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COUNTY BOROUGH OF HASTINGS



#### ANNUAL REPORT

of the

MEDICAL OFFICER OF HEALTH,

for 1944

G.R. BRUCE, O.B.E., M.A., M.D., D.P.H.

Medical Officer of Health and School Medical Officer.

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## 1. PREFACE TAGE

Public Health Department,
44, Wellington Square,
HASTINGS.

October, 1945.

TO HIS WORSHIP THE MAYOR, AND TO THE ALDERMEN AND COUNCILLORS OF THE COUNTY BOROUGH OF HASTINGS.

what out from

Mr. Mayor, Ladies and Gentlemen,

I beg to submit the Annual Report of the Public Health Department for 1944, much curtailed by direction of the Ministry of Health, as compared with pre-war reports. The statistical tables, omitted from the report, are filed for any future war-time health survey.

The public health services, clinical, hospital and environmental, were fully maintained during 1944.

The crude death rats, 21.4 per 1,000 of the populatiom 14.34 corrected, while slightly reduced from last year, remains high as compared with the rate prevailing before the war, this being 15.4 crude, 10.31 corrected in 1938. As pointed out in page 6 an important factor is the high proportion of aged and infirm persons who remained in the town.

The birth rate, 16.7 per 1,000, continues to rise, the total increase being about 50 per cent since the beginning of the war. Fuller details are given with regard to this and the increase in the illegitimate rate in page 6.

The infantile mortality rate was 32.7 per 1,000 births as compared with 34.2 in 1943 and 52 in the large towns in 1944. There were no maternal deaths from puerperal fever or other causes associated with pregnancy.

The death rate from tuberculosis, all forms 191 per 1,000, shewed a substantial decrease as compared with that of 1943, 1.21 per 1,000, and now is approaching the pre-war(1934-1938) average rate of .83 per 1,000, this being a fairly general experience. Certainly more cases are now being investigated and a diagnosis made at a certain stage, as a result of publicity, mass radiography, etc., and it may well be that the war-time increase of incidence and death rate has now been checked.

As regards notifiable infectious diseases, the incidence of scarlet fever, 81, and diphtheria, 13, remained almost the same as in the previous years. There were no deaths from any of the common notifiable diseases in 1944 and no death from diphtheria during the past 3 years. It should be emphasised that while a considerable proportion of our child population, 46 per cent under 5, and 64 per cent ever 5 and under 15, are protected against diphtheria by immunisation, this is not sufficient to protect the general population and indeed we are disappointed to note a slight reduction in the total numbers immunised during 1944.

The Public Health Department continued to act as a centre for the organisation and administration of the Civil

Defence Casualty Services, the Medical Officer of Health being also agent of the Ministry of Health for the three local emergency casualty hospitals and the associated medical services. The Health Department also acted as Casualty Buredu and Casualty Information Centre. All the various calls on the Casualty Services and Hospitals were adequately met throughout the year.

I beg to thank the Council, the Chairman and Members of the various Committees for their continued support and acknowledge with much gratitude the good and loyal work of my staff in these very difficult days.

I have the honour to remain,
Mr. Mayor, Ladies and Gentlemen,
Your obediest Servant,

G. R. BRUCE.

Medical Officer of Health.

#### 2. CHAIRMAN OF COMMITTEES RESPONSIBLE FOR HEALTH SERVICES

Public Health Committee - Councillor Captain E. T. Hyland.
Sub-Sanatorium Committee - Councillor Captain E. T. Hyland.
Education Committee - Councillor F. W. Chambers.
Mental Deficiency Committee - Councillor H. W. Rymill.
Maternity and Child Welfare Committee - Councillor Mrs. G. M.
Foxon, J.P.

Social Welfare (and Sub.) Committees - Councillor A. Honnor.
Housing and Improvements Committee - Councillor Mrs.
Alexander.

#### PUBLIC HEALTH OFFICERS OF THE CORPORATION.

See list as fully set out in report of 1938. The following alterations in staff are recorded in 1944.

THEMARKS	NAME OF OFFICER	OFFICE HELD.
Resigned 29.5.44	HAYMAN, Mrs. I. F.	
Commenced. 22.5.44	WARREN, Miss A. P.	Shorthand Typist, Health Dept.

· · · · · · · · · · · · · · · · · · ·	
3. SUMMARY DF GENERAL AND VITAL STATISTICS, 1944.	
Area of Borough 4,496 acre	s ·
Population, Gensus 1931 65,207	
Registrar-General's estimate of resident population 1944, for the purpose of Vital Statistics 38,350	
Number of inhabited houses (end of 1944) according to Rate Books 20,138	
Rateable Value £760,595	
Sum represented by a penny rate £2,150 estimates	tcd
(Legitimate 550 296 254 Live Births, 1944 (Illgitimate 91 47 44 = 641	
Birth Rate, 1944, per 1,000 of the estimated resident population	
Still Births 21	
Rate per 1,000 total (live and still) births 17.2	
Deaths, 1944 822	
Death Rate, 1944, per 1,000 of the estimated resident population - (a) crude	
Deaths from puerperal causes:- Rate per 1,000 total	al
No. 29 Puerperal sepsis Nil Nil Nil No. 30 Other maternal causes Nil Nil	
Date rate of Infants under one year of age:-	
(a) All infants per 1,000 live births 32.7	
(b) Legitimate infants per 1,000 legitimate live births 36.3	
(c) Illegitimate infants per 1,000 illegitimate live births	
Deaths from Cancer (all ages) 129	1
Deaths from Measles (all ages) Nil	
Deaths from Whooping Cough (all ages) Nil	
Deaths from Diarrhosa (under 2 years of age) 1	1
* Assuming the continued use of the pre-war factor of correction .67	

#### 4. VITAL STATISTICS

1. Births. 2. Deaths.

		Per	1,000 of Popu	lation		
Year.			Death Rate,			
		Birth Rate	Crudé	Corrected x		
1938 1939		11.1	15.4	10.3		
1940		13.3	20.3	11.3 13.7 13.7		
1942 1943	-	16.5	21.4	14.4		
1944		16.7	21.4	14.3		

#### x Factor for correction .67

The above table shews a definite trend during the war. In the death rate there was a tendency to increase until it reached the high crude rate of 23.8 per 1,00, corrected down to 15.9, but still somewhat above the standard national rate. As stated in previous annual reports, Hastings has for many decades attracted a preponderating resident population ranging from middle age to advanced old age. This feature, which explains the high death rate correction, was emphasised during the war by the absence on service of munition duties of the majority of the younger age groups. Out of 822 deaths in 1944, 209 or 25.4 per cent were in persons between the ages of 65 - 75, and 398 or 48.4 per cent over the age of 75.

As regards the birth rate, this has advanced from 11.1 to 16.7, an increase of approximately 50 per cent during the war years. It should be noted that in 1944, 91 of the 641 births, 1 in 7, were illegitemate, or about double the rate prevailing pre-war. It is of interest that a substantial increase in the birth rate; both locally and nationally, has taken place during the war. In the last war, 1914 - 1918, in Hastings the war time increase was slight, from 14.9 to 16.1 with a quick rise in 1920 to 19.1, a rapid fall the following year to 14.3 and a gradual fall until 1938 when the rate was 11.1.

#### 3. Main causes of Death.

#### (a) Diseases of the heart and blood vessels.

The total deaths from causes under the various associated headings amounted to 218 or 26.5 per cent of the total deaths.

#### (b) Cancer.

The total deaths were 129, as compared with 119 in 1943. The rate, 3.4 per 1,000 remains high, as might be expected with the age and sex constitution of the town.

A definite and complete scheme for the diagnosis and treatment of cancer in accordance with the Cancer Act has been postponed during the war years. Arrangements for specialised treatment, however, were available, either in special London or Provincial hospital, the latter particularly at Brighton and Tunbridge Wells; in many cases patients have been assisted by ambulance or sitting case transport.

#### . (c) Respiratory diseases.

The total deaths from respiratory complaints were 79, including 14 due to influenza, but excluding pulmonary tuber-culosis. Influenza was not epidemic.

#### 5. INFECTIOUS DISEASES.

#### Prevalence of Infectious Diseases.

The following table summarises the incidence of the notifiable infectious diseases during 1944.

Disease	Total cases	Admitted to. Hospital	Deaths
Diphtheria (including Membraneous Croup)	13	12	Nil
Erysipelas	20	8	Nil
Scarlet Fever	81	75	Nil
Paratyphoid B.		and the state of the	Nil
Puerperal Pyrexia	15	2	Nil
Cerebro-Spinal Meningitis	- 11-	-	Nil
Ophthalmia Neonatorum	. 4	.,(120.00	Nil
Pulmonary tuberculosis	82	40	32
Other forms of tuberculosis .	84	16	3
Poliomyelitis	1	1	Nil
Acute Primary Pneumonia	, 23	4 ,	Nil
Malaria Dysentery	1	1	Nil
Influenzal Pneumonia	5	- 4	. 1
Measles	3	- 1	Nil
Whooping Cough	72	7	Nil

No cases of the following notifiable infectious diseases were reported, smallpox, cholera, plague, typhus fever, relapsing or continued fever, acute polio-encephalitis, encephalitis lethargica or trench fever.

#### REMARKS.

#### (a) Scarlet fever.

The incidence was 81 cases in 1944 as compared with 78 in 1943. The disease remained mild and generally sporadic.

#### (b) Diphtheria.

The incidence was again low, 13 cases without a death. As a matter of interest the indidence and deaths since 1938 are shewh below:-

Year	No. of cases	Deaths.
1938 1939 1940 1941 1942 	28 6 7 13 13	3 1 Nil Nil Nil Nil

On the face of it, the record for the past 4 years would seem very satisfactory and credit should be given to the local crusade for diphtheria immunisation. But it should also be remembered that diphtheria epidemics run in waves with sometimes 5, 4, and 5 years interval between; also that our immunisation percentage, now 64 per cent over the age of 5 and 48 per cent under 5, has by no means reached the desideratum of the Ministry of Health, considered sufficient to check further epidemics, namely, 80 to 90 per cent of the child population.

#### Isolation Hospital.

No alteration occurred in the available accommodation.

- (a) Borough Sanatorium for Infectious Diseases Hastings 70 beds.
- (b) Smallpox Hospital, Breds 20 beds.

Owing to special war-time contingencies, the accommodation at the Smallpox Hospital, Brede, was made available for cases throughout Sussex. The same arrangement applies to the Sedgebrook Smallpox Hospital near Chailey.

Total admissions to the Borough Sanatorium in 1944 were 202, including 25 cases from the Rural District of Battle and the Borough of Ryc, 30 cases from the Borough of Bexhill and 22 Service cases, leaving 125 cases from Hastings. (See previous table which refers to notifiable diseases only). It was not necessary to open the Brede Smallpox Hospital.

Before the war plans were practically complete for the erection of a cubicle block of 10 beds to meet the increased demands made by the acceptance of all fever cases from Bexhill, with a peace time population of 23,000

With the return of our population in Hustings and Bexhill this plan should now receive priority, as our existing 70 beds will then serve a population of 120,000 to 130,000, considerably swollen during the summer season.

Moreover, as previously stated, a cubicle block, capable of dealing with so many different infectious diseases,

effects valuable economics in nursing and domestic staff, fuel, light, etc.

The Borough Sanatorium remains available along with the Municipal Hospital to carry out the work of the Public Cleansing and Disinfecting Centre at Rock-a-nore which was not available for special reasons during the war. The service has been carried out with some difficulties, but very efficiently, owing to a limited capacity for disinfection and shortage of staff. High priority should be given to the replacement of the old Disinfecting Station by a modern establishment, which, as emphasised in previous reports, would most conveniently and economically be sited in or adjoining the Borough Sanatorium grounds.

#### DIPHTHERIA IMMUNISATION CAMPAIGN.

The campaign was considerably disturbed by enemy action throughout the year, particularly by the flying bomb campaign during the summer; but it is hoped that there will be an increase in the numbers immunised after the war.

Altogether 467 children were immunised completely, 339 under 5 years of age, 128 over 5 years. It is estimated that 64 per cent school children and 48 per cent children under 5 have been immunised.

The immunising agent is A.P.T., doseage .2 and .5 c.c at 4 weeks intervals, schick testing being carried out in a small proporation or by request. The number of applications for "boosting" injections in the case of children starting school is disappointing.

DIPHTHERIA ANTI-TOXIN - Supplies are kept at the Health Dept, and at Police Stations and issued on request to the medical practitioners of the town.

#### Vaccination Return, 1943.

Births		 695
Successful Primary Vaccination	s	 322
Conscientious Objectors		 282
Percentage of births vaccinate	d	 46.3

The percentage of children now being vaccinated has risen substantially during the war by about 15 per cent.

#### Report on Public Health Bacteriological Work.

This work was carried out in the laboratory of the Royal East Sussex Hospital under Dr. P. Lazarus Barlow, Pathologiat, to the hospital, the following being a summary for 1944.

Source of Specimens	Nature of Specimens	No.
A (General Practitioners (Borough Sanatorium (Medical Officer of Health	Sputum for Tubercle Bacilli Throat Swabs for Diphtheria Widal examinations for	51 455
	Typhoid Group Miscellaneous	6 355
B School Medical Service	etc. Throat swabs for Diphtheria	477
C Tuberculosis Dispensary	Sputum for Tubercle Bacilli	91
D Municipal Hospital	Miscellaneous	180
A pher s As	Total specimens examined	1615

#### 6. VENEREAL DISEASES CLINIC, ROYAL EAST SUSSEX HOSPITAL.

The number of new local cases in 1944 were syphilis - 5 cases compared with 9 in 1943, gonorrhoea - 12 cases compared with 11 in 1943.

This district has definitely not shared in the wartime increase in venercal diseases to which considerable public attention has been given from the point of view of treatment and preventive measures. This is shown clearly in the figures given below:-

Year	Syphilis	Gonorrhoea
1938	A B	15
1939	10	33
1940	9,	6
1941	3	6
1942	7	19
1943	9	11
1944	5	12

Average in war years sympilis 7, Gonorrhoaa 12.

1934 - 38 average annual incidence syphilis 9 cases

This is satisfactory in view of the Ministry of Health's widely publicised information about a considerable national increase in the war-time figures of venereal diseases. In accordance with the recommendation of the Ministry of Health the attention of the general public has been drawn by posters, pamphlets, personal instruction and lectures on the whole matter of venereal diseases and to the facilities for treatment available locally.

#### Notifications received under Regulation 33B

Form 1 - 10 notifications, all relating to females.

Form 2 - No notifications.

Form 1 relates to a person suspected of causing one infection

Form 2 relates to a personsuspected of causing nore than one infection.

The Sister of the Venereal Diseases Clinic acts as Social Worker and Almoner on the lines suggested by the Ministry of Health. If the persons named in Form One are not already attending for treatment Sister endeavours to make contact and to get them to the Venereal Diseases Clinic.

#### 7. TUBERCULOSIS

#### (a) Register

At the end of 1944 the tuberculosis register contained 622 names.

Males 281, Females 214, suffering from pulmonary tuberculosis.

Males 50, Females 77, suffering from non-pulmonary tuberculosis.

#### (b) Notifications and deaths of cases notified in 1944.

Age Period	l N	ew ca	ses		Death	s of	cases	notified	
	Pulmonary Non-Pulmonary				Pulmon	Pulmonary Non-pulmonary			
	M	F	M	F	M	F	M	F	
0 - 1 year	- 1	-	-	-	-	-	-	-	
1 - 5 years	2	-	2	4	-	-	-	2	
5 - 10 "	2	3	2	8	-	-	-	1	
10 - 15	-	-	2	2	-	-	-	-	
15 - 20 "	3	1	1	-	-	-	-	-	
20 - 25 "	6	3	1	-	-	-	-	-	
25 - 35 "	7	14	1	1	-	2	-	1	
35 - 45 "	12	4	-	-	3	2	-	-	
45 - 55 "	9	2	-	-	2	-	-	-	
55 - 65 "	5	2	-	-	2	-	-	-	
65 upwards.	2	5	-	-	1	2	-	-	
Totals	48	34	. 9	15	8	6	-	4	
Grand Totals 106 18									

#### (c) Incidence and Mortality.

The death rate, .91 per 1,000, showed a distinct fall from that of 1943, 1.21. The number of deaths and death rates from tuberculosis from 1938 are as follows:-

Pulmonary_	Non-Pulmonary	Total	Rate per 1m000
. 54	6	60	.93
43	3	46	.69
47	4	51	.88
38	5	43	1.22
35	4	39	1.00
38	6	44	1.21
32	3	35	.91
	54 43 47 38 35 38	54 6 43 3 47 4 38 5 35 4 38 6	54     6     60       43     3     46       47     4     51       38     5     43       35     4     39       38     6     44

The attention of the public has been called to the war-time increase in the incidence and death rate of both pulmonary and non-pulmonary tuberculosis, particularly tuberculous mer ingitis in young children. Reasons advanced

have been the early diagnosis with or without symptoms in service recruits and later in munition or other factory workers by mass radiography propther methods, the harmful effects of black-out, the stress and drain of conditions in the field or in Civil Defence or war-time factories and billets; but certainly not war-time rationing.

In the last war an increase in the death rate from tubergulosis took place but not until towards the end and immediately after the war. In this wat the increase occurred early in 1940 and 1941. A definite decrease, however, has been reported now in many districts, practically down to a peace time level. This follows energetic measures by the Ministry of Health and local Authorities, particularly attention to early diagnosis, the commendement of mass radiography, the provision of maintenance allowances and the stimulation of the public to carry out preventive measures.

Unfortunately in many districts there is still a shortage of sanatorium beds and beds for cases of surgical tuberculosis a situation rendered more acute by other difficulties, both nursing and domestic.

One feature to be commented upon is the increase in the number of patients presented for investigation and diagnosis at the Tuberculosis Dispensary in the earliest stages, in many cases with symptoms only, and with no evidence or only slight evidence of tuberculous trouble or sometimes only radiological evidence, particularly in glands in the chest in young children. Under a hygienic regime the majority of these patients get well and remain well with dispensary and private practitioner treatment, without any necessity for notification or treatment at a residential sanatorium. With continued observation and periodical X-rays the hazard of a sudden and serious breakdown can generally be averted.

#### (d) Tuberculosis Dispensary etc., at the Royal East Sussex Hospital

As indicated there was a definite increase in the preventive work of the Tuberculosis Dispensary, which was fully maintained in other directions. The total attendances were 1,323 as compared with 817 in 1943, new cases being 263 as compared with 198 in 1943. Contacts examined were 80.

## (e) Institutional Trantment.

In spite of the general shortage of beds it was possible to arrange institutional treatment for all cases under the Authority's scheme as follows:-

Darvell Hall Sanatorium ... ... 39 cases pulmonary tubarculosis
Municipal Hospital ... ... 18 " " "
Church Army Lads' Sanatorium ... 1 case " "
Royal East Sussex Hospital ... 16 cases surgical "

At Darvell Hall Sanatorium beds can be obtained within two weeks or even less for urgent cases.

The Municipal Hospital continued to be available at a moments notice for chronic or advanced cases, for special emergencies or occasionally for cases under observation.

#### (f) Government Maintenance Allowance, etc.

As described in previous reports maintenance allowances are available under the Government scheme for cases of pulmonary

tuberculosis only, in the case of persons who have to give up remunerative work in order to undertake treatment. In addition allowances to meet high rent and rates, hire purchase instalments, can be paid; travelling expenses, pocket money, etc. can be paid in certain cases.

The maintenance allowances are based on a sufficient income to support the family or upkeep of the home, while the patient is receiving treatment at the Sanatorium or during the period afterdischarge up to 18 months while he is awaiting full strength to resume his work.

It will be realised, however, that this scheme does not cover surgical cases, chronic or advanced cases where there does not appear to be any hope of return to working capacity.

The onus of certifying suitable cases for the receipt of the Government Maintenance Grant is placed upon the Tuber-culosis Medical Officer. The work of investigation is dealt with by the Health Department with the co-operation of the Treasurer's department in the decision as to the amount of the actual payment. A special sub Committee of the Public Health Committee deals generally with all the arrangements. From the 1st January 1944 to the 31st December, 1944 eleven patients received maintenance allowances, including two who also received discretionary allowances.

#### (g) Tuberculosis Care Committee.

The Tuberculosis Care Committee provides one pint of pasteurised milk each day for patients who require nourishment and in special cases 3/6d per week to purchase eggs, butter or margatine, and financial help where necessary, also gifts of clothing, nursing requisites, grants for railway fares and so on. During 1945 it is intended to develop again occupational therapy in co-ordination with the scheme for Darvell Hall Sanatorium.

(h) Public Health (Prevention of Tuberculosis) Regulations 1925.
Public Health Act, 1936, Section 72.

No action was taken in 1944.

#### . 8. MATERNITY AND CHILD WELFARE.

#### 1. Vital Statistics.

#### (a) Infantile Mortality.

The infantile mortality rate was 32.7 per 1,000 births as compared with 34.9 in 1943, and with 52 in the large towns including London. As in the previous years the great majority of the deaths occurred either shortly after birth or during the first month of life - 15 out of 21 deaths; of these 13 being in the first week of life, 9 being due to prematurity, the remainder injury at birth, lack of development of the lungs (atelectasis) and enteritis.

The importance of dealing with this neo-natal mortality is recognised as a most important service, in which research, field work, and development of infant welfare services in accordance with modern information and knowledge must all play a part.

#### (b) Maternal Mortality.

No deaths occurred from puerperal sepsis or maternal causes of any kind. Maternal mortality is now generally falling throughout the country, particularly as a result of improved technique and use of the sulphonamide group of drugs.

Year		Mater		ortali		000
1939 1940				5.9		
1941			***	4.7 Nil		1
1943 1944	::	::	::	1.6 Nil		
	Aver	age - a	8.8		1 100	

All the spacial services, including ante natal and post natal clinics, consultants for difficult labour, pathological facilities, etc., were fully maintained.

#### (2) Inspection of Midwives.

The results of inspection and the average standard of work were satisfactory.

#### (b) Midwives Act, 1936. Domiciliary Midwifery.

		District Nurs- ing Associa- tion Midwives	Municipal Midwife	Total
2.	Cases conducted Post natal visits. Ante natal visits Gas & Air Analgesis	808 "	54 1578) 967 634) 374 14	206 3097 (supervision 1578) 1192 " 634 73

The service, carried out by the midwives of the District Nursing Association and the Municipal Midwife was fully maintained and adequate.

Gas and Air Analgesia administered by the District Nurses and the Municipal Midwife came fully into use in 1944 and was much appreciated.

#### (c) The Puerperal Pyrexia Regulations, 1939

former than a second of the contract of contract of the contra

The total number of cases was 15.

All the pre-war arrangements were available including hospital accommodation, home nursing, provision of consultants, bacteriological and general investigations, etc.

The	summary:	of.	cases	is	as	follows:-
-----	----------	-----	-------	----	----	-----------

Toxaemia .						1
Difficult la						2
Breast condi	tion	s.	i	**	0	3
Local sepsis						
Pyelitis .						1
Endometritis	3.					3
			• •			1
Cold						2
		5.4				

Total 15

#### (3) Work of the Health Visitors and Home Help.

	Home	Visits.
First visits under one year	 542	
Second or further visits	 7284	
Infectious diseases and		
special visits	 263	
Infant protection visits	 288	
Expectant mother visits	 273	
and the second	- Lizer	
Total	8650	
	*	
Home Help cases	 11	
	and the same of	4

#### (4) Maternity and Child Welfare Centres.

Total attendances were as follows:-

Infant We	lfare	Centres.		9424
Ante nate	1 and	post natal	clinics	486
Medical o	consul	tations .		3122

## (5) Contraceptive Clinics for Married Women (including County Cases). Treatment for medical conditions only.

New	cases	 		 	40
old	cases	 	••	 	2
1				Total	42

#### (6) Distribution of Milk, Nutritive Foods, etc.

The Infant Welfare Centres again co-operated with the National Scheme for the distribution of milk, cod-liver oil and fruit juices to expectant and nursing mothers and children under 5, the work being carried out smoothly and tith the co-operation of the staff. The take up, particularly fruit juices, has been on the whole good throughout the year, the percentage being as follows:-

Orange juice - 70 per cent (this includes issues to Expectant Mothers).

Cod lver Oil - 20 per cent

No doubt the additional milk and vitamins have had a definite influence in the present day general high standard of infant health.

Werwere also favoured by another generous gift of New Zealand honey from our namesake town in thatland which was most popular, especially with the toddlers.

#### (7) Dental Treatment.

Expectant and nursing mothers at Royal East Sussex Hospital Nil.

- (8) Orthopaedic and Light Treatment. (see special note)
- (9) Treatment of Toddlers.

All facilities at School Clinics for examination and treatment are available (see School Report).

#### (10) Inti-Diphtheria Inoculation

See note on infectious diseases.

#### (11) Child Guidance Clinic.

Facilities for children under the age of 5 were provided in 1944 to attend the Child Guidance Clinic. Several cases referred, mainly enursis, have been studied by the team and considerable benefit has been received.

#### (12) General Notes on Maternity and Child Welfare Work in 1944.

The peace time services were available throughout the year including 6 district Infant Welfare Centres and 2 ante natal and post natal clinics, the Normam Road Infant Welfare Centre in central St. Leonards having been re-opened.

The work of the Maternity Unit of the Municipal Hospital, with a total of 352 births in 1944, including 252 within the Borough, should be noted, also with its own Ante Natal Clinic, attended by most of the local mothers and cooperating with the other Ante Natal Clinics. Post Natal cases are also seen before they are referred back to their own doctor or the appropriate municipal clinic.

The Fern Bank Maternity Home with 131 maternity cases also has its own Ante Natal Clinic. Without doubt the full use of the Ante Natal Clinic associated with the Maternity Home is the ideal method whereby the expectant mother can be under the ante natal care of the doctor and nurse responsible for the confinement and puerperium.

Other services operated fully, including dental treatment for children under school age; orthopaedic and light treatment for infants and toddlers; hospitals and consultants for cases of difficult labour, puerperal pyrexia and complicated ante natal cases were available.

Home visiting, infant protection visiting and visits in connection with infectious cases and scabies, overcrowding, insanitary housing conditions, etc., were well maintained by the Health Visitors although short staffed and working under somewhat trying war time conditions.

As regards premature infants, during the year, arrangements were made to deal with the provisions of Circular 20/44 as far as practicable. Equipment in accordance with the circular including draught proof cots was obtained and made available through the District Nursing Association for work in the district. The Municipal Hospital also has two small wards where premature infants can be nursed in accordance with the principles of the circular and similarly a ward is available in the Fern Bank Maternity Home.

In the forthcoming National Health Service the work of the Maternity and Child Welfare Services will be an important section in which the medical and Health Visiting staff of the local Authority, general practitioners, and District Nursing staff will play an essential part in the co-ordinated services.

There should be close association and co-ordination with a central maternity hospital or wing which, in addition to taking normal, will deat with difficult, midwifert, ante natal cases requiring hospital attention, post natal medical difficulties; and it will also contain a consulting Infant Welfare Centre to which cases requiring investigation and diagnosis maybe sent, with a small ward available in the hospital for inpatient treatment of such infants as may require it. In addition the consulting staff should be available for difficult midwifery anywhere in the district for puerperal pyrexia and infant consultations wherever required.

#### 9. MENTAL DEFICIENCY

The total number of mental defectives on the register of the local Authority at the end of 1944 Was163, there being no change during the year. Of these 67 are in institutions 47 under guardianship, 33 under statutory supervision, 9 under friendly supervision and 7 on licence.

The Supervisor of the Occupational Centre continued classes for the mental defectives at the Municipal Hospital and a few selected cases living outside. Home teaching of certain other lower grade defectives, physically unable to attend, has also been carried out.

Menawhile the question of the re-opening of the allday Occupation Centre at Athelstan Road in the Open Air School was under consideration and the Centre has actually been started during 1945.

The Mental Health Worker, in addition to the home visiting of cases under guardianship or statutory or friendly supervision, maintained touch with children certified for the Special School but not evacuated, or in attendance at an elementary school; she also dealt with the after care of certain special school pupils, and made a preliminary investigation of children brought forward for the first time.

In addition she attends the weekly clinic for Nervous Disorders at the Royal East Sussex Hospital which deals with the whole district and is financially supported by the Mental Deficiency Committee. Total attendances have satisfactorily increased and in 1944 were 304, new cases 146, 82 from Hastings.

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#### Mental Health Visitor - Summary of Work.

Home visits - cases under	guardianship supervision Education Committee	350 217 116
Miscellaneous visits Special visits		360 33
	Total 1	.076
Interviews Escort Clinic for Nervous Disorde Municipal Hospital Occupa	ers	15 occasions 44 sessions 176 sessions.

#### 10. ORTHOPAEDIC SCHEME

All the usual facilities were available throughout the year for children under and of school age, and for cases of tuberculosis of all ages, including:-

(a) Diagnostic Clinic and supervision - Royal East Sussex Hospital.

(b) Treatment, Exercises, Appliances, X-ray and

Light Treatment - Royal East Sussex Hospitall
(c) In-patient treatment, operations for short period stay - Royal East Sussex Hospital.

(d) Prolonged institutional treatment with education Heritage Craft Schools, Chailey, and Shaftesbury
Society.

Attendances were maintained and there was an increase of new cases at the Orthopaedic Clinic during 1944.

Light treatment was given for abdominal and gland tuberculosis and especially for malnutrition, early rickets, severe rickets being almost unknown.

#### Cases attending the Clinic, Royal East Sussex Hospital - December, 1944.

(a) School Medical (b) Maternity and (c) Tuberculosis	Child Welfare		30 cases 14 cases 1 case	
There are	4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Orthop	aedic Sun	Ray.
(a) School Medical (b) Maternity and (c) Tuberculosis	Child Welfare	2	9 32	
	the personality was by a few subscribe	Total 7	9 42	

#### Total Attendances.

Orth	opas	die	8.4.20	 	i	 3105
	Ray					 007

#### Cases receiving residential treatment at Chailey, December 1944.

Tuberculosis .. .. 3

Quarterly reports are submitted on all children in attendance at the clinic and when cases complete treatment or fail at attend the School Medical Officer, Health Visitors or School Nurses and Physical Training Instructors, also the Almoner of the hospital, watch for relapses and arrange, if necessary, further treatment. Special attention is given at school inspections and the clinics to the diagnosis of early postural defects.

Arrangements have now been approved by the local Authority for the appointment of an Orthopaedic School Nurse, when available, to watch children after hospital and clinic treatment, supervise special exercises at school, look out for early cases and co-operate and work with the Orthopaedic Clinic at the hospital. This should obviate the loss of much valuable school time and prevent former cases being lost sight of and relapsing.

#### 11. GENERAL SANITARY ADMINISTRATION

#### (1) L cal Acts, Orders, B elaws, Adoptive Acts.

No additions or amendments were reported in 1944.

#### (2) Public Health Propaganda.

The attention of the public was called throughout the year to various health matters of general or local importance by illustrated posters, circulars and pamphlets from the Ministry of Health, papers and articles in the local press and lectures, among the subjects being diphtheria, maternity and child welfare facilities, especially the scheme for milk and vitamins, early treatment of venereal diseases, war dietary, shelter and black-out hygiene, etc.

The officers of the Public Health Department do a great deal of quiet propaganda in their various and numerous contacts with a definite cross section of the public.

#### (3) Registration of Nursing Homes.

The number of nursing homes was reduced considerably as a result of evacuation. Inspections and supervision by the Medical Officer of Health and Deputy were fully maintained. No action was necessary throughout the year under the Act.

Total nursing homes registered 14
Beds available - Maternity 32 ) - 131
Others 99 ) - 131

#### (4) Water Supply.

With reference to the queries of the Ministry of Health I am indebted to the Borough Water Engineer for certain information which is incorporated below.

(a) All the water in domestic use from the various deep wells and the Great Sanders Reservoir was adequately treated and

chlorinated and was most satisfactory in its quality; in addition there appeared to be no shortage at any period of the year.

- (b) The supply generally is piped; but there are also a certain number of wells in the outlying rural districts, particularly those incorporated as a result of the Hastings Corporation Act, 1936. Bacteriological examinations of water are made monthly at various points in the public water supply system through the Water Undertaking and when necessary by the Public Health Department. No chemical analyses were carried out during the past year. The bacteriological results were invariably satisfactory and for information on average examination is quoted.
- (c) The waters are not liable to plumbo-solvent action.
- (d) No special action was taken as regards contamination. The local Authority is the owner of certain lands on the gathering grounds and in a position to take the necessary steps.
- (e) No houses are supplied by stand-pipes, the number of houses having a direct supply is 20,154, whilst 125 presumably obtain a supply from wells.

#### Bucteriological Analysis, 14th December, 1944.

Presumptive Coliform Reaction ..... Absent in 100 c.c.
Bact. Coli ..... Absent in 100 c.c.
Cl. Welshi Reaction ..... Absent in 100 c.c.

Opinion: - "This sample is clear and bright in appearance and of the highest standard of bacterial purity.

These results are consistant with a pure and wholesome water suitable for the purposes of a public supply."

#### (5) Baths Establishments (Swiming and Medical)

During 1944 both swimming baths at the White Rock
Baths were opened. The water is treated with modern filtration
and chlorination methods; bacteriological analyses were
satisfactory.

Consideration was given to the re-opening of the medical baths section and it was decided to re-open the seaweed and hot sea-water packs section in each case massage being available at the beginning of 1945; as and when the staff become available and it was possible to effect certain repairs it is hoped to re-open the remaining section including the douches and to consider the future of the Turkish Baths section,

#### (6) Drainage and Sewerage.

The new sewerage scheme has been suspended during the war. Considerable inspection and repair work were carried out as and when necessary.

#### (7) Scavenging.

Collection and disposal by means of controlled tipping at Pebsham Farm are carried out under the direction of the Borough

Engineer. The Health Department co-ordinates in the replacement of defective dust-bins and in the investigation of any nuisance or complaints received.

The Chief Sanitary Inspector reports:-

"It should be recorded, however, that the supply of galvanised iron dust-bins has been limited. Some improvement was perceptible at the end of the year, but supply is not yet normal. Meanwhile, much can be done by those concerned to conserve existing receptacles, e.g., depositing dry material only therein, keeping receptacles under cover where possible, etc. With regard to refuse itself, the sprinkling of chloride of lime from time to time will be found to be effective against flies, etc.

## (8) Sanitary Inspection of the District. Chief Sanitary Inspector's Summary of Statistics, 1944.

The details of the table are omitted.

The Chief Sanitary Inspector reports:-

"Housing repairs have generally been difficult to execute; as in previous war years, shortage of labour, materials diversion of supplies, etc., have continued. The difficulty has, in fact, been accentuated with the gradual returnof population and consequent increased demand for accommodation, shortage of the latter has, in its turn, occasioned use of houses of a rather poor type. The Department, has, however, secured in most cases a reasonable standard of repair, e.g., weatherproof conditions, efficient working of drains, sanitary accommodation and fittings, cleansing of rooms, removal of accumulations, etc.

One other item which may be mentioned, the progressive decay of exterior woodwork, such as window and door frames, due is most cases to want of periodic painting. The effect of this, combined with other portions of exteriors, is depressing and while they do not necessarily give a true picture of inferior conditions, it will undoubtedly be beneficial to those concerned and to the town generally when all such decorative work can be resumed.

As in previous years, inspection of premises following application for timber supplies was continued, applications being endorsed as essential. "Dry-rot" was, as before, the principal cause of decay, and advice as to preventive measures is given to the applicant."

#### (9) Inspection and Supervision of Food.

The Chief Sanitary Inspector reports as follows:-

#### (a) Milk Supply of the District.

Retail Purveyors of Milk on register, 1944		
Wholesale Traders of Producers, 1944	14	
Producers of Accredited Milk, 1944	3	
Producers of Tuberculin Tested Milk, 1944	2	
Purveyors of "Tuberculin Tested", "Accredited"		
or "Pasteurised" Milk, 1944	9	
Pasteurisers' Licences to sell milk as		
Pasteurised	3	
Samples taken under Milk (Special Designations)		
Regulations, 1936		7

The following table gives the number of samples taken during the year, with results thereon:-

Designation	No. Taken	Blue	ylene Test Failen	Te			st	Coun Tes	t
Tuberculin tested and T.T. Cert.	10	8-	2	-		7	3	-	-
Accredited	- 3	8			-	8	-	-	-
Pastuerised	29	11	4	18	11	23	6	27	2

On the above table the following comments may be of interest:-

T.T. and T.T. Certified:- The two unsatisfactory samples were from County producers and were followd up in the usual way.

Accredited: All samples (which were satisfactory) were obtained from producers whose premises had been reconditioned in previous years following action by the Department.

Pastuerised: Results compared unfavourably with those of previous years, an experience perhaps not confined to Hastings alone. Constant care and supervision of plants, in addition to skilled labour, are necessary to obtain uniformly satisfactory results. As far as was possible, however, all unsatisfactory results were investigated, at one time inclose co-operation with the Bexhill Authorities. with the return of more normal conditions, no doubt better reports will be received.

Ungraded Milks: - Twelve samples were obtained for examination for tuberculosis, etc., all being reported negative.

Dairy farms, dairies, and milkshops. 384 visits were made to these premises, 17 notices of contraventions served, all being complied with at the end of the year.

### (b) Meat Inspection.

"The slaughtering continued at one central slaughter house under Government control, except for a certain portion of the year when, owing to an outbreak of foot-and-mouth disease, an additional slaughtering centre had to be utilised.

The meat inspection service performed by the Health Department staff covered an area comprising the County Borough of Hastings, the Boroughs of Bexhill and Rye, and the Rural District of Battle, and this has caused a considerable increase of work (as shown by the following table).

#### Carcases Inspected.

Catt	le				
(Exclud	ing cows)	Cows	Calves	Sheep	Pigs.
1939	534	238	829	3763	3024
1940	1.962	1296	1.450	10222	3234
1941	1659	784	1266	7333	3097
1942	1.5.65	704	1764	9227	1134
1943	1732	67.1	2620	10464	700
1944	197.0	775	2716	7936	461

All animals killed were examined at or soon after slaughtering under the Public Health (Meat) Regulations by a Sanitary Inspector, appropriate action beingttaken as regards carcases comdemned in part or in whole, the figures being as follows:-

Percentage of pigs, whole or part carcases, affected with tuberculosis.. .. .

.. 2.605 per cent.

#### (c) Shops Act, Inspection of Foodstuffs, Restaurants, etc. Pharmacy and Poisons Act, 1852 - 1933 Merchandise Marks Act, 1887 - 1926

The tables dealing with sundry foodstuffs and fish condemned, also giving details of all the work carried out under the above Acts, havebeen omitted.

The number of shops, particularly those businesses employed in catering, restaurents, cafes, etc., was considerably reduced. The majority of the shops, owing to light restrictions, and other reasons, closed well before statutory closing time. No complaints were received.

The number of shops inspected was 107, re-visited 71, total visits, 178, 84 contraventions were noted and notices served. All were complied with.

Under the Pharmacy and Poisons Acts 52 Inspections were made.

#### Merchandise Marks Act, 1887 - 1926.

-	No . of Inspection		Informal Notices Served Complied With	Outstanding
-	40	3 .	3 3	Nil

#### (d) Food and Drugs Act, 1938

During the year 100 samples were taken and submitted to the Borough Analyst at the Laboratory, Lewes, with the following results:-

Milk 15 samples taken, all genuine. All other samples genuine with the exception of one sample of lentils on which the Borough Analyst reported as follows:-

# No. Result of Analysis Action taken 1563 Sample contained the remains (informal of dead moths. Live maggots and weevils residues were present Action taken Remainder of stock (4 lbs. 15 ozs.) withdrawn from sale.

#### (10) Factories and Workshops, Work Places.

Inspecti	on of Fac	tories,	etc		71	visits
Written	Notices				26	
	found				31	
Defects	remedied				31	
Defects	referred	to H.M.	Inspecto	r	Nil	

#### (11) Rodent Destruction

In accordance with the desire of the Ministry of Food a local campaign directed against rodents was carried out, co-operation by publicity from those concerned being invited. Over 553 complaints and reports of the presence of rats, etc., were received necessitating 674 visits, most being dealt with by the end of the year; in addition particular attention was given to food premises, in view of the necessity of conserving supplies. While investigations did not reveal an unduly high rodent population, constant preventive work appears necessary.

#### [12] Camping Sites.

These have been closed down until the end of the war.

#### (13) Disinfestation of Council Houses and Other Premises.

Council Houses .. .. .. .. 1 Other Premises .. .. .. .. 7

#### (14) Disinfecting and Cleansing Station.

The Disinfecting and Cleansing Station at Rock-a-Nore remained closed. Disinfection of clothing and bedding was carried out mainly at the Disinfecting Station at the Municipal Hospital, partly also at the Borough Sanatorium. Treatment of scables and the cleansing of verminous persons have been carried out at the Borough Sanatorium in the case of women and young children and at the Municipal Hospital in the case of men and boys.

I would again repeat the necessity for including as a priority measure a new Disinfecting and Cleansing Station in the post war reconstruction plan. It should, if practicable, be included within the premises and administration of the Borough Sanatorium for Infections Diseases.

Articles disinfected	 6150
Number of individuals cleansed for vermin.	3
Number of individuals cleansed for scabies	467
Number of baths for scables,	1065
Sets of clothing disinfected	 467
Premises disinfected	 200

#### (15) Report on Common Ladging Houses, 1944.

The two registered Common Lodging Houses in the Borough are kept under supervision by the Sanitary Inspector.

Both houses were free from notifiable infectious diseases during the year.

#### (16) Housing

Routine house to house inspection has been suspended for the time being. On receipt of any complaint with regard to the condition of a house or as a result of routine or special district supervision all necessary inspections are carried out (3614 in 1944) and action taken in the usual way. The housing statistical tables for 1944 are omitted in detail.

#### 12. LCCAL GOVERNMENT ACT, 1929

#### HOSPITAL POLICY - MEDICAL ASPECTS

#### The Emergeray Medical Service - Ministry of Health.

No action was taken in 1944 in connection with the transfer of the Municipal Hospital (which is in effect the hospital wards of the Institution) as a general hospital under the Public Health Acts or the Poor Law. ...

The position of the Municipal Hospital will, without doubt, be considered in relation to a national health service as outlined in the White Paper, now under consideration in its original form. It is proposed that all Municipal Hospitals should come within the administration of a new joint health authority covering a considerable area, and in fact be owned by the Authority and used in the best interests of the whole district. As a matter of fact, the Municipal Hospital, as also the two voluntary hospitals, do serve not only Hastings but a considerable portion of the surrounding district of East Sussex.

In the recently published Hospital Survey under the instructions of the Ministry of Health of hospitals in London and surrounding Counties, a co-ordinating policy (see page 33) is clearly indicated one hospital system for Hastings and the surrounding district of Bexhill, Rye, and the Battle Rural District within which will be all the hospitals of the District including the Municipal Hospital. Under such a scheme, each existing unit would play its distinct part in the whole avoiding duplication and waste of effort and thereby it is hoped effecting an increased all round efficiency. As regards the Municipal Hospital and the Borough Sanatorium certain modernisation and re-construction may be required.

The Municipal Hospital, along with the two voluntary hospitals, the Royal East Sussex Hospital and the Buchanan Hospital, is a Class LA Hospital under the Emergency Medical Service of Ministry of Health. Approximately 400 beds were available in the three hospitals for casualty purposes, of which 180 are alloted to the Municipal Hospital.

The normal functions of the Municipal Hospital were fully maintained, and, in fact, of the present 380 beds, 200 were available for chronic cases, maternity and children, the remaining 180 being available for acute and war casualty work, etc., during 1944.

The maternity unit, 28 beds, maintained its growing importance with 352 confinements as compared with 314 in 1943, the highest number yet recorded. Attendances at the Ante Natal Clinic with which a certain amount of post natal work is associated continued to increase throughout the year. The unit co-ordinates well with the general Maternity and Child Welfare Service of the town and district.

#### 13. METEOROLOGY

The tables have been filled for future reference.

#### 14. SUMMARY OF PROVISION OF HEALTH SERVICES IN THE AREA.

- (8) Laboratory facilities see special note.
- (b) Ambulance facilities the service both for infectious and non-infectious cases is adequate for the district. (see report for 1936)

- (c) Nursing in the home see special section of Maternity and Child Welfare report (see also report for 1930) .
- (d) Clinic and Treatment Centres. see special section. (see also report for 1930).
- (e) Hospitals Public and Voluntary see special section
- (f) Medical Service transferred from late Board of Guardians. see special section.
- (g) Mental Deficiency see special section.
- (h) Maternity and Child Welfare Services see special section
- (i) Institutional Provision for Unmarried Mothers, Illegitimate Infants and Home less Children e see report for 1930

#### (j) Prevention of Blindness

The Corporation gives a substantial grant to the Voluntary Association for the Blind which is carrying out an ever increasing most admirable and beneficient work, e.g., administration of subststence allowances up to 27/6 per week for each blind person which have recently been increased, obtaining and keeping suitable work, general and special treatment in local hospitals and national institutions.

By a declaration under the local Government Act, 1929, the voluntary Committee now deals with blind persons and sighted "dependents" requiring out-relief from the Social Welfare Committee.

#### (k) Rag Flock Acts, 1911 and 1922.

The amount of flock is comparatively small in amount, clean and used in remaking mattresses and general upholstery. The premises are all in a satisfactory condition and under the regular supervision of the Sanitary Inspectors.

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