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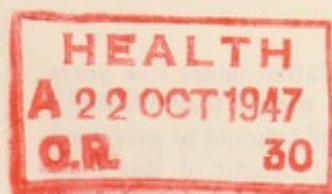
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Gloucestershire County Council.

ANNUAL REPORT of the County Medical Officer of Health for the year 1946.

LANGHAM HOUSE,
BERKELEY STREET,
GLOUCESTER.

August, 1947.

*To the Chairman and Members of
the Public Health Committee.*

MISS RATCLIFF, LADIES AND GENTLEMEN,

I have the honour to present my Annual Report on the health of the County for the year 1946. Owing to the calls on the time of the staff in the production of new schemes under the National Health Service Act 1946, and the late receipt of statistics from the Registrar-General, it has not been possible to deal earlier with this report which would normally have been submitted to the Committee not later than June.

Vital Statistics.

The death rate is 12.16 compared with 12.6 last year and there has been a slight rise in the birth rate from 18.4 last year to 18.9 for 1946. The infantile mortality rate of 38 shows no change from that of the previous year and still compares favourably with the figure of 43 for the country as a whole.

Infectious Diseases.

The number of cases of Diphtheria notified was 107 as compared with 186 in 1945. There has been a steady decline in the number of cases of diphtheria over the past ten years and the number of notifications in 1946 was the lowest ever recorded. The number of deaths was only six as compared with ten last year. The immunisation of children was continued throughout the County and 1042 school children (between 5 and 15 years) and 3,839 pre-school children were immunised during 1946. The respective percentages are 80 and 54.

The position, however, is still unsatisfactory in that the numbers of children under five years subjected to immunisation against diphtheria is much too low. In order to obtain the maximum immunity, both amongst individual children and in the community, every child should be subjected to immunisation on attaining one year of age. Notwithstanding the proved benefit of this form of protection there is a surprising number of parents who neglect to take this elementary precaution for the protection of their children and although education by means of talks, posters, pamphlets, etc., goes on continuously there has been a decline in the numbers of children immunised in all age groups. An intensive campaign to increase the response will be held this autumn.

The number of cases of scarlet fever showed a further decline from 498 in 1945 to 346. There were no deaths.

Maternity Services.

The number of beds for maternity patients controlled directly by the County Council in their Maternity Hospitals and Homes is 87—Sunnyside Maternity Hospital, Cheltenham, 60 beds, Cotswold Maternity Home, Tetbury, 16 beds and Wendover Maternity Home, Downend, 11 beds. Arrangements exist with Bristol Corporation for the admission of complicated maternity cases from the south of the County to Southmead Hospital and also with various District and Cottage Hospitals for admission of patients to their maternity units.

Proposals for the extension of maternity hospital accommodation by the erection of semi-permanent units at Cheltenham and Stroud were submitted to the Ministry of Health in 1946. It was suggested that a hutted maternity hospital should be erected in the grounds of the Cheltenham General Hospital to accommodate 54 patients and that this unit would replace the existing unsatisfactory premises at Sunnyside and allow them to revert to their original use as an Old Peoples Home. This proposal also embodied the provision of a similar but smaller unit to be erected at Stroud on land belonging to the Stroud General Hospital. This unit will comprise two hutments to accommodate 16-18 patients.

The proposals have been the subject of discussion with officers of the Ministry of Health over a period of some months and approval has recently been given to them with some modification. As soon as specifications, etc., can be prepared it is hoped to commence work on the actual construction.

The restrictions on admissions to maternity hospitals have, perforce, been continued throughout the year. The shortage of trained staff still continues and no maternity hospital or home in the County has had a full establishment of midwives at any time during the year. Admissions, therefore, have been strictly confined to patients from homes where it is impossible for the confinement to take place or those who have developed or who are likely to develop some abnormality.

Domiciliary midwifery services are administered on behalf of the County Council by the County and District Nursing Associations. This work has also been handicapped by lack of midwives and at times the number of vacancies amongst domiciliary midwives has been as high as seventeen. It has been possible, by arranging mutual aid between districts to carry on the service but only with the greatest difficulty and at the expense of additional work on already overburdened staff.

Miss Milford, Superintendent of the County Nursing Association, retired during the year after many years of devoted service. Her retirement was a matter of great regret to those who were associated with her in this work and she carries into retirement their gratitude and best wishes for many years of well earned leisure.

Hospitals.

In my report of last year reference was made to the survey of the hospital services of the South Western Region carried out by Surveyors of the Ministry of Health, and it was pointed out that the plan for an area hospital centre for North Gloucestershire was approved. No major development occurred during the year but the Joint Consultative Hospitals Committee have been in communication with all hospital authorities in the county with a view to securing much closer working arrangements between the general hospitals at Gloucester and Cheltenham and the District and Cottage Hospitals of the County.

Although most of the smaller hospitals in the County have on their staffs consultants who devote the whole of their time to their speciality, in very few hospitals are there any arrangements for regular visitation by consultants. It is the view of the Joint Hospitals Committee that all hospitals in the County should work in the closest collaboration and that a consultant service should be developed which will allow of regular visitation by specialists to each smaller hospital and permit of the maximum use being made of all available beds wherever they may be situated. In this way it will be possible to achieve some of the advantages which an area hospital will bring without having to wait for the actual buildings to be established. Moreover a system of hospitals working, in so far as possible, as a unit, must provide a service superior to that of a number of institutions working in isolation with no overall co-ordinating factor even in the way of a common consultant staff.

It should be possible to pool the consultant resources of the area in such manner as to ensure a full consultant service for any hospital and thus to make use of available bed accommodation either in large or small hospitals to the greatest advantage. The development of services in peripheral hospitals, the raising of the standard of service available and economy in bed space are all advantages which would accrue from the integration of the services in this way. It is hoped that through the efforts of the Joint Hospitals Committee agreement on these lines may be reached.

Tuberculosis.

There was an increase in the number of cases of Tuberculosis notified during 1946. The following table shows the notifications received over the past five years.

	Pulmonary	Other Forms	Total
1942	256	88	344
1943	292	94	386
1944	410	123	533
1945	361	124	485
1946	390	122	512

The Gloucestershire Joint Board for Tuberculosis, a Statutory Authority, is responsible for the prevention and treatment of Tuberculosis in the County and in the City of Gloucester.

Cancer.

The main centre for the treatment of cancer by radiotherapy is situated at Bristol and the County Council accepts financial responsibility for patients from the County. When circumstances permit, it is hoped to establish a radiotherapeutic sub-centre for the Cheltenham and Gloucester areas which will work in conjunction with the main centre at Bristol.

The Cancer Advisory Committee of Local Authorities in the area served by the Bristol Centre deals with all common problems. In 1946 Professor Rendle Short was appointed Medical Adviser to this Committee and he is also available to each constituent local authority for consultation.

The County Council will assume financial responsibility for the maintenance of patients suffering from Cancer admitted to hospitals approved by the Ministry of Health at Gloucester, Cheltenham and Bristol. Certain conditions with regard to record keeping, etc., have been made by the Advisory Committee and the Medical Adviser is engaged in negotiations with the hospitals concerned.

National Health Service Act 1946.

The Health Services of the Local Authority under the new enactment will begin to take shape as from July 1948 and already much progress has been made in planning and preparation.

A new Committee, the Local Health Committee, has been appointed by the County Council and is actively engaged in the formulation of proposals to meet the responsibilities of the Local Health Authority as from the appointed day. Every aspect of the existing services is in process of careful examination and the opportunity will be taken of re-organisation where this is desirable, in addition to the making of proposals for the introduction of new measures to meet the requirements of the Act.

Major alterations will occur in the midwifery and nursing services where the additional duty of providing home nursing will devolve on the Local Health Authority. Voluntary organisations will still be asked to carry out the work on behalf of the Health Authority, but a re-organisation of districts and certain changes in administration and control will be introduced with a view to securing a more efficient service without any loss of local interest.

Other features of the work, vaccination and immunisation, the provision of help in the home, health visiting, etc., which at present form a large part of the services provided by the Public Health Committee will be examined, re-organised where necessary and extended to meet the requirements of the National Health Service Act.

The provision of an efficient and adequate Ambulance Service for the County becomes the responsibility of the Health Authority and the Local Health Committee have been able to secure the complete co-operation of the British Red Cross Society and the St. John Ambulance Brigade in their preparations. Both of these organisations have played a large part in the planning of the new ambulance service and in co-operation with the Local Health Authority will be responsible for its administration and control.

Other arrangements which must be made before the appointed day relate to the mental health services, the care of mothers and young children, the prevention of illness, the care and after care of the sick and the establishment of Health Centres, and schemes are in course of preparation for the provision of all these facilities.

It is likely also that a system of divisional administration will be introduced which will enable all health authorities in the County to take part in the new service and stimulate local interest in the work.

Close co-operation between the Local Authority and the Executive Councils and Regional Hospital Boards will be essential in order to provide continuity between the private doctor, the

hospital and the preventive and domiciliary services of the health authority. All interests will be represented on the different bodies dealing with the various aspects of the health service and there will be some degree of cross representation at member level ; but it is of importance that the officers engaged in the different phases of the work shall maintain close contact if the potential gaps in administration are to be kept closed. The machine is a complicated one and it is only by careful adjustment of its components that fully efficient and smooth running will be achieved.

Conclusion.

The many and varied activities of the department cannot be dealt with in detail in a brief report of this nature, but salient points in connection with extensions and developments of the services, together with comments on the work of the year are embodied in the following pages.

I would like to take this opportunity of paying tribute to the work of the staff in all departments. Whether at the central headquarters, in hospitals, or in their various districts in the County the members of the staff have given loyal and willing service and met all the demands made upon them. The preparations for the National Health Service will mean additional burdens since the routine work must continue at the same time, but I have no doubt that these will be carried equally well.

I would also like to thank the Chairman and Members of the Committee for their continued support and their patience in dealing with the multitude of items laid before them.

I have the honour to be,

Your obedient servant,

H. KENNETH COWAN,

County Medical Officer of Health.

STAFF.

County Medical Officer of Health and School Medical Officer—

H. Kenneth Cowan, M.D., D.P.H.

Deputy County Medical Officer of Health and Deputy School Medical Officer—

J. S. Cookson, M.A., M.D., D.P.H., Barrister-at-Law (resigned 30.11.46).

R. D. Gray, M.D., D.P.H. (appointed 25.11.46).

Maternity and Child Welfare Medical Officer—

E. Catherine Morris Jones, M.B., B.S., D.P.H.

Tuberculosis Officers (jointly with City of Gloucester)—

E. D. Davies, M.R.C.S., L.R.C.P., D.P.H. (part-time).

F. J. D. Knights, M.D., M.R.C.P. (appointed 1.12.46).

F. H. Woolley, M.R.C.S., L.R.C.P., L.D.S.

(Medical Superintendent, Standish House, Sanatorium).

Assistant County Medical Officers—

Isabel R. Gordon, M.B., Ch.B., D.P.H.
 C. D. Outred, M.R.C.S., L.R.C.P., D.P.H. (temporary).
 Catherine E. Hignell, M.R.C.S., L.R.C.P., (temporary).
 R. G. B. Young, M.B., Ch.B., D.P.H. (appointed 15.11.46).
 S. Knight, M.B., B.S., D.P.H.
 M. L. Sutcliffe, T.D., M.R.C.S., L.R.C.P., D.P.H., D.P.M.
 N. D. Dunscombe, M.B., Ch.B., M.R.C.S., D.P.H.
 J. H. Kitson, M.B., Ch.B., M.R.C.S., D.P.H.
 D. Barclay, M.B., Ch.B., D.P.H.

} Also District Medical
 Officers of Health.

Senior Dental Officer—

Vacant.

Assistant Dental Officers—

B. F. Wren, L.D.S.
 J. D. B. Buckley, L.D.S. (resigned 31.1.46).
 D. A. Thomas, L.D.S.
 Muriel S. Cosh, B.D.S.
 R. G. James, L.D.S. (appointed 1.3.46).
 Q. Davies, L.D.S. (appointed 11.2.46).
 Mrs. M. P. Wood, L.D.S. (appointed 25.2.46).

County Sanitary Inspectors—

B. J. Dodsworth, C.R.S.I., M.S.I.A. (absent on Service with H.M. Forces).
 S. B. J. Davies, A.R.San.I., M.S.I.A.,

Milk Sampling Officers—

J. I. Duberley, N.D.A.
 Irene M. Bleakin (temporary).
 V. R. Hughes (temporary).
 A. Marjorie Smith (temporary).

Non-Medical Supervisors of Midwives—

Miss L. M. Milford (resigned 31.8.46).
 Miss E. Hatfield (appointed 1.9.46).
 Miss B. M. Harvey (appointed 1.1.46).
 Miss D. P. Flint (appointed 11.2.46).

Health Visitors and School Nurses—

Miss E. N. Doran (Superintendent).
 Miss B. J. Blashill
 Miss M. Blaze.
 Miss M. I. Clarke (appointed 20.5.46).
 Miss M. Colledge (appointed 1.4.46).
 Miss F. Collins.
 Mrs. B. M. Davies.
 Miss D. Donkin (resigned 9.2.46).

Miss J. E. D. Elder.
 Miss F. M. Ellis.
 Miss O. E. Evans (appointed 4.11.46).
 Mrs. K. M. Harris.
 Miss N. M. Hills.
 Miss H. Henderson.
 Miss D. Jeal (resigned 28.2.46).
 Miss N. G. Lapham.
 Miss E. M. Lewis.
 Miss O. Lewis.
 Miss B. Macquillan.
 Miss S. M. Palmer.
 Miss N. Parsons (resigned 28.2.46).
 Miss M. Partridge (resigned 14.10.46).
 Miss E. Popham (appointed 17.9.46)
 Miss E. Pugh (appointed 17.9.46) } From Pupil Health Visitor.
 Miss M. Pugh (appointed 17.9.46)
 Miss M. S. Scott (resigned 28.2.46).
 Miss D. Smith.
 Mrs. A. H. Soilleux (temporary) (appointed 6.11.46).
 Miss D. G. Stephenson.
 Mrs. N. Turner.
 Mrs. P. E. Watkins (resigned 24.7.46).
 Miss J. C. Wilkie.
 Mrs. L. Wright.

Public Health Visitors—

Miss K. Driscoll (resigned 31.7.46).
 Miss E. Popham (appointed whole-time H.V. 17.9.46).
 Miss E. Pugh (appointed whole-time H.V. 17.9.46).
 Miss M. Pugh (appointed whole-time H.V. 17.9.46).
 Miss B. M. Aspey
 Miss M. S. Byne
 Miss C. M. Gray
 Miss M. Macfie
 Miss M. J. Steggles
 Miss G. M. Wilkins } appointed 16.9.46.

District Nurses undertaking Health Visiting—

87 (part-time).

Orthopaedic After-care Sisters—

Miss D. A. Rodenhurst (temporary).
 Miss A. Nicholas (resigned 30.4.46).
 Miss J. W. Storer (resigned 21.9.46).
 Miss I. A. Beale (appointed 14.10.46).
 Miss F. J. Stack-Haydon (appointed 17.6.46).

Venereal Diseases Almoner—

Miss E. K. Robinson.

Deaths from Puerperal causes :—

Puerperal sepsis	2
Other puerperal causes	11
	—
	13
	—

Death Rate of Infants under one year of age :—

All infants per 1,000 live births	38
Legitimate infants, per 1,000 legitimate live births	36
Illegitimate infants, per 1,000 illegitimate live births	61

Deaths from :—

Cancer (all ages)	713
Measles (all ages)	0
Whooping Cough (all ages)	2
Diarrhoea (under 2 years of age)	18

1. Birth Rate.

The Birth Rate for the year 1946 is 18.9 per 1,000 of the population, as compared with 18.4 in 1945.

The following table shows the comparative figures for the past five years :—

	1942	1943	1944	1945	1946
Urban	17.1	18.5	20.0	18.4	19.7
Rural	18.7	18.7	20.0	18.4	18.5
Administrative County	18.1	18.7	20.0	18.4	18.9
England and Wales	15.8	16.5	17.6	16.1	19.1

2. Death Rate.

The Death Rate for the year is 12.2 as compared with a rate of 12.6 last year.

The total number of deaths in the County during 1945 was 4,805 and the seven chief causes of death with the corresponding percentage of total deaths, were as follows :—

Heart Disease	30.32
Cancer (all sites)	14.84
Intracranial Vascular lesions	12.40
Tuberculosis (all forms)	4.43
Bronchitis	4.20
Violence	3.85
Pneumonia	3.75

Enteric Fever :						
Bloods	..	..	..	..	..	105
Fæces and urine	..	..	..	..	..	189
Cerebro Spinal Fever	..	..	..	..	..	2
Puerperal Pyrexia	..	..	..	..	..	7
Specimens from Sunnyside Maternity Hospital	..					1,662
Other	..	..	..	..	..	57
TOTAL						6,877
Venereal Diseases :						
Wasserman	..	..	..	..	..	4,869
Smears	..	..	..	..	..	7,278
Other	..	..	..	..	..	758
TOTAL						12,905
GRAND TOTAL						19,782

Samples of water and sewage effluent were examined by Mr R. H. Ellis, the County Analyst, and the following is a summary of the examinations made :—

Samples submitted by				Type of Sample			
				Water	Crude Sewage	Sewage Effluents	River Waters
<i>Boroughs :</i>							
Tewkesbury	..	..	..	15	—	—	—
<i>Urban :</i>							
Charlton Kings	..	..	..	—	—	—	—
Cirencester	..	..	..	3	—	—	—
Kingswood	..	..	..	—	—	—	—
Mangotsfield	..	..	..	—	—	—	—
Nailsworth	..	..	..	—	—	—	—
Stroud	..	..	..	44	—	—	—
<i>Rural :</i>							
Cheltenham	..	..	..	70	—	3	—
Cirencester	..	..	..	18	—	—	—
Dursley	..	..	..	11	—	—	—
East Dean	..	..	..	1	—	—	—
Lydney	..	..	..	3	—	—	—
Newent	..	..	..	6	—	—	—
North Cotswold	..	..	..	24	—	1	—
Northleach	..	..	..	11	—	—	—
Sodbury	..	..	..	37	2	7	—
Stroud	..	..	..	55	—	—	23
Tetbury	..	..	..	9	—	—	—
Thornbury	..	..	..	12	—	—	—
Warmley	..	..	..	6	—	—	—
West Dean	..	..	..	34	—	—	—
				423	2	12	23
				—	—	—	—

2. Ambulance Facilities.

No important changes are known to have taken place in the ambulance organisations throughout the County since the survey of 1938 although some extra services have been provided.

3. Nursing in the Home.

The County Nursing Association through its affiliated District Nursing Associations is responsible for the domiciliary nursing services in the County. There are now 109 District Nursing Associations, employing 150 Nurses. The work of district nursing is paid for from the voluntary funds of the Associations, but grants are made by the County Council for the nursing of the sick poor.

Arrangements are also in force for the nursing of cases of measles in their own homes during epidemics or when circumstances appear to justify it.

Under the National Health Service Act, 1946, the duty of providing home nursing will devolve on the Local Health Authority and proposals are now being formulated for the services to be provided.

4. Treatment Centres and Clinics.

The treatment of minor ailments is undertaken at nineteen centres throughout the County. The only change during 1946 was the opening of a new centre at Bearland, Gloucester. Five of the centres are staffed by the Assistant Medical Officers of the County Council, viz: Filton, Gloucester, Patchway, Soundwell and Stroud, and at the remainder the work is undertaken by local doctors who act as Medical Officers to the clinics on a six-monthly rota.

Certain of the centres are also used by the specialist medical staff for consultations and treatment, viz.: ante-natal, tuberculosis, ear, nose and throat, eye, orthopædic and heart conditions.

5. Orthopædic Treatment.

No changes occurred in 1946 in the arrangements in force in the County for orthopædic treatment which include out-patient treatment at clinics and in certain cases at the patients' own homes, in-patient treatment for short stay cases at the General and Children's Hospitals in Gloucester and Cheltenham, and for long stay cases at Winford Orthopædic Hospital, Somerset, and the Wingfield-Morris Hospital, Oxford.

After-care of patients is undertaken at the various clinics in the County where they attend for treatment and supervision subsequent to discharge from hospital. This treatment is carried out under the supervision of the Orthopædic Surgeons and by three whole-time Orthopædic After-Care Sisters who are specially qualified and experienced. Where necessary, treatment is also carried out in the homes of the patients by the After-Care Sisters. The number of cases under review in 1946 was 1415.

6. Hospitals.

(a) *Maternity Hospital Accommodation.*

The three County Maternity Homes continued to function throughout the year, viz.: Sunnyside Maternity Hospital, Cheltenham, 60 beds; Cotswold Maternity Home, Tetbury, 16 beds; and Wendover Maternity Home, Downend, 11 beds. Arrangements also exist for the admission of complicated maternity cases to Southmead Hospital, Bristol, and also with the District and Cottage Hospitals for the admission of patients to their maternity units.

(b) *Isolation Hospitals.*

The Isolation Hospital accommodation remains unchanged with the exception of that at Tredington, near Tewkesbury.

This hospital has been taken over, on lease, from the Tewkesbury Borough Council, with the approval of the Ministry of Health for the accommodation of smallpox cases but, in the absence of such cases, for the accommodation of cases of non-notifiable or minor infectious diseases.

7. *Vaccination.*

In this County there are 2 Registrars (part-time) and 23 County District Officers who also function as Vaccination Officers. The number of Public Vaccinators is at present 64.

The trend in infant vaccination during recent years can be seen in the following table which has been compiled from the returns of the Vaccination Officers.

Vaccination of Infants in Gloucestershire, 1933-1945
(including the Borough of Cheltenham)

Year	Total number of Births	Number of Infants followed up	Number of Infants Vaccinated	Percentage of Infants Vaccinated as compared with those followed up	Percentage of Infants Vaccinated as compared with total births
1933	4514	4275	576	13.5	12.8
1934	4680	4405	567	12.9	12.1
1935	4818	4480	546	12.2	11.4
1936	4885	4321	541	12.5	11.1
1937	5061	4350	467	10.7	9.2
1938	5441	4840	501	10.4	9.2
1939	5697	5180	595	11.5	10.5
1940	6237	5548	835	15.1	13.4
1941	6505	6018	1106	18.4	17.0
1942	7340	7130	1613	22.6	22.0
1943	7428	6988	1434	20.5	19.3
1944	7908	7658	1746	22.8	22.1
1945	7134	6433	1489	23.1	20.9

It will be noted that the already low figure of 12.8% in 1933 gradually dropped still further to reach 9.2% in 1937 and 1938, but thereafter gradually rose to 22.1% in 1944, falling slightly to 20.9% in 1945. Although the exact figures for 1946 are not yet available, the indications are that the percentage will again be over 20.

Considering the progressive advance since 1938 in the number of births, this partial revival of vaccination is encouraging. Temporary factors such as the War with the associated smallpox scares were doubtless partly responsible, but it is to be hoped that there is also indicated a permanent, if gradual, enlightening of the public, many of whom received first-hand experience of vaccination in the Armed Forces.

8. **Mental Deficiency.***Statistics and Ascertainment.*

The distribution of the 1,399 persons on the register of mental defectives on 31st December, 1946, is given below :—

	Males	Females	Total
In Institutions (under Order)	187	195	382
On Licence from Institutions	24	19	43
Under Guardianship	—	1	1
Placed under visitation at home	194	199	393
Classified but no action indicated	242	203	445
In Public Assistance Institutions	45	79	124
Unclassified, awaiting examination	10	1	11
	702	697	1399

During 1946, 76 new cases were reported from various sources, viz. :—

From School Records	33
Health Visitors and Nurses	13
Public Assistance Officers	11
Other sources, Doctors, etc.	19

34 persons left the County and 28 died.

Institutional Accommodation.

Cases sent to Institutions.—On the 31st December, 1946, there were 382 defectives under Order in Certified Institutions, excluding those "on licence" therefrom. The distribution of the cases is given below :—

Institution	Males	Females	Total
Stoke Park Colony	125	180	305
Brentry Colony	43	—	43
St. Mary's Home, Painswick	—	2	2
Sandlebridge, Mary Dendy Home	1	1	2
Royal Earlswood, Surrey	4	—	4
St. Teresa's Home, Lewisham	—	3	3
Ashton House, Liverpool	—	1	1
Borocourt Institution, Oxon.	1	—	1
Lisieux Hall	1	—	1
State Institutions	10	8	18
Besford Court	—	—	—
Royal Eastern Counties	1	—	1
Whittington Hall, nr. Chesterfield	—	1	1
	186	196	382

Of this total, 36 cases were sent to Institutions during the year. There have been 10 deaths and 6 defectives have been discharged from their Detention Orders.

Guardianship.

One case is under Guardianship.

Licence.

The total number of cases on Licence at the end of the year was 43.

Supervision.

The number of cases at present under periodic visitation in their own homes is 393. The reports are submitted quarterly in the majority of cases, but where the home conditions are good, the Committee have directed less frequent visitation.

Occupation Centre and Home Training.

There are no occupation centres under the Committee's jurisdiction. The Committee have considered a Memorandum prepared by the Medical Adviser as to the appointment of an Organiser and Home Teachers with the result that an advertisement has been issued inviting applications for the post of Organiser whose duties would include investigating the need for Occupation Centres and supervising the training of defectives living at home, on Licence or under Guardianship.

"Curtis Committee" Report.

The Committee have received the joint circular letter dated 23rd November, 1946, issued by the Home Office, Ministry of Health and Ministry of Education, urging local authorities to review their present arrangements in the light of the criticism and recommendations made in this report. The Committee are maintaining a few mental defectives in Institutions outside the County and they are endeavouring to arrange for such patients to be seen by Officers of the local authorities in whose areas the Institutions are situate and for periodical progress reports to be furnished including particulars as to the general supervision and treatment afforded to such patients.

SECTION C. INFECTIOUS DISEASES.

The notifications of infectious diseases received during the year are set out in Table II at the end of this Report. The number of cases of Diphtheria (107) was the lowest on record; the previous lowest record being in 1933 when 156 cases occurred. There were 346 cases of Scarlet Fever, the lowest number recorded since 1919. There were no deaths from this disease.

The returns of infectious diseases received from the schools show that there was a marked decrease in the incidence of Diphtheria amongst school children during 1946, the number of cases notified being 27 in comparison with 57 in the previous year. This is the lowest number of cases of Diphtheria ever reported. There was a decrease also in Scarlet Fever cases from 229 to 127 and the incidence of other infectious diseases also remained low.

The following are the details as to the incidence and districts affected, together with the mortality figures for the various types of infectious disease.

1. Diphtheria.

The number of cases notified was 107 compared with 186 in 1945. The number notified from urban areas was 34 and from rural areas 73. The areas most affected were Cheltenham M.B. (20), Gloucester R.D. (27) and Newent R.D. (8).

The number of deaths recorded was 6.

Immunisation against Diphtheria.

Immunisation against diphtheria was continued throughout the year, and a further 1,042 children of school age were immunised. The total number of children between 5 and 15 years of age immunised at 31st December, 1946, was 37,887, which is 79.8% of all children between these ages. 2,590 children previously immunised were given a maintenance dose of prophylactic on their entrance to school.

The number of pre-school children immunised during 1946 was 3,839, which represents 54.0% of children under the age of 5 years.

2. Scarlet Fever.

The total number of notifications of scarlet fever in the County during 1946 was 346, as compared with 498 in 1945. There were no deaths from this disease. The cases were distributed between urban and rural districts as follows:—Urban 103, Rural 243. The districts most affected were Cheltenham M.B. (54), Gloucester R.D. (40) and Sodbury R.D. (47).

3. Measles.

There were 216 cases notified during the year, as compared with 6,390 in 1945 and 752 in 1944. There were no deaths.

4. Whooping Cough.

The number of cases notified was 705, as compared with 742 in 1945. There were two deaths.

5. Pneumonia.

There were 271 cases of pneumonia notified in 1946, the lowest number since 1936 (202). Of these, 57 occurred in urban districts and 214 in rural districts. The greatest number of cases occurred in the first quarter of the year.

6. Gastro Intestinal Diseases.

The number of cases of enteric fever notified during the year was 3, compared with 9 in 1945. The 3 cases occurred in rural districts. 77 cases of dysentery were notified, 14 in urban districts and 63 in rural districts.

7. Diseases of the Central Nervous System.

The number of cases of anterior poliomyelitis notified was 7 and there were 2 cases of acute poliomyelitis. No cases of encephalitis lethargica were notified.

The number of cases of cerebro-spinal fever was 10, 4 in urban districts and 6 in rural districts.

SECTION D.
SANITARY CIRCUMSTANCES OF THE COUNTY.

1. Water Supplies and Sewerage Schemes.

Schemes of water supply, submitted by District Councils under the Rural Water Supplies and Sewerage Act, 1944, are examined by Mr H. J. F. Gourlay, Consulting Engineer, who advises the Public Health Committee whether the schemes conform with the general principles approved by the County Council and will form part of a co-ordinated scheme for the County. As regards schemes of sewerage and sewage disposal submitted by Local Authorities under the same Act, the County Council are advised by Messrs. Howard Humphries & Sons, Consulting Engineers. A number of schemes of both types were approved during the year by the County Council.

For the past eight years it has not been possible to publish details as formerly, but the general position is summarised below :—

	Water Schemes	Sewerage Schemes
Work already completed	13	3
Work commenced during 1946	8	1
Work not commenced by end of 1946 ..	45	43

2. Housing.

The Rural Housing Joint Committee met at regular intervals during the year to consider the reports on the survey of housing conditions in rural areas. As mentioned in the Annual Report for 1945, by the end of that year a beginning had been made in all areas in the survey of conditions.

At the commencement of 1946 there were still some 44,000 houses awaiting inspection out of an estimated total of 55,700 with a rateable value of £16 per annum or under. By the end of the year approximately 39,000 had been inspected leaving a balance of about 17,000 still to be visited. Several districts have a large number of houses yet to be inspected and it is hoped that the Councils concerned will take steps to complete the survey at an early date.

SECTION E.
INSPECTION AND SUPERVISION OF FOOD.

1. Milk Supply.

(a) Milk Special Designations Regulations 1936-1946.

The supervision of the production of milk under the above-named Regulations has continued to be carried out by this Department. The Government White Paper (1943)—“ Measures to improve the quality of the Nation's Milk Supply ”—and the subsequent Act, to be known as the Food and Drugs Act, 1947, by which all functions relating to the production of milk were to be transferred to the Ministry of Agriculture and Fisheries have been accepted, but the date of the change-over has not yet been announced.

The establishment of County Sanitary Inspectors has been increased to two, the temporary Inspector (Mr S. B. J. Davies) being transferred to the permanent staff. Mr B. J. Dodsworth has not yet returned from military service.

Two of the permanent Milk Sampling Officers have returned from military service, but one has resigned his appointment. The two vacant posts have been filled by temporary appointments.

The number of producers licensed to use the designation "Tuberculin Tested" at the end of the year was 387, and the number of "Accredited" producers was 437. During the year a total of 2983 samples of milk, including repeat samples, were examined, of which 743 proved unsatisfactory, a percentage of 25.1

The high percentage is due, no doubt, to the continuance of the difficulties which confronted producers during the war years: lack of sufficient and trained staff, difficulty of carrying out necessary improvements and of providing, or replacing, equipment. In some instances the producer has not, because of other essential work, been able to give the personal supervision to milk production which is vitally necessary. It is hoped that, with the assistance of a full supervisory staff, an improvement will be noticeable in the bacteriological standard of the milk produced.

(b) *Milk and Dairies Consolidation Act, 1915.*

During the year, reports concerning 11 farms in Gloucestershire were received from Bristol Corporation.

Investigations at the farms in connection with Tuberculosis were undertaken by the Veterinary Staff of the Ministry of Agriculture and Fisheries, 263 cows being examined and 41 samples of milk submitted for examination. The final results gave evidence of Tuberculosis in 6 cases.

(c) *Milk and Dairies Order, 1926.*

The District Sanitary Inspectors have submitted 182 samples of milk for examination from producers generally of non-designated milk, and of these 63 proved to be unsatisfactory. These samples are examined at the expense of this Authority under the scheme to encourage an active interest in the bacteriological standard of the milk produced in the County. The work is entirely of an advisory, or corrective, nature.

(d) *Tuberculosis Order, 1938.*

Number of cases examined by the Veterinary Staff	78
Number of cases not amenable to the Order	24
Number of cases found amenable to and slaughtered under the Order ..	54
Number of cases suffering from chronic cough	25
Number of cases suffering from tuberculosis of udder	14
Number of cases suffering from tuberculous emaciation	9
Number of cases found, on post mortem examination, to be suffering from advanced tuberculosis	31
Number of cases found, on post mortem examination, to be suffering from 'not advanced' tuberculosis	21
Number of cases found, on post mortem examination, to be not affected ..	2

2. Examination of Foods and Drugs.

The following is a summary of the work undertaken by the County Analyst upon samples submitted to him :—

	Number Examined	Number Adulterated
Milk	679	82
Jam and Marmalade	7	1
Meat and fish paste	6	1
Self-raising flour	5	2
Baking powder	10	2
Sausages	7	3
Suet	4	2
Other foods	276	—
Milk of sulphur	3	1
Glycerine	2	1
Zinc ointment	4	1
Proprietary medicines	13	9
TOTALS ..	1016	105

The 82 unsatisfactory samples of milk are summarised as follows :—

Deficient in fat	45
Deficient in non-fatty solids	22
Deficient in fat and non-fatty solids	3
Extraneous water	12

Proceedings were taken in 9 cases.

SECTION F. MATERNITY AND CHILD WELFARE.

1. General.

No detailed report on the activities of the Maternity and Child Welfare Services has been given since the War. The wide scope which was included in the Service at that time has continued and has been further extended by new activities. The following paragraphs set out briefly the present position of the Service.

2. Maternity Services.

(a) *Midwifery Services.*

During the year, 191 midwives notified their intention to practise in the County—26 were employed in the County Council's Institutions, 140 were employed by voluntary associations and 25 in private or hospital practice. Of these, 188 were resident in the County and 3 lived outside the County boundary. Most of the cases who were confined at home were attended by midwives employed through the District Nursing Associations, and they attended 2,254 births as midwives and 802 births as maternity nurses. These midwives have experienced great difficulties during the year. Owing to the shortage of midwives

it has been difficult to arrange for adequate off-duty and many of them have worked very long hours. In addition, the lack of adequate transport and, in some cases, unsuitable living accommodation, has added to their difficulties and they are deserving of recognition for the high standard of their work carried out under these circumstances.

Pupil Midwives.

Five of the district midwives have been approved by the Central Midwives' Board as domiciliary teachers and under an agreement with Bristol Corporation each takes one pupil every three months for district training for the second examination of the Board.

(b) *Supervision of Midwives.*

The supervision of midwives is undertaken by two Medical Supervisors and the County Nursing Superintendent and her Assistants. The midwives are visited quarterly by the non-medical supervisors, but owing to lack of time very few visits have been paid by the Medical Supervisors. Special visits are made for specific enquiries and opportunities taken to discuss matters of interest concerning midwifery. On the whole the standard of work of the nurses is good.

The midwifery and nursing conference has been held every year throughout the War and the large attendance indicates the keenness of the midwives for further instruction on subjects related to their work.

(c) *Ante-natal and Post-natal Service.*

(i) *Domiciliary.*

The arrangements for the ante-natal examination by a doctor of expectant mothers who have engaged a midwife continued to be widely used, and have proved of value to the patients and the midwives.

There is a fair response to the facilities for post-natal examinations, and the importance of ensuring that no defect remains untreated after the confinement is becoming more appreciated.

2,500 ante-natal examinations were made
932 post-natal examinations were made

(ii) *Clinics.*

There are now seven clinics in various parts of the County in which ante-natal and post-natal cases are dealt with, in addition to routine clinics at Sunnyside Maternity Hospital for booked cases. The attendances at these clinics are large and many doctors refer patients for advice. It has also been possible to extend the scope of the educational work done at the clinics by Health Visitors.

With the recent advances of knowledge concerning various blood conditions which affect expectant mothers, arrangements are now made for all mothers attending the clinics to have special blood examinations. Emphasis is also laid on the necessity for these mothers to obtain suitable food, and preparations of iron are supplied where necessary.

The following are the details of numbers of patients dealt with and the number of attendances made.

			No. of Attendances	Patients
Ante-natal cases	..	..	5,897	1,951
Post-natal cases	..	..	470	467

(d) Maternity Hospitals.

Three hospitals are administered by the County Council for maternity cases : Sunnyside Maternity Hospital, Cheltenham ; Cotswold Maternity Home, Tetbury ; and Wendover Maternity Home, Downend ; and in addition, the arrangements previously made with voluntary hospitals continue and patients are admitted to the maternity units of various District Hospitals throughout the County. There is an increasing demand for hospital accommodation for confinement and each application is carefully considered.

Sunnyside Maternity Hospital has accommodation for 60 maternity patients and is fully utilised. The hospital is fully equipped and much abnormal work is undertaken. There are on the staff a Resident Obstetrical Officer, two Obstetrical Consultants, and a specialist Anæsthetist. The hospital has been approved by the Central Midwives' Board as a training school for Part I of their certificate for both State Registered and Non-State Registered Pupil Midwives. It is approved also for training in gas and air analgesia and provides instruction for pupil midwives. In addition, practising midwives from the County are admitted for this training. It is hoped by this means that eventually all the County Midwives who have not obtained their certificate prior to appointment will be able to receive the necessary training.

The Hospital has recently been recognised by the Royal College of Obstetricians and Gynæcologists as a training school for the D.R.C.O.G.

A premature baby unit has also been established at the Hospital to which premature infants born in their own homes may be admitted, as well as those born in the Hospital. A further extension of the work is envisaged in the form of a flying squad service to attend patients in their own homes in case of serious emergency.

The Cotswold Maternity Home. Both abnormal and normal cases are admitted and the 16 beds are continually filled. The Hospital was closed for five weeks at the beginning of the year for complete redecoration.

Wendover Maternity Home. This Home which was opened in July, 1944, for 11 normal cases is fulfilling a most useful purpose in the South of the County.

In all these hospitals there has been great difficulty owing to shortage of staff and in all of them part-time nurses have been employed. The results of the work in these hospitals is very satisfactory and must be attributed to the devotion and care of the nursing staff who have worked under such difficulties.

The following is the number of admissions to the hospitals during 1946 :—

Sunnyside Maternity Hospital	1,021
Cotswold Maternity Home	260
Wendover Maternity Home	257

(e) Dental Treatment.

Arrangements had previously been made whereby expectant and nursing mothers received dental treatment from the County Dental Staff at the various clinics. Owing to the shortage of dentists the necessary work could not be undertaken quickly and, in addition, difficulties in transport and long waiting periods caused hardship. A scheme was, therefore, introduced for mothers to have the necessary treatment from their own dentist at agreed rates. This has proved very satisfactory and as a result many more mothers accepted treatment.

3. Child Welfare Services.

(a) Health Visiting.

The number of whole-time Health Visitors employed by the County Council was increased during the year by 17, bringing the total to 33. The number of district nurses also undertaking health visiting was 87.

Four Student Health Visitors completed the Health Visitors' Course conducted by Bristol University in March, 1946. One failed to pass the examination of the Royal Sanitary Institute, but was successful at a later attempt. Three of these Students were subsequently placed on the permanent staff. Six further Students were appointed for the Course commencing in September, 1946.

A part-time Course in Parentcraft Teaching arranged at St. Mary's College, Cheltenham, in conjunction with the County Education Committee, was attended during 1946 by 11 Health Visitors, who were thereby encouraged to give demonstrations and talks at Welfare Centres, Ante-natal clinics, and during the time of the Travelling Health Exhibition.

The following is the summary of visits paid during the year :—

1. By whole-time Health Visitors :

To children under one year of age—				
First visits	..	..	..	3,578
Total visits	..	..	..	12,209
To children between one and five years—				
Total visits	..	..	..	26,982

2. By District Nurse/Health Visitors :

To children under one year of age—				
First visits	..	..	..	2,510
Total visits	..	..	..	18,277
To children between one and five years				
Total visits	..	..	..	27,301

(b) Child Welfare Centres.

There has been a great extension of maternity and child welfare centres and 78 of these are now functioning. With the exception of three at Soundwell, Filton and Thornbury, all the Centres are administered by voluntary committees who receive a grant of approximately half the annual expenditure. A memorandum on the conditions of administering the Centres was issued in 1945 and the committees carry out their work very satisfactorily. In most cases they have the assistance of a Health Visitor. The Centres are affiliated to the County Federation of Infant Welfare Centres through which lectures and meetings for discussion on problems affecting the Centres are arranged. A tribute must be paid to the work of the older members of the voluntary committees who continued their help and interest during the War under great difficulties and now feel they would like to take a less active part.

The medical work in the majority of the Centres is undertaken by general practitioners and in most of the Centres diphtheria immunisation is carried out as an integral part of the service. This is a great advantage to the mother who need not make separate attendances for this purpose.

The Centres all participate in the Government scheme for distribution of Cod Liver Oil and Fruit Juice, all of which entails an additional amount of work. One of the main functions of the Centres, that of education, was difficult to carry out during the War, but efforts are being made now to improve this essential part of the service.

It has not been possible to include dental inspection and treatment of children attending the Centres during the past year, but proposals will be made under the National Health Service Act to enable this service to be available again.

The following is a summary of the attendances at Welfare Centres during the year :—

Total number of sessions	..	..	..	1,537
Total number of new children :				
Under one year	..	..	..	3,292
Over one year	..	..	..	1,180
Total number of attendances :				
Under one year	..	..	..	24,775
Over one year	..	..	..	23,806

(c) *Premature Babies.*

One of the greatest causes of infantile mortality in the first month of life is prematurity and in addition to providing the premature baby unit at Sunnyside Maternity Hospital, arrangements have been made to enable better care to be given to a premature infant born at home. Suitable equipment and clothing are available on loan and it is hoped that a Health Visitor with special experience in the care of premature babies will be available to advise midwives and mothers in the homes.

(d) *Illegitimate Children.*

Many unmarried mothers who do not wish to part with their children place them in foster homes where they are under frequent supervision by Health Visitors. In order to facilitate the finding of suitable homes, payment to the foster mothers is now guaranteed by the County Council and the appropriate contribution is made by the parent.

(e) *Nurseries.*

(i) *Residential.*

Residential Nurseries for short stay cases were established at Stratford Park, Stroud, and Stanley Hall, Selsley. Owing to the unsuitability of the premises, the latter Nursery was closed in August, 1946. There is accommodation for 20 children at Stratford Park and this is usually fully utilised, the number of children admitted during the year being 99. The main reason for admission is the absence of the mother from home on account of confinement or illness, and the length of stay of the child is limited to two months. The great improvement in the health and general behaviour of the children is apparent during their stay at the Nursery.

Premises at Walton House, Tewkesbury, have been acquired for a second Nursery, but great delay is being experienced in adapting and equipping them.

(ii) *Day Nurseries.*

There are Day Nurseries at Stroud, Stonehouse, Cirencester, Kingswood, Patchway and Soundwell. These continue to be well attended and there are always waiting lists for admission to those in the South of the County. Prior claim is given to the children of mothers in employment but, where accommodation allows, children are accepted for reasons of domestic hardship, either due to illness or unsuitable housing. The staffing of the Nurseries has become increasingly difficult and without exception all have suffered during the year from acute shortage of staff, at times necessitating the curtailment of the hours of opening.

4. Additional Services.

(a) Home Help Service.

This Service, which was primarily designed to meet the needs of women remaining at home for their confinement has now been extended to cover illness and other domestic difficulties. Four women are employed as full-time mobile, and 11 as part-time local Home Helps, and these have given assistance to 77 households during the year.

(b) Registered Nursing Homes.

There are now 22 Nursing Homes registered in this County. Eleven take maternity cases and 10 general cases, and one takes both types of case. Five applications for registration were approved during 1946. The common difficulty of shortage of staff has been experienced in most of these Homes and, in some cases, it has been necessary to reduce the number of patients who may be admitted. Visits of inspection are made by the medical staff and the proprietors are very co-operative and anxious to carry out any suggestions made.

(c) Infant Life Protection.

The visiting of children in foster homes and of children preceding adoption is undertaken by the Health Visitors. Frequent visits are made to these cases and much importance is attached to the supervision of the children. Periodic medical supervisory visits are also paid.

At the end of the year there were 69 children in 65 foster homes and 56 children visited pending adoption.

SECTION G. GENERAL.

1. Tuberculosis.

NEW CASES AND MORTALITY DURING 1946

Age Period	New Cases				Deaths			
	Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary	
	M.	F.	M.	F.	M.	F.	M.	F.
Under 1 year	—	—	—	—	—	1	1	—
1-5 years	—	1	9	7	—	—	2	4
5-10 years	6	1	18	10	2	1	3	5
10-15 years	5	9	6	6				
15-20 years	18	15	6	10	60	53	2	11
20-25 years	42	41	5	11				
25-35 years	47	61	6	10				
35-45 years	33	37	4	3	41	8	3	1
45-55 years	26	4	2	4				
55-65 years	25	10	2	3	9	3	—	3
65 years and upwards	9	—	—	—				
	211	179	58	64	112	66	11	24

The following is a summary of the cases on the Register of notifications in 1946 :—

	Pulmonary	Non-Pulmonary	Total Cases
Number of cases removed from Register during year by reason of :			
(a) Withdrawal of Notification ..	6	2	8
(b) Recovery from disease ..	50	76	126
(c) Death	152	18	170
(d) Left County	56	21	77
Number of cases remaining on Register at 31st December, 1946	1,948	1,110	3,058

Dispensaries.

The Tuberculosis Officers attend weekly at six Medical Treatment Centres and periodically visit eight other Centres. They also see patients unable to attend at one of these places in their homes, and hold frequent consultations with the usual medical attendants. 2,176 new patients were seen during 1946, and the total attendances at dispensaries numbered 10,692.

Residential Institutions.

Accommodation for patients is provided at Standish House Sanatorium, at Over Hospital, Gloucester, and at Cashes Green Hospital, Stroud. Cases are also admitted to the Cheltenham General Hospital and the Gloucestershire Royal Infirmary. The number of admissions was 292.

Home Visits by Nurses.

The number of visits paid by the Health Visitors and the District Nurses undertaking health visiting in 1946 was 7,201.

Allowances Scheme.

During the financial year 1946-47 a total of £20,697 19s. 2d. was paid out in allowances to tuberculous patients as follows :—

	Maintenance			Discretionary			Special			Total		
	£	s.	d.	£	s.	d.	£	s.	d.	£	s.	d.
	19,964	12	2	519	4	0	332	10	6	20,816	6	8
Less Re-funds	116	11	2	16	4		1	0	0	118	7	6
	<u>£19,848</u>	<u>1</u>	<u>0</u>	<u>£518</u>	<u>7</u>	<u>8</u>	<u>£331</u>	<u>10</u>	<u>6</u>	<u>£20,697</u>	<u>19</u>	<u>2</u>

The allowances are paid fortnightly in each case and an average of 260 patients were dealt with each week.

Mass Radiography.

No arrangements for mass radiography were made during the year.

2. Venereal Diseases.

The following table shows the number of County cases coming under treatment during 1946 at the various treatment centres serving Gloucestershire.

Treatment Centre	Syphilis	Gonorrhœa	S. Chancre	Total	Not V.D.	Attendances
Cheltenham General Hospital ..	55	105	1	161	92	3,263
Stroud General Hospital ..	6	11	—	17	61	407
Gloucestershire Royal Infirmery	23	62	—	85	98	1,155
Bristol Guardian House ..	10	68	—	78	141	1,671
Bristol, Southmead Hospital ..	—	1	1	2	13	122
Cirencester	6	9	—	15	31	393
Radcliffe Infirmery	—	1	—	1	2	41
Swindon	—	—	—	—	2	10
TOTALS	100	257	2	359	440	7,062

The figures show a considerable increase over previous years as will be seen in the following summary:—

Year	Syphilis	Gonorrhœa	S. Chancre	Total	Not V.D.	Total Attendances
1942	84	167	—	251	99	4,375
1943	94	176	—	270	246	5,005
1944	84	213	—	297	324	5,961
1945	87	185	2	274	379	5,089
1946	100	257	2	359	440	7,062

During the year the War Office submitted the names of 93 members of the Forces who were due for discharge and who had been under treatment and were prepared to disclose the fact that they had been issued with Form V.15 (Clinic case record). As a result of confidential visits and enquiries, 73 of the cases were found to be already attending clinics or were persuaded to do so.

40 cases were reported under Regulation 33B (3 males and 37 females). Double notifications were received in 3 cases.

As a result of informal action a large proportion attended the clinics for treatment. No proceedings were taken against any person in 1946.

3. Cancer.

The following are the deaths from Cancer in the area by age distribution. The figures shown are the aggregates of Urban and Rural areas.

Age Group	Males	Females	Total
1-5 years	1	—	1
5-15 years	1	1	2
15-45 years	23	30	53
45-65 years	110	135	245
65 years and over ..	205	207	412

Details as to the sites of the disease are given in Table III at the end of this Report and a note on the arrangements for treatment appears in the introduction.

4. Welfare of the Blind.

The number of Blind persons on the register in 1946 was 662. These are classified in age groups as follows :—

0-1	1-5	5-16	16-21	21-40	40-50	50-65	65-70	Over 70	TOTAL
—	2	18	12	55	60	121	64	330	662

The numbers can briefly be placed in the following categories :—

In Sunshine Homes	..	..	..	..	2
At Schools for the Blind	..	..	..	..	14
Employed by Blind Institutions					
Employed in Workshops	..	..	..	..	17
Employed as Home Workers	..	..	..	..	17
Employed otherwise	..	..	..	..	67
Undergoing Training	..	..	..	..	6
Unemployable	..	..	..	..	539
					—
					662
					—

During the year, the plans for the adaptation of " Ellerslie," Cheltenham, as a County Home for the Blind were submitted to the Ministry of Health and their approval was awaited. This Home would provide accommodation for 26 persons.

The following extracts from the Annual Report of the County Association for the Blind give a brief account of the activities of the Association.

Gloucestershire Fund for the Blind.—The generous figure of £4,504 5s. 5d. has been collected on behalf of the Gloucestershire County Association for the Blind and National Institute for the Blind. Mr King Cummings and his workers must receive the most grateful thanks of all who work for the Blind.

Necessitous Blind.—The work of the Case Committee continues. Over 400 cases are now dealt with quarterly.

Home Teaching.—The Home Teachers have made 7,459 visits, given 483 lessons, and travelled 35,255 miles. Owing to difficulties in connection with the repair of cars, some of the Teachers have had to resort to bicycling and using alternative forms of transport. Excellent as these figures are, they do not give anything like an adequate picture of the work done. It is devotedly and untiringly carried out with the result that each Home Teacher is regarded as a personal friend by the Blind in her area.

Guild of Blind Gardeners.—Many more blind gardeners availed themselves of the opportunity to send exhibits to the Horticultural Show held at the Royal Blind Asylum, Bristol. Two silver cups, as well as several money prizes, were won by competitors from our area.

Workshops.—The Committee record their appreciation of the loyal and harmonious co-operation of the Staff and Workers. In spite of continued difficulties in obtaining materials, all workers are usefully employed and are working to full capacity.

Goods Sold.—It has not been possible to hold any sales of work during the year owing to shortage of materials. Excellent wool has been obtained through the Southern Regional Association for the Blind. This is sold to the Blind to be knitted, and the appropriate number of clothing coupons are collected for the finished article.

Wireless.—Certificates for Free Wireless Licences have been issued to all who require them. The Schroder Wireless Sets are now maintained by local arrangements under the supervision of the Home Teachers.

The Clubs.—The Clubs continue to be held at Cheltenham, Cirencester, Cinderford, Kingswood Stroud and Wotton-under-Edge. The Association is fortunate in having a most unselfish and energetic band of Voluntary workers who help at these Clubs, and, indeed, without them it would be impossible to carry on.

5. Travelling Health Exhibition.

The Travelling Health Exhibition toured villages in the northern part of the County for a fortnight, from the 23rd September to the 14th October, and one-day exhibitions were held at the following villages :—

Willersey
Chipping Campden
Mickleton
Blockley
Moreton-in-Marsh
Stow-on-the-Wold
Bourton-on-the-Wate
Winchcomb
Stanway
Dumbleton

The tour was most successful, and in every village there was a good attendance, both of school children and others in the afternoon, and of parents in the evening.

Prior to the War, the Exhibition, which was organised on a less ambitious scale, toured parts of the County for a fortnight twice in the year, but, in order to take this form of health education into the rural areas and to ensure that the whole of the County is covered, more frequent tours are desirable.

1946.

TABLE I.—BIRTHS AND DEATHS.

Districts	Estimated Population 1946	BIRTHS						DEATHS											
		Live Births			Still Births			Total		Under 1 Year		Infantile Mortality Rate							
		Leg.	Illeg.	Total	Rate	Leg.	Illeg.	Total	No.	Rate	Leg.		Illeg.	Total					
Urban.																			
Cheltenham M.B.	60,540	1,056	138	1,194	19.72	27	2	29	886	14.63	41	11	52	43.55					
Charlton Kings	5,985	89	7	96	16.04	1	—	1	80	13.37	4	1	5	52.08					
Cirencester	10,900	214	20	234	21.47	7	—	7	114	10.46	5	1	6	25.64					
Kingswood	17,660	374	22	396	22.42	18	2	20	199	11.27	5	—	5	12.63					
Mangotsfield	16,560	286	16	302	18.23	10	—	10	172	10.38	10	1	11	36.42					
Nailsworth	3,425	53	2	55	16.06	1	—	1	48	14.01	3	—	3	54.54					
Stroud	15,570	256	26	282	18.11	9	—	9	220	14.13	10	—	10	35.46					
Tewkesbury M.B.	4,540	93	4	97	21.36	4	—	4	55	12.11	6	—	6	63.92					
TOTAL U.D.	135,180	2,421	235	2,656	19.65	77	4	81	1,774	13.12	84	14	98	36.90					
Rural.																			
Cheltenham	18,910	300	39	339	17.93	11	1	12	230	12.16	9	4	13	38.35					
Cirencester	12,230	219	15	234	19.13	2	1	3	137	11.20	9	—	9	38.46					
Dursley	16,220	269	16	285	17.57	10	1	11	162	10.00	8	—	8	28.07					
East Dean	20,220	370	30	400	19.78	9	1	10	247	12.22	17	1	18	45.00					
Gloucester	31,550	539	54	593	18.80	12	2	14	333	10.52	19	4	23	38.79					
Lydney	10,220	183	14	197	19.27	2	—	2	133	13.01	6	2	8	40.61					
Newent	7,827	145	15	160	20.44	2	1	3	109	13.93	10	—	10	62.50					
North Cotswold	17,100	315	23	338	19.77	8	—	8	243	14.21	10	2	12	35.50					
Northleach	7,330	103	17	120	16.37	6	—	6	92	12.55	4	—	4	33.33					
Sodbury	35,620	665	34	699	19.62	19	1	20	339	9.52	24	2	26	37.20					
Stroud	25,190	425	18	443	17.58	10	1	11	306	12.14	10	1	11	24.83					
Tetbury	5,793	105	6	111	19.33	2	—	2	63	10.87	1	—	1	9.01					
Thornbury	23,500	418	22	440	18.72	8	—	8	282	12.00	16	2	18	40.90					
Warmley	10,140	129	6	135	13.31	3	—	3	109	10.75	4	1	5	37.01					
West Dean	17,990	286	28	314	18.01	9	—	9	246	13.73	16	2	18	57.32					
TOTAL R.D.	259,840	4,471	337	4,808	18.50	113	9	122	3,031	11.66	163	21	184	38.27					
County Totals	395,020	6,892	572	7,464	18.90	190	13	203	4,805	12.16	247	35	282	37.78					

TABLE II.—1946.

Districts	Scarlet Fever	Diphtheria	Whooping Cough	Measles	Ac. Polio- myelitis	Ac. Polio- encephalitis	Enteric Fever
Urban.							
Charlton Kings ...	1	—	7	19	—	—	—
Cheltenham ...	54	20	130	32	2	—	—
Cirencester ...	4	5	24	10	—	—	—
Kingswood ...	19	2	13	6	2	—	—
Mangotsfield ...	8	—	11	21	—	—	—
Nailsworth ...	—	2	31	3	—	—	—
Stroud ...	10	5	37	—	—	—	—
Tewkesbury ...	7	—	—	1	—	1	—
TOTALS ...	103	34	253	92	4	1	—
Rural.							
Cheltenham ...	13	4	15	14	—	—	—
Cirencester ...	9	1	7	11	—	1	—
Dursley ...	24	1	12	—	—	—	—
East Dean ...	13	4	31	3	—	—	—
Gloucester ...	40	27	67	13	3	—	—
Lydney ...	4	5	26	2	—	—	—
Newent ...	16	8	3	2	—	—	—
North Cotswold ...	3	1	9	6	—	—	—
Northleach ...	8	—	6	—	—	—	—
Sodbury ...	47	7	67	26	—	—	—
Stroud ...	17	7	62	6	—	—	1
Tetbury ...	12	1	2	2	—	—	—
Thornbury ...	13	3	64	14	—	—	2
Warmley ...	4	1	9	17	—	—	—
West Dean ...	20	3	72	8	—	—	—
TOTALS ...	243	73	452	124	3	1	3
County Totals ...	346	107	705	216	7	2	3

NOTIFIABLE INFECTIOUS DISEASES.

Para-Typhoid	Ac. Pneumonia	Dysentery	Cerebro-spinal Fever	Encephalitis Lethargica	Erysipelas	Puerperal Pyrexia	Ophthalmia Neonatorum
—	1	3	—	—	—	—	—
—	41	2	3	—	13	23	2
—	4	7	—	—	1	—	—
—	3	1	1	—	3	—	1
—	3	1	—	—	2	3	—
—	—	—	—	—	—	—	—
—	5	—	—	—	4	—	1
—	—	—	—	—	1	—	—
—	57	14	4	—	24	26	4
1	7	—	—	—	4	2	—
—	12	4	3	—	1	—	—
—	1	2	—	—	—	—	—
—	12	—	1	—	1	—	—
—	36	—	—	—	2	—	2
—	1	—	1	—	1	—	—
—	8	—	—	—	4	1	—
—	19	—	—	—	11	3	—
—	10	—	—	—	1	—	—
—	29	34	—	—	10	2	4
1	7	—	—	—	5	3	1
—	4	1	—	—	—	2	—
—	29	22	1	—	2	2	1
—	4	—	—	—	1	—	1
1	35	—	—	—	3	—	3
3	214	63	6	—	46	15	12
3	271	77	10	—	70	41	16

TABLE III.—1946.

CAUSES OF AND AGES AT DEATH.

Causes of Death	Under 1 year	1-5	5-15	15-45	45-65	65 years and over	Total
1. Typhoid and paratyphoid fevers	...	...	...	...	...	...	...
2. Cerebro-spinal fever	...	...	...	...	...	...	...
3. Scarlet fever	1	1	3	—	1	1	7
4. Whooping Cough	—	2	—	—	—	—	2
5. Diphtheria	—	—	1	4	1	—	6
6. Tuberculosis of respiratory system	1	—	3	113	49	12	178
7. Other forms of Tuberculosis	1	6	8	13	4	3	35
8. Syphilitic disease	3	—	—	2	12	10	27
9. Influenza	5	1	—	8	12	35	61
10. Measles	—	—	—	—	—	—	—
11. Acute poliomyelitis and polioencephalitis	—	—	—	1	—	—	1
12. Acute inf. enceph.	—	—	—	2	2	—	4
13. Cancer of buc. cav., oesoph(m) uterus (f)	—	—	—	4	29	34	67
14. Cancer of stomach and duodenum	—	—	—	8	39	83	130
15. Cancer of breast	—	—	—	12	41	35	88
16. Cancer all other sites	—	1	2	29	136	260	428
17. Diabetes	—	—	2	2	13	26	43
18. Intra-cranial lesions	—	—	—	5	111	480	596
19. Heart diseases	—	—	2	26	219	1210	1457
20. Other diseases of circulatory system	1	—	—	4	22	99	126
21. Bronchitis	3	1	1	9	38	150	202
22. Pneumonia	42	12	—	14	27	85	180
23. Other respiratory diseases	1	1	3	5	29	21	60
24. Ulcer of stomach or duodenum	—	—	—	8	18	14	40
25. Diarrhoea—under 2 years of age	15	3	—	—	—	—	18
26. Appendicitis	—	1	5	4	6	—	16
27. Other digestive diseases	2	2	1	9	31	62	107
28. Nephritis	—	—	2	19	43	88	152
29. Puerperal and post-abort. sepsis	—	—	—	2	—	—	2
30. Other maternal causes	—	—	—	10	1	—	11
31. Premature births	78	—	—	—	—	—	78
32. Congenital malform, birth injury, infant disease	104	—	—	2	1	2	109
33. Suicide	—	—	—	17	15	3	35
34. Road traffic, etc.	—	1	2	14	11	12	40
35. Other violent causes	10	10	10	11	16	53	110
36. All other causes	15	5	11	39	69	250	389
TOTALS	282	47	56	396	996	3,028	4,805