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KENT COUNTY COUNCIL

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ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH

For the Year 1954

A. ELLIOTT, M.D., D.P.H.

*County Medical Officer of Health*

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HEALTH DEPARTMENT,  
COUNTY HALL,  
MAIDSTONE.

*August, 1955.*

**To the Chairman and Members of the Kent County Council.**

In presenting my Annual Report for the year 1954 I am, in accordance with the usual practice, including a review of services provided under the National Assistance Act, 1948, which are administered by the Health Committee and which form part of the work of the Health Department.

The vital statistics in the report show that the population of the Administrative County has increased by 11,500 over the previous year and now totals 1,570,400. The birth rate for the year 1954 was 14.6, which is a little lower than the rate of 14.8 in 1953, and the total number of births (22,879) shows a decrease of 199 as compared with the previous year. The infant mortality rate, that is, the number of deaths of infants under one year for each thousand live births, is 22.6, which is much the same as it was in the year 1953. The maternal mortality rate, that is the number of maternal deaths expressed in relation to each thousand total live and still births, again reached the low figure of .5, which is the same as that in 1952 and 1950. This extremely low rate reflects not only the effects of modern treatment but also the extent of the services available to expectant and nursing mothers.

The report follows the usual lines of dealing with each of the services provided by the Health Committee and it is only necessary for me to direct attention to certain particular services where noteworthy developments are taking place.

In the Ambulance Section the work undertaken continues to grow and in providing an efficient and yet economical service, greater use is being made of diesel engined vehicles and radio-telephony. It is believed that Kent was the first authority to introduce diesel engined vehicles into regular ambulance practice and, as a result of the experience gained, the orders placed for new vehicles for delivery in 1955 are, for the first time, all for this type of vehicle. The steady development in the use of radio-telephony will provide for its use in 170 vehicles associated with six main controlling transmitters. It is believed that this will make the County Council the biggest single civilian user of very high frequency radio-telephone communications in the country. It is certainly true that without radio-telephonic methods of communication the Ambulance Service would require more men than it does today and the cost of the whole service would show a marked increase.

The Domestic Help Service continues to show an increase in the number of persons served which has now reached 4,703 a week. Some three-quarters of these persons are over the age of 65.

For the last two months of 1954 the experimental scheme for the provision of evening and night attendants for elderly people was introduced in the Maidstone and Medway Towns areas, having a population of some quarter of a million, which is approximately one-sixth of the whole County. There are two important aspects of this scheme which I believe merit special consideration. The first is that the arrangements are so designed and administered as to pay the fullest regard to the part that voluntary effort can play in the care of the aged and particular importance is attached to the regulation that no assistance is given in any case unless there has first been the fullest consultation with the local voluntary bodies and they are, after enquiry, unable to provide help. The other important aspect is that for the first time a scheme has been introduced by the Health Committee on the basis of a pilot experiment for a limited period of time to a part of the County. It will, of course, be appreciated that before the scheme was introduced there was no precise knowledge available to the Health Committee of what need would exist for services of this type. It was known that there was a need but no one could estimate what was the extent of that need and what would be the best method or methods of meeting it. It is true that there must be difficulties confronting any statutory body, such as a local authority, in introducing only in a part of its area some new social service which is paid for by contributions from the whole of the area. Nevertheless, in a new service which is to provide for a need that cannot be precisely estimated and where experience is necessary in determining the best way to assess and meet that need, there is a great deal to be said for the creation of an experimental administrative arrangement for a pre-determined period of time to operate over a limited area.

The second experimental scheme that has been brought into effect is the Family Help Service which the County Council approved in November 1954 for introduction in the year 1955. Whilst full details of the working of this scheme will be given in my next annual report, it will be of interest here to record briefly the objectives of the proposal and the conditions under which it now operates. The object of the scheme is to prevent, where possible, the temporary break-up of a family resulting from the necessity to have children received into care under the provisions of the Children Act, 1948, owing to their being deprived of the care of their mother or female guardian. In general, the circumstances in which children may be deprived of the care of their mother do, in the majority of instances within the scheme, arise from the mother having to receive hospital care for sickness or confinement, but there are also cases where, owing to the death of, or desertion by, the mother, some period of temporary care is all that is needed whilst the father makes other arrangements. The purpose of the scheme is to enable children to continue to live at home rather than be brought into the care of the Children's Committee and placed in Homes or the care of foster-parents. The arrangements provide that a scheme should be operated for a preliminary period of one year and that all applications for assistance will be made by the Children's Officer for families, the parents of whom

have made application to her for the children to be taken into care by the County Council. The arrangements provide that assistance will not be provided for more than three months but experience in 1955 has already shown that this may, on occasion, have to be exceeded. Families coming within the ambit of the scheme are divided into three groups:

- (1) Where more than one of the children are under school age and where additional attention is required in the home whilst the father is at work.
- (2) Families where the children are all of school age and who require service during those hours of the day before and after school when the father is still at work.
- (3) Families where the father is on night work and services are required to look after the children, whether they are at school or not, during the periods when he is away or sleeping during the day.

Two types of helpers have been recruited and they are (a) helpers working in connection with groups (1) and (3), who are recruited on a whole-time basis and paid a weekly wage and (b) helpers attending families in group (2) who are paid on an hourly rate which is the same as that appropriate to the Domestic Help Service in the area.

Experience of the scheme during the relatively short time it has been in operation has been most encouraging. Undoubtedly many families have been kept together instead of being split up by having to be taken into care by the Children's Committee.

I am indebted to the Children's Officer for the smoothness of the arrangements which have been brought into operation between her and the staff of the Children's Department and the staff in the Health Department. This again is an example of an experimental scheme which is being operated for a limited period of time in order to assess its value and the lines upon which any further action towards the preservation of family life should be determined by the Council.

Significant developments have taken place in the services provided for mental defectives and under arrangements proposed by the Health Committee additional facilities should be provided in forthcoming years by the provision of new occupation centres. It is regrettable to record, however, that because of the shortage of staff in institutions maintained by the Regional Hospital Board the waiting list for mental defectives needing residential care continues to grow.

A somewhat similar position arises in relation to the care of old people where the waiting list of those requiring care and attention in old people's homes increases faster than the rate of additional provision which has been made every year since 1948 when the National Assistance Act came into force. Since 1948 the County Council has provided 19 new homes for old people but, in view of the steady increase in the proportion of old people in the population, it seems that the rate of such provision needs to be reconsidered in light of the steady increase in the waiting list.

A great deal of work was done during the year in the consideration of draft schemes for consideration by the Council of services under the National Assistance Act for the welfare of handicapped people other than the blind and partially-sighted. This work resulted in formal schemes being approved by the County Council in 1955 for submission to the Minister but it is unlikely that they can become fully operative until 1956.

The other health services have continued to develop on the lines laid down by the Council. It is worthy of note that for the first time since the inception of the National Health Service in 1948 the proportion of confinements in hospital has declined and there has been a rise in the number of domiciliary confinements taking place at home.

I should like again to place on record my appreciation of the encouragement and consideration afforded to the staff of the Health Department by Members of the Council and to express my thanks to members of the staff for their work during the year.

A. ELLIOTT,  
*County Medical Officer.*

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# ANNUAL REPORT

## Vital Statistics

**POPULATION.**—The Registrar-General's estimate of the population of the Administrative County at the middle of 1954 was 1,570,400; and this population is the basis of the rates quoted in this Report. Table 1 at the end of the Report shows the population in each area in the County; and from that Table it will be seen that 1,240,000 persons were resident in the urban areas, and 330,400 in the rural districts. The increase in the population of the County was 11,500, as compared with an increase of 2,500 in the previous year.

These figures give densities of population of 1·62 per acre in the county as a whole; and 6·50 per acre in the towns and 0·42 per acre in the rural districts. Compared with the previous year, there is little change in any of these figures, and the densities show the same wide range. In the towns, the extremes were 33·05 in *Penge Urban* and 0·22 in *Lydd Borough*, and in the rural districts 1·15 in *Dartford Rural* and 0·14 in *Romney Marsh Rural*.

The following tabulation shows the populations, together with the percentages in urban and rural districts in Kent, for the census years 1921, 1931 and 1951, and the Registrar-General's estimates for 1941 and 1954.

	Population									
	1921		1931		1941		1951		1954	
	No.	%	No.	%	No.	%	No.	%	No.	%
Urban Districts ..	795,035	71·11	847,090	71·50	882,900	75·56	1,225,800	79·12	1,240,000	78·96
Rural Districts ..	323,094	28·89	337,720	28·50	285,500	24·44	323,560	20·88	330,400	21·04
County ..	1,118,129	100	1,184,810	100	1,168,400	100	1,549,360	100	1,570,400	100

**BIRTHS.**—The births of living children, registered during 1954, totalled 22,879, a decrease of 199 on the total for the previous year. Male births numbered 11,849, female births 11,030.

The crude\* birth-rates for the year were 14·46 (comparable rate† 14·89) in the urban districts, 14·96 (comparable rate 15·86) in the rural districts, and 14·57 (comparable rate 15·15) in the County as a whole. The figures for England and Wales was 15·2.

The following tabulation shows the live-birth, still-birth, and death-rates, divided into urban and rural districts, and for the whole County divided into legitimate and illegitimate. The rates for England and Wales are added for comparison.

In all cases in this report the two years, 1938, the last normal year before the war, and 1953, have been taken for comparative purposes.

	No. of Live Births per 1,000 Home Population			No. of Still-Births per 1,000 Total (Live and Still) Births			No. of Deaths under 1 year of age per 1,000 Live Births		
	1938	1953	1954	1938	1953	1954	1938	1953	1954
Urban District ..	15·1	14·8	14·46	33·6	19·8	20·16	42·3	22·8	22·92
Rural District ..	14·4	15·0	14·96	36·5	21·0	20·80	45·0	20·0	21·24
Whole County ..	14·9	14·8	14·57	34·2	19·9	20·30	42·8	22·2	22·55
Legitimate ..	14·3	14·1	13·89	33·8	19·8	20·21	42·0	21·7	22·23
Illegitimate ..	0·6	0·7	0·68	42·5	21·0	22·10	61·8	31·3	29·19
England and Wales ..	15·1	15·5	15·20	38·3	22·5	24·00	52·8	26·8	25·50

The numbers of births, and the birth rates, in each sanitary district of the County, are set out in Table 2 at the end of this report.

The excess of births over deaths was 5,598—3,020 males and 2,578 females; and the varying margin of this excess of births over deaths for the years 1938, 1953 and 1954 is shown below:—

	Male	Female	Total
1938 ..	3,146	2,645	5,791
1953 ..	2,729	2,467	5,196
1954 ..	3,020	2,578	5,598

The sex-ratio of the births, on the figures shown above, represents a proportion of slightly more than 107 males to 100 females.

\* Crude birth- and death-rates are the number of births or deaths per 1,000 of the population.

† For explanation see page 35.



**STILL-BIRTHS.**—The number of still-births recorded during the year was 474. This number represents a proportion of 20·3 per thousand of all births in the County, as against 19·9 in the previous year.

The rate of still-births (per thousand of the population) was 0·30 in urban and 0·32 in rural districts, and 0·30 in the County as a whole. This proportion may be compared with the rate for England and Wales (0·36).

The number of still-births in each sanitary district of the County is shown in Table 2 at the end of this report.

**INFANTILE MORTALITY.**—There were 516 deaths of infants under one year of age in Kent during the year, which represents an infantile mortality rate (number of deaths among children under one year of age per thousand live births) of 22·6, as compared with 22·2 in the preceding year.

These deaths of infants formed 2·99 per cent. of the total deaths at all ages (2·86 per cent. in 1953).

The rates in the different sanitary districts will be found in Table 2 at the end of this report; and Table 7 shows the causes of death in children under one year of age, for the years 1938, 1953 and 1954.

**DEATHS.**—The number of deaths registered in the County (i.e. the number of deaths of persons resident in Kent) during 1954 was 17,281—a decrease of 601 on the total for the previous year. Male deaths totalled 8,829, female deaths 8,452.

Crude death-rates were 10·7 for the urban areas, 12·3 for the rural districts, and 11·0 for the whole County.

The following tabulation shows the crude death-rates recorded in Kent during 1938, 1953 and 1954. The rates for England and Wales are added for comparative purposes.

	1938	1953	1954
Urban Districts .. .. .	10·6	11·3	10·7
Rural Districts .. .. .	11·4	12·2	12·3
Whole County .. .. .	10·8	11·5	11·0
England and Wales .. .. .	11·6	11·4	11·3

The number of deaths in each sanitary district, and the deaths in age-groups, and by cause, are shown in Tables 5, 6 and 8 at the end of this report.

The causes of death in order of importance show little variation from year to year, and the following table shows the order of the principal causes in the three years, 1938, 1953 and 1954, the number of deaths under each heading, the death-rate, and the percentage of each group to the total number of deaths from all causes:—

Cause of death	1938			1953			1954		
	Number of deaths	No. of deaths per 1,000 population	Percentage to the total number of deaths from all causes	Number of deaths	No. of deaths per 1,000 population	Percentage to the total number of deaths from all causes	Number of deaths	No. of deaths per 1,000 population	Percentage to the total number of deaths from all causes
Heart Disease .. .. .	4,144	2·99	27·86	5,922	3·80	33·12	5,866	3·74	33·94
Cancer (all sites) .. .. .	2,368	1·71	15·92	3,096	1·99	17·31	3,189	2·03	18·45
Diseases of circulatory system (other than Heart Disease)	817	0·59	5·49	867	0·56	4·85	787	0·51	4·55
Bronchitis .. .. .	358	0·26	2·41	977	0·63	5·46	699	0·45	4·04
Violence (all forms) .. .. .	699	0·50	4·70	632	0·41	3·53	614	0·39	3·55
Pneumonia .. .. .	727	0·52	4·89	710	0·46	3·97	591	0·38	3·42
Tuberculosis (all forms) .. .. .	778	0·56	5·23	295	0·19	1·65	259	0·16	1·50
Nephritis .. .. .	370	0·27	2·49	181	0·12	1·01	179	0·11	1·04
Ulcer (Stomach and Duodenum) .. .. .	156	0·11	1·05	189	0·12	1·06	232	0·15	1·34
Diabetes .. .. .	201	0·15	1·35	123	0·08	0·69	105	0·06	0·61
Diarrhoea .. .. .	87	0·06	0·58	82	0·05	0·46	79	0·05	0·46
Influenza .. .. .	175	0·13	1·18	306	0·20	1·71	48	0·03	0·28
TOTALS .. .. .	10,880	7·85	73·14	13,380	8·58	74·82	12,648	8·05	73·19

Apart from small increases in the proportion of deaths in the age-groups, under 1 year of 0·1 per cent. and 65 years and over of 0·6 per cent., each of the other age-groups has shown a small decline: 1 to under 5—0·2 per cent., 5 to under 15—0·1 per cent., 15 to under 45—0·1 per cent., 45 to under 65—0·3 per cent. The increase of 0·6 per cent. in the age-group 65 years and over, is due not to an increase in the number of deaths in this particular group (12,288 in 1954, 12,614 in 1953) but to the drop in the total number of deaths (17,281 in 1954, 17,882 in 1953).

In the following summary the deaths in age-groups are expressed as percentages of the total deaths:—

Year	Percentage of Total Deaths Age-Group						Total
	Under 1 year	1 to under 5	5 to under 15	15 to under 45	45 to under 65	65 years and over	
1938	5.9	1.7	1.7	11.4	23.9	55.4	100.0
1953	2.9	0.6	0.6	4.7	20.7	70.5	100.0
1954	3.0	0.4	0.5	4.6	20.4	71.1	100.0

### NOTIFIABLE INFECTIOUS DISEASES

The number of notifications of infectious diseases in each of the sanitary districts in Kent is shown in Table 3 at the end of this report.

A summary of the notifications, incidence-rates, deaths and death-rates of the principal infectious diseases in the County is shown in Table 4 at the end of this report.

**SMALLPOX.**—Once again no cases occurred during the year. It is now nine years since the last case was notified.

**SCARLET FEVER.**—There was a considerable drop in the number of cases (1954—1,664, 1953—2,147). It is seven years since there was a death from the disease.

**DIPHTHERIA.**—For the first time since records are available, no cases of diphtheria of children under the age of fifteen years occurred in the County and only one case of an adult.

**ENTERIC FEVER.**—A small increase in the number of cases, 19 as against 12 in 1953.

**MEASLES.**—Exceptionally small number of notifications in comparison with last year. (1954—1,452, 1953—21,581.)

**WHOOPIING COUGH.**—A small increase in the number of notifications, 6,550 as against 6,412 in 1953, but the number of deaths was down from seven to four.

**POLIOMYELITIS AND POLIOENCEPHALITIS.**—One of the years with few notifications, only 63 as against 207 last year; the division between paralytic and non-paralytic was just under two to one. Six deaths occurred as against seventeen in 1953.

**OPHTHALMIA NEONATORUM.**—Very little variation each year, twenty-one cases as against eighteen in 1953. The division between urban and rural was eighteen to three.

**MALIGNANT NEOPLASM (CANCER).**—In 1954 the number of deaths from cancer reached a total of 3,189, 93 more than in 1953 (18.5 per cent. of the recorded total of deaths from all causes). The mortality rate of 2.03 per thousand of the population is 0.04 higher than in 1953.

The following tabulation shows the mortality from cancer recorded in Kent during the years 1938, 1953 and 1954:—

KENT	1938	1953	1954
<b>URBAN</b>			
No. of Deaths .. ..	1,889	2,434	2,474
Death-rate .. ..	1.72	1.98	2.00
<b>RURAL</b>			
No. of Deaths .. ..	479	662	715
Death-rate .. ..	1.70	2.02	2.16
<b>TOTAL</b>			
No. of Deaths .. ..	2,368	3,096	3,189
Death-rate .. ..	1.71	1.99	2.03

Deaths from cancer still continue to rise, the increase being 93, 100 more males, 7 less females. In both the age-groups 15 to under 45 and 65 and over, there is an increase for both males and females, but in the 45 to under 65 group, there is a noticeable increase in the male deaths but a decrease in the female deaths. The percentage of the total number of deaths from all causes has increased by 1.14 to 18.45. Once again the areas of occurrence are almost equally divided between the urban and rural districts.

The age-sex distribution of the deaths is shown below, and for comparison there is added the years 1938 and 1953.

	All ages	Percentage	Under 1	1 to under 5	5 to under 15	15 to under 45	45 to under 65	65 and over
1938 M.	1,095	46.2	—	2	—	56	427	610
F.	1,273	53.8	1	2	—	99	490	681
TOTAL ..	2,368	100.0	1	4	—	155	917	1,291
1953 M.	1,579	51.0	2	3	9	73	566	926
F.	1,517	49.0	1	8	6	89	535	878
TOTAL ..	3,096	100.0	3	11	15	162	1,101	1,804
1954 M.	1,679	52.6	—	1	4	84	629	961
F.	1,510	47.4	—	—	7	102	501	900
TOTAL ..	3,189	100.0	—	1	11	186	1,130	1,861

### DIPHTHERIA IMMUNISATION

As each year progresses so it can be said that a more accurate picture of the immunisation state in the County is becoming apparent.

For the first time since records are available no cases of diphtheria in children under 15 years of age were notified in the County and only one case of an adult. As a comparison, in 1944, there were 297 notifications of diphtheria and 24 deaths, 21 of which were children under the age of 15 years.

The following table shows the number of children under the age of 15 years at 31st December, 1954, who had at any time prior to that date received a course of immunisation:—

Age at 31.12.54, i.e. Born in Year	Under 1 1954	1 to 4 1953-1950	5 to 9 1949-1945	10 to 14 1944-1940	Under 15 Total
Last complete course of injections (whether primary or booster)					
A. 1950-1954 .. ..	1,892	66,135	87,944	28,340	184,311
B. 1949 or earlier ..	—	—	14,629	29,145	43,774
C. Estimated mid-year child population ..	22,870	94,930	241,800		359,600
Immunity Index 100 A/C ..	8.3	69.7	48.1		51.3

Once again it must be pointed out that the percentage of children born and immunised in 1954, must necessarily be small as the recommended age for immunisation is 8½ to 9 months, so that only children born in January, February and March of that year would be eligible for immunisation. The percentage of children under the age of 5 years who have been immunised, has again shown a slight rise from 57.2 to 57.8. The age-group 1 to 4 years, ignoring those born in 1954, shows a percentage of immunity of 69.7, a rise of 1.1 per cent. on the 1953 figure. The other important age-group 5 to 9 years, shows a percentage of immunity of approximately 65.02, and a percentage of 75.84 for children in this group who have been immunised since 1949.

The same facilities for immunisation are still available at child welfare clinics, schools and doctors' surgeries and every new doctor giving service under Part IV of the National Health Service Act is invited to participate in the scheme.

The following table shows the number of children who received a course of immunisation during 1954:—

Year of Birth	1954	1953	1952	1951	1950	1949	1948	1947	1946	1945	1944	1943	1942	1941	1940	Total
Primary ..	1,922	13,142	1,616	491	362	658	690	403	344	283	165	126	34	42	24	20,302
Reinforcing ..	—	—	—	657	3,290	5,876	3,198	1,710	1,425	1,713	1,374	1,990	218	136	112	21,699

### VACCINATION AGAINST SMALLPOX

During the year 17,706 persons were vaccinated against smallpox by their own general practitioner or at child welfare clinics. Of this number, 13,843 were children under one year of age (1953—13,315). This continues the steady increase which has taken place since 1948 in the number of young children being vaccinated.

The number of records in respect of persons aged 15 years and over (2,138) has again declined

as the County Council is no longer required to receive them in respect of persons vaccinated before proceeding abroad (1953—2,759; 1952—4,398).

Two cases of generalised vaccinia, both children under one year of age, were reported during the year.

The following table shows the number of persons vaccinated during the year in age-groups.

Age at date of vaccination	Under 1	1 to 4	5 to 14	15 or over	Totals
Vaccinated .. .. .	13,843	790	409	545	15,587
Re-vaccinated .. .. .	—	147	379	1,593	2,119
<b>TOTALS .. .. .</b>	<b>13,843</b>	<b>937</b>	<b>788</b>	<b>2,138</b>	<b>17,706</b>
General Practitioners ..	7,514 (54·28%)	703 (75·0%)	752 (95·43%)	2,115 (98·92%)	11,084 (62·6%)
Clinics .. .. .	6,329 (45·72%)	234 (25·0%)	36 (4·57%)	23 (1·08%)	6,622 (37·4%)
<b>TOTALS .. .. .</b>	<b>13,843</b> (100·0%)	<b>937</b> (100·0%)	<b>788</b> (100·0%)	<b>2,138</b> (100·0%)	<b>17,706</b> (100·0%)

The following table shows, for purposes of comparison, the number of children under one year of age who have been vaccinated each year since 1949.

Birth Year	Number of Live Births	Vaccinated During Year	Number Vaccinated	Percentage of Live Births	Total No. Vaccinated	Percentage of Live Births
1949	24,546	1949	7,280	29·66%	12,152	49·5%
		1950	4,872	19·84%		
1950	22,909	1950	7,945	34·68%	13,237	57·78%
		1951	5,292	23·10%		
1951	23,002	1951	8,322	36·18%	13,430	58·39%
		1952	5,108	22·21%		
1952	22,707	1952	8,211	36·16%	13,394	58·98%
		1953	5,183	22·82%		
1953	23,078	1953	8,366	36·25%	13,845	59·98%
		1954	5,479	23·73%		
1954	22,879	1954	8,529	37·28%		

So far as the number of infants being vaccinated is concerned the figures when compared with the percentage of 34·2 for England and Wales in 1953, show that a great effort is being made in Kent to encourage vaccination in infancy.

As a result of enquiries made through the health visitors, it is obvious that not all infant vaccinations are being notified. As regards children born during 1953, records for between 400 and 500 would appear to be outstanding so that a true percentage of those children vaccinated would be 61 to 62 per cent.

#### PREVENTION OF ILLNESS, CARE AND AFTER-CARE

The various services provided under Section 28 of the National Health Service Act, 1946, have been maintained during the year.

##### TUBERCULOSIS

###### NOTIFICATIONS

During the year 1,311 (1953—1,402) persons were notified as suffering from tuberculosis. It is of interest to note that although there are now improved methods of diagnosis such as mass radiography, over the last six years the number of notifications has dropped by 704 (1949—2,143, 1954—1,439). On the 31st December, 18,254 (1953—17,569) persons remained on the registers of medical officers of health. Summaries of notifications will be found on pages 14-15.

###### PROVISION OF EXTRA FOODS

5,514 recommendations were made by chest physicians, of which 5,245 were approved, the remainder not being approved as, at the time of recommendation, the patients' financial circumstances brought them outside the application of the Council's assessment regulations.

## REHABILITATION

Persons suffering from inactive tuberculosis who are fit enough to undertake five hours' work a day can, on the recommendation of the chest physician, be admitted to rehabilitation units established at Preston Hall, Maidstone; Papworth Hall, Cambridge, and Enham Alamein, Andover. At the end of 1953, 23 were receiving rehabilitation; during 1954, 28 were admitted, 22 discharged and 29 remained at the end of the year.

## BEDS AND BEDDING

251 patients, on the recommendation of chest physicians and general practitioners, were provided, on loan, with beds and bedding during the year.

## SHELTERS

During the year 9 open-air shelters were issued, 43 being in use and 29 in store at the end of the year. With the gradual alleviation of the acute housing shortage, the need for open-air shelters is slowly disappearing.

## KENT COUNCIL OF SOCIAL SERVICE

This Council has continued to afford assistance to patients and their dependants in the form of extra milk, beds and bedding, clothing, holidays, materials for diversional therapy, finding suitable employment, fares to visit patients in sanatoria and hospitals, re-housing and removal expenses. The County Council make an annual grant for administrative expenses only.

## B.C.G. VACCINATION

Although under Ministry of Health Circular 22/53 authority was given for the vaccination of school children, it was decided to take no action until such time as the results of the Medical Research Council's controlled trials were known. The carrying out of this vaccination has, therefore, been confined to persons in close contact with patients suffering from tuberculosis and is given by chest physicians at the chest clinics. The number of persons who received vaccination during the year was 1,443.

## MEANS OF CONTROLLING TUBERCULOSIS

The means of controlling tuberculosis are the same as given in last year's Annual Report when a full description of the measures taken was included.

## ASCERTAINMENT OF CONTACTS

Contacts of persons known to be suffering from tuberculosis are persuaded by the health visitors to attend the chest clinics for examination.

The following table shows the extent of contact examination during the years 1950-1954:—

Year	1950	1951	1952	1953	1954	Total
Number notified as suffering from tuberculosis ..	2,497	2,088	1,697	1,402	1,311	8,995
Number of contacts examined .. ..	3,867	4,544	4,787	4,709	3,624	21,531
Number found to be tuberculous .. ..	140	160	117	140	87	644

## EMPLOYMENT OF PERSONS KNOWN TO BE SUFFERING FROM TUBERCULOSIS

Sputum positive cases are not generally encouraged to return to work but if they do, every precaution is taken to ensure that there is no spread of infection. Where the previous employment is not considered suitable, the Disablement Resettlement Officer of the Ministry of Labour, endeavours to find alternative employment or in certain cases the patient will undertake a course of training for work suitable to his condition.

## ILLNESSES GENERALLY

## RECUPERATIVE CARE

The following table shows the extent of recuperative care provided during the year:—

				No. of Persons Admitted	Total Weeks	Average Stay	
						Weeks	Days
Adults .. ..	Male ..	41	111.0	2	5		
	Female ..	127	363.2	2	6		
School Children .. ..	Male ..	18	80.3	4	3		
	Female ..	21	76.5	3	4		
Children under 5 years of age	Male ..	8	44.0	5	3		
	Female ..	5	23.0	4	4		
Mother and Baby .. ..	.. ..	10	26.1	2	4		
TOTALS .. ..	.. ..	230	724.1	3	1		

Recuperative residential care is provided under Sections 22 and 28 of the Act. This is restricted to instances where a person has suffered from an illness which has been treated either in a hospital or at home and whilst needing further medical and/or nursing care of the type that can be provided by a general practitioner and home nurse, cannot have that care at home.

It may be of interest to note that 354 applications for recuperative care were received of which 226 were accepted. The other 128 cases were either withdrawn before going away, or were found to be outside the provisions as laid down by the County Council.

#### NURSING REQUISITES

The British Red Cross Society and St. John Ambulance Brigade, as agents of the County Council, continued to provide from their depots nursing requisites to persons ill at home.

#### BEDS AND BEDDING

Fifty persons were provided with beds and bedding during the year. *Paraplegics*—a hospital-type bed, lifting pole and handle, together with such special nursing equipment as may be recommended by the hospital concerned is provided for persons suffering from paraplegia.

#### VENEREAL DISEASE

The two female Social Workers carried out the following visits in connexion with their duties in tracing contacts and following up persons who have not maintained attendance at clinics:

Number of persons visited	..	..	444
Number who attended for treatment	..	..	305

#### HEALTH EDUCATION

The services of a health education lecturer, on a part-time basis, were maintained during the year. Lectures were given at 119 meetings of various organisations on different aspects of health education covering social hygiene, including venereal disease and other associated problems as well as sex education; also aspects of physical education, general physical fitness, food handling and prevention of contamination; diphtheria immunisation and vaccination, control of infectious diseases and local health services.

#### ORTHOPAEDIC SERVICES

The arrangements made for the treatment of children suffering from crippling defects continued to operate satisfactorily during the year, but there has been a further reduction in the number of attendances. In 1954 there were 25,636 attendances at the non-hospital clinics compared with 30,705 attendances during 1953. Of the former figure, 90.5 per cent. were children in attendance at maintained schools and 9.5 per cent. children under school age.

## Public Health (Tuberculosis) Regulations, 1952.

## SUPPLEMENTAL RETURN

Showing new notifications of Tuberculosis coming to the knowledge of the Medical Officer of Health during the period, 1st January, 1954, to the 31st December, 1954, otherwise than by formal notification.

Source of Information		Number of cases in age Groups											Total							
		0 to 1	1 to 2	2 to 5	5 to 10	10 to 15	15 to 20	20 to 25	25 to 35	35 to 45	45 to 55	55 to 65		65 to 75	75 & upwards					
Death Returns from local Registrars	Respiratory	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	4	(A)		
	Non-Respiratory	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	3	(B)		
Death Returns from Registrar-General (Transferable deaths)	M.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
	F.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
	M.	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	3		
	F.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	2		
Posthumous Notifications	M.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
	F.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
	M.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
	F.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
"Transfers" from Other Areas (excluding transferable deaths)	M.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
	F.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
	M.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
	F.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
Other Sources	M.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
	F.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
	M.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
	F.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
TOTALS ..																	(A) 230,	(B) 195,	(C) 11,	(D) 12.

Particulars of new cases of tuberculosis, and of deaths from the disease, in Kent during 1954:—

Age Periods	New Cases				Deaths			
	Respiratory		Non-Respiratory		Respiratory		Non-Respiratory	
	M.	F.	M.	F.	M.	F.	M.	F.
0—1 .. ..	2	1	1	1	1	—	—	—
1—2 .. ..	2	4	4	1	—	1	2	2
2—5 .. ..	12	16	8	7				
5—10 .. ..	15	16	10	13	1	—	2	1
10—15 .. ..	25	15	5	8				
15—20 .. ..	63	72	5	7	—	3	1	1
20—25 .. ..	59	71	5	7				
25—35 .. ..	125	123	10	16	32	24	1	2
35—45 .. ..	129	61	5	13				
45—55 .. ..	109	36	3	11	79	22	7	2
55—65 .. ..	97	21	1	3				
65—75 .. ..	65	12	1	2	47	7	5	1
75 and upwards ..	8	2	—	3	8	7	—	—
TOTALS .. ..	711	450	58	92	168	64	18	9
	1,311				259			

### Care of Mothers and Young Children

The provision made by the County Council for the care of mothers and young children includes a health visiting service for the visitation of newly-born children and children up to five years of age, child welfare centres where provision is also made for ante-natal clinics and post-natal clinics, for domestic help during the lying-in period and during the illness of mothers of children under five years of age, and by special arrangements for the care of the illegitimate child, including the establishment of a mother and baby home. Provision for the dental care of mothers and children is made through the school dental service.

#### CHILD WELFARE CENTRES

At the close of the year, there were 271 child welfare centres with 76 ante-natal and post-natal clinics and 9 women's welfare clinics, most of which were accommodated in child welfare premises. Of these clinics 233 were staffed by general practitioners and 121 by whole-time medical officers on the Council's staff. In general, the remainder were staffed by arrangements with the local District Council.

Nearly 200 of the child welfare centres are accommodated in village halls, church halls and similar premises, for which an inclusive sessional rent is paid. The majority of the other properties in use for this purpose are owned by the County Council or other Local Authorities.

Attendances at these centres continue to fall but nevertheless a total of 54,850 children attended during the year, which included 17,637 under one year of age who attended for the first time. The attendances during the year totalled 420,500. At the ante- and post-natal clinics there were 6,813 first attendances and 25,189 subsequent attendances.

Provision has been made for the building of a number of new centres for child welfare purposes and other health services. These schemes which are mainly to provide the necessary facilities where there have been considerable housing developments are in varying stages of progress.



## MATERNAL MORTALITY

The following table gives details of the deaths in the County of women in child-birth during each of the last ten years. For comparative purposes the average figures for the five years 1950-54 are added:—

Year	No. of maternal deaths	No. of live births	No. of still-births	Maternal Mortality-rates	
				per 1,000 of all births	per 1,000 of live births
1945	34	22,198	580	1.5	1.6
1946	33	29,193	699	1.2	1.2
1947	40	30,928	730	1.3	1.3
1948	33	26,258	548	1.3	1.3
1949	29	24,546	522	1.2	1.2
1950	10	22,909	470	0.5	0.5
1951	21	23,002	497	0.9	1.0
1952	12	22,706	495	0.5	0.5
1953	22	23,078	468	0.9	1.0
1954	12	22,879	474	0.5	0.5
Average of five years, 1950-1954	15	22,915	481	0.6	0.7

The following analysis has been made from enquiries into 10 deaths that occurred in the County during the year and which were ascribed to pregnancy or child-birth:—

(a)	<i>Deaths from Sepsis</i>	<i>Deaths from other causes</i>	<i>Total</i>
(i) Women who had arranged to be confined at home .. .. .	—	2	2
"  "  "  in a private nursing home .. .. .	—	—	—
"  "  "  in a hospital .. .. .	—	6	6
(ii) Women who had made no arrangements for the confinement .. .. .	—	2	2
TOTALS .. .. .	—	10	10

(b) The number of women at (a) above who died:—

(i) at home .. .. .	—
(ii) in a private nursing home .. .. .	—
(iii) in a hospital they had entered for the confinement .. .. .	3
(iv) in a hospital to which they had been removed .. .. .	7

## SPECIAL CARE OF PREMATURE INFANTS

During the year notifications were received regarding 1,326 babies who weighed not more than 5½ lbs. at birth. Details of premature births are given below from which it will be seen that 916 of these babies were born in hospitals and 43 in nursing homes. The remaining 367 were born at home although 104 were subsequently transferred to hospital.

Notifications were also received relating to 198 premature still-births and details relating to these are also given below:—

Weight at Birth	PREMATURE LIVE BIRTHS															PREMATURE STILL-BIRTHS		
	*Born in hospital			Born at home and nursed entirely at home			Born at home and transferred to hospital on or before 28th day			Born in nursing home and nursed entirely there			Born in nursing home and transferred to hospital on or before 28th day			Born in hospital	Born at home	Born in nursing home
	Total	Died within 24 hrs. of birth	Survived 28 days	Total	Died within 24 hrs. of birth	Survived 28 days	Total	Died within 24 hrs. of birth	Survived 28 days	Total	Died within 24 hrs. of birth	Survived 28 days	Total	Died within 24 hrs. of birth	Survived 28 days			
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)	(15)	(16)	(17)	(18)	(19)
(a) 3 lb. 4 oz. or less (1,500 gms. or less)	95	26	29	3	2	1	24	5	7	3	—	1	2	—	2	67	9	1
(b) Over 3 lb. 4 oz. up to and including 4 lb. 6 oz. (1,500-2,000 gms.)	161	8	132	21	—	21	30	3	20	5	—	5	2	—	1	39	12	2
(c) Over 4 lb. 6 oz. up to and including 4 lb. 15 oz. (2,000-2,250 gms.)	188	4	177	32	1	31	17	—	14	10	—	10	—	—	—	20	10	1
(d) Over 4 lb. 15 oz. up to and including 5 lb. 8 oz. (2,250-2,500 gms.)	472	3	458	207	—	205	33	1	19	21	—	21	—	—	—	25	10	2
TOTALS .. ..	916	41	796	263	3	258	104	9	60	39	—	37	4	—	3	151	41	6

\* The group under this heading includes babies who were born in one hospital and transferred to another.

#### NOTIFICATION OF BIRTHS

The number of births notified during the year was 23,127 and details of these notifications are as follows:—

	<i>Domiciliary</i>		<i>Institutional</i>		
Live births .. ..	8,253	14,426			
Still-births .. ..	113	335			
TOTALS .. ..	8,366	14,761	(68%)		

#### CARE OF THE ILLEGITIMATE CHILD

The arrangement was continued during the year whereby the main accommodation required by the Council for the institutional care of unmarried mothers and their babies is provided by voluntary organisations, chiefly through the Canterbury and Rochester Diocesan Councils for Moral Welfare. Revised financial arrangements have recently been agreed for the maintenance of the diocesan homes used for this purpose. During the year there were 257 approved admissions to these homes.

The Council itself provides one Mother and Baby Home, which is at Tunbridge Wells and has 22 beds and 14 cots. There were 109 admissions during the year (which included a small number of married women with special home difficulties) and it will be seen therefore that the Council's direct provision in this connexion is less than one-third of its total requirements. The Council's Home, however, continues to fulfil a useful function in supplying accommodation for women and girls who would not normally be accommodated in the diocesan homes, including a number who are mentally backward and some who have had previous pregnancies. Special arrangements have to be made for the future care of some of these women and their babies and there is close liaison between the officers of the Council and the workers for the voluntary organisations.

#### DENTAL TREATMENT

The majority of the dental surgeons employed by the Council undertake inspection and treatment of mothers and young children under Section 22 of the National Health Service Act as part of their

normal duties. The aggregate time devoted to this work during the year was 1,141 half-day sessions and was equivalent to two whole-time officers.

Although inspection and a free comprehensive treatment service is available to mothers and young children at fifty-five permanent centres and two temporary clinics in rural districts, only a small proportion attending ante-natal and infant welfare centres take advantage of the facilities provided by the Council, in spite of the fact that under General Dental Services these patients are required to contribute towards the cost of dentures supplied. During the year 151 fewer mothers and 242 fewer children attended the clinics for examination than in the previous year. Of 1,278 expectant and nursing mothers and 2,349 children under school age referred from ante-natal and infant welfare centres for inspection 1,134 and 2,199 respectively took advantage of the facilities provided for treatment and 1,017 and 1,968 completed it.

Details of the work carried out during the year for mothers and young children with comparable figures for 1953 are given in the table below:—

(a) *Expectant and Nursing Mothers*

	1953	1954
Number treated .. .. .	1,297	1,134
Number made dentally fit .. .. .	1,100	1,017
Number of attendances .. .. .	4,773	4,729
Number of extractions .. .. .	2,899	2,990
Number of scalings and gum treatment ..	492	525
Number of teeth filled .. .. .	1,326	1,331
Number of fillings inserted .. .. .	1,386	1,382
Number of other operations .. .. .	1,892	1,926
Number of dentures supplied .. .. .	540	522
Number of dentures repaired .. .. .	63	50

(b) *Children under School Age*

	1953	1954
Number treated .. .. .	2,324	2,199
Number made dentally fit .. .. .	2,127	1,968
Number of attendances .. .. .	4,938	4,801
Number of extractions .. .. .	2,605	2,148
Number of silver nitrate treatment ..	825	764
Number of teeth filled .. .. .	1,644	1,989
Number of fillings inserted .. .. .	1,695	2,006

The oral hygienist working under the supervision of the dental officer at Chatham, Gravesend, Orpington, Sidcup and Welling carried out 231 scalings, cleaning and polishing of teeth in addition to those shown in the table above. An additional oral hygienist appointed to work in Canterbury and Ramsgate will commence duty on the 1st January, 1955. When the work on the new clinic at St. Paul's Cray is completed, the Education Committee will be asked to approve the appointment of a third oral hygienist to work in Bromley, Penge and St. Paul's Cray. The new clinic at St. Paul's Cray will provide facilities for X-ray work and a dark room for developing X-ray films which will also serve the needs of patients from adjoining districts instead of sending them to the nearest hospital.

#### WORKSHOPS

The six technicians employed in the workshops of the Council in Dover and Maidstone spent the whole of their time in the manufacture of orthodontic appliances for school children. The construction of dentures for mothers, undertaken on behalf of the Council by contractors, is inclined to cause a wasted journey for some patients owing to the time taken to get the work back in its various stages to the dental surgeon on the date specified. Plans have been approved for the building of a new workshop in Maidstone which will accommodate eighteen technicians and it is anticipated that this will be completed during 1955. It will then be possible to provide a more efficient service for both mothers and children.

Below in tables "A" and "B" is a summary of the work carried out during the year and table "C" shows the work carried out in the County Workshops and by contractors.

TABLE "A"

	Referred for Examination	Requiring treatment	Treatment provided	Patients made dentally fit
Expectant and Nursing Mothers .. .. .	1,278	1,216	1,134	1,017
Children under five ..	2,349	2,260	2,199	1,968

TABLE "B"

	Extractions	Anaesthetics		Fillings	Scalings or Scalings and gum treatment	Silver Nitrate treatment	Dressings	Dentures Provided	
		Local	General					Complete	Partial
Expectant and Nursing Mothers . .	2,990	847	1,519	1,382	525	—	382	232	290
Children under five . .	2,148			2,006		764	1,096	—	—

TABLE "C"

(a) WORK CARRIED OUT IN COUNTY DENTAL WORKSHOPS  
(i) MOTHERS AND YOUNG CHILDREN

Dentures	Remakes	Repairs
3	—	—

## (ii) SCHOOL CHILDREN

Dentures	Remakes	Repairs	Orthodontic Appliances	Remakes	Repairs	Oral Screens
421	14	91	1,275	16	146	229

## (b) WORK CARRIED OUT BY CONTRACTORS

Dentures	Remakes	Repairs
519	14	50

## NURSERIES AND CHILD MINDERS REGULATION ACT

At the end of the year 4 premises continued to be registered as nurseries under the Act with a total accommodation for 76 children. There were also 41 registrations under the Act for Child Minders covering a total provision for 307 children. Regular inspections of the premises concerned were carried out by Health Visitors.

## NURSING HOMES

The Public Health Act of 1936 provides that any person who carries on a nursing home shall be registered. The duties under the Act may be delegated to any County District Council and this has been done in 32 of the 56 County Districts. Twenty-two nursing homes are at present registered with the County Council with accommodation providing 273 beds of which 34 are for maternity patients.

## DOMESTIC HELP SERVICE

There has been a considerable increase in the demands for this service during the year and the number of households served each week increased from 4,030 to 4,592 and at the time of writing this report the weekly number has further increased to 4,848. More than 75 per cent. of these services were for old people and during the year 2,111 lying-in mothers were provided with domestic help for a period of usually two weeks.

During the year a total of 11,512 households received domestic help and the classification of these was as follows:—

Maternity	..	..	..	..	2,111
Tuberculosis	..	..	..	..	430
Aged	..	..	..	..	6,212
Others	..	..	..	..	2,759

The number of helps engaged in the service remained at approximately 1,250 during the year with a slight increase in the average number of hours worked each week and this is equivalent to the whole-time service of about 625 persons.

#### NIGHT ATTENDANT SERVICE

During the year approval was given to the operation of a pilot scheme for a night attendant service for old people and this was brought into operation on 1st November in Maidstone and the Medway Towns when with the surrounding rural areas a total population equal to approximately one-sixth of that of the whole County was covered. The administration of this scheme is undertaken as part of the domestic help service and with the same personnel but it is provided under Section 28 of the National Health Service Act. The arrangements include evening service, preparation for sleep, provision of meals, attention to fires and night service. The Council's scheme is limited to cases where the help required cannot be provided by voluntary agencies. The service may be either continuous or intermittent dependent upon available help from relatives or other sources.

The early experience of this service has shown that an urgent need exists for both evening and night service for aged sick people and where possible this has been provided by the same help who attends the household during the day time. By the end of the year, that is, after only two months working, 37 applications had been received and in 30 of these cases the necessary help was provided by the County Council. Seventeen of these were receiving service at the close of the year. There has been an appreciable increase in the demand for this service since the close of the year and the Council has decided to continue the operation of the pilot scheme for a further period of six months.

#### HEALTH VISITING

The approved establishment of health visitors remains at 275 but the actual numbers employed at the end of the year were 235 whole-time, and 4 part-time. The majority of the health visitors are engaged on combined duties, e.g., care of mothers and children and the school health service, whilst the major portion of the tuberculosis visiting is carried out by staff appointed for this purpose and who also attend the chest clinics.

Visits were paid to 6,339 expectant mothers during the year and to 102,297 children under five years of age. The number of families and households visited during the year totalled 84,753.

The services of these health visitors are also used to deal with enquiries received from hospitals and other sources regarding home conditions and, in Gillingham special arrangements have been made with the Borough Council for the visitation of old people living in accommodation provided by the housing authority. Visiting old people in their own homes, usually at the request of their doctor is being extended gradually throughout the County.

The Council's scheme for the training of health visitors was continued. During the year seven students commenced training and eight satisfactorily completed the course they began during the previous year and entered the employment of the Council.

The post-certificate courses were also continued. Forty-three health visitors attended approved residential courses and the majority of the health visiting staff attended one or more of the week's course of lectures arranged at the County Hall.

### MIDWIFERY AND HOME NURSING SERVICES

The staff at the end of the year 1954 consisted of 6 administrative midwifery and nursing officers, 121 whole-time midwives, 125 whole-time home nurse-midwives, 163 whole-time home nurses, and 24 part-time midwives and nurses. In addition, the Margate District Nursing Association and the Northfleet Diamond Jubilee Samaritan Fund acting as agents of the Council employed 7 whole-time home nurses and by an arrangement between the Council and the East Sussex County Council, a Sussex voluntary nursing association undertook a small amount of midwifery and home nursing in Kent.

The fifth post-certificate course for home nurses and the twenty-fourth for midwives were held in Maidstone in June and September, respectively, each consisting of a series of lectures and discussions concerning the Council's Nursing and Midwifery Services. A total of 3,208 attendances by nurses and midwives was recorded for both courses.

The Council is a member of the Queen's Institute of District Nursing and during the year 6 County candidates completed a course of district training under the aegis of the Institute and arranged by the Council.

## MIDWIFERY SERVICE

The following table shows the number of midwives practising in the County at 31st December, 1954, and the number of deliveries attended by midwives during the year:—

	<i>Number of Midwives practising at 31.12.54</i>	<i>Number of Patients delivered by Midwives during the year</i>
<i>Domiciliary Midwives</i>		
Midwives and nurse-midwives employed by Council ..	253	8,087
Nurse-midwives employed by voluntary bodies .. ..	1	—
Midwives in private practice .. .. .	32	197
<b>TOTALS .. .. .</b>	<b>286</b>	<b>8,284</b>
<i>Institutional Midwives</i>		
Employed by Hospital Management Committees .. ..	226	12,467
Employed by Voluntary Institutions .. .. .	2	51
In private nursing homes .. .. .	35	477
In military families hospitals .. .. .	9	232
<b>TOTALS .. .. .</b>	<b>272</b>	<b>13,227</b>
Totals in respect of both domiciliary and institutional midwives .. .. .	558	21,511

The number of occasions Medical Aid was sought by Midwives during 1954 is shown below:—

	<i>By Domiciliary Midwives</i>	<i>By Institutional Midwives</i>	<i>Total</i>
For the Mother .. ..	1,454	54	1,508
For the Child .. ..	354	8	362
<b>TOTALS .. .. .</b>	<b>1,808</b>	<b>62</b>	<b>1,870</b>

Notifications of the following occurrences were also received during the year:—

Still-birth .. ..	56	39	95
Death of mother .. ..	—	—	—
Death of infant .. ..	12	24	36
Laying out a dead body	35	1	36
Liability to be a source of infection	20	1	21
Adoption of artificial feeding	351	1,471	1,822
<b>TOTALS .. .. .</b>	<b>474</b>	<b>1,536</b>	<b>2,010</b>

During the year the Council's midwifery staff visited 6,908 patients who had been confined in hospital and discharged home before the fourteenth day of the lying-in period.

## DOMICILIARY AND INSTITUTIONAL CONFINEMENTS

In the Annual Report for 1951 reference was made to the policy recommended by the Minister of Health to be followed in the selection of maternity cases for admission to hospital, having regard to the continued demand for hospital beds for persons suffering from chronic forms of sickness.

At that time figures were given in the Report showing that, in Kent, the proportion of births taking place in hospital was directly related to the number of maternity beds available and that this proportion was more than the 50 per cent. suggested by the Minister.

The figures given below show that the proportion of institutional births is still higher than that suggested by the Minister of Health.

ANALYSIS OF BIRTHS IN THE ADMINISTRATIVE COUNTY OF KENT  
CLASSIFIED AS TO DOMICILIARY, NURSING HOME AND HOSPITAL

<i>Area showing Main Towns</i>	<i>Population*</i>	<i>Place of Confinement</i>					<i>Percentage</i>		
		<i>D.</i>	<i>N.H.</i>	<i>H.</i>	<i>Total</i>	<i>D.</i>	<i>N.H.</i>	<i>H.</i>	
No. 1. Ashford, Deal, Dover, Folkestone:									
1950 Whole Year	198,634	1,386	332	1,425	3,143	= 44.10	10.56	45.34	
1951 .. ..	200,194	1,377	321	1,425	3,123	= 44.10	10.27	45.63	
1952 .. ..	197,466	1,341	277	1,348	2,966	= 45.21	9.34	45.45	
1953 .. ..	198,124	1,411	244	1,380	3,035	= 46.49	8.04	45.47	
1954 .. ..	200,700	1,373	216	1,337	2,926	= 46.91	7.31	45.78	

Area showing Main Towns	Population*	Place of Confinement				Percentage				
		D.	N.H.	H.	Total	D.	N.H.	H.		
<b>No. 2. Thanet Towns, Herne Bay, Whitstable, Sandwich:</b>										
1950	Whole Year	174,000	1,173	179	726	2,078	=	56.45	8.61	34.94
1951	" "	174,729	1,061	119	853	2,033	=	52.20	5.90	41.90
1952	" "	176,449	1,047	125	935	2,107	=	49.69	5.93	44.38
1953	" "	176,871	1,083	189	976	2,248	=	48.20	8.40	43.40
1954	" "	176,880	1,081	156	940	2,177	=	49.65	7.16	43.19
<b>No. 3. Maidstone:</b>										
1950	Whole Year	137,750	1,060	171	880	2,111	=	50.21	8.10	41.69
1951	" "	139,210	1,043	114	998	2,155	=	48.40	5.29	46.31
1952	" "	139,430	1,028	106	1,039	2,173	=	47.31	4.88	47.81
1953	" "	139,070	1,004	80	1,015	2,099	=	47.84	3.81	48.35
1954	" "	141,850	1,044	109	1,010	2,163	=	48.26	5.03	46.71
<b>No. 4. Tunbridge Wells, Sevenoaks:</b>										
1950	Whole Year	137,829	612	129	1,170	1,911	=	32.03	6.75	61.22
1951	" "	137,675	513	99	1,312	1,924	=	26.66	5.14	68.20
1952	" "	138,453	517	69	1,273	1,859	=	27.81	3.71	68.48
1953	" "	139,325	520	53	1,364	1,937	=	26.85	2.73	70.42
1954	" "	140,460	585	73	1,266	1,924	=	30.41	3.79	65.80
<b>No. 5. Medway Towns, Faversham, Sittingbourne, Sheerness, Gravesend, Northfleet:</b>										
1950	Whole Year	339,157	2,785	835	1,671	5,291	=	52.64	15.78	31.58
1951	" "	344,932	2,705	423	2,224	5,352	=	41.55	7.91	50.54
1952	" "	350,332	2,629	408	2,364	5,401	=	48.68	7.55	43.77
1953	" "	349,810	2,447	391	2,585	5,423	=	45.12	7.21	47.67
1954	" "	350,970	2,533	433	2,485	5,451	=	46.47	7.94	45.59
<b>No. 6. Bexley, Crayford, Dartford, Erith:</b>										
1950	Whole Year	241,320	814	26	2,467	3,307	=	24.61	0.79	74.60
1951	" "	239,820	743	10	2,470	3,223	=	23.05	0.31	76.64
1952	" "	240,260	685	11	2,421	3,117	=	21.98	0.35	77.67
1953	" "	240,710	644	10	2,565	3,219	=	20.00	0.03	79.70
1954	" "	241,800	660	3	2,451	3,114	=	21.19	0.10	78.71
<b>No. 7. Beckenham, Bromley, Chislehurst, Orpington, Penge:</b>										
1950	Whole Year	308,080	1,131	134	2,965	4,230	=	26.74	3.17	70.09
1951	" "	312,800	1,243	27	3,125	4,395	=	28.28	0.62	71.10
1952	" "	314,010	1,011	10	3,215	4,236	=	23.86	0.24	75.90
1953	" "	314,990	992	19	3,229	4,240	=	23.39	0.47	76.21
1954	" "	317,740	1,069	16	3,214	4,299	=	24.86	0.38	74.76
<b>TOTALS (Whole County):</b>										
1950	Whole Year	1,536,770	8,961	1,806	11,304	22,071	=	40.60	8.20	51.20
1951	" "	1,549,360	8,685	1,113	12,407	22,205	=	39.12	5.01	55.87
1952	" "	1,556,400	8,258	1,006	12,595	21,859	=	37.78	4.60	57.62
1953	" "	1,558,900	8,101	986	13,114	22,201	=	36.48	4.44	59.08
1954	" "	1,570,400	8,345	1,006	12,703	22,054	=	37.83	4.58	57.59

(D. = Domiciliary. N.H. = Nursing Home. H. = Hospital)

\* Registrar General's Estimates of Population at 30th June, each year.

## NITROUS OXIDE AND AIR ANALGESICS

The increase since 1945 in the use of this form of analgesia for the relief from pain at domiciliary births within the administrative County is indicated by the following figures, which include confinements attended by midwives in independent practice as well as those employed by the Council.

Year	<i>Approximate percentage of Domiciliary Confinements at which N<sub>2</sub>O and air was administered</i>		
1945	..	..	0.4
1946	..	..	4.0
1947	..	..	13.4
1948	..	..	30.7
1949	..	..	52.0
1950	..	..	63.8
1951	..	..	66.4
1952	..	..	72.0
1953	..	..	76.9
1954	..	..	79.1

*Note.*—These figures take no account of cases in the Boroughs of Bromley and Gillingham up to 31st December, 1947.

## USE OF PETHIDINE BY MIDWIVES

Midwives are permitted to obtain and use Pethidine which assists in the relief of pain at child-birth. During the year 1954 domiciliary midwives used this drug in approximately 45 per cent. of the deliveries attended by them.

## MIDWIVES APPROVED FOR THE TRAINING OF PUPILS

A part of each pupil-midwife's training is received from a domiciliary midwife with whom she works for a period of three months attending patients in their homes. The scheme was operated during the year by 28 midwives employed by the Council and approved by the Central Midwives Board to provide this training in conjunction with the following hospitals:—

Pembury Hospital, near Tunbridge Wells  
 All Saints' Hospital, Chatham  
 West Hill Hospital, Dartford  
 Bexley Maternity Hospital, Bexleyheath  
 Kent and Canterbury Hospital, Canterbury

## HOME NURSING SERVICE

The following provides some brief details of the Home Nursing Service for the year 1954. Number of Home Nurses and Nurse-Midwives employed at 31st December, 1954:—

Employed by the Council .. .. 308  
 Employed by Voluntary Associations .. 7

	<i>Number of Patients Attended during the year</i>	<i>Number of Nursing Attendances made during the year</i>
By K.C.C. Nurses .. .. .	29,764	745,498
By Voluntary Association Nurses ..	1,316	28,304
	<u>31,080</u>	<u>773,802</u>

With a population that contains an increasing proportion of older persons, the work of the home nurses is largely concerned with the elderly, as the following figures show:—

Column (1) Patients seen, 1954		Column (2) Patients who were 65 or over when first seen, 1954		Column (3) Percentage Column (2) of Column (1)	
No.	Nursing attendances on these patients	No.	Nursing attendances on these patients	No. of patients	No. of nursing attendances
31,080	773,802	14,553	455,437	46.8	58.0



## BLIND PERSONS

The Health Department has continued to work in close co-operation with the Kent County Association for the Blind.

The blind population of the County at the 31st December, 1954, totalled 2,923, and an allocation of this total to an age-sex grouping is as follows:—

Age Group	Males	Females	Total		Approx. number of registered blind persons per 10,000 population in respective age groups
Under 1 .. ..	—	—	—		
1 .. .. .	2	—	2	}	2.05
2 .. .. .	2	3	5		
3 .. .. .	7	5	12		
4 .. .. .	3	1	4		
5—10 .. ..	12	15	27	}	23.89
11—15 .. ..	17	11	28		
16—20 .. ..	13	7	20		
21—30 .. ..	43	35	78		
31—39 .. ..	68	48	116		
40—49 .. ..	90	84	174		
50—59 .. ..	152	168	320		
60—64 .. ..	91	103	194		
65—69 .. ..	143	168	311		
70 and over .. ..	586	1,044	1,630		
Unknown .. ..	—	2	2		
TOTAL .. ..	1,229	1,694	2,923		

The following tabulation shows the action taken concerning the examination of persons alleged to be blind, during 1954:—

	Number of examinations	Certified blind		Not certified blind	
		Male	Female	Male	Female
NEW CASES .. ..	494	130	235	38	91
RE-EXAMINATIONS:—					
Previously blind—still blind .. .. .	11	4	7	—	—
Previously blind—now not blind .. ..	11	—	—	1	10
Previously not blind—still not blind .. ..	32	—	—	10	22
Previously not blind—now blind .. .. .	34	16	18	—	—

## ST. DUNSTANERS

The number of St. Dunstaners registered in this County is 88, of whom 49 are in employment, 35 are unemployable and 4 are unemployed.

## REGISTER OF BLIND PERSONS

The central register of the blind is kept by the County Medical Officer, and arrangements have been made to keep the Kent County Association for the Blind informed of action taken in relation to blind persons.

The Blind Welfare Services provided are:—

## HOME TEACHERS

There are 15 home teachers who regularly visit the registered blind persons, and keep in touch with those who are classed as partially-sighted. Their duties include reporting on new cases with a view to registration, and teaching braille, moon and pastime handicrafts in suitable cases. This pastime work is taught either in the homes of the blind persons, or at special classes when the number attending justifies such arrangement. The home teachers have formed and in some cases attend social clubs, where an opportunity is provided for refreshment, education and games. Their duties have been arranged to enable them to undertake certain enquiries and services for the Kent County Association for the Blind.

During the past year the home teachers made 18,830 visits, gave 878 lessons in braille or moon and 5,014 lessons in pastime handicrafts.

## WORKSHOP EMPLOYMENT

There were 12 men and 5 women employed in workshops administered by the following Organisations:—

- London Association for the Blind.
- Blind Employment Factory.
- Royal School for the Blind.
- Royal London Society for the Blind.
- General Welfare of the Blind.
- West Ham Municipal Workshops for the Blind.

These workshop employees were occupied as follows:—

	<i>Male</i>	<i>Female</i>
Injection-moulders .. .. .	1	—
Basket-makers .. .. .	4	—
Brush-makers .. .. .	*4	—
Mat-makers .. .. .	1	—
Machine knitters .. .. .	—	5
Boot repairer .. .. .	1	—
Telephonist .. .. .	1	—
TOTAL .. .. .	12	5

\* Includes one partially-sighted person.

The rates of pay in the workshops are agreed rates fixed through the appropriate negotiating machinery. The workers' actual earnings are augmented by a sum of 15s. a week, and additional supplementation as is necessary to bring the earnings plus augmentation up to an agreed minimum wage. The augmentation and supplementation is paid by the Council.

## HOME EMPLOYMENT

Arrangements are made under the Home Workers Scheme whereby blind persons desiring to work on their own account are enabled to do so in their homes, at occupation centres or elsewhere other than in special workshops, except that no blind person is allowed to participate in these arrangements unless he is capable of earning such minimum sum each week and for such period as may be determined by the Council.

The earnings of Home Workers are augmented by the County Council. The rates of augmentation for men range between £2 15s. a week on net earnings of up to £3 10s. a week and 15s. a week on net earnings of £7 10s. a week and over, with reduced rates for women.

The scheme also provides for payments during sickness, unemployment and holidays, and tests for admission to and retention in the scheme.

At 31st December, 1954, there were 68 persons in the Home Workers Scheme—48 males and 20 females. The trades followed, and the number in each, were as follows:—

	<i>Male</i>	<i>Female</i>
Basket-makers .. .. .	13	—
Chair-seaters .. .. .	6*	1
Hand knitters .. .. .	—	2
Machine knitters .. .. .	—	17
Mat-makers .. .. .	4	—
Mattress-makers .. .. .	1	—
Piano-tuners .. .. .	18	—
Braille copyists .. .. .	2	—
Music teachers .. .. .	1	—
Woodworkers .. .. .	2	—
Shop keepers .. .. .	1	—

\* Includes one partially-sighted person.

Home Workers are supervised by the Royal National Institute for the Blind, the National Library for the Blind, the Home Teachers and District Officers of the Department, and receive assistance in the disposal of their products.

The Department has continued to consult with the Ministry of Labour and National Service regarding suitable training and employment for employable blind persons.

The Service for placement of blind persons in open industry is provided by the Royal National Institute for the Blind on behalf of the County Council.

**FOLLOW-UP OF TREATMENT RECOMMENDED FOR REGISTERED BLIND  
AND PARTIALLY-SIGHTED PERSONS**

Number of cases registered during 1954 in respect of whom paragraph 7(c) of forms B.D.8 completed by examining ophthalmologists recommended:—	Cause of disability				
	Cataract	Glaucoma	Retrolental Fibroplasia	Others	Total
(a) No treatment .. ..	129	40	—	188	357
(b) Treatment:					
(i) medical .. ..	16	13	—	43	72
(ii) surgical .. ..	62	6	—	13	81
(iii) optical .. ..	16	2	—	17	35
Totals .. ..	223	61	—	261	545
Number of cases at (b) above which, on follow-up action, have:—					
received treatment .. ..	32	11	—	35	78
commenced and were continuing to receive treatment	9	3	—	14	26
decided to have treatment some time in the future ..	20	1	—	6	27
been found unfit to undergo treatment .. ..	4	—	—	2	6
refused treatment .. ..	20	4	—	7	31
died since recommendation was made .. ..	7	2	—	6	15
left the County before follow-up completed .. ..	2	—	—	3	5
Totals .. ..	94	21	—	73	188

**OPHTHALMIA NEONATORUM**

Sixteen cases of Ophthalmia Neonatorum were notified during the year 1954.

In none of these was vision lost or impaired and none remained under treatment at the end of the year.

**AMBULANCE SERVICE**

The Ambulance Service provided under Section 27 of the National Health Service Act, 1946, operated as hitherto from twenty-one ambulance stations and seven associated places with telephones where vehicles can be stationed, generally during the daytime. Voluntary associations operate five of the smaller stations under agency arrangements, two of which are country stations manned entirely by volunteers. In Canterbury, the City Council and the County Council operate a joint service for Canterbury and the adjacent county area. Arrangements are made for the Hospital Car Service to provide supplementary transport for sitting patients.

The County Council has the following arrangements with other local health authorities:—

- (a) with the London County Council and the Canterbury City Council for the conveyance of patients suffering from typhus or smallpox;
- (b) with neighbouring local health authorities on a reciprocal basis for the nearest available ambulance to answer an emergency call, and
- (c) the provision of a general ambulance service in one remote country district in East Sussex for that County Council.

**OPERATIONAL CONTROL**

The provision of transport is controlled in the following ways:—

(a) *Stretcher Patients*

Requests for transport for stretcher patients, other than emergencies, are only accepted from medical practitioners, hospitals, midwives and nurses. Medical certificates are not required but the reason for the journey must be given to show that the request is one which can properly be dealt with by the ambulance service.

*(b) Sitting Patients*

Transport for sitting patients, except in an emergency, is usually only provided on receipt of a special form which is required to be sent to the nearest ambulance station. These forms include information as to nature of case, reason for the journey and a certificate which must be signed by a medical practitioner. In the case of continuing journeys, a new form is required for each patient each calendar month.

## EMERGENCY CALLS

Except for the areas served by the large ambulance stations at Broadstairs, Bromley and Rochester, where all emergency calls are sent by the Post Office direct to the ambulance service, such calls are routed in the first instance to the nearest manned fire station, which then passes the call to the nearest manned ambulance station.

The average time taken to reach the scenes of accidents or emergencies is 6.4 minutes.

## CO-ORDINATION OF JOURNEYS

Wherever possible journeys are co-ordinated so that one vehicle can be used for the conveyance of several patients. All journeys of twenty miles or over are reported to County Hall and for shorter journeys co-ordination is effected at the ambulance stations and, where appropriate, in conjunction with neighbouring stations.

## RAIL PATIENTS

Rail transport is used for long distance journeys, where practicable, and specially designed stretchers are available which can be used in railway carriages and also on the standard stretcher fittings in ambulances. During 1954, 2,664 patients were carried in this way as compared with 1,665 in 1953.

## RADIO-TELEPHONY

The radio-telephony system of communication covers the whole of the County, although in the Bexley, Crayford, Dartford and Erith area the scheme cannot be fully effective until such time as a new control centre is established in the area. For technical reasons, it has been necessary to provide an additional main station in Ashford. The whole system is operated from six main stations and at the end of the year one hundred and thirty vehicles were fitted with two-way mobile equipment. Experience has shown it to be desirable for all vehicles operating locally to be radio controlled and the Council has approved the provision of additional two-way mobile equipment for this purpose during 1955.

## MAINTENANCE AND REPAIR ORGANISATION

The maintenance and repair of the 237 vehicles in the ambulance service is carried out by service van mechanics who are provided with specially fitted service vans, which enable them to visit ambulance stations to carry out routine inspections, maintenance and minor repairs, and by commercial garages which undertake major repairs and large routine checks under the supervision of the ambulance service engineers. The extension of this organisation, in order to effect some reduction in the amount of work being carried out by commercial firms, is dependent upon the provision of more adequate repair facilities. The Council has approved of such facilities being provided at one existing station and at the new Medway Ambulance Station, completed in 1955, and similar provision will be made in new station buildings. As an interim arrangement, approval has been given to the appointment of four additional men to the repair and maintenance staff.

## VEHICLES

Following the introduction in 1953 of two experimental diesel engined sitting case vehicles with seating capacity for eleven patients, additional vehicles of this type were brought into service during 1954.

The advantage of using diesel powered vehicles is that they can be operated more economically than petrol engines, their fuel consumption being roughly half that of petrol engined vehicles carrying fewer passengers. In addition the maintenance costs of these vehicles should be less than those driven by petrol engines.

It is proposed to extend the experiment of using diesel powered vehicles to ambulances for recumbent patients.

## STATION ACCOMMODATION

Many of the ambulance service premises are unsatisfactory both from the point of view of inadequate garage accommodation, which results in heavy expenditure in providing accommodation in private garages and the deterioration of vehicles which have to be left in the open, and because of the inadequacy of office and staff accommodation generally. In addition to the new Medway station at Chatham, completed in 1955, to replace the Rochester station, the Council has approved a policy of improvement to include the provision of eight further new stations as soon as practicable, the extension of one other and either the extension or replacement of another.

## RE-ORGANISATION

Until 31st December, 1953, some of the District Officers acted as officers-in-charge of ambulance stations. All requests for sitting patient transport were sent to them and they dealt with subsequent enquiries and alterations. In order to facilitate administrative procedures and to effect administrative

economies, on 1st January, 1954, all operational and administrative work, including that in connexion with the Hospital Car Service, was centred in the ambulance stations. As from that date the Group Ambulance Officers assumed complete control of the ambulance stations within their areas and the District Officers ceased to have any operational responsibilities, but in certain cases they have continued to be responsible for the payment of wages.

#### SURVEY OF SERVICE BY MINISTRY OF HEALTH

In March, 1954, the Minister of Health in Circular 7/54, informed local health authorities that in view of the rising cost of the ambulance service a limited series of local surveys would be conducted by the Ministry covering both the local health authorities' organisation of the service and the demands made upon it by hospitals. The County Council intimated to the Minister that it would welcome such a survey of its ambulance organisation and it was expected that the Ministry's officers would conduct this survey during 1955. The Ministry, however, has intimated that it is not possible to include Kent in these surveys in the time available. The circular also requested local health authorities to review their arrangements in light of Circular 30/51 which contained suggestions for restricting calls on the service and emphasised the need for the fullest co-operation between ambulance and hospital authorities. The circular also contained various other suggestions for consideration by local health authorities. No further action was, however, necessary in regard to the circular since all its suggestions were already practised.

#### SURVEY OF SERVICE BY MEMBERS

In accordance with a decision of the County Council, a Group of Members examined in detail the organisation of and expenditure on the ambulance service and subsequently reported to the Health Committee and the County Council that the service was being economically administered, that substantial economies had been made as opportunities had occurred and that the Council was receiving full value for the expenditure it incurred. The only suggestions the Members had to make were:—

- (a) that there should be an extension of the Council's repair and maintenance service for ambulance vehicles with a view to some reduction in the amount of work being carried out by commercial firms;
- (b) that petrol pumps should be installed wherever possible at existing ambulance stations and provision should be made to include a petrol pump in the specification of any new ambulance stations which may be erected, provided, however, that arrangements are made whenever possible for all pumps to be made available for use by all county services.

The repair and maintenance organisation has already been dealt with in this report. As regards petrol pumps, these are already installed at four ambulance stations and arrangements have been made for such a provision at the three other stations which are not scheduled for early replacement and which cannot obtain petrol from existing County Council pumps. New stations will be equipped with petrol pumps.

#### STATISTICS

The following table shows the decrease effected in the number of miles per patient as a cumulative result of measures introduced to promote economy in the ambulance service:—

<i>Period</i>	<i>Patients</i>	<i>Mileage</i>	<i>Miles per Patient</i>
5.7.48—31.12.48 .. ..	82,692	1,299,241	15.71
Year ended 31.12.49 ..	283,691	3,794,193	13.37
" " 31.12.50 ..	336,335	3,884,792	11.55
" " 31.12.51 ..	436,233	3,894,912	8.93
" " 31.12.52 ..	520,675	3,899,458	7.49
" " 31.12.53 ..	572,108	3,972,118	6.94
" " 31.12.54 ..	614,505	4,022,462	6.54

(NOTE.—In April, 1951, the Minister of Health introduced a new system of national records, which necessitated a different basis for compiling the number of patients carried. The figures for the last four years are not comparable, therefore, figure for figure, with previous years, but nevertheless they do indicate by the reduction in the "miles per patient" average the greater efficiency which has been effected.)

The following statement shows the vehicle position at the end of 1954:—

	<i>Ambulances for recumbent patients</i>	<i>Ambulances for sitting patients</i>
Vehicles operated by the Council .. ..	135	85
County vehicles loaned to Voluntary Associations ..	8	5
Vehicles owned and operated by Voluntary Associations	3	1
	<hr/> 146	<hr/> 91

## OPERATIONAL STATISTICS

<i>Ambulance Service Vehicles</i>		1954	1953
Total mileage .. .. .		3,816,522	3,627,162
Number of journeys .. .. .		143,297	148,600
.. .. patients carried .. .		601,803	547,836
.. .. emergency cases .. .		14,721	14,461
<i>Hospital Car Service</i>			
Total mileage .. .. .		205,940	344,956
Number of journeys .. .. .		4,629	7,817
.. .. patients carried .. .		12,702	24,272

## MENTAL HEALTH

The Health Committee through its Health Services Sub-Committee exercises responsibility for mental health matters centrally, whilst seven Area Sub-Committees are responsible for detailed organisation. The Health Services Sub-Committee and the Area Sub-Committees meet four times a year.

The staff employed in the Mental Health Service comprises a Senior Assistant County Medical Officer who is responsible to the County Medical Officer for duties in connexion with mental health services, principally in connexion with mental deficiency. This Officer receives part-time assistance from two whole-time Medical Officers and part-time assistance on a sessional basis from a qualified practitioner, whilst certain of the whole-time Officers of the Regional Hospital Board are available for consultation. In addition there are forty-three duly authorised officers working from twenty-one District Offices and two Officers on the central staff who are also appointed duly authorised officers. These officers also undertake social welfare duties whilst one Mental Health Officer and nine Assistant Mental Health Officers discharge duties in connexion with mental deficiency. There are no special qualifications as certified by examination for duly authorised officers. The District Officers have had experience in the former Public Assistance Department where the majority of them held the office of Relieving Officer for which office they qualified by examination of the Poor Law Officers Examination Board in a mental health section.

No defined arrangements exist for the joint use of officers of the Regional Hospital Board and Hospital Management Committees in the supervision of patients discharged on trial from Mental Hospitals or on licence from Institutions for Mental Defectives. Such duties are normally discharged by officers of the Regional Board but the Council's officers assist with such visitation when requested. Harmonious relations with the officers of the Regional Hospital Board continue. No duties are delegated to Voluntary Associations, apart from the supervision of a small number of patients under the care of the Guardianship Society, Brighton.

A close working arrangement is established between the Psychiatric Social Workers of the Mental Hospitals and the Council's officers in connexion with after-care duties. Arrangements whereby patients are examined in their own homes where appropriate are made with Mental Health Specialists and patients are visited for after-care by the Council's Officers if so referred by the Mental Hospitals.

The District Officers are appointed duly authorised officers under the Lunacy and Mental Treatment Act, and are assisted by Assistant District Officers who are authorised to act in relief and emergency. The number of patients dealt with under these Acts during the year was 1,642.

The ascertainment and supervision of mental defectives is carried out by the Assistant Mental Health Officers. The number of new cases reported annually averages about 400, whilst approximately 2,000 defectives are under some form of supervision. There are 83 defectives under guardianship, those under sixteen years of age receiving financial assistance from the Council, whilst those over sixteen receive grants from the National Assistance Board. During the year, the medical staff carried out some 500 examinations of defectives, mainly for the purpose of ascertainment, certification and in connexion with applications for discharge from detention orders.

The Council now have eight Occupation Centres, situated at Cliftonville, Crayford, Folkestone, Gillingham, Gravesend, Maidstone, Orpington and Tunbridge Wells. Whilst no new Centres have been opened during the year, it has been found possible to improve the accommodation in three Centres by transferring them to more suitable premises, in buildings which formerly housed day nurseries.

The Centres involved are as follows:—

<i>Old Centre</i>	<i>Date of Transfer</i>	<i>New Address</i>	<i>Places Provided</i>
Erith	January	"Shenstone", Old Road, Crayford	80
Bromley	November	Scads Hill House, Chislehurst Road, Orpington	80
Barming (Maidstone)	September	Armstrong Hall, South Park, Maidstone	45

These moves have resulted in larger and greatly improved accommodation being available and the waiting lists for Occupation Centre training, in the areas concerned, have been reduced considerably.

The numbers attending the Cliftonville Centre have been increased by an extension of the transport route to include defectives from Deal and Sandwich. It is interesting to note that, with this new route

in operation, Occupation Centre training is now available to any defective residing in the coastal area of the County between the towns of Whitstable and Hythe.

The total number of defectives receiving training continues to increase and there are now 318 defectives at the Occupation Centres. A further 150 are provided for by the Home Teaching Scheme, including those attending the three classes which are operated where the numbers of defectives in a small area are sufficient to warrant a class but insufficient to warrant the opening of a new Occupation Centre.

Owing to the increase in numbers receiving training, it has been necessary to increase the staff and there are now at the Occupation Centres eight Supervisors, four of whom are qualified, eleven Assistant Supervisors, one of whom is qualified, and ten student-assistants. There are eight Home Teachers.

During the year six members of the Occupation Centre staffs were sent to a one-day refresher course at the Fountain Hospital, Tooting, and many others attended in a voluntary capacity. One Supervisor and one Assistant Supervisor continued to attend the two-year "In-Service" course run by the National Association for Mental Health, which ends in July, 1955.

The constant demand for institutional care, coupled with the shortage of staffed accommodation in mental deficiency institutions is a matter presenting serious difficulties and in spite of the efforts of the Regional Hospital Board to provide residential accommodation, the waiting list for institutional care continues to show a steady increase. The situation has been eased, however, in some of the more urgent cases by the provision of temporary care, and 50 defectives received this type of care during the year.

### RESIDENTIAL SERVICES

#### RESIDENTIAL ACCOMMODATION FOR ELDERLY AND DISABLED PERSONS

During 1954 two new Homes became available, namely, The Old Rectory, Smarden (30 places), and Durham House, Beckenham (38 places). The latter Home was formally opened by the Parliamentary Secretary to the Ministry of Health on 30th July. In addition, the adapted former casual wards at Hartley House, Cranbrook, were brought into use for 22 infirm residents needing ground floor accommodation, and the number of places at the Medway Homes was increased by 24 as a result of internal re-arrangement and the use of unrequired resident staff accommodation. Thus, altogether 114 additional places were provided, bringing the total in Homes provided directly by the County Council to 1,088. That increase, however, was insufficient to stabilize the waiting list because the number of persons waiting for accommodation rose from 368 to 444 during the year.

There are ten schemes for which the County Council has approved a total expenditure of £230,000 for purchase of buildings and building works to provide in all 315 additional places. Of these schemes, four are enlargements of existing Homes and one is in a building used temporarily by the Regional Hospital Board. However, only about 130 of these additional places are likely to be available in 1955, plus 23 beds at Bensted House, Faversham, as a result of the final stage in the improvements scheme there. Thus it will be seen that there is little prospect of reducing the waiting list.

The current rate of expansion has not been restricted so much on economic grounds as by the non-existence of suitable and available houses for adaptation and of sites for new buildings. With over 40 per cent. of the waiting list in the part of the county adjacent to London, from Dartford to Beckenham, it is reasonable that such economic resources as can be made available for the provision of more Homes should be utilised to the benefit of that population. Yet that is precisely where the greatest difficulty has been experienced in finding, not only suitable large houses, but even building sites.

Homes provided directly by the County Council and residential accommodation at Hospitals are:—

	<i>Homes</i>		<i>At Hospitals</i>		<i>Total</i>
AREA 1 (Pop. approx. 200,700)	Woodside, Dover	.. .. 19	St. Mary's, Etchinghill	.. 115	
	Leahurst, Dover	.. .. 20	West View, Tenterden	.. 48	
	Cairn Ryan, Dover	.. .. 25			
	General's Meadow, Walmer	.. .. 38			
	Old Rectory, Smarden	.. .. 30			
		132		163	295
AREA 2 (Pop. approx. 176,900)	Eastry House, Eastry	.. .. 28	The Close, Bridge (K.C.C.)	54	
	Brendon, Margate	.. .. 26	Hill House, Minster	.. 76	
	Radley, Tankerton	.. .. 30	Eastry Hospital	.. 45	
		84		175	259
AREA 3 (Pop. approx. 141,800)	East Hall, Maidstone	.. .. 18	Linton Hospital	.. .. 82	
	Hartley House, Cranbrook	.. .. 113			
		131		82	213

	<i>Homes</i>		<i>At Hospitals</i>		<i>Total</i>
AREA 4 (Pop. approx. 140,450)	Pembury Grange, Tunbridge Wells .. .. .	37	Sundridge Hospital .. . . .	2	
	Sandhurst, Tunbridge Wells ..	30			
	Court Royal, Tunbridge Wells	29			
	Oakhurst, Hildenborough ..	24			
	Kippington House, Sevenoaks	37			
		157		2	159
AREA 5 (Pop. approx. 342,400)	Blackburn, Sheerness .. ..	37	Bensted House, Faversham (K.C.C.) .. .. .	61	
	Medway Homes, Rochester ..	161	Milton Regis .. .. .	77	
			All Saints, Chatham ..	17	
			St. James', Gravesend ..	80	
		198		235	433
AREA 6 (Pop. approx. 250,600)	St. Mary's, Bexley .. ..	18	West Hill, Dartford .. ..	75	
	The Mount, near Dartford ..	32			
	Manor Gate, near Dartford ..	29			
	Darenth Grange, Dartford ..	58			
	Old Downs, Hartley .. ..	39			
		176		75	251
AREA 7 (Pop. approx. 317,750)	Lubbock House, Orpington ..	20	Orpington .. .. .	60	
	Elmbank, Bromley .. ..	37			
	Durham House, Beckenham ..	38			
	Selwood, Chislehurst .. ..	38			
		133		60	193
					1,803

These 1,803 places are for 1,060 women and 743 men, but the proportion in the Homes is 738 women and 273 men.

Of the Homes having less than 30 places, extensions are approved to bring the accommodation to about 40 at East Hall, St. Mary's and Lubbock House, while Woodside, Leahurst and Cairn Ryan are grouped. Small increases have been effected by re-arrangements at Eastry House and Court Royal. The overall ratio of beds in Homes is now 6:14:1 on ground, first and second floors respectively. Persons requiring ground floor sleeping accommodation have to wait longer than others and this position will become worse as residents already in Homes become more infirm.

The numbers of places in Homes and in residential accommodation at Hospitals, related to each 10,000 of population, and the proportion of the waiting list, in each Area are:—

<i>Area</i>	<i>Places</i>	<i>Waiting List</i>	<i>Area</i>	<i>Places</i>	<i>Waiting List</i>
1	15 per 10,000	8 %	5	13 per 10,000	14 %
2	14½ .. ..	14½ ..	6	10 .. ..	14½ ..
3	15 .. ..	10½ ..	7	6 .. ..	26½ ..
4	11½ .. ..	8 ..			

(The remaining 4% of the waiting list is of Kent persons temporarily out of the County.)

Altogether in December, 1954, 2,364 elderly or disabled persons were provided with residential accommodation at the expense of the Council, 935 in County Council Homes, 426 in Voluntary Organisation Homes for old people, and 239 in special Homes such as Blind Homes and Epileptic Colonies run by Voluntary Organisations, together with 764 in joint-user establishments. The total cost in 1953/54 of National Assistance Act services (including £21,983 for Welfare services to the blind, etc.) was £611,874 gross expenditure, less £198,012 collected from residents, staff meals, rents, etc., and £4,110 Exchequer Contribution in new Homes—that is, a net charge of £409,752 to the rates. That was equivalent to a rate in the pound of 7·9d.

The overall gross cost of maintenance of a person in an Old People's Home run by the County Council is approximately £4 11s. 0d. inclusive of loan charges; staffing costs account for approximately £2 6s. 6d. These figures are, of course, an average of the individual costs at all Homes.



As part of the efforts to reduce maintenance costs the Health Committee has agreed that surplus land at the following Homes should be disposed of:—

Woodside, Dover	Kippington House, Sevenoaks
General's Meadow, Walmer	Medway Homes, Rochester
Hartley House, Cranbrook	Darenth Grange, near Dartford
Pembury Grange, Tunbridge Wells	Elmbank, Bromley
Sandhurst, Tunbridge Wells	Durham House, Beckenham
Court Royal, Tunbridge Wells	

The Committee appointed a special group of Members to examine the whole of the expenditure and they considered reports containing a great deal of information on the organisation of the services provided and in the result the Committee was able to inform the County Council in May that it was satisfied the services were being economically administered, that substantial economies had already been made as opportunities occurred and that the County Council was receiving full value for the expenditure it incurs. Copies of these special reports were made available to the Members of the County Council.

The joint-user establishments, which provide under one administration, accommodation both for the sick and non-sick, continue to serve a useful purpose. The advantage is that those persons whose condition is such that they alternate between the responsibility of the Regional Hospital Board and County Council can receive all the care and attention they need without having to be moved away from the establishment. This arrangement also has administrative and economic advantages in that the persons receive hospital medical and nursing care only when it is genuinely needed and in periods of improved health vacate a hospital bed. Very often it also gives the answer to the problem of securing the removal from hospital of persons admitted direct to hospital who, after a period of regular nursing care, proper feeding and rest, are restored to a state of health in which they should leave hospital provided they can be properly cared for thereafter. It is very rare for there to be any accumulation of persons in hospital wards unnecessarily, or in residential accommodation awaiting admission to hospital, at joint-user establishments. That certainly cannot be said of hospitals without residential accommodation attached or of the separate Old People's Homes. In my Report for 1951 I expressed the opinion that the joint-user establishment should remain as an essential feature of administration and the hope that as time passes it would come to be regarded as something much more than the original idea of a temporary arrangement to end when the hospital authorities and the local authorities were able each to provide their own separate units of accommodation. In the past three years nothing has happened to cause any need to modify this view—in fact experience in that period of time has strengthened it. While long-stay annexes at Mental and chronic sick Hospitals will do much to facilitate the concentration of skilled nursing services to those patients most likely to benefit from it, there must always be a large body of elderly persons who are neither sick nor well all the time. If, even with generous financial resources, one set out to formulate a solution to the problem of the needs of such persons it seems that, in the result, the joint-user establishment would feature considerably in the possibilities available. Whilst all the residential accommodation at joint-user establishments is not yet up to the standard desirable, marked progress has been made at several of them in such directions as reduced numbers of beds, structural improvements and better furnishings. Another way of dealing with the problem is the provision of the so-called "half-way house", well away from, but run in close conjunction with, a hospital because such an arrangement has the advantage of removing aged persons likely to improve slowly and over a long period of time away from a hospital atmosphere, but practical experience shows that such a situation is never reached by many patients.

The problem of chronic sick persons being in Homes, without prospect of admission to Hospital, while at the same time there are persons fit to leave Hospital, has been the subject of several discussions with the Regional Hospital Board staff and satisfactory relations have been established between the Council's senior medical officers and the Board's physicians. In a large county there are unavoidable complications, if old people are to be treated in a kindly manner, because of the distances involved. For instance the offer of a place in a Home in Tunbridge Wells is not a good solution to the need to send someone out of hospital in Thanet. Wherever it is reasonable to do so, exchanges are effected, in fact it is only infrequently that a hospital bed is obtained for a sick person in a Home without a bed being made available for someone already in Hospital. The need to relieve hospitals of accommodating persons no longer in need of hospital nursing is fully appreciated and to this end, wherever additional accommodation becomes available in Homes, a proportion of the places is reserved for such cases. For example, of the 38 places at Durham House, Beckenham, opened in July, 1954, 12 went to persons from Hospital, including the halfway Home "Fallowfield", Chislehurst. There can, however, be no real solution to the problem until additional accommodation for the chronic sick is provided.

The needs of elderly persons who, while not quite so frail as those mentioned in regard to joint-user establishments are, nevertheless, not well enough to be cared for adequately in the small Homes, is an important matter. The National Assistance Act envisaged that there would be a requirement for residential accommodation for special classes and Hartley House, Cranbrook, was a provision to this end. The inherent structural features of this old workhouse placed severe restrictions on its utilisation for modern requirements but, for most practical purposes, the basic principles upon which the accommodation was arranged in re-opening have stood up to severe tests in practice. This refers particularly to such features as the division of the accommodation into nine self-contained units and their layout on one floor level. Ideally more of the accommodation should be on the ground floor, but the necessity to use stairs has been eliminated as far as practicable and the separate units permit of a good degree of classification of residents according to their physical and personal needs. Had

the premises retained their original communal layout they would certainly not have been capable of meeting the needs of the present occupants. The adaptation of the former casual wards subsequent to the original adaptation scheme has been most successful. To some extent the same objective is being attained, but in a different way because of the nature of the buildings, at the Medway Homes.

The Old Peoples Homes run by Voluntary Organisations continue to provide a useful supplement to the County Council's own provision, but usually it is only the case not requiring a great degree of care and attention who can be accommodated therein. Altogether over 400 persons at such Homes are paid for out of County Council funds. There are in addition many more who, while within the County Council's ambit, prefer to make their own arrangements and the same applies to the 70 privately run registered Homes in Kent where the Council has no power to pay.

Encouragement with financial aid where justified, of Voluntary Organisations has continued. Apart from maintenance payments in respect of over 600 persons in Homes amounting to £88,874 (net) in 1953/54, grants have included ones to the Kent Council of Social Service and the North West Kent Council of Social Service for providing advisory and co-ordinating services for the development of old people's welfare, and voluntary organisations providing home meals services and clubs.

Notwithstanding the large waiting list of persons needing to be in Homes, of whom 40 per cent. are over 80 years of age, it is gratifying to note that the statutory powers contained in the Act for the compulsory admission to, and detention in, a Home, by a Magistrates' Order, does not have to be resorted to very frequently. In fact during 1954 only 2 such cases occurred.

#### TEMPORARY ACCOMMODATION FOR HOMELESS FAMILIES

In my last Report I stated that the provision and administration of temporary accommodation in Kent was no longer a real problem and that position continues. Only those who were concerned with the situation before 1952 when, because four-fifths of the temporary accommodation for 57 families was occupied by families who regarded it as permanent housing, only one application in eight could be met, can fully appreciate the significance of the change which resulted from the new policy adopted by the County Council in February of that year. Since May, 1952 not one genuine application for temporary accommodation has been refused. The accommodation was never full in 1954, the highest number of families being 30 in August and the lowest 18 in December. The position was so much improved that it was possible to surrender the temporary accommodation at Hill House Hospital, Thanet, to the Thanet Hospital Management Committee.

The welfare activities of the staff at the two remaining Hostels continue and much good work is done with the families provided with temporary accommodation. This seems to be appreciated by them because many keep in touch with the staff by correspondence, and even visits, after they have left. All reasonable steps are taken to ensure that the improvements in the conduct of problem families while in the Hostels is not lost afterwards and the Social Worker watches their progress either by personal visits, or through some local officer, according to individual circumstances. An indication of the success of this welfare work is given by the fact that in 1954 only 2 families had to be re-admitted to temporary accommodation after they had spent a full three months there, in one or more periods, during the year. A survey was undertaken covering the 107 families, with 257 children, accommodated in the year ended May, 1954. This disclosed that only 40 of these children were taken into care by the Children's Committee when their parents left temporary accommodation after the full three months. Forty-one per cent. of families left during the first month, and 22 per cent. during the second month. Only 29 per cent. stayed for the permitted term of three months. The survey also showed that the 107 families went to the following types of accommodation:—

	<i>Percentage</i>
To furnished rooms .. .. .	39
To relatives .. .. .	20
To Local Authority housing .. .. .	9
To caravans and huts .. .. .	9
No information available .. .. .	8
Woman returned home after reconciliation with husband .. .. .	6
To resident domestic employment .. .. .	4
To unfurnished rooms .. .. .	3
To mental hospital .. .. .	1
To employment with tied cottage .. .. .	1

## STATISTICAL TABLES

TABLE 1

Showing Population, Acreage and Density of Population of the various Districts of the County of Kent, in 1954 (mid-year).

DISTRICT	Mid-year Home* Population 1954 (as estimated by the Registrar-General)	Acreage, inclusive of Water	Persons per Acre
Urban—			
Ashford U. . . . .	25,630	5,657	4.53
Beckenham B. . . . .	75,280	5,937	12.68
Bexley B. . . . .	88,180	4,869	18.11
Broadstairs and St. Peter's U. . . . .	15,700	2,771	5.67
Bromley B. . . . .	64,800	6,513	9.95
Chatham B. . . . .	48,520	4,371	11.10
Chislehurst and Sidcup U. . . . .	85,830	8,959	9.58
Crayford U. . . . .	28,150	2,544	11.07
Dartford B. . . . .	40,410	4,233	9.55
Deal B. . . . .	24,910	2,922	8.52
Dover B. . . . .	34,400	3,765	9.14
Erith B. . . . .	45,950	3,860	11.90
Faversham B. . . . .	12,270	2,994	4.09
Folkestone B. . . . .	43,820	4,006	10.94
Gillingham B. . . . .	79,040	8,351	9.46
Gravesend B. . . . .	45,960	4,014	11.45
Herne Bay U. . . . .	17,900	8,566	2.09
Hythe B. . . . .	9,320	3,013	3.09
Lydd B. . . . .	2,600	11,932	0.22
Maidstone B. . . . .	54,540	6,198	8.80
Margate B. . . . .	42,500	6,960	6.11
New Romney B. . . . .	2,300	1,514	1.52
Northfleet U. . . . .	19,450	3,768	5.16
Orpington U. . . . .	66,380	20,842	3.18
Penge U. . . . .	25,450	770	33.05
Queenborough B. . . . .	3,230	1,103	2.93
Ramsgate B. . . . .	36,150	3,624	9.98
Rochester B. . . . .	45,110	3,744	12.05
Sandwich B. . . . .	4,590	2,137	2.15
Sevenoaks U. . . . .	16,070	3,716	4.32
Sheerness U. . . . .	15,810	943	16.77
Sittingbourne and Milton U. . . . .	21,940	4,935	4.45
Southborough U. . . . .	8,770	1,758	4.99
Swanscombe U. . . . .	8,770	2,142	4.09
Tenterden B. . . . .	4,370	8,946	0.49
Tonbridge U. . . . .	19,930	4,599	4.33
Tunbridge Wells B. . . . .	38,830	6,034	6.44
Whitstable U. . . . .	17,140	7,640	2.24
TOTALS—Urban . . . . .	1,240,000	190,650	6.50
Rural—			
Ashford, East . . . . .	10,490	51,398	0.20
Ashford, West . . . . .	10,140	39,455	0.26
Bridge-Blean . . . . .	19,100	55,868	0.34
Cranbrook . . . . .	15,020	41,315	0.36
Dartford . . . . .	39,110	34,103	1.15
Dover . . . . .	11,770	25,780	0.46
Eastry . . . . .	23,800	54,276	0.44
Elham . . . . .	9,300	36,676	0.25
Hollingbourne . . . . .	16,690	56,796	0.29
Maidstone . . . . .	18,470	34,487	0.54
Malling . . . . .	37,130	45,655	0.81
Romney Marsh . . . . .	4,460	31,035	0.14
Sevenoaks . . . . .	34,110	62,959	0.54
Sheppey . . . . .	9,300	20,319	0.46
Strood . . . . .	21,430	48,811	0.44
Swale . . . . .	20,140	62,015	0.32
Tenterden . . . . .	7,190	38,002	0.19
Tonbridge . . . . .	22,750	41,687	0.55
TOTALS—Rural . . . . .	330,400	780,637	0.42
TOTALS—County . . . . .	1,570,400	971,287	1.62

\* The figures given in this column are the home populations, including members of the armed forces stationed in the area, and these populations form the basis of calculation of most of the rates given in this report.

TABLE 2

Showing Deaths, Births and Infantile Mortality in the different Urban and Rural Districts of the County of Kent in the year 1954.

DISTRICT	DEATHS			BIRTHS					INFANTILE MORTALITY				
	Number of deaths at all ages	Deaths per 1,000 of the population	Comparable Death-rate*	Legitimate	Illegitimate	TOTAL	Births per 1,000 of the population	Comparable Birth-rate*	Still-births	Legitimate	Illegitimate	TOTAL	Deaths of infants under one year of age per 1,000 births
<b>URBAN—</b>													
Ashford U. ..	276	10.77	9.37	371	20	391	15.26	15.72	7	12	—	12	30.69
Beckenham B. ..	828	11.00	9.68	872	19	891	11.84	12.67	11	20	1	21	23.57
Bexley B. ..	716	8.12	9.26	1,007	35	1,042	11.82	12.17	14	23	—	23	22.07
Broadstairs and St. Peter's U. ..	225	14.33	9.31	169	13	182	11.59	14.02	8	8	1	9	49.45
Bromley B. ..	727	11.22	9.76	784	40	824	12.72	12.97	12	16	1	17	20.63
Chatham B. ..	498	10.26	10.36	767	49	816	16.82	16.32	19	14	3	17	20.83
Chislehurst and Sidcup U. ..	678	7.90	9.64	1,276	41	1,317	15.34	14.88	30	24	—	24	18.22
Crayford U. ..	227	8.06	9.67	378	16	394	14.00	13.30	5	4	—	4	10.15
Dartford B. ..	493	12.20	11.96	553	26	579	14.33	13.76	15	9	1	10	17.27
Deal B. ..	281	11.28	10.26	373	19	392	15.74	16.68	7	15	—	15	38.27
Dover B. ..	345	10.03	9.23	547	33	580	16.86	16.86	10	10	2	12	20.69
Erith B. ..	455	9.90	10.79	602	19	621	13.51	13.51	19	12	—	12	19.32
Faversham B. ..	220	17.93	12.73	194	4	198	16.14	16.95	3	3	—	3	15.15
Folkestone B. ..	512	11.68	9.34	574	41	615	14.03	14.87	7	9	1	10	16.26
Gillingham B. ..	661	8.36	8.36	1,063	40	1,103	13.95	14.79	23	28	3	31	28.11
Gravesend B. ..	416	9.05	9.50	740	28	768	16.71	16.21	14	21	2	23	29.95
Herne Bay U. ..	306	17.09	9.74	193	21	214	11.96	15.19	3	4	2	6	28.04
Hythe B. ..	126	13.52	8.92	105	3	108	11.59	14.14	2	1	—	1	9.26
Lydd B. ..	19	7.31	7.38	40	2	42	16.15	17.93	2	—	—	—	—
Maidstone B. ..	658	12.06	11.58	741	41	782	14.34	14.48	20	18	—	18	23.02
Margate B. ..	572	13.46	10.10	609	69	678	15.95	17.39	12	20	1	21	30.97
New Romney B. ..	30	13.04	10.82	27	1	28	12.17	12.66	—	2	—	2	71.43
Northfleet U. ..	199	10.23	10.95	306	9	315	16.20	15.71	10	7	1	8	25.40
Orpington U. ..	516	7.77	7.77	1,026	21	1,047	15.77	16.24	32	14	1	15	14.33
Penge U. ..	264	10.37	9.64	459	26	485	19.06	17.15	16	13	—	13	26.80
Queenborough B. ..	29	8.98	9.25	52	3	55	23.22	23.92	2	2	—	2	36.36
Ramsgate B. ..	412	11.40	9.35	494	61	555	15.35	16.42	12	16	2	18	32.43
Rochester B. ..	422	9.35	9.72	713	30	743	16.47	16.14	20	15	—	15	20.19
Sandwich B. ..	40	8.71	7.23	76	2	78	16.99	19.71	2	1	—	1	12.82
Sevenoaks U. ..	180	11.20	8.85	182	4	186	11.57	12.26	1	3	—	3	16.13
Sheerness U. ..	186	11.76	11.52	258	17	275	17.39	18.96	2	8	1	9	32.73
Sittingbourne and Milton U. ..	318	14.49	13.19	298	18	316	14.40	14.83	7	4	—	4	12.66
Southborough U. ..	126	14.37	10.63	107	2	109	12.43	14.29	2	3	—	3	27.52
Swanscombe U. ..	79	9.01	10.18	122	6	128	14.60	13.58	2	5	—	5	39.06
Tenterden B. ..	89	20.37	13.44	57	6	63	14.42	15.86	3	—	—	—	—
Tonbridge U. ..	225	11.29	9.48	305	6	311	15.60	16.22	7	5	—	5	16.08
Tunbridge Wells B. ..	587	15.12	9.53	469	21	490	12.62	13.88	4	9	1	10	20.41
Whitstable U. ..	287	16.74	9.88	206	8	214	12.49	15.99	4	8	1	9	42.06
<b>TOTALS IN URBAN DISTRICTS</b>	<b>13,228</b>	<b>10.67</b>	<b>9.82</b>	<b>17,115</b>	<b>820</b>	<b>17,935</b>	<b>14.46</b>	<b>14.89</b>	<b>369</b>	<b>386</b>	<b>25</b>	<b>411</b>	<b>22.92</b>
<b>RURAL—</b>													
Ashford, East ..	97	9.25	7.12	145	5	150	14.30	16.02	4	3	—	3	20.00
Ashford, West ..	234	23.08	17.54	130	10	140	13.81	14.64	6	2	—	2	14.29
Bridge-Blean ..	336	17.59	13.19	229	16	245	12.83	15.14	5	4	—	4	16.33
Cranbrook ..	162	10.79	8.96	176	22	198	13.18	13.71	2	3	—	3	15.15
Dartford ..	416	10.64	10.53	566	20	586	14.98	14.98	9	11	1	12	20.48
Dover ..	138	11.72	9.49	162	7	169	14.36	16.80	4	1	—	1	5.92
Eastry ..	317	13.32	12.65	359	14	373	15.67	18.49	9	8	—	8	21.45
Elham ..	189	20.32	13.41	121	8	129	13.87	14.84	2	4	—	4	31.01
Hollingbourne ..	165	9.89	8.70	237	16	253	15.16	15.92	6	7	—	7	27.67
Maidstone ..	342	18.52	14.45	271	12	283	15.32	16.24	5	11	—	11	38.87
Malling ..	371	9.99	9.79	566	30	596	16.05	16.53	13	13	—	13	21.81
Romney Marsh ..	46	10.31	8.76	54	3	57	12.78	14.82	1	1	—	1	17.54
Sevenoaks ..	411	12.05	10.48	487	20	507	14.86	16.05	10	6	—	6	11.83
Sheppey ..	106	11.40	10.26	123	10	133	14.30	16.30	5	—	2	2	15.04
Strood ..	177	8.26	7.85	340	12	352	16.43	16.92	10	9	—	9	25.57
Swale ..	208	10.33	9.40	320	11	331	16.43	17.09	6	5	1	6	18.13
Tenterden ..	82	11.40	9.35	108	8	116	16.13	17.58	3	5	—	5	43.10
Tonbridge ..	256	11.25	9.79	308	18	326	14.33	14.19	5	6	2	8	24.54
<b>TOTALS IN RURAL DISTRICTS</b>	<b>4,053</b>	<b>12.27</b>	<b>10.67</b>	<b>4,702</b>	<b>242</b>	<b>4,944</b>	<b>14.96</b>	<b>15.86</b>	<b>105</b>	<b>99</b>	<b>6</b>	<b>105</b>	<b>21.24</b>
<b>TOTALS IN URBAN DISTRICTS</b>	<b>13,228</b>	<b>10.67</b>	<b>9.82</b>	<b>17,115</b>	<b>820</b>	<b>17,935</b>	<b>14.46</b>	<b>14.89</b>	<b>369</b>	<b>386</b>	<b>25</b>	<b>411</b>	<b>22.92</b>
<b>TOTALS IN COUNTY</b>	<b>17,281</b>	<b>11.00</b>	<b>10.01</b>	<b>21,817</b>	<b>1,062</b>	<b>22,879</b>	<b>14.57</b>	<b>15.15</b>	<b>474</b>	<b>485</b>	<b>31</b>	<b>516</b>	<b>22.55</b>

\* Comparable rates are calculated in respect of each district, by applying to the crude-rate a factor which enables true comparison to be made with other areas after allowing for variations of age and sex in the constitution of the population.

TABLE 3

Showing the Number of Cases of Infectious Disease among the Civil Population, notified in each of the DISTRICTS in the County of Kent during the year 1954.

DISTRICT	Small-pox	Diphtheria (including Membranous Group)	Erysipelas	Scarlet Fever	Enteric Fever	Puerperal Pyrexia	Acute Poliomyelitis including Acute Poli-encephalitis		Acute Encephalitis		Meningococcal Infection	Ophthalmia Neonatorum	Respiratory Tuberculosis	Other forms of Tuberculosis	Acute Pneumonia (Primary or Influenzal)	Measles	Whooping Cough	Dysentery	Chicken-pox	Malaria
							Paralytic	Non-Paralytic	Infective	Post-Infectious										
<b>URBAN—</b>																				
Ashford U. . . . .	—	—	5	14	—	13	3	1	—	—	1	—	22	2	2	1	135	1	—	—
Beckenham B. . . . .	—	—	8	74	3	14	1	1	—	2	1	—	60	4	16	127	83	45	—	—
Bexley B. . . . .	—	—	22	123	—	9	2	1	—	—	—	—	81	8	32	45	230	3	—	—
Broadstairs U. . . . .	—	—	—	36	—	—	—	—	—	—	—	—	4	—	16	15	28	—	352	—
Bromley B. . . . .	—	—	7	60	—	41	3	—	—	—	1	—	41	5	31	209	251	11	—	—
Chatham B. . . . .	—	—	4	51	—	68	1	—	—	—	1	1	63	8	22	13	174	152	—	—
Chislehurst and Sidcup U. . . . .	1	6	96	1	3	—	—	—	—	1	1	3	77	7	62	229	223	29	—	—
Crayford U. . . . .	—	2	19	—	11	2	1	—	—	—	1	—	36	3	19	8	238	—	—	—
Dartford B. . . . .	—	3	44	1	8	3	1	—	—	—	—	—	60	6	32	2	89	9	—	1
Deal B. . . . .	—	1	26	—	—	—	1	—	—	—	—	—	19	2	5	6	60	—	—	—
Dover B. . . . .	—	1	44	—	8	2	2	1	1	2	1	—	50	10	33	6	178	7	—	—
Erith B. . . . .	—	3	37	—	—	—	—	1	—	—	—	—	63	4	21	4	293	1	—	—
Faversham B. . . . .	—	—	2	—	—	1	—	—	—	—	—	—	6	—	9	4	107	7	—	—
Folkestone B. . . . .	—	18	26	—	7	—	—	—	—	—	—	—	27	4	60	7	105	3	—	—
Gillingham B. . . . .	—	9	55	—	4	1	—	—	—	—	—	5	62	9	25	11	161	25	—	—
Gravesend B. . . . .	—	12	38	1	1	1	2	—	—	2	3	—	56	6	14	11	184	1	—	—
Herne Bay U. . . . .	—	—	5	—	—	—	—	—	—	—	—	—	5	1	3	4	65	—	144	—
Hythe B. . . . .	—	—	9	1	—	—	—	—	—	—	—	—	8	—	4	4	23	3	—	—
Lydd B. . . . .	—	—	—	—	1	—	—	—	—	—	—	—	3	—	12	—	50	—	—	—
Maidstone B. . . . .	—	3	21	—	2	—	—	—	—	—	—	—	56	4	36	5	240	2	139	—
Margate B. . . . .	—	—	48	—	4	2	2	—	—	3	1	31	5	6	31	19	40	—	—	—
New Romney B. . . . .	—	2	1	—	—	—	—	—	—	—	—	—	—	5	1	55	—	—	—	—
Northfleet U. . . . .	—	2	22	—	—	—	—	—	—	—	—	—	19	1	6	2	91	—	—	—
Orpington U. . . . .	—	5	111	2	93	1	1	1	1	1	1	1	44	2	56	515	316	7	—	1
Penge U. . . . .	—	6	79	—	1	—	1	—	—	—	1	1	45	4	11	11	46	269	—	—
Queenborough B. . . . .	—	—	1	1	—	—	—	—	—	—	—	—	2	—	2	2	51	—	—	—
Ramsgate B. . . . .	—	—	48	—	5	—	2	—	—	—	1	2	22	3	16	33	47	1	—	—
Rochester B. . . . .	—	6	26	1	1	—	—	—	—	—	1	—	30	5	37	11	151	27	—	—
Sandwich B. . . . .	—	—	1	—	—	—	—	—	—	—	—	—	6	—	2	—	56	—	—	—
Sevenoaks U. . . . .	—	—	30	—	—	—	—	—	—	—	—	—	9	2	—	1	24	1	—	—
Sheerness U. . . . .	—	2	6	—	1	—	—	—	—	—	—	—	11	2	4	3	107	1	—	—
Sittingbourne U. . . . .	—	5	66	—	1	1	—	—	—	—	—	—	19	3	3	—	168	—	—	—
Southborough U. . . . .	—	—	42	—	1	—	—	—	1	—	—	—	6	2	4	1	80	1	—	—
Swanscombe U. . . . .	—	—	11	—	1	—	1	—	—	—	1	—	12	—	25	4	51	5	—	—
Tenterden B. . . . .	—	—	12	—	—	—	—	—	—	—	—	—	4	—	—	—	24	—	—	—
Tonbridge U. . . . .	—	1	9	—	1	—	—	—	1	—	—	—	16	3	20	5	150	7	—	—
Tunbridge Wells B. . . . .	—	4	54	1	1	—	—	—	1	—	1	1	8	6	11	22	213	27	—	—
Whitstable U. . . . .	—	2	6	—	5	—	—	—	—	—	—	1	9	2	21	2	52	1	1	—
<b>TOTALS IN URBAN DISTRICTS . . . . .</b>	<b>—</b>	<b>1</b>	<b>139</b>	<b>1,353</b>	<b>12</b>	<b>306</b>	<b>24</b>	<b>16</b>	<b>5</b>	<b>7</b>	<b>19</b>	<b>18</b>	<b>1,092</b>	<b>123</b>	<b>681</b>	<b>1,355</b>	<b>4,618</b>	<b>686</b>	<b>636</b>	<b>3</b>
<b>RURAL—</b>																				
Ashford, East . . . . .	—	—	1	11	—	—	2	1	—	—	1	—	5	1	5	1	39	—	—	—
Ashford, West . . . . .	—	—	—	17	—	1	4	—	—	—	—	—	3	—	—	1	26	—	—	—
Bridge-Blean . . . . .	—	—	5	8	—	—	—	1	—	—	1	—	11	4	13	3	41	3	—	—
Cranbrook . . . . .	—	—	10	—	—	—	1	—	—	—	—	—	11	—	9	1	139	16	—	—
Dartford . . . . .	—	2	24	—	1	—	1	—	—	2	—	—	25	5	27	3	171	—	—	—
Dover . . . . .	—	—	6	—	—	—	1	1	1	—	—	—	4	3	4	7	54	—	—	—
Eastry . . . . .	—	2	19	—	2	—	—	—	—	—	—	—	23	3	12	1	85	—	—	—
Elham . . . . .	—	—	1	—	—	—	—	—	—	—	—	—	3	1	—	1	114	—	—	—
Hollingbourne . . . . .	—	—	2	—	—	—	2	—	—	—	—	—	8	2	3	1	13	10	—	—
Maidstone . . . . .	—	6	32	—	2	2	—	—	1	—	—	—	3	1	16	11	230	3	6	1
Malling . . . . .	—	2	15	—	3	1	3	—	—	—	—	—	19	3	12	5	277	20	—	1
Romney Marsh . . . . .	—	—	4	—	—	—	—	—	—	—	—	—	1	—	8	4	54	—	—	—
Sevenoaks . . . . .	—	10	55	3	—	—	—	—	—	—	—	—	15	2	100	34	123	120	—	—
Sheppey . . . . .	—	—	5	5	—	13	—	—	—	1	2	—	5	—	10	6	115	—	—	—
Strood . . . . .	—	2	4	—	2	—	—	—	—	—	—	—	23	9	8	3	70	3	—	1
Swale . . . . .	—	1	41	1	1	—	—	—	—	1	—	—	7	5	33	3	151	13	—	—
Tenterden . . . . .	—	—	13	—	—	—	1	—	—	—	—	—	3	3	5	1	92	—	—	—
Tonbridge . . . . .	—	3	44	3	3	2	—	—	—	—	—	—	8	5	12	11	138	57	—	—
<b>TOTALS IN RURAL DISTRICTS . . . . .</b>	<b>—</b>	<b>—</b>	<b>39</b>	<b>311</b>	<b>7</b>	<b>28</b>	<b>16</b>	<b>7</b>	<b>2</b>	<b>—</b>	<b>5</b>	<b>3</b>	<b>177</b>	<b>47</b>	<b>277</b>	<b>97</b>	<b>1,932</b>	<b>245</b>	<b>6</b>	<b>3</b>
<b>TOTALS IN URBAN DISTRICTS . . . . .</b>	<b>—</b>	<b>1</b>	<b>139</b>	<b>1,353</b>	<b>12</b>	<b>306</b>	<b>24</b>	<b>16</b>	<b>5</b>	<b>7</b>	<b>19</b>	<b>18</b>	<b>1,092</b>	<b>123</b>	<b>681</b>	<b>1,355</b>	<b>4,618</b>	<b>686</b>	<b>636</b>	<b>3</b>
<b>TOTALS IN COUNTY . . . . .</b>	<b>—</b>	<b>1</b>	<b>178</b>	<b>1,664</b>	<b>19</b>	<b>334</b>	<b>40</b>	<b>23</b>	<b>7</b>	<b>7</b>	<b>24</b>	<b>21</b>	<b>1,269</b>	<b>170</b>	<b>958</b>	<b>1,452</b>	<b>6,550</b>	<b>931</b>	<b>642</b>	<b>6</b>

TABLE 4

Showing the number of notifications, incidence rates, deaths and death-rates of the principal infectious diseases in the County.

Year	1938	1953	1954	
			Kent	England and Wales (provisional)
<b>SMALL POX</b>				
No. of cases notified ..	4	—	—	—
Incidence rate .. ..	0·004	—	—	—
No. of deaths .. ..	2	—	—	—
Death rate .. ..	0·001	—	—	—
<b>SCARLET FEVER</b>				
No. of cases notified ..	2,913	2,147	1,664	42,393
Incidence rate .. ..	2·102	1·377	1·060	0·953
No. of deaths .. ..	10	—	—	27
Death rate .. ..	0·007	—	—	0·000
<b>DIPHTHERIA</b>				
No. of cases notified ..	1,361	2	1	176
Incidence rate .. ..	0·982	0·001	0·000	0·004
No. of deaths .. ..	58	—	—	9
Death rate .. ..	0·042	—	—	0·000
<b>ENTERIC FEVER</b>				
No. of cases notified ..	54	12	19	116
Incidence rate .. ..	0·039	0·008	0·012	0·003
No. of deaths .. ..	5	—	—	4
Death rate .. ..	0·005	—	—	0·000
<b>MEASLES</b>				
No. of cases notified ..	—*	21,681	1,452	146,970
Incidence rate .. ..	—*	13·908	0·925	3·304
No. of deaths .. ..	10	7	—	50
Death rate .. ..	0·007	0·004	—	0·000
<b>WHOOPING COUGH</b>				
No. of cases notified ..	—*	6,412	6,550	105,901
Incidence rate .. ..	—*	4·113	4·171	2·381
No. of deaths .. ..	10	7	4	139
Death rate .. ..	0·007	0·004	0·003	0·000
<b>POLIOMYELITIS AND POLIOENCEPHALITIS</b>				
No. of cases notified ..	36	207	63	1,955
Incidence rate .. ..	0·026	0·133	0·040	0·044
No. of deaths .. ..	—	17	6	112
Death rate .. ..	—	0·011	0·004	0·000

\* Not compulsorily notifiable.

TABLE 5  
Showing causes of deaths in the URBAN DISTRICTS of Kent during the year 1954.

DISTRICT	Malignant neoplasm				Leukaemia, aenkaemia	Diabetes	Vascular lesions of nervous system	Coronary disease, angina	Hypertension with heart disease	Other heart disease	Other circulatory disease	Influenza	Pneumonia	Bronchitis	Other diseases of respiratory system	Ulcer of stomach and duodenum	Gastritis, enteritis and diarrhoea	Nephritis and nephrosis	Hyperplasia of prostate	Pregnancy, childbirth, abortion	Congenital malformations	Other defined and ill-defined diseases	Motor-vehicle accidents	All other accidents	Suicide	Homicide and operations of war	All causes
	Stomach	Lung, bronchus	Breast	Uterus																							
Ashford U. . . . .	10	8	6	3	29	3	39	35	4	65	11	1	7	17	3	3	1	1	1	—	3	15	3	—	5	1	276
Beckenham B. . . . .	16	42	22	4	100	4	107	140	12	127	42	3	20	31	3	10	2	13	9	—	7	67	11	15	4	828	
Bexley B. . . . .	27	32	13	6	80	10	92	113	26	79	43	2	28	30	8	9	11	9	5	—	5	51	6	4	10	716	
Broadstairs and St. Peter's U. . . . .	5	7	6	2	24	3	36	34	8	36	10	3	3	5	3	3	3	5	2	—	—	19	8	7	—	225	
Bromley B. . . . .	12	28	18	6	65	9	94	125	18	103	41	1	34	28	5	11	3	5	7	—	5	65	5	8	7	727	
Chatham B. . . . .	1	9	18	5	49	1	49	76	11	92	16	1	23	27	6	5	1	3	6	—	8	36	8	8	6	498	
Chislehurst and Sidcup U. . . . .	2	15	36	19	70	5	79	107	22	87	25	1	28	39	6	10	4	5	6	—	8	59	5	9	6	678	
Crayford U. . . . .	8	16	4	3	19	3	30	27	12	34	10	—	16	13	4	3	2	4	4	—	2	13	2	1	6	227	
Dartford B. . . . .	1	11	14	6	45	2	57	81	10	85	26	—	36	16	4	2	1	4	4	—	1	33	6	6	6	463	
Deal B. . . . .	1	8	10	4	21	1	44	30	10	46	20	2	11	18	2	5	1	3	4	—	4	26	3	6	3	281	
Dover B. . . . .	1	8	16	2	34	1	39	47	13	46	19	1	14	12	3	6	3	4	5	—	1	30	4	17	2	345	
Erith B. . . . .	13	13	10	2	52	2	66	69	9	74	26	—	16	29	4	7	3	3	3	—	2	26	3	7	—	455	
Faversham B. . . . .	1	9	4	1	21	1	42	20	3	69	8	1	7	7	2	1	1	3	3	—	1	9	3	3	4	220	
Folkstone B. . . . .	2	13	17	9	41	3	90	76	16	99	14	7	18	9	4	7	3	4	4	—	1	39	4	7	5	512	
Gillingham B. . . . .	2	23	19	11	13	79	5	103	29	103	29	1	20	33	8	11	5	6	5	—	1	58	3	12	8	661	
Grazebrook B. . . . .	2	8	10	1	38	—	70	62	12	72	8	1	10	22	3	10	3	3	3	—	5	40	6	6	6	416	
Herne Bay U. . . . .	6	7	3	—	26	—	54	34	7	71	14	1	14	5	5	2	3	5	2	—	1	34	2	4	—	306	
Hythe B. . . . .	1	3	2	2	18	—	19	20	2	26	2	—	3	2	2	1	—	1	3	—	2	12	—	—	—	126	
Lydd B. . . . .	—	—	—	—	—	—	6	3	—	33	—	—	—	—	—	—	—	—	—	—	—	2	—	—	—	49	
Maidstone B. . . . .	2	16	15	3	51	2	87	90	20	182	22	2	22	16	5	8	3	9	3	—	5	50	4	12	2	668	
Margate B. . . . .	1	11	23	11	43	1	88	67	9	112	31	1	13	37	1	11	2	5	3	—	8	56	4	13	4	572	
New Romney B. . . . .	—	—	—	—	—	—	3	6	—	5	1	1	1	1	1	1	—	—	—	—	—	4	—	—	—	30	
Northfleet U. . . . .	7	7	2	—	14	—	25	22	5	39	3	3	5	20	1	4	1	4	2	—	2	18	1	4	2	199	
Orpington U. . . . .	1	16	25	14	2	51	72	105	8	53	24	1	15	26	3	6	1	9	5	—	6	47	8	2	7	516	
Penge U. . . . .	8	11	4	1	17	—	42	42	7	34	10	—	10	13	5	1	1	3	5	—	1	27	2	3	1	264	
Queenborough B. . . . .	—	—	—	—	—	—	6	3	1	6	—	—	—	—	—	—	—	—	—	—	—	3	—	—	—	29	
Ramsgate B. . . . .	7	11	2	1	39	1	65	59	7	78	20	—	8	27	4	3	1	5	9	—	1	52	1	5	2	412	
Rochester B. . . . .	1	15	10	3	37	3	63	66	6	63	18	1	14	16	4	7	1	3	2	—	2	37	7	14	5	492	
Sandwich B. . . . .	—	—	—	—	—	—	7	5	1	4	2	—	—	—	—	—	—	—	—	—	—	7	—	—	—	40	
Sevenoaks U. . . . .	1	3	5	5	16	2	26	29	1	28	14	—	9	7	3	1	1	1	2	—	1	16	1	6	2	180	
Sheerness U. . . . .	2	8	6	2	25	1	24	20	3	27	8	—	6	6	2	1	2	3	1	—	3	22	1	4	2	186	
Sittingbourne and Milton U. . . . .	7	10	8	3	30	1	91	31	4	70	9	2	4	6	2	3	1	2	4	—	1	16	2	4	3	318	
Southborough U. . . . .	—	—	—	—	—	—	14	20	4	24	10	—	5	4	2	2	—	—	—	—	2	4	—	—	—	126	
Swanscombe U. . . . .	—	—	—	—	—	—	10	15	—	16	4	—	—	—	—	—	—	—	—	—	—	7	—	—	—	79	
Tenterden B. . . . .	1	4	10	6	3	—	8	13	1	44	1	—	—	—	—	—	—	—	—	—	—	6	—	—	—	89	
Tonbridge U. . . . .	1	12	20	8	9	51	122	88	12	105	28	—	15	18	3	6	4	7	3	—	2	11	2	6	2	225	
Tunbridge Wells B. . . . .	—	—	—	—	—	—	43	34	4	69	17	—	4	3	5	3	3	5	3	—	—	23	—	—	—	587	
Whitstable U. . . . .	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	287	
TOTALS IN URBAN DISTRICTS	174	481	261	114	1,294	69	74	1,905	312	2,334	596	34	435	543	115	177	71	127	129	8	111	1,078	108	223	119	9	13,268

TABLE 6  
Showing causes of deaths in the RURAL DISTRICTS of Kent during the year 1954.

DISTRICT	Tuberculosis, respiratory	Tuberculosis, other	Syllitic disease	Diphtheria	Whooping-cough	Meningococcal infections	Acute poliomyelitis	Measles	Other infective and parasitic diseases	Malignant neoplasm					Diabetes	Vascular lesions of nervous system	Coronary disease, angina	Hypertension with heart disease	Other heart disease	Other circulatory disease	Influenza	Pneumonia	Bronchitis	Other diseases of respiratory system	Ulcer of stomach and duodenum	Gastritis, enteritis and diarrhoea	Nephritis and nephrosis	Hyperplasia of prostate	Pregnancy, childbirth, abortion	Congenital malformations	Other defined and ill-defined diseases	Motor-vehicle accidents	All other accidents	Suicide	Homicide and operations of war	All causes				
										Stomach	Lung, bronchus	Breast	Uterus	Other malignant and lymphatic neoplasms																										
Ashford, East	1																																							97
Ashford, West	1																																							234
Bridge-Blean																																								336
Crabbrook																																							162	
Dartford																																								416
Dover	10																																						188	
Ebor	4																																						137	
Elmley	1																																						158	
Elmley	1																																						177	
Elmley	1																																						177	
Elmley	1																																						208	
Elmley	1																																						82	
Elmley	1																																						256	
Elmley	1																																						97	
Elmley	1																																						234	
Elmley	1																																							336
Elmley	1																																						162	
Elmley	1																																						416	
Elmley	1																																						188	
Elmley	1																																						137	
Elmley	1																																						158	
Elmley	1																																						177	
Elmley	1																																						177	
Elmley	1																																						208	
Elmley	1																																						82	
Elmley	1																																						256	
TOTALS IN RURAL DISTRICTS	58	6	12	—	—	3	4	—	5	93	127	69	32	394	21	81	548	467	93	785	191	14	156	167	37	55	8	52	46	4	35	386	42	93	19	1	4,033			
TOTALS IN URBAN DISTRICTS	174	21	36	—	—	29	5	—	29	324	481	261	114	1,294	69	74	1,936	1,905	312	2,304	596	34	435	543	115	177	71	127	129	8	111	1,078	168	223	119	9	13,228			
TOTALS IN COUNTY	232	27	48	—	—	34	6	—	34	417	608	339	146	1,688	90	105	2,484	2,372	405	3,089	787	48	591	710	152	232	79	179	175	12	146	1,464	159	316	138	10	17,281			
Rural Districts	1-76	0-18	0-36	—	—	0-06	0-12	—	0-15	2-81	3-84	2-09	0-97	11-92	0-64	0-94	16-59	14-13	2-81	23-76	5-78	0-42	4-72	5-05	1-12	1-66	0-24	1-57	1-39	0-12	1-00	11-68	1-27	2-81	0-58	0-03	122-67			
Urban Districts	1-40	0-17	0-29	—	—	0-04	0-02	—	0-23	2-61	3-88	2-10	0-92	10-44	0-56	0-60	15-61	15-36	2-51	18-58	4-81	0-27	3-51	4-38	0-93	1-43	0-57	1-02	1-04	0-06	0-90	8-69	0-87	1-80	0-96	0-07	106-08			
Administrative County of Kent	1-48	0-17	0-31	—	—	0-03	0-04	—	0-22	2-66	3-87	2-10	0-93	10-75	0-57	0-67	15-82	15-10	2-58	19-67	5-01	0-31	3-76	4-52	0-97	1-48	0-50	1-14	1-11	0-08	0-93	9-32	0-96	2-01	0-88	0-06	110-04			



TABLE 7  
Showing the allocation of deaths to causes, in children under one year of age.

Causes of Death	Deaths under One Year of Age		
	1938	1953	1954
Whooping Cough .. .. .	4	4	2
Cerebro-spinal Fever .. .. .	2	2	6
Diphtheria .. .. .	1	—	—
Tuberculosis—Respiratory .. .. .	1	1	1
—Other Forms .. .. .	9	1	—
Syphilitic Diseases .. .. .	4	—	—
Influenza .. .. .	4	4	—
Measles .. .. .	4	1	—
Acute Poliomyelitis and Polioencephalitis, Acute Infectious Encephalitis .. .. .	—	—	—
Malignant Neoplasm—all sites .. .. .	1	3	—
Intracranial Vascular Lesions .. .. .	—	—	1
Heart Disease, Diseases of Circulatory System ..	—	2	1
Bronchitis .. .. .	19	8	15
Pneumonia .. .. .	125	81	56
Other Respiratory Diseases .. .. .	4	1	1
Ulcer of Stomach or Duodenum .. .. .	—	—	—
Appendicitis, Diarrhoea, other Digestive Diseases	92	15	5
Nephritis and Nephrosis .. .. .	1	1	3
Premature Birth, Congenital malformations, other defined and ill-defined diseases ..	593	359	401
Violence .. .. .	21	22	19
All Other Causes .. .. .	—	7	5
All Causes .. .. .	885	512	516



No.	Name	Address	Remarks
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