-Committee	...	...	...	...	...	...	...
Pub. Assistance	...	1	...	1	1	...	9
Mental Hosp. ...	1	2	1	...	...	16	25
Milk (Special Designations) Regulations	...	...	...	...	...	271	...
Milk & Dairies Orders ... ..	...	...	...	...	...	45	...
Heat Treated ...	...	...	...	...	...	16	...
Milk in Schools	...	...	...	...	...	67	...
Food & Drugs Acts ... ..	...	...	...	...	...	2	...
Beverley Emergency Hospital	...	...	...	...	...	...	8
Service Cases ...	3	41	...	5	...	5	291
Driffield Maternity Home ...	...	...	...	...	...	...	3
Westow Croft ...	...	...	...	...	...	...	6
Public Health ..	...	...	...	...	4	...	6
Newstead Ante-Natal Hostel.	...	...	...	...	...	...	2
TOTALS ...	135	1151	307	446	39	521	939

AMBULANCE FACILITIES.

The ambulance facilities in the County are as follows:—

Situation.	Number.	Purpose.	Maintained by
Beverley	1	General	County Council
do.	1	do.	Beverley Corporation
Bridlington	1	do.	Bridlington „
do.	1	Infectious Diseases	do.
Driffield	1	do.	County Council
do.	1	General	S.J.A.B.
Filey	1	do.	S.J.A.B.
Haltemprice	1	do.	Haltemprice U.D.C.
do.	1	do.	S.J.A.B.
Hornsea	1	do.	S.J.A.B.
Withernsea	1	do.	S.J.A.B.
Brough	2	do.	S.J.A.B.
Howden	1	Infectious Diseases	* Howden R.D.C.
Market Weighton ...	1	General	B.R.C.S.

The County Council Ambulance stationed at the County Hall has made 447 journeys during the year, involving a mileage of 13,489, as compared with 332 journeys and a mileage of 12,705 during 1944.

NURSING IN THE HOME.

Home nursing is available in the following districts where Voluntary Nursing Associations exist:—

Anlaby,	Filey,
Beverley,	Ganton,
Bridlington,	Hessle,
Cottingham,	Hornsea,
Dalton Holme,	North Cave,
Driffield,	Norton,
Elloughton,	Rowley,
Escrick,	Westow,
Ferriby,	Withernsea.

With the exception of the Beverley, Driffield, Hessle, Norton, Withernsea and Cottingham districts, the nurses employed also undertake the domiciliary midwifery work for the County Council.

Much of the County is still unprovided for as regards Home Nursing, and there is a need for the formation of further Associations, but progress in this direction is likely to be slow until the effect of the proposed new Health Services arrangements upon District Nursing Associations can be accurately assessed.

The County Council paid £1,814 3s. 4d. in grants to existing District Nursing Associations during the year. Of this amount, £471 18s. 4d. was for general nursing and £1,342 5s. 0d. for midwifery work.

HOSPITALS.

Except as regards maternity accommodation, to which reference is made in the Maternity and Child Welfare section of this report, there is no change in the hospital services to record. The arrangement whereby the Emergency Hospitals at Beverley and Driffield could admit patients from the County (if they could be regarded as "transfer" cases from the Hull hospitals) continued in abeyance during the year, and accommodation for the acute and chronic sick continued to be extremely difficult.

Arrangements continued for the admission of "general" cases from the area of the County near York to the York City General Hospital, and for patients suffering from cancer to be admitted to the Leeds General Infirmary for radium treatment.

During the year, the Council gave general consideration to the question of hospital provision as a whole, preparatory to discussing this question with the Ministry of Health, and the following is a summary from a special report prepared in this connection. At the time of the preparation of this special report (August, 1945), the following beds were available in the area of the administrative County. These figures do not include maternity or mental hospital beds, and exclude the beds in the Beverley and Driffield Emergency Hospitals, which were not available for ordinary civilian cases.

GENERAL HOSPITALS FOR THE ACUTE SICK.

	Number of Beds.	
	Private Wards.	Public Wards.
(i) VOLUNTARY HOSPITALS.		
Beverley Cottage Hospital	4	16
Bridlington, Lloyd Hospital	7	38
Driffield, Alfred Bean Hospital	4	14
Hornsea, Memorial Cottage Hospital	4	19
(ii) COUNTY HOSPITALS.		
None.		

GENERAL HOSPITALS FOR THE CHRONIC SICK.

(i) VOLUNTARY HOSPITALS.	
None.	
(ii) COUNTY INSTITUTIONS.	
	Number of Beds.
"The Avenue" Hospital, Bridlington	16
Bridlington Public Assistance Institution	32
Driffield Public Assistance Institution	80
Howden Public Assistance Institution	81
Patrington Public Assistance Institution	29
Pocklington Public Assistance Institution	20

INFECTIOUS DISEASES HOSPITALS.

County Isolation Hospital, Driffield	62
Bridlington Infectious Diseases Hospital	36
	(plus 6 cots).
Howden Infectious Diseases Hospital	30
Hull City Infectious Diseases Hospital	5
(Beds used by Haltemprice U.D.C.)	

TUBERCULOSIS HOSPITALS.

Raywell Sanatorium	49
<hr/>	
Total number of beds in the County :—	
Voluntary	106
County	446
	<hr/>
	552
	<hr/>

As against this actual provision, taking the population of the County at a round figure of 180,000, excluding maternity and mental cases, the beds required would appear to be:—

	Beds.
Acute sick beds (all types) at 4 per 1,000 population	720
Chronic sick beds at 2 per 1,000 population	360
Tuberculosis beds (all types) at 3 beds per 2 deaths	130
Infectious Diseases beds at 1 per 2,000 population	90
	<hr/>
	1,300
	<hr/>

Consideration as to how these requirements should be met led to the conclusion that, so far as acute beds were concerned, in the course of time the acute bed provision in Hull, Scarborough and York was bound to expand and that the only part of the County not reasonably accessible to these places would be that part which includes the towns of Bridlington and Driffield and their surrounding areas, comprising a population of some 60,000. Having regard to the existing cottage hospital provision in the area, and to the fact that certain special departments would not necessarily be required, it was estimated that the provision of 150 acute beds would be sufficient for this area. Pending the anticipated expansion of the Hull, Scarborough and York centres, however, more beds than this would be required, and on a relatively short term basis, therefore, the provision of beds in Beverley also appeared to be necessary.

As regards beds for long stay or chronic cases, the existing provision in the various Public Assistance Institutions was neither adequate nor satisfactory, and the provision of between 300 and 400 beds in Beverley and Driffield was recommended.

For infectious diseases, experience in recent years had shown a constantly decreasing demand for available beds, partly on account of the generally lessened incidence of infectious diseases, especially of diphtheria, and partly due to the increasing number of cases of scarlet fever being nursed in their own homes, and it was felt that if arrangements could be made for cases of this nature to be admitted to the Infectious Diseases Hospitals of the various neighbouring authorities, the accommodation at the Driffield Infectious Diseases Hospital could be vacated and the beds thus made available used for the accommodation of cases of pulmonary tuberculosis. As a result of action of this nature (provided that nursing staff were available), the beds for pulmonary tuberculosis cases would be increased from 49 to 110. The

balance of beds needed for cases of bone and joint disease and for thoracic surgery would continue to be provided in special hospitals outside the County.

After consideration of these matters, as a general policy it was agreed that if possible the Beverley and Driffield Emergency Hospitals should be taken over for County purposes to accommodate acute and chronic sick, that the chronic sick accommodation in the various Public Assistance Institutions should be closed and that the Driffield Infectious Diseases Hospital should be made available for cases of pulmonary tuberculosis.

The discussion with the Ministry of Health was unfortunately delayed and did not take place until after the period with which this report deals, but it eventually transpired that the Ministry was as yet not prepared to release the Beverley Emergency Hospital from the E.M.S. Scheme, and as a consequence the following arrangements were finally approved:—

- (1) East Riding residents were once more to be admitted to the Beverley Emergency Hospital.
- (2) The Driffield Emergency Hospital was to be taken over as a Public Assistance Hospital pending the final removal of the "house" patients when it would be appropriated as a Public Health Hospital.
- (3) The sick cases in the various Public Assistance Institutions were to be accommodated at Driffield and the various sick wards in the Institutions eventually closed.
- (4) Providing satisfactory arrangements could be made with neighbouring Authorities and that the various Urban and Rural District Councils agreed to these arrangements, the Driffield Infectious Diseases Hospital was to be used for the accommodation of cases of pulmonary tuberculosis and the Shiptonthorpe Small-pox Hospital was to be closed.

Some time will elapse before these arrangements can be finally made operative. It is not anticipated that the proposed alterations in the administration of the hospital service as envisaged by the National Health Service arrangements will affect these developments as the Hospital Survey for the Hospital Services of the Yorkshire Area published towards the end of 1945 appears to make recommendations on lines generally similar to those which have been adopted. The main stumbling block to any advance is the question of obtaining adequate nursing and domestic staff. Throughout the year the staffing problem has caused considerable difficulty and worry, and fifty per cent. of the much needed sanatorium beds at Raywell have been put out of action for this reason and there is every evidence that these difficulties are now extending to general hospitals.

REGISTRATION OF NURSING HOMES.

One certificate of Registration was surrendered and one issued during the year. At the end of the year, there were six Homes registered, providing beds as follows:—

Medical and Surgical	42
Maternity	15

Five hundred and forty-five patients were admitted to the Homes during the year, 276 of whom were maternity cases, whilst 60 were medical, 201 surgical, 5 convalescent and chronic, and 3 others.

Exemption from registration has again been granted to three local Voluntary Hospitals and one Nursing Home which are not carried on for gain.

MATERNITY AND CHILD WELFARE SERVICES.

The area covered by these services includes the whole County with the exception of the Boroughs of Beverley and Bridlington, but in both these areas the County administers the domiciliary midwifery work.

ANTE-NATAL CARE.

An additional ante-natal clinic was opened at Brough in March, 1945. At this clinic and the clinic at Hessle 37 sessions have been held, and 409 attendances made by 130 patients. Ante-Natal Clinics were also in operation at "The Avenue" Hospital, Bridlington, Driffeld Maternity Home, Westwood Maternity Home, and Westow Croft Maternity Home, the majority of women attending these clinics being those who had booked beds in the respective institutions for their confinements. For the remainder of the County, in respect of those women who had not booked a doctor for their confinements, ante-natal care was carried out by County Midwives and District Nurse Midwives with facilities to use the general practitioner scheme whereby each patient can obtain two medical examinations by her own doctor.

The number of women in the administrative maternity and child welfare area who received ante-natal care through the County Scheme was as follows:—

At Ante-Natal Clinics	563
By private Medical Practitioners	279
	<hr/>
Total	842
	<hr/>

There is room for much further improvement, and steps are being taken to open further ante-natal Clinics as soon as the staffing position allows.

The services of consultant obstetricians for special ante-natal examinations, are available free of charge to the patient in respect of all patients who have booked a bed at a County Maternity Institution or have booked a County Midwife or

District Nurse Midwife either as a midwife or as a maternity nurse. Similar facilities exist in respect of X-ray examinations. Consultant advice was sought on behalf of 10 cases and X-ray examination carried out in 7 cases.

Dental treatment, including the supply of dentures, is available through arrangements made with private dental surgeons, the patient being re-charged for the cost according to her means. This service also extends to mothers who are breast feeding their infants.

During the year 14 expectant and 16 nursing mothers received dental treatment through this scheme.

MIDWIVES.

One hundred and eleven midwives notified their intention to practise in the East Riding during the year 1945. At the end of the year, there were only 72 midwives in practice, 18 of whom were in private practice, 12 were employed by Voluntary Nursing Associations, 17 were Domiciliary County Midwives, and 25 were employed in Institutions.

The year has again proved to be a difficult one owing to the continued shortage of midwives, and the finding of suitable housing accommodation for such midwives as are available has now become a problem of major importance. Nevertheless the staffing position has improved slightly and the "Rushcliffe" conditions as regards the optimum number of cases to be attended, off duty periods, etc., are now fairly generally applicable.

Despite difficulties, arrangements were continued for the sending of midwives for training in the administration of gas and air analgesia, and by the end of the year 10 out of the 17 County Midwives held the necessary certificate.

Due to the relaxation of the Central Midwives Board's rule regarding the qualification of the additional person who had to be present when a midwife administered gas and air, it has at last been possible to extend this service more and more to women living in the rural areas and 67 domiciliary cases were given gas and air during the year. This figure admittedly represents as yet only a small proportion of the total domiciliary confinements, but there is no doubt about the popularity of this facility and I am certain that succeeding years will see the number of administrations continually increase, especially now that several of the various District Nursing Associations carrying out midwifery work for the Council are arranging for their nurses to obtain the necessary qualification and are purchasing the required apparatus.

The County Council has approved the provision of sphygmomanometers and stethoscopes for the County District Midwives to enable them to carry out more accurate blood pressure examinations on their patients.

The following table shows the total number of cases attended during the year by 77 midwives from whom returns were received:—

No. of Cases.	Midwives residing outside the County.	Midwives employed in Institutions.	Midwives employed by Nursing Associations (inc. reliefs).	County Midwives (inc. temporary relief Midwives).	Private Practising Midwives.	Total.
0	1	5	1	—	2	9
1—4	2	2	—	—	2	6
5—9	1	1	2	—	3	7
10—19	—	2	2	1	1	6
20—29	—	3	4	1	1	9
30—39	—	1	4	4	—	9
40—49	—	2	2	7	—	11
50—59	—	2	—	2	1	5
60—69	—	2	—	2	—	4
70—79	—	2	1	2	—	5
80—89	—	2	—	—	—	2
90—99	—	1	—	—	—	1
100 and over	—	3	—	—	—	3

The work of the County Midwives during 1945 is summarised in the following table:—

District.	Ante-Natal Visits.	Nursing Visits.	Number of Bookings.	Number of Confinements attended.
Barlby	1006	1086	78	63
Beverley No. 1	395	837	74	47
Beverley No. 2	136	594	43	39
Burton Fleming	354	631	46	38
Cottingham and Relief Midwife	323	1120	48	65
Driffield No. 1	385	1050	71	64
Driffield No. 2	258	631	33	26
Hedon	272	502	47	31
Hessle No. 1	363	771	82	48
Hessle No. 2	253	639	42	38
Howden	352	878	40	46
Market Weighton	311	893	55	50
Norton	719	675	65	50
Pocklington	356	733	61	48
Skirlaugh	182	589	44	41
Withernsea No. 1	485	1278	95	69
Withernsea No. 2	234	760	55	42
Relief Midwife No. 1 ...	137	745	24	40
Relief Midwife No. 2 ...	105	489	7	29
Totals	6626	14901	1010	874

There has been no change in the usual grants payable to the 12 District Nursing Associations for the midwifery work which they carry out on behalf of the County Council. The Flamborough Nursing Association closed down on 30th November, 1945, and, as from that date, the midwifery work in the village has been undertaken by the Council's midwife for the Burton Fleming area.

Details of the midwifery cases attended by the District Nurses employed by these Associations are as follows:—

Nursing Association.	Ante-Natal Visits.	Nursing Visits.	Number of Bookings.	Number of Confinements attended.
Anlaby, Kirkella and Willerby No. 1	127	289	12	17
do. No. 2	390	626	57	35
Bridlington	705	1255	97	70
Dalton Holme	117	512	32	30
Elloughton and Welton	175	685	44	30
Escrick	274	678	47	42
Ferriby and Swanland	223	498	22	25
Filey	213	568	28	32
Flamborough	28	33	7	2
Ganton	157	319	16	16
Hornsea	168	697	44	40
North Cave	603	742	42	45
Rowley	162	458	33	30
Westow	64	392	17	24
Totals	3406	7752	498	438

One thousand seven hundred and eighty-one births were attended by midwives with no doctor in attendance, or 56% of the total births registered, which is a slight decrease on the figure for the previous year.

Statutory notices under the Rules of the Central Midwives Board were received as follows:—

	Private Practising Midwives.	Midwives in Institutions.	County Midwives.	Nursing Association Midwives.	Total.
Sending for medical help	3	120	231	55	409
Notification of death ...	—	8	4	—	12
Notification of stillbirth	—	7	13	3	23
Laying out dead body	—	4	2	1	7
Liability to be a source of infection	1	3	2	3	9
Artificial feeding	—	8	14	12	34

The number of medical help forms received from midwives was equivalent to 23% of the cases which they attended as midwives, compared with 19% in the previous year.

MATERNITY HOMES AND ANTE-NATAL AND POST-NATAL HOSTELS.

Slow progress has been made in implementing the scheme for maternity accommodation referred to in my last report. The continued delays in providing the much needed accommodation at Beverley for the South of the County made it necessary to provide 8 beds on an "emergency" basis at the Beverley Emergency Hospital, the accommodation provided being known as the Westwood Maternity Home. These beds were made available on 1st March, 1945, and later four more beds were provided. These twelve beds have been fully occupied, and it is hoped that the time will not long be delayed before the permanent provision of 20 beds becomes available.

As from 1st October, 1945, the Westow Croft Emergency Maternity Home was taken over as a County Maternity Home. Although officially providing 24 beds, it is intended that when certain alterations have been effected about 20 beds will be available in the home. An arrangement exists with the North Riding County Council for that Authority to have the use of 10 beds, and the Ministry of Health still claims the use of four beds for the confinement accommodation of ex-Service women admitted to the Mothers Hostels at Newstead House and Highfield House near Norton.

The necessity for additional nursery accommodation at "The Avenue" Hospital at Bridlington resulted in a ward being temporarily converted for this purpose, and this, together with other changes affecting the ante-natal section, reduced the number of lying-in beds from 31 to 28. This hospital has in addition two "general" wards providing accommodation for 16 chronic long stay cases, a puerperal pyrexia ward with 8 beds, and towards the end of the year arrangements were being made for the provision of an eight-bedded Mothers' and Babies' Hostel.

The closing down through lack of staff of the small maternity home in Hessle, maintained by the Hessle Nursing Association, led to consideration being given to the provision of additional maternity accommodation in the Humber Bank area, and the County Council is hoping to obtain some very suitable property in North Ferriby which will be easily convertible into a maternity home.

At the end of the year the number of maternity beds available for East Riding residents was as follows:—

"The Avenue" Hospital, Bridlington ...	28 beds.
Westwood Maternity Home, Beverley ...	12 beds.
Driffield Maternity Home	12 beds.
Westow Croft Maternity Home	8 beds.

Pending the provision of the additional accommodation approved, use was still being made of the two maternity beds at the Driffield Public Assistance Institution and the eight beds at the Howden Public Assistance Institution.

During the year, 1,101 County residents were admitted to beds in the County Maternity Institutions, representing 34% of registered births as compared with 30% of the registered births for 1944.

The need for ante-natal hostel accommodation for evacuated expectant mothers ceased to be required as the year progressed and the Emergency Ante-Natal Hostel at Stamford Bridge was eventually closed on 30th September, 1945. Arrangements were made for the needs of East Riding women to be provided for at "The Avenue" Hospital at Bridlington. On the other hand, the need for ante-natal and post-natal hostel accommodation for ex-Service women continued to increase, and at the request of the Ministry of Health, Highfield House, which is adjacent to Newstead House at Norton, was taken over for this purpose, and these two hostels now provide 40 beds for such women.

The following are details of the work done in the various institutions during 1945:—

COUNTY MATERNITY HOMES.

	The "Avenue" Hospital	Driffield Maternity Home.	Westwood Maternity Home.	Westow* Croft Mat. Home.
Number of maternity beds	28	12	12	24
Total number of admissions	550	188	189	61
Number of cases delivered by:—				
(i) midwives	387	178	112	46
(ii) doctors	99	7	50	15
Number of cases admitted for ante-natal reasons	81	1	22	3
Number of cases of puerperal pyrexia	Nil	Nil	Nil	1
Number of maternal deaths	4	1	1	Nil
Number of stillbirths	14	1	10	1
Number of infant deaths	16	4	5	Nil

*Figures for three months ended 31st December, 1945.

EMERGENCY MATERNITY HOMES.

	Westow Croft.*
Number of beds	24
Admissions:—	
County Residents	72
Evacuated Mothers	64
Ex-Service Women	46
Non-County Residents	38
Total	220
Number of women delivered by:—	
(i) midwives	157
(ii) doctors	63
Number of cases of puerperal pyrexia	—
Number of maternal deaths	—
Number of stillbirths	6
Number of infant deaths	2

*Figures for nine months ended 30th September, 1945.

PUBLIC ASSISTANCE INSTITUTIONS.

	Driffield.	Howden.
Number of maternity beds	2	8
Number admitted	4	73
Number of cases delivered by :—		
(i) midwives	3	56
(ii) doctors	—	17
Number of cases of puerperal pyrexia	—	—
Number of maternal deaths	—	—
Number of stillbirths	—	2
Number of infant deaths	—	2

Eighteen abnormal midwifery cases were sent to other hospitals as follows:—

York Maternity Hospital	14
City of York General Hospital	1
Scarborough Hospital	2
Greystones Maternity Home, Cottingham ...	1

EMERGENCY ANTE-NATAL HOSTELS.

	Newstead House.	Stamford Bridge Hostel.
Number of beds	16	20
Admissions :—		
County Residents	—	19
Evacuated Mothers	—	56
Ex-Service Women	66	—
Non-County Residents	—	—
Totals	66	75

CONSULTANT SERVICE.

Arrangements exist whereby general practitioners can call for consultant help in domiciliary cases during pregnancy, confinement or the lying-in period from consultant obstetricians residing in Hull, Scarborough and York, and they were called out on 10 occasions during the year.

Arrangements have also been made for the use of Mobile Blood Transfusion Units for domiciliary cases. These units are stationed in Hull and Scarborough, and the latter was called out to one case in the County.

HOME HELPS.

The continuation of a service of Home Helps has proved to be increasingly difficult, and at the end of the year only four women giving part-time service were on the panel arranged by the Council. In an attempt to help the position, the Council has authorised the appointment of two whole-time Home Helps, and one of these vacancies was filled for a few months during the year, but by the end of the year both

posts were vacant. The four women available on the panel attended 13 cases during the year and two women were attended by the whole-time Home Help.

MATERNAL MORTALITY.

There were eight maternal deaths in the County during the year, all of which were ascribed to puerperal causes other than sepsis. The maternal mortality rate was 2.57 per 1,000 live births, whilst that for England and Wales was 1.79.

The following table gives the mortality rate for the County over a series of years:—

Year.	Puerperal Sepsis.		Other Puerperal causes		All Causes.	
	Deaths.	Rate per 1000 births.	Deaths.	Rate per 1000 births.	Total Deaths.	Rate per 1000 births.
1929	5	1.76	11	3.89	16	5.65
1930	2	.74	7	2.61	9	3.35
1931	5	1.90	11	4.17	16	6.07
1932	1	.39	3	1.18	4	1.58
1933	2	.80	9	3.62	11	4.42
1934	7	2.74	11	4.30	18	7.04
1935	3	1.21	11	4.44	14	5.66
1936	1	.39	7	2.72	8	3.11
1937	1	.38	6	2.26	7	2.63
1938	2	.71	11	3.93	13	4.64
1939	1	.35	3	1.05	4	1.40
1940	2	.71	6	2.13	8	2.84
1941	7	2.30	5	1.65	12	3.95
1942	2	.60	5	1.50	7	2.11
1943	—	—	2	0.63	2	0.63
1944	2	.56	6	1.68	8	2.25
1945	—	—	8	2.57	8	2.57

Confidential reports were sent to the Ministry of Health on eight maternal deaths, three of which occurred in the areas of the Beverley (2) and Bridlington (1) Welfare Councils.

CONCEPTION CONTROL.

In certain instances it is essential on account of a woman's health that she should not bear any more children. Under these circumstances it is possible for arrangements to be made for her to receive appropriate advice, and arrangements continued in operation for East Riding residents to be seen and advised at the appropriate Clinics held at Hull and York. Four women paid visits to the Hull Clinic.

INFANT WELFARE CENTRES.

New Centres have been opened at Dunnington, Fulford, Hutton Cranswick and South Cave (County Council), and Aldbrough, Brandesburton and North Cave (British Red Cross Society).

Particulars of the work carried out during the year at the Centres in the County are given in the following table:—

Centre.	Number who attended.		Attendances.	
	Children under one.	Children between one and five.	Total.	Average per session.
Aldbrough	7	9	64	8
Anlaby	38	76	496	38
Barlby	40	107	632	13
Bilton	14	114	397	31
Bishop Burton	2	15	140	6
Brandesburton	6	20	87	9
Brough	35	107	986	39
Cottingham	31	118	1462	64
Driffield	67	79	758	29
Dunnington	14	39	172	17
Filey	40	57	1107	23
Flamborough	10	34	139	8
Flixton	9	24	231	18
Fulford	13	20	47	23
Hessle	77	182	1712	68
Hornsea	33	78	432	36
Howden	8	40	158	13
Hunmanby	17	46	492	20
Hutton Cranswick	15	6	42	10
Leven	4	22	100	9
Long Riston	13	20	143	11
Market Weighton	5	31	334	17
North Cave	15	32	336	15
Norton	40	75	508	21
Pocklington	29	51	388	16
Preston	25	89	433	31
Seaton	5	17	126	10
Sherburn	22	48	341	31
South Cave	24	38	229	21
Walkington	3	20	309	13
Willerby	30	54	854	36
Withernsea	47	104	545	21
Totals	738	1772	14200	25

ORTHOPAEDIC TREATMENT.

There has been no change during the year in the arrangements for the out-patient treatment of children crippled by tuberculosis or other causes. Eleven children were sent for treatment to the Adela Shaw Orthopædic Hospital, Kirbymoorside, one being admitted under the Maternity and Child Welfare Scheme, and ten through the Tuberculosis Scheme.

The Visiting Orthopædic Surgeon examined 95 East Riding patients at the Clinics at Driffield, Malton, Scarborough and York. These patients, of whom 13 attended for the first time, paid 207 visits to the Clinics.

Twenty-five adult patients were sent to Out-County Institutions for the treatment of bone and joint tuberculosis.

CARE OF PREMATURE INFANTS.

In order to obtain information regarding premature infants, arrangements are made for special attention to be drawn on the notification of birth cards to any infant when birth-weight is less than $5\frac{1}{2}$ lbs. and Hospitals report on all premature infants on discharge, so that they can be rapidly followed up by Health Visitors.

To improve the facilities for the hospital treatment of premature infants, the County Council in 1944 approved the special provision of a six-cot premature infant unit at "The Avenue" Hospital, Bridlington. Unfortunately the provision of these facilities was held up owing to the Ministry of Health not being able to grant the necessary priorities, and although the difficulty has now been overcome it has not yet been possible to provide these cots.

Arrangements are made for suitable equipment for the home nursing of premature infants to be loaned from the Public Health Department, and practitioners can obtain the services of a paediatrician on request. This paediatrician is also available for consultation upon infants born in County Maternity Institutions.

During the year, 112 babies were notified on birth cards as being less than $5\frac{1}{2}$ lbs. at birth. Of these, 46 were born at their own homes and 66 in maternity homes. Of those born at home, 4 were stillborn, and of the others, two died within 24 hours of birth and the remainder were still living at the end of a month.

Of those born in maternity homes, fifteen were stillborn, seven died within 24 hours of birth and 43 were living at the end of a month. The remaining child died within two days of birth.

These figures refer to the births in the welfare area of the County and indicate a total number of 10 deaths in the

first month of life. The Registrar General's returns, however, show a total of 19 deaths of infants accredited to prematurity for this area and 28 deaths for the administrative county, including the Welfare Authorities of Beverley and Bridlington.

TREATMENT OF MINOR AILMENTS.

Eleven children under school age were dealt with under this head during the year. Ten children were sent to an ophthalmic surgeon on account of squint, and one was provided with a caliper.

HEALTH VISITORS.

There has been no change in the arrangements for the health visiting of children up to the age of five years.

Details of the work done by the Health Visitors is contained in the following table:—

	Year ended.	
	31.12.45.	31.12.44.
Visits to expectant mothers:		
First Visits	292	226
Subsequent Visits	264	120
Visit to infants under one year of age:		
First Visits	3055	2817
Subsequent Visits	6689	4335
Visits to children between 1 and 5 years of age	15040	10114
Visits to insanitary premises	15	10
Number of visits as Child Protection Visitors ...	207	146

CARE OF THE UNMARRIED MOTHER AND HER CHILD.

The number of illegitimate births has continued to rise and has reached a new maximum of 336 (326 live births and 10 stillbirths) for the administrative county, representing 10% of the total registered births. The work necessitated by this increase in the number of unmarried mothers has amply justified the appointment of the Special Welfare Visitor, and she has been able to help a large number of these women in various ways.

The main difficulty experienced has been helping those mothers who wish to keep their babies to obtain suitable posts, and the Public Health Committee is exploring the possibility of providing a long stay nursery for these and other young children. The Mothers and Babies Hostel at "The Avenue" Hospital is available for unmarried mothers, but the period of residence is limited to two months after the birth of the baby.

The following figures give some details of the Special Visitor's work:—

Number of cases contacted	224
Number of visits paid	930

Number of cases completed as follows:—

Returned home with child	61
Child adopted—mother returned home	27
Domestic service with child	11
Stillborn and Neo-natal deaths	8
Married (after confinement)	3
Child in Nursery and Mother in employment	10
Child in an orphanage	3
Mother and Child in Moral Welfare Home	5
Mother and child gone to friends	2
Child placed with Foster parent	1
Total	131

These cases were referred from the following sources:—

Services Hostel	57
Services Welfare Department	14
Public Assistance	5
Maternity Homes	10
Clinics and Local Nurses	21
Moral Welfare Workers	14
Women's Land Army	3
Direct Application	7

CHILD LIFE PROTECTION.

The Child Protection Visitors paid a total of 207 visits to foster mothers and children during the year, compared with 146 in 1944 and 225 in the previous year.

Number of cases on the Register at 1st January, 1945:—

(a) Children	30
(b) Foster-mothers	26

Number of children who were registered during the year
 10 |

Number of new foster-mothers who were registered during the year
 5 |

Number of children removed from the Register:—

(a) On attaining the age of 9 years	8
(b) On being transferred to the care of relatives	6
(c) On leaving the County	2
(d) On adoption	2

Number of cases under supervision at 31st December, 1945:—

(a) Children	22
(b) Foster-mothers	21

INSTITUTIONAL PROVISION FOR THE CARE OF MENTAL DEFECTIVES.

There has been no change in the provision of accommodation for mental defectives during the past year. It is anticipated that Brandesburton Institution will be de-requisitioned in 1946, when the difficulties at present experienced in obtaining vacancies for mental defectives will be overcome. During the year three vacancies were found for patients in two of the 14 institutions which have accepted

defectives from the East Riding area. There are now 178 mental defectives in these institutions.

In addition there are 14 patients in the Driffeld Public Assistance Institution, which is certified to receive mental defectives under Section 37 of the Mental Deficiency Act, 1913.

Details are shown in the following tables:—

NUMBER OF DEFECTIVES ON REGISTER AT END OF 1945.

	Male.	Female.	Total.
In Certified Institutions	85	84	169
In State Institutions	7	4	11
Under Guardianship	1	1	2
On Licence	3	9	12
Under Statutory Supervision	73	73	146
Total	169	171	340

TABLES SHOWING AGES, SEX AND CLASSIFICATION OF DEFECTIVES AT END OF 1945.

Ages.	Male.	Female.	Total.
Under 16	38	15	53
16—20	16	13	29
21—29	45	47	92
30 and over	70	96	166
Total	169	171	340

Classification.	Male.	Female.	Total.
Moral Defectives	—	1	1
Feeble-minded persons	76	98	174
Imbeciles	77	55	132
Idiots	16	17	33
Total	169	171	340

NUMBER OF CASES IN INSTITUTIONS FOR WHOM THE LOCAL AUTHORITY WAS RESPONSIBLE AT THE END OF 1945.

Institution.	Male.	Female.	Total.
Caersws Public Assistance Institution	1	—	1
*Claypenny Colony	15	6	21
Dovecot Institution	—	3	3
Driffeld Public Assistance Institution	1	13	14
East Riding Mental Hospital	6	12	18
*Hatfield Hall	—	14	14
*Howbeck House	—	2	2
Mid-Yorkshire Institution, Whixley.....	6	—	6
Royal Albert Institution	14	13	27
Stallington Hall	9	2	11
Stoke Park Colony	1	—	1
*Whittington Hall	—	27	27
*Winestead Colony	35	—	35
Moss Side State Institution	2	1	3
*Rampton State Institution	5	4	9
Total	95	97	192

*3 male and 9 female patients are on licence leave from these Institutions.

WELFARE OF THE BLIND.

The Hull and East Riding Institute for the Blind acts as the agency of the County Council in matters connected with the welfare of the blind under the Blind Persons Act, 1920, and is the medium through which workshop employment is provided in suitable cases. The total number of persons now on the East Riding blind register is 265 (138 males and 127 females) as compared with 252 (131 males and 121 females) at the time of the last report. Employment in the Blind Institute's workshops at Hull is being provided for 12 East Riding blind persons (8 men and 4 women), an increase of 3 on the previous year. The earnings of these workers are supplemented by a scale of augmentation which is uniform for all workshop employees whether from the City or from the East Riding. In addition to augmentation all workers receive a war bonus at the rate applicable to sighted manual workers in the Council's employ. Workers who can be provided with suitable employment in their own localities are recognised as Home Workers, and 7 men are at present having their earnings augmented under the Home Workers' scheme.

A scheme is in operation for the provision of financial assistance to unemployable blind persons and at the present time 157 cases are receiving grants as follows:—

Grants up to 10s. 0d. per week	26 cases.
Grants of amounts over 10s. 0d. per week but not more than 20s. 0d. per week	42 cases.
Grants of amounts over 20s. 0d. per week but not more than 30s. 0d. per week	68 cases.
Grants of more than 30s. 0d. per week	21 cases.

The total annual cost is £8,461 14s. 0d. As a general rule financial assistance is granted so as to bring the incomes of blind persons with no dependants up to 32/6 per week, the cases of blind persons with dependants being dealt with on their merits. The whole of the cases in receipt of domiciliary assistance are reviewed at regular intervals by the Blind Persons Sub-Committee.

Arrangements have been made for a blind child to be admitted to a Sunshine Home of the National Institute for the Blind.

Welfare work amongst the East Riding blind and the supervision of Home Workers is carried out by a Lady Visitor employed by the Hull Blind Institute under financial arrangements made with the Council.

Section 3.—Sanitary Circumstances of the Area.

WATER SUPPLIES, SEWERAGE AND SEWAGE DISPOSAL.

Since the Rural Water Supplies and Sewerage Act, 1944, became law, the Rural District Councils have been actively engaged in preparing schemes for the provision of sewerage and sewage disposal facilities for the majority of the villages in the County, and for the extension of water mains and the improvement of water supplies. It is a requirement of the Act that before schemes are submitted to the Minister of Health, particulars must be forwarded to the County Council to enable them to make observations thereon, as the County Council will have to contribute to the expenses incurred in carrying out the proposals when the Minister undertakes to make a contribution.

The County Council engaged Mr. A. H. S. Waters, Consulting Engineer, Birmingham, to advise on the schemes put forward by the District Councils. Conferences between representatives of the County Council and the District Councils were held to consider recommendations by Mr. Waters respecting co-ordination of action in connection with various proposals, in the interests of efficiency and the general public health of the County.

One Ministry of Health Public Enquiry was held during the year, on the 3rd July, into the application of the Bridlington Corporation for consent to borrow (a) £48,661 for the purchase of the Wilsthorpe Estate for the purpose of sewage disposal, and (b) £382,500 for the purpose of carrying out works of sewerage and sewage disposal.

The presence of large numbers of prisoners of war in camps on the Wolds in the North of the County made necessary the careful supervision of the sewage disposal arrangements so that water supplies from the chalk areas would not be polluted. Water undertakers "stepped up" chlorination measures, additional samples of water were taken and no difficulties were experienced as a result of the action which was taken in conjunction with the officers of the Ministry of Health and the District Councils.

A start was made in some districts to carry out the conversion of pail closets and privies which had been held up by the conditions prevailing during the war. It is to be regretted that there are so many of these insanitary conveniences still in existence in several urban areas in the County, and it is hoped that vigorous action will be taken by the Councils of the areas in which pail closets and privies exist and where there are sewers and piped water supplies available, to remove these unsatisfactory, expensive and potentially dangerous closets.

Apart from the action being taken by the rural authorities it is now essential that the urban authorities give careful consideration to the sewerage and sewage disposal arrangements for their areas in view of the unsatisfactory conditions in this respect which exist in some districts, and the pollution of water courses which has been taking place. In very few districts will the existing sewage disposal facilities be capable of dealing effectively with the increased demands which will be put upon them by the erection of new houses with higher standards of sanitation and the provision of baths and water closets in existing properties which it is certain will take place in the near future.

The Water Act, 1945, which came into operation on the 1st October, amended and repealed much previous law and introduced new powers and many important changes in connection with water supply. It extends the powers and duties of local authorities with respect to the provision of a water supply in pipes inside a house, and enables an authority to ensure that connections are made to water mains when these are provided. In far too many cases in the past, when a district was supplied with water in mains, a large proportion of the population has been compelled to carry water from standpipes owing to the failure of owners to connect the mains to the houses, and there are a considerable number of villages in this County with piped water supplies where the majority of the inhabitants have to carry all the water they use from standpipes in the streets.

The proposed schemes for sewerage and sewage disposal for the villages, when carried out, will no doubt be followed by action on the part of the Councils to secure the maximum number of connections possible, thus extending water services to the dwellings and ensuring better conditions in every respect.

During the past few years the importance of the country and agriculture in the affairs of the nation have been brought to the notice of everyone by the events which have taken place and the drift of the population from the country to the towns has been viewed with concern. Many of the young people have been in contact with modern standards of sanitation and housing, and it can be expected that unless there is an improvement in these respects in the rural areas, it will be difficult to secure and keep the population necessary for maintaining the efficiency of agriculture and the prosperity of the country districts.

HOUSING.

During the year under review many Local Authorities commenced to put in hand schemes for the erection of the houses which are so urgently required in the area; and in many districts sites for temporary and permanent houses were being prepared at the end of the year.

In the past five years there has been a considerable influx of population to the County from the City of Hull and other target areas for enemy action, and all available accommodation has been fully occupied. Such overcrowding as probably exists, will not be alleviated until progress is made with housing construction. Many of the temporary sea-side shacks and bungalows put up for use for short periods in the summer months have been occupied as permanent dwellings. The East Coast of Yorkshire has many examples of temporary development of a most unsatisfactory character, and it is deplorable such timber structures, bus bodies and the like have had to be used as permanent dwellings, and it indicates the extremely serious shortage of houses in the area.

The Rural Housing Advisory Committee met on several occasions and a Technical Sub-Committee prepared a report on all matters connected with the carrying out of a survey of rural houses and the setting up of a "standard of fitness" for rural dwellings, which was accepted and printed for use by the Local Authorities. The Committee was asked for observations by, and submitted evidence to the Central Housing Advisory Committee on (a) the desirability of the Housing (Rural Workers) Acts being reintroduced in a modified form, (b) the utilisation of building labour in rural areas, and (c) standards of fitness for houses. At the end of the year the rural housing survey was progressing as satisfactorily as was permitted by the difficulties due to shortage of staff and pressure of other work.

HOUSING (RURAL WORKERS) ACTS.

The Housing (Rural Workers) Acts, which had been in operation since 1926, expired on the 30th September, 1945, and shortly before that date a number of property owners submitted provisional applications for assistance in respect of houses in various parts of the County. In no instance has the applicant so far followed up his provisional application with a detailed scheme of alterations, and accordingly no assistance has been granted in these cases.

Three applications for financial assistance under the Housing (Rural Workers) Acts were dealt with during the year. In the first case, which related to one cottage, a grant of £100 and a loan of £292 was made, and in the second case, which related to two cottages, a grant of £200 was approved.

The remaining application, which related to seven cottages, was found not to qualify for assistance under the Acts.

Section 4.—Inspection and Supervision of Food.

FOOD AND DRUGS ACT, 1938.

Summary of Samples taken by the Sampling Officer and Analysed during the year ended 31st March, 1946.

Baking Powder	1	Lardine, Informal	1
Butter	1	Lemon Flavouring	1
Caster Oil	2	Malt Vinegar	4
Cocoa	1	Malt Vinegar, Informal	1
Coffee	2	Milk	221
Gelatine, Granulated Edible ...	1	Milk, Informal	34
Gelatine, Informal	1	Orange Rum Cocktail	1
Glycerine	1	Pepper, Informal	1
Ground Cinnamon	1	Sponge Cake Mixture	1
Jinx, tonic mixture	1	White Pepper	1
Lard	1	Yeast	1
		Total	280

Samples adulterated or below the presumptive limits of the Sale of Milk Regulations.

Milk	26	5 samples relating to 3 convictions 5 Cautions 16 No action.
Milk, Informal	6	6 No action.

Amount of Penalties, including Costs, £17 9s. 0d.

SUPERVISION OF MILK SUPPLIES.

MILK (SPECIAL DESIGNATIONS) ORDERS.

Although there are approximately 3,000 milk producers in the East Riding only 12 "Tuberculin Tested" licences and 40 "Accredited" licences were in force at the end of the year. The number of enquiries received respecting designated milk, particularly in connection with "Tuberculin Tested" milk, indicated an increasing interest, but difficulties due to lack of labour and materials for carrying out improvements very necessary owing to the many unsatisfactory buildings, have prevented producers from proceeding with applications.

One "Accredited" licence was revoked during the year and was the subject of an appeal to the Minister of Health, but before a decision was reached the producer withdrew his appeal.

The "appointed day" under the Food and Drugs (Milk and Dairies) Act, 1944, for the transference of the powers of the County Council in connection with designated milk to the Minister of Agriculture and Fisheries, had not been fixed at the end of the year.

As during the other war years the amount of sampling of designated milk had to be restricted owing to staff difficulties, but an endeavour was made to obtain a number of samples from all licensed producers.

RESULTS OF SAMPLES OF DESIGNATED MILK.

Taken by	Grade.	Methylene Blue Test.		Bacillus Coli Examination.	
		Satisfactory.	Failed.	Satisfactory.	Failed.
County Council.	Tuberculin Tested ...	37	10	41	6
	Pre-licence	10	—	10	—
	Accredited	101	27	108	20
	Pre-licence	6	2	5	3
By other Authorities from East Riding Producers.	Tuberculin Tested ...	27	9	35	1
	Accredited	37	13	42	8
Total .....	.....	218	61	241	38

Ninety-seven samples of "Accredited" milk and two samples of "Tuberculin Tested" milk were submitted for biological examination. All the samples were negative for tubercle bacilli.

MILK-IN-SCHOOLS SCHEME.

Routine sampling of school milk supplies was carried out as far as was possible. It is hoped to increase this section of sampling work during 1946.

Samples of the raw milk supplied to the schools were taken, with the following results:—

Methylene Blue Test.		Bacillus Coli Examination.		Biological Examination.	
Passed.	Failed.	Passed.	Failed.	Passed.	Failed.
23	17	33	7	37	—

In addition, 10 samples of heat-treated milk were submitted to the Phosphatase and Methylene Blue Tests. Two samples failed to pass the Methylene Blue Test and eight samples did not satisfy the Phosphatase Test.

HEAT-TREATED MILK.

Under Defence Regulation 55G, in any area specified by the Minister of Food, no milk will be allowed to be sold by retail unless it is (1) Tuberculin Tested, (2) Accredited milk

from one herd, or (3) Heat-Treated, Pasteurised or Sterilized milk. An area will not be specified unless retail deliveries have been rationalised and there are facilities for the supply of adequate quantities of the permitted classes of milk to meet the needs of the area. No such areas have been specified in the East Riding.

The Regulation will be enforced by the County Council acting as the Food and Drugs Authority.

At present the work being carried out is restricted to the collection of samples of milk from authorised heat-treatment plants following a request from the Ministry of Food, and the examination of such samples in accordance with the Heat-Treated Milk (Prescribed Tests) Order, 1944.

Arrangements were made with the Bridlington Corporation and the Driffield Urban District Council for the appropriate officer of those Councils to take samples of the milk from plants in their areas on behalf of the County Council.

The following are the results of the samples taken during the year:—38 samples were satisfactory and 9 samples failed to pass the Methylene Blue Test; 39 samples passed the Phosphatase Test and in the case of 8 samples the reports indicated insufficient heat-treatment or the admixture of raw milk.

TUBERCULOUS MILK.

During 1945, 11 notifications were received in respect of samples of milk produced in the County area which had been found to contain tubercle bacilli. Details of the herds affected were forwarded to the Divisional Veterinary Inspector of the Ministry of Agriculture and Fisheries, and as a result of the action taken six animals were found to be affected with tuberculosis and were slaughtered. The investigations in connection with seven notifications had not been completed at the end of the year.

UNDESIGNATED MILK SUPPLIES.

Sixty-nine samples of undesignated milk were taken by the County Council and 141 samples by the District Councils, and submitted for biological examination. Two samples were positive for tubercle bacilli and in three cases the guinea pigs died before the conclusion of the test.

VETERINARY INSPECTION OF DAIRY HERDS.

I am indebted to Mr. E. Varley, Divisional Veterinary Inspector to the Ministry of Agriculture and Fisheries, for the following information:—

During the year some 3,800 inspections of dairy herds were made. The herds were found in better condition than was anticipated, but conditions under which milk was produced leaves much to be desired.

No. of animals slaughtered under the Tuberculosis Order ...	94
Tuberculosis of the udder	32
Tuberculous emaciation	17
Chronic cough and showing definite clinical signs of tuberculosis	45
Advanced cases	50
Not advanced	44
Cows in milk	79
Not in milk	12
Other bovine animals	3

There was only one case of foot and mouth disease and only one case of anthrax.

Section 5.—Prevalence of and Control over Infectious and other Diseases.

DEATHS FROM PRINCIPAL EPIDEMIC DISEASES.

The number of deaths due to the seven principal epidemic diseases, viz., smallpox, measles, scarlet fever, diphtheria, whooping cough, fever (typhoid and simple continued), and diarrhoea (under the age of two years) was 23, giving a death rate of .13 per 1,000 of the population. The figures for 1944 were 10 and .05 respectively.

ISOLATION HOSPITALS.

No change has occurred in the facilities provided for the hospital treatment of cases of infectious disease. The possibility of future changes has already been referred to under the section of this report dealing with Hospitals generally.

Admissions to the County Isolation Hospital at Driffeld during 1945 numbered 131 (104 scarlet fever, 26 diphtheria, and 1 measles), compared with 229 in 1944 and 176 in 1943. In addition, 16 patients from the Hospital area suffering from infectious diseases were admitted to other Hospitals as follows:—Hull City Infectious Diseases Hospital (4), Howden Isolation Hospital (2), Bridlington Borough Sanatorium (9), and Selby Isolation Hospital (1).

The following table gives particulars of the patients treated during the year:—

District.	Diphtheria.	Scarlet Fever.	Other Diseases.	Total.
Beverley M.B.	4	7	2	13
Driffield U.D.	8	19	—	27
Filey U.D.	—	1	—	1
Hornsea U.D.	1	4	—	5
Norton U.D.	—	2	—	2
Withernsea U.D.	—	4	—	4
Beverley R.D.	3	6	2	11
Derwent R.D.	—	8	—	8
Driffield R.D.	2	3	3	8
Holderness R.D.	—	3	1	4
Norton R.D.	1	2	—	3
Pocklington R.D.	3	47	—	50
Service Cases	6	3	2	11
Totals	28	109	10	147

SMALLPOX.

As in the previous year, no cases of this disease were reported.

MEASLES.

The number of notifications received during the year was 2,125, compared with 156 in 1944. There were no deaths from the disease.

ENTERIC FEVER.

One case of enteric fever was reported in 1945, which did not prove fatal. There has been a marked decrease in the notifications of dysentery, and no serious cases or serious outbreaks of the disease have been encountered.

SCARLET FEVER.

Two hundred and fifty-seven cases of this disease were notified during the past year, compared with 443 in the previous year. There were no deaths. The District with the highest number of notifications was the Pocklington Rural District (49).

DIPHTHERIA.

There were 50 notifications of this disease and no deaths during the year 1945, as compared with 63 notifications and two deaths in 1944.

Further progress has been made with the work of immunisation. As in previous years, the various Sanitary Districts have been responsible for the immunisation of children of school age, and the County Council has been responsible for the immunisation of children under five years of age (except for the Boroughs of Beverley and Bridlington). This is carried out mainly through the General Practitioner Scheme, but immunisation is also available in every Welfare Centre. Health Visitors were again requested to carry out

a special "drive," and to continue to "survey" their areas so far as immunisation was concerned.

The figures for immunisation of children under 5 years of age during 1945 are as follows:—

Under General Practitioner Scheme	966
At Infant Welfare Centres, etc.	551
	<hr/>
	1517
	<hr/>

"Survey" returns up to 31st December, 1945:—

Number of children under five visited	2902
Number found to be immunised	1674 (58%)
Number willing for immunisation	960 (33%)
Number refusing immunisation	268 (9%)

PUERPERAL PYREXIA.

Nine women were reported during the year to be suffering from puerperal pyrexia. Four patients were admitted to hospital for treatment, and the remaining five cases occurred at the Hull Corporation's "Greystones" Maternity Home at Cottingham.

OPHTHALMIA NEONATORUM.

Seven infants were notified as suffering from ophthalmia neonatorum during 1945. Three of the cases were admitted to Hospital for treatment. All recovered without damage to vision. The four remaining cases occurred in the area of the Beverley Welfare Council.

CEREBRO-SPINAL FEVER.

Four cases were notified, compared with 22 in the previous year, and 15 in 1943. One of the patients was admitted to Hospital, two were non-civilians, and the remaining patient was treated at home. There were no deaths.

CONTROL OF INFESTATION.

Most of the action taken regarding the control of infestation by lice is undertaken as part of the School Medical Service, and is referred to in the section of the report dealing with that service. The Health Visitors also act as School Nurses, and cases of infestation coming to their notice in schools are followed up as a routine by a visit to the children's homes, where it is explained that the infestation may possibly have affected other members of the family, and appropriate action is taken to deal with the problem. The nurses all carry supplies of "Lethane" special hair oil, which is supplied with full instructions as to the method of application. No cleansing stations have been set up in the County area, nor has there been any necessity shown for any to be established.

VACCINATION.

The total number of primary vaccinations during the past year was 1,491, and 1,188 statutory declarations of objection to vaccination were received.

Detailed returns for the year ended 31st December, 1944, which have been received from the Vaccination Officer, show that 3,748 children whose births were registered during the year were dealt with as shown below. The figures for the previous year are also given for comparison:—

	1944.	1943.
Successfully vaccinated	1895	1640
Insusceptible of vaccination	20	20
Declaration of Conscientious Objection...	1407	1234
Died unvaccinated	133	154
Postponement by Medical Certificate	20	8
Removal to other areas	118	77
Removal to places unknown	70	57
Not accounted for	85	106

TREATMENT OF CANCER.

There has been no change in the arrangements for the diagnosis and treatment of patients suffering from cancer.

The County Council has decided to participate in the work of the Yorkshire Cancer Committee with a view to the preparation of a joint scheme for the treatment of cancer in the Yorkshire area.

During the past year, seventeen patients from the East Riding were sent to the Leeds General Infirmary for in-patient treatment. Two patients also attended at Leeds for out-patient treatment.

Deaths from cancer over a series of years are given in the following table:—

Year.	Urban Districts.	Rate per 1,000 of the Population.	Rural Districts.	Rate per 1,000 of the Population.	Whole County.	Rate per 1,000 of the Population.
1939	185	1.98	134	1.36	319	1.66
1940	175	1.85	165	1.65	340	1.75
1941	159	1.76	164	1.61	323	1.68
1942	162	1.78	167	1.61	329	1.69
1943	197	2.20	140	1.37	337	1.76
1944	158	1.79	155	1.59	313	1.68
1945	232	2.60	191	2.03	423	2.30

From the figures given above it will be noticed that there has been a marked rise in the deaths from this disease.

VENEREAL DISEASES.

No changes have occurred during the year in the arrangements made for the treatment of venereal diseases. Owing to difficulties chiefly associated with the supply of building labour and materials, no further progress has been made with the proposed Clinic at Bridlington.

The County Council has agreed to bear one-half the cost of publicity undertaken by Local Authorities in connection with Venereal Diseases.

The following table gives particulars of cases treated during 1945—there is substantially no change on the figures for 1944:—

	Hull.	York.	Leeds.	Scarborough.	Goole.	Total 1945	Total 1944.
Number of persons dealt with for the first time during the year and found to be suffering from:—							
Syphilis	17	4	—	6	—	27	38
Soft Chancre	1	—	—	—	—	1	5
Gonorrhœa	31	9	—	11	—	51	56
Non-venereal and undiagnosed conditions	69	10	—	25	4	108	132
Total	118	23	—	42	4	187	231
Total number of attendances of all patients residing in the East Riding	1263	485	2	537	16	2303	2245

Regulation 33B has resulted in the names of 16 “suspected persons” being submitted on Form 1 as prescribed by the Regulations. In all but one case the information came from Specialist Medical Officers in H.M. Forces. In one case two forms were received in respect of the same suspected person, but the woman concerned left the area before “notice” could be served on her and could not be traced.

Since the appointment of the Special Welfare Visitor, this Officer has done her best to follow up cases reported in this way, and when the information has been sufficient to enable her to trace the “contact,” she has been successful in a large number of instances in persuading the “contact” to receive treatment. By close liaison with the Almoners at the various V.D. Clinics, the Visitor is also able to follow up defaulters from treatment and to persuade them to continue their course.

TUBERCULOSIS.

Again comparatively little has been accomplished with respect to the recommendations for the improvement of the Tuberculosis Service as approved by the Council and outlined in my report for 1944. This is still chiefly due to the staffing and supply difficulties which apply especially to nursing and domestic staff at Raywell Sanatorium. Here once again it must unfortunately be reported that, despite a waiting list of patients, staffing difficulties have rendered it impossible to bring all the available beds at the Sanatorium into occupation.

No facilities for miniature mass radiography have as yet become generally available in the County, but when these facilities were made available in York, the County Council agreed to refund to the York Authority the cost involved in examining East Riding residents working in factories situated in the City, and 202 East Riding residents were examined on this occasion.

The provision of maintenance allowances under the Government Scheme has been in operation since 1st August, 1943. At the end of the year, 41 patients were receiving maintenance allowances, 16 discretionary allowances, 30 fuel allowances, and 7 had received special payments.

NEW CASES AND MORTALITY.

Two hundred (145 pulmonary and 55 non-pulmonary) new cases of tuberculosis were notified during the year, and, in addition, 46 cases came to notice otherwise than by formal notification. The total number of cases notified in the County shows an increase of 54 on the figure of the previous year.

The following table shows the additions to and removals from the Registers kept by the District Medical Officers of Health:—

	Pulmonary.		Non-pulmonary.		Total.
	M.	F.	M.	F.	
Number of cases on the Registers at 31st December, 1944	381	327	168	169	1045
Added to the Registers:—					
(a) Cases notified for the first time during the year	96	66	32	35	229
(b) Un-notified cases brought to notice otherwise than by formal notification	24	17	5	1	47
Removed from the Registers on account of death, change of address, etc.	182	138	81	71	472
Number of cases on the Registers at 31st December, 1945	319	272	124	134	849

The number of deaths ascribed to all forms of tuberculosis as returned by the Registrar-General was 90, compared with 101 in 1944. Sixty-seven of the deaths were certified as due to pulmonary tuberculosis, and 23 to the other forms of disease.

The new cases notified during the year are shown in the following table, together with the deaths from tuberculosis as returned by the Registrar-General:—

Age periods.	NEW CASES.				DEATHS.			
	Pulmonary.		Non-pulmonary.		Pulmonary.		Non-pulmonary.	
	M.	F.	M.	F.	M.	F.	M.	F.
0—1	—	—	1	2	—	—	1	2
1—5	2	2	10	3	—	—	3	2
5—15	10	4	11	12	—	—	2	2
15—45	62	54	6	13	25	20	5	4
45—65	28	13	3	—	8	7	1	1
65 and upwards	7	3	—	—	7	—	—	—
Totals	109	76	31	30	40	27	12	11

The pulmonary death rate was .37 per 1,000 of the population, compared with .42 in the previous year. The non-pulmonary death rate of .13 is a slight increase on the figure for the two previous years.

The death rates per 1,000 of the population over a series of years are given below:—

PULMONARY TUBERCULOSIS.

District.	Average rate for the ten years.		1933	1939	1940	1941	1942	1943	1944	1945
	1921—1930	1931—1940								
Administrative County	0.65	0.40	0.34	0.31	0.40	0.39	0.39	0.31	0.42	0.37
Urban Districts..	0.75	0.48	0.47	0.33	0.45	0.46	0.54	0.46	0.53	0.43
Rural Districts..	0.58	0.34	0.22	0.29	0.34	0.32	0.25	0.18	0.33	0.31

OTHER FORMS OF TUBERCULOSIS.

District.	Average rate for the ten years.		1938	1939	1940	1941	1942	1943	1944	1945
	1921—1930	1931—1940								
Administrative County	0·18	0·12	0·09	0·13	0·07	0·10	0·12	0·12	0·12	0·13
Urban Districts.	0·19	0·11	0·09	0·17	0·12	0·06	0·16	0·07	0·12	0·10
Rural Districts..	0·17	0·12	0·08	0·09	0·03	0·14	0·09	0·17	0·11	0·15

INSTITUTIONAL TREATMENT.

No change has occurred in the facilities provided for the treatment of persons suffering from pulmonary tuberculosis, but considerable difficulties continue to exist in finding accommodation. The beds at Raywell Sanatorium were only partly occupied during the whole year owing to shortage of nursing and domestic staff.

Forty-one patients were admitted to the Raywell Sanatorium, compared with 75 in the previous year. In addition, 172 patients were sent to other institutions for treatment as follows:—

Fairfield Sanatorium, York	64
York City General Hospital	54
Adela Shaw Orthopædic Hospital, Kirbymoorside	12
Beverley Emergency Hospital	11
Harlow Wood Orthopædic Hospital, Mansfield	3
York County Hospital	3
Hull Sanatorium, Cottingham	3
Nayland Sanatorium	2
Victoria Hospital for Sick Children	2
Pinderfields Emergency Hospital	11
Middleton-in-Wharfedale Sanatorium	2
Leeds General Infirmary	1
Mill Hill Hospital, Huddersfield	2
Selby War Memorial Hospital	2

Of the 213 cases dealt with at these institutions, 177 were diagnosed as suffering from tuberculosis prior to admission, whilst the remaining 36 cases were admitted for observation purposes. Eleven of the latter patients were subsequently diagnosed as tuberculous. Details of the cases treated are set out in the following table:—

	No. of Patients.			No. of Observation Cases			Total.
	Adults		Children	Adults		Children	
	M.	F.		M.	F.		
In Institutions on 1/1/45	15	17	6	2	1	12	53
Admitted during the year	72	67	38	2	4	30	213
Discharged during the year	53	56	26	4	3	35	177
Died in Institutions	9	5	—	—	—	—	14
In Institutions on 31/12/45	25	23	18	—	2	7	75

The number of patients discharged from the various institutions who were definitely suffering from the disease was 149, compared with 132 in 1944. The following table shows the condition of these patients at the time of their discharge:—

Classification on Admission.	Condition at time of Discharge.								
	Quiescent.			Not Quiescent.			Died in Institutions.		
	M.	F.	C.	M.	F.	C.	M.	F.	C.
Pulmonary Tuberculosis—									
Class T.B. Minus	6	7	4	4	5	5	1	—	—
Class T.B. Plus	3	3	—	23	29	—	8	5	—
Non-Pulmonary Tuberculosis	3	2	14	14	10	3	—	—	—
Totals	12	12	18	41	44	8	9	5	—

The following table shows the results of observation of the doubtfully tuberculous cases discharged during the year :—

Classification on Admission.	Condition at time of Discharge.								
	Tuberculous.			Non-Tuberculous.			Doubtful.		
	M.	F.	C.	M.	F.	C.	M.	F.	C.
Observation for purpose of diagnosis.....	1	1	9	3	2	26	—	—	—

DISPENSARIES.

Four hundred and thirty-four new cases (including contacts) were seen at the eight Dispensaries in the County during the year, 122 of whom were found to be suffering from tuberculosis. In the previous year, the figures were 485 and 126 respectively.

The number of contacts examined was 148. In 10 cases, a diagnosis of tuberculosis was established, 110 patients were found to be free from the disease, and the remaining 28 cases are still under observation.

The following table gives details of the work done during the year, and also shows the corresponding figures for the previous year :—

	1945.	1944.
Number of attendances by patients at Dispensaries (including contacts)	1335	1290
Number of consultations with Medical Practitioners :—		
(a) Personal	38	80
(b) Other	459	420
Number of visits by Tuberculosis Officer to homes (including personal consultations)...	112	118
Number of specimens of sputum, etc. examined	481	541
Number of X-ray examinations carried out	691	644
Number of patients receiving milk at end of year	89	80
Total cost of milk supplied	£1046 3s. 0d.	£620 16s. 5d.
Pneumothorax cases :—		
Number of patients receiving refills	15	11
Number of visits paid by these patients ...	281	212
Number of patients provided with artificial light	4	9
Number of visits paid by these patients	155	248
Number of cases on Dispensary Register at end of year	740	734

TABLE I.
Cases of Infectious Disease Notified during
the year 1945.

Notifiable Disease.	Urban Districts.	Rural Districts.	Administrative County.
Scarlet Fever	114	143	257
Diphtheria (including Membranous Croup)	31	19	50
Enteric Fever	—	1	1
Puerperal Pyrexia	6	3	9
Erysipelas	21	18	39
Ophthalmia Neonatorum	5	2	7
Cerebro-Spinal Fever.....	2	2	4
Acute Polio-Encephalitis	—	1	1
Measles	1138	987	2125
Pulmonary Tuberculosis	108	90	198
Other forms of Tuberculosis...	22	41	63
Pneumonia	69	83	152
Chicken Pox	7	6	13
Whooping Cough	196	280	476
Malaria	3	7	10
Dysentery	4	25	29
Encephalitis Lethargica	1	—	1
Totals.....	1727	1708	3435

TABLE II.
Cases of Infectious Disease Notified.
Urban Districts.

DISEASE.	TOTAL CASES NOTIFIED IN EACH DISTRICT.									
	Totals.	Beverley.	Bridlington.	Driffeld.	Filey.	Haltemprice.	Hedon.	Hornsea.	Norton.	Withernsea.
Scarlet Fever.....	114	12	40	17	3	25	1	6	3	7
Diphtheria	31	4	5	7	...	14	...	1	...	...
Enteric Fever .....	...	...	...	...	...	...	...	...	...	...
Puerperal Pyrexia	6	...	...	...	...	6	...	...	...	...
Erysipelas	21	6	4	2	2	4	3	...	...	...
Ophthalmia Neonatorum...	5	4	...	...	1	...	...	...	...	...
Cerebro-spinal Fever	2	...	2	...	...	...	...	...	...	...
Measles	1138	353	146	155	114	177	47	107	24	15
Pulmonary Tuberculosis...	108	19	30	8	8	33	1	1	2	6
Other forms of Tuberculosis	22	5	6	3	1	3	...	...	2	2
Pneumonia	69	13	15	5	25	6	2	1	...	2
Chicken Pox	7	...	...	...	...	7	...	...	...	...
Whooping Cough	196	26	10	9	39	37	5	43	22	5
Malaria	3	...	1	...	2	...	...	...	...	...
Dysentery	4	1	2	...	1	...	...	...	...	...
Encephalitis Lethargica...	1	...	...	1	...	...	...	...	...	...
Totals	1727	443	261	207	196	312	59	159	53	37

TABLE III.

**Cases of Infectious Disease Notified.
Rural Districts.**

DISEASE.	TOTAL CASES NOTIFIED IN EACH DISTRICT.								
	Totals.	Beverly.	Bridlington.	Derwent.	Driffeld.	Helderness.	Howden.	Norton.	Pocklington.
Scarlet Fever.....	143	10	3	19	11	20	24	7	49
Diphtheria	19	3	...	1	3	5	...	...	7
Enteric Fever	1	...	...	...	...	1	...	...	...
Puerperal Pyrexia	3	1	...	1	...	1	...	...	...
Erysipelas	18	1	1	3	3	2	2	...	6
Ophthalmia Neonatorum...	2	...	...	1	...	1	...	...	...
Cerebro-spinal Fever	2	1	...	...	...	...	1	...	...
Acute Polio-Encephalitis..	1	...	...	...	...	...	1	...	...
Measles	987	150	40	65	151	179	208	177	17
Pulmonary Tuberculosis...	90	22	5	12	4	23	12	3	9
Other forms of Tuberculosis	41	7	3	4	6	11	2	6	2
Pneumonia	83	18	8	9	8	23	9	...	8
Chicken Pox ..	6	5	...	...	1	...	...	...	...
Whooping Cough	280	24	1	9	40	85	73	46	2
Malaria	7	2	1	...	1	2	...	...	1
Dysentery ..	25	...	11	...	14	...	...	...	...
Totals	1708	244	73	124	242	353	332	239	101

TABLE IV.

Vital Statistics of Whole District during 1945, and previous Years.

YEAR.	Estimated Population.	LIVE BIRTHS.		NET DEATHS BELONGING TO THE DISTRICT.			
		Number.	Rate.	Under 1 year of age.		At all ages.	
				Number.	Rate per 1,000 Live Births.	Number.	Rate.
1931	168,200	2635	15·7	159	60	2179	13·0
1932	170,250	2537	14·9	148	58	2086	12·3
1933	171,570	2489	14·5	142	57	2136	12·4
1934	174,250	2558	14·7	131	51	2058	11·8
1935	173,600	2475	14·3	129	52	2090	12·0
1936	177,440	2572	14·5	126	49	2208	12·4
1937	181,840	2658	14·6	140	53	2330	12·8
1938	184,630	2800	15·2	117	42	2119	11·5
1939	(a) 188,180 (b) 192,390	2803	14·9	140	49	2267	11·8
1940	194,530	2772	14·3	121	43	2456	12·6
1941	192,170	3037	15·8	156	50	2322	12·1
1942	194,680	3310	17·0	133	40	2169	11·1
1943	191,640	3181	16·6	161	51	2391	12·5
1944	185,940	3562	19·2	156	44	2409	13·1
1945	183,450	3109	17·0	135	43	2396	13·1

TABLE V.

Rainfall Returns, 1945.

Station.	Height of Rain Gauge above Sea Level.	Observer.	Total Rainfall.	Number of days on which one-tenth of an inch or more of rain fell.	Average rainfall during last 10 years.
Hempholme	11 feet.	Mr. G. Ellison	22·25	138	26·67
Osgodby	29 „	Mrs. W. V. Hescock ...	19·74	149	24·07
North Cave	35 „	Col. W. H. Carver, M.P.	23·43	144	26·36
Lowthorpe	63 „	Mr. F. K. Hawes	24·10	160	25·72
Scampston	100 „	Mr. F. Ironside	25·09	169	27·34
Dunnington	110 „	Miss E. Hildyard	27·05	183	27·34
Dalton Holme	150 „	Mr. D. F. Cullen	23·84	153	28·60
Beverley (E.R. Mental Hospital)	175 „	Medical Superintendent	21·01	173	26·24
Birdsall	304 „	Mr. James Anderson...	28·50	153	30·02

My thanks are due to the above named for their kindness in sending me the monthly returns.

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REPORT

of the

School Medical Officer

for the

Year ended the 31st December, 1945.

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REPORT OF SCHOOL MEDICAL OFFICER.

On April 1st, 1945, Parts II. and IV. of the Education Act, 1944, came into operation. The immediate effect of this was that the school medical services of the boroughs of Beverley and Bridlington came under the control of the County Council, and I should like to take this opportunity to express to the members of the school medical staffs of these two Authorities my appreciation of the manner in which they accepted this change, and my thanks for the way in which they have continued to carry on the services in those areas with as little upset as possible.

Under Section 48 (3) of the Act of 1944, Education Authorities have now a duty to secure that comprehensive facilities for free medical treatment other than domiciliary treatment are available for all pupils in attendance in schools or county colleges maintained by them. This matter has very wide implications.

As a preliminary measure the Education Committee has carefully reviewed the existing position as to the school medical services in the County, and has considered the means by which, as circumstances allow, these services can be extended to meet the obligations the Committee is now required to accept, and the County Council has approved in principle the following arrangements:—

(1) In addition to the school clinics at Beverley and Bridlington to provide twelve school clinics, primarily for the treatment of minor ailments, in Barlby, Cottingham, Driffeld, Filey, Fulford, Hedon, Hessle, Hornsea, Howden, Norton, Pocklington and Withernsea.

(2) Pending the appointment of whole-time medical staff, to staff these clinics by the part-time help of local general practitioners.

(3) In the remainder of the County when access to the proposed clinics is not possible to arrange for school children suffering from minor ailments to be referred to their family doctors for necessary treatment, payment for the service to be made by the County Council, and to arrange with District Nursing Associations for District Nurses to supervise the carrying out of the medical treatment advised.

(4) To arrange for eight ear, nose and throat clinics suitably spaced throughout the County, staffed by aural surgeons, to which all children suffering from ear, nose and throat defects will be referred for specialist examination.

(5) Similarly to arrange for eight refraction clinics, staffed by recognised Ophthalmic surgeons for the examination of children suffering from refractive errors or other defects or diseases of the eye.

(6) To arrange for the provision of spectacles by approved opticians throughout the County free of cost up to a standard to be decided.

(7) To expand the Orthopædic Clinic Services so that the Eastern and Southern parts of the County are adequately served.

(8) To expand the School Dental Service by the acquisition of additional mobile clinics and the appointment of additional whole-time dental staff, the final establishment being a senior dental officer, seven dental officers and eight dental clerk/attendants. This staff will have two fixed clinics situated at Beverley and Bridlington respectively, and seven mobile clinics to serve the schools in the rest of the County. Arrangements will be made for orthodontic work to be undertaken at the fixed clinics.

(9) To appoint consultant physicians to conduct rheumatic clinics.

(10) To appoint a speech therapist.

(11) To expand the existing arrangements for the use of Child Guidance Services provided by neighbouring Authorities and eventually to provide a service for the part of the County not adequately served by such joint arrangements.

(12) To arrange with various hospitals for the treatment of school children referred for treatment with the approval of the Committee.

A considerable time must inevitably elapse before this expanded service can become operative, especially in view of the difficulties which are inherent in providing for an area such as the East Riding where most of the population is resident in villages or small towns, and also on account of the shortage of doctors and nurses and the heavy calls on the time of those members of these professions who are available. A further complication is the continued uncertainty as to the effect the proposed National Health Service will have on these school medical services. The period with which this report deals, therefore, shows little or no advance on the position which previously obtained, but I hope to report progress in future reports. Details of the work carried out in the school medical service during 1945, as shown in the remainder of this report will, however, show that despite difficulties a considerable amount of work has been accomplished.

GENERAL STATISTICS.

Number of Primary Schools	219
Number of pupils on Primary School Registers	24,341
Average attendance	21,166
Number of Secondary Schools in the Administrative County	8
Number of pupils on Secondary School registers	3,164
Average attendance	2,816

MEDICAL INSPECTIONS.

Despite staffing difficulties it has been possible to carry out medical inspections at 216 primary schools and five secondary schools.

	East Riding.	Evacuees.	Number found to require Treatment. Observation.	
Routine examinations.				
Entrants	2364	30	1131	1428
Second age groups	2010	30		
Third age group	1109	—		
Other routine examinations	964	25		
Total routine examinations ...	6447	85		
Special examinations and re-inspections	1981	17	203	272
Total examinations ...	8428	102		

Particulars as to Dental work done are given later in this Report under Dental Defects.

NUTRITION.

Out of 6,532 children examined for classification, 93·3% were marked excellent or normal as regards nutrition, and 0·5 as "Bad." The numbers of these cases have decreased from 65 to 34 as compared with 1944, and the following-up reports of the Health Visitors and School Nurses indicate that the majority of the children concerned were delicate or in poor health, and their low nutrition standard was not due to the lack of food, or to poverty, and that in most cases the home circumstances were quite good. Supplies of Cod Liver Oil and Malt, as well as free meals and milk, are available for the children of parents whose incomes render them necessitous on the County Council's scale.

VISUAL DEFECTS AND EXTERNAL EYE DISEASE.

During the year 365 children, including 14 evacuees, were referred from the school medical inspections as needing treatment for eye defects. Comparative figures for 1944 were 396 and 44.

The number of these cases treated under the Authority's Specialist's Scheme during the year, and for whom the Authority paid wholly or partially for the treatment, was 386, of whom 4 were evacuees. Glasses were prescribed in 272 cases.

The eye conditions dealt with during the year fall into the following categories:—

Hypermetropic Astigmatism	23%
Hypermetropia	15%
Myopia	15%
Myopic Astigmatism	11%
Mixed Astigmatism	7%
Other defects	29%

During the year 23 children made 321 attendances for treatment at the Orthoptic Clinic held at the York County Hospital.

Minor eye defects were reported in the cases of 148 children. In all but 19 cases the defects had been remedied by the end of the year.

NOSE AND THROAT DEFECTS.

Comparative statistics of the children referred for treatment and who received treatment during the last nine years are given as follows:—

Year.	Number medically examined.	Number referred for treatment.	Number received operative treatment.	% who received operative treatment to No. Med. examined.
1937	8162	634	269	3.29
1938	8255	616	276	3.34
1939	7927	501	200	2.5
1940	8268	293	152	1.8
1941	7675	301	119	1.5
1942	9269	623	203	2.19
1943	8415	552	238	2.8
1944	7467	672	185	2.4
1945	8530	490	358	4.4

Of the children who received operative treatment, in 140 cases the parents made their own arrangements.

It is the considered policy of the Committee that as soon as it can be arranged no child shall receive operative treatment purely upon the recommendation of one of the school medical officers or of its own doctor, but that before an operation is decided upon the child shall be examined by an aural surgeon at an aural clinic or hospital out-patient department. During the year arrangements were made to this end through the help of the consultant and hospital authorities at the York County and Scarborough General Hospitals, and a scheme had been completed for the holding of regular consultant clinics and operative sessions at the Beverley Emergency Hospital. Steps will be taken as soon as possible to make similar arrangements with other hospitals at which ear, nose and throat work is at present carried out on behalf of the Committee.

EAR DISEASE AND DEFECTIVE HEARING.

Children with ear discharge, or who had defective hearing, reported from Routine Inspections or by School Nurses were as under, viz. :—

Ear Discharge or Defective Hearing.	Remedied.	Being Treated.
101	88	13

Children suffering from ear discharge can attend the Aural Clinics established in Beverley, Scarborough and York.

DISEASES OF THE CHEST AND DELICATE CHILDREN.

No children were reported with definite signs of Pulmonary Tuberculosis at Medical Inspections, but five children were referred to the Tuberculosis Officer for special examination. Thirty-three school children were sent to Sanatoria by the Tuberculosis Officer for observation and seven definite cases of tuberculosis were under treatment at the end of the year. During the year 225 Ultra Violet Light treatments were given to delicate children.

UNCLEANLINESS.

In their cleanliness surveys the School Nurses made 78,456 examinations. On an average each child was examined four times during the year, and the nurses found 3,971 cases of uncleanliness. This number of cases represented uncleanliness in the 1,786 individual children, i.e., 1.5% of the school population.

No cleansing stations are established and the responsibility for carrying out advice as to remedial treatment and prevention rests with parents. School Nurses supply Lethane Hair Oil to parents as required.

MINOR AILMENTS.

Children in Beverley and Bridlington attend Minor Ailments Clinics in the School Clinics in these two towns. For the rest of the County, the work in connection with the treatment of minor ailments is carried out as far as possible by the School Nurses.

Defect.	No. of cases reported.
Ringworm (head)	—
Ringworm (body)	15
Scabies	270
Impetigo	267
Other Skin Diseases	216
Minor Eye defects	139
Minor Ear defects	120
Deafness	—
Minor Injuries, Bruises, etc.	1561
Miscellaneous	515
Total	3166

SCHOOL NURSES.

In carrying out their various duties in connection with the School Medical Service the School Nurses carry out routine cleanliness surveys at least once a term and generally more often in each school. At these visits many cases of minor ailments also come to their notice. The visits are followed up, if necessary, by further visits to the school to re-examine

those children found with defects and by a visit or visits to the homes of all children needing attention.

Figures relating to this work for 1945 are as follows:—

Visits to Schools:—

Routine examinations	892
Follow-up visits	441
No. of examinations	78456

Visits to Homes:—

No. of homes visited	3836
No. of children seen on these visits	5102

Reasons for these visits:—

Uncleanliness	3200
Minor Ailments	1434
Nutrition	431
Other reasons	234

INFECTIOUS DISEASES.

Statistics regarding infectious diseases, notified by Head Teachers, are given below:—

Disease.	No. of cases reported.	
	1944.	1945.
Measles	448	1205
Mumps	124	291
Whooping Cough	297	267
Scarlet Fever	84	68
Diphtheria	4	8
Typhoid Fever	—	—
Chicken Pox	394	281
	—	—
Total	1351	2120
	—	—

The number of children excluded because they had been in contact with actual cases was 307, as against 262 in the previous year.

Two schools were closed by the School Medical Officer on account of measles for periods of two weeks and one week respectively.

EXAMINATION FOR MENTAL CONDITION.

During the year 99 children were examined and 75 were considered to be Educationally Sub-normal. Of these, 47 were considered to be suitable for admission to Special Schools, and 28 cases were classified as needing education in special classes. The remaining 24 children were considered to be ineducable and were notified to the Mental Deficiency Acts Committee as being defectives within the meaning of the Mental Deficiency Acts.

HANDICAPPED CHILDREN.

As I mentioned in my last report considerable difficulties have been experienced in obtaining an accurate assessment of the position in the County as regards the number of handicapped children in the various categories. Attention has been directed to this problem during the year, but the figures given below do not as yet present an accurate picture of the position and much more work has yet to be done on the question of final ascertainment.

Regulations issued under Section 33 of the Education Act, 1944, define the categories of pupils requiring special educational treatment, and it is the duty of the Education Authority to ascertain all children over the age of two years falling within these categories and to provide educational facilities appropriate to their various needs. This latter requirement is the one that is causing most difficulty. Provided adequate suitably qualified staff, it is fairly easy to ascertain which children are handicapped, but when the ascertainment has been completed, at the present time, it is only in the case of blind or deaf children and exceptionally in other cases, that the appropriate educational facilities can be provided. For instance, it was only possible during 1945 to find one vacancy in a special school for educationally sub-normal children, and the majority of children in this category have still to be taught as best they can in ordinary schools.

The Education Committee has given serious consideration to this problem and has included in its Development Plan for the provision of a residential school for delicate and physically handicapped children, a residential school for educationally sub-normal children (either separately or in conjunction with neighbouring Authorities) and a residential hostel for maladjusted children. So far as other residential school accommodation is concerned, it is proposed to try to extend the facilities already used in the appropriate special schools elsewhere in the County. For those educationally sub-normal children requiring education in special classes such special classes will, as the opportunity presents itself, be found in the larger schools throughout the County.

NUMBER OF HANDICAPPED CHILDREN.

Defect	At Special Schools	At Primary Schools	At Other Institutions	At no School or Institution	TOTAL
<i>Blind Children, i.e. suitable for education by methods not involving the use of sight</i>	8	—	—	1	9
<i>Partially-sighted Children, i.e. suitable for education by special methods involving the use of sight</i>	4	2	—	—	6
<i>Deaf Children, i.e. suitable for education by methods for those without naturally acquired speech</i>	15	—	—	1	16
<i>Partially Deaf Children, i.e., suitable for education by special methods involving the use of speech</i>	—	8	—	—	8
<i>Delicate Children, i.e. those who for health reasons should not be educated under normal school regime</i>	—	74	—	—	74
<i>Diabetic Children, i.e. children who through need of treatment need residential care</i>	1	3	—	—	4
<i>Educationally Sub - Normal Children, i.e. those needing a specialised form of education:—</i>					
(1) already ascertained ...	6	79	—	4	89
(2) not finally ascertained but reported	—	52	—	—	52
<i>Epileptic Children, i.e. those who should be educated in special schools</i>	1	4	—	—	5
<i>Physically Handicapped Children, i.e. those with disease or crippling defect who should be educated in special schools:—</i>					
(1) Crippled children	1	37	11	1	50
(2) Children with heart disease	—	2	—	—	2

Particulars regarding handicapped children and persons admitted to or discharged from Special Schools or Institutions during the year are as follows, together with information as to the number maintained at such schools:—

Defect.	Special School.	Number maintained.	Number admitted during year.	Number discharged during year.
Blind	York	10	1	—
do.	Sheffield	1	—	—
do.	Eastfield	1	1	—
do.	Hull	2	—	2
do.	Chorley Wood	1	—	—
do.	Henshaws Inst. for the Blind	1	—	—
Deaf	Doncaster	10	6	1
do.	Sutton	5	1	1
do.	Leeds	3	1	—
do.	Manchester	2	—	2
do.	Liverpool	—	—	—
do.	Nottingham	1	—	—
Epileptic	Liverpool	1	1	—
Educationally Sub-Normal	Knotty Ash	4	—	—
do.	Otley	1	1	1
do.	Girton	1	—	1
do.	Monyhull	1	—	1
Diabetic	Shenfield, Essex	1	1	—
Crippled	Leatherhead	1	1	—
do.	Cripplege	1	1	—
do.	London	1	—	—

Of the above, six of the blind, three of the deaf, and three crippled persons are maintained by the Secondary and Further Education Sub-Committee.

ORTHOPAEDIC AND POSTURAL DEFECTS.

The same facilities continued as in previous years for the examinations of children suffering from crippling defects at Orthopaedic Clinics held in Driffield, Malton, Scarborough and York, and for Hospital treatment at Kirbymoorside, but additional Clinic facilities are being arranged for at Beverley and Bridlington. In the year under review 234 children made 541 attendances at the Clinics and 11 admitted to the hospital mentioned above for operative treatment and, if necessary, afterwards supplied with appliances. Nine were discharged in the year. As regards after care, when a crippled child reaches a suitable age, it can be sent to a Special School for training in a trade or occupations.

CHILD GUIDANCE CLINICS.

Difficult children are sent to the York Child Guidance Clinic, at which they can be examined by a psychiatrist.

Six children were sent during the year, and the reports were helpful to their parents and the teachers.

The demand for help with the problem child appears to be increasing, and it is hoped Clinics will become available at other Centres.

REPORT OF THE CHIEF DENTAL OFFICER FOR THE YEAR 1945.

It has not been possible to visit all the elementary schools in the Riding owing to the present staff being wholly inadequate. Since 1941 only two whole-time dental officers have been employed, and even though the facilities offered for treatment have been low and an endeavour made to follow the instructions contained in a Ministry circular whereby extensive treatment was with-held in certain cases, the work has progressively fallen into arrears. Eighty-four elementary schools did not receive a dental visit, and unless the staff is considerably increased the number not visited in 1946 will be much larger.

Advantage was taken of the elementary schools autumn holiday to visit Bridlington Grammar School and Beverley Girls' High School. It is regrettable that the secondary schools have been excluded from Dental visits in the past, as many children, particularly those holding scholarships, have not had conservative treatment since attending their elementary schools. The work at those schools necessitated 148 half day sessions for treatment. It was also found advisable to offer East Riding children attending Malton Grammar School dental treatment. Withernsea and Hessle, the two other secondary schools, received routine visits.

MOBILE CLINICS.

The introduction of mobile clinics, the second of which came into use in September, has resulted in a much greater demand for conservative dentistry. There is no doubt that that the mobile clinics are wholly satisfactory. Being on or near to school premises, the time of the patient is not wasted in getting to the clinic, nor is the dentist troubled with broken appointments. Although up-to-date electrical equipment is now installed it is unfortunate that our clinics are still incomplete as no provision is made for general anæsthetics. As the Ministry does not approve of a dental officer anæsthetising and operating, the installation of a gas apparatus cannot be considered until the staff is increased.

General treatment followed that of recent years. Conservative work with a risk of failure was not attempted, diseased teeth showing extensive caries or sepsis being extracted. Extractions, permanent and deciduous were done under a local anæsthetic, regional or infiltration as conditions demanded.

ORTHODONTICS.

In three of the larger villages advantage was taken of a prolonged visit to correct simple cases of malocclusion by means of an appliance, and twelve children were successfully

treated. Otherwise treatment was carried out and malocclusion rectified as far as possible by extraction. This important branch of dentistry cannot be developed in this area under present conditions.

In April the County Authority became responsible for the dental care of the children of Beverley and Bridlington, where Mr. Beddoes and Mr. Stout, the part-time officers responsible for this work, have continued with their duties as formerly. The figures relating to this work are incorporated with those of the County elementary schools in the appropriate table at the end of the yearly report.

The following figures show the work done in the year:—

	No. Inspected.	No. found Defective.	No. Treated.	Attendances for Treatment.	Extractions. Temp. and Perm.	Half days devoted to Inspections and Treatment.
E.R.	9987	5725	3099	3682	5788 962	844
Beverley	1707	784	645	944	673 154	147
Bridlington .	2026	1121	989	1195	686 181	173
Total ...	13720	7630	4733	5821	7147 1297	1164

	Anæsthetics.		Fillings.	Other Operations.	
	Local.	General.		Temp.	Perm.
E.R.	4350	—	3160	70	355
Beverley	—	100	930	2	28
Bridlington	—	389	203	—	50
Total ...	4350	489	4293	72	433

In conclusion, my grateful thanks go to the office staff for their willing help, and to all teachers for their interest and co-operation which is necessary for the success of a school dental service.

(Signed) P. S. SPENCE, L.D.S., R.F.P.S.

CO-OPERATION WITH VOLUNTARY BODIES.

School Attendance Officers and School Nurses co-operate with Inspectors of the Society for the Prevention of Cruelty to Children and as cases may be urgent direct reports are made if and when necessary. Other cases are reported through the Chief Education Officer for visitation, and cases involving 22 children were notified in this way in 1945. In the majority of cases warnings suffice. Occasionally the Society take proceedings, and they had to take this action in two cases concerning seven children during the year. One of these was a case of long standing neglect in which the mother had been unable to appreciate repeated warnings. She and her husband were fined and six children committed to the care of the Education Authority for boarding out. The second case was against a gypsy mother of low mentality whose daughter suffered from burns. Failure to obtain proper treatment, with consequent unnecessary suffering of the child, resulted in the child being removed from the care of her mother and committed to that of the Education Authority.

CO-OPERATION WITH TEACHERS AND SCHOOL WELFARE OFFICERS.

I am again happy to record the valuable assistance given by teachers in medical inspection work. Without their help in weighing children prior to the examinations, and in preliminary testing of eye-sight, it would be impossible with present staff to keep more or less up to date with routine medical inspection work.

I am also indebted to School Welfare Officers for reporting exceptional children and cases of suspected neglect.

PROVISION OF MILK AND MEALS.

There were 36 School Canteens open at the end of the year, two of which were receiving meals from a British Restaurant. These canteens were providing meals for children from 65 schools and departments. On a selected day in October, 1945 (the latest day during the year for which a return was prepared) 4,381 children had mid-day meal in a School Canteen, this being 20·2% of the total number of the day pupils in attendance at Secondary and Primary Schools on the selected day.

With regard to the provision of milk at the latest date in the year when details were obtained (October), the position was as follows:—

Type of Supply.	No. of Suppliers.	No. of Schools Supplied.	No. of Children Supplied.	Percentage of total Supply.
Pasteurised	5	148	12918	82%
Tuberculin Tested	4	6	328	2%
Accredited	9	20	1048	6%
Undesignated	41	44	1290	9%
National Dried	—	6	186	1%

Nineteen schools in isolated areas with 746 children on the registers were without a school milk supply on the date the above figures were obtained, but arrangements were made for supplies to be available to nearly all these schools by the end of the year.

72% of the children attending primary schools and 68% of those attending secondary schools, were, in October, 1945, receiving either one-third or two-thirds of a pint of milk each day.

PHYSICAL EDUCATION.

(Report submitted by the Organiser of Physical Education.)

Throughout 1945, the aim has been to stress the need for making the work of Physical Education in the schools as enjoyable as possible whilst conforming to the basic principles of proved methods. On the whole, the teachers have appreciated the psychological fact that exercise, if distasteful to the participant, may do more harm than good.

Standard of Work. The idea that the sole purpose of physical education is to teach children to execute smartly a series of movements as set forth in a syllabus has now almost disappeared. Physical education embraces a social as well as health training. The main aim of each lesson is to create a happy, joyous spirit whilst not detracting from the execution of the work as far as a sound technique is concerned. Generally speaking, this result is being achieved in the East Riding.

It is obvious where facilities are good and Head Teachers encourage constant and systematic attention to the physical welfare of the pupils that there is a definite effective result leading to a more alert and sprightlier bearing, and a quicker response to external stimuli.

The standard of movement, on the whole, is good; but it has been noted that accuracy of execution is sometimes sacrificed, and consequently postural defects, which particular exercise is designed to eliminate, may be intensified.

Rhythmical work is attempted fairly well, but the tendency to increase the tempo of exercises in some cases prevents a full extension and flexion of the joints, which detracts from the value of the work.

More attention must be given too, to footwork, as correct foot action is the foundation of economic effort in all natural movements, and is one of the basic factors in helping to produce good posture.

Posture. The standard of posture attained by the school children varies considerably throughout the area. It will be appreciated that the natural tendency of muscles is to relax and of joints to flex, and if this tendency goes beyond the normal, then slackness of carriage ensues. If this is not counteracted by watchfulness and correction on the part of the teacher at all times, as well as during the physical education lesson, bad posture may become habitual.

A healthy bodily condition, together with a cheerful mentality, are necessary factors for producing good posture. Undoubtedly these are influenced by amenities such as good housing, suitable clothing, proper seating accommodation (here it should be noted that a desk which suits a child one month may be thoroughly unsuitable in quite a short time) and good habits, which ensure regularity of meal times, a sufficiency of rest and sleep and cleanliness. Consequently, the teacher alone cannot achieve an extremely high standard of posture.

Health Education. Doubtless because of the already heavily loaded curriculum, the time given to this important aspect of school work is not always so great as one would wish it to be. Where it has been found possible to devote 5 to 10 minutes regularly to "personal inspection" and elementary health talks, much effective benefit has been found.

Dancing. As the use of more Village Institutes and Halls is gained for the school, this subject shows marked improvement. Unfortunately, too many schools which possess a Hall of their own are so overcrowded that the Hall has still to act as one or two classrooms, and so the space available for dancing is completely lost.

Games. It is regretted that with the lack of playing fields many schools have to rely on the playground for all their games training, and some schools still suffer from poor or inadequate surfacing. Where the surfacing has permitted, most schools have now permanently marked their playgrounds; this saves much time and labour preparatory to a games period and has been universally welcomed and appreciated by the teaching staff.

In the schools which have been able to adopt a regular games lesson, it is pleasing to note variety, progressive training, and gradual acquisition of skill which leads to training in co-operative effort. Games thus played are not only a means of recreation, but a valuable mental and moral training.

Swimming. Much lies ahead to be done in the provision and improvement of swimming facilities for the East Riding schools. "All healthy children should be taught to swim" has recently become a more generally accepted fact, and it is usually most profitable for systematic swimming instruction to commence in the primary schools.

Although the standard attained was not of the highest, where swimming was taken as part of the summer physical education programme (1945), much was accomplished to make up for the almost complete loss of swimming facilities during the war years.

Teachers' Courses. It is through the medium of Teachers' Training classes that the teacher enlarges his or her knowledge of physical education and accumulates experience which helps to teach the subject in a way that makes it alive and so increases its value.

During 1945, successful Teachers' Classes have been held at the following centres:—Driffield, Withernsea, Hornsea, Pocklington, Howden, Beverley, Bridlington—attendance varying from 30—56.

It is a continual source of encouragement that the teachers in the East Riding can always be relied upon to utilise to the full all the facilities which are offered them in the way of Teachers' Courses.

In concluding this report, I should like to express thanks to the Head Teachers and Teaching Staffs throughout the area for their wholehearted support and cheerful co-operation in all matters pertaining to the welfare of children.

(Signed MARGARET A. F. RICHARDSON,
Organiser of Physical Education.

MEDICAL INSPECTION AND TREATMENT RETURNS.

YEAR ENDING 31ST DECEMBER, 1945.

TABLE I.

MEDICAL INSPECTIONS OF CHILDREN ATTENDING PUBLIC ELEMENTARY SCHOOLS.

A. Routine Medical Inspections.

(1) Number of Inspections.

E.R. : Entrants 2364 Second Age Group 2010 Third Age Group 1109
Evac. : Entrants 30 Second Age Group 30 Third Age Group nil.

(2) Number of other Routine Inspections . E.R. 964 Evac. 25
Totals E.R. 6447 Evac. 85

Total Routine Inspections, 6,532.

B. Other Inspections.

Number of Inspections, Special and Re-inspections E.R. 1981
Evac. 17

Total 1998

TABLE II.

CLASSIFICATION OF THE NUTRITION OF CHILDREN INSPECTED DURING THE YEAR IN THE ROUTINE AGE GROUPS.

Number of Children Inspected	A (Excellent)		B (Normal)		C (Slightly Sub-normal)		D (Bad)	
	No.	%	No.	%	No.	%	No.	%
	E.R. ... 6447	803	12.5	5210	80.8	400	6.2	34	.5
Evac. ... 85	12	14.7	68	80.0	5	5.3	—	—

TABLE III.

GROUP I.—TREATMENT OF MINOR AILMENTS (EXCLUDING UNCLEANLINESS).

Total number of defects or under treatment during the year under the Authority's scheme: 3166.

GROUP II.—TREATMENT FOR DEFECTIVE VISION AND SQUINT.

Under the Authority's Scheme.

Errors of refraction, including squint	386
Number of children for whom spectacles were—	
(a) Prescribed	272
(b) Obtained	250

GROUP III.—TREATMENT OF DEFECTS OF NOSE AND THROAT.

Under the Authority's Scheme.

Received Operative treatment	218
Received other forms of treatment	58
Total number treated	276

TABLE IV.

DENTAL INSPECTION AND TREATMENT.

(1) Number of children inspected by Dentist :		
(a) Routine Age Groups	13720	
(b) Specials	—	
(c) Total (Routine and Special)	13720	
(2) Number found to require treatment	7630	
(3) Number actually treated	4733	
(4) Attendances made for treatment by children	5821	
(5) Half-days devoted to—		
Inspection	120	
Treatment	1044	
	Total	1164
(6) Fillings—		
Permanent Teeth	4291	
Temporary Teeth	2	
	Total	4293
(7) Extractions—		
Permanent Teeth	1297	
Temporary Teeth	7147	
	Total	8444
(8) Administration of general anaesthetic for extractions	489	
(9) Other operations—		
Permanent Teeth	433	
Temporary Teeth	72	
	Total	505

TABLE V.

VERMINOUS CONDITIONS.

(i) Average number of visits per school made during the year by School Nurses or other authorised persons	6.5
(ii) Total number of examinations of children in the Schools by School Nurses or other authorised persons	78,456
(iii) Number of individual children found unclean	1,786
(iv) Number of individual children cleansed under Section 87 (2) and (3) of the Education Act, 1921	Nil
(v) Number of cases of which legal proceedings were taken :—	
(a) Under the Education Act, 1921	Nil
(b) Under School Attendance Bye-laws	Nil

SECONDARY SCHOOLS.

Defect.	Routine Inspection.		Special Inspection.	
	Requiring Treatment.	Put Forward for Observation.	Requiring Treatment.	Put Forward for Observation.
Vision	17	79	—	—
T. & A.	21	39	—	—
Sub Max & Cervical Glands	—	6	—	—
External Eye Disease ..	12	5	2	—
Squint	17	—	—	—
Ear Disease	1	—	1	—
Hearing	—	—	—	—
Nose & Throat	—	—	—	—
Speech	—	1	—	—
Heart & Circulation	2	1	—	—
Lungs	—	3	1	—
Nervous System	—	—	—	—
Tuberculosis	—	—	—	—
Rickets	—	—	—	—
Deformities, etc.	1	—	3	—
Inf. or Contagious Diseases	—	—	—	—
Other Diseases or Defects	8	5	—	—
Total	136	139	7	—

PRIMARY SCHOOLS.

Defect.	Routine Inspection.		Special Inspection.	
	Requiring Treatment.	Put Forward for Observation.	Requiring Treatment.	Put Forward for Observation.
Vision	281	314	85	87
T. & A.	358	361	83	80
Sub Max & Cervical Glands	8	26	1	10
External Eye Disease ..	27	36	3	2
Squint	27	24	—	2
Ear Disease	15	20	2	3
Hearing	25	18	1	—
Nose & Throat	31	90	2	—
Speech	4	34	—	—
Heart & Circulation	5	107	—	11
Lungs	19	123	2	22
Nervous System	3	10	—	23
Tuberculosis	4	6	1	3
Rickets	6	—	—	—
Deformities, etc.	18	22	8	11
Inf. or Contagious Diseases	21	3	7	—
Other Diseases or Defects	143	95	1	18
Total	995	1289	196	272

