

[Report 1964] / Medical Officer of Health and School Medical Officer of Health, East Riding of Yorkshire County Council.

Contributors

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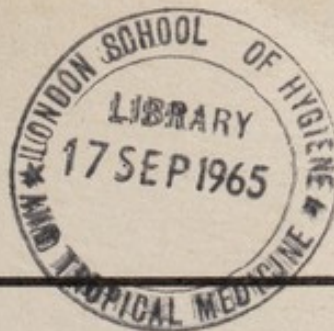
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EAST RIDING OF YORKSHIRE
COUNTY COUNCIL

ANNUAL REPORTS


of the

County Medical Officer

and

Principal School Medical Officer

For the Year 1964



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To the Chairman and Members of the County Council.

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

I beg to submit my Annual Reports as County Medical Officer and as Principal School Medical Officer for the year 1964. A perusal of these reports will, I think, show that during the year there has again been a steady growth of the health services but that there have been no matters developing which appear to call for special reference in this introduction.

The estimated population increased by 5,130 to 237,300. The number of births registered for the County was 4,025, made up of 3,956 live births and 69 still-births; the number of live births was 71 more than in 1963 but the birth rate remained the same at 16.7 per thousand population. There were 2,894 deaths, a reduction of 93 on the previous year's figures and the death rate has consequently fallen. For 1964 it was 12.2 per thousand population as compared with 12.9 in 1963.

Although the incidence of measles was rather higher than expected in what was regarded as a non-epidemic year, infectious diseases were generally not a cause of any anxiety and for the sixth year in succession there were no cases of diphtheria notified.

The reports of the County Chief Sampling Officer and of the Divisional Veterinary Officer of the Ministry of Agriculture, Fisheries and Food are included in the section of this report which deals with the inspection and supervision of food and the report of the Principal School Dental Officer, in the section of the report dealing with the health of the school child.

Once again I wish to record my thanks to members of the Health Committee and of the School Welfare Sub-Committee of the Education Committee for their continued help and support and also to all members of the staffs of the General and School Health Services for another year of loyal and conscientious service.

I have the honour to be,

Your obedient servant,

R. WATSON,

County Medical Officer.

County Hall,
BEVERLEY,
June, 1965.

STAFF OF HEALTH AND SCHOOL MEDICAL DEPARTMENTS, 1964

COUNTY MEDICAL OFFICER AND PRINCIPAL SCHOOL MEDICAL OFFICER.

R. Watson, M.A., M.B., B.Ch., M.R.C.S., L.R.C.P., D.P.H.
Tel. No.: Office, Beverley 881281; Home, Beverley 882609.

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

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

DIVISIONAL MEDICAL OFFICERS AND SCHOOL MEDICAL OFFICERS.

Buckrose Health Division. Oxford Street, Bridlington. Tel. 5381.

J. H. Maughan, M.B., B.S., D.P.H.

Haltemprice Health Division. Anlaby House, Anlaby. Tel. Kirkella 58445.

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

Holderness Health Division. Lord Roberts Road, Beverley. Tel. 881281.

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

Howdenshire Health Division. Burnby Lane, Pocklington. Tel. 3226.

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

SENIOR ASSISTANT MEDICAL OFFICER AND SCHOOL MEDICAL OFFICER

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

ASSISTANT MEDICAL OFFICERS AND SCHOOL MEDICAL OFFICERS.

WHOLE-TIME:

Patricia Gabb, M.B., Ch.B.

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

I. W. Sinclair, M.B., Ch.B.

Olive M. Sparrow, M.D., M.B., B.S.

PART-TIME:

Janet S. Dann, M.B., Ch.B.

Barbara Hodgson, M.B., Ch.B., D.C.H.

Elizabeth McV. Redfern, M.B., Ch.B.

Cynthia M. Rosen, M.B., Ch.B.

Jean F. Wilson, M.B., B.Ch., D.P.H.

PRINCIPAL DENTAL OFFICER.

G. R. Smith, L.D.S.

DENTAL OFFICERS.

WHOLE-TIME:

Miss P. A. Arris, B.D.S.

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

C. H. Elphick, L.D.S.

G. Pearson, L.D.S.

S. Smullen, L.D.S.

Mrs. E. M. S. Ward, B.D.S.

L. B. Wilson, L.D.S.

PART-TIME:

Mr. E. Beddoes, L.D.S.

Mr. R. F. Coates, L.D.S.

Mrs. U. Coates, L.D.S.

Mr. G. F. R. Harkins, L.D.S. (from 27th February, 1964)

DENTAL AUXILIARY.

Miss M. Harrison (from 7th September, 1964)

DENTAL HYGIENIST.

Miss M. A. Rennison

PUBLIC ANALYST.

R. T. Hunter, B.Sc., F.R.I.C.

COUNTY AMBULANCE OFFICER.

G. R. Gray.

MENTAL WELFARE OFFICERS.

S. Bateman.

G. E. Howes.

J. Liptrot.

K. Powls.

A. Sunderland (from 1st November, 1964)

EDUCATIONAL PSYCHOLOGIST.

Post vacant.

PSYCHIATRIC SOCIAL WORKER.

Mrs. A. B. Godfrey, A.A.P.S.W.

SOCIAL WORKER (CHILD GUIDANCE).

Miss S. Graham, Soc. Dip.

MENTAL HEALTH SOCIAL WORKER.

Mrs. E. McCreadie, R.M.N.

SPEECH THERAPISTS.

WHOLE-TIME:

Mrs. A. M. Nicholson, L.C.S.T.

Mrs. J. Pedley, L.C.S.T. (to 31st July, 1964)

PART-TIME:

Mrs. I. M. Alder, L.C.S.T.

Miss M. Reynolds, L.C.S.T. (from 7th September, 1964)

Mrs. E. Stone, L.C.S.T. (from 10th February, 1964)

Mrs. E. Waddington, L.C.S.T.

Mrs. A. L. Wilks, L.C.S.T. (to 31st July, 1964)

ORGANISER OF DOMESTIC HELP SERVICE.

Mrs. J. M. Atkinson.

SUPERINTENDENT NURSING OFFICER/NON-MEDICAL SUPERVISOR OF MIDWIVES

Mrs. J. Stephenson, S.R.N., S.C.M., H.V. Cert., Q.N.S.

DEPUTY SUPERINTENDENT NURSING OFFICERS

Miss B. M. Greenwood, S.R.N., S.C.M., H.V. Cert., Q.N.S.

Miss R. Hepplestone, S.R.N., S.C.M., H.V. Cert., Q.N.S. (from 2nd March, 1964)

COUNTY DISTRICT NURSES AND MIDWIVES.

WHOLE-TIME STAFF:

Mrs. M. Anderson, S.R.N., S.C.M.

Mrs. J. M. Arthur, S.R.N., S.C.M., Q.N.S.

Mrs. M. Asbridge, S.R.N., S.C.M., Q.N.S.

Miss S. E. Bampton, S.R.N., S.C.M. (from 1st October, 1964)

Miss E. Beal, S.C.M., S.E.N.

Miss P. Bennett, S.R.N., S.C.M.

Mrs. M. Bilton, S.R.N., Q.N.S.

Mrs. W. Blackburn, S.R.N., S.C.M., Q.N.S.

Mrs. F. Boynton, S.R.N., S.C.M.

Mrs. J. M. Bradford, S.R.N., S.C.M., Q.N.S.

Miss K. Bratley, S.R.N., Q.N.S.

Miss M. Brighton, S.R.N., S.C.M., Q.N.S.

Mrs. E. Bristow, S.E.N. (to 19th August, 1964)

Mrs. L. J. Bult, S.R.N. (from 1st July, 1964)

Miss H. Burns, S.R.N. (from 1st November, 1964)
 Mrs. I. Burrill, S.R.N., S.C.M., Q.N.S.
 Mrs. M. Campey, S.R.N., Q.N.S.
 Mrs. L. Colbeck, S.C.M., S.E.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.S.
 Miss I. M. Darley, S.R.N., Q.N.S. (to 31st August, 1964)
 Miss I. Derving, S.C.M., S.E.N.
 Mrs. M. E. C. Dickinson, S.R.N., Q.N.S.
 Mrs. V. J. Dickinson-Hennessy, S.R.N., S.C.M.
 Miss B. Dolphin, S.R.N., S.C.M., Q.N.S.
 Mrs. E. Eyre, S.R.N., S.C.M., Q.N.S.
 Miss E. K. Fawley, S.R.N.
 Miss F. V. Fish, S.R.N., S.C.M.
 Mrs. E. Foster, S.R.N., S.C.M.
 Miss J. E. Found, S.R.N., S.C.M. (from 21st September, 1964)
 Mrs. B. George, S.C.M. (to 30th November, 1964)
 Mrs. F. M. Hagyard, S.R.N., S.C.M., Q.N.S.
 Mrs. B. A. Hall, S.R.N., S.C.M.
 Miss E. Hall, S.R.N., Q.N.S.
 Miss M. Hallam, S.R.N., S.C.M., Q.N.S.
 Miss M. E. Hodgson, S.R.N., S.C.M., Q.N.S.
 Miss D. E. Holden, S.R.N., Q.N.S.
 Miss E. Hutchinson, S.R.N., S.C.M., Q.N.S.
 Miss M. E. Jenkins, S.R.N., S.C.M., Q.N.S.
 Mrs. E. Lenderyou, S.R.N., Q.N.S.
 Mrs. M. Merriman, S.R.N., S.C.M., Q.N.S.
 Miss M. F. Miles, S.R.N., S.C.M., Q.N.S.
 Miss E. B. Mountain, S.R.N., S.C.M. (from 1st January, 1964)
 Miss O. K. Neal, S.R.N., S.C.M., Q.N.S.
 Miss H. Phillips, S.R.N., S.C.M., Q.N.S.
 Miss G. Rider, S.R.N., S.C.M., Q.N.S.
 Mrs. E. Rozenbroek, S.R.N., S.C.M. (from 1st October, 1964)
 Mrs. E. E. Scrase, S.R.N.
 Mrs. P. Shearer, S.R.N., Q.N.S.
 Mrs. M. Shipp, S.R.N. (to 30th April, 1964)
 Miss M. Spavin, S.R.N., S.C.M., Q.N.S.
 Mrs. G. M. Spiegth, S.C.M.
 Mrs. A. B. Steer, S.R.N., S.C.M.
 Mrs. V. Stockdale, S.R.N., Q.N.S.
 Miss J. M. Taylor, S.R.N., S.C.M.
 Mrs. L. E. Thorley, S.R.N. (to 28th September, 1964)
 Mrs. M. Walton, S.R.N. (from 17th August, 1964)
 Miss M. Warcup, S.R.N., S.C.M., Q.N.S.
 Miss E. Warder, S.R.N., S.C.M.
 Mrs. H. Watson, S.R.N., S.C.M.
 Mrs. G. Whincup, S.R.N., S.C.M.
 Miss G. Y. Whincup, S.R.N., S.C.M.
 Miss D. Wilkinson, S.R.N., S.C.M., Q.N.S.
 Miss E. E. Wilson, S.R.N., S.C.M.
 Miss J. M. Wilson, S.R.N., Q.N.S.
 Miss A. Wood, S.R.N., S.C.M. (to 31st August, 1964)
 Mrs. M. Wood, S.R.N., S.C.M., Q.N.S.
 Mrs. D. Wylie, S.R.N., S.C.M., Q.N.S.

PART-TIME STAFF:

Mrs. M. Dale, S.R.N., S.C.M.
 Mrs. G. E. Leng, S.R.N.
 Mrs. D. A. Ramsdale, S.R.N., S.C.M. (to 31st October, 1964)

DISTRICT NURSE, MIDWIFE, HEALTH VISITORS.

Miss M. Ahamer, S.R.N., S.C.M., H.V.Cert.
 Mrs. E. Allman, S.R.N., S.C.M., Q.N.S., H.V.Cert. (from 27th July, 1964)

HEALTH VISITORS AND SCHOOL NURSES.

WHOLE-TIME STAFF:

Mrs. A. Beck, S.R.N., H.V. Cert.
 Miss E. Binley, S.R.N., S.C.M., H.V. Cert.
 Miss E. M. Blackburn, S.R.N., S.C.M., H.V. Cert.
 Mrs. D. Boyes, S.R.N. (to 31st July, 1964)
 Miss H. W. Brigham, S.R.N., S.C.M., H.V. Cert.
 Miss L. I. Broadhurst, S.R.N., S.C.M., H.V. Cert.
 Miss M. K. Clarkson, S.R.N., S.C.M., H.V. Cert.
 Miss M. Coates, S.R.N., S.C.M., H.V. Cert.
 Mrs. C. A. L. N. Cole, S.R.N., S.C.M., H.V. Cert.
 Miss F. H. Collier, S.R.N., S.C.M., H.V. Cert.
 Miss C. Connolly, S.R.N., S.C.M., H.V. Cert.
 Mrs. B. Edwards, 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 P. Fenton, S.R.N., S.C.M., H.V. Cert.
 Mrs. W. M. Greysmith, S.R.N., S.C.M., H.V. Cert.
 Miss A. Hewitt, S.R.N., S.C.M., H.V. Cert.
 Miss F. A. Hoggard, S.R.N., S.C.M. (to 30th April, 1964)
 Miss E. M. Holden, S.R.N., S.C.M., H.V. Cert.
 Miss D. Hunt, S.R.N., S.C.M., H.V. Cert.
 Miss D. H. Lemar, S.R.N., S.C.M., H.V. Cert.
 Miss G. T. McAllister, S.R.N., S.C.M., H.V. Cert. (from 1st July, 1964)
 Mrs. J. M. Morris, S.R.N., S.C.M., H.V. Cert.
 Miss S. Pryde, S.R.N., S.C.M., H.V. Cert. (from 1st August, 1964)
 Miss M. M. Reid, S.R.N., S.C.M., H.V. Cert.
 Miss I. Rippon, S.R.N., S.C.M., H.V. Cert. (to 30th September, 1964)
 Miss E. A. Roberts, S.R.N., S.C.M., H.V. Cert. (to 31st January, 1964)
 Miss A. E. Sturdy, S.R.N., S.C.M., H.V. Cert.
 Miss M. Taylor, S.R.N., S.C.M., H.V. Cert. (from 1st February, 1964)
 Miss J. F. Tillotson, S.R.N., H.V. Cert. (from 27th July, 1964)
 Mrs. L. Whipp, S.R.N., S.C.M., H.V. Cert.
 Mrs. W. M. Wilde, S.R.N., S.C.M., H.V. Cert. (to 30th September, 1964)

PART-TIME STAFF:

Mrs. J. M. Cheeseman, S.R.N., H.V. Cert. (from 1st October, 1964)
 Mrs. J. H. Hermon, S.R.N. (from 7th September, 1964)
 Miss P. M. Scales, S.R.N. (from 9th September, 1964)
 Miss K. I. Tomlinson, S.R.N. (from 1st September, 1964)
 Mrs. H. L. White, S.R.N. (from 1st September, 1964)

STUDENT HEALTH VISITORS—Four.

**Medical Officers of Health of the several Local Authorities
at 31st December, 1964.**

Local Authority	Name of Medical Officer
MUNICIPAL BOROUGHs	
Beverley	W. Ferguson, M.B., Ch.B., D.P.H.
Bridlington.....	J. H. Maughan, M.B., B.S., D.P.H.
Hedon.....	W. Ferguson, M.B., Ch.B., D.P.H.
URBAN DISTRICTS	
Driffeld	J. H. Maughan, M.B., B.S., D.P.H.
Filey	J. H. Maughan, M.B., B.S., D.P.H.
Haltemprice	L. N. Gould, M.R.C.S., L.R.C.P., D.P.H.
Hornsea	W. Ferguson, M.B., Ch.B., D.P.H.
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. Wilson, M.B., B.Ch., D.P.H.
Driffeld	J. H. Maughan, M.B., B.S., D.P.H.
Holderness	F. R. Cripps, M.D., D.P.H.
Howden	W. Wilson, M.B., B.Ch., D.P.H.
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

GENERAL STATISTICS

Area	735,964 acres
Rateable value (as at 1st April, 1964)	£6,924,267
Product of a penny rate	£27,885

POPULATION

Districts	Census, 1961	Estimated	
		1963	1964
Administrative County	224,031	232,170	237,300
Urban Districts	114,086	116,510	119,950
Rural Districts	109,945	115,660	117,350

The rates for the various statistics given in this report are based on the Registrar General's estimated population for mid-1964, i.e. 237,300. The final report of the Census for 1961 gave the population of the administrative county at the time the Census was taken in April, 1961, as 224,031.

BIRTHS AND BIRTH RATES

Birth rate per 1,000 of the Population

Year	Urban Districts	Rural Districts	Administrative County
1901—1910	24.0	23.8	23.5
1911—1920	19.3	20.8	20.3
1921—1930	16.6	18.8	17.9
1931—1940	14.4	14.9	14.8
1941—1950	17.2	17.2	17.2
1951	14.1	14.8	14.5
1952	14.6	15.2	14.9
1953	14.8	15.3	15.0
1954	14.0	14.4	14.2
1955	13.8	13.8	13.8
1956	14.1	14.8	14.4
1957	14.7	15.4	15.0
1958	14.2	14.4	14.3
1959	14.8	15.1	15.0
1960	15.8	15.2	15.5
1961	16.3	15.6	15.9
1962	16.0	16.7	16.3
1963	16.8	16.7	16.7
1964	16.3	17.0	16.7

*Average rate per 10 year period.

The live birth rate for the County was 16.7, the same as the rate for 1963. The provisional rate for England and Wales for 1964 was 18.4 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 16.7 the adjusted rate so obtained is 17.7.

There were 3,956 live births and 69 stillbirths registered for the County during the year, making a total of 4,025, an increase of 74 on the 1963 figures. Of these births, 454 live births and 6 stillbirths took place outside the County.

The number of births notified to my office by hospitals, practitioners and midwives was 6,328 live births and 111 stillbirths, a total of 6,439. In addition 6 live births were notified by Registrars. Of these births 2,815 live births and 52 stillbirths were to women who were normally resident outside the County and the details were transferred to their home areas.

STILLBIRTHS

The stillbirths which were registerable in the County numbered 69, three more than in the previous year. The stillbirth rate was 17.1 per 1,000 total births. In 1963 this rate was 16.7 and in 1962 it was 17.2. The provisional rate for England and Wales for 1964 is 16.3.

ILLEGITIMATE LIVE BIRTHS

Number of Illegitimate Live Births in the County:

Year	Urban Districts	Rural Districts	Administrative County
1950	87	93	180
1951	75	78	153
1952	62	79	141
1953	66	58	124
1954	61	55	116
1955	54	57	111
1956	67	47	114
1957	47	64	111
1958	42	59	101
1959	66	57	123
1960	60	66	126
1961	65	72	137
1962	83	82	165
1963	85	90	175
1964	83	82	165

There were 165 illegitimate live births, 10 less than in 1963.

The illegitimate live birth rate was 0.70 per 1,000 of the population, compared with 0.75 in the previous year.

The number of illegitimate live births in the County was 4.2% of the total live births.

DEATH RATES FROM ALL CAUSES (ALL AGES)

per 1,000 of the Population

Year	Urban Districts	Rural Districts	Administrative County
1901—1910	15.1	13.2	13.7
1911—1920	14.6	12.9	13.6
1921—1930	13.2	11.6	12.2
1931—1940	13.0	11.6	12.3
1941—1950	12.9	11.1	12.0
1951	13.7	11.2	12.4
1952	12.3	10.6	11.4
1953	13.2	11.0	12.1
1954	13.9	10.9	12.4
1955	13.6	10.6	12.1
1956	13.8	11.1	12.4
1957	13.7	10.6	12.2
1958	13.7	11.5	12.6
1959	13.7	10.9	12.3
1960	13.4	11.1	12.2
1961	14.6	11.6	13.1
1962	14.0	11.0	12.5
1963	14.1	11.6	12.9
1964	13.9	10.5	12.2

*Average rate per 10 year period.

There were 2,894 deaths registered for the County in 1963 a decrease of 93 on the figure for the previous year. This gives a death rate of 12.2 per 1,000 of the population, as compared with 12.9 in 1962. The application of the comparability factor to this crude rate gives a rate of 10.9 compared with the provisional rate for England and Wales for 1964 which was 11.3. The rate for England and Wales for 1963 was 12.2.

Of the total deaths, 74.3% occurred in people aged 65 and over and 48.5% in people aged over 75.

The principal causes of death in the County were heart diseases (1,034), cancer (532) and vascular lesions of the nervous system (386). These three causes accounted for 67.4% of the deaths, as compared with 67.6% in 1962.

The 1,034 deaths due to heart diseases were 25 less than in 1962 and represent a rate of 4.4 per thousand population.

Compared with 1962 the number of deaths attributed to cancer increased from 527 to 532, the rate per thousand population changing from 2.27 to 2.24. The number of deaths attributable to cancer of the lungs and bronchus fell to 117 as compared with 127 in 1962. The death rate from this cause fell to 0.49 per 1,000 population but this rate is still the second highest on record.

For all other forms of cancer the death rate per thousand has risen slightly from 1.72 to 1.75. The number of deaths from cancer of the stomach rose from 59 to 62; deaths from cancer of the uterus

fell from 21 to 17; the deaths from cancer of the breast rose from 29 to 47. Deaths from leukaemia remained approximately the same as in previous years.

Of the 532 deaths due to cancer, 313 occurred in urban areas and 219 in rural areas, corresponding respectively to rates of 2.61 and 1.86 per thousand population.

Motor vehicle and other accidents were responsible for 120 deaths during the year. In 1963 deaths from these two causes numbered 113.

The following table shows the figures for the various causes of death for the year 1964:

Cause of Death	No. of deaths		
	Male	Female	Total
Tuberculosis, respiratory.....	5	4	9
Tuberculosis, other forms	1	1	2
Syphilitic disease	4	2	6
Diphtheria	—	—	—
Whooping cough	—	1	1
Meningococcal infection	1	1	2
Acute poliomyelitis	—	—	—
Measles	—	—	—
Other infective diseases.....	—	—	—
Cancer of stomach.....	39	23	62
Cancer of lungs, bronchus.....	94	23	117
Cancer of breast.....	—	47	47
Cancer of uterus.....	—	17	17
Cancer, other forms.....	136	138	274
Leukaemia, aleukaemia	9	6	15
Diabetes	12	19	31
Vascular lesions of nervous system...	160	226	386
Coronary disease, angina.....	352	229	581
Hypertension with heart disease	9	25	34
Other heart disease.....	153	266	419
Other circulatory disease.....	59	92	151
Influenza	2	3	5
Pneumonia	58	71	129
Bronchitis	87	37	124
Other diseases of respiratory system..	12	5	17
Ulcer of stomach and duodenum....	11	9	20
Gastritis, enteritis and diarrhoea....	3	7	10
Nephritis and nephrosis.....	7	10	17
Hyperplasia of prostate.....	10	—	10
Pregnancy, childbirth and abortion..	—	—	—
Congenital malformations.....	8	9	17
Other diseases	107	134	241
Motor vehicle accidents.....	30	12	42
All other accidents.....	27	51	78
Suicide	11	14	25
Homicide	2	3	5
Totals	1,409	1,485	2,894

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

Age Group	Infectious Disease (including Syphilis)		Tuberculosis		Malignant Disease		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	11.1	—	—	1	0.2	1	0.1	19	6.9	—	—	5	3.3	45	14.2	72	2.5
1—	1	11.1	—	—	—	—	—	—	1	0.4	1	3.3	4	2.7	—	—	7	0.2
5—	—	—	—	—	4	0.7	—	—	1	0.4	—	—	6	4.0	3	0.9	14	0.5
15—	—	—	—	—	1	0.2	1	0.1	2	0.7	—	—	16	10.7	1	0.3	21	0.7
25—	—	—	—	—	3	0.6	—	—	—	—	—	—	12	8.0	6	1.9	21	0.7
35—	—	—	1	9.1	20	3.7	10	0.6	3	1.1	—	—	9	6.0	5	1.6	48	1.7
45—	1	11.1	1	9.1	67	12.6	47	3.0	13	4.7	3	10.0	7	4.6	14	4.4	153	5.3
55—	4	44.5	1	9.1	117	22.0	192	12.2	33	12.0	4	13.3	16	10.7	41	13.0	408	14.1
65—	2	22.2	7	63.6	167	31.4	411	26.2	73	26.5	6	20.0	16	10.7	64	20.3	746	25.8
75—	—	—	1	9.1	152	28.6	909	57.8	130	47.3	16	53.4	59	39.3	137	43.4	1,404	48.5
Totals	9	—	11	—	532	—	1,571	—	275	—	30	—	150	—	316	—	2,894	—

THE UNIVERSITY OF CHICAGO

No.	Name	Amount		Total
		1900	1901	
1	John Doe	100	50	150
2	Jane Smith	200	100	300
3	John Doe	150	75	225
4	Jane Smith	100	50	150
5	John Doe	250	125	375
6	Jane Smith	150	75	225
7	John Doe	100	50	150
8	Jane Smith	200	100	300
9	John Doe	150	75	225
10	Jane Smith	100	50	150
11	John Doe	250	125	375
12	Jane Smith	150	75	225
13	John Doe	100	50	150
14	Jane Smith	200	100	300
15	John Doe	150	75	225
16	Jane Smith	100	50	150
17	John Doe	250	125	375
18	Jane Smith	150	75	225
19	John Doe	100	50	150
20	Jane Smith	200	100	300
21	John Doe	150	75	225
22	Jane Smith	100	50	150
23	John Doe	250	125	375
24	Jane Smith	150	75	225
25	John Doe	100	50	150
26	Jane Smith	200	100	300
27	John Doe	150	75	225
28	Jane Smith	100	50	150
29	John Doe	250	125	375
30	Jane Smith	150	75	225
31	John Doe	100	50	150
32	Jane Smith	200	100	300
33	John Doe	150	75	225
34	Jane Smith	100	50	150
35	John Doe	250	125	375
36	Jane Smith	150	75	225
37	John Doe	100	50	150
38	Jane Smith	200	100	300
39	John Doe	150	75	225
40	Jane Smith	100	50	150
41	John Doe	250	125	375
42	Jane Smith	150	75	225
43	John Doe	100	50	150
44	Jane Smith	200	100	300
45	John Doe	150	75	225
46	Jane Smith	100	50	150
47	John Doe	250	125	375
48	Jane Smith	150	75	225
49	John Doe	100	50	150
50	Jane Smith	200	100	300
51	John Doe	150	75	225
52	Jane Smith	100	50	150
53	John Doe	250	125	375
54	Jane Smith	150	75	225
55	John Doe	100	50	150
56	Jane Smith	200	100	300
57	John Doe	150	75	225
58	Jane Smith	100	50	150
59	John Doe	250	125	375
60	Jane Smith	150	75	225
61	John Doe	100	50	150
62	Jane Smith	200	100	300
63	John Doe	150	75	225
64	Jane Smith	100	50	150
65	John Doe	250	125	375
66	Jane Smith	150	75	225
67	John Doe	100	50	150
68	Jane Smith	200	100	300
69	John Doe	150	75	225
70	Jane Smith	100	50	150
71	John Doe	250	125	375
72	Jane Smith	150	75	225
73	John Doe	100	50	150
74	Jane Smith	200	100	300
75	John Doe	150	75	225
76	Jane Smith	100	50	150
77	John Doe	250	125	375
78	Jane Smith	150	75	225
79	John Doe	100	50	150
80	Jane Smith	200	100	300
81	John Doe	150	75	225
82	Jane Smith	100	50	150
83	John Doe	250	125	375
84	Jane Smith	150	75	225
85	John Doe	100	50	150
86	Jane Smith	200	100	300
87	John Doe	150	75	225
88	Jane Smith	100	50	150
89	John Doe	250	125	375
90	Jane Smith	150	75	225
91	John Doe	100	50	150
92	Jane Smith	200	100	300
93	John Doe	150	75	225
94	Jane Smith	100	50	150
95	John Doe	250	125	375
96	Jane Smith	150	75	225
97	John Doe	100	50	150
98	Jane Smith	200	100	300
99	John Doe	150	75	225
100	Jane Smith	100	50	150

DEATHS AMONGST CHILDREN UNDER ONE YEAR

Death rate amongst Infants per 1,000 Live Births

Year	Urban Districts	Rural Districts	Administrative County
1901—1910	114	107	110
1911—1920	84	81	82
1921—1930	59	63	61
1931—1940	50	53	51
1941—1950	40	39	39
1951	30	26	28
1952	27	21	24
1953	26	28	27
1954	23	23	23
1955	26	22	24
1956	27	22	24
1957	23	19	21
1958	20	24	22
1959	19	17	18
1960	19	19	19
1961	17	16	17
1962	16.9	17.9	17.4
1963	17.9	23.9	20.8
1964	17.9	18.5	18.2

*Average rate per 10 year period.

There were 72 deaths of children under the age of one year in 1964, 9 less than in 1963, the infant mortality rate being 18.2 per 1,000 live births. The provisional rate for England and Wales for 1964 was 20.0 compared with 21.1 in 1963.

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

	Urban	Rural	Total
Pneumonia	12	4	16
Bronchitis	—	2	2
Congenital malformations	7	6	13
Birth injury	—	4	4
Atelectasis	1	7	8
Prematurity	8	9	17
Other diseases and causes	7	5	12
Totals	35	37	72

Of the 72 infant deaths, 47 occurred during the neo-natal period, that is before the baby was four weeks old, and many of these deaths took place within a few hours or a few days of birth. In 17 cases death was due to prematurity, representing 23% of all the infant deaths.

Deaths which take place within the first week after birth and stillbirths are classified as perinatal deaths. Most are due to causes which operate during the ante-natal period and during the actual process of birth. In 1964 the number of these perinatal deaths was 106 (made up of 69 births and 37 infant deaths) and represented a rate of 26.3 per 1,000 total births. In 1963 this rate was 28.3.

STATISTICS RELATING TO MOTHERS AND INFANTS

The vital statistics relating to mothers and infants are summarised below:

Live Births	
Number	3,956
Rate per 1,000 population	16·67
Illegitimate Live births (per cent of total live births) ..	4·17
Stillbirths	
Number	69
Rate per 1,000 total live and still births.....	17·14
Total Live and Still Births.....	4,025
Infant Deaths (deaths under one year).....	72
Infant Mortality Rates	
Total infant deaths per 1,000 total live births.....	18·20
Legitimate infant deaths per 1,000 legitimate live births	17·15
Illegitimate infant deaths per 1,000 illegitimate live births	42·42
Neo-natal Mortality Rate (deaths under four weeks per 1,000 total live births).....	11·38
Early Neo-natal Mortality Rate (deaths under one week per 1,000 total live births).....	9·33
Perinatal Mortality Rate (stillbirths and deaths under one week combined per 1,000 total live and still births)	26·34
Maternal Mortality (including abortion)	
Number of deaths	—
Rate per 1,000 total live and still births.....	—

Section 2.—Local Health and other Services

THE CARE OF MOTHERS AND YOUNG CHILDREN

ANTE-NATAL CARE

Women who are being confined in their own homes obtain their ante-natal care from their family doctors and the domiciliary midwives. Those who are being admitted to maternity hospitals or homes normally attend at the appropriate institution for their ante-natal care, but, as in the majority of cases they will be admitted to beds to which their general practitioners have access, hospital ante-natal care in the normal case is often limited to examinations on booking and at about the thirty-sixth week of pregnancy, the intermediate examinations being undertaken by the general practitioners in co-operation with the domiciliary midwives.

Irrespective as to whether they are hospital or domiciliary bookings all women can attend the sessions provided in clinics in various parts of the County which give ante-natal and mothercraft instruction, including the teaching of relaxation. Details of attendances at the various instruction classes which were in operation during the year are shown in the following table:—

Clinic	No. of sessions	No. of new attenders	No. of women attending	No. of attendances
Anlaby.....	84	114	120	728
Barlby*	48	24	32	239
Beverley.....	89	87	124	683
Bridlington	50	35	41	345
Brough	47	57	63	373
Cottingham.....	49	69	83	543
Driffeld*	8	12	12	75
Hessle	53	88	115	668
Hornsea.....	53	29	32	257
Market Weighton* ...	12	11	11	63
Thorngumbald*	39	40	40	352
Totals	532	566	673	4,326

*Class opened during the year.

POST-NATAL CARE

In most cases post-natal care is given by family doctors, but post-natal clinics are held at the Westwood, Fulford, East Riding General, and "The Avenue" Hospitals for patients who have been confined in these institutions.

CONGENITAL MALFORMATIONS

In order that statistics relating to congenital malformations can be obtained on a national basis arrangements are made for appropriate information to be entered on the official notification of birth card whenever a new born infant appears to have any congenital

defects. In most instances the information is supplied by the midwife who completes the birth notification card and is sufficient to provide the details required by the Registrar General without further enquiries having to be made. During the year 101 abnormalities were reported affecting 79 infants.

"AT RISK" REGISTER

With the help and co-operation of the general practitioners a register is now being kept of each infant in respect of whom the ante-natal or confinement history of the mother, or the immediate post-natal history of the child, shows that a condition has existed which might result in the development of abnormalities in the child in later life. The object of keeping this register is to enable an unobtrusive watch to be kept on the children concerned so that the appearance of any abnormality, especially deafness, can be noticed and dealt with at the earliest possible moment. In the great majority of cases, of course, no abnormality develops. Since the scheme began 768 children have been supervised in this way, 687 of whom remained on the register at the end of the year.

MATERNAL MORTALITY

One maternal death occurred in the County during the year, but this will not appear in the official returns until 1965.

ANTE-NATAL AND POST-NATAL HOSTELS

During the year, 15 unmarried mothers have been provided with accommodation in hostels provided by the York Diocesan Council for Family Welfare and by other Bodies.

INFANT WELFARE CENTRES

Last year I drew attention to the increase in the use being made of infant welfare centre facilities. This increase, which was greater than could be expected as a result of the larger number of births, had commenced in 1960 and during 1964 it still continued. Compared with 1963 there have been further increases of 599 in the number of children attending, and 6,916 in the total number of attendances at infant welfare centres. The number of children born in 1964 who attended at centres during the year was 2,665. This represents 67% of the registered live births in the County.

To meet these changing needs it has been decided gradually to improve or replace the older of the specially provided clinics; to increase the number of purpose-built clinics so that, eventually, there will be an ad hoc clinic in every small town or large village in which the population is expected to exceed 3,000 in the next ten years; and to provide a mobile clinic so that reasonable facilities for interviewing mothers and weighing and examining babies can be made available in those villages where satisfactory provision for these purposes cannot be found in hired halls.

As part of this development, approvals were given during 1964 for the extension and improvement of the clinic at Driffild, for the provision of a new clinic in the Swinemoor area of Beverley and for the purchase of a mobile clinic and towing vehicle.

Particulars of the work carried out during the year at the infant welfare centres in the County are given in the following table:

Infant Welfare Centre	Frequency of Sessions	Number of children who attended during the year and who were born in			Total number of attendances during year	
		1964	1963	1962-1959	Total	Average per session
Aldbrough	Every 4 weeks	11	16	24	293	23
Anlaby	Twice weekly	177	173	250	4,757	48
Barlby	Every 2 weeks	38	16	8	343	14
Beverley	Twice weekly	345	37	130	6,024	55
Beverley (Toddlers Cl.)—	Weekly	7	19	279	451	11
Bilton	Every 2 weeks	85	61	80	1,876	78
Bishop Burton	Every 4 weeks	6	7	21	185	14
Brandesburton	Every 4 weeks	9	12	35	304	23
Bridlington	3 every 2 weeks	230	72	92	2,622	35
Bridlington (West Hill) ..	Every 2 weeks	22	31	28	420	17
Brough	Weekly	104	101	45	2,240	44
Cottingham	Twice weekly	169	195	186	5,211	51
Driffield	Weekly	92	64	51	1,287	25
Dunnington	Every 4 weeks	15	12	3	177	14
Elvington	Every 4 weeks	19	8	9	145	12
Filey	Every 2 weeks	45	39	14	927	35
Flamborough	Every 2 weeks	12	16	25	389	16
Flixtun	Every 4 weeks	6	7	15	184	13
Fulford	Every 2 weeks	43	27	9	535	22
Gilberdyke	Every 4 weeks	17	12	16	216	17
Hedon	Every 2 weeks	30	34	25	608	25
Hessle	Twice weekly	221	236	124	4,460	43
Holme	Every 2 weeks	14	20	17	412	17
Hornsea	Weekly	110	89	97	2,131	41
Howden	Every 4 weeks	36	21	23	326	23
Hunmanby	Every 2 weeks	21	25	27	504	21
Keyingham	Every 4 weeks	35	21	28	437	34
Leconfield	Every 2 weeks	43	50	48	788	33
Leven	Every 4 weeks	19	11	41	281	20
Little Weighton†	Every 4 weeks	11	7	9	54	18
Long Riston	Every 4 weeks	14	15	30	187	13
Market Weighton	Every 2 weeks	34	46	23	825	34
Newport	Every 4 weeks	14	14	6	163	14
North Cave	Every 2 weeks	25	27	22	610	24
North Ferriby	Every 2 weeks	53	72	53	1,030	38
North Newbald	Every 4 weeks	12	10	7	145	11
Norton	Every 2 weeks	38	56	29	983	39
Patrington†	Every 4 weeks	2	13	8	102	9
Pocklington	Every 2 weeks	45	26	28	529	20
Preston	Every 2 weeks	38	22	26	650	24
Rillington	Every 4 weeks	17	25	12	331	25
Sherburn	Every 4 weeks	7	9	20	128	10
Skidby	Every 4 weeks	16	30	44	357	27
South Cave	Every 4 weeks	33	12	3	243	19
Stamford Bridge	Every 4 weeks	11	12	9	174	14
Thornumbald	Every 2 weeks	64	51	41	1,226	47
Walkington	Every 4 weeks	7	6	25	157	12
Warter	Every 4 weeks	5	8	21	189	17
Welton	Every 4 weeks	17	23	16	244	17
Willerby	Weekly	127	145	181	3,352	65
Withernsea	Weekly	80	88	69	1,872	36
Wold Newton*	Every 4 weeks	2	—	17	50	4
Woodmansey	Every 4 weeks	12	13	38	307	24
Totals	—	2,665	2,362	2,487	52,441	—

*Centre closed during year.

†Centres opened during year.

At the end of the year 51 infant welfare centres were operating and 127 sessions were being held each month.

DENTAL CARE

There has been a further improvement in the number of dental officers and despite the amount of work waiting to be done for school children it was possible slightly to increase the amount of time which could be allotted to the treatment of mothers and young children.

Domiciliary midwives have continued to make returns about the dental examination arrangements for patients booked for domiciliary confinements and during the year 762 of these reports were received. These showed that, of this number of expectant mothers, 673 stated that they were attending or intended to go to dentists in private practice for inspection and necessary treatment. This figure represents just over 88% as compared with just over 89% in 1963. Only 14 women requested that treatment should be provided through the County service. In 60 cases the women were already provided with dentures and did not require dental treatment and in 15 cases suggestions that dental inspection should be carried out were refused.

The need to interest expectant and nursing mothers in the importance of dental care has continued to be brought specially to the notice of health visitors and midwives.

Details of the work carried out for mothers and young children by the County dental service are as follows:

	Examined	No. of persons who commenced treatment	Made Dentally Fit
Expectant and Nursing Mothers	29	26	26
Children under five	84	60	60

Forms of the dental treatment provided:

	Expectant and Nursing Mothers	Children under five
Extractions	11	114
General Anaesthetics	6	37
Fillings	35	50
Scalings and gum treatment	8	—
Silver Nitrate treatment	—	2
Radiographs	2	—
Dentures Provided:		
Full Upper or Lower	2	—
Partial Upper or Lower	3	—
Crowns or Inlays	—	—

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 once again no 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 202 premature live births and 45 premature stillbirths have occurred during the year. Of these 173 live births and 43 stillbirths occurred among infants born in hospitals and 29 live births and 2 stillbirths in the mothers' own homes or in private nursing homes. Nine of the infants born in their mothers' own homes or in a nursing home were transferred to hospitals.

Of the 202 premature infants born alive, eleven died before they were twenty-four hours old, nine died when between one and seven days old, and a further three died before they were four weeks old. Seventeen who died were 4 lbs. 6 oz. or less in weight at birth.

Of all births 6.1% were regarded as being premature as compared with 6.8% in 1963. Of the domiciliary births, 3.1% were premature as compared with 3.9% in the previous year, and the percentage of prematures among hospitals births fell from 7.7% to 7.1%.

A portable incubator is kept ready for instant use at the Beverley ambulance station should premature infants require to be moved from their homes to hospital, or from one hospital to another. Another portable incubator is maintained at the Fulford Maternity Hospital and use can also be made if required of the specially equipped ambulance maintained by the Kingston upon Hull authority.

CARE OF THE UNMARRIED MOTHER AND HER CHILD

All requests for help for unmarried mothers are referred to the social worker appointed by the York Diocesan Council for Family Welfare. The Association undertakes this work for the County Council and, in all, during the year they have helped 112 girls and women of whom 93 were new applicants.

In 15 instances admission to a Mother and Baby Hostel was arranged.

During the year 82 of the 112 cases seen by the social worker have been completed with the following results:—

Mothers returned home with child	30
Babies placed for adoption	46
Babies placed in nursery or foster home	4
Babies died or still-born.....	2

DISTRIBUTION OF WELFARE FOODS

The running of this service continues to involve a considerable amount of work, but the help given by the Women's Voluntary Service has again been extremely reliable and valuable. This organisation has dealt entirely with the distribution of the foods in Anlaby,

Cottingham, Driffeld, Filey, Hedon, Hessle, Hornsea, Norton, Pocklington and Willerby. The help given by 74 voluntary distributors in the villages has also been very much appreciated.

The amounts of the various foods distributed during the year were:—

National Dried Milk	29,525 tins
Cod Liver Oil	3,775 bottles
Orange Juice	37,642 bottles
Vitamin Tablets	4,119 packets

HEALTH VISITING

Difficulties continued to be experienced in the appointment of health visitors and, at the end of the year the whole time staff was made up by 27 health visitor/school nurses, two of whom also undertake district nursing and midwifery work. In addition one health visitor was employed on a part-time basis and four state registered nurses were undertaking part-time duties in clinic and other routine work both in the general and in the school health services.

There were four students in training. Four health visitors attended refresher courses during the year.

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

Visits to expectant mothers:	
First visits.....	842
Subsequent visits	406
Visits to infants born in 1964	
First visits.....	3,681
Subsequent visits	12,534
Visits to children born in 1963	14,057
Visits to children born in 1959 to 1962 ..	23,076
Visits to tuberculosis cases	460
Visits to aged persons.....	2,288
Visits for care and after-care.....	466
Visits for other reasons	1,519

Health visitors have continued the routine testing of the urine of young infants with a view to the early diagnosis of the condition known as phenylketonuria. Tests were carried out by health visitors for 3,685 infants during the year. No cases of the condition were found.

Despite the continuing difficulties associated with the shortage of health visitors it has been found to be possible to comply to some extent with requests made by some general practitioners for the attachment of health visitors to their practices. In Bridlington each of the three health visitors is "attached" to two practices and in Beverley an attachment of a health visitor has been made to one

large practice. The arrangement has been regarded as being experimental but all indications so far are that it is proving to be successful and it is to be expected that it will be applied to other practices where it is desired and where it is possible having regard to the availability of health visitors and to the type of area to be served. The attachment of a health visitor to a practice or to a group of practices ensures that the health visitor and the doctors meet at agreed times to discuss the work which can be or has been done by the health visitor for particular patients and the health visitor's routine domiciliary visits are paid to those who are on the lists of the practices to which she is attached instead of to those who, as in the ordinary arrangement, live in her "area". Health visitors who are attached to practices continue to carry out certain duties for the areas which they normally serve and they also continue with their usual clinic and school work.

DOMICILIARY NURSING AND MIDWIFERY SERVICE

In the majority of instances, domiciliary nursing sisters combine the duties of nurse and midwife. At the end of the year the staff employed was as follows:—

<i>Whole-time staff</i>	
Nurse/midwives	45
Nurse/midwives who also undertake health visiting	2
Midwives	1
Nurses	17
	<hr/>
	65
 <i>Part-time Staff</i>	
Nurse/midwives	1
Nurses	1
	<hr/>
	2
	<hr/>
Total:	67
	<hr/>

Thirty-six of the nurses are Queen's Nursing Sisters, as are also the Superintendent and the two Deputy Superintendents of the Home Nursing Service.

Arrangements are made for nurses who have not had special district training to receive that training, and five nurses successfully completed this training during the year.

Eight nurses attended refresher courses during the year.

At the end of 1964 the position with regard to housing and transport of the domiciliary nursing staff was as follows:—

Housing

Number living in accommodation provided by the County Council:	
(a) Property owned by the County Council	10
(b) Property leased from County District Councils.....	18
(c) Property leased from other owners.....	1
Number living in houses owned by themselves or rented from private owners	34
Number living in lodgings or with relatives.....	4

Transport

Number using cars provided by the County Council.....	48
Number using their own cars.....	18
Number using auto-cycle.....	1

A comparison of the figures shown in the table with those of the previous year shows that visits paid to homes have increased by 8,382 and that the number of cases which the nurses have attended during the year was 120 more than in 1963.

Approximately 56% of the patients nursed were over 65 years old and in approximately 18% of cases the illness was of a chronic nature necessitating visiting for more than twenty-four times in the year. Just over 66% 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, almost 43% were to patients who had to be visited on more than twenty-four occasions.

Where they think the need to exist, domiciliary nursing sisters are authorised to supply the patients with incontinence pads. These are used as a nursing aid and no charge is made. During the year about 18,000 of these pads have been issued. Disposal has to be by burning and so far no difficulties have been experienced in this matter but such difficulties might develop if there was any large extension of all-electric flats in the towns and if smokeless zones were brought into operation.

Of the total visits 30% were made to patients to give injections of various types, no special nursing attention being required.

Arrangements continue to be made whereby selected domiciliary nursing sisters undertake additional special supervisory and advisory duties for patients attending hospital diabetic clinics. During the year these selected nurses paid 375 special supervisory and advisory visits to diabetic patients.

On the domiciliary midwifery side, the number of cases attended was 974, an increase of 47 on the number attended in 1963. The number of ante-natal and lying-in visits totalled 30,077.

District	DOMICILIARY NURSING							DOMICILIARY MIDWIFERY													No. of visits		
	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 visits for injections only (no nursing given) †	No. of deliveries attended				No. of cases receiving gas and air		No. of cases receiving Trilene		No. of cases receiving Pethidine		No. of cases visited on discharge from hospital before 10th day					
	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	Dr. present at delivery	Dr. not present at delivery						
								Dr. present	Dr. not present	Dr. present	Dr. not present												
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)	(15)	(16)	(17)	(18)	(19)	(20)	(21)	(22)		
Aldborough	66	18	684	450	36	6	671	—	—	1	11	—	—	1	8	1	3	24	123	223	225		
Barby	27	7	516	97	13	—	18	—	—	9	21	—	—	5	18	2	10	13	616	653	161		
Beeford	18	7	598	236	14	2	107	—	—	—	2	—	—	2	—	—	—	3	91	47	19		
Beverley No. 1	21	4	673	108	9	—	—	—	—	23	13	—	—	16	11	10	5	52	586	499	353		
Beverley No. 2	14	—	148	19	—	—	21	—	—	19	23	—	—	17	13	3	2	26	388	693	401		
Beverley No. 3	4	—	—	—	—	—	—	—	—	1	29	14	—	—	—	—	—	—	903	764	673		
Beverley No. 4	114	27	2,412	311	58	21	1,145	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
Beverley No. 5	57	8	1,664	364	41	14	726	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
Beverley No. 6	20	5	780	23	6	7	255	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
Bishop Burton	42	9	1,109	96	14	—	162	—	—	19	7	—	—	14	5	8	1	21	246	372	216		
Brandesburton	31	9	966	345	7	143	351	—	—	4	7	1	—	6	6	2	3	41	117	230	171		
Bridlington No. 1	72	4	1,840	185	51	3	694	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
Bridlington No. 2	40	9	1,663	372	35	3	53	—	—	1	2	—	—	—	2	—	—	10	51	84	85		
Bridlington No. 3	89	7	2,532	193	74	9	1,511	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
Bridlington No. 4	68	12	1,464	375	59	6	722	—	—	6	4	—	—	5	4	3	2	6	137	205	52		
Bridlington No. 5	86	18	2,029	427	77	22	1,063	—	—	3	4	—	—	2	3	2	4	8	74	113	67		
Bridlington No. 6	73	9	2,502	81	60	23	1,063	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
Cottingham No. 1	60	12	3,432	130	47	10	981	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
Cottingham No. 2	91	16	3,032	424	72	5	1,267	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
Cottingham No. 3	53	4	2,998	214	45	15	800	—	—	21	16	—	—	18	10	16	6	18	470	441	149		
Cottingham No. 4	45	15	2,507	365	37	10	1,041	—	—	9	17	—	—	6	13	7	13	22	251	216	103		
Cottingham No. 5	46	4	1,547	384	29	7	741	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
Cottingham No. 6	36	—	1,771	180	15	3	815	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
Cottingham No. 7	25	9	1,913	170	20	8	332	—	—	20	10	—	—	14	8	15	8	32	851	440	138		
Driffield No. 1	39	5	1,735	884	20	3	606	—	—	1	10	23	—	10	22	10	22	81	336	513	348		
Driffield No. 2	80	11	3,109	486	65	27	566	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
Driffield No. 3	11	4	677	212	9	5	53	—	—	5	7	—	—	5	5	6	4	4	148	263	154		
Eskrick	54	1	1,768	151	34	18	341	—	—	11	8	—	—	10	8	10	8	12	278	475	34		
Filey	76	25	2,569	346	63	12	1,143	—	—	6	1	—	—	6	1	6	1	1	256	209	10		
Fulford	41	6	1,687	93	30	2	344	—	—	18	8	—	—	19	5	13	5	16	438	472	236		
Hedon	105	26	2,979	259	35	20	1,149	—	—	7	7	—	—	—	7	7	7	38	196	176	236		
Hessle No. 1	68	19	2,514	625	58	6	1,083	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
Hessle No. 2	2	—	228	5	—	—	—	—	—	22	35	—	—	21	33	16	14	64	820	942	483		
Hessle No. 3	37	10	946	166	32	1	332	—	—	—	—	—	—	39	6	21	4	12	637	854	378		
Hessle No. 4	2	—	106	—	—	—	—	—	—	38	11	—	—	—	—	—	—	—	—	—	—		
Hessle No. 5	42	17	2,140	276	36	11	1,175	—	—	—	—	—	—	11	14	7	13	18	273	449	104		
Hessle No. 6	42	6	2,148	296	33	1	869	—	—	—	—	—	—	15	5	12	3	17	226	287	167		
Holme	50	6	1,030	92	35	11	369	—	—	10	17	—	—	11	14	7	13	18	273	449	104		
Hornsea No. 1	115	15	2,511	179	69	22	1,351	—	—	15	5	—	—	15	5	12	3	17	226	287	167		
Hornsea No. 2	47	3	1,992	287	15	—	1,053	—	—	18	2	—	—	16	—	1	—	10	108	412	—		
Hornsea No. 3	38	8	1,476	279	24	21	648	—	—	—	—	—	—	5	5	5	2	14	95	217	86		
Howden	11	7	243	208	9	2	63	—	—	1	15	20	—	13	16	12	10	17	585	759	204		
Hunmanby	51	13	1,966	199	37	1	1,195	—	—	5	3	—	—	5	1	5	—	1	117	78	9		
Market Weighton	34	8	572	74	20	5	51	—	—	20	2	—	—	13	2	14	2	32	335	338	213		
Middleton	36	9	516	130	26	3	39	—	—	—	—	—	—	15	—	10	—	37	441	341	295		
North Cave	45	3	739	60	31	6	102	—	—	21	14	—	—	9	9	9	4	36	319	502	173		
Norton No. 1	48	23	1,344	366	26	2	292	—	—	7	4	—	—	7	4	7	4	6	273	233	25		
Norton No. 2	53	19	1,423	385	34	16	256	—	—	6	2	—	—	4	2	4	—	2	71	118	8		
Norton No. 3	79	20	1,885	330	61	25	641	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
Patrington No. 1	34	7	2,134	339	12	5	18	—	—	3	13	—	—	1	10	2	12	10	66	205	172		
Patrington No. 2	42	5	2,103	332	18	5	28	—	—	—	—	—	—	2	10	1	9	30	129	219	288		
Pocklington No. 1	52	19	1,387	275	35	8	238	—	—	1	15	3	—	3	4	10	1	2	232	327	40		
Pocklington No. 2	40	10	1,193	283	33	7	158	—	—	10	—	—	—	8	—	6	—	4	164	267	52		
Riccall	63	20	2,458	380	53	7	337	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
Rudston	82	7	1,558	247	59	25	657	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
Sherburn	31	18	1,279	319	18	5	411	—	—	6	1	—	—	6	1	6	1	12	148	176	56		
Skirlaugh	29	6	1,105	249	11	10	561	—	—	7	9	—	—	7	5	2	5	49	264	265	364		
South Cave	69	1	808	61	27	7	252	—	—	1	17	13	—	14	11	11	11	34	183	395	182		
Weaverthorpe	50	13	1,719	181	38	17	1,105	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
Welton No. 1	80	17	1,571	110	40	—	425	—	—	14	3	—	—	11	2	7	1	21	200	226	163		
Welton No. 2	18	3	1,205	123	13	1	259	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
Wetwang	25	10	1,352	147	25	3	304	—	—	16	5	—	—	13	4	8	3	21	253	520	16		
Wilberfoss	68	10	1,743	318	39	18	382	—	—	—	—	—	—	5	3	5	3	8	242	267	80		
Willyerby No. 1	3	—	150	40	1	53	—	—	—	23	15	—	—	23	12	10	8	73	929	534	369		
Willyerby No. 2	93	30	2,067	788	75	30	1,067	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
Willyerby No. 3	71	11	2,847	419	48	12	815	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
Withernsea No. 1	50	13	1,514	480	28	6	975	—	—	9	4	—	—	6	1	7	4	9	23	177	92		
Withernsea No. 2	53	7	2,268	185	25	11	1,215	—	—	—	—	—	—	8	1	7	4	27	217	182	87		
Totals	3,343	684	108,665	17,177	2,235	709	37,407	2	5	554	413	1	—	476	321	330	224	1,171	13,981	16,900	8,520		

*Included in columns (2) and (3).

†Included in columns (4) and (5).

‡The nurses in these areas also act as Health Visitor/School Nurses.

§Part-time appointment.

Many women who are confined in hospital are regarded as being fit to be discharged before the end of the normal ten day lying-in period, and an increasing number of patients in the Beverley area are discharged within forty-eight hours after the births of their babies.

In all cases of early discharge arrangements have to be made for domiciliary midwives to continue to provide essential nursing at home until the end of the normal lying-in period and this is especially important in the case of the "forty-eight hour discharges".

In order to achieve this continuing nursing care, cases where early discharge is expected are, whenever possible, notified to the Health Department by the hospitals, usually at the time of booking; the domiciliary midwife who will take over the nursing care after discharge from hospital is then enabled to visit the patient early in her pregnancy and to get to know her before her delivery. At this early visit the midwife can also note any unsatisfactory home conditions, which, if they cannot be remedied, may result in a recommendation being made for the patient to be kept in hospital for a longer period of lying-in. Midwives were called upon to visit 1,171 patients who had been discharged from hospital before the end of the ten-day lying-in period. Of these, 452 patients were discharged two days after their confinement. These patients required 804 ante-natal and 8,520 lying-in visits.

The percentage of domiciliary live and still births for the County as a whole was 24%, the same as in 1963. The percentage of the domiciliary births in the various County Districts can be seen from the following table:

District	Registered Total Births (Live and Still)	Domiciliary Births as Notified (Live and Still)	Percentage Domiciliary
Beverley M.B.	313	106	34
Bridlington M.B.	379	20	5
Driffield U.D.	130	24	18
Filey U.D.	58	14	24
Haltemprice U.D.	797	223	28
Hedon M.B.	35	3	9
Hornsea U.D.	107	30	28
Norton U.D.	69	8	12
Withernsea U.D.	110	20	18
Aggregate of U.D.s	1,998	448	22
Beverley R.D.	477	137	29
Bridlington R.D.	107	7	7
Derwent R.D.	249	86	35
Driffield R.D.	192	44	23
Holderness R.D.	441	84	19
Howden R.D.	202	97	48
Norton R.D.	124	17	14
Pocklington R.D.	235	65	28
Aggregate of R.D.s	2,027	537	26
Total County	4,025	985	24

At the end of the year, 47 County domiciliary midwives were suitably qualified to administer analgesia. During the year one case was given gas and air and 797 were given "trilene" during their confinements, i.e. 82% of the women attended by domiciliary midwives had this type of help.

Midwives are supplied with packs containing sterilised maternity outfits which are issued free of charge in the case of every domiciliary confinement.

According to the returns received, during the year 418 domiciliary births were attended by midwives, no doctor being present. This represents 43% of the domiciliary births in the County.

In all 178 midwives notified their intention to practise in the East Riding during 1964. At the end of the year there were 135 midwives in practice, 49 of whom were employed in the County service, and 86 were employed in hospitals.

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

	Midwives in Institutions	County Midwives	Total
Sending for medical help	58	151	209
Notification of infant death	—	—	—
Notification of stillbirth	36	5	41
Liability to be a source of infection..	—	21	21

The number of medical help forms received from midwives in domiciliary practice was equivalent to 36% of the cases which they attended when no doctor was present.

VACCINATION AGAINST SMALLPOX

The arrangements for the provision of vaccination facilities continued as in previous years and the table printed overleaf shows the number of vaccinations and re-vaccinations in respect of which returns have been received for the year 1964.

Three hundred and eighty-four vaccinations and nine re-vaccinations were given at infant welfare centres.

As from 1st November records of vaccination are only to be requested in respect of children under the age of sixteen years.

District	No.of Births	Primary Vaccinations					Totals	Re-Vaccinations					Totals
		Under 1	1 year	2 to 4	5 to 14	15 or over		Under 1	1 year	2 to 4	5 to 14	15 or over	
Beverley M.B.	307	49	50	7	3	11	120	—	—	5	5	24	34
Bridlington M.B.	373	46	39	8	5	24	122	—	1	10	21	112	144
Driffield U.D.	126	3	38	3	—	3	47	—	—	9	9	21	39
Filey U.D.	56	1	19	—	2	3	25	—	—	—	—	17	17
Haltemprice U.D.	784	209	178	16	4	27	434	—	1	7	21	93	122
Hedon M.B.	34	1	17	—	3	—	21	—	—	1	1	4	6
Hornsea U.D.	106	4	20	2	—	1	27	—	—	—	—	—	—
Norton U.D.	65	1	24	1	—	1	27	—	—	—	1	—	1
Withernsea U.D.	109	23	25	2	—	3	53	—	1	1	—	12	14
Beverley R.D.	470	136	103	12	3	7	261	—	1	10	19	39	69
Bridlington R.D. ..	105	10	11	6	2	5	34	—	—	1	7	15	23
Derwent R.D.	246	14	48	4	1	1	68	—	—	—	—	—	—
Driffield R.D.	189	8	50	1	3	6	68	—	—	2	17	25	44
Holderness R.D. ..	435	33	115	20	—	10	178	—	1	—	7	17	25
Howden R.D.	198	96	22	3	1	3	125	—	1	—	1	7	9
Norton R.D.	121	5	29	1	—	2	37	—	—	1	1	4	6
Pocklington R.D.	232	33	49	9	2	2	95	—	—	1	3	22	26
Totals	3,956	672	837	95	29	109	1,742	—	6	48	113	412	579

IMMUNISATION AGAINST DIPHTHERIA

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

	Aged under 5	Aged 5— 14 years	Total	Reinforce- ment Injections
By General Practitioners . . .	2,219	35	2,254	1,010
At Infant Welfare Centres or at Special Sessions	1,086	263	1,349	3,408
Totals	3,305	298	3,603	4,418

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.	269	16	285	289
Bridlington M.B.	267	20	287	171
Driffield U.D.	113	9	122	34
Filey U.D.	81	1	82	46
Haltemprice U.D.	727	87	814	1,582
Hedon M.B.	36	5	41	55
Hornsea U.D.	69	9	78	127
Norton U.D.	88	2	90	26
Withernsea U.D.	68	29	97	200
Beverley R.D.	377	48	425	649
Bridlington R.D.	78	10	88	75
Derwent R.D.	156	5	161	91
Driffield R.D.	169	4	173	145
Holderness R.D.	321	46	367	797
Howden R.D.	178	2	180	48
Norton R.D.	88	2	90	19
Pocklington R.D.	220	3	223	64
Totals	3,305	298	3,603	4,418

Primary immunisations against diphtheria were 294 more than in 1963 and the number of reinforcement injections was 1,667 more than the previous year's figures.

So far as immunisation against diphtheria is concerned, the records indicate that by the end of 1964, 77.4% of the children born in 1963 had been immunised.

As with vaccination against smallpox as from 1st November records of immunisation are only being requested in the case of children up to the age of sixteen years.

PROTECTION AGAINST WHOOPING COUGH AND TETANUS

All children can receive protection against whooping cough and tetanus, and this protection may be given at the same time as they are immunised against diphtheria.

During the year, 3,272 children received primary courses of anti-whooping cough injections and 1,616 received "booster" injections. These numbers are made up as follows:—

	Primary	Booster
Whooping Cough Vaccine	2	—
Combined Diphtheria and Whooping Cough	3	6
Combined Diphtheria, Whooping Cough and Tetanus	3,267	1,610
Totals	3,272	1,616

In addition 1,666 children received a primary course of tetanus toxoid injections and 66 received boosting injections having previously been inoculated separately against diphtheria and whooping cough, and 294 children received a primary course and 1,175 children received boosting injections of diphtheria-tetanus vaccine.

The protection against whooping cough is most important in the first two years of life and it is satisfactory to note that 76·7% of the children born in 1963 have had prophylactic injections against this disease.

Each year since 1956 the number of routine inoculations against tetanus has increased, and there are now records of 23,152 children who have been protected against tetanus.

Whereas, with whooping cough vaccination there is usually no need to give reinforcing doses, with tetanus, as with diphtheria and smallpox, the level of protection needs to be kept up by boosting doses about every five years. Records show that so far 7,687 children have had "booster" doses of tetanus toxoid.

Records of inoculations are now only required in respect of children.

B.C.G. VACCINATION AGAINST TUBERCULOSIS

The scheme for protection against tuberculosis by B.C.G. vaccination is available to students attending universities, teachers' training colleges, or other establishments of further education and to school children of 13 years of age or older, and those children approaching 13 years who can conveniently be vaccinated along with others of that age.

During the year, letters explaining the scheme and accompanied by consent forms were sent to the parents of 3,150 eligible children. Parents of 2,409 (76·5%) children requested participation in the scheme, and of these acceptors, 2,276 were eventually Mantoux

tested to find out if B.C.G. vaccination was necessary. The result of the tests showed that 1,839 (80.1%) were negative and therefore required vaccination, and 1,838 finally completed the process.

If a child gives a positive reaction to the Mantoux test, it means that at some time he has been exposed to infection and to make certain that there is no evidence of active disease, all children having this positive result to the test are offered special examinations, including chest X-ray. The adult members of their families are also offered X-ray examination in case there may be undetected cases of the disease among them.

PROTECTION AGAINST POLIOMYELITIS

During 1964 the numbers of persons given primary courses or reinforcing doses were as follows:—

<i>Primary Courses:</i>	Salk Vaccine (2 injections)	Oral Vaccine (3 doses)	TOTAL
Children born in 1964	53	456	509
Children born in 1963	183	2,018	2,201
Children born in 1962	59	387	446
Children born in 1961	16	132	148
Children and Young Persons born in the years 1943-1960	24	315	339
Young Persons born in the years 1933-1942.....	8	51	59
Others.....	7	41	48
Totals	350	3,400	3,750

<i>Reinforcing Doses:</i>	Total
THIRD DOSES	
3rd injection of Salk vaccine.....	406
Reinforcing dose of oral vaccine follow- ing 2 injections of Salk vaccine....	185
FOURTH DOSES	
4th injection of Salk vaccine.....	196
Reinforcing dose of oral vaccine follow- ing 3 injections of Salk vaccine, or 3 oral or 2 Salk doses plus 2 oral doses	2,770

At the end of the year the figures for those who had had at least a primary course of 2 injections or 3 doses of oral vaccine were as follows:

Year when vaccinated	Children and Young Persons born in 1943 and later	Young Persons born in the years 1933—1942	Others	TOTALS
1956	727	—	—	727
1957	5,797	—	—	5,797
1958	23,419	1,105	1,301	25,825
1959	10,285	7,903	2,565	20,753
1960	3,908	2,021	5,709	11,638
1961	7,199	2,438	5,916	15,553
1962	4,029	1,876	4,460	10,365
1963	2,958	109	204	3,271
1964	3,643	59	48	3,750
Totals	61,965	15,511	20,203	97,679

AMBULANCE SERVICE

At the end of the year the Council's fleet of vehicles consisted of 20 ambulances and 22 dual purpose vehicles, the latter being used mainly for sitting case work.

Small increases in the staffs were made during the year at the Howden and Withernsea Stations and approval was given to the provision of new stations at Brough and Filey. At the end of the year 58 whole-time driver/attendants were being employed.

Reference to the tables printed below will show that, so far as the calls for the transport of cases of acute and general illness were concerned, the figures for 1964 again show comparatively little change from those for the previous year. There was a slight fall in the number of accident calls from the high figure of 2,584 in 1963.

Thanks to the helpful co-operation of the medical and nursing staffs of the various hospitals, for the year 1963 I had been able to report not only that there had been a halt in the constantly increasing requests for ambulance transport for out-patients, but that there had actually been a decrease in the number of these patients dealt with as compared with 1962. I did say, however, that by the end of 1963 there was evidence that, the number of out-patient journeys was once again increasing and that there would be a further increase due to some extent, at least, to the tendency of both mental and geriatric hospitals to develop the idea of having patients attend the hospitals by day and returning to their homes each night. The returns for 1964 show that these expectations were confirmed and that out-patient and clinic attendances were 5,824 more than in 1963.

Due to the Driffeld Training Centre and Hostel for mentally subnormal children coming into full operation during the year

there has again been a large increase in the number of "patient-journeys" made for this group of patients. Increased demands have also been made by the County Welfare Department for the transport of handicapped people to and from the club facilities which are provided for them; these increases apply not only to the number of people to be transported but also the distances over which they have to be carried.

Of the total mileage, 92% or just over 795,000 miles was covered by the County fleet of 42 vehicles, the average annual mileage per vehicle being just under 19,000.

The following tables give details of the various types of work done by the service as a whole and by the various sections during 1964:—

Types of case	1963	1964	Increase or decrease in 1964 as compared with 1963
1. Accident	2,584	2,450	-134
2. Acute illness	2,470	2,637	+167
3. General illness	4,126	4,304	+178
4. Maternity	1,132	1,107	-25
5. Tuberculosis	21	10	-11
6. Infectious disease	108	59	-49
7. Mental illness	261	250	-11
Totals (Items 1-7)	10,702	10,817	+115
8. Inter-hospital transfers	1,945	2,210	+265
9. Hospital discharges	3,920	4,416	+496
10. Out-patient and Clinic attendances	70,820	75,883	+5,063
Totals (Items 8-10)	76,685	82,509	+5,824
11. Other Cases	18,725	25,292	+6,567
Grand Totals: Cases	106,112	118,618	+12,506
Journeys	24,028	26,073	+2,045
Mileage	783,325	868,776	+85,441
Average patients per journey	4.4	4.5	—
Average miles per journey	32.6	33.3	—
Average miles per patient	7.4	7.3	—

Station	Journeys	Patients	Mileage	Average mileage per journey	Average mileage per patient
<i>Ambulances</i>					
Beverley	2,440	16,013	76,997	31.6	4.8
Bridlington	1,935	5,362	36,684	19.0	6.8
Driffield	883	2,257	15,588	17.7	6.9
Filey	456	964	13,044	28.6	13.5
Hessle	2,716	15,740	77,102	28.4	4.9
Hornsea	601	1,806	17,266	28.7	9.6
Howden	397	1,276	15,435	38.9	12.1
Pocklington	786	3,421	37,707	48.0	11.0
Withernsea	760	3,862	38,159	50.2	9.9
W.R., Selby	1,170	3,130	28,841	24.7	9.2
N.R., Malton	333	834	8,986	27.0	10.8
York C.B.	243	271	1,989	8.2	7.3
Hull C.B.	156	165	2,112	13.5	12.8
Other Authorities	5	5	182	36.4	36.4
Totals for ambulances	12,881	55,106	370,092	28.7	6.7
<i>Sitting Case Cars</i>					
Beverley	1,439	9,215	58,491	40.6	6.3
Bridlington	2,602	9,092	58,177	22.4	6.4
Driffield	1,790	4,944	42,614	23.8	8.6
Filey	1,232	6,843	57,501	46.7	8.4
Hessle	998	6,037	29,070	29.1	4.8
Hornsea	1,408	7,588	62,186	44.2	8.2
Howden	889	4,519	48,548	54.6	10.7
Pocklington	1,139	6,677	68,331	60.0	10.2
Withernsea	764	5,485	42,121	55.1	7.7
York C.B.	5	5	40	8.0	8.0
Hull C.B.	5	6	89	17.8	14.8
Voluntary Car					
Pool	28	88	1,446	51.6	16.4
N.R., Malton	840	2,955	24,052	28.6	8.1
Other Authorities	11	11	318	28.9	28.9
Totals for sitting case cars	13,150	63,465	492,984	37.5	7.8
Train	42	47	5,690	135.5	121.1
Grand Totals ...	26,073	118,618	868,766	33.3	7.3

DOMESTIC HELP SERVICE

The number of cases provided with domestic help during the year has risen from 1,226 to 1,362. For these cases 264,802 hours of work were given, an increase of over 8% on the figure for the previous year. Compared with 1963 the number of requests for help for confinement cases went up by 34 representing an increase of just over 18%. Excluding the confinement cases almost 89% of the people receiving help were over 65 years old.

In view of the continued expansion of this service and in order to improve the amount of supervision which can be made available, an additional assistant organiser was appointed during the year.

The following figures refer to the service given in 1964:

No. of households receiving service at the beginning of 1964	700
New cases helped during the year	662
<hr/>	
Total households receiving service	1,362
Reason for requiring domestic help:	
Confinements	221
General illness	83
Chronic illnesses or old age.....	1,043
Mental illness	15

CARE AND AFTER-CARE

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

MEDICAL LOANS

Except in the Haltemprice and Filey areas where it is provided directly by the St. John Ambulance Brigade, the medical loan service is operated on behalf of the County Council by the British Red Cross Society, who had at the end of the year, a total of 42 depots in the County, and by the Withernsea Old Folks' Appeal Committee, who have a depot at Withernsea. During the year 1,202 articles were loaned under this arrangement. Hospital type beds and special mattresses, etc., were on loan through this service to 22 paraplegic and other patients during the year. Fireguards are also loaned through these arrangements when suggested as being necessary, especially for old people.

CHIROPODY SERVICE

The main provision for chiropody is a "foot comfort" service for elderly people provided by the Women's Voluntary Service and certain other old people's organisations. The service organised by the W.V.S. through Darby and Joan Clubs is available to all old people of pensionable age irrespective as to whether they are members of the Clubs. The County Welfare Officer informs me that at the end of 1964 there were 69 of these services in existence at which 1,650 old persons were receiving treatment. In the majority of areas chiropody sessions are held once a month and nowhere less frequently than once in every six weeks. In nine of the more populated areas sessions are held weekly.

The Health Committee's scheme which covers any persons needing chiropody for medical reasons has, from its inception, been limited in its development by the small number of chiropodists who were qualified under the National Health Service (Medical Auxiliaries) Regulations, 1954, and who were willing to participate in the scheme. These Regulations have now been varied with the result that more chiropodists have become "registered" and have offered to treat patients referred through the Health Department's scheme, with the consequence that the number of patients receiving treatment has increased from 102 to 265, and the number of treatments given has increased from 378 to 1,140. Of the 265 patients treated during the year, 72 were treated in the chiropodists' own surgeries and 193 were so handicapped by old age or illness that the treatment had to be given in their own homes.

PROBLEM FAMILIES

The Children's Officer has continued to act as a co-ordinating officer for the purpose of initiating meetings of persons representing the various bodies or service sections who may in the course of their duties have to deal with the various difficulties created by problem families. The meetings, which are organised on a Divisional Health Area basis and are held under the chairmanship of the Divisional Medical Officer, are called whenever there is information that there are cases in the area which justify this action being taken either with a view to helping to ameliorate established conditions or with a view to taking preventive action. During the year 24 such meetings have been held and 74 individual cases dealt with.

EPILEPSY AND SPASTIC PARAPLEGIA

On the register of handicapped persons maintained by the County Welfare Officer there are 32 epileptics and 17 spastics. Of the 32 epileptics, 6 are in residential accommodation provided by the Welfare Authority and three are in colonies. Of the 17 spastic cases, 14 are in their own homes, and three are in homes provided by voluntary organisations.

In addition, there are 18 epileptics and four spastics living at home and known to the Welfare Department, but who are not registered as handicapped persons.

Among persons ascertained as mentally sub-normal, 23 children and 49 adults are known to be epileptics, and 29 children and 16 adults are known to suffer from a degree of spastic paraplegia. Of these, 8 child and 33 adult epileptics and 10 child and 7 adult spastics are in hospitals.

Among educable children of school age, 10 epileptics and 13 spastics are ascertained under the Handicapped Pupils Regulations.

Arrangements continue to be available for the loan of wheel chairs, walking aids, special beds and mattresses to these groups through the medical loan scheme and all cases have access to the services being provided under the Welfare Department's scheme which now includes facilities for domiciliary occupational therapy.

HEALTH EDUCATION

The arrangements for health education continue to be made through the Divisional Medical Officers who are also Medical Officers of Health for most of the District Councils in their divisional areas.

The Deputy Superintendent Nursing Officer whose duties include one of special responsibility for health education has been able this year to devote much more of her time to this subject and through her help and advice the health visitors and school nurses, upon whom the main reliance will continue to be placed for local talks and person to person propaganda, have been able to extend their activities in this important field. Most of this work is carried out by talks given to small groups in infant welfare centres and in ante-natal instruction classes but larger groups have been dealt with especially in connection with the showing of the film "To Janet, a Son?" dealing with childbirth.

In the Haltemprice and Holderness Divisions especially, regular displays have again been arranged throughout the year on various

topics connected with child health and on food hygiene, home safety, foot health, etc.

In Bridlington the series of talks on the theme "Growing Up" was again given at the St. George's County Secondary School.

In Haltemprice lectures have been given on smoking, venereal disease, tuberculosis, food hygiene, child welfare, first aid and several other subjects.

In the Holderness Health Division lectures have been arranged on child welfare, home accidents, nursing, mothercraft, foot care, personal hygiene, smoking and infectious diseases.

BLINDNESS

Home visiting and home teaching for the blind is undertaken by officers of the Welfare Department.

At the end of the year there were 365 blind and 67 partially sighted persons on the register. The distribution of these persons according to sex and age is shown in the following table:

Age Period	Blind			Partially Sighted		
	Males	Females	Total	Males	Females	Total
0—4	1	—	1	—	—	—
5—10	1	1	2	5	1	6
11—15	1	1	2	2	1	3
16—20	2	3	5	3	1	4
21—29	2	4	6	2	3	5
30—39	7	2	9	1	—	1
40—49	16	10	26	1	2	3
50—59	23	7	30	3	1	4
60—64	11	14	25	2	3	5
65—69	13	21	34	2	4	6
70 and over ..	79	146	225	9	21	30
Totals ...	156	209	365	30	37	67

The following table gives an analysis of the ages at which blindness or the onset of eye trouble occurred in respect of persons on the register at the end of 1964:

Age Period	Blind			Partially Sighted		
	Males	Females	Total	Males	Females	Total
Under 1	10	14	24	10	6	16
1	2	1	3	}	2	4
2	1	—	1			
3	2	2	4			
4	—	—	—			
5—10	10	3	13	1	1	2
11—15	4	1	5	—	—	—
16—20	3	3	6	—	—	—
21—29	13	8	21	1	—	1
30—39	12	4	16	—	1	1
40—49	14	12	26	2	2	4
50—59	19	19	38	1	2	3
60—64	8	24	32	2	4	6
65—69	8	12	20	5	3	8
70 and over ..	48	106	154	5	15	20
Unknown	2	—	2	1	1	2
Totals ..	156	209	365	30	37	67

During the year a total of 74 persons were examined for the first time and of these 41 were admitted to the register of blind persons, 16 were admitted to the partially sighted register and 16 were not considered to be certifiable. One person was certified to be blind but died before registration could be carried out.

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

	0-4	5-15	16-30	31-59	60-69	70-79	80+	Total
Blind	—	—	1	2	4	14	20	41
Partially Sighted	—	2	—	1	3	1	9	16

The causes to which blindness or partial loss of sight was attributed were as follows:

	Blindness	Partially Sighted
Cataract and lens opacities	14	8
Retinitis pigmentosa	1	—
Retinopathy	1	—
Optic atrophy	—	1
Choroi-retinal degeneration	2	1
Glaucoma	6	—
Macular degeneration	5	1
Choroidal degeneration	1	—
Diabetic retinopathy	—	1
Keratitis	1	—
Nystagmus	—	1
Senile vascular disease	—	1
Vascular degenerative changes	—	1
Choroi-retinitis	1	—
Myopia	3	1
Retinal haemorrhage	1	—
Macular haemorrhage	1	—
Neuro-retinitis	1	—
Iritis	1	—
Arterio Sclerosis	1	—
Rupture of choroid	1	—
Totals	41	16

Follow-up of registered blind and partially sighted persons:

No. of cases registered during the year in respect of whom Form B.D.8 recommended:	Cause of Disability			
	Cataract	Glaucoma	Retrolental Fibroplasia	Others
(a) No treatment	6	3	—	13
(b) (i) Medical treatment	—	—	—	6
(ii) Surgical treatment	4	1	—	—
(iii) Optical treatment	1	—	—	2
(iv) Ophthalmic medical supervision	11	2	—	8
No. of cases shown under (b) above who have received treatment:				
(i) Medical	—	—	—	3
(ii) Surgical	2	1	—	—
(iii) Optical	1	—	—	2

In two of the cases recommended for surgical treatment offers of treatment were refused and one case recommended for medical treatment has since died.

Ophthalmia Neonatorum

No cases of ophthalmia neonatorum occurred during the year.

MENTAL HEALTH

MENTALLY SUB-NORMAL PATIENTS

At the end of 1964 there were 678 patients known to be receiving advice or care. Of these 313 were accommodated in hospitals. The remaining 365 were living in the community and to these the mental welfare officers paid 1,508 advisory or supervisory visits during the year.

Patients in hospital

During the year 14 patients made up of 7 children and 7 adults were admitted to hospital on a long stay basis and 15 patients were admitted for periods of short term care, usually to give their parents an opportunity for a rest or holiday. At the end of the year there were 20 cases awaiting admission to hospital of whom 12 were regarded as being in urgent need of hospital care.

The age and sex distribution of the patients in hospital was as follows:—

	Men & boys	Women & girls	Total
Aged under 16.....	24	13	37
Aged 16 years and over...	146	130	276
Totals	170	143	313

Patients in the community

During the year 42 new cases were notified from various sources this number being made up as follows:—

	Men & boys	Women & girls	Total
Aged under 16.....	16	3	19
Aged 16 and over.....	17	6	23
Totals	33	9	42

The age and sex distribution of the patients in the community was as follows:—

	Men & boys	Women & girls	Total
Aged under 16.....	63	35	98
Aged 16 and over.....	142	125	267
Totals	205	160	365

The training arrangements for those in domiciliary care improved considerably with the bringing into full use of the Junior Training Centre and Hostel at Driffeld which were opened in December,

1963. Although primarily intended for children between the age of five or six and sixteen not all the places at the Centre have been taken up by patients in this age group as, pending the opening of the Adult Centre which is to be built in Beverley, and provided the places were not wanted for children, it was decided to allow the continued attendance at the Driffield Centre of young persons up to the age of twenty-one. At the end of the year nine of the fifty attending the Centre were in this older age range.

Use is made of the County ambulance service to transport children between their homes and the Centre and, for those able to attend on a daily basis, return journeys are organised from Beverley, Bridlington, Filey and Hornsea. Some children live in places which are too far away or are too isolated to make daily transport to and from Driffield possible and for these arrangements are made for them to stay in the Hostel from Monday to Friday returning to their homes at the weekends. At the end of the year fourteen children were resident in the Hostel.

The members of the staffs of the Centre and the Hostel have received much help from groups of people, especially in Driffield, who are interested in the work which they are doing and many useful gifts have been received which have been much appreciated by the children.

In addition to the Centre at Driffield use continues to be made of places in the Junior and Adult Centres provided by the Kingston upon Hull and York Corporations and by the West Riding County Council and one child is attending daily at the Winestead Hospital. One child is resident at the National Institute for the Blind's Sunshine Home at East Grinstead and one youth at the National Society for the Care of Handicapped Children's Residential Sheltered Workshop in Slough.

A part-time Day Centre for up to twelve children suffering from severe mental subnormality continues to function on three mornings a week at the Health Services Clinic at Cottingham.

The training arrangements and the numbers of persons involved at the end of the year were as follows:—

Junior Training Centres

Driffield	50
Kingston upon Hull.....	16
York	1
Winestead Hospital.....	1
Total	68

Adult Training Centres

Kingston upon Hull.....	17
Rawcliffe.....	1
Slough	1
York	5
Total	24

*Home Training.....*15

*Part-time Day Centre.....*11

MENTALLY ILL PATIENTS

The work carried out by mental welfare officers for mentally ill patients during the year was as follows:

<i>Home Visits</i>	5,858
<i>Hospital admissions:</i>	
Admissions for observation (Section 25).....	18
Admissions for treatment (Section 26)	2
Emergency admissions (Section 29).....	88
Informal Admissions	178
<i>Attendances at Hospitals or Out-patient clinics...</i>	331

During the year 468 new cases had been referred to mental welfare officers and at the end of the year 722 patients were receiving supportive visits in their homes.

At the end of the year 24 patients were attending the Mental Health Social Club at Cottingham and 15 at the club at Bridlington.

STAFF

The field staff of the mental health service was made up of five mental welfare officers and a mental health social worker with the part-time services of a psychiatric social worker.

FUTURE DEVELOPMENT OF THE HEALTH SERVICES

In 1962 the Minister of Health requested all Local Health Authorities to prepare a development programme for their health services for the next ten years and to review and extend this programme each year so that it always covered the decade ahead.

The second annual review of the programme was accordingly undertaken towards the end of 1964 and, having regard to changes in local developments and the general needs, certain alterations in the previous schemes were adopted in respect of the developments in the infant welfare centre, ambulance and mental health provisions. As regards infant welfare centres the plan now provides for the building of small clinics in all places where the population is expected to grow to at least three thousand as well as developing the use of mobile clinics for the smaller villages. The variation in the ambulance service developments provides for the building of a new station at Brough and for the extensions of the stations in Hessle, Howden and Pocklington. Developments in the mental health service during the next few years envisaged a small extension at the Junior Training Centre in Driffild, a new Junior Centre in the south of the County, an eventual doubling of the training and occupational facilities for adult sub-normal patients and the building of a home for about fifty mentally disturbed elderly patients.

The amended development scheme for the period 1964 to 1975 is set out below.

Year	Staff	Equipment	Buildings
1965/66	2 Health Visitors 1 District Nurse 1 Ambulance Driver/ Attendant 1 Mental Welfare Officer 10 Staff at Adult Training Centre, Beverley	2 Ambulances Mobile Clinic	Clinic, Hessle Clinic facilities, Lord Roberts Road, Beverley New Health Services Clinic, Swinemoor, Beverley Small clinic, Thorngumbald Additional ambulance station facilities in the southern part of the County (new station at Brough or Elloughton)
1966/67	2 Health Visitors 1 District Nurse 4 Ambulance Driver/ Attendants	3 Ambulances	Divisional Health Office, Bridlington Clinic, Bridlington 1 Village clinic Additional classroom, Junior Training Centre, Driffild
1967/68	2 Health visitors 1 District nurse 1 Assistant Supervisor, Junior Training Centre	—	2 Village clinics
1968/69	2 Health visitors 1 District nurse	—	Clinic and Nurse's Flat, Elloughton 1 Village clinic
1969/70	3 Health visitors 1 District nurse	—	Clinic and Nurse's Flat, Pocklington 1 Village clinic Home for Mentally Disturbed Elderly Persons
1970/71 to 1974/75 (five years)	1 Medical Officer 12 Health Visitors 3 District Nurses 4 Ambulance Driver/ Attendants 1 Mental Welfare Officer 10 Staff at Adult Training Centre, Beverley 8 Staff at Home for Mentally Disturbed Elderly Persons	2 Ambulances	6 Village Clinics Ambulance Sub- Station, Hedon Junior Training Centre Adult Training Centre, Beverley

REGISTRATION OF NURSING HOMES

At the end of the year there was one private nursing home registered providing beds as follows:

Medical and surgical..... 17

Thirty three patients were admitted to this home during the year, seven of whom were medical and 24 chronic.

The powers and duties under the Public Health Act, 1936 are delegated to the Bridlington Corporation in respect of the Borough of Bridlington.

NURSERIES 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.

At the end of the year seven nurseries, providing accommodation for 192 children, and fourteen daily minders, were registered, offering places for 207 children.

Section 3. – Sanitary Circumstances of the Area

WATER SUPPLIES, SEWERAGE AND SEWAGE DISPOSAL

RURAL WATER SUPPLIES AND SEWERAGE ACTS, 1944-1961

During 1964, the following schemes of sewerage and sewage disposal and water supply were submitted to the County Council and in each case it was possible to inform the District Councils concerned that it was not desired to offer any observations for the purposes of Section 2(2) of the Rural Water Supplies and Sewerage Act, 1944:

Beverley R.D.....	Extension of existing sewerage facilities at Walkington to serve the east end part of the village.
Bridlington R.D.....	Construction of a relief sewer to serve the northern part of Hunmanby and the installation of a mechanically operated rake for the screens at the Hunmanby Sewage Disposal works. Extension of existing sewers in Carter Lane and South Sea Road, Flamborough. Provision of sewerage and sewage disposal facilities for the villages of Reighton and Speeton.
Derwent R.D.....	Provision of sewerage and sewage disposal facilities for the village of Wheldrake. Provision of a sewer to serve anticipated development in Back Lane, Hemingbrough.
Driffield R.D.....	Extensions to the Kilham Sewerage and Sewage Disposal Scheme to serve properties in Mill Lane, Back Lane and West End.
Holderness R.D.....	Provision of sewerage and sewage disposal facilities for parts of the village of Burton Pidsea. Provision of sewerage facilities for the hamlet of Patrington Haven.
Norton R.D.....	Provision of sewerage and sewage disposal facilities for the village of Scampston.
East Yorkshire (Wolds Area) Water Board.....	Provision of mains water supply to Swallows Cafe, Lissett.

In the case of two schemes submitted by the Bridlington Rural District Council for providing separate sewerage and sewage disposal facilities for the village of Muston and for the villages of Folkton and Flixton, the County Council, for the purposes of Section 2(2) of the Rural Water Supplies and Sewerage Act, 1944, drew the attention of the District Council to the views expressed by the County Council's Consulting Engineer that the possibility should be investigated of dealing at one central disposal works with the sewage from the three villages and possibly, at some future date, with that of Hunmanby.

The County Council undertook to make contributions under these Acts to the under-mentioned authorities in respect of schemes of sewerage and sewage disposal and water supply:

Bridlington Corporation	Provision of sewerage facilities in the Marton area of Bridlington.
Filey U.D.	Provision of sewerage facilities in the Hunmanby Gap area.
Beverley R.D.	Increased reservoir capacity at High Hunsley and South Cave (contribution considered annually). Bishop Burton, Cherry Burton and Etton Sewerage and Sewage Disposal scheme. Extension of sewerage facilities in Walkington.
Bridlington R.D.	Sewer extensions in South Sea Road and Carter Lane, Flamborough.
Driffield R.D.	The Regional Water Supply Scheme (contribution considered annually). Garton-on-the-Wolds Sewerage and Sewage Disposal Scheme.
Holderness R.D.	Easington and Roos Sewerage and Sewage Disposal Schemes.
Howden R.D.	Trunk link main from Spaldington Water Tower to Howden (contribution considered annually). Water main extensions in ten parishes in the Rural District (contribution considered annually). Water Supplies Co-ordination Scheme (contribution considered annually).
Norton R.D.	Ganton Sewerage and Sewage Disposal Scheme.
Pocklington R.D.	Market Weighton, Sancton, Shiptonthorpe, Goodmanham and Londesborough Sewerage and Sewage Disposal Scheme. Water main extension in the parish of Kirby Underdale (contribution considered annually). Water Supplies Co-ordination Scheme (contribution considered annually).
East Yorkshire (Wolds Area) Water Board	Mains water supply to properties in Sheepman Lane, Cranswick. Mains water supply to Ellerker Sands Farm and Sands Cave Farm, Ellerker. Mains Water supply to Swallows Cafe, Lissett.

LOCAL GOVERNMENT ACT, 1958

The Haltemprice and Withernsea Urban District Councils submitted applications under Section 56(1) of the Local Government Act, 1958, for contributions in respect of the financial year 1963/64 towards the cost of carrying out the West Hull and Haltemprice Joint Main Drainage Scheme and the Withernsea Main Drainage Scheme respectively. In the case of the Haltemprice Urban District Council no grant was made, but a grant of £1,500 was made to the Withernsea Urban District Council.

HOUSING

The number of houses completed during 1964 was 2,565. Of these 398 were built by the District Councils and 2,167 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 1964:

District	Houses Completed		In course of Erection	
	Council	Private Enterprise	Council	Private Enterprise
Beverley M.B.....	1,088	858	—	115
Bridlington M.B.....	838	1,781	—	89
Hedon M.B.....	144	131	—	12
Driffield U.D.....	167	350	—	18
Filey U.D.	311	350	—	48
Haltemprice U.D.	1,935	3,802	105	261
Hornsea U.D.	337	521	14	27
Norton U.D.....	263	156	20	22
Withernsea U.D.....	329	102	—	12
Beverley R.D.....	1,090	1,910	38	151
Bridlington R.D.	355	283	—	15
Derwent R.D.	511	1,363	42	120
Driffield R.D.....	326	308	4	17
Holderness R.D.	920	1 724	6	130
Howden R.D.....	585	369	72	37
Norton R.D.	410	152	6	6
Pocklington R.D.	893	629	36	24
Totals	10,502	14,789	343	1,104

Section 4. — Inspection and Supervision of Food

FOOD AND DRUGS ACT, 1955

REPORT OF THE CHIEF SAMPLING OFFICER

In previous years the County Council has been the Food and Drugs Authority for the whole of the Administrative County, but as the population of the Haltemprice Urban District Council has reached a figure in excess of 40,000, the District Council elected to become the Food and Drugs Authority for their area from 1st April, 1964. Every assistance was given to the officers of Haltemprice Urban District Council in the transfer of this function, and it is pleasing to report that close co-operation has continued.

As usual, the main duty of the Sampling Officers has been the routine sampling of a wide range of food products to ensure that they are pure and un-adulterated, are in conformity with compositional standards where these are applicable, do not contain any additive in excess of the amount permitted and that they are correctly described and labelled. In addition, several complaints from purchasers have been investigated. A summary of the samples submitted for analysis during the year, is given below:

	Satisfactory	Unsatisfactory
Beverages (including tea, coffee, minerals, beer, wine and spirits)	55	4
Cereals	3	—
Confectionery	53	—
Drugs	18	2
Fats (including butter and cheese)	23	—
Fish and meat products (including sausages) ..	111	14
Fruit and vegetable products, (fresh, canned and frozen)	18	1
Milk	290	9
Milk products	23	—
Preserves	19	—
Seasonings	13	—
Miscellaneous	51	2
Totals	677	32

Of the 32 samples reported unsatisfactory, legal proceedings were instituted in respect of 4 samples:

- (1) Channel Island Milk—12% added water—producer fined £1.
- (2) Channel Island Milk—12.5% deficient in fat—dairy company fined £5.
- (3) Beef sausages—45% meat instead of 50%—manufacturer fined £3.
- (4) Pork sausages—50% meat instead of 65%—manufacturer fined £3.

Other infringements were brought to the notice of the manufacturers and assurances obtained that every endeavour would be made to comply with the provisions of the Act in future. These infringements included:

- (1) Canned meat products and sausages—deficient in meat content;
- (2) Orange drink—containing excessive preservative;
- (3) Cut mixed peel—containing excessive copper;
- (4) Whisky—diluted with water;
- (5) Soft drink products—not properly labelled;
- (6) Two samples of milk were found deficient in fat, but samples taken direct from the cows after supervision of the milking also proved deficient. The Divisional Officer of the Ministry of Agriculture, Fisheries and Food was notified with a view to steps being taken to endeavour to improve the standards of this producer.

The average standards of the 290 milk samples were—

<i>Untreated Milk</i>	<i>Pasteurised Milk</i>	<i>Channel Island Milk</i>	<i>Sterilised Milk</i>
<i>Fat</i>	<i>Fat</i>	<i>Fat</i>	<i>Fat</i>
<i>Solids</i>	<i>Solids</i>	<i>Solids</i>	<i>Solids</i>
<i>not fat</i>	<i>not fat</i>	<i>not fat</i>	<i>not fat</i>
3.78%	8.824%	3.583%	8.654%
4.72%	9.015%	3.598%	8.721%

The Sale of Milk Regulations require milk to contain at least 3% fat and 8.5% solids not fat. The Channel Islands and South Devon Milk Regulations require at least 4% fat.

Complaints by Purchasers

- (1) Mould growth found in bottle of beer—indicating that the bottle had not been properly cleansed before being re-filled—manufacturer cautioned.
- (2) Tin of Chow Mein—when prepared by purchaser did not turn out as appetising as it appeared on the coloured pictorial illustration on the outer wrapping of the tin—The Food Standards Committee report recommends that this type of misdescription should be brought within the labelling regulations.
- (3) Ready-made Yorkshire Puddings—when taken from the packets appeared to show signs of discolouration. The Public Analyst was of the opinion that it was a natural discolouration and that the product was satisfactory.
- (4) Adexolin capsules—sold to a purchaser more than 5 years after the expiry date stated on the bottle—the capsules proved harmless but they had lost practically all the claimed vitamin "A" content. Seller cautioned.

New Regulations

During 1964, several further amending Regulations were issued or became effective and these included—

- (1) Bread and Flour Regulations—prescribe permitted ingredients for bread and flour, control labelling and advertising, and restrict claims in respect of slimming or weight reducing properties.
- (2) Meat Treatment Regulations—prohibit the treatment of raw meat with certain substances, designed to improve appearance and mask deterioration.
- (3) Milk (Special Designation) Regulations—replace the term 'Tuberculin Tested' with the special designation 'Untreated'. Ban the words 'Tuberculin Tested' or the letters 'T.T.' from appearing on milk bottle caps unless it is made clear that it is the herd that is tested and not the milk. Varies the methods of test for milk and rules governing licences.
- (4) Eggs (Liquid Pasteurisation) Regulations—require liquid eggs used in food preparations to be pasteurised and sets out procedures for pasteurisation and for sampling liquid egg.
- (5) Mineral Hydrocarbons in Food Regulations—replace, with amendments, the Mineral Oil in Food Regulations.

Slowly but certainly new regulations are being integrated within the Food and Drugs legislation, and many far reaching proposals are currently under consideration.

It is not always realised when regulations are issued spasmodically, how far control and protection is extended. Since 1958, new or amending regulations have been issued in respect of such additives in food as antioxidants, arsenic, emulsifiers and stabilisers, fluorine, lead, mineral oil and preservatives. There are now over 30 food standard orders controlling specific products in addition to the additive restrictions on all foods.

Sampling Officers are also appointed Inspectors under the Weights and Measures Acts, Fertilisers and Feeding Stuffs Act and Pharmacy and Poisons Acts, and the relationship between these functions and the Food and Drugs Act is clearly shown in a new Labelling of Food Bill which covers aspects concerned with all the Acts.

MILK AND DAIRIES REGULATIONS

Milk samples taken under these sections of the Food and Drugs Act are submitted to the Public Health Laboratory for tests for bacteria content (methylene blue test), correct and effective heat treatments (phosphatase or turbidity test), and many samples are also subjected to biological examination. At the end of the year, there were six licensed heat treatment plants and 508 Dealers' licences in force.

In addition to milk processed in Hull, York and the North and West Ridings which is sold retail in the East Riding, a large quantity of milk is pasteurised daily at the processing dairies in the County. Samples are taken regularly from each source and inspection visits made at all dairies or milk storage premises to ensure compliance with license conditions.

A summary of the samples submitted to the Public Health Laboratory during the year, together with details of samples submitted by other Authorities, is given below. Four hundred and one additional inspection visits were also made to the premises of dealers.

HEAT TREATMENT PLANTS

Samples obtained by	Number of Samples	Methylene Blue Test			Phosphatase Test	
		Satisfactory	Unsatisfactory	Tests void*	Satisfactory	Unsatisfactory
County Council	129	124	—	5	125	4
Bridlington Borough	70	61	—	9	70	—
Filey U.D.	3	3	—	—	3	—
Totals	202	188	—	14	198	4

The four phosphatase failures were all caused through temporary unforeseeable breakdowns in machinery and were quickly detected and rectified.

LICENSED DEALERS (PRE-PACKED) MILK

Grade	Number of Samples	Methylene Blue Test			Phosphatase Test		Turbidity Test	
		Satisfactory	Unsatisfactory	Test* Void	Satisfactory	Unsatisfactory	Satisfactory	Unsatisfactory
T.T. Raw † . . .	84	69	14	1	—	—	—	—
Pasteurised	306	292	1	13	305	1	—	—
Sterilised	114	—	—	—	—	—	114	—
Totals . .	504	361	15	14	305	1	114	—

PRODUCER/RETAILERS

One hundred and sixteen samples of pre-packed raw tuberculin tested milk† were taken from producer/retailers, who were licensed by the Ministry of Agriculture, Fisheries and Food, and of these samples 95 satisfied the methylene blue test, 11 were unsatisfactory and 10 were void.* One hundred and four of these samples were also submitted for biological examination, the results of which are shown below.

SCHOOL MILK SUPPLIES

Grade	Number of Samples	Methylene Blue Test			Phosphatase Test	
		Satisfactory	Unsatisfactory	Tests Void*	Satisfactory	Unsatisfactory
Pasteurised	263	249	10	4	262	—
T.T. raw†	10	10	—	—	—	—
Totals	273	250	10	4	262	—

Once again the standard of pasteurised milk has been maintained at a high level, the samples of milk failing the tests being mainly of untreated milk.

*In these cases the methylene blue test was not done owing to the atmospheric shade temperature being above 70° Fahrenheit.

†In accordance with the Milk (Special Designations) Regulations 1963, as from 1st October, 1964, the special designations "Tuberculin Tested" was replaced by the designation "Untreated".

BIOLOGICAL EXAMINATIONS

	Number of samples	Tubercle		Brucella abortus	
		Negative	Positive	Negative	Positive
Producer/Retailers	104	103	—	96	7
Schools	5	5	—	5	—
Dealers	41	38	—	34	4
Totals	150	146	—	135	11

In respect of one sample taken from producer/retailers and three from dealers the guinea pigs used for the tests died before the results could be obtained.

In addition, 42 samples of milk were taken by officers of certain County District Councils and were examined for the presence of tubercle bacilli and brucella abortus. All the samples proved negative to both tests.

The 11 samples found to be positive for brucella abortus related to 7 herds and appropriate action was taken by District Medical Officers of Health to ensure that any milk from infected animals was submitted for pasteurisation.

HOSPITAL DAIRY FARMS

Eleven samples of milk produced at the Broadgate Hospital Dairy Farm have been submitted to the methylene blue test at the request of the Ministry of Health and all were satisfactory. Five of the samples were also examined for the presence of tubercle bacilli and brucella abortus with negative results.

The majority of producers and processors are fully alive to their responsibilities and, in general, the results give an indication of the care and efficiency exercised at all stages of production, treatment and distribution.

Once again I would wish to record my thanks and appreciation to the Sampling Officers and the County Medical Officer and his staff for their co-operation and support, also to the Public Analyst, Mr. R. T. Hunter and to Dr. McCoy of the Public Health Laboratory for their ready advice and assistance at all times.

LEWIS KAYE,
Chief Inspector, Weights and Measures.

Veterinary Inspection of Dairy Herds

I am indebted to the Divisional Veterinary Officer, Ministry of Agriculture, Fisheries and Food for information about the inspections of dairy herds which were carried out during the year. He states that 814 herds were inspected involving 30,040 cattle. These figures vary from those of previous years because, unless there are reactors, herds are now submitted to the tuberculin tests in alternate years. If any herd shows the presence of reactors it is however subjected to tests at much shorter intervals.

No cases of tuberculosis have had to be dealt with under the Tuberculosis Order 1938 but eleven cows have been slaughtered as reactors. None showed tuberculous lesions 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.

TYPHOID AND PARATYPHOID FEVER

One case of paratyphoid fever and one case of typhoid were reported in 1964.

SCARLET FEVER

Sixty-two cases of this disease were notified during the past year, compared with 64 in the previous year.

DIPHTHERIA

For the sixth consecutive year there were no notifications of diphtheria.

PUERPERAL PYREXIA

Eleven women were reported during the year to be suffering from puerperal pyrexia, compared with 3 in the previous year.

OPHTHALMIA NEONATORUM

One case of ophthalmia neonatorum was notified during the year.

MENINGOCOCCAL INFECTION

Three cases were notified compared with four in the previous year.

MEASLES

The number of notifications of measles received during the year was 1,268 as compared with 3,409 in 1963.

WHOOPING COUGH

There were 169 notifications of whooping cough during 1964, compared with 206 in 1963.

ACUTE POLIOMYELITIS

One case of paralytic poliomyelitis was notified during the year.

NOTIFIABLE INFECTIOUS DISEASES - 1955 to 1964

The numbers of notifications during the last ten years of the various notifiable infectious diseases are shown in the following table:

DISEASE	1955	1956	1957	1958	1959	1960	1961	1962	1963	1964
Scarlet Fever	101	100	78	141	125	134	68	39	64	62
Whooping Cough.....	345	748	234	83	60	235	60	8	206	169
Diphtheria.....	—	—	—	2	—	—	—	—	—	—
Measles	3,761	1,000	3,156	1,499	3,549	73	4,107	741	3,409	1,268
Pneumonia	161	141	134	104	114	69	111	60	42	45
Meningococcal Infection..	4	9	5	—	2	1	2	4	4	3
Acute Poliomyelitis:										
Paralytic	13	1	1	19	1	1	8	2	—	1
Non-Paralytic	1	—	—	10	—	—	2	—	—	—
Encephalitis:										
Infective	—	—	1	1	—	—	—	1	—	—
Post-Infectious	—	—	—	2	1	—	—	—	—	—
Dysentery	192	482	198	321	471	253	259	277	44	127
Ophthalmia Neonatorum .	7	—	—	1	—	1	1	2	—	1
Puerperal Pyrexia	49	66	39	19	18	13	9	15	3	11
Smallpox	—	—	—	—	—	—	—	—	—	—
Paratyphoid Fever	6	2	26	4	—	—	1	1	3	1
Typhoid Fever	—	1	1	2	4	—	—	—	4	1
Food Poisoning	123	61	67	95	126	42	49	55	41	30
Erysipelas	30	17	22	14	11	11	9	9	9	1
Malaria	—	1	—	—	—	—	1	—	—	1
Tuberculosis:										
Pulmonary	101	79	81	38	57	52	41	41	34	38
Meninges and C.N.S. .	2	2	—	1	1	1	—	—	1	—
Other forms	18	28	19	13	11	10	8	5	9	3
Anthrax*	—	—	—	—	—	—	—	—	—	—

*Not notifiable until 1960.

TUBERCULOSIS

The consultant chest physicians, with administrative centres in Hull, Pontefract and York, and the assistant chest physicians working with them are all responsible to the Council for the preventive side of tuberculosis work and for dealing with 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 visitors.

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 during the year 22 patients were supplied with milk for varying periods.

The chest physicians have been responsible for arranging to provide B.C.G. vaccination for contacts where they consider this to be advisable, and during the year 154 persons have been vaccinated. This figure includes 42 infants vaccinated soon after birth.

Details of the B.C.G. vaccination of school children are given elsewhere in this report.

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

Anlaby	Hornsea
Barlby	Kirkella
Beverley	Market Weighton
Bridlington	Melton
Cottingham	North Ferriby
Driffeld	Norton
Everthorpe	Pocklington
(Borstal Institution)	Sherburn
Filey	Stamford Bridge
Hessle	Withernsea
Holme-upon-Spalding-Moor	York University

During the year 11,347 people attended at these sessions, among whom 5 cases of active tuberculosis were diagnosed.

The unit also visited the Brandesburton Hall Hospital, Broadgate Hospital, De la Pole Hospital and Winestead Hall Hospital.

NEW CASES AND MORTALITY

During the year, 41 primary notifications of tuberculosis were received (38 pulmonary and 3 non-pulmonary). Two other pulmonary cases also came to notice from death returns from Local Registrars, transferable deaths from the Registrar-General or posthumous notifications. The total number of new cases in the year was, therefore, 46, a decrease of 4 on the corresponding figure for the previous year.

TABLE I

Cases of Infectious Disease Notified during the year 1964

Notifiable Disease	Urban Districts	Rural Districts	Administrative County
Scarlet Fever	28	34	62
Whooping Cough	73	96	169
Diphtheria (including Membranous Croup)	—	—	—
Measles	603	665	1,268
Pneumonia	9	36	45
Meningococcal Infection	2	1	3
Acute Poliomyelitis:			
Paralytic	—	1	1
Non-paralytic	—	—	—
Encephalitis:			
Infective	—	—	—
Post-infectious	—	—	—
Dysentery	126	1	127
Ophthalmia Neonatorum ...	—	1	1
Puerperal Pyrexia	5	6	11
Smallpox	—	—	—
Paratyphoid Fevers	—	1	1
Typhoid Fever	—	1	1
Food Poisoning	27	3	30
Erysipelas	1	—	1
Malaria	—	1	1
Tuberculosis:			
Pulmonary	26	12	38
Meninges and C.N.S.	—	—	—
Other forms	1	2	3
Anthrax	—	—	—

[illegible]

TABLE III
Cases of Infectious Disease Notified
RURAL DISTRICTS

[illegible]

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 1964

DISTRICT	POPULATION		BIRTH AND DEATH RATES FROM VARIOUS CAUSES PER 1,000 OF THE POPULATION																								STILLBIRTHS		DEATHS OF CHILDREN UNDER ONE YEAR OF AGE	
	Census 1961	Estimated 1964 mid-year	Live Births				Illegitimate Live Births		Deaths				Principal Epidemic Diseases		Pulmonary Tuberculosis		Other forms of Tuberculosis		Respiratory Disease		Heart Disease		Malignant Disease							
			No.	Crude Rate	Comparability factor	Adjusted Rate	No.	Rate	No.	Crude Rate	Comparability factor	Adjusted Rate	No.	Rate	No.	Rate	No.	Rate	No.	Rate	No.	Rate	No.	Rate	No.	Rate per 1,000 total births	No.	Rate per 1,000 live births		
Administrative County	224,031	237,300	3,956	16.67	1.06	17.67	165	0.70	2,894	12.20	0.89	10.86	3	0.01	9	0.04	2	0.01	270	1.14	1,034	4.36	532	2.24	69	17.14	72	18.20		
M.B.s and U.D.s	114,086	119,950	1,960	16.34	1.08	17.65	83	0.69	1,665	13.88	0.82	11.38	2	0.02	6	0.05	1	0.01	151	1.26	600	5.00	313	2.61	38	19.02	35	17.86		
Rural Districts	109,945	117,350	1,996	17.01	1.04	17.69	82	0.70	1,229	10.47	0.97	10.16	1	0.01	3	0.03	1	0.01	119	1.01	434	3.70	219	1.87	31	15.29	37	18.54		
BUCKROSE DIVISION																														
Bridlington M.B.	26,023	26,250	373	14.21	1.24	17.62	18	0.69	496	18.90	0.65	12.29	—	—	3	0.11	—	—	36	1.37	223	8.50	91	3.47	6	15.83	13	34.85		
Driffield U.D.	6,892	6,900	126	18.26	1.04	18.99	5	0.72	125	18.12	0.57	10.33	—	—	—	—	—	—	8	1.16	46	6.67	15	2.17	4	30.77	1	7.94		
Filey U.D.	4,703	4,580	56	12.23	1.23	15.04	2	0.44	81	17.69	0.83	14.68	—	—	1	0.22	—	—	4	0.87	26	5.68	18	3.93	2	34.48	1	17.86		
Bridlington R.D.	8,814	8,950	105	11.73	1.17	13.72	6	0.67	105	11.73	0.85	9.97	—	—	—	—	—	—	7	0.78	41	4.58	16	1.79	2	18.69	2	19.05		
Driffield R.D.	10,862	10,350	189	18.26	1.06	19.36	11	1.06	122	11.79	1.04	12.26	—	—	—	—	—	—	9	0.87	41	3.96	27	2.61	3	15.63	4	21.16		
Totals	57,294	57,030	849	14.89	—	—	42	0.74	929	16.29	—	—	—	—	4	0.07	—	—	64	1.12	377	6.61	167	2.93	17	19.63	21	24.73		
HALTEMPRICE DIVISION																														
Haltemprice U.D.	42,386	47,180	784	16.62	0.99	16.45	32	0.68	495	10.49	0.95	9.97	—	—	—	—	—	—	63	1.34	148	3.14	102	2.16	13	16.31	14	17.86		
HOLDERNESSE DIVISION																														
Beverley M.B.	16,031	16,530	307	18.57	1.01	18.76	15	0.91	184	11.13	1.04	11.58	—	—	2	0.12	1	0.06	20	1.21	57	3.45	37	2.24	6	19.17	3	9.77		
Hedon M.B.	2,345	2,560	34	13.28	1.14	15.14	—	—	41	16.02	0.90	14.42	—	—	—	—	—	—	4	1.56	15	5.86	8	3.13	1	28.57	—	—		
Hornsea U.D.	5,955	6,090	106	17.41	1.22	21.24	2	0.33	94	15.44	0.70	10.81	—	—	—	—	—	—	4	0.66	32	5.25	14	2.30	1	9.35	—	—		
Withernsea U.D.	4,981	4,890	109	22.29	1.20	26.75	4	0.82	78	15.95	0.77	12.28	2	0.41	—	—	—	—	7	1.43	20	4.09	16	3.27	1	9.09	1	9.17		
Beverley R.D.	23,213	26,500	470	17.74	0.98	17.39	9	0.34	248	9.36	0.93	8.70	—	—	3	0.11	—	—	25	0.94	100	3.77	37	1.40	7	14.68	7	14.89		
Holderness R.D.	20,409	22,840	435	19.05	1.01	19.24	15	0.66	221	9.68	1.02	9.87	—	—	—	—	—	—	23	1.01	80	3.50	40	1.75	6	13.61	8	18.39		
Totals	72,934	79,410	1,461	18.40	—	—	45	0.57	866	10.91	—	—	2	0.03	5	0.06	1	0.01	83	1.05	304	3.83	152	1.91	22	14.83	19	13.00		
HOWDENSHIRE DIVISION																														
Norton U.D.	4,770	4,970	65	13.08	1.12	14.65	5	1.01	71	14.29	0.99	14.15	—	—	—	—	—	—	5	1.01	33	6.64	12	2.41	4	57.97	2	30.77		
Derwent R.D.	13,648	14,810	246	16.61	1.02	16.94	7	0.47	164	11.07	0.81	8.97	—	—	—	—	—	—	27	1.82	49	3.31	29	1.96	3	12.05	5	20.33		
Howden R.D.	12,038	12,210	198	16.22	1.06	17.19	16	1.31	131	10.73	0.99	10.62	1	0.08	—	—	—	—	8	0.66	40	3.28	28	2.29	4	19.80	5	25.25		
Norton R.D.	7,015	7,040	121	17.19	1.09	18.74	8	1.14	79	11.22	1.04	11.67	—	—	—	—	—	—	5	0.71	32	4.55	11	1.56	3	24.19	2	16.52		
Pocklington R.D.	13,946	14,650	232	15.84	1.10	17.42	10	0.68	159	10.85	1.01	10.96	—	—	—	—	—	—	15	1.02	51	3.48	31	2.12	3	12.77	4	17.24		
Totals	51,417	53,680	862	16.06	—	—	46	0.86	604	11.25	—	—	1	0.02	—	—	1	0.02	60	1.12	205	3.82	111	2.07	17	19.34	18	20.88		

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Twenty-fifth position, 100 lines per week	\$0.00001953125	Twenty-sixth position, 100 lines per week	\$0.000009765625	Twenty-seventh position, 100 lines per week	\$0.0000048828125		
Twenty-eighth position, 100 lines per week	\$0.00000244140625	Twenty-ninth position, 100 lines per week	\$0.000001220703125	Thirtieth position, 100 lines per week	\$0.0000006103515625		
Thirty-first position, 100 lines per week	\$0.00000030517578125	Thirty-second position, 100 lines per week	\$0.000000152587890625	Thirty-third position, 100 lines per week	\$0.0000000762939453125		
Thirty-fourth position, 100 lines per week	\$0.00000003814697265625	Thirty-fifth position, 100 lines per week	\$0.000000019073486328125	Thirty-sixth position, 100 lines per week	\$0.0000000095367431640625		
Thirty-seventh position, 100 lines per week	\$0.00000000476837158203125	Thirty-eighth position, 100 lines per week	\$0.000000002384185791015625	Thirty-ninth position, 100 lines per week	\$0.0000000011920928955078125		
Fortieth position, 100 lines per week	\$0.00000000059604644775390625	Forty-first position, 100 lines per week	\$0.000000000298023223876953125	Forty-second position, 100 lines per week	\$0.0000000001490116119384765625		
Forty-third position, 100 lines per week	\$0.00000000007450330246875	Forty-fourth position, 100 lines per week	\$0.000000000037251651234375	Forty-fifth position, 100 lines per week	\$0.0000000000186258256171875		
Forty-sixth position, 100 lines per week	\$0.00000000000937541268359375	Forty-seventh position, 100 lines per week	\$0.000000000004687706341796875	Forty-eighth position, 100 lines per week	\$0.0000000000023438531708984375		
Forty-ninth position, 100 lines per week	\$0.000000000001171926585373046875	Fiftieth position, 100 lines per week	\$0.000000000000585963292686953125	Fifty-first position, 100 lines per week	\$0.0000000000002929816463434765625		
Fifty-second position, 100 lines per week	\$0.0000000000001464770706840625	Fifty-third position, 100 lines per week	\$0.00000000000007323853534203125	Fifty-fourth position, 100 lines per week	\$0.000000000000036619267671015625		
Fifty-fifth position, 100 lines per week	\$0.0000000000000183096338390625	Fifty-sixth position, 100 lines per week	\$0.00000000000000915481691953125	Fifty-seventh position, 100 lines per week	\$0.000000000000004577408459765625		
Fifty-eighth position, 100 lines per week	\$0.00000000000000229495422993046875	Fifty-ninth position, 100 lines per week	\$0.000000000000001147477114965234375	Sixtieth position, 100 lines per week	\$0.0000000000000005737385574826171875		
Sixty-first position, 100 lines per week	\$0.000000000000000718197943728203125	Sixty-second position, 100 lines per week	\$0.0000000000000003590989718641015625	Sixty-third position, 100 lines per week	\$0.00000000000000017954948593205078125		
Sixty-fourth position, 100 lines per week	\$0.000000000000000045512371484375	Sixty-fifth position, 100 lines per week	\$0.0000000000000000227561857421875	Sixty-sixth position, 100 lines per week	\$0.00000000000000001137809287109375		
Sixty-seventh position, 100 lines per week	\$0.0000000000000000056945464677734375	Sixty-eighth position, 100 lines per week	\$0.00000000000000000284727323388671875	Sixty-ninth position, 100 lines per week	\$0.0000000000000000014236366169434375		
Seventieth position, 100 lines per week	\$0.000000000000000000718197943728203125	Seventy-first position, 100 lines per week	\$0.0000000000000000003590989718641015625	Seventy-second position, 100 lines per week	\$0.00000000000000000017954948593205078125		
Seventy-third position, 100 lines per week	\$0.000000000000000000045512371484375	Seventy-fourth position, 100 lines per week	\$0.0000000000000000000227561857421875	Seventy-fifth position, 100 lines per week	\$0.00000000000000000001137809287109375		
Seventy-sixth position, 100 lines per week	\$0.0000000000000000000056945464677734375	Seventy-seventh position, 100 lines per week	\$0.00000000000000000000284727323388671875	Seventy-eighth position, 100 lines per week	\$0.0000000000000000000014236366169434375		
Seventy-ninth position, 100 lines per week	\$0.000000000000000000000718197943728203125	Eightieth position, 100 lines per week	\$0.0000000000000000000003590989718641015625	Eighty-first position, 100 lines per week	\$0.00000000000000000000017954948593205078125		
Eighty-second position, 100 lines per week	\$0.000000000000000000000045512371484375	Eighty-third position, 100 lines per week	\$0.0000000000000000000000227561857421875	Eighty-fourth position, 100 lines per week	\$0.00000000000000000000001137809287109375		
Eighty-fifth position, 100 lines per week	\$0.0000000000000000000000056945464677734375	Eighty-sixth position, 100 lines per week	\$0.00000000000000000000000284727323388671875	Eighty-seventh position, 100 lines per week	\$0.0000000000000000000000014236366169434375		
Eighty-eighth position, 100 lines per week	\$0.000000000000000000000000718197943728203125	Eighty-ninth position, 100 lines per week	\$0.0000000000000000000000003590989718641015625	Ninetieth position, 100 lines per week	\$0.00000000000000000000000017954948593205078125		
Ninety-first position, 100 lines per week	\$0.000000000000000000000000045512371484375	Ninety-second position, 100 lines per week	\$0.0000000000000000000000000227561857421875	Ninety-third position, 100 lines per week	\$0.00000000000000000000000001137809287109375		
Ninety-fourth position, 100 lines per week	\$0.0000000000000000000000000056945464677734375	Ninety-fifth position, 100 lines per week	\$0.00000000000000000000000000284727323388671875	Ninety-sixth position, 100 lines per week	\$0.0000000000000000000000000014236366169434375		
Ninety-seventh position, 100 lines per week	\$0.000000000000000000000000000718197943728203125	Ninety-eighth position, 100 lines per week	\$0.0000000000000000000000000003590989718641015625	Ninety-ninth position, 100 lines per week	\$0.00000000000000000000000000017954948593205078125		
One hundred position, 100 lines per week	\$0.000000000000000000000000000045512371484375	One hundred and first position, 100 lines per week	\$0.0000000000000000000000000000227561857421875	One hundred and second position, 100 lines per week	\$0.00000000000000000000000000001137809287109375		

TABLE V
Vital Statistics of Whole District during 1964,
and previous Years

YEAR	Estimated Population	LIVE BIRTHS		NET DEATHS BELONGING TO THE DISTRICT			
				Under 1 year of age		At all ages	
		Number	Rate	Number	Rate per 1,000 Live Births	Number	Rate
1944	185,940	3,562	19.2	156	44	2,409	13.1
1945	183,450	3,109	17.0	135	43	2,396	13.1
1946	194,720	3,739	19.2	139	37	2,355	12.1
1947	200,110	3,872	19.4	155	40	2,405	12.0
1948	205,900	3,432	16.7	111	32	2,205	10.7
1949	209,343	3,308	16.1	98	30	2,498	12.2
1950	212,070	3,187	15.0	83	26	2,423	11.4
1951	212,900	3,079	14.5	87	28	2,646	12.4
1952	212,600	3,173	14.9	76	24	2,432	11.4
1953	214,000	3,219	15.0	87	27	2,582	12.1
1954	217,000	3,085	14.2	71	23	2,687	12.4
1955	217,100	2,999	13.8	71	24	2,624	12.1
1956	217,500	3,141	14.4	76	24	2,707	12.4
1957	218,500	3,280	15.0	69	21	2,657	12.2
1958	218,900	3,136	14.3	70	22	2,753	12.6
1959	221,200	3,307	15.0	59	18	2,722	12.3
1960	224,470	3,477	15.5	67	19	2,745	12.2
1961	224,510	3,573	15.9	60	17	2,938	13.1
1962	228,530	3,735	16.3	65	17	2,857	12.5
1963	232,170	3,885	16.7	81	21	2,987	12.9
1964	237,300	3,956	16.7	72	18	2,894	12.2

TABLE VI
Rainfall Returns, 1964

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 1954 to 1963
Hempholme.....	11 feet	Mr. W. F. Gilbert	inches 17·75	155	inches 26·41
Beverley	34 feet	Mr. B. T. H. Johnson..	17·35	149	25·78
North Cave	35 feet	Maj. J. H. Carver, J.P..	18·25	166	26·11
Hornsea	35 feet	Mr. J. H. D. Howlett .	17·47	146	24·91
Bridlington	60 feet	Mr. H. Ackroyd.....	19·10	164	27·90
Lowthorpe	63 feet	Mr. C. Kettlewell	16·90	152	25·37
Scampston	100 feet	Mr. F. B. Smith	18·30	209	26·08
Filey	122 feet	Mr. J. Hustwit.....	14·23	140	26·04*
Dalton Holme...	150 feet	Mr. R. C. Crossley ...	19·82	187	28·07
Birdsall.....	304 feet	Mr. B. Stead.....	20·09	166	31·62

* Average for 6 years 1958 to 1963.

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

ANNUAL REPORT
OF THE
PRINCIPAL SCHOOL MEDICAL OFFICER
FOR THE YEAR
1964

Report of the Principal School Medical Officer

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

I have the honour to submit the Annual Report on the work of the School Health Service for the year 1964.

There has been no change in either the medical or dental staff, and I am pleased to report that the full establishment of dental officers has been maintained for the first time since the war.

The introduction of a screening system to replace the routine medical examination of the intermediate group of school children has continued to function smoothly, and has been well accepted by both the teaching and medical staff. A high proportion of parents have attended with those children who require a medical examination, and more medical time has been devoted to each child.

All new entrants to school were medically examined as soon as possible after admission. At these examinations special attention was paid to each child's hearing, although it has not so far been possible to carry out a pure-tone audiometric test on each new school entrant.

Special audiometric sessions are held at various centres in the county for all children with suspected deafness, and seven pupils with some degree of deafness were referred to a Consultant Ear, Nose and Throat Surgeon for further investigation. In addition, children referred for speech therapy are tested with the pure-tone audiometer before receiving treatment.

The volume of work in the child guidance service has continued to expand. An increased number of children have received treatment, but as treatment is more time consuming than assessment and advice, there has been an increase in the waiting time before new cases can be seen at the clinic. It has not been possible to obtain

the services of a Consultant Child Psychiatrist or to appoint an Educational Psychologist and the work of the child guidance clinic has been carried on by a Senior Assistant Medical Officer and two Social Workers.

Health education talks have been given in many of the schools both as part of the normal school curriculum and at special sessions.

The report of the Principal School Dental Officer is included, together with reports on physical education and the school meals service by the respective Organisers.

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

R. WATSON,
Principal School Medical Officer.

April, 1965.

GENERAL STATISTICS

Number of Schools—Primary	182
Secondary	22
Nursery	1
Special.....	1
Number of Pupils—Primary	20,686
Secondary	13,058
Nursery	38
Special (a) From the County.....	98
(b) From other Authorities....	19
	<hr/>
	Total 33,892
	<hr/>
Number of pupils attending independent and non-maintained schools	545
	<hr/>
	TOTAL 34,444
	<hr/>
Number of pupils attending schools maintained by other Authorities	1,244

MEDICAL INSPECTIONS

The total number of pupils submitted for routine medical examinations was 8,724 and among these were found 784 defects needing treatment and 2,778 defects requiring observation. In addition to these routine inspections 292 special examinations were carried out and as a result 92 defects were found which required some form of medical treatment and 89 defects were noted for which only observation was necessary. Three thousand, seven hundred and forty-eight re-examinations were also carried out making a total of routine and special medical examinations of 12,764.

The detailed figures relating to routine medical inspections conducted during the year are shown in the table on page 82.

General Condition

The assessment of the general condition of all children examined at routine medical inspections is based on the individual opinion of each doctor. Medical Officers record the general condition of

the children when examined as either "satisfactory" or "unsatisfactory". The results over the last 9 years are shown in the following table:

	No. of pupils inspected	No. found in "unsatisfactory" condition	Percentage
1956	9,784	59	0.6
1957	8,862	18	0.2
1958	6,583	14	0.2
1959	9,627	11	0.1
1960	10,370	11	0.1
1961	9,575	6	0.06
1962	8,776	2	0.02
1963	9,251	5	0.05
1964	8,724	3	0.03

WORK OF SCHOOL NURSES

The school nurses carried out regular routine health surveys in schools and paid follow-up visits where necessary. Their work also included attendance at routine and special examinations in schools, and home visits.

The following shows the total number of visits, the number of children examined, and the number found infested.

	1963	1964
Visits to schools:		
Number of routine health survey examination sessions	593	675
Number of health survey examinations carried out	59,868	62,466
Number of children found infested.....	408	567
Number of follow-up visits.....	65	121
Visits to homes:		
Number of homes visited.....	984	1,005
Number of children examined for—		
Uncleanliness	293	488
Minor ailments	146	113
General condition.....	94	52
Other reasons.....	693	614
TOTAL	1,226	1,267

The following table gives particulars of the inspections carried out over the last 10 years:

Year	Number of examinations	Number of children infested	School population	Percentage of school population infested
1955	77,410	607	30,146	2.0
1956	77,185	469	30,823	1.5
1957	71,095	551	31,071	1.7
1958	71,802	506	31,180	1.6
1959	70,555	531	33,577	1.6
1960	67,641	362	32,786	1.1
1961	67,474	429	33,093	1.3
1962	56,797	356	33,608	1.1
1963	59,868	408	33,635	1.2
1964	62,466	567	33,899*	1.7

*This figure only relates to children attending East Riding maintained Schools.

VISUAL DEFECTS AND EXTERNAL EYE DISEASES

A total of 393 children were found at periodic and special medical inspections in schools to be in need of treatment for eye defects. Of these 320 had defective vision, 65 were suffering from squint and 8 had other defects. In addition, 1,009 children were under observation compared with 881 in the previous year, and of these, 866 were under observation for defective vision, 125 for squint and 18 for other defects.

Refraction clinics were held at 13 centres in the County, these were staffed by a medical officer appointed by the Regional Hospital Board. The number of individual children seen at these clinics was 1,329 and of these 325 were new cases and 1,004 were re-examinations. From the new cases, 221, i.e. 68%, were recommended for spectacles and from the re-examinations 154, i.e. 15%, were found to need their spectacles renewed. Parents took all prescriptions for spectacles to the optician of their choice.

EAR, NOSE AND THROAT DEFECTS AND DEFECTIVE HEARING

The following table gives the number of children who received operative treatment for ear, nose and throat defects during 1964:

Diseases of the ear	—
Adenoids and chronic tonsillitis . .	259
Other nose and throat complaints	4
Total	263

In addition 38 children received other forms of treatment.

Although it has not yet been possible to carry out routine audiometric testing of all new entrants to schools, special audiometric clinics have been held regularly throughout the County, by one of the school medical officers. Ninety-one children suspected of having deafness, were examined by the pure-tone audiometer and 7 cases in which some degree of deafness was discovered were referred through their family doctor to the Ear, Nose and Throat Surgeon.

B.C.G. VACCINATION

B.C.G. vaccination against tuberculosis is available to school children over the age of 13 years and in certain instances it may be offered to children over 10 years of age. It is also available to students at University and Training Colleges.

Vaccination was offered to 3,150 children of whom 2,409 (i.e. 76.5%) accepted. A total of 2,276 children were skin tested and of these 1,839 (i.e. 80.1%) showed a negative result and therefore needed vaccination. Arrangements were made as far as possible for all children who had a positive skin test to be X-rayed and for this facility to be extended to members of their families.

The following table gives details of B.C.G. vaccinations carried out during the past nine years:

Year	No. of school children Mantoux tested	Positive reactors	Negative reactors	Number vaccinated
1956	1,101	321 (29.2%)	776	767
1957	679	182 (26.8%)	497	494
1958	1,123	309 (26.0%)	832	767
1959	1,723	292 (16.9%)	1,423	1,408
1960	2,429	538 (22.1%)	1,876	1,848
1961	1,400	281 (20.0%)	1,085	1,085
1962	2,608	735 (28.2%)	1,844	1,767
1963	2,634	586 (22.2%)	1,938	1,907
1964	2,276	368 (16.2%)	1,839	1,838

ORTHOPAEDIC AND POSTURAL DEFECTS

As the needs of the children in the Bridlington area requiring orthopaedic treatment can best be served by referring them to the Out-Patients Department at the Lloyd Hospital, the Bridlington Orthopaedic Clinic has been closed. Thirty-six East Riding children attended other Authorities' clinics at Malton, Scarborough and York.

Twenty-seven children were admitted to the Adela Shaw Orthopaedic Hospital, Kirbymoorside.

MINOR AILMENTS

Minor ailment sessions are mainly conducted by the school nurses who refer any case of a more serious nature to the child's family doctor or to the school medical officer.

The table below shows the number of children attending minor ailment clinics and the various types of defects which were treated together with the number of children receiving home visits by the school nurses:

Defects	1963			1964		
	No. of children		Total	No. of children		Total
	attending clinics	receiving home visits		attending clinics	receiving home visits	
Ringworm (head)....	—	—	—	—	—	—
Ringworm (body)....	—	—	—	—	—	—
Scabies	—	—	—	7	—	7
Impetigo	22	2	24	13	—	13
Other skin diseases...	440	7	447	208	3	211
Minor eye defects....	120	3	123	73	—	73
Minor ear defects and deafness	99	6	105	64	—	64
Minor injuries, bruises, etc.....	1,249	28	1,277	682	—	682
Totals ...	1,930	46	1,976	1,047	3	1,050

The number of children attending minor ailment clinics continued to fall; attendances were 2,869 compared with 4,100 in 1963.

INFECTIOUS DISEASE IN SCHOOLS

An outbreak of infectious disease occurred in an infant school which is worthy of special comment. Early in March the absentee rate in this school rose very rapidly over the course of a few days until forty children out of one hundred were away from school, and most of those remaining in school were being continuously disturbed by attacks of coughing. At first sight the outbreak resembled whooping cough, but it was decided to carry out bacteriological throat examinations. All specimens were negative for the whooping cough bacillus, but were positive for beta-haemolytic streptococci. This information was transmitted to the family practitioners who prescribed the appropriate antibiotic and the symptoms cleared up rapidly in a few days.

This small outbreak is noteworthy in that it presented itself clinically as whooping cough, but it would appear that the symptoms were due to a streptococcal throat infection. It therefore leads one to ask whether, if all outbreaks in schools where coughing is the major symptom were investigated bacteriologically, how often a streptococcal infection would be found as the causal organism.

A number of outbreaks of gastro-intestinal symptoms in school children have been notified. This illness usually lasted one to two days and in most cases was characterised by vomiting either with or without diarrhoea. In one school in particular, over a period of two to three months a large number of children and staff were absent suffering from this condition, which in the absence of any positive

bacteriological findings, was diagnosed as epidemic or winter vomiting, presumably due to a virus infection.

Chicken pox, measles, and mumps accounted for the great majority of the other infectious conditions occurring among the school children.

ETTON PASTURE RESIDENTIAL SCHOOL

In the case of illness, all children in the school are attended by a general practitioner who also pays regular visits to the School. In addition, a weekly clinic is held by the school nurse so that all minor ailments or conditions requiring dressings or treatment are seen regularly. Between the end of January and mid March, twenty cases of mumps occurred among the pupils, none of these proved to be serious and the condition only caused minor discomfort and inconvenience. Apart from the usual minor illnesses and accidents, this is the only outbreak of illness which has occurred among the pupils.

SPEECH THERAPY

One full-time speech therapist and one part-time therapist resigned in July. In September, an additional part-time speech therapist was appointed, this brought the strength of the service up to 2.4 as compared with an establishment of 3 full-time therapists. At the end of the year, clinics were held regularly in 15 centres in the County, see page 81. Fewer visits to individual children in their homes were made, due to the shortage of staff.

A total of 228 children were referred for speech therapy and 186 children were being treated at the close of the year, and 126 children were on the waiting list. The number of children referred for speech therapy was slightly more than last year, but by continuing to see children immediately on referral in order to assess the immediate need for speech therapy, the waiting list was kept within reasonable proportions.

The following table shows the various types of speech defects for which treatment has been given:

Type of speech defect	No. of children receiving treatment at end of the year	No. of children discharged during year
Dyslalia	139	158
Dysphasia	2	2
Dysarthria	2	3
Cleft Palate	3	4
Stammer	31	36
Other defects	9	2
Totals	186	205

In addition 89 children were considered not to require treatment after an initial examination.

HEALTH EDUCATION

An increasing amount of health education is now taking place in schools throughout the county. Some of these sessions have been taken by medical officers and others by school nurses as part of the training for the Duke of Edinburgh's Awards.

In other schools special courses on health education subjects have been held with the object of making the children more aware of health hazards and more capable of taking their place within the community when they finally leave school. These sessions have included a wide variety of subjects, among which have been 'Smoking and Health', 'Control of Pests', 'Mothercraft', 'Venereal Disease', 'Menstruation', 'First Aid and General Hygiene', etc.

The Authority has also purchased two Manikin models for demonstrating mouth to mouth breathing in schools. These are available on request by head teachers so that as many pupils as possible in schools throughout the county can be taught "The Kiss of Life". It is hoped that in due course all secondary school children will receive instruction in this life-saving procedure.

PROVISION OF MILK AND MEALS

The School Meals Service continues to expand and the average daily number of mid-day meals served to pupils has risen to 19,458, this represents 62.59% of the pupils, compared with 60.31% in 1963.

The number of pupils taking school milk in maintained schools was 24,581, this is 78.47% of those in attendance; a small increase on the previous year. In primary schools the increased consumption of milk corresponded to the number of pupils in attendance and the percentage of 92.27 was maintained. In secondary schools there was a small increase in the number of pupils drinking milk, and the percentage rose from 56.71 in 1963, to 58.16. Milk was also supplied to 1,795 pupils in non-maintained schools.

All milk supplies were pasteurised except in two small schools with a total of 39 pupils, these schools were supplied with tuberculin-tested milk.

REPORT OF THE PRINCIPAL SCHOOL DENTAL OFFICER

A full establishment of dental officers for a complete year has made it possible to reassess the needs of the County with regard to staffing. Until the year under review, large areas of the County had been without a dental officer and there was little doubt that the areas apportioned to dental officers would have to be redrawn to meet the local conditions. Stability will, however, be hard to reach because it is apparent that when a school, which for some reason has not been visited for a number of years, receives a second visit from a dental officer, within a year, the dental acceptance rate is boosted. This, therefore, means a longer spell at a school and further delay before the next school is reached. However, despite a certain amount of redeployment of dental officers, some northern and western parts of the county are still not fully covered, and it would seem that an additional dental officer will eventually be required in order to cover the county's needs adequately.

A Dental Auxiliary took up her appointment in September and it has been possible to keep her mainly occupied with clinical work. The Hygienist's task has been eased by the Auxiliary taking over some of the dental health education work. Dental Auxiliaries are trained to carry out certain dental procedures of a conservative nature. They work under the supervision of a dental officer who also prescribes the treatment to be carried out. As only four months have elapsed since her appointment there has not been adequate time to show how effective a contribution she is making to the problem of dental caries.

The surgery at the new Anlaby Clinic has been used four days weekly. The second surgery was completed by the end of the year and will be used primarily by the Dental Auxiliary. A new mobile unit came into service in November and this has been introduced to the western part of the county. These new surgeries have helped to alleviate the accommodation difficulty.

Transport was provided to convey children from schools in the Pocklington Rural District to the Pocklington clinic. This arrangement has worked extremely well and it is expected that further provision will be made in 1965 for the transport of children from other village schools to the larger centres. The closure of small village schools and the transfer of the pupils to other schools for educational purposes has also made the provision of dental treatment easier. One unfortunate aspect in the treatment of children who are transported to clinics is that it is more difficult to discuss dental matters with the parents. Often a talk with the parent can facilitate a particular line of treatment, but the difficulties attendant on some parents visiting the clinic appear to be insurmountable.

The figures for the year's work represent that carried out by a full establishment of dental officers. It is to be noted that out of 33,899 children in the county, 24,829 were inspected and that there is, therefore, still some way to go before all children have the opportunity of being inspected each year.

An indication of the degree of conservation achieved is the ratio of fillings in permanent teeth to extractions in permanent teeth (extractions for orthodontic purposes not included). This ratio was 5 : 1 in 1963 and 7 : 1 in 1964, a definite improvement.

The number of extractions in both permanent and temporary teeth shows a drop from the previous year and this despite the much larger number of children inspected and treated. The number of emergency cases recorded showed a reduction of 116 on the previous year's figures. The number of fillings in temporary teeth has not risen as much as one would have expected considering the increased number of young children treated and even allowing for a minority of parents not accepting fillings in temporary teeth. It would seem that the need for fillings in temporary teeth must be far from being met.

The number of orthodontic cases, as was to be expected, rose considerably. Shortage of staff has in previous years been a limiting factor in the amount of orthodontics undertaken. Parents are showing a greater awareness of the possibilities of this aspect of dentistry and more requests are coming from them. A number of more complex cases have been referred to a Consultant Orthodontist. A model scheme for the School Dental Service is described in the *Health of the School Child, 1962/63*. The place of orthodontics is fully discussed and the value to an authority in having an orthodontist on the staff of the School Health Service is stressed.

The Dental Hygienist has maintained her satisfactory level of work and repeated her visits to the schools. Films have been shown at a number of schools although projectors are not always easy to come by and facilities at some of the smaller schools make the showing of films a difficult undertaking. However, films were shown at twenty-five county primary schools and seventeen secondary schools. The Duke of Edinburgh Award classes have received special visits.

There is still, I regret to say, no more than an infinitesimal amount of fluoride in the water supply.

Treatment arrangements for the Etton Pasture School children continued as before. The high degree of co-operation and interest in the child's dental requirements which has always been experienced there, has also been much appreciated.

It was necessary for a small number of children to have their teeth extracted under hospital conditions. My thanks are due to the hospital authorities concerned, and indeed to all who have contributed in any way to the dental well-being of the children.

G. R. SMITH,
Principal School Dental Officer.

CHILD GUIDANCE

There has been no change in the clinic staff. A medical officer continued to hold regular sessions at the Clinic with the help of a full-time social worker and a part-time psychiatric social worker. It has not been possible to fill the vacant post of Educational Psychologist.

A total of 233 clinic sessions were held during the year and the social workers made 102 visits to schools and 275 home visits. One hundred and thirty-eight children were referred to the clinic from the following sources:

Educational	34
Medical	77
Parent	13
Social Agency	14
Total	138

The following table shows the number of interviews carried out by the clinic staff:

Diagnostic interviews	Treatment interviews	Parent interviews	Total No. interviews
96	366	441	903

The following table is a summary of the major cases examined by the clinic staff:

Habit Disorders	36
Nervous Disorders	10
Behaviour Disorders	72
Educational	20
Total	138

In addition to the cases referred in 1964, a total of 65 cases were carried forward from 1963, making a total case load of 203 children.

Out of this total case load, 55 children attended regularly for treatment and 120 cases were closed during the year. A summary of these is given below. At the end of the year 43 children were being seen by the clinic staff and 40 cases were on the waiting list.

Cases Closed

Improved or completed (advice or treatment)	59
Placement (Special School, Childrens' Homes, etc.) ...	7
Not followed up (lack of co-operation, parents refused treatment, etc.)	45
Transfer to other area or agency	9
Total	120

Cases seen at the clinic for the first time were, after diagnosis, placed into the following broad categories according to the type of problem and further clinic work that they would require:

Advisory	School problems	Test only	Not followed up
62	5	10	40

ENURETIC CLINIC

A total of 29 cases were referred to this clinic mainly from infant welfare centres or by medical officers following school medical inspections. Cases were also referred by general practitioners and consultant paediatricians. Thirty-three cases were brought forward from the previous year, making a total case load of 62 children.

No. of attendances made.....	163
No. of cases completed.....	35
No. of uncompleted cases.....	21
No. of children on the waiting list.....	3
No. of children who failed appointments.....	3

HANDICAPPED PUPILS

Under Section 34 of the Education Act, 1944, it is the duty of Local Education Authorities to ascertain which children in their areas require special educational treatment. These children are usually reported to the school medical officer by the head teacher or picked out at medical inspections. The total number of children ascertained as handicapped during the year was 67 and the following table shows the results of these examinations and the various recommendations.

Category	Recommended for education in special schools	Recommended for education in prim./sec. schools
Blind	—	—
Partially Sighted	1	—
Deaf	1	1
Partially Hearing	4	4
Educationally Sub-normal.....	22	17*
Epileptic	—	2
Maladjusted	3	—
Physically Handicapped.....	2	6
Speech.....	—	—
Delicate	2	2
Totals	35	32

*Included in this figure are 10 children who were recommended for admission to a special class for educationally sub-normal children in an ordinary school.

The total number of children on the Register of Handicapped Pupils at the 31st December, 1964, is shown in the following table:

Category	Recommended for education in special schools			Not recommended for education in special schools		Total	
	Attending special schools	Attending prim./sec. schools	Not attending school	Attending prim./sec. schools	Not attending school	Boys	Girls
Blind	2	—	—	—	—	—	2
Partially-sighted	8	3	—	1	—	10	2
Deaf	6	1	—	1	—	6	2
Partially hearing	14	—	1	11	—	13	13
Educationally sub-normal	96	55	2	101	—	141	113
Epileptic	2	2	—	6	—	4	6
Maladjusted	7	3	—	1	—	9	2
Physically handicapped	18	1	4	33	2	25	33
Delicate	9	9	—	16	2	21	15

Details of handicapped pupils admitted to and discharged from special schools during the year are as follows:

Category	Special School	Maintained 31.12.63	Admitted during 1964	Discharged during 1964	Maintained 31.12.64
Blind and partially- sighted	Exhall Grange, Coventry	1	—	—	1
	Wold Road, Hull.....	4	2	—	6
	Henshaws, Manchester	1	—	1	—
	Sheffield School for the Blind	1	—	—	1
	Condover Hall, Shrewsbury	1	—	—	1
	St. Vincents School, Liverpool.....	1	—	—	1
Deaf and partially- hearing	St. Johns, Boston Spa..	2	—	—	2
	Yorks. Res. School, Doncaster	7	3	—	10
	Sutton School, Hull....	4	1	1	4
	Burwood Park, Walton-on-Thames	1	1	—	2
	Elmete Hall, Leeds	—	2	—	2
Educationally sub-normal	Etton Pasture, Beverley	85	21	12	94
	Fulford Day School, York.....	2	—	1	1
	Teskey King School, Hull	1	—	—	1
	Aldwark Manor	1	—	1	—
Epileptic	Sedgwick House, Kendal	3	—	2	1
	Colthurst House, Cheshire	1	1	1	1
Maladjusted	Elmfield School Stourbridge	1	—	1	—
	Etton Pasture, Beverley	4	2	2	4
	Wm. Hy. Smith School, Brighouse	1	—	—	1
	St. Peters, Horbury ...	1	—	—	1
	Wennington Hall.....	—	1	—	1
Physical	Ld. Mayor Treloar College, Froyle	1	—	—	1
	Frederick Holmes School, Hull	9	1	2	8
	Welburn Hall, Kirby- moorside	4	1	—	5
	Bradstock Lockett, Southport	2	—	1	1
	Northfield Open Air, York	2	—	1	1
	Hospital School, Southport	1	—	—	1
	Halliwick Sp. School, London	—	1	—	1
Delicate	Ingleborough Hall	1	1	—	2
	Netherside Hall, Skipton	1	—	—	1
	Northfield Open Air, York	2	—	—	2
	Suntrap School, Hayling Island	1	—	1	—
	Welburn Hall, Kirby- moorside.....	2	1	—	3
	Convalescent Home School, West Kirby..	1	—	1	—
	Redworth Hall, Durham	1	—	—	1

The number of children attending special schools during the past nine years is as follows:

	Blind and partially- sighted	Deaf and partially hearing	Educ. Sub- normal	Epileptic	Malad- justed	Physically handi- capped	Delicate
1956	4	19	62	1	1	10	7
1957	5	22	74	—	1	12	3
1958	7	19	90	—	1	15	5
1959	6	23	85	1	2	15	3
1960	7	19	84	1	2	12	5
1961	6	17	92	1	3	13	4
1962	8	15	87	1	6	16	8
1963	9	14	89	4	7	19	9
1964	10	20	96	2	7	18	9

SPECIAL ASCERTAINMENT EXAMINATION

The school medical officers specially examined 107 children who were suspected of being educationally sub-normal. The results of these examinations are shown in the following table:

Recommended for notification to the Local Health Authority under Section 57(4)	21
Recommended for admission to a residential school for educationally sub-normal children.....	22
Recommended for admission to a day special class in an ordinary primary school.....	10
Recommended to remain at ordinary school.....	7
Recommended for remedial teaching.....	9
Not educationally sub-normal.....	22
Decision deferred.....	3
Re-examinations	13
Total	107

PHYSICAL EDUCATION

The exceptionally dry summer of the past year provided wonderful conditions for all our schools to indulge in a full and satisfying programme of activities in the open air. In addition to physical education lessons, athletics, cricket, football, hockey, rounders and folk dancing were enjoyed at school, inter-school and county level. A significant development in the school programme has been outdoor activities including camping, sailing, canoeing, fell walking, rock climbing and youth hostelling. These pursuits, usually carried out during school holidays and at weekends, provide a most useful

introduction to healthy leisure-time activities which can be practised when children leave school. These are often carried over into youth clubs and form part of the Duke of Edinburgh's Award Scheme which is well supported in the East Riding. Our youth clubs make full use of the excellent indoor and outdoor sports facilities at our secondary schools.

The importance of teaching children to swim has now become a national talking point and the Committee was able to increase the number of children receiving swimming instruction during the past year. Three of our schools have raised money, which together with grants from the Committee, have enabled them to build a swimming pool in each of their school grounds. This is, of course, the ideal arrangement for teaching children to swim while still at school and already there has been a marked increase in the number of swimmers at these schools. A few more such pools are in the planning stage.

Now that all children of secondary school age are accommodated in secondary schools, new primary schools are being built with better facilities for physical education in the shape of school halls and school playing fields. These are proving a great stimulus to the work, especially in country areas where facilities were sometimes poor. Children who now transfer from a small, old country school to a larger, new school, find a new world opening out for them, especially in team games where, for the first time, they will be able to belong to a team consisting of children of roughly the same age as themselves.

HYGIENE OF SCHOOL PREMISES

Eighty-one reports on the sanitary conditions of schools have been made by the Medical Officers, and any defects have been brought to the notice of the Chief Education Officer.

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

A total of 167 candidates for admission to training colleges and 24 entrants to the teaching profession were examined by the medical staff of the school health service.

CO-OPERATION WITH TEACHERS, SCHOOL WELFARE OFFICERS AND VOLUNTARY BODIES

I should like to thank all teaching staff in schools for their co-operation in all their work concerned with medical and dental inspections. I should also like to record my appreciation of the co-operation and assistance received from the school welfare department.

CLINICS

At the end of the year the following clinics were being held:

Type of clinic	Location	Frequency of sessions
A. Minor Ailment and other non-specialist examinations and treatment	Anlaby Clinic.....	2 sessions weekly
	Beverley School Clinic, Lord Roberts Road	5 sessions weekly
	Beverley Longcroft C.S. School	2 sessions weekly
	Bridlington School Clinic, Oxford Street	5 sessions weekly
	Cottingham Clinic	2 sessions weekly
	Etton Pasture (E.S.N.) School	2 sessions weekly
	Hessle C.E. Infants School	2 sessions weekly
	Hessle, Penshurst School	2 sessions weekly
	Hornsea C.S. School	2 sessions weekly
	South Holderness C.S. School	2 sessions weekly
	South Hunsley C.S. School	As required
	Withernsea High School	As required
B. Dental *	Anlaby Dental Clinic	9 sessions weekly
	Beverley Dental Clinic	10 sessions weekly
	Bridlington Dental Clinic	10 sessions weekly
	Pocklington Dental Clinic	4 sessions weekly
	Withernsea Dental Clinic	As required
C. Ophthalmic	Anlaby Clinic	3 sessions every 7 weeks
	Barlby I.W.C.	2 sessions every 6 weeks
	Beverley, Lord Roberts Road	4 sessions every 3 weeks
	Bridlington School Clinic, Oxford Street	2 sessions every 2 weeks
	Driffeld I.W.C.	2 sessions every 8 weeks
	Fulford C.S. School	2 sessions every 5 weeks
	Hessle, Penshurst School	3 sessions every 7 weeks
	Howden C.S. School	2 sessions every 12 weeks
	Market Weighton C.S. School	2 sessions every 10 weeks
	Norton C.S. School	2 sessions every 6 weeks
	Pocklington School Clinic	2 sessions every 8 weeks
	South Holderness C.S. School	2 sessions every 10 weeks
	Withernsea High School	2 sessions every 8 weeks

*In addition six mobile clinics were in use.

Type of clinic	Location	Frequency of sessions
D. Speech therapy	Anlaby Clinic	1 session weekly
	Barlby C.S. School	1 session weekly
	Beverley Clinic	2 sessions weekly
	Bridlington, Hilderthorpe Infants School	2 sessions weekly
	Driffeld I.W.C.	1 session weekly
	Fulford C.S. School	1 session weekly
	Hessle C.E. Junior School	1 session weekly
	Hessle Penshurst School	1 session weekly
	Hornsea County Library	1 session weekly
	Longcroft C.S. School	1 session weekly
	Market Weighton C.S. School	1 session weekly
	Norton C.S. School	2 sessions weekly
	Pocklington C.P. School	1 session weekly
	Withernsea High School	1 session weekly
	South Hunsley C.S. School	1 session weekly
E. Ultra Violet light	Beverley School Clinic, Lord Roberts Road	As required
F. Enuretic	Child Guidance Clinic	1 session weekly

MEDICAL INSPECTION RETURNS

YEAR ENDED 31ST DECEMBER, 1964

MEDICAL INSPECTION OF PUPILS ATTENDING MAINTAINED AND ASSISTED PRIMARY AND SECONDARY SCHOOLS (INCLUDING NURSERY AND SPECIAL SCHOOLS)

PERIODIC MEDICAL INSPECTIONS

Age groups inspected (by year of birth)	Number of pupils inspected	Physical condition of pupils inspected		No. of pupils screened but not examined
		Satisfactory	Unsatisfactory	
(1)	(2)	(3)	(4)	(5)
1960 and later	48	48	—	—
1959	1,907	1,907	—	—
1958	1,252	1,251	1	—
1957	834	833	1	—
1956	74	74	—	—
1955	45	45	—	—
1954	1,611	1,610	1	424
1953	372	372	—	152
1952	134	134	—	79
1951	32	32	—	—
1950	1,978	1,978	—	325
1949 and earlier	437	437	—	94
Totals.....	8,724	8,721	3	1,074

Percentage of total inspected found to be unsatisfactory—0.03%.

PUPILS FOUND TO REQUIRE TREATMENT AT PERIODIC MEDICAL INSPECTIONS

(excluding dental diseases and infestation with vermin)

Age Groups Inspected (By year of Birth)	For defective vision (excluding squint)	For other conditions	Total individual pupils
(1)	(2)	(3)	(4)
1960 and later	—	2	2
1959	54	141	180
1958	21	89	97
1957	23	72	90
1956	4	5	9
1955	1	2	3
1954	65	66	124
1953	22	17	33
1952	10	3	12
1951	1	1	2
1950	89	62	141
1949 and earlier	30	4	34
Totals	320	464	727

OTHER INSPECTIONS

Number of special inspections.....	292
Number of re-inspections.....	3,748
Total.....	<u>4,040</u>

INFESTATION WITH VERMIN

(a) Total number of individual examinations of pupils in schools by the school nurses or other authorised persons.....	61,785
(b) Total number of individual pupils found to be infested.....	567
(c) Number of individual pupils in respect of whom cleansing notices were issued (Section 54 (2), Education Act, 1944).....	—
(d) Number of individual pupils in respect of whom cleansing orders were issued (Section 54 (3), Education Act, 1944).....	—

DEFECTS FOUND BY MEDICAL INSPECTION
DURING THE YEAR

PERIODIC INSPECTIONS

N.B.—The symbol 'T' indicates need for treatment and 'O' indicates need for observation.

Defect or Disease	Periodic Inspections							
	Entrants		Leavers		Others		Total	
	(T)	(O)	(T)	(O)	(T)	(O)	(T)	(O)
Skin	2	19	9	20	5	20	16	59
Eyes—								
a. Vision	82	279	120	275	118	312	320	866
b. Squint	52	75	1	9	12	41	65	125
c. Other	3	5	—	7	5	6	8	18
Ears—								
a. Hearing	50	103	12	14	28	42	90	159
b. Otitis Media	6	41	1	2	4	7	11	50
c. Other	1	4	2	—	1	2	4	6
Nose and Throat	49	283	4	33	30	101	83	417
Speech	32	56	5	1	22	10	59	67
Lymphatic Glands	2	92	—	5	2	31	4	128
Heart	6	40	5	10	3	21	14	71
Lungs	3	78	1	25	2	56	6	159
Developmental—								
a. Hernia	1	14	—	—	1	3	2	17
b. Other	3	57	4	12	2	38	9	107
Orthopaedic—								
a. Posture	1	12	1	6	—	11	2	29
b. Feet	2	28	1	7	2	19	5	54
c. Other	2	26	3	24	4	18	9	68
Nervous System—								
a. Epilepsy	1	8	2	5	2	7	5	20
b. Other	—	3	—	3	1	5	1	11
Psychological—								
a. Development	4	22	2	9	2	24	8	55
b. Stability	15	110	2	11	19	68	36	189
Abdomen	5	20	1	13	6	8	12	41
Other	3	20	10	15	2	27	15	62

SPECIAL AND RE-INSPECTIONS

Defect or Disease	Special Inspections		Re-Inspections	
	(T)	(O)	(T)	(O)
Skin	17	8	—	27
Eyes—				
a. Vision	31	50	149	943
b. Squint	—	5	14	95
c. Other	1	—	1	9
Ears—				
a. Hearing	11	7	39	67
b. Otitis Media	—	2	3	6
c. Other	—	—	—	—
Nose and Throat	4	2	20	160
Speech	2	—	22	52
Lymphatic Glands	—	—	3	30
Heart	1	4	3	60
Lungs	1	—	2	100
Developmental—				
a. Hernia	1	—	3	4
b. Other	1	3	2	26
Orthopaedic—				
a. Posture	2	—	—	19
b. Feet	4	2	2	33
c. Other	2	2	—	55
Nervous System—				
a. Epilepsy	1	—	—	17
b. Other	1	—	1	17
Psychological—				
a. Development	2	2	6	29
b. Stability	5	2	20	94
Abdomen	—	—	3	9
Other	5	—	6	39

TREATMENT OF PUPILS ATTENDING MAINTAINED AND
ASSISTED PRIMARY AND SECONDARY SCHOOLS
(INCLUDING NURSERY AND SPECIAL SCHOOLS)

EYE DISEASES, DEFECTIVE VISION AND SQUINT

	Number of cases known to have been dealt with
External and other, excluding errors of refraction and squint . . .	73
Errors of refraction (including squint)	1,329
Total	1,402
Number of pupils for whom spectacles were prescribed	375

DISEASES AND DEFECTS OF EAR, NOSE AND THROAT

	Number of cases known to have been dealt with
Received operative treatment—	
(a) For diseases of the ear	—
(b) For adenoids and chronic tonsillitis	259
(c) For other nose and throat conditions	4
Received other forms of treatment	38
Total	301
Total number of pupils in schools who are known to have been provided with hearing aids—	
(a) in 1964	3
(b) in previous years	3

ORTHOPAEDIC AND POSTURAL DEFECTS

	Number of cases known to have been treated
(a) Pupils treated at clinics or out-patient departments	36
(b) Pupils treated at school for postural defects	—
Total	36

DISEASES OF THE SKIN (excluding uncleanliness)

	Number of cases known to have been treated
Ringworm—	
(a) Scalp	—
(b) Body	—
Scabies	7
Impetigo	13
Other skin diseases	211
Total	231

CHILD GUIDANCE TREATMENT

	Number of cases known to have been treated
Pupils treated at Child Guidance Clinics.....	55

SPEECH THERAPY

	Number of cases known to have been treated
Pupils treated by speech therapists.....	391

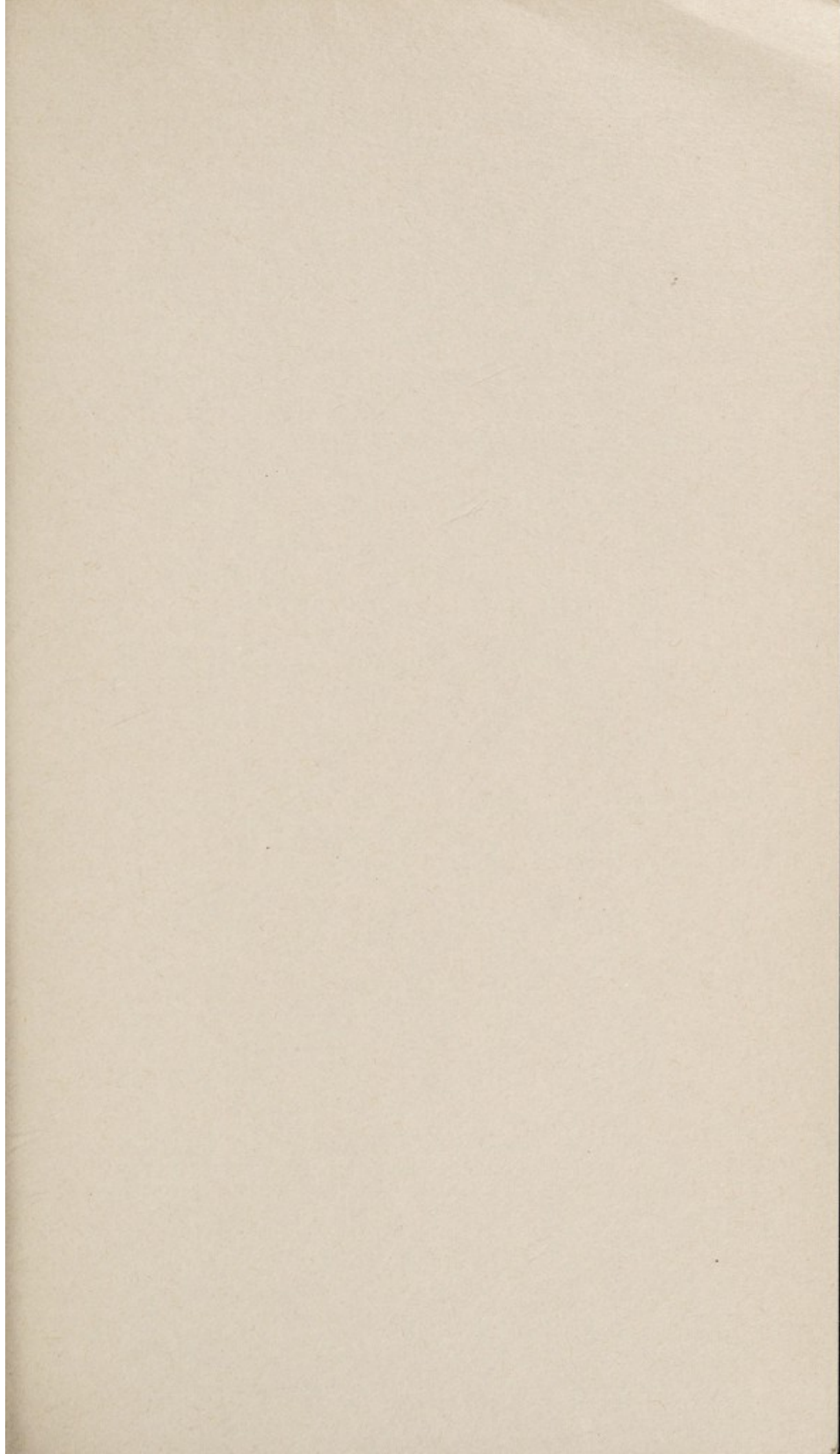
OTHER TREATMENT GIVEN

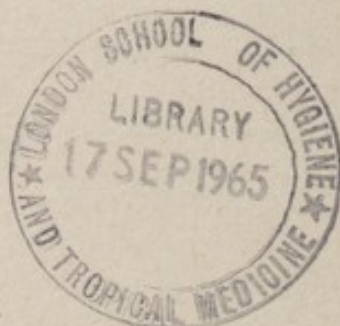
	Number of cases known to have been dealt with
(a) Pupils with minor ailments.....	1,047
(b) Pupils who received convalescent treatment under School Health Service arrangements.....	—
(c) Pupils who received B.C.G. vaccination.....	1,838
(d) Other than (a), (b) and (c) above.....	—
Total	<u>2,885</u>

DENTAL INSPECTION AND TREATMENT CARRIED OUT BY THE AUTHORITY

(1) Number of pupils inspected by the Authority's Dental Officers:			
(a) At periodic inspections	24,829		
(b) As specials	310		
	—	Total	25,139
(2) Number found to require treatment.....			14,986
(3) Number offered treatment.....			12,673
(4) Number actually treated.....			6,441
(5) Number of attendances made by pupils for treatment, excluding those recorded at 13(a).....			10,867
(6) Half-days devoted to:—			
(a) Periodic (school) inspection.....	223		
(b) Treatment.....	2,794		
	—	Total	3,017
(7) Fillings:—			
(a) Permanent teeth.....	10,190		
(b) Temporary teeth	1,811		
	—	Total	12,001
(8) Number of teeth filled:—			
(a) Permanent teeth.....	8,683		
(b) Temporary teeth	1,707		
	—	Total	10,390

(9) Extractions:—			
(a) Permanent teeth.....	1,438		
(b) Temporary teeth	1,502		
	<u> </u>	Total	2,940
(10) Administration of general anaesthetics for extraction.....			1,528
(11) Number of pupils supplied with artificial teeth.....			27
(12) Other operations:—			
(a) Crowns	6		
(b) Inlays	6		
(c) Other treatment	2,008		
	<u> </u>	Total	2,020
(13) Orthodontics:—			
(a) Number of attendances made by pupils for orthodontic treatment			852
(b) Half days devoted to orthodontic treatment.....			99
(c) Cases commenced during the year.....			94
(d) Cases brought forward from the previous year			62
(e) Cases completed during the year.....			43
(f) Cases discontinued during the year			30
(g) Number of pupils treated by means of appliances			114
(h) Number of removable appliances fitted			100
(i) Number of fixed appliances fitted.....			2
(j) Cases referred to and treated by Hospital Orthodontists			7
(14) Number of half-days devoted to the administration of general anaesthetics by:—			
(a) Dentists	139		
(b) Medical Practitioners	84		
	<u> </u>	Total	223





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