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City and County of Kingston upon Hull

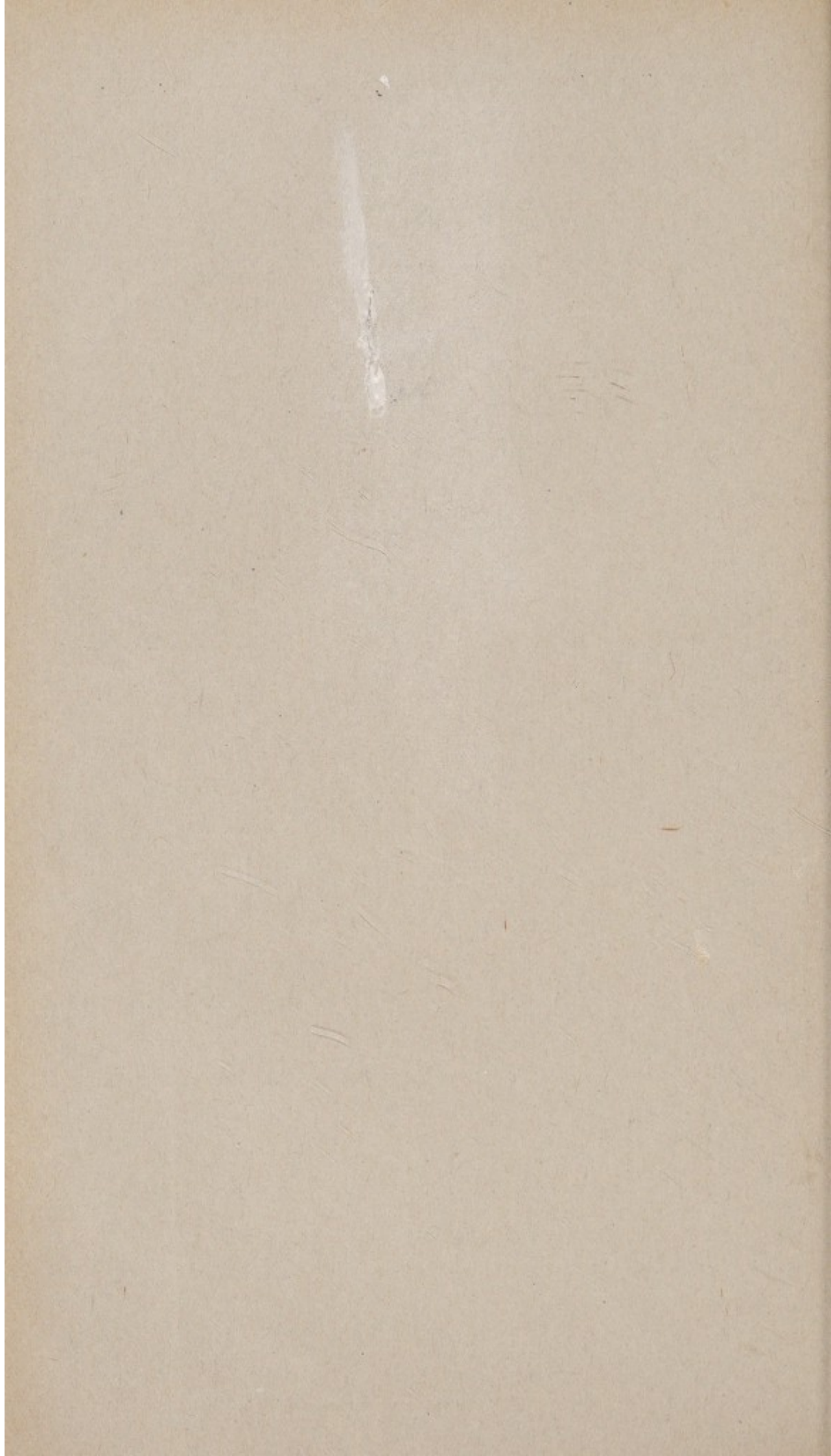
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**ANNUAL  
REPORT**  
UPON THE  
**HEALTH**  
*of* **KINGSTON UPON HULL**  
FOR THE YEAR 1951

---

**NICOLAS GEBBIE, M.D., D.P.M., D.P.H.,**  
Medical Officer of Health and  
School Medical Officer







City and County of Kingston upon Hull

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# ANNUAL REPORT

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# HEALTH


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NICOLAS GEBBIE M.D., D.P.M., D.P.H.,  
*Medical Officer of Health and School Medical Officer*



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## Health Committee, 1951-52.

The Lord Mayor (ALDERMAN R. E. SMITH, J.P.), Chairman  
COUNCILLOR G. E. BRINT, Deputy-Chairman

### ALDERMEN—

T. CARRICK  
W. C. HOLWELL, J.P.  
W. PASHBY, O.B.E.  
S. H. SMITH (to 7/2/1952)

### COUNCILLORS—

H. J. BARNEY  
(Mrs.) E. BEECROFT  
J. CAMPBELL  
C. J. CLARKE, J.P. (from 7/2/1952)

### COUNCILLORS—

J. C. HAMPSON  
(Mrs.) M. HEATH  
W. HOBDEN  
W. T. JACKSON  
C. PARKER  
(Mrs.) N. PARKIN  
H. PARSONS  
J. W. SMITH  
(Mrs.) M. C. WILSON

### GENERAL SERVICES SUB-COMMITTEE

The Lord Mayor (Alderman R. E. SMITH, J.P.), Chairman  
Councillor G. E. BRINT, Deputy-Chairman

Alderman	HOLWELL	Councillor	(Mrs.) HEATH
"	PASHBY	"	HOBDEN
Councillor	BARNEY	"	JACKSON
"	(Mrs.) BEECROFT	"	SMITH
"	CAMPBELL	"	(Mrs.) WILSON
"	HAMPSON		

### MATERNITY AND CHILD WELFARE SUB-COMMITTEE

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Councillor (Mrs.) M. C. WILSON, Deputy-Chairman

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"	R. E. SMITH	"	HOBDEN
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"	(Mrs.) BEECROFT	"	SMITH
"	CAMPBELL		

### MENTAL HEALTH SUB-COMMITTEE

The Lord Mayor (Alderman R. E. SMITH, J.P.), Chairman  
Councillor G. E. BRINT, Deputy-Chairman

Alderman	PASHBY	Councillor	HOBDEN
Councillor	BARNEY	"	PARSONS
"	(Mrs.) HEATH	"	SMITH

### CARE SUB-COMMITTEE

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Councillor G. E. BRINT, Deputy-Chairman

Councillor	(Mrs.) BEECROFT	Councillor	JACKSON
"	(Mrs.) HEATH	"	(Mrs.) PARKIN
"	HOBDEN	"	SMITH

### Co-opted Members—

Alderman D. C. LISTER, J.P., Mr. C. G. BRIDGE, Mr. H. CHATTERTON  
Mrs. M. E. PASHBY

## Cleansing and Sanitary Committee

Alderman H. KNEESHAW, Chairman

Councillor F. HAMMOND, J.P., Deputy-Chairman

Alderman	J. G. HEWETT, J.P.	Councillor (Miss)	A. MAJOR
Councillor	H. W. ANDERSON	"	E. W. MASON
"	D. K. B. BOUND	"	J. T. P. NOBLE
"	F. FENTON	"	L. ROSEN
"	J. G. HANWELL	"	G. W. WILES
"	W. HOBDEN	"	G. WINTERS
"	A. K. JACOBS		THE LORD MAYOR
"	F. LONGSTAFF		THE EX-LORD MAYOR

### SANITARY SUB-COMMITTEE

Alderman H. KNEESHAW, Chairman

Alderman	HEWETT	Councillor	LONGSTAFF
Councillor	ANDERSON	"	(Miss) A. MAJOR
"	FENTON	"	ROSEN
"	HAMMOND	"	WINTERS

### HOUSING COMMITTEE

Alderman W. C. HOLWELL, J.P., Chairman

Alderman S. H. SMITH, Deputy-Chairman

Alderman	T. R. BROADBENT	Councillor	L. J. LEVINE
"	J. DUNBAR	"	(Miss) A. MAJOR
"	I. ROBINSON, J.P.	"	J. W. SMITH
"	G. K. SPRUIT	"	J. C. TOWNSLEY, J.P.
Councillor	T. HARDAKER	"	G. W. WILES
"	H. J. HEWSON		THE LORD MAYOR
"	C. HURLEY		THE EX-LORD MAYOR

## Staff of the Health Department

#### Medical Officer of Health:

NICOLAS GEBBIE, M.D., D.P.M., D.P.H.

#### Deputy Medical Officer of Health:

ROBERT H. MOYES, M.B.E., M.D., D.P.H.

#### Senior Assistant Medical Officers of Health:

HELEN STANDRING, M.B.E., M.D., D.P.H.

CHARLES WARDEN ORR, L.R.C.P., L.R.C.S., L.R.F.P.S., D.P.H.

#### Assistant Medical Officers of Health:

GEOFFREY R. WALKER, M.B., Ch.B., D.P.H., D.T.M.

KATHLEEN A. WILSON, M.B., Ch.B., B.A.O., L.M., D.P.H.

CHRISTINE N. R. CINCIO, M.B., Ch.B.

ELIZA J. CARSON, M.B., Ch.B., B.A.O.

JEAN M. BARROWMAN, M.B., Ch.B.

MARY P. FLEMING, M.B., B.Ch., B.A.O., D.P.H., D.C.H., B.Sc.

JOSEPH TONG, L.M.S.S.A. (Lond.) C.P.H. (Leeds)

SAMUEL KLINGER, M.D. (Vienna)

ALBERT S. CAREY, M.B., Ch.B., D.P.H.

ISOBEL M. McCULLOUGH, L.R.C.P. and S. (Ireland) (from 5/6/1951)



## Staff of the Health Department—*Continued.*

### Psychiatrist:

JOHN MACKAY, M.D., D.P.M.

### Maternity and Child Welfare:

Senior Assistant Medical Officer of Health and Inspector of Midwives :

HELEN STANDRING, M.B.E., M.D., D.P.H.

3 Part-time Clinical Medical Officers

Superintendent Nursing Officer : IDA THOMPSON

Superintendent Health Visitor : EVA HART

Health Visitor Tutor : MIRIAM HUDSON

40 Health Visitors

6 Tuberculosis Health Visitors

Superintendent Midwives and Non-medical Inspectors of Midwives : MAUD B. GREENLEY

ANNIE GARTON

56 Domiciliary Midwives

Superintendent Midwife (Part II Training School) : GLADYS BOLTON

### Food Inspection:

Chief Food Inspector : S. RHODES

6 Inspectors

### Sanitary:

Chief Sanitary Inspector and Chief Housing Inspector : A. C. SAWORD

40 Inspectors and Assistants

### Clerical:

Chief Clerk : J. COLTMAN

60 Clerks

### SUMMARY:

	<i>Whole-time</i>	<i>Part-time</i>
Medical Staff .....	15	5
Clerical Staff .....	60	2
Male Inspectors .....	48	—
Health Visitors (including 5 Students) .....	51	—
Municipal Midwives (including 12 Pupils) .....	70	—
Mental Health Staff .....	15	—
Nursing Staff .....	33	5
Disinfecting and Drainage Staff, Porters, Rodent Operatives, etc. ....	34	—
Domestic Staff (including Home Helps) .....	26	159
Ambulance Staff, (including Maintenance Service) ....	92	—
Other Staff .....	4	13
Totals .....	448	184



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GUILDHALL,

KINGSTON UPON HULL,

August, 1952.

*My Lord Mayor, Ladies and Gentlemen,*

I have pleasure in submitting my report for the year ended 31st December, 1951, upon the Health, Sanitary Circumstances and Vital Statistics of the City and County of Kingston upon Hull. Incorporated in this volume is my report as School Medical Officer addressed to the Chairman and Members of the Education Committee. Members of the City Council and of the Education Committee and members of the public have found it a convenience for reference to have the two reports in one volume.

During the year under review the health of the citizens at all ages remained good and no infectious disease reached epidemic proportions.

In our campaign against Diphtheria, immunisation has been actively continued. At the end of the year the number of children under 15 years of age immunised was 54,152, or 70·8 per cent. of the child population of the City. The corresponding figure for the previous year was 51,229, or 67·8 per cent. of the child population. Sixteen notifications of suspected Diphtheria were received, but in no case was diagnosis confirmed; thus for the first time in my Annual Reports it can be recorded that no case of Diphtheria has been confirmed in the City. No death from Diphtheria has occurred in the City since 1946. The position is highly satisfactory but there must be no complacency. Immunisation must be pursued steadily, especially amongst babies under one year of age, if we are to prevent the recurrence of Diphtheria.

The picture regarding vaccination against Smallpox is not so satisfactory, and the number of infants vaccinated has continued to fall. In 1948, only 38·5 per cent. of the infant population were vaccinated, and the percentage fell to 35·3 in 1949, and to 33·6 in 1950. It was hoped by many public health workers that when the compulsory aspects of vaccination were withdrawn by the National Health Service Act, 1946, an ever increasing number of parents would be persuaded to have their infants vaccinated, but such has not been proved to be the case.



As regards Tuberculosis, I am happy to be able to report that the number of deaths from all forms of Tuberculosis has continued to fall. In 1949 there were 199 deaths ; in 1950, 147 deaths ; and in 1951, 100 deaths, the lowest recorded in the City. In the age group 15 to 25 years for young men, in 1950 there were 7 deaths, and in 1951, 4 deaths ; and in the same age group for young women the number of deaths fell from 21 in 1950 to 4 in 1951. Already Tuberculosis is losing its position as one of the " Captains of the men of death."

Deaths from Cancer, unfortunately, continue to show an upward tendency. 578 deaths occurred from this disease in 1951, as compared with 550 deaths in 1950 and 544 deaths in 1949. It is interesting to note that of the 578 deaths from Cancer in 1951, in no less than 123 of these cases the lungs or other organs of the respiratory system were involved.

Probably the most important problem from a health point of view facing our citizens is unsatisfactory housing. Mr. A. C. Saword, Chief Sanitary Inspector, and his staff are finding it more and more difficult to get the necessary repairs done to housing accommodation which is steadily deteriorating. Overcrowding is still serious and the list of applicants for houses on the Corporation's estates is formidable. Rehousing depends on the provision of deep drainage which is proceeding as fast as staff numbers and permits for materials will allow.

The staff of the various sections of the Department have all given of their best in the interests of the health and welfare of their fellow citizens and have on all occasions shown to me personally, a loyalty which is greatly appreciated.

During the period when this report was in preparation for the printers, it was agreed by the City Council and myself that I should retire from service with the Hull Corporation on 8th October, 1952, on completing forty years Local Government Service. Of these forty years, twenty-one have been spent in my present post as Medical Officer of Health and School Medical Officer of the City, and as Port Medical Officer of Health to the Hull and Goole Port Health Authority.

In my Annual Report for the year 1948 I reviewed some of the main changes which had taken place in the hundred years 1848-1948 and there is no need for me to re-survey the position now. I am glad to have been associated with the development and co-ordination of the Health Services for all our people, irrespective of age or social position, which were the main concern of Health Authorities prior to the introduction of the National Health Service. In the advice I have given to the Health, Education and Welfare Authorities over the years and in the work to which I have set my hand, the children have always come first. The National Health Service Act has seriously affected the development of the Health Services towards



Social Medicine. Too much emphasis is placed by the Act upon treatment and far too little upon prevention. Three years have passed since the Act came into operation and whilst some teething troubles have been overcome, there are still no signs of the eruption of the wisdom teeth. If Health Committees, Health Departments and their staffs are given their real place as the authorities to deal with epidemiology in its widest sense, to act as the information centre for all matters of health as well as for morbidity and mortality, and to be the co-ordinating influence in all aspects of the National Health Service, then the first real steps will have been taken "to build the most efficient health service in the world."

In taking my leave, I would like to say thank you to all Chairmen and Members of Committees with whom I have been associated, to my fellow Chief Officials, and to all the members of the staff of the Health Department present and past, who have done so much to make my service in Hull fruitful and pleasant.

I would wish my successor every happiness.

I have the honour to be,

Your obedient Servant,

NICOLAS GEBBIE, M.D.,

*Medical Officer of Health and  
School Medical Officer.*

PART I

STATISTICS

SOCIAL CONDITIONS

GENERAL HEALTH SERVICES



# VITAL STATISTICS

## SUMMARY OF PRINCIPAL VITAL STATISTICS

	1951	1950
Area of City in Acres.....	14,433	14,433
Census Population at 8th April, 1951 .....	299,068	
Estimated Mid-year Home Population (Registrar-General).....	298,100	302,100
Number of inhabited houses (at end of year) according to Rate Books†	85,446	84,535
Marriages .....	2,829	2,646
Marriage-rate.....	19·0	17·5
Live Births .....	5,658	5,825
1951— <i>Legitimate</i> : Male, 2,766 ; Female, 2,610 ; Total, 5,376		
<i>Illegitimate</i> : Male, 152 ; Female, 130 ; Total, 282		
Crude Birth-rate per 1,000 of the population.....	19·0	19·28
Adjusted Birth-rate (see note—page 16).....	19·0	19·5
Stillbirths.....	134	147
1951— <i>Legitimate</i> : Male, 70 ; Female, 57 ; Total, 127		
<i>Illegitimate</i> : Male, 3 ; Female, 4 ; Total, 7		
Rate per 1,000 total (live and still) births .....	23·1	24·6
Deaths (all causes) .....	3,585	3,476
Crude death-rate per 1,000 population .....	12·03	11·5
Adjusted death-rate (see note - page 16) .....	13·71	13·22
Natural Increase of Population during the year.....	2,073	2,349
<i>Maternal Mortality—</i>		
Deaths from all Causes—Pregnancy, Childbirth and Abortion.....	10	4
Death-rate per 1,000 live births .....	1·77	0·69
<i>Infant Mortality—</i>		
Deaths of infants under 1 year of age.....	258	200
1951— <i>Legitimate</i> : Male, 148 ; Female, 93 ; Total, 241		
<i>Illegitimate</i> : Male, 9 ; Female, 8 ; Total, 17		
Death-rate of infants under 1 year of age—		
All infants per 1,000 live births .....	46	34
Legitimate infants per 1,000 legitimate live births.....	45	35
Illegitimate infants per 1,000 illegitimate live births .....	60	29
<i>Neo-Natal Mortality—</i>		
Deaths under 1 month of age.....	135	117
Rate per 1,000 live births .....	24	20

† Houses only, and excluding houses and shops.

	1951	1950
Deaths from Gastritis, Enteritis and Diarrhoea (under 2 years).....	22	10
Rate per 1,000 live births .....	3.89	1.72
Death-rates per 1,000 of population—		
Measles.....	0.00	0.00
Whooping Cough .....	0.03	0.017
Diphtheria .....	—	—
Cancer (malignant neoplasms, including neoplasms of lymphatic and hæmatopoietic tissues) .....	1.94	1.82
Tuberculosis—All forms .....	0.33	0.48
Respiratory .....	0.31	0.42
Non-respiratory.....	0.02	0.06

**Year ended 31st March,**

	1952	1951
The rateable value of the City .....	£1,832,320	£1,794,931
Average rate in the £ (excluding Water Charges).....	23s. 0d.	21s. 2d.
Gross Product of a 1d. General Rate .....	£7,635	£7,479
Net yield of a 1d. General Rate (after taking into account the cost of collection, allowances to owners and losses on collection).....	£7,316	£7,021

The expenditure of the Health Department during the financial year ended 31st March, 1952, was as under :—

	Gross £	Income £	Net £
Sanitary Section (not including the Cost of Refuse Collection and Disposal) .....	51,438	5,574	45,864
National Health Service Act, 1946 .....	266,523	142,555	123,968
Health Services (Non-grant aided) .....	25,757	4,444	21,313
City Laboratory .....	8,172	2,718	5,454
<b>TOTAL .....</b>	<b>£351,890</b>	<b>£155,291</b>	<b>£196,599</b>

This expenditure represents a net charge on the ratepayers of 2s. 2.87d. in the £. The gross cost per head of the population is £1 3s. 7d. and the net cost 13s. 2d. (based on Registrar-General's estimated home population Mid-1951, 298,100.

## VITAL STATISTICS

*Marriages.* The number of marriages solemnised in the city was 2,829, compared with 2,646 during 1950 and 2,684 in 1949. The marriage rates per 1,000 of the population were : 1951, 19.0 ; 1950, 17.5 ; and 1949, 18.1.

*Births.* The births registered numbered 5,658 ; this includes the births of the children of Hull parents which occurred at maternity homes or at places outside the city, and excludes those of children born of mothers who were resident in Hull only temporarily. The birth-rate of 19.0 per 1,000 of the population compared with 19.28 in 1950 and 20.95 in 1949. The birth-rate for England and Wales in 1951 was 15.5, or a decrease of 0.3 on the 1950 rate of 15.8. The Hull rate for 1951 was 0.28 below that for 1950.



In 1950 the Registrar-General introduced area comparability factors for birth rates. The adjusted birth-rate of an area is calculated by multiplying the crude birth-rate (births per 1,000 of population) by that area's comparability factor to make it comparable from the natality point of view with the crude birth-rate of the country as a whole or with the natality of any other area similarly modified by its own factor. The comparability factor for Hull for 1951 was 1.00, which gives an adjusted birth-rate of 19.0 compared with a birth-rate for England and Wales as a whole of 15.5.

Of the total births in Hull during 1951, 2,918 were of males and 2,740 of females ; the figures recorded in each quarter were as follows :—

<i>1st quarter</i>	<i>2nd quarter</i>	<i>3rd quarter</i>	<i>4th quarter</i>	<i>Total</i>
1,300	1,415	1,475	1,468	5,658

The subjoined figures show the number of births and the birth-rates for each of the last 5 years and at 10-yearly intervals from 1900 :—

<i>Year</i>	<i>No. of Births</i>	<i>Birth-rate</i>
1951 ....	5,658	19.0
1950 ....	5,825	19.28
1949 ....	6,210	20.95
1948 ....	6,683	22.7
1947 ....	7,765	26.8
1940 ..	4,984	18.6
1930 ..	6,288	20.6
1920 ....	8,469	29.1
1910 ....	8,014	29.1
1900 ....	7,820	32.7

There were 282 illegitimate births ; this is 5.0 per cent of the total, compared with 5.8 for 1950 and 5.6 for 1949.

*Deaths.* There were 3,585 deaths, equal to a crude death rate of 12.03 per 1,000 of the population compared with 11.5 in 1950 and 12.1 in 1949. The death-rates of England and Wales were : 1951, 12.5 ; 1950, 11.6 ; 1949, 11.7. The total number of deaths in Hull in 1951 was 109 more than in 1950

In 1949 the Registrar-General re-introduced area comparability factors for death rates. The adjusted death-rate of an area is calculated by multiplying the crude death-rate (deaths per 1,000 of population) by that area's comparability factor to make it comparable from the mortality point of view with the crude death-rate of the country as a whole or with the mortality of any other area

similarly modified by its own factor. The comparability factor for Hull for 1951 was 1.14 which gives an adjusted death-rate of 13.71 compared with a death-rate for England and Wales as a whole of 12.5.

The deaths recorded in Hull were spread over the year as follows :

<i>1st quarter</i>	<i>2nd quarter</i>	<i>3rd quarter</i>	<i>4th quarter</i>	<i>Total</i>
1,261	817	647	860	3,585

The following statement shows the number of deaths and the death-rates for each of the last 5 years and at 10-yearly intervals from 1900 :—

<i>Year</i>	<i>No. of Deaths</i>	<i>Death-rate</i>
1951 ....	3,585	12.03
1950 ....	3,476	11.5
1949 ....	3,600	12.1
1948 ....	3,267	11.1
1947 ....	3,558	12.3
1940 ....	4,089	15.3
1930 ....	3,833	12.5
1920 ....	3,834	13.2
1910 ....	4,253	15.2
1900 ....	4,610	19.2

Full particulars of the mortality amongst infants and children under 5 years of age appear in the section of this report dealing with the Care of Mothers and Young Children (*see page 94*).

Comparative figures are given in Tables I and II. (*See pages 20 and 21.*)

*Causes of Death.* Tables IIIa and IIIb (*see pages 22 and 23*) give respectively the principal causes of death under the new International Statistical Classification.

A comparison of the death-rates from diseases with the heaviest incidence in 1951, with those in 1950, is given below :—

	<i>1951</i>	<i>1950</i>
Bronchitis ....	0.91	0.74
Pneumonia ....	0.95	0.73
Cancer ....	1.94	1.82
Heart Disease ....	3.5	3.5
Vascular Lesions affecting Central Nervous System ....	1.3	1.3
Respiratory Tuberculosis ....	0.3	0.43



*Male and Female Deaths.* There were 1,896 deaths of males and 1,689 of females, the death-rates, based on the 1951 census proportion, (Males 143,202 ; Females 155,866.), being respectively 13·2 per 1,000 of the male population and 10·8 per 1,000 of the female population.

The diseases with heavier incidence in males were :—

	M.	F.
Respiratory Tuberculosis ....	61	32
Malignant neoplasms, including neoplasms of lymphatic and hæmatopoietic tissues ....	311	267
Coronary disease, angina ....	222	131
Bronchitis ....	172	99
Ulcer of Stomach and Duodenum ....	34	9

In contrast, the diseases with heavier incidence in females were :—

	M.	F.
Diabetes Mellitus ....	7	12
Vascular Lesions affecting central nervous system	164	230
Heart Diseases (excluding coronary disease, angina ; and hypertension with heart disease) ....	263	359

*Deaths from Road Vehicular Accidents.* The Coroner has been good enough to supply the following information on the fatal road accidents which occurred in his area during 1951.

35 inquests were held in connection with fatal accidents due to the use of a vehicle in a street or " public highway ". Of this number 29 were in respect of accidents which occurred in Hull and 6 in regard to accidents outside the city boundary.

A summary of the facts established in the 29 local cases is as follows :

*Pedestrians* (13)—5 knocked down whilst crossing the road (by trolley bus, 1 ; motor-car, 2 ; motor-cycle, 1 ; Taxi-cab, 1). 2 knocked down by vehicles reversing into the roadway. 1 whilst under the influence of drink, falling into the path of an oncoming trolley bus. 5 children knocked down—by motor lorry 4, (3 whilst playing in the road and 1 whilst running across the road) ; and 1 by a trolley-bus, whilst running across the road.

*Pedal Cyclists* (9)—3 knocked down by motor lorry ; by motor-cycle and side-car, 1 ; by motor-car, 1 ; Omnibus, 1 ; auto-cycle, 1 ; taxi-cab, 1 ; and 1 fell from pedal cycle into the path of a motor lorry.

*Motor-Cyclists* (5)—1 pillion passenger thrown from machine due to inexperience of driver ; 2 falling from their machines (1 losing control through excessive speed and 1 whilst under the influence of drink) ; 1 colliding with pedal cyclist ; and 1 colliding with a taxi-cab.

*Motor-Car Passengers* (2)—1 resulting from the car colliding with a motor lorry ; 1 resulting from the car colliding with an omnibus.

## AGE PERIODS OF PERSONS KILLED

Age Period	Under 5 years	5-15 years	15-25 years	25-45 years	45-65 years	Over 65 years	Total
Males	4	—	1	7	4	4	20
Females	2	—	3	—	3	1	9
Total	6	—	4	7	7	5	29



**TABLE I**  
**VITAL STATISTICS OF WHOLE DISTRICT DURING 1951 AND PREVIOUS YEARS**

Year	Population estimated for each year	Births		Total Deaths Registered in the District		Transferable Deaths		Net Deaths belonging to the District				
		Number	Rate	Number	Rate	Of Non-residents registered in the District	Of Residents not registered in the District	Under 1 Year of age		At all Ages		
								Uncorrected	Corrected		Number	Rate per 1,000 live Births
1	2	3	4	5	6	7	8	9	10	11	12	13
1947	289,240	7,309	7,765	26.8	3,492	12.1	136	202	400	52	3,558	12.3
1948	294,200	6,570	6,683	22.7	3,191	10.8	104	180	309	46	3,267	11.1
1949	296,400	6,276	6,210	20.9	3,518	11.9	158	240	259	42	3,600	12.1
1950	302,100	5,876	5,825	19.3	3,372	11.2	129	233	200	34	3,476	11.5
1951	298,100	5,408	5,658	19.0	3,504	11.8	159	240	258	46	3,585	12.03

TABLE II

BIRTH-RATE, DEATH-RATE AND ANALYSIS OF MORTALITY DURING THE YEAR 1951

	BIRTH-RATE PER 1,000 HOME POPULATION		ANNUAL DEATH-RATE PER 1,000 HOME POPULATION										RATE PER 1,000 LIVE BIRTHS	
	Live Births	Still-Births	All Causes	Typhoid and Paratyphoid Fever	Small-pox	Tuberculosis	Pneumonia	Whooping Cough	Diphtheria	Influenza	Acute Poliomyelitis and Polioencephalitis	Deaths under 1 year of age	Diarrhoea & Enteritis (under 2 years)	
England and Wales .....	15.5	0.36	12.5	0.00	0.00	0.31	0.61	0.01	0.00	0.38	0.00	29.6†	1.4	
126 County Boroughs and Great Towns, including London .....	17.3	0.45	13.4	0.00	0.00	0.37	0.65	0.01	0.00	0.36	0.01	33.9	1.6	
148 Smaller Towns (Estimated Resident Populations 25,000 to 50,000 at Census 1931) .....	16.7	0.38	12.5	0.00	0.00	0.31	0.63	0.01	0.00	0.38	0.01	27.6	1.0	
London Administrative County .....	17.8	0.37	13.1	—	—	0.38	0.61	0.01	0.00	0.23	0.00	26.4	0.7	
Kingston upon Hull .....	19.0	0.45	13.7	—	—	0.33	0.95	0.03	—	0.18	0.00	45.6	3.9	

† Per 1,000 related births.

A dash (—) signifies that there were no deaths.

The adjusted birth-rate and death-rate for Kingston upon Hull has been used for purposes of comparison—see notes, p. 16.



TABLE IIIa—PRINCIPAL CAUSES OF DEATH, 1951

DEATHS IN AGE GROUPS OF "RESIDENTS" WHETHER OCCURRING WITHIN OR WITHOUT THE DISTRICT

CAUSE OF DEATH	Under 1 month	1 to 11 Months	1 year	2 to 4	5 to 14	15 to 24	25 to 44	45 to 64	65 to 74	75 years and over	All Ages			Total Deaths in 1950
											Male	Female	Total	
Tuberculosis of Respiratory System	7	—	—	—	1	5	31	40	12	4	61	32	93	129
Tuberculosis, other forms	—	—	—	3	1	2	1	—	—	—	4	3	7	18
Syphilitic Disease	—	—	—	—	—	—	1	10	4	2	11	6	17	18
Typhoid Fever	—	—	—	—	—	—	—	—	—	—	—	—	—	1
Cholera	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Dysentery, all forms	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Scarlet fever and streptococcal sore throat	—	—	—	—	—	—	—	—	—	—	—	—	—	2
Diphtheria	—	—	—	—	1	—	—	—	—	—	—	—	—	—
Whooping Cough	—	7	—	—	—	—	—	—	—	—	—	—	—	—
Meningococcal infections	—	1	—	1	—	—	—	—	—	—	—	—	—	—
Plague	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Acute Poliomyelitis	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Smallpox	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Measles	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Typhus and rickettsial diseases	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Malaria	—	—	—	—	2	—	—	—	—	—	—	—	—	—
All other diseases classified as infective and Parasitic	—	1	—	—	—	—	5	1	1	1	6	5	11	5
Malignant neoplasms, including neoplasms of lymphatic and haematopoietic tissues	—	—	—	—	3	3	45	232	184	111	311	267	578	550
Diabetes Mellitus	—	—	—	—	—	1	2	6	5	5	7	12	19	19
Vascular lesions affecting central nervous system	—	1	—	—	—	—	7	73	140	173	164	230	394	403
Coronary disease, angina	—	—	—	—	—	—	12	109	141	91	222	131	353	338
Hypertension with heart disease	—	—	—	—	—	—	—	18	23	34	31	44	75	62
Other heart diseases	—	—	1	—	—	—	10	65	175	371	263	359	622	655
Other circulatory diseases	—	—	—	—	—	—	2	9	18	71	48	52	100	123
Influenza	—	—	—	—	—	—	7	19	11	16	34	20	54	12
Pneumonia	—	60	3	5	2	1	21	60	66	64	160	122	282	220
Bronchitis	—	3	—	—	—	—	6	92	71	97	172	99	271	225
Ulcer of Stomach and Duodenum	—	—	—	—	—	—	2	22	10	8	34	9	43	39
Gastritis, Enteritis and Diarrhoea	1	—	—	—	—	—	2	4	2	2	17	16	33	22
Nephritis and Nephrosis	—	21	—	—	1	—	9	18	12	9	28	24	52	70
Hyperplasia of prostate	—	—	—	—	3	—	—	3	10	19	32	—	32	30
Pregnancy, childbirth and abortion	—	—	—	—	—	2	7	1	—	—	—	10	10	4
Congenital malformations	12	7	1	1	—	—	3	—	1	—	9	16	25	29
Other defined and ill-defined diseases	120	17	—	1	3	7	22	55	48	49	169	153	322	336
Other diseases of Respiratory System	1	—	—	—	1	2	1	7	6	12	15	15	30	27
Motor vehicle accidents	—	—	1	5	2	7	7	6	4	2	22	10	32	19
All other accidents	1	3	1	5	4	3	10	11	7	21	37	29	66	63
Suicide	—	—	—	—	1	—	11	19	14	3	30	18	48	49
Homicide and operations of war	—	1	—	—	—	—	1	—	—	—	1	2	3	—
TOTAL	135	123	7	25	20	39	225	881	965	1165	1896	1689	3585	3476

• including Broncho-pneumonia.



TABLE IIIb—PRINCIPAL CAUSES OF DEATH, 1951

DEATHS (IN WARDS) OF "RESIDENTS" OF "RESIDENTS" WHETHER OCCURRING WITHIN OR WITHOUT THE DISTRICT

CAUSE OF DEATH	DEATHS (IN WARDS) OF "RESIDENTS" OF "RESIDENTS" WHETHER OCCURRING WITHIN OR WITHOUT THE DISTRICT														Deaths in Public Institutions							
	Albert	Alexandra	Beverley	Botanic	E. Central	W. Central	Coltman	Drypool	Marfleet	Myton	Newland	N. Newington	S. Newington	Paragon		Park	Pickering	St. Andrew's	Southcoates	Stonery	Sutton	University
Tuberculosis of Respiratory System	2	5	3	8	3	5	1	—	1	6	2	3	9	—	2	11	6	5	4	6	11	20
Tuberculosis, other forms	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Syphilitic Disease	1	1	—	1	—	—	1	—	—	—	—	1	—	—	—	—	—	—	—	—	—	6
Typhoid Fever	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	10
Cholera	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Dysentery, all forms	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Scarlet Fever and streptococcal sore throat	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Diphtheria	1	1	—	1	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Whooping Cough	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Meningococcal infections	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Plague	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	2
Acute Poliomyelitis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Smallpox	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Measles	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Typhus and rickettsial diseases	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Malaria	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
All other diseases classified as infective and Parasitic	—	2	1	—	—	—	—	—	—	—	2	—	1	—	1	—	—	—	—	—	—	6
Malignant neoplasms, including neoplasms of lymphatic and haematopoietic tissues	17	31	24	21	12	22	37	14	24	11	35	40	24	12	17	59	22	13	33	44	66	223
Diabetes Mellitus	1	18	15	16	11	10	14	12	14	12	26	35	14	5	20	39	16	16	21	33	36	9
Vascular lesions affecting central nervous system	13	9	16	15	7	13	26	1	9	13	38	33	14	3	13	43	13	7	16	44	76	139
Coronary disease, angina	2	4	4	5	2	4	3	1	3	2	3	4	4	1	4	6	2	7	6	5	3	40
Hypertension with heart disease	13	34	27	48	19	34	52	18	13	10	22	44	21	10	27	53	25	23	36	36	57	149
Other Heart diseases	1	3	6	8	1	5	4	2	1	2	9	10	6	—	1	9	5	5	5	9	8	34
Other circulatory diseases	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Influenza	10	21	8	18	8	15	16	10	12	3	9	15	10	2	11	27	6	18	11	22	30	112
Pneumonia	4	13	16	12	12	15	13	8	4	6	10	19	26	9	8	19	7	14	15	10	31	53
Bronchitis	2	6	2	1	1	1	1	1	2	1	1	3	3	1	3	3	3	1	1	5	4	33
Ulcer of Stomach and Duodenum	3	—	6	4	2	—	1	1	2	2	2	2	2	1	2	4	4	5	3	3	5	27
Gastritis, Enteritis and Diarrhoea	1	—	3	1	1	2	1	1	4	1	2	3	2	—	2	4	8	1	2	3	7	29
Nephritis and Nephrosis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Hyperplasia of prostate	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Pregnancy, childbirth and abortion	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Congenital malformations	2	2	3	1	1	2	1	1	1	—	1	2	1	1	—	1	2	2	1	1	2	8
Other defined and ill-defined diseases	10	20	13	15	12	21	15	8	19	7	19	18	13	3	14	21	7	15	20	29	23	180
Other Diseases of Respiratory System	1	2	1	1	1	5	1	1	2	2	1	2	2	—	1	4	2	—	1	—	4	10
Motor vehicle accidents	4	3	4	2	3	1	4	2	1	4	3	1	4	2	1	8	1	4	6	4	7	27
All other accidents	—	1	4	1	—	2	2	2	1	1	4	2	3	2	1	4	4	4	2	2	10	4
Suicide	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Homicide and operations of war	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
TOTALS	102	181	162	186	102	161	201	85	119	87	196	240	171	60	133	329	138	152	184	239	357	1247



## NATURAL AND SOCIAL CONDITIONS OF THE AREA

### METEOROLOGY

Meteorological records are kept by the General Superintendent of Parks at a Climatological Station in Pearson Park. Readings are taken daily at 9 a.m. and 9 p.m.

The total rainfall in Hull was 27·74 inches in 1951, against 30·81 inches in 1950. There were 1,314 hours of bright sunshine compared with 1,337·4 hours in 1950 and 1,560·6 hours in 1949. The number of days on which rain fell was 257 and there were 284 sunny and 81 sunless days. The prevailing wind was again from the south-west.

Particulars of the meteorological readings will be found in Table IV.

### POPULATION

*Census.* At the Census taken on the 8th April, 1951, the number of persons enumerated in the city was 299,068 (143,202 males and 155,866 females), as against 313,544 in 1931.

Table V (*page 27*) brings up to date the information relating to population supplied last year.

TABLE IV

METEOROLOGICAL REPORT FOR THE YEAR 1951

1951	At Nine a.m. Local Time				Mean Relative Humidity.	At Nine p.m. Local Time				Mean Temperature at p.m. Readings.	Under-ground Temperature		Total Hours of Bright Sunshine.	Directions of the Wind							Total Rainfall.				
	Mean Reading of					Reading of Self-registering Thermometers					At 1 ft.	At 4 ft.		N	N.E.	E	S.E.	S	S.W.	W		N.W.	Calm		
	Barometer	Attached Therm.	Dry Bulb Therm.	Wet Bulb Therm.		Max. in Air	Min. in Air	Max. in Rays of Sun	Min. On Grass															deg.	deg.
January	29.59	41	38.5	37.1	87	42	34	50	30	38	37.0	41.2	44.0	—	—	1	5	16	9	—	—	—	—	1.72	
February	29.46	41	38.4	37.0	87	44	34	58	30	39	37.3	41.1	54.7	1	3	5	2	13	2	2	—	—	—	2.42	
March	29.65	43	39.8	37.8	82	45	34	67	30	40	38.9	41.2	87.4	3	6	1	5	1	8	1	6	—	—	—	2.85
April	29.84	48	46.3	42.2	68	52	38	84	33	45	43.3	42.8	167.2	2	5	1	2	—	12	—	8	—	—	—	1.07
May	29.94	53	51.3	47.8	76	56	43	86	39	50	49.4	46.7	135.9	5	15	2	4	—	2	—	3	—	—	—	4.50
June	29.96	59	58.2	53.5	72	64	49	97	43	57	57.8	51.8	179.4	3	10	2	—	1	7	1	6	—	—	—	1.32
July	30.02	65	63.7	58.6	73	71	54	105	49	63	61.9	55.1	180.2	3	3	—	3	3	8	5	5	1	—	—	1.54
August	29.74	62	61.0	57.1	78	68	53	99	48	61	61.0	57.5	152.1	1	—	—	3	2	16	—	8	1	—	—	5.31
September	29.91	59	58.6	55.7	83	66	51	93	46	59	57.7	56.6	125.8	—	5	—	4	2	13	1	4	1	—	—	1.07
October	30.08	52	50.5	48.7	87	58	44	46	39	51	50.7	53.9	109.5	1	3	3	14	—	3	1	2	4	—	—	0.95
November	29.51	50	48.0	46.2	86	52	43	63	37	48	45.9	49.9	53.8	—	1	1	9	5	10	1	3	—	—	—	3.23
December	29.78	45	41.4	39.9	87	46	36	51	30	41	40.5	46.5	24.0	1	—	—	—	1	23	2	3	1	—	—	1.76
Total or Average	29.79	52	49.6	46.8	81	55	43	75	38	49	48.5	48.7	1314.0	20	51	11	54	17	131	14	59	8	—	—	27.74



TABLE IV—Continued

## METEOROLOGY

Climatological Station, Pearson Park

Eight feet above sea level

						1951	1950				
Highest Mean Temperature	....	....	....	....	....	70 deg. 3rd August	73 deg. 7th June				
Lowest Mean Temperature	....	....	....	....	....	28.5 deg. 29th Jan.	28.5 deg. 15th Dec.				
Total Rainfall	....	....	....	....	....	27.74 ins.	30.81 ins.				
No. of days on which rain fell	....	....	....	....	....	257	263				
No. of sunless days	....	....	....	....	....	81	82				
No. of hours of bright sunshine	....	....	....	....	....	1314.0	1337.4				
Direction of prevailing wind :—											
			N.	N.E.	E.	S.E.	S.	S.W.	W.	N.W.	Calm
1951	....	....	20	51	11	54	17	131	14	59	8
1950	....	....	10	52	9	41	26	138	18	68	3

## SUNSHINE AND RAINFALL FOR 1951 AND PREVIOUS 5 YEARS

	ANNUALLY		THIRD QUARTERS					
	Hours of Bright Sunshine	Inches of Rain	Hours of Bright Sunshine			Inches of Rain		
			July.	Aug.	Sept.	July	Aug.	Sept.
1946	1,302	31.33	184.1	140.9	180.4	3.32	4.12	4.14
1947	1,390	18.94	183.7	233.8	150.2	0.88	0.69	0.94
1948	1,312	24.64	170.6	122.8	117.1	0.83	3.47	1.35
1949	1,561	17.98	218.5	206.2	144.6	1.64	1.70	1.12
1950	1,337	30.81	208.3	180.4	99.3	2.99	4.48	2.69
1951	1,314	27.74	180.2	152.1	125.8	1.54	5.31	1.07

TABLE V—POPULATION OF KINGSTON UPON HULL

	Registrar General's Estimated Population, July	Natural Increase or Decrease during preceding year	Insured Persons 31st December	Number of Parliamentary Voters on Register	Number of Children on school roll last week before Christmas holidays
1938	318,700	+1,787	134,376	175,978	45,391
1943	217,400	+ 906	109,632	172,788	18,576
1944	229,640	+ 961	111,323	172,788	35,773
1945	245,740	+1,748	133,797	143,973	38,193
1946	278,190	+1,746	145,240	157,114	38,543
1947	289,240	+3,696	140,651	198,174	40,076
1948	294,200	+4,207	287,168*	200,517	41,991
1949	296,400	+3,416	293,399*	198,442	42,585
1950	302,100	+2,610	298,838*	199,642	42,381
1951	298,100	+2,349	298,977*	203,160	44,067

\* Total number of persons in lists of doctors who have entered the National Health Service.

### STATE OF EMPLOYMENT

*Unemployment.* Hereunder are particulars, kindly furnished by the Manager of the Kingston upon Hull Employment Exchange, in relation to unemployment as recorded by his Department.

	1951	1950
Average number of persons unemployed in one week of each month of the year :		
Men	2,449	4,005
Women	855	935
Juveniles	87	113
	3,391	5,053
Month in which " peak " period was reached	February	
Total in " peak " period of one week	4,589	
Month of lowest total of unemployment	July	
Total unemployed recorded in such month	2,491	



## GENERAL PROVISION OF HEALTH SERVICES

Under the National Health Service Act which came into operation on the 5th July, 1948, a comprehensive health service is available to every member of the community.

Responsibility for operating the services provided under the Act is entrusted to three different bodies—(a) Executive Councils, (b) Regional Hospital Boards, and (c) Local Health Authorities, each of which is concerned with a different but inter-related aspect of the work.

*Executive Councils.* These Councils are responsible for the General Medical Practitioner Service and the General Dental, Pharmaceutical and Supplementary Ophthalmic Services.

At the end of the year 298,088 persons resident in Kingston upon Hull were included in the list of Hull doctors, and a further 889 such persons were registered with doctors practising in the area of the East Riding of Yorkshire Executive Council, making a total of 298,977 persons registered with doctors.

There were 102 principal doctors, assisted by 13 assistant practitioners providing medical services under the National Health Service in Kingston upon Hull at 31st December.

*Regional Hospital Boards.* For the purpose of hospital administration and the organisation of specialist medical services, the country is divided into areas, each with a Regional Hospital Board. These Boards are responsible for planning the hospital and specialist services of the region and for initiating and co-ordinating locally the general hospital policy outlined in the Act. The day to day administration of the services is carried out by Hospital Management Committees, each of which is responsible for a group of hospitals.

Kingston upon Hull is included in the area of the Leeds Regional Hospital Board, and the hospitals in and around the city are divided into two groups. The first, comprising mainly the general and maternity hospitals, is administered by the No. 4 Hull (A) Group Hospital Management Committee, whilst the tuberculosis, infectious disease and mental hospitals are controlled by the No. 5 Hospital Management Committee—Hull (B) Group.

*Local Health Authorities.* County Councils and County Borough Councils are classified as Local Health Authorities and, as such, are responsible for carrying out the remaining branches of the National Health Service. Full details of the work performed in Hull during 1951 are given in a later section of this Report.



## CLINICS, TREATMENT CENTRES, ETC.

The Maternity and Child Welfare and School Clinics, provided by the Corporation, are interavailable to patients as required.

## (a) Maternity and Child Welfare.

## Infant Welfare Clinics—

69 Coltman Street	Monday	2 p.m.
King's Hall, Fountain Road	Tuesday	} 2 p.m.
	Thursday	
East Hull Clinic, Morrill Street	Wednesday	} 2 p.m.
	Thursday	
Methodist Mission Rooms, Carlton Street	Tuesday	2 p.m.
Parish Hall, Church of Transfiguration, Albert Ave.	Wednesday	} 2 p.m.
	Friday	
Methodist Church Rooms, Cottingham Road	Wednesday	} 2 p.m.
	Friday	
Methodist Rooms, Sutton	Tuesday	2 p.m.
North Hull Clinic, Ellerburn Avenue	Wednesday	} 2 p.m.
	Thursday	
Methodist Mission Hall, Preston Road	Tuesday	} 2 p.m.
	Friday	
Church of the Ascension, Priory Road	Monday	} 2 p.m.
	Friday	
St. Nicholas Church Hall, Pickering Road	Wednesday	2 p.m.
St. Martin's Church Hall, North Road	Monday	2 p.m.
Froghall Lane, Sutton Road	Wednesday	2 p.m.
Sykes Street	Friday	2 p.m.
St. George's Church, Marfleet Lane (opened 1st March)	Thursday	2 p.m.
St. Ninian's Church Hall, Chanterlands Avenue (opened 4th May)	Friday	2 p.m.
St. Michael's Church Hall, Holderness Road (opened 1st October)	Monday	2 p.m.

## Toddlers' Clinics—

69 Coltman Street	Thursday	2 p.m.
East Hull Clinic, Morrill Street	Friday	2 p.m.

## Ante-Natal Clinics—

Sykes Street		
For Municipal District Centre cases	Monday	} 2 p.m.
	Thursday	
For cases referred by Doctors and Midwives	Wednesday	} 9-30 a.m.
	Friday	
East Hull Clinic, Morrill Street	Monday	} 2 p.m.
	Tuesday	
	Monday	} 9-30 a.m.
	Wednesday	
North Hull Clinic, Ellerburn Avenue	Tuesday	9-30 a.m.
69 Coltman Street	Monday	} 9-30 a.m.
	Thursday	
	Tuesday	} 2 p.m.
	Wednesday	
Church of the Ascension, Priory Road	Tuesday	9-30 a.m.
Gynæcological Clinic—		
Sykes Street	Tuesday	9-30 a.m.



Artificial Sunlight Clinics—				
69 Coltman Street		Tuesday	} 9-30 a.m.	
		Friday		
East Hull Clinic, Morrill Street		Tuesday	} 9-30 a.m.	
		Friday		
North Hull Clinic, Ellerburn Avenue		Monday	9-30 a.m.	
		Thursday	2 p.m.	
X-Ray Clinic—				
East Hull Clinic, Morrill Street		Monday	{ 9 a.m. to 12 noon	
		to Friday		{ 2 p.m. to 5 p.m.
Orthopædic Clinic—				
East Hull Clinic, Morrill Street		Monday	} 9 a.m. to 12 noon	
		Wednesday		
		Thursday		
For Maternity Hospital cases only—				
Sykes Street—		Tuesday	} 2 p.m.	
Ante-Natal Clinic		Wednesday		
Post-Natal Clinic		Thursday	9-30 a.m.	
(b) Day Nurseries—				
50 Pearson Park.			} Monday to Friday	
449 Holderness Road				{ 7 a.m. to 6 p.m.,
			{ Saturday 7 a.m. to	
			{ 2 p.m.	
(c) School Clinics—				
Inspection Clinics	74 Beverley Road	Monday, Wednesday and Thursday,		
		1-45 to 5 p.m.		
	114 Coltman Street	Monday, Wednesday and Thursday,		
		1-45 to 5 p.m.		
	Morrill Street	Tuesday and Friday, 1-45 to 5 p.m.		
	Ellerburn Avenue	Tuesday and Friday, 1-45 to 5 p.m.		
	Ainthorpe Grove			
	School	Alternate Thursdays, 1-45 to 4 p.m.		
	Hopewell Road			
	School	Alternate Thursdays, 1-45 to 4 p.m.		
Minor Ailments Treatment Clinics—				
	74 Beverley Road	Monday to Friday, 9 a.m. to 12 noon		
		and 1-45 to 5 p.m. Saturday, 9 a.m.		
		to 12 noon		
	114 Coltman Street	Do. do. do.		
	Morrill Street	Do. do. do.		
	Ellerburn Avenue	Monday to Friday, 1-45 to 5 p.m. Satur-		
		day, 9 a.m. to 12 noon.		
	Ainthorpe Grove			
	School	Monday to Friday, 1-45 to 4 p.m.		
	Hopewell Road School	Do. do.		
Dental Clinics—				
	74 Beverley Road	} Monday to Saturday at various		
	114 Coltman Street		} centres, as arranged.	
	Morrill Street			
	Ellerburn Avenue			
Ophthalmic Clinics (Refraction work				
and prescription of spectacles)—				
	74 Beverley Road	} Monday, Tuesday, Thursday, Friday		
	114 Coltman Street		} and Saturday at various centres, as	
	Morrill Street			} arranged
	Ellerburn Avenue			
Aural Clinics—				
	74 Beverley Road	Friday, 2 to 4 p.m., as arranged.		
	114 Coltman Street	Tuesday, 2 to 4 p.m., as arranged.		
	Morrill Street	Thursday,		
	Ellerburn Avenue	10 a.m. to 12 noon, as arranged.		



Orthopædic Clinic—	74 Beverley Road	Monday, Wednesday, Thursday and Friday, 9 a.m. to 12 noon. Monday, Tuesday, Wednesday and Thursday, 2 to 5 p.m.
	Ellerburn Avenue	Friday, 2 to 5 p.m. Inspections by Orthopædic Surgeons, as arranged.
	114 Coltman Street	Tuesday, 9 a.m. to 12 noon.
Rheumatism and Heart Clinic—	74 Beverley Road and Morrill Street	} Thursday, 2 to 5 p.m. as arranged.
Paediatric Clinic—	74 Beverley Road and Morrill Street	
		Monday, 9-15 to 10-15 a.m. as arranged.
		Friday, 9-15 to 11-15 a.m. as arranged.
Child Guidance Clinic—	New Cross Street	Monday to Friday 2 p.m. to 5 p.m.
Speech Therapy Clinic—	74 Beverley Road	} Monday to Saturday, 9 a.m. to 12 noon. Monday to Wednesday, and Friday, 1-30 to 4-30 p.m.
Chiropody Clinics—	74 Beverley Road and Morrill Street	
	114 Coltman Street	} Thursday, 9 a.m. to 12 noon.
	Ellerburn Avenue	Monday, 9 a.m. to 12 noon. Tuesday, 9 a.m. to 12 noon.

*X-Ray Facilities.* X-Ray facilities have continued to be available at the East Hull Clinic for expectant mothers referred from the Ante-Natal Clinics, for children referred from the Infant Welfare and School Clinics, and for patients from the Chest Clinics and the General Health Department. During 1951, 369 cases were referred by the Maternity and Child Welfare Section; 121 by the School Health Service; 2,813 by the Chest Clinics, and 18 by the General Health Department.

*Registration of Nursing Homes.* The supervision and inspection of registered maternity and other nursing homes are carried out in pursuance of the provisions of the Public Health Act, 1936, and the model bye-laws issued by the Ministry of Health.

At the end of 1951 there were 6 Homes on the Register; 3 provide maternity accommodation only, and 3 take patients for maternity, medical or surgical treatment.

Every Nursing Home was inspected by a Sanitary Inspector during the year, and also by the Senior Assistant Medical Officer of Health (Maternity and Child Welfare).

During the year 135 births occurred in registered private Maternity Homes; All of these were live births; no maternal death occurred.



## CHEMICAL AND BACTERIOLOGICAL LABORATORIES

The chemical and bacteriological work undertaken in the City Laboratories in 1951 is the subject of a separate report by the City Analyst and Corporation Bacteriologist, D. J. T. Bagnall, Esq., A.C.G.F.C., F.R.I.C.

The number of samples examined chemically, excluding those submitted by the East Riding County Council and the Hull and Goole Port Health Authority, totalled 6,321, including 3,056 submitted under the Food and Drugs Act.

A total of 1,191 samples were examined bacteriologically and included the following :—

Milk	....	....	....	....	....	....	....	587
Ice Cream	....	....	....	....	....	....	....	129
Ice Lollies	....	....	....	....	....	....	....	39
Other Foods	....	....	....	....	....	....	....	33
Waters	....	....	....	....	....	....	....	377

Most of the bacteriological and epidemiological work for the city is performed in the Medical Research Council's Public Health Laboratory, which is accommodated in the same building as the City Laboratories. The Public Health Laboratory is under the direction of Dr. C. Lyn Greening, and serves as the bacteriological centre for a wide area of Yorkshire.

## NATIONAL ASSISTANCE ACT, 1948

Mr. H. G. Freeman, Director of Welfare Services, has kindly supplied the following particulars with regard to the working of the above-mentioned Act.

*Section 21—Provision of Accommodation.* Accommodation was provided by the Welfare Services Department as follows :—

	<i>Residential</i>			<i>Temporary</i>		
	<i>Men</i>	<i>Women</i>	<i>Children</i>	<i>Men</i>	<i>Women</i>	<i>Children</i>
Welfare Services Hostel—						
160 Beverley Road	119	85	—	8	49	24
188 Anlaby Road	115	41	—	17	51	80†
Dunbar House, Sutton	19	—	—	—	—	—
Manor House, North Ferriby	13	18	—	—	—	—
Other premises	—	—	—	6	12	40
<b>Total</b>	<b>266</b>	<b>144</b>	<b>—</b>	<b>31</b>	<b>112</b>	<b>144</b>

\* Includes 26 men and 16 women transferred during the year to Dunbar House or Manor House.

† Includes 5 men, 9 women and 32 children transferred during the year to "other premises."

Included in the grand total above are 16 cases of evicted families, 2 of which still remain ; the balance, 14 in number, being disposed of in the following manner :

Found accommodation by own efforts .....	9
Found employment and residence by Welfare Services Department .....	1
Rehoused through Housing Department on approach by the Welfare Services Department .....	4

The need for accommodation was removed in a further 68 cases through disposal by the Welfare Services Department in the following manner :—

Rehoused through Housing Department .....	9
Rehoused through private landlords .....	8
Arrangement for accommodation at the Salvation Army Hostel and other Hostels (able-bodied men) .....	21
Returned to relatives following settlement of domestic upheaval through the medium of Welfare Services Department intervention .....	20
Suspension of Eviction Orders following approach to Agents or landlords by Welfare Services Department .....	5
Provided with accommodation .....	4
Accommodation in a house occupied without knowledge or consent of the landlord, but allowed to stay following approach by Welfare Services Department .....	1

*Section 26—Voluntary Organisations.* Under the provisions of Section 26, the Welfare Services Committee are making financial contributions to 5 Voluntary Organisations in respect of residential accommodation provided by them, as follows :—

	<i>Men</i>	<i>Women</i>
In three Hostels for the Aged .....	13	59
Hostel for the Deaf and Dumb .....	7	5
Hostels for the Blind .....	11	5
	—	—
	31	69
	—	—

*Section 29—Care of the Blind, etc.* In pursuance of the provisions of this Section of the Act, the Welfare Services Committee, through the agency of the Hull and East Riding Institute for the Blind, arranged for the employment of 104 blind men and women at the Institute's workshop in the following trades :—

Cane furniture	Basket Making	Brush Making
Mat Making	Knitting	Chair re-seating

Arrangements were made for the general welfare of the blind in the city, totalling 647 persons.



*Section 47—Persons in Need of Care and Attention.* Action under the provisions of Section 47 National Assistance Act, 1948, was contemplated in 3 cases although actual removal was effected in one instance only, where a successful application was made in the Court, the patient being removed to the Western General Hospital forthwith. The second case on being informed of this Department's intentions, voluntarily agreed to admission to a Welfare Services Hostel, the remaining case being removed under the provisions of Section 20, Lunacy Act, 1890, to the Western General Hospital.

### GENERAL HEALTH SERVICES

*Open Spaces.* A return prepared by the General Superintendent of Parks, etc., shows that there are in the city and immediately adjoining it, approximately 756 acres of Public Parks, Gardens, Recreation Grounds and open spaces owned by the Corporation ; and particulars kindly furnished by the Director of Education indicate other open spaces to include sites controlled by the Education Committee and prepared for school playing fields, of an area of 271 acres. Additional sites not prepared for this purpose total 112·5 acres. The land owned or tenanted by the Corporation and used for public allotments is 286 acres, including 38 acres used for war-time allotments. As stated in previous reports, the importance to the public health of developing facilities for open-air recreation cannot be over-rated.

*Public Baths, Wash-houses, etc.* The City Engineer has supplied the following particulars as to attendances at the public baths and wash-houses during 1951 :—

Swimming Baths	....	....	....	....	....	525,920
Slipper Baths	....	....	....	....	....	178,974
Electro-medical, vapour, etc.	....	....	....	....	....	13,822
Wash-houses	....	....	....	....	....	116,970
						<hr/>
Total	....	....	....	....	....	835,686
						<hr/>

The total attendances for the year 1950 and 1949 were 804,768 and 860,659 respectively.

The 10 public swimming baths are all equipped with modern filtration plants which ensure the water being kept in satisfactory condition.

*City Mortuary.* The public mortuary is situated in a disused burial ground in Castle Street. Attached is a properly equipped post-mortem room for the use of medical practitioners, in which 468 post-mortem examinations were carried out in 1951.



Inquests were held at the Coroner's Court, 181 George Street.

Dr. Philip Science, His Majesty's Coroner for the city, has kindly furnished the following statistics in relation to inquests, post-mortems, etc., held in the year 1951, together with comparative figures for the year 1950.

	1951	1950
Inquests and post-mortems (including post-mortems where inquests were found to be unnecessary) ....	616	587
Enquiries, etc., in connection with which there were no post-mortems ....	124	140
	—	—
	740	727
	—	—
Inquests with Jury, exclusive of adjournments ....	47	48
	—	—
Bodies accommodated at :		
City Mortuary ....	469	415
Hospitals, etc. ....	271	312
	—	—
	740	727
	—	—

*Disposal of the Dead.* The General Superintendent of Parks, etc., has submitted the following information regarding cemeteries :—

Total area of cemetery land ....	194 acres
Area in use for interments ....	111 ..
Area reserved for cemetery extensions but used for other purposes ....	83 ..

The present accommodation for the disposal of the dead is considered to be adequate for a number of years.

*Cremation.* The Crematorium is on a site adjoining the Hedon Road Cemetery. It was the first Municipal Crematorium in the country and was opened on the 2nd January, 1901, the first cremation taking place on the 7th January of the same year.

Since the 14th November, 1939, no fee has been charged by the Corporation in respect of the cremation of the remains of Hull residents.

Comparatively few people are aware of the great advance made in the practice of cremation during recent years, not only in this country but all over Europe where the centralisation of the population in large towns and the changing conditions of modern life demand a more hygienic and economic mode of disposal as a substitute for earth burial.





SANITARY CIRCUMSTANCES OF  
THE AREA

PART II

SANITATION

HOUSING

FOOD INSPECTION



## SANITARY CIRCUMSTANCES OF THE AREA

*Water.* The Water Engineer and Manager has kindly supplied the following information.

The supply, which has been satisfactory in quality throughout the year, was limited in quantity during January and February owing to drought conditions. During the remainder of the year the supply was satisfactory.

Bacteriological examinations have been made frequently and chemical examinations at varying intervals. The chloramine process has been in operation, the normal dosage being 0.15 parts per million.

The water supplied is not liable to have plumbo-solvent action.

All water leaving the pumping stations is bacteriologically pure. When new mains are laid or alterations take place such mains are sterilised before the water is put into circulation.

The number of dwellinghouses and the estimated population supplied in the city area are 89,366 and 299,068 respectively. All supplies taken from the Corporation's supply are direct mains connections.

*Sampling of Water.* The question of the unsatisfactory condition of water supplied from a private source to industrial premises on one of the City's Docks was taken over by the Hull and Goole Port Health Authority at the beginning of the year. The matter was still being dealt with by the Authority's Officers at the time of reporting and negotiations were progressing with a view to improving the quality of the water.

With regard to the water of a privately-owned swimming bath which was reported as unsatisfactory in last year's report, further sampling was carried out, and the City Analyst and Bacteriologist reported favourably upon the condition of the water. It will be remembered that the management had approved a scheme for the alteration of the foot bath and lavatory accommodation and the conversion of the chlorination plant to a Break Point system. These proposals when put into effect had undoubtedly removed the cause of the trouble.



Regular routine samples of the City's water supply are taken from various points of the City and submitted by the City Analyst and Bacteriologist to the presumptive Bac. Coli. Test. The results of his examinations throughout the year will be published in his Annual Report. He also examines the water for residual chlorine.

*Drainage and Sewerage.* The following particulars are submitted from information supplied by the City Engineer.

Work commenced in January on the construction of the substructure of the new West District Pumping Station in Goulton Street which will eventually deal with the drainage of West Hull and Haltemprice. Due, however, to the national shortage of steel much improvisation and re-design has been necessary in spite of which considerable delay has still resulted and the work is now some nine months behind schedule. Should no further delays be experienced the sub-structure of the station will be completed by March, 1953 and the super-structure finished and the station ready for operation in September, 1955.

Throughout the year, work has continued on the construction of the 10' 9" diameter Outfall Sewer through which the above pumping station will discharge the screened sewage to the River Humber. Progress on this scheme has been satisfactory though the work has been complicated by the occurrence of several "blows" through the bottom of the excavation. It is anticipated, however, that the construction of this sewer will be completed by July, 1952.

Constructional work began on the 8' 0" diameter Western Branch Trunk Sewer in October after a delay caused by the withdrawal of the appointed contractor which necessitated further negotiations before another contractor was selected. Work is progressing somewhat slowly as the shortage of steel has restricted the number of sections the Contractor has been able to work. It is planned to construct part of this sewer in tunnel but the equipment required for such an operation will not be available until about October, 1952. The sewer which extends from First Lane, Hessle, to the new Pumping Station in Goulton Street should be completed by October, 1954, and will drain parts of West Hull, Hessle and the central districts of Haltemprice. That length of the Common East Drain on the north side of Hessle Road from St. Nicholas Avenue to Anlaby Park Road will be piped and filled in as part of this contract using surplus excavated spoil from the sewer trench.

Design work has proceeded on the Northern Branch Trunk Sewer which will ultimately extend from the new Pumping Station in Goulton Street to the northerly city boundary. This sewer will drain part of West Hull and Cottingham and will



also take the flow from such agricultural drains as the Setting Dyke and the Cottingham and Newland Beck. The Ministry of Housing and Local Government were requested to give permission to advertise for tenders for the first two sections in April but to date such permission has not been forthcoming. However, it is hoped to commence work on these two sections during 1952, the completion of which will assist in the removal of the Walton Street drainage bottle-neck. The sections referred to involve the construction of about  $1\frac{1}{2}$  miles of 10'9" diameter sewer from the new Pumping Station in Goulton Street to Spring Bank West at an estimated cost of £830,000.

Due to the overloaded state of parts of the existing drainage system, it has been necessary to continue the policy of restricting development in certain portions of the City. The main areas affected have been in North West Hull, but in some cases it has been possible to allow certain development to proceed where the storm water could be discharged to agricultural drains. In these cases, the only increased load on the sewers has resulted from the discharge of small quantities of foul sewage. The restrictions on development will continue until the Northern Branch Trunk Sewer and the new Pumping Station in Goulton Street are in operation.

In East Hull, work commenced in June on the 5'0" diameter trunk sewer in Holderness Road extending from Saltshouse Road to Ganstead Lane corner and it is expected that this scheme will be completed towards the end of 1952. This sewer is designed primarily to serve Sutton No. 2 Neighbourhood Unit but in addition it will receive some flow from the Holderness Rural District.

Due to the necessity of concentrating available staff on the West Hull and Haltemprice Joint Main Drainage Scheme, design work on the sewer to serve Neighbourhood Unit No. 15 (Grange Road Estate) was temporarily suspended but this has now been resumed and it is anticipated that an application to the Ministry of Housing and Local Government for permission to advertise for tenders will be made early in 1952. The sewer which will be of 4'6" and 4'3" diameter, will extend northwards along Somerden Road from Hedon Road and in addition to serving No. 2 Neighbourhood Unit will deal with the flow from part of the proposed Industrial Zone south of the Withernsea railway line on the north side of Hedon Road.

During the year further efforts have been made to improve the flow in existing sewers by reducing damage and obstruction caused by the discharge of trade effluents from industrial premises. Advice has been given to firms in connection with the pre-treatment of their trade waste and in the majority of cases the co-operation received has been excellent.



*Watercourses, Streams, etc.* There were no complaints during the year regarding the condition of the water in the Beverley and Skidby drain, which had given rise to some concern in previous years. In my 1950 Report, I referred to arrangements which had been made for the transference of a dam to a more northerly point so as to admit water from the River Hull at high tides and secure a continuous movement of the water in the drain towards its outlet at the low end. Observations taken over the year, indicated this arrangement to be highly satisfactory, and there were no signs of stagnation during the whole of the summer.

Several complaints were received regarding the condition of one of the agricultural dykes in a residential area on the outskirts of the City. An inspection revealed a considerable amount of stagnant water and that there had been irresponsible depositing of garden refuse and cleanings from chickens, resulting in considerable nuisance from fly breeding and smells.

The case was referred to the Town Clerk who reported the matter to the appropriate Committee of the Corporation, as a result of which the City Engineer was instructed to carry out the piping and filling of the dyke at an estimated cost of £2,800. In the meantime, as a temporary expedient, that section of the dyke where the nuisance existed was sprayed with larvicide and notices were posted warning persons against the depositing of refuse.

Several complaints were received regarding the condition of the Lambwath Stream and it was found that this stream required cleaning out, being obstructed by weeds and branches. The matter was referred to the Hull and East Riding River Board for attention.

Special attention was paid to those open drains likely to breed mosquitoes, and, where necessary, spraying with liquid larvicide was carried out by the Department's workmen.

*Public Cleansing.* The collection and disposal of refuse, street cleansing, and the maintenance of public lavatories in the city are under the control of the Public Cleansing Superintendent, who issues an annual report upon the work of his Department. Herewith are particulars from information kindly furnished by him :

*Refuse Collection and Disposal*

Collection—	<i>Tons</i>
Refuse	61,501
Waste Paper	920
Food Waste	2,464
	<hr/>
	64,885
	<hr/>



Disposal—	<i>Tons</i>
By separation and incineration ....	52,307
By controlled tipping ....	9,194
	<hr/>
	61,501
By sales of salvaged waste paper ....	920
By sales of salvaged food waste....	2,464
	<hr/>
	64,885
	<hr/>

Additional quantities of refuse delivered by private traders were also disposed of as follows :—

	<i>Tons</i>
By separation and incineration ....	508
By controlled tipping ....	1,288

Other materials disposed of by means of controlled tipping :—

	<i>Tons</i>
Residual materials from Refuse Disposal Plants (dust, clinker, etc.) ....	23,687
Street sweepings and gully detritus ....	3,715

Total tonnage disposed of at tips 37,884 tons.

Every endeavour is being made to prolong the life of existing refuse tips. The practice of raising the level of low-lying farmland by tipping a layer of refuse and replacing the top-soil continues at Bransholme Farm, where a 10 acre field has been raised and cultivated. A 35 acre field on the same site is now being used.

A new tipping site has been obtained at the Bilton Grange Estate. When completed this will be in the form of a high bank which besides acting as a wind-break, will improve the contour of the land and provide some relief to the flat monotony.

*Street Cleansing.* Some 244 miles of streets and public thoroughfares are swept either daily, three times weekly, twice weekly or once weekly, according to circumstances.

A new system has been introduced in an attempt to give more immediate attention to road surfaces in the event of sudden frosts. Radio telephone has been fitted to three of the department's vehicles which means that instant contact can be obtained at any hour with the driver of each vehicle so fitted. The driver is thus able to give an immediate report on weather conditions in order that appropriate action may be taken. The inauguration of the radio telephone system has already

proved its usefulness, particularly in connection with frost and snow removal, when two of these vehicles are regularly operated throughout the night.

*Gully Cleansing.* The total number of gully emptyings carried out during the year was 74,175.

*Salvage.* Total income from salvaged materials during the year was approximately £30,000, mainly from waste paper, food waste, scrap metals and the sale of steam piped from the Refuse Disposal Plant to an adjoining trading undertaking.

The Concentrator Plant for the manufacture of feeding-stuffs from food waste, continues its valuable work. From an input of 2,464 tons of raw food waste, some 1,691 tons of concentrated feeding-stuff were manufactured. The demand for this material far exceeds the supply, and the value of sales each year is approximately £12,000.

*Public Lavatories and Conveniences.* The department maintains 7 attended and 42 unattended public lavatories and conveniences situated in various parts of the city. Damage is still incurred by the wilful breaking of automatic locks, windows, sparge-pipes and fitments at these conveniences and it is regrettable that such wanton damage to public property continues.

Total staff of the department at 31st December, 1951, was 571 employees.

Total number of vehicles operated by the department was 94 ; comprising refuse collection vehicles, haulage vehicles, mechanical gully emptiers, mechanical sweeping machines, tip tractors, drag-line excavator, etc.

*Closet Accommodation.* There were still approximately 100 privies and pail closets in the city at the end of 1951. All these are in outlying districts where sewers are not available.



## SANITARY INSPECTION OF DISTRICT

The deteriorated condition of many dwellings due to damage by enemy action and war-time restrictions of labour and materials continued to receive the attention of the Department, though in many cases it was only practicable to insist on the execution of such repairs as were essential in order to maintain a minimum standard of habitability, pending future demolition. This patching and re-patching of worn-out houses greatly increased the work of the Department and attention is drawn to the tables headed "Summary of Inspections and Subsequent Action". The following table gives a comparison of the figures for 1938 with those of the present year :—

	1938	1951
Complaints received <i>re</i> housing defects	2,505	9,622
Notices for repairs served on landlords—		
Informal	7,634	9,584
Statutory	407	2,642
Reminder letters, etc.	2,453	6,009
Legal proceedings	-1	87
Work carried out by Council in default of owners	52	641

The total number of inspections made by the Chief Sanitary Inspector and his staff was 86,245 including 34,544 inspections made by the District Sanitary Inspectors on general district work. In addition, 28,368 re-visits and re-inspections were made. The total inspections made in 1950 was 95,163, including 37,758 by the District Sanitary Inspectors.

It will be noticed that there was a reduction of 8,918 in the total number of inspections compared with the figure for 1950. The main reduction was in the number of inspections carried out by the Specialist Inspectors, although the number of inspections by the District Sanitary Inspectors was less by 3,214. This was not due to any decrease in the amount of work requiring the attention of the Department, but to the fact that the number of Inspectors was below the establishment for the whole of the year. In January, 1951, there were vacancies for two assistant Sanitary Inspectors, and, although several changes took place among the junior members of the staff, there were still 3 posts unfilled at the end of the year.

On the other hand there was an increase in the number of notices served, i.e., 9,584 informal and 2,642 formal, compared with 9,478 and 2,413 respectively in the previous year. During the year, 10,826 notices (8,173 informal and 2,653



formal) were complied with. There was also an increase of 30 in the number of cases referred to the Town Clerk for legal proceedings, the figures being 1950, 57 ; and 1951, 87.

Defects were remedied by owners at 9,172 houses as a consequence of informal action, whilst statutory action resulted in the repair of defects at 2,695 houses. The necessary repairs at 614 houses were carried out by the Corporation, in default of the owners, who were charged with the cost incurred.

125 statutory notices were referred to the City Engineer for his Department to carry out the necessary work in default of the owners who were charged with the costs incurred, compared with 163 in 1950. He also repaired 185 sewers in respect of which 313 notices were served under Section 24 of the Public Health Act, 1936. The Department's own workmen carried out work in respect of 105 statutory notices (mainly minor obstructions to drains and broken gullies).

*Housing Repairs.* The outstanding feature of housing repairs is the large number of informal and statutory notices served, when compared with pre-war years. This is particularly well illustrated by the following table :—

NOTICES (INFORMAL AND STATUTORY) SERVED—1936-1951

1936	....	....	....	....	....	....	8,595
1937	....	....	....	....	....	....	9,169
1938	....	....	....	....	....	....	8,041
1939	....	....	....	....	....	....	6,991
1940	....	....	....	....	....	....	6,911
1941	....	....	....	....	....	....	4,032
1942	....	....	....	....	....	....	4,092
1943	....	....	....	....	....	....	5,639
1944	....	....	....	....	....	....	7,059
1945	....	....	....	....	....	....	11,715
1946	....	....	....	....	....	....	13,217
1947	....	....	....	....	....	....	15,326
1948	....	....	....	....	....	....	14,693
1949	....	....	....	....	....	....	12,262
1950	....	....	....	....	....	....	11,891
1951	....	....	....	....	....	....	12,226

One of the reasons for this position is the arrears of maintenance work which has accumulated over the war years and was accentuated by the general disturbance which all property in the city received by enemy action during the war. Although the War Damage Commission have dealt with most of the claims in respect of small houses, some old property can never be re-instated to its pre-war condition, *e.g.*, old roofs which were disturbed and patched will be a recurring source of trouble in the future.



Another reason, and one which is probably more important, is the changed attitude of property owners. Before the war most houses were kept in reasonably good condition by their owners who regarded the property in the light of a long-term investment. They would have been foolish to allow their investment to depreciate by neglect of proper maintenance. Only in the case of poor-type property was it necessary for the Sanitary Inspectors to enforce repairs by statutory action. Now the position has changed. The high cost of repairs and the operation of the Rent Restriction Acts have combined to make many landlords reluctant to carry out repair work and legal compulsion has to be exercised more frequently. Moreover, a tenanted house is sometimes more of a liability than an asset, but if a tenant can be "encouraged" to vacate a house and leave it available for sale, its selling price is automatically enhanced through the shortage of housing accommodation.

TABLE VI

## SUMMARY OF INSPECTIONS AND SUBSEQUENT ACTION

	1950	1951
Complaints registered	10118	9622
<i>Inspections and Investigations, etc.—</i>		
Houses (under Public Health Act)	14061	13499
Houses (under Housing Acts)	2950	948
Houses (for overcrowding)	209	142
Passages, Areas, etc.	4662	3405
Keeping of Animals	598	526
Premises infested with—Rats or Mice	2805	2874
Insect Pests	709	1096
Milkshops and Dairies	1046	801
Ice-cream Premises	1004	808
Caravans	304	320
Drainage	2276	2722
Miscellaneous	7134	7403
Totals (District Inspectors)	37758	34544
Offensive Trades Premises	{ Day 5344 Night 3091	5627 2716
Smoke Observations and Inspections	3272	2688
Pigsty Premises	9862	7364
Common Lodging Houses	{ Day 1382 Night 199	1215 132
Seamen's Lodging Houses	{ Day 1153 Night 189	810 136
Houses-let-in-lodgings	{ Day 3094 Night 433	3527 366
Factories—General and Sanitary Provisions	1615	1261
Means of escape in case of fire	58	47
Shops (Observations and Inspections)	21258	19397
Shops (Sunday Trading Restriction) Act, 1936	4265	4326
Cinemas and Theatres	46	35
Bakehouses	1274	1143
Refreshment Rooms, Kitchens and other Workplaces	870	911
Totals (Specialist Inspectors)	57405	51701
Grand Totals	95163	86245
<i>Revisits and Re-inspections—</i>		
Houses (under Public Health Act)	6299	7119
Houses (under Housing Acts)	4	—
Factories—General and Sanitary Provisions	1051	954
Miscellaneous	22647	20295
Totals	30001	28368



TABLE VI—Continued

<i>Notices served—</i>	1950	1951
Informal .....	9478	9584
Statutory (under Public Health Act) .....	2398	2642
Statutory (under Housing Acts) .....	—	—
Statutory (under Prevention of Damage by Pests Acts). .....	13	1
Letters <i>re</i> Overcrowding .....	142	131
Other Letters, Verbal Notices and Reminders .....	6194	6009
Factories Act, 1937—Power Factories .....	36	32
Non-power Factories .....	10	7
Works of Building .....	8	—
Shops .....	488	320
Smoke Nuisances (informal) .....	54	52
<b>Totals .....</b>	<b>18821</b>	<b>18778</b>
<i>Verbal or Written Cautions re Infringement of Byelaws at Registered Premises—</i>		
Pigsty Premises .....	76	308
Common Lodging Houses .....	150	116
Seamen's Lodging Houses .....	159	60
Houses-let-in-lodgings .....	574	462
Offensive Trades Premises .....	77	122
<b>Totals .....</b>	<b>1036</b>	<b>1068</b>
<i>Result of Action taken—</i>		
Floors relaid or repaired .....	1066	1022
Walls and Ceilings repaired .....	4935	4294
Dampness of walls remedied .....	1884	2301
Roofs repaired.... ..	3310	3483
Spoutings repaired .....	3044	3499
Fall-spoutings disconnected from drains .....	14	6
Windows repaired or made to open .....	1653	1522
Sinks provided .....	50	26
Premises cleansed and/or redecorated .....	366	218
Verminous houses disinfested .....	429	435
Verminous persons cleansed .....	73	94
Drains freed from obstruction .....	1563	1529
Drains relaid or repaired .....	266	344
Yards drained, paved or repaired .....	538	510
W.C.'s reconstructed or repaired, etc. ....	748	714
New W.C. pedestals or cisterns provided .....	329	402
Dustbins provided .....	2004	2337
Rat infested premises cleared .....	1708	2002
Smoke nuisances abated .....	197	69
Miscellaneous improvements effected and nuisances abated .....	3381	3426
Overcrowding abated .....	36	110
<b>Totals .....</b>	<b>27594</b>	<b>28343</b>

TABLE VI—Continued

	1950	1951
<i>Contraventions remedied at Registered and other Premises—</i>		
Pigsty premises	72	28
Common Lodging Houses	123	53
Seamen's Lodging Houses	142	54
Houses-let-in-lodgings	1153	1094
Factories (power and non-power)	162	107
Factories—means of escape in case of fire	7	9
Shops	1212	629
Shops (Sunday Trading Restriction) Act, 1936	57	77
Bakehouses	23	34
Offensive Trades	55	87
	—	—
Totals	3006	2172
	—	—
<i>Houses in which defects were remedied—</i>		
By owners as a result of :		
Informal action	9496	9172
Notices under Public Health Act	2537	2695
Notices under Housing Acts	—	—
By Local Authority in default of owners :		
Under Public Health Acts	811	614
Under Housing Acts	—	—
Houses-let-in-lodgings	113	192
	—	—
Totals	12957	12673
	—	—
<i>Infectious Diseases—</i>		
Cases investigated	1357	2183
Extra visits <i>re</i> contacts	399	408
	—	—
Totals	1756	2591
	—	—



TABLE VII

## STATUTORY NOTICES SERVED DURING 1951

Section of Act served under (1)	No. of Notices served (2)	No. complied with (including those served in previous years and complied with in 1951) (3)	No. not complied with at the end of 1951 (4)	No. of Notices complied with by the Corporation in default of owner (included in Col. (3) ) (5)
<i>Byelaws—</i>				
Houses-let-in-lodgings .....	63	63	—	—
<i>Public Health Act, 1936—</i>				
Section 24 (Sewers) .....	573	569	87	428
Section 39 (Drains, etc.) .....	233	215	51	32
Section 44 (Insufficient closet accommodation) .....	—	1	—	—
Section 45 (Water-closets) .....	150	141	33	18
Section 56 (Yards) .....	61	67	9	14
(Courts) .....	43	63	7	17
(Passages) .....	108	83	49	44
Section 75 (Dustbins) .....	289	283	66	88
Section 83 (Verminous Premises) .....	2	2	—	—
Section 93 (Nuisances) .....	1,118	1,162	275	—
Section 101 (Smoke) .....	1	1	1	—
<i>Factories Act, 1937—</i>				
Section 34(6)—Insufficient means of escape in case of fire .....	—	1	—	—
<i>Prevention of Damage by Pests Acts, 1949—</i>				
Section 4—Works .....	1	2	—	—
Treatment .....	—	—	—	—
Totals .....	2,642	2,653	578	641

*Legal Proceedings.* 87 cases were referred to the Town Clerk for legal action following failure of the owners to comply with statutory notices served under the provisions of the Public Health Act, 1936, compared with 57 in 1950.

In two cases, the owners carried out the work before summonses could be issued, and summonses were withdrawn on completion of the work in 44 cases. 18 cases were adjourned owing to work being in hand, the summonses being subsequently withdrawn. A further summons was withdrawn because the property



in the meantime, had been demolished. Nuisance Orders were made in respect of 9 cases. In one of these cases, the owner was fined £5 for failing to comply on the first occasion, £10 on the second and £15 on the third making a total fine in respect of that particular Nuisance Order of £30 ; failure to comply with the Orders in two other instances resulted in the imposition on the owners of fines of £2 and costs in one case and £2 and 1½ guineas costs in the other. The remaining 13 cases were outstanding at the end of the year.

In addition, 9 cases were referred to the Town Clerk in which persons had failed to supply information concerning ownership of certain premises as required by Section 277 of the Public Health Act, 1936. In all instances, the desired particulars were furnished after letters of warning.

Proceedings were also taken by the Town Clerk in connection with a Statutory Notice served under Section 56 of the Public Health Act, 1936, for the repaving of a terrace area. In this case, the work had been carried out by the City Engineer's Department at a cost of £121 16s. 6d. in default of the owners who refused to pay the sum of £45 7s. 6d. plus £1 8s. 2d. interest making a total of £46 15s. 8d. The owners' grounds for refusal to pay the amount stated was that the work had involved land not belonging to them and that the charges were unreasonable.

At the hearing of the case, on the 3rd April, 1951, His Honour Judge Bernard Shaw ordered judgment in favour of the Corporation for the amount of £46 15s. 8d. less £17 13s. 2d. being the proportionate cost of work executed on land not belonging to the defendants.

Legal proceedings respecting contraventions under the Food and Drugs Act, etc., will be found in the appropriate section of the report.

*Dustbins.* The Council continued, under the powers conferred upon them by Section 75 of the Public Health Act, 1936, to supply dustbins to premises where owners had failed to comply with statutory notices. During the year 88 dustbins were supplied and the cost recovered from the owners concerned, compared with 54 in the previous year.

*Scavenging of Common Courts and Passages.* Twelve cases arose where passages had not been regularly swept or kept clean and free from rubbish. In all but 3 cases after the service of notices, the occupiers made arrangements between themselves for the necessary cleansing which was carried out before it became necessary to take statutory action. In the remaining 3 cases the Public Cleansing Superintendent carried out the necessary work in default of the occupiers who were charged with the cost in accordance with the provisions of Section 78 of the Public Health Act, 1936.



*Manure Pits.* 3 notices were served during the year on persons who had failed to maintain manure pits in the condition required by No. 14 of the Local Bye-laws with respect to Nuisances. The notices were complied with in 2 instances, and in the remaining case the notice was still outstanding at the end of the year. 3 notices served in 1950 were also complied with in the year under review.

*Pigeons, Nuisance from.* It was necessary for the Council to take action under Section 48 of the Kingston upon Hull Corporation Act, 1930, regarding nuisance from pigeons. The Act empowers the Corporation to trap doves or pigeons believed to have no owner, so as to abate or mitigate any nuisance, annoyance or damage caused by these birds congregating at any place in the city.

Considerable difficulty is experienced by the Department in dealing with nuisances of this nature because the pigeons invariably choose high and inaccessible places on old buildings for nesting, and the only methods of trapping permitted by law are those which cannot injure the birds. Over a period of years the roosting places become sources for the spreading of infection.

Several new methods of trapping were tried, including the use of a specially constructed pigeon-cote designed to allow the entry of the birds, but to prevent their exit. Usually, however, the most effective method was for the Department's workmen to enter the roosting places at night and use stringed nets. This system could, of course, be applied only to buildings where the birds were nesting and roosting in lofts, particularly at schools and certain other public buildings. In other cases, pigeon-cotes placed in advantageous positions had to be relied upon.

Altogether, 195 pigeons were trapped and 42 eggs destroyed. Ringed birds were sent to the National Homing Union at Gloucester for return, if possible, to their owners.

Unfortunately, many of the large buildings in the city are of old design and incorporate ledges beneath overhanging eaves, cornices and other structural features which are an attraction to pigeons seeking a place to nest. The Town Planning Officer is aware of the present position and will doubtless take these matters into consideration in connection with new buildings.

*Smoke Abatement and Atmospheric Pollution.* The smoke inspectors continued to give advice, as in the previous year, on the efficient and economic burning of low grade fuel, including, where necessary, suggestions for improvements in furnace conditions.



The number of smoke observations, each of half an hour duration, was 1,493, and 1,195 inspections were made of the premises concerned. Cautions were given in 145 instances, 52 of which were by letter, where smoke or dust, etc., had been emitted in such quantities as to be a nuisance. Four follow-up letters were sent in relation to these cautions. It was necessary during the year to serve one statutory notice under Section 101 of the Public Health Act, 1936, and this was still outstanding at the end of the year. One statutory notice served in 1950 was complied with in 1951. At the end of the year 69 nuisances had been abated and the remaining 76 were receiving attention.

108 improvements were carried out to boiler plants in order to minimise or obviate nuisances. Such improvements included: chimneys heightened, 30; stoking and fuel improvements, 53; and boiler alterations, 25.

18 plans of proposed trade premises utilising boiler plant were examined and 12 were passed as meeting with the requirements of the Department. In 6 cases recommendations concerning alterations and/or improvements were forwarded to the firms concerned, who took steps to carry out the suggested amendments.

Included in the figures set out above are 5 communications and one second letter sent to firms in relation to 26 complaints concerning emanations of dust, etc., from different premises in the city. Verbal action was taken in the remaining 21 cases.

Numerous dust-collecting plates were exposed and dust samples examined and classified. Interviews and discussions took place with works managements concerning dust retention, and where necessary, advice was tendered.

Included in the above 26 complaints of dust nuisances, were 18 in respect of cement dust. The factory concerned was redundant and closed for production purposes prior to the war but, owing to the country's increased demands for cement, it was reopened. Since its reopening, efforts have been made to improve the dust collecting plant at various times, but the extra strain thrown upon the machinery by increased output has shown that the dust retention methods in use are incapable of preventing a serious nuisance.

Cement works are included in the Schedule to the Alkali, etc., Works Order, 1935, the provisions of which are administered by H.M. Inspector of Alkali, etc. Works and, accordingly the Inspector concerned has been kept constantly acquainted with the position affecting these works. Arising out of requests by the Corporation for more efficient methods of dust retention to be installed at the works, H.M. Inspector was present at a discussion which took place between the Chairman of the Company and a representative of the Corporation. As a defence



against installing modern plant, it was argued that the works had a limited life for manufacturing purposes, and, in consequence, it was uneconomic to spend large sums of money on expensive machinery. After this interview, production was temporarily reduced at the works, but the nuisance still continued.

The Cleansing and Sanitary Committee therefore considered the question of legal proceedings. The first step in this direction was to seek the consent of the Minister of Local Government and Planning, as required by Sub-section (2) of Section 92 of the Public Health Act, 1936, and this was done. The Minister subsequently informed the Council that negotiations had taken place between the Chief Alkali Inspector and the Chairman of the Company, as a result of which it was decided to instal dust arrestment plant for two of the large kilns and the order for the necessary apparatus had been placed at the end of the year. The Minister's consent to legal proceedings was accordingly withheld. In order to secure delivery of the new plant as soon as possible, H.M. Inspector had approached the Ministry of Works on the subject of priority for the steel and had emphasised the urgency of the need.

*Atmospheric Pollution Tests.* Owing to adverse weather conditions which persisted throughout the year, it was not possible to make a consecutive series of 24-hour tests to determine the daily average deposits, and it has been necessary temporarily to discontinue the special atmospheric pollution tests referred to in the 1950 Report. The tests carried out monthly by the City Analyst are referred to elsewhere in this Report.

In the early part of the year, the Council decided to promote a General Purposes Bill and an opportunity was taken to include, among other matters, clauses giving power to require prior approval by the Authority in relation to fuel-burning installations and power to set up Smokeless Zones. Unfortunately, both these clauses met with opposition at the Town's Meeting and were deleted from the Bill.

*Water Cooling Tower—Moisture Deposits.* The alterations to the Water Cooling Tower of the Yorkshire Electricity Board, in progress in 1950, were completed during 1951. Frequent recordings of moisture deposits before and after the modifications, showed considerable improvement. No complaints on this subject were received during the year.

*Deposits of Soot.* The City Analyst examined periodically throughout the year the contents of three atmospheric pollution gauges, the results obtained being as follows :—

Gauge placed at—	Tons per Square Mile per Month.		Total (in tons) for year.
	Maximum	Minimum	
(1) Pearson Park ....	36·8	17·1	295·5
(2) Springhead Golf Course ....	19·1	8·0	147·4
(3) Dunswell Waterworks ....	19·6	8·5	159·2



## PREMISES AND OCCUPATIONS CONTROLLED BY BYE-LAWS AND REGULATIONS

*Offensive Trades.* The number of trades classified as "offensive" in the city at the end of 1951, was 16, involving 142 businesses and including 111 premises in respect of which the Corporation's consent operates for a limited period.

During the year 4 applications were received for consent to establish new businesses, all of which were granted, subject to the execution of certain works necessary to ensure that the premises satisfied the requirements of the Department. 12 applications for extensions, involving new premises in 3 cases, were approved. A change of occupier occurred in connection with 3 businesses, and in one instance the premises were removed from the Register of Offensive Trades owing to the discontinuance of the business. A change to other premises occurred in connection with one business. One business was found to be operating without the Corporation's consent, but owing to the unsuitability of the premises, the Company decided to cease operations.

All premises used for offensive trade purposes are subject to systematic day and night observations. During 1951, 5,627 day and 2,716 night inspections were made of these premises and other places where effluvium nuisances might arise.

29 informal notices were served and there were 93 verbal cautions and follow-up letters. 87 contraventions were remedied.

As a result of representations made by the Department, structural improvements were effected in 41 cases, and improved operations to minimise possible nuisances in 16. 18 plans of new premises and plant were examined, 4 of which required alterations in order to conform with the requirements of the Department. 57 contraventions of the Bye-laws were remedied during the year.

Sixteen complaints were received in respect of offensive smells. They comprised smells from offensive bilge water discharged into one of the City's Docks, fumes from cellulose spraying, effluvia from a tannery, the refuse destructor, and from fish frying. There was also one complaint of a smell from fish oil extraction. All were dealt with satisfactorily.

A nuisance caused at the works engaged in fish oil extraction, from which was the subject of concern in 1950, the management, in fulfilment of their undertaking to the Authority, installed new plant to expedite the treatment of incoming fish. More than £30,000 was spent by the Company in providing presses, separators, purifiers and other apparatus necessary for the work. As an experiment, an ozone



plant was installed in a section of the oil extracting plant to reduce odours given off during processing. From observations up to the time of reporting, the plant has helped considerably to reduce effluvia. Other additions and improvement to plant are envisaged in 1952.

A new gut scraping works was completed and operating satisfactorily during the year. The new works replaced old premises which had been in use for more than 70 years.

*Public Sewers.* The repairs being executed at the end of last year in order to prevent petrol entering a public sewer were completed and subsequent investigations indicated no further cause for complaint.

Following complaints, investigations were undertaken in suspected cases of petrol and diesel oil in public sewers, the former in the east and the latter in the west areas of the City. No action was found to be necessary in either case.

There were two instances of liquor in a public sewer from a gas producing plant with possible danger. The works concerned were, at the end of the year, in process of completing the installation of a new and larger type gas plant, and no further action was taken after the Department had been satisfied that the trouble had been obviated.

Noxious smells were also found to arise from a trunk sewer as a result of condensate from the treatment of oil residue being discharged into it. Arrangements were made for the condensate to be collected in containers and dispatched to works outside the City for further treatment.

There were also several complaints of smells arising from a particular sewer. Upon investigation, the effluvia was found to be from ordinary sewage and the matter was referred to the City Engineer for attention by his Department.

*Fried Fish Shops.* 7 applications to establish the business of fish fryer were referred to the Department by the Food Executive Officer. Six were recommended for approval subject to the carrying out of certain works but the remaining one was not recommended because the premises could not be made suitable for the purpose.

*Pig Keeping.* The number of premises registered as complying with the City Bye-laws was 144, provided with 472 sties. Pigs were also kept at 247 additional premises (comprising 627 sties) under the Emergency Powers (Defence) General Regulations 62 (b). 7,364 inspections were made. There were 308 contraventions necessitating the service of 291 informal notices and 17 verbal cautions were given.



Structural improvements were carried out at 20 sties, and cleansing was undertaken at 38 premises at the request of the Department. 28 of the contraventions had been remedied at the end of the year and the remainder were receiving attention. Rat infestations were dealt with at the request of occupiers in 2 cases.

11 plans of proposed new sties were examined and found to be satisfactory.

On the 1st July, 1951, the Defence Regulations (No. 1) Order, 1951, came into operation. This order revoked Regulation 62B of the Defence (General) Regulations, 1939, which had the effect of suspending restrictions on the keeping of pigs, hens and rabbits by tenants and occupiers of land. On the revocation by the above Order of Regulation 62B, Section 12 of the Allotments Act 1950 (which contains similar provisions for hens and rabbits not kept commercially, but not for pigs) came into force and the local Bye-laws with respect to pigkeeping again became operative.

Prior to the 1st July, 1951, the number of premises at which pigs were being kept owing to the operation of Regulation 62B was 319. Of this number, 240 either complied with the Bye-laws, or could without extensive reconstruction be made to do so. The remaining 79 premises were so constructed that they could not comply with the Bye-laws mainly on account of their close proximity to dwelling-houses and the persons having control were requested to cease using them for the purpose of pigkeeping.

Unfortunately, a somewhat serious outbreak of foot and mouth disease in the latter part of the year prevented the movement of swine, other than for slaughter, and delayed strict enforcement of the Bye-laws in relation to these particular premises.

Of the 240 pigsties considered suitable, many were found, upon detailed inspection, to require alterations or additions, mostly of a minor character so that they could be made to comply fully with the bye-laws. In the main, the contraventions comprised unsatisfactory manure receptacles, defective walls of sties, inadequate drainage, etc., and informal notices were served on the occupiers. Most of the contraventions had been remedied at the end of the year, and those outstanding were receiving attention.

*Common Lodging Houses.* At the end of the year there were 54 registered Common Lodging Houses in the city containing 300 bedrooms or cubicles with accommodation for 871 single lodgers and 37 married couples. 1,170 day and 132 night visits were made. 45 visits were also made to unregistered premises where it was suspected that they were being used as Common Lodging Houses. Contraventions of the Bye-laws were found in 60 instances, mostly of a minor



character and there were also 52 contraventions of the provisions of the Public Health Act. Seven letters were sent and 109 verbal cautions were given to the persons concerned. The number of houses on the register at the end of 1950 was 56, providing accommodation for 881 single lodgers and 47 married couples.

88 verminous persons were referred to the Disinfecting Station for treatment.

At the end of the year the requirements of the Bye-laws had been carried out in all but 7 of the above cases, and, in relation to these, steps were being taken by the persons concerned with a view to compliance with the provisions of such Bye-laws. All the contraventions of the Public Health Act had been satisfactorily dealt with at the 31st December, 1951.

It was not found necessary to take legal proceedings in any case during the year.

*Seamen's Lodging Houses.* The number of these houses on the register was 24 containing 583 bedrooms or cubicles with accommodation for 764 seamen. The number of houses on the register in 1950 was 26, with accommodation for 810 seamen. Included in the 24 houses above-mentioned is the Victoria Mansions, Great Passage Street, which provides accommodation for 487 men, and the Flying Angel Club, Alfred Gelder Street, providing accommodation for 26 men. The sleeping places at the former consist of 476 cubicles, and 11 rooms and at the latter 22 rooms.

810 day and 136 night visits were made. In 57 cases the requirements of the Bye-laws were not being carried out and 28 contraventions of the provisions of the Public Health Act were found. 53 verbal cautions were given and it was necessary to serve 7 informal notices. It was not found necessary during the year to caution any person who was letting unlicensed lodgings to seamen.

At the end of the year 54 of the contraventions of the Bye-laws had been remedied and the remaining 3 were receiving attention. All the contraventions of the Public Health Act were remedied.

In no instance was it necessary to institute legal proceedings to enforce compliance with statutory requirements.

*Houses-let-in-Lodgings.* During the year there was a decrease in the number of houses-let-in-lodgings registered under the Bye-laws, the total being 293 compared with 307 at the end of 1950. There were 22 new registrations and 36 houses were deleted from the register. All the deletions occurred because the occupiers of the houses concerned had ceased to take the requisite number of lodgers.



The 293 registered houses-let-in-lodgings contained 1,907 registered rooms, of which 188 unfurnished and 206 furnished were used for sleeping purposes only ; and 350 unfurnished and 517 furnished were used for sleeping and living purposes.

The total number of visits paid to houses-let-in-lodgings was 3,893, including 366 at night. 373 notices, including 185 in respect of cleansing, were served and 229 verbal cautions or second letters were given or sent in respect of infringements of Bye-laws. 384 notices, including the 185 for cleansing, were complied with. In addition, 51 notices outstanding at the end of 1950 were complied with during 1951.

It was necessary during the year to institute legal proceedings in respect of four houses-let-in-lodgings where the owners had failed to comply with the terms of statutory notices served on them under Section 93 of the Public Health Act, 1936.

In one case, the work was carried out satisfactorily before the summons was issued and two cases were adjourned because the work was in hand, the summonses being subsequently withdrawn on payment of costs. A Nuisance Order was made in the fourth case and the owner was fined £2 for failing to comply ; the work in this case was subsequently completed to the satisfaction of the Department. Particulars of these cases are included in the information given in the paragraph headed " Legal Proceedings " on page 50.





*Factories Act, 1937.* There were 387 non-power and 1,423 power factories on the Corporation register. 2,237 inspections, including 954 re-inspections were made of factories, and 161 contraventions were found. The infringements mainly comprised unsatisfactory sanitary conveniences.

During the year 2 additional sanitary conveniences were provided at factories and 50 unsatisfactory sanitary conveniences were made satisfactory.

The following summary gives details of inspections made and defects found :—

**TABLE IX**

SUMMARY OF INSPECTIONS

	<i>No. of Inspections</i>	<i>Notices Served</i>	<i>Prosecutions</i>
Factories (with mechanical power) ....	554	32	} Nil
Factories (without mechanical power) ....	729	7	
Works of Building ....	25	—	
	<u>1,308</u>	<u>39</u>	

The above figures include 42 inspections of fire escapes in power factories, and 5 of fire escapes in non-power factories. (Visits to Bakehouses are not included.)

SUMMARY OF DEFECTS FOUND :

<i>Details</i>	<i>No. of Defects</i>	
	<i>Found</i>	<i>Remedied</i>
Want of cleanliness (Section 1) ....	23	12
Overcrowding (Section 2) ....	1	1
Unreasonable temperature (Section 3) ....	4	2
Inadequate ventilation (Section 4) ....	1	—
Ineffective drainage of floors (Section 6) ....	1	—
Other Nuisances (P.H.A. 1936) ....	32	23
Sanitary Accommodation (Section 7)—Insufficient	11	12
Unsuitable or defective	69	50
Not separate for sexes	4	1
Other offences (excluding offences relating to outwork and offences under the Sections mentioned in the Schedule to the Ministry of Health (Factories and Workshops Transfer of Power) Order, 1921, and re-enacted in the Third Schedule to the Factories Act, 1937) ....	15	6
<b>Totals</b> ....	<u>161</u>	<u>107</u>

*Outworkers.* The 206 persons affected (73 males and 133 females) were principally engaged in net braiding and tailoring. The employers numbered 46.



*Means of Escape in Case of Fire.* 15 applications for certificates were received and 14 were issued. 47 inspections were made, 42 being at factories in each of which more than 10 persons were employed. Additional means of escape were found to be required at 3 factories. There were 12 factories where the means of escape were not in order ; the number put in order was 6.

*New Factories.* Plans for 228 new factories were submitted for examination. 16 such plans did not show sufficient means of escape in case of fire, and in 13 other cases suitable sanitary conveniences were not indicated. In all cases the owners or architects were notified and undertook to comply with the requirements of the Authority.

*Shops Acts, 1950.* There were 5,372 shops on the Register in which 4,307 males and 5,772 females were employed. 2,005 shops were inspected and 683 contraventions, principally failure to keep prescribed records and notices, were found. On re-visits being made, 629 contraventions had been remedied. 17,392 observations were made of shops, 113 of which were found to be open after the prescribed closing hours. 320 notices were served and 90 verbal cautions given : during the year 304 notices and 25 verbal cautions were complied with.

*Shops Act, 1950 (Sunday Trading).* 4,326 inspections were made of shops, at 77 of which contraventions were found. These were subsequently remedied as the result of cautions to the persons concerned.

*Shops Act, 1950—S. 42—Alteration of General Closing Hours and Closing Orders for Exhibitions.* 2 applications were made by trade organisations for Exhibitions to be exempted from the provisions of the Shops Act with regard to general closing hours. Both applications were approved and, the Council, being satisfied that the retail trade to be carried on was ancillary to the main purpose of the Exhibition, made Orders substituting the hour of 10 p.m. for the general closing hour during the period of the Exhibitions. Both Orders were made subject to the observance of conditions in relation to weekly half holidays, proper intervals for meals and the employment of young persons.

*Shops Act, 1950—S.53—Persons observing the Jewish Sabbath.* One shop occupied by a person of the Jewish faith was registered by the Local Authority for Sunday opening and two shops previously registered were removed from the Register.

At the end of the year, there were 7 shops occupied by persons or firms of the Jewish religion registered for opening on Sundays.



*Plans for Shops.* 19 plans were submitted for examination, 2 of which were subsequently amended as they did not indicate suitable sanitary conveniences.

*Cinemas and Theatres.* The Factories, etc., Inspectors made 35 inspections of cinemas and theatres, which were found to be in a satisfactory condition.

*Rag Flock and Other Filling Materials Act, 1951.* This Act, which came into operation on the 1st November, 1951, is to secure the use of clean filling materials in upholstered articles and other articles which are stuffed and lined. It requires the registration by the Local Authority of all premises (with certain exceptions) where there is carried on any form of upholstery, and the licensing by the Local Authority of any premises at which rag flock is either manufactured or stored prior to delivery to registered premises. The Act empowers the Local Authority's authorised officers to take samples of any filling materials which appear to be filling materials to which the Act applies, and prescribes penalties for offences against the provisions of the Act. The Rag Flock and Other Filling Materials Regulations, 1951, which also came into operation on the 1st November, 1951, prescribe standards of cleanliness for each kind of filling materials to which the Act applies, specify prescribed analysts for purposes of tests, fees to be charged in connection therewith, and the form in which certificates of results are to be given. The Regulations also set out the form in which records are to be kept by occupiers of premises registered or licensed under the Act.

Steps were taken, by public advertisement in the press, to draw the attention of persons or firms concerned to their obligations under the Act, and the following premises were registered and licensed.

	No. of Persons or firms	No. of Premises
Upholsters (Registration) ....	11	12
Rag Flock Stores (Licensing) ....	2	2

There is no establishment in the City where Rag Flock is manufactured.

*Tents, Vans and Sheds.* Of the 3 applications outstanding at the end of 1950, one was not proceeded with. The other two were from persons who wished to occupy trailer caravans for living purposes on sites in the City. Applications were also made by the persons having control of the land concerned for the Corporation's approval to the land being used for the purpose. Neither of the cases were approved by the Council, mainly on the grounds that the sanitary arrangements could not be made satisfactory.

In one case, both the owner of the land and the occupier of the caravan appealed against the Corporation's decision in accordance with the provisions of Section 45 of the Kingston upon Hull Corporation Act, 1930. The appeal was heard in the Stipendiary Magistrate's Court on the 27th June, 1951, when the



Learned Stipendiary Magistrate dismissed the appeal because he was of opinion that the Appellants had not shown that the Corporation had been unreasonable in their decision.

No other applications were received during the year although it was necessary verbally to caution several persons who were keeping movable dwellings on land without the Corporation's approval. In all these cases, it was found that the occupiers did not intend to remain for more than three months, and were therefore not required to obtain the Corporation's approval. Routine visits were paid by the Inspectors until the caravans had vacated the sites so as to ensure that the Public Health Act provisions were complied with.

During the last few years, no application has been received to occupy the 4 sites originally approved by the Corporation for occupation by movable dwellings and the sites have either fallen into disuse or are becoming built up. Difficulty is often experienced in connection with caravans which come into the City and are placed on vacant sites without consideration as to their suitability for the purpose. When this happens it is usually necessary for the Department to move them off the sites whereupon they often change to some other site which is equally unsuitable. It appears, therefore, that there is a need for a suitable equipped site for caravans, particularly for those belonging to travelling showmen who visit the City at Fair time.

*Rent and Mortgage Interest (Restrictions) Acts, 1920 to 1939.* Only one application was received for a certificate of disrepair under the above Acts. In this case, although the certificate was granted by the Council, the landlord carried out the necessary repairs before the certificate could be issued. No applications were received from landlords for Reports under Sections 5(2) of the 1923 Acts in respect of properties for which certificates of disrepair had previously been granted.

*Hull Fair.* During the period of the Fair, the vans on the Fair Ground and in the vicinity were visited daily by the Sanitary Inspectors who enquired as to the state of the health of the occupants. There were no tents or booths used for living purposes, and no case of infectious disease was discovered.

Compared with the 1950 Fair, there was a slight increase in the number of living vans, but a decrease in the number of adults occupying them. The number of children was found to be considerably higher than in 1950. The following are the comparative figures :—

Year	Persons in occupation		
	Vans	Adults	Children
1949	322	690	234
1950	280	584	166
1951	284	579	224

There was no case of overcrowding.



Adequate sanitary provision was made by the Public Cleansing Superintendent by way of 8 privies and 15 dustbins, although many showmen provided their own chemical closets and dustbins, all of which received regular attention by the Public Cleansing Department. There was no instance of a nuisance arising from the temporary sanitary accommodation.

Day and evening observations were made of the permanent sanitary conveniences provided on the Fair Ground and in Walton Street, and the Health Visitors assisted in the evenings by inspecting the ladies' section, also water-closets attached to private houses and advertised for public use as ladies' lavatories. Apart from occasional "peak" periods when the accommodation was fully utilised, no serious difficulty was encountered.

The Lodging House Inspectors visited 741 houses in the Streets adjacent to the Fair and found 20 houses providing temporary accommodation for 53 lodgers, comprising 48 males and 5 females. There was no contravention of the Bye-laws and, in general, the houses were well conducted and clean. No case of sickness was discovered and no infringement of the Housing Act, 1936, was found. Night visits were paid to the 741 houses and the accommodation provided was found to be sufficient. Two registered Common Lodging Houses and one licensed Seamen's Lodging House were found to be providing accommodation for 47 men employed in connection with the Fair.

108 diesel generating plants were assembled on the ground and 67 were in use. Most of the proprietors were aware of the Regulation requiring a minimum height of 15 feet for exhaust pipes and had taken steps to comply with it. It was, however, necessary during the progress of the Fair to give 15 verbal cautions and serve one informal notice before full compliance with the Regulation was obtained. One steam unit burning coke was found to be in use. There were also 6 refreshment stalls using coke and provided with a total of 20 chimneys. Most of the remaining stalls made use of calor gas for cooking purposes.

On this occasion, the use of coal was wholly exclusive to domestic needs and atmospheric pollution from the generating plants and refreshment stalls was negligible. 253 visits and observations were made by the Smoke Inspectors.

The Sampling Officer under the Food and Drugs Act took 22 samples of foods being sold at the Fair and submitted them for analysis under the provisions of the Food and Drugs Act. These samples included potato crisps, toffee apples, ice-cream and articles of confectionery. Appropriate action was taken by the Department in relation to those samples which were adversely reported upon by the City Analyst.



26 samples were also taken of the following commodities and submitted for Bacteriological examination :—Ice-cream, 12 ; Ice lollies, 3 ; toffee apples, 5 ; Shell-fish, 6.

Of the 12 samples of ice-cream, 5 were classified in Grade I, 4 in Grade II, 2 in Grade III and 1 in Grade IV, and appropriate follow-up measures were taken by the Department in relation to the unsatisfactory samples.

The 3 samples of ice lollies were of satisfactory character. Of the 6 samples of shell-fish, 4 were returned as satisfactory, but unfavourable reports were received concerning the remaining 2. The reports on the unsatisfactory samples were passed to the Chief Food Inspector for attention. The results of the examinations of the 5 samples of toffee apples were satisfactory in each case.

#### PREVENTION OF DAMAGE BY PESTS ACT, 1949

*Rats and Mice Destruction—Treatment of Private Houses.* A rat-catcher is employed mainly upon the treatment of dwelling-houses in the city. The rodent operatives also undertake private dwelling-house treatment, mostly by poisoning methods, the cost being allocated between the private dwelling-house account and the business premises account according to the time spent on each. The Authority's Sanitary Inspectors are appointed as Officers under the Prevention of Damage by Pests Act, 1949, and they enquire into causes of rat infestation, and, where necessary, give advice on the most effective measures necessary for control. They also supervise structural repairs and improvements necessary to make premises rat-proof, and deal with any special conditions which attract or harbour rats.

Since 1947 the treatment of private dwelling-houses has been carried out on a block control system under which the city is divided up into blocks having convenient or natural boundaries. The result of each investigation and treatment is entered in the records of the block concerned. When it becomes apparent that an unusually large number of treatments are being undertaken in respect of any particular block, the whole block is earmarked for systematic poisoning by the rodent operatives. In this way a careful check is able to be kept of high infestation points in the city.

During 1951, 26,687 rats and mice (including 12,049 eradicated at business premises and 2,476 on Local Authority property, of which special references are made in the following paragraphs) were destroyed in the city by the following methods :—

Trapping	....	....	....	....	....	....	872
Poisoning	....	....	....	....	....	....	25,662
Gassing	....	....	....	....	....	....	153
						————	26,687



These were caught or killed at the undermentioned types of properties :—

Dwelling-houses	....	....	....	....	....	2,002
Business premises	....	....	....	....	....	411
Local Authority property	....	....	....	....	....	89
Land, embankments, piggeries, etc.	....	....	....	....	....	5
					—	2,507

The total number of rodents destroyed in 1950 was 23,162 and in 1949 15,803. There was an increase of 3,525 in the number of rats killed compared with the figures for 1950. This was mainly accounted for by an increased number of requests from occupiers of business premises for the services of the Department's rodent operatives.

During the year 2,728 complaints, mostly from occupiers of dwelling-houses, were received of infestation of premises by rats and/or mice, compared with 2,805 in 1950, and these were investigated by the Sanitary Inspectors. Informal communications were, in a number of instances, addressed to persons whose premises were rat infested, requesting them to rid the premises of rats and to take steps to prevent further infestation. Special attention was given to the treatment of war blitzed areas where evidence of breeding was found.

*Rats and Mice Destruction—Treatment of Business Premises, etc.* The Department employs 6 full-time rodent operatives who also deal with private dwelling infestations requiring treatment by poisoning methods.

Treatment consisting mainly of poisoning, is carried out at the request of the owners or occupiers of business premises and a charge is made covering the cost of labour and materials. The methods of poisoning used are in accordance with the recommendations of the Ministry of Agriculture and Fisheries.

The Department continued, on request, to deal with large infestations at business premises on a yearly contract basis. This type of treatment is confined wholly to reservoir and major infestations and has the advantage of enabling better supervision to be exercised and reduces clerical work to a minimum. Systematic poisoning is carried out two, three or four times during the contract period, supplemented by treatment with traps in the intervals if found to be necessary.

Charges are fixed according to the type and size of the business, and the amount of work estimated to be required. At the end of the year 28 businesses (including 8 food preparing premises) were being treated under contract, compared with 20 in 1950. In addition, there were 4 firms who received 4 regular treatments per annum, not on a contract basis.



The following table shows the treatments carried out in connection with business premises and Local Authority property during 1951 :—

Infestations treated (including re-treatments)				Estimated Total kill	No. of bodies found	No. of re-treatments carried out	
Reservoir (Over 200 rats)	Major (Between 20 and 200 rats)	Minor (less than 20 rats)	Total			Reservoir	Major
						6	225
				14,525 (includes 3,326 mice)	3,754 (includes 1,029 mice)		

Of the 14,525 rodents estimated killed, 420 were destroyed at the Hull Corporation's refuse tip at Hessle and on the adjoining railway embankment. 186 bodies were recovered in connection with these two treatments.

The total number of rodents estimated killed at business premises, etc. in 1950 was 12,193.

During the early part of the year, intensive rodent control measures were undertaken on St. Andrew's Dock, following the occurrence of Weil's disease among fish workers. In order to deal with the infestation effectively, it was considered desirable to complete the operation within two or three weeks and, as the area extended for more than 1½ miles along the river front, and to a considerable depth inland over railway property, it was obvious that the treatment could not be carried out without reinforcing the Department's 6 rodent operatives. Consequently, the Ministry of Agriculture and Fisheries (Infestation Control Division), who dealt with one particular part of the area, supplied four men for one week and these were further reinforced by six men seconded from British Railways Staff.

The premises of 41 firms were involved in the whole operation and all readily agreed to bear their respective portion of the cost, which, owing to the size of the area, was considerable.

Altogether 3,659 points were pre-baited, and there were 597 poisoned baiting points, utilising zinc phosphide and "Antu." The final kill (estimated by the amount of poison bait taken from points) was 1,108 rats, and 155 bodies were recovered.

Post-baiting, and a certain amount of re-treatment where necessary, was carried out a few weeks after the completion of the work.



In the November, the Health Department entered into a yearly contract with the Docks and Inland Waterways Executive for the regular treatment of the area of Nos. 1 and 2 Markets, St. Andrew's Dock. A contract was also taken up by the British Railways for the treatment of Beecroft's Field, which adjoins the above Markets, and where empty fish boxes are stored. The initial treatment in respect of both contracts resulted in an estimated kill of 190 rats, with 26 bodies recovered.

The following table gives information on the work of the Authority for the year ended 31st December, 1951, and was included in a report for that period made to the Ministry of Agriculture and Fisheries.

TABLE X.

	TYPE OF PROPERTY				Total
	Local Authority	Dwelling-houses	Agricultural	All other (including Business and Industrial)	
I.—Total number of properties in Local Authority's District	333	85,993	48	11,571	97,945
II.—Number of properties inspected by the Local (a) Authority during 1951 as a result of (a) notification or (b) otherwise (b)	85	2,202	11	430	2,728
	8	37	20	81	146
III.—Number of proper- <i>[Major</i> ties under (II) found to be infested by rats <i>Minor</i>	30	162	3	149	344
	33	1,168	—	181	1,382
IV.—Number of properties under (II) found to be seriously infested by mice	28	672	—	81	781
V.—Number of infested properties (under III and IV) treated by the Local Authority	91 (including 2 treatments of Refuse Tip)	2,002	3	411*	2,507
VI.—Number of Notices served under Section 4— (1) Treatment	—	—	—	—	—
	(2) Structural works (proofing)	—	—	1	1
VII.—Number of cases in which default action was taken by the Local Authority following issue of notice under Section 4	—	—	—	—	—
VIII.—Legal proceedings	—	—	—	—	—
IX.—Number of "Block" Control Schemes carried out	—	—	—	8	8

\* Excluding 65 re-treatments.



For the purposes of the previous table :—

Property means a property separately entered on the valuation roll ;

Council houses are included under dwelling-houses ;

Premises used by the Local Authority for trading purposes are included under business premises ;

Sewer treatments are not included ;

Combined dwelling and business premises occupied by the same person are included under business premises.

*Mosquito Control.* No complaint was received during the year of extensive mosquito breeding in any of the large open land drains. The Department, however, carried out routine spraying of water contained in certain bomb craters in the city and water butts on the various Corporation allotments. Observations were continued throughout the year and owners of places likely to provide breeding grounds were advised as to the necessary precautionary measures to be taken.

*Eradication of Bed Bugs and other Insect Pests.* During the year the Department was called upon to take steps for eradication of bed bugs at 12 Council houses, 68 private houses and 5 lodging houses.

Disinfestation for fleas was also undertaken at 12 Council houses, 18 private houses, 2 lodging houses and 1 business establishment. Moth infestation was dealt with in one case at the request of the occupier.

Spraying with liquid insecticides containing D.D.T. has been adopted for freeing infested houses from bed bugs.

25 treatments including 12 at business premises were undertaken for infestation by beetles and cockroaches, etc. Advice was given and suitable insecticides supplied in 998 cases where the Department's help had been sought in relation to premises infested with these and other types of insects such as crickets, silver fish, furniture beetles, ants, etc. The number of cases in which insecticides were supplied in 1950 was 848.

Insect infestations treated showed an increase on those for 1950, although this was mainly due to a large increase in the number of woodworm infestations. The following figures give a comparison between the two years.

<i>Type of Infestation</i>	1950	1951
Bugs ....	78	85
Fleas ....	43	33
Moths ....	2	2
Beetles, Flies, etc. ....	29	25
Woodworm (excluding re-treatments) ....	62	125
	—	—
Total ....	214	270
	—	—



Anxiety is felt at the continued increase in the number of cases of woodworm which the Department is being called upon to deal with. In 1951, the number of new cases which came to our notice was 125 compared with 62 in the previous year, or an increase of 63. Of this figure of 125, 99 infestations were at Council houses, 23 at private dwelling-houses and 3 at schools. Some of these were, of course, only minor infestations and were readily dealt with by injecting liquid preparations into the worm holes and spraying the surrounding timber with suitable insecticides during the early summer months, when the adult insects were emerging from the pupal stage. In quite a number of cases, however, the infestation was more serious and necessitated the removal of the affected timber and its immediate destruction by burning. The new wood used for replacement was specially treated against re-infestation. Treatment by heat is also adopted where practicable, and, in some circumstances, it has been found necessary to employ H.C.N. gas.

Co-operation was again necessary with the City Architect's Department in relation to infestations at Council houses, and special insecticide was supplied in bulk quantities for use on various housing estates. The Department's workmen also carried out 33 re-treatments of Council houses at which the original infestation had been treated in 1950. This was in accordance with the Department's practice to follow-up the more serious cases because it has been found that one treatment is seldom sufficient. Infestations of this nature are undoubtedly a costly item as, in many cases, considerable damage is done before advice is sought. For this reason, the Department continued their propaganda work on the subject as much as possible and attention is always given to the subject in the Health Department's publicity displays. Leaflets giving information about the habits and breeding of woodworm together with details of the best methods of destruction were distributed to the public in appropriate cases.

The Department was also called upon to deal with an infestation of woodworm at one of the City's museums. The infestation was found to be considerable and of long standing. Many of the exhibits, which were of old wood, had become infested and it was necessary to use a considerable quantity of insecticide in connection with the work.

Disinfectants were supplied in bulk quantities at request in 35 cases, mainly for use at the Local Authority's properties, voluntary associations and business premises.

It is pleasing again to note an increase in the number of cases where advice was sought in connection with nuisances from insect pests. This indicates a public consciousness of this important branch of sanitation and a willingness to seek



advice on the best and latest methods of dealing with the problem. There is no doubt that this public interest has been aroused in no small measure by the publicity which is constantly being given to sanitation and pest control.

*Fly Destruction.* During the year the Department continued to arouse public interest in the danger to health, by contamination of food, etc., of the common house fly. Leaflets, giving information on the best method of control, etc., were distributed to householders and others by the Sanitary Inspectors, who also gave verbal advice where necessary.

Particular attention was paid, by the Inspectors concerned, to piggeries, stables, offensive trade premises and other places where extensive fly breeding was to be expected, and suitable steps were taken for the destruction of the flies and their eggs, larvæ and pupæ.

Systematic spraying was also carried out at periodic intervals during the fly breeding season at hospitals, nurseries and clinics, and also at the Education Department's school kitchens.

## HOUSING

*New Houses.* The City Architect has kindly supplied the following information with regard to the erection of houses in the city during 1951 :—

Temporary or Permanent	With State Assistance		Without State Assistance		TOTAL
	By the Local Authority	By Others	By the Local Authority	By Others	
Temporary .....	—	—	—	1	1
Permanent (New)	1,062*	—	—	67	1,144
Permanent (Reconstructions)	—	—	—	15	
<b>TOTALS</b>	<b>1,062</b>	<b>—</b>	<b>—</b>	<b>83</b>	<b>1,145</b>

\* Includes 2 houses erected by the Local Authority and allocated for use by members of the Police Force.

The number of houses erected in Hull during 1951 was 1,145, all but 1 of which were permanent. Of the 1,145, 1,062 were erected by the Local Authority, 68 by private enterprise and 15 were war-destroyed houses rebuilt under payment by the War Damage Commission—all by private enterprise.

Flats for 7 family units were provided by conversions by private enterprise.

This makes a gross total of 1,152 family units re-housed during the year and brings the total of new housing units provided since the war to 6,917.

*Slum Clearance.* In view of the acute housing shortage, and consequent ministerial policy, no slum clearance has been undertaken in 1951.

*Demolition and Closing of Insanitary Houses.* Difficulties concerning the repairs of structural defects in house property, due to shortage of labour and materials, continued throughout the year, and the large number of complaints indicates the continued dilapidation and deterioration in houses of all types. These difficulties were intensified by the high cost of repairs compared with rents received and the values of the older houses, and have resulted in sundry owners, when requested to



undertake extensive repairs, because of cost involved, offering their properties to the City Council at nominal figures and sometimes as a "gift."

It was necessary, despite the shortage of housing accommodation, to continue to represent individual houses as unfit for human habitation. In only one case did an owner avail himself of the right to appear before the Committee when the making of a Demolition Order was considered, and as he offered no satisfactory undertaking, the Order was made. In most cases, the houses had been classified as a "total loss" by the War Damage Commission.

During the year 27 houses were represented as unfit for human habitation under the provision of Sections 11 and 12 of the Housing Act, 1936. Demolition Orders were made in relation to 8 houses ; a Closing Order in relation to one house ; one house was demolished by the owner before the Demolition Order could be made and one owner's undertaking not to use the house was accepted ; leaving 16 houses to be considered in 1952.

In addition to the normal duties of investigations, inspections and reports on housing, the inspectorial staff completed and submitted to the Town Planning Committee a survey and plans of a suggested 20-year Slum Clearance Programme for the City Development Plan.

This consisted of approximately 16,000 houses which, in the opinion of the Medical Officer of Health, are unfit for human habitation now or have no more than a 15 years "life."

It is hoped that this Programme can be commenced, in small areas, not later than 1956, accelerating to maximum intensity by 1960.

Detailed house to house inspections of these houses are now being carried out.

#### *Housing Acts.*

	1951	1950
<i>Inspections—</i>		
Section 9	26	23
Sections 11 and 12	1	1
<i>Represented to Committee—</i>		
Section 11 (demolition)	8	21
Section 12 (closing orders)	1	1
Section 11 (undertakings not to use, accepted)	1	1
Demolished prior to demolition order being made	1	1
For consideration in 1952	16	—



*Overcrowding.* Prior to the war the speed of rehousing overcrowded families had exceeded additions to the overcrowding register, and the percentage of overcrowded families had been reduced to below 1 per cent. The position to-day cannot be represented statistically with any accuracy but, from general observation, it seems clear that the overcrowding figure is considerably higher than the 3 per cent. revealed by the 1936 Survey, and is slowly increasing.

The continued housing shortage prevents any action other than the relief of the most serious cases.

During the year, 136 new cases of overcrowding were reported and 109 cases were abated—38 by the City Treasurer and 71 by the Health Department as a result of informal action.

There was no application for a licence to permit temporary overcrowding. No action was taken under the Housing Act, 1949.

**TABLE XI**

**SUMMARY OF INSPECTIONS**

<i>Overcrowding—</i>										
Complaints received	....	....	....	....	....	....	....	....	....	241
Inspections	....	....	....	....	....	....	....	....	....	141
Found to be overcrowded	....	....	....	....	....	....	....	....	....	136
Revisits	....	....	....	....	....	....	....	....	....	233
Overcrowding abated	....	....	....	....	....	....	....	....	....	109
Informal inspections for City survey	....	....	....	....	....	....	....	....	....	575
Complete inspections under Housing Act	....	....	....	....	....	....	....	....	....	373

*Applications for Corporation Houses.* During 1951 the number of applications to the Medical Officer of Health for assistance in obtaining a Corporation house on medical grounds was about 200 compared with about 300 in 1950.

The severity of the cases, however, has not lessened and it is obvious that a very large number of families in Hull are living in extremely poor accommodation and uncomfortable conditions.

There is little that can be done for them until an adequate number of houses is available.

In only 23 cases (the same number as in 1950) was it possible for a recommendation to be made to the City Treasurer for rehousing on medical grounds.

In addition the Chest Physician supplied 102 recommendations for rehousing on medical grounds where a member of the family was suffering from tuberculosis. In 1950 the Chest Physician made 68 recommendations.



## INSPECTION AND SUPERVISION OF FOOD

*Milk Supply.* It has been estimated that the amount of fluid milk consumed daily in the city was slightly less than in 1950, namely, 28,815 gallons, which represents an average daily consumption per person of 0·7 pints. The estimated daily consumption in 1950 was 29,000 gallons, giving an average daily consumption of 0·8 pints per person. The following table shows the daily consumption of the different grades of milk during the year under review.

	<i>Amount gallons</i>	<i>Percentage</i>
Raw undesignated ....	5,250	18·3
Accredited ....	215	0·7
T.T. Farm Bottled ....	125	0·5
T.T. Pasteurised ....	641	2·2
Pasteurised ....	14,593	50·6
Sterilised ....	7,991	27·7
Totals ....	28,815	100·0

These figures which have been rounded-off for convenience are only approximate and are based on information obtained from the large dairies in the city.

The demand for the raw designated milks (i.e., "Tuberculin Tested" and "Accredited") shows a slight decrease compared with last year, but this is undoubtedly due to the increased demand for "T.T. Pasteurised" and "Pasteurised" milks. The consumption of "Sterilised" milk also showed a decrease compared with 1950. The milk supplied to schools under the Milk in Schools Scheme is almost wholly pasteurised, but includes a small amount of "Tuberculin Tested" milk. It is interesting and pleasing to note that raw undesignated milk accounted for only about 18·3 per cent of the total milk consumed, and it is possible that this figure was even lower because it undoubtedly included some milk which may have been pasteurised but not sold as such.

The city is fortunate in that five large heat-treatment plants of the latest design are available, and this fact, coupled with the obvious advantage to the



consumer of having milk delivered in bottles, undoubtedly accounts for the large and growing demand for heat treated milk, which in 1951 was 80·5 per cent of the total.

During the year, 1,508 visits were paid to various dairies and milkshops in the city, including 707 by the Food and Drugs Inspectors as part of their routine investigations specially connected with the sampling of milk.

*The Milk (Special Designation) (Raw Milk) Regs. 1949, and the Milk (Special Designation) (Pasteurised and Sterilised Milk) Regs. 1949.* Under these Regulations, so far as concerns raw milk, the official test has been altered and the Coliform Test which was one of the two previously required tests, has been discontinued. Only one test now remains, *i.e.*, the Methylene Blue Reduction Test, the procedure for which being laid down in the Regulations.

The Milk (Special Designation) (Pasteurised and Sterilised Milk) Regulations, specifies the Phosphatase and Methylene Blue as the two official tests for pasteurised milk and provides for a new special designation "sterilised", the prescribed test for which is the Turbidity Test.

Both sets of Regulations provide for the granting of annual licences to all persons or firms authorising them to use a special designation in relation to milk sold at or from premises mentioned in the licence, and also, in the case of the Milk (Special Designation) (Pasteurised and Sterilised Milk) Regulations for the annual licensing of persons or firms in relation to milk pasteurised or sterilised at premises within the city. The granting of producers' licences under the Milk (Special Designation) (Raw Milk) Regulations, is the responsibility of the Ministry of Agriculture and Fisheries. The special designations authorised are "Pasteurised", "Sterilised", "Tuberculin Tested" and "Accredited", although the Milk (Special Designation) (Pasteurised and Sterilised Milk) Regulations provide, in certain cases, for a processing firm to use the designation "Tuberculin Tested (Pasteurised)" or "Tuberculin Tested (Sterilised)" if they hold the appropriate licences under the Milk (Special Designation) (Raw Milk) Regulations. During 1951, 3 firms held licences to process "Tuberculin Tested (Pasteurised)" milk.

The Regulations also provide for the granting by the Licensing Authority of supplementary licences authorising the use in their area of a special designation by persons holding principal licences issued by other authorities.



Regular routine visits were paid by the Inspectors to persons holding licences under the Regulations, and advice given or suggestions made with respect to improvement of their premises. In all cases the persons concerned readily complied with the requirements of the Department. New applications for licences were carefully investigated by the Department's officers.

The following licences, to operate until the 31st December, 1951, were issued :

1. UNDER THE MILK (SPECIAL DESIGNATION) (PASTEURISED AND STERILISED MILK) REGULATIONS, 1949.

				<i>No. of Persons or firms licensed</i>	<i>No. of Premises involved</i>
<i>Dealers' licences—</i>					
" Pasteurised " milk	....	....	....	171	175
" Sterilised " milk	....	....	....	706	742
				—	—
Totals	....	....	....	877	917
				—	—
 <i>Processors' licences—</i>					
" Pasteurised " milk	....	....	....	5	5
" Sterilised " milk	....	....	....	3	3
				—	—
Totals	....	....	....	8	8
				—	—

2. UNDER THE MILK (SPECIAL DESIGNATION) (RAW MILK) REGULATIONS, 1949

*Dealers' licences—*

" Tuberculin Tested " milk	....	....		15	19
----------------------------	------	------	--	----	----

In addition, 70 licences were issued to persons retailing specially designated milks (mainly " Pasteurised " and " Sterilised ") in the streets of the city. In all these cases, the persons concerned had no fixed business premises, but merely collected their supplies of milk daily from the large dairies for immediate delivery to their customers, the " empties " being returned each day.

During the year the undermentioned samples were taken for examination under the Regulations, with the following results.

<i>Type of Milk</i>	<i>No. of Samples taken</i>	<i>No. of Samples which</i>	
		<i>passed the prescribed tests</i>	<i>failed to pass the prescribed tests</i>
" Tuberculin Tested (Pasteurised) " .....	84	84	—
" Tuberculin Tested " .....	100	87	13
" Accredited " .....	27	26	1
" Pasteurised " .....	123	123	—
" Sterilised " .....	121	121	—
Totals .....	455	441	14

Particulars of the samples of raw designated milk which had failed to pass the tests were communicated to the responsible officers and persons concerned.

It was not necessary to apply any of the provisions of the Regulations regarding the refusal, suspension and revocation of licences.

*Non-designated Raw Milk.* This type of milk is not required to comply with any statutory bacteriological standards, but, during the year, 18 samples of raw undesignated milk were submitted to the Methylene Blue Test which is the standard test for Raw Designated milk. Of these 18 samples, 15 satisfied the test, but the remaining 3 failed, being decolourised in each case in 5 hours, 4½ hours and 3 hours.

*Goats Milk.* A sample of goats milk which was found being offered for sale was taken and submitted for bacteriological examination with the following results :—

Methylene Blue Test—Decolourised at the end of 2½ hours.

Bac. Coli. Test—Gave a positive result in each of three tubes of 1/100th M.L. of the sample.



These results were indicative of faulty methods of production. One of the Department's officers visited the vendor's premises and pointed out what methods should be adopted in order to secure more satisfactory results.

*Milk and Dairies Regulations, 1949.* Under the provisions of these Regulations, the registration of dairy farmers and of dairy farms is now the responsibility of the Ministry of Agriculture and Fisheries whilst the registration of milk distributors and other dairy premises remains the responsibility of the Local Authority, who are also required to administer those provisions which apply outside dairy farms and also the provisions relating to diseases communicable to man.

During the year 707 inspections were made at dairy premises in the city and appropriate action was taken where necessary to maintain compliance with the provisions of the Regulations. The new dairy belonging to one of the large local firms referred to in last year's report was completed and has been operating satisfactorily over the greater part of the year. Examinations were made of 3,091 milk churns, 413 handcans and 747 vehicles.

The following contraventions of the Regulations were observed :—

Dirty condition of milk bottles	....	....	....	13
Dusty condition of dairy wall surfaces	....	....	....	2
"Tuberculin Tested" milk consigned in unsealed churns	....	....	....	4
Carrying swill in a milk float with milk	....	....	....	1
				—
Total	....	....	....	20
				—

One of the above cases concerned the dirty condition of a bottle of T.T. Pasteurised milk supplied to a customer who brought it to the Health Department immediately on receipt. The firm who supplied the milk had been cautioned for similar offences on previous occasions and were therefore summoned under the Milk and Dairies Regulations and also under Section 9 of the Food and Drugs Act 1936. The summons under the last-named Act was withdrawn upon the plea of guilty being entered to the summons under the Regulations. On the hearing of the case the firm were fined £5 and ordered to pay one-and-a-half guineas costs.

Legal proceedings were also taken against the milk distributor who had carried swill in a milk float along with milk. In this instance the person concerned had also been cautioned on several occasions and had been fined for a similar offence. He was fined £3 and ordered to pay one-and-a-half guineas towards the Prosecuting Solicitor's costs for the present offence. The contraventions in the other instances were remedied after the persons or firms had been cautioned either verbally or by letter.



During the year it was necessary to serve upon 3 milk producers in the city notices under Regulation 20 (1) (c) of the Milk and Dairies Regulations, 1949 requiring the milk produced by their herds of cows not to be used or sold for human consumption until it had been subjected to pasteurisation at an approved establishment licensed by the Authority. This action was taken because samples of the milk from the herds of milch cows gave positive results for tuberculosis when examined biologically. Notification of the action taken was in each case given to the Area Milk Officer and the Divisional Officer of the Ministry of Agriculture and Fisheries. The milk from the 3 producers in question was immediately sent to one of the local processing firms where it was pasteurised before sale. The notices were subsequently withdrawn, after steps had been taken to ensure the freedom of the milk from any bovine infection. The service and withdrawal of the notices were notified to the persons and authorities concerned.

*Registration of Milk Distributors and Dairy Premises, not being Dairy Farms.*

110 applications for registration were received compared with 103 last year. Of the former number 106 were for the sale of milk in bottles only.

The following persons and premises were registered :—

Milk Distributors	....	....	....	108
Dairy Premises	....	....	....	2
				—
				110
				—

At the end of the year there were about 713 milk traders on the register, the majority being persons carrying on small businesses of a general nature and retailing small quantities of milk for the convenience of their customers. About 703 of the traders were selling bottled milk only.

*Examination of Milk for Tuberculosis.* Examinations of milk for Tuberculosis are undertaken by the Director of the local Public Health Laboratory service.

366 samples were submitted for examination by the inoculation of guinea pigs and positive results were obtained in respect of 25 samples. Upon investigation by the Ministry of Agriculture and Fisheries Veterinary Service of the dairy herds involved, in 10 cases one animal and in another case 2 animals, were found to be suffering from tuberculosis and were taken for slaughter under the Tuberculosis Order, 1926. In one instance it was found that 2 animals had been sent to the Ministry of Food Collecting Centre for slaughter, and in 6 cases one or more animals had been sent to a Knacker's yard for slaughter. In the 7 remaining cases the investigations were inconclusive.



*Dirt in Milk.* One sample was reported as dirty and a formal repeat sample was obtained from the same source. This was subsequently found to be satisfactory and no further action was considered necessary.

*"Appeal to Cow" Samples.* As the result of adverse reports of the Public Analyst respecting samples of milk found to be adulterated by the addition of extraneous water, visits were paid to 3 different farms, and 22 "appeal to cow" samples were taken in order to establish the condition and quality of the milk produced by the cows in the dairy herds from which the unsatisfactory samples had originated.

*Mastitis in Cows.* During the year 3 notifications were received from the Divisional Inspector of the Ministry of Agriculture and Fisheries that cows in herds within the city were suffering from Mastitis. Notices were served on the owners concerned prohibiting the sale for human consumption of milk from the affected cows or its use in the manufacture of milk products for human consumption.

*Public Health (Condensed Milk) Regulations, and Public Health (Dried Milk) Regulations, 1923 and 1943.* 5 samples of condensed milk and 2 of dried milk were submitted for analysis during the year. All satisfied the requirements of the Regulations.

*Registration of Ice-cream Premises.* During the year 92 applications for registration of premises for the sale and storage of ice-cream under Section 14 of the Food and Drugs Act 1938, were received. Of this number one application was withdrawn, 72 were granted unconditionally and 14 were granted subject to the applicants concerned furnishing written undertakings to carry out certain work or to observe certain conditions in order to comply with the requirements of the Act. 5 applications were not granted owing to the premises being unsuitable.

In one case a vendor of ice-cream was found to be not observing the conditions of an undertaking given when the premises were registered. The person concerned was given an opportunity to attend the Committee to show cause why the Local Authority should not cancel registration, and, having failed to present himself or to communicate with the Authority, registration was revoked.

At the 31st December, 1951, there were 660 premises on the register ; 18 for the manufacture and/or sale and 642 for the sale of ice-cream.

The Methylene Blue test is still the official one used to determine the cleanliness and bacteriological condition of samples of ice-cream. Under this test, grading is determined according to the time taken to decolourise the methylene blue added to the samples, which are classified in Provisional Grades I, II, III and IV in order of merit.



129 samples of ice-cream taken during the year and submitted for examination were placed in the following grades :—

Provisional Grade I	....	....	....	....	59
" " II	....	....	....	....	37
" " III	....	....	....	....	11
" " IV	....	....	....	....	22
				Total	129

In all cases where samples were placed in Grades III or IV, the vendor's premises were visited and suggestions made so as to secure better results.

*Standard for Ice-cream.* On the 1st March, 1951, the Food Standards (Ice-cream) Order, 1951, came into operation. The Order prescribes that ice-cream shall contain not less than 5 per cent fat, 10 per cent sugar and  $7\frac{1}{2}$  per cent milk solids other than fat. The Order further provides that ice-cream containing any fruit, etc., shall either conform to this standard or, alternatively, the total content of fat, sugar and milk solids other than fat shall be not less than 25 per cent of the ice-cream, including fruit, fruit pulp or fruit puree as the case may be, and the total content of fat sugar and milk solids, other than fat, shall include not less than  $7\frac{1}{2}$  per cent fat, 10 per cent sugar and 2 per cent milk solids other than fat. "Parev" (Kosher) Ice has to contain not less than 10 per cent fat and not less than 14 per cent sugar, and the standard set out in the Order does not apply to this product.

104 samples of ice-cream were submitted for analysis under the Food and Drugs Act 1938. Of this number, 95 samples conformed with the standard laid down in the Order. In the remaining 9 cases, 4 were deficient in milk solids other than milk fat, 3 were deficient in fat, and 2 were deficient in sucrose. Letters of caution were addressed to the vendors in each case.

*Ice-cream (Heat Treatment, etc.), Regulations 1947.* Premises where ice-cream is manufactured continued to be regularly visited by the Inspectors, who discovered several contraventions of the Regulations. Most of these contraventions were of a minor character and were satisfactorily dealt with after verbal cautions had been given.

In one case, however, ice-cream was found being manufactured under conditions which were far from ideal. In view of the fact that samples of the company's ice-cream had been unsatisfactory for some time despite several written and verbal cautions, legal proceedings were taken under the Regulations and also under the Food and Drugs Act 1938. Seven summonses (2 for offences under the Regulations and 5 for offences under Section 13 of the Food and Drugs Act 1938) were issued against the firm, who pleaded guilty to the five offences under the Food and Drugs Act. The two summonses under the Regulations were withdrawn prior to the Hearing. The defendant Company was subsequently fined £10 on each of the five summonses and ordered to pay two guineas costs in respect of each.



*Frozen Lollipops.* The standard laid down for ice-cream does not apply to water ices, or ice-llollies. 39 samples of ice-llollies were taken for bacteriological examination. Of this number, 8 were regarded as unsatisfactory because of their being placed in Grades III or IV of the Provisional Grading Scheme, or because of failure to satisfy the Coliform Test. The manufacturers were in each case interviewed and advised as to better means of production.

*Food and Drugs Act, 1938—Sampling.* The number of samples examined was 3,017, of which 152, or 5.0 per cent, were found to be adulterated, compared with 101 or 3.3 per cent in 1950, when 3,084 samples were taken. Samples of milk taken in the city numbered 1,694, of which 68 or 4.1 per cent were not genuine. The percentage for 1950 was 3.2.

Other samples reported as unsatisfactory were :—

Ammoniated tincture of quinine (1); beef sausage and sausage meat (4); brawn (1); breakfast cereal (1); cake mixture (1); canned rhubarb (1); canned salmon (1); canned soup (1); condensed milk (1); cut mixed peel (1); dressed crab (4); glacé cherries (1); glycerine (1); hydrogen peroxide (1); ice-cream (9); ice-cream lollies (1); jelly crystals (1); Kola (1); liver loaf (1); meat paste (4); meat (beef or pork) pies (21); mincemeat (2); non-brewed condiment (2); oiled mercury ointment (1); pearl barley (1); perry (1); plum pudding (1); pork sausage and sausage meat (11); prescriptions (4); sardine and tomato paste (1); saveloy (1); savoury meat (1).

The following table summarises samples taken and the subsequent action :—

TABLE XII

Nature of Samples	No. of Samples	Genuine	Adulterated or otherwise Unsatisfactory	Letters of caution, etc.	Prosecutions
Beverages	88	86	2	2	—
Cereals	120	118	2	2	—
Confections	81	79	2	2	—
Drugs	144	136	8	8	—
Fats	151	151	—	—	—
Fish, Meats, etc.	207	157	50	50	—
Milk and Milk Products	1,928	1,850	78	30	14
Preserves	75	72	3	3	—
Seasonings	109	107	2	2	—
Vegetables	22	22	—	—	—
Miscellaneous	92	87	5	5	—
	3,017	2,865	152	104	14

In addition to the foregoing, the City Analyst, Mr. D. J. T. Bagnall, A.C.G.F.C., F.R.I.C., publishes in his Annual Report full details of the work done by him under the Food and Drugs Act.



*Byelaws with respect to the Handling, Wrapping and Delivery of Food and Sale of Food in the Open Air.* The Byelaws, which came into operation on the 18th September, 1950, are administered jointly by the Chief Sanitary Inspector and the Chief Food Inspector.

Although it was not necessary to institute proceedings against any person for offences, a number of cautions were given in respect of minor infringements mainly at refreshment rooms and food-preparing premises.

*Public Health (Preservatives, etc. in Food) Regulations, 1925 to 1940.* 2,739 of the samples taken under the Food and Drugs Act 1938 were also examined in the light of the above-mentioned Regulations and 140 were found to contain permissible preservatives. There were two contraventions of the Regulations. One was in respect of a soft drink which contained sulphur dioxide to the extent of 130 instead of not more than 70 parts per million, and the second had regard to a sample of pork sausage which contained 66 parts per million of sulphur dioxide without declaration. The vendors of these two samples were cautioned for the offences, and subsequent samples were satisfactory. 137 food substances, other than butter and margarine, were found to contain artificial colouring but in no instance was prohibited colouring found to have been used.

*Labelling of Margarine.* 72 samples of margarine were obtained. There were no contraventions of the labelling provisions.

*Food and Drugs Act 1938, Section 34. Registration of Wholesale Dealers in Margarine, etc.* It was necessary to make an alteration in the Local Authority's List of Registered Wholesale Dealers in Margarine due to a change in the name of a local firm. An amended certificate of registration was issued and the Ministry of Agriculture and Fisheries notified of the change.

At the 31st December, 1951 there were 59 registered premises on the Local Authority's Register, viz., 56 wholesale dealers in margarine, 1 margarine factory and 2 butter factories.

*Fertilisers and Feeding Stuffs.* 54 inspections were made, namely, 9 at retailers' premises, 32 at manufacturers' and 13 at merchants' premises. In several instances, contraventions had taken place and the persons concerned were notified of the offences and cautioned by the Inspector.

29 samples of feeding stuffs and 14 of fertilisers were obtained and submitted for analysis by the Agricultural Analyst. Of these samples, 6 were taken at the request of other Authorities who had received adverse reports concerning samples



taken in their areas, and 12 at the request of the Ministry of Agriculture and Fisheries who sought the assistance of this Authority in carrying out some experimental sampling of feeding stuffs.

Twelve of the samples of feeding stuffs and 10 of the fertilisers were returned as satisfactory. Of the remainder (17 feeding stuffs and 4 fertilisers), 17 were classed as unsatisfactory by reason of a deficiency or excess of some ingredient or ingredients outside the permitted limits of variation and, in 4 instances, because of the failure of the vendors to give the information required in the prescribed form. The persons or firms concerned were notified of their failure to comply with the Act and/or Regulations.

*Pharmacy and Poisons Act.* 20 persons applied, in respect of 23 premises, to have their names entered in the Corporation's list kept under the Act and applications were made by 2 persons for alterations to be made in the list on account of transfer of their businesses to other premises. The names of 29 persons, affecting the same number of premises, were removed from the list as they either ceased to sell poisons or the premises were closed. In addition, the names of 9 persons (in respect of 9 premises) were removed from the list because of failure to pay the fees prescribed by Rule 31 of the Poisons Rules, 1949. All the persons concerned were notified of their right of appeal under the provisions of the Poisons (Appeal to Quarter Sessions) Rules 1936, but none appealed. 221 persons applied for the retention of their names in the Corporation's list, in respect of 390 premises. All the applications were granted. At present the names of 239 persons are entered in this Authority's list, in respect of 416 premises.

85 inspections were made for the purposes of the Act. In 14 cases it was found that persons, whose names were not included in the Local Authority's List of Persons entitled to sell Poisons included in Part II of the Poisons List, were selling Phenolic poisons in contravention of the provisions of the Act. After being cautioned verbally by the Inspector in respect of these offences, the vendors either discontinued the sale of such poisons or made application for the inclusion of their names in the Local Authority's List. It was also necessary to caution several persons whose names were included in the Local Authority's List, for minor contraventions of the Act. All the persons took immediate steps to comply with the legal requirements.

*Inspection of Licensed Premises.* Twenty licensed premises were inspected during the year, and 17 contraventions of the Food and Drugs Act 1936 were discovered. The contraventions mainly comprised inadequate sanitary accommodation (w.c.'s. and urinals), inadequate ventilation, defective or unclean sanitary apparatus, flooding of cellars, unsatisfactory or unsuitable facilities for the washing of drinking glasses, dirty glasses, and lack of readily available supplies



of hot water. There were also several cases where unsuitable materials were being used for beer-piping, etc. The matters requiring attention were brought to the notice of the owners or occupiers (whichever were responsible) and in the majority of cases the requirements of the Department had been satisfactorily complied with at the end of the year. In the few remaining cases which were outstanding, the necessary work was in hand.

*Bakehouses.* 174 bakehouses, including 97 power factories and 15 non-power factories, are on the register ; 1,143 inspections were made and 34 infringements or defects were dealt with.

*Refreshment Room Kitchens and other Workplaces.* 586 workplaces on the register, employed 2,861 males and 1,632 females. 911 inspections were made of workplaces, which were found to be in a clean condition. 117 of the workplaces are refreshment room kitchens, the others being used for fruit sorting, tea packing, bottle washing, etc.



## WORK OF THE FOOD DEPARTMENT

The following is a summary of the work carried out by the Chief Food Inspector and seven assistants.

*Scope of Work.* The duties of the Chief Food Inspector and his assistants include the inspection of the fish markets, the slaughterhouses, and of all meat, fish and fruit sold in the city, and of all retail shops (other than retail dairies) where food is sold. Milk shops and dairies are under the supervision of the Chief Sanitary Inspector's staff. The Chief Food Inspector's Branch is also responsible for the inspection of food for the Hull and Goole Port Health Authority. A further responsibility is the administration of the Performing Animals (Regulation) Act, 1925.

*Slaughterhouses.* Private slaughterhouses in use during 1951 were:— 3 occupied by the Ministry of Food, 1 used for the slaughter of horses for food for human consumption, and 2 for the private slaughter of pigs by cottagers, etc. In 1939 there were 44 in use, some of which were damaged by enemy action during the war.

The following table shows the number of animals slaughtered at 6 licensed slaughterhouses in 1951 and in previous years:—

Year	Cattle (and Calves)	Sheep	Pigs	Horses	Total
1951	17,819	27,116	12,908	317	58,160
1950	17,957	32,325	6,353	806	57,441
1949	12,506	31,662	3,475	1,072	48,715
1948	10,330	25,952	2,637	1,478	40,397
1947	15,206	21,588	1,201	1,147	39,142
1946	14,907	29,311	1,728	890	46,836
1938	16,910	51,111	31,551	—	99,572

*Slaughter of Animals Act, 1933.* There are now 101 persons licensed by this Authority to slaughter animals, including 2 Jews whose licences are subject to their obtaining the necessary licences and renewals thereof from the Rabbinical Commission to slaughter by the Jewish method for the food of Jews. 57 licences which had expired were renewed for a further period of three years.

The Medical Officer of Health is authorised to issue licences to Mohammedans for the supply of meat to ships' crews, such licences being tenable for 24 hours to cover the period required.



*Public Health Meat Regulations, 1924.* Generally, these Regulations were well observed throughout the year, but cautions were given from time to time to those engaged in the handling and transport of meat.

The number of notifications received by the Chief Food Inspector involving the inspection of foodstuffs was 2,046.

All ante-mortem inspections at the Cattle Market are done by the Veterinary Officers of the Ministry of Agriculture and Fisheries. Details of the post-mortem inspections carried out by the Chief Food Inspector and his staff are as follows :—

**TABLE XIII**  
SUMMARY OF CARCASSES INSPECTED AND CONDEMNED

	Cattle, excluding Cows	Cows	Calves	Sheep and Lambs	Pigs
Number killed....	12,087	1,933	3,799	27,116	12,908
Number inspected	12,087	1,933	3,799	27,116	12,908
<i>Affected with Diseases other than Tuberculosis—</i>					
Whole carcasses condemned....	10	14	38	87	187
Carcasses of which some part or organ was condemned	2,917	738	24	1,477	6,861
Percentage of the number inspected affected with disease other than Tuberculosis	24·13	38·18	·63	5·45	53·15
<i>Affected with Tuberculosis only—</i>					
Whole carcasses condemned....	29	45	3	—	29
Carcasses of which some part or organ was condemned	1,153	874	1	—	1,499
Percentage of the number inspected affected with Tuberculosis	9·54	45·21	·03	—	11·61

WHOLE CARCASSES AFFECTED WITH TUBERCULOSIS

	1949	1950	1951
Cows	105	99	45
Heifers	10	22	9
Bulls	1	2	4
Oxen....	12	14	16
Pigs	15	13	29
Calves	4	2	3
	147	152	106



## WHOLE CARCASSES FOUND TO BE UNSOUND FROM CAUSES OTHER THAN TUBERCULOUS

BEEF		MUTTON		VEAL		PORK	
Disease or Condition	No.	Disease or Condition	No.	Disease or Condition	No.	Disease or Condition	No.
Emaciation ....	3	Moribund ....	5	Pyæmia ....	7	Gangrenous	
Gangrenous ....	3	Emaciation ....	7	Immaturity ....	8	Pneumonia ....	4
Dropsical ....	3	Pyæmia ....	7	Septicæmia ....	1	Swine Erysipelas	22
Septic		Dropsy ....	6	Moribund ....	1	Acute	
Peritonitis ....	1	Dropsy and		Extensive		Peritonitis ....	1
Septicæmia ....	4	Emaciation ....	46	Rupture ....	1	Rickets with	
Pyæmia ....	4	Septic		Peritonitis ....	2	Malnutrition....	1
Abnormal Odour	1	Pericarditis ....	1	Extensive ....		Pyrexia ....	4
Pyrexia ....	1	Septicæmia ....	1	Bruising ....	1	Suspected	
Extensive		Pyrexia ....	2	Emaciation ....	11	Swine Fever	58
Bruising with		Gangrenous		Joint ill ....	2	Septicæmia ....	4
Gangrene ....	1	Pneumonia ....	4	Pyrexia ....	4	Severe Bruising	5
Septic		Extensive				Jaundice ....	4
Pericarditis ....	1	Bruising ....	1			Emaciation ....	15
Severe Mastitis....	1	Malignant ....				Immaturity ....	51
Acute		Oedema ....	1			Acute Pleurisy	
Peritonitis ....	1	Dropsy and				and Peritonitis	1
		Arthritis ....	1			Acute Septic	
		Emaciation and				Peritonitis ....	2
		Oedema ....	3			Pyæmia ....	5
		Septic				Leukaemia ....	1
		Pneumonia ....	1			Dropsy and	
		Acute				Emaciation ....	4
		Lymphadenitis	1			Multiple	
						Injuries ....	1
						Sapraemia ....	1
						Traumatism ....	1
						Decomposition	1
						Gangrene ....	1
Totals ....	24	Totals ....	87	Totals ....	38	Totals ....	187

All Bovine animals were inspected for *Cysticercus Bovis* and 181 localised infections were found. The carcasses and offal were dealt with according to Ministry of Food instructions.

*Unsound Food.* Condemned meat is the property of the Ministry of Food. Condemned fish is sold to a fish manure manufacturing company, whose premises adjoin the Fish Dock.

The following is a summary of the unsound food surrendered or seized during the year :—



	<i>Tons</i>
Meat .....	199
Fish .....	2,008
Fruit and Vegetables .....	28
Tinned Goods .....	39
Miscellaneous Foodstuffs .....	11
<b>Total</b> .....	<b>2,285</b>

*Agreements for Destruction of Unsound Foodstuffs.* 14,698 agreements for the destruction of unsound foodstuffs were entered into by the owners and the Food Inspection branch of the Health Department.

*Bacteriology.* In addition to the ordinary routine examinations, special microscopical preparations were made and examined from the blood and tissues of 37 animals for the detection of anthrax bacillus, all with negative results.

*Food Preparing Premises.* Premises registered for the preparation of potted meat and other foods under Section 14 of the Food and Drugs Act 1938 numbered 284 at the year ending 1950, but during 1951, 4 new premises were registered and 1 was cancelled. All the premises were regularly visited by the Inspectors.

*Fish Inspection.* The Food Inspection Branch has an office on the Fish Dock and 2 Inspectors devote practically all their time to inspecting fish at the docks and in fish shops. The estimated weight of fish landed by 2,516 trawlers was 271,467 tons, of which 2,008 tons were found to be unsound, viz.:—

<i>Fishing Grounds, etc.</i>	<i>No. of Trawlers</i>	<i>Estimated Weight of Fish Tons</i>	<i>Weight Unsound Tons</i>
North Sea .....	254	4,085	11
Faroe Isle .....	40	2,950	—
Iceland .....	662	65,695	544
Bear Isle .....	484	64,535	346
Norway Coast .....	165	21,850	222
Norway Herrings .....	41	11,495	26
Norway Deep Waters .....	3	135	—
White Sea .....	769	88,657	774
Swedish Carriers .....	13	475	—
British Railways .....	—	1,200	10
Miscellaneous .....	—	—	18
Norway Carriers .....	20	785	—
Danish Carriers .....	1	10	—
Scotch Herrings .....	2	130	—
Greenland .....	58	9,275	51
West Coast .....	2	55	—
Dutch Carriers .....	1	55	—
Iceland/Faroe .....	1	80	6
<b>Totals</b> .....	<b>2,516</b>	<b>271,467</b>	<b>2,008</b>



*Butchers' Shops.* The 407 butchers' and pork butchers' shops, and other shops where meat is sold, were visited from time to time throughout the year.

*Horse Meat.* Two shops which sell horseflesh for human consumption are visited regularly, and all carcasses are inspected before being allowed to be sold.

*Fish and Game Shops, etc.* There were, at the end of 1951, 203 fried fish, 101 fish and game, and 26 shellfish shops, and 50 fish-curing houses in the city. These premises are visited regularly by the Inspectors with a view to ensuring that the foodstuffs supplied are fresh and wholesome and that the premises and utensils are maintained in a clean condition.

*Restaurants and Cafes.* Regular visits throughout the year resulted in a very marked improvement in the kitchens where the food is prepared.

*Food Control.* On behalf of the local Food Control Committee and the Ministry of Food, 18 visits were paid to premises for the purpose of inspecting foodstuffs.

SUMMARY OF INSPECTION OF PREMISES, ETC.

Slaughterhouses, Butchers' Shops, Factories and Stalls	....	....	....	5,696
Fish Shops and Stalls, Game Stores, Curing Houses and Carts	....	....	....	1,296
Fruit Warehouses, Shops, Markets, Stalls and Carts	....	....	....	2,411
				<hr/>
Total	....	....	....	9,403
				<hr/>

*Shellfish.* During the year, 10 samples of cooked mussels and 16 samples of raw mussels were submitted to the City Analyst, who reported 10 samples of cooked and 7 samples of raw mussels as unsatisfactory.

*Byelaws with respect to Handling, Wrapping and Delivery of Food.* Discussions have been held with various trade organisations and their co-operation has resulted in an improvement in the standard of food handling in this city.

## PART III

# NATIONAL HEALTH SERVICE ACT, 1946



# NATIONAL HEALTH SERVICE ACT, 1946

## SECTION 21—HEALTH CENTRES

There appears to be little likelihood of Local Health Authorities being given the necessary facilities to implement the obligations placed upon them by this section of the Act whilst the present economic difficulties exist.

During the year further consideration has been given to the provisional siting of Health Centres in Neighbourhood Units.

The urgent need for surgery and waiting room accommodation for medical practitioners at the new housing estate, Bilton Grange, was receiving the attention of the Local Authority in collaboration with the Local Executive Council, at the end of the year.

Despite efforts made by the Local Authority to hasten settlement of the question of ownership of the ex-Hull and Sculcoates Dispensary premises held by the Corporation in anticipation of a Deed of Gift, agreement had not been reached at the time of writing this report.

One doctor practising in the Holderness Road area had, with the approval of the Local Executive Council, been provided with surgery accommodation at the East Branch Dispensary premises, Holderness Road, on a landlord-tenant basis.

Permission was given by the Local Authority to the Leeds Regional Hospital Board for the Board's Mass Radiography Unit to have the temporary use of the Central Branch Dispensary premises, Baker Street, as a centre from which the unit could operate whilst carrying out a chest-survey of people residing in Kingston upon Hull and district. During the course of the survey a number of sessions both for men and for women were held at the Baker Street premises. Facilities were also given for the Medical Director of the Unit to hold consultations with persons visiting the Centre, and for his staff to carry out administrative duties on the premises.

## SECTION 22—CARE OF MOTHERS AND YOUNG CHILDREN

The following report has been contributed by Dr. Helen Standring, M.B.E., the Senior Assistant Medical Officer of Health in charge of the Maternity and Child Welfare Department.

A comprehensive Maternity and Child Welfare Service is available for all expectant and nursing mothers and for their children up to the age of 5 years.



*Ante-Natal Care.* Expectant mothers who have not booked a private doctor, or whose doctor is in agreement, are encouraged to attend an Ante-natal Clinic a full list of which is given on page 29 of this Report. There, the mother is advised as to the arrangements for her confinement, and whether it should take place in the Maternity Hospital or at home. Preference is given for admission of mothers to the Hospital on (1) medical grounds, and (2) social grounds. Owing to the shortage of maternity beds in the Hospital each application has to be considered carefully before a decision to accept the applicant is reached. If the mother is to be admitted to the Maternity Hospital she attends the Hospital Ante-natal Clinic which is held at the Sykes Street Clinic. The expectant mother who is to be confined in her own home attends the Ante-natal Clinic serving the area in which she lives. Here, the midwife she has booked for her confinement will be in attendance, and the two get to know each other and set up that right psychological understanding so essential to the happy confinement of the mother. Regular attendance at the Clinic is urged. The doctors conducting the Ante-natal Clinics during the year were :—Doctors Wilson, Cincio, Carson, Barrowman, Fleming and Griffith. The general health of the mother is checked, and if dental treatment is required she is referred for priority treatment as reviewed on page 105. Blood is examined to exclude venereal disease and tested for the Rhesus factor, the necessary steps being taken to safeguard the health of the mother and child following the results of these tests. Individual advice and group teaching are given regarding preparation for the confinement, home helps, and general mothercraft.

During the year 1951, attendances at Ante-natal Clinics have been as follows:-

Ante-Natal Clinics	No. of Sessions	Attendances		
		First	Re-attendances	Total
<i>Sykes Street—</i>				
Monday and Thursday afternoons .....	99	1,104	3,387	4,491
Wednesday and Friday mornings .....	102	447	1,226	1,673
<i>East Hull, Morrill Street—</i>				
*Monday and Wednesday mornings and Monday and Tuesday afternoons....	177	1,012	3,357	4,369
<i>North Hull, Ellerburn Avenue—</i>				
Tuesday mornings .....	48	202	683	885
<i>West Hull, 69 Coltman Street—</i>				
Monday morning, and Tuesday and Wednesday afternoons .....	148	773	2,333	3,106
Thursday morning .....	50	166	599	765
<i>Priory Road—</i>				
Thursday morning .....	50	128	460	588

Total patients seen at the above Ante-Natal Clinics .....

5,270

\*Monday morning, Commenced 4th June.



In addition, Clinics were held at the Sykes Street Clinic, on Tuesday and Wednesday afternoons, for Maternity Hospital patients.

X-ray facilities are available at the East Hull Clinic on the recommendation of the doctors at the Ante-Natal Clinics. 268 cases were referred during 1951.

The necessary forms for food priorities, maternity benefits, etc., for each mother, are completed by the staff at the Ante-natal Clinics.

*Sterilised Maternity Outfits.* Maternity Outfits are issued from a Central Store upon production of a certificate signed by the midwife booked for the confinement.

*Post-natal Care.* Post-natal care of the mother is now part of the duty of the practitioner obstetrician engaged by the mother for her maternity care. Post-natal care is still available at the Ante-natal Clinics, however, to mothers who have not booked a doctor.

*Gynæcological Clinic.* This Clinic is available for advice on gynæcological abnormalities. Birth Control advice is given under Circular 1408. The charge for the accessories prescribed is assessed on an income basis. The total attendance was 391, of which 88 were new cases.

*Notification of Births Acts.* The total number of notified live births was 5,612. Of these, 3,273 births took place in the mothers' own homes, 2,339 in Hospitals, and Nursing Homes; 57 live births were not notified.

*Maternal Deaths.* The number of maternal deaths registered during the year was 10. The maternal mortality rates were as follows :—

	1951	1950	1949
Per 1,000 live births...	1.77	0.69	1.29
Per 1,000 total (live and still) births	1.73	0.67	1.26

There were 4 deaths associated with pregnancy.

Enquiry forms, which are confidential, were completed and forwarded to the Maternal Mortality Committee of the Ministry of Health.

*Puerperal Pyrexia.* 60 cases of puerperal pyrexia were notified during 1951. Of these, none proved fatal.

Beds are available in a cubicle block at the Castle Hill Infectious Diseases Hospital for the treatment of cases of puerperal pyrexia.

*Ophthalmia Neonatorum.* During 1951, 25 cases of Ophthalmia Neonatorum were notified by the medical practitioners in attendance.

There was no impairment of vision in these cases.

The fall in the incidence of Ophthalmia Neonatorum is attributable to the early treatment in the ante-natal period of all cases of vaginal discharge in expectant mothers. It is now a rare occurrence to see a child with impaired vision due to Ophthalmia Neonatorum.

*Pemphigus Neonatorum.* This disease is compulsorily notifiable in the city. During 1951, 2 cases were reported to the Medical Officer of Health. In each case the disease was of a mild type.

*Still-births.* The number of still-births registered during the year was 138—a rate of 24·6 per 1,000 registered live births and 24·0 per 1,000 live and still-births.

*Infantile Mortality.* 258 deaths occurred of infants under 1 year of age. This gives an infantile mortality rate of 46·0 per 1,000 live births, compared with 34·3 in 1950 and 41·7 in 1949.

The neo-natal mortality—that is, the death-rate under 1 month of age per 1,000 live births—was 24·05 compared with 20·08 in 1950 and 19·97 in 1949.

The following table shows the number of deaths of infants under 1 year of age, and the rate per 1,000 live births, for the last 5 years.

<i>Year</i>	<i>No. of Deaths</i>	<i>Rate per 1,000 Births</i>
1947	400	51
1948	309	46
1949	259	42
1950	200	34
1951	258	46

Full particulars of the deaths of infants are given in Table XIV, page 98.



**TABLE XIV**  
**INFANT MORTALITY (NET DEATHS FROM STATED CAUSES UNDER ONE YEAR OF AGE)—1951**

CAUSES OF DEATH	1st Day	2nd Day	3rd Day	4th Day	5th Day	6th Day	7th Day	1st Week	2nd Week	3rd Week	4th Week	Under 1 Mth.	1/2 Mths.	2/3 Mths.	3/4 Mths.	4/5 Mths.	5/6 Mths.	6/7 Mths.	7/8 Mths.	8/9 Mths.	9/10 Mths.	10/11 Mths.	11/12 Mths.	Total			
																								1951	1950		
Smallpox																											
Chicken-pox																											
Measles																											
Scarlet Fever																											
Whooping Cough																											
Diphtheria and Croup																											
Erysipelas																											
Tuberculous Meningitis																											
Abdominal Tuberculosis																											
Other Tuber. Diseases																											
Meningitis (not T.B.)																											
Convulsions																											
Laryngitis																											
Bronchitis																											
Pneumonia (all forms)																											
Diarrhoea and Enteritis																											
Gastritis																											
Syphilis																											
Rickets																											
Suffocation (Overlaying)																											
Injury at Birth	5	4	5	3			4	21	1																		
Atelectasis	5	7	8			1	1	22	1	3		22	2	1	1												
Congenital Malformations	2	1	1	1			1	6	3	1	2	12	2	2													
Premature Birth	23	7	4	3	2	1	2	42	2			44	1														
Atrophy, Debility and Marasmus																											
Other Causes	5	1	1	1	1	3		12	1	2	1	16	1		1	3	2			1	1	2			1	1	
Total	40	21	20	8	4	5	8	106	15	7	7	135	25	19	20	17	7	8	8	3	4	6	6	258			
1950	41	15	13	9	4	7	4	93	16	5	3	117	18	16	14	10	8	5	5		1	3	3			200	



*Child Welfare Clinics.* The full-time Medical Officers in the Department have been assisted in the conduct of Child Welfare Clinics by Dr. Helen Gebbie and Dr. Winifred Wyatt. The list of Clinics will be found on page 29.

By the kind permission of the Postmaster, lists of Child Welfare and Ante-natal Clinics are exhibited in the Post Offices.

Work in the Child Welfare Clinics includes the individual teaching of mothers and the group teaching of mothercraft by the health visitors ; the doctors examine the infants and toddlers and advise mothers as to keeping the children in good health. When any abnormality is found the child is referred to its own doctor or to one of the inter-availability Clinics, see page 29.

Table XV summarises the work done at the Child Welfare Clinics during the year.

*Ophthalmic Clinic.* Spectacles required by infants referred to the Ophthalmic Clinic are provided free by private opticians under arrangements made by the Executive Council in accordance with Section 41 of the National Health Service Act.

*Light Clinics.* There is one type of lamp in use—the Mercury Vapour. The number of new cases treated in 1951 was 629. The number of attendances made was 9,172.

The majority of cases were children under school age. 176 school children received treatment during 1951, 1 tuberculous patient, and 1 patient was sent from the East Riding.

*Treatment Clinics.* A special treatment clinic was held at the Sykes Street Clinic for cases referred from the Ante-Natal Clinics.

*Orthopædic Clinics.* The Maternity and Child Welfare Service hold an Orthopædic Clinic at the East Hull Clinic, Morrill Street, at which the services of a part-time Physiotherapist are engaged. In addition, cases are referred to the Clinics organized by the School Health Service and held at the North Hull Clinic and at the Central School Clinic.



At the East Hull Clinic 42 new cases were seen by the Orthopædic Surgeon during the year ; of these, 24 cases were referred by the School Health Service and 18 by the Maternity and Child Welfare Department. Details are shown in the following table :—

## EAST HULL ORTHOPÆDIC CLINIC.

TYPE OF CASE	EDUCATION CASES		TUBERCULOUS CASES		M. & C.W. CASES	
	New cases	Total attend.	New cases	Total attend.	New cases	Total attend.
<i>Deformities—</i>						
Rickets .....	—	—	—	—	—	—
Spinal Curvature .....	—	3	—	—	—	—
Infantile Paralysis .....	1	19	—	—	1	5
Other Forms .....	23	71	—	—	17	40
<i>Tuberculosis—</i>						
Spine .....	—	1	—	—	—	—
Hip .....	—	—	—	—	—	—
Other Bones and Joints .....	—	—	—	—	—	—
TOTAL .....	24	94	—	—	18	45

## TREATMENTS GIVEN

FORM OF TREATMENT	EDUCATION CASES	TUBERCULOUS CASES	M. & C.W. CASES
Massage .....	215	—	43
Electrical .....	—	—	—
Remedial Exercises .....	729	—	43
Other .....	88	—	—
TOTAL .....	1,032	—	86

31 new cases of children under 5 years referred by this Department attended the North Hull and Central Clinics. (For details see page 176 of the School Health Service report.)

*Voluntary Workers at Clinics.* Voluntary helpers continue to do valuable work at the Child Welfare Clinics, attending both morning and afternoon sessions, in order to assist in the general duties of the clinics. Their work is greatly appreciated.

*Supply of Milk and Nutritives.* National Dried Milk, Orange Juice and Cod Liver Oil, and certain other nutritives, are distributed at all the Child Welfare Clinics.

								<i>Numbers Issued</i>
" National " Dried Milk (Tins)	....	....	....	....	....	....	....	151,006
Cod Liver Oil (6oz. bottles)	....	....	....	....	....	....	....	55,318
Orange Juice (6oz. bottles)	....	....	....	....	....	....	....	132,897
A. and D. Capsules (pkts. of 45)	....	....	....	....	....	....	....	8,094
Viol	....	....	....	....	....	....	....	3,767
Malt	....	....	....	....	....	....	....	797
Malt and Iron	....	....	....	....	....	....	....	3,432
Cod Liver Oil	....	....	....	....	....	....	....	8
Cod Liver Oil Emulsion	....	....	....	....	....	....	....	1,385
Medicinal Paraffin	....	....	....	....	....	....	....	3



TABLE XV

## WORK DONE AT THE CHILD WELFARE CLINICS

Clinic	East Hull	West Hull	King's Hall	Dairy-coates	Preston Road	New-land	Sutton	Albert Avenue	North Hull	Priority Road	Pickering Road	St. Martins	Frog-hall Lane	Sykes Street	Mar-fleet	St. Ninian's	St. Michael's	TOTAL	
																		1951	1950
No. of Sessions	152	99	98	48	99	102	48	102	101	100	51	49	50	51	42	35	13	1,240	1,200
Children under 1 year—																			
New Cases	544	449	302	197	206	244	92	247	211	216	106	92	61	97	134	111	35	3,344	3,196
Re-attendances	4,982	2,882	1,968	996	1,702	2,550	801	2,587	2,057	2,003	886	821	589	787	926	846	192	27,575	28,446
Children over 1 year—																			
New Cases	226	102	47	28	36	42	6	47	70	19	7	13	5	2	21	48	4	723	770
Re-attendances	2,653	691	449	279	706	830	166	1,449	924	1,144	365	395	262	121	538	296	62	11,330	9,230
Total attendances	8,405	4,124	2,766	1,500	2,650	3,666	1,065	4,330	3,262	3,382	1,364	1,321	917	1,007	1,619	1,301	293	42,972	41,642
Mothers who received advice about themselves and their children	665	231	494	146	137	252	56	158	292	362	94	160	58	98	114	60	30	3,407	3,455
Cases referred for Private or Hospital Treatment	54	10	12	18	8	32	1	9	25	6	3	10	3	1	—	14	—	206	362
Doctor's Sessions	140	99	39	37	39	90	36	39	89	87	39	36	39	—	—	28	—	837	859
Weighing Sessions	12	—	59	11	60	12	12	63	12	13	12	13	11	51	42	7	13	403	341
Cases seen by the Doctor	3,170	1,367	1,001	681	656	1,271	356	635	1,241	1,258	501	451	437	—	—	406	—	13,431	14,060

\* Commenced 1st March

† Commenced 4th May

‡ Commenced 1st October



*Provision of Fireguards.* In order to prevent deaths of children from burns and scalds, resulting from the absence of a fireguard, arrangements are in operation whereby fireguards are supplied. A scheme of recovery charges operates for the reimbursement of the cost, on an assessment basis.

During 1951, 486 applications were received.

In the course of the year there was 1 fatal case in the city of burns and scalding in children under the age of 5 years.

*Co-ordination with other Bodies.* Inspectors of the Hull Branch of the National Society for the Prevention of Cruelty to Children visit all cases reported by the Department.

The Surgical Aid Organiser of the Hull Braves' Guild attends the Orthopædic Surgeon's Clinics and supervises the obtaining of splints and other surgical equipment of children attending these Clinics.

Our thanks are due to these voluntary societies for the help they give to the Department.

*Care of Illegitimate Children.* The Ministry of Health's Circular 2866 issued in October, 1943, continues to be implemented by close co-operation with Sister Bashford of the Sheltering Home for Girls. 120 expectant mothers of illegitimate children were reported to the Sister from Ante-natal Clinics, of whom 11 were married women. The joint efforts of the Sheltering Home staff and the Health Visitors are concentrated on obtaining the best possible care for the mother before and during her confinement, and for herself and her baby after the birth.

*York Diocesan Maternity Hostel, Sutton House,* accommodates 28 unmarried mothers. They are transferred to the Maternity Hospital for the confinement. The girls are usually in the hostel for an average stay of 16 weeks. 41 girls were admitted during 1951.

*Premature Babies.* (Circular 20/44). In an endeavour to reduce the neo-natal mortality rate concentrated efforts are being made in the care of premature babies. Specially equipped wards are in use for babies born in the Maternity Hospital. In certain cases, also, premature babies born outside the Hospital are admitted in specially prepared baby clothes and heated cots, and the temperature of the ambulance conveying the baby is raised considerably before leaving the depot. 73 premature babies were admitted from the district to the Premature Unit at the Maternity Hospital during 1951, and 3 were admitted to other hospitals.



2 of the 9 premature babies born in private Nursing Homes were admitted to hospitals in the area during 1951.

The mother is encouraged to accompany the baby in order to continue breast-feeding, and if unable, or unwilling to enter hospital, an effort is made to persuade her to continue the supply of breast milk, which is collected daily from her home.

196 premature babies were notified as having been born at home during the year and 9 in private Nursing Homes.

Special baby clothing and cots, with the necessary equipment, are available for the nursing of premature babies in their own homes.

*Nurseries and Child-Minders Regulation Act, 1948.* No registration was effected of premises or of daily minders.

*Day Nurseries (including 24-hour Nurseries).* There are two nurseries in the city for children under three years of age, both of which are approved for the training of students for the National Nursery Nurses' Certificate. The Pearson Park Nursery is a 24-hour nursery, and has accommodation for 48 children; the Holderness Road Nursery, which is a day nursery, has accommodation for 31 children.

A charge is made at the rate of 1s. per day and 1s. 6d. per day and night, in respect of the cost of meals.

As the situation of the two nurseries does not conveniently serve the whole of the city area, the Director of Education granted permission for the Villa Place Nursery Class to be used as a collecting centre for children residing in that neighbourhood. Transport is provided to take the children from this collecting point to the Pearson Park Nursery (see page 116).

*Grants to Local Voluntary Associations.* Financial assistance was given by the Corporation to local voluntary associations engaged in maternity and child welfare work. A grant of £1,000 was made to the York Diocesan Maternity Hostel and subscriptions were paid to the Sheltering Home for Girls (£150) and the Hull Braves' Guild (£75).



# PROVISION OF DENTAL TREATMENT

REPORT BY DR. C. WARDEN ORR,

*The Senior Assistant Medical Officer of Health, School Health Service.*

*Introduction.* Unfortunately, there is little to report upon during the year.

Again, clinic treatment consisted chiefly of fillings, extractions, using either local or general anaesthesia, scalings and gum treatment, and included the preparation of the mouth for dentures. The actual supply of dentures was undertaken by a panel of private practitioners.

There has been no further development regard the establishment of a dental laboratory or the appointment of a Dental Technician.

It has not been possible to carry out inspections in Nursery Classes, Nursery Schools or Day Nurseries during the year.

*Staff.* Throughout the 12 months the staff consisted of two Dental Officers. The approved establishment under the Authority is one Senior Dental Officer and eight Dental Officers.

The time devoted to the inspection and treatment of Maternity and Child Welfare patients was equivalent to the services of approximately one quarter of one Dental Officer.

*Premises and Equipment.* The general standard of premises and equipment was maintained. Dental Radiography is available at the Central Clinic.

*Professional.* During the year, 238 expectant and nursing mothers were treated. This is a decrease of 139 compared with the previous year. 87 mothers were made dentally fit against 162 in 1950. On the other hand, 574 pre-school age children were treated during the year, an increase of 33.

*Conclusion.* This year, for the first time since the inception of the National Health Service Act, it is necessary to record a drop in the work carried out. This is, of course, due to a totally inadequate staff. The Authority has not, therefore, been able to carry out its commitments under the Act. There appear to be three ways of solving this problem : (1) to encourage more dentists to take up whole-time service with local authorities by making salaries more satisfactory ; (2) to



employ Dental Officers for eleven sessions per week and allow them to undertake private dental practice outside clinic hours ; (3) to employ private Dental Practitioners on a sessional basis. The last-mentioned alternative would probably be the most convenient, but likely to be costly.

TABLE XVI.

## (A) NUMBERS PROVIDED WITH DENTAL CARE

	Examined	Needing Treatment	Treated	Made Dentally Fit
Expectant and Nursing Mothers	213	213	238	87
Children under five	565	553	574	519

## (B) FORMS OF DENTAL TREATMENT PROVIDED

	Extractions	Anaesthetics		Fillings	Scalings or scaling and Gum Treatment	Silver Nitrate Treatment	Dressings	Radio graphs	Dentures provided	
		Local	General						Complete	Partial
Expectant and Nursing Mothers	766	133	56	114	76	—	114	7	67	29
Children under five	1,355	214	362	8	—	4	2	3	—	—

Total attendances during the year :—

Expectant and Nursing Mothers, 666 ; Children, 756.

Cases under treatment at 31st December, 1951 :—

Mothers, 48 ; Children 17.

New-cases awaiting appointments at 31st December, 1951 :—

Mothers, 30 , Children 8.

## SECTION 23—MIDWIFERY

In accordance with Section 10, Midwives' Act, 1902, a total of 100 midwives and 1 maternity nurse gave notice during the year of their intention to practice



in the area of the Local Health Authority. Of this number 4 midwives removed from the area, 2 resigned and 1 retired, leaving 93 midwives and 1 maternity nurse on the list at the end of January, 1952.

Under the provisions of Section 23 of the National Health Service Act, 1946, 57 domiciliary midwives have been employed during the year by the Local Authority. These midwives were responsible for the delivery of 1,830 cases as midwives and attended 1,541 cases as maternity nurses. Midwives in private practice made no domiciliary deliveries during the year and attended 128 cases as maternity nurses. Accordingly, the municipal domiciliary midwives attended 96.6 per cent of the total number of mothers delivered in their own homes.

*Gas and Air Analgesia.* At the end of the year all the domiciliary midwives employed by the Local Authority were qualified to administer gas and air analgesia in accordance with the requirements of the Central Midwives' Board, and 18 sets of apparatus were in use.

During the year gas and air was administered by the domiciliary midwives in 1,199 cases when acting as midwives, and in 1,036 cases when acting as maternity nurses.

*Midwives' Car Service.* Details of this service are included in the report on transport services on page 115.

*Calling in of Medical Aid.* By the rules of the Central Midwives' Board, midwives are required to send for medical aid under conditions and for reasons which are definitely specified. Medical aid was summoned in 842 cases. In 653 cases medical help was required for the mother alone, and in 189 cases for the child alone.

Under the National Health Service Act, all expectant mothers are encouraged to book a practitioner obstetrician who will be responsible on the call of a midwife for ante-natal, intra-natal and post-natal care, and the care of the baby. This has resulted in a fall in the number of medical aid cases for which the Local Authority is financially responsible. Where no doctor has been engaged, the Local Authority is still responsible for payment of the doctor attending a case on the call of the midwife; no recovery of charge is now made against the patient.

*Infant Deaths notified by Midwives.* The number of deaths of infants occurring while a midwife was in attendance and notified under the Central Midwives' Board's Rules, was 18 compared with 9 in 1950.

*Maternal Death notified by Midwives.* There was one maternal death in the domiciliary practice.



*Midwifery Training School.* At the Part II Training School, which is wholly domiciliary and conducted by the Local Health Authority from the Albion Street Midwifery Centre, 22 pupils were successful in passing the Central Midwives' Board Examination during 1951. 7 district midwives have resident accommodation at this Centre and assist in the training of the pupils. In addition 3 district midwives are in residence at the Midwives' Hostel, 1123 Hessle Road. The school is approved for 24 pupils per year.

## SECTION 24—HEALTH VISITING

The Health Visitor is the medico-social worker in the field dealing with the promotion of health of the citizens of all ages. Whilst in the past her main duties have been the care of the expectant and nursing mother and children under 5 years of age, she has actually had a much wider field of work. The new Act has given greater recognition to this, and increased considerably the number of her duties outside that of her original work.

The most important part of the Health Visitor's work is in domiciliary visits where she sees the mother in her normal environment and can speak to her in a much more knowledgeable way than when seen in a clinic. The total number of domiciliary visits paid by Health Visitors during the year was 158,695; the total number of clinic sessions attended by them was 3,911. Details of the visits paid by Health Visitors and Student Health Visitors are given below.

### VISITS PAID BY HEALTH VISITORS

	1951	1950
Total domiciliary visits	158,695	129,567
Total visits to Children	156,148	127,816
Visits to Expectant Mothers—		
First Visits	551	541
Re-visits	297	152
Infants under 1 year—		
First Visits	5,703	6,248
Special Visits and Re-visits	39,358	32,742
Infants aged 1 year to 5 years—		
First Visits	212	213
Special Visits and Re-visits	103,239	80,811
Miscellaneous Visits (Re-Infection, Removals, Medical Aids, Aged and Infirm, following up of Hospital Discharges etc.)....	9,335	8,860
No. of Attendances at Clinic Sessions	3,911	3,679
—————		
Record Cards of Children who entered school, despatched to School Health Service	6,738	3,028



## VISITS PAID BY STUDENT HEALTH VISITORS

	<i>1st April, 1951 to 31st March, 1952</i>	<i>1st April, 1950 to 31st March, 1951</i>
Total domiciliary visits	7,266	7,532
Total Visits to Children	7,166	7,492
Visits to Expectant Mothers—		
First Visits	9	15
Re-visits	21	3
Infants under 1 year—		
First Visits	298	335
Special Visits and Re-visits	1,462	1,418
Infants aged 1 to 5 years—		
First Visits	2	36
Special Visits and Re-visits	4,919	5,116
Miscellaneous Visits (Re-Infection, Removals, Medical Aids, Aged and Infirm, following up of Hospital Discharges, etc.)	555	609
No. of Attendances at Clinic Sessions	384	412

*Training of Health Visitors.* The scheme for training of Health Visitors was continued, 6 Student Health Visitors taking up their duties in the Health Department in 1951. The course of instruction for the Health Visitors' Certificate arranged by the Council of the University College of Hull, in co-operation with the Health Department, commenced on 1st April. Students attended the University College for lectures during 3 academic terms; they received, in addition, special lectures and demonstrations by members of the Public Health Department staff each week, and were given a wide practical experience of all branches of public health work in the School Health, Tuberculosis, and Maternity and Child Welfare Departments. All were successful in obtaining the Health Visitors' Certificate at the end of the course.

*Child Welfare Clinics.* 26 Child Welfare Clinic sessions are held weekly at 17 centres. During the year there were 42,972 attendances of mothers and children at the Clinics, of which 4,067 were first attendances. Details of the attendances at the various Clinics are given in Table XV.

*Changes of Address.* Health Visitors report removals of families to new addresses and arrange the transfer of records of any children affected if the change of address should be within the city. In cases where the removal is away from the city the Medical Officer of Health to whose area the child has been transferred is notified and records are sent to him in order to ensure continuity of care. These changes of address amount to surprising numbers, 3,562 children under the Health Visitors' care changed their addresses in Hull during 1951. This large number is probably due to the fact that many families with young children are



living in rooms and make frequent changes in an endeavour to secure better accommodation. Further, 636 children removed out of Hull and an approximately similar number came to Hull from other areas.

*Co-ordination of Work with other Departments.* All records of children on reaching the age of 5 years are forwarded to the School Health Service in order that a medical history of the children shall be available at the schools for routine inspection purposes.

## SECTION 25—HOME NURSING

In accordance with the duty and powers contained in Section 25 of the Act, the Local Health Authority arranged for the Hull Jubilee District Nursing Association to act as the agents of the Authority from the 5th July, 1948, in the provision of a home nursing service for the sick.

This service, which provides for the nursing of patients in their own homes, enables a quicker turnover of hospital beds by the earlier discharge of patients.

During the year the Jubilee District Nurses paid 165,877 visits to 6,641 cases. The work was carried out by a staff of 37 nurses (including 1 male nurse) employed whole-time and 3 part-time nurses.

*Sitters-up Service.* Under the powers contained in Section 28 of the Act, arrangements were made for the Hull Jubilee District Nursing Association to organise and operate on behalf of the Local Health Authority, a "Sitters-up" Home Nursing Service. Whilst the Jubilee Nurses are essentially visiting nurses, who attend at many homes each day, the "Sitters-up" remain with the patients for a number of hours, usually during the night, so that the family of the sick person may get a period of rest. The "Sitters-up" Service is scheduled as a domestic help service, but is used entirely for the nursing of the sick.

During the year there were 8 whole-time and 2 part-time members employed in this Service; a total of 243 cases were nursed on 2,354 occasions.

The Local Authority pays to the Hull Jubilee District Nursing Association the actual deficit on the operation of the Home Nursing and "Sitters-up" Services after the annual accounts have been mutually agreed.

## SECTION 26—VACCINATION AND IMMUNISATION

Vaccination against Smallpox and Immunisation against Diphtheria are both available through those private doctors who have agreed to give such service and through various clinics of the Health Department. At the end of the year 122



medical practitioners had consented to vaccinate and immunise in accordance with the provisions of the National Health Service Act, 1946, whilst throughout the year vaccination and immunisation sessions were held weekly at 3 main clinics and monthly sessions were held at 13 Maternity and Child Welfare Centres. An additional monthly session was commenced at the St. Ninian's Church Hall, Chanterlands Avenue, on the 1st June, 1951.

Vaccination in early infancy is recommended by each Health Visitor when she makes her routine visit to a mother after the birth of a child. When the child reaches the age of nine months, immunisation is recommended by a Health Visitor in the course of her visits to the home.

*Vaccination.* During 1951, 2,230 infants were successfully vaccinated before reaching 1 year of age—912 were vaccinated by private medical practitioners and 1,318 at Health Department Clinics. This compares with 2,075 (823 by private medical practitioners and 1,252 at Health Department Clinics) vaccinated in the previous year.

Since the National Health Service Act 1946 became effective the standard of infant vaccination of previous years has not been maintained. This is shown by the following comparative percentages of infants vaccinated by the end of the year following that in which they were born :

<i>Year of Birth</i>	<i>Percentage vaccinated at 31st December of following year</i>
1945 .....	56.8
1946 .....	61.6
1947 .....	60.0
1948 .....	38.5
1949 .....	35.3
1950 .....	33.6

It is evident therefore that further efforts will have to be made to induce parents to have children vaccinated in early infancy.

The following summary shows the numbers of successful vaccinations and re-vaccinations carried out during 1951 :—

Age at date of Vaccination	Under 1	1	2 to 4	5 to 14	15 or over	TOTAL
Number Vaccinated .....	2,230	51	35	59	163	2,538
Number re-vaccinated	—	—	6	23	594	623



The age in months of those under 1 year at the time of vaccination is shown below :—

TABLE XVII

## Successful primary vaccination of infants under 1 year

		Age in months when vaccinated												
		0	1	2	3	4	5	6	7	8	9	10	11	Total
Clinics	....	3	82	318	431	221	124	62	31	18	17	8	3	1,318
Private Doctors	....	5	98	195	205	182	100	51	35	18	10	7	6	912
Total	....	8	180	513	636	403	224	113	66	36	27	15	9	2,230

No local re-action was shown after vaccination in the following cases:—

Vaccinated—	Under 1 year vaccinated once twice		Over 1 year vaccinated once twice	
	At Clinics	....	....	....
By Private Doctors	....	....	....	....
	13	12	4	—
	11	46	4	3
	—	—	—	—
	24	58	8	3
	—	—	—	—

*Diphtheria Immunisation.* In addition to the facilities for immunisation against Diphtheria provided at the Health Department clinics, a mobile unit toured the streets and visited schools. There is no doubt that by the use of this unit a number of children who would not otherwise have been immunised were given this protection against Diphtheria. Medical practitioners who co-operated under the provisions of the National Health Service Act 1946, were responsible for 816 initial immunisations and gave re-inforcing injections to 129 children. Health Visitors and School Attendance Officers continued to visit and advise parents to have their children immunised and, in the case of School Attendance Officers, to obtain consent for children to be immunised during school hours. Propaganda was continued by the use of posters, leaflets and "first birthday cards", and by talks to local organisations by medical and other staff of the Health Department.

TABLE XVIII

## DIPHThERIA IMMUNISATION IN 1951

	Schick Test			Immu- nised after Test	Immuni- sed without Test	Immuni- sation not completed at 31st December	Schick Re-Test			Second Immuni- sation not completed at 31st December	Reinforc- ing Injection
	No.	Neg.	Pos.				N/K	No.	Neg.		
Immunised by Local Health Authority :- Adults	2	2	—	—	—	—	—	—	—	—	—
(15 years and over)											
Schoolchildren	150	92	54	4	411	43	322	220	95	7	85
(5 to 15 years) ....											
Children	—	—	—	—	4,467	231	—	—	—	—	—
(under 5 years) ....											
Immunised by Private Doctors	22	10	12	—	816	—	—	—	—	—	129
TOTAL ....	174	104	66	4	5,694	274	322	220	95	7	85
											9
											2,907

Alum precipitated Toxoid was used generally as the immunising agent for children under 10 years of age, and T.A.F. for children over 10 years. T.A.F. was given in the adult age group.



The immunised child population in the city at 31st December, 1951, was :—

<i>Age Group</i>	<i>Total Immunised</i>	<i>Percentage Immunised</i>
Under 1 year	201	
1-2 years	3,331	
2-3 years	4,252	
3-4 years	4,808	
4-5 years	5,633	
	18,225	58·4%
5-10 years	19,781	
10-15 years	16,146	
	35,927	79·3%

Out of the total number of children under 15 years of age, estimated at 76,500, 70·8 per cent (54,152) had been immunised against diphtheria at the end of the year.

#### SECTION 27—AMBULANCE SERVICES

The Ambulance Service, established in accordance with Section 27, National Health Service Act, 1946, operated satisfactorily throughout the year. Co-operation with the ambulance services of the East Riding County Council and local authorities in the West Riding was maintained and resulted in economy of vehicle mileage in the conveyance of patients to and from hospitals at Leeds, Wakefield and other parts of the Regional Hospital Board's area.

Negotiations are in progress for a suitable site in the centre of the city on which to erect a new Central Ambulance Station, but it is likely to be some time before the building can be erected and occupied. The emergency and street accident ambulances continued to operate from the Police Garage, Guildhall Road, and with the permission of the Chief Constable messages were transmitted through the police telephone lines. The general ambulance service continued to use part of the Disinfecting Station, Scarborough Street, which had, of necessity, to be utilised when the Ambulance Service was organised in July, 1948.

In September, 1951, radio-telephone sets were fitted to 6 ambulances and control apparatus installed at the Ambulance Station, Scarborough Street.

Control of ambulances by this means provides economy in operation and will no doubt result in increased efficiency.

At the end of the year 16 ambulances and 10 sitting-case vehicles were in use. 1 ambulance and 3 sitting-case vehicles were obtained during 1951; and 1 old ambulance was disposed of.



The number of patients carried and miles travelled by the Ambulance Service vehicles, including journeys for other Authorities, was as follows :—

*Directly provided service—*

	<i>Journeys</i>	<i>Patients</i>	<i>Miles</i>
Ambulance cases ....	14,053	20,453	142,670
<i>Sitting cases carried in—</i>			
Ambulances ....	2,873	5,506	21,363
Sitting-case cars ....	6,137	19,102	84,597
Midwives' cars ....	2,462	3,593	21,504
Other cars, etc. ....	47	54	504

An appreciable number of sitting cases were carried in ambulances ; and cars belonging to the Midwives' Car Service were also utilised as opportunity permitted.

Ambulance services were also provided, by arrangement with the East Riding County Council, for a certain part of the area of the Authority adjacent to the eastern boundary of the city, and general co-operation between the two ambulance services, was maintained.

The number of patients carried and miles travelled on behalf of the East Riding County Council was as follows :

	<i>Journeys</i>	<i>Patients</i>	<i>Miles</i>
<i>Ambulances :</i>			
Specially defined area ....	24	25	339
Other cases ....	20	23	324
<i>Sitting case cars :</i>			
Specially defined area ....	1	1	17
Other cases ....	3	6	139

#### OTHER TRANSPORT SERVICES

*Midwives' Car Service.* The Midwives' Car Service, commenced in October, 1948, and brought into full use in January, 1949, provided for the conveyance of midwives to confinements both day and night and carried gas and air analgesia equipment as required. 4 cars are provided with 6 male and 6 female driving staff operating a 24-hours service.

During 1951, 5,282 calls were made by midwives and the cars travelled 26,542 miles.

On other journeys undertaken by these cars for various sections of the Department, 36,898 miles were also travelled.



*Transport of Children to Nurseries.* Two vehicles specially fitted to carry infants under 2 years of age have been in use for some years to transport children to and from a collecting point in the city and one of the nurseries. These vehicles travelled 3,992 miles on these duties during 1951.

*Other Vehicles.* The Health Department operated a mobile immunisation unit throughout the year. Two vans were used for the collection of infected bedding, etc., and the subsequent return of such articles after disinfection, whilst three other vans were engaged in general delivery work, including the transport of laundry and other goods to and from hospitals administered by the No. 4 Hull (A) Group Hospital Management Committee. One truck was used for the transport of condemned foodstuffs, etc.

The total mileage covered during the year by all vehicles belonging to the Department, including the ambulances and sitting-case cars, was 416,070.

All vehicles of the ambulance and other transport services were maintained in serviceable condition by the staff employed at the Health Department's Repair and Maintenance Garage, Waterloo Street.

## SECTION 28—PREVENTION OF ILLNESS, CARE AND AFTER-CARE

Following the process of presenting a simple and co-ordinated picture of the activities of the Health Department, the work performed under this Section of the Act in relation to Mental Health and Tuberculosis has been reported upon in the chapters dealing with those subjects on pages 127 and 148 respectively. Similarly, details in respect of the "Sitters-up" Service have been included in the report under Section 25 of the Act (Home Nursing—page 110), although such Service has been instituted under the powers conferred by Section 28.

A summary of the applications received in respect of services provided under Section 28, is given in Table XIX, page 118. A marked increase occurred in the number of applications received for the loan of nursing requisites and for extra milk for tuberculous patients.

*Patients discharged from Hospital.* The almoners attached to the various hospitals in the city notify the Health Department regarding all patients needing special supervision on discharge. Information is sent to the Department prior to the patient returning home so that arrangements may be made for the necessary after-care in the form of home nursing, "sitter-up" or domestic help, convalescent treatment, or such other service as may be recommended by the hospital medical staff or the patient's own doctor.



*Nursing Requisites.* A scheme for the provision of nursing requisites is in operation. Articles are available on loan for all patients who are being confined or nursed at home. A small charge is made for the loan of the articles, but if the applicant is unable to pay the standard amount, the charge is assessed on an income basis.

During 1951, 840 applications were received for the loan of nursing requisites, 7 of which were not granted. This compares with 351 applications during 1950, 5 of which were not granted.

The 833 applications granted 1951 were in respect of the following illnesses:—

Confinement	173	Pneumonia, Pleurisy, etc.	29
Cancer and Tumour	101	Asthma and Bronchitis	25
Senility	76	Rheumatism, etc.	24
Stroke	72	Fractures	22
Disease of the Heart	64	Mental Deficiency	5
Tuberculosis	44	Others	157
Diabetes	41		

The number of articles dealt with was as follows :

	<i>On loan at 31/12/50</i>	<i>Issued during 1951</i>	<i>On loan at 31/12/51</i>
Bedsteads and Cots	14	81	25
Mattresses, Dunlopillo	9	39	14
Mattresses, Hair	14	82	25
Bedding, various items	172	1,093	275
Sheets, waterproof	26	283	66
Air Rings	25	237	59
Backrests	21	136	50
Bedpans, Urinals etc.	52	436	113
Commodos	3	22	11
Dishes, jugs, etc.	9	36	6
Scales (Diabetic)	9	37	17
Wheelchairs	—	10	2
Miscellaneous	16	124	47
<b>Totals</b>	<b>370</b>	<b>2,616</b>	<b>710</b>

The number of articles issued in 1950 was 1,023.



TABLE XIX

NATIONAL HEALTH SERVICE ACT, 1946—SECTION 28

APPLICATIONS FOR THE PROVISION OF SERVICES OR THE LOAN OF ARTICLES

SERVICE	No. of Applications Received	TUBERCULOSIS CASES			OTHER CASES			TOTAL	
		GRANTED		*Not Granted	GRANTED		*Not Granted	GRANTED	*Not GRANTED
		Free	Standard Charge		Free	Standard Charge			
Loan of Nursing Requisites .....	840	16	28	—	66	723	7	833	7
Provision of Extra Nourishment (Milk) .....	82	72	—	9	—	—	1	72	10
Provision of Clothing .....	18	16	—	1	—	—	1	16	2
Maintenance at Convalescent Homes .....	25	—	—	—	1	16	8	17	8

\* "Not Granted" includes all applications which were cancelled, not approved or withdrawn after approval.

The British Red Cross Society and the St. John Ambulance Brigade also supply medical and nursing comforts to the public, each organisation having its own tariff and loan arrangements.

*Convalescent Homes.* 25 applications were received for the provision of convalescent home accommodation, 17 of which were granted. All applications are assessed on an income basis, and patients are sent to the Convalescent Home for a period of fourteen days. The lack of suitable accommodation within reasonable distance of Hull is a great handicap to the further development of this service.

*Venereal Diseases.* Treatment for cases of venereal disease arising in the city and port area continued to be available at the Mill Street Clinic, which is administered by the No. 4 Hull (A) Group Hospital Management Committee of the Leeds Regional Hospital Board.

The following tables have been compiled from the Annual Returns kindly furnished by Dr. R. J. Barlee, Physician in Charge of the Clinic.

In addition to the year under review, tables showing particulars of the number of patients attending the clinic for the first time during the years 1949 and 1950, respectively, have been included in this Report for the purpose of comparison.

NUMBER OF PATIENTS ATTENDING THE MILL STREET CLINIC  
FOR THE FIRST TIME DURING 1949

	Syphilis		Gonorrhoea		Other Conditions		Total	
	M.	F.	M.	F.	M.	F.	M.	F.
Syphilis—Primary .....	46	13	—	—	—	—	46	13
—Secondary .....	11	9	—	—	—	—	11	9
—Latent in 1st year of infection .....	12	9	—	—	—	—	12	9
—All other late or latent stages .....	39	15	—	—	—	—	39	15
—Congenital .....	4	8	—	—	—	—	4	8
Gonorrhoea .....	—	—	585	33	—	—	585	33
Chancroid .....	—	—	—	—	143	2	143	2
Lymphogranuloma inguinale .....	—	—	—	—	1	—	1	—
Other conditions requiring treatment .....	—	—	—	—	491	31	491	31
Conditions not requiring treatment .....	—	—	—	—	499	77	499	77
Totals .....	112	54	585	33	1,134	110	1,831	197



NUMBER OF PATIENTS ATTENDING THE MILL STREET CLINIC  
FOR THE FIRST TIME DURING 1950

	Syphilis		Gonorrhoea		Other Conditions		Total	
	M.	F.	M.	F.	M.	F.	M.	F.
Syphilis—Primary .....	55	7	—	—	—	—	55	7
—Secondary .....	7	12	—	—	—	—	7	12
—Latent in 1st year of infection .....	16	8	—	—	—	—	16	8
—Cardio Vascular .....	1	—	—	—	—	—	1	—
—Of Nervous System .....	3	1	—	—	—	—	3	1
—All other late of latent stages .....	31	17	—	—	—	—	31	17
—Congenital .....	9	7	—	—	—	—	9	7
Gonorrhoea .....	—	—	403	24	—	—	403	24
Chancroid .....	—	—	—	—	113	2	113	2
Other conditions requiring treatment .....	—	—	—	—	547	48	547	48
Conditions not requiring treatment .....	—	—	—	—	409	98	409	98
Totals .....	122	52	403	24	1,069	148	1,594	224

NUMBER OF PATIENTS ATTENDING THE MILL STREET CLINIC  
FOR THE FIRST TIME DURING 1951

	Syphilis		Gonorrhoea		Other Conditions		Total	
	M.	F.	M.	F.	M.	F.	M.	F.
Syphilis—Primary .....	35	11	—	—	—	—	35	11
—Secondary .....	9	8	—	—	—	—	9	8
—Latent in 1st year of infection .....	3	6	—	—	—	—	3	6
—Cardio-Vascular .....	1	—	—	—	—	—	1	—
—Of Nervous System .....	5	—	—	—	—	—	5	—
—All other late or latent stages .....	28	16	—	—	—	—	28	16
—Congenital .....	5	4	—	—	—	—	5	4
Gonorrhoea .....	—	—	363	41	—	—	363	41
Chancroid .....	—	—	—	—	90	2	90	2
Non-Gonococcal Urethritis .....	—	—	—	—	229	—	229	—
Other conditions requiring treatment .....	—	—	—	—	239	32	239	32
Conditions not requiring treatment .....	—	—	—	—	384	60	384	60
Totals .....	86	45	363	41	942	94	1,391	180



The V.D. plaques displayed in various properties in the city continued to be supplied and maintained by the Local Health Authority.

*Health Education and Publicity.* Throughout the year the medical staff of the Department gave talks and lectures to various organisations in the city, whilst the technical officers undertook lecture duties at the University and Training Colleges and the Evening Institutes. The Health Visitors continued their work of assisting mothers by individual and group teaching in mothercraft.

Two booklets published by the Health Committee entitled "Your Health Services" and "The Welfare of Your Child", respectively, continued to be distributed at clinics and by Health Visitors and other staff.

The portable "Health News" exhibition stand supplied on free loan by the Central Council for Health Education was used to display exhibition material supplied by the Council on free loan until the end of May when the Council discontinued this service and introduced a new Light Display Frame for the continuation of its Exhibition Service at a charge of £3 per year per frame to meet increasing costs of renovations of exhibition materials. The "Health News" stand which had been on free loan was offered for sale to the Local Authority and this was purchased and continued to be used for exhibiting the topics provided by the Central Council for Health Education. The stand was exhibited in the Guildhall and in the larger clinics of the Health Department.

As part of its services the Central Council for Health Education arranged a course of lectures on health education to be given to the Local Authority's staff and sent a team of lecturers consisting of 2 doctors, a psychologist and an educationalist. The programme included a two-day course for members of the Health Department's staff, also an open evening meeting. The two-day course which had for its theme "The Principles, Methods and Media of Health Education" was attended by Medical Officers of the Department, also members of the Midwifery and Health Visiting staffs. Representatives from other departments of the Local Authority attended by invitation. The course was interesting and instructive. Mr. Noseworthy impressed his audience with his practical demonstrations in methods of learning and teaching techniques for small groups. A return visit of Mr. Noseworthy for the benefit of those members of the Midwifery and Health Visiting staffs who had been unable to attend in the first instance was requested and kindly granted by the Central Council for Health Education.

The evening meeting which was open to the public to attend, was arranged to enable a discussion on "Parents Problems" or the "Problems of Childhood" and included the showing of a film entitled "Children Growing Up With Other People".



The meeting took place in the Lecture Hall at the Electricity Showrooms by kind permission of the Yorkshire Electricity Board. Despite the inclement weather and illness amongst children caused by the prevalence of measles and colds, there was an attendance of 70 adults. The lecturer, Dr. Barton, gave an interesting talk after the film show and later dealt adequately with questions.

*Festival of Britain, 1951.* Like many other local authorities the Hull Corporation participated in the Festival of Britain celebrations. The Health Department welcomed this rare event which provided an opportunity to publicise the activities of the various sections of the department. Early in February a meeting took place of senior officials and members of various sections of the department also officials of the School Health Service, and the Hull and Goole Port Health Authority. A plan was formulated and subsequently approved by the Health Committee; the Committees of the Sanitary Section, School Health Service and the Hull and Goole Port Health Authority kindly acceded to the Health Committee's request to participate. As part of the programme a Health Exhibition in the form of a series of window displays was presented featuring the work of the local Health Authority, and extended over a period of sixteen weeks from the 19th April to 9th August. A new feature was introduced each week. The Exhibition was held in the Electricity Showrooms, Ferensway (a busy thoroughfare in the city centre), by kind permission of the Yorkshire Electricity Board.

The series of displays opened with an exhibit prepared in the Maternity and Child Welfare Section of the department and illustrated the work of the Health Visitor. This was followed later by a display arranged by the staff of the Midwifery Section.

The varied duties in connection with nursing the sick and infirm in their own homes were portrayed by a display arranged by the staff of the Hull Jubilee District Nursing Association.

Despite difficulties which attend any publicity regarding treatment and care of mental illness, a display was produced demonstrating the progress made in the treatment of mental disorders, by portraying conditions in an asylum in the 18th century in marked contrast to a scene in a modern hospital. This display is believed to be the first of its kind attempted locally and maybe in the country.

An exhibit dealing with the Prevention of Illness, Care and After-care publicised the loan scheme for the provision of nursing requisites, and drew attention to the Mass X-ray Service and the forthcoming sessions in the district.

The remarkable results achieved within recent years in controlling Diphtheria by Immunisation were brought to the notice of the public by an exhibit presented by the Vaccination and Immunisation Section.



The work of the Sanitary Section was illustrated by exhibits dealing with the damage done by rats, mice and insect pests and the methods used to exterminate such vermin. A Century of Housing Progress was illustrated by photographs of dwelling-houses of modern design and those of a hundred years ago. The ill-effect on the health of town dwellers by atmospheric pollution and deposits of soot, etc., was emphasised by a further exhibit produced by the Sanitary Section of the department.

The vital importance of the need for cleanliness and personal hygiene on the part of members of the community in handling, storing and distributing foodstuffs was clearly defined by a display arranged by the Food Inspection branch.

Exhibits were prepared by the staff of the School Health Service, one of which described how physically handicapped, partially sighted and hard of hearing school children are helped and tutored, and the other featured the activities at the Open Air School where delicate children are assisted to improve their health.

The duties of the Medical and Inspectorial staff of the Hull and Goole Port Health Authority and the methods used in an endeavour to ensure the prevention of the importation of disease by incoming vessels and seamen, and by imported food, was the subject of an interesting and attractive display.

The displays proved to be a successful medium for publicising the duties performed by the local Health Authority and the exhibits became a weekly feature of interest to regular passers-by.

The department also participated in a Festival of Britain Exhibition arranged by the Hull Corporation Development Committee in the City Hall by providing an exhibit dealing with Vaccination and Immunisation. The display illustrated the gratifying results achieved within recent years in the control of Diphtheria by immunisation and the part played by the Local Health Authority in protecting children against two dangerous and infectious diseases—Smallpox and Diphtheria. The hygienic methods adopted at the various clinics in carrying out immunisation were indicated by exhibits (including a sterilizer containing instruments) supported by photographs.

The Department's Festival of Britain programme concluded with an informal inspection by the Lord Mayor, Alderman R. E. Smith, J.P. (Chairman of the Health Committee), of the personnel and vehicles of the Ambulance Service, followed by a tour of inspection of the staff and equipment at the Maintenance and Repair Garage. The Lord Mayor was impressed by the smartness and all-round efficiency of the Service.







## SECTION 51—MENTAL HEALTH SERVICE

The following report has been contributed by Dr. J. Mackay, Psychiatrist.

## (I) ADMINISTRATION

(a) *Constitution of Mental Health Sub-Committee.* The Mental Health Service is administered by the Mental Health Sub-Committee of the Health Committee. The Sub-Committee comprises eight members, and the Medical Officer of Health and the Psychiatrist attend meetings in an advisory capacity. Meetings are held each month during the week preceding the meeting of the Health Committee.

(b) *Staff.* At the end of the year the Mental Health Staff, working under the direction of the Medical Officer of Health, consisted of :—

<i>No.</i>	<i>Appointment</i>	<i>Name</i>	<i>Qualifications</i>
1	Psychiatrist	Dr. J. Mackay	M.D., D.P.M.
3	Duly Authorised Officers	Mr. C. H. Taylor	Relieving Officers' Certificate
		Mr. W. Forward	—
		Mr. A. C. Willby	Certificate of R.M.P.A., R.M.N.
3	Mental Deficiency Officers	Mr. F. Branton	Certificate of R.M.P.A., R.M.N.
		Mr. E. Elliott	Certificate of R.M.P.A., R.M.N.
		Mrs. A. Townhill	—
2	Social Workers	Mrs. F. Pocklington	Certificate of R.M.P.A., R.M.N.
		Mrs. E. McCreadie	Certificate of R.M.P.A., R.M.N.
1	Assistant Mental Deficiency Officer and Clerk	Mrs. Z. Wright	—
1	Clerk	Mrs. E. Townhill	—
5	Occupation Centre Supervisors	Miss G. A. Wheelband	Diploma of National Association of Mental Health
		Miss E. Paterson	Diploma of National Association of Mental Health
		Miss M. M. Clarkson	—
		Mrs. I. Beacher	—
		Mrs. I. Branton	—
—			
16	Total		
—			

During the year three officers were absent from duty on account of sickness over a protracted period. To meet the exigencies of the service the Mental Health Sub-Committee made the following temporary appointments :

<i>Appointment</i>	<i>Name</i>	<i>Period of Service</i>	<i>Qualifications</i>
Duly Authorised Officer	Mr. E. Elliott	.... 16/4/51 to 13/8/51 ....	Certificate of R.M.P.A.
	Mr. F. Branton	.... 16/7/51 to 6/8/51 ....	Certificate of R.M.P.A.
	Mr. S. R. Dahle	.... 7/8/51 to 14/10/51 ....	Certificate of R.M.P.A.
	Mr. G. W. Hailstone	13/8/51 to 30/12/51	Certificate of R.M.P.A.



The staff monthly meetings, which were inaugurated last year, continued with success under the guidance of the Psychiatrist.

(c) *Co-ordination with Regional Hospital Boards and Hospital Management Committees.* The Regional Psychiatrist conferred on several occasions with the Medical Officer of Health and the Psychiatrist over matters of common interest. The former was briefed in the latest developments at Local Authority level.

The Psychiatrist, being a member of the Regional Hospital Board Technical Advisory Committee, was constantly in touch with policy and development at Regional Headquarters.

Thrice weekly visits were made by the Psychiatrist, as Consultant, to the wards of Kingston General Hospital in connection with the observation and treatment of neurosis cases, and the Out-patient Service. The Social Workers continued to have access to these wards. This enabled them to observe, at firsthand, environment problems which featured in the causation of mental sickness, and assisted them to make the necessary adjustments.

The Mental Health Service was not called upon to supervise patients allowed out on trial from Mental Hospitals, but occasional requests were received throughout the year for assistance with supervision of certain patients resident in the city on licence from Institutions for Mental Defectives.

(d) *Duties delegated to Voluntary Associations.* No duties in connection with the Mental Health Service remain delegated to voluntary associations.

(e) *Training of Mental Health Workers.* Owing to temporary absence of members of the staff on sick leave it was not found possible to initiate a specific scheme for the training of Mental Health Workers during the year, but under the direction and assistance of the Psychiatrist, the workers received personal training in all branches of the service.

Observers visited the Mental Health Section at 76 Lowgate and were instructed in the various stages of activity. These included two officials from the Ministry of Labour Rehabilitation Centre, six Student Health Visitors of the Corporation, and an official of the Children's Department of the Corporation.

Student Health Visitors of the Corporation received a series of five lectures at the University College on "Behaviour Problems" and "Care of the Mentally Disordered". They visited the Occupation Centre where demonstrations were given by the Supervisor and her staff.



## (II) ACCOUNT OF WORK UNDERTAKEN IN THE COMMUNITY

(a) *Section 28, National Health Service Act 1946 ; Prevention, Care and After-Care.* The number of visits and new cases showed a slight increase over 1950 but, whereas the former must of necessity remain more or less unchanged, there was a substantial increase in the new cases notified. The majority of cases submitted for attention came from medical practitioners but many were notified by other departments of the Corporation.

The Social Workers are indebted to the officers of the various departments of the Corporation and voluntary services for their ready co-operation and sympathetic response when approached for help.

In all classes of patients the greatest difficulty is employment. Much of the simpler routine or part-time work which was available was being carried out by healthy people who, by virtue of their higher intelligence and their emotional stability, were naturally fitted for more responsible work.

Miss Nogaard, Psychiatric Social Worker, visited the section for a discussion on the subject of "After Care" for patients leaving the De la Pole Hospital to resume residence within the city.

Only six applications for after-care were received from patients following discharge from the De la Pole Hospital. This was in marked contrast with the previous year when 26 applications were received.

Lectures were again given by members of the staff to local organisations on various aspects of mental health and there appears to be an increasing interest in such matters by the public.

The following statistics relate to the work of the Social Workers for the year ended 31st December, 1951 :—

		VISITING				
Neurosis Cases	....	....	....	....	....	730
Miscellaneous Cases	....	....	....	....	....	408
After-care Cases	....	....	....	....	....	265
Ex-Service Personnel :						
After-care Cases	....	....	....	....	....	1
						<hr/>
				Total	....	1,404
						<hr/>
New Cases notified	....	....	....	....	....	147

(b) *Lunacy and Mental Treatment Acts 1890–1930.* Overcrowding in mental hospitals was a matter considered by the Regional Hospital Board and resulted in a revision of certain Catchment Areas. Whilst acknowledging this to be helpful



in many respects, as in other areas, the local problem of the aged remained acute and often embarrassing to the Duly Authorised Officers owing to the shortage of accommodation at the Western General Hospital. In this connection one might justifiably say that too often there is the danger of fostering the concept that the patient is merely old and therefore regarded as a social rather than a psychiatric casualty.

In the event of continuing pressure on the observation wards at this hospital, it is possible that the Duly Authorised Officers will have to seek accommodation for Section 20 cases at the De la Pole Hospital, which is designated for that purpose.

During the year courtesy calls were made on thirteen newly appointed Justices of the Peace and they were invited to co-operate judicially in the work of the section, should their services be requested. Without exception they signified eagerness to fulfil their statutory obligations when at liberty.

A review of the statistics shows a decrease in the number of females dealt with under Section 20, Lunacy Act 1890, compared with 1950. This may be due to a decrease in the incidence of attempted suicide. It will also be observed that there is a comparative increase in the number of Voluntary, Temporary, and Certified cases admitted to the De la Pole Hospital. Many factors contribute to variations of this nature and it would be difficult to give a particular reason for these fluctuations, but there is ample evidence to show that the public are realising that mental disorder is a sickness. Fear is being dispelled in the apprehension that treatment can be more effective if cases are notified immediately to the family practitioner or the Mental Health Service. In consequence of this enlightenment, people are more readily availing themselves of Psychiatric Clinic services and Voluntary Treatment in Mental Hospitals.

The following statistics relate to the work of the Duly Authorised Officers for the year ended 31st December, 1951 :—

**TABLE XX**  
**Duly Authorised Officers' Report**

				Males	Females	Total
<i>Lunacy Act, 1890. Section 20.</i>						
Admitted to Western General Hospital	....	....	....	198	206	404
Removed to the De la Pole Hospital from Western General Hospital,						
Kingston General Hospital and Tilworth Grange :—						
	Certified	....	....	33	62	95
	Temporary	....	....	4	5	9
From home address :	Certified	....	....	1	11	12
	Temporary	....	....	—	2	2
				—	—	—
				38	80	118
				—	—	—
Voluntary cases admitted to the De la Pole Hospital	....	....	....	159	162	321
Cases transferred to the De la Pole Hospital from other Mental Hos-						
pitals	....	....	....			6



Removed to the Broadgate Hospital and York Retreat from Western General Hospital—

	<i>Males</i>	<i>Females</i>	<i>Total</i>
Certified .....	2	5	7
Temporary .....	1	—	1
Voluntary .....	1	3	4
	—	—	—
	4	8	12
	—	—	—
Voluntary and other cases in which advice and assistance were given			371
Visits to homes where no action was taken .....			273
Visits by Justices of the Peace to :—			
Western General Hospital .....	114		
Kingston General Hospital .....	1		
Tilworth Grange .....	3		
Homes .....	17		
	—		135
Property notices to Welfare Services under Section 48, National Assistance Act, 1948 .....			610
After-care visits by the Duly Authorised Officers .....			46

(c) *Mental Deficiency Acts, 1913–1938*

(i) Ascertainment continued to be the responsibility of the Medical Officers of the School Health Service. Each case was notified to the Education Authority who in turn acquainted the Local Health Authority. Certain cases were dealt with as mental defectives following the Psychiatrist's report to the Juvenile Court.

The following statistics relate to the work of the Mental Deficiency Officers for the year ended 31st December, 1951 :—

TABLE XXI.

MENTAL DEFICIENCY OFFICERS' REPORT, 1951.

<i>Mental Deficiency Acts, 1913-1938</i>	<i>Males</i>	<i>Females</i>	<i>Total</i>
Ascertained during 1951 .....	14	28	42
Placed under Certificate .....	10	9	19
Awaiting vacancies in Institutions .....	14	28	42
Cases under Guardianship .....	—	2	2
Cases under Supervision .....	218	284	502
Cases in day-training Centres .....	27	40	67

(ii) *Guardianship and Supervision.* During the year, 1,927 visits were made to the homes of Statutory Supervision cases, a decrease of 319 visits compared with the year 1950. This was due to the prolonged indisposition of certain officers of the Mental Health Service.



A pleasing feature of our welfare activities was the success attained in placing 39 feeble-minded persons in employment during the year.

An officer of the service accompanied 20 mentally handicapped children on visits for hospital and dental treatment.

74 visits to local shops were made by officers for the purpose of assisting girls under Statutory Supervision in the purchase of suitable personal clothing requirements.

In connection with reports on the Home Circumstances of certified patients re-examined by the Justices, 105 visits were made to the homes of the respective patients.

Three girls under Statutory Supervision enjoyed a holiday for one week at Scarborough. They were accompanied by an officer who kindly arranged a week of her holidays for the purpose of acting as chaperon to the girls.

Through the kind co-operation of the Women's Voluntary Service 35 patients in community care were supplied with footwear and clothing. In 3 of these cases blankets were also issued.

The sum of £8 was provided from the Tilworth Grange Gala Fund and distributed between the parents of three certified patients for the purpose of assisting them with the cost of long-distance railway fares when visiting their sons and a daughter respectively.

Six families were recommended and later received a monetary allowance from the Lord Mayor's Distress Fund.

A monetary Christmas grant from the Mental Health Sub-Committee was again augmented by generous gifts of fruit from several fruit merchants in the city. This enabled each child under Statutory Supervision to receive a suitable gift plus a liberal amount of choice fruit.

(iii) *Provision of Occupation and Training for Defectives.* Provision was originally made in this regard by the establishment of an Occupation Centre at 339/341 Anlaby Road in 1947. The Centre has now a roll of 67 children, an increase of 11 over 1950. During the year there were 16 admissions. 6 children left; one obtained employment on attaining 15 years of age; one transferred to Winestead Colony; two left the city and two were excluded for irregular attendance. The average attendance varied from 46 to 61. 10 children received free meals.

To cope adequately with the number of pupils in attendance, an additional supervisor was appointed in November by the Mental Health Sub-Committee and was given charge of the Nursery Group.

Children in the Senior Group (age 14 upwards) were introduced to national dancing to widen their range of physical activity. These children were attached as monitors to the three Junior Groups in order to assist the younger children, and by so doing, engendered a greater feeling of confidence in themselves.

The arrangements for the daily collection and transportation of children by private bus to the Occupation Centre, and their return to the collection points all over the city after the closing of the Centre, continued as in 1950.

Miss Sykes, an Inspector of the Board of Control, visited the Centre on the 4th May.

Visitors during the year included parents, students from the University College and the Municipal Training College and Student Health Visitors as observers of Centre Training.

Toys and other gifts presented by the Mental Health Sub-Committee, St. Ninian's Sunday School, and several members of the public, were distributed to the children at Christmas.

#### AMBULANCE SERVICE

Ambulances and other vehicles for mental health work continued to be provided from the Central Garage of the Local Authority.

The Chief Ambulance Officer and his personnel gave valuable assistance by maintaining a smooth and efficient service.



PART IV

INFECTIOUS DISEASES  
TUBERCULOSIS, ETC.

## PREVALENCE OF AND CONTROL OVER INFECTIOUS DISEASES

The material for this section has been supplied by Dr. R. H. Moyes, Deputy Medical Officer of Health.

The total number of cases of infectious disease notified in 1951 was 4,986 compared with 9,049 in 1950. The large reduction was due to the lesser number of Measles notifications which were 4,600 fewer than the exceptionally high number of the previous year. 529 more cases of Whooping Cough and 111 more of Acute Primary Pneumonia were notified than in 1950. Scarlet Fever notifications were 134 less than in the previous year. Table XXII on page 134 shows the notifications classified in age groups and the distribution throughout the city.

The following table gives the case rates per 1,000 of the population for the principal notifiable infectious diseases and a comparison with the rates for England and Wales for the past two years:—

Disease	1951		1950	
	Kingston upon Hull	England and Wales	Kingston upon Hull	England and Wales
Smallpox	—	0·00	—	0·00
Scarlet Fever	1·25	1·11	1·67	1·50
Diphtheria	—	0·02	0·01	0·02
Typhoid Fever	—	0·00	0·00	0·00
Paratyphoid Fever	0·00	0·02	—	0·01
Meningococcal infection	0·03	0·03	0·03	0·03
Erysipelas	0·12	0·14	0·11	0·17
Measles	6·80	14·07	21·94	8·39
Whooping Cough	6·31	3·87	4·52	3·60
Pneumonia	1·15	0·99	0·64	0·70
Acute Poliomyelitis				
Paralytic	0·01	0·03	0·05	0·13
non-Paralytic	0·01	0·02	0·06	0·05
Food poisoning	0·02	0·13	0·03	0·17
*Puerperal Pyrexia	10·36	10·66	5·19	5·81

\* Attack rate per 1,000 live and still births.

(—) Indicates that no case occurred.







*Scarlet Fever.* 384 cases were notified in 1951 compared with 518 in the previous year and an average of 608 for the 20 years 1931–1950. Only on one occasion (327 cases in 1941) has a lower number been recorded in the 20-year period.

The disease was more prevalent, however, in the last quarter of the year, when 140 of the cases occurred—90, 85 and 69 cases were notified respectively in each of the first, second and third quarters.

222 or 57·8 per cent of the notified cases were admitted to the Infectious Diseases Hospital.

In 12 of the cases admitted to hospital the diagnosis of Scarlet Fever was not confirmed, whilst 2 others admitted as suffering from some other disease were found to have Scarlet Fever. The total number of cases after correction was 374. There were 15 secondary cases, i.e., cases occurring in a family within 4 weeks of the onset of a previous case; in 1 instance 2 secondary cases occurred in the same house. No "return case" occurred.

No death from Scarlet Fever was registered.

*Diphtheria.* It is with great pleasure recorded for the first time since the disease became notifiable, that no case of diphtheria occurred in the city during the year under review. 16 persons were notified as having diphtheria or suspected diphtheria, and were admitted to the Infectious Diseases Hospital for observation and treatment, but in no case was the diagnosis confirmed.

For the fifth year in succession no death from diphtheria was registered.

The following table shows the decline in the "true" cases for the previous 5 years :

Year	Notifications received	Diagnosis confirmed	Attack-rate per 1,000 population	*Deaths	Death-rate per 1,000 population	Case mortality per 100 cases
1946	194	102	0·37	2	0·007	1·96
1947	86	30	0·10	—	—	—
1948	82	24	0·08	—	—	—
1949	38	2	0·00	—	—	—
1950	25	4	0·00	—	—	—
1951	16	—	—	—	—	—

\* Inward transferable deaths omitted.



The routine of swabbing all child contacts of suspected cases was continued. The 17 children from whom swabs were taken all gave negative results.

There is no doubt that the protective value of immunisation has been proved but our efforts to increase the percentage of immunised children cannot be relaxed and parents must not be allowed to assume that diphtheria infection has been entirely eradicated.

At the 31st December, 1951, 70·8 per cent of children under 15 years of age in the city were known to have been immunised. There is still a number of unprotected children who are likely to contract diphtheria.

*Measles.* The outbreak of measles which commenced during the previous year continued in the early part of 1951, and accounted for the higher prevalence of the disease in the first quarter.

Of the 2,030 cases recorded in 1951, 1,011 occurred in the first quarter ; 473 in the second ; 188 in the third and 358 in the fourth quarter.

The disease was mild in type. One death was registered throughout the year.

60 cases were admitted to the infectious diseases hospital, 2 of whom were subsequently found not to be suffering from measles.

*Whooping Cough.* 8 deaths from whooping cough were reported during the year, giving a death-rate of 0·027 per 1,000 of the population ; this compares with 5 deaths and a rate of 0·017 in 1950 ; 6 deaths and a rate of 0·02 in 1949 and 5 deaths and a rate of 0·017 in 1948.

1,895 cases of whooping cough were notified compared with 1,366 in 1950 ; 88 children were admitted to the Infectious Diseases Hospital but in 13 instances the diagnosis of whooping cough was not confirmed.

Whooping Cough was more prevalent in the third quarter of the year when 813 cases occurred. There has been a steady rise in the number of notified cases over the past 3 years, i.e., 1,239 in 1949 ; 1,366 in 1950, and 1,895 in 1951. The average incidence for the 10 years 1941–50 was 979.

*Diarrhœa, Gastritis and Enteritis.* 22 deaths of infants under 2 years of age were recorded during the year compared with 10 during 1950. The death-rate per 1,000 births was 3·9 against 1·7 for 1950 ; 5·3 for 1949, and 6·0 for 1948.



The total number of deaths at all ages from these diseases was 33, the death-rate per 1,000 of the population was 0.11. The death-rates for the previous 3 years were : 1950, 0.07 ; 1949, 0.12, and 1948, 0.15.

*Enteric Fever.* 2 cases were notified : a child aged 10 months, who later died in the infectious diseases hospital where the illness was diagnosed as being caused by Salmonella Infection ; and a man aged 23 years, admitted to the Western General Hospital, where he was found to be a urinary carrier of para-typhoid "B" organisms. He was reported clear of infection before being discharged from the hospital.

*Acute Poliomyelitis.* Of the 7 cases of poliomyelitis brought to notice during the year, 5 occurred in the third quarter and 2 in the fourth quarter. 6 patients were admitted to the infectious diseases hospital and one received treatment at home. Subsequent correction of diagnosis showed that actually 5 cases occurred, 3 paralytic and 2 non-paralytic ; one of the non-paralytic cases died in hospital. 5 other persons were admitted to the infectious diseases hospital for observation as suspected cases of poliomyelitis but the diagnosis was not confirmed. The 3 children who had been affected with paralysis during the course of the illness were reported to be free from paralysis at the end of the year.

*Acute Encephalitis.* 1 case of Acute Infective Encephalitis occurred in a male, aged 22 years. The illness followed an attack of Mumps ; the patient was admitted to the infectious diseases hospital when the encephalitis symptoms developed. 1 other patient was admitted to hospital for observation as a suspected case, but the diagnosis was not confirmed.

*Meningococcal Infection.* 10 cases occurred throughout the year, 7 were direct notifications and 3 came to notice on correction of diagnosis of patients who had been admitted to the infectious diseases hospital under some other classification. 3 of the notified persons were admitted to the infectious diseases hospital and 4 to the Victoria Hospital for Sick Children. 3 deaths from Meningococcal infection were registered.

*Dysentry.* 150 cases were notified throughout the year and 5 persons who were admitted to the infectious diseases hospital diagnosed as gastro-enteritis, were found to be suffering from dysentry. 13 of the notified cases were admitted to the infectious diseases hospital but subsequent correction of diagnosis was made in 6 instances. There were, therefore, 149 cases brought to notice compared with 210 during the previous year.

Nearly 50 per cent of the cases occurred in the first quarter of the year, but there was no outstanding group of cases or circumstances which might have led to a possible source of infection.



*Weil's Disease.* 1 case was reported during the year, a male fish dock worker. He was admitted to the Western General Hospital on the tenth day of illness and died two days later. Action was taken by the Hull and Goole Port Health Authority to intensify the operations for the control of rats on the dock premises.

*Influenza.* Influenza was prevalent during the early part of the year, especially in January and February, but did not reach the epidemic proportions experienced in some other northern areas.

Of the 54 deaths which occurred throughout the year, 46 took place in the first two months. This is the largest number of deaths since 1943—during that year 69 were recorded 51 of which occurred in the last quarter.

The local incidence reverted to a normal level during March and continued so for the remainder of the year. There were 2 deaths in March making the total for the first quarter 48—and during the second, third and fourth quarters the numbers were 2, 1 and 3 respectively.

*Pneumonia.* Pneumonia showed an increased prevalence concomitant with influenza in the early months of the year. Of the 370 cases (63 Acute Influenzal and 307 Acute Primary) notified throughout the year, 181 occurred in the first quarter.

The incidence and deaths in the first three months were :—

	NOTIFICATIONS		Deaths Pneumonia (all forms)	Deaths Influenza
	Acute Influenzal	Acute Primary		
January .....	34	45	49	23
February .....	18	42	31	23
March .....	2	40	38	2

212 persons were admitted to the Castle Hill Infectious Diseases Hospital, Cottingham and 28 of these cases were found not to be suffering from pneumonia. 9 other patients admitted to the hospital for observation were eventually diagnosed as pneumonia. Amongst the 351 actual cases brought to notice 24 deaths occurred ; this is equivalent to a case mortality of 6·8 per cent. The total number of deaths from all forms of pneumonia registered during the year was 282.



*Malaria.* No case of malaria was notified.

*Smallpox.* No case of smallpox was notified.

*Food Poisoning.* 6 notifications of cases, or suspected cases of food poisoning, were received during the year. All were individual instances of very mild illness, and investigation of each case failed to elicit any particular article of food likely to be the causative agent.

*Public Health (Leprosy) Regulations 1951.* These Regulations came into force on the 22nd June, 1951, and require a medical practitioner attending, or called in to visit, a person suffering from leprosy to notify the case to the Chief Medical Officer, Ministry of Health, London.

*Puerperal Pyrexia Regulations 1951.* The Puerperal Pyrexia Regulations 1951 came into force on the 1st August, 1951 and replaced the Puerperal Pyrexia Regulations 1939.

The notification requirement continues but experience necessitated modification of the definition of Puerperal Pyrexia in the 1939 Regulations and a more precise definition has been introduced.

*Medical Examination of Suspected Infectious Cases.* The services of medical officers of the Health Department were available to general practitioners to assist in the diagnosis of suspected cases of infectious disease and 37 visits were made during the year for this purpose.

*Bacteriological Examinations.* Bacteriological work in connection with infectious diseases was carried out by the Public Health Laboratory Service at their laboratory in the city.

*Disinfecting Station.* A total of 200 baths, with disinfection of clothing, were given during the year.

2 infants, 7 school children and 21 adults received 65 baths followed by application of benzyl-benzoate for scabies.

109 verminous persons were deloused and 20 midwives who had been in contact with infectious disease had baths and their clothing disinfected. The total number of articles of bedding, clothing, etc., disinfected was 26,188; 466 library books were fumigated and the disinfecting staff carried out fumigation of 691 premises.



3 ambulances and 6 ambulance personnel from an outside area, after conveyance of suspected cases of smallpox to the Castle Hill Infectious Diseases Hospital, Cottingham, were disinfected before making the return journey.

*Hospitals for Infectious Diseases.* The Castle Hill Infectious Diseases Hospital and Sanatorium, which was transferred to the Leeds Regional Hospital Board on 5th July, 1948, is now administered by the No. 5 Hospital Management Committee, Hull (B) Group, and provides accommodation for cases of infectious disease and tuberculosis from the city.

During 1951, 954 residents of the city were admitted to the infectious diseases wards. This number is comprised mainly of those suffering from infectious or contagious diseases; a small number of pulmonary and non-pulmonary tubercular cases is included.

There was an increase in the number of admissions as compared with the previous year, the figures being as follows:—

	1951	1950
Scarlet Fever	222	312
Diphtheria	16	25
Acute poliomyelitis	6	29
Meningococcal Infection	3	3
Whooping Cough	88	33
Measles	60	58
Pneumonia	212	83
Dysentery	13	17
Other Diseases	334	297
	954	857

It will be noted that with the exception of Measles, Whooping Cough and Pneumonia there was a general reduction in the numbers of other notifiable diseases. Admissions to the accommodation provided for Pneumonia cases accounted mainly for the increase in the total; also a larger number of persons were sent in for observation, or with a diagnosis of some non-notifiable condition. Under the heading of "other diseases" 133 were admitted as gastro-enteritis cases; 112 of these being infants under 2 years of age. In 15 of the 133 cases, however, the illness was found to be due to some other cause.

*Acute Rheumatism.* The Acute Rheumatism Regulations 1950 became effective in the city on the 1st October, 1950. These Regulations, which are operative for a period of three years, make compulsorily notifiable, in the areas of the local authorities mentioned, any case of Acute Rheumatism, as defined by the Regulations, in a person under 16 years of age.

During 1951, 21 cases were notified in accordance with the Regulations. Each case was investigated to ascertain that full advantage was being taken of the facilities available for treatment, and information, which is being collated by the Rheumatic Fever Committee of the Royal College of Physicians, was obtained on the clinical and social factors as well as on the type and state of the house in which the patient lived.

The following is a classification of the 21 cases reported:—

ACUTE RHEUMATISM REGULATIONS, 1951

CLINICAL CLASSIFICATION OF CASE NOTIFIED	AGE IN YEARS								TOTAL ALL AGES		TOTAL BOTH SEXES
	0-4		5-9		10-14		15 over		M.	F.	
	M.	F.	M.	F.	M.	F.	M.	F.			
Rheumatic Pains and/or Arthritis without Heart Disease .....	—	—	—	3	2	4	—	—	2	7	9
Rheumatic Heart Disease (Active)											
(a) with Polyarthritides .....	—	1	3	1	—	1	2	—	5	3	8
(b) with Chorea .....	—	—	—	—	—	—	—	—	—	—	—
Rheumatic Heart Disease (Quiescent) .....	—	—	—	—	—	—	—	—	—	—	—
Rheumatic Chorea (alone) .....	—	—	—	—	—	—	—	—	—	—	—
TOTAL Rheumatic Cases .....	—	1	3	4	2	5	2	—	7	10	17
Congenital Heart Disease .....	—	—	—	—	—	—	—	—	—	—	—
Other non-Rheumatic Heart Dis- ease or Disorder .....	—	—	—	—	—	—	—	—	—	—	—
Not Rheumatic or Cardiac Disease	—	—	2	—	1	1	—	—	3	1	4
TOTAL non-Rheumatic Cases .....	—	—	2	—	1	1	—	—	3	1	4



## TUBERCULOSIS

For this section of the Report much of the material has been supplied by Dr. R. Hardy, Consultant Chest Physician, whose services have been available to the Local Authority for the purposes of Section 28 of the National Health Service Act, 1946.

*Incidence and Mortality.* In the following table are given new cases and deaths arranged in age periods, respiratory and non-respiratory figures being shown separately.

### TABLE XXIII

#### NEW CASES AND MORTALITY

Age Periods	NEW CASES*						DEATHS					
	Respiratory		Non- Respiratory		Totals		Respiratory		Non- Respiratory		Totals	
	M.	F.	M.	F.	1951	1950	M.	F.	M.	F.	1951	1950
0- 1	—	—	—	—	—	1	—	—	—	—	—	—
1- 5	3	2	5	4	14	20	—	—	2	1	3	6
5-10	1	5	3	4	13	11	—	—	—	1	1	3
10-15	7	—	3	2	12	18	1	—	—	—	1	1
15-20	12	27	4	1	44	50	—	—	—	1	1	11
20-25	26	25	1	1	53	62	3	3	1	—	7	17
25-35	32	33	—	5	70	72	6	7	—	—	13	28
35-45	37	21	2	4	64	42	10	7	1	—	18	21
45-55	32	6	1	—	39	33	16	4	—	—	20	24
55-65	18	7	—	1	26	32	13	7	—	—	20	26
65 and over	19	6	1	1	27	20	12	4	—	—	16	10
1951	187	132	20	23	362	—	61	32	4	3	100	—
1950	175	151	15	20	—	361	71	58	8	10	—	147

\* Primary notifications and other new cases coming to the knowledge of the Medical Officer of Health.



In comparing data pertaining to the current year with those of former years, caution must be exercised since the table takes no account of fluctuating population, changes in age-distribution of the two sexes and other inconstant factors.

It will be seen from the table that one more new case of tuberculosis was discovered in 1951 than in 1950. The total of 319 new cases of respiratory tuberculosis is the lowest ever recorded in the city, and, in comparing it with the figure of 326 for 1950, it must be borne in mind that during 1950 the Mass Radiography Unit did not visit this area, whilst in 1951 it operated for some months inside the city boundary. Details of the work of the Mass Radiography Unit are given in later paragraphs.

The number of new cases of non-respiratory tuberculosis numbered 43, which is an increase of 8 compared with the 1950 figure.

The total of 100 deaths from all forms of tuberculosis during 1951 is the lowest ever recorded in the city, being a decrease of 47 compared with the previous year. The number of deaths in 1949 was 199, so that, in general terms, it may be said that mortality from tuberculosis has been halved over the past two to three years. The decrease of 47 during 1951 consisted of a reduction of 14 in male deaths and of 33 in female deaths, the most notable feature being that the greatest improvement occurred in the female age group 15-35, where the deaths were 27 less than in 1950, 26 being in respect of respiratory disease.

Due to this reduction in deaths in the younger female age groups, a change of pattern occurred in the contrast between sexes in the age distribution of mortality from respiratory disease. Whilst female deaths in the age group 15-35 totalled one more only than the number of male deaths in the same age group, the figure (10) amounted to 31 per cent of the total female deaths from phthisis, whereas the equivalent percentage for males was 15. 84 per cent of male deaths from phthisis occurred at 35 years and over, compared with 69 per cent of females in the older age-groups. This is the first time for many years that more than half of the female deaths from respiratory tuberculosis have occurred over the age of 35 years. In 1950, 36 per cent occurred over the age of 35 years and in 1949, 40 per cent.

Tuberculosis mortality among young women (15-25 years) decreased considerably during 1951 and was the same as among young men.



Details for 1951 and the five previous years are as follows:—

MORTALITY IN AGE PERIOD 15-25 IN 1951 AND PREVIOUS YEARS

Year	Respiratory		Non-Respiratory		Totals		Grand Total
	M.	F.	M.	F.	M.	F.	
1946	9	21	1	5	10	26	36
1947	9	28	2	6	11	34	45
1948	9	23	1	6	10	29	39
1949	7	16	—	—	7	16	23
1950	6	19	1	2	7	21	28
1951	3	3	1	1	4	4	8

*Death-rates.* The death-rate per 1,000 of the population in the case of respiratory tuberculosis was  $\cdot 312$  and for non-respiratory disease  $\cdot 023$ , giving a total death-rate of  $\cdot 335$  for all forms of tuberculosis. The death-rate for England and Wales in respect of all forms of the disease was  $\cdot 31$ .

Apart from a sharp rise during the 1914-18 war and a small increase noticeable during the earlier years of the last war, there has been a steady fall in tuberculosis mortality in England and Wales during the present century. A similar downward trend has occurred in Hull, although more irregularly, but at all times since 1908 the death-rates for the city have exceeded the comparable figures for England and Wales as a whole.

TABLE XXIV

Year	Deaths in Kingston upon Hull			Death-rate per 1,000 Population	
	Respiratory	Non-Respiratory	Total	Kingston upon Hull	England and Wales
1901	275	140	415	1.72	1.80
1911	310	132	442	1.58	1.46
1921	311	103	414	1.41	1.12
1931	358	68	426	1.35	0.90
1941	230	44	274	1.13	0.73
1947	185	38	223	0.77	0.55
1948	174	26	200	0.68	0.51
1949	185	14	199	0.67	0.45
1950	129	18	147	0.49	0.36
1951	93	7	100	0.34	0.31

*Tuberculous Meningitis.* During 1951 there were 4 deaths in which tuberculous meningitis was certified to be the principal cause, as compared with 8 deaths during 1950. The 1951 figure is the lowest which has ever been recorded in this city in respect of deaths from this disease, the previous lowest figure being 7 deaths, which occurred in 1949. The four patients who died during 1951 were two boys, aged 3 years, one girl aged 3 years and one girl aged 6 years. Tuberculous meningitis mainly affects children and adolescents and its incidence can be said to reflect the amount of uncontrolled tuberculous infectivity in the community.

*Notifications.* The numbers of notifications sent to the Medical Officer of Health each year since 1946 are given below :—

YEAR	PRIMARY		OTHERS		Total
	Respiratory	Non-Respiratory	Respiratory	Non-Respiratory	
1946	384	68	117	22	591
1947	318	78	60	14	470
1948	350	56	62	5	473
1949	350	53	55	6	464
1950	281	27	36	8	352
1951	271	34	42	1	348

The number of cases notified in any particular year is a measure of the amount of tuberculous disease that is being brought to light in that year and may be compared with the numbers notified in previous years. Notifications do not necessarily reveal, however, the actual incidence of tuberculosis that occurs in a community.



TABLE XXV

PUBLIC HEALTH (TUBERCULOSIS) REGULATIONS, 1930—SUMMARY OF NOTIFICATIONS

Age Periods	NUMBER OF PRIMARY NOTIFICATIONS OF NEW CASES										Total Notifications (i.e., including cases previously notified by other doctors)			
	FORMAL NOTIFICATIONS													
	0-1	1-5	5-10	10-15	15-20	20-25	25-35	35-45	45-55	55-65		65 and upwards	Total	
Respiratory—														
Males	—	3	—	6	11	19	27	34	31	15	13	159	182	
Females	—	2	5	—	25	22	27	19	4	6	2	112	131	
Non-Respiratory—														
Males	—	3	3	3	4	1	—	1	1	—	—	16	16	
Females	—	3	4	2	1	1	5	2	—	—	—	18	19	
Total	—	11	12	11	41	43	59	56	36	21	15	305	348	

SUPPLEMENTAL RETURN

New cases of Tuberculosis coming to the knowledge of the Medical Officer of Health during the period from the 1st January to the 31st December, 1951, otherwise than by formal notification.

Age Periods	NUMBER OF PRIMARY NOTIFICATIONS OF NEW CASES										Total Cases		
	SUPPLEMENTAL RETURN												
	0-1	1-5	5-10	10-15	15-20	20-25	25-35	35-45	45-55	55-65		65 and upwards	Total Cases
Respiratory—													
Males	—	—	1	1	1	7	5	3	1	3	6	28	
Females	—	—	—	—	2	3	6	2	2	1	4	20	
Non-Respiratory—													
Males	—	2	—	—	—	—	—	1	—	—	—	4	
Females	—	1	—	—	—	—	—	2	—	1	—	5	
Total	—	3	1	1	3	10	11	8	3	5	12	57	

Death Returns	SOURCE OF INFORMATION	
	Respiratory	Non-Respiratory
From Local Registrars	12	6
Transferable Deaths from Registrar General	3	—
Posthumous Notifications	4	1
Transfers from other areas (other than transferable deaths)	12	—
Other sources	17	2
	48	9



*Examination of Contacts.* The following table shows the number of new contacts examined by the Medical Officers of the Chest Clinics during 1951 and previous years :—

Year	No. of Contacts
1946	461
1947	472
1948	414
1949	527
1950	561
1951	522

Of the 522 contacts in 1951, 6 were found to be definitely tuberculous at the first examination and 6 were diagnosed later ; 270 were considered to be non-tuberculous at the first examination and 237 subsequently ; the other 3 were still under observation at the end of the year.

The number of cases on the Chest Clinic and Notification Registers during 1951 and previous years have been :—

Year	New Cases notified	Number on Chest Clinic Register, 31st December	Examinations	Total Home Visits by Tuberculosis Nurses
1946	452	1,387	7,736	12,480
1947	457	1,419	8,085	11,974
1948	443	1,440	8,237	10,391
1949	440	1,477	8,048	10,436
1950	361	1,479	7,817	10,232
1951	362	1,545	8,258	9,450

*Visits by Tuberculosis Health Visitors.* The Tuberculosis Health Visitors paid 9,450 visits to the homes of tuberculous patients, of which 249 were made in accordance with the requirements of the Public Health (Tuberculosis) Regulations, 1930.

*Isolation of Infectious Cases.* The Public Health Act, 1936, Section 172, provides for the compulsory removal to hospital of infectious cases of pulmonary tuberculosis who cannot be isolated properly at home. No legal action has been necessary under this section.

*The Public Health (Prevention of Tuberculosis) Regulations, 1925.* No action was necessary under these regulations, which empower the Authority to prohibit an infectious case of tuberculosis from engaging in the milk trade.



*After-Care and the Provision of Extra Nourishment.* During 1951, 142 applications were received from tuberculous patients in respect of services provided under Section 28 of the National Health Service Act, 1946. The decisions of the Care Sub-Committee were as follows :—

<i>Service</i>	<i>Granted</i>	<i>Not Granted</i>
Clothing ....	16	1
Extra Nourishment ....	72	9
Nursing Requisites ....	44	—

The majority of the applications for clothing were in respect of pyjamas and underwear, but, in a few instances, changed physique, either of growing children or of adults returning home after long periods in sanatoria, resulted in the Care Sub-Committee providing some higher priced articles such as suits and overcoats.

In all cases but one the extra nourishment provided consisted of two pints of milk daily, the remaining case being granted one pint only per day. At the end of the year 63 patients were in receipt of a free supply of milk, compared with 20 at the end of 1950, whilst over the whole year the total amount of milk provided free to tuberculous patients was approximately 3,260 gallons. Approximately 750 gallons were provided during 1950.

*Motor-car Watchers Scheme.* Under Section 28 of the National Health Service Act, 1946, the Corporation continued to operate this scheme as part of the after-care services for tuberculous persons, and the open-air work has been of great value both in recuperation and in rehabilitation.

The attendants who had transferred to the Corporation from the voluntary committee were employed at regular parking places for cars, cycles and transport vehicles in the city and, as arranged with the City Treasurer, at special functions on request.

*Mass Radiography.* During 1951 the Hull Unit (2C of the three Regional M.M.R. Units) worked in the East and North Ridings, York, Beverley and Hull, under its Medical Director, Dr. L. Robinson.

The Unit came to Hull at the end of March from York, where it had been operating, and remained in the city and its environs until the end of May, when it moved to Whitby. After making surveys in the Whitby and Scarborough areas the Unit then visited many centres in the East Riding County, finally returning to the Baker Street Dispensary in Hull on the 29th October, where it remained in operation until the end of the year. Thus the Unit conducted surveys in the city for four months in 1951, during which time a total of 17,464 persons were examined.



During April and May, 4,353 employees of the Hull Corporation were X-rayed by the Unit, and 5,245 volunteers from the general public, from staffs at General Hospitals, students from the University and Training Colleges and patients in the De la Pole Hospital.

In the period November—December, 7,866 persons were examined by the Unit, recruited from various sources—industrial and business firms, hospital nursing and domestic staffs, school-leavers, etc. An innovation was the allocation of two afternoon and two evening sessions for the examination of general practitioners' nominees, when over 300 persons attended. It is hoped that the response will be fully maintained at future sessions for practitioners' patients as it is found, wherever a similar scheme operates, that such surveys are fruitful in revealing chest disease, major and minor.

*B.C.G. Inoculation against Tuberculosis.* The use of B.C.G. vaccine on a limited and controlled scale was introduced in Great Britain during 1950. In April of that year supplies of vaccine were made available to chest physicians and other appropriate specialists (e.g., paediatricians) accredited to the Hospital Service. The Ministry of Health arranged for the required quantities of B.C.G. to be imported weekly by air from the laboratory engaged in its production in Copenhagen.

The scheme sponsored by the Ministry for using B.C.G. was designed :—

1. to offer vaccination to hospital nursing and ancillary staffs and to medical students, *i.e.*, those at special risk of exposure to infection, professionally ;
2. to provide, on request, B.C.G. to those chest physicians who wished to use it for vaccination of familial " contacts " of phthisis, or of others exposed to known infection in the home, at school, or at work.

The latter use of the vaccine by chest physicians falls within the ambit of their work under the Local Health Authorities, being part of the preventive service for which those Authorities are responsible under Section 28 of the National Health Service Act, 1946.

More general employment of the vaccine was not envisaged at first, either among particular age-groups of young persons (*e.g.*, school-leavers) or other children and adolescents not exposed to specific risk.

The *Bacillus Calmette-Guerin* (B.C.G.) is a bovine strain of living tubercle bacilli possessing a low virulence, which has been produced by successive sub-culturing over the past 50 years of Calmette's original bovine strain, isolated in 1902.



Only those in the above groups who fail to react to preliminary skin-testing by tuberculin ("tuberculin negatives"), are candidates for inoculation.

They may be regarded as persons who have not hitherto met with or contracted tuberculous infection and who, in consequence, have not developed "acquired immunity". Successful B.C.G. vaccination will endow them with a degree of immunity over and above the native resistance which every person already has to infection by tuberculosis. Immunity conferred by B.C.G. is not absolute, but it is believed that it will suffice to protect 4 out of 5 children exposed to risk from contracting any of the more serious types of the disease.

During 1951, 68 persons received B.C.G. vaccination, most of whom were infant and child "contacts" in families of which one or more members were found to have pulmonary tuberculosis. Vaccination was offered as a routine to all young contacts but the parents of about 1 in every 4 families declined vaccination for their children. Of children for whom vaccination was desired by the parents, 3 out of 5 already were "positive" reactors to tuberculin skin-test and thus did not need B.C.G.

Vaccination was successful in all 68 subjects, as determined by the local reaction and the result of a post-vaccination skin-test done at the end of eight weeks.

No serious ill effects occurred as a result of inoculation. Apart from a small ulcer on the skin accompanied by transitory swelling of the regional lymphatic glands, both of which were the rule rather than the exception in young children, and healed or subsided in 2-3 months, no other effects were noted.

B.C.G. vaccination is completely safe; the strain of bovine T.B. bacillus which constitutes the present vaccine prepared in the State Serum Institute, Copenhagen, and now used in the United Kingdom, is incapable of producing any harmful tuberculous lesion in man. That is the experience in other countries, gained by the vaccination of many millions of children in the past 20-30 years; seventeen million young persons in Europe and Asia have been vaccinated since 1945 under the International Tuberculosis Campaign of the World Health Organization.

The scheme of B.C.G. vaccination for nurses and other hospital workers exposed to professional risk has been brought to the notice of medical superintendents and matrons of all local hospitals, either by personal discussion with the Chest Clinic Staff or at a meeting specially convened. Up to the end of 1951, B.C.G. had been used among the staffs of two large general hospitals only, but it was



gratifying to learn, towards the end of the year, that in other hospitals, staffs were being offered vaccination and preliminary skin-testing was being done, the responsibility for obtaining the inoculation material and for the inoculations being left to the medical staff at the Chest Clinics.

The Ministry of Health has advised that children to be vaccinated should be segregated for six weeks before and six weeks after inoculation. In Hull this has not been possible under the prevailing housing conditions, but we have acted on the belief that it is better to vaccinate without segregation than not to vaccinate at all. There is no justification, however, for neglecting segregation where it is possible or when reasonable facilities for it exist. If B.C.G. is to be used more widely and its present use to be accelerated, it will be essential to provide 6-10 "places" each quarter in Hull for segregation of some of those children, both to ensure safety for the individual child and to maintain the good repute of the vaccine.

*Domiciliary Treatment of Tuberculosis.* In areas where Chest Clinics are suitably equipped and adequately staffed, chest physicians are now treating selected patients at home, with brief admissions to Hospital or Sanatorium for episodes of treatment not possible at home. It has been found that, where careful medical selection is exercised and home conditions are good enough, it is practicable to treat to a satisfactory conclusion in their own homes, a minority of patients who would otherwise swell the waiting list for Sanatoria. A scheme of combined domiciliary and institutional treatment of this kind involves extra work and effort on the part of the Chest Clinic staffs, and requires the help afforded by the Local Health Authority in providing Home Helps, nursing accessories, beds and bedding, disinfectants, etc., so as to make segregation and treatment at home feasible and to minimize the risk of infection. In Hull such a scheme has been possible, hitherto, on a small scale.

During 1951 "collapse" treatment was instituted at home or at the Chest Clinic in 9 patients who were visited subsequently for the giving of "refills", sometimes for as long as six months at weekly or fortnightly intervals, or until the patient could attend or be brought by car to the pneumothorax clinic when the acute phase of the illness had terminated.

Many scores of domiciliary visits by Clinic doctors and Health Visitors have been made in carrying out this scheme, limited though it is, but which it is hoped to expand as our resources grow and other commitments permit. As well as domiciliary "collapse" treatment, mention must be made of the invaluable work done by the Hull Jubilee District Nursing Service whose nurses visit, on a doctor's



request, those home-bound tuberculous patients who need injections of antibiotic drugs. As a minimum course of this treatment consists in daily injections over a period of six weeks, it will be realised how great is the extra load of work and responsibility being borne by the District Nurses. In the past year or two many hundreds of domiciliary visits have been carried out by the Nurses for this purpose alone ; at any one time, some 15 to 20 patients in the city are under current treatment of this kind in their own homes.

The Chest Clinic and Hospital Service generally, owe much to the Jubilee District Nurses who shoulder this additional work and thereby save in-patient accommodation, time and effort.

These and other types of domiciliary treatment may be regarded by some as undesirable and falling short of the ideal. Yet, considering the present-day shortage of institutional beds and the long waiting lists for admission, these or similar methods are necessary and go some way to saving what is a difficult situation. In their operation, many individuals are concerned and several separate organisations are involved. The Chest Clinic staffs, both nursing and medical, are indebted to the Care Committee, Jubilee District Nursing Service, Ambulance Service and others for their ready co-operation.

*Sanatorium Admissions and Waiting Lists.* In 1951, 242 Hull patients were admitted for treatment to Tuberculosis Sanatoria or Hospitals. At the end of the year, 45 women, 46 men and 1 child were on the waiting list for admission. It is possible under the Regional Admission Scheme to admit children to one of the Regional Children's Sanatoria with little or no delay. In any case, the number of children needing treatment in Sanatoria is fortunately few ; cases of surgical tuberculosis are diminishing ; the incidence of tuberculous meningitis among children is also reduced, and cases are admitted promptly to the Castle Hill Infectious Diseases Hospital under Dr. S. R. Jamieson as soon as the diagnosis is made. As in 1939 onwards, there are no tuberculosis beds for children locally and children require to be admitted to distant institutions in York, the West Riding or North Riding.

The adult waiting list is divided into three categories of priority ; the average waiting period for those in the 1st and 2nd priority groups is respectively 10 weeks and 15 weeks, whilst patients in the 3rd group wait, on the average, 20 to 24 weeks before admission. On the other hand, where medical or social need is paramount, patients can be admitted within a few days or weeks ; in the case of urgent medical need or in an emergency, it has been possible to admit several patients within a few hours, as 2 "Emergency" beds are constantly free in one of the local group of Sanatoria.



The Sub-Regional bed-bureau conducted at the Coltman Street Clinic (the other 2 bureaux are based at Bradford and Leeds respectively), has operated since January, 1950, and arranges all admissions of tuberculous patients domiciled in the East Riding, York and parts of the West and North Riding areas, as well as in Hull. Its day-to-day waiting list contains the names of 170-200 patients, about half of whom, at any one time, are residents of Hull. Since the bed-bureau was set-up, there has resulted an equalisation of the length of period of waiting throughout the geographical area covered by the bureau. On the whole, Hull and possibly certain other industrial areas have been favoured, whereas in rural, residential and non-industrial areas, patients now wait longer before admission than prior to 1950. The bed-bureau has access to 460 beds (approximately) for the treatment of tuberculosis, 370 being in the relatively nearby County area or in Hull. In Hull and Cottingham jointly there are 245 beds, the Castle Hill Sanatorium now possessing 213, including those allocated for Thoracic Surgery.

*Rehabilitation—Special Remploy Factory.* This factory continued with success its work of rehabilitation during 1951, and the number of men and women working on the 31st December had risen to 93. Since the Factory opened in February, 1949, about 120 workers have been employed, some temporarily, later passing on to other work or vocational training outside.

It is disappointing that, although the Factory has places for 150-200 workers, only half the full complement offered themselves for employment. The volume of work was such that more workers could have been taken into the Factory throughout the year. The anomalous situation therefore occurred in 1950 that, whereas there was a fairly high level of unemployment in the city, the Special Factory, in fact, was seeking workers and could have provided work for many others of the tuberculous population. It is certain that there are sufficient men and women capable of part or full-time "sheltered" work among the 1,300 adolescents and adults on the Tuberculosis Register in Hull alone to keep the Factory manned. The conception of "sheltered" work has not yet been fully accepted by those concerned, patients and doctors alike; the facilities that now, so fortunately, exist in Hull and the benefits that are likely to accrue therefrom are not yet sufficiently well known. The problem is to "put across" the idea of "sheltered" work to patients in whom it seems that a stage of their illness has been reached where such work would be of benefit, selecting carefully those who are medically fit enough, whose former work is unsuitable, or who cannot be re-instated in it. The solution lies in constant watchfulness on the part of doctors to introduce the subject of work-resumption when the time seems opportune and when the patient's physical condition permits, to inform each patient of the facilities that are available, and to offer help in obtaining suitable work or training. When medical interest



and concern in this aspect of patients' care is lacking, it can happen that a tuberculous patient may not work for years, not by reason of continuing physical disability but because no one mentions the possibility of work-resumption to him or to her.

In 1950-51 there were general indications of increasing interest in rehabilitation, so far as it concerned tuberculosis; patients themselves began to ask to work in the Factory which, beginning with 12 workers in February, 1949, was employing 80 at the end of 1950, and 93 at the end of 1951.

The Factory may employ not only patients domiciled in Hull but also those living in the environs of the city. In 1951 only 2 men resident outside the city were employed in the Factory.

As experience was gained in 1950 and 1951, more men and women than previously, were advised to work on a part-time basis, increments gradually being added to the number of hours of work. Part-time work at the beginning of industrial rehabilitation, especially following a long period of illness and absence from work, is valuable in building up work-tolerance. In this respect the Factory is providing a service unique and not easily obtainable in private Industry or Office. The National Assistance Board continued to subsidize to an economic level the part-wage earned by part-time work.

In 1951, the health of workers was satisfactory on the whole, the relapse rate not excessive, while morale and team-spirit were on a high level, as in the previous two years.

Again, the gratitude of all engaged in the anti-Tuberculosis service deserves to be expressed to those responsible for the administration, management and day-to-day running of the Special Factory, and to the officials of the local Employment Exchange who act as the link between those seeking "sheltered" work and the means of obtaining it.



## DISEASES OF SPECIAL INTEREST INCLUDING THOSE WITH A HIGH FATALITY RATE

### CANCER

Cancer was the cause of 578 deaths in 1951, compared with 550 in 1950 and 544 in 1949, the death-rates being respectively 1·94, 1·82 and 1·84 per 1,000 of the population. Particulars as to the principal sites of the disease in the 578 fatal cases which occurred during 1951 will be found in Table XXVI on page 156. Mortality from cancer has generally, with few exceptions, shown an upward tendency, but it must be borne in mind that modern methods of diagnosis have secured much greater accuracy in statistics of the incidence of this disease.

### HEART DISEASE

This disease was the cause of 1,050 deaths compared with 1,055 in 1950 and 973 in 1949, the death-rates per 1,000 of the population being 3·5, 3·5 and 3·3 respectively. 835 of the deaths were of people of 65 years and over. Heart disease was the cause of 29 per cent of the total deaths during 1951.

*British Empire Cancer Campaign.* The Hull Committee of the Yorkshire Council continued its activities during 1951 and various functions were organised in order to raise funds for the work of the Campaign.



TABLE XXVI—PRINCIPAL SITES OF FATAL CANCER, 1951.

SITE OF DISEASE		AGE GROUP					Totals	Grand Totals
		0-20	20-40	40-60	60-80	Over 80		
Buccal Cavity and Pharynx	M.	—	—	2	5	—	7	9
	F.	—	—	—	1	1	2	
Digestive System and Peritoneum	M.	—	3	42	77	12	134	252
	F.	—	1	17	79	21	118	
Respiratory System	M.	—	1	45	53	3	102	123
	F.	—	—	9	12	—	21	
Uterus	F.	—	2	18	14	3	37	37
Other Female Genital Organs	F.	—	—	10	13	—	23	23
Breast	M.	—	—	—	—	—	—	36
	F.	—	5	15	16	—	36	
Male Genital Organs	M.	—	—	3	10	2	15	15
Urinary Organs	M.	—	2	5	10	—	17	25
	F.	—	—	—	6	2	8	
Skin (scrotum excepted)	M.	—	—	1	3	—	4	5
	F.	—	—	—	—	1	1	
Brain and other parts of the nervous system	M.	1	1	2	3	—	7	7
	F.	—	—	—	—	—	—	
Other or Unspecified Organs	M.	2	2	3	18	—	25	46
	F.	1	6	5	8	1	21	
Total	M.	3	9	103	179	17	311	578
	F.	1	14	74	149	29	267	



## VASCULAR LESIONS AFFECTING CENTRAL NERVOUS SYSTEM

Diseases included in this classification, chiefly hæmorrhage, were the causes of death in 394 cases, or 1·3 per 1,000 of the population. This compares with 403 deaths in 1950 or a rate of 1·3. Of the 394 deaths 140 occurred in persons of 65 to 74 years of age, and 173 in persons of 75 years and over.

## BRONCHITIS

There were 271 deaths from bronchitis compared with 225 in 1950 and 237 in 1949. The death-rates per 1,000 of the population were respectively 0·9, 0·74 and 0·8. The total death-rate in 1951 from non-tuberculous respiratory diseases, mainly bronchitis and pneumonia (including 13 deaths from pneumonia of infants under 1 month), was 1·9.





SCHOOL HEALTH SERVICE

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REPORT OF THE  
SCHOOL MEDICAL OFFICER  
FOR THE YEAR 1951



SCHOOL HEALTH SERVICE

REPORT OF THE  
SCHOOL MEDICAL OFFICER  
FOR THE YEAR 1921

# KINGSTON UPON HULL EDUCATION COMMITTEE

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*Chairman—*

Alderman D. C. LISTER, J.P.

*Deputy-Chairman—*

Councillor J. G. E. TESKEY-KING.

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**Schools Services Sub-Committee.**

*Chairman—*

Alderman F. HOLMES.

*Deputy-Chairman—*

Councillor J. G. E. TESKEY-KING.

The Lady Mayoress (Mrs. F. D. SMITH).

Alderman J. G. HEWETT, J.P.

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Alderman D. C. LISTER, J.P.

Councillor H. W. ANDERSON.

Councillor H. J. BARNEY.

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Councillor W. HOBDEN.

Councillor O. W. HOLLAND.

Councillor J. T. P. NOBLE.

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Mrs. L. BELL.

Mr. A. C. DUNHAM.

Mr. F. O. DUNN.

The Rev. Canon F. HOPE SCOTT.

Mrs. A. THOMPSON.

---

*Deputy Director of Education—*

S. W. HOBSON, M.A.



# STAFF OF SCHOOL HEALTH SERVICE

at 31st December, 1951

**Medical Officer of Health and School Medical Officer**  
NICOLAS GEBBIE, M.D., D.P.M., D.P.H.

**Senior Assistant Medical Officer of Health (School Health Service)**  
C. WARDEN ORR, L.R.C.P., L.R.C.S., L.R.F.P.S., D.P.H.

**Medical Officers regularly employed in the Service**

*Assistant Medical Officers of Health :*

SAMUEL KLINGER, M.D. (Vienna)

ALBERT S. CAREY, M.B., Ch.B., D.P.H.

ISOBEL M. McCULLOUGH, L.R.C.P. and S. (Ireland). (from 5.6.1951).

GEOFFREY R. WALKER, M.B., Ch.B., D.P.H., D.T.M.

ELIZA J. CARSON, M.B., B.Ch., B.A.O.

JOSEPH TONG, L.M.S.S.A., C.P.H.

CHRISTINE N. R. CINCIO, M.B., Ch.B.

JEAN M. BARROWMAN, M.B., Ch.B.

MARY P. FLEMING, M.B., B.Ch., B.A.O., D.P.H., D.C.H., B.Sc.

**Specialist Officers (Services provided by Regional Hospital Board)**

Ophthalmic Section : K. DEAN FOGGITT, M.B., Ch.B., D.O., D.O.M.S.

Orthopaedic Section : J. S. MAXWELL, M.B., Ch.B., F.R.C.S.

R. C. TATHAM, F.R.C.S., L.R.C.P.

Aural Section : R. R. SIMPSON, M.B., Ch.B., F.R.C.S.

Rheumatism and Heart Section : D. C. MUIR, M.D., F.R.C.P.

J. W. BROWN, M.D., F.R.C.P.

Pædiatric Section : T. MORTON J. STEWART, M.D., D.C.H.

**Dental Officers**

Senior Dental Officer : (Vacant)

LLOYD B. WILSON, L.D.S.

ANNIE P. FARRELL, B.D.S.

**Child Guidance Clinic**

*Psychiatrist :* JOHN MACKAY, M.D., D.P.M.

*Educational Psychologist :* G. F. REED, M.A., A.B. Ps.S.

*Social Worker :* Mrs. M. AITKEN

**Speech Therapy Clinic**

Speech Therapist : T. R. FRANCIS, L.C.S.T.

**Chiropody Clinics**

Miss A. CLAPPISON, M.Ch.S.      W. A. CRANSWICK, M.Ch.S.      Miss J. HORTH, M.Ch.S.

**Nursing Staff**

*Superintendent :* Mrs. E. T. BASS

Miss L. C. BOLTON

Miss O. DEWSON

Mrs. G. R. E. WEBSTER

Miss J. L. A. BLOOMFIELD

Mrs. J. M. AUSTIN

Mrs. A. WHITEHOUSE

Miss G. WILLIAMS

Mrs. R. M. WASLING

Miss A. S. COOK

Miss A. BENNETT

Mrs. E. OADES

Mrs. D. JEEVES

Mrs. O. SMITH

Mrs. M. M. M. BUCKLAND

Miss F. BEGBIE

Mrs. L. SMITH

**Park Avenue Special School Staff**

*Superintendent Physiotherapist :* Miss M. R. K. JARRATT, M.C.S.P.

**Orthopaedic Clinic Staff**

*Physiotherapist :* Miss I. M. MATSON, M.C.S.P.

**Dental Attendants**

Miss H. ROBINSON

Miss D. A. MILLBANK

Miss N. HAINES

**Special Visitor**

Cleanliness : Mrs. L. M. SPINK.

**Clerical Staff**

W. H. NELSON, *Senior Clerk.*

R. C. GRANT.

Miss M. M. HUNT

Miss J. M. COATES

Mrs. J. BRYAN

Miss A. B. DRAKE

Mrs. D. E. WOOD

Miss P. M. BRYETT

Miss G. M. ROEDER

Miss M. BATEMAN

Miss J. M. CALVERT

Miss M. ATKINSON

Miss J. CAPPLEMAN

Miss S. RHODES

Miss P. M. ROBERTSON

Miss A. DICKINSON

Miss K. M. MARSHALL

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# CITY OF KINGSTON UPON HULL

## GENERAL INFORMATION.

	1951	1950
Population (estimated) ....	298,100	302,100
Maintained Primary and Secondary Schools—		
Number of Schools .....	77	76
Number of Departments .....	149	147
Number on Rolls .....	48,623	46,887
Maintained Special Schools—		
Number of Schools .....	6	6
Number on Rolls .....	585	582
Cost of School Health Service—		
Total Cost .....	£27,872	£23,270
Government Grant .....	£16,723	£13,962
Cost to Rates .....	£11,149	£9,308
Cost in terms of a Penny Rate .....	1.53d.	1.295d.

## SUMMARY OF WORK.

	1951	1950
A. Medical Officers at Schools—		
Periodic inspections at Primary, Secondary and Special Schools .....	13,978	11,240
Special inspections at Primary, Secondary and Special Schools .....	7	12
Re-inspections at Primary, Secondary and Special Schools .....	1,981	1,975
Inspections at Occupation Centre....	28	16
B. Medical Officers and Specialists at Clinics—		
Inspections at Clinics .....	10,849	10,768
Re-inspections at Clinics .....	14,294	14,455
Inspections under Employment of Children Bye-laws .....	890	983
Miscellaneous .....	323	360
C. Dental Officers—		
Periodic inspections at Schools .....	1,038	2,331
Special inspections .....	5885	5,285
Attendances for treatment .....	11,849	12,265
D. Nurses, Speech Therapist, Chiropodists, Assistant Visitor, etc.—		
Visits to Schools .....	3,123	2,811
Examinations (including cleanliness inspections) in Schools .....	188,659	186,470
Visits to homes .....	21,389	17,767
Treatments of minor ailments in Clinics .....	79,299	67,126
Treatments of minor ailments at Special Schools .....	10,515	10,545
Treatments of orthopædic defects in Clinics .....	3,324	3,186
Treatments of orthopædic defects at Special Schools .....	3,855	3,973
Treatments of Speech Defects in Clinics .....	2,578	2,434
E. School Clinics—		
Grand total of inspections and treatments as detailed above	123,406	111,577



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

MR. CHAIRMAN, LADIES AND GENTLEMEN,

I have the honour to submit the report upon the work of the School Health Service in the City and County of Kingston upon Hull for the year ended 31st December, 1951. In the statistical tables, which have been prepared in the form approved by the Ministry of Education, it will be seen that the numbers of children dealt with by the Service in the year under review were greater than those in the previous year. This desirable feature was made possible by the fact that the services of an additional medical officer were available during part of the year, and increased calls were made by the School Health Department upon the services of Assistant Medical Officers of Health under the interavailability scheme.

In the descriptive text of the report will be found ample evidence of an excellent year's work by all the members of the staff of the Department. Unfortunately the staff of Assistant Medical Officers and Dental Officers is still depleted. The National Health Service Act 1946, by its emphasis on Curative Medicine and because of the more attractive financial and other conditions offered by some executive bodies under the Act has caused a dearth of applicants for appointment as School Medical and School Dental Officers—there are only two full-time School Dental Officers on the staff instead of nine, the permitted establishment number.

I cannot speak too highly of the hard work and enthusiastic service of the staff throughout the year, and I admire them for their devotion to the health and welfare of our school children.

It is vital that the standard of health of the children should be maintained at a high level and for that purpose an efficient School Health Service, which is essentially preventive in outlook, must be in operation. If through lack of staff the School Health Service should cease to function, the health of the children is sure to suffer.

Reference will be found in the report to the commencement during the year of foot clinics, which are meeting a long-felt want.

Special attention has been paid during the year to facilities provided by and under the auspices of the Education Committee for the various categories of Handicapped Pupils. The members of the teaching profession undertaking duties at special schools and special classes display a spirit of service which is above praise.



Any mention of service for handicapped pupils would be incomplete without reference to the late Mr. E. C. Hudson. After some six years as Assistant Master in ordinary schools, Mr. Hudson was appointed an Assistant Master at the Open Air School when it was opened in April, 1931. Seven years later he was appointed Head Master of the Park Avenue Special School for Physically Handicapped Pupils, and in September, 1945, he returned to the Open Air School as Head Master, which appointment he held until his death on 19th February, 1952, at the early age of 46 years. Widely acknowledged as an authority on Special Schools, Mr. Hudson, by his enthusiasm for the halt and the maimed, inspired all with whom he came into contact including the writer of this note. I shall always remember the happy atmosphere at the schools under his direction and the spirit of adventure which he transmitted to us all. His name will long be remembered for his pioneering work amongst the handicapped children.

Dr. C. Warden Orr, Senior Assistant Medical Officer in charge of the School Health Service, and Mr. W. H. Nelson, Senior Clerk, have once again prepared the text and the tables of this report with meticulous care. I also acknowledge with gratitude the co-operation with the School Health Service which has been received from many of the general medical practitioners in the city.

The Deputy Director of Education, Mr. S. W. Hobson, has co-operated loyally since the retirement of Mr. R. C. Moore, in the work of the School Health Service and to him and his staff my thanks are due.

The Head Masters, Head Mistresses and their staffs, including the kitchen and canteen staffs and the caretakers, have assisted the officers of the School Health Service at all times, and the Chairman and Members of the Education Committee and of the Schools Services Sub-Committee have on all occasions taken a keen interest in the work of the Doctors, Dentists, Nurses, Clerical and other staff comprising the School Health Service.

I have the honour to be,

Your obedient Servant,

NICOLAS GEBBIE,

*School Medical Officer.*

Health Department,  
Guildhall, Kingston upon Hull.  
May, 1952.



## INTRODUCTORY

The year under review has had its ups and downs. On the credit side the following facilities have been inaugurated or augmented.

On 3rd December, 1951, Chiropody clinics were set up in each of the four main clinic premises. At present there are four sessions per week, some of which are devoted to inspection visits by the chiropodists to schools. The procedure is for medical officers, nurses or teachers to refer cases to the clinics for advice and treatment. In addition, the chiropodists hold survey sessions at schools, when children of eight years and upwards are inspected and referred for treatment if necessary. This age appears to be the most vulnerable. Eventually, it is hoped to inspect all age groups. It is too soon to form any definite opinion on the advantages of this new service, but from the number of children already found to need treatment because of ill-fitting footwear or other defects, the service promises to become a necessary adjunct to preventive medicine.

In recent years it has become apparent that the time lag between the initial periodic inspection of entrants to school and the second age group inspection on leaving the primary school is found to be too long so far as the ascertainment of children's vision is concerned. Vision in infants is very difficult and unreliable to ascertain with any degree of accuracy. Consequently, the great majority of children are not referred for the ophthalmic surgeon's opinion until the second age group inspection when the children have attained the age of about 10 years. On 1st May, 1951, visual surveys were inaugurated and are carried out by the school nurses. All children are examined at seven years of age annually. This scheme has the whole-hearted co-operation and support of the teaching staff. Figures relating to this scheme are shown on page 172.

During the year all children classified as handicapped pupils were re-examined by medical officers. It is intended that this procedure will take place annually in order to give an up to date assessment of the child's handicap, and at the same time to maintain contact with the child and his teacher.

It will be noticed in the statistical section of this report on page 193, that the number of children seen at periodic inspections at schools by medical officers has increased by about 3,000. This has been made possible because the Authority was able to obtain the services of an additional whole-time medical officer from June, 1951, and because additional assistance was given by medical officers employed mainly in other sections of the Public Health Service. A further contributory factor is that now more children are inspected per session in the second and third age groups. When possible the school nurse is also present at the



inspections. This step has been taken so as to produce a closer liaison between the medical officers and the school nurses, who will then be in a better position to follow up any requirements regarding treatment or supervision of the child.

It is gratifying to record that the percentage of children found in an unclean condition at the routine hygiene inspections by school nurses has fallen gradually from 17.1 in 1948 to 10.0 in 1951.

There are only two subjects for report on the debit side and they have both been mentioned in previous reports.

The position with regard to the dental officers is in no way improved from last year. The staff still consists of two dental officers, while there is an establishment of nine officers. During the year the dental officers received an increase of salary through a National Award. Nevertheless, the salary is not as yet a sufficient incentive to attract more staff. It may be necessary to attempt to employ part-time staff. In any event, this Authority still cannot fulfil its obligations under the Education Act 1944, and school children are suffering as a result. Preventive dentistry has come to a virtual standstill.

The second item to be reported on the debit side is that there is still no adequate accommodation for the Child Guidance clinic. This matter is referred to in more detail in the report of the psychiatrist. The waiting list is still far too long and the staff are not able to deal adequately with present numbers, in the existing cramped space. It is pleasing, however, to report that the Ministry has now approved the Kingston College premises, and it falls on the Authority to carry out the alterations necessary in this old building with all possible speed. The staff of this section deserve great credit for carrying out their duty so well under such unsatisfactory conditions.

The Speech Therapy clinic is functioning very well indeed. This is evidenced by the many tributes paid to Mr. Francis throughout the year. The Authority advertised for a second speech therapist, without any success. There is, however, a possibility that a second speech therapist may join the staff in 1952. This would lessen the long waiting list and allow the therapists more time with children who have more than one handicap. A great amount of good work could be done for children who are handicapped by cerebral palsy.

The work carried out by the school nurses has greatly increased during the year by the addition of visual surveys and the preparation for and attendance at school inspections. This work has been performed without the addition of staff and the Superintendent School Nurse and her colleagues deserve great credit.



During the year three assistant medical officers attended the University of London course on Educational Subnormality and Mental Deficiency. The Senior Assistant Medical Officer attended a Refresher Course for medical officers who deal with the ascertainment of children under the Handicapped Pupils Regulations. The Course was devoted to lectures and demonstrations on recent developments in connection with the care of the deaf child.

In connection with the local Festival of Britain Exhibition window displays were arranged depicting the combined medical and educational activities of the Open Air School, Schools for Physically Handicapped and Deaf pupils and the classes for Partially Sighted pupils. The Health Committee expressed their high appreciation of the displays and congratulated the Head Masters/Mistresses concerned on their work in organising the exhibits.

### I.—STAFF

1. Details of the staff employed in the School Health Service on the 31st December, 1951, are printed on page 162.

At the end of 1951 the number of sessions devoted by medical officers to work in the School Health Service was equivalent to the services of five whole-time officers, as compared with 3 7/11ths at the end of 1950.

There were a number of changes during the year in the nursing and clerical staff, but the numbers employed have not altered.

The part-time physiotherapist employed at the Park Avenue Special school left just before the end of the year and it had not been found possible to replace her.

### II.—CO-ORDINATION

2. The scheme providing for the interavailability of clinic services between various sections of the Public Health Service continued throughout the year. Reference to the work is made in various tables in this report.

3. The speech therapist continued to attend for one session weekly at the Children's Hospital for the treatment of children under school age. He also continued the evening clinics for adults under the auspices of the Hospital Management Committee.

#### Services provided for School Health Service

Service	Cases	Attendances
Artificial Light Treatment :—		
(a) At West Hull Clinic (M. & C.W.)	43	584
(b) At East Hull Combined Clinic	87	890
(c) At North Hull Combined Clinic	46	628
Orthopaedic Clinic (East Hull)	24	1106
X-Ray Examinations	115	121



## SERVICES PROVIDED BY THE SCHOOL HEALTH SERVICE

SERVICE	Children under 5 years		Nursing and Expectant Mothers		Occupation Centre		Children's Homes		Totals	
	Cases	Attend.	Cases	Attend.	Cases	Attend.	Cases	Attend.	Cases	Attend.
Minor Ailments Treatment ....	621	3024	—	—	14	35	—	—	635	3059
Dental Treatment ....	574	756	238	666	25	33	40	115	877	1570
Orthopaedic Clinic ....	34	82	—	—	—	2	—	—	34	84
Ophthalmic Clinic ....	238	363	—	—	1	1	—	—	239	364
Aural Clinic ....	32	41	—	—	2	2	—	—	34	43
Rheumatism and Heart Clinic ....	4	7	3	3	—	—	—	—	7	10

### III.—MEDICAL INSPECTION

4. Figures relating to inspection are to be found in the Statistical Tables at the end of this Report.

In addition, 103 individual inspections were carried out at Hymers College (direct grant secondary school) and 28 at the Local Health Authority's Occupation Centre.

### IV.—FINDINGS OF MEDICAL INSPECTION

5. Statistics relating to various defects are printed in Tables Ic, IIA and IIB. Most of the "Special Inspections" refer to children attending clinics.

#### Uncleanliness

6. Cleanliness inspections are undertaken in accordance with a scheme which embodies the requirements of the Education Act, 1944, and statistics are printed in Table III.

The number of individual children found in an unclean condition in 1951 was 4,944 as compared with 6,282 in 1950 and 6477 in 1949; the percentage was 10.0 in 1951, compared with 13.2 in 1950 and 13.3 in 1949.

#### Cleanliness Inspections—Total—172,254.

Findings	Individual Children	Percentage of School Roll
Nits present, but no vermin seen	4443	9.0
Vermin present	339	0.7
Dirty but no nits or vermin	162	0.3
<b>Total</b>	<b>4944</b>	<b>10.0</b>

#### Tuberculosis

7. The findings of the Chest Physician in cases referred by the School Health Service are shown below.

Number of referred children who attended the Chest Clinics	25
Cases of definite Pulmonary Tuberculosis	—
Cases of definite Non-Pulmonary Tuberculosis	—
Suspected cases to be kept under observation	6
Cases not suffering from Tuberculosis	19



### Dental Defects

8. The findings at periodic inspections by dental officers are printed in Table V. The number of children inspected during the year has decreased further, due to the continued shortage of dental officers.

### Defective Vision

9. From the commencement of the surveys by school nurses in May, 1951, 40 visits were paid to schools, 2,436 children were inspected, of whom 222 were referred direct to the Ophthalmic Consultant. In addition, 69 children were referred to medical officers for opinion, and of these 31 were referred to the Consultant. By the end of the year 182 of the children had been inspected by the Consultant and glasses were prescribed in 127 cases.

### Foot Defects

10. The chiropodists paid two visits to schools and inspected 200 children. Of these, 30 were referred for treatment by the chiropodists at the clinics and eight other children were referred for other forms of treatment.

## V.—FOLLOWING-UP

11. The number of visits paid to homes in connection with preparation for medical inspection, following-up of children with defects and in connection with the Cleanliness Scheme was 21,389.

## VI.—ARRANGEMENTS FOR TREATMENT

12. As previously stated, chiropody has been added to the clinic services provided by the Authority. Details of treatment given are shown later in the report.

13. Treatments of minor ailments are carried out at the following day special schools: School for Physically Handicapped Pupils, three sessions per week; School for Educationally Subnormal Pupils, three sessions per week; Open Air School, 10 sessions per week.

14. Reports by certain specialist officers will be found on pages 179 and 181.

15. Various tables relating to work in school clinics are printed below.

## WORK DONE IN SCHOOL CLINICS, 1951.

WORK UNDERTAKEN	CENTRAL CLINIC		WEST CLINIC		EAST HULL CLINIC		NORTH HULL CLINIC		AINTHORPE GROVE CLINIC		HOPEWELL ROAD CLINIC		TOTALS						
	Cases	Attend.	Cases	Attend.	Cases	Attend.	Cases	Attend.	Cases	Attend.	Cases	Attend.	School Cases		Non-School Cases				
													Cases	Attend.	Cases	Attend.			
Inspection Work :—																			
1. Minor Ailments and General	2928	4306	2914	5115	2511	4163	1440	2293	371	481	246	343	9960	15931	450	770	10410	16701	
2. Orthopaedic	51	179	—	—	—	—	17	72	—	—	—	—	68	251	31	76	99	327	
3. Refractions	1002	1218	958	1164	795	917	247	290	—	—	—	—	2763	3225	239	364	3002	3589	
4. Aural	274	370	226	246	252	293	108	111	—	—	—	—	826	977	34	43	860	1020	
5. Rheumatism and Heart	51	122	—	—	23	59	—	—	—	—	—	—	67	171	7	10	74	181	
6. Paediatric	82	366	—	—	43	193	—	—	—	—	—	—	132	556	3	3	125	559	
7. Educational	124	186	3	3	2	2	1	3	—	—	—	—	130	194	—	—	130	194	
8. Child Guidance	64	64	—	—	—	—	—	—	—	—	—	—	63	63	1	1	64	64	
9. Speech Therapy	129	341	—	—	—	—	—	—	—	—	—	—	129	341	—	—	129	341	
10. Employment Cases	228	228	262	262	213	213	115	115	60	60	12	12	890	890	—	—	890	890	
11. Miscellaneous	242	244	27	27	26	26	21	21	—	—	5	5	83	83	238	240	321	323	
Treatment Work :—																			
1. Minor Ailments (including Aural)	2853	23833	2765	19979	2804	15077	1304	9246	2081	5393	1504	5771	12676	76240	635	3059	13311	79299	
2. Dental	1520	2638	1992	3671	2222	3652	1043	1888	—	—	—	—	5900	10279	877	1570	6777	11849	
3. Orthopaedic	141	2669	2	89	—	—	23	510	—	—	—	—	166	3268	5	56	171	3324	
4. Child Guidance	64	1911	—	—	—	—	—	—	—	—	—	—	63	1856	1	55	64	1911	
5. Speech Therapy	59	2578	—	—	—	—	—	—	—	—	—	—	59	2578	—	—	59	2578	
6. Chiropody	18	28	7	10	16	31	7	13	—	—	—	—	48	82	—	—	48	82	



## School Clinics, 1948-1951

### Number of Cases

Work Undertaken	1948	1949	1950	1951
<b>Minor Ailments—Inspection Clinics :</b>				
1. Minor Ailments treated....	14948	13733	11993	13311
2. Defects inspected .....	14880	12352	10309	10410
3. Employment Cases .....	551	830	983	890
4. Miscellaneous Inspections .....	346	326	355	321
Refraction Clinics .....	3134	3307	2982	3002
Dental Clinics—Treatment only .....	14230	9668	7184	6777
Orthopaedic Clinics .....	137	180	104	99
Aural Clinic Inspections .....	1564	1706	1626	860
Rheumatism and Heart Clinic .....	134	97	93	74
Pædiatric Clinics .....	185	70	79	124
Formal Examinations for Educational Subnormality .....	178	162	84	130
Child Guidance .....	70	95	114	65
Speech Therapy :				
1. Cases inspected .....	213	123	140	129
2. Cases treated .....	66	81	47	59
Chiropody .....	—	—	—	48

Notes on various clinic activities are given below.

#### (a) Minor Ailments

16. A slight increase is noted in the number of cases treated during the year compared with 1950. It is interesting to note that the number of cases of ringworm of the scalp has dropped from 33 in 1950 to 20 in 1951. This is the lowest figure recorded since the war. The number of cases of ringworm of the body has decreased by 20 compared with the previous year. It is pleasing to report that only 27 cases of scabies were treated during the year. The number of cases of impetigo has, however, increased by 300 to the present figure of 690.

#### (b) Visual Defects

17. The total amount of work done at the Ophthalmic clinic is show below.

### Ophthalmic Clinic

	Cases	Attendances	Spectacles Prescribed
Primary and Secondary School Children	2666	3101	1584
Special School Children .....	86	112	60
Hymers College Pupils .....	10	10	10
Children's Homes cases .....	1	2	1
Children under 5 years .....	238	363	100
Occupation Centre Children .....	1	1	1
<b>Totals</b> .....	3002 *	3589	1756

18. The statistics printed below refer solely to diseases or defects found in school children.

### Summary of Conditions Found

Condition	Number of Examples
Emmetropia	153
Hypermetropia	165
Hypermetropic Astigmatism	339
Myopia	147
Myopic Astigmatism	64
Mixed Astigmatism	87
Irregular Astigmatism	5
Strabismus	153
Conjunctivitis	75
Blepharitis	10
Corneal Nebulæ	5
Choroiditis	1
Cataract	2
Optic Atrophy	3
Hysterical Amblyopia	7
Other Conditions	22
<b>Total</b>	<b>1238</b>

19. The Ophthalmic Surgeon carried out operations on 115 school children at hospitals during the year. Most of these were for the correction of squint. Artificial eyes were prescribed in two cases.

20. The arrangements for the dispensing of glasses and for replacements and repairs were continued by the Hospital Eye Service during the year.

21. 25 cases were referred to the Orthoptic clinic established by the No. 4 Hull (A) Group Hospital Management Committee during the year. 64 cases on the waiting list commenced attendance during the year.

#### (c) Ear, Nose, and Throat Defects

22. The following table summarises the cases seen at Specialist Aural clinics of school children.

#### Aural Clinic, 1951

Disease	Cases	Attendances	Operation Required
Otitis Media	28	57	2
Enlarged Tonsils and Adenoids, and Other Defects	798	920	542
<b>Totals</b>	<b>826</b>	<b>977</b>	<b>544</b>



23. Operations for removal of enlarged tonsils and adenoids are undertaken at various hospitals.

24. During the year Individual Hearing Aids were provided through the National Health Service for one partially deaf pupil attending the School for the Deaf and for six partially deaf pupils attending ordinary schools.

(d) **Orthopaedic and Postural Defects**

25. The clinics conducted by the orthopaedic surgeons were held as usual and the tables printed below refer to the work carried out. The services of one whole-time physiotherapist were available.

**Central and North Hull Orthopaedic Clinics, 1951**

(A) *Inspections and Re-inspections by Orthopaedic Surgeons*

Type of Case	Education Cases		M. & C.W. Cases	
	New Cases	Attend.	New Cases	Attend.
Deformities—				
Rickets .....	—	4	—	3
Spinal Curvature .....	6	35	—	—
Infantile Paralysis .....	3	35	—	2
Other Forms .....	57	170	31	71
Tuberculosis—				
Spine .....	1	2	—	—
Hip .....	—	1	—	—
Other Bones and Joints .....	1	4	—	—
Totals .....	68	251	31	76

Total new cases—99. Total attendances for inspection—327.

2 Attendances were also made by children from the Occupation Centre.

(B) *Treatments Given*

Form of Treatment	Education Cases	M. & C.W. Cases
Massage .....	1544	26
Electrical .....	8	—
Remedial Exercises .....	1678	24
Other .....	38	6
Totals .....	3268	56

Total number of treatments given—3324.

## East Hull Orthopaedic Clinic, 1951

*(A) Inspections and Re-inspections by Orthopaedic Surgeons*

Type of Case	New Cases	Attendances
<b>Deformities—</b>		
Rickets .....	—	—
Spinal Curvature .....	—	3
Infantile Paralysis .....	1	19
Other Forms .....	23	71
<b>Tuberculosis—</b>		
Spine .....	—	1
Hip .....	—	—
Other Bones and Joints .....	—	—
<b>Totals</b> .....	24	94

*(B) Treatments Given*

Form of Treatment	
Massage .....	215
Electrical .....	—
Remedial Exercises .....	709
Other .....	88
<b>Total</b> .....	1012

26. The provision and repair of ambulant orthopaedic appliances through the National Health Service worked satisfactorily.

*(e) Heart Disease and Rheumatism*

27. This clinic has continued its work as outlined in last year's report in conjunction with the Cardiac Unit established by the Regional Hospital Board at the Kingston General Hospital. The number of sessions has decreased by reason of the fact that more cases now attend the hospital for follow-up. Certain details of the work at the clinic are given below.

Condition	Schoolchildren		Children under 5 years		Totals	
	Cases	Attend.	Cases	Attend.	Cases	Attend.
1. Rheumatic Pains or Arthritis—						
(a) with heart affection .....	3	24	—	—	3	24
(b) without heart affection .....	10	42	—	1	10	43
2. Rheumatic Chorea—						
(a) with heart affection .....	1	3	—	—	1	3
(b) without heart affection .....	—	1	—	—	—	1
3. Rheumatic Carditis without (1) or (2) above	—	5	—	—	—	5
4. Congenital Heart Disease .....	9	24	2	2	11	26
5. Functional Heart Disorder .....	20	44	1	3	21	47
6. No Rheumatism or Heart Disease or Disorder	24	28	1	1	25	29
<b>Totals</b> .....	67	171	4	7	71	178



**(f) Treatment by Artificial Light**

28. This treatment is given at M. & C. W. Clinics ; 176 school children were treated during the year.

**(g) Pædiatric Clinic**

29. The number of children attending this clinic for the first time during the year has increased from 79 to 125, and the total attendances have increased by almost 200 to 559. Dr. Morton Stewart usually attends twice a week during term-time. He maintains a very close liaison between the assistant medical officers of health and the Regional Hospital Board and his fellow consultants. His work is greatly appreciated.

The table printed below shows the diseases or defects apparent in the cases attending.

Defects	New cases	Total attendances
Skin .....	—	6
Eyes—		
(a) Vision .....	2	3
(b) Other .....	—	—
Nose or Throat .....	7	28
Speech .....	2	6
Cervical Glands .....	1	3
Heart and Circulation .....	—	3
Lungs—		
(a) Asthma .....	9	66
(b) Bronchitis .....	19	93
(c) Other .....	2	59
Developmental—		
(a) Hernia .....	—	6
(b) Other .....	1	7
Orthopaedic—		
(a) Posture .....	—	—
(b) Other .....	1	2
Nervous System—		
(a) Epilepsy .....	14	48
(b) Other .....	13	63
Psychological—		
(a) Development .....	2	7
(b) Stability .....	9	24
Other Defects and Diseases .....	30	110
No Organic Disease Detected .....	13	25
<b>Totals .....</b>	<b>125</b>	<b>559</b>

**(h) Dental Treatment**

30. Statistics relating to work done by dental officers in respect of school children are printed in Table V on page 196. Owing to the continued shortage of dental officers treatment has still in the main to be restricted to cases of emergency, to the detriment of routine preventive treatment.

31. In addition to the work done for school children, dental treatment is undertaken in connection with patients of all ages referred by other departments of the Health Service. A summary of this work is appended.



### Dental Treatment of Non-School Cases

	Children under 5 years	Expectant and Nursing Mothers	Children's Homes Cases	Occupation Centre Cases
Number dealt with ....	574	238	40	25
Attendances ....	756	666	115	33
Extractions—				
(1) Temporary Teeth ....	1355	—	52	32
(2) Permanent Teeth ....	—	766	3	25
Fillings—				
(1) Temporary Teeth ....	8	—	—	—
(2) Permanent Teeth ....	—	114	26	—
Radiographs ....	3	7	—	1
Other Operations ....	12	233	47	—
Administration of General Anæsthetics ....	362	56	11	12

The number of children under five years dealt with during the year has increased by 30. On the other hand the number of expectant and nursing mothers who received treatment has decreased by almost 140.

32. A comparative table of the work carried out in the years 1950/1951 is printed below.

### Dental Treatment

	1950		1951	
	School-children	All Cases	School-children	All Cases
Cases Treated ....	6152	7184	5900	6777
Attendances ....	10200	12265	10279	11849
Fillings ....	1948	2210	948	1096
Extractions ....	10651	13564	11583	13816
Other Operations ....	2094	2574	2021	2324

It will be seen from the above table that the number of school children treated has decreased by 250, and that the number of fillings inserted has decreased by more than half. On the other hand the number of extractions in the case of school children has increased by nearly 1,000.

#### (j) Child Guidance

33. A report by Dr. J. Mackay, the Psychiatrist, is printed below.

### REPORT OF PSYCHIATRIST

#### Staff

This is the first time since the inception of the clinic in 1948 that a full child guidance team has been available throughout the whole year. Amongst the advantages accruing has been a closer contact with parents and a more accurate evaluation of environmental factors. The social worker's role has been to discover what difficulties in the home and elsewhere have contributed to the immediate problem, and to work with those involved in the child's environment in helping to solve it.



### **Accommodation**

I have once again to deplore the totally inadequate accommodation which has been and is being provided for this most important and vital endeavour to promote a sound and balanced emotional development in the child. Where cramped home conditions contribute to the production of maladjustment and perhaps delinquency, the lack of space in the clinic for free and healthy expression might conceivably serve as a factor replica and not only militate against the efforts of the therapist, but possibly aggravate the condition for which treatment is sought.

No plea can be made strong enough for the provision in a child guidance centre of adequate space for play therapy where free and natural expression can be permitted. Besides other materials, sand and water should be available. Recent work has shown that the use of such media can effectively portray the phantasy content in a child's experience and expose the unconscious forces which generate emotional and behaviour disturbances.

The present-day urgent and increasing demands for treatment at adult mental health clinics should serve as a grim warning of the consequences of failure to make the maximum therapeutic effort in the field of child guidance.

### **Observers**

Student health visitors, teachers and a graduate of one of the American Universities have attended the clinic. Their keen appreciation and constructive criticism of the work done is a stimulus to further effort. Facilities were also extended to the medical staff of the School Health Service to attend during the year.

### **Clinical**

The work of the clinic has followed the lines of the previous year. Mr. Reed designed a puppet theatre, but owing to lack of space, as above noted, it could only be used on a few occasions without interfering with routine work. Drawing and plasticine therapy proved useful in providing a means of expression for the vocally inhibited child and small toys invariably gained the attention and co-operation of the younger children at their first visit.

Lectures on child guidance activities as an extension of the work of the clinic were given by the Psychiatrist and Psychologist to various societies in the city.

The Psychiatrist continued to visit the Remand Home to examine and report on cases referred to him by the Juvenile Court. Following a recent decision of the Minister, this work will become the responsibility of the Regional Hospital Board in 1952.



Close liaison has been maintained with the Children's Department, Probation Officers and Remand Home staff, and nothing but the highest praise can be given for the ready help afforded by all officials concerned.

In conclusion, I have once again to offer my sincere thanks to Dr. Orr, the Senior Assistant Medical Officer, and his staff, both medical and clerical, for their support and full co-operation in the conduct of the clinic.

The following table presents a resumé of the work done at the clinic :

Classification	1st Attendances	Other Attendances	Total Attendances
Maladjustment .....	44	1444	1488
Pavor Nocturnalis .....	—	19	19
Photophobia .....	—	2	2
Hysterical Amblyopia .....	—	17	17
Hysterical Neurosis .....	—	16	16
Anxiety Neurosis .....	—	36	36
Neuro-Dermatitis .....	—	15	15
Anxiety States .....	1	18	19
Encopresis and Enuresis .....	—	10	10
Enuresis .....	3	126	129
Educational Retardation.....	1	91	92
Epilepsy .....	—	31	31
? Organic Factor .....	1	—	1
Physical Handicap .....	—	7	7
E.S.N. ....	1	14	15
Report for Church of England Children's Society .....	2	—	2
Examination for Report to Local Health Authority .....	10	1	11
Nil found .....	1	—	1
<b>Total</b> .....	<b>64</b>	<b>1847</b>	<b>1911</b>

No. of cases in which a report has been issued to the Juvenile Court.... 26

JOHN MACKAY, M.D., D.P.M.,

*Psychiatrist, School Health Service.*

### (k) Speech Therapy

34. A report by Mr. T. R. Francis is printed below.

#### REPORT OF SPEECH THERAPIST

The Speech Therapy Clinic continues to be accommodated at the Central Clinic, Beverley Road. The playroom, acquired last year, is invaluable in the treatment of younger children and also for keeping children occupied while their parents are being interviewed.

#### Examinations

All children continued to be interviewed, together with their parents, as soon as possible after being referred to the Speech Clinic. It has been found impossible to keep to the waiting list for treatment, and it has been found best to treat children on priority, and to see others at least once in six months, at the same time advising the parents. Parents whose children are on the "advisory" list are able to seek advice at the clinic at any time between re-examinations, should they desire it. Some parents take advantage of this opportunity.



### **Treatment**

Treatment, as explained above, is given on grounds of priority. Nine-and-a-half sessions are given to treatment each week.

### **School Visits**

One session each fortnight is given to school visiting. Unfortunately the large numbers at present awaiting treatment at the clinic make it impracticable to visit the schools more frequently.

### **Special Schools**

No visit is made to any special school for treatment at present, though some children attending the special schools visit the clinic. This position is very much to be regretted, as it is felt that by treating these children at the schools, it would be possible to secure more easily the co-operation of the teaching staff.

### **Equipment**

It is very gratifying to be able to report that approval has been given for the purchase of a modern Magnetic Tape Sound Recorder. This, it is hoped, will be installed in the early part of 1952.

### **Staff**

It is pleasing to note that financial provision has been made for the appointment of another speech therapist. It is to be sincerely hoped that this appointment may be filled during 1952. However, it is still urged that another speech therapist above the present establishment (of two) be appointed.

### **General Remarks**

The clinic continues to treat children who have had surgical treatment at the Facio-Maxillary Unit at Leeds, under Mr. Michael Oldfield and Mr. Mortimer Shaw.

Mr. Peter Walton, Consultant Surgeon to the local hospitals, was kind enough to visit the Speech clinic and to advise on the surgical treatment of cleft palate cases. His help and co-operation have been very much appreciated, especially in the case of one girl who suffered from a very severe congenital malformation.

The Speech clinic at the Victoria Children's Hospital continues to be run in conjunction with the School Health Service Speech clinic.

Thanks are again accorded to Mr. Stenhouse Stewart for the loan of his Wire Sound Recorder for the greater part of the year; by this means it has been possible to gain experience in recording technique.



One speech therapy student has been a regular attender during student vacation periods, whilst others who intend to take up speech therapy have attended for information.

Lectures have been given to student health visitors, and to students of the Social Science Department of the Hull University College. Student health visitors have made regular attendances at the speech clinic for observation.

It is to be hoped that 1952 will see the appointment of a second speech therapist. Only then will it be possible to commence Speech clinics at the Special Schools. It is also hoped to start a class for the partially deaf, to accustom them to the use of Hearing Aids, and so gain the greatest benefit from the aids. The co-operation of Mr. J. S. Dunn, the Chief Technician of the Hull Royal Infirmary Hearing Aid Distribution Centre, has been promised in this.

It is to be hoped that 1952 may be the beginning of research into auditory defects and their association with dyslalic conditions; this, of course, depends to some extent on the appointment of another speech therapist.

In conclusion my thanks are due to Dr. C. Warden Orr, the assistant medical officers of Health, Dr. J. Mackay and Mr. G. F. Reed, of the Child Guidance clinic, for their unfailing advice and help given at all times.

I must thank the clerical staff for their help and courtesy, and, I may say, patience, at all times.

T. R. FRANCIS, L.C.S.T.,  
*Speech Therapist.*

### Statistical Report

DEFECTS	INSPECTIONS		TREATMENTS	
	Cases	Attendances	Cases	Attendances
Stammer .....	38	94	21	1185
Dyslalia .....	45	150	17	751
Rhinolalia (aperta) .....	—	—	1	23
Rhinolalia .....	3	6	4	54
Stammer and Dyslalia .....	3	8	2	75
Disphonia .....	1	2	1	6
Partially Deaf .....	3	4	1	15
Dyslalia and Nasality .....	1	1	1	22
Lateral S. ....	—	2	—	2
Dyslalia and Dysphonia .....	—	1	—	—
Lisp .....	1	2	—	—
Alalia .....	—	—	—	34
Mouth Breather .....	—	1	2	19
Retarded Speech .....	4	8	2	50
Stammer, Dyslalia and Mouth Breathing .....	—	1	—	—
Hyper-rhinophonia .....	—	1	—	—
Dysarthria .....	—	—	1	44
Aphasia, Dysarthria and R. Hemiplegia .....	1	1	1	7
Anarthia .....	—	—	—	33
Cleft Palate .....	6	15	2	171
Idioglossia .....	—	1	—	42
Diagnosis deferred .....	19	32	3	45
No defect found .....	4	11	—	—
	129	341	59	2578



*(l)* Foot Defects

35. The Chiropody clinics commenced on 3rd December and 12 clinic sessions were held to the end of the year. The following table shows the defects treated :

Defects	No. of Cases	Attendances
Verruca ....	26	58
Onychogryphosis....	2	2
Corn ....	3	3
Keratosis ....	1	1
Pes Planus ....	3	3
Pes Cavus....	2	4
Hallux Valgus ....	1	1
Miscellaneous ....	10	10
	—	—
	48	82
	—	—

## VII.—INFECTIOUS DISEASES

36. The incidence of Infectious Diseases among school children is shown below.

## Incidence of Infectious Diseases

Disease	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Total 1951	Total 1950
Scarlet Fever	46	46	35	92	219	287
Diphtheria	—	—	1	1	2	8
Typhoid Fever	—	—	—	—	—	—
Poliomyelitis	—	—	1	1	2	7
Erysipelas	—	2	—	—	2	—
Acute Encephalitis	—	—	—	—	—	1
Meningococcal Infection	—	—	—	—	—	—
Smallpox	—	—	—	—	—	—
Whooping Cough	88	120	236	110	554	414
Measles	239	106	47	176	568	2471
Pneumonia	10	6	6	8	30	—
Chicken Pox	363	407	182	110	1062	362
German Measles	—	6	25	20	51	8
Dysentery	18	6	1	2	27	—

## Diphtheria Immunisation

37. The table below relates to school children only but it must not be forgotten that many children have been immunised before commencing school attendance.

	Clinics	Schools	Total
<b>SCHICK TEST—</b>			
Number .....	3	147	150
Negative .....	1	91	92
Positive .....	2	52	54
Result not known .....	—	4	4
Immunised after test .....	2	52	54
Immunised without test .....	63	348	411
<b>SCHICK RE-TEST—</b>			
Number .....	—	322	322
Negative .....	—	220	220
Positive .....	—	95	95
Result not known .....	—	7	7
Re-immunised .....	—	85	85
Re-inforcing Injection .....	103	2506	2609

## VIII.—MORTALITY AMONG SCHOOL CHILDREN

38. The table printed below shows the causes of death among school pupils during the year.

### Causes of Death, 1951

Disease or other Cause	Male	Female	Total
Tuberculosis, respiratory .....	1	—	1
Tuberculosis, other .....	—	1	1
Whooping Cough .....	1	—	1
Meningococcal infections .....	—	1	1
All other infective and parasitic diseases .....	—	1	1
Leukaemia and Aleukaemia .....	—	—	—
Other Malignant and lymphatic neoplasms .....	2	1	3
Pneumonia .....	1	2	3
Other diseases of Respiratory system .....	—	1	1
Other defined and ill defined diseases .....	1	3	4
Motor vehicle accidents .....	—	—	—
All other accidents .....	4	1	5
Suicide .....	1	—	1
<b>Total .....</b>	<b>11</b>	<b>11</b>	<b>22</b>

## IX.—HANDICAPPED PUPILS

### (a) Ascertainment

39. There was no change in the arrangements for ascertainment.

Recommendations of examining medical officers relating to the ascertainment of educationally subnormal pupils are given below.



The figures include cases examined for the first time, re-examinations of pupils not previously classified as Educationally Subnormal, and re-examinations of pupils previously classified as Educationally Subnormal who had not been admitted to a special school.

The figures relating to reports to the Local Health Authority do not agree with those given on page 197 for the following reasons. Actual reports are not always made in the same year as the recommendations. The figures on page 197 include cases reported after attendance at a special school.

Report to Local Health Authority—

Incapable of receiving education at school	....	....	....	15
Inexpedient to be educated in association with other children	....			3

Educationally Subnormal—Special Educational Treatment in—

(a) Day Special School	....	....	....	....	....	....	38
(b) Ordinary School	....	....	....	....	....	....	52
Not Educationally Subnormal	....	....	....	....	....	....	65
Classification deferred	....	....	....	....	....	....	21
							—
							194
							—

(b) **Special Schools**

40. The numbers on the registers of the various day special schools and classes in the city on the 31st December, 1951, were as follows :

Sutton (Deaf)	....	....	....	....	....	....	51
Northumberland Avenue (E.S.N.)	....	....	....	....	....	....	192
Park Avenue (Physically Handicapped)	....	....	....	....	....	....	84
Cottingham Road (Open Air)	....	....	....	....	....	....	226
Classes for Partially Sighted	....	....	....	....	....	....	32

The figures include one deaf and one partially sighted pupil residing in the area of the East Riding Education Authority who accept financial responsibility.

*Park Avenue School for Physically Handicapped Pupils*

41. Two physiotherapists were employed for the greater part of the year ; one whole time and one part time (five sessions per week).

Details as to the medical side of the work are printed below.

Inspections by Orthopaedic Consultant ....	....	....	147
Treatments—			
Massage ....	....	....	779
Remedial Exercises ....	....	....	1,219
Electrical ....	....	....	505
Sunlight ....	....	....	263
Minor Ailments ....	....	....	640
Plaster of Paris Splints ....	....	....	8
Miscellaneous ....	....	....	703

Ambulant orthopaedic appliances are provided and repaired under National Health Service arrangements.

During the year 24 pupils were admitted to hospitals for surgical treatment.

#### *Northumberland Avenue Special School*

42. The number of formal re-examinations of children in attendance at the school carried out during the year was 103. On account of the shortage of approved medical officers it has not been possible to examine all the children annually as required by the Ministry of Education.

During the year 38 children left the school in the following circumstances :

Transferred to ordinary schools ....	....	....	4
On attaining 16 years, reported to Local Health Authority for supervision ....	....	....	9
On attaining 16 years, not for supervision ....	....	....	19
On attaining 15 years, not for supervision ....	....	....	3
Ineducable, reported to Local Health Authority ....	....	....	2
Admitted to Mental Deficiency Institution ....	....	....	1

The following are the after-school careers of the 31 leavers who were eligible for employment :

Maintained regular employment ....	....	....	19
Moved from job to job, not satisfactory ....	....	....	6
Had one or more jobs for a time ....	....	....	2
Not been employed ....	....	....	1
Unemployable ....	....	....	3



*Cottingham Road (Open Air) School*

43. A full time nurse is employed at the school and the pupils are kept under close medical and dental supervision and treatment. The following table shows the work carried out :

General re-inspections by Medical Officers	....	....	712
Baths	....	....	3,937
Cleanliness inspections	....	....	4,868
Weighing and measuring	....	....	2,667
Treatments of minor ailments	....	....	7,275
Treatments of orthopaedic defects	....	....	231

44. Below is printed an interesting report by Mr. E. C. Hudson, Head Master of the school, whose untimely death early in 1952 is referred to elsewhere. The report traces the growth, development and purpose of Open Air Schools.

“Far too often health and education appear to be in opposition. These differences, however, are not fundamental, indeed, they are only artificial, for with the growth of the School Health Service and the introduction into the schools of the doctor, dentist and nurse, much of this opposition has been removed.

It is perhaps in the Open Air school particularly that the common objective has been realised.

The children selected for the Day Open Air school are those who are debilitated, the pale, thin and underweight—in short, pupils who by reason of impaired physical condition cannot, without risk to their health, be educated under the normal regime of an ordinary school. The aim is to restore and preserve their health while giving them the necessary education to build a pattern for living.

It is usual to trace the beginnings of the Open Air school to the forest school of Charlottenburg, opened in 1904 by the German National Women’s Association, but this school merely applied the principles which had been thrashed out, often against bitter opposition, for the greater part of the previous century.

Dr. George Bodington published an essay in 1840 dealing with the treatment of tuberculous patients in which he advocated a generous diet, fresh air day and night, together with systematic exercise. He opened a sanatorium for his patients at Sutton Coldfield where he endeavoured to put his principles into practice. He was bitterly opposed by his colleagues, by the Press and the populace, and his patients were driven from his sanatorium. As he was “before his time” he was regarded as a lunatic.



In 1855 a book on similar lines was published by Dr. Henry McCormac, of Belfast. This book was also treated with scorn, although one or two voices were heard in its favour. One of the most famous of the book's supporters was Sir Benjamin Ward Richardson who, however, owing to his interest in preventive as opposed to curative medicine, was regarded as a "crank". In 1859 the German doctor Brehmer founded a sanatorium for the open air treatment of tuberculous patients. His treatment was based on the following principles :

- (1) A life in the open air.
- (2) At a high altitude.
- (3) Complete freedom from debilitating circumstances.
- (4) Methodical hill climbing.
- (5) Constant medical supervision.
- (6) Abundance of food in which milk, fatty foods and vegetables occupy the chief place.
- (7) Hydrotherapy.

In these principles are to be found nearly all that we still consider of importance in regard to health in the Open Air school. Only one of Brehmer's principles has proved not to be essential, viz., the principle of altitude.

Brehmer met with the usual opposition from his colleagues and from the public. The chief objection to his treatment raised by his opponents was that delicate people could not stand the necessary exposure, but practice showed that no amount of exposure to wet conditions or variation of temperature in the open air caused the most delicate patient to contract a chill or suffer any harm whatsoever provided that a strict open air life was led and exposure was constant.

The principles of Brehmer were derived from observation of the healthy and applied to the sick for curative purposes and the forest school opened in Germany in 1904 involved the application of these principles.

The first Open Air school in England was opened in 1907 in Bostall Woods by the London County Council. Brehmer's ideas were followed with the important addition of an organised mid-day "siesta" or rest-period. The value of the school was soon apparent, experience was gradually gained, the healing power of sunlight was realised as a further physical principle, and the open air school became firmly established as an integral factor in the prevention of disease.

To-day most progressive education authorities have established Open Air schools which are usually to be found in pleasant surroundings on the outskirts of the town away from the industrial smoke, grime and noise. The benefits received by the debilitated child from the open air school are both apparent and real, consisting as they do of an increased rate of metabolism with improved appetite,



an increased rate of growth, improved circulation and respiratory capacity, relative freedom from colds and catarrh and consequent freedom from obstruction of the respiratory passages, increased percentage of haemoglobin in the blood, improved carriage and posture, the replacement of poor spirits by a feeling of the joy of life, and as a result of this, an improvement in alertness and mental capacity.

In the open air school the helpful spirit, the happy atmosphere, the friendly relation of teacher and pupil with its consequent sense of security, and the joy of family or community are all-important and essential to success.

In 1952 the Kingston upon Hull Open Air school attains its majority. Since its opening in April, 1931, nearly 2,700 children have passed through the school. The school has accommodation for 210 pupils and the average length of stay of each child is approximately two years.

Much has been learned during the comparatively short life of the school. It has adhered to the established open air principles which have been tried, tested and found worthy ; a tradition is being built and a community has been established which is playing a unique and essential part in the educational life of the city.

Education is in itself a complete life. The Open Air school exists that the child may have life fully and abundantly—we could have no higher ideal than this."

#### *Classes for Partially Sighted*

45. During the year additional Portable Lens Reading Aids were supplied. There are two classes attended by partially sighted children, each of which is now equipped with six of these Reading Aids.

### X.—NURSERY SCHOOLS AND CLASSES

46. The city has two nursery schools and 12 nursery classes (at nine schools) with accommodation for 140 in the schools and 355 in the classes. Admission is not based on the medical condition of the children.

In addition to carrying out the routine medical inspections following admission, medical officers visit the schools and classes at intervals to make general observations on the children. A school nurse visits each school and class once a week as far as possible.



## XI.—PHYSICAL EDUCATION

47. The Report of the Inspectors of Physical Training is printed below.

### *Inspectors of Physical Training—*

Miss M. B. BLACK, Mr. A. W. EVES.

All branches of physical education in the schools have as their aim the health of the school child. Children are given a balanced programme of physical activity in schools in order to develop their co-ordinated physical powers to the utmost.

The school physical education programme is adapted to the conditions and facilities available in the various schools. Gradual improvements have been made during the past year towards the provision of increased facilities and apparatus and steady progress may be reported.

The aim of a daily lesson for each child in some branch of physical education is encouraged, and playground activities, gymnastics, dancing, organised games, swimming and athletics are included as branches of the physical education programme in schools.

Basically gymnastic training and physical activities are equally sound for boys and girls of all ages. The nursery schools offer an admirable start by providing apparatus for swinging, climbing and scrambling. The provision of special climbing and agility apparatus in primary and secondary schools will add considerably to the scope and value of their work.

Dancing plays a prominent and attractive part in physical education for senior girls, juniors and infants. Attendance at the playing fields throughout the year ensures healthy open-air exercise. All senior and older junior children have the opportunity of attending the baths for their weekly swimming lessons during the summer months.

The tests for the award of swimming certificates show that at least 2,500 children have learnt to swim during the season.

The Festival of Britain year gave opportunity for showing the standard of work achieved by the school children, when demonstrations of gymnastics, games and dancing were given at school open days and in the various city public parks. The majority of the city schools were represented in these demonstrations and the huge audiences attending on each occasion gave much encouragement and indicated the interest taken by the public in the health of the children.



## XII.—PROVISION OF MEALS

48. The School Health Service is not directly concerned with the provision of meals but the statistics printed below may be of general interest.

### Provision of Meals, 1951

Total dinners supplied—2,143,910

Month	Largest number of dinners in one week	Largest number of pupils fed in one week
January .....	53592	14103
February .....	53862	14388
March .....	58678	15552
April .....	52713	14043
May .....	52203	14275
June .....	51097	13758
July .....	50203	13953
August .....	—	—
September .....	50846	13829
October .....	51025	13936
November .....	55366	14785
December .....	55747	15802

	Number of pupils taking dinners on one day			Number of pupils taking milk on one day
	Free	Payment	Total	
February, 1951 .....	1712	9757	11469	38708
May, 1951 .....	1650	9185	10835	40736
October, 1951 .....	1487	8781	10268	41508

## XIII.—MISCELLANEOUS

49. In addition to the work referred to elsewhere in this report, examinations have been carried out as shown below.

Children, employed out of school hours .....	890
Children, in connection with theatrical employment .....	83
Children, referred from the Juvenile Court .....	71
Teachers, mostly in connection with absence from duty .....	10
Employees, in connection with appointment to Local Government Service .....	49
Adult Students, Nautical College, First Aid .....	108

## MINISTRY OF EDUCATION STATISTICAL TABLES

TABLE I

MEDICAL INSPECTIONS OF PUPILS ATTENDING MAINTAINED PRIMARY AND SECONDARY SCHOOLS (INCLUDING SPECIAL SCHOOLS) YEAR ENDED 31ST DECEMBER, 1951

### A.—PERIODIC MEDICAL INSPECTIONS

No. of Inspections in the prescribed Groups—											
Entrants....	....	....	....	....	....	....	....	....	....	....	5732
Second Age Group	....	....	....	....	....	....	....	....	....	....	3196
Third Age Group	....	....	....	....	....	....	....	....	....	....	4770
Total	....	....	....	....	....	....	....	....	....	....	13698
Number of other Periodic Inspections											177
Grand Total											13875

### B.—OTHER INSPECTIONS

Number of Special Inspections	....	....	....	....	....	....	....	....	....	....	10501
Number of Re-inspections	....	....	....	....	....	....	....	....	....	....	15764
Grand Total											26265

### C.—PUPILS FOUND TO REQUIRE TREATMENT

NUMBER OF INDIVIDUAL PUPILS FOUND AT PERIODIC MEDICAL INSPECTION TO REQUIRE TREATMENT (EXCLUDING DENTAL DISEASES AND INFESTATION WITH VERMIN)

Group (1)	For Defective Vision (excluding Squint) (2)	For any of the other conditions recorded in Table IIA (3)	Total Individual Pupils (4)
Entrants	5	829	818
Second Age Group	247	227	458
Third Age Group	324	147	456
Total (prescribed Groups)	576	1203	1732
Other Periodic Inspections	4	15	19
Grand Total	580	1218	1751



TABLE II

A.—RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION IN THE YEAR ENDED 31ST DECEMBER, 1951

Defect or Disease (1)	Periodic Inspections		Special Inspections	
	No. of Defects		No. of Defects	
	Requiring treatment (2)	Requiring to be kept under observation but not requiring treatment (3)	Requiring treatment (4)	Requiring to be kept under observation but not requiring treatment (5)
Skin....	61	1	2060	7
Eyes : (a) Vision ....	580	17	410	11
(b) Squint ....	80	3	73	1
(c) Other ....	18	1	876	3
Ears : (a) Hearing ....	18	2	38	3
(b) Otitis Media ....	15	7	123	—
(c) Other ....	6	1	349	5
Nose or Throat ....	684	849	226	1
Speech ....	19	22	11	3
Cervical Glands ....	3	20	31	1
Heart and Circulation ....	55	31	10	—
Lungs ....	53	158	55	6
Developmental : (a) Hernia ....	16	8	2	—
(b) Other ....	2	—	4	—
Orthopædic : (a) Posture ....	47	25	2	—
(b) Flat Foot ....	15	6	11	—
(c) Other ....	21	21	76	3
Nervous System : (a) Epilepsy ....	9	5	5	—
(b) Other ....	16	—	22	3
Psychological : (a) Development ....	11	—	12	—
(b) Stability ....	9	3	38	1
Other ....	60	59	5290	39

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

Age Groups (1)	Number of Pupils Inspected (2)	A. (Good)		B. (Fair)		C. (Poor)	
		No. (3)	Percentage of Total (col. 2) (4)	No. (5)	Percentage of Total (col. 2) (6)	No. (7)	Percentage of Total (col. 2) (8)
Entrants ....	5732	1863	32.5	3804	66.4	65	1.1
Second Age Group ....	3196	1309	40.9	1863	58.3	24	0.8
Third Age Group ....	4770	2496	52.3	2257	47.3	17	0.4
Other Periodic Inspections ....	177	35	19.8	137	77.4	5	2.8
<b>Total</b> ....	<b>13875</b>	<b>5703</b>	<b>41.1</b>	<b>8061</b>	<b>58.1</b>	<b>111</b>	<b>0.8</b>

TABLE III

## INFESTATION WITH VERMIN

(i) Total number of examinations in the schools by the school nurses or other authorised persons ....	172254
(ii) Total number of individual pupils examined ....	49000
	(approx.)
(iii) Total number of individual pupils found to be infested ....	4944
(iv) Number of individual pupils in respect of whom cleansing notices were issued (Section 54 (2) Education Act, 1944) ....	985
(v) Number of individual pupils in respect of whom cleansing orders were issued (Section 54 (3), Education Act, 1944) ....	1

TABLE IV

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

## GROUP 1.—DISEASES OF THE SKIN (EXCLUDING UNCLEANLINESS, FOR WHICH SEE TABLE III)

	Number of Cases treated or under treatment during the year	
	By the Authority	Otherwise
Ringworm—		
(i) Scalp	16	4
(ii) Body	120	1
Scabies	27	—
Impetigo	689	1
Other skin diseases	1754	20
<b>Total</b>	<b>2606</b>	<b>26</b>

## GROUP 2.—EYE DISEASES, DEFECTIVE VISION AND SQUINT

	Number of cases dealt with	
	By the Authority	Otherwise
External and other, excluding errors of refraction and squint	1047	147
Errors of Refraction (including squint)	—	2650
<b>Total</b>	<b>1047</b>	<b>2797</b>
Number of Pupils for whom spectacles were :—		
(a) Prescribed	—	1662
(b) Obtained	—	1390

## GROUP 3.—DISEASES AND DEFECTS OF EAR, NOSE AND THROAT

	Number of cases treated	
	By the Authority	Otherwise
Received operative treatment—		
(a) for diseases of the ear	—	35
(b) for adenoids and chronic tonsillitis	—	2829
(c) for other nose and throat conditions	—	194
Received other forms of treatment	910	146
<b>Total</b>	<b>910</b>	<b>3204</b>

## GROUP 4.—ORTHOPAEDIC AND POSTURAL DEFECTS

(a) Number treated as in-patients in hospitals	49 By the Authority	Otherwise
(b) Number treated otherwise, e.g., in clinics or out-patient departments	248	9





## FORM 21 M.

## HANDICAPPED PUPILS REQUIRING EDUCATION AT SPECIAL SCHOOLS OR BOARDING IN BOARDING HOMES.

	(1) Blind (2) Partially Sighted		(3) Deaf (4) Partially Deaf		(5) Delicate (6) Physical-ly Handi-capped		(7) Educa-tionally sub-normal (8) Malad-justed		(9) Epil-ptic	Total 1-9
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)
In the Calendar Year 1951 :										
A. Handicapped Pupils <i>newly placed</i> in Special Schools or Homes .....	1	9	4	1	105	25	41	—	—	186
B. Handicapped Pupils <i>newly ascertained</i> as requiring education at Special Schools or boarding in Homes .....	2	9	3	1	115	25	20	—	1	176
On 1st December, 1951										
C. Number of Handicapped Pupils from the area :										
(i) attending Special Schools as—										
(a) Day Pupils .....	—	31	32	18	229	84	190	—	—	584
(b) Boarding Pupils .....	3	—	3	1	—	4	—	—	10	21
(ii) Boarded in Homes .....	—	—	—	—	—	—	—	—	—	—
(iii) attending independent schools under arrangements made by the Authority .....	—	—	—	1	1	—	—	—	—	2
Total (C) .....	3	31	35	20	230	88	190	—	10	607
D. Number of Handicapped Pupils being educated under arrangements made under Section 56 of the Education Act, 1944—										
(a) in hospitals .....	—	—	—	—	10	2	—	—	—	12
(b) elsewhere .....	—	—	—	—	—	—	—	—	—	—
E. Number of Handicapped Pupils from the area requiring places in Special Schools (including any such unplaced children who are temporarily receiving home tuition) .....	2	2	—	—	66	1	63	—	1	135

Education Act, 1944. Number of children reported during Calendar Year 1951, under :—

(a) Section 57(3) (excluding any returned under (b) ) .....	18
(b) Section 57(3) relying on Section 57(4) .....	2
(c) Section 57(5) .....	9



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