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COUNTY OF LINCOLN—PARTS OF KESTEVEN

ANNUAL REPORT

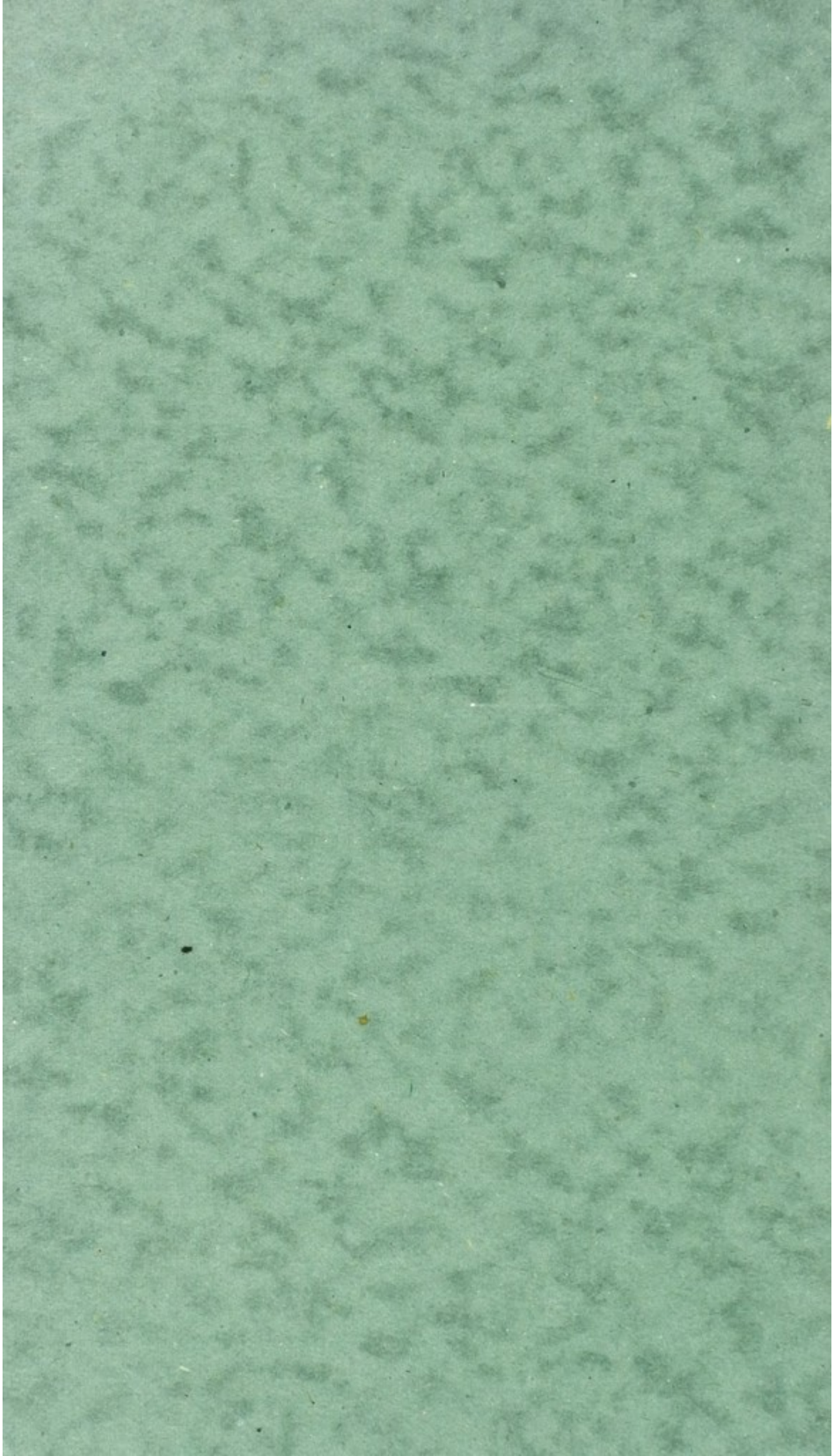
of the

COUNTY MEDICAL OFFICER
OF HEALTH

for the year

1948

J. H. C. CLARKE, M.A., M.D., D.P.H., D.T.M. & H.



COUNTY OF LINCOLN—PARTS OF KESTEVEN

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COUNTY OF LINCOLN—PARTS OF KESTEVEN

HEALTH COMMITTEE

(Constitution as at 31st December, 1948)

Chairman :

Alderman T. W. ATKINSON

Vice-Chairman :

Alderman Mrs. G. H. SCHWIND, M.B.E.

Aldermen

C. W. BARRAND
 Mrs. L. BASFORD
 H. DEER
 E. S. DUNKERTON
 A. EVERETT
 F. J. JENKINSON (*ex-officio*)
 Sir R. PATTINSON, D.L. (*ex-officio*)
 F. D. TROLLOPE-BELLEW

Councillors

B. E. BRIGHTON
 Lt.-Col. J. CRACROFT-AMCOTTS, D.S.C.
 R. A. COLLINS
 C. H. FENELEY
 W. GRIFFIN
 H. E. HOUGH

Councillors

G. W. HUTSON
 J. IRESON
 Rev. C. LETTS
 J. W. MILNER
 M. OGDEN
 F. L. PRESTON
 A. W. SHARMAN
 J. E. SNELL
 Mrs. L. M. WARD
 H. R. E. E. WELBY, C.M.G.
 A. WILSON
 F. WINTER

CO-OPTED MEMBERS

Mrs. J. CRACROFT-AMCOTTS
 Mrs. B. PALMER

The Hon. Mrs. D. N. TROLLOPE-BELLEW
 Mrs. C. J. WILLOWS

Representing Kesteven Local Medical and Panel Committee :

Dr. K. M. FOSTER, M.D.

Representing Kesteven Local Dental Committee :

F. H. WALLACE, L.D.S., R.C.S. (Eng.)

Public Health Officers of the County Council

County Medical Officer of Health :

School Medical Officer :

Tuberculosis Officer :

Medical Officer for Maternity and Child Welfare :

Medical Supervisor of Midwives :

J. H. C. Clarke, M.A., M.D., D.P.H., D.T.M. & H.

Deputy County Medical Officer of Health, Deputy School Medical Officer, Deputy Tuberculosis Officer and Deputy Medical Officer for Maternity and Child Welfare :

T. J. O'Sullivan, M.A., M.D., D.P.H., L.M.

Assistant County Medical Officers, Assistant School Medical Officers, Assistant Tuberculosis Officers and Assistant Medical Officers for Maternity and Child Welfare :

*J. A. Galletly, M.A., M.B., B.Ch., D.P.H. (resigned 31/8/48)

*W. Anley Hawes, M.B., B.S., D.P.H.

*G. A. F. Holloway, L.M.S.S.A. (resigned 31/1/48)

R. F. McKeown, M.B., B.A.O., B.Ch., D.P.H.

*V. B. Tulloch, M.B., Ch.B., D.P.H.

Medical Adviser for Mental Health Services :

*N. K. Henderson, B.A., M.B., Ch.B., LL.B., D.P.H., D.P.M.

Chief Lay Administrator, Mental Health Services :

W. E. Vickers, M.B.E.

Orthopaedic Surgeon :

*G. A. C. Shipman, M.A., M.B., Ch.B., M.R.C.S., L.R.C.P.

Ophthalmic Surgeons :

*W. A. Briggs, M.B., B.Ch., D.O.M.S. (resigned 31/12/48)

*Allan H. Briggs, M.Sc., M.B., Ch.B., D.O.M.S. (resigned 31/12/48)

*Seamus P. Redmond, M.B., B.Ch., D.O.M.S. (resigned 31/12/48)

Consulting Physician for Rheumatism and Heart Diseases :

*J. W. Brown, M.D., F.R.C.P.

Medical Officer for Venereal Diseases :

*A. D. Frazer, M.D., D.P.H.

Dental Surgeons :

J. E. Mann, L.D.S., R.C.S. (Eng.) (resigned 23/11/48)

C. G. Grant, L.D.S., R.C.S. (resigned 21/4/48)

G. Turner, L.D.S.

Public Analyst :

*W. W. Taylor, B.Sc., F.I.C.

Superintendent Health Visitor :

Non-Medical Supervisor of Midwives :

Miss M. Hughes

* Part-time Officers

County Health Visitors :

Mrs. H. M. Andrews	Mrs. S. E. Jeffries
Mrs. J. Bleazard	Miss E. M. Jones
Miss M. Bray	Miss A. Rooke
Miss B. Brown (<i>app.</i> 1/4/48)	Mrs. A. Stephenson
Miss S. Ford (<i>trans.</i> 5/7/48)	(<i>resigned</i> 16/4/48)
Mrs. E. Holland (<i>trans.</i> 5/7/48)	

Also 22 District Nurse-Midwives act as part-time Health Visitors.

Physiotherapists :

Miss E. A. Peck, S.R.N., C.S.P., M.E. (<i>appointed</i> 23/2/48)
Miss G. E. Jones, C.S.P.

County Almoner :

Mrs. E. R. Livesey, A.I.A. (<i>resigned</i> 30/9/48)
Miss M. A. L. Howard, B.A., A.M.I.A., (<i>appointed</i> 6/12/48)

Matron, St. Catherine's Road Day Nursery, Grantham :

Mrs. E. Pacey (<i>transferred</i> 5/7/48— <i>resigned</i> 11/11/48)
Mrs. F. M. Flower-Ellis (<i>appointed</i> 22/11/48)

County Sanitary Officer :

J. F. Lofthouse, M.R.SAN.I., A.M.I.S.E., M.S.I.A. (<i>resigned</i> 22/5/48)
G. A. Farrow, M.R.SAN.I., M.S.I.A., A.M.INST.P.C. (<i>app.</i> 1/7/48)

Dental Attendants :

Mrs. M. Covell	Miss B. M. Mitton
Miss A. M. Turner	

Blind Welfare Visitor :

Miss A. Sandwith

Duly Authorised Officers :

J. W. Allpress	W. E. Baker
B. J. Brown	W. Holmes
N. A. Clarke (Asst.)	

Chief Clerk :

J. G. Cox (*resigned* 31/10/48)

District Medical Officers of Health and Sanitary Inspectors

<i>District</i>	<i>Medical Officer of Health (all part-time appointments)</i>	<i>Sanitary Inspector</i>
Borough of Grantham	R. F. McKeown, M.B., B.A.O., B.Ch., D.P.H.	S. F. Nott (<i>resigned</i> 31/3/48) C. Taylor (<i>appointed</i> 1/4/48)
Borough of Stamford	W. Anley Hawes, M.B., D.P.H.	L. J. Roll
Urban District of Sleaford	J. W. Scholey, M.B. CH.B.	T. E. Dagwell (<i>appointed</i> 11/3/48)
Urban District of Bourne	J. A. Galletly, M.B., D.P.H.	W. H. Howard (<i>appointed</i> 1/1/48)
Rural District of North Kesteven	W. Sharrard, M.B.	J. Chadwick
Rural District of East Kesteven	J. W. Scholey, M.B., CH.B.	A. A. Maxwell
Rural District of South Kesteven	J. A. Galletly, M.B., D.P.H.	W. A. Chivers
Rural District of West Kesteven	R. F. McKeown, M.B., B.A.O., B.Ch., D.P.H.	J. Dean

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COUNTY OF LINCOLN—PARTS OF KESTEVEN

To the Chairman and Members of the County Council

MR. CHAIRMAN, LADIES AND GENTLEMEN,

I beg to present my Annual Report as County Medical Officer of Health for the year 1948.

The Registrar-General's estimate of the population of the County for the year is of interest in that it shows an appreciable increase, viz., 4,350 over the figure for the previous year. Increases occurred mainly in the rural districts; in fact East Kesteven is credited with a rise of 1,210 whilst North Kesteven's population is estimated to have increased by as many as 2,000—or more than 8 per cent above their figure for 1947. No doubt the influx of persons to adapted Service Camps, etc., largely accounts for this.

The vital statistics for the year are satisfactory. The live birth rate declined from 21.37 per thousand of the estimated population for 1947—which as will be remembered I reported as the highest recorded since 1921—to 19.2. This was in accordance with the general trend (the rate for England and Wales was 17.9 as compared with 20.5 in 1947) and was to be expected with the gradual return to normal after the war years. I am pleased to report that the infantile mortality rate of 30.46 was lower than that for 1947 and this again constituted a new low record for the County. It is also satisfactory to record that there were only two deaths from maternal causes during the year. I am sure this speaks well for the services provided for the care of mothers generally and reflects to a great extent the more enlightened outlook of the mother of to-day who is not only anxious to take advantage of the facilities available, but willingly accepts and acts upon the advice she receives. The death rate from all causes was slightly lower than that of the previous year, i.e., 11.04 per thousand of the population as against 11.87 for 1947. Heart disease again heads the list of causes, followed by cancer, the deaths from which have risen from 187 in 1947 to 215 in 1948.

No serious outbreak of infectious disease occurred during the year. The increase over the previous year of 1,086 cases of measles largely accounted for the higher figure of notified cases of infectious diseases. I do not however regard this as particularly significant; many cases in the past escaped notification but recently there has been a marked improvement in the notification of this disease.

July 5th marked the inception of the National Health Service Act, 1946. It then became the duty of the County Council as Local Health Authority to implement schemes prepared under Part III of the Act and subsequently approved by the Ministry of Health. The approved schemes have been widely circulated to all concerned with their administration and I do not therefore intend to enter into any detail regarding these in this Report. I shall, however, make brief references both here and in the body of the Report as to their effect upon the work of the Department and what has already been done to implement their provisions. It will be appreciated that Local Health Authorities could not be in a position to apply these schemes fully and immediately on the appointed day; the social change envisaged will quite naturally be the subject of gradual development and our immediate duty is to make sure that in the first place proper foundations are laid. As you no doubt are aware, it became the duty of the County Council as a Local Health Authority to:—

- (a) make arrangements for the care, including in particular dental care, of expectant and nursing mothers, and all children under the age of five years who are not attending private schools (Section 22)
- (b) provide a Domiciliary Midwifery Service (Section 23)
- (c) provide a Health Visiting Service (Section 24)
- (d) provide a Home Nursing Service (Section 25)
- (e) provide a Vaccination and Immunisation Service (Section 26)
- (f) provide a free Ambulance Service (Section 27)
- (g) make provision for the Prevention of Illness, care of persons suffering from illness or mental defectiveness or the after-care of such persons (Section 28)
- (h) to establish a Mental Health Service and to appoint " Authorised Officers " charged with the duty under the Lunacy and Mental Treatment Acts of taking initial proceedings in providing care and treatment for persons suffering from mental illness (Section 51).

The Service in relation to the Care of Mothers and Young Children is a continuation of the Maternity and Child Welfare Services as previously administered by Welfare Authorities, but their provision is now a duty and not a power. In Kesteven this meant no extensive changes in the arrangements already in operation. The Services built up over past years for the care of expectant and nursing mothers and children under 5, such as infant welfare centres, consultative clinics, provision for premature infants, care of unmarried mothers and their children, etc., continued throughout the year with little change except that those Services previously administered by the Grantham Borough Council—which until the Act came into force was a separate Welfare Authority—were taken over and amalgamated with the County Council's Services. These Services included an Ante-Natal and Post-Natal Clinic, an Infant Welfare Centre and a Day Nursery organised to accommodate 40 children under 5 years of age. It has been found impossible to implement our proposals for the provision of priority dental treatment to nursing

and expectant mothers and children under 5 ; this has been due to the difficult staffing situation where instead of having four Dental Officers on the staff, for the main part of the year there were only two, and after November only one.

The Midwifery Service formerly provided by the Lincolnshire Nursing Association on a County Council grant aided basis came under the direct control of the County Council on the appointed day as also did the Home Nursing Service. Although since that date the nursing staff has been directly engaged by the Authority, the function of the day to day local administration such as maintenance and upkeep of cars and bicycles, purchase of dressings, provision of laundry service, etc., was delegated to the District Nursing Associations through the newly constituted Kesteven County Nursing Association, the latter acting solely on an agency basis on behalf of the County Council. I should like to comment here on the good work that has been undertaken in the past by the County and District Nursing Associations. Their efforts in organising and fostering the work of these Services have been invaluable to the public over a period of many years.

The work of the Health Visiting Service continues largely as before but its scope has been greatly enlarged to include the health of the whole family instead of that of the mothers and children only. In order to cater for the whole of the Authority's area provision was made in our scheme for an additional whole-time Health Visitor, but at the end of the year we had not been successful in making an appointment.

The Vaccination laws which placed an obligation upon parents to have their children vaccinated have been repealed and a duty has been placed upon Local Health Authorities to offer vaccination and immunisation on a voluntary basis. General practitioners were given the opportunity of taking part in this Service ; the majority accepted and are co-operating very well. A fee for the submission of the appropriate records—which is to be agreed upon between the profession and the Ministry of Health—will be payable retrospectively from 5th July to these doctors.

It was of course essential that the Ambulance Service, being a vital and continuing service, should be ready to operate immediately on the appointed day. All necessary arrangements were made to this end and I am pleased to say the Service has functioned remarkably well especially when one considers the heavy strain imposed on it by an increased demand. I should like to pay tribute to the personnel (both paid and voluntary) responsible for manning the vehicles for their devotion to duty during this very difficult transitional period. The Council's policy to replace vehicles uneconomical to run owing to age, etc., is now beginning to show results and it may be said that the Service is already held in high regard by those who have had occasion to use it.

When we come to consider the provisions of Section 28 of the Act regarding Prevention of Illness, Care and After-Care, we find that although wide powers are given to Local Health Authorities these can only be exercised with the approval of the Minister of Health who can direct that this Section be operated in relation to certain diseases only ; up to the present tuberculosis is the only specific disease dealt with in this way. The County Council has however made provision in their scheme under this Section for the care of persons suffering from mental illness or defectiveness, the following up of contacts and persons suffering from venereal disease, the examination and treatment of persons with a view to prevention of blindness, the dissemination of appropriate information on individual and community health and for the development of arrangements for the care and after-care of invalids generally, such as the provision of nursing equipment and apparatus for persons being nursed at home ; the arrangements in all these respects shall be such as will not fall to be dealt with by the Authority under any other statutory power.

With regard to the Mental Health Services four experienced male officers, formerly employed as Relieving Officers under the former Public Assistance arrangements were appointed as Duly Authorised Officers being stationed at Lincoln, Grantham, Stamford and Sleaford. The non-medical administration of the Service is being undertaken by Mr. Vickers, the County Welfare Officer, and I should like to record my appreciation of his co-operation and assistance. Unfortunately, although our scheme visualised the appointment of a part-time Psychiatric Social Worker, owing to the scarcity of such workers throughout the Country, it has not been possible to make this appointment. Full use has been made of the Ambulance Service for the transport of cases of mental illness or defectiveness when necessary.

An additional function of the County Council as a Local Health Authority is to provide, equip and maintain premises to be called Health Centres (Section 21) but as the building situation makes it impossible to undertake for some time to come any general programme of their provision the Ministry of Health have deferred calling for the submission of Authorities' schemes in this connection. Consideration is being given, however, to the choice and earmarking of sites where it will be necessary that such Health Centres should be provided.

An important power but not a duty has been given to Local Health Authorities to provide a Domestic Help Service. Many Authorities were already running such schemes when the Act came into force and a comprehensive service was in operation in the Borough of Grantham. The County Council assumed responsibility on the 5th July for the Grantham service as it did for the other Maternity and Child Welfare services there. We

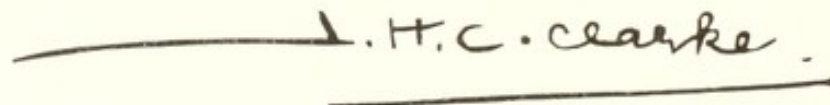
found that it was running satisfactorily and was catering for a very real need in that locality; its operation has provided us with useful experience upon which to plan and build a service for the remainder of the County.

In summing up I think I may rightly say that the time and energy devoted to the preparation of our schemes under the National Health Service Act have borne fruit and a sound foundation has been laid upon which our Health Services may progressively be built. I feel that at this stage it is too early to give a considered opinion as to what effect our proposals will have upon the County's Health Services generally. On balance the duties and powers of the County Council as a Local Health Authority have very substantially increased.

I have pleasure in expressing thanks to all voluntary workers associated with the Infant Welfare Centres, the members of the District Nursing Association Committees and the voluntary aid detachments associated with the Ambulance Service for valuable assistance rendered during the year. I should also like to thank the members of the Staff of the Public Health Department for their excellent work during 1948.

I am, Ladies and Gentlemen,

Yours faithfully,

A handwritten signature in cursive script that reads "J. H. C. Clarke". The signature is written in dark ink and is underlined with a single horizontal line.

STATISTICS AND SOCIAL CONDITIONS

General Statistics

Area of Administrative County (in acres)	463,490
Population (Census 1921)	108,237
Population (Census 1931)	110,360
Population (Registrar-General's estimate, 1948) ..	119,570
Number of inhabited houses (Census 1921)	25,456
Number of inhabited houses (Census 1931)	27,590
Number of families or separate occupiers (1921) ..	25,823
Number of families or separate occupiers (1931) ..	27,845
Rateable Value (1st April, 1949)	£555,848
Estimated product of a penny rate, 1948-49	£2,189

Extracts from Vital Statistics for the Year 1948—

Live Births :

	<i>Males :</i>	<i>Females :</i>	<i>Totals :</i>	
Total	1,159	1,139	2,298	Rate per 1,000 of
Legitimate	1,077	1,053	2,130	estimated population :
Illegitimate	82	86	168	19.2 (Rate for Eng-
				land & Wales : 17.9)

Stillbirths :

Total	31	36	67	Rate per 1,000 of
Legitimate	27	35	62	estimated population :
Illegitimate	4	1	5	0.56 (Rate for Eng-
				land & Wales : 0.42)
				Rate per 1,000 births
				—live & still : 19.8

<i>Deaths :</i>	690	630	1,320	Rate per 1,000 of
				estimated population :
				11.04 (Rate for Eng-
				land and Wales : 10.8)

Deaths from Puerperal causes :

	<i>No. of</i>	<i>Rate per 1,000 total</i>	
	<i>deaths :</i>	<i>(live & still) births :</i>	
From Puerperal in-	—	—	(England & Wales 0.29)
fections and abor-			
tions with or with-			
out Sepsis			
From other Maternal			
causes	2	0.84	(England & Wales 0.73)
Total	2	0.84	(England & Wales 1.02)

Death Rate of Infants under 1 year of age :

	<i>County of</i>	<i>England &</i>
	<i>Kesteven :</i>	<i>Wales :</i>
All infants per 1,000 live births	30.46	34.00
Legitimate infants per 1,000 legitimate		
live births	29.57	—
Illegitimate infants per 1,000 illegitimate		
live births	41.66	—

Chief Causes of Death, 1948

Cause of Death	No. of Deaths	Rate per 1,000 of est. pop. Kesteven	
		1948	1947
Heart Disease	387 (391)	3.24	(3.39)
Cancer	215 (187)	1.80	(1.62)
Intra-cranial vascular lesions ..	181 (185)	1.51	(1.61)
Bronchitis	74 (72)	0.62	(0.62)
Circulatory Diseases (other than Heart Disease)	42 (53)	0.35	(0.46)
Pneumonia	52 (53)	0.43	(0.46)
Respiratory Tuberculosis	32 (42)	0.27	(0.36)
Violence (Accidental)	29 (38)	0.24	(0.33)
Congenital Malformations, Birth Injuries, Infantile Diseases ..	30 (32)	0.25	(0.28)
Nephritis	29 (28)	0.24	(0.25)
Digestive Diseases (other than Appendicitis)	20 (25)	0.17	(0.22)
Premature Birth	14 (24)	0.12	(0.21)

(NOTE.—*Figures in brackets relate to 1947*)

Births :

The Birth Rate of 19.2 per thousand of the estimated population showed a decrease on the previous year, but compared very favourably with the figure for England and Wales, viz., 17.9. The number of live births belonging to the Administrative County was 2,298 (1,159 males and 1,139 females)—compared with 2,462 (1,269 and 1,193) in 1947.

The 168 illegitimate live births—representing 7.3 per cent of the total—showed a slight increase on the figure for the previous year; there were 156 (6.3 per cent of the total) such births during the previous year.

The number of *Stillbirths* (67) was just above the average for the previous 10 years but the *Stillbirth Rate* (0.56) was below the average for the same period.

The following Table, which gives comparative statistics relating to births in the Administrative County since 1935, is of interest :—

Year	LIVE BIRTHS				STILLBIRTHS	
	Legitimate	Illegitimate	Total	Rate	No.	Rate
1935	1,454	61	1,515	13.72	74	0.67
1936	1,517	73	1,590	14.09	66	0.59
1937	1,536	72	1,608	14.16	73	0.64
1938	1,569	98	1,667	14.57	70	0.61
1939	1,637	85	1,722	14.81	80	0.69
1940	1,665	88	1,753	15.91	58	0.53
1941	1,749	110	1,859	16.39	62	0.55
1942	1,927	165	2,092	18.47	66	0.58
1943	1,967	162	2,129	18.53	60	0.52
1944	2,045	200	2,245	19.75	64	0.56
1945	1,939	267	2,206	19.97	68	0.62
1946	2,094	176	2,270	20.06	65	0.57
1947	2,306	156	2,462	21.37	62	0.54
1948	2,130	168	2,298	19.2	67	0.56

The number of births *notified* in the County (including the Borough of Grantham) under Section 203 of the Public Health Act, 1936, was 2,041—1,987 live births and 54 stillbirths.

Details regarding Births in each of the 8 County Districts will be found in Table I, on page 53.

Deaths :

The *Death Rate* from all causes for the County was 11.04 per thousand of the estimated population, compared with 11.87 the previous year and 10.8 for England and Wales. The number of deaths was 1,320, 690 males and 630 females : the figures for 1947 were 1,368, 686 and 682 respectively. The proportion of deaths over 65 years of age was 64.9 per cent in the year under review, as compared with 65.8 per cent in 1947, 64.5 per cent in 1946, 63.9 per cent in 1945 and 63.6 per cent in 1944.

There were 70 deaths of infants under one year, representing an *Infant Mortality Rate* of 30.46 *per thousand live births* : *this is the lowest ever recorded in the County*. The chief causes of death in this age group were Congenital Malformations, Birth Injuries and Infantile Diseases 30, Pneumonia 20 and Premature Birth 14.

The deaths from maternal causes were 2 in number during 1948, and represent a *Maternal Mortality Rate* of 0.84 per thousand total (*live and still*) births—appreciably lower than the figure for the Country as a whole (1.02). There were 3 such deaths in the previous year and 2 in 1946.

The following Table showing the numbers of deaths and rates during the past 15 years may be of interest :—

Year	DEATHS (All Causes)		DEATHS (Infants under 1 year)		DEATHS (Puerperal Causes)	
	No.	Rate	No.	Rate	No.	Rate
1934	1,228	11.79	78	49.55	5	3.04
1935	1,348	12.21	78	51.48	7	4.40
1936	1,276	11.31	74	46.54	6	3.62
1937	1,384	12.19	103	64.05	3	1.78
1938	1,306	11.42	89	53.39	4	2.47
1939	1,405	12.23	72	41.71	5	2.77
1940	1,511	13.72	85	47.78	5	2.76
1941	1,388	12.24	86	45.84	11	5.67
1942	1,353	11.94	87	41.59	8	3.71
1943	1,408	12.26	90	42.27	6	2.74
1944	1,298	11.42	100	44.54	0	0.00
1945	1,320	11.95	89	40.34	8	3.52
1946	1,352	11.95	90	39.65	2	0.86
1947	1,368	11.87	82	33.31	3	1.19
1948	1,320	11.04	70	30.46	2	0.84

The deaths registered under *Heart Disease* during 1948 numbered 387. Reference to the Chief Causes of Death on page 12 shows that this remains the principal cause of death. The death rate per 1,000 of the estimated population at 3.23 was 0.16 lower than in 1947. The following is a statement of fatalities from Heart Disease during the 13 years 1936-1948.

<i>Year</i>	<i>No. of Deaths</i>	<i>Crude Death Rate per 1,000 of estimated population</i>	<i>Percentage to total Deaths from all causes</i>
1936	306	2.71	23.9
1937	336	2.95	24.3
1938	321	2.81	24.5
1939	381	3.33	27.1
1940	361	3.28	23.8
1941	297	2.62	21.4
1942	302	2.67	22.3
1943	309	2.69	21.9
1944	316	2.78	24.3
1945	362	3.28	27.4
1946	350	3.09	25.8
1947	391	3.39	28.5
1948	387	3.23	29.3

Further information regarding the causes of death, etc., will be found on page 54 and in Table III (inset).

Population :

The civilian population of the County at mid-year 1948 was estimated by the Registrar-General to be 119,570, which was an increase of 4,350 on the estimate for the previous year and 6,430 more than the 1946 figure. The natural increase in population (i.e., the excess of live births over deaths) was 978.

GENERAL PROVISION OF HEALTH SERVICES

Public Health Staff

A list of the staff of the Department, together with details of the changes which occurred during the year, will be found on pages 3 and 4.

Laboratory Facilities :

These arrangements were as stated in previous Annual Reports, and details of the work carried out will be found under the appropriate sections of this Report.

Ambulance Facilities :

The ambulance organisation, as detailed in my Annual Report for 1943, continued to operate until 5th July, 1948, when the County Council as Local Health Authority assumed responsibility for providing a comprehensive service for the whole of its administrative area. A brief description of this service and the work it performed during that part of the year it was functioning will be found on pages 29—33 of this report.

Nursing in the Home :

Home Nursing, previously undertaken by the various District Nursing Associations, all of which were affiliated to the Lincolnshire Nursing Association became the responsibility of the County Council with the advent of the National Health Service Act. Particulars of the work carried out since then are given on page 27 of this report.

CLINICS AND TREATMENT CENTRES**Infant Welfare Centres :**

Three additional Infant Welfare Centres—those at South Witham, Alma Park, Grantham and 40 Westgate, Grantham—were taken over by the County Council during the year under review. The number of such Centres provided or subsidised at the end of the year was accordingly 24, and full details of attendances, etc., will be found in the Table on page 56 and 57.

School Clinics :

Five School Clinics are provided by the County Council, details of which have previously been published. The facilities offered by the various consultant services remained available to children under 5 years of age who were examined and referred by the Assistant County Medical Officers. After the 5th July, the provision of specialist services became the responsibility of the Regional Hospital Boards and where these services were already functioning in County Clinic premises, the County Council continued them on an agency basis.

Tuberculosis Dispensaries :

All Tuberculosis Dispensaries, with the exception of that at Grantham, continued to function from the same premises and at the same times as given in my Annual Report for 1946. In Grantham the Dispensary was transferred from 42 to 29 Watergate, in July, 1948, operating there at the same times as hitherto.

As from 5th July, the treatment of Tuberculosis including that provided through the dispensary service established by local authorities became the responsibility of the Regional Hospital Boards. Agency arrangements were made, however, between the two Boards concerned with our service (i.e., the Sheffield and the East Anglian) and the County Council for the latter to continue running the dispensaries until such time as the Boards themselves were in a position to take over. It eventually transpired that Sheffield were ready to do this in January, 1949, and East Anglia in June, 1949.

Treatment Centres for Venereal Diseases :

Here again the functions of the County Council to provide facilities for the treatment of these diseases were transferable to the Regional Hospital Boards on the 5th July, by virtue of the

National Health Service Act. The special treatment centre provided by the County Council at 13a Elmer Street, Grantham, had been transferred to 42 Watergate, on the 1st January, and again on the 5th July to 29 Watergate. Until the Sheffield Regional Hospital Board made arrangements in March, 1949 for this centre to be transferred to the Grantham and Kesteven General Hospital, it continued to be held under the auspices of the Public Health Department. The General Practitioners Treatment scheme serving Sleaford and district continued as before, except that it now falls to be dealt with by the Sheffield Regional Hospital Board.

MATERNITY AND CHILD WELFARE

The County Council is now the Local Supervising Authority under the Midwives Acts for the whole of the Administrative County, the Borough of Grantham ceasing to be a separate Welfare authority after the 5th July.

The following summary of the work carried out during the year is, for the sake of convenience, included under the headings appropriate to the services as they are now scheduled under the National Health Service Act. As I have already mentioned the service for the Care of Mothers and Young Children being a continuation of the Maternity and Child Welfare services previously administered by Welfare Authorities, there was no marked alteration in our arrangements in this respect when the Act came into operation.

CARE OF MOTHERS AND YOUNG CHILDREN

Infant Welfare Centres :

Immediately prior to the inception of the National Health Service Act the County Council provided 22 infant welfare centres. Since the appointed day, as already reported, the centres at Grantham and Alma Park were taken over and thus at the end of the year 24 centres were either provided or subsidised by the County Council. There remained 13 voluntary infant welfare centres and of these 12 will be taken over as and when suitably qualified medical and nursing staffs become available.

Twenty thousand, four hundred and twenty-seven attendances were made at these centres during the year—11,552 by infants under one year and 8,875 by children aged 1—5 years; comparable figures for the previous year were 14,993, 8,735 and 6,258 respectively.

The number of individual infants under one year who attended was 1,519 and individual children aged 1—5 years totalled 1,254 making 2,773 in all; these figures compare very favourably with those of last year which were 1,422, 1,031 and 2,453 respectively.

Children who attended for the first time were as follows :— infants 1,002, children aged 1—5 years, 333, giving a total of 1,335.

Consultations with the medical staff numbered 5,327 and 19,668 weighings were undertaken.

The increasing number of attendances reflects the growing interest in this important branch of the health services.

Ante and Post Natal Services :

The arrangements for the ante-natal and post-natal examination of expectant and nursing mothers by general practitioners continued up to 5th July as before. From the 1st January to that date 197 expectant mothers were ante-natally examined under this scheme (362 examinations being made) and 99 post-natally.

After the 5th July the scheme continued, with the Minister of Health's approval, in a modified form. From this date to the end of the year 26 women were examined ante-natally (41 examinations being made) and 13 post-natally.

During the year 25 cases of abnormality were detected at these examinations and referred for treatment.

At the Grantham Clinic, where 2—3 sessions are held monthly, 90 patients attended during the period 5th July to 31st December, making a total of 239 attendances.

It is proposed to establish in due course joint ante and post natal clinics at Bourne, Sleaford and Stamford. It is hoped that it will be possible by arrangement with the Regional Hospital Boards for the services of obstetric consultants to be made available to women referred from our ante-natal and post-natal clinics to consultative obstetric and gynaecological clinics at the Boards' Hospitals.

Ophthalmic Treatment :

One hundred and six children under 5 years of age (including 47 new cases) were seen under the County Council's arrangements by the Ophthalmic Surgeons during the year. Of the new cases examined, spectacles were prescribed for 20 and new prescriptions were given to a similar number of old cases.

Arrangements were made for one case of strabismus to be provided with in-patient treatment at the Lincoln County Hospital.

In the absence of any definite proposals from the Regional Hospital Boards for the taking over of the Authority's Ophthalmic Service, the specialists with whom the County Council had, in

the past, an arrangement for the undertaking of all their ophthalmic consultant work, agreed to continue up to the 31st December. It appears that in future, unless the Boards come to an arrangement for the holding of these clinics in the County Council's premises, there will be no alternative but to refer cases through the supplementary ophthalmic service of the Local Health Executive Council, or at a later date through the Hospitals Ophthalmic Service, which in my view will not be nearly so satisfactory. At the time of writing this report, it is understood that the two Regional Hospital Boards have accepted in principle the continuance of the Ophthalmic and other Specialist Services at the County Council Clinics.

Orthopaedic Treatment :

The arrangements for the diagnosis and treatment of crippling defects amongst pre-school children continued as before, except that, as already mentioned, since the 5th July an agency arrangement between the Regional Hospital Boards and the County Council was in operation.

One hundred and thirty-four children under 5 years of age (including 100 new cases) saw the Orthopaedic Surgeon, Dr. G. A. C. Shipman, who attended the Bourne, Grantham, Sleaford and Stamford Clinics as often as required: 142 consultations were held.

With regard to treatment, no fewer than 1,388 attendances (1,313 in 1947) were made for massage, remedial exercises, ultra violet light, etc. Arrangements were made for 3 cases to receive hospital in-patient treatment.

Treatment of Defects of the Ear, Nose and Throat :

Thirty-six children under 5 years of age were seen by the Ear, Nose and Throat Specialists during the year, and of the cases examined, 29 were found to be suffering from enlarged tonsils and/or adenoids for which operative treatment was recommended. A substantial number of children dealt with at these clinics were found—after X-Ray photograph—to have sinusitis, and appropriate treatment was carried out for this condition.

Rheumatism and Heart Diseases

Dr. J. W. Brown, the County Council's Consultant Physician for these diseases examined 3 children under 5 referred to him from infant welfare centres. Two cases were to be kept under observation and in the other no defect was confirmed.

Dental Treatment :

Section 22 of the National Health Service Act designates expectant and nursing mothers and pre-school children as priority classes for dental care and the duty has been placed on Local

Health Authorities to see that such care is available. However, in view of the extreme staffing difficulties that persisted throughout the year it was only possible to deal with a very limited number of patients. In fact only one dental officer undertook any of this work. He inspected 15 children, found 12 to need treatment of whom 11 were eventually rendered dentally fit; the latter made a total of 22 attendances. In addition 3 expectant mothers were treated.

Medical Officers of Health have been asked by the Ministry of Health to include in their Annual Reports, reports by their Senior Dental Officers. As far as this Authority is concerned, this is not possible as Mr. Mann who had held the post here resigned in November. Had he still been with us he could, I am sure, have added little to what has already been said but would doubtless have endorsed the general view that if Local Health Authorities are to provide an efficient service in this field they should be in a position to offer scales of remuneration to dental officers more in keeping with those offered under the National Health Service. Far from being able to appoint a fourth dental officer, as provided for under our scheme, we were not even able to fill the two vacancies existing on our previous establishment.

Institutional Provision for Mothers and Children :

During the period 1st January, 1948 to 5th July, 1948, a total of 104 Kesteven maternity patients were provided with institutional accommodation under the Council's Maternity and Child Welfare Scheme. Fifty-nine of these cases were admitted to the Grantham and Kesteven General Hospital and 33 to the Stamford, Rutland and General Infirmary. Of the remainder, 6 patients entered the City Maternity Home, Lincoln, 5 unmarried expectant mothers were sent to the Quarry Maternity Home, Lincoln, and one similar case was admitted to the Church Army Maternity Home, Brighton.

After the 5th July, the responsibility for providing maternity home accommodation was vested in the Regional Hospital Boards. Local Health Authorities were circularised as to the classes of patients to whom priority of admission was to be granted and were requested to make arrangements for reporting on the desirability of institutional confinement in all normal cases desiring admission to hospital on social grounds. The County Nursing Superintendent or her Assistants undertake the necessary enquiries and where it is confirmed that admission to hospital will be necessary arrangements are made accordingly. One hundred and sixty-four cases were dealt with in this way during the period 5th July—31st December, reservation of accommodation being made with local hospitals as follows :—

Grantham Hospital	..	..	..	..	..	..	94
Stamford Infirmary	..	..	..	..	..	..	31
City Maternity Home, Lincoln	..	..	..	..	..	..	15
Hill View Hospital, 137 Dysart Road, Grantham	..	..	..	..	..	..	22
Newark Town and District Hospital	..	..	..	..	..	..	2
							164

During the year arrangements were made for 41 children under 5 years of age to receive in-patient Hospital treatment. Of these 30 have been referred to above as having been dealt with under the Orthopaedic, Ophthalmic and Ear, Nose and Throat schemes; the remainder comprised 2 cases of prematurity, 5 cases of phimosis, and 4 cases of hernia.

Premature Infants

Eighty-eight babies born in the County were notified as having a birth weight of 5½lbs. or less and 71 (or 81 per cent) were known to have survived four weeks.

The number born at home was 57, of which 3 were subsequently transferred to hospital or nursing homes; the remaining 31 babies were born in institutions. Table VI on page 58 analyses these cases in detail.

Details of the County Council's scheme for the care of premature infants were set out in my Report for 1944.

Care of Unmarried Mothers and their Children

The number of illegitimate children born during the year was 168 (or 7.3 per cent of the total). This represents a slight increase on the figure for 1947 but still remains well below the record high figure for 1945 which was 267 (or 12.1 per cent of the total).

The arrangements made for the care and supervision of illegitimate children and assistance to unmarried mothers which were set out in my Annual Report for 1945 continued to operate satisfactorily.

The County Almoner devotes part of her time to this work, rendering whatever assistance she can to relieve the mothers of any anxiety they may feel about arrangements for their confinements and to safeguard the welfare of the children when born. The scheme relies, to a great extent, on the co-operation of general practitioners, health visitors, district nurse/midwives and the Lincoln Diocesan Association for Moral Welfare—this has always been readily forthcoming. I should like to pay tribute to the work of the Diocesan Association with whom the County Council has an arrangement whereby unmarried expectant mothers from the area are admitted to their Quarry Maternity Home in Lincoln one month before the expected date of confinement and retained

for three months afterwards. The Sheffield Regional Hospital Board has agreed to accept financial responsibility for the actual cost of each confinement in the Home (i.e., for a period of 14 days), the County Council remaining responsible for maintenance costs in respect of the remaining fourteen weeks. I would add that the Association have always been most helpful in securing suitable alternative accommodation for these cases if for some reason they have been unable to find places in their own Home.

As already stated 5 cases were admitted to this Home during the year whilst 1 was sent to a similar home run by another organisation.

Provision of Maternity Outfits

The duty of providing these outfits to patients being confined at home remains with Local Health Authorities. Outfits of an approved type are purchased centrally and supplied to all domiciliary midwives for distribution as necessary. Ninety-five patients benefited in this way during the year.

Nursery Provision

As previously stated, the Grantham Borough Council ceased to be a welfare authority on the 5th July, its functions as such being transferable to the County Council as Local Health Authority. The Day Nursery, with 40 places, established at St. Catherine's Road, therefore became the responsibility of the County Council who have continued to run it to meet the continuing need of mothers employed in factories, shops, etc. in the locality.

Between the 5th July and the 31st December the number of children on the register varied from 38 to 44. In the same period the Nursery was open for 119 days and attendances totalled 3,541.

Child Life Protection

By virtue of the Children Act, 1948 the powers and duties of the County Council under Sections 206-220 of the Public Health Act, 1936 are referred to the Children's Committee. A new department—the Children's Department—has been established in which is centred all welfare work in relation to children deprived of a normal home life. Child Life Protection cases (which are included in this category) previously supervised by the Health Department were therefore transferred to the Children's Department towards the end of the year.

Although, in view of this re-arrangement, the Health Visitors ceased to act as Child Life Protection Visitors they will, as part of their normal health visiting duties, continue to visit every such case under 5 years of age, to give advice to foster parents regarding the child's health and upbringing.

During the year and prior to the transfer referred to 16 visits were made by the Health Visitors as Child Life Protection Visitors.

Nurseries and Child-Minders Regulation Act, 1948

This Act received Royal Assent in July, 1948. It places a duty upon Local Health Authorities to keep registers of, and empowers them to supervise :—

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

The Act does not apply to residential nurseries or to persons—such as foster-parents—who provide a home for children apart from their parents.

From 30th October, 1948, it became an offence for premises to be used as mentioned at (a) without being registered and also for a person, except a relative, to receive children as mentioned at (b) without being registered if the children number more than two and come from more than one household.

The County Council publicised the provisions of the Act throughout the area pointing out to any persons likely to be affected their obligations in this respect but up to the end of the year no applications for registration had been received.

Maternity and Nursing Homes

The arrangements for the registration of nursing homes as required under Sections 187 to 194 of the Public Health Act, 1936, continued as before. On 31st December, 1948, there were 3 registered nursing homes providing accommodation for 16 maternity patients and 3 others ; there were 5 homes providing a total of 34 beds at the end of the previous year.

Nine visits of inspection were paid to these Homes during 1948.

HEALTH VISITING

Prior to the inception of the National Health Service Act, when there existed the two Welfare Authorities (i.e., the Grantham Borough Council and the County Council) providing health visiting services in the area, the County Council directly employed 7 whole-time health visitors and school nurses—each devoting half her time to health visiting and school nursing—and 22 District Nurse-Midwives employed by arrangement with the District Nursing Associations each devoting one tenth of her time to health visiting, making the total the equivalent of 5.7 whole-time health visitors ; the Grantham Borough Council

employed directly 3 whole-time health visitors. The Local Health Authority's area was therefore covered by the equivalent of 8.7 whole-time health visitors. On the appointed day all the staff mentioned came under the direct employ of the County Council who propose to appoint an additional whole-time health visitor as soon as practicable, which will bring their establishment up to the equivalent of 9.7 whole-time health visitors. The County Nursing Superintendent and her two Assistants who had been employed by the Lincolnshire Nursing Association were also transferred to our staff and as hitherto will continue to supervise the health visiting staff.

The County Council has made provision in its scheme for arranging for and contributing towards the cost of selected candidates undertaking training for the Health Visitor's Certificate of the Royal Sanitary Institute. Already, one nurse has been granted facilities under this arrangement to engage in a course of training.

The following is a summary giving particulars of the work done during 1947. No account has, of course, been taken of the visits made by the health visitors employed at Grantham during that part of the year they were employed by that Authority.

First visits to expectant mothers	..	..	..	308*
Total visits to expectant mothers	..	..	..	382*
First visits to children under one year of age	..	..	..	1,979
Total visits to children under one year of age	..	..	..	12,337
Total visits to children between the ages of one and five years	..	..	..	15,192

(*excluding visits by District Nurse-Midwife/Health Visitors which are referred to under "Midwifery")

MIDWIFERY

During the year, notification of intention to practise was received from 75 midwives, 66 of whom continued to practise at the end of the year.

The following tables A and B show the number of cases they attended :—

A—Cases Attended During the Period 1st January—4th July, 1948

	Domiciliary Cases		Cases in Institutions		Total	
	As Mid-wives (1)	As Mater'y Nurses (2)	As Mid-wives (3)	As Mater'y Nurses (4)	As Mid-wives (5)	As Mater'y Nurses (6)
(1) Employed by County Council	—	—	60	7	60	7
(2) Employed by Voluntary Associations ..	474	243	131	98	605	341
(3) In Private Practice ..	21	10	*40	*96	61	106
Totals ..	495	253	231	201	726	454

B—Cases Attended During the Period 5th July—31st December

	Domiciliary Cases		Cases in Institutions		Total	
	As Mid-wives (1)	As Mater'y Nurses (2)	As Mid-wives (3)	As Mater'y Nurses (4)	As Mid-wives (5)	As Mater'y Nurses (6)
(1) Employed by County Council	427	241	—	—	427	241
(2) Employed by Voluntary Organisations ..	—	—	—	—	—	—
(3) Employed by Hospital Management Committ's ..	—	—	203	99	203	99
(4) In Private Practice ..	5	12	*30	*75	35	87
Totals ..	432	253	233	174	665	427

* Nursing Home Cases

N.B.—The re-arrangement of administrative procedure due to the inception of the National Health Service on the 5th July has made it necessary this year to split up these statistics as above.

It will be seen from these figures that a total of 2,272 maternity patients were attended by midwives in the County during 1948 as follows :—

Domiciliary Cases			Cases in Institutions		
As Midwives	As Maternity Nurses	Total	As Midwives	As Maternity Nurses	Total
927	506	1433	464	375	839

Comparative figures for the preceding five years are as follows :—

	Domiciliary Cases			Cases in Institutions		
	As Midwives	As Maternity Nurses	Total	As Midwives	As Maternity Nurses	Total
1943	859	492	1351	396	367	763
1944	864	468	1332	444	454	898
1945	867	451	1318	505	383	888
1946	833	544	1377	439	417	856
1947	991	633	1624	450	405	855

Thus the total number of confinements which were conducted by midwives was 1,391 as compared with 1,441 in 1947, whilst in 881 cases they were present as maternity nurses under supervision as against 1,038 in 1947.

The arrangements for the inspection and supervision of midwives were not subject to any material change, the County Nursing Superintendent and her two Assistants continuing to remain responsible for this work upon transfer to our staff. Ninety-seven visits for routine inspections and 117 special visits were paid during the year.

The number of cases in which medical aid was summoned by a midwife under Section 14 (i) of the Midwives Act, 1918 totalled 361—341 domiciliary cases and 20 cases in institutions.

Notifications from midwives were also received as follows :—

Stillbirths	..	..	..	..	..	..	..	25
Laying-out the dead	..	..	..	..	..	..	..	3
Liability to be source of infection	..	..	..	..	..	..	..	18
Artificial Feeding	..	..	..	..	..	..	..	170
Death of Mother or Child	..	..	..	..	..	..	..	5

Prior to the coming into operation of the National Health Service Act the County Council, as local supervising authority under the Midwives Acts, were providing a domiciliary midwifery service of salaried midwives covering the whole of the Authority's area. This service was provided by arrangement with 36 District Nursing Associations which normally employed a total of 43 nurse-midwives (equivalent to $22\frac{1}{4}$ whole-time midwives), and was regulated by a formal agreement entered into by the County Council and the Lincolnshire Nursing Association to which all the District Nursing Associations were affiliated.

The Lincolnshire Nursing Association themselves employed directly a County Nursing Superintendent, 2 Assistant Superintendents and 2 whole-time relief midwives.

Thirty-four of the 36 Associations each maintained a car for the use of midwives employed by them and in addition 3 cars were provided by the Lincolnshire Nursing Association for the use of their County Nursing Superintendent, her Assistants and as reserve.

A grant was paid by the County Council to the Lincolnshire Nursing Association in respect of (a) salaries, insurance, superannuation contributions, (b) cars, bicycles, telephones, uniform, laundry and nursing requisites and (c) administration expenses.

On the appointed day all the staff mentioned above were transferred to the staff of the Health Department and their salaries became payable directly by the County Council. No changes were made in the locations of nurse-midwives and each continued to cover her area as hitherto. It was, however, decided to strengthen the personnel at Grantham by the appointment of 2 additional whole-time midwives. Thus the County Council proposed to employ directly the equivalent of $26\frac{1}{4}$ whole-time midwives.

A new agreement was entered into with the Kesteven Nursing Association (which superseded the Lincolnshire Nursing Association) delegating the function of day-to-day local administration of the service to that organisation.

In pursuance of their policy to provide adequate transport for their nursing staff the County Council arranged to take over the 3 cars of the Lincolnshire Nursing Association and all but one of the 34 cars provided by the District Nursing Associations. In addition two new cars were provided for Stamford and Sleaford which had hitherto been worked by cycles. Eight orders were outstanding at the 5th July for replacement cars and two of these were delivered before the year expired.

The County Council are continuing to provide facilities for the training of midwives in the administration of analgesics and are supplying approved apparatus as necessary. It was not possible to spare any County Midwives for training during the year owing to persistent shortage of staff. At the end of the year the total number of our midwifery staff qualified to administer analgesics amounted to 8, whilst in institutions there were 9 midwives so qualified.

It is the Authority's intention, where necessary, to provide housing accommodation for their nursing staff and they will in fact early in the new year be making certain proposals for the erection of houses in districts where vacancies cannot be filled.

The following statistics relating to the work of the midwives employed by the District Nursing Associations and, subsequent to the 5th July, by the County Council may be of interest :—

As Midwives :—

No. of cases attended	..	..	..	..	..	901	(427)
No. of these mothers who were primiparae	..	..	..	..	..	186	
No. of miscarriages	..	..	..	..	..	23	(11)
No. of maternal deaths	..	..	..	..	..	—
No. of ante-natal visits	..	..	..	..	..	8254	(4194)
No. of visits paid	..	..	..	..	..	14337	(6752)
No. of cases to whom gas and air was administered	..	..	..	..	..	67	(37)

As Maternity Nurses :—

No. of cases attended	..	..	..	..	..	484	(241)
No. of maternal deaths	..	..	..	..	..	—
No. of visits paid	..	..	..	..	..	9025	(4569)
No. of cases to whom gas and air was administered	..	..	..	..	..	31	(20)

NOTE—The figures in brackets relate to the period 5th July—31st Dec.

HOME NURSING

In this County the Home Nursing service is closely allied to the Midwifery service in that the staff employed in the latter, apart from a very few exceptions, hold joint appointments as nurse-midwives responsible for both nursing and midwifery in the respective districts to which they have been appointed. What has already been said regarding the administrative arrangements in force for the operation of the Midwifery Service therefore applies here.

In preparing our scheme for Home Nursing it was considered desirable, that in addition to the 43 district nurse-midwives (equivalent to 16.35 whole-time nurses for home nursing) provision should be made for the employment of 7 additional whole-time home nurses in order to cover fully the Authority's area, thus giving us the equivalent of 23.35 whole-time home nurses.

During the year under review 2,604 cases were attended by home nurses, involving a total of 36,793 visits; figures for the period 5th July—31st December were 1,318 and 17,273 respectively.

VACCINATION AND IMMUNISATION

Vaccination

The National Health Service Act, 1946 repealed all previous Acts, Orders, etc., relating to vaccination, and parents of children are now no longer required to accept compulsory vaccination or make a statutory declaration if they do not wish their children protected against smallpox. Vaccination is now voluntary and free of cost to parents and the County Council has made arrangements for the individual vaccination of infants by medical practitioners in Kesteven, the majority of whom have agreed to take part in the Council's scheme.

Arrangements will be made to hold special sessions for vaccination in the light of experience and local needs and circumstances. Midwives, health visitors and all personnel whose duties afford them appropriate opportunity are requested to encourage infant vaccination. The proposal relating to diphtheria immunisation regarding the submission of records and payment of fees also applies in the case of infant vaccination.

During the period 5th July to 31st December, 1948 the number of persons vaccinated was as follows:—

Age at 31/12/48 <i>i.e.</i> born in years	Under 1 1948	1 to 4 1944—1947	5 to 14 1934—1943	15 or over Before 1934	Total
No. vaccinated ..	150	10	10	16	186
No. re-vaccinated ..	—	1	3	29	33

Diphtheria Immunisation

Prior to 1st January, 1946, the responsibility for the immunisation of children of all ages, generally speaking, rested with the local sanitary authorities. In November, 1945, the Minister of Health decided that there should be a more uniform and intensified method to secure the immunisation of many young children before they attained the age of one year, or failing this, before they reached school age. It was ruled that as from 1st January, 1946, the responsibility for immunising such children should rest with the Welfare Authorities, which in Kesteven placed this duty on the County Council (with the exception of the Borough of Grantham), and the District Councils would continue to carry out the arrangements for the protection of children between the ages of five and fifteen years.

Under Section 26 of the National Health Service Act, 1946, it became the duty of every Local Health Authority to make arrangements with medical practitioners for the vaccination of persons in their area against smallpox, and the immunisation of such persons against diphtheria.

The County Council's scheme of proposals was drawn up accordingly to cover the immunisation of children under five years of age and children of school age, and clinic sessions are held, as considered necessary, at the County Council's Infant Welfare Centres. Individual immunisations are carried out at the surgeries of medical practitioners or at the house of the patient. Steps are taken to encourage immunisation against diphtheria through the medium of health visitors, midwives and teachers, and health visitors in particular are urged to secure the immunisation of children under five in their respective districts. Arrangements have been made for reinforcing injections to be given to children of school age who have been immunised in infancy or later. All medical officers and general practitioners performing immunisations are required to furnish particulars, for record purposes, on a standard form which is submitted to the County Council and for which a standard fee will be paid. Every medical practitioner practising in Kesteven has been given the opportunity to participate in the scheme, and any necessary materials, as distinct from equipment, required for diphtheria immunisation is provided free of cost by the Local Health Authority.

During the six months ended 31st December, 1948, the number of children who completed a full course of primary immunisation was as follows :—

Children under five years	..	..	..	..	..	718
Children five to fourteen years	..	..	..	..	..	34
						<hr/> 752
Total No. of children who were given a secondary or reinforcing injection	..	..	..	..	..	<hr/>72

The number of children at 31st December, 1948 who had completed a full course of immunisation *at any time before that date* (i.e., at any time since 1st January, 1934) was as follows :—

Age at 31/12/48 <i>i.e.</i> born in year	Under 1 1948	1 1947	2 1946	3 1945	4 1944
No. immunised ..	169	872	1668	1562	1490
Age at 31/12/48 <i>i.e.</i> born in year	5 to 9 1939—1943		10 to 14 1934—1938		Total under 15
Number immunised	6370		3681		15812
(a) Estimated mid-year 1948, population of Children under five ..					10,707
(b) Estimated mid-year 1948, population of Children 5—14 ..					16,425
					Total .. 27,132

Owing to the limited information available from some of the District Councils of previous records held by them it was not found possible to present an accurate figure of the number of children in Kesteven who have been immunised against diphtheria, and the figures given above can only be taken as a reasonably accurate estimate.

AMBULANCE SERVICE

The duty to provide a free ambulance service “for the conveyance of persons suffering from illness or mental defectiveness or expectant or nursing mothers from places in their area to places in or outside their area” was placed upon Local Health Authorities by Section 27 of the National Health Service Act 1946.

This is a new function for many County Councils (including Kesteven) who may provide the service themselves or pay voluntary agencies to do so.

In this administrative County certain areas are covered by joint arrangements with neighbouring authorities or through agents as follows :—

(A)—(i) The Stamford Division of the St. John Ambulance Brigade provides an Ambulance Service to cover the parishes of Stamford, Uffington, Tallington, West Deeping, Deeping St. James, Market Deeping, Langtoft, Barholm-and-Stowe, Greatford, Braceborough and Wilsthorpe, Carlby, Careby, Aunby and Holywell, and Castle Bytham; three ambulances are provided and stationed at East Street, Stamford; volunteer drivers and attendants are provided from its members.

(ii) The Stamford Detachment of the British Red Cross Society provides a sitting-case car service to cover the parishes of Stamford, Uffington, Tallington, West Deeping, Deeping St. James, Market Deeping, Langtoft, Barholm-and-Stowe, Greatford, Braceborough and Wilsthorpe, Carlby, Careby, Aunby and Holywell, and Castle Bytham. One car is provided and stationed at the British Red Cross Society Headquarters, 12 Wharf Road, Stamford. The volunteer drivers and attendants are provided from the Detachment, as well as additional sitting-case cars (owner-drivers), when required.

(iii) The City of Lincoln provides a comprehensive Ambulance Service (including sitting-case cars) to cover the rural district of North Kesteven and the parishes of Blankney, Scopwick and Temple Bruer of the East Kesteven Rural District.

(B)—The County Council organised the existing resources of the remainder of the administrative County into a separate Ambulance Service, including sitting-case cars (for an interim period pending consideration of the question of combining the Ambulance and Fire Services) in the districts concerned, i.e., the Borough of Grantham, the Urban District of Bourne, the Urban District of Sleaford, the Rural District of West Kesteven, the Rural District of East Kesteven (excluding a small section to be covered by the City of Lincoln Service, see (A) (iii) above), and the Rural District of South Kesteven (excluding that portion to be covered by the Stamford Division of the St. John Ambulance Brigade and the Stamford Detachment of the British Red Cross Society as Agents, see A (ii) above), as follows :—

Ambulances

(i) Eight of the 9 ambulances operating in the districts concerned were acquired which, with the vehicle already belonging to the County Council, provides a total of nine ambulances. These are stationed as follows :—

Grantham	4
Sleaford	3
Bourne	2

Sitting-Case Cars

(ii) Orders were placed for three sitting-case cars which, with the one already belonging to the County Council, stationed at Grantham, would provide a total of four such vehicles. Only one of these cars has been delivered, and this is now operating from Sleaford.

There are also nine owner-drivers who are paid the standard rate of 6d. per mile ; they are stationed at :—

Grantham	5
Sleaford	3
Bourne	1

All County Council-owned ambulances and sitting-case cars are serviced and maintained by commercial garages, and the necessary steps have been taken to secure first priority for all such work.

Orders were placed for five new ambulances, one of which has been delivered and is now operating from Grantham.

One redundant ambulance was subsequently disposed of.

Personnel

(a) *Whole-time Drivers.* In addition to the whole-time driver transferred from the Sleaford Urban District Council, it was necessary to appoint a second whole-time driver to make adequate provision for Grantham.

(b) *Part-time Drivers.* Ten part-time retained drivers (Grantham 5, Sleaford 3, Bourne 2) were employed to supplement the above. Arrangements were made with the commercial garages in each of the districts concerned to provide additional drivers when required.

(c) *Attendants.* Volunteer attendants are supplied, on a rota basis, by members of the St. John Ambulance Brigade and the British Red Cross Society :—

Grantham	British Red Cross Society
Sleaford	St. John Ambulance Brigade
Bourne	St. John Ambulance Brigade and British Red Cross Society

Personnel are trained in the disinfection and disinfestation of vehicles and equipment.

Arrangements were made for the six ambulance drivers at Grantham to receive a course of instruction in First Aid. The men have completed their training and were successful in passing the examination.

Arrangements were made for the Sleaford drivers to attend for First Aid Training and revision.

At Bourne the drivers are fully trained members of the St. John Ambulance Brigade.

All the personnel have, without exception, carried out their duties satisfactorily.

Journeys and Mileages

Below is a summary of the journeys made during the three-month period July to September, 1948, inclusive :—

Depot	Ambulances		Sitting-Case Cars		Totals	
	Journeys	Mileage	Journeys	Mileage	Journeys	Mileage
Grantham ..	260	5292	225	6008	485	11300
Sleaford ..	129	5619	21	2405	150	8024
Bourne ..	65	2903	1	22	66	2925
Totals ..	454	13814	247	8435	701	22249

Average journey approx. 31 miles

Summary of journeys made during the three months' period October to December, 1948 (inclusive) :—

Depot	Ambulances		Sitting-Case Cars		Totals	
	Journeys	Mileage	Journeys	Mileage	Journeys	Mileage
Grantham ..	456	7177	384	7594	840	14771
Sleaford ..	164	7572	57	3329	221	10901
Bourne ..	81	2573	25	1129	106	3702
Totals ..	701	17322	466	12052	1167	29374

Average journey approx. 25 miles

The total mileage for the quarter ended 31st December, 1948 shows an increase of 7,125 miles over the previous three-monthly period : this figure represents an increase of 32.02 per cent.

Stamford

Summary of the journeys carried out on behalf of the Kesteven County Council by the St. John Ambulance Brigade (*Ambulances*), and the British Red Cross Society (*Sitting-Case Cars*), operating from Stamford :—

Period	Ambulances		Sitting-Case Cars		Totals	
	Journeys	Mileage	Journeys	Mileage	Journeys	Mileage
Quarter ended 30/9/48 ..	133	697	73	4952	206	5649
Quarter ended 31/12/48 ..	124	1974	123	6886	247	8860
Totals ..	257	2671	196	11838	453	14509

Average journey approx. 31 miles

The total mileage for the quarter ended 31st December, 1948, shows an increase of 3,211 miles over the previous three-monthly period ; this figure represents an increase of 56.84 per cent.

North Kesteven and Part of East Kesteven

The following information relating to Kesteven cases dealt with by the Lincoln Ambulance Service under the Joint Scheme has been received from the Lincoln City Health Department :—

Period	Journeys	Mileage
Quarter ended 30th September, 1948	116	2493
Quarter ended 31st December, 1948	231	5296
Totals	347	7689

Average journey approx. 22 miles

The total mileage for the quarter ended 31st December, 1948, shows an increase of 2,803 miles over the previous three-monthly period: this figure represents an increase of 112.43 per cent.

Particulars as supplied to the Ministry of Health relating to the operation of the Service during the period 5th July—31st December, 1948 will be found in Table VIII, page 60.

PREVENTION OF ILLNESS, CARE AND AFTER-CARE

Section 28 of the National Health Service Act permits Local Health Authorities, with the approval of the Minister, to make arrangements for the prevention of illness and for the care and after-care of sick or mentally defective persons, but requires authorities to make such arrangements only to such extent as the Minister directs. To date the only disease or illness subject to such direction has been Tuberculosis and brief details of the County Council's arrangements in connection with sufferers from this disease are as follows :—

The Local Health Authority have constituted a sub-committee of the Health Committee—the Maternity and Child Welfare, Care and After-care Sub-Committee—(which *inter alia* functions as a Tuberculosis Care and After-care Committee for the Authority's area) to which all functions relating to the treatment, care and after-care of tuberculosis patients and their families are referred.

The principal function of this Committee is to give practical advice and help by considering the social and economic conditions of each patient and, where necessary, to assist in the modification of the conditions so as to secure for the patient the maximum advantage from treatment to enable him to live and work under satisfactory conditions and to assist his family to be maintained in health and economic independence.

To this end, ancillaries to treatment such as additional nourishment, sleeping shelters, beds and bedding, etc., are provided. Some idea of the extent to which help was given in this way during 1948 will be gained by reference to pages 42 and 43 of this Report where details are given of the work undertaken in this respect. The County Almoner has devoted much of her time to assisting patients to overcome the various problems with which they are confronted. The County Health Visitors undertake regular visitation of patients not only to advise and help where necessary, but to collect information on social conditions which is passed on to the Chest Physicians of the Regional Hospital Boards who are now responsible for treatment. The Health Visitors, as part of their duties under this Section, continue to attend at the Boards' Chest Clinics to give the Physicians whatever assistance they may require.

In addition to the above the Authority has included in its scheme under this section proposals for the care and after-care of persons suffering from mental illness or defectiveness and their functions in this respect are complementary to the powers and duties conferred or imposed on them by the Lunacy and Mental Treatment Acts and the Mental Deficiency Acts as amended by the National Health Service Act.

They hope, too, to be able to arrange with the appropriate Regional Hospital Boards for the County Almoner to follow-up persons under treatment for venereal disease and persons known or believed to be sources of this disease.

It is intended to develop arrangements in the light of circumstances and experience, affording all necessary care and after-care to persons discharged from hospitals and persons suffering from illness generally. Nurses loan cupboards from which equipment may be dispensed to patients being nursed at home will be expanded and Medical Loan depots from which major items of nursing equipment can be supplied are to be provided in the main centres of population in the County either directly or by arrangement with voluntary agencies.

DOMESTIC HELP

An important power has been given to Local Health Authorities under Section 29 of the National Health Service Act to provide, on reasonable payment according to the means of the recipient, domestic helps "for households where such help is required owing to the presence of any person who is ill, lying-in, an expectant mother, aged, or a child not over compulsory school age." In pursuance of this provision the County Council made provision in their scheme for the continuation of the service formerly provided in Grantham and as opportunity permits will

establish a service throughout the remainder of its administrative area. In the first place it is intended to concentrate on the larger centres of population ultimately extending our arrangements to cover the more sparsely occupied rural areas, where from experience, it has never been found possible in the past to recruit the necessary workers. An Organiser for the Service has not been appointed and the County Almoner is for the time being acting in this capacity. If, in view of future developments, the appointment of an organiser appears to be necessary the matter will be reconsidered.

In the Grantham area the number of domestic helps employed during the period 5th July to 31st December varied from 14 to 20, all part-time. They were engaged for a total of 5,217 hours in giving assistance in 63 cases, 20 of which were maternity where the confinements were conducted at home. In one instance assistance towards the cost of domestic help was granted to a tubercular patient in another part of the County.

MENTAL HEALTH

1—Administration

(a) The Local Health Authority has constituted a Mental Health Services Sub-Committee of the Health Committee to which all duties relating to mental health are referred. This Sub-Committee consists of 10 members—8 of whom are County Councillors and the remainder co-opted members—and meets at approximately quarterly intervals.

(b) The County Medical Officer of Health is responsible to the Sub-Committee for the administration and control of the Mental Health Services and Dr. N. K. Henderson, Medical Superintendent of the Rauceby Hospital acts by arrangement with the Sheffield Regional Hospital Board as Medical Adviser to the Committee for mental and mentally defective cases as he used to do for the County Council's Mental Deficiency Committee when that was functioning prior to the inception of the National Health Service Act.

The Non-medical staff comprise the following :—

- (i) W. E. Vickers, M.B.E., who in addition to his duties as County Welfare Officer holds the office of Chief Lay Administrator of the Mental Health Services.
- (ii) J. W. Allpress, Duly Authorised Officer—East Kesteven District.
- (iii) W. E. Baker, Duly Authorised Officer—South Kesteven District.
- (iv) B. J. Brown, Duly Authorised Officer—West Kesteven District.
- (v) W. Holmes, Duly Authorised Officer—North Kesteven District.
- (vi) N. A. Clarke, Assistant Duly Authorised Officer at headquarters.

Woman Assistant to visit mental cases—not yet appointed.

All non-medical staff have had practical experience in the duties connected with Mental Deficiency and Lunacy and Mental Treatment.

(c) Supervision of patients on trial or licence from Mental Hospitals and Institutions for Mental Defectives is at present undertaken by officers of the Regional Hospital Board.

(d) No duties have actually been delegated to Voluntary Associations but should the County Council fail to obtain a Psychiatric Social Worker of their own it is hoped to arrange for the part-time services of a worker to be made available through the National Association for Mental Health.

(e) All non-medical staff, with the exception of Mr. J. W. Allpress, have attended a comprehensive course on Mental Health arranged in conjunction with the Director of Extramural Studies of Sheffield University.

2—Work Undertaken in the Community

(a) As stated above it is the intention of the Authority to appoint a part-time Psychiatric Social Worker to undertake community care work amongst mental patients and the duly authorised officers on the staff act as mental health workers under the Mental Deficiency Acts.

(b) Details of the cases dealt with by duly authorised officers under the Lunacy and Mental Treatment Acts, 1890—1930 during the period 5th July—31st December are as follows :—

Certified under Lunacy Acts	..	..	..	..	..	39
Voluntary Patients under Mental Treatment Act, 1930	..	..	..	..	..	15
Urgency Orders	..	..	..	..	..	2
Miscellaneous Cases	..	..	..	..	..	7

(c) (i) Thirteen cases were ascertained under the Mental Deficiency Acts, 1913—1938 during the year and at the end of the year there were 11 defectives awaiting vacancies in Institutions.

(ii) There were no cases under Guardianship in the County during the year.

(iii) With regard to the training of mental defectives, experience has shown that there is not the same scope for this in sparsely populated areas as there is in the larger urban centres and it would appear that there is not in any one area of the Administrative County a sufficient number of mental defectives to justify the establishment of an occupation centre. Therefore it is not proposed at the present time to establish such a centre but if it should be found practicable to arrange home training—and this does not seem likely at the moment—the Authority will endeavour to make such provision.

The following table shows the number of certified and ascertained defectives within the County at the end of the year.

	<i>Males</i>	<i>Females</i>	<i>Total</i>
1—(a) In Certified Institutions	73	82	155
(b) On Licence from Institutions	8	11	19
2—Under Statutory Supervision	58	37	95
3—Under Voluntary Supervision	45	44	89
4—Ascertained patients in residential establishments	11	17	28
5—At present certified under Section 14 of the Lunacy Act and detained in Mental Hospitals	5	12	17
	200	203	403

3—Ambulance Service

The County Council's ambulance service is available for the transportation of cases of mental illness or defectiveness and all mental health workers, both non-medical and medical, are authorised to call out ambulances or sitting-case cars as necessary.

Where it is necessary for trained attendants to accompany patients, these are provided by arrangement with the appropriate Hospital Management Committees.

The Authority was responsible in this way for providing transport for 5 cases during the period 5th July to 31st December.

PREVALENCE OF, AND CONTROL OVER INFECTIOUS DISEASES

Three thousand three hundred and eight-four cases of infectious diseases were notified to the District Medical Officers of Health during 1948, compared with 2,006 in 1947, 537 in 1946, 1,669 in 1945, 682 in 1944 and 2,115 in 1943.

The Notification Rates per 1,000 civilian population were as follows :—

	<i>County of Kesteven</i>	<i>England and Wales</i>
Small pox	0.00	0.00
Typhoid fever	0.00	0.01
Para-typhoid fever		
Scarlet fever	1.32	1.73
Diphtheria	0.08	0.08
Measles	21.68	9.34
Whooping cough	4.37	3.42
Acute Pneumonia	0.48	0.73
Cerebro-spinal fever	0.00	0.03
Erysipelas	0.12	0.21

A Table showing the distribution, etc., of the notified cases will be found on page 59 of this Report.

The County Council continued to administer the Isolation Hospital and Sanatorium, Bourne, on an agency basis from 5th July to 1st December, 1948, when the control of the Hospital was taken over by the Peterborough Area Hospital Management Committee.

Towards the end of the year it was found possible to re-open the fever block and admit a limited number of infectious disease patients. The shortage of nursing and domestic staff still remained a major problem in providing institutional accommodation for Infectious Diseases cases.

Smallpox.—Again no cases of this disease were notified in the County; the last occasion upon which Smallpox occurred in Kesteven was in 1931.

Typhoid and Para-typhoid Fevers.—No cases of this disease were notified during the year and only three cases have been recorded during the past five years.

Scarlet Fever.—One hundred and fifty-eight cases of this disease were recorded, compared with 100 in 1947, and an average of 153 during the years 1941-47. The incidence, which was evenly distributed throughout the year, was less than that for the Country as a whole (see Notification Rates given above).

There were no fatalities.

Diphtheria.—The continued low incidence of this dangerous disease is very gratifying, only ten cases being reported with no deaths. The average number for the quinquennium 1943-47 was 21.

Measles.—There were 2,592 cases notified to the District Medical Officers of Health during the year and of these no fewer than 1,221, or 47 per cent of the total occurred in the Borough of Grantham and West Kesteven Rural District Council, where the disease was chiefly prevalent in the first three months of the year. Fortunately there were no deaths although the incidence of measles in the County was considerably higher than in England and Wales. The following is a summary of the cases notified and the deaths registered during the past 9 years:—

<i>Year</i>	<i>Cases</i>	<i>Deaths</i>
1940 ..	757 ..	2
1941 ..	1,625 ..	1
1942 ..	352 ..	—
1943 ..	1,599 ..	3
1944 ..	44 ..	—
1945 ..	1,093 ..	1
1946 ..	111 ..	—
1947 ..	1,056 ..	—
1948 ..	2,592 ..	—

(It will be noted that Measles is usually epidemic every second year).

Whooping Cough.—The 523 cases of this disease during 1948 was above the average for the previous five years and the incidence was slightly higher than that for the Country. There was one death—that of a young girl under five years of age.

Pneumonia.—Only Acute Primary and Acute Influenzal Pneumonias are notifiable, and 57 cases coming within these categories were notified during 1948, compared with 60 in 1947 and 84 in 1946. Deaths from *all forms* of Pneumonia numbered 52—1 less than last year.

Cerebro-spinal Fever.—There was one death of a child under one year of age.

Ophthalmia Neonatorum:—No cases were notified in the County during the year.

Puerperal Pyrexia.—The 5 cases reported during 1948 represent a Notification Rate of 2.1 per thousand total births (live and still) as compared with a National figure of 6.89. The average number of notifications received during the previous 5 years was 16. There were no deaths from Puerperal Sepsis during the year under review.

Dysentery.—During the last week of March, 13 cases of this disease occurred in the South Kesteven Rural District. No other notifications were received or recorded during the year.

Erysipelas.—Fourteen cases (10 in 1947) were notified in the County during the year, representing a Notification Rate of 0.12 (0.21 for England and Wales) per thousand of the civilian population.

Acute Poliomyelitis.—Twelve non-fatal cases were reported during the year compared with 32 cases with 5 fatalities during 1947.

TUBERCULOSIS

Details of the new cases of Tuberculosis coming to the notice of the County Health Department during the year under review, and of the deaths from this disease were as follows:—

Age Period	New Notifications (including Supplemental Return)				Deaths			
	Respiratory		Non-Resp.		Respiratory		Non-Resp.	
	M	F	M	F	M	F	M	F
Under 1 year	—	—	—	—	—	—	1	—
1—5 years	—	1	3	1	—	1	—	—
5—15 „	2	3	3	4	—	—	—	—
15—25 „	10	17	—	3	9	9	1	2
25—35 „	12	12	—	1				
35—45 „	4	6	—	1				
45—55 „	6	4	—	1				
55—65 „	1	—	1	—	6	3	1	2
65 and upwards	4	2	—	—				
TOTALS ..	39	45	7	11	16	16	3	4

Of the above 102 new cases, 31 (25 respiratory and 6 non-respiratory) were included in the Supplemental Return to the Ministry of Health, 18 being transfers from other areas, and information concerning the other 13 cases was obtained from the Death Returns.

In comparison, there were 103 new cases in 1947 (31 respiratory and 8 non-respiratory), 122 in 1946 (78 and 44), 163 in 1945 (107 and 56), and 122 (94 and 28) in 1944.

The 32 deaths from respiratory tuberculosis represent a mortality rate of 0.27 per thousand of the civilian population—somewhat lower than the average for the previous 5 years. The 7 deaths from other forms of tuberculosis (bones, joints, glands, etc.) were equivalent to a death rate of 0.06. Comparative information relating to the deaths from tuberculosis during the last decennium is as follows :—

	<i>Respiratory Tuberculosis :</i>		<i>Non-Resp. Tuberculosis :</i>	
	<i>No. of Deaths</i>	<i>Death Rate</i>	<i>No. of Deaths</i>	<i>Death Rate</i>
1939 ..	40	0.35	11	0.10
1940 ..	33	0.30	7	0.06
1941 ..	36	0.32	12	0.11
1942 ..	35	0.31	10	0.09
1943 ..	38	0.33	16	0.14
1944 ..	36	0.32	7	0.06
1945 ..	22	0.20	9	0.08
1946 ..	37	0.33	10	0.09
1947 ..	42	0.36	10	0.09
1948 ..	32	0.27	7	0.06

The arrangements for the diagnosis and treatment of Tuberculosis became the responsibility of the Regional Hospital Boards from 5th July, 1948, but this work continued to be undertaken by the Local Health Authority, on their behalf, on an agency basis and the following is a summary of the work carried out during the year :—

(a) *Dispensaries.*—The Grantham Tuberculosis Dispensary removed from 42 to 29 Watergate on 10th July, 1948. The days and times of openings of the dispensaries at Grantham, Lincoln and Sleaford, also the facilities at Bourne and Stamford, were as set out in previous reports. A total of 2,463 attendances were made to see the tuberculosis officers during 1948 compared with 2,399 in 1947; details are as follows :—

Watergate, Grantham	914
Lafford House, Eastgate, Sleaford	539
30 Lindum Road, Lincoln	688
Bourne and Stamford Clinics (by arrangement only)	322

In addition to the work carried out at the Dispensaries, a large number of patients—both definite cases as well as contacts—have, of necessity, been supervised in their own homes because of the peculiar difficulties encountered in the more sparsely populated areas.

On 31st December, 1948, there were 384 definite cases of tuberculosis on the Dispensary Registers—271 respiratory and 113 non-respiratory—compared with 420 the previous year. Table IX, on page 61 shows in detail the classification of the patients dealt with during the year.

(b) *Artificial Pneumothorax Treatment*.—Seven hundred and fifty-nine refills were given to 43 patients, compared with 908 treatments the previous year.

The special session for refills continued at the Grantham Dispensary on alternate Friday afternoons; patients receiving this form of treatment are regularly “screened.”

(c) Still greater use was made of *x-ray Examinations* for diagnostic purposes as well as for supervising contacts and definite cases. No fewer than 1,384 full-size films were taken during 1948, compared with 1,026 in 1947 and 802 in 1946.

(d) *Maintenance and Discretionary Allowances, Special Payments*.—Payment of these allowances to certain persons suffering from Respiratory Tuberculosis continued in accordance with the provisions of Ministry of Health Memorandum 266/T and Circular 222/46 (which authorised increased allowances for dependent children, with effect from 16th December, 1946). The average number of patients in receipt of this financial assistance was 33 to whom the total weekly maintenance and discretionary allowances amounted to £42. After 5th July Tuberculosis allowances became payable by the National Assistance Board under the National Assistance Act, 1948, and the County Almoner now refers all patients eligible for such allowances to the appropriate office of the Assistance Board; excellent co-operation from all the area officers has been forthcoming.

A total of one hundred and thirty-four Kesteven patients received benefit during the period this scheme was in operation, i.e., from October, 1943 to 5th July, 1948.

(e) *Institutional Treatment*.—The number of beds in sanatoria provided by the County Council for the diagnosis and treatment of Respiratory Tuberculosis was the same, viz., 37—details of which were given in my 1943 Annual Report. The majority of non-respiratory cases were treated in The Grantham and Kesteven General Hospital under the comprehensive agreement with that hospital.

A total of 115 individual patients received institutional treatment under the County Tuberculosis Scheme during the year (compared with 127 in 1947, 120 in 1946, 134 in 1945, and 132 in 1944)—98 for respiratory or suspected respiratory tuberculosis and 17 for other forms, as follows :—

	Respiratory			Non-Respiratory			Grand Total
	Male	Female	Total	Male	Female	Total	
Creton Sanatorium	25	16	41	—	—	—	41
Kelling Sanatorium	13	—	13	—	—	—	13
Bourne Isolation Hospital ..	15	17	32	—	—	—	32
Papworth Hall Colony	—	1	1	—	—	—	1
Branston Sanatorium	—	10	10	—	—	—	10
Preston Hall Colony	1	—	1	—	—	—	1
The Brompton Hospital	1	—	1	—	—	—	1
Grantham & Kesteven General Hospital	1	—	1	6	2	8	9
County Hospital, Lincoln	—	—	—	1	—	1	1
Harlow Wood Orthopaedic Hospital	—	—	—	3	3	6	6
Stamford, Rutland & General Infirmary	—	—	—	—	1	1	1
Gt. Ormond St., Children's Hospital	1	—	1	—	—	—	1
County Gen. Hosp., Worksop ..	1	—	1	—	—	—	1
Norfolk & Norwich Hospital ..	1	—	1	—	—	—	1
Children's Hospital, Gringley-on-the-Hill ..	—	—	—	—	1	1	1
Children's Hospital, Birmingham	—	1	1	—	—	—	1
Ransom Sanatorium	1	—	1	—	—	—	1
Ranks Wood Hospital	—	—	—	1	—	1	1
Corporation Hospital, Scartho ..	—	1	1	—	—	—	1
St. Bartholomew's Hospital, London	1	—	1	—	—	—	1
TOTAL	61	46	107	11	7	18	125

NOTE.—Nine Respiratory and one non-respiratory cases were either transferred from one institution to another or re-admitted during the year.

It was not necessary to take any action under the Public Health (Prevention of Tuberculosis) Regulations, 1925 (relating to persons suffering from pulmonary tuberculosis employed in the milk trade), or under Section 172 of the Public Health Act, 1936 (relating to the compulsory removal to hospital of persons suffering from tuberculosis).

Under the Authority's scheme for the Prevention of Illness, Care and After-care, the following additional services were provided during the year :—

(a) *Eight Sleeping Shelters*.—for open air treatment of Tuberculosis patients were on loan during 1948, and four new revolving shelters were purchased as reserves.

(b) *Extra Nourishment* in the form of free liquid milk was supplied to 11 patients at cost of £44 (15 and £89 in 1947).

(c) One thousand, two hundred and forty *Domiciliary Visits* were paid by the County Health Visitors to the homes of patients—an increase of 78 on the 1947 figure.

The County Almoner attended most clinics at Lincoln, Grantham and Sleaford during this period, and visited patients in their homes where necessary.

(d) The British Red Cross and the W.V.S. have helped with food parcels, and the Education Department have co-operated in providing books for training purposes where a patient has been unable to return to his previous work.

VENEREAL DISEASES

The special treatment centre at Grantham was transferred from 13a Elmer Street to 42 Watergate on 1st January, 1948, and on 5th July, this centre was moved to 29 Watergate, Grantham.

From 5th July, 1948 the responsibility for the diagnosis and treatment of persons suffering from venereal diseases rested with the Regional Hospital Boards, and owing to the change-over in the administration of this service, statistics are not available for this year.

CANCER

The volume of work on behalf of Kesteven patients under the scheme for the diagnosis and treatment of cancer was well maintained up to 5th July, when this service, established under the Cancer Act of 1939, was taken over by the Regional Hospital Boards.

During the period 1st January, 1948 to 4th July, 1948, a total of 130 consultations—48 with male patients and 82 with female patients—were held at the three *Out-patient Consultative Clinics* (County Hospital, Lincoln, Grantham and Kesteven General Hospital and The Stamford, Rutland and General Infirmary) by Dr. J. R. Condon, Director of Radiotherapy: 22 (10 males and 12 females) were seen for the first time.

One hundred and twenty-one persons—51 males and 70 females (206 the previous year) were provided with *in-patient treatment* during 1947, there being 130 admissions and 141 discharges or deaths, as follows:—

	<i>Admissions (including 10 re-admissions)</i>	<i>Discharges and Deaths (including 3 transfers)</i>
Grantham & Kesteven General Hospital ..	26	30
County Hospital, Lincoln	55	57
Scunthorpe War Memorial Hospital ..	41	42
Stamford, Rutland & General Infirmary ..	17	14
The Brompton Hospital	1	1

The number of patients attending at the Scunthorpe War Memorial Hospital for *out-patient treatment* by Radiotherapy was 33 (14 males and 19 females) making 52 attendances (58, 24, 34 and 92 respectively in 1947).

Since the inception of the Scheme in February, 1943, a total of 1,093 persons (481 males and 612 females) have benefited from the services provided, of whom no fewer than 796 (368 males and 428 females) have been treated in hospital.

Deaths from all forms of Cancer during 1948, numbered 215 (98 male and 117 female) and represented a Death Rate of 1.80 per thousand of the civilian population. The following Table relating to deaths from this disease may be of interest :—

Year	Deaths from Cancer of :—				Total Deaths from Cancer	Death Rate per 1,000 populat'n
	buc. cav. & oesoph (M) Uterus (F)	stomach and duodenum	breast	all other sites		
1940	32	38	17	120	207	1.88
1941	28	26	17	112	183	1.61
1942	18	44	14	129	205	1.81
1943	23	40	14	131	208	1.81
1944	13	41	20	119	193	1.69
1945	18	36	18	119	191	1.73
1946	19	42	21	125	207	1.83
1947	13	29	20	125	187	1.62
1948	29	37	28	121	215	1.80

SCABIES

(a) Number of cases referred	207
(b) Classification of notifications :—	
(i) True Scabies	182
(ii) Scabies complicated by secondary infections ..	14
(iii) Not Scabies	12
(c) Scabies Cases treated under Scheme :—	
(i) At Cleansing Centres	191
(ii) At Home	13
(d) (i) Average No. of Treatments necessary	2
(ii) Shortest treatment found necessary	1 day
(iii) Longest treatment found necessary	7 days
(e) Cases not suffering from Scabies treated :—	
(i) At Centres	12
(ii) At Home	—
(f) No. of visits to homes by the Cleansing Nurses	20
(g) No. of Contacts treated :—	
(i) At Cleansing Centres	11
(ii) At Home	—
(h) Total attendances at Cleansing Centres	401

The Scabies Order 1941 made under Defence Regulation 33A ceased to have effect as from 31st December, 1947, and in view of the fact that the decrease in the notification of Scabies cases continued throughout the year, the remaining Scabies Treatment Centres at Stamford and at Sleaford were closed.

INSPECTION AND SUPERVISION OF FOOD

Milk and Dairies

In am indebted to Mr. G. A. Moore, Divisional Veterinary Inspector, Ministry of Agriculture and Fisheries, for his report upon the work of his Department in connection with Milk and Dairies. Extracts from this report are given below (*in italics*) under the appropriate headings.

(i) *County Laboratory*.—One hundred and eighty-nine samples of milk were subjected to the Methylene Blue test, of which 25 were failures. The Resazurin Test was applied to 13 samples all of which were satisfactory.

(ii) *Milk (Special Designations) Regulations, 1936-48*.—The number of licences in force on the 31st December, 1948, was :—

Tuberculin Tested	..	..	..	..	..	37	(26)
Accredited	..	..	..	..	..	51	(52)
						88	(78)

(NOTE—Numbers in brackets relate to 1947)

This again shows a steady increase over the previous year. Comparative figures for the last five years are given below :—

					<i>Tuberculin</i>	
					<i>Tested</i>	<i>Accredited</i>
1944	No. of Licences in force	..			8	57
1945	..	..	..	..	7	61
1946	..	..	..	..	15	55
1947	..	..	..	..	26	52
1948	..	..	..	..	37	51

Twelve new Tuberculin Tested licences were issued and one was surrendered; five new Accredited licences were issued and six were surrendered.

One hundred and sixty-nine samples were taken for bacteriological examination during the year, of which 149 passed and 20 (or 11.8 per cent) failed the prescribed test; this compared with 26 per cent failures in 1947. Two hundred and fifty visits to farms were made.

During the year 1948, 61 routine herd inspections of the Accredited herds in the County were carried out, involving a total of 1,322 cattle. Also 761 non-designated herds were examined and these contained 7,705 cattle. Only 1 case of Tuberculosis was found during these inspections and the animal was slaughtered under the Tuberculosis Order. The incidence of Mastitis and other conditions likely to affect the milk continues to be very low.

There was a considerable increase during the year in the numbers of Attested and Tuberculin Tested herds. At the end of December there was a total of 46 such herds in the County, but 9 of these were not licenced for the production of Tuberculin Tested milk. A total of 3,351 cattle was tested with Tuberculin in these herds and 34 reactors to the test were discovered, or little over 1% of all the animals tested.

(iii) *Milk in Schools Scheme.*—At the end of the year, 170 schools were participating in the Scheme. There are now only 4 schools not receiving regular supplies of liquid milk.

The number and types of individual producer/retailers approved, together with the schools supplied, were as follows:—

- 7 (5) Retailers licenced to sell Pasteurised Milk were supplying 128 (127) schools.
- 6 (6) "Tuberculin Tested" products were supplying 19 (13) schools.
- 5 (6) "Accredited" producers were supplying 7 (9) schools.
- 14 (19) Producers were supplying ordinary raw milk to 16 (21) schools.

(NOTE—Figures in brackets related to 1947)

Sixty samples were taken for bacteriological examination, and 45 visits to premises were made.

(iv) *Tuberculosis in Milk.*—A total of 70 samples of milk were taken for biological examination involving 137 herds, 59 of which were "Accredited" or school milk producers, with the following results:—

(a) Samples positive to Tubercle Bacilli	.. .. .	5
(b) Samples negative to Tubercle Bacilli	.. .. .	60
(c) Samples with inconclusive results	.. .. .	5

"Accredited" and school milk herds accounted for 36 of the 65 completed examinations.

Reports on the samples proving positive to Tubercle Bacilli were sent to the Divisional Veterinary Inspector—*A total of 12 herds was involved and an examination of all the cows in each of the herds was carried out. Seven cows were affected with Tuberculosis and were slaughtered under the Tuberculosis Order and bulk milk samples from all the remaining cows were found free from Tuberculosis on biological test.*

Tuberculosis Order, 1938.

During the year 1948 a total of 26 cases of Tuberculosis was reported, and 22 animals were slaughtered under the terms of the Tuberculosis Order. The remaining four cases proved to be negative. The number of cases of Tuberculosis found in the County has gradually fallen during the last ten years. During the period April 1st—December 31st, 1938 a total of 137 cases of suspected Tuberculosis was dealt with in the County and 81 of these were found to be positive, the affected animals being slaughtered under the Tuberculosis Order. Similarly in 1940, 170 cases of suspected Tuberculosis were dealt with, of which exactly 100 were found to be affected.

One hundred and eleven notifications of cows and calves slaughtered in Government Slaughter Houses and found to be affected with Tuberculosis were received and followed up.

Anthrax Order, 1938

No cases of Anthrax were confirmed in the County during the year.

Defence Regulation 55G (*Restriction on the Sale of Raw Milk*)

Sampling of heat treated milk under the above Regulation continued throughout the year. Two pasteurising plants in the County are at present authorised by the Ministry of Food. Forty-five samples were submitted for examination, of which forty were satisfactory. Of the 5 samples that failed, all failed the methylene blue test and one also failed the phosphatase test.

Food and Drugs Act, 1938.

The work in connection with sampling under the Act was carried out by the Weights and Measures Department, and I am indebted to the Chief Inspector of Weights and Measures for the following information :—

During the twelve months ended 31st December, 1948, 349 samples were obtained under the Food and Drugs Act, 1938, in the Administrative County of Kesteven and the Boroughs of Grantham and Stamford. The articles sampled were :—

				B/forward ..	43
Aspirin Tablets	2	Jam	3		
Beef Juice	1	Liq. and Blackcurrant Tablets ..	1		
Bi-carbonate of Soda	2	Liquid Paraffin	3		
Butter	4	Malted Oatmeal	1		
Camphorated Oil	1	Marmalade	1		
Chemical Food (Parrish's)	1	Meat Paste	2		
Cherry Brandy	1	Meat Soup	1		
Cinnamon (ground)	1	Milk	264		
Cod-liver Paste	1	Mint, dried	1		
Coffee	1	Nutmeg (ground)	1		
Condensed Milk	1	Nut Oil linetus	1		
Cooking Fat	1	Olive Oil	3		
Cordials	6	Pepper (white)	4		
Essences	4	Potted Meat	2		
Fish Paste	2	Pork Pie	1		
Fruit Sauce	1	Saccharin Tablets	2		
Fruit Wine	1	Salad Cream	1		
Gelatine	1	Salad Dressing	1		
Glycerine, honey and lem.	1	Salad Oil	1		
Golden Syrup	1	Sandwich Spread	1		
Ginger Wine	2	Sausages	2		
Gravy Browning	1	Suet	1		
Gravy Salt	1	Syrup of Figs	1		
Ground Ginger	2	Tea-seed Oil	1		
Health Salts	1	Tomato Sauce	1		
Honey	1	Vinegar	4		
Horse-radish Sauce	1	Whisky	1		
	C/forward ..			Total ..	349

In taking these samples, the Ministry's suggested target of 3 per 1,000 of population was kept in mind, not only for the County as a whole, but as regards its principal parts.

Two hundred and eight informal samples of Milk and 1 informal sample of Whisky were tested in the Department's laboratory and found to be genuine. The remaining 140 samples were submitted to the Public Analyst who found that 24 of this number (including 20 samples of Milk) were adulterated. Apart from the samples of Milk, many of which were improperly diluted with water, there was no serious complaint concerning any other food or drug, for of the 4 samples adversely reported upon, one was a sample of Vinegar improperly labelled and 3 were samples of home-made Meat Products containing insufficient meat or fish.

Of the 20 samples of Milk adversely reported upon, 2 were slightly deficient in milk-fat, while 18 contained added water in amounts varying from 3.6% to 30.0%. It is interesting to record that samples of Milk containing 9.0%, 29.0% and 30.0% of added water were obtained on Sundays. Five vendors of watered milk were prosecuted and fines totalling £24 with £3 3s. 0d. costs were imposed in respect of three. In two instances the cases were dismissed.

An appeal to the High Court, by way of case stated, is being made against the decision of the Bourne Magistrates in dismissing two Informations alleging the sale of milk containing 9.0% and 20.0% of added water.

The Table on page 64 sets out the details of action taken in the case of unsatisfactory results.

SANITARY CIRCUMSTANCES

Housing

The rural housing survey being undertaken by the district councils under the auspices of the Joint County Advisory Committee is still far from completion. It is unfortunate that the prolonged delay in completing the survey is bound to diminish its ultimate value. The information which has so far been obtained serves to emphasise, however, the problem facing the housing authorities. As will be seen from the table below, a quarter of the houses inspected are shown to be unfit for habitation and beyond repair, whilst over a half of the houses surveyed are in need of structural repairs or reconditioning. The problem of houses considered due for demolition is a considerable one inasmuch as the acute housing shortage makes it impossible for the housing authorities to meet the needs of families who are likely to be displaced from houses which are pulled down and at the same time meet the demands of other applicants on the waiting lists for houses. This difficult problem of trying to balance

the needs of people who are living in lodgings or overcrowded conditions with those who, though possessing a home of their own, are living in houses long since considered unfit for habitation, is bound to remain very acute until the rate of building is accelerated. As regards the reconditioning and repair of sub-standard cottages the advent of new legislation to facilitate this work is to be welcomed, for the longer these repairs are delayed the more difficult it will become to effect alterations at a reasonable cost.

A feature of the housing progress in the County during the year has been the continued provision of accommodation on former service camps. The County Sanitary Officer has surveyed these temporary housing sites and a tabulated summary of his findings is given in Table X. In the first instance many of these huts were occupied by "squatters," and the local authorities have had the difficult task of carrying out the necessary adaptations with the minimum of disturbance to the families in occupation. At the end of the year 597 families were living in these converted dwellings, and the number will have increased to almost 800 when further conversions are completed, particularly those at Skellingthorpe which are being carried out by the Lincoln Corporation. As a temporary expedient the use of these huts has been the means of relieving a very serious housing shortage, and of providing many families with a measure of home life they would otherwise have been denied. Except in the case of those huts still occupied by squatters, and which have not yet been properly adapted by the local authority, the conditions generally are fairly satisfactory.

Classification of Houses surveyed

1—Satisfactory in all respects	968
2—Minor defects	647
3—Requiring repair, structural alteration or improvements ..	3,272
4—Appropriate for re-conditioning under the Housing (Rural Workers) Acts	621
5—Unfit for habitation and beyond repair at a reasonable expense	1,895
6—Not yet classified	77
TOTAL	7,480

Water Supplies and Sewerage

Proposed schemes of water supplies and sewerage which are submitted by the District Councils to the County Council under the Rural Water Supplies and Sewerage Act, 1944 continue to be examined by the Consulting Engineers, Messrs. Howard, Humphries & Sons, who advise the Council as to the suitability of the the scheme, both as to its general principles and its part in the co-ordinated scheme for the County.

The following public inquiries were held during the year relative to schemes submitted to, and approved in principle by, the County Council :—

East Kesteven Regional Water Supply scheme.

Billinghay, Cranwell, Heckington, North Kyme and Ruskington Sewage schemes.

One inquiry was also held into the Sleaford U.D.C.'s application for loan sanction to purchase the Sleaford Water Company.

The following summary gives an indication of the actual progress made in 1948 in the provision and development of water supply and sewerage schemes in the various rural districts.

North Kesteven Rural District

Water Supplies.—Contracts let in regard to schemes at North Scarle, Eagle, Doddington, Whisby and Thorpe-on-the-Hill.

Additional pumps installed at Wancham Pumping Station.

Sewerage.—Two temporary sewage works were installed at North Hykeham and Branston, together with the necessary length of connecting sewer, to deal with the erection of new houses. Twenty-three existing houses at North Hykeham and ten at Branston were also included in the schemes.

Ministry sanctioned invitation of tenders for the execution of the joint scheme for North Hykeham and Waddington.

South Kesteven Rural District

Water Supplies.—Work commenced on parts of the regional scheme as follows :—

North part of district—extended and improved supply from Billingborough.

West part of district—extended and improved supply from Spalding U.D.C. Water Works, Bourne.

South part of District—extended and improved supply from Peterborough Corporation Water Company's supply.

Sewerage—

Billingborough and Horbling—scheme prepared, approved by County Council and approved by the Ministry.

Baston, Langtoft, Market Deeping and Deeping St. James—scheme prepared, approved by County Council and approved by the Ministry.

Corby—scheme approved by County Council but deferred by Ministry on account of cost per house.

East Kesteven Rural District

Water Supplies.—Schemes for supply of water to the villages of Cranwell and Ewerby, as part of the Regional Scheme, have been approved by the Ministry and contracts let.

Contract let for new bore hole and replacement of the existing pump at Evedon.

Sewerage.—That part of Martin village drained by gravity now connected to former R.A.F. works.

Schemes have been prepared, and approved in principle by the County Council and the Ministry, for Cranwell, Billingham, Ruskington, Gt. Hale and Heckington.

The scheme for North Kyme was deferred by the Ministry owing to cost per house.

West Kesteven Rural District

Water Supplies.—Purchase of bore hole and head works at Lenton Lodge (former R.A.F. Station, Folkingham). Awaiting loan sanction—agreed in principle.

Mains laid to supply Pickworth, Lenton, Keisby, Osgodby and Ingoldsby.

Great Gonerby—extension from Barrowby utilising the Grantham water.

Bassingthorpe—work in progress on construction of 250,000 gallon reservoir.

North Witham—negotiations took place for work at Motherford Spring for collecting dam, pumping station, 80,000 gallon high level tank, to supply North and South Witham, Gunby and Stainby.

Long Bennington—contract agreed for sinking of 12 15-in. bore hole as main source of supply.

As will be seen from the above summary it is gratifying to note that definite progress is now being made in the County in the provision of piped water supplies to districts which hitherto have had to rely upon shallow wells, springs, etc.

With regard to the provision of sewerage schemes these still remain in the planning stage. It is quite evident that the question of the cost of rural sewerage is going to make it very difficult to meet the urgent needs of the villages in this connection, especially in view of the fact that a sewerage scheme, unlike that for a water supply, is non-revenue producing. Notwithstanding this fact, many village sewage disposal schemes are most urgently required if serious nuisances are to be abated, and the underground water supplies of the County are not to be menaced by the continued disposal of untreated sewage into the various water courses, some of which are known to be very closely linked with the water bearing strata of the area. The problem, too, will certainly become more acute with the provision of more piped water supplies which will encourage the installation of additional sanitary fittings, thus inevitably leading to the discharge of a greater volume of sewage.

Rivers Pollution

No new cases of serious pollution were dealt with during the year, but the discharge of untreated sewage from many of the villages still continues. The prevention of such pollution can only be effected by the provision of the new sewerage disposal schemes which are envisaged under the Rural Water Supplies and Sewerage Act, 1944, and therefore no improvement in this respect can be expected until the various schemes have been implemented. So far as the existing known points of disposal are concerned, attention has been given to these, effluent samples taken, and advice given as considered necessary.

School Hygiene

Routine inspection of school premises by the School Medical staff continued during 1948, and special visits were paid by the County Sanitary Officer. As pointed out in previous reports, the structural condition of many of the small schools continued to be unsatisfactory. The shortage of materials may not have been so acute but the high cost of repairs still made it very difficult for the school managers to carry out improvements or even to maintain the schools in a satisfactory state of repair. Furthermore, it has been apparent that pending approval of the Development Plan there has been a reluctance to incur expense on any but the more urgent repairs.

General

Twenty-eight sanitary complaints were received and dealt with during the year.

Fifteen samples of drinking water were submitted for examination.

Table I.—VITAL STATISTICS, 1948

DISTRICT	Popul'n Mid-year 1948 (R.-G. Est.)	No. of Live Births			Birth Rate	No. of Stillbirths		Deaths under 1 year of age			Inf. Mort. Rate	No. of Deaths		Death Rate
		M	F	Total		M	F	Total	M	F		Total		
Bourne ..	4,590	47	33	80	17.43	—	1	2	1	3	37.50	37	42	79
Grantham ..	22,890	210	230	440	19.22	7	8	11	3	14	31.82	157	111	268
Sleaford ..	7,370	73	74	147	19.94	2	1	2	1	3	20.41	41	53	94
Stamford ..	11,120	85	82	167	15.02	3	3	—	2	2	11.98	69	59	128
Total Urb. Districts	45,970	415	419	834	18.14	12	18	15	7	22	26.37	304	265	569
East Kesteven ..	17,610	192	174	366	20.78	5	8	11	4	15	40.98	95	76	171
North Kesteven ..	24,780	248	219	467	18.84	5	5	6	11	17	36.40	130	120	250
South Kesteven ..	14,820	132	146	278	18.76	7	9	3	4	7	25.18	70	78	148
West Kesteven ..	16,390	172	181	353	21.54	2	1	5	4	9	25.49	91	91	182
Total Rur. Districts	73,600	744	720	1464	19.89	19	23	25	23	48	32.79	386	365	751
Total Adminis- trative County ..	119,570	1159	1139	2298	19.22	31	36	40	30	70	30.46	690	630	1320

Table II.—SHOWING FOR EACH COUNTY DISTRICT THE NUMBER AND CAUSES OF DEATH DURING 1948

CAUSES OF DEATH	Bourne U.D.	Grantham Borough	Sleaford U.D.	Stamford Borough	Aggregate	E. Kesteven R.D.	N. Kesteven R.D.	S. Kesteven R.D.	W. Kesteven R.D.	Aggregate	TOTALS
1. Typhoid and parat. fevers	—	—	—	—	—	—	—	—	—	—	—
2. Cerebro-spinal fever ..	—	1	—	—	1	—	—	—	—	—	1
3. Scarlet fever	—	—	—	—	—	—	—	—	—	—	—
4. Whooping Cough	—	1	—	—	1	—	—	—	—	—	1
5. Diphtheria	—	—	—	—	—	—	—	—	—	—	—
6. Tuberculosis of resp. system	2	12	1	3	18	3	6	3	2	14	32
7. Other forms of tuberculosis	2	2	1	2	7	—	—	—	—	—	7
8. Syphilitic diseases	—	2	—	1	3	—	1	—	1	2	5
9. Influenza	—	—	1	—	1	—	—	—	1	1	2
10. Measles	—	—	—	—	—	1	1	—	—	2	2
11. Ac. polio-myelitis and polio-encephalitis	—	—	—	—	—	—	—	—	—	—	—
12. Ac. inf. enceph.	—	—	—	—	—	—	—	1	—	1	1
13. Cancer of buc. cav. and oesoph. (M) Uterus (F) ..	3	3	2	5	13	2	3	6	5	16	29
14. Cancer of stomach and duodenum	4	7	5	4	20	6	2	4	5	17	37
15. Cancer of breast	2	5	3	2	12	3	8	2	3	16	28
16. Cancer of all other sites ..	1	29	9	17	56	18	28	9	10	65	121
17. Diabetes	2	—	—	1	3	2	2	1	—	5	8
18. Intra-cran. vascular lesions	12	37	7	18	74	23	31	24	29	107	181
19. Heart disease	19	78	35	38	170	56	74	33	54	217	387
20. Other diseases of circ. system	—	10	3	4	17	7	11	3	4	25	42
21. Bronchitis	6	24	2	9	41	6	10	10	7	33	74
22. Pneumonia	7	9	3	6	25	2	9	5	11	27	52
23. Other respiratory diseases	—	1	3	2	6	5	3	4	3	15	21
24. Ulcer of stomach or duodenum	—	4	1	1	6	—	3	—	1	4	10
25. Diarrhœa under 2 years of age	—	—	—	—	—	—	—	—	—	—	—
26. Appendicitis	—	—	—	—	—	—	4	—	—	4	4
27. Other digestive diseases ..	1	6	2	—	9	1	5	3	2	11	20
28. Nephritis	1	3	3	1	8	3	4	11	3	21	29
29. Puer. and post abort. sepsis	—	—	—	—	—	—	—	—	—	—	—
30. Other maternal causes ..	—	—	—	—	—	1	1	—	—	2	2
31. Premature birth	1	2	1	—	4	4	2	2	2	10	14
32. Con. mal: birth injuries: infantile diseases	1	6	1	—	8	8	5	5	4	22	30
33. Suicide	—	2	1	1	4	1	3	2	2	8	12
34. Road traffic accidents	2	2	—	—	4	3	—	1	1	5	9
35. Other violent causes	1	3	3	2	9	3	5	1	2	11	20
36. All other causes	12	19	7	11	49	13	29	18	30	90	139
ALL CAUSES	79	268	94	128	569	171	250	148	182	751	1320

Table IV.—BIRTH RATES, CIVILIAN DEATH RATES AND ANALYSIS OF MORTALITY DURING 1948

	Rates per 1,000 Civilian Popul'n		Death Rates per 1,000 Civilian Population							Rates per 1,000 Live Births		
	Live Births	Still-Births	All Causes	Typhoid & Paratyphoid Fever	Scarlet Fever	Whooping Cough	Diphtheria	Influenza	Small-pox	Measles	Deaths under 1 year of Age	Deaths from Diarrhoea and Enteritis under 2 years
England and Wales ...	17.9	0.42	10.8	0.00	..	0.02	0.00	0.03	0.00	..	34	3.3
126 County Boroughs and Great Towns (including London) ...	20.0	0.52	11.6	0.00	..	0.02	0.00	0.03	0.00	..	39	4.5
148 Smaller Towns (Resident Popul'n 25,000 - 50,000 at 1931 Census) ...	19.2	0.43	10.7	0.00	..	0.02	0.00	0.04	0.00	..	32	2.1
London Administrative County ...	20.1	0.39	11.6	0.00	..	0.01	0.01	0.02	0.00	..	31	2.4
County of Kesteven ...	19.2	0.56	11.0	0.00	0.00	0.01	0.00	0.02	0.00	0.02	30.46	0.00

Table V.—OFFICIAL INFANT WELFARE CENTRES, 1948

Address of Centre	Days of Opening		Individual Children who attended			Attendances			Consultations with Medical Officer		
			Infants aged 0—1	Children aged 1—5	Total	Infants aged 0—1	Children aged 1—5	Total with Aver.	Infants aged 0—1	Children aged 1—5	Total
*ALMA PARK—	..	First and Third Monday in the month	31	22	53	111	56	167	22	11	33
Grantham						(14)			
BASSINGHAM—	..	First Thursday in the month ..	28	27	55	88	101	189	54	70	124
Comrades Hall						(16)			
BILLINGBOROUGH—	..	Third Tuesday in the month ..	55	56	111	265	291	556	153	115	268
Foresters' Hall						(46)			
BILLINGHAY—	..	Second & Fourth Wednesday in the month	57	43	100	405	181	586	136	66	202
Church Hall						(25)			
BOURNE—	..	First and Third Thursday in the month	131	77	208	823	432	1255	329	167	496
The Clinic, North Rd.						(52)			
BRACEBRIDGE	..	Fourth Thursday in the month	44	49	93	181	303	484	94	111	205
HEATH—Village Hall						(40)			
CASTLE BYTHAM—	..	Second Wednesday in the month	29	19	48	127	104	231	95	60	155
Village Hall						(19)			
CLAYPOLE—	..	Second Tuesday in the month	43	26	69	175	115	290	36	22	58
Village Hall						(24)			
CORBÝ—	..	Fourth Friday in the month	29	31	60	92	113	205	46	35	81
Church Room						(19)			
COLSTERWORTH—	..	Fourth Monday in the month	29	37	66	101	197	298	20	26	46
Wesleyan School						(25)			
EAGLE—Methodist	..	Second Wednesday in the month	32	27	59	123	154	277	1	—	1
Schoolroom						(23)			
FULBECK—	..	Last Wednesday in the month	30	37	67	100	134	234	19	25	44
Reading Room						(19)			

Table V—continued

Address of Centre	Days of Opening	Individual Children who attended			Attendances			Consultations with Medical Officer		
		Infants aged 0—1	Children aged 1—5	Total	Infants aged 0—1	Children aged 1—5	Total with Aver.	Infants aged 0—1	Children aged 1—5	Total
*GRANTHAM— 40 Westgate	Every Tuesday, Wednesday, and Thursday	129	88	217	2318	2199	4517 (58)	10	319	329
HECKINGTON— Village Hall	Third Thursday in the month	50	28	78	214	157	371 (31)	98	67	165
MARKET DEEPING— Annex to New Inn	Second & Fourth Monday in the month	62	50	112	402	384	786 (34)	80	67	147
METHERINGHAM— Village Hall	First and Third Wednesday in the month	74	59	133	463	516	979 (41)	306	266	572
NORTH HYKEHAM— Wesleyan School	Second & Fourth Tuesday in the month	72	67	139	538	337	875 (38)	214	135	349
Old Village										
SKELLINGTHORPE— Women's Institute	Second Monday in the month	22	24	46	97	158	255 (21)	7	8	15
SLEAFORD—The Clinic, Eastgate	Every Monday	218	226	444	2139	1061	3200 (67)	646	499	1145
†SOUTH WITIAM— Church Hall	Third Wednesday in the month	13	14	27	54	73	127 (11)	—	—	—
STAMFORD— The Clinic, Barnhill	Every Friday	193	98	291	1886	1002	2888 (56)	237	123	360
THURLEBY— Chapel Hall	Second Friday in the month	17	31	48	68	132	200 (17)	1	—	1
WADDINGTON— Wesleyan School	First and Third Tuesday in the month	78	76	154	533	444	977 (41)	181	113	294
WASHINGTON— Village Hall	Second Thursday in the month	53	42	95	249	231	480 (40)	139	98	237
Heighington										

*Taken over July, 1948.

†Taken over January, 1948.

Table VI.—*PREMATURE INFANTS BORN DURING 1948

	DEGREE OF PREMATUREITY					WEIGHT AT BIRTH									
	0-2 weeks		2-4 weeks		4-6 weeks		6-8 weeks		8 weeks & over		Under 3-lbs.	3-4 lbs.	4-5 lbs.	5-5½ lbs.	Totals
(1) Born at home and nursed entirely at home :—															
(a)	1	—	—	2	1	—	—	—	1	—	—	3	4
(b)	—	—	—	1	3	—	—	—	1	3	—	—	4
(c)	—	—	—	—	—	—	—	—	—	—	—	—	—
(d)	—	—	—	—	—	—	—	—	—	—	—	—	—
(e)	19	13	9	4	1	—	—	—	—	7	16	23	46
(2) Born at home and removed to hospital :—															
(a)	—	—	—	1	—	—	—	—	1	—	—	—	1
(b)	—	1	—	—	—	—	—	—	1	—	—	—	1
(c)	—	—	—	—	—	—	—	—	—	—	—	—	—
(d)	—	—	—	—	—	—	—	—	—	—	—	—	—
(e)	1	—	—	—	—	—	—	—	—	—	—	1	1
(3) Born in hospital or nursing home :—															
(a)	—	1	—	1	3	—	—	—	3	1	1	—	5
(b)	—	—	—	—	1	—	—	—	1	—	—	—	1
(c)	—	—	—	—	—	—	—	—	—	—	—	—	—
(d)	—	—	1	—	—	—	—	—	—	—	1	—	1
(e)	13	8	2	1	—	—	—	—	—	2	7	15	24
TOTALS	33	24	12	10	9	8	13	25	42	88			

*i.e., babies weighing 5½lbs. or less at birth, irrespective of the period of gestation.

Table VII.—DISTRIBUTION OF NOTIFIED CASES OF INFECTIOUS DISEASES IN
RURAL AND URBAN DISTRICTS, 1948
(excluding Non-Civilians)

SANITARY District	Total No. notified	Scarlet Fever	Diphtheria	Measles	Whooping Cough	Acute Pneumonia	Cerebro-Spinal Fever	Ophthalmia Neonatorum	Puerperal Pyrexia	Dysentery	Erysipelas	Acute Poliomyelitis	Enteric Fever
Bourne U.D. . .	261 (69)	7	—	226	16	7	—	—	—	—	5	—	—
Grantham M.B. . .	938 (264)	64	1	752	104	14	—	—	1	—	1	1	—
Sleaford U.D. . .	43 (378)	11	—	19	9	1	—	—	—	—	2	1	—
Stamford M.B. . .	283 (171)	14	—	143	116	4	—	—	3	—	1	2	—
Aggregate of Urban Districts . .	1525 (882)	96	1	1140	245	26	—	—	4	—	9	4	—
East Kesteven R.D. . .	529 (453)	17	1	390	106	8	—	—	1	—	2	4	—
North Kesteven R.D. . .	338 (200)	20	7	233	73	5	—	—	—	—	—	—	—
South Kesteven R.D. . .	424 (264)	9	—	360	27	8	—	—	—	13	3	4	—
West Kesteven R.D. . .	568 (207)	16	1	469	72	10	—	—	—	—	—	—	—
Aggregate of R.D.'s . .	1859 (1124)	62	9	1452	278	31	—	—	1	13	5	8	—
Totals for whole County . .	3384 (2006)	158 (100)	10 (27)	2592 (1506)	523 (242)	57 (60)	— (1)	— (2)	5 (20)	13 (4)	14 (10)	12 (32)	— (2)

NOTE.—Figures in brackets relate to 1947.

Table VIII.—AMBULANCE SERVICES

(1)	(2) Number of Vehicles at 31st Dec., 1948	(3) Total No. of Calls during the period 5th July, 1948, to 31st December, 1948	(4) Total No. of Patients carried during the period 5th July, 1948, to 31st Dec., 1948	(5) Number of Accident and other Emergency calls included in col. (3) during the period 5th July, 1948, to 31st Dec., 1948	(6) Total Mileage during the period 5th July, 1948, to 31st December, 1948
Directly Provided Service	Ambulances	1155	1242	433	31136
	Cars	559	634	—	11348
Agency Service(s)	Ambulances	547	622	217	10360
	Cars	254	260	—	11838
Supplementary Service(s)*	Ambulances	—	—	—	—
	Cars	154	165	—	9139

*Hospital Car Service :—Nine owner drivers are available for the transportation of non-urgent cases

Table IX.—STATISTICS RELATING TO THE WORK OF THE TUBERCULOSIS DISPENSARIES DURING 1948

DIAGNOSIS	RESPIRATORY				NON-RESPIRATORY				TOTAL				Grand Total
	Adults		Children		Adults		Children		Adults		Children		
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
A.— (1) Number of definite cases of Tuberculosis on the Dispensary Registers at the beginning of the Year ..	162	108	2	5	40	44	21	38	202	152	23	43	420
(2) Transfers from Authorities of areas outside that of the Council during the Year	1	8	—	—	—	1	1	—	1	9	1	—	11
(3) Lost sight of cases returned during the Year	—	4	4	2	—	—	—	2	—	4	4	4	12
B.— Number of New Cases diagnosed as Tuberculous during the Year :—													
(1) Class T.B. minus	22	16	2	1	—	3	2	4	22	19	4	5	50
(2) Class T.B. plus	3	3	—	—	—	—	—	—	3	3	—	—	6
C.— Number of cases included in A. and B. written off the Dispensary Registers during the Year as :—													
(1) Recovered	1	5	1	—	—	—	—	3	1	5	1	3	10
(2) Dead (all causes)	15	12	—	—	—	1	—	—	15	13	—	—	28
(3) Removed to other Areas	6	6	—	1	1	3	1	1	7	9	1	2	19
(4) For other reasons	16	7	—	2	9	16	4	4	25	23	4	6	58
D.— Number of definite cases of Tuberculosis on the Dispensary Registers at the end of the Year	150	109	7	5	30	28	19	36	180	137	26	41	384

Table X.—LIST OF TEMPORARY HOUSING SITES ADAPTED FROM FORMER SERVICE CAMPS (including sites occupied by 'squatters') showing number of families in occupation, etc.

	Position at December, 1948		REMARKS	Position upon completion of further adaptations in progress, December, 1948	
	No. of Families	Approx. No. of persons		No. of Families	Est'd No. of Persons
North Kesteven R.D.					
Canwick	4	18	Nissen huts on ex-army site occupied by 'squatters'. No alterations by local authority	4	18
Washingborough ..	2	8	Nissen huts on ex-army site. Adapted by North Kesteven R.D.C.	2	8
Branston Booths ..	2	9	Nissen huts on ex-army site. Adapted by North Kesteven R.D.C.	2	9
Metheringham ..	8	20	Wooden huts on ex-army site. Minimum alterations only by North Kesteven R.D.C.	8	20
Coleby Grange ..	26	101	Laing, Nissen and brick huts occupied by squatters on former R.A.F. site. No alteration by local authority	26	101
Navenby	4	12	One Nissen hut and 3 wooden huts on ex-army site. Adapted by North Kesteven R.D.C.	4	12
Skellingthorpe ..	59	200	Six sites on former R.A.F. Station being adapted for housing purposes by Lincoln Corporation. When scheme completed 165 huts will have been converted into 212 dwellings	212	900
Hartsholme ..	32	130	Twenty families of squatters are in the hall, and 10 in wooden huts in hall grounds. No adaptations by Local Authority. Hall requisitioned by Army—requisition fee paid by Local Authority. Intended these families be housed on Skellingthorpe sites	—	—

Table X.—continued

	Position at December, 1948		REMARKS	Position upon completion of further adaptations in progress, Dec., 1948	
	No. of Families	Approx. No. of Persons		No. of Families	Est'd No. of Persons
South Kesteven R.D. Folkington ..	58	180	Four sites of former R.A.F. Station being adapted for housing purposes by South Kesteven R.D.C. When complete 97 dwellings will have been provided	97	325
East Kesteven R.D. Coleby Grange ..	11	44	Ten Laing type huts are occupied by squatters, on Green Man Wood site of former R.A.F. Station. No alterations by Local Authority	11	44
Martin ..	87	300	Nissen huts on former R.A.F. site converted into dwellings by East Kesteven R.D.C. .. .	87	300
West Kesteven R.D. Harlaxton ..	54	200	Laing type huts on former R.A.F. site—converted into dwellings by West Kesteven R.D.C. . . .	54	200
Harlaxton ..	6	20	Huts and airfield building adapted by Kesteven Agricultural Executive Committee. Occupied by farmer's family and employees of K.A.E.C.	6	20
North Witham ..	9	30	Nissen type and concrete huts of former R.A.F. site adapted by West Kesteven R.D.C. . . .	9	30
Fulbeck ..	—	—	Nissen type huts on former R.A.F. site being converted by West Kesteven R.D.C. . . .	12	40
Alma Park ..	217	750	Former R.A.F. Regiment site adapted for housing purposes by Grantham Corporation. With the exception of a few Nissen huts all dwellings are of brick construction. Shops have been provided on the site .. .	251	875
Totals at Dec., 1948	579	2022	Totals upon completion of further adaptations in progress December, 1948 .. .	785	2902

Table XI.—ACTION TAKEN UNDER THE FOOD AND DRUGS ACT,
1938, IN CASES OF UNSATISFACTORY SAMPLES, 1948

No. of Sample	Article	Report of Public Analyst	Action Taken
53	Milk	Contained 17% added water	Vendor prosecuted, fined £2 0s. 0d., and £3 3s. 0d. costs
55	Milk	Contained 4.9% added water	Cause traced to producer's milking machine Producer cautioned in writing by Clerk of Council
62	Milk	Contained 4.4% added water	
63	Milk	Contained 3.8% added water	
64	Milk	Contained 5.7% added water	
65	Milk	Contained 3.6% added water	
66	Milk	Contained 6.8% added water	
144	Milk	9.0% deficient in fat	No action
183	Milk	Contained 7.0% added water	Vendor fined £1
185	Milk	Contained 9.0% added water	Case dismissed
138	Fish Paste	14% deficient in fish	Old stock. No action
249	Milk	Contained 18.0% added water	
253	Milk	Contained 26.0% added water	Vendor, who was also producer, was fined a total of £21 on five separate charges
254	Milk	Contained 24.0% added water	
256	Milk	Contained 30.0% added water	
257	Milk	Contained 29.0% added water	
58	Milk	Contained 4.0% added water	Further samples were genuine—no action
271	Tomato Meat Paste	9.27% deficient in meat	Vendor cautioned
356	Milk	Contained 20.0% added water	Case dismissed—Appeal being made to High Court
359	Milk	Contained 9.0% added water	
360	Milk	3.0% deficient in fat	No action
366	Milk	Contained 11.0% added water	Vendor cautioned in writing by Clerk of County Council
336	Vinegar	Not properly labelled as a non-fermented vinegar	Vendor cautioned
350	Beef sausages	Deficient in meat to extent of 15.0%	Vendor cautioned

