

[Report 1949] / Medical Officer of Health and School Medical Officer of Health, East Riding of Yorkshire County Council.

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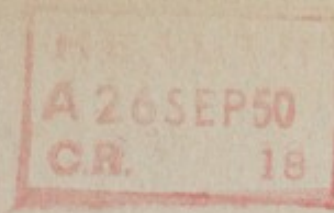
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EAST RIDING OF YORKSHIRE
COUNTY COUNCIL

ANNUAL REPORTS

OF THE

Medical Officer of Health

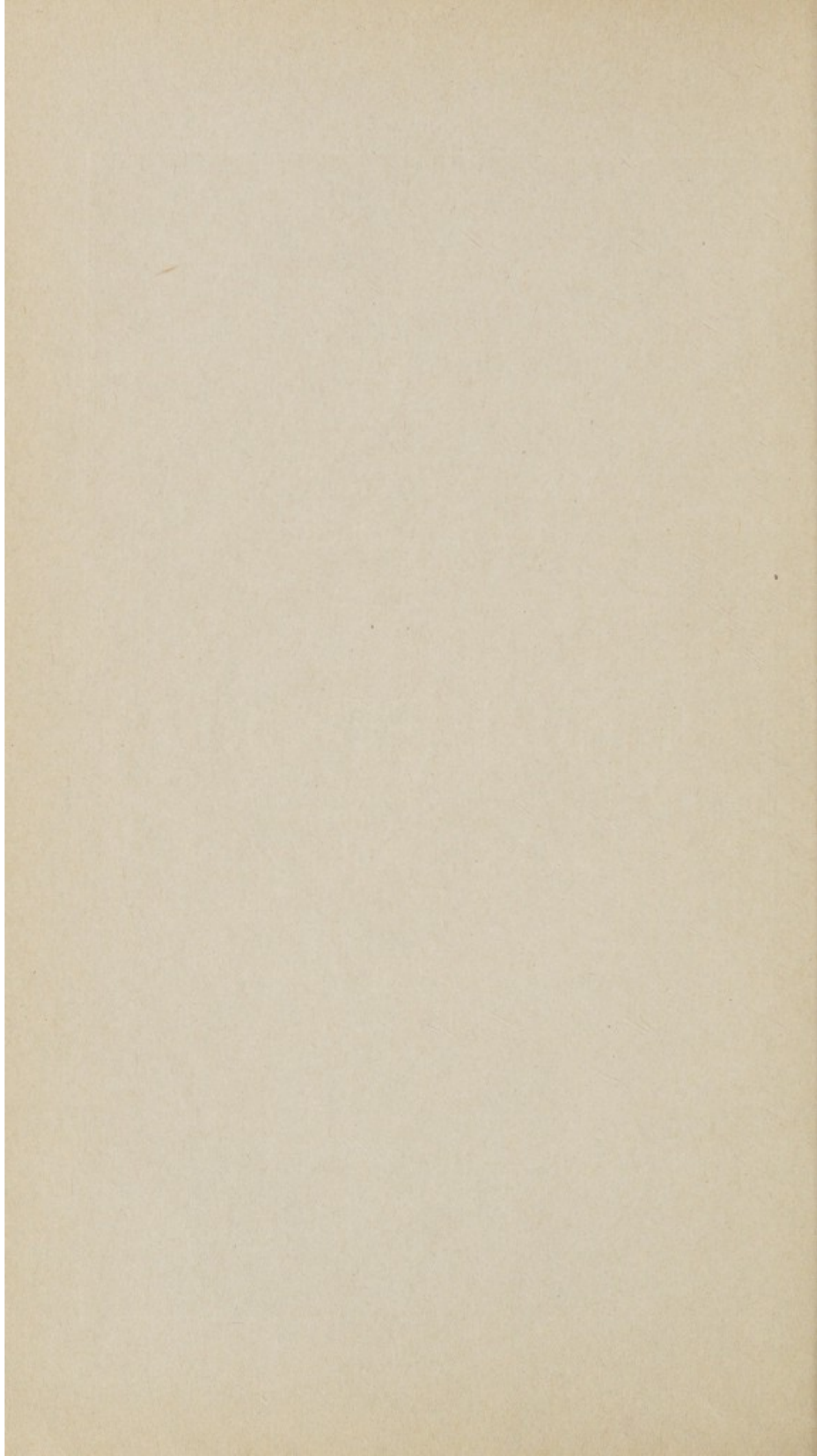
AND

School Medical Officer

For the Year 1949

Beverley :

WRIGHT & HOGGARD, PRINTERS, MINSTER PRESS.




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To the Chairman and Members of the County Council.

I have the honour to submit the Annual Reports on the General and School Health Services of the County Council for the year 1949.

The reports for 1948 dealt in some detail with the changes in the County Health Services which resulted from the coming into operation of the National Health Service Act. The reports now submitted deal with a year which has been largely one of readjustment, following upon the new arrangements which commenced on 5th July, 1948. As part of the readjustment, the preliminary stages have been entered into for the administration of the personal health services of the County on a divisional basis. For this purpose the County has been divided into four divisions, namely, the Buckrose Division comprising the Municipal Borough of Bridlington, the Urban Districts of Driffield and Filey, and the Rural Districts of Bridlington and Driffield; the Holderness Division comprising the Municipal Boroughs of Beverley and Hedon, the Urban Districts of Hornsea and Withernsea, and the Rural Districts of Beverley and Holderness; the Howdenshire Division comprising the Urban District of Norton and the Rural Districts of Derwent, Howden, Norton and Pocklington; and the Haltemprice Division, which consists of the Urban District of Haltemprice. The ultimate aim is that there will be for each of these Divisions a Divisional Medical Officer who is also the Medical Officer of Health for each of the constituent County Districts included in the Division. As a Divisional Medical Officer on the staff of the County Council, he will have the duty of administering the personal health and school medical services for which the County Council is responsible, and as a Medical Officer of Health, he will administer the environmental health services of the District Councils and it is hoped by these means to forge a very close and personal link between these services. This scheme will take some time to develop to its completion, but at the end of 1949, it was already partially operative in the Buckrose, Holderness and Howdenshire Divisions, where Divisional Medical Officers had been appointed who were also the Medical Officers of Health to some of the constituent County Districts.

The vital statistics for the year under review are generally satisfactory. The birth rate, as was expected, has fallen. It was 16.1 per 1,000 of the population as compared with a rate of 16.7 in 1948, and it is noted that the fall has been almost entirely due to a reduction in the number of births in the Urban Districts of the County. The effect of this drop in the number of births has been partially offset by a pleasing further fall in the stillbirth rate, which has fallen to 21.9 per 1,000 births as compared with a rate of 23.3 in 1948 and by a further fall in the infant mortality rate, which has dropped to the lowest figure so far recorded for the County—30 per 1,000 live births. The illegitimate birth rate has fallen to a rate comparable with that which existed in pre-war days. The general death rate has shown a rise from 10.7 in 1948 to 12.2 per 1,000 of the population for 1949, but the rate for 1948 appears to have been an abnormally low one and the present figure corresponds very closely to the average for the last thirty years. However, as each year goes by, it is found that an increasing proportion of the deaths occur in people who have reached old age, and during 1949, 68% of the deaths occurred in people who were 65 years of age or older.

The increasing proportion of old people in the population is constantly creating new problems which will not be entirely solved by the provision of Hostels by the County Council or suitable houses by District Councils. The main problem is that of dealing with the aged sick, and a reference to the section of this report dealing with the Domestic Help Service will show how large a proportion of the time of the available Helps is allocated to this group of patients. The Hostels, whether existing or proposed, will not provide facilities for those needing constant medical and nursing care. These come into the category of the chronic sick, for whom there is a general shortage of hospital bed accommodation, and thus only the more seriously ill cases tend to find beds under the aegis of the Regional Hospital Board. Many aged sick thus "fall between two stools"; they are, by reason of needing constant medical or nursing attention, unsuitable for admission to Old People's Hostels, and at the same time can only with difficulty find accommodation in hospitals. The old Public Assistance Institutions, for all their actual and imagined faults, did provide a service which

catered for this large intermediate group of the aged chronic sick and there is at present nothing to fill the gap that has been created by their abolition.

Special reference is made in the body of this report to the rapid expansion of the ambulance service since this became a free service provided by the County Council under the National Health Service Act. This expansion has been largely due to the demand for transport for patients to and from the various hospital out-patient departments at which they are attending for consultation or treatment. For a rural area such as the East Riding, where most of the large hospitals are situated at the periphery of the area to be served, it can readily be seen what a problem is raised by this development, and it is sincerely to be hoped that the health of the community will benefit in proportion from the time and money expended in providing these transport facilities.

My thanks are due to the members of the County Council and especially the members of the Health and Education Committees for their continued support which they have extended to the Health and School Medical Department. Once again, also, I want to place on record my appreciation of the manner in which all members of the staff of the Department have carried out their duties during the year. My thanks are also extended to Dr. A. Thomson for the report on the School Medical Service, and to Mr. Partridge, the County Welfare Officer, for his help in preparing the section of the report dealing with the Welfare Services.

I have the honour to be,

Your obedient Servant,

R. WATSON.

County Hall,
Beverley.

August, 1950.

STAFF OF PUBLIC HEALTH AND SCHOOL MEDICAL DEPARTMENT, 1949.

COUNTY MEDICAL OFFICER OF HEALTH AND SCHOOL MEDICAL 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 AND DEPUTY SCHOOL MEDICAL OFFICER.

A. Thomson, M.B., Ch.B., D.P.H. (from 3rd January, 1949).

DIVISIONAL MEDICAL OFFICERS AND DISTRICT SCHOOL MEDICAL OFFICERS.

Buckrose Division.

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

Holderness Division.

W. Ferguson, M.B., Ch.B., D.P.H. (from 27th June, 1949).

Howdenshire Division.

W. Wilson, M.B., B.Ch., D.P.H.

ASSISTANT MEDICAL OFFICERS AND ASSISTANT SCHOOL MEDICAL OFFICERS.

Agnes D. Collins, M.B., B.Ch., B.A.O., L.M., D.C.H., D.P.H. (from 10th October, 1949).

Winifred Malet, M.B., Ch.B., M.R.C.S., L.R.C.P.

Olive M. Sparrow, M.D., B.S. (part-time) (to 30th June, 1949).

Margaret L. Walker, M.B., B.S., D.P.H.

SENIOR DENTAL OFFICER.

P. S. Spence, L.D.S.

ASSISTANT DENTAL OFFICERS.

E. Beddoes, L.D.S. (part-time) (to 30th June, 1949).

K. H. Champlin, L.D.S.

Miss J. M. Cripps, L.D.S.

G. Fleming, L.D.S.

A. A. Jones, L.D.S. (from 12th January, 1949).

J. McCaig, L.D.S. (to 31st October, 1949).

COUNTY WELFARE OFFICER.

S. J. Partridge.

DISTRICT WELFARE OFFICERS AND AUTHORISED OFFICERS.

R. Bottomley.

J. Gray (from 1st August, 1949).

J. Liptrot (from 1st November, 1949).

V. F. Millett (to 14th August, 1949).

K. Powls.

H. S. Stead (to 22nd June, 1949).

PSYCHIATRIC SOCIAL WORKER.

Miss B. R. Villy (part-time) (from 1st May, 1949).

MENTAL HEALTH SOCIAL WORKER.

Miss S. Graham (from 3rd January, 1949).

COUNTY AMBULANCE OFFICER.

Mr. G. R. Gray.

SPEECH THERAPIST.

Miss P. L. N. Craig.

COUNTY WELFARE VISITOR.

Miss M. A. Carr.

ORGANISER OF DOMESTIC HELP SERVICE.

Mrs. E. Silvester.

COUNTY HEALTH INSPECTOR.

G. J. Peters, A.M.I.S.E., M.R.San.I., M.S.I.A. (to 11th December, 1949).

PUBLIC ANALYST.

D. J. T. Bagnall, A.C.G.F.C., F.R.I.C.

SUPERVISOR OF MIDWIVES.

Miss E. M. Bailey, S.R.N., S.C.M., H.V. Cert., Queen's Nurse.

ASSISTANT SUPERVISOR OF MIDWIVES.

Miss A. M. Turner, S.R.N., S.C.M., H.V. Cert., R.F.N., Queen's Nurse.

COUNTY DISTRICT NURSES AND MIDWIVES.

Mrs. M. Anderson, S.R.N., S.C.M. (from 1st June, 1949).
 Mrs. B. Arrandale, S.R.N. (from 6th October, 1949).
 Mrs. K. M. Barnes, S.C.M., S.E.A.N.
 Miss D. A. Beal, S.R.N., S.C.M.
 Miss E. Beal, S.C.M., S.E.A.N. (from 15th October, 1949).
 Miss P. Bennett, S.R.N., S.C.M.
 Mrs. W. L. Bingham, S.R.N., S.C.M., Q.N.
 Mrs. E. Bishop, S.C.M.
 Miss A. E. Black, S.R.N., S.C.M. (to 11th July, 1949).
 Mrs. E. Bristow, S.E.A.N.
 Mrs. I. Burrill, S.R.N., S.C.M., Q.N.
 Mrs. M. A. Charter, S.R.N., S.C.M.
 Mrs. L. Colbeck, S.C.M., S.E.A.N.
 Miss H. Cole, S.R.N., S.C.M.
 Mrs. M. A. Cracknell, S.C.M.
 Miss V. Crosland, S.R.N., S.C.M., Q.N.
 Miss D. Cullingworth, S.R.N., S.C.M., Q.N. (from 4th April, 1949).
 Miss L. Danby, S.R.N., S.C.M., Q.N.
 Miss K. A. Dawson, S.R.N., S.C.M., Q.N. (from 12th January to 16th July, 1949).
 Miss I. Derving, S.C.M., S.E.A.N. (from 15th October, 1949).
 Miss M. Dormer, S.R.N., S.C.M., Q.N. (to 22nd February, 1949).
 Miss D. Dove, S.C.M., S.E.A.N.
 Miss E. K. Fawley, S.R.N.
 Miss E. Ferrar, S.R.N., S.C.M.
 Miss F. V. Fish, S.R.N., S.C.M.
 Miss C. Fisher, S.C.M.
 Mrs. E. Foster, S.R.N., S.C.M.
 Mrs. J. E. Fraser, S.C.M., S.E.A.N.
 Mrs. B. E. Gibbs, S.C.M.
 Miss N. Grantham, S.C.M.
 Miss A. Head, S.R.N., S.C.M.
 Miss M. M. Hind, S.R.N., S.C.M.
 Miss M. E. Hodgson, S.R.N., S.C.M. (from 1st November, 1949).
 Miss E. W. Hogg, S.R.N., S.C.M. (from 9th March, 1949).
 Miss D. E. Holden, S.R.N., Q.N.
 Mrs. H. A. Holdridge, S.R.N., Q.N.
 Miss D. A. Hunter, S.R.N., S.C.M., Q.N. (to 28th February, 1949).
 Miss E. Hutchinson, S.R.N., S.C.M.
 Miss E. Ingleby, S.R.N., S.C.M., Q.N.
 Mrs. E. Jamieson, S.R.N., S.C.M. (to 30th June, 1949).
 Miss M. E. Jenkins, S.R.N., S.C.M.
 Miss E. F. Jones, S.C.M. (to 31st December, 1949).
 Mrs. M. Kirkwood, S.R.N., S.C.M.
 Mrs. D. H. Laycock, S.R.N. (to 31st May, 1949).
 Miss M. Massam, S.R.N., S.E.A.N., Q.N.
 Miss E. M. Massie, S.E.A.N.
 Miss E. M. Melbourne, S.C.M.
 Mrs. M. O. Morrison, S.C.M.
 Mrs. B. Oliver, S.R.N., S.C.M.
 Mrs. E. Ord, S.C.M. (to 7th February, 1949).
 Miss E. Pegg, S.R.N., S.C.M.
 Miss H. Phillips, S.R.N., S.C.M., Q.N. (from 2nd May, 1949).

Mrs. W. A. Place, S.C.M.
 Miss E. Pullan, S.R.N., S.C.M.
 Mrs. E. E. Scrase, S.R.N.
 Mrs. E. A. M. Seal, S.R.N., S.C.M.
 Miss E. Sellers, S.R.N. (to 30th September, 1949).
 Miss B. A. Silversides, S.R.N., S.C.M.
 Miss M. Simpson, S.R.N., S.C.M., Q.N. (from 11th April, 1949).
 Mrs. L. F. Slater, S.R.N., S.C.M.
 Mrs. N. Smith, S.C.M.
 Miss M. Spavin, S.R.N., S.C.M., Q.N.
 Mrs. G. M. Spieght, S.C.M.
 Mrs. L. E. Thorley, S.R.N.
 Miss E. Warder, S.R.N., S.C.M.
 Miss E. E. Watson, S.R.N., S.C.M. (from 3rd May, 1949).
 Mrs. H. Watson, S.R.N., S.C.M.
 Miss M. Wemyss, S.R.N., S.C.M.
 Miss M. West, S.C.M., S.E.A.N. (to 5th October, 1949).
 Miss E. E. Wilson, S.R.N., S.C.M.
 Mrs. M. Wood, S.R.N., S.C.M.

HEALTH VISITORS AND SCHOOL NURSES.

Miss M. Anderson, S.R.N., S.C.M., H.V.Cert.
 Miss B. Ashby, S.R.N., S.C.M., H.V.Cert. (to 10th September, 1949).
 Mrs. D. Barry, S.R.N., S.C.M., S.R.C.N., H.V.Cert.
 Miss E. M. Blackburn, S.R.N., S.C.M., H.V.Cert. (from 22nd August, 1949).
 Miss P. D. Bourne, S.R.N., S.C.M., H.V.Cert.
 Mrs. D. Boyes, S.R.N.
 Miss M. A. C. Briggs, S.R.N., S.C.M., H.V.Cert.
 Mrs. V. Brown, S.R.N., S.C.M., H.V.Cert.
 Miss H. Dukes, S.R.N., S.C.M., H.V.Cert.
 Miss L. Evans, S.R.N., S.C.M., R.F.N., H.V.Cert.
 Miss O. M. H. Gardam, S.R.N., S.C.M., H.V.Cert. (from 3rd October, 1949).
 Miss F. A. Hoggard, S.R.N., S.C.M.
 Miss V. A. Jenkinson, S.R.N., S.C.M., H.V.Cert.
 Miss W. M. Limbach, S.R.N., S.C.M., H.V.Cert.
 Miss H. H. G. McDonald, S.R.N., S.C.M., H.V.Cert.
 Miss N. Pinchbeck, S.R.N., S.C.M., H.V.Cert.
 Miss I. Rippon, S.R.N., S.C.M., H.V.Cert. (to 10th September, 1949).
 Miss E. M. E. Roddis, S.R.N., S.C.M., H.V.Cert.
 Miss E. Scholey, S.R.N., S.C.M., H.V.Cert. (from 1st September, 1949).
 Miss E. Smith, S.R.N., S.C.M., H.V.Cert. (to 2nd May, 1949).
 Miss J. L. Stow, S.R.N., S.C.M., H.V.Cert. (to 27th October, 1949).
 Miss A. E. Sturdy, S.R.N., S.C.M., H.V.Cert.
 Miss C. M. Taylor, S.R.N., S.C.M.
 Mrs. W. M. Wilde, S.R.N., S.C.M., H.V.Cert.

**Medical Officers of Health of the several Local Authorities
at 31st December, 1949.**

Local Authority.	Name of Medical Officer.
MUNICIPAL BOROUGHES.	
Beverley	G. Holroyd, M.R.C.S., L.R.C.P., D.P.H. (acting to 26th June, 1949). *W. Ferguson, M.B., Ch.B., D.P.H. (from 27th June, 1949).
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. (to 31st March, 1949). *E. T. Colville, M.D., B.Hy., D.P.H. (from 1st April, 1949).
Ffiley	G. A. Dibb, M.B., Ch.B. (to 31st August, 1949). *E. T. Colville, M.D., B.Hy., D.P.H. (from 1st September, 1949).
Haltemprice	J. M. Hermon, M.D.
Hornsea	L. French, M.B., B.S., M.R.C.S., L.R.C.P.
Norton	*W. Wilson, M.B., B.Ch., D.P.H.
Withernsea	F. R. Cripps, M.D., D.P.H.
RURAL DISTRICTS.	
Beverley	G. Holroyd, M.R.C.S., L.R.C.P., D.P.H. (acting to 26th June, 1949). *W. Ferguson, M.B., Ch.B., D.P.H. (from 27th June, 1949).
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. (to 31st Decem- ber, 1949).
Holderness	F. R. Cripps, M.D., D.P.H.
Howden	F. Wigglesworth, M.B., Ch.B.
Norton	*W. Wilson, M.B., B.Ch., D.P.H.
Pocklington	*W. Wilson, M.B., B.Ch., D.P.H.

*Whole-time District Medical Officer of Health.

REPORT OF THE COUNTY MEDICAL OFFICER OF HEALTH

Section 1.—Vital Statistics.

POPULATION (CIVILIAN).

Districts.	Census, 1931.	Estimated Civilian	
		1948.	1949.
Administrative County	169,287	205,900	205,593
Urban Districts	75,206	103,380	103,372
Rural Districts.....	94,081	102,520	102,221

BIRTHS AND BIRTH RATES

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

Districts.	Average rate for the ten years.		1943	1944	1945	1946	1947	1948	1949
	1921—1930	1931—1940							
Administrative County	17.9	14.8	16.6	19.2	17.0	19.2	19.4	16.7	16.1
Urban Districts..	16.6	14.4	17.6	19.4	16.9	19.5	19.6	16.1	15.0
Rural Districts...	18.8	14.9	15.7	18.9	17.0	18.9	19.2	17.3	17.2

The birth rate for the whole of England and Wales was 16.7, compared with 17.9 in the previous year.

There were 3,308 live births and 74 stillbirths registered in the County during the year, making a total of 3,382.

The number of births notified to my Office by practitioners, midwives, etc., was 3,039, whilst the Registrars in the County sent particulars of 79 births which had been registered but not notified.

ILLEGITIMATE LIVE BIRTHS.

Districts.	1942	1943	1944	1945	1946	1947	1948	1949
Administrative County	253	246	313	326	334	233	221	179
Urban Districts..	111	110	152	165	161	108	107	78
Rural Districts..	142	136	161	161	173	125	114	101

The illegitimate birth rate was .87 per 1,000 of the population, compared with 1.1 in the previous year.

The number of illegitimate live births was 5.4% of the total live births for the County.

DEATH RATES FROM ALL CAUSES (ALL AGES)

(per 1000 of the Population).

Districts.	Average rate for the ten years.		1943	1944	1945	1946	1947	1948	1949
	1921—1930	1931—1940							
Administrative County	12.2	12.3	12.5	13.0	13.1	12.1	12.0	10.7	12.2
Urban Districts..	13.2	13.0	13.8	14.3	14.0	13.0	12.9	11.4	12.6
Rural Districts..	11.6	11.6	11.3	11.7	12.1	11.3	11.2	10.0	11.7

There were 2,498 deaths registered in the County in 1949, an increase of 293 on the figure for the previous year.

The death rate was 12.2 per 1,000 of the population, compared with 10.7 in the previous year. The figure for England and Wales for the past year was 11.7, as compared with 10.8 for the year 1948.

The principal causes of death in the County were once again heart disease (769), cancer (394), and intra-cranial vascular lesions (321), these causes accounting for 60% of the total deaths.

The following table shows the figures for comparison for various causes for the years 1948 and 1949:—

Cause of Death.	1948.	1949.
Cerebro-spinal Fever	—	1
Scarlet Fever	—	—
Whooping Cough	1	—
Diphtheria	—	—
Tub. of Resp. Sys.	48	62
Other Forms of Tuberculosis	16	10
Syphilitic Disease	10	5
Influenza	8	38
Measles	1	—
Ac. Poliomyel. and Polioenceph.	—	3
Ac. Inf. Enceph.	2	1
Cancer	389	394
Diabetes	22	22
Intracranial Vascular lesions	297	321
Heart Diseases	642	769
Other dis. of circ. system	100	138
Bronchitis	67	79
Pneumonia	73	78
Other Res. Diseases	29	37
Ulcer of Stomach or Duodenum	21	18
Diarrhœa, under 2 years	5	11
Appendicitis	6	5
Other Dig've Diseases	50	55
Nephritis	45	80
Puer. and Post-abort. Sepsis	3	1
Other Maternal Causes	3	7
Premature Birth	31	17
Con. mal. birth inj. infant. dis.	41	45
Suicide	26	28
Road Traffic Accidents	22	16
Other Violent Causes	37	60
All Other Causes	210	197
All Causes	2205	2498

The following table, which sets out the deaths in grouped diseases distributed according to the various age groups shows how, with the exception of tuberculosis and, of course, congenital and infantile diseases, and to a lesser extent violence, the great majority of deaths in each group occur in people who have passed their sixty-fifth birthday:—

Age Group.	Infectious Disease (including Influenza and Syphilis).		Tuberculosis.		Cancer.		Heart and Circulatory Diseases.		Respiratory Diseases.		Intestinal Diseases.		Congenital and Infantile Diseases (including Infantile Diarrhoea).		Violence.		Other Causes.		All Causes.	
	Deaths.	%	Deaths.	%	Deaths.	%	Deaths.	%	Deaths.	%	Deaths.	%	Deaths.	%	Deaths.	%	Deaths.	%	Deaths.	%
0—	1	2.1	2	2.8	—	—	—	—	21	10.8	1	1.3	62	84.9	8	7.7	3	0.9	98	3.9
1—	3	6.3	1	1.4	—	—	—	—	2	1.0	—	—	1	1.4	7	6.8	1	0.3	15	0.6
5—	1	2.1	2	2.8	1	0.3	—	—	—	—	4	5.1	1	1.4	3	2.9	2	0.6	14	0.6
15—	4	8.3	39	54.2	15	3.8	20	1.6	10	5.3	7	8.9	5	6.9	29	27.8	35	11.5	164	6.6
45—	9	18.7	23	31.9	139	35.3	204	16.6	34	17.6	19	24.4	2	2.7	20	19.2	52	17.0	502	20.1
65—	30	62.5	5	6.9	239	60.6	1004	81.8	127	65.3	47	60.3	2	2.7	37	35.6	214	69.7	1705	68.2
Totals ...	48	—	72	—	394	—	1228	—	194	—	78	—	73	—	104	—	307	—	2498	—

The following table shows the results of the investigation of the effect of the amount of water on the rate of the reaction between hydrogen and oxygen.

Amount of water (g.)	Time taken for reaction (sec.)	Volume of gas evolved (c.c.)	Temperature (°C.)	Pressure (mm. Hg.)	Concentration of solution (M)
0	120	10	20	760	0.1
1	110	11	20	760	0.1
2	100	12	20	760	0.1
3	90	13	20	760	0.1
4	80	14	20	760	0.1
5	70	15	20	760	0.1
6	60	16	20	760	0.1
7	50	17	20	760	0.1
8	40	18	20	760	0.1
9	30	19	20	760	0.1
10	20	20	20	760	0.1

DEATHS AMONGST CHILDREN UNDER ONE YEAR.

Death rate amongst Infants per 1,000 Live Births.

Districts.	Average rate for the ten years.		1943	1944	1945	1946	1947	1948	1949
	1921—1930	1931—1940							
Administrative County	61	51	51	44	43	37	40	32	30
Urban Districts..	59	50	54	47	41	36	40	36	25
Rural Districts..	63	53	47	41	46	38	40	29	34

There were 98 deaths of children under the age of one year in 1949, as compared with 111 in 1948, and the infant mortality rate of 30 per 1,000 live births is the lowest ever recorded in the County. The previous lowest figure, viz., 32, was recorded in 1948. The rate for England and Wales for 1949 was 32, compared with 34 in 1948.

The distribution of these infant deaths between various grouped causes is shown in the following table:—

INFANT DEATHS FOR THE YEARS 1948 AND 1949.

	Urban.		Rural.		Total.	
	1948.	1949.	1948.	1949.	1948.	1949.
Infectious Diseases	—	1	2	2	2	3
Respiratory Diseases	14	10	11	11	25	21
Digestive Diseases	1	6	4	6	5	12
Prematurity	20	6	11	11	31	17
Birth Injury, Infantile Diseases and Congenital Malformations	16	13	19	21	35	34
Other Causes	9	3	4	8	13	11
Totals	60	39	51	59	111	98

INQUESTS.

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

Cause of Death.	East Riding District.	Holderness District.	Howdenshire District.	Eserick District.	Totals for 1949.	Totals for 1948.
Natural Causes ...	9	—	—	2	11	9
Accidental Death.	63	6	9	12	90	26
Suicide	17	8	—	3	28	28
Found drowned ...	5	1	—	3	9	3
Other verdicts	7	1	1	1	10	30
Totals	101	16	10	21	148	96

Section 2.—Local Health and other Services.

THE CARE OF MOTHERS AND YOUNG CHILDREN.

ANTE-NATAL CARE.

As envisaged in my report last year, there has been a steady fall in the attendances at ante-natal clinics in most areas of the County and attendances fell so low at Cottingham, Brough, Filey, Norton and Pocklington that the clinics were discontinued by the middle of the year, arrangements being made, where necessary, for ante-natal advice to be given at the appropriate Infant Welfare Centres. The general reduction in the use of this type of ante-natal service is very much to be regretted.

Ante-natal clinics continue to be held at Beverley, Driffield, Hessle and Withernsea, and in addition the Maternity Hospitals at Beverley, Bridlington and Driffield hold regular clinics for women who expect to be admitted to these hospitals for their confinements.

Statistics relating to these clinics are shown below:—

Clinic.	No. of sessions.	No. of new patients.	Total No. of women attending.	No. of attendances.	Average attendances per patient.	Average attendance per session.
Beverley	50	97	127	470	4	9
*Brough	6	1	9	30	3	5
*Cottingham	4	10	15	25	2	6
Driffield	24	46	53	129	2	5
*Filey	1	1	3	3	1	3
Hessle	29	112	139	611	4	21
*Norton	1	1	1	1	1	1
*Pocklington	3	2	2	3	1	1
Withernsea	12	26	32	88	3	7
"The Avenue" Hospital, Bridlington	88	472	571	1600	3	18
East Riding General Hospital, Driffield	100	197	264	1349	5	13
Westwood Hospital, Beverley	49	249	314	1016	4	20
Totals	367	1214	1530	5325	—	—

*Closed during the year

POST-NATAL CARE.

Post-natal clinics are held at the Westwood, East Riding General and "The Avenue" Hospitals for patients who have been confined in these institutions. Towards the end of the year, a post-natal clinic was commenced in Hessle. Facilities for post-natal examinations were made available at the Council's ante-natal and infant welfare clinics.

During the year, 379 patients attended post-natal clinics in the three hospitals and 26 were examined at the Council's clinics.

MATERNAL MORTALITY.

There were eight maternal deaths in the County during the year, one of which was ascribed to puerperal sepsis and seven to other puerperal causes. The maternal mortality rate was 2.4 per 1,000 live births, whilst that for England and Wales was .98.

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.
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
1946	2	.53	6	1.60	8	2.14
1947	1	.26	1	.26	2	0.52
1948	3	.87	3	.87	6	1.75
1949	1	.30	7	2.12	8	2.40

ANTE-NATAL AND POST-NATAL HOSTELS.

The Ante-natal and Post-natal Hostel at "The Avenue" Hospital, Bridlington, which provides accommodation for eight women and eight infants, continued to be fully occupied during the year.

The Hostel at "Highfields," Norton, with accommodation for 21 patients and administered by the County Council on behalf of the Ministry of Health, was continued for use by expectant and nursing mothers from various camps for European Volunteer Workers. The County Council had arrangements whereby beds could be allocated to East Riding residents when not required for the cases for which the Ministry accepts responsibility.

The following table shows the admissions during the year:—

	Highfield House.	"Avenue Hospital."
County Residents	10	27
Out-County Residents	8	—
European Volunteer Workers	11	—
Totals	29	27

INFANT WELFARE CENTRES.

The popularity of Infant Welfare Centres continued and total attendances have increased by over 3,000 on the previous year's figures. One thousand six hundred and thirteen children under one year of age attended the centres during the year, representing 49% of the registered live births. It is pleasing to note an increase of over 300 in the number of children between the ages of one and five years who were attending the centres. The policy of providing transport from outlying small villages to the nearest Welfare Centres has been further extended and at the end of the year these facilities existed in relation to the centres at Market Weighton, Patrington, Skirlaugh, Stamford Bridge and Riccall.

At the end of the year, 51 Infant Welfare Centres were operating, new ones having been opened at Burton Pidsea, Hedon, North Newbald, Skirlaugh and Riccall. During the year, the centre at Wawne was discontinued. The centre at Escrick was discontinued owing to the opening of the new centre in Riccall.

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

(N.B.—The symbol "V" indicates that the Centre is provided by a Voluntary Committee.)

Centre.	Frequency of Sessions.	Number who attended.		Attendances.	
		Children under one.	Children between one and five.	Total.	Average per session.
Aldbrough (V)	Every 4 wks.	6	32	218	18
Anlaby	" 2 "	65	114	958	37
Barlby	" 2 "	40	78	657	25
Beverley	Weekly	248	425	4572	93
Bilton	Every 4 wks.	17	60	453	35
Bishop Burton (V) ..	" 2 "	9	21	230	10
Brandesburton (V) ..	" 4 "	20	37	308	24
Bridlington	Twice weekly	180	374	4953	51
Brough	Every 2 wks.	39	85	1046	40
Burton Pidsea	" 4 "	7	27	139	13
Cottingham	Weekly	76	184	2076	41
Driffield	Every 2 wks.	55	84	839	32
R.A.F., Driffield (V)	" 2 "	17	27	290	12
Dunnington	" 4 "	10	22	148	11
Elvington	" 4 "	12	14	127	10
Filey	" 2 "	55	94	1209	50
Flamborough	" 2 "	16	46	610	24
Flixton	" 4 "	6	34	288	22
Fulford	Weekly	56	117	1565	32
Hedon	Every 4 wks.	31	75	455	38
Hessle	Weekly	151	164	1786	48
Holme	Every 2 wks.	20	60	529	20
Hornsea	" 2 "	51	102	984	41
Howden	" 4 "	12	34	195	15
Hunmanby	" 2 "	7	44	522	20
Hutton Cranswick ...	" 4 "	9	16	123	10
Kilham	" 4 "	8	24	196	15
R.A.F., Leconfield (V)	" 4 "	11	32	159	14
Leven	" 4 "	4	16	103	9
Long Riston (V)	" 4 "	8	26	222	17
Market Weighton ...	" 2 "	31	81	674	28
Middleton-on-the-Wolds	" 4 "	4	12	91	8
Newport	" 4 "	23	30	310	24
North Cave (V)	" 4 "	22	47	700	27
North Ferriby	" 4 "	18	39	259	20
North Newbald	" 2 "	10	24	120	20
Norton	" 2 "	17	36	303	12
Patrington	" 4 "	15	36	167	13
Pocklington	" 2 "	28	60	689	27
Preston	" 4 "	19	73	376	29
Riccall	" 4 "	14	42	202	16
R.A.F. Riccall	" 4 "	5	27	175	15
Rillington	" 4 "	10	42	248	19
Sherburn	" 4 "	17	48	398	31
Skirlaugh	" 4 "	11	6	17	17
South Cave	" 4 "	12	37	300	23
Stamford Bridge ...	" 4 "	18	58	277	25
Walkington (V)	" 4 "	7	24	167	13
Warter	" 4 "	5	20	143	12
Wawne	" 4 "	2	9	58	8
Willerby	" 2 "	27	57	538	21
Withernsea	" 2 "	52	112	735	28
Totals		1613	3388	32907	—

DENTAL CARE.

The Senior Dental Officer reports as follows:—

After one full year's work, the statistics relating to the Ante-natal Clinics are disappointing and in most areas of the County, little enthusiasm can be shown concerning the progress or appreciation of the time expended.

Pocklington and Norton Area. The Dental Officer responsible for the above clinics reported that there was no response to his efforts in persuading the few patients he saw to have dental treatment and I recommended that his visits be discontinued as the acceptance rate for his school duties demanded that all available time be spent on that work to prevent arrears.

Driffield. Mr. McCaig visited this clinic until his resignation in October. During this time, there was not one single acceptance of the County's offer to provide necessary dental treatment. On Mr. McCaig's departure, I undertook visits to this clinic personally and verified reports that the time spent could be much more profitably employed on school work. A dental practitioner holds a part-time appointment at the Driffield Hospital and facilities are available for the treatment of women being confined at the Hospital. Arrangements were made for the County Dental Service to be available in the event of any patient being unable to obtain the necessary dental treatment.

Withernsea. Twenty-nine patients were inspected and found to be in need of treatment, but only two attended for minor treatment. There appears to be adequate facilities for private dental treatment in this area and it may be necessary to discontinue regular dental visits, in which case patients in need of priority treatment will be referred by the Medical Officer.

Bridlington. Ninety-two patients were inspected at this clinic, and of the 56 requiring treatment, 14 accepted the offer of the County Council. Several cases were prepared for dentures, but none were supplied before the end of the year. The acceptance rate is indicative of the reluctance on the part of the expectant mothers to take advantage of the facilities offered.

Haltemprice and Beverley. The clinics in this area have been the most successful in the County. Clinics have been held fortnightly at Beverley and Hessle and at monthly intervals at Cottingham and Brough, until the latter two clinics were discontinued during April and June respectively. Of the 198 patients inspected, 67 received treatment, of whom 56 were made dentally fit by the end of the year.

Children under Five.

Only 336 children were presented for inspection. The majority of these were found to be in good dental condition. Eighty required treatment, and of the 71 treated, 61 were made dentally fit.

These are rather disappointing figures as every effort has been made to give publicity to this service through the Schools, School Nurses and Health Visitors, as well as individual invitations to the mothers, facilities being given for all children under school age in an area to be inspected when the dental officers are visiting the appropriate school.

Arrangements for the supply of dentures are made through firms providing this service. X-ray examination can be arranged through the Hospitals if necessary.

RETURN FOR THE YEAR 1949.

Numbers provided with dental care:—

	Examined	Needing Treatment	Treated	Made Dentally Fit
Expectant and Nursing Mothers	387	291	84	63
Children under five	336	80	71	63

Forms of dental treatment provided:—

	Extractions	Anaesthetics		Fillings	Sealings or scaling and gum treatment	Silver Nitrate treatment	Dressings	Radiographs	Dentures Provided	
		Local	General						Complete	Partial
Expectant and Nursing Mothers	206	16	35	99	25	—	2	—	7	5
Children under five	82	16	32	28	—	—	36	—	—	—

P. S. SPENCE,

Senior Dental Officer.

CARE OF PREMATURE INFANTS.

The arrangements for the supply on loan of suitable cots, equipment and clothing for the home nursing of premature infants continued as before, but very few requests have been made for these articles.

During 1949, 127 infants born to mothers normally residing in the County have been notified as weighing $5\frac{1}{2}$ lbs. or less at birth and thus presumed to be premature. Of these, 53 were born in private residences and 74 in hospitals or nursing homes.

In the County, 65 premature infants were born in private residences or private nursing homes. Of these, 11 were born in private nursing homes, two weighing less than 4 lbs. died within a week of birth, and one other infant died before it was a month old. Fifty-four infants were born in the mothers' own homes, and of these, one weighing less than 3 lbs. died soon after birth, six were removed to hospital, and of the remainder, all were living when a month old.

Information is not available as to the survival rate of those premature infants born in maternity homes and hospitals in the National Health Service.

CARE OF THE UNMARRIED MOTHER AND HER CHILD.

Although there has been a further decrease in the number of illegitimate births, the special Welfare Visitor has continued to be fully occupied and has been able to help a large number of the mothers of these children in various ways, including making arrangements for the adoption of the babies when this course of action is regarded as being advisable.

The Hostel for Mothers and Babies at "The Avenue" Hospital has been well used and greatly appreciated by the unmarried mothers. Occasional use has also been made of available beds at the Ministry of Health Hostel at "Highfield House," Norton.

Many girls have to have their babies placed for adoption owing to the lack of nursery accommodation and of foster parents. Those seeking help come from widely differing home circumstances and consequently all need different treatment and individual consideration.

Details of the work done are as follows:—

Mothers returned home with child	44
Babies placed for adoption (Mother returned home)	26
Mother placed in residential work with baby	4
Babies stillborn (Mother returned home)	2
Babies placed in residential nursery or foster home	5
Mothers returned home with babies and later married putative father	4
Cases completed	85
Number of cases contacted	99
Number of visits paid	1072

These cases were referred from the following sources:—

Local doctors and nurses	38
Moral Welfare Workers	18
Maternity Homes	16
Direct application	8
Other sources	19
	—
	99
	—

All arrangements for adoption are made by the Welfare Visitor in collaboration with the Children's Officer.

CHILD LIFE PROTECTION.

With the coming into operation of the Children Act on 5th July, 1948, the responsibilities for the duties previously carried out by the Health Committee passed to the Children's Committee, but the Health Visitors have continued to act as Child Protection Visitors. During the year, they paid 214 visits to foster mothers and children.

HEALTH VISITING.

At the end of the year, there were 18 health visitors on the staff, and each of these nurses also undertook school nursing and tuberculosis visiting duties in her area. In addition, there were two school nurses who also carried out duties as tuberculosis visitors.

Details of the work done by the Health Visitors are shown in the following table:—

	Year ended.	
	31.12.48	31.12.49
Visits to expectant mothers:		
First Visits	188	383
Subsequent Visits	163	268
Visits to infants under one year of age:		
First Visits	3799	3592
Subsequent Visits	10012	12630
Visits to children between 1 and 5 years of age	22470	27108
Visits to insanitary premises	58	53
Number of visits as Child Protection Visitors ...	154	214

Two Health Visitors were sent to a post-graduate course during the year.

DOMICILIARY NURSING AND MIDWIFERY SERVICE.

Although provided for under two separate schemes, for the purpose of this report the domiciliary nursing and domiciliary midwifery services will again be regarded as one service as, in a County like the East Riding, most of which

is sparsely populated, it is preferable that in the majority of instances, a domiciliary nurse should combine in the duties of nurse and midwife.

At the end of the year the staff employed was:—

Number of nurse-midwives	43
Number of midwives	10
Number of nurses	8
Total	61

The Council is affiliated with the Queen's Institute of District Nursing. Twelve of the nurses employed are Queen's Nurses, as are also the Supervisor and Assistant Supervisor.

With regard to transport, in view of the predominantly rural nature of the County, it has been decided that every nurse shall be provided with a car by the County Council, but by the end of the year only 28 (including 1 relief car) had been so provided. Pending the provision of cars by the Council, nurses have continued themselves to purchase new or second-hand cars with the aid of loans from the Council.

At the end of 1949, the position with regard to housing and transport was as follows:—

Number of nurses living in accommodation provided by the County Council:	
(a) property owned by the County Council	5
(b) property leased from County District Councils	16
(c) property leased from other owners	3
Number of nurses renting houses owned by County District Councils	5
Number of nurses living in houses owned by themselves or rented from private owners	27
Number of nurses living in lodgings	5
Number of nurses using cars provided by the County Council	27
Number of nurses using their own cars	29
Number of nurses using bicycles	5

DOMICILIARY NURSING.

The following table gives some details as to the amount of domiciliary nursing work carried out in 1949:—

District.	Visits.		New Cases.
	Medical.	Surgical.	
Aldbrough	1198	19	39
Barlby	129	3	3
Beeford	1031	130	35
Beverley No. 1	9	16	—
Beverley No. 2	920	270	44
Beverley No. 3	1219	1865	143
Beverley No. 4	692	21	13
Beverley No. 5	1791	732	86
Bishop Burton	1219	72	54
Brandesburton	1134	118	20
Bridlington No. 1	1504	205	51
Bridlington No. 2	1599	360	94
Bridlington No. 3	1016	354	54
Bridlington No. 4	2048	522	91
Bridlington No. 5	1442	627	73
Bridlington No. 6	1238	221	75
Cottingham No. 1	753	111	23
Cottingham No. 2	3141	892	172
Cottingham No. 3	1341	655	90
Driffield No. 1	522	216	14
Driffield No. 2	1807	388	59
Driffield No. 3	1100	346	22
Eastrington	1601	—	33
Escrick	488	418	61
Filey No. 1	379	122	38
Filey No. 2	1057	627	122
Fulford	861	51	20
Hedon	562	—	—
Hessle No. 1	2075	819	115
Hessle No. 2	161	—	1
Hessle No. 3	105	25	1
Hessle No. 4	102	37	4
Hessle No. 5	2531	322	102
Holme-on-Spalding-Moor	162	142	21
Hornsea No. 1	1719	31	47
Hornsea No. 2	303	75	4
Howden	107	30	6
Hunmanby	962	155	48
Market Weighton	259	105	36
Middleton	267	69	14
North Cave	441	271	30
Norton No. 1	438	163	75
Norton No. 2	2341	721	109
Norton No. 3	1862	1056	61
Ottringham	3396	1697	267
Patrington No. 1	1377	161	53
Patrington No. 2	165	44	8
Pocklington	652	218	41
Riccall	1317	230	51
Rudston	561	421	28
Sherburn	379	583	65
Skirlaugh	1970	40	102
South Cave	428	257	25
Sutton on Derwent	493	205	25
Weaverthorpe	818	976	97
Welton	1069	347	85
Wetwang	513	9	11
Wilberfoss	1067	199	53
Willerby No. 1	1110	145	72
Willerby No. 2	1901	348	87
Willerby No. 3	1012	253	45
Withernsea No. 1	234	84	—
Withernsea No. 2	1618	573	46
Westow	489	127	37
Totals	66205	20299	3401

MIDWIFERY SERVICES.

Details of the work done by County District Midwives are shown in the following table:—

District.	BOOKINGS		DELIVERIES		VISITS	
	Mid-wife	Maternity Nurse	Mid-wife	Maternity Nurse	Ante-natal	Lying-in
Aldbrough	23	2	13	3	211	401
Barlby	68	—	60	1	1166	1203
Beeford	10	2	11	1	134	270
Beverley No. 1	35	19	45	25	376	1233
Beverley No. 2	8	12	8	11	170	561
Beverley No. 4	27	28	30	18	625	1016
Beverley No. 5	1	—	11	7	87	423
Bishop Burton	7	9	7	14	163	383
Brandesburton	16	3	14	4	120	290
Bridlington No. 1	2	3	7	4	50	192
Bridlington No. 2	8	10	6	8	122	293
Bridlington No. 3	3	4	3	7	84	190
Bridlington No. 5	4	9	9	1	50	213
Bridlington No. 6	5	4	4	4	64	136
Cottingham No. 1	18	16	14	12	377	742
Cottingham No. 3	11	25	15	15	304	655
Driffield No. 2	23	10	14	11	230	552
Driffield No. 3	20	5	15	12	146	387
Eastrington	5	9	8	10	681	489
Eserick	18	13	15	12	268	627
Filey No. 1	3	1	2	6	59	196
Filey No. 2	3	27	10	13	232	495
Fulford	9	21	8	16	286	494
Hedon	5	15	13	4	122	458
Hessle No. 2	19	24	18	16	329	805
Hessle No. 3	9	11	7	16	387	823
Hessle No. 4	26	23	25	21	370	885
Holme-on-Spalding-Moor	15	17	17	7	263	554
Hornsea No. 1	8	24	10	19	255	941
Hornsea No. 2	—	15	4	8	90	319
Howden	22	24	32	8	421	717
Hunmanby	14	14	18	18	179	574
Market Weighton	8	18	12	9	185	515
Middleton	4	14	14	15	188	449
North Cave	5	26	8	27	415	765
Norton No. 1	9	45	9	33	580	735
Norton No. 3	2	14	5	13	108	338
Ottringham	9	2	4	4	22	194
Patrington No. 1	6	26	6	29	325	633
Patrington No. 2	1	—	2	—	16	49
Pocklington	2	38	4	22	229	593
Rudston	8	—	7	—	216	241
Sherburn	3	21	—	16	119	283
Skirlaugh	34	15	14	10	529	575
South Cave	2	8	2	11	187	499
Sutton on Derwent	1	36	4	27	242	579
Welton	7	19	4	15	203	497
Wetwang	8	22	9	15	341	429
Wilberfoss	9	17	8	28	265	590
Willerby No. 1	5	22	8	15	348	445
Willerby No. 3	4	15	10	16	223	407
Withernsea No. 1	15	22	18	33	325	926
Withernsea No. 2	—	1	1	2	1	53
Westow	2	5	6	7	94	259
Totals	589	785	628	680	13582	27511

In addition, domiciliary nurses acting on relief duties carried out 23 ante-natal and 198 lying-in visits.

Steps continued to be taken to extend the provision of domiciliary gas and air analgesia and to train those nurses not holding the necessary certificate. At the end of the year, 50 County domiciliary midwives and two midwives in private practice were suitably qualified. During the year, 660 domiciliary cases were given gas and air at their confinements, as compared with 483 cases in 1948.

Under the Scheme, midwives are supplied with packs containing sterilised maternity outfits which are issued free of charge in the case of every domiciliary confinement attended by the midwife.

During the whole of the year, for institutional and domiciliary midwifery, 1,885 births were attended by midwives with no doctor in attendance, representing 56% of the total births registered as compared with 48% in 1948. Of the 1,325 domiciliary births, 638 were attended by midwives acting in that capacity, i.e., 48%, as compared with 61% in 1948.

In all, 122 midwives notified their intention to practise in the East Riding during 1949. At the end of the year, there were only 95 midwives in practice, 9 of whom were in private practice, 53 were Domiciliary County Midwives, and 33 were employed in Homes and Institutions.

The following table shows the total number of cases attended during the year by 101 midwives from whom returns were received:—

No. of Cases.	Midwives residing outside the County.	Midwives employed in Institutions.	Midwives employed by the County Council	Private Practising Midwives.	Total.
0	—	—	—	4	4
1—4	—	1	4	2	7
5—9	1	7	4	1	13
10—19	—	4	18	—	22
20—29	—	4	18	—	22
30—39	—	2	6	—	8
40—49	—	3	4	—	7
50—59	—	4	1	—	5
60—69	—	2	1	—	3
70—79	—	3	1	—	4
80—89	—	1	—	—	1
90—99	—	1	—	—	1
100 and over	—	4	—	—	4

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

	Private Practising Midwives.	Midwives in Institutions.	County Midwives.	Total.
Sending for medical help	3	20	145	168
Notification of death ...	—	10	6	16
Notification of stillbirth	—	27	7	34
Laying out dead body .	—	2	6	8
Liability to be a source of infection	—	—	9	9
Artificial feeding	—	92	90	182

The number of medical help forms received from midwives was equivalent to 9% of the cases which they attended as midwives, compared with 22% in the previous year.

VACCINATION AGAINST SMALLPOX.

The arrangements for the provision of vaccination facilities continued on the lines set out in my previous report and the table printed below shows the number of vaccinations and re-vaccinations in respect of which returns had been received by the end of the year.

Forty-nine vaccinations and 3 re-vaccinations were performed at Infant Welfare Centres.

The figure of 1,074 children under one year of age represents 32.5% of the live births during the same period.

	Primary Vaccinations.					Re-vaccinations
	Aged under 1 year.	Aged 1 year to 14 years.	Aged 15 yrs. and over.	No. re-turned as Insusceptible.	Total.	
Beverley M.B.	74	8	1	—	83	21
Bridlington M.B.	89	9	12	1	111	35
Hedon M.B.	3	—	—	—	3	—
Driffield U.D.	23	4	3	1	31	11
Filey U.D.	28	1	2	2	33	16
Haltemprice U.D.	205	19	10	4	238	42
Hornsea U.D.	28	8	5	1	42	7
Norton U.D.	8	11	—	—	19	3
Withernsea U.D.	14	2	3	—	19	11
Beverley R.D.	122	11	6	3	142	33
Bridlington R.D.	30	2	3	—	35	9
Derwent R.D.	63	13	2	2	80	6
Driffield R.D.	48	6	4	—	58	10
Holderness R.D.	48	2	3	1	54	10
Howden R.D.	112	3	3	6	124	19
Norton R.D.	64	10	1	—	75	9
Pocklington R.D.	115	11	6	3	135	25
Totals	1074	120	64	24	1282	267

IMMUNISATION AGAINST DIPHTHERIA.

The figures for immunisation carried out during the year are as follows:—

	Aged under 5	Aged 5— 14 years.	Reinforce- ment Injections.
By General Practitioners	1297	72	197
At Infant Welfare Centres or at Special Sessions	1288	272	3058
Totals	2585	344	3255

The distribution of this work between the various County Districts is shown in the following table:—

District.	Under 5.	5—14.	Total.	Rein- forcement Injections.
Beverley M.B.	194	27	221	246
Bridlington M.B. ...	272	12	284	38
Driffield U.D.	48	26	74	454
Filey U.D.	87	—	87	18
Haltemprice U.D. ..	380	90	470	1159
Hedon M.B.	29	22	51	137
Hornsea U.D.	67	3	70	92
Norton U.D.	63	62	125	363
Withernsea U.D. ...	46	4	50	83
Beverley R.D.	226	14	240	134
Bridlington R.D.	99	5	104	6
Derwent R.D.	152	4	156	18
Driffield R.D.	108	9	117	152
Holderness R.D.	355	26	381	212
Howden R.D.	140	6	146	8
Norton R.D.	88	1	89	37
Pocklington R.D. ...	231	33	264	98
Totals	2585	344	2929	3255

At the end of the year, from the records available, the position as regards immunisation in the various Districts in the County is shown in the following table:—

District.	Number of children immunised at any time up to the 31st December, 1949.			Estimated Population under 15 years of age.	Percentage Immunised.
	under 5.	5-14.	Total.		
Beverley M.B.	662	1922	2584	3510	73%
Bridlington M.B.	1038	1786	2824	5228	54%
Driffield U.D.	247	836	1083	1568	69%
Filey U.D.	225	297	522	1025	52%
Haltemprice U.D.	1098	2950	4048	8104	50%
Hedon M.B.	102	230	332	403	82%
Hornsea U.D.	169	226	395	1204	33%
Norton U.D.	159	457	616	992	62%
Withernsea U.D.	192	293	485	1071	45%
Beverley R.D.	741	1674	2415	4171	58%
Bridlington R.D.	286	391	777	2084	37%
Derwent R.D.	525	1443	1968	2725	72%
Driffield R.D.	473	779	1252	2223	56%
Holderness R.D.	990	1582	2572	4000	64%
Howden R.D.	501	551	1052	2767	38%
Norton R.D.	304	243	547	1560	35%
Pocklington R.D.	629	841	1470	2925	50%
Totals	8451	16501	24952	45580	55%

PROTECTION AGAINST WHOOPING COUGH.

The scheme made under Section 26 of the National Health Service Act provides that upon the request of their parents or guardians children may receive protection against whooping cough, it being intended that by use of a mixed vaccine this protection shall be given at the same time as they are immunised against diphtheria.

During the year, 1,307 children received this dual protection and 90 children who had previously been immunised against diphtheria were given separate anti-whooping cough injections. In 617 of these cases, the immunisation was carried out by general practitioners at their surgeries or in the patients' homes.

AMBULANCE SERVICE.

The Ambulance Service continued to be organised on the basis as detailed in my report for 1948. This, briefly, was that the County Council maintained ambulances stationed at Beverley, Bridlington, Driffield, Hessle, Pocklington and Withernsea, and sitting case cars at Beverley, Bridlington, Driffield, Pocklington, Weaverthorpe and Withernsea, and had agency arrangements with the St. John Ambulance Brigade for the use of ambulances at Brough, Cottingham, Filey and Hornsea, and with the British Red Cross Society for ambulances stationed at Market Weighton and Howden, and with the Voluntary Car Pool. In addition, agency

arrangements existed with the County Boroughs of Hull and York, and the County Councils of the North Riding and the West Riding for services to the parts of the County appropriately adjacent.

Thanks to the willing co-operation of all members of the staff of the Service, it successfully overcame many difficulties during the year. The difficulties arose from two main causes which combined to make a very awkward problem with which to cope. One was due to the delay in the delivery of new vehicles, which meant carrying on as best one could with vehicles which had already seen many years of useful service and which were often in serious need of complete overhauls which could not be undertaken as they could not be spared from their duties on the roads. The other difficulty was the steady increase in the demands made on the service.

In 1946, the eighteen ambulances then working in the County had answered 2,811 calls, and travelled 73,735 miles. Between 5th July, 1948, when the present free service came into operation, and the end of 1948, the various ambulances and cars had done 4,223 journeys, carried 4,928 patients and travelled 126,291 miles. This increase was to some extent expected, but it was never anticipated that a full year's working would show figures, not double, but more than three times those for the last six months of 1948.

The following table relating to the types of case dealt with shows where the, to a great extent unexpected, additional demands have arisen:—

	5th July to 31st December 1948.	Antici- pated 1949.	Actual 1949.	Percentage increase of actual over antici- pated.
Accidents	363	750	862	15%
Acute Illness	545	1100	1167	6%
Emergency Maternity	96	200	261	30%
General Illness	717	1500	2154	44%
Maternity	144	300	373	24%
Tuberculosis	64	150	158	5%
Infectious Disease	122	250	300	20%
Mental Cases	73	150	235	56%
Inter-hospital Transfers ..	316	650	559	14%
				(decrease)
Hospital Discharges	546	1100	1776	61%
Out-patient attendances ...	1761	3600	9669	168%
Clinic attendances	181	400	281	30%
				(decrease)
Totals	4928	10150	17795	75%

It will be seen that, apart from the figures for the six months of 1948 giving a general under-estimate of potential needs, the overwhelming increased demand has been in connection with the attendance of patients at hospital out-patient departments. The numbers shown do not, of course, give the actual number of individual patients carried, but refer to the total number of occasions upon which any individuals made use of the Ambulance Service, but even allowing for the fact that many patients may have made many journeys, these statistics show how great has been the strain on an initially ill-equipped Service. The strain has been greater because of the scattered nature of the rural population which has had to be served and the fact that the main hospital out-patient departments are placed in towns situated outside the County boundaries. This has meant that in stations like those at Pocklington and Withernsea, the average distance travelled per journey has been about fifty miles. The time factor incurred in making regular journeys of this length, combined with the inevitable time wastage at the hospitals, especially in the case of out-patients, has in its turn created another problem of arranging for adequate cover in case of accidents for the periods of time when the vehicles normally stationed in an area are, by force of circumstances, some distance away.

Many discussions have taken place with the administrative staffs of the various hospitals and with the officers of neighbouring Health Authorities in an attempt to reduce the numbers of journeys to a minimum and to ensure the most economical use of ambulances which may have journeys into or through other areas, and it is pleasing to note that, although the number of patients shows no signs of diminishing, it has been possible, especially with ambulances and cars owned by the County Council, gradually to increase the number of patients carried on each journey and consequently to reduce the mileage run per patient carried. For instance, the County owned vehicles have carried an average of 160 patients in every hundred journeys performed, and in the case of the Voluntary Association ambulances and the Voluntary Car Pool, an average of 110 patients have been carried for every hundred journeys.

Over the whole of the Service, the average mileage per journey has been 30.9 miles, and the average mileage per patient carried, 22.4 miles.

At the end of the year there were in the County eight ambulances provided by voluntary agencies and nine ambulances and six sitting case cars provided by the County Council. Twenty-eight drivers and attendants were employed on a whole-time basis.

Details of the work done are shown in the following tables:—

Station.	Journeys.	Patients.	Mileage.	Average mileage per journey.	Average mileage per patient.
<i>Ambulances.</i>					
Beverley	1574	2138	49293	31.3	23.0
Bridlington	1195	1352	27409	22.9	20.3
Driffield	814	1242	13188	16.2	10.6
Hessle	657	958	14916	22.7	15.6
Pocklington	550	1367	24879	45.2	18.2
Withernsea	336	566	16212	48.2	28.6
Brough St. John.	300	315	9512	31.7	30.2
Cottingham					
St. John ...	229	251	3203	14.0	12.8
Filey St. John ..	459	532	15394	33.5	28.9
Hornsea St. John	397	454	11707	29.5	25.8
Hull St. John ...	76	77	1556	20.5	20.5
Market Weighton					
Red Cross	134	144	4995	37.3	34.1
Howden Red					
Cross ...	132	142	6260	47.4	44.1
Swanland	158	179	3907	24.7	21.8
W.R., Goole	50	67	2924	58.5	43.6
W.R., Selby	536	757	21178	39.7	28.0
N.R., Malton ...	168	173	4723	28.1	27.3
N.R.,					
Scarborough ..	2	2	126	63.0	63.0
York C.B.	346	446	5810	16.8	13.0
Hull C.B.	130	139	2668	20.5	19.2
Other					
Authorities ...	2	2	120	60.0	60.0
Totals ...	8245	11303	239980	29.1	21.2
<hr/>					
Train	1	1	—		
Taxi	4	4	102		
<hr/>					
<i>Sitting Case Cars.</i>					
Beverley	345	567	15211	44.1	26.8
Bridlington	355	458	11591	32.6	25.3
Driffield	432	564	7867	18.2	13.9
Pocklington	573	1271	28707	50.1	22.6
Weaverthorpe ...	242	297	10563	43.6	35.6
Withernsea	322	612	19439	60.3	31.8
Hull C.B.	50	51	849	17.0	16.6
York C.B.	360	461	4617	12.8	10.0
Voluntary Car					
Pool	1996	2206	59759	29.9	27.1
Total for sitting Case Cars	4680	6492	158705	34.0	24.4
<hr/>					
Grand Total ..	12925	17795	398685	30.9	22.4

DOMESTIC HELP SERVICE.

This service, for which the demand is constantly growing, especially for aged patients living alone, has expanded slowly during the year, recruits to the panel of part-time helps being taken on to that panel only after careful enquiries have done everything possible to ensure the person's suitability.

At the end of the year, there were 64 part-time Domestic Helps on the panel, of whom five were on the "retained" list. This number compares with 38 at the end of 1948. Actually, 38 new helpers were enrolled, but 12 workers resigned during the year for various reasons.

During the year, 313 cases were attended—186 being confinement cases, and 127 cases of general illness. Seven of the latter were provided with help for a period extending over the whole year and five for periods of over six months. The majority of these patients were aged persons living alone or with an equally aged relative. Of the 186 general sickness cases attended, 62 come into the category of aged sick.

Wherever it has been found possible to provide this service, it appears to have been appreciated and extremely few complaints have been received. It has been gratifying to note that many patients, particularly confinement cases, have, when requiring help for a second time, requested the attendance of the same Help who had been to them on a previous occasion.

CARE AND AFTER-CARE.

The setting up of After-care Committees has been delayed pending the development of the Divisional organisation of the Health Services, and, pending the establishing of these Committees, the care services in operation have continued to be operated centrally and are referred to in various parts of this report.

MENTAL HEALTH.

The detailed work of the Mental Health Service is dealt with by a Sub-Committee of the Health Committee consisting of 10 members who meet once in each quarter for the purpose of considering the reports on defectives and other persons in the care of the Committee and making recommendations to the Health Committee as to the administration of the Service or any specific action to be taken in any individual case.

Apart from the County Medical Officer of Health and his Deputy, there are five of the Medical Officers on the staff who have attended special courses on Mental Deficiency and are recognised for the purpose of examining educationally sub-normal children, and two of these doctors are approved as examining and Certifying Officers under the Mental Deficiency Acts. The County is divided into four administrative areas controlled from the central office and in each area is a Duly Authorised Officer. These latter Officers are also District Welfare Officers operating under the National Assistance Act, 1948. There is a part-time trained Psychiatric Social Worker, a full time female Social Worker who holds a Diploma in Social Science, the County Welfare Officer,

and two members of the headquarters staff are also approved as Duly Authorised Officers.

Under arrangements with appropriate Regional Hospital Boards and Hospital Management Committees, the Council undertake the domiciliary supervision of defectives and other persons suffering from mental illness who are on licence from Institutions or residing in their own homes or with friends in the County.

No duties have been delegated by the Council to Voluntary Associations.

The Council have not directly arranged any training of Mental Health workers. Three of the Duly Authorised Officers have attended recognised Courses on mental health work.

MENTAL DEFECTIVES.

All mental defectives residing in the County who are under statutory supervision, on licence from Institutions, and under guardianship are regularly visited by the Council's Duly Authorised Officers and the Social Worker, who also provide a general advisory service for the parents and guardians as well as for the defectives.

Owing to the scattered nature of the County, it is not possible to establish Occupation Centres in the East Riding. Instruction in occupational and handicraft work is, however, provided by the Council for a limited number of defectives residing in their own homes and this work is at the present time being undertaken by the Social Workers.

The number of mental defectives under the care of the Council on the 31st December, 1949, was as follows:—

	Male.	Female.	Total.
Statutory Supervision	110	86	196
Voluntary Supervision	8	2	10
Guardianship	1	2	3
Licence	8	7	15
	<hr/> 127	<hr/> 97	<hr/> 224

During the year, 28 persons were ascertained to be mental defectives within the meaning of the Acts, and of these, 24 were placed under statutory supervision and 4 admitted to Institutions.

Fifteen cases were placed out on licence from Institutions. At the end of the year, there were 2 female child defectives awaiting admission to certified Institutions.

Patients were dealt with by the Duly Authorised Officers under the Lunacy and Mental Treatment Acts, 1890—1930, as follows:—

Certified	127
Section 20 (3 day orders)	29
Section 11 (urgency order)	1
Voluntary	23
Temporary	7
Advisory	39
	<hr/> 226

The psychiatric care of patients has gradually increased during the year and, following the making of arrangements with the National Association for Mental Health for one of their Psychiatric Social Workers to give regular part-time service in the County, the service has become better known. This officer undertakes specialised care of patients who have been discharged from the Mental Hospitals and others, and during the year has dealt with the following cases:—

Source of reference.	Adults.	Children.	Total.
Ex-Service	8	—	8
Mental Hospital	12	—	12
Private Medical Practitioner cases ...	8	—	8
Education Authority	—	11	11
Self referred	1	—	1
	29	11	40

REGISTRATION OF NURSING HOMES.

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

Medical and Surgical	36
Maternity	23

Four hundred and eighteen patients were admitted to these Homes during the year, 378 of whom were maternity cases, whilst 19 were medical, 20 convalescent and chronic, and one orthopædic.

NURSERY AND CHILD MINDERS REGULATION ACT, 1948.

This Act requires that every local Health Authority shall keep registers:—

- (a) of premises in their area, other than premises wholly or mainly used as private dwellings, where children are received to be looked after for the day or a substantial part thereof or for any longer period not exceeding 6 days;
- (b) of persons in their area who for reward receive into their homes children under the age of five to be looked after as aforesaid.

Premises at Cottingham providing accommodation for 40 children, and two daily minders, have been registered.

NATIONAL ASSISTANCE ACT, 1948.

I am indebted to the County Welfare Officer for the following report upon the duties carried out under the National Assistance Act:—

As from the 5th July, 1948, the Poor Law Acts and Orders ceased to be operative throughout the Country and the County Council then became responsible under the

National Assistance Act of 1948 for the provision of two main services:—

(1) *Accommodation.*

- (a) residential accommodation for persons who by reason of age, infirmity or any other circumstances are in need of care and attention which is not otherwise available to them;
- (b) temporary accommodation for persons who are in urgent need thereof, being need arising in circumstances which could not reasonably have been foreseen or in such other circumstances as the authority may in any particular case determine.

(2) *Welfare Services.*

- (a) the provision of a welfare service for the blind, deaf or dumb, and other persons who are substantially and permanently handicapped by illness, injury or congenital deformity or such other disabilities as may be prescribed by the Minister.

In accordance with the relative statutory provisions, the Council submitted Schemes to the Minister of Health, which have been approved. Copies of these Schemes have been printed and circulated.

RESIDENTIAL ACCOMMODATION.

On the 5th July, 1948, the Council were the owners of the following Residential Establishments providing accommodation as stated:—

Burlington House, Bridlington	82 beds.
The Poplars, Pocklington	72 beds.
Gilberdyke House, Gilberdyke	24 beds.

In addition to the above, the Council had a right of user of 82 beds in the non-sick portion of the East Riding General Hospital at Driffield, which Hospital, of course, is now administered by the Regional Hospital Board.

In accordance with their Scheme, the Council have proceeded to obtain further accommodation and it is anticipated that during the financial year 1950-51 the following Residential Homes will be opened in addition to the above:—

Langholm, Beverley.
Danes Lea, Bridlington.
Clovelly, Withernsea.
Derwent House, Stamford Bridge.

Other Homes will be opened as and when available and according to need. With the limited number of beds at present available, all are constantly occupied and it has not been possible to meet all demands for residential accommodation, and admission has had to be determined according to individual circumstances.

The Homes are, of course, maintained for persons who, though in need of care and attention which is not otherwise available to them, are not sick persons in the sense that they require fairly regular medical and nursing care. These latter cases are, of course, the responsibility of the Regional Hospital Board.

The Act also empowers Local Authorities to arrange with Voluntary Organisations for the provision of Residential Accommodation and in this particular connection the Council are providing accommodation for a number of aged blind ladies in a Home in Beverley maintained by the Hull & East Riding Institute for the Blind. In addition, the Council are also accepting responsibility for the maintenance charges of a number of persons who are residing in Local Authority Homes and Homes maintained by Voluntary Organisations outside the East Riding.

TEMPORARY ACCOMMODATION.

The provision of temporary accommodation is primarily intended for dealing with persons rendered homeless as a result of flood, fire, etc. No special provision has been made in this County, but in case of necessity such accommodation would be made available immediately in Council owned properties, for which purpose limited stocks of bedding, etc., are maintained.

WELFARE SERVICES.

The statutory provisions relating to Welfare Services are optional unless the Minister of Health otherwise directs. The Minister has directed that the provision of a Welfare Service for the Blind is to be obligatory upon County and County Borough Councils and in accordance therewith the Council has entered into an arrangement with the Hull & East Riding Institute for the Blind under which the Institute are maintaining a very comprehensive Welfare Service, including the provision of Workshops, Home Teaching, Home Visiting, etc., on behalf of the County Council. This Service will also be extended to cover partially sighted persons.

REGISTRATION OF HOMES FOR DISABLED AND OLD PERSONS.

The Council has certain responsibilities and powers as a Welfare Authority under the Act relating to the inspection and regulation of Homes for disabled or old persons maintained by private individuals or Voluntary Organisations. No Homes had been so registered by the end of the year.

PROTECTION OF PROPERTY.

(a) *Temporary Protection.*

When a person is admitted to a Hospital or to any accommodation provided by the Council under the National Assistance Act, and it appears to the Council that there is a danger of loss or damage, etc., to any moveable property belonging to such patient, it is the duty of the Council to

take reasonable steps to prevent or mitigate the loss or damage. Cases under this heading frequently occur and the Council's officers take appropriate steps to look after the interests of the individuals concerned.

(b) *Permanent Protection.*

Where a person is of unsound mind in a Mental Hospital or other establishment, and thus not capable of managing his own affairs, the County Welfare Officer takes steps to secure his appointment as a Receiver of the person's estate under an Order of the Court of Protection. Under the Order of the Court, the person's interests and affairs are completely safeguarded. A relative or other person may, of course, apply and may be responsible for the affairs of the patient and thus obviate the necessity of the Council's officer taking any action.

WELFARE OF THE BLIND.

On the 31st December, 1949, the official Register of Blind Persons, which is maintained for the Council by the Hull & East Riding Institute for the Blind, showed that there were 292 blind persons in the County (149 males, 143 females). In comparison, there were 289 persons (146 males, 143 females) on the Register at the 31st December, 1948.

During the year, the Council, in conjunction with the Hull Corporation, have discussed with the Hull & East Riding Institute for the Blind the question of the employment of blind persons in the Hull Workshops of the Institute. An arrangement, to be operative from the 1st January, 1950, was entered into, which lays down certain specified qualifications before a person can be accepted as a workshop employee, a scheme of incentive bonuses and a guaranteed minimum wage. The guaranteed minimum wage for male employees is £5 9s. 0d. per week and £4 1s. 6d. per week for female employees, based on a 40 hour week. Provision has also been made in regard to holidays, sick pay, etc., for blind workshop employees.

As mentioned in the last Report, the Council receives a capitation grant from the Ministry of Labour and National Service of up to £80 per annum in respect of each workshop employee. There are 8 male and 3 female blind persons engaged in the workshops from the East Riding.

In addition to the workshop employees, 4 blind men are recognised by the County Council as home workers, their earnings being supplemented by the Council in accordance with an approved scale. Three of the home workers are piano tuners and one undertakes chair repair work, etc.

The home teaching and visiting service which is operated by the Hull & East Riding Institute for the Blind, under a joint arrangement agreed with the Hull Corporation, continues in force. During the year, it was agreed that the payments to be made by the Council in respect of the service should be increased from £3 7s. 6d. per case to £4 per case.

The Hull & East Riding Institute for the Blind maintains two Home for blind persons, one at Seaborough House, Beverley, accommodating 20 women, and the other

at Beech Holme, Beverley Road, Hull, with accommodation for 21 persons of both sexes. These two Homes were fully occupied for almost the whole of the year under review.

OTHER HANDICAPPED PERSONS.

At the present time a Government Advisory Committee is considering problems in connection with the welfare of other classes of substantially and permanently handicapped persons and the operation of any Welfare Service in connection with these classes of persons is being held in abeyance pending the Report of the Advisory Committee. In the meantime, very much good work is being undertaken for the deaf and dumb by the Institutes at Hull and York, in respect of which the Council are making financial contributions. Insofar as other classes of handicapped persons are concerned, the Council are at the moment in the course of undertaking a survey of the County with a view to securing information as to the numbers and types of handicapped persons in order that some information will be available from which it may be possible to estimate the need for and type of Welfare Services which may be necessary.

Section 3. —Sanitary Circumstances of the Area.

WATER SUPPLIES, SEWERAGE AND SEWAGE DISPOSAL.

MINISTRY OF HEALTH PUBLIC INQUIRIES.

In June, 1948, a Public Inquiry was held by the Minister of Health into a proposal to make an Order under Section 14 of the Water Act, 1945, in respect of an area consisting of a large part of the East Riding and the County Borough of Kingston upon Hull. After considering a report made by his Inspector following the Inquiry, the Minister made amended proposals to which the County Council subsequently raised no objections, and an Order entitled the South East Yorkshire (Conservation of Water) Order, 1949, was made by the Minister of Health on 1st February, 1949. The Order controls the abstraction of water from underground sources in an area comprising the County Borough of Kingston upon Hull and the Boroughs of Beverley, Bridlington and Hedon, the Urban Districts of Driffeld, Haltemprice and Hornsea and parts of the Rural Districts of Beverley, Bridlington, Driffeld and Holderness, and came into force on 9th March, 1949.

A Ministry of Health Public Inquiry, which lasted for a total of six days, was held in March and May by an Inspector of the Ministry into the Water Undertaking of the Driffeld Rural District Council. As a result, in July the Minister came to the conclusion, though he had power to make an Order under Section 13 (2) of the Water Act, 1945, before he decided what action, if any, was to be taken, the Council was to be required to submit a full report on their water undertaking within a period of six months. No further

information on the matter had been received at the end of the year.

Ministry of Health Inquiries were held during the year into the applications of the following District Councils for consent to borrow money for works of water supply or sewerage and sewage disposal.

Norton R.D.C.	Works of Water Supply in the parishes of Acklam, Burythorpe, Firby, Howsham, Thixendale and Yedingham. Estimated cost, £10,000.
Pocklington R.D.	} Co-ordinated scheme of works of water supply for the two districts at an estimated cost of (for Pocklington) £2,500, (for Howden) £22,000.
Howden R.D.	
Pocklington R.D.	Works of water supply in certain parishes: £49,909.
Howden R.D.	Works of water supply in certain parishes: £55,255.
Pocklington R.D.	Sewerage and sewage disposal works at Bishop Wilton at an estimated cost of £5,729.

RURAL WATER SUPPLIES AND SEWERAGE ACT, 1944.

Agreement was reached between the County Council and the respective District Councils in connection with the schemes set out below which were submitted for the observations of the County Council in accordance with the provision of the above Act.

Pocklington R.D.C.	Improvement of existing water supplies at Millington and Garrowby.
	Sewerage works at Shiptonthorpe and Goodmanham.
	Sewerage and sewage disposal works at Bishop Wilton.
Bridlington R.D.C.	Sewerage proposals for Flamborough Head area were approved subject to the Rural District Council giving effect to suggestions made by the County Council's Consulting Engineer.
Holderness R.D.C.	} Sewerage and sewage disposal works for the
Beverley R.D.C.	
	Parishes of Leven and Brandesburton.

The County Council authorised contributions to the undermentioned District Councils in respect of works of water supply, sewerage and sewage disposal.

Beverley R.D.C.	Contributions of £1,500 towards the cost of extending water mains to serve the Parishes of Etton and Dalton Holme, and £130 towards the cost of carrying out a water supply scheme for the village of Bentley.
	£1,850 towards the cost of sewerage and sewage disposal works at Wawne.
Pocklington R.D.C. ...	Contribution of £3,750 towards the cost of improving water supplies at Millington and Garrowby.

SEWERAGE AND SEWAGE DISPOSAL.

In previous reports I have referred to the need for the improvement of the sewerage and sewage disposal arrangements in the East Riding. Only a few of the Urban areas of the County have facilities for the removal and treatment of sewage which can be regarded as satisfactory. Although the District Councils are aware of their duties under the Public Health Act, 1936, and have prepared schemes for a number of areas, progress has been slow. Less than ten sewerage and sewage disposal schemes for parishes have been started in the County since the end of the war and, in view of the many districts where work of this character is urgently required, it is hoped that final approval of proposals put forward will not be unduly delayed so that much more can be done. It should be remembered that a large part of the County water supply is obtained from the underground chalk and the risks to these water sources are considerable, because on the gathering grounds for the water which percolates to the chalk sub-strata, there are villages without adequate disposal arrangements which are producing a steadily increasing volume of sewage.

CONVERSION OF PRIVIES AND PAIL CLOSETS.

Work was continued on the conversion of privies and pail closets to water closets in the urban areas. There is still much to be done, however, as there are over 1300 of these closets in districts where there are sewerage systems and where in the majority of cases there are no major difficulties in the way of conversion.

REFUSE COLLECTION AND DISPOSAL.

Another matter to which attention must be drawn is the need for satisfactory refuse collection and disposal services in all areas not at present provided for in this respect. In far too many places can be seen the site for indiscriminate dumping of all classes of refuse. Old chalk pits appear to be favoured for this purpose, and the result is dangerous to the health of the community and detrimental to the amenities of the district. The advantages gained by the "controlled tipping" of refuse as practised by enlightened Councils are too well known to require more than a brief reference.

HOUSING.

The provision of new houses has been in the forefront of the activities of the District Councils during the years since the end of the war, and in 1949 good progress was made. The number of houses completed during the year was 1,164, and 794 were in course of erection at 31st December.

The table shown below sets out the position in the respective County Districts and gives the number of houses completed by the local authorities and by private enterprise in each area.

District.	Houses Completed.			In course of Erection.		
	Council.		Private Enterprise.	Council.		Private Enterprise.
	Temp.	Perm.		Temp.	Perm.	
Beverley Borough	— (75)	8 (168)	32 (51)	—	74	15
Bridlington Borough	— (100)	24 (67)	17 (155)	—	88	12
Hedon Borough	* (—)	* (30)	* (18)	*	*	*
Driffield U.D.C.	— (—)	24 (52)	2 (30)	—	24	—
Filey U.D.C.	— (—)	2 (87)	14 (17)	—	—	2
Haltemprice U.D.C.	— (—)	152 (144)	12 (143)	—	152	28
Hornsea U.D.C.	— (15)	70 (196)	8 (31)	—	12	16
Norton U.D.C.	— (6)	— (106)	— (7)	—	36	3
Withernsea U.D.C.	— (50)	2 (48)	4 (1)	—	36	5
Beverley R.D.C.	— (51)	102 (120)	25 (75)	—	36	18
Bridlington R.D.C.	— (—)	98 (40)	8 (20)	—	34	2
Derwent R.D.C.	— (—)	51 (129)	17 (60)	—	36	13
Driffield R.D.C.	— (—)	92 (132)	12 (38)	—	16	1
Holderness R.D.C.	— (23)	62 (252)	17 (51)	—	22	8
Howden R.D.C.	— (—)	118 (118)	— (5)	—	28	3
Norton R.D.C.	— (—)	100 (72)	9 (15)	—	18	8
Pocklington R.D.C.	— (45)	70 (194)	12 (57)	—	42	6
Total	— (365)	975 (1955)	189 (774)	—	654	140

*Returns not received.

The figures in brackets show the number of houses erected between the date house building recommenced at the end of the war, and December 31st, 1948. These figures have been extracted from information sent in by the various Sanitary Inspectors.

The Rural Housing Survey work was continued in those Districts where the inspections had not been completed by the end of 1948. At the end of the year three Rural Districts—Norton, Driffield and Derwent—still had a considerable number of houses to visit and put into categories. The table below shows the position at the end of the year in the eight rural districts of the County. Nineteen thousand, one hundred and sixty-nine houses, or 85% of the total number of houses to be surveyed have been visited. It was observed that approximately 16% of the houses have been placed in category 5, e.g., totally unfit for human habitation and incapable of being rendered fit at a reasonable cost, and 51% were in categories 1 or 2, as fit or with only minor defects. It should be realised that these figures relate to the rural areas only and the requirements of the larger centres of population will increase considerably the housing needs of the County.

RURAL HOUSING SURVEY.

Total No. of Houses to be surveyed.	No. surveyed.	Classification Categories.				
		1	2	3	4	5
22,632	19,169	5017	4769	5991	1278	3073

Position in respect of Rural Districts.

District.	Total No. of houses to be surveyed.	Number surveyed.	Classification Categories.				
			1	2	3	4	5
Beverley*	3628	3628	1123	1216	832	164	203
Bridlington	2519	2519	889	931	586	37	113
Derwent	3319	1935	1018	410	347	23	160
Driffield	2672	1607	172	263	694	143	478
Holderness*	3725	3725	951	843	1226	155	550
Howden	2434	2357	259	541	1116	83	441
Norton	1976	1007	87	112	401	273	407
Pocklington	2391	2391	518	453	789	400	631

Except for the districts * in every case the houses in Category 4 will also be included in either Category 3 or Category 5.

Note:

- Category 1. Satisfactory in all respects.
2. Minor Defects.
3. Requiring repair, structural alterations or improvement.
4. Appropriate for reconditioning under Housing (Rural Workers) Act.
5. Unfit for habitation and beyond repair at reasonable expense.

Section 4.—Inspection and Supervision of Food.

FOOD AND DRUGS ACT, 1938.

Summary of Samples taken by the Sampling Officers and Analysed
during the year ended 31st March, 1950.

Ale, Old	1	Jelly	1
Almond Mixture	1	Lemonade Powder	1
Almond Paste	1	Malt Vinegar	1
Baker's Filler	1	Malted Milk	1
Beef Paste	1	Meat Paste	3
Beef Sausages	14	Meat Paste (informal)	1
Beef Sausage Meat	11	Meat Pie	1
Beef Suet—Shredded	5	Milk	233
Beer	2	Milk "Appeal to Cow"	18
Black Pudding	1	Milk Pudding—Full Cream ..	1
Brandy Snap (informal)	1	Mince Meat	1
Brawn	3	Mustard	1
Bread	3	Olive Oil	2
Butter	3	Paprika	1
Cherries—Maraschino	1	Pastry Mixture	1
Choc Ice (informal)	1	Peanut Butter	1
Chocolate Ice	1	Peel—Mixed Cut	2
Coco Nut Cream	1	Pepper	2
Cod Roe Spread (informal)...	1	Pepper—Flavoured	
Coffee	1	Compound	1
Confectionery—Sweets	4	Pork Pie	2
Confectionery—Sweets		Pork Sausages	1
(informal)...	2	Pork Sausages with	
Condensed Full Cream Milk		Preservative	1
(informal)	1	Potato Crisps	3
Cream	1	Rum	1
Cut Drained Peel	1	Sage and Onion Stuffing	1
Dressed Crab	1	Salad Cream	1
Farninoca	1	Self Raising Flour	2
Fish Cakes	2	Soya Flour	1
Fruit Ices with Cream	1	Sweetened Fat	1
Glace Cherries	1	Tea	1
Ground Almond Substitute ..	1	Tomato Juice	2
Ground Arrowroot	1	Tomato Ketchup	2
Ground Ginger	1	Tomato Sauce	1
Highland Toffee	1	Vinegar, Artificial	1
Honey, Empire	1	Vinegar, Malt	2
Ice Cream	30	Whisky	1
Ice Cream (informal)	20		
		Total	421

Samples adulterated, unsatisfactory or below the presumptive limits of the Sale of Milk Regulations, 1939.

Article.	No. of samples.	Remarks.
Peef Sausages	1	Legal proceedings. Case dismissed— not proved.
	1	Legal proceedings. Case with- drawn.
Peef Sausage Meat	1	Caution.
Peef Suet	1	Caution.
Fruit Ices with Cream ...	1	Legal proceedings. Case with- drawn—costs remitted. See report below.
Ground Almond Substitute	1	See report below.
Milk	3	Legal proceedings. 2 Convictions. 1 Conditional discharge for 12 months. (Criminal Justices Act, 1948.)
	6	Cautions.
	10	No action taken.
Milk "Appeal to Cow" ...	12	
Peel—Mixed Cut	1	No action taken.
Port Pie	1	No action taken.
Sage and Onion Stuffing ...	1	Infested with mites, etc., and unfit for human consumption. In- formation passed to Sanitary Authority for action.

TOTAL AMOUNT OF PENALTIES, including Costs, £5 14s. 0d.

Permission was granted by the Minister of Food for the County Council to institute proceedings under Article 1 of the Defence (Sale of Food) Regulations, 1943 and 1945, against two sellers for unlawfully publishing an advertisement and a label which was calculated to mislead as to the nature of the article of food in the following cases:—

Fruit Ices with Cream Fined £5.
Ground Almond Substitute Fined £3.

Two cases were reported where a Sampling Officer purchased sausages and meat paste for the purpose of analysis under the Food and Drugs Act, 1938, and had been charged amounts in excess of those prescribed by a Maximum Prices Order. These facts were reported to the Enforcement Branch of the Ministry of Food and proceedings were taken by that authority. In one case the defendant was fined £3. and in the other £2 and his employee £1 for aiding and abetting.

SUPERVISION OF MILK SUPPLIES.

On October 1st, the responsibility for the administration of Milk and Dairies Regulations, so far as production on the farm is concerned, passed to the Minister of Agriculture and Fisheries, as the Food and Drugs (Milk and Dairies) Act of 1944 came into force on that date. Certain functions of the Minister have been delegated to the County Agricultural Executive Committee and provision has been made for a technical officer and a medical officer of local authorities to represent the public health interests on the Milk Sub-Committee of the Executive Committee.

The County Council therefore ceased to be the authority for the issue of "Tuberculin Tested" and "Accredited" Milk licences under the Milk (Special Designations) Regulations.

At the time of the transfer, there were 72 "Tuberculin Tested" licences and 47 "Accredited" licences in operation in the County. Several hundred producers had been advised of the requirements to be satisfied before a "Tuberculin Tested" licence could be issued, and it is expected that there will be a big increase in the number of producers of this grade of milk in the near future.

There has been a marked interest in designated milk production in the past year, mainly in view of the policy of the Government which it was expected would be put into effect in the new Milk and Dairies Regulations. The new Regulations came into operation on the 1st October and prescribed standards for buildings and methods of production, legally enforceable, which are more stringent than those formerly administered by the local authorities.

The County Council have been given new powers concerned with the licensing and supervision of milk Pasteurising and Sterilising establishments, work which, in respect of pasteurising licences, was formerly carried out by the District Councils. The District Councils retain their powers in connection with the distribution of milk and the inspection of retail dairies, etc., and the new provisions of the Milk and Dairies Regulations will assist them to maintain a satisfactory standard of hygiene at these premises. A useful new regulation empowers the District Medical Officer of Health to prevent the sale of milk which he has evidence has caused disease or which he suspects is infected with disease communicable to man, or to require the supply to be properly treated to make it safe for consumption.

MILK (SPECIAL DESIGNATIONS) REGULATIONS. LICENCES ISSUED BY LOCAL AUTHORITIES.

District.	Licences issued by County Council.						Licences issued by District Councils.								
			"Tuberculin Tested."		"Accredited."		"Tuberculin Tested."			"Accredited."			"Pasteurised."		
	† Pasteurised.	† Sterilised.	Production only.	Production and Bottling.	Production only.	Production and Bottling.	Bottling.	Dealers.	Supplementary.	Bottling.	Dealers.	Supplementary.	* Pasteurising Plants.	Dealers.	Supplementary.
Beverley Borough	—	—	—	—	—	—	—	—	1	—	—	—	—	—	2
Bridlington Borough	1	1	2	—	—	—	1	6	—	1	1	—	2	4	1
Hedon Borough	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Driffield Urban	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Filey Urban	1	—	—	—	—	—	1	5	2	—	—	—	—	4	1
Haltemprice Urban	—	—	—	1	—	—	1	—	1	—	—	—	—	3	2
Hornsea Urban	—	—	—	—	—	—	—	—	—	—	—	—	—	1	1
Norton Urban	—	—	—	—	—	—	1	3	—	—	—	—	—	3	—
Withernsea Urban	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1
Beverley Rural	—	—	1	—	1	—	—	—	—	—	—	—	—	—	3
Bridlington Rural	—	—	6	—	1	—	—	—	—	—	—	—	—	—	—
Derwent Rural	1	—	—	1	—	—	—	—	3	—	—	—	1	—	—
Driffield Rural	—	—	—	2	—	—	—	—	—	—	—	—	—	—	3
Holderness Rural	—	—	4	—	5	—	—	—	—	—	—	—	—	—	—
Howden Rural	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—
Norton Rural	—	—	—	—	1	1	1	—	1	—	—	—	1	—	—
Pocklington Rural	—	—	2	1	—	—	—	1	—	—	—	—	—	—	2
	3	1	16	5	8	1									

*Between 1st January and 30th September, 1949.

†Between 1st October and 31st December, 1949.

Table 1. Summary of the data.

Location	Year	Month	Day	Time	Temperature (°C)	Humidity (%)	Wind Speed (m/s)	Wind Direction	Cloud Cover (%)	Visibility (km)	Soil Moisture (%)	Plant Growth (cm)	Animal Activity
Location 1	2010	1	1	10:00	15.2	65	2.5	SE	10	10	10	10	10
Location 2	2010	1	1	10:00	15.2	65	2.5	SE	10	10	10	10	10
Location 3	2010	1	1	10:00	15.2	65	2.5	SE	10	10	10	10	10
Location 4	2010	1	1	10:00	15.2	65	2.5	SE	10	10	10	10	10
Location 5	2010	1	1	10:00	15.2	65	2.5	SE	10	10	10	10	10
Location 6	2010	1	1	10:00	15.2	65	2.5	SE	10	10	10	10	10
Location 7	2010	1	1	10:00	15.2	65	2.5	SE	10	10	10	10	10
Location 8	2010	1	1	10:00	15.2	65	2.5	SE	10	10	10	10	10
Location 9	2010	1	1	10:00	15.2	65	2.5	SE	10	10	10	10	10
Location 10	2010	1	1	10:00	15.2	65	2.5	SE	10	10	10	10	10
Location 11	2010	1	1	10:00	15.2	65	2.5	SE	10	10	10	10	10
Location 12	2010	1	1	10:00	15.2	65	2.5	SE	10	10	10	10	10
Location 13	2010	1	1	10:00	15.2	65	2.5	SE	10	10	10	10	10
Location 14	2010	1	1	10:00	15.2	65	2.5	SE	10	10	10	10	10
Location 15	2010	1	1	10:00	15.2	65	2.5	SE	10	10	10	10	10
Location 16	2010	1	1	10:00	15.2	65	2.5	SE	10	10	10	10	10
Location 17	2010	1	1	10:00	15.2	65	2.5	SE	10	10	10	10	10
Location 18	2010	1	1	10:00	15.2	65	2.5	SE	10	10	10	10	10
Location 19	2010	1	1	10:00	15.2	65	2.5	SE	10	10	10	10	10
Location 20	2010	1	1	10:00	15.2	65	2.5	SE	10	10	10	10	10

Notes: The data were collected from 10 different locations in the study area.

SAMPLING OF DESIGNATED MILK.

The following table sets out details of the number of samples of milk taken from producers in the County Area before the 30th September, and the results of the examination of the samples:—

Taken by.	Grade.	Number of Samples.	Methylene Blue Test.		Presence of Bacillus Coli.		Biological Examination.	
			Satisfactory.	Unsatisfactory.	Absent.	Present in 2 or more tubes.	Negative.	Positive.
County Council.	" T.T. "	403	376	27	302	101	1	—
	" Accredited "	296	261	35	216	80	91	2
	Pre-licence " T.T. "	53	47	6	37	16	—	—
	Pre-licence " Accredited "	11	10	1	10	1	—	—
By other Authorities from East Riding Producers.	" T.T. "	66	56	10	58	8	—	—
	" Accredited "	31	26	5	28	3	—	—
Total number of Samples.	" T.T. "	522	479	43	397	125	1	—
	" Accredited "	338	297	41	254	84	91	2
Total .....	.....	860	776	84	651	209	92	2

"*Tuberculin Tested*" Samples. 8.2% failed to satisfy the methylene blue test and 23.9% contained bacillus coli in two or more tubes examined.

"*Accredited*" Samples. 12.1% failed to satisfy the methylene blue test and 24.8% contained bacillus coli in two or more tubes examined.

SCHOOL MILK SAMPLING.
Results of Examination of Samples.

Grade.	Number of Samples taken.	Methylene Blue Test.		Presence of Bacillus Coli.		Phosphatase Test.	
		Satisfactory.	Unsatisfactory.	Absent.	Present in two or more tubes.	Satisfactory.	Unsatisfactory.
Raw	37	30	7	11	6	—	—
Pasteurised or heat-treated	56	50	6	—	1	53	3

Thirty-one samples of school milk were examined biologically for the presence of tubercle bacilli. One positive result was obtained and the appropriate steps were taken in this case.

HEAT-TREATED MILK.

Sampling of processed milk has been continued throughout the year and, as the results of examinations show, the heat treatment plants have been operated reasonably satisfactorily. It has been necessary on very few occasions to take action following the receipt of adverse reports.

During the year, 178 samples obtained from all sources were examined, with results as set out in the table below:—

Sampling Results.

Samples obtained by	No. of Samples	Methylene Blue Test		Phosphatase Test		*Turbidity Test	
		Satisfactory	Unsatisfactory	Satisfactory	Unsatisfactory	Satisfactory	Unsatisfactory
County Council	28	24	4	26	1	1	—
Bridlington Borough ..	91	87	2	61	5	25	—
Filey U.D.	24	22	2	23	1	—	—
Haltemprice U.D.	10	8	—	7	1	2	—
Derwent R.D.	16	15	1	16	—	—	—
Holderness R.D.	8	7	1	6	2	—	—

In the case of Bridlington Borough and Haltemprice Urban District the totals do not balance as the method of testing sterilised milk was altered by the Laboratory during the year.

*Sterilised milk only.

These results include samples of heat-treated milk taken from schools.

HOSPITAL MILK SUPPLIES.

Twenty-seven samples of milk produced at Hospital Dairy Farms have been obtained and submitted to the Methylene Blue test at the request of the Ministry of Health.

BIOLOGICAL EXAMINATIONS.

Forty-five samples of undesignated milk and ninety-five samples of Accredited milk were examined biologically for the presence of tubercle bacilli. Two samples of Accredited milk and two samples of undesignated milk were certified as tuberculous, and appropriate action was taken to secure the slaughter of the infected animals.

VETERINARY INSPECTION OF DAIRY HERDS.

I am indebted to Mr. E. Varley, Divisional Veterinary Inspector, Ministry of Agriculture and Fisheries, for the following details of the inspections of dairy herds which were carried out during the year:—

	No. of Herd Inspections.	No. of Cattle Examined.
Tuberculin Tested Herds	128	5,940
Accredited Herds	93	2,449
Non-Designated Herds	3,088	32,193

Number of confirmed cases of Tuberculosis during the year, 51.

(The above figure includes 16 cases of Tuberculosis of the Udder.)

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 11, giving a death rate of .05 per 1,000 of the population. The figure for 1948 was .03.

SMALLPOX.

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

MEASLES.

The number of notifications received during the year was 1,734, compared with 2,682 in 1948. There were no deaths from the disease.

ENTERIC FEVER.

One case of enteric fever was reported in 1949.

SCARLET FEVER.

Two hundred and fifty-four cases of this disease were notified during the past year, compared with 182 in the previous year. There were no deaths.

DIPHTHERIA.

There were only 6 notifications of this disease and no deaths during the year 1949, the same figures as in 1948.

ACUTE POLIOMYELITIS.

Seventeen cases of poliomyelitis and three cases of polio-encephalitis were notified. Three deaths were reported.

PUERPERAL PYREXIA.

Four women were reported during the year to be suffering from puerperal pyrexia. Two cases occurred in Private Nursing Homes and two in Maternity Homes. There was one death.

OPHTHALMIA NEONATORUM.

Two infants were notified as suffering from ophthalmia neonatorum during 1949. Both cases were satisfactorily treated in hospital.

CEREBRO-SPINAL FEVER.

Two cases were notified, compared with two in the previous year and three in 1947. One of these illnesses resulted in the death of the patient.

TUBERCULOSIS.

Under the new health services arrangements the responsibility for the provision of hospital, sanatoria and dispensary services rests with the Regional Hospital Board, the County Council having the responsibility of dealing with the care and after-care of tuberculous patients in their own homes and a general responsibility for preventive work.

Pending the setting up of Care Committees, the care and after-care arrangements have continued to be administered centrally. Health Visitors and School Nurses also act as Tuberculosis Visitors. They visit the homes of patients and attend at dispensary sessions so that they can co-ordinate their work with that of the Regional Hospital Board's Tuberculosis Specialists.

As the need arises, tuberculous patients being treated in their own homes are supplied with extra milk, with garden shelters, beds and bedding, and with nursing equipment as required. No charges are made for any of these provisions.

NEW CASES AND MORTALITY.

One hundred and fifty-four (135 pulmonary and 19 non-pulmonary) new cases of tuberculosis were notified during the year, and, in addition, 53 cases came to notice otherwise than by formal notification. The total number of cases notified in the County shows an increase of 6 on the figure for 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, 1948	392	331	112	129	964
Added to the Registers:—					
(a) Cases notified for the first time during the year	87	48	10	9	154
(b) Un-notified cases brought to notice otherwise than by formal notification	33	14	3	3	53
Removed from the Registers on account of death, change of address, etc.	56	45	7	5	113
Number of cases on the Registers at 31st December, 1949	456	348	118	136	1058

The number of deaths ascribed to all forms of tuberculosis as returned by the Registrar-General was 72, compared with 64 in 1948. Sixty-two of the deaths were certified as due to pulmonary tuberculosis, and 10 to the other forms of the 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	—	1	—	1	—
1—5	3	2	1	1	—	1	—	—
5—15	4	1	3	3	—	—	1	1
15—45	71	50	6	7	15	19	4	1
45—65	30	6	1	1	16	5	2	—
65 and upwards	2	3	—	—	2	3	—	—
Totals	110	62	12	12	34	28	8	2

The pulmonary death rate was .30 per 1,000 of the population, compared with .23 in the previous year. The non-pulmonary death rate of .05 is the lowest ever recorded in the County.

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.		1942	1943	1944	1945	1946	1947	1948	1949
	1921—1930	1931—1940								
Administrative County	0·65	0·40	0·39	0·31	0·42	0·27	0·28	0·34	0·23	0·30
Urban Districts..	0·75	0·48	0·54	0·46	0·53	0·43	0·36	0·41	0·26	0·29
Rural Districts..	0·58	0·34	0·25	0·18	0·33	0·31	0·19	0·28	0·20	0·31

OTHER FORMS OF TUBERCULOSIS.

District.	Average rate for the ten years.		1942	1943	1944	1945	1946	1947	1948	1949
	1921—1930	1931—1940								
Administrative County	0·18	0·12	0·12	0·12	0·12	0·13	0·07	0·06	0·08	0·05
Urban Districts..	0·19	0·11	0·16	0·07	0·12	0·10	0·07	0·07	0·12	0·05
Rural Districts..	0·17	0·12	0·09	0·17	0·11	0·15	0·06	0·06	0·04	0·05

TABLE I.

Cases of Infectious Disease Notified during
the year 1949.

Notifiable Disease.	Urban Districts.	Rural Districts.	Adminis- trative County.
Scarlet Fever	161	93	254
Diphtheria (including Membranous Croup)	5	1	6
Enteric Fever	—	1	1
Puerperal Pyrexia	3	1	4
Erysipelas	14	19	33
Ophthalmia Neonatorum	1	1	2
Cerebro-Spinal Fever	—	2	2
Acute Poliomyelitis	7	10	17
Acute Polio Encephalitis	1	2	3
Measles	522	1212	1734
Pulmonary Tuberculosis	102	76	178
Other forms of Tuberculosis	12	12	24
Pneumonia	95	78	173
Chicken Pox	102	21	123
Whooping Cough	320	211	531
Dysentery	8	2	10
Totals	1353	1742	3095

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

DISEASE.	TOTAL CASES NOTIFIED IN EACH DISTRICT.									
	Totals.	Beverley.	Bridlington.	Driffield.	Filey.	Haltemprice.	Hedon.	Hornsea.	Norton.	Withernsea.
Scarlet Fever	161	34	52	3	7	54	1	2	8	...
Diphtheria	5	1	...	...	...	4	...	...	...	...
Enteric Fever .....	...	...	...	...	...	...	...	...	...	...
Puerperal Pyrexia	3	1	...	1	...	1	...	...	...	...
Erysipelas	14	1	5	...	2	6	...	...	...	...
Ophthalmia Neonatorum	1	...	...	...	...	1	...	...	...	...
Measles	522	29	187	32	41	182	...	9	42	...
Pulmonary Tuberculosis	102	18	26	3	5	34	1	4	6	5
Other forms of Tuberculosis	12	2	1	2	...	4	...	1	2	...
Pneumonia	95	21	29	8	17	18	...	2	...	...
Chicken Pox	102	...	...	...	...	102	...	...	...	...
Whooping Cough	320	27	46	23	98	101	...	12	13	...
Acute Poliomyelitis	7	4	1	...	...	1	...	...	1	...
Acute Polio Encephalitis	1	...	1	...	...	...	...	...	...	...
Cerebro-Spinal Fever ...	...	...	...	...	...	...	...	...	...	...
Dysentery	8	...	...	...	...	3	...	...	...	...
Totals	1353	138	348	72	170	516	2	30	72	5

TABLE III.

Cases of Infectious Disease Notified.
Rural Districts.

DISEASE.	Totals.	TOTAL CASES NOTIFIED IN EACH DISTRICT.							
		Beverley.	Bridlington.	Derwent.	Driffield.	Holderness.	Howden.	Norton.	Pocklington.
Scarlet Fever	93	28	11	24	3	10	2	6	9
Diphtheria	1	...	...	...	...	...	...	1	...
Enteric Fever	1	...	1	...	...	...	...	...	...
Puerperal Pyrexia	1	...	...	...	1	...	...	...	...
Erysipelas	19	1	2	2	1	4	3	1	5
Ophthalmia Neonatorum	1	...	...	...	1	...	...	...	...
Cerebro-spinal Fever ...	2	...	...	...	...	...	1	...	1
Measles	1212	118	45	230	73	61	242	137	306
Pulmonary									
Tuberculosis	76	10	6	6	6	16	14	6	12
Other forms of									
Tuberculosis	12	...	1	1	1	2	2	...	5
Pneumonia	78	20	1	14	7	5	12	1	18
Chicken Pox	21	2	...	...	19	...	...	...	...
Whooping Cough	211	58	6	24	7	17	52	11	26
Acute Poliomyelitis	10	2	...	1	...	2	...	1	4
Acute Polio									
Encephalitis	2	1	1	...	...	...	...	...	...
Dysentery	2	...	1	...	...	...	...	...	1
Totals	1742	240	75	302	119	127	328	164	387

TABLE IV.

**Vital Statistics of Whole District during 1949, 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.
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
1946	194,720	3739	19.2	139	37	2355	12.1
1947	200,110	3872	19.4	155	40	2405	12.0
1948	205,900	3432	16.7	111	32	2205	10.7
1949	205,593 209,343†	3308	16.1	98	30	2498	12.2

†Includes non-Civilians

TABLE V.
Rainfall Returns, 1949.

Station.	Height of Rain Gauge above Sea Level.	Observer.	Total Rain-fall.	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	22.19	136	25.91
Osgodby	29 „	Mrs. W. V. Hescok ..	19.35	134	23.43
Withernsea	31 „	The Surveyor... ..	13.81	104	—
North Cave	35 „	Col. W. H. Carver	22.49	131	26.45
Hornsea	35 „	Mr. H. Wilkinson	18.22	155	—
Bridlington	60 „	Mr. A. J. Booker	22.94	176	—
Lowthorpe	63 „	Mr. J. Tate	22.76	143	25.08
Scampston	100 „	Mr. F. Ironside	19.60	145	26.01
Dunnington	110 „	Miss E. Hildyard	23.03	189	27.97
Dalton Holme	150 „	Mr. W. F. Cullen	21.81	143	28.41
Beverley (E.R. Mental Hospital)	175 „	Medical Superintendent	21.14	129	25.47
Birdsall	304 „	Mr. James Anderson...	23.08	142	29.36

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

REPORT OF SCHOOL MEDICAL OFFICER

REPORT

of the

School Medical Officer

for the

Year ended 31st December, 1949.

REPORT OF SCHOOL MEDICAL OFFICER

There has been little material alteration in the functioning of the School Health Service during the year under review, and, as in previous reports, the statistical summary is set out in tables under the appropriate headings. There are one or two points, however, which call for special comments.

The arrangements for the attendance of a consultant at the orthopaedic clinics have been altered owing to the allocation of duties by the Regional Hospital Board. Instead of having one consultant attending all clinics dealing with East Riding School Children, there are now three. Although this is not of great consequence so far as the care of the children is concerned, it does cause some minor difficulties in the administration of the scheme.

As stated in the Senior Dental Officer's report, two resignations of Dental Officers, one part-time, took effect during the year, necessitating some re-arrangement of the work. Endeavours to bring the dental staff to full strength have been without effect.

The handicapped children call for special comment if for no other reason than that special educational facilities are so scarce. Little difficulty is experienced with the blind and deaf, as they can be accommodated after a comparatively short wait. Greater difficulty is experienced with other types of physical handicap, but owing to the comparatively small numbers this never assumes serious proportions, but the greatest problem is in the case of the educationally sub-normal, and here it is a never-ending one.

The first problem is that of ascertainment. It will be seen from the tables that 66 children were examined during the year and that 33 of these were certified as educationally-sub-normal. If one assumes that approximately 10% of the school population is to varying degrees educationally sub-normal, this is a very small figure for ascertainment and is obviously nowhere near tackling the problem. This is not satisfactory in as much as it means that many educationally-sub-normal children, unascertained, are continuing to attend school and being taught as if they were normal. In addition, it means that many children who will probably require supervision after leaving school are drifting along and may eventually leave school without having come to special notice. This is a potentially serious problem which must be dealt with.

If all the children in the County were ascertained, this would not do much, however, to solve the problem, since special classes and schools are not available in which to place them, although it is hoped that, with the opening of new schools in Beverley and Hessle, accommodation now used to the full, may become available in which it will be possible to develop special classes to serve the needs of the higher

grades of educationally sub-normal children in those areas. As matters stand at the moment, however, the children already ascertained as requiring special education and not placed, amount at present to 213. They are continuing to attend ordinary classes in schools, where they must be presumed to act as a drag on the normal children in the class. Many of these children attend small village schools where it is often impossible to give them the special attention which they require, and any attempt to do so may be at the expense of the normal children. This must create a difficult position from a teacher's point of view.

It is hoped that during 1950 there will be an increase in the number of children examined and ascertained, as there has been an improvement in the staffing position, but it must be again emphasised that this is no solution to the problem. In connection with ascertainment, it should also be pointed out that this type of work is rather exhausting and there is therefore a limit to the amount which medical officers can be called upon to undertake in the course of a week in addition to their normal work for the Education Authority and the Health Authority. There is also undoubtedly a certain feeling of frustration in carrying out this work when the officer concerned knows full well that little or no action can be taken following on the ascertainment of a child's abilities.

Speech Therapy has now completed a full year's working. The report by the Speech Therapist is incorporated and calls for no comment beyond emphasising that it is quite impossible in a County of this kind to give completely adequate treatment to many of the cases. Attempts to obtain the services of an additional Speech Therapist have so far met with no success.

GENERAL STATISTICS.

Number of Primary Schools	201
Number of pupils on Primary School Registers	21,860
Number of Secondary Schools in the Administrative County	9
Number of pupils on Secondary School Registers ...	4,412

MEDICAL INSPECTIONS.

It has been possible to carry out 193 primary school medical inspections and ten secondary school inspections during the year.

	East Riding.	Number found to require Treatment.	Observation.
Routine examinations.			
Entrants	3080		
Second Age Groups	1918		
Third Age Groups	1901		
Other routine examinations	642		
	<hr/>		
Total routine examinations	7541	1084	2688
Special examinations and re-inspections	4788	1005	2112
	<hr/>		
Total examinations	12329		

These figures indicate a decrease of 1,278 on the number of examinations held in 1948. At the routine examinations 14.37% of the children were found to require treatment as against 14.4% in 1948 and 48.9% of the children were found to need further observation.

Particulars as to dental work done are given later in this report under dental defects.

GENERAL CONDITION.

Results show that a high standard of nutrition is being maintained. Out of 7,541 children examined for classification 98.5% are marked good or fair as regards nutrition and 1.5% as poor. These percentages show little change from those found in previous years.

VISUAL DEFECTS AND EXTERNAL EYE DISEASE.

During the year 712 children were referred from school medical inspections as needing treatment for eye defects, as compared with 865 children referred for these defects in 1948. Treatment facilities are now arranged through the specialist service of the Regional Hospital Board.

The number of examinations during the year under the scheme, either at clinics or as individual cases, was 1,659, as compared with 1,281 in the previous year. Glasses were prescribed in 719 cases as against 764 in 1948. The services of an orthoptist were available at the York County Hospital, and 13 children attended the orthoptic clinic on 46 occasions. Four children were discharged cured. Minor eye defects were reported in the cases of 275 children.

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.
90	42	48

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

NOSE AND THROAT DEFECTS.

During the year there was a great increase in operative work on the ear, nose and throat cases. This is accounted for by the fact that arrears from previous years are now being overtaken.

Comparative statistics of the children referred for treatment and who received treatment during the last ten 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.
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
1946	10484	697	314	2.99
1947	11421	644	219	1.8
1948	13607	786	507	3.7
1949	12329	628	638	5.1

DISEASES OF THE CHEST AND DELICATE CHILDREN.

Due to the operation of the National Health Service Act and the practice whereby children are being referred by their own family doctor for consultation with the Chest Specialist, it was not possible to obtain information about these cases. It is hoped that in consequence of improved liaison with hospital staffs in 1950 there will be more information available.

UNCLEANLINESS.

In their cleanliness surveys the School Nurses made 70,290 examinations. On an average each child was examined four times during the year, and the nurses found 2,244 cases of uncleanness. This number of cases represented uncleanness in 974 individual children, *i.e.*, 4% 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 are supplied with a Hair Cream containing D.D.T. and also Lethane Hair Oil for distribution to parents as required.

MINOR AILMENTS.

There was no addition to the facilities provided for treatment of minor ailments in the County, but it is interesting to note that during 1949 there was a considerable increase in the use made of the clinics, in spite of the fact that there is no longer a financial reason for parents avoiding taking their children to the family doctor.

The total number of cases dealt with in the Clinics and by the School Nurses during the year is shown in the following table, viz.:—

Defect.	No. of cases reported	
	1949.	1948.
Ringworm (head)	5	3
Ringworm (body)	28	4
Scabies	60	81
Impetigo	300	182
Other Skin Diseases	569	305
Minor Eye defects	530	303
Minor Ear defects and Deafness	317	213
Minor Injuries, Bruises, etc.	2441	2377
Total	4250	3468

SCHOOL NURSES.

Figures relating to this work for 1949 are as follows:—

Visits to Schools:—

Routine examination	797
Follow-up visits	270
No. of examinations	70290

Visits to Homes:—

No. of homes visited	3363
No. of children seen on these visits	4037

Reasons for these visits:—

Uncleanliness	1460
Minor Ailments	679
Nutrition	854
Other reasons	1083

INFECTIOUS DISEASES.

Particulars of infectious diseases will be found in the earlier section of this report. It was not necessary to close any schools on account of outbreaks of infectious diseases.

EXAMINATION FOR MENTAL CONDITION.

During the year, 66 children were specially examined, compared with 68 in the previous year.

The findings of these special examinations were as follows:—

Normal Intelligence	8
Educationally Sub-Normal:—	
(a) for education in special classes	16
(b) for education in special schools	17
For notification under the M.D. Acts	22
Decisions deferred pending appeals	3
	<hr/>
	66

HANDICAPPED CHILDREN.

NUMBER OF HANDICAPPED CHILDREN AT 31st DECEMBER, 1949.

GROUP	Defect	In Special Schools	In main- tained Pri- mary or Secondary Schools	In Independ- ent Schools	At no School or Institution	TOTAL	
						Boys	Girls
A.	<i>Blind Children</i> , i.e. suitable for education by methods not involving the use of sight	8	—	—	—	3	5
B.	<i>Partially-sighted Children</i> , i.e. suitable for education by special methods involving the use of sight	4	5	—	—	4	5
C.	<i>Deaf Children</i> , i.e. suitable for education by methods for those without naturally acquired speech	14	—	—	—	5	9
D.	<i>Partially Deaf Children</i> , i.e., suitable for education by special methods involving the use of speech	—	3	—	—	1	2
E.	<i>Delicate Children</i> , i.e. those who for health reasons should not be educated under normal school regime	1	40	—	—	22	19
F.	<i>Diabetic Children</i> , i.e. children who through need of treatment need residential care	—	2	—	—	2	—
G.	<i>Educationally Sub - Normal Children</i> , i.e. those needing a specialised form of education	4	213	1	—	145	73
H.	<i>Epileptic Children</i> , i.e. those who should be educated in special schools	3	3	—	—	5	1
I.	<i>Maladjusted Children</i> , i.e., those who require special educational treatment	1	10	—	—	4	7
J.	<i>Physically Handicapped Children</i> , i.e. those with disease or crippling defect who should be educated in special schools	3	58	1	13	40	35
K.	<i>Pupils suffering from Speech Defect</i> , i.e., those who require special educational treatment	—	405	—	—	255	150
L.	<i>Pupils suffering from Multiple Disabilities</i>	—	3	—	—	2	1

Particulars regarding handicapped pupils 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.	In at 31.12.48	Admitted during 1949.	Discharged during 1949.	Number maintained. at 31.12.49.
Blind	York	7	1	—	8
	Sheffield School for Blind	2	2	1	3
	Hull 21st Ave.	—	1	—	1
Deaf	Doncaster	9	—	—	9
	Sutton	3	—	1	2
	Leeds Blenheim	2	—	—	2
	Brighton	1	—	—	1
	Harwood Bridge	—	1	1	—
Epileptic .	Lingfield	2	1	—	3
Delicate	Ogilvie School, Clacton	—	1	—	1
Cripples	Killinghall	—	1	—	1
	Banstead	—	1	1	—
	Chipping Norton	1	—	—	1
Malad- justed	Edgemount, Chithurst	—	1	—	1
Educa- tionally Sub-Normal	Heathway, Dagenham.	1	—	—	1
	Dovecote, Knotty Ash.	2	—	2	—
	The Beacon School, Lichfield	1	—	—	1
	Northumberland Ave. Hull	1	1	1	1
	Lambourne, Redditch..	—	1	—	1

Of the above, 7 of the blind are maintained by the Secondary and Further Education Sub-Committee.

ORTHOPAEDIC AND POSTURAL DEFECTS.

During the year 420 children (of whom 222 were new cases) made 748 attendances at the orthopaedic clinics.

Thirty-eight were admitted to Kirbymoorside Hospital for operative treatment and, if necessary, afterwards supplied with appliances. Thirty-seven were discharged in the year.

CHILD GUIDANCE.

As in previous years, attempts were made to obtain appointments at Child Guidance Clinics in York, but, as the figures indicate, this was in practice of little value. At the time of writing a beginning has been made in the establishment of a Child Guidance Service in the County.

Six children were recommended as suitable for attendance at the clinic during 1949, but new appointments for a first examination were only 4.

SPEECH THERAPY.

Two hundred and ninety-nine sessions have been held at clinics in the East Riding since they were opened in January, 1949. In this time a total of 302 cases have been treated, with a total of 2,333 attendances. The percentage of defects shows as follows:—

Defects of Articulation	60%
Stammer	30%
Cleft Palate	10%

In addition to these cases receiving treatment in the Clinics, ten have been visited 78 times and received treatment at home. Most of these can now look forward to total discharge in the near future.

Further to these cases, there are a few isolated patients of queried types of congenital aphasia due usually to an accompanying spastic condition, and a few cases of deafness, either acquired or congenital. All of these cases are making good progress with their speech, but, of course, a speedy discharge cannot be expected.

At the commencement of clinics, a few cases with a low I.Q. were sent to the Speech Therapist. This was largely due to a lack of experience in discriminating the suitable patient for speech therapy, but it appears now to be generally understood that a speech therapist is not properly qualified to undertake any patient with an I.Q. below 75.

Total discharges are still slow. This is largely the outcome of the fact that generally speaking each case is seen for a quarter of an hour every other week. It would, of course, be beneficial all round if each case could be seen once a week.

Attempts are being made to appoint an additional speech therapist to alleviate this difficulty. It is also hoped that a second speech therapist will make it possible to open further clinics. In this event, the 75 children who at present have throughout been unable to attend any existing clinic will be able to receive the same benefits as those children who live in less remote parts of the Riding.

The waiting list of 120 is still large, and is the obvious result of slow discharges, the causes of which have already been explained, and, of course, it is another indication of the need for an additional speech therapist.

Generally speaking, attendances at the speech clinics are very regular, and this appears to be due to the fact that the teachers as well as the parents of the children are anxious to take this opportunity offered to them.

All the teachers in the East Riding have been extremely helpful and co-operative.

REPORT OF THE SENIOR DENTAL OFFICER FOR THE YEAR 1949.

The dental staff at the end of the year under review consisted of five full-time dental officers and a similar number of dental attendants. The resignation during July of Mr. Beddoes from his part-time appointment at the Beverley Clinic, which opened in 1926, and where most valuable and careful treatment was done, has been a serious loss to the East Riding. The staff was further depleted when Mr. McCaig resigned in October. These resignations necessitated a re-arrangement of the dentists. The Driffield area has been shared by the assistant dental officers. The fixed clinic at Beverley used for the Borough schools is open four sessions weekly and staffed by Mr. Jones. At Bridlington, five sessions are held weekly and staffed by the Senior Dental Officer.

It has only been possible to maintain the existing service during the year, and any extension to the available facilities cannot be undertaken until further additions are made to the staff. It is significant that the demand for dental treatment has shown a steady increase since July, 1948. This is not wholly due to the inability of the private practitioners to absorb more patients, but to the fact that since all treatment is free, many parents do not now regard the school service as a charitable institution. The policy followed at present ensures that each child regularly accepting treatment has the necessary fillings and extractions completed before the dental officer leaves the district.

The acceptance rate for treatment was 83.9%.

It is not possible to treat the more complicated regulation cases and only those involving the movement of one or two teeth are undertaken. Fifty-seven cases were successfully completed and 354 permanent teeth were extracted to obviate probable malocclusion. X-ray facilities are available at the various local hospitals and the work is satisfactorily and expeditiously performed.

The mobile clinics retain their popularity with patients, dental officers and school staffs.

I should like to thank the dental staff for their keen interest and high standard of work, the teachers and office staff for their valuable co-operation and all who contribute to the successful working of this service.

P. S. SPENCE.

CO-OPERATION WITH VOLUNTARY BODIES.

The National Society for the Prevention of Cruelty to Children have again given valuable assistance in dealing with cases where it appeared children were being neglected or required some form of protection. The local Inspectors have always proved to be most helpful. School Welfare Officers report children direct to the Society when necessary in urgent cases.

CO-OPERATION WITH TEACHERS AND SCHOOL WELFARE OFFICERS.

The help of teachers in connection with the clerical work necessitated by Medical Inspections and in weighing children is gratefully acknowledged. I would also add my thanks to School Welfare Officers for their willing assistance.

PROVISION OF MILK AND MEALS.

Although the number of children taking milk in school shows little variation from the number in the previous year, the actual percentage of children taking milk is reduced because of an increase in the number of children in attendance at school. Comparative figures for a day in October of each year are as follows:—

	1948.	1949.
No. of children in attendance at school	23,572	24,697
No. of children who received liquid milk	20,455	20,342
No. of children who received reconstituted National Dried Milk	156	158
Percentage of children taking milk	86.35	83.01

During 1949, milk was sent to the homes of 127 children absent from school owing to illness.

The following table sets out the position with respect to grades of milk supplied, the percentage of scholars receiving the various grades of milk, and the results of the examinations of samples of milk obtained:—

Grade of Milk.	Number of Sources of Supply.	Number of Departments receiving.	Percentage of total number of children attending schools receiving respective grades.
Pasteurised	6	85	91.6%
"Tuberculin Tested"	9	17	5.2%
"Accredited"	2	2	0.6%
Ordinary Raw	10	13	1.9%
National Dried	—	6	0.7%

It will be observed that 91.6% of the school children attend schools which receive pasteurised milk, and although 15 Departments are supplied with ordinary raw or Accredited milk, only 2.5% of the children attend these schools. Pasteurised milk is difficult to obtain in a number of small isolated rural schools.

Progress in the provision of meals was more marked in 1949 than in any previous year. Again quoting October figures, the number of meals was 11,260 a day, being a percentage of 45.86 of the children in attendance at school. Towards the end of the year, however, the national economic situation led to a complete stoppage of all new building work on school meals projects and an increase in the charge for meals to children. Kitchens under construction at the end of the year will be completed and some progress will be made

with small dining centres where no new building work will be necessary, but 1950 will see a gradual slowing up of the expansion of provision of meals. At the end of the year, four new kitchens were under construction, and it is expected that all will be completed by Midsummer, 1950. After that date, the possibility of new kitchens being provided, apart from those in new schools, is remote.

The increased charge for meals, which will come into effect on 1st January, 1950, is expected to reduce the demand for meals, but to what extent it is not possible to forecast, although it is likely that the greatest effect will be felt in the urban areas where the canteens are largest.

PHYSICAL EDUCATION.

(Report submitted by the Organiser of Physical Education.)

There has been an improvement in staffing in the schools during 1949 and, consequently, less frequent changes of staff. This has resulted in more regular lessons and continuity of work, an essential factor in the improvement of the standard of physical education. Good use was made of village halls during inclement weather and a few more were rented during the past year for indoor activities.

Many school playgrounds are in a very poor state of repair and this limits the work considerably. It is pleasing to note, however, that some have been surfaced during 1949, and a larger number are due for repair in 1950.

GAMES.

Many schools are still handicapped through lack of playing fields, but, in spite of this, there has been great activity in games during the past year. Fifty school football teams participated in eight leagues, seventy teams entered the knock-out competitions, and an East Riding team was entered in the competitions organised by the Yorkshire and English Schools' Football Associations.

Netball rallies and competitions were held at Bridlington, Howden, Bilton, Hessle and Pocklington. These rallies did great service to physical education by providing a stimulus and bringing in some of the rural schools which normally have little opportunity of meeting other teams.

ATHLETICS.

Athletics is now beginning to take its proper place in physical education and many schools are wisely spreading the training in athletics over a longer season by gradually introducing the basic skills into physical training lessons in the winter months. This made participation in school sports more enjoyable and increased the standard of performance.

The Yorkshire Schools' Athletic Sports were held in Bradford and the East Riding team gave an outstanding performance against 25 city and area teams, being placed first in the Boys' Senior and Intermediate events and second in the Boys' and Girls' Junior events.

As a result of this, 10 East Riding scholars were included in the Yorkshire team of 48 athletes, and took part in the English Schools' Athletic Championship Sports which were held at Carshalton, in Surrey.

SWIMMING.

The greatest possible use was made of existing swimming baths to provide swimming instruction for scholars. Unfortunately, 9 schools lost their swimming instruction in 1949 owing to the closure of the Withernsea baths and the time allotted to our schools at the East Hull baths being withdrawn, in order to allow increased numbers from Hull schools to use the baths.

The standard of swimming continued to improve and the County Certificate, which demands a high standard of performance, was awarded to seven boys and four girls, an increase of seven on the previous year's total.

DANCING.

Dancing has its own contribution to make to physical education in the teaching of balance, control and rhythmic action, and many schools give it special attention. Usually, Folk and National dances are taught in our schools, and the benefits derived were evident at the Schools' Folk Dance Festival held at Tranby House, Hessle, when 22 schools participated.

EVENING CLASSES.

Where indoor facilities were available, physical education classes continued in Physical Training, Keep Fit, Modern and Folk Dancing. Youth clubs attached to evening institutes have extended the scope of their physical education by entering teams in inter-club matches and district rallies in netball, football and cricket. The County Youth Athletics Festival was held in Beverley and 22 organisations took part.

I wish to record here my appreciation for the help and willing co-operation of the Administrative Staff, Head Teachers and their staffs during the past year.

(Signed) N. ELLIS.

MEDICAL INSPECTION RETURNS.

YEAR ENDED 31ST DECEMBER, 1949.

TABLE I.

MEDICAL INSPECTION OF PUPILS ATTENDING MAINTAINED PRIMARY AND SECONDARY SCHOOLS.

A. *Periodic Medical Inspections*

Number of Inspections in the prescribed Groups.

Entrants	3080
Second Age Group	1918
Third Age Group	1901

Total	6899
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Number of other Periodic Inspections	642
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Grand Total	7541
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B. *Other Inspections.*

Number of Special Inspections	3390
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Number of Re-Inspections	1398
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Total	4788
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C. *Pupils found to require treatment.*

Number of Individual Pupils found at Periodic Medical Inspection to require Treatment (excluding Dental Diseases and Infestation with Vermin.)

Group.	For defective vision (excluding squint).	For any of the other conditions recorded in Table IIA.	Total individual pupils.
Entrants	64	361	399
Second Age Group	132	131	258
Third Age Group	99	94	180
Total (prescribed groups)	295	586	837
Other Periodic Inspections	28	46	72
Grand Total	323	632	909

TABLE IIA.
RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION.

Defect or Disease.	Periodic Inspections. No. of defects.		Special Inspections. No. of defects.	
	Requiring treatment.	Requiring to be kept under observation but not requiring treatment.	Requiring treatment.	Requiring to be kept under observation but not requiring treatment.
Skin	22	86	83	45
Eyes— <i>a.</i> Vision	323	1102	214	536
<i>b.</i> Squint	50	85	33	123
<i>c.</i> Other	49	35	43	46
Ears— <i>a.</i> Hearing	23	62	33	22
<i>b.</i> Otitis Media ..	13	70	41	23
<i>c.</i> Other	18	71	43	29
Nose or Throat	312	812	316	508
Speech	49	67	26	43
Cervical Glands	11	231	10	112
Heart and Circulation..	7	88	7	62
Lungs	20	214	20	124
Developmental				
<i>a.</i> Hernia	4	24	4	7
<i>b.</i> Other	2	19	2	8
Orthopaedic—				
<i>a.</i> Posture	12	111	6	52
<i>b.</i> Flat Foot	74	187	26	62
<i>c.</i> Other	49	134	20	78
Nervous System—				
<i>a.</i> Epilepsy	1	4	—	11
<i>b.</i> Other	3	31	—	26
Psychological—				
<i>a.</i> Development	—	22	—	17
<i>b.</i> Stability	—	71	—	22
Other	42	162	78	156

TABLE IIB.

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

Age Groups.	Number of Pupils Inspected	A. (Good)		B (Fair)		C. (Poor)	
		No.	% of col 2	No.	% of col 2	No.	% of col 2
Entrants	3080	793	25.75	2243	72.82	44	1.43
Second Age Group	1918	581	30.3	1310	68.3	27	1.4
Third Age Group	1901	496	26.1	1381	72.64	24	1.26
Other Periodic Inspections	642	101	15.7	526	82.0	15	2.3
Total	7541	1971	26.1	5460	72.4	110	1.5

TABLE III.

INFESTATION WITH VERMIN.

(i) Total number of examinations in the schools by the school nurses or other authorised persons	70290
(ii) Total number of <i>individual</i> pupils found to be infested	974
(iii) Number of individual pupils in respect of whom cleansing notices were issued (Section 54 (2), Education Act, 1944).....	—
(iv) Number of individual pupils in respect of whom cleansing orders were issued (Section 54 (3), Education Act, 1944)	—

TABLE IV.

TREATMENT TABLES.

GROUP I.—MINOR AILMENTS (excluding Uncleanliness).

	Number of Defects treat- ed, or under treatment during the year.
(a)	
Skin—	
Ringworm—Scalp—	
(i) X-Ray treatment	—
(ii) Other treatment	5
Ringworm—Body	28
Scabies	60
Impetigo	300
Other skin diseases	569
Eye Disease	530
(External and other, but excluding errors of re- fraction, squint and cases admitted to hospital).	
Ear Defects	317
(Treatment for serious diseases of the ear (<i>e.g.</i> operative treatment in hospital not recorded here but in the body of this Report).	
Miscellaneous (<i>e.g.</i> minor injuries, bruises, sores, chilblains, etc.)	2441
Total	4210

(b) Total number of attendances at Authority's minor ailments clinics, 14188.

GROUP II.—DEFECTIVE VISION AND SQUINT.

	No. of defects dealt with.
Errors of refraction (including squint)	1659
Other defect or disease of the eyes	—
Total	1659
No. of Pupils for whom spectacles were	
(a) Prescribed	719
(b) Obtained	581

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

	Total number treated.
Received operative treatment—	
(a) for adenoids and chronic tonsillitis	558
(b) for other nose and throat conditions	80
Received other forms of treatment	—
Total	638

GROUP IV.—ORTHOPÆDIC AND POSTURAL DEFECTS.

(a) No. treated as in-patients in hospitals or hospital schools	38
(b) No. treated otherwise <i>e.g.</i> in clinics or out-patient departments	420

GROUP V.—CHILD GUIDANCE TREATMENT AND SPEECH THERAPY.

No. of pupils treated—	
(a) under Child Guidance arrangements	6
(b) under Speech Therapy arrangements	302

TABLE V.

DENTAL INSPECTION AND TREATMENT.

(1) Number of pupils inspected by the Authority's Dental Officers :	
(a) Periodic age groups	17772
(b) Specials	387
Total (periodic and specials)	18159
(2) Number found to require treatment	10099
(3) Number actually treated	8479
(4) Attendances made by pupils for treatment	10478
(5) Half-days devoted to—	
(a) Inspection	154
(b) Treatment	1867
Total	2021
(6) Fillings—	
Permanent Teeth	6941
Temporary Teeth	382
Total	7324
(7) Extractions—	
Permanent Teeth	1923
Temporary Teeth	13082
Total	15005
(8) Administration of general anæsthetics for extraction	3422
(9) Other operations—	
Permanent Teeth	1104
Temporary Teeth	111
Total	1215

