

[Report 1953] / Medical Officer of Health and School Medical Officer of Health, East Riding of Yorkshire County Council.

Contributors

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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 1953

Beverley:


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To the Chairman and Members of the County Council.

Sir John Dunnington-Jefferson, My Lords,
Ladies and Gentlemen,

I have the honour to present my Annual Reports on the General and School Health Services of the County for the year 1953.

The vital statistics for the year do not show any variations which appear to call for special comment.

Among the infectious diseases, as compared with previous years, there was a marked increase in the number of notifications of poliomyelitis, but the outbreak of this disease was practically confined to the south-eastern part of the County. For the third year running it is very pleasing to be able to report that there have been no notifications of diphtheria. There is little doubt that the disappearance of this serious disease can be mainly attributed to immunisation, but the absence of diphtheria must not be allowed to let a feeling of complacency and false security develop, and thus result in a falling off in the immunisation rate and consequently in the protection to the community that a high rate ensures. To keep the safety level all children should be immunised against diphtheria in infancy and the protection thus given should be maintained by reinforcing or "boosting" injections at intervals of five years, but there is an apparent lack of appreciation that these "boosting" doses are necessary. On the assumption that an adequate protection against diphtheria exists for five years after the last injection of antigen it is disturbing to find that, although 71% of the children in the County have been immunised at some time in their lives, only 45% can be regarded as being within the adequate five-year safety level of protection.

Last year my report contained a survey of the development of the County's health service since the coming into operation of the National Health Service Act in 1948, and in that survey reference was made to the arrangements which existed for the co-operation of this service with the other parts of the National Health Service. This co-operation is important, as without it the Council's preventive and social medical work cannot hope to be fully successful or reasonably useful. Co-operation with the general practitioner service is especially important and, with a view to aiding this, the Local Medical Committee nominated six general practitioners to form with myself a Study Group to study the Local Health Authority Services. This Study Group proved to be the source of many discussions of mutual value and resulted in several recommendations being made which helped both services, and which could be put into operation by ordinary administrative action on either side. The Study Group submitted to the Local Medical Committee a report containing a summary of their discussions and giving their recommendations, and the Committee felt that the matter was of sufficient importance locally to warrant this report being circulated

to every practitioner working in the County. I am satisfied that this has had the effect of bringing to the practitioners' notice many matters about the organisation and difficulties of the County Health Services concerning which they only had a limited knowledge and by this means has improved relationships and co-operation which, although always good, were at the same time always capable of being developed further.

One point which emerged repeatedly at these Study Group discussions was the increasing appreciation of the value which could follow the closer co-operation between health visitors and general practitioners. Health visitors' duties now include, as may be required, those of visiting and giving advice to any persons who may be ill in their own homes, and thus on the domiciliary side the health visitors' work is coming very much to correspond with that of the almoner for patients who are in hospital. Just as the almoner's social work for hospital patients must be closely integrated with the medical side of the patients' treatment so must the health visitors' social work be integrated with the medical treatment of those patients who stay in their own homes, and this requires that there must be an increasingly closer association between each health visitor and the general practitioners working in her district.

Patients receiving medical treatment in their own homes can, of course, call on the services of the domiciliary nurses and the use made of this service has again shown an increase. More and more demands on the service are being made by old people and at least half of the district nurses' work is for this group of the population. This group also is the one which absorbs much of the domestic help time that can be made available from the Council's panel of domestic helps, and the long term needs of the old people has been largely responsible for the further expansion of the domestic help service which has occurred during the year.

Again may I record my thanks to all members of the staff of the Departments for their continued conscientious service, and my appreciation to all members of the County Council, and especially to the members of the Health Committee and School Welfare Sub-Committee, for their help and support during the year.

I have the honour to be,

Your obedient Servant,

R. WATSON,
County Medical Officer.

August, 1954.

STAFF OF PUBLIC HEALTH AND SCHOOL MEDICAL DEPARTMENT, 1953.

COUNTY MEDICAL OFFICER OF HEALTH AND PRINCIPAL SCHOOL MEDICAL OFFICER.

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

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

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

DIVISIONAL MEDICAL OFFICERS AND SCHOOL MEDICAL OFFICERS.

Buckrose Division.

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

Haltemprice Division.

L. N. Gould, M.R.C.S., L.R.C.P., D.P.H.

Holderness Division.

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

Howdenshire Division.

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

ASSISTANT MEDICAL OFFICERS AND SCHOOL MEDICAL OFFICERS.

Una Lawrie, M.B., Ch.B., D.P.H.

J. S. M. Low, M.B., Ch.B., D.P.H. (from 9th November, 1953).

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

Margaret Mulvein, M.B., Ch.B.

Elizabeth Wales, M.B., B.S. (from 2nd September, 1953).

Margaret L. Walker, M.B., B.S., D.P.H. (to 31st March, 1953).

PRINCIPAL DENTAL OFFICER.

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

ASSISTANT DENTAL OFFICERS.

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

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

P. Gray, L.D.S. (from 7th December, 1953).

Miss K. M. Johnson, L.D.S. (part-time), (from 10th September, 1953).

A. A. Jones, L.D.S.

Miss M. E. Philpott, B.D.S.

PUBLIC ANALYST.

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

COUNTY AMBULANCE OFFICER.

Mr. G. R. Gray.

DISTRICT AUTHORISED OFFICERS.

S. Bateman.

R. Bottomley.

J. Liptrot.

K. Powls.

EDUCATIONAL PSYCHOLOGIST.

J. G. Smith, M.A., Ed.B.

PSYCHIATRIC SOCIAL WORKER.

J. G. Haggett (from 23rd September, 1953).

MENTAL HEALTH SOCIAL WORKER.

Miss S. Graham.

SPEECH THERAPISTS.

Miss E. Crooks, L.C.S.T.

Miss P. S. J. Inman, L.C.S.T.

WELFARE VISITOR.

Mrs. E. Williams.

ORGANISER OF DOMESTIC HELP SERVICE.

Mrs. J. M. Atkinson.

SUPERVISOR OF MIDWIVES.

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

ASSISTANT SUPERVISOR OF MIDWIVES.

Miss G. J. Sanderson, S.R.N., S.C.M., H.V. Cert., Queen's Nurse
(to 31st May, 1953).

Miss M. Wearmouth, S.R.N., S.C.M., H.V. Cert., Queen's Nurse
(from 21st July, 1953).

COUNTY DISTRICT NURSES AND MIDWIVES.

Mrs. E. Allman, S.R.N., S.C.M.
 Mrs. M. Anderson, S.R.N., S.C.M.
 Mrs. K. M. Barnes, S.C.M., S.E.A.N.
 Miss E. Beal, S.C.M., S.E.A.N.
 Miss P. Bennett, S.R.N., S.C.M.
 Miss K. Bratley, S.R.N., Q.N.
 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. E. Coverdale, S.R.N., 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.
 Miss L. Danby, S.R.N., S.C.M., Q.N.
 Miss I. Derving, S.C.M., S.E.A.N.
 Miss B. Dolphin, S.R.N., S.C.M.
 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.
 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.
 Mrs. H. M. Hall, S.R.N., S.C.M. (from 27th August, 1953).
 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.
 Miss E. W. Hogg, S.R.N., S.C.M.
 Miss D. E. Holden, S.R.N., Q.N.
 Mrs. H. A. Holdridge, S.R.N., Q.N.
 Mrs. E. M. Hudson, S.C.M.
 Miss E. Hutchinson, S.R.N., S.C.M.
 Miss E. Ingleby, S.R.N., S.C.M., Q.N. (to 30th June, 1953).
 Miss M. E. Jenkins, S.R.N., S.C.M.
 Mrs. M. Kirkwood, S.R.N., S.C.M.
 Mrs. E. Lenderyou, S.R.N.
 Miss M. Massam, S.R.N., S.C.M., Q.N.
 Mrs. M. O. Morrison, S.C.M.
 Miss E. Norcliffe, S.R.N., S.C.M., Q.N. (from 1st May, 1953).
 Mrs. B. Oliver, S.R.N., S.C.M.
 Miss H. Phillips, S.R.N., S.C.M., Q.N.
 Mrs. W. A. Place, S.C.M.
 Mrs. D. A. Ramsdale, S.R.N., S.C.M.
 Miss G. Rider, S.R.N., S.C.M., Q.N. (from 4th August, 1953).
 Mrs. E. Rozenbroek, S.R.N., S.C.M. (to 30th June, 1953).
 Mrs. E. E. Scrase, S.R.N.
 Mrs. E. A. M. Seal, S.R.N., S.C.M.
 Miss B. A. Silversides, S.R.N., S.C.M.
 Miss M. Simpson, S.R.N., S.C.M., Q.N.
 Mrs. L. F. Slater, S.R.N., S.C.M. (to 31st March, 1953).

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. M. Stevenson, S.R.N., Q.N.
 Mrs. L. E. Thorley, S.R.N.
 Miss M. E. Todd, S.R.N., S.C.M., Q.N.
 Miss E. Warder, S.R.N., S.C.M.
 Miss E. E. Watson, S.R.N., S.C.M.
 Mrs. H. Watson, S.R.N., S.C.M.
 Mrs. K.E. Whalley, S.R.N., S.C.M., Q.N.
 Miss E. E. Wilson, S.R.N., S.C.M.
 Miss J. M. Wilson, S.R.N., Q.N.
 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.
 Mrs. D. Barry, S.R.N., S.C.M., S.R.C.N., H.V.Cert.
 Mrs. V. Berriman, S.R.N., S.C.M., H.V.Cert.
 Miss E. M. Blackburn, S.R.N., S.C.M., H.V.Cert.
 Miss P. D. Bourne, S.R.N., S.C.M., H.V.Cert.
 Mrs. D. Boyes, S.R.N.
 Miss B. Byers, S.R.N., H.V.Cert. (from 1st April, 1953).
 Miss M. A. C. Briggs, 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.
 Miss F. A. Hoggard, S.R.N., S.C.M.
 Miss V. A. Jenkinson, S.R.N., S.C.M., H.V.Cert.
 Miss D. H. Lemar, 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. MacDonald, S.R.N., S.C.M., H.V.Cert.
 Miss N. Pinchbeck, S.R.N., S.C.M., H.V.Cert.
 Miss E. M. E. Roddis, S.R.N., S.C.M., H.V.Cert.
 Miss E. Scholey, S.R.N., S.C.M., H.V.Cert.
 Miss G. C. Steer, S.R.N., S.C.M., H.V.Cert. (from 1st April, 1953).
 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, 1953.**

Local Authority.	Name of Medical Officer.
MUNICIPAL BOROUGHES.	
Beverley	W. Ferguson, M.B., Ch.B., D.P.H.
Bridlington	E. T. Colville, M.D., B.Hy., D.P.H.
Hedon	W. Ferguson, M.B., Ch.B., D.P.H.
URBAN DISTRICTS.	
Driffield	E. T. Colville, M.D., B.Hy., D.P.H.
Filey	E. T. Colville, M.D., B.Hy., D.P.H.
Haltemprice	L. N. Gould, M.R.C.S., L.R.C.P., D.P.H.
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	W. Ferguson, M.B., Ch.B., D.P.H.
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. (to 30th September, 1953). W. Wilson, M.B., B.Ch., D.P.H. (from 1st October, 1953).
Driffield	E. T. Colville, M.D., B.Hy., D.P.H.
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.

REPORT OF THE COUNTY MEDICAL OFFICER

Section 1.—Vital Statistics

POPULATION

Districts	Census, 1951	Estimated	
		1952	1953
Administrative County	211,732	212,600	214,000
Urban Districts	104,797	104,800	105,500
Rural Districts.....	106,935	107,800	108,500

BIRTHS AND BIRTH RATES

Birth rate per 1,000 of the Population

Districts	Average rate for the ten years		1947	1948	1949	1950	1951	1952	1953
	1931-40	1941-50							
Administrative County.....	14.8	17.2	19.4	16.7	16.1	15.0	14.5	14.9	15.0
Urban Districts..	14.4	17.2	19.6	16.1	15.0	14.3	14.1	14.6	14.8
Rural Districts..	14.9	17.2	19.2	17.3	17.2	15.8	14.8	15.2	15.3

The birth rate of 15.0 for the County, though very slightly higher than that for 1952, still approximates to the rate which obtained before the war. The rate for England and Wales for 1953 was 15.5 per thousand population, and to compare the East Riding rate with this figure, use has to be made of the comparability factor which takes into consideration the age and sex constitution of the County. When this factor is applied to the crude birth rate for the County of 15.0, the adjusted rate so obtained is 16.09, that is, a little higher than the rate for England and Wales.

There were 3,219 live births and 69 stillbirths registered for the County during the year, making a total of 3,288. Of these births, 189 took place outside the County.

The number of births notified to my office by hospitals, practitioners, midwives, etc., was 3,863, and 34 births were reported by Registrars which were registered but not notified. Of these births, 798 were outward transfers to other areas.

The stillbirth rate was 20.9 per 1,000 total births, compared with a rate of 20.1 in 1952 and 19.1 in 1951.

ILLEGITIMATE LIVE BIRTHS

Districts.	1946	1947	1948	1949	1950	1951	1952	1953
Administrative County	334	233	221	179	180	153	141	124
Urban Districts.	161	108	107	78	87	75	62	66
Rural Districts..	173	125	114	101	93	78	79	58

The illegitimate birth rate was 0.58 per 1,000 of the population, compared with 0.66 in the previous year.

The number of illegitimate live births in the County was 3.9% of the total live births.

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

Districts.	Average rate for the ten years.		1947	1948	1949	1950	1951	1952	1953
	1931-40	1941-50							
Administrative County	12.3	12.0	12.0	10.7	12.2	11.4	12.4	11.4	12.1
Urban Districts..	13.0	12.9	12.9	11.4	12.6	12.3	13.7	12.3	13.2
Rural Districts.	11.6	11.1	11.2	10.0	11.7	10.5	11.2	10.6	11.0

There were 2,582 deaths registered for the County in 1953, an increase of 150 on the figure for the previous year. This gives a death rate of 12.1 per 1,000 of the population, as compared with 11.4 in 1952. The application of the comparability factor to this crude rate gives a rate of 11.0, which shows that the rate for the County again compared favourably with the rate for England and Wales, which was 11.4. The rate for England and Wales for 1952 was 11.3.

The principal causes of death in the County were heart diseases (838), cancer (410), and vascular lesions of the nervous system (439). These three causes again accounted for 65.3% of the deaths.

70% of all deaths occurred in people aged 65 and over, and 44% in people aged over 75.

The following table shows the figures for the various causes for the year 1953:—

Cause of Death	No. of deaths		
	Male	Female	Total
Tuberculosis, respiratory	15	12	27
Tuberculosis, other forms	4	2	6
Syphilitic disease	6	3	9
Diphtheria	—	—	—
Whooping cough	—	1	1
Meningococcal infection	1	1	2
Acute poliomyelitis	2	—	2
Measles	—	—	—
Other infective diseases	4	1	5
Cancer of stomach	33	34	67
Cancer of lungs, bronchus	53	11	64
Cancer of breast	—	38	38
Cancer of uterus	—	21	21
Cancer, other forms	104	116	220
Leukæmia, aleukæmia	4	7	11
Diabetes	9	10	19
Vascular lesions of nervous system	203	236	439
Coronary disease, angina	213	122	335
Hypertension with heart disease	19	28	47
Other heart disease	186	270	456
Other circulatory disease	60	70	130
Influenza	17	18	35
Pneumonia	51	39	90
Bronchitis	59	41	100
Other diseases of respiratory system	10	4	14
Ulcer of stomach and duodenum	18	4	22
Gastritis, enteritis & diarrhœa	9	6	15
Nephritis and nephrosis	7	15	22
Hyperplasia of prostate	24	—	24
Pregnancy, childbirth and abortion	—	1	1
Congenital malformations	7	6	13
Other diseases	125	130	255
Motor vehicle accidents	18	5	23
All other accidents	20	27	47
Suicide	12	7	19
Homicide	3	—	3
Totals	1296	1286	2582

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The following table sets out the deaths in grouped diseases distributed according to the various age groups:—

Age Group.	Infectious Disease (including Syphilis).		Tuberculosis.		Cancer.		Heart and Circulatory Diseases.		Respiratory Diseases (including influenza).		Intestinal Diseases.		Violence.		All Other Causes.		All Causes.	
	Deaths.	%	Deaths.	%	Deaths.	%	Deaths.	%	Deaths.	%	Deaths.	%	Deaths.	%	Deaths.	%	Deaths.	%
0—	1	5.3	—	—	1	0.2	—	—	14	5.9	1	2.7	3	3.3	67	19.4	87	3.4
1—	2	10.5	1	3.0	1	0.2	1	0.1	5	2.1	—	—	5	5.4	2	0.6	17	0.7
5—	—	—	1	3.0	1	0.2	—	—	2	0.8	1	2.7	3	3.3	4	1.2	12	0.5
15—	2	10.5	—	—	3	0.7	1	0.1	3	1.3	1	2.7	8	8.7	6	1.7	24	0.9
25—	1	5.3	15	45.4	19	4.7	23	1.6	8	3.3	3	8.1	6	6.5	14	4.1	89	3.4
45—	6	31.6	12	36.4	164	40.0	196	13.9	54	22.6	11	29.7	22	23.9	73	21.2	538	20.8
65—	4	21.0	2	6.1	115	28.1	397	28.2	65	27.6	12	32.5	11	11.9	62	17.9	669	25.9
75—	3	15.8	2	6.1	106	25.9	789	56.1	87	36.4	8	21.6	34	37.0	117	33.9	1146	44.4
Total ...	19	—	33	—	410	—	1407	—	239	—	37	—	92	—	345	—	2582	—

DEATHS AMONGST CHILDREN UNDER ONE YEAR

Death rate amongst Infants per 1,000 Live Births

Districts	Average rate for the ten years		1947	1948	1949	1950	1951	1952	1953
	1931-40	1941-50							
Administrative County	51	39	40	32	30	26	28	24	27
Urban Districts.	50	40	40	36	25	23	30	27	26
Rural Districts.	53	39	40	29	34	29	26	21	28

There were 87 deaths of children under the age of one year in 1953 as compared with 76 in 1952, the infant mortality rate being 27 per 1,000 live births. The rate for England and Wales for 1953 was 26.8 compared with 27.6 in 1952. Sixty-three of these infant deaths occurred before the babies were one month old.

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

	Urban	Rural	Total
Whooping cough	—	1	1
Pneumonia	5	4	9
Bronchitis	3	1	4
Influenza	—	1	1
Gastro-enteritis	1	—	1
Congenital malformations	5	4	9
Birth injury	2	4	6
Atelectasis	3	7	10
Prematurity	13	13	26
Accident	2	1	3
Other diseases and causes	6	11	17
Totals	40	47	87

INQUESTS

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

Cause of Death	East Riding District	Holderness District	Howdenshire District	Easington District	Totals for 1952	Totals for 1953
Natural Causes ...	8	1	1	8	18	17
Accidental Death.	49	—	1	1	51	51
Suicide	11	—	1	3	15	15
Found drowned ...	1	4	—	2	7	5
Misadventure	16	5	—	—	21	—
Other verdicts	2	—	1	—	3	5
Totals	87	10	4	14	115	132

Section 2.—Local Health and other Services

THE CARE OF MOTHERS AND YOUNG CHILDREN.

ANTE-NATAL CARE.

Attendances at the two ante-natal clinics at Beverley and Hessle which are provided by the County Council continued to be small. Most women now obtain their ante-natal care from general practitioners and district midwives. If they have been offered beds in hospitals for their confinements they also attend at the appropriate hospital ante-natal clinic for ante-natal examinations at least on two occasions—once on booking a bed, and once again at about the thirty-sixth week of pregnancy.

Statistics relating to the attendances at Local Health Authority and Hospital ante-natal clinics are shown below:—

Clinic	No. of sessions	No. of new patients	No. of women attending	No. of attendances	Average attendances per patient	Average attendances per session
Beverley	24	51	57	140	2	6
Hessle	27	27	35	140	4	5
'The Avenue' Hospital, Bridlington	147	524	735	2911	4	20
East Riding General Hospital, Driffield	101	236	275	783	3	7
Westwood Hospital, Beverley	52	503	659	1662	3	32
Woodgates Maternity Home, North Ferriby	52	557	721	1187	2	23
Totals	403	1898	2482	6823	3	17

In addition, domiciliary midwives paid 10,268 ante-natal visits to women who were expecting to be confined in their own homes, and general practitioners gave ante-natal services to 2,171 women, many of whom were going to hospitals for their confinements.

Domiciliary midwives have for some years been aware of the value of giving pregnant women information on simple physiology and anatomy so as to help them to understand the normal processes of pregnancy and labour, and of combining this teaching with the teaching of exercises and of relaxation in an attempt to achieve a greater number of confinements which are relatively free from pain and the mental distress associated with fear. Several midwives, with the co-operation of general practitioners, have been giving this advice and instruction to individual patients with increasingly beneficial results, and this, combined with an increasing

awareness among women about "natural childbirth" obtained from articles in magazines, has led to more requests being made for the provision of instructional facilities of this nature. The Health Committee has, therefore, approved the establishment of "relaxation classes" in various parts of the County, and this action has had the support of the general practitioners. During the year the first two classes were opened, one in Beverley in June, and one in Hessle in October. They are held at weekly intervals. By the end of the year 32 women had attended these two classes, making 196 attendances in all.

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. A County Council post-natal clinic continues to be held in Hessle. Facilities for post-natal examinations continued to be available at the Council's ante-natal and infant welfare clinics.

During the year, 228 patients attended post-natal clinics in the three hospitals and 30 were examined at the Council's clinics.

In addition, 2,031 women are reported as having had a post-natal examination by their own doctors through the National Health Service Maternity Services Scheme.

MATERNAL MORTALITY.

There was one maternal death in the County during the year. The maternal mortality rate was 0.30 per 1,000 live births, whilst that for England and Wales was 0.76.

ANTE-NATAL AND POST-NATAL HOSTEL.

The Ante-natal and Post-natal Hostel at "The Avenue" Hospital, Bridlington, which provides accommodation for eight women and eight infants, continued to be well occupied during the year. Forty patients were admitted, the average length of stay being 39 days.

INFANT WELFARE CENTRES.

There has been a slight increase in both the number of children attending and the total number of attendances at the infant welfare centres as compared with the figures for 1952. The number of children born in 1953 who attended the centres during the year was 1,604. This represents 50% of the registered live births in the County.

At the end of the year, 52 infant welfare centres were operating. During the year, the centre at Bubwith was closed owing to the difficulty of finding suitable premises, and the centres at Hotham, Skirlaugh and Weaverthorpe were closed owing to poor attendances.

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.)

Infant Welfare Centre	Frequency of Sessions	Number of children who attended during the year and who were born in:			Attendances	
		1953	1952	1951-46	Total	Average per session
Aldbrough (V)	Every 4 wks.	8	9	15	158	11
Anlaby	Weekly.	79	63	99	1712	33
Barlby	Fortnightly.	26	30	53	441	17
Beverley	Twice weekly.	219	189	267	4382	53
Bilton	Every 4 wks.	15	12	22	262	22
Bishop Burton (V) ..	" 4 "	10	8	18	154	12
Brandesburton (V) ..	" 4 "	8	16	24	222	19
Bridlington	Twice weekly.	170	134	140	3318	33
Brough	Fortnightly.	31	37	18	634	23
*Bubwith	Every 4 wks.	10	15	32	221	16
Burton Pidsea	" 4 "	6	9	6	121	9
Cottingham	Twice weekly.	107	119	211	3623	66
Driffield	Weekly.	61	56	61	1023	20
Dunnington	Every 4 wks.	9	6	11	109	8
Elvington	" 4 "	5	6	15	118	9
Filey	Fortnightly.	36	33	14	520	21
Flamborough	" "	16	16	23	435	17
Flixton	Every 4 wks.	4	13	17	271	21
Fulford	Weekly.	60	52	93	1397	27
Hedon	Every 4 wks.	31	36	27	485	37
Hessle	Weekly.	132	118	101	2238	44
Holme	Fortnightly.	22	25	31	703	28
Hornsea	" "	48	41	31	780	31
*Hotham (V)	Every 4 wks.	—	1	5	11	6
Howden	" 4 "	27	18	25	359	28
Hunmanby	Fortnightly.	20	15	27	625	25
Keyingham	Every 4 wks.	6	6	11	81	6
Kilham	" 4 "	4	7	13	181	13
R.A.F., Leconfield (V)	" 4 "	25	21	17	289	22
Leven	" 4 "	6	3	8	78	6
Long Riston (V)	" 4 "	10	15	13	181	14
Market Weighton ...	Fortnightly.	20	24	38	596	24
Melbourne	Every 4 wks.	7	8	22	126	10
Middleton	" 4 "	5	12	13	251	19
Newport	" 4 "	13	15	15	137	11
North Cave (V)	Fortnightly.	22	15	43	699	27
North Ferriby	Every 4 wks.	22	22	34	326	25
North Newbald	Fortnightly.	13	8	25	420	15
Norton	" "	24	21	32	435	17
Patrington	Every 4 wks.	28	25	42	424	33
Pocklington	Fortnightly.	38	21	39	795	29
Preston	Every 4 wks.	13	19	19	272	23
Riccall	" 4 "	9	7	37	163	13
R.A.F. Riccall	" 4 "	4	9	28	163	13
Rillington	" 4 "	15	13	23	296	23
Sherburn	" 4 "	17	19	29	272	21
*Skirlaugh	" 4 "	—	10	2	15	7
South Cave	" 4 "	19	11	13	266	19
Stamford Bridge ...	" 4 "	19	15	39	301	23
Swanland	" 4 "	7	10	10	136	11
Walkington (V)	" 4 "	8	4	13	114	9
Warter	" 4 "	6	4	8	118	10
*Weaverthorpe	" 4 "	6	4	13	70	6
Willerby	Fortnightly.	41	42	58	778	30
Withernsea	" "	32	26	41	350	13
Wold Newton	Every 4 wks.	5	7	8	126	10
Totals		1604	1500	2092	32781	—

* Centres closed during the year.

DENTAL CARE.

The Principal Dental Officer reports as follows:—

The general arrangements for the provision of dental services for expectant and nursing mothers and for children under five years of age continued as far as possible as in previous years, but owing to shortage of staff, for some considerable part of the year the routine inspection and treatment sessions for expectant mothers had to be discontinued except at Beverley. Elsewhere treatment was made available on the recommendations of medical officers and was provided at the fixed or mobile clinic nearest to the patients' homes.

Most women seen at the inspection sessions held at Beverley were found to be attending their dentists regularly. Among those who were not attending dentists in private practice there was often a general desire to postpone treatment until after their babies were born, but this attitude was discouraged and the advice of the dental officer usually resulted in treatment being accepted.

For children under school age, offers, to those living in the district, of inspection and treatment were made as before whenever routine dental inspection and treatment was being carried out at the schools. Invitations to attend were sent to parents with young children through head teachers, health visitors or school nurses. General practitioners have now requested that they should be informed whenever this service is likely to be available in the areas of their practices, so that they too, if they think it necessary, can advise parents to take their young children for inspection, and if necessary for treatment.

So far, however, the response by parents to these invitations has not been encouraging and the children brought for inspection and treatment were usually brought for the relief of pain or sepsis. When conservative work could with advantage be undertaken, parents very often refused the offer of appropriate treatment.

The following tables give details of the work carried out during the year for mothers and young children:—

	Examined	Needing Treatment	Treated	Made Dentally Fit
Expectant and Nursing Mothers	48	47	41	28
Children under five	221	90	88	87

Forms of dental treatment provided:—

	Expectant and Nursing Mothers.	Children under five.
Extractions	81	204
Anæsthetics:		
Local	2	2
General	6	—
Fillings	19	15
Scalings or scaling and gum treatment	2	—
Silver Nitrate treatment	—	—
Dressings	6	8
Radiographs	—	—
Dentures Provided:		
Complete	1	—
Partial	3	—

P. S. SPENCE,

Principal Dental Officer.

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.

If an infant at birth weighs $5\frac{1}{2}$ lbs. or less it is presumed to be premature, and on this basis 174 premature live births and 22 premature stillbirths have occurred during the year. Of these, 111 live births and 17 stillbirths occurred among infants born in hospitals, 53 live births and 5 stillbirths among infants born in the mothers' own homes, and 10 live births among infants born in private nursing homes. Seventeen of the infants born in their mothers' own homes were transferred to hospitals.

Of the 174 premature infants born alive, 14 died before they were 24 hours old and a further 15 died before they were four weeks old. In all but six cases the infants who died were under $4\frac{1}{2}$ lbs. weight at birth.

Prematurity is a primary or predominating contributory cause of many infant deaths, and these 29 deaths represent a third of the total infant deaths in the County. Similarly, in a third of the total stillbirths the infant was premature.

CARE OF UNMARRIED MOTHER AND HER CHILD.

There were 124 illegitimate live births and 3 illegitimate stillbirths during the year, and in 102 of these cases the mother contacted the Special Welfare Visitor for help and advice. In addition, help was continued for 16 mothers who had been first seen in 1952.

As previously stated, 40 mothers were admitted to the Hostel at Bridlington.

Of the cases dealt with, 105 have been completed as follows:—

Mothers returned home with child	53
Babies placed for adoption	40
Babies placed in nursery or foster home	3
Mothers placed in residential work	9

HEALTH VISITING.

During the year two additional health visitors have been appointed, one for the Haltemprice area and the other for the area of the County centred on Market Weighton.

All the health visitors also act as school nurses and tuberculosis visitors. In addition, there are two school nurses.

Although by far the greatest part of their work is still connected with the care of young children, there is a steadily increasing demand for the services of health visitors for adult members of the population, especially aged persons and those discharged from hospitals and needing after-care, advice and help. There is no doubt that this side of the health visitors' work will develop, especially as general practitioners are appreciating more and more the help that health visitors can give them. The need for each health visitor to get to know and to work in close co-operation with the general practitioners in her area has been constantly stressed. This need is appreciated by general practitioners, and they, on their side, have expressed a desire for closer links to be developed between the health visitor service and their own, and a willingness to do all they can to facilitate this development.

Details of the main work done during the year by the 21 Health Visitors are set out below:—

Visits to expectant mothers:—

First visits	477
Subsequent visits	348

Visits to infants under 1 year of age:—

First visits	3475
Subsequent visits	11839

Visits to children between 1 and 5 years of age 27884

Visits to tuberculosis cases 1714

Visits as child life protection visitors 86

Visits to aged persons 487

Visits for care and after-care 383

Other visits for other reasons 1031

Three Health Visitors have been sent to post-graduate courses 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 the majority of instances domiciliary nurses combine the duties of nurse and midwife.

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

Number of Nurse-midwives	49
Number of Nurses	13
	—
Total	62
	—

Seventeen of the nurses are Queen's Nurses, as are also the Supervisor and Assistant Supervisor of Midwives.

At the end of 1953 the position with regard to housing and transport of the domiciliary nursing staff was as follows:—

Housing.

Number of nurses living in accommodation provided by the County Council:—	
(a) Property owned by the County Council	11
(b) Property leased from County District Councils	19
(c) Property leased from other owners	2
Number of nurses renting houses owned by County District Councils	2
Number of nurses living in houses owned by themselves or rented from private owners	22
Number of nurses living in lodgings or with relatives	6

Transport.

Number of nurses using cars provided by the County Council	39
Number of nurses using their own cars	17
Number of nurses using bicycles	6

Eight nurses attended refresher courses during the year.

A comparison of the figures shown in the table with those of the previous year show that there has again been a further increase in the amount of domiciliary nursing work. Visits paid to homes have increased by nearly 8,000, and the number of cases which the nurses have attended during the year were 295 more than in 1952.

Over 38% of the patients nursed were over 65 years old and in 13% of cases the illness was of a chronic nature necessitating visiting for more than twenty-four times in the year. Just over 50% of the total visits were to patients over 65 years of age; many of these visits were to patients suffering from chronic illness, and again, out of the total visits, 38% were to patients who had to be visited on more than 24 occasions.

Many visits are made to patients to give injections of various types, no special nursing attention being required. Visits of this nature represent nearly 30% of the total visits made for all purposes during the year.

DOMICILIARY NURSING.								DOMICILIARY MIDWIFERY.												
District.	No. of cases.		No. of visits.		No. of patients 65 or over at first visit.	No. of patients visited for more than 24 times in year.	No. of patients for injections only (no nursing given).	No. of deliveries attended.				No. of cases receiving gas and air.		No. of cases receiving Pethidine.		No. of cases visited on discharge from Hospital before 14th day.	No. of visits.			
	Medical.	Surgical.	Medical.	Surgical.				Dr. not booked.		Dr. booked.		Dr. present at delivery.	Dr. not present at delivery.	Dr. present at delivery.	Dr. not present at delivery.		Ante-natal.	Lying-in.		
								Dr. present.	Dr. not present.	Dr. present.	Dr. not present.				Domiciliary.			Ex-hospital.		
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)	(15)	(16)	(17)	(18)	(19)	(20)	
Aldbrough	56	37	1866	866	27	23	258	—	14	1	—	—	5	—	2	1	217	295	8	
Barby	5	1	1011	36	2	—	—	1	38	1	—	1	32	—	9	2	777	763	5	
Beeford	61	14	1163	179	25	5	65	—	1	4	3	3	4	—	2	1	111	221	5	
Beverley No. 1	29	5	968	81	18	5	198	5	1	5	12	6	11	5	16	21	369	445	82	
Beverley No. 2	67	29	1503	340	33	7	467	—	3	—	30	—	27	—	6	12	239	668	49	
Beverley No. 3	165	64	2165	558	114	42	1006	—	—	—	—	—	—	—	—	—	—	—	—	
Beverley No. 4	9	4	361	—	1	—	182	2	23	8	24	8	32	7	4	10	707	1046	56	
Beverley No. 5	196	71	2097	579	96	23	993	—	—	—	—	—	—	—	—	—	—	—	—	
Bishop Burton	59	31	1430	467	36	14	331	—	4	7	8	6	6	4	1	5	215	388	48	
Bransburton	53	35	1460	395	19	4	642	—	8	18	2	4	6	7	—	3	168	623	24	
Bridlington No. 1	110	13	1974	148	53	13	524	—	—	—	—	—	—	—	—	—	—	—	—	
Bridlington No. 2	90	8	2637	135	44	11	408	—	2	1	2	1	2	—	1	1	31	147	6	
Bridlington No. 3	136	26	2222	617	57	18	614	—	—	—	—	—	—	—	—	—	—	4	—	
Bridlington No. 4	127	24	1759	352	72	21	501	—	—	5	4	5	3	3	1	3	133	125	17	
Bridlington No. 5	147	52	1880	789	78	18	715	—	—	—	5	—	4	—	4	—	15	94	4	
Bridlington No. 6	140	39	1888	639	78	15	441	—	3	3	2	—	—	2	2	1	48	111	3	
Cottingham No. 1	24	68	2471	430	50	23	1976	—	—	—	—	—	—	—	—	—	—	—	—	
Cottingham No. 2	145	82	5067	1324	87	40	3334	—	—	—	—	—	—	—	—	—	—	18	—	
Cottingham No. 3	45	29	627	607	20	3	528	—	5	29	5	28	8	24	4	12	356	855	—	
Cottingham No. 4	81	36	1846	487	46	19	1143	—	2	5	3	4	3	3	2	6	41	231	12	
Driffield No. 1	34	22	1582	1042	28	10	518	—	3	16	17	12	15	9	13	1	207	673	3	
Driffield No. 2	48	8	2544	284	40	10	622	—	—	—	—	—	—	—	—	—	—	—	—	
Driffield No. 3	14	6	929	384	13	3	180	—	2	9	12	6	8	5	3	—	235	475	—	
Driffield No. 4	58	17	972	212	31	7	68	2	24	—	2	—	6	1	7	1	217	454	20	
Filey	79	15	2226	488	29	17	627	—	1	14	4	9	3	2	—	1	204	435	1	
Fulford	61	7	2201	3	26	6	326	2	5	13	11	1	7	14	10	1	346	592	1	
Hedon	143	161	3631	703	77	24	1448	—	15	5	7	4	17	4	16	13	215	377	53	
Hessle No. 1	51	31	2571	531	44	25	923	—	—	—	—	—	—	—	—	—	279	577	23	
Hessle No. 2	39	5	1225	91	6	5	679	—	2	5	24	4	21	—	—	2	152	332	17	
Hessle No. 3	66	19	1512	386	34	10	387	—	—	9	4	7	4	1	—	2	467	653	23	
Hessle No. 4	30	10	1220	112	12	4	597	—	5	24	10	16	7	9	—	7	—	—	—	
Hessle No. 5	58	30	2069	246	37	7	594	—	—	—	—	—	—	—	—	—	—	—	—	
Holme	51	32	746	348	22	15	142	3	30	4	—	2	26	2	13	4	265	685	6	
Hornsea No. 1	99	30	2846	82	72	16	1082	—	3	12	11	7	5	1	—	1	307	436	51	
Hornsea No. 2	56	17	1089	159	29	8	592	1	1	12	1	2	1	—	—	6	124	259	19	
Howden	23	10	267	251	14	7	39	2	29	6	16	7	41	6	21	1	458	1047	18	
Humby	75	33	1791	217	19	12	1362	—	5	4	13	1	12	1	5	—	166	338	10	
Market Weighton	46	10	1035	99	35	11	98	1	4	6	7	6	5	3	1	11	257	335	59	
Middleton	45	16	875	121	23	7	87	1	1	12	2	8	2	7	2	2	127	321	16	
North Cave	35	8	1225	398	28	9	64	2	—	10	21	10	20	1	—	5	431	682	17	
Norton No. 1	65	22	1623	365	35	9	217	—	5	11	1	10	3	9	1	5	171	366	6	
Norton No. 2	18	46	2147	1232	24	12	280	—	—	3	2	3	1	2	1	1	8	105	—	
Norton No. 3	92	18	2248	158	58	22	176	—	—	—	—	—	—	—	—	—	—	—	—	
Patrington No. 1	35	39	2232	356	22	8	1055	—	3	1	9	—	7	—	7	3	112	273	5	
Patrington No. 2	46	23	1848	356	18	7	862	—	6	1	10	1	14	1	11	—	88	318	—	
Pocklington	96	20	1132	192	46	11	209	8	4	7	12	3	6	11	6	1	216	482	14	
Ricall	39	39	883	704	38	18	119	—	—	—	—	—	—	—	—	—	—	—	—	
Rudston	19	36	469	788	10	6	265	—	3	—	4	—	5	—	1	—	173	136	1	
Sherburn	51	43	661	509	34	15	153	—	2	10	13	7	10	5	4	—	212	393	1	
Skirlaugh	60	38	2458	485	37	18	1123	—	11	2	1	1	6	1	—	2	95	267	17	
South Cave	42	22	984	263	25	11	225	1	—	3	12	4	10	2	2	—	171	402	1	
Sutton on Derwent	35	15	383	221	20	3	113	—	—	4	1	1	1	3	1	—	68	191	—	
Weaverthorpe	81	83	1466	961	43	13	1612	—	—	1	3	8	4	2	2	4	108	475	4	
Welton	96	73	1824	522	68	29	378	—	4	12	3	—	4	2	4	—	115	169	21	
Weston	38	16	966	156	19	13	39	1	1	3	5	2	4	2	4	—	228	446	—	
Wetwang	42	9	1308	127	19	15	371	—	—	15	2	7	2	10	3	—	—	—	—	
Wilberfoss	84	71	1142	831	48	17	233	—	3	10	8	6	6	3	4	2	157	371	1	
Willerby No. 1	115	24	1883	150	47	16	638	—	1	8	11	8	5	3	1	6	222	389	10	
Willerby No. 2	69	21	1938	614	32	18	899	—	—	—	—	—	—	—	—	—	—	—	—	
Willerby No. 3	84	47	1695	522	42	16	651	—	1	11	4	5	2	3	—	6	216	273	18	
Willerby No. 4	61	33	1084	679	48	6	601	—	3	11	—	11	2	5	1	4	38	205	3	
Withernsea No. 1	41	29	1357	240	23	6	904	—	1	9	4	9	3	6	5	—	269	256	9	
Withernsea No. 2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Totals	4299	1809	101572	25628	2331	790	35104	28	286	370	364	254	434	193	194	170	10532	20144	767	

*Included in columns (2) and (3).
†Included in columns (4) and (5).

Domiciliary nurses, of course, always work under the direct supervision of the general practitioners attending the patients, and the relationship between the nurses and the doctors is good. On their side, the general practitioners realise the importance of making the nurses' work as interesting as possible despite the heavy incidence of chronic case nursing, and they have expressed the opinion that as a general rule there is a need for the nurses to be taken more into the confidence of the doctors and that more discussion on cases should take place between doctor and nurse to their mutual advantage and to the advantage of the patient. With regard to the giving of injections when no nursing services are required, the general practitioners feel that as a general rule nurses should not be asked to give this service except in cases when the patient is not fit enough to attend at the doctor's surgery.

On the domiciliary ^{midwifery} side, the number of cases attended was 1,048, a few more than in 1952. As a consequence, the number of ante-natal and lying-in visits have also increased from 30,626 in 1952 to 31,443 in 1953.

The percentage of domiciliary births for the County as a whole was 32% as compared with 31% in 1952. The percentages of domiciliary births in the various County districts can be seen from the following table:—

District.	Registered Total Births.	Domiciliary Births as Notified.	Percentage Domiciliary.
Beverley M.B.	264	84	32
Bridlington M.B.	318	26	8
Driffield U.D.	96	31	32
Filey U.D.	57	19	33
Haltemprice U.D.	589	181	31
Hedon M.B.	41	18	44
Hornsea U.D.	64	27	42
Norton U.D.	72	9	13
Withernsea U.D.	85	26	31
Aggregate of U.D.'s ..	1586	422	27
Beverley R.D.	322	123	38
Bridlington R.D.	133	25	19
Derwent R.D.	161	93	58
Driffield R.D.	188	56	30
Holderness R.D.	321	100	31
Howden R.D.	214	131	61
Norton R.D.	126	52	41
Pocklington R.D.	237	83	35
Aggregate of R.D.'s ..	1702	664	39
Total County	3288	1084	32

At the end of the year, 49 County domiciliary midwives and 2 midwives in private practice were suitably qualified to administer gas and air analgesia. During the year, 688

domiciliary cases were given gas and air in their confinements, i.e., 63% of the women confined in their own homes had this help. In addition, 387 women received administrations of pethidine.

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.

According to the returns received, during the year 1,478 births in institutions and 653 domiciliary births were attended by midwives, no doctor being present. These figures represent 65% of all the births in the County. So far as the domiciliary confinements were concerned, in 61% of cases the midwife conducted the delivery.

In all, 111 midwives notified their intention to practise in the East Riding during 1953. At the end of the year there were 108 midwives in practice, 8 of whom were in private practice, 49 were domiciliary County midwives, and 46 were employed in hospitals and 5 in private maternity homes:—

The following table shows the total number of cases attended during the year by 110 midwives from whom returns were received:—

No. of Cases.	Midwives employed in Institutions.	Midwives employed by the County Council	Private Practising Midwives.	Totals.
0	2	—	10	12
1—4	6	10	3	19
5—9	3	10	—	13
10—19	12	19	—	31
20—29	6	5	—	11
30—39	—	3	—	3
40—49	4	2	—	6
50—59	6	—	—	6
60—69	8	—	—	8
70—79	—	—	—	—
80—89	—	—	—	—
90—99	—	—	—	—
100 and over	1	—	—	1

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	—	119	69	188
Notification of infant death	—	11	2	13
Notification of stillbirth	—	54	10	64
Liability to be a source of infection	—	14	13	27
Artificial feeding	—	37	85	122
Other reasons	—	26	2	28

The number of medical help forms received from midwives in domiciliary practice was equivalent to 10.6% of the cases which they attended as midwives.

VACCINATION AGAINST SMALLPOX.

The arrangements for the provision of vaccination facilities continued on the lines set out in my previous reports 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.

Two hundred and sixty-three vaccinations and 15 re-vaccinations were performed at Infant Welfare Centres.

The figure of 1,510 vaccinations among children under one year of age represents 46.9% of the live births during the same period. The average rate for the urban areas was 46.5%, and that for the rural areas 47.2%. The rate for England and Wales was 34.2%.

District	No. of Live Births.	Primary Vaccinations						Re-Vaccinations					
		Under 1	1 year	2 to 4	5 to 14	15 or over	Totals	Under 1	1 year	2 to 4	5 to 14	15 or over	Totals
Overley M.B.	260	95	5	6	13	7	126	—	—	3	15	59	77
Widlington M.B.	317	129	9	10	14	55	217	—	1	4	31	133	169
Widfield U.D.	95	38	5	3	3	5	54	—	—	—	1	9	10
Widley U.D.	57	29	1	6	3	4	43	—	—	—	—	21	21
Widtemprice U.D.	580	321	5	13	10	41	390	—	4	14	47	108	173
Widson M.B.	39	18	1	3	4	—	26	—	—	—	5	8	13
Widsea U.D.	60	23	1	2	4	9	39	—	—	3	4	14	21
Widton U.D.	72	34	—	—	7	6	47	—	—	4	2	21	27
Widthernsea U.D.	81	40	—	1	2	2	45	—	—	—	1	27	28
Widverley R.D.	315	164	6	4	2	14	190	—	—	7	17	63	87
Widlington R.D.	130	43	5	1	7	6	62	—	1	1	9	19	30
Widwent R.D.	156	76	5	7	12	24	124	—	—	2	11	52	65
Widfield R.D.	185	74	6	13	8	10	111	—	—	3	4	20	27
Widlderness R.D.	311	160	6	12	7	10	195	—	—	1	6	33	40
Widwden R.D.	209	93	3	5	6	12	119	—	—	—	5	50	55
Widton R.D.	124	70	3	—	7	5	85	—	—	—	3	16	19
Widklington R.D.	228	103	6	3	2	7	121	—	—	—	7	23	30
Totals	3219	1510	67	89	111	217	1994	—	6	42	168	676	892

IMMUNISATION AGAINST DIPHTHERIA.

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

	Aged under 5.	Aged 5—14 years.	Total.	Reinforcement Injections.
By General Practitioners	1438	99	1537	528
At Infant Welfare Centres or at Special Sessions	831	327	1158	2733
Totals	2269	426	2695	3261

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

District.	Primary Immunisation.			Rein- forcement Injections.
	Under 5.	5—14.	Totals.	
Beverley M.B.	142	25	167	217
Bridlington M.B. ...	168	11	179	40
Driffield U.D.	61	2	63	18
Filey U.D.	71	3	74	6
Haltemprice U.D. ..	434	100	534	1133
Hedon M.B.	31	10	41	43
Hornsea U.D.	26	6	32	30
Norton U.D.	65	28	93	154
Withernsea U.D. ...	38	5	43	11
Beverley R.D.	212	20	232	159
Bridlington R.D.	73	3	76	24
Derwent R.D.	194	28	222	174
Driffield R.D.	106	2	108	34
Holderness R.D.	178	18	196	222
Howden R.D.	132	48	180	174
Norton R.D.	130	101	231	709
Pocklington R.D.	208	16	224	113
Totals	2269	426	2695	3261

In order to feel secure against outbreaks of diphtheria it is estimated that at least 65% of the child population should be protected against the disease, and in order to maintain this state of their immunity at an adequate level children should, after their first immunisation, receive reinforcing injections about once in every five years.

The following table shows the position in the various County Districts and Health Divisions, both as regards the total number of children who have been immunised at any time, and also as regards those who have been immunised or re-immunised during the last five years. It will be seen that, for the County as a whole, although 71% of those under fifteen years old have been immunised at some time during their life, only 45% have had primary or "boosting" injections within the last five years, and it is only this 45% who can with any degree of certainty still be regarded as immune to attacks of diphtheria.

A reference to the preceding table will show that, having regard to the number of births, in most, though not in all districts, there is evidence that well over 60% of children are submitted by their parents for immunisation during their first years of life. The infant section of the population is therefore well protected, but parents must realise that the protection given by these first injections gradually wanes, and that it needs renewing by further injections at about five-yearly intervals. Parents, therefore, must be persuaded to take every advantage of the facilities which exist for these additional injections to be given to their children either by taking them to their own doctors, or to the special sessions which are organised for this purpose, usually in the schools. The position which the following table shows to exist in that some districts of the County have such small percentages of children recently protected against diphtheria cannot be viewed with equanimity.

Districts.	Population under 15 years of age.	five years.			Percentage of Child Population.	Number immunised more than 5 years ago.	Total immunised at any one time.	Percentage of Child Population.
		Aged under 5	Aged 5 to 14.	Total.				
Buckrose Health Division.								
Bridlington M.B.	5151	674	445	1119	21.7	1847	2906	57.6
Driffield U.D.	1521	202	179	381	25.0	768	1149	75.6
Fley U.D.	1136	235	172	407	35.8	429	836	73.6
Bridlington R.D.	2342	241	177	418	17.8	604	1022	43.6
Driffield R.D.	2532	433	231	664	26.2	1023	1687	66.6
Totals	12682	1785	1204	2989	23.6	4671	7660	60.4
Haltemprice Health Division.								
Haltemprice U.D.	8354	1469	4396	5865	70.2	894	6759	80.9
Holderness Health Division.								
Beverley M.B.	3584	651	1569	2220	61.9	887	3107	86.7
Hedon M.B.	502	125	263	388	77.3	93	481	95.8
Hornsea U.D.	1155	159	396	555	48.1	172	727	62.9
Withernsea U.D.	1093	175	394	569	52.1	256	825	75.4
Beverley R.D.	4619	807	1106	1913	41.4	1211	3124	67.6
Holderness R.D.	4635	695	1574	2269	49.0	1017	3286	70.9
Totals	15588	2612	5302	7914	50.7	3636	11550	74.1
Howdenshire Health Division.								
Norton U.D.	1113	201	504	705	63.3	78	783	70.3
Derwent R.D.	3047	626	547	1173	38.5	1250	2423	78.5
Howden R.D.	2782	423	412	835	30.0	910	1745	62.7
Norton R.D.	1858	391	956	1347	72.5	217	1564	84.1
Pocklington R.D.	3476	701	768	1469	42.2	870	2339	67.3
Totals	12276	2342	3187	5529	45.0	3325	8854	72.1
Administrative County	48900	8208	14089	22297	45.6	12526	24823	71.2

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. Usually this protection is given at the same time as they are immunised against diphtheria.

During the year, in all 1,607 children received primary courses of anti-whooping cough injections. In 1,455 cases the injections were combined with those against diphtheria. The remaining 152 cases had anti-whooping cough injections alone, having been previously immunised against diphtheria.

AMBULANCE SERVICE.

The Ambulance Service continued to be organised as detailed in my previous reports. During the year new ambulance stations were opened at Driffield and Withernsea, and a new station at Hessle was commenced during the year.

At the end of the year the Council's fleet of vehicles consisted of 12 ambulances and 15 dual purpose vehicles used mainly for sitting-case work, and use was also being made of 4 ambulances provided by the St. John Ambulance Brigade and 1 ambulance provided by the British Red Cross Society.

Thirty-eight drivers/attendants were employed on a whole-time basis.

In my last annual report I expressed the hope that the demands being made on the service would not increase much more. This hope has not been realised and a reference to the details given in the following table will show that there has again been a general increase during 1953. The figures show that compared with 1952 there has been an all-over increase of nearly 6,000 cases dealt with, an increase of 13% over the previous year's figures. Although the percentage increase was more or less the same for all types of cases the most serious effect of the rise was felt in the group of out-patient attendances. Here there was an increase of 4,774 calls, representing a rise of 14% on the 1952 figures. As, according to information supplied to me by the Senior Administrative Medical Officer of the Leeds Regional Hospital Board, the total number of out-patient attendances at the various hospitals concerned has actually shown a tendency to fall during the same period, it must be assumed either that, possibly through early discharge from hospital, more patients attending out-patient departments are in need of ambulance transport, or that the hospital authorities are not being as careful as they might be in ascertaining that patients cannot travel by ordinary means before they request the use of ambulances. These points have been taken up with the hospital authorities, and they have been again advised of the rules limiting the use of ambulances to those patients for whom transport is necessary on account of illness and who cannot reasonably be expected to travel by ordinary means.

The general practitioners throughout the County have also been again advised of these rules, and have generally been most helpful and careful about the ordering of ambulances. Through the Local Medical Committee the need for economy and care in the use of ambulances has been emphasized, and a special form of request notice to be used by doctors when ordering ambulances has been approved and brought into use.

The rise in the number of calls has, of course, resulted in an increase in the number of journeys and a total increase of nearly 45,000 in the number of miles covered by the various vehicles. This increase, though large, represents only a 9% increase on the 1952 figures, although, as has been said, the number of calls has increased by 13%. This result has been achieved by the efforts of all concerned to co-ordinate journeys whenever possible, and although the average miles per journey is 29, the average miles per patient carried has been reduced from 11.2 to 10.8.

Grand total figures for all vehicles, i.e., County Council, Voluntary Associations and other Authorities, were as follows:—

Types of case.	1952	1953	Increase in 1953 as compared with 1952.	
			Actual	Percentage
1. Accident	1231	1431	200	16%
2. Acute illness	834	1034	200	24%
3. General illness	3330	3806	476	14%
4. Maternity	961	996	35	4%
5. Tuberculosis	72	80	8	11%
6. Infectious disease	203	259	56	28%
7. Mental	159	177	18	11%
Totals (Items 1 - 7)	6790	7783	993	15%
8. Inter-hospital transfers ...	1207	1172	— 35	— 3%
9. Hospital discharges	4032	4209	177	4%
10. Out - patient and Clinic attendances	34310	39084	4774	14%
Totals (Items 8 - 10)	39549	44465	4916	12.5%
Grand Totals: Cases	46339	52248	5909	13%
Journeys	18522	19423	901	5%
Mileage	518140	563137	44997	9%
Average patients per journey ...	2.5	2.6		
Average miles per journey ...	27.9	29.0		
Average miles per patient	11.2	10.8		

Station.	Journeys.	Patients.	Mileage.	Average mileage per journey.	Average mileage per patient.
<i>Ambulances.</i>					
Beverley	1487	2674	36865	24.8	13.8
Bridlington	1690	3152	33761	20.0	10.7
Driffield	996	2225	13918	14.0	6.3
Hessle	1045	2708	25229	24.1	9.3
Hornsea	413	849	11577	28.0	13.6
Howden	426	1227	14483	34.0	11.8
Pocklington	453	2116	20215	44.6	9.6
Withernsea	370	1336	18164	49.1	13.6
Brough St. John.	11	13	290	26.4	22.3
Cottingham					
St. John ...	4	7	38	9.5	5.4
Filey St. John ..	879	3446	27159	30.9	7.9
Market Weighton					
Red Cross	142	245	5069	35.7	20.7
W.R., Selby	745	1740	21235	28.6	12.2
N.R., Malton ...	387	603	7110	18.4	11.8
York C.B.	376	617	4596	12.2	7.4
Hull C.B.	61	70	641	10.5	9.2
Other					
Authorities ...	9	11	924	102.7	84.0
Totals ...	9494	23039	241274	25.4	10.5
<i>Sitting Case Cars.</i>					
Beverley	1723	4057	44227	25.7	10.9
Bridlington	1913	3717	40680	21.3	10.9
Driffield	1209	2591	24146	20.0	9.3
Hessle	675	2536	18374	27.2	7.2
Hornsea	238	1184	15083	63.4	12.7
Howden	515	1724	23905	46.4	13.9
Pocklington	883	5457	46994	53.2	8.6
Weaverthorpe ...	439	1667	19080	43.5	11.4
Withernsea	632	2942	38625	61.1	13.1
York C.B.	133	218	1746	13.1	8.0
Voluntary Car					
Pool	926	1906	32186	34.8	16.9
N.R. Malton	624	1191	13514	21.7	11.3
Other					
Authorities ...	5	5	359	71.8	71.8
Totals for sitting Case Cars	9915	29195	318919	32.2	10.9
Train	14	14	2944	210.3	210.3
Grand Totals ...	19423	52248	563137	29.0	10.8

DOMESTIC HELP SERVICE.

The demands made on this service continue to increase year by year. At the beginning of the year domestic helps were giving service at 114 households, and during the year 461 new cases have been helped, so that in all 575 households have made use of the service during 1953, that is 116 more than in 1952. The conditions arising in households causing the requests for domestic help were general illnesses 435, tuberculosis 13, and confinements 125.

The number of domestic helps on the panel at the end of the year was 135. All were part-time workers, but two were on the "retained" list.

On the average, 20% of households using this service require continuous help for more than a year, and 20% for more than six months. In all, 50% are found to require help for more than three months. This means that a large proportion of the available service is ear-marked for these long-term cases, and owing to the limited number of domestic helps available there is often difficulty in providing help at short notice for households where difficulties have arisen over the sudden occurrence of acute illness. The long-term service is, however, in over 80% of instances supplied to households where there are elderly people, and thus helps to reduce the demands made by this group of the population for beds either in hospitals or in old people's hostels.

CARE AND AFTER-CARE.

The care services have continued to be operated centrally and are referred to in various parts of this report.

The medical loan service continued to be operated on behalf of the County Council by the British Red Cross Society, who had at the end of the year a total of 43 depôts in the County. During the year, 1,166 articles were loaned under this arrangement. Except in the case of patients suffering from tuberculosis, and necessitous patients, small charges are made for the loan of the more expensive articles.

EPILEPSY AND SPASTIC PARAPLEGIA.

The ascertainment of the extent of these defects among the adult population is by no means complete. A recent survey carried out by the County Welfare Officer in connection with the Council's scheme for the welfare of handicapped persons revealed six adult cases of spastic paraplegia and forty-six adult cases of epilepsy among persons who might benefit from the operation of that scheme. Of these epileptics eleven were in Epileptic Colonies or in the Council's own Welfare Hostels.

Among persons ascertained as mental defectives, 15 children and 14 adults are known to suffer from some degree of spastic paraplegia, and of these 3 children and 7 adults are in institutions.

Among children of school age seventeen cases of spastic paraplegia and seven cases of epilepsy have been ascertained under the Handicapped Pupils' Regulations.

No special provisions are made available to these groups under the local health service arrangements, but in two instances during the year arrangements were made to provide special chairs for cases suffering from spastic paraplegia, and when necessary, at the request of the hospitals, arrangements have been made through the medical loan scheme for the provision of special beds and mattresses for patients on discharge to their own homes. All cases will have access to the services which will be provided under the Council's scheme for the welfare of handicapped persons when this comes into full operation.

BLINDNESS.

At the end of the year there were 339 blind and 14 partially sighted persons on the register.

During the year, 55 persons were specially examined with a view to being placed on the register, and of these, 45 were certified as blind and 8 were certified as partially sighted. One case was de-certified during the year.

The age groups of those certified during the year as blind or partially blind were as follows:—

	0-4	5-14	15-39	40-59	60-69	70-79	80-89	90+
Blind	—	—	1	2	9	14	16	3
Partially Sighted	—	—	2	1	2	2	1	—

The cases to which blindness was attributed were as follows:—

Cataract	23 cases.
Glaucoma	5 cases.
Congenital conditions ...	4 cases.
Myopia	1 case.
Vascular diseases	4 cases.
Intracranial neoplasm ..	1 case.
Diabetes	2 cases.
Other illnesses	5 cases.

Partial loss of sight was attributed to cataract in 3 cases, myopia in 3 cases and congenital defects in two cases.

No cases of blindness were attributed to retrolental fibroplasia associated with prematurity.

Of the 23 persons registered as blind on account of cataract six had had unsuccessful surgical treatment and in two cases treatment was uncompleted. Of the remainder, 11 were recommended as possibly suitable for surgical treatment and the position with regard to these at the end of the year is as follows:—

Operation performed and waiting for glasses	2
Operation refused on account of age or ill-health	5
Awaiting operation	1
Under observation	3

Of the five cases of blindness due to glaucoma four were known to have had previous treatment which proved to be unsuccessful.

Follow-up of Registered Blind and Partially Sighted Persons.

(1) No. of cases registered during the year in respect of which para 7 (c) of Forms B.D.8 recommends:	Cause of Disability			
	Cataract	Glaucoma	Retrolental Fibroplasia	Others
(a) No treatment	12	3	—	13
(b) Treatment (medical, surgical or optical)	14	2	—	2
(2) No. of cases at 1 (b) above which on follow-up action have received treatment	5	2	—	8

Ophthalmia Neonatorum.

(i) Total number of cases notified during the year	7
(ii) No. of cases in which :	
(a) Vision lost	None
(b) Vision impaired	None
(c) Treatment continuing at end of year	None

MENTAL HEALTH.

ADMINISTRATION.

As outlined in previous reports, 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 quarterly 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 cases.

Apart from myself, there are six medical officers on the Council's staff who have attended special courses on mental deficiency and are recognised for the purpose of examining educationally sub-normal children. All of these doctors are also approved as examining and certifying officers under the Mental Deficiency Acts (as amended). The County is divided into four areas controlled from the central office, and in each area there is a Duly Authorised Officer. The Duly Authorised Officers are also District Welfare Officers operating under the National Assistance Act, 1948. On the central staff there is a trained psychiatric social worker and a full-time female social worker who holds a Diploma in Social Science. Three members of the Council's headquarters staff are also approved as Duly Authorised Officers.

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

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

ACCOUNT OF WORK UNDERTAKEN IN THE COMMUNITY.

Mental Defectives.

All mental defectives residing in the County who are under Statutory Supervision or licensed from Institutions and under Guardianship Orders are regularly visited by the Council's Duly Authorised Officers and the social worker, who also provide a general welfare and advisory service for the parents and guardians as well as for the defectives. During the year, a number of mental defectives under statutory supervision have been re-examined by the Council's approved medical officers, as a result of which six cases have been removed from the Council's records.

Owing to the scattered nature of the County, it has not been practicable to establish occupation centres for mental defectives. Instruction in occupational and handicraft work was, however, provided by the Council during the year for 33 defectives residing in their own homes, this work being undertaken by the social worker.

Statistics relating to mental deficiency for 1953 are shown in the following table:—

No. of new cases ascertained during the year	39
No. of cases removed from register during year otherwise than by transfers	9
No. of cases awaiting beds in institutions at the end of the year	30
No. of defectives on the register at the end of the year under:—	

	Male	Female	Total
Statutory Supervision	157	121	278
Voluntary Supervision	9	7	16
Guardianship	2	2	4
Licence	4	8	12
	<hr/> 172	<hr/> 138	<hr/> 310

The classification of these defectives, according to sex, age and mental status, is set out below:—

Ages	Male	Female	Total
Under 16	40	31	71
16 to 20	53	35	88
21 to 29	28	29	57
30 and over	51	43	94
	<hr/> 172	<hr/> 138	<hr/> 310

Mental Status	Male	Female	Total
Feeble minded	93	78	171
Imbeciles	61	49	110
Idiots	18	11	29
	<hr/> 172	<hr/> 138	<hr/> 310

At the end of the year there were also 240 defectives in institutions, their age and sex groups being as follows:—

Ages	Male	Female	Total
Under 16	19	15	34
16 to 20	14	9	23
21 to 29	25	20	45
30 and over	58	80	138
	<hr/> 116	<hr/> 124	<hr/> 240

Lunacy and Mental Treatment Acts.

Patients were dealt with during the year by the Duly Authorised Officers under the Lunacy and Mental Treatment Acts, 1890–1930 (as amended), as follows:—

Admitted to Mental Hospitals:

Certified patients	84
" Voluntary " patients	25
" Temporary " patients	1
	<hr/> 110

Other cases:

Alleged mental patients admitted to approved	
General Hospitals (3 day orders)	38
Cases in which advice only was given	64
	<hr/> 102

For the first nine months of the year the County was without the services of a psychiatric social worker. However, a new officer took up duties at the end of September. The arrangements which applied to the previous holder of the post was continued in that the equivalent of two days a week of the officer's time is allocated for work for the East Riding Group Hospital Management Committee at Broadgate Hospital. Apart from the service that can be given to the hospital staff in respect of in-patients the spending of some time in the hospital has proved to be most valuable in enabling the officer to provide after-care services and advice to patients after their discharge from hospital. Under these circumstances, of course, the psychiatric social worker works in close association with the patients' general practitioners and several doctors have expressed appreciation of the help which has been given in this way.

During the few months of the year for which he was working in the area the psychiatric social worker has dealt with 35 new cases.

REGISTRATION OF NURSING HOMES.

No new certificates of registration were issued during the year. At the end of the year there were three homes registered, providing beds as follows:—

Medical and surgical	15
Maternity	24

Four hundred and thirteen patients were admitted to these homes during the year, 364 of whom were maternity cases, whilst 20 were medical and 29 convalescent or chronic.

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 five daily minders, are registered.

Section 3.—Sanitary Circumstances of the Area.

WATER SUPPLIES, SEWERAGE AND SEWAGE DISPOSAL.

A total of 652 samples of water were submitted by officers of the various District Councils for bacteriological examination and 41 for chemical analysis.

Of the 652 samples submitted, 83 proved unsatisfactory, but a number of the latter related to samples examined following an original unsatisfactory sample.

RURAL WATER SUPPLIES AND SEWERAGE ACT, 1944.

During 1953, the following schemes of sewerage and sewage disposal and water supply were considered by the County Council, and in each case it was possible to inform the District Council concerned that it was not desired to offer any observations for the purpose of Section 2 (2) of the Rural Water Supplies and Sewerage Act, 1944:—

Bridlington Corporation Re-equipping the Burton Agnes pumping station and construction of a new reservoir at Woldgate to afford increased water supplies to the southern part of the Corporation's area of supply. Estimated cost £43,471.

- Bridlington Corporation Proposals submitted in outline form for the re-organisation, development and improvement (which it is proposed to carry out in stages during the next 22 years) of the Corporation's water undertaking within the whole of their statutory area of supply. Estimated cost £283,000.
- Howden R.D.C. Laying of an 8in. main from Port Royal to Rush Corner, Holme-on-Spalding Moor. Estimated cost £2,934.
- Norton R.D.C. Sewerage and sewage disposal scheme—Duggleby. Estimated cost £8,000.
- Norton R.D.C. Provision of a duplicate 3in. diameter water main between Scampston Lane End and Rillington. Estimated cost £1,000.
- Pocklington R.D.C. ... Construction of a reservoir at Loaningdale and provision of pumping plant at Warter pump house. Estimated cost £3,967.
- Pocklington R.D.C. ... Laying of a 4in. water main from Loaningdale to Londesborough. Estimated cost £5,400.
- Pocklington R.D.C. ... Provision of a water supply at Givendale. Estimated cost £2,406.
- Pocklington R.D.C. ... Provision of a duplicate 6in. water main from Warter Springs to Warter reservoir, construction of collecting tank and chlorinator house, and the installation of chlorination equipment. Estimated cost £1,750.
- Pocklington R.D.C. ... Purchase of, and the carrying out of certain repairs to, the Market Weighton Water Company's undertaking at an estimated cost of £8,263.
- Pocklington R.D.C. ... Provision of a 4in. main between Sancton and Newbald Sike, which will eventually form part of a link main, under the co-ordination scheme, between Sancton and North Newbald. Estimated cost £1,113.

The County Council undertook to make contributions to the undermentioned District Councils in respect of schemes of sewerage and sewage disposal and water supply:—

- Beverley R.D.C. Contribution of £250 towards the cost of water main extensions at Hull Bridge Road, Tickton.
- Beverley R.D.C. Contribution reduced from £8,500 to £8,000 due to reduction in final cost of sewerage and sewage disposal scheme at Skidby and Little Weighton.
- Beverley R.D.C. Contribution of £350 towards the cost of providing a 4in. water main extension from Etton to Dalton Holme.
- Beverley R.D.C. Contribution of £1,200 towards the cost of laying a 6in. water main extension from Leconfield to Arram.
- Howden R.D.C. Contribution of £518 in respect of the financial year 1953/54 towards the annual expenditure incurred by the District Council in connection with the water supplies co-ordination scheme.
- Howden R.D.C. Contribution of £355 in respect of the financial year 1953/54 towards the annual expenditure of the District Council in connection with water main extensions in 10 parishes in the Rural District.

- Norton R.D.C. Additional contribution of £750 (making a total contribution of £2,450) towards the cost of a sewerage and sewage disposal scheme at Westow.
- Norton R.D.C. Contribution of £5,500 towards the cost of a sewerage and sewage disposal scheme at Rillington.
- Pocklington R.D.C. ... Additional contribution of £800 (making a total contribution of £1,800) towards the cost of a sewerage and sewage disposal scheme at Huggate.
- Pocklington R.D.C. ... Contribution of £5,000 towards the cost of a sewerage and sewage disposal scheme at Stamford Bridge.
- Pocklington R.D.C. ... Contribution of £1,500 in respect of the financial year 1953/54 towards the annual expenditure of the District Council in connection with the water supplies co-ordination scheme.

PUBLIC HEALTH ACT, 1936.

An application was received from the Withernsea Urban District Council for a grant under Section 307 of the Public Health Act, 1936, towards the cost of carrying out repairs to the sea outfall sewer at Withernsea at an estimated cost of £5,160, but the County Council was unable to see its way to make any contribution towards the cost involved.

HOUSING.

The number of houses completed during 1953 was 1,747—1,189 by the District Councils and 558 by private enterprise.

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 between 1st April, 1945, and the end of 1953.

District.	Houses Completed.			In course of 1st April 1954.	
	Council.		Private Enterprise.	Council. Permanent.	Private Enterprise.
	Temporary.	Permanent.			
Beverley M.B.	75	531	107	80	7
Bridlington M.B.	100	459	302	56	6
Hedon M.B.	—	120	30	—	2
Driffield U.D.	—	108	58	8	7
Filey U.D.	—	199	50	56	8
Haltemprice U.D.	—	1137	534	70	2
Hornsea U.D.	15	292	105	—	8
Norton U.D.	8	223	17	18	1
Withernsea U.D.	50	154	34	—	1
Beverley R.D.	51	616	209	54	4
Bridlington R.D.	—	270	60	2	4
Derwent R.D.	—	385	182	18	6
Driffield R.D.	—	234	68	22	7
Holderness R.D.	23	556	121	40	2
Howden R.D.	—	321	63	65	4
Norton R.D.	—	279	42	11	5
Pocklington R.D.	45	476	140	136	1
Totals	365	6360	2122	636	5

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, 1954

Almonds, Ground	4	Cydrax (Informal)	1
Almonds, Ground (Informal)	1	Drink, Soft (Chandy)	1
Almond Paste	2	Dripping	3
Apricots in Syrup	1	Dripping, Home-made (Informal)	1
Baking Powder	1	Energy Food	1
Baking Powder (Informal)	1	Fat, Cooking	2
Banana Pieces in cane sugar syrup	1	Fish Cakes	2
Beef, Potted	2	Fish Cakes (Informal)	3
Beef, Potted (Informal)	1	Flour	1
Beer	3	Gelatine	2
Black Currants—Tinned	1	Ginger, Ground	3
Black Pudding (Informal)	1	Ginger, Ground (Informal)	1
"Bhogum"	1	Honey	2
Brawn	2	Ice Cream	15
Brawn (Informal)	1	Ice Cream (Informal)	11
Bread	15	Jelly	2
Bread Crumbs (Informal)	1	Jelly, Crystallised	1
Butter	1	Lemon Cheese	1
Butter, Rum	1	Marmalade	1
"Butterscotch"	1	Marzipan	1
Buttercreams (Informal)	1	Marzipan, Pure Danish	1
Butterdrops (Informal)	1	Meat, Potted	2
Butterscotch Pieces	1	Meat, Potted (Informal)	1
Butterscotch (Informal)	1	Meringue Powder (Informal)	1
Cakes, Hot Buttered	1	Milk	259
Cakes, Hot Buttered (Informal)	1	Milk, "Appeal to Cow"	16
Champagne Perry	1	Milk, Hot	1
Cheese Spread	1	Milk, Skimmed	1
Cherries, Glacé	2	Mincemeat	5
Chicken, Minced (Informal)	1	Mussels in Malt Vinegar (Informal)	1
Chicken, Real, Minced	1	Mussels in Spirit (Informal)	1
Coffee	3	Mustard	2
Coffee Extract	1	Mustard (Informal)	2
Condiment, Non-brewed	2	Nutmeg Ground	2
Confectionery (Beef pie) (Informal)	1	Peel, Cut	1
Confectionery (Brandy Snap)	1	Peel, Cut (Informal)	1
Confectionery (Cake decorations) (Informal)	2	Pepper	2
Confectionery (Popcorn)	1	Pepper (Informal)	1
Confectionery (Sausage Rolls) (Informal)	1	Pepper, White	2
Confectionery (Sugar)	3	Pepper, White (Informal)	2
Confectionery (Sugar) (Informal)	14	Pie Filling, Lemon Flavour (Informal)	1
Confectionery (Sweets)	5	Polony (Informal)	2
Confectionery (Sweets) (Informal)	4	Pork Pies	2
Crab, Dressed (Informal)	1	Pork Pies (Informal)	1
Crab Meat	1	Rum	1
Cream	5	Salmon, Potted (Informal)	1
Creaming Compound	1	Sausages, Beef	6
Cream, Sterilised	1	Sausages, Pork	13
Curd	5	Sausages, Pork (Informal)	2
Curd (Informal)	2	Sausage Roll	1
Currants	1	Sausage Roll (Informal)	1
Custard Powder	1	Sausage Roll, Pork (Informal)	1
		Sausage Meat, Beef (Informal)	1
		Straws, Savoury (Informal)	1

Stuffing, Sage and Onion	1	Spice, Mixed (Informal)	1
Suet, Shredded Beef	5	Stout, Milk Round (Informal)	1
Suet, Shredded Beef (Informal)	1	Sponge Mixture, Sweetened (Informal)	1
Soup, Cream of Chicken (Informal)	1	Table Cream (Informal)	1
Soup, Cream of Mushroom (Informal)	1	Vinegar, Malt	3
Soup, Tomato (Informal)	1	Welsh Rarebit	1
		Whisky	6
		Yeast	1
			<hr/>
			Total 528

**Samples adversely reported upon and administrative
action taken**

Article	No. of samples	Remarks
" Buttascotch "	1	Contained no Butter-fat.
Cakes, Hot Buttered	1	Contained margarine instead of butter. Cautioned.
Cakes, Hot Buttered (Informal)	1	—
Confectionery (Children's sweets)	1	Contained talc. Cautioned.
Confectionery (Popcorn)	1	Incorrectly labelled. Manufacturer advised.
Confectionery (Sweets) (Informal)	1	—
Cream, Sterilised	1	Referred to the Food and Drugs Authority in whose area article was manufactured.
Curd	1	The attention of the manufac- turer was drawn to the excessive moisture.
Curd (Informal)	1	—
Drink, Soft (Chandy)	1	Incorrectly labelled. Manufacturer advised.
Dripping, Home-made (Informal)	1	Excess water content. Manufacturer advised.
Energy Food	1	Incorrectly labelled. Manufacturer advised.
Marzipan, Pure Danish	1	Importer's attention drawn to low almond content.
Milk	22	4 Legal proceedings— Convictions 3 Dismissed 1 5 Cautioned. 13 Deficiencies only slight. No action.
Milk, " Appeal to Cow "	7	Below presumptive standard.
Milk, Hot	1	Contained added water. Cautioned.
Mincemeat, Home-made	1	Deficient in solids. Producer cautioned.
Pork Pies	2	Filling contained added cereal. Manufacturer advised.
Pork Pies (Informal)	1	—
Sausages, Pork	2	No standard prescribed, but con- sidered unsatisfactory by the Public Analyst on account of low meat content.
Stout, Milk Round (Informal)	1	Contained no milk product. Manufacturer advised.
		<hr/>
Total	50	

SUPERVISION OF MILK SUPPLIES.

SCHOOL MILK SAMPLING.

Results of Examination of Samples.

Grade.	Number of Samples taken.	Methylene Blue Test.		Phosphatase Test.		Turbidity Test.	
		Satisfactory.	Unsatisfactory.	Satisfactory.	Unsatisfactory.	Satisfactory.	Unsatisfactory.
Untreated	64	54	10	—	—	—	—
Heat-treated ..	235	231	4	230	5	—	—
Sterilised	4	—	—	—	—	2	2

Twenty samples of untreated milk from Schools were examined biologically for the presence of tubercle bacilli. All the samples were reported as negative.

HEAT-TREATED MILK.

No Dealers' (Pasteurisers') licences were granted during the year. Sampling of processed milk has been continued throughout the year and, as the results of examinations show, the heat-treated 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, 390 samples (including samples of heat-treated milk taken from schools) were obtained from all sources and 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	Test not done †	Satisfactory	Unsatisfactory	Satisfactory	Unsatisfactory
County Council	252	241	0	1	241	7	2	2
Bridlington Borough ...	94	93	—	—	92	1	1	—
Filey U.D.	25	24	1	—	25	—	—	—
Haltemprice U.D.	4	3	—	—	3	—	1	—
Norton U.D.	13	13	—	—	13	—	—	—
Derwent R.D.	2	2	—	—	2	—	—	—

*Sterilised milk only.

† In this case the methylene blue test was not done owing to the atmospheric shade temperature being above 65° Fahrenheit.

One of the above samples was examined biologically with a negative result.

HOSPITAL MILK SUPPLIES.

Forty-six 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. Fifteen samples were examined for the presence of tubercle bacilli and brucella abortus. All of the samples were reported as negative for the presence of tubercle bacilli, but three of the samples were reported as positive for the presence of brucella abortus.

BIOLOGICAL EXAMINATIONS.

Ninety samples of undesignated milk were obtained by officers of the County Council and examined biologically for the presence of tubercle bacilli. Seventy-eight of the samples proved negative, 4 proved positive, and in the remaining eight cases the guinea pigs died before the examination could be completed.

In addition to the above samples, 234 samples were taken by certain of the County District Councils for the presence of tubercle bacilli. Appropriate action was taken to secure the slaughter of the infected animals in those cases where positive results were reported. Details of these samples are as follows:—

Biological Sampling by District Councils.

	No. of samples taken	Negative	Positive	Guinea pig died
Beverley M.B. ...	15	13	—	2
Bridlington M.B.	54	46	2	6
Filey U.D.	6	5	1	—
Haltemprice U.D.	97	90	4	3
Norton U.D.	7	7	—	—
Beverley R.D. ...	51	48	1	2
Derwent R.D.	2	2	—	—
Holderness R.D.	2	2	—	—
Totals	234	213	8	13

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.
Attested and Tuberculin Tested Herds	352	16,364
Accredited Herds	87	1,768
Non-Designated Herds	338	4,288

Number of confirmed cases of tuberculosis during the year, 25.

(The above figure includes 20 cases of tuberculosis of the udder.)

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

SMALLPOX.

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

MEASLES.

The number of notifications received during the year was 1,575, compared with 2,791 in 1952. There were no deaths from the disease.

ENTERIC FEVER.

No cases of enteric fever were reported in 1953.

SCARLET FEVER.

Two hundred and forty cases of this disease were notified during the past year, compared with 197 in the previous year.

DIPHTHERIA.

There were no notifications of this disease during the year 1953.

ACUTE POLIOMYELITIS.

Fifty paralytic and 12 non-paralytic cases of poliomyelitis were notified during the year. There were two deaths from this disease.

These cases occurred between the end of June and the end of December, with most occurring in the months of August and September. The distribution of the cases was as follows:—

Beverley M.B.	14
Bridlington M.B.	1
Hedon M.B.	1
Filey U.D.	1
Haltemprice U.D.	9
Hornsea U.D.	2
Norton U.D.	2
Withernsea U.D.	4
Beverley R.D.	18
Derwent R.D.	1
Driffild R.D.	2
Holderness R.D.	7

All but 7 cases occurred in the south-eastern part of the County and the area most affected was Beverley and the nearby villages where there were 29 cases in all.

In the Beverley area the first case was notified from Leconfield at the end of June. A month later a case occurred in Beverley and during the next week two more notifications came from Leconfield. In the middle weeks of August there was one case each in Beverley, Bishop Burton and Walkington and then during the four weeks between the end of August and the middle of September, sixteen notifications were received from Beverley (9 cases), Bishop Burton (3

cases), Walkington (3 cases) and Leconfield (1 case). After that the outbreak suddenly died away although there were two cases in Beverley at the end of October and one in November and one case each in Weel and Arram in October.

Apart from two instances where two members of the same family were affected no definite connecting links could be found between the various cases.

For the County as a whole 40% of the patients were children of school age or younger, but in the Beverley area outbreak only 25% of the cases occurred among children.

PUERPERAL PYREXIA.

Fourteen women were reported during the year to be suffering from puerperal pyrexia. Eleven cases occurred in institutions, and three were cases confined at home.

OPHTHALMIA NEONATORUM.

Seven cases were notified as suffering from ophthalmia neonatorum, as compared with four during 1952.

MENINGOCOCCAL INFECTION.

Five cases were notified, compared with one in the previous year. There were two deaths.

TUBERCULOSIS.

The tuberculosis service for the County is divided between three Consultant Chest Physicians whose administrative centres are in Hull, Pontefract and York. These officers and the Assistant Chest Physicians working with them are all responsible to the Council for the preventative side of their work and for the special problems associated with care and after-care and rehabilitation in respect of any patients resident in the County who come under their care. Their chief link with the County Health Services is through the health visitors all of whom act as tuberculosis nurses. Most of the health visitors attend as a routine at the various chest clinics and where this is not the case they are in regular contact with the staff of the clinic regarding patients in their areas. In addition to helping patients and their relatives with advice especially on the matters affecting the spread of infection the health visitors by direct approach also bring the patients' social problems to the knowledge of the chest physicians. For patients being treated in their own homes they can, and should, also help in another way by keeping in touch with the patients' general practitioners, thus, in respect of domiciliary cases, effecting a link between practitioners and chest physicians which it is often difficult to make personally or by correspondence.

Health visitors make routine visits to the homes of any patient notified as suffering from tuberculosis, even if the notification is a posthumous one. At this visit in addition

to completing a social circumstances report for use by the chest physician and the health department, they compile a list of contacts and as a routine these are invited by the chest physician to attend at the chest centre for physical and X-ray examination. For every notified case there is an average of between two and three contacts submitting themselves for examination.

As the need arises and on the recommendation of the chest physicians patients being treated in their own homes are supplied with extra milk and garden shelters free of charge. During the year 199 patients were supplied with milk for varying periods and at the end of the year 12 garden shelters were in use. Incidentally there has been a steadily decreasing demand for garden shelters during recent years.

The Chest Physicians have been responsible for arranging to provide B.C.G. vaccination where they consider this to be advisable, and during the year 59 persons have been vaccinated.

No special case-finding surveys were undertaken, but the Miniature Mass Radiography Unit based on Hull visited the following places in the County during the year:—

Beverley.	Howden.
Bridlington.	Market Weighton.
Brough.	Pocklington.
Driffield.	Withernsea.
*Goole.	*York.
Hornsea.	

*For East Riding persons in the vicinity.

Advantage is taken of these visits to offer X-ray examination to all school leavers and teachers, and many have taken advantage of this offer.

The problem of the resettlement and re-employment of persons who have been under their care is one that is carefully watched by the Chest Physicians. The various Chest Physicians report that it is very rarely that persons with known "open" tuberculosis are either working, eventually re-employed, or enter into any of the Ministry of Labour's rehabilitation schemes. The majority of cases where disease has become controlled by treatment and who represent about 75% of all the known cases of the disease, eventually resume their former or modified work. Approximately 50% return to their former employment under employers who have been willing where necessary to place them in lighter work until such a time as they have proved fit for their normal work.

The remainder have usually managed to find suitable employment either through their own initiative or with the assistance of the Ministry of Labour Resettlement Officers. At the end of 1953 two East Riding male patients were employed at the Remploy factory in Hull.

NEW CASES AND MORTALITY.

One hundred and thirty-five new cases of tuberculosis (101 pulmonary and 34 non-pulmonary) were notified during the year, and, in addition, 32 cases came to notice otherwise than by formal notification. The total number of new cases in the County shows an increase of one on the figure for the previous year.

The numbers of cases on the Registers kept by the District Medical Officers of Health at the end of the year were as follows:—

	Male.	Female.	Total.
Pulmonary	498	435	933
Non-Pulmonary	110	145	255

The new cases notified together with those which came to notice 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—	2	1	5	—	—	—	1	—
5—	3	2	5	12	—	—	1	—
15—	43	50	4	9	5	7	1	—
45—	13	8	2	1	8	3	1	—
65 and upwards	4	3	—	—	2	2	—	—
Totals	65	64	16	22	15	12	4	—

The number of deaths from the disease during the year was 33 as compared with 44 during 1952.

The death rate from pulmonary tuberculosis was 0.13 per thousand population as compared with 0.17 for the previous year. This rate of 0.13 is the lowest ever recorded in the County. The death rate for non-pulmonary tuberculosis was 0.03 per thousand population, which was the same as the rate recorded for 1952.

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.		1946	1947	1948	1949	1950	1951	1952	1953
	1931-40	1941-50								
Administrative County	0.40	0.36	0.28	0.34	0.23	0.30	0.20	0.18	0.17	0.13
Urban Districts..	0.48	0.44	0.36	0.41	0.26	0.29	0.20	0.25	0.23	0.17
Rural Districts..	0.34	0.29	0.19	0.28	0.20	0.31	0.20	0.12	0.12	0.08

OTHER FORMS OF TUBERCULOSIS.

District.	Average rate for the ten years.		1946	1947	1948	1949	1950	1951	1952	1953
	1931-40	1941-50								
Administrative County	0.12	0.10	0.07	0.06	0.08	0.05	0.04	0.02	0.03	0.03
Urban Districts..	0.11	0.10	0.07	0.07	0.12	0.05	0.04	0.03	0.05	0.04
Rural Districts..	0.12	0.09	0.06	0.06	0.04	0.05	0.04	0.02	0.02	0.02

TABLE I.

Cases of Infectious Disease Notified during
the year 1953.

Notifiable Disease.	Urban Districts.	Rural Districts.	Adminis- trative County.
Scarlet Fever	151	89	240
Whooping Cough	363	370	733
Diphtheria (including Membranous Croup)	—	—	—
Measles	771	804	1575
Pneumonia	105	106	211
Meningococcal Infection	4	1	5
Acute Poliomyelitis:—			
Paralytic	29	21	50
Non-paralytic	4	8	12
Acute Encephalitis:—			
Infective	—	—	—
Post-infectious	—	—	—
Dysentery	35	8	43
Ophthalmia Neonatorum	5	2	7
Puerperal Pyrexia	10	4	14
Smallpox	—	—	—
Paratyphoid Fevers	—	—	—
Enteric or Typhoid Fever	—	—	—
Food Poisoning	65	8	73
Erysipelas	12	14	26
Malaria	1	1	2
Pulmonary Tuberculosis	80	49	129
Other forms of Tuberculosis	18	20	38
Totals	1653	1505	3158

TABLE II.

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

DISEASE.	Totals.	TOTAL CASES NOTIFIED IN EACH DISTRICT.								
		Beverley.	Bridlington.	Driffield.	Filey.	Haltemprice.	Hedon.	Hornsea.	Norton.	Withernsea.
Measles	151	56	25	...	1	67	...	1	...	1
Whooping Cough	363	111	57	14	37	126	1	2	1	14
Diphtheria (including Membranous Croup)	...	...	...	...	...	...	...	...	...	...
Scarlet Fever	771	81	167	10	19	325	1	2	158	8
Pneumonia	105	12	44	5	2	41	...	...	...	1
Staphylococcal Infection	4	...	1	...	...	2	...	...	1	...
Polio-myelitis:—	...	...	...	...	...	...	...	...	...	...
Paralytic	29	14	...	...	1	8	...	1	2	3
Non-paralytic	4	...	...	...	...	1	1	1	...	1
Encephalitis:—	...	...	...	...	...	...	...	...	...	...
Infective	...	...	...	...	...	...	...	...	...	...
Post-infectious	...	...	...	...	...	...	...	...	...	...
Enteric	35	1	...	...	...	34	...	...	...	...
Cholera	...	...	...	...	...	...	...	...	...	...
Neonatorum	5	...	...	...	...	5	...	...	...	...
General Pyrexia	10	8	...	...	...	2	...	...	...	...
Smallpox	...	...	...	...	...	...	...	...	...	...
Typhoid Fevers	...	...	...	...	...	...	...	...	...	...
Erythemic or Typhoid	...	...	...	...	...	...	...	...	...	...
Scarlet Fever	...	...	...	...	...	...	...	...	...	...
Poisoning	65	1	...	...	...	64	...	...	...	...
Scabies	12	1	5	...	...	6	...	...	...	...
Leishmania	1	...	...	...	...	1	...	...	...	...
Primary Tuberculosis	80	13	10	3	4	43	...	1	4	2
Secondary forms of Tuberculosis	18	2	2	2	1	8	1	...	2	...
Totals	1653	300	311	34	65	733	4	8	168	30

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	89	23	4	11	26	4	15	5	1
Whooping Cough	370	111	23	36	25	18	74	57	26
Diphtheria (including Membranous Croup) .....	...	...	...	...	...	...	...	...	...
Measles	804	105	59	63	13	160	87	153	164
Pneumonia	106	17	13	22	4	12	23	4	11
Meningococcal Infection ...	1	...	...	...	1	...	...	...	...
Acute Poliomyelitis:—									
Paralytic	21	13	...	2	2	4	...	...	...
Non-paralytic	8	5	...	...	...	3	...	...	...
Acute Encephalitis:—									
Infective .....	...	...	...	...	...	...	...	...	...
Post-infectious .....	...	...	...	...	...	...	...	...	...
Dysentery	8	3	3	...	...	...	...	2	...
Ophthalmia									
Neonatorum ...	2	1	..	1	...	...	...	...	...
Puerperal Pyrexia	4	3	1	...	...	...	...	...	...
Smallpox .....	...	...	...	...	...	...	...	...	...
Paratyphoid Fevers .....	...	...	...	...	...	...	...	...	...
Enteric or Typhoid Fever .....	...	...	...	...	...	...	...	...	...
Food Poisoning	8	5	...	2	1	...	...	...	...
Erysipelas	14	6	...	1	1	1	2	...	3
Malaria	1	...	...	1	...	...	...	...	...
Pulmonary Tuberculosis	49	15	2	2	7	11	7	1	4
Other forms of Tuberculosis ...	20	2	2	1	2	1	2	1	9
Totals	1505	309	107	142	82	214	210	223	218

TABLE IV

Vital Statistics for the Administrative County, the Divisional Health Areas, and for the several Urban and Rural Districts in the Riding during the Year 1953

DISTRICTS.	POPULATION.		BIRTHS AND DEATH RATES FROM VARIOUS CAUSES PER 1,000 OF THE POPULATION.																				STILLBIRTHS.		DEATHS OF CHILDREN UNDER 1 YEAR OF AGE.					
	Census, 1951.	Estimated 1953 mid-year.	Live Births.				Illegitimate Live Births.				Deaths.				Principal Epidemic Disease.		Pulmonary Tuberculosis.		Other forms of Tuberculosis.		Respiratory Disease.		Heart Disease.		Cancer.		No.	Rate per 1,000 total births.	No.	Rate per 1,000 live births.
			No.	Crude Rate.	Com-para-bility factor.	Adjusted Rate.	No.	Rate.	No.	Crude Rate.	Com-para-bility factor.	Adjusted Rate.	No.	Rate.	No.	Rate.	No.	Rate.	No.	Rate.	No.	Rate.	No.	Rate.						
Administrative County	211,732	214,000	3,219	15.04	1.07	16.09	124	58	2,582	12.07	91	10.98	6	0.3	27	13	6	0.3	204	95	838	3.92	410	1.92	69	20.9	87	27.0		
M.B.'s and U.D.'s	104,797	105,500	1,561	14.80	1.02	15.10	66	63	1,391	13.18	87	11.47	4	0.4	18	17	4	0.4	100	95	483	4.58	237	2.25	25	15.8	40	25.6		
Rural Districts	106,935	108,500	1,658	15.28	1.13	17.27	58	53	1,191	10.98	95	10.43	2	0.2	9	0.8	2	0.2	104	96	355	3.27	173	1.59	44	25.9	47	28.3		
BOURNE DIVISION.																														
Bridlington M.B.	24,767	24,390	317	13.00	1.07	13.91	26	1.07	354	14.51	79	11.46	—	—	3	12	1	0.4	17	70	135	5.54	66	2.71	1	3.1	4	12.6		
Pley U.D.	4,764	4,713	57	12.09	0.97	11.73	5	1.06	60	12.73	90	11.46	—	—	1	21	—	—	—	—	20	4.24	7	1.49	—	—	1	17.5		
Driffield U.D.	6,888	6,737	95	14.10	1.00	14.10	2	3.0	75	11.13	76	8.46	—	—	—	—	—	—	4	59	23	3.41	11	1.63	1	10.4	1	10.5		
Bridlington R.D.	8,869	9,345	130	13.91	1.13	15.72	8	86	87	9.21	89	8.79	1	11	—	—	—	—	5	54	28	3.00	16	1.97	3	22.6	2	15.4		
Driffield R.D.	11,160	11,070	185	16.71	1.23	20.55	6	54	93	8.40	94	7.90	—	—	—	—	—	—	8	72	28	2.53	10	1.90	3	15.9	6	32.4		
Totals	56,448	56,255	784	13.94	—	—	47	83	669	11.89	—	—	1	0.2	4	0.7	1	0.2	34	60	234	4.48	104	1.85	8	10.1	14	17.9		
HALTEMPRICE DIVISION.																														
Haltemprice U.D.	35,649	37,130	580	15.62	0.96	15.00	15	4.0	444	11.96	99	11.84	1	0.3	6	16	2	0.5	31	83	170	4.58	78	2.10	9	15.3	23	39.7		
HELDENESS DIVISION.																														
Beverley M.B.	15,490	15,360	260	16.93	1.01	17.10	9	59	205	13.35	93	12.42	1	0.7	4	26	—	—	19	124	73	4.75	35	2.28	4	15.2	5	19.2		
Hodon M.B.	1,991	2,071	39	18.83	1.10	20.71	1	48	26	12.55	79	9.91	—	—	2	97	—	—	3	145	5	2.41	2	0.97	2	48.8	2	51.3		
Hornsea U.D.	5,324	5,380	60	11.15	1.10	13.27	1	19	78	14.50	70	10.15	1	19	1	19	—	—	8	149	25	4.65	11	2.04	4	62.5	3	50.0		
Withernsea U.D.	5,101	4,928	81	16.44	1.12	18.41	3	61	84	17.05	79	13.47	1	20	1	20	—	—	13	264	12	2.44	15	3.04	4	47.1	—	—		
Beverley R.D.	21,294	21,230	315	14.77	1.13	16.69	11	52	252	11.82	101	11.94	—	—	1	0.5	2	0.9	28	131	73	3.42	34	1.59	7	21.7	10	32.4		
Holerness R.D.	19,103	19,220	311	16.17	1.08	17.46	9	47	188	9.78	89	8.70	—	—	1	0.5	—	—	19	99	43	2.24	30	1.56	10	31.2	10	32.2		
Totals	68,312	68,289	1,065	15.61	—	—	31	50	833	12.20	—	—	3	0.4	10	15	2	0.3	90	132	231	3.38	127	1.86	31	28.3	30	28.1		
HOWDENSHIRE DIVISION.																														
Norton U.D.	4,814	4,791	72	15.03	1.03	15.48	4	83	65	13.57	80	12.08	—	—	—	—	1	21	5	104	20	4.17	12	2.50	—	—	1	13.9		
Derwent R.D.	12,919	13,300	156	11.73	1.05	12.32	7	53	178	13.38	94	12.58	—	—	5	38	—	—	17	128	65	4.89	23	1.73	5	31.1	3	19.2		
Howden R.D.	11,723	11,690	209	17.88	1.10	19.67	7	60	135	11.55	90	10.40	—	—	1	0.9	—	—	15	128	34	2.91	21	1.80	5	23.4	8	38.3		
Norton R.D.	7,602	7,565	124	16.39	1.18	19.34	7	93	82	10.84	91	9.86	1	13	1	13	—	—	2	26	29	3.83	14	1.85	2	15.9	3	24.2		
Pocklington R.D.	14,265	14,980	228	15.22	1.16	17.66	3	20	176	11.75	102	11.99	—	—	—	—	—	—	10	67	55	3.67	31	2.07	9	38.0	5	21.9		
Totals	51,823	52,320	789	15.08	—	—	28	55	636	12.15	—	—	1	0.2	7	15	1	0.2	49	94	203	4.41	101	1.93	21	25.9	20	25.3		

TABLE V.

**Vital Statistics of Whole District during 1953, 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.
1939	188,180	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	209,343	3308	16.1	93	30	2498	12.2
1950	212,070	3187	15.0	83	26	2423	11.4
1951	212,900	3079	14.5	87	28	2646	12.4
1952	212,600	3173	14.9	76	24	2432	11.4
1953	214,000	3219	15.0	87	27	2582	12.1

TABLE VI.

Rainfall Returns, 1953.

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 the 10 years 1943 to 1952.
			Inches		Inches
Hempholme	11 feet.	Mr. G. Ellison	19.60	127	26.45
Osgodby	29 "	Mrs. W. V. Hescock ...	16.63	135	23.65
North Cave	35 "	Col. W. H. Carver	20.94	112	26.91
Hornsea	35 "	Mr. G. L. Plastow	18.10	150	—
Bridlington	60 "	Mr. H. South	20.67	149	—
Lowthorpe	63 "	Mr. J. Tate	21.88	168	26.62
Scampston	100 "	Mr. E. Hodgson	21.25	141	26.24
Dalton Holme	150 "	Mr. W. F. Cullen	22.06	146	28.79
Beverley (E.R. Mental Hospital)	175 "	Physician Superintendent	19.87	137	25.46
Birdsall	304 "	Mr. James Anderson...	23.48	154	30.12

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

REPORT

OF THE

School Medical Officer

FOR THE

Year ended 31st December, 1953

Report of the School Medical Officer

*To the Chairman and members of the
Education Committee.*

I beg to submit my annual report on the work of the School Medical Department for the year 1953.

Routine medical examinations and special examinations have been carried out by the staff of the department under the day to day supervision of the Divisional Medical Officers. The Howdenshire Division has had a full complement of medical officers throughout the year, but the routine work in the other three Divisions has been limited by the resignations and illnesses of assistant medical officers.

The financial situation still prevents many desirable improvements in the sanitation in schools in the County and as a result only the more urgent and serious cases can receive attention.

Co-operation with general practitioners throughout the County has been satisfactorily maintained; all school children requiring specialist treatment are in the first place referred to the general practitioner, but in the great majority of cases they prefer to leave the arrangements in the hands of the School Medical Department. There is still some difficulty in obtaining information from hospitals where school children are admitted for treatment without the prior knowledge of the School Medical Department.

Except for a period in the middle of the year the dental staff was maintained at five whole-time Dental Officers and three part-time. It has thus been possible to provide a more comprehensive service including the western part of the County than during the past few years.

This is also the first year in which the Authority has had the services of two speech therapists. A large number of cases have been treated during the year showing the necessity for this service; however, waiting lists are still relatively long and a comprehensive speech therapy service cannot be provided with the present staff.

The number of pupils admitted from this County to the special school for educationally sub-normal children at Etton increased to fifty-eight. There is still a waiting list of pupils for admission to this school and it is probable that waiting lists for this type of school will become longer as the ascertainment rate of educationally sub-normal children increase.

The need for school minor ailment clinics is shown by the relatively large number of attendances of school children at these sessions in both Beverley and Bridlington. It was felt in some quarters that these clinics would no longer be required with the passing of the National Health Service Act, but the attendances since 1948 have been maintained and in some cases increased showing that the mothers and children appreciate the facilities and treatment offered. In many cases the general practitioner asks the clinic nurse to carry out routine treatment at school clinics on his behalf.

Reports by the Principal School Dental Officer, the Educational Psychologist and the Organisers of Physical Education are included in this report.

My thanks are due to Dr. W. Ferguson for his help in the preparation of this report.

R. WATSON.

Principal School Medical Officer.

GENERAL STATISTICS

Number of Primary Schools	207
Number of pupils on Primary School Registers	23,962
Number of Secondary Schools in the administrative County	11
Number of pupils on Secondary School Registers ...	5,805

MEDICAL INSPECTIONS

Routine medical inspections have been carried out in all the primary and secondary schools.

Routine Examinations.

Entrants	3572
Second age groups	2654
Third age groups	1785
Other routine examinations	141
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Total routine examinations	8152
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Number of defects found to require treatment	682
Number of defects found to require observation	3183

Special examinations and re-examinations numbered 6,284 and these resulted in 1,370 defects being found which required treatment and 1,716 defects which required to be kept under observation.

The total examinations carried out in 1953 numbered 14,436 compared with 14,330 in 1952.

GENERAL CONDITION

There is no doubt that the health of the school children continues to improve year by year, but the number assessed as being of poor general condition varies in accordance with different interpretations of the medical staff. This year 85 children have been classified at routine medical inspections as being of poor general condition. This figure represents 1.04 per cent. of the total routine examinations.

VISUAL DEFECTS AND EXTERNAL EYE DISEASE

Four hundred and thirty-three children were found at medical inspections to be in need of treatment for eye defects as compared with 510 in 1952. In addition 1,276 children had to be kept under observation for these defects.

The refraction clinic service is staffed by a medical officer approved by the Regional Hospital Board, and clinics are held as follows, viz., three times a month at Beverley, once a fortnight at Bridlington, and once a month at Barlby, Driffild, Fulford, Hessle, Norton, Withernsea, Pocklington and Market Weighton.

During the year 1,722 individual children were seen at these clinics and in all they made 1,827 attendances. These figures show an increase of 510 in the number of individual children seen and a decrease of 140 in the total number of attendances made; 553 of the 1,722 individual children attending were new cases and 1,169 were children attending for re-examination. Glasses were prescribed for the first time for 265 children and in 487 cases coming up for re-examination a change of glasses was ordered. Thus, in 752 cases glasses were prescribed either for the first time or as replacements, a decrease of 128 on the previous year's figures. According to the records obtained from the hospitals through which all prescriptions have to be passed only 558 children are known to have obtained glasses during the year.

The procedure for the supply of glasses is that after a child has been seen at a clinic the form and prescription recommending the supply of glasses is sent to the appropriate Hospital Management Committee Secretary who in due course forwards the prescription and authorisation to obtain glasses to the child's parent. The parent then takes the child to any optician he may choose who supplies the glasses and the optician submits his account to the Management Committee for payment. It is only when a claim for payment is submitted that the Hospital Authorities have evidence that the child has obtained the glasses and the difference in the figures between the glasses prescribed and those known to be obtained may be due to the fact that many parents decide to obtain, for payment, other types of frames than those supplied free for school children, in which event no claim for payment will, of course, be made to the Hospital Management Committee by the optician. As I have previously stated, I feel that the rather cumbersome administrative procedure could be streamlined with considerable advantage to all concerned.

The services of an orthoptist were available at the York County Hospital, and four children attended this clinic on thirteen occasions.

EAR DISEASE AND DEFECTIVE HEARING

All cases needing special investigation are referred to the special out-patient departments at the hospitals at Beverley, Bridlington, Driffeld, Hull, Scarborough and York. Many cases of chronic discharging ears, however, receive routine treatment at the school clinics in Beverley and Bridlington and Haltemprice by the medical staff.

Towards the end of the year a pure tone audiometer was obtained and this will greatly facilitate the examination and ascertainment of partially deaf children. If undetected this defect prevents such children from gaining full benefit from education in school. It can be anticipated that with this improved facility for ascertainment an increased number of children will now be classified as partially deaf.

EAR, NOSE AND THROAT DEFECTS

The total number of children referred for treatment was 65 less than the previous year. The waiting time for tonsillectomy within the County area varies from 12 to 24 months depending on the hospital concerned.

During the year 337 children were referred to hospitals with a view to removal of tonsils and adenoids. Returns received from the various hospitals show that 806 school children received operative treatment for nose and throat defects.

DISEASE OF THE CHEST.

As a result of examinations 53 children have been found to require treatment for chest disease. All such cases are referred in the first place to their own doctors with a recommendation for further examination by the appropriate Chest Physician when necessary. The liaison between the Chest Physicians and the School Medical Service in this area has always been satisfactory.

UNCLEANLINESS

Cleanliness surveys are carried out in all schools each term by the nurses. Seventy-nine thousand four hundred and twenty-four examinations were carried out and 931 pupils were found to be unclean. The incidence of infestation was 3.1 per cent. of the school population as compared with 2.9 per cent. in 1952. The complete elimination of head infestation should theoretically be possible, but only if present legislation is altered to enable Authorities to tackle this problem more efficiently.

MINOR AILMENTS

Minor ailments are dealt with partly by school nurses on their visits to schools and to the children's homes, but mainly at minor ailment clinics. The popularity and usefulness of this type of clinic has been maintained, as shown by the total number of children attending. I feel that the facilities provided are appreciated by both parents and teachers and I am sure that these clinics are useful contributions to preventive school medicine and they undoubtedly help to keep children attending school who would otherwise be on the sick list at home. The numbers of cases dealt with during 1952 and 1953 in clinics by school doctors and nurses, and by the school nurses elsewhere than at clinics are shown in the following table, viz.:—

Defects.	1952.			1953.		
	Clinics.	Nurses.	Totals.	Clinics.	Nurses.	Totals.
Ringworm (head) ...	—	—	—	2	—	2
Ringworm (body) ...	13	1	14	9	—	9
Scabies	7	5	12	12	—	12
Impetigo	150	15	165	171	12	183
Other Skin Diseases.	551	21	572	722	27	749
Minor Eye defects ...	316	77	393	437	24	461
Minor Ear defects and Deafness	382	12	394	467	2	469
Minor Injuries, Bruises, etc.	3444	93	3537	3975	74	4049
Totals	4863	224	5087	5795	139	5934

SCHOOL NURSES

The following table shows the number of visits and examinations carried out by the school nurses throughout the County. Much of the value of the work the nurses do is of an advisory nature and this cannot be converted into cold statistics.

Figures relating to the work of the school nurses for 1953 are as follows:—

Visits to Schools:—

Routine examinations	814
Follow-up visits	165
No. of children examined	79424

Visits to Homes:—

No. of homes visited	3528
No. of children seen on these visits	4075

Reasons for these visits:—

Uncleanliness	884
Minor Ailments	507
Nutrition	395
Other reasons	2346

INFECTIOUS DISEASES

The only major outbreak of infectious disease which occurred was in the summer and early autumn in the Beverley area when poliomyelitis became prevalent. It was not considered necessary to close any schools, although in certain cases the children who had been in contact with this disease were excluded for a period of up to three weeks. During the outbreak the schools in the area concerned were advised not to send children to the local public baths and schools outside the Borough were discouraged from bringing parties of children into the town for any social or educational purpose.

EXAMINATION FOR MENTAL CONDITION

During the year 87 children were specially examined. The following table shows the results of these examinations:—

Normal intelligence	1
Educationally sub-normal:—	
(a) for education in special classes	4
(b) for education in special schools	32
For notification under the Mental Deficiency Acts:—	
(a) Under Section 57 (3) of the Education Act, 1944	16
(b) Under Section 57 (4) of the Education Act, 1944	—
(c) Under Section 57 (5) of the Education Act, 1944	11
Not considered to require supervision after leaving school	10
Decisions deferred	13

Although the provision of a Special School in the County has eased the situation with regard to special school places there are still 94 children who have been ascertained as suitable for admission to schools for educationally sub-normal children who have not as yet been found places in such schools. There is no doubt that the facilities provided at the Etton Pasture School are greatly appreciated by the parents of those children attending. The medical care of the children is in the hands of a local practitioner. In addition a minor ailment clinic is held twice per week and attended by one of the school nurses who carries out any necessary treatment.

HANDICAPPED CHILDREN.

Details of the number of children ascertained as coming within the various categories of handicapped pupils are shown in the following table. Compared with 1952 there is an increase of 22 in the educationally sub-normal group and an increase of 9 in the physically handicapped group.

In order to place handicapped pupils in special schools this Authority has generally to rely on obtaining vacancies in residential schools in other areas as there are no local facilities, apart from the places available for educationally sub-normal children at the Etton Pasture School. In many cases great difficulty is found in placing a child in a suitable school.

The number of children attending special schools during recent years is as follows:—

	Blind	Deaf	Epileptic	Delicate	Physically handicapped	Maladjusted	Educ. Sub-normal.
1951 ...	10	12	2	7	7	2	4
1952 ...	8	18	2	9	6	1	41
1953 ...	8	17	5	7	9	2	59

At the end of the year 15 children were waiting to be placed in special schools for physically handicapped pupils the greatest single group of these, viz.: eight are spastic children.

NUMBER OF HANDICAPPED CHILDREN AT 31ST DECEMBER, 1953.

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	2	—	—	—	2	—
B.	<i>Partially-sighted Children</i> , i.e., suitable for education by special methods involving the use of sight	6	1	—	—	1	6
C.	<i>Deaf Children</i> , i.e., suitable for education by methods for those without naturally acquired speech	12	—	1	—	4	9
D.	<i>Partially Deaf Children</i> , i.e., suitable for education by special methods involving the use of speech	4	3	—	—	1	6
E.	<i>Educationally Sub - Normal Children</i> , i.e., those needing a specialised form of education	59	141	—	—	130	70
F.	<i>Epileptic Children</i> , i.e., those who should be educated in special schools	5	2	—	—	5	2
G.	<i>Maladjusted Children</i> , i.e., those who require special educational treatment	2	4	—	—	3	3
H.	<i>Physically Handicapped Children</i> , i.e., those with disease or crippling defect who should be educated in special schools ..	9	33	—	13	29	26
I.	<i>Pupils suffering from Speech Defect</i> , i.e., those who require special educational treatment	—	675	—	—	470	205
J.	<i>Delicate Children</i> , i.e., those who for health reasons should not be educated under normal school regime	6	20	1	1	15	13
K.	<i>Pupils suffering from Multiple Disabilities</i>	1	5	—	3	5	4

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 31.12.52.	Admitted during 1953.	Discharged during 1953.	Number maintained at 31.12.53.
Blind	Yorkshire School for the Blind	2	—	—	2
	Swamley School for the Blind, Kent	1	—	—	1
	Hull, Wold Road Special School	2	—	—	2
	Northwood (Sunshine Home)	1	—	—	1
	Chorleywood College, London	1	—	—	1
	Coventry (Exhall Grange)	1	—	—	1
Deaf	Doncaster	11	—	—	11
	Sutton	5	—	—	5
	Leeds	1	—	1	—
	Brighton (Hamilton Lodge)	1	—	—	1
	Boston Spa (St. John's R.C.) ...	—	1	1	—
Epileptic	Lingfield	2	1	—	3
	Liverpool (Maghull) ..	—	2	—	2
Delicate	Southport (Bradstock- Lockett)	4	1	3	2
	Sevenoaks (Oak Bank)	1	2	1	2
	Bexhill-on-Sea (Wrestwood)	1	—	—	1
	Woodford Bridge (Essex)	1	—	—	1
	Skipton-in-Craven (Netherside Hall) ..	1	—	1	—
	Menston-in-Wharfedale	1	—	1	—
	Hull, Cottingham Road	—	1	—	1
Malad- justed	Allerton Bywater (Ledston Hall)	2	—	1	1
	Wentworth (Hoover House)	—	1	—	1
Physically Handi- capped	Hull (Park Avenue) ..	2	2	2	2
	Chipping Norton	1	—	1	—
	Killinghall (Ian Tetley)	1	—	1	—
	Hambleton (St. Dominics)	—	1	—	1
	Stanmore	—	1	—	1
	Fulford	—	1	—	1
	Salford (Bethesda Home)	—	1	—	1
	Welburn Hall	2	1	—	3
Educa- tionally Sub-Normal	Lichfield (Beacon School)	1	—	—	1
	Etton Pasture	40	19	1	58

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

ORTHOPAEDIC AND POSTURAL DEFECTS

A total of 51 Orthopaedic Clinics were held during the year at Beverley, Bridlington, Malton, Scarborough and York, at which 249 children made 416 attendances. The figures show a decrease of 30 in the number of children who attended the clinics and 16 in the number of new cases as compared with those for 1952.

Eighteen children were at some time in-patients at the Adela Shaw Orthopaedic Hospital, Kirbymoorside. Fifteen of these were admitted and seventeen were discharged during the year.

CHILD GUIDANCE CLINIC

The following report is submitted by the Educational Psychologist:—

The work has been limited this year, particularly in the matter of home visiting, by staff shortage resulting from the resignation of the psychiatric social worker at the end of last year. The educational psychologist and the mental health social worker, assisted by the part-time services of the consultant psychiatrist, have continued to hold whole day sessions on Tuesday and Wednesday of each week. However, the staff shortage was made good by the welcome appointment of a new psychiatric social worker, Mr. John G. Haggett, in October.

During the year 150 cases were referred to the centre from the following sources:—

School Medical Officers	47
General Practitioners	7
Hospitals	5
Head Teachers	52
Children's Officer	8
Continued from 1952	31
	<hr/>
	150
	<hr/>

The number of referrals has continued to increase, with the result that it has become more difficult to maintain the policy of carrying only a very small waiting list. This stood at 10 at the end of the year, and it seems probable that this year's number of cases represents the maximum with which a two-day centre can hope to deal. Of the total of 150, 111 were treatment cases, while 39 were referred for testing and assessment for various purposes. Those accepted for treatment comprised 7 pre-school children; 27 from infant schools; 48 from junior and 29 from senior schools.

SUMMARY OF CASES EXAMINED

(Classified according to main presenting symptom).

Habit disorders (enuresis, incontinence, sickness)	26
Anti-social behaviour (truancy, wandering, pilfering, lying) ...	23
Aggressive behaviour (tantrums, destructiveness, disobedience)	12
Nervous disorders (hysteria, obsessions, emotional immaturity)	14
Anxiety states (attention seeking, jealousy, night terrors)	17
Backwardness (causing emotional complications)	19
	<hr/>
	111
	<hr/>

It is a truism to say that children are referred because they are a source of anxiety, either to the parents or to the teachers, or both. The more common worries in the home are persistent enuresis, destructiveness, disobedience and poor school progress, while the more common complaints from the school are of pilfering, lying, attention-seeking and backwardness.

All children are affected by the fact that they are being taught to conform to the standards of a social pattern, the meaning and purpose of which they are not capable of understanding, and this process involves giving up present pleasures in return for promised gains in the distant future. To overcome these difficulties they require affection, security, experiences of success, and reasonable discipline. A breakdown in behaviour may be due, then, to insecurity at home or to misplacement at school, or very frequently to inconsistent handling. Treatment, therefore, means the steps which are taken to improve the child's psychological and educational standing and may be applied directly to the child through attendance at the centre, or to the home environment, or to the school situation, or to all of them.

In certain cases of severe maladjustment, or educational backwardness, it is necessary to recommend that the child be sent to a school which can cater for his particular difficulties, in which case the function of the centre is simply a diagnostic and advisory one.

SUMMARY OF CASES, WITH TREATMENT AND DISPOSAL.

Maximum improvement obtained	83
Tested and assessed; report issued	39
Transferred to other areas	5
Responding, treatment continuing	23
	<hr/>
	150
	<hr/>

There were 88 sessions involving 100 diagnostic interviews, 266 treatment interviews, 155 interviews with parents and 207 visits to schools or to homes. The psychiatrist had 10 interviews with children and 12 with parents.

JAMES G. SMITH,

Educational Psychologist.

SPEECH THERAPY

Miss P. Inman has worked as a full-time speech therapist throughout the year and Miss E. Crooks was employed in a similar capacity until 30th September, 1953. From the 1st October, Miss Crooks worked on a part-time basis giving six sessions each week to this work. At the commencement of the year clinics were held at Barlby, Beverley, Bridlington, Driffield, Etton, Fulford, Hedon, Hessle, Market Weighton, Norton and Withernsea, and additional clinics were later opened at Hornsea and Pocklington. As from the time Miss Crooks commenced to give only part-time service the clinics at Hornsea and Withernsea were discontinued. A total of 738 half-day clinic sessions were held at which 261 children made 3,887 attendances and in addition 103 visits were made to the homes of seven of these children who were being given individual treatment. The classification of the cases receiving treatment in 1953 is as follows:—

Stammers	84
Dyslalia	129
Cleft Palate	9
Cerebral Palsy	8
Other defects	31
	<hr/>
	261

Four hundred and fourteen children were on the waiting list at the end of the year. The majority of these may have only relatively minor defects or will be children living in isolated areas who cannot get to the places where the clinics can be held. Nevertheless, it should of course be possible to offer treatment to all these children, but it must be appreciated that this cannot be done even if the present establishment of two speech therapists is fully implemented.

REPORT OF THE PRINCIPAL SCHOOL DENTAL OFFICER FOR THE YEAR 1953.

At the beginning of the year the staff consisted of five full-time and three part-time dental officers, but unfortunately was not maintained at this level. Miss Philpott who worked in the western part of the County did not return to duty after her summer holiday due to illness at home, and in December signified her intention to resign. Mr. Gray was appointed to the permanent staff in December and works in the area previously covered by Miss Philpott. Miss Johnson has been employed as a part-time Dental Officer since September, centred at Driffield and works six sessions weekly. It has not been necessary to make any changes in the remaining districts. Mr. Champlin continued his work in Haltemprice, Miss Cripps in the South East, and Mr. Jones in Bridlington and the Northern part of the County. Mr. Beddoes and Mr. Booth each work one session weekly in the Beverley Clinic. Except for six sessions each week in the Bridlington Clinic and two sessions in the Beverley Clinic, all the work has been

carried out in the mobile clinics. The mobile clinics continue to be most satisfactory. By providing compact and efficient surgeries in close proximity to rural schools there is no time lost by the dental officers through broken appointments and the patients reach the dentist without a journey or the necessity of waiting.

Routine inspection and treatment did not differ from that of previous years and each child offered conservative treatment was made dentally fit. Teeth shewing extensive caries or sepsis were extracted. Most of the extractions, permanent and deciduous, were done under nitrous oxide and oxygen anæsthesia, and regular sessions were held for this purpose.

Irregularities of the teeth are corrected by extraction or by the use of removable appliances. Appliances have been successfully used in 66 cases. There is a considerable demand for orthodontic treatment and this service will be extended as soon as the necessary staff is available.

The statistics relating to the service appear in Table V at the end of this report. Under other treatment 311 scalings were recorded and 10 dentures inserted.

In conclusion I wish to thank the dental officers and their attendants for their conscientious service and the school teachers for their help and co-operation.

P. S. SPENCE.

CO-OPERATION WITH VOLUNTARY BODIES

As in previous years, close co-operation has been maintained with the National Society for the Prevention of Cruelty to Children, and the help given by their Inspectors has been of the utmost value. School Welfare Officers report cases of neglect direct to the Society when necessary.

CO-OPERATION WITH TEACHERS AND SCHOOL WELFARE OFFICERS

I would again record my thanks to the teachers and School Welfare Officers for their assistance during the year in connection with the preliminary work necessitated by medical inspections and the weighing of children.

PROVISION OF MILK AND MEALS

There was, in 1953, a decline of 3% in the number of school children taking milk under the Milk in Schools Scheme. In October, 1953, the percentage was 76.5%. The number of children receiving milk at the end of the year was 21,140 including 109 to whom reconstituted National Dried Milk was supplied because liquid milk was not available from an approved source.

An interesting experiment was carried out at Sledmere C.E. School where, for a period of eight weeks during October and November flavoured milk tablets were supplied to children

in lieu of the reconstituted National Dried Milk normally supplied at this school. One packet of 10 small tablets was given to each child on each school day, the child having a choice of eight flavours. Each packet provided the equivalent of one-third pint of liquid milk and the tablets were readily accepted by children. Ninety-six out of 98 children on the roll took the tablets regularly during the trial period. A full report by the Head Teacher was submitted to the Ministry of Food but there has been no indication as to whether the Ministry consider the results sufficiently satisfactory to encourage the regular manufacture of these tablets for use in schools for which suitable sources of a supply of liquid milk are not available.

At two schools for which pasteurised liquid milk cannot be obtained, arrangements have been made for the weekly delivery of sterilised milk which is being well received by the children.

The most important influence in 1953, on the provision of meals was the increase to ninepence per meal in the charge to children, imposed by the Ministry of Education on 1st March. The result was an immediate drop in the percentage of children demanding school meals. In October, 1952, the percentage of children at school being supplied with school meals was 51.85, by June, 1953, it had fallen to 46.11 and to 45.48 by October. There is no sign of recovery to the former level of demand. The numbers of children taking school meals at the end of 1953 was 12,568 against 13,910 at the corresponding period in 1952.

Limitation of expenditure on capital work for school meals purposes continued during the year making further development of the service a slow process involving much improvisation. During the year a new kitchen and dining room was opened as part of a new Primary School and three small dining centres were opened, which obtain meals from existing school kitchens.

PHYSICAL EDUCATION

(Report submitted by the Organisers of Physical Education.)

Steady progress in all branches of physical education has been maintained during the past year.

More schools participated this year than ever before in football competitions although heavy expenses incurred in travelling long distances prevent some schools joining the football leagues. The standard of play was higher, the improvement being particularly noted among the junior teams. Beverley Grammar School did very well to reach the quarter finals of the "Daily Dispatch" competition and Smailes, of Hessle, was chosen to play for England.

Several schools have been able to introduce hockey and schools which have recently begun to play took part in a coaching rally towards the end of the season. The member-

ship of the Netball Association has remained stable and the customary rallies and matches were played. Short courses on the coaching of summer games for girls were held at Hornsea and Cottingham.

An East Riding Cricket XI entered for the Yorkshire Schools' Cup defeated teams from Doncaster, Hull and Wharfedale to reach the final. In this Bradford won the cup by a narrow margin.

Schools were again very active in athletics and the usual area and district sports were held in the County. The Yorkshire Schools' Sports were held at Sheffield, but the East Riding team did not manage to do as well as usual.

The Ministry of Education's new handbooks on physical education, "Moving and Growing" and "Planning the Programme" have been sent to all schools. A course for the teaching of Infants was held at Norton for schools in the district.

This being Coronation Year, English Folk dancing was featured in the programme of many schools. Approximately 300 girls and boys from 28 schools took part in a Folk Dance Festival held in July at the Beverley Longcroft School.

Swimming instruction was again provided for scholars at the Beverley, Driffeld, Norton, Selby, Goole and Hull Baths. The services of a part-time instructor were secured this year at the Goole Baths.

Classes in physical education, recreative gymnastics, folk dancing and athletics were provided for members of Youth Clubs and Evening Institutes. The Football Association provided the services of a qualified coach and twenty-one clubs sent teams to compete in the County Athletics Festival.

O. MYLAND.

N. ELLIS.

MEDICAL EXAMINATION OF CANDIDATES FOR ADMISSION TO TRAINING COLLEGES, ETC.

As a result of the revised procedure

- (a) All candidates for admission to Training Colleges, etc., are required to undergo an examination by the School Medical Officer of the area in which they are resident.
- (b) Entrants to the teaching profession, other than those who have completed an approved course of training, are to be examined by the School Medical Officer of the Local Education Authority by whom they are appointed.

During the year a total of 37 candidates for admission to Training Colleges and 2 entrants to the teaching profession were examined by the medical staff of the School Health Service.

MEDICAL INSPECTION RETURNS.

YEAR ENDED 31ST DECEMBER, 1953.

TABLE I.

MEDICAL INSPECTION OF PUPILS ATTENDING MAINTAINED PRIMARY AND SECONDARY SCHOOLS.

A. Periodic Medical Inspections.

Number of Inspections in the prescribed Groups.

Entrants	3572
Second Age Group	2654
Third Age Group	1785

Total 8011

Number of other Periodic Inspections 141

Grand Total 8152

B. Other Inspections.

Number of Special Inspections 1850

Number of re-Inspections 4434

Total 6284

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	17	234	237
Second Age Group	107	165	249
Third Age Group	53	107	150
Total (prescribed groups)	177	506	636
Other Periodic Inspections	6	—	6
Grand Total	183	506	642

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	51	68	447	288
Eyes— <i>a.</i> Vision	183	565	126	455
<i>b.</i> Squint	38	117	18	70
<i>c.</i> Other	15	53	53	16
Ears— <i>a.</i> Hearing	10	64	29	17
<i>b.</i> Otitis Media ..	6	67	46	34
<i>c.</i> Other	7	39	30	15
Nose or Throat	162	759	175	309
Speech	24	57	31	43
Cervical Glands	16	376	18	92
Heart and Circulation..	12	94	8	59
Lungs	19	192	34	89
Developmental				
<i>a.</i> Hernia	4	13	1	7
<i>b.</i> Other	17	81	13	56
Orthopaedic—				
<i>a.</i> Posture	25	77	5	38
<i>b.</i> Flat Foot	16	180	8	81
<i>c.</i> Other	30	112	100	55
Nervous System—				
<i>a.</i> Epilepsy	2	13	3	10
<i>b.</i> Other	4	31	1	34
Psychological—				
<i>a.</i> Development	5	61	16	90
<i>b.</i> Stability	8	69	10	16
Other	28	95	198	102

TABLE IIB.

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

Age Groups (1)	Number of Pupils Inspected (2)	A. (Good)		B. (Fair)		C. (Poor)	
		No.	% of col 2	No.	% of col 2	No.	% of col 2
Entrants	3572	1160	32.5	2358	66.0	54	1.5
Second Age Group	2654	959	36.1	1674	63.1	21	.8
Third Age Group	1785	714	40.0	1061	59.44	10	.56
Other Periodic Inspections	141	57	40.4	84	59.6	—	—
Total	8152	2890	35.45	5177	63.51	85	1.04

TABLE III.

INFESTATION WITH VERMIN.

(i) Total number of examinations in the schools by the school nurses or other authorised persons	79424
(ii) Total number of <i>individual</i> pupils found to be infested	931
(iii) Number of individual pupils in respect of whom cleansing notices were issued (Section 54 (2), Education Act, 1944)	169
(iv) Number of individual pupils in respect of whom cleansing orders were issued (Section 54 (3), Education Act, 1944)	4

TABLE IV.

TREATMENT TABLES.

GROUP I.—MINOR AILMENTS (excluding Uncleanliness).

(a)	Number of cases treated, or under treatment during the year.
Skin—	
Ringworm—Scalp—	
(i) X-Ray treatment	—
(ii) Other treatment	2
Ringworm—Body	9
Scabies	12
Impetigo	183
Other skin diseases	749
Eye Disease	461
(External and other, but excluding errors of refraction, squint and cases admitted to hospital).	
Ear Defects	469
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.)	4049
Total	5934

(b) Total number of attendances at Authority's minor ailments clinics, 14308.

GROUP II.—DEFECTIVE VISION AND SQUINT.

	No. of cases dealt with.
Errors of refraction (including squint)	1722
Other defect or disease of the eyes	—
Total	1722

No. of Pupils for whom spectacles were

(a) Prescribed	752
(b) Obtained	558

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

	Total number treated
Received operative treatment—	
(a) for diseases of the ear	32
(b) for adenoids and chronic tonsillitis	726
(c) for other nose and throat conditions	48
Received other forms of treatment	859
Total	1665

GROUP IV.—ORTHOPÆDIC AND POSTURAL DEFECTS.

(a) No. treated as in-patients in hospitals or hospital schools	18
(b) No. treated otherwise <i>e.g.</i> in clinics or out-patient departments	249

GROUP V.—CHILD GUIDANCE TREATMENT AND SPEECH THERAPY.

No. of pupils treated—

(a) under Child Guidance arrangements	150
(b) under Speech Therapy arrangements	268

TABLE V.

DENTAL INSPECTION AND TREATMENT.

(1) Number of pupils inspected by the Authority's Dental Officers:	
(a) Periodic age groups	14839
(b) Specials	727
	<hr/>
Total (1)	15566
	<hr/>
(2) Number found to require treatment	9561
(3) Number referred for treatment	8794
(4) Number actually treated	6882
(5) Attendances made by pupils for treatment	9047
(6) Half-days devoted to—	
(a) Inspection	111
(b) Treatment	1765
	<hr/>
Total (6)	1876
	<hr/>
(7) Fillings—	
Permanent Teeth	7202
Temporary Teeth	66
	<hr/>
Total (7)	7268
	<hr/>
(8) Number of teeth filled—	
Permanent teeth	6536
Temporary teeth	66
	<hr/>
Total (8)	6602
	<hr/>
(9) Extractions—	
Permanent Teeth	1572
Temporary Teeth	10438
	<hr/>
Total (9)	12010
	<hr/>
(10) Administration of general anæsthetics for extraction	4074
(11) Other operations—	
Permanent Teeth	566
Temporary Teeth	78
	<hr/>
Total (11)	644