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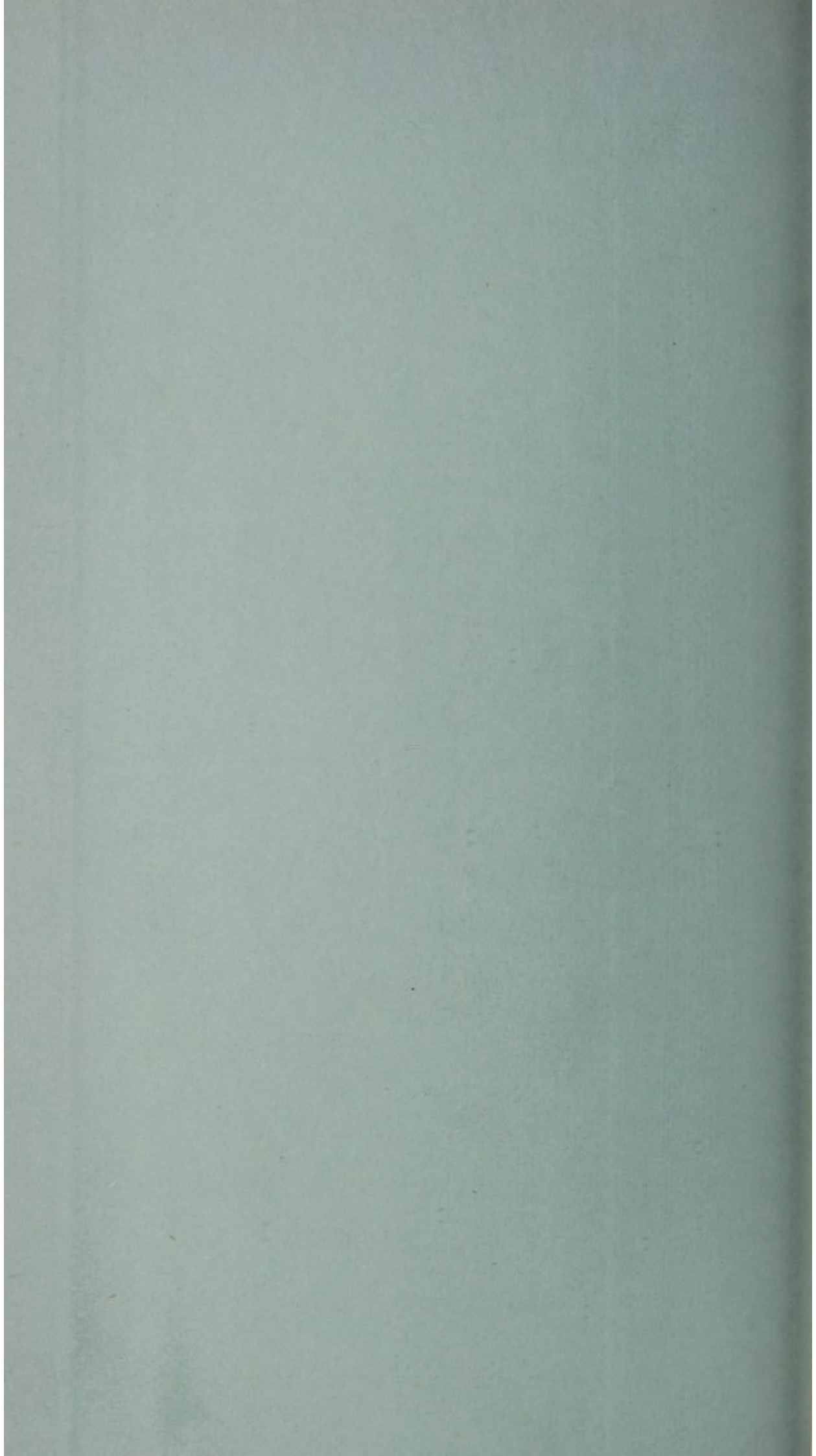
LEICESTER COUNTY COUNCIL

ANNUAL REPORT

of the

COUNTY
MEDICAL OFFICER OF HEALTH
FOR THE YEAR
1955

G. H. GIBSON, M.B., Ch.B., D.P.H.,
COUNTY MEDICAL OFFICER OF HEALTH





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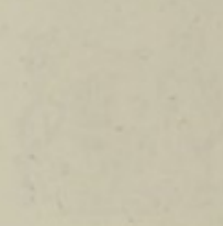


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OF THE

COMMISSIONER OF THE
MEDICAL OFFICE OF THE ARMY
FOR THE YEAR
1925

WASHINGTON, D. C.
GOVERNMENT PRINTING OFFICE

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COUNTY HEALTH DEPARTMENT,
17 FRIAR LANE,
LEICESTER,

September, 1956

MR. CHAIRMAN, LADIES AND GENTLEMEN,

I have the honour to present the annual report on the work of the County Health Department for the year 1955.

The statistics relating to the health of the community continue for the most part to show favourable trends, especially the tuberculosis death-rate and the infant mortality rate, both of which are considerably below the previous lowest figures. I make no apology for calling attention once again to the interest and value of these statistics, which can give so much information which is essential for our plans for the future. Social changes and medical progress constantly alter our health problems, and we must be prepared to be flexible in planning to meet them.

The survey in last year's report on the history of the mental health services appears to have aroused considerable interest, and this year there is included a historical survey, prepared by Dr. Marjorie L. Campbell, on the development of the home nursing and midwifery services in the county.

During 1955, Alderman J. T. Forsell resigned from the chairmanship of the Health Committee, and it is with very great regret that I have to record his death on the 17th March, 1956. Alderman Forsell first served on the Public Health and Housing Committee in 1913, and became chairman in May, 1947. He took a keen interest in all aspects of public health work, and it will be realised that the work of the Committee changed greatly during his period of service. His readiness to seize new opportunities was shown, for example, by his very early appreciation of the potentialities of the Home Help Service and his firm championship of the Home Help in the days before she became the universally appreciated servant of the community that she now is. His kindness to myself and to all members of the staff of the Health Department was very much appreciated.

It is a very real pleasure to acknowledge the interest shown by all members of the Committee in the work under their control, and the consideration invariably shown to all members of the staff. I am glad to have the opportunity of expressing my gratitude to all those working in the County Health Service, and to the Chief Officers of other departments of the County Council, and their staff.

I have the honour to remain,

Your obedient servant,

G. H. GIBSON,

County Medical Officer

HEALTH COMMITTEE

WORTLEY, W. O. (*Chairman*)

EADY, Mrs. N. M. E.	MAWBY, G. H.
EGGINGTON, A. T.	MORRISON, Miss M. F. C. S.
FORSELL, J. T. (<i>Vice-Chairman</i>)	MURPHY, R.
HARVEY, L. W.	PICKERING, L. G. W.
HOLMES, J. H.	POCHIN, V. R. (<i>ex-officio</i>)
JAMES, V. C.	POPE, Mrs. S. A.
KEAY, Mrs. M. E., B.E.M.	SHEFFIELD, Mrs. D. M.
KING, M.	SHERRIFF, J. E.
MARSH, Mrs. A. G.	WESTON, R. C.
MARTIN, Lt.-Col. SIR ROBERT, C.M.G.	WOODCOCK, Mrs. E. M.
(<i>ex-officio</i>)	YATES, F.

Members co-opted by the County Council (from outside its membership) :

DALLEY, Mrs. C. E. BOOTH, C. Z. M.

Members co-opted by the County Council on the nomination of various bodies :

NAME :	REPRESENTATION :
MARTIN, Hon. Lady ..	Leicestershire County Nursing Association
EVERARD, Mrs. F. J. F. ..	Leicestershire County Nursing Association
MILLER, Miss I. H. ..	Royal Leicester, Leicestershire and Rutland Incorporated Institution for the Blind
WYNNE BARNLEY, Dr. E.	National Health Service (Leicestershire and Rutland) Executive Council
FACER, Miss L. ..	Voluntary Association for Cripples' Welfare
GARDINER, J. ..	Leicestershire and Rutland Association of Urban Authorities
SEVILLE, H. A. ..	Leicestershire and Rutland Association of Rural District Councils

Sub-Committees of the Health Committee

(including terms of reference)

General Purposes Sub-Committee :

HARVEY, L. W. (<i>Chairman</i>)	MAWBY, G. H. (<i>Vice-Chairman</i>)
Ambulance Service	Sewerage and water
Health Centres	Small dwellings
Health Education	Welfare of the blind, crippled, deaf and dumb and handicapped persons
Housing (including housing of rural workers)	General matters not specifically referred to any other Sub-Committee
Milk and Dairies	

Domiciliary Services Sub-Committee :

WORTLEY, W. O. (<i>Chairman</i>)	YATES, F. (<i>Vice-Chairman</i>)
Domestic Help Service	Tuberculosis, including the provision of village settlements, workshops, hostel accommodation, night sanatoria, domiciliary visits to tuberculosis patients, provision of shelters and the setting up of a Care Committee
Health Visiting	Vaccination and Immunisation
Home Nursing	
Maternity and Child Welfare	
Midwifery	
Other types of illness, including venereal disease, care of epileptics and care of patients discharged from hospital	
Provision of nursing equipment and apparatus	

HEALTH COMMITTEE—*continued*

Mental Health Sub-Committee :

MURPHY, R. (*Chairman*)

POPE, Mrs. S. A. (*Vice-Chairman*)

Lunacy and Mental Deficiency, including the Council's duties in respect of mental illness or defectiveness under Section 28 of the National Health Service Act, 1946.

Representation on other Governing Bodies and Associations

Joint Consultative Committee for the Welfare of the Blind :

FORSELL, J. T., HOLMES, J. H., HARVEY, L. W., MAWBY, G. H.

Leicestershire County Nursing Association :

EADY, Mrs. N. M. E., FORSELL, J. T., HOLMES, J. H.,
MORRISON, Miss M. F. C. S.

National Health Service Act, 1946 ; Leicestershire and Rutland Executive Council :

HARVEY, L. W. HOLMES, J. H. KEAY, Mrs. M. E.
MARTIN, Hon. Lady PICKERING, L. G. W.

Leicestershire Voluntary Association for Cripples' Welfare :

KEAY, Mrs. M. E. MARSH, Mrs. A. G. SHEFFIELD, Mrs. D. M.

Leicester and County Mission to the Deaf :

KEAY, Mrs. M. E.

Royal Leicester, Leicestershire and Rutland Incorporated Institution for the Blind :

FORSELL, J. T. KEAY, Mrs. M. E. PICKERING, L. G. W. YATES, F.

Wycliffe Society for Helping the Blind :

KEAY, Mrs. M. E.

Southern Regional Association for the Blind :

YATES, F.

Friends of Markfield After-Care Committee :

SHERIFF, J. E. WOODCOCK, Mrs. E. M.

Leicestershire Rural Community Council :

BOOTH, C. Z. M.

STAFF OF THE PUBLIC HEALTH DEPARTMENT

County Medical Officer ; Principal School Medical Officer :

GIBSON, G. H., M.B., CH.B., D.P.H.

Deputy County Medical Officer ; Deputy Principal School Medical Officer :

BYARS, J. R., M.B., CH.B., D.P.H.

Senior Medical Officer :

CAMPBELL, MARJORIE L., M.B., CH.B., B.A.O., D.P.H.

Assistant County Medical Officers :

BENNETT, JOAN G. H., M.B., B.CH., B.A.O.

CRUICKSHANK, MARGARET O., M.A., M.R.C.S., L.R.C.P.

*Senior Assistant County Medical Officer ;
Medical Officer of Health, Loughborough M.B. :*

HOLDERNESS, R. C., M.B., B.S., D.P.H.

*Assistant County Medical Officer ; Medical Officer of Health, Blaby and Lutterworth
Rural Districts :*

McFARLAND, W. D. H., M.B., B.CH., B.A.O., D.P.H. (resigned 14th December, 1955)

ROSS, A. C., M.B., CH.B., D.P.H. (appointed 1st January, 1956)

*Assistant County Medical Officer ;
Medical Officer of Health, Barrow-upon-Soar Rural District:*

HALL, J. W., M.D., B.Hy., D.P.H.

*Assistant County Medical Officer ; Medical Officer of Health, Oadby, Wigston and
Market Harborough Urban Districts and Market Harborough Rural District :*

KIND, R. W., M.R.C.S., L.R.C.P., D.P.H.

Chest Physician and Chief Tuberculosis Officer :

BROUGH, M. C., M.D., B.CH., B.A.O.

(Joint duties with Sheffield Regional Hospital Board and County Council)

Principal School Dental Surgeon :

CAMPBELL, W. G., L.D.S.

School Dental Surgeons :

WARD, A. E., L.D.S.

McLELLAN, C. L. R., L.D.S.

LATIMER, R., L.D.S. (part-time)

County Sanitary Officer :

GREGORY, S. A., M.R.S.H., M.S.I.A.

STAFF OF THE PUBLIC HEALTH DEPARTMENT

—continued

Superintendent Health Visitor and School Nurse (combined duties) :

CARRYER, Miss G. I., S.R.N., S.C.M., H.V.CERT.

Deputy Superintendent Health Visitor and School Nurse (combined duties) :

HORNSBY, Miss A., R.G.N., S.C.M., H.V.CERT.

Health Visitors :

ADDY, Miss A.	KERRY, Mrs. E. (part-time)
ANDERSON, Miss J. A.	(appointed 27th April, 1955)
BARNARD, Miss D. (appointed 7th	LANCASTER, Miss A. H.
February, 1955)	LIMMAGE, Miss F. J.
BLACK, Miss E. J.	MCDONAGH, Miss K.
BOON, Miss K. F.	McILRATH, Miss G.
CHESTER, Mrs. L. M. (resigned 30th	O'REILLY, Miss B.
April, 1955)	PATERSON, Miss J.
CARTER, Miss W. D.	PEARCE, Miss S. M.
COULSON, Mrs. G. E.	PORTER, Miss W. C.
COX, Miss I. N. (resigned 20th May,	ROBINSON, Miss E.
1955)	SHUTT, Miss H. A.
DANIELS, Miss J. (Diabetic H.V.)	SIMMONS, Miss B. W.
DENNING, Miss D. M.	SIMMONS, Miss W. A.
DOHERTY, Miss E. M.	SMITH, Miss E. F. V.
FRASER, Mrs. S. M. (resigned 30th	SWINGLER, Miss M. E.
June, 1955)	TAYLOR, Miss R. P. (Health
FOINETTE, Mrs. N.	Education H.V.)
FOXLEY, Miss E. M.	WEBB, Miss D. (resigned 20th
GRATELEY, Mrs. S. T.	September, 1955)
HILL, Miss M. L.	WILLSON, Miss B. M.
HOLMES, Miss A. L. (appointed 1st	WOOLFITT, Miss N. I.
September, 1955)	WRIGHT, Miss S. M.
JONES, Mrs. K. B.	

Almoner :

WHITEHALL, Miss M. I., B.SC.

Non-Medical Supervisor of Midwives :

BLACKWELL, Miss I. W., S.R.N., S.C.M.
(on the Staff of the Leicestershire County Nursing Association)

Domestic Help Organiser :

HAMER, Mrs. A. L. E., M.B.E.

Ambulance Officer :

CAVE, F. J.

Senior Mental Health Officer and Authorised Officer :

FORDHAM, W. J.

Deputy Senior Mental Health Officer and Authorised Officer :

NEWTON, Mrs. M., D.P.A.

Mental Health Officers and Authorised Officers :

MAGEE, L. M. CHARLES, Mrs. R.
WEST, Miss D. I.

Chief Administrative Assistant :

TURNER, E. R.

DISTRICT

MEDICAL OFFICERS OF HEALTH

Area	Name	Office Address and Telephone No.
URBAN :		
Ashby-de-la-Zouch	Dr. A. M. W. Segerdal..	Town Hall, Ashby-de-la-Zouch (Tel. Ashby-de-la-Zouch 50)
Ashby Woulds ..	Dr. A. M. W. Segerdal..	Council Offices, Moira (Tel. Swadlincote 7669)
Coalville	Dr. A. Hamilton ..	Council Offices, London Road, Coalville (Tel. Coalville 283)
Hinckley	Dr. W. D. Cruickshank	Council Offices, Church Walk, Hinckley (Tel. Hinckley 771)
Loughborough ..	Dr. R. C. Holderness ..	Health Department, Town Hall, Loughborough (Tel. Loughborough 2094)
Market Harborough	Dr. R. W. Kind.. ..	Council Offices, Northampton Road, Market Harborough (Tel. Market Harborough 2258)
Melton Mowbray ..	Dr. J. Young	Egerton Lodge, Melton Mowbray (Tel. Melton Mowbray 662)
Oadby	Dr. R. W. Kind.. ..	Council Offices, Oadby (Tel. Oadby 585)
Shepshed	Dr. A. M. W. Segerdal..	Council Offices, Shepshed (Tel. Shepshed 3212)
Wigston	Dr. R. W. Kind.. ..	Council Offices, Wigston (Tel. Wigston 2345)
RURAL :		
Ashby-de-la-Zouch	Dr. A. M. W. Segerdal..	South Street, Ashby-de-la-Zouch (Tel. Ashby-de-la-Zouch 77)
Barrow-upon-Soar	Dr. J. W. Hall	The Grange, Rothley (Tel. Rothley 391)
Billesdon	Dr. J. Young	Council Offices, Thurnby (Tel. Thurnby 356)
Blaby	Dr. A. C. Ross	Council Offices, Narborough (Tel. Narborough 2071)
Castle Donington ..	Dr. T. M. Montford ..	4 Clapgun Street, Castle Donington (Tel. Castle Donington 271)
Lutterworth	Dr. A. C. Ross	Council Offices, Lutterworth (Tel. Lutterworth 61/64)
Market Bosworth ..	Dr. W. D. Cruickshank..	Council Offices, Market Bosworth (Tel. Market Bosworth 234, 371)
Market Harborough	Dr. R. W. Kind.. ..	42 High Street, Market Har- borough (Tel. Market Harborough 2063)
Melton and Belvoir	Dr. J. Young	Warwick Lodge, Melton Mowbray (Tel. Melton Mowbray 343)

STATISTICS AND SOCIAL CONDITIONS OF THE AREA

NATURAL AND SOCIAL CONDITIONS

Leicestershire is geographically in the centre of England and is bordered by Derbyshire and Nottinghamshire on the North, Lincolnshire and Rutland on the East, Northamptonshire on the South, and Warwickshire and Staffordshire on the West. Its extreme length north to south is 44 miles and east to west 39 miles. It forms part of the central plateau of England and has an undulating surface varying in level from 100 feet at Trent Lock to 912 feet, the summit of Bardon Hill.

The principal industry of the county is agriculture and most of the land is used for milk production and mixed farming. Many minerals are worked including coal, iron ore, granite, clay, hydraulic limestone, sand and gravel. In addition to these mineral industries Leicestershire has several firms connected with food production and a number of important engineering firms. In the clothing industry the county has a large share in the world's output of hosiery knitwear, boots, shoes and elastic webbing.

STATISTICS OF THE AREA

				Whole County	
Area in Acres	..	..	Urban	56,850	
			Rural	458,548	.. 515,398
Population (Registrar-General's estimates, mid-year 1955) :					
			Urban	166,600	
			Rural	191,900	.. 358,500
Rateable value as at 1st April, 1955	..	..	..	..	£1,883,047
Estimated product of penny rate, 1955-56			..	..	£7,457
Live births	..	..	Urban	2,538	
			Rural	2,759	.. 5,297
Live birth-rate	..	..	Urban	15.23	
			Rural	14.38	.. 14.78
Stillbirths	..	..	Urban	53	
			Rural	60	.. 113
Stillbirth rate	..	..	Urban	0.32	
			Rural	0.31	.. 0.31
Deaths	..	..	Urban	1,751	
			Rural	2,047	.. 3,798
Death-rate	..	..	Urban	10.51	
			Rural	10.67	.. 10.59
Infant mortality (deaths under one year of age)	..	..	Urban	65	
			Rural	54	119
Infant mortality rate (per thousand live births)	..	..	Urban	25.6	
			Rural	19.5	.. 22.5

STATISTICS OF THE AREA—continued

Neo-natal mortality (deaths under four weeks of age) ..	Urban	43		
	Rural	34		77
Neo-natal mortality rate (per thousand live births) ..	Urban	16.94		
	Rural	12.32	..	14.53
Maternal mortality	Urban	-		
	Rural	3	..	3
Maternal mortality rate (per thousand live and still births)	Urban	-		
	Rural	1.06	..	0.55

POPULATION OF THE COUNTY

Comparison of the Registrar-General's estimated populations at 30th June, 1955 and 1954 with the final census figures for 1951 is given below :

				Estimated Mid-year 1955	Estimated Mid-year 1954	Census 1951
Urban Districts :						
Ashby-de-la-Zouch	..	..		6,610	6,550	6,405
Ashby Woulds	..	..		3,390	3,380	3,418
Coalville	..	..		25,840	25,720	25,744
Hinckley	..	..		39,800	39,680	39,094
Loughborough M.B.	..	..		35,960	35,860	34,731
Market Harborough	..	..		10,440	10,420	10,400
Melton Mowbray	..	..		14,470	14,350	14,053
Oadby	..	..		6,880	6,410	6,205
Shepshed	..	..		6,460	6,420	6,235
Wigston	..	..		16,750	16,180	15,457
Rural Districts :						
Ashby-de-la-Zouch	..	..		13,850	13,900	13,781
Barrow-upon-Soar	..	..		49,640	50,070	47,395
Billesdon	..	..		10,210	8,180	7,822
Blaby	..	..		40,150	39,800	39,214
Castle Donington	..	..		10,130	10,130	9,273
Lutterworth	..	..		12,060	11,970	11,820
Market Bosworth	..	..		27,060	26,890	26,370
Market Harborough	..	..		10,040	10,050	9,835
Melton and Belvoir	..	..		18,760	18,640	18,644
Totals :						
Urban Districts	..	..		166,600	164,970	161,742
Rural Districts	..	..		191,900	189,630	184,154
Whole County	..	..		358,500	354,600	354,896

LIVE BIRTHS

(rates calculated per thousand population)

The total of 5,297 live births shows an increase of 152 over the previous year with a corresponding increase in the birth-rate from 14.5 in 1954 to 14.8 in 1955. In the main, however, the birth-rate shows a steady decline from 1947 onwards. This decline in the birth-rate is nothing new, it has been going on for many years now and I think it is, perhaps, interesting to note that in 1924 the then County Medical Officer made comment in his annual report on the decline in the birth-rate from 18.8 to 17.7 and stated "for several years attention has been called to the declining birth-rate . . . the probability of housing shortage and unemployment as contributory causes must not be overlooked". Today, with full employment and a housing programme which is producing ever-increasing numbers of houses, the birth-rate is still decreasing and it is apparent that the fundamental cause for this trend cannot be so readily found.

The following table gives the number of births and corresponding rate per thousand population for the year 1900 and also over the past 20 years :

Year	Urban		Rural		Whole County		Rate for England and Wales
	No.	Rate	No.	Rate	No.	Rate	
1900 ..	2,689	29.1	3,778	27.3	6,467	27.9	28.9
1936 ..	2,020	15.1	2,399	14.7	4,419	14.8	14.8
1937 ..	2,118	15.0	2,370	14.9	4,488	14.9	14.9
1938 ..	2,242	15.8	2,391	14.9	4,633	15.3	15.1
1939 ..	2,253	15.7	2,348	14.5	4,601	15.0	15.0
1940 ..	2,275	15.4	2,449	14.9	4,724	15.1	14.6
1941 ..	2,349	15.1	2,453	14.2	4,802	14.6	14.2
1942 ..	2,718	18.1	2,790	16.6	5,508	17.3	15.8
1943 ..	2,930	19.9	3,172	19.2	6,102	19.6	16.5
1944 ..	3,120	21.3	3,416	20.8	6,536	21.1	17.6
1945 ..	2,859	19.7	2,924	18.0	5,783	18.8	16.1
1946 ..	3,222	21.4	3,341	19.9	6,563	20.6	19.1
1947 ..	3,366	21.8	3,582	20.7	6,948	21.2	20.5
1948 ..	3,050	19.2	3,313	18.5	6,363	18.8	17.9
1949 ..	2,867	17.9	3,069	16.9	5,936	17.4	16.7
1950 ..	2,675	16.3	2,949	16.0	5,624	16.2	15.8
1951 ..	2,645	16.3	2,922	15.8	5,567	16.0	15.5
1952 ..	2,607	16.1	2,856	15.3	5,463	15.7	15.3
1953 ..	2,602	15.9	2,820	14.9	5,422	15.4	15.5
1954 ..	2,465	14.9	2,680	14.1	5,145	14.5	15.2
1955 ..	2,538	15.2	2,759	14.4	5,297	14.8	15.0*

* provisional figure

The number of illegitimate births shows a decrease of one on last year's figure of 169. In 1955 there were 5,129 legitimate births with a rate of 14.31 and 168 illegitimate births with a rate of 0.47. The total of male births was 2,745 and female births 2,552 which is a rate of 107.5 male births to 100 female births, a somewhat higher ratio than that experienced over the past few years.

INFANT MORTALITY

(rates calculated per thousand live births)

It is extremely pleasing to be able to state that the number of deaths of infants under 12 months is the lowest ever recorded for this county. Attention was drawn in last year's report to the fact that the reduction in infant mortality in Leicestershire had for two years been lagging behind that in the country as a whole, and it is gratifying that this tendency has not continued. We must admit, however, that with the numbers now so small, variations in the rate occur more readily as a result of very small numbers of deaths. The conditions largely responsible for the very high infant mortality in the past, such as gastro-enteritis and respiratory infections, are very well under control and continuous improvement in the rate will depend on increased knowledge of causes such as prematurity and congenital conditions.

Year	Urban		Rural		Whole County		Rate for England and Wales
	No.	Rate	No.	Rate	No.	Rate	
1936 ..	107	53	124	52	231	52	59
1937 ..	103	49	117	49	220	49	58
1938 ..	109	49	95	40	204	44	53
1939 ..	115	51	97	41	212	46	50
1940 ..	112	42	127	50	239	46	55
1941 ..	159	59	106	41	265	50	59
1942 ..	146	54	111	40	257	47	49
1943 ..	134	46	123	39	257	42	49
1944 ..	123	39	122	36	245	37	46
1945 ..	97	34	110	38	207	36	46
1946 ..	134	42	101	30	235	36	43
1947 ..	161	48	137	38	298	43	41
1948 ..	102	33	103	31	205	32	34
1949 ..	81	28	80	26	161	27	32
1950 ..	80	29.9	72	24.4	152	27.0	29.8
1951 ..	72	27.2	71	24.3	143	25.7	29.6
1952 ..	77	29.6	68	23.8	145	26.5	27.6
1953 ..	77	29.6	75	26.6	152	28.0	26.8
1954 ..	70	29.4	70	27.0	140	28.1	25.4
1955 ..	65	25.6	54	19.6	119	22.5	24.9

INFANT MORTALITY—continued

The following table analyses the 119 infant deaths into the individual causes of death and compares them with the figures for 1954 :

Cause of death	Year 1955			Year 1954		
	M.	F.	Total	M.	F.	Total
Whooping cough	—	—	—	2	1	3
Meningococcal infections	—	—	—	1	—	1
Other malignant and lymphatic neoplasms ..	1	—	1	—	—	—
Other circulatory disease	1	—	1	—	—	—
Influenza	1	—	1	—	—	—
Pneumonia	11	6	17	8	4	12
Bronchitis	3	2	5	4	3	7
Other disease of respiratory system ..	1	1	2	—	—	—
Gastritis, enteritis, and diarrhoea ..	1	2	3	—	—	—
Nephritis and nephrosis	—	1	1	—	—	—
Congenital malformations	9	11	20	16	8	24
Other defined and ill-defined diseases ..	32	34	66	60	29	89
All other accidents	1	1	2	4	—	4
Totals	61	58	119	95	45	140

NEO-NATAL DEATHS

(rates calculated per thousand live births)

The number of neo-natal deaths show a decrease similar to that for infant deaths. Details of deaths of infants under four weeks of age are given below :

Year		Urban		Rural		Whole County	
		No.	Rate	No.	Rate	No.	Rate
1950		51	19.1	51	17.3	102	18.1
1951		41	15.5	42	14.4	83	14.9
1952		57	21.9	54	18.9	111	20.3
1953		53	20.4	48	17.0	101	18.6
1954		57	23.9	49	18.9	106	21.3
1955		43	16.9	34	12.3	77	14.5

STILLBIRTHS

(rates calculated per thousand population)

The number of stillbirths during 1955 is the lowest ever recorded for the county and the stillbirth rate which stood at 0.60 per thousand population in 1935 has now been halved to 0.31 per thousand population. The following table gives details of stillbirths over the past 20 years.

Year			Legitimate		Illegitimate		Total	
			No.	Rate	No.	Rate	No.	Rate
1936	..	..	172	0.57	7	0.02	179	0.60
1937	..	..	167	0.56	3	0.01	170	0.57
1938	..	..	166	0.55	8	0.03	174	0.57
1939	..	..	192	0.69	11	0.04	203	0.74
1940	..	..	153	0.49	11	0.04	164	0.53
1941	..	..	141	0.43	7	0.02	148	0.45
1942	..	..	176	0.55	6	0.02	182	0.57
1943	..	..	169	0.54	15	0.05	184	0.59
1944	..	..	155	0.50	22	0.07	177	0.57
1945	..	..	153	0.50	17	0.06	170	0.55
1946	..	..	151	0.47	7	0.02	158	0.50
1947	..	..	172	0.53	10	0.03	182	0.55
1948	..	..	150	0.44	7	0.02	157	0.46
1949	..	..	127	0.37	12	0.04	139	0.41
1950	..	..	155	0.45	5	0.01	160	0.46
1951	..	..	121	0.35	7	0.02	128	0.37
1952	..	..	113	0.32	5	0.01	118	0.34
1953	..	..	120	0.34	3	0.008	123	0.35
1954	..	..	139	0.39	10	0.03	149	0.42
1955	..	..	108	0.30	5	0.01	113	0.31

MATERNAL MORTALITY

There has only been an increase from two to three in the number of maternal deaths for 1955. This has naturally had a marked effect on the rate which is calculated per thousand live and still births.

Year			Number of maternal deaths	Rate per thousand live and stillbirths	
				Leicestershire	England and Wales
1936	..	..	18	3.91	3.65
1937	..	..	14	3.01	3.11
1938	..	..	15	3.12	2.97
1939	..	..	17	3.52	2.82
1940	..	..	10	1.93	2.16
1941	..	..	14	2.83	2.23
1942	..	..	13	2.28	2.01
1943	..	..	19	3.03	2.29
1944	..	..	14	2.07	1.93
1945	..	..	16	2.69	1.79
1946	..	..	6	0.89	1.43
1947	..	..	9	1.26	1.17
1948	..	..	10	1.53	0.86
1949	..	..	5	0.82	0.82
1950	..	..	7	1.21	0.86
1951	..	..	5	0.88	0.79
1952	..	..	1	0.18	0.72
1953	..	..	4	0.72	0.76
1954	..	..	2	0.37	0.69
1955	..	..	3	0.55	0.64

DEATHS (all causes and all ages)

Deaths in the county over the past five years are given below and are split up in accordance with the World Health Organisation Nomenclature Regulations.

A most striking and heartening feature is the rapid decrease in the number of deaths from Respiratory Tuberculosis—36 in 1955—now less than the deaths from motor vehicle accidents or from suicide. It should be realised that as recently as the nineteen-thirties deaths from tuberculosis were in the region of two hundred and over per year.

However, to offset the decrease in deaths from tuberculosis there has been a further increase in deaths from neoplasms. The number of deaths from lung neoplasms has now reached three figures for the first time and now stands at 103. Again there has also been an increase in deaths from diseases of the nervous system.

I. INFECTIVE AND PARASITIC DISEASES					Year 1951	Year 1952	Year 1953	Year 1954	Year 1955
1. Tuberculosis, respiratory	..	..	..	..	86	70	55	55	36
2. Tuberculosis, other	..	..	..	..	9	14	8	3	10
3. Syphilitic disease	..	..	..	..	10	9	6	13	3
4. Diphtheria	..	..	..	..	—	1	—	—	—
5. Whooping cough	..	..	..	..	3	3	—	3	—
6. Meningoccal infections	..	..	..	..	1	2	1	3	—
7. Acute poliomyelitis	..	..	..	..	—	—	3	—	1
8. Measles	..	..	..	..	—	—	—	—	3
9. Other infective and parasitic diseases	..	..	..	..	8	12	4	2	13
II. NEOPLASMS									
10. Malignant neoplasm, stomach	..	..	..	..	96	111	92	86	98
11. Malignant neoplasm, lung, bronchus	..	..	..	..	82	82	99	96	103
12. Malignant neoplasm, breast	..	..	..	..	64	52	62	77	61
13. Malignant neoplasm, uterus	..	..	..	..	24	21	21	25	19
14. Other malignant and lymphatic neoplasms	..	..	..	..	294	302	319	331	313
15. Leukaemia, aleukaemia	..	..	..	..	10	15	17	11	20
III. ALLERGIC, ENDOCRINE SYSTEM, METABOLIC, AND NUTRITIONAL DISEASES									
16. Diabetes	..	..	..	..	28	26	17	26	24
VI. DISEASES OF THE NERVOUS SYSTEM AND SENSE ORGANS									
17. Vascular lesions of the nervous system					480	537	552	567	575

Causes of Death at Different Periods of Life in the Administrative County of Leicester, 1955

CAUSES OF DEATH	WHOLE COUNTY																AGGREGATES								
	0—		1—		5—		15—		25—		45—		65—		75—		Urban Districts			Rural Districts			Whole County		
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	Total	M.	F.	Total	M.	F.	Total
1. Tuberculosis, respiratory	—	—	—	—	—	—	—	—	5	4	13	4	7	1	1	1	15	5	20	11	5	16	26	10	36
2. Tuberculosis, other	—	—	—	1	—	—	—	—	2	2	2	2	—	1	—	—	1	3	4	3	3	6	4	6	10
3. Syphilitic disease	—	—	—	—	—	—	—	—	—	—	1	—	2	—	—	—	1	—	1	2	—	2	3	—	3
4. Diphtheria	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
5. Whooping cough	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
6. Meningococcal infections	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
7. Acute poliomyelitis	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	1	1	—	1	1
8. Measles	—	—	1	2	—	—	—	—	—	—	—	—	—	—	—	—	1	1	2	—	1	1	1	2	3
9. Other infective and parasitic diseases	—	—	1	1	—	—	—	—	1	2	2	2	3	—	1	2	5	7	3	3	6	5	8	13	
10. Malignant neoplasm, stomach	—	—	—	—	—	—	—	—	2	1	18	12	19	12	16	18	31	18	49	24	25	49	55	43	98
11. Malignant neoplasm, lung, bronchus	—	—	—	—	—	—	—	—	3	—	51	10	33	1	4	1	45	4	49	46	8	54	91	12	103
12. Malignant neoplasm, breast	—	—	—	—	—	—	—	—	7	—	30	—	16	—	8	—	26	26	—	35	35	—	61	61	
13. Malignant neoplasm, uterus	—	—	—	—	—	—	—	—	3	—	8	—	4	—	4	—	10	10	—	9	9	—	19	19	
14. Other malignant & lymphatic neoplasms	1	—	—	1	1	—	3	2	9	5	59	49	42	44	57	40	81	65	146	91	76	167	172	141	313
15. Leukæmia, aleukæmia	—	—	—	2	1	—	1	—	1	—	5	4	3	1	—	—	6	1	7	6	7	13	12	8	20
16. Diabetes	—	—	—	—	—	—	—	—	1	—	—	5	3	3	3	9	2	7	9	5	10	15	7	17	24
17. Vascular lesions of nervous system ..	—	—	—	—	—	—	2	—	6	3	55	52	63	92	128	174	125	151	276	129	170	299	254	321	575
18. Coronary disease, angina	—	—	—	—	—	—	—	—	5	—	102	25	105	59	112	94	144	78	222	157	100	257	301	178	479
19. Hypertension with heart disease ..	—	—	—	—	—	—	—	—	2	—	7	6	13	22	19	26	22	19	41	19	35	54	41	54	95
20. Other heart disease	—	—	—	—	—	—	—	—	4	11	34	35	59	72	173	280	121	155	276	169	243	412	290	398	688
21. Other circulatory disease	1	—	—	—	—	—	—	—	2	4	17	13	25	27	54	59	46	50	96	53	51	104	99	101	200
22. Influenza	1	—	1	—	—	—	1	1	1	1	7	2	4	3	12	11	12	12	24	15	6	21	27	18	45
23. Pneumonia	11	6	1	1	1	—	—	—	1	1	9	6	17	8	26	42	42	39	81	24	25	49	66	64	130
24. Bronchitis	3	2	—	—	—	—	—	—	—	—	33	6	40	12	27	31	42	22	64	63	29	92	105	51	156
25. Other diseases of respiratory system ..	1	1	—	—	1	—	—	—	1	1	11	5	4	1	6	6	10	7	17	14	7	21	24	14	38
26. Ulcer of stomach and duodenum	—	—	—	—	—	—	—	—	2	—	12	2	11	2	8	5	16	7	23	15	4	19	31	11	42
27. Gastritis, enteritis and diarrhoea ..	1	2	1	—	—	—	—	—	1	2	—	—	—	1	2	2	4	6	4	2	6	6	6	6	12
28. Nephritis and nephrosis	—	1	—	—	3	—	1	1	3	2	12	7	7	5	3	7	11	12	23	18	11	29	29	23	52
29. Hyperplasia of prostate	—	—	—	—	—	—	—	—	—	—	2	—	5	—	21	—	18	—	18	10	—	10	28	—	28
30. Pregnancy, childbirth, abortion	—	—	—	—	—	—	—	—	3	—	—	—	—	—	—	—	—	—	—	3	3	—	3	3	3
31. Congenital malformations	9	11	3	—	3	—	1	—	—	—	3	1	1	—	—	—	12	6	18	7	7	14	19	13	32
32. Other defined and ill-defined diseases	32	34	1	1	2	—	5	2	9	12	29	21	37	29	64	75	80	89	169	99	85	184	179	174	353
33. Motor vehicle accidents	—	—	1	—	6	—	8	—	8	—	11	3	5	1	1	—	17	—	17	23	4	27	40	4	44
34. All other accidents	1	1	3	—	3	1	3	—	8	—	9	5	3	5	7	29	17	15	32	20	26	46	37	41	78
35. Suicide	—	—	—	—	—	—	2	—	7	2	11	11	6	3	2	—	12	6	18	16	10	26	28	16	44
36. Homicide and operations of war	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
TOTALS	61	58	13	9	21	1	27	6	80	66	517	327	516	428	746	923	934	817	1,751	1,046	1,001	2,047	1,980	1,818	3,798

Causes of Death in Administrative Areas, 1955

CAUSES OF DEATH	Ashby-de-la-Zouch U.D.		Ashby Wolds U.D.		Coalville U.D.		Hinckley U.D.		Loughborough M.B.		Market Harborough U.D.		Melton Mowbray U.D.		Oadby U.D.		Shepshed U.D.		Wigston U.D.		Ashby-de-la-Zouch R.D.		Barrow-on-Soar R.D.		Billesdon R.D.		Blyth R.D.		Castle Donington R.D.		Lutterworth R.D.		Market Bosworth R.D.		Market Harborough R.D.		Melton & Belvoir R.D.		Totals U.D.'s		Totals R.D.'s		Totals Whole Country	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.		
All causes	50	37	23	9	160	104	211	183	208	206	71	60	75	60	38	47	27	40	71	65	85	74	226	224	41	41	274	241	52	41	74	77	132	133	68	60	94	110	934	817	1,046	1,001	3,798	
1. Tuberculosis, respiratory	-	-	-	-	2	-	2	3	5	1	-	1	-	-	3	-	-	-	3	-	-	-	8	1	-	-	1	-	-	-	2	-	1	2	-	-	1	15	5	11	8	36		
2. Tuberculosis, other	-	-	-	-	-	-	1	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	3			
3. Syphilitic disease	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
4. Diphtheria	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
5. Whooping cough	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
6. Meningococcal infections	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
7. Acute poliomyelitis	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
8. Measles	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
9. Other infective and parasitic diseases	-	-	-	-	1	1	1	8	1	4	2	-	1	-	-	-	-	-	1	1	1	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
10. Malignant neoplasm, stomach	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
11. Malignant neoplasm, lung, bronchus	-	-	-	-	1	2	-	6	-	14	1	12	-	3	-	2	1	1	1	1	2	3	7	9	-	-	1	5	-	-	1	5	-	-	-	-	-	-	-	-	-	-		
12. Malignant neoplasm, breast	-	-	-	-	-	-	-	2	-	8	-	8	-	2	-	-	-	-	-	-	2	12	7	-	-	1	13	2	2	1	4	1	9	3	1	-	2	-	45	-	25	68		
13. Malignant neoplasm, uterus	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
14. Other malignant and lymphatic neoplasms	3	3	1	-	19	8	21	16	13	13	5	8	7	4	2	-	2	5	8	8	6	6	21	20	4	2	19	17	5	4	9	6	11	6	8	4	8	11	81	65	91	76		
15. Leukaemia, leukaemia	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
16. Diabetes	-	-	-	-	-	-	1	-	2	-	2	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
17. Vascular lesions of nervous system	7	9	5	2	21	9	36	12	23	20	12	3	9	8	5	7	2	6	6	10	17	17	23	38	4	8	36	34	8	7	6	11	13	27	11	9	11	19	125	151	129	170		
18. Coronary disease, angina	-	-	-	-	4	5	7	8	3	2	3	-	1	-	-	-	-	-	15	8	14	7	43	25	5	6	34	22	5	2	12	8	17	17	8	3	10	10	144	78	157	100		
19. Hypertension with heart disease	-	-	-	-	2	2	-	-	-	-	-	-	-	-	-	-	-	-	1	1	1	2	3	8	14	1	1	3	6	-	-	4	1	4	-	-	-	-	-	-	-	-		
20. Other heart disease	13	12	1	-	20	14	16	22	27	43	9	9	16	11	5	16	4	12	9	15	9	17	24	26	3	7	67	77	8	8	12	4	4	3	1	1	2	22	19	19	35			
21. Other circulatory disease	-	-	-	-	3	-	1	2	4	3	3	-	3	3	5	1	2	1	3	4	1	4	11	5	2	3	14	11	2	3	3	1	10	10	4	2	6	12	46	50	53	64		
22. Influenza	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
23. Pneumonia	2	3	-	-	6	3	9	5	13	15	3	2	2	3	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
24. Bronchitis	4	3	1	1	11	3	14	1	11	5	1	2	1	1	3	2	1	1	2	4	4	2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
25. Other diseases of respiratory system	1	-	-	-	1	2	1	-	4	2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-				
26. Ulcer of stomach and duodenum	-	-	-	-	-	-	6	-	5	1	3	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
27. Gastritis, enteritis and diarrhoea	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
28. Nephritis and nephrosis	-	-	-	-	1	-	1	4	4	2	4	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
29. Hyperplasia of prostate	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
30. Premature, childbirth, abortion	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
31. Congenital malformations	-	-	-	-	3	2	5	3	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
32. Other defined and ill-defined diseases	4	4	1	7	17	17	21	19	22	20	6	8	11	9	2	5	4	3	3	11	7	14	11	9	3	20	22	10	7	6	6	9	17	8	7	12	5	89	89	99	85			
33. Motor vehicle accidents	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
34. All other accidents	3	-	-	-	4	3	4	2	1	1	-	-	1	1	3	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
35. Suicide	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
36. Homicide and operations of war	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
Totals of infants under one year	5	2	1	-	8	8	11	8	5	5	1	1	3	4	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
Legitimate	5	2	1	-	8	8	11	8	5	5	1	1	3	4	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
Illegitimate	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
Totals of infants under four weeks	3	2	-	-	4	6	7	6	3	5	-	-	2	2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
Legitimate	3	2	-	-	4	6	7	6	3	4	-	-	2	2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
Illegitimate	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-				
Totals of births	43	63	26	21	203	190	305	264	273	235	76	74	122	120	48	68	55	47	107	148	98	82	358	331	89	91	318	279	71	74	81	83	226	180	63	56	130	146	1,308	1,230	1,437	1,322		
Legitimate	42	63	25	21	199	186	302	259	262	223	76	71	114	114	45	64	54	47	104	143	9																							

VII. DISEASES OF THE CIRCULATORY SYSTEM				Year 1951	Year 1952	Year 1953	Year 1954	Year 1955
18.	Coronary disease, angina	..	..	378	376	391	432	479
19.	Hypertension with heart disease	..	..	167	88	116	104	95
20.	Other heart disease	..	..	679	601	616	616	688
21.	Other circulatory disease	..	..	193	199	170	210	200
VIII. DISEASES OF THE RESPIRATORY SYSTEM								
22.	Influenza	..	..	120	24	39	21	45
23.	Pneumonia	..	..	110	98	108	99	130
24.	Bronchitis	..	..	181	146	155	144	156
25.	Other diseases of the respiratory system			36	34	26	36	38
IX. DISEASES OF THE DIGESTIVE SYSTEM								
26.	Ulcer of stomach and duodenum	..	..	38	29	34	35	42
27.	Gastritis, enteritis and diarrhoea	..	..	18	7	12	13	12
X. DISEASES OF THE GENITO-URINARY SYSTEM								
28.	Nephritis and nephrosis	..	..	61	62	42	47	52
29.	Hyperplasia of prostate	..	..	32	28	26	32	28
XI. DELIVERIES AND COMPLICATIONS OF PREGNANCY, CHILDBIRTH, AND THE PUERPERIUM								
30.	Pregnancy, childbirth, abortion	..	..	5	1	4	2	3
XIV. CONGENITAL MALFORMATIONS								
31.	Congenital malformations	..	..	38	45	52	34	32
XVI. SYMPTOMS, SENILITY AND ILL-DEFINED CONDITIONS								
32.	Other defined and ill-defined diseases			365	374	361	363	353
XVII. ACCIDENTS, POISONINGS AND VIOLENCE								
33.	Motor vehicle accidents	..	..	30	41	37	43	44
34.	All other accidents	..	..	64	73	71	84	78
35.	Suicide	..	..	19	24	23	35	44
36.	Homicide and operations of war	..	..	2	1	4	1	-

DEATHS (all causes and all ages)

(rates calculated per thousand population)

Year	Urban		Rural		Whole County		Rate for England and Wales
	No.	Rate	No.	Rate	No.	Rate	
1936 ..	1,511	11.26	1,847	11.30	3,358	11.28	12.1
1937 ..	1,652	11.69	1,925	12.08	3,577	11.89	12.4
1938 ..	1,507	10.60	1,664	10.37	3,171	10.48	11.6
1939 ..	1,560	10.74	1,788	10.96	3,348	10.85	12.1
1940 ..	1,809	12.21	2,072	12.65	3,881	12.44	14.3
1941 ..	1,795	11.54	1,847	10.68	3,642	10.99	12.9
1942 ..	1,569	10.45	1,730	10.30	3,299	10.37	11.6
1943 ..	1,657	11.28	1,868	11.31	3,525	11.29	12.1
1944 ..	1,608	11.00	1,862	11.35	3,470	11.18	11.6
1945 ..	1,582	10.90	1,831	11.26	3,413	11.09	11.4
1946 ..	1,641	10.87	1,761	10.47	3,402	10.66	11.5
1947 ..	1,798	11.64	1,894	10.96	3,692	11.28	12.0
1948 ..	1,569	9.87	1,732	9.69	3,301	9.77	10.8
1949 ..	1,731	10.79	1,923	10.58	3,654	10.68	11.7
1950 ..	1,739	10.62	1,836	9.98	3,575	10.28	11.6
1951 ..	1,724	10.60	2,007	10.86	3,731	10.74	12.5
1952 ..	1,675	10.33	1,833	9.82	3,508	10.06	11.3
1953 ..	1,703	10.42	1,831	9.74	3,534	10.05	11.4
1954 ..	1,716	10.41	1,933	10.19	3,649	10.29	11.3
1955 ..	1,751	10.51	2,047	10.67	3,798	10.59	11.7

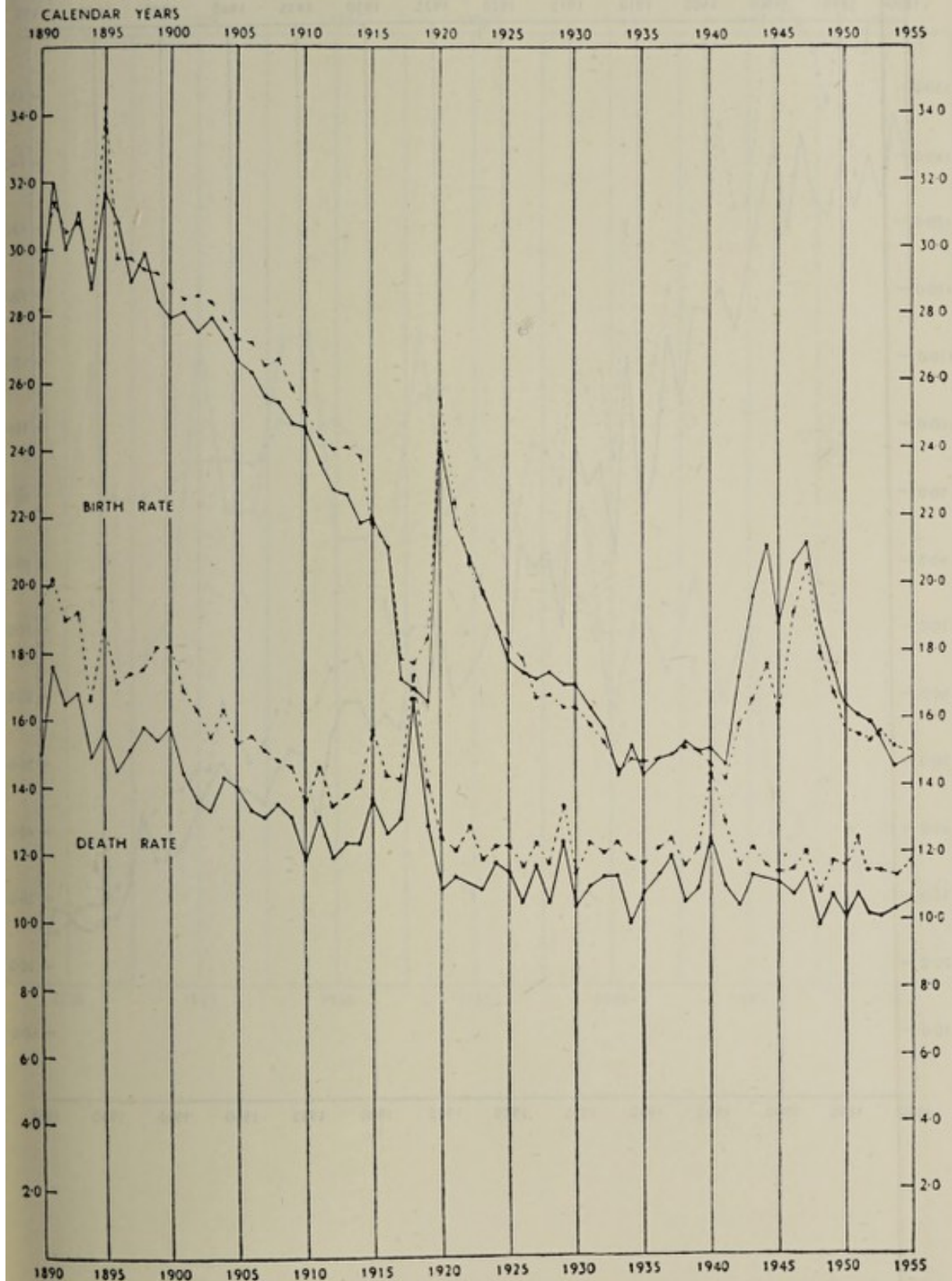
The table below splits up the numbers of deaths into the various age groups in which they occur and also compares the percentage of deaths in those groups with the corresponding percentages for 1921. This year was chosen as it was the first year in which deaths were given for the age group 75 years and over. I think this table is a remarkable illustration of the factor that more people are living to an older age. In 1921 approximately 25% of the total deaths occurred in the age groups 0-25 years ; in 1955 only 5% of the total deaths occurred in these age groups.

Age group (years)	Number of deaths 1955	Percentage 1955	Percentage 1921
0—	119	3.13	13.68
1—	24	0.63	4.08
5—	22	0.58	4.31
15—	33	0.88	4.58
25—	144	3.79	11.42
45—	844	22.22	19.61
65—	964	25.39	18.53
75—	1,648	43.38	23.79

BIRTHS AND DEATHS

Annual Birth and Death Rates per Thousand Population

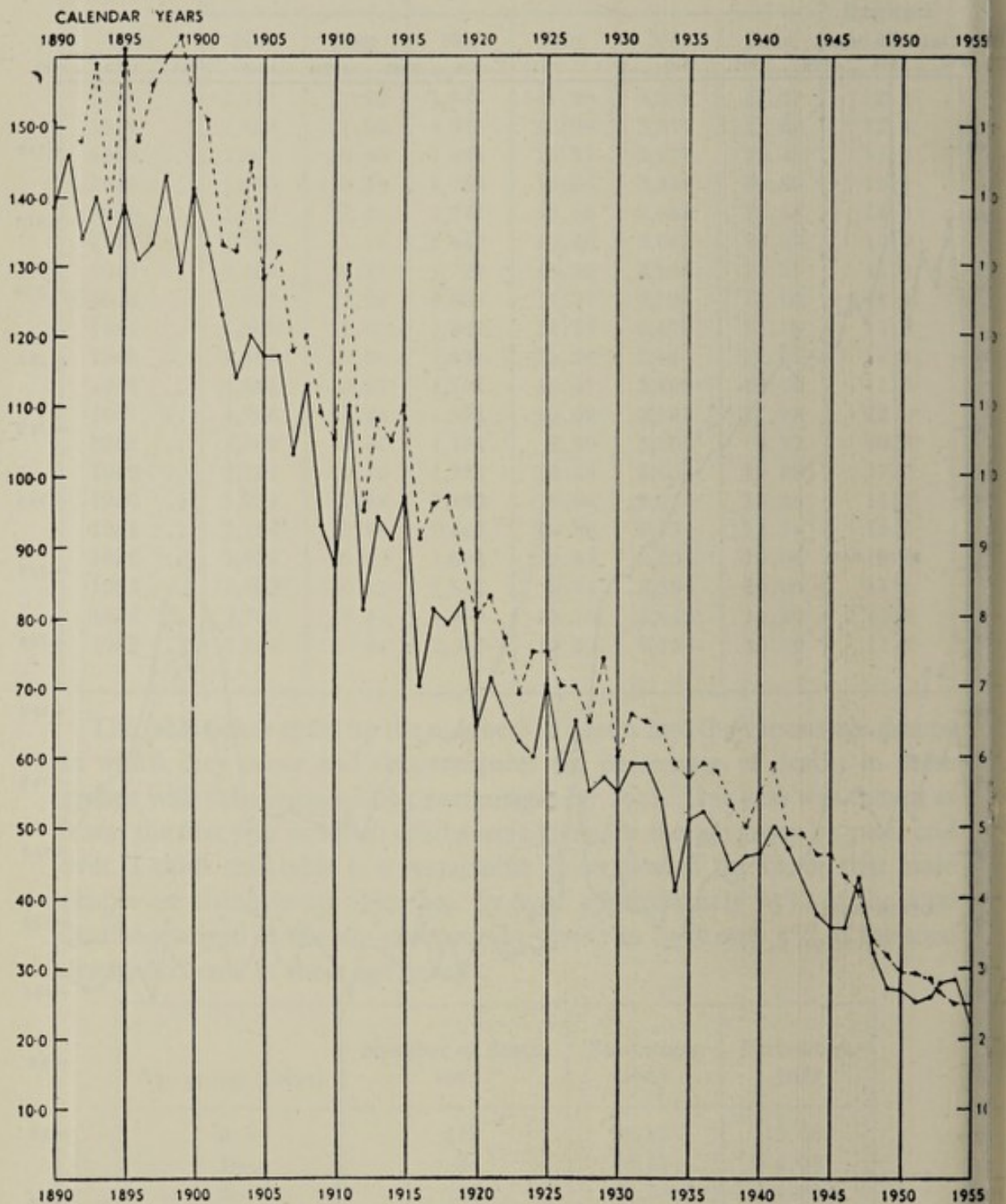
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INFANT MORTALITY

Annual Death Rate per Thousand Live Births

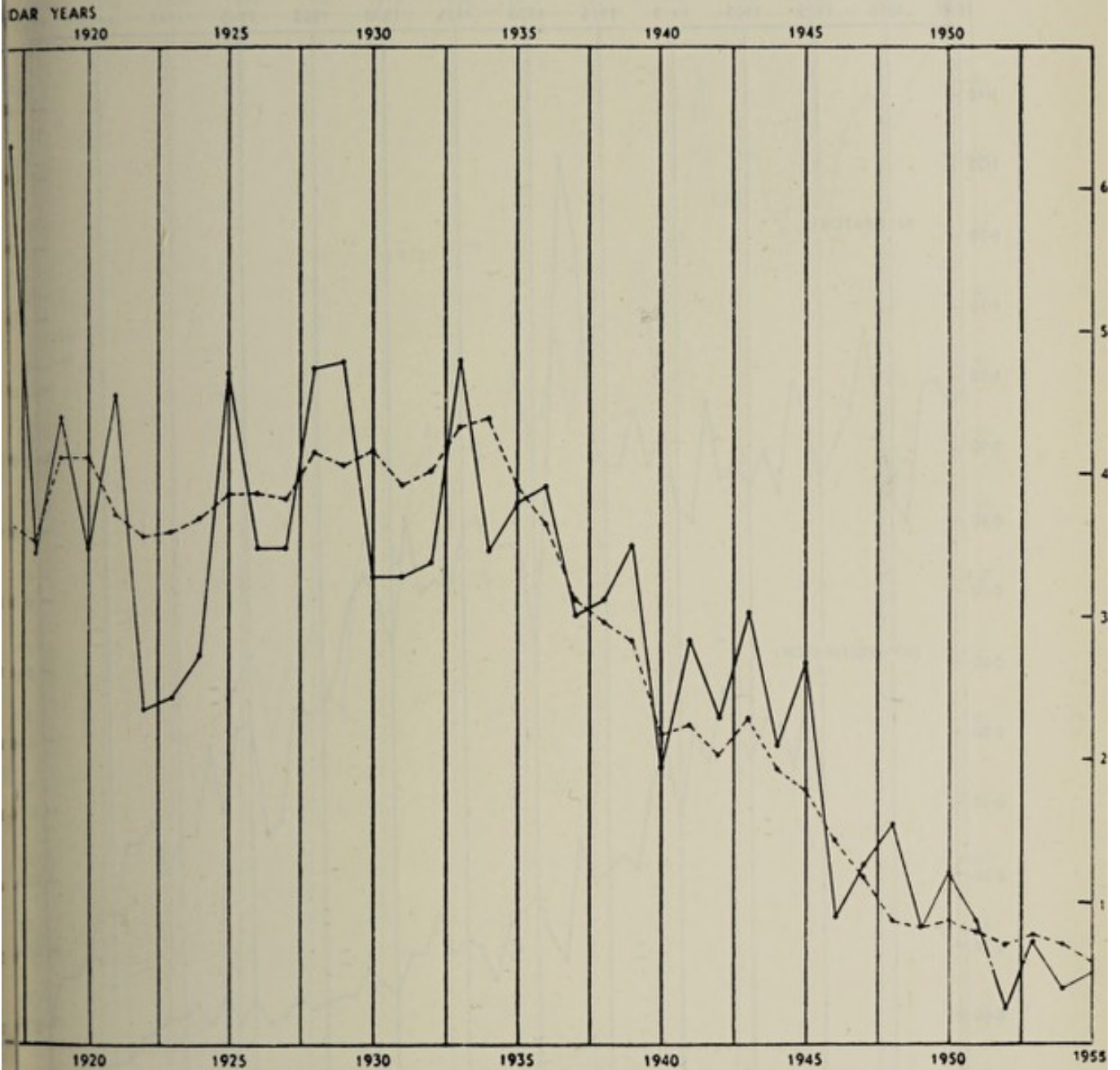
LEICESTERSHIRE ——— ENGLAND AND WALES - - - -



MATERNAL MORTALITY

Annual Death Rate per Thousand Live and Still Births

LEICESTERSHIRE ——— ENGLAND AND WALES - - - - -



TUBERCULOSIS

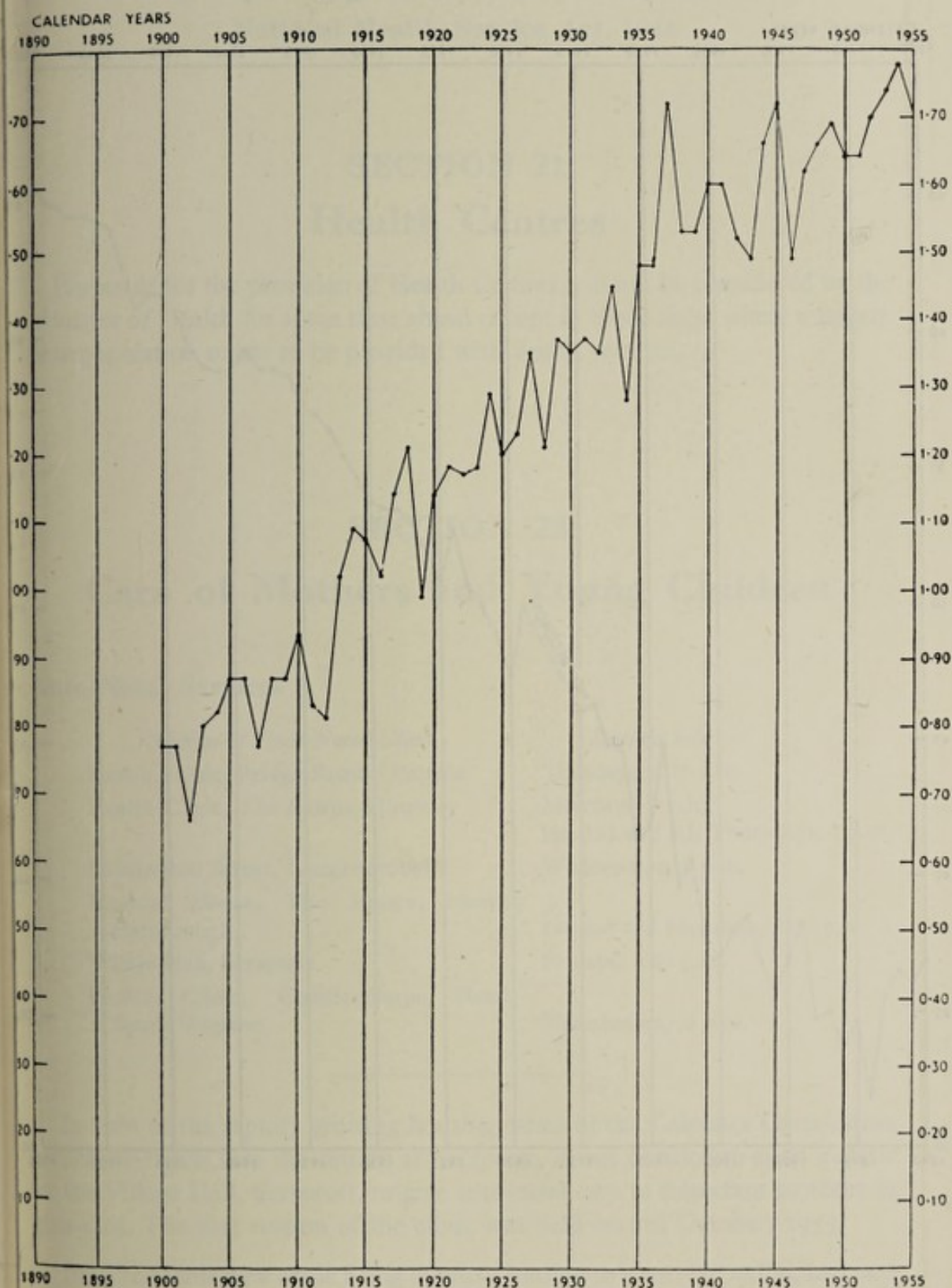
(LEICESTERSHIRE)

Annual Death Rates per Thousand Population

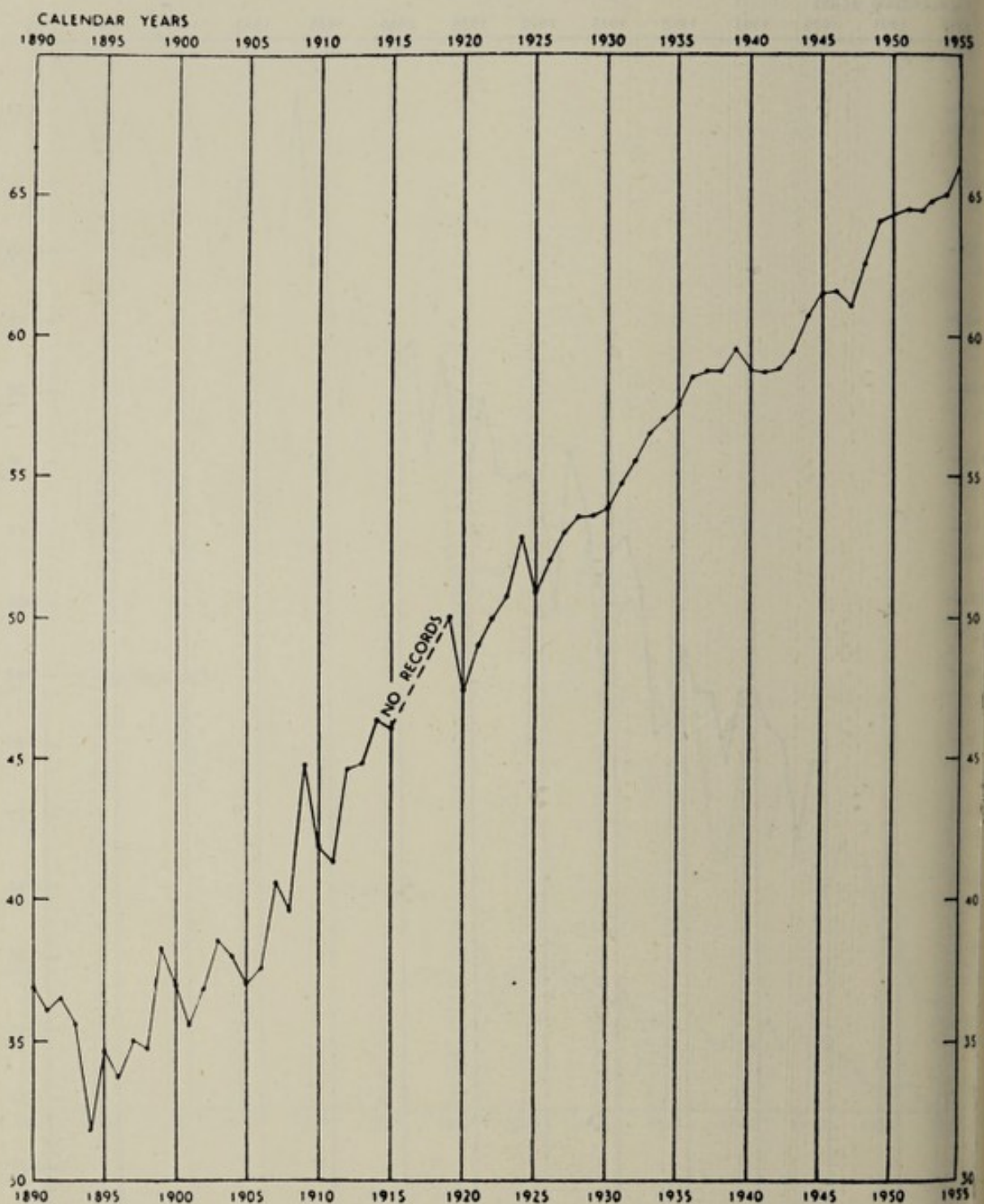


NEOPLASMS (LEICESTERSHIRE)

Annual Death Rate per Thousand Population



AVERAGE AGE AT DEATH
(LEICESTERSHIRE)
Calculated on Deaths in Age Groups



GENERAL PROVISION OF HEALTH SERVICES FOR THE AREA

National Health Service Act, 1946

SECTION 21 Health Centres

Proposals for the provision of Health Centres will not be considered by the Minister of Health for some time ahead except in those areas where a largely new population needs to be provided with health services.

SECTION 22 Care of Mothers and Young Children

Ante-Natal Services

<i>Address of Ante-Natal Clinic</i>	<i>Sessions held</i>
Health Clinic, Bridge Road, Coalville ..	Tuesdays, 9.30 a.m.
Health Clinic, The Lawns, Hinckley ..	Mondays, 2 p.m. 1st, 3rd and 5th Thursdays, 2 p.m.
Lemyngton Street, Loughborough ..	Wednesdays, 2 p.m.
Welland House, The Square, Market Harborough	1st and 3rd Mondays, 2.30 p.m.
Village Hall, Scraptoft	Fridays, 2.30 p.m.
Health Clinic, Countesthorpe Road, South Wigston	Wednesdays, 2 p.m.

In view of the rapidly growing housing estate of the Leicester Corporation which overflows into the county at Scraptoft, it was decided to open a clinic at the Village Hall, Scraptoft, to give ante-natal care to expectant mothers in this area. The first session of the clinic was held on 7th October, 1955.

In spite of this new clinic being opened, leading to a corresponding increase in the number of mothers attending from 581 in 1954 to 588 in 1955, the number of attendances again decreased from 2,282 in 1954 to 1,992 in 1955.

Work carried out at all the ante-natal clinics during 1955 is shown in the following table :

	Coal- ville	Hinck- ley	Lough- borough	Market Har- borough	South Wig- ston	Scrap- toft	Totals
1. Number of sessions per month (approx.) :							
(a) Medical Officers sessions	6	4	4	—	4	4	22
(b) Midwives sessions ..	—	—	—	2	—	—	2
2. Number of women attended :							
(a) ante-natal	234	103	94	47	73	37	588
(b) post-natal	37	—	9	—	—	—	46
3. Number of women included in above, who had not previously attended an Ante-Natal Clinic during current pregnancy, or a post-natal clinic after last confinement :							
(a) ante-natal	184	94	80	—	70	—	428
(b) post-natal	37	—	9	—	—	—	46
4. Total number of attendances made by women included in 2 above :							
(a) Medical Officers sessions :							
(i) ante-natal	980	264	185	—	166	87	1,682
(ii) post-natal	39	—	9	—	—	—	48
(b) Midwives sessions ..							
(i) ante-natal	—	—	—	310	—	—	310
(ii) post-natal	—	—	—	—	—	—	—

Dental Treatment of Expectant and Nursing Mothers, and Pre-School Children

Because of the shortage of dental staff, this service still remains suspended in all parts of the county with the exception of Loughborough and the figures in the tables below refer to that area only.

(a) Numbers provided with dental care :

	Examined	Needing Treatment	Treated	Made Dentally fit
Expectant and Nursing Mothers	7	7	7	6
Children under five..	304	171	171	171

b) Forms of dental treatment provided :

	Scalings and Gum Treatment	Fillings	Silver Nitrate Treatment	Crowns or Inlays	Extractions	General Anaesthetics	Dentures provided		Radiographs
							Full Upper or Lower	Partial Upper or Lower	
Expectant and Nursing Mothers ..	1	6	-	-	11	-	-	-	-
Children under five..	1	82	121	-	338	-	-	-	-

Child Welfare Centres

Place	Address	Sessions held
Anstey	Church Hall, Church Lane	2nd and 4th Mondays, 2.30 p.m.
Asfordby	Parish Hall	2nd and 4th Thursdays, 2.30 p.m.
Ashby-de-la-Zouch	Baptist Room, Market Street	Thursdays, 2 p.m.
Bagworth	Miners' Institute, Station Road	1st and 3rd Wednesdays, 2.30 p.m.
Barlestone	Church Room	2nd and 4th Tuesdays, 2 p.m.
Barrow-upon-Soar ..	Church Room	2nd and 4th Wednesdays, 2.45 p.m.
Barwell	Wesleyan Schoolroom, Chapel Street	2nd and 4th Thursdays, 2.30 p.m.
Birstall	Church Room	2nd and 4th Mondays, 2.30 p.m.
Blaby	Baptist Schoolroom ..	1st and 3rd Tuesdays, 2.15 p.m.
Bottesford	"The Elms"	2nd and 4th Thursdays, 2 p.m.
Braunstone	Trinity Church Room, Narborough Road, Leicester	2nd and 4th Wednesdays, 2.30 p.m.
Broughton Astley ..	Social Club Hall	1st and 3rd Tuesdays, 2 p.m.
Burbage	Methodist Church Schoolroom, Windsor Street	2nd and 4th Thursdays, 2 p.m.
Castle Donington ..	Methodist Church Room	1st and 3rd Mondays, 2.30 p.m.
Claybrooke Magna..	Village Hall	1st and 3rd Thursdays, 2 p.m.
Coalville	Health Clinic, Bridge Road	Tuesdays, 2.30 p.m.
Cosby	Methodist Schoolroom	1st and 3rd Wednesdays, 2.30 p.m.

Place	Address	Sessions held
Countesthorpe ..	Methodist Church Schoolroom ..	2nd and 4th Thursdays, 2.30 p.m.
Croft ..	The Village Hall ..	1st and 3rd Wednesdays, 2 p.m.
Desford ..	Village Institute ..	1st and 3rd Tuesdays, 2 p.m.
Donisthorpe and Moirs ..	Centenary Methodist Church Room, Donis- thorpe Road, Moira ..	2nd and 4th Tuesdays, 2 p.m.
Earl Shilton ..	St. John Ambulance Brigade Hall, Alexander Avenue ..	1st and 3rd Thursdays, 2 p.m.
Earl Shilton (The Cedars) ..	The Cedars Com- munity Centre, Shilton Road, Barwell ..	1st and 3rd Wednesdays, 2.30 p.m.
Ellistown ..	Old Church School ..	1st and 3rd Thursdays, 2 p.m.
Enderby ..	Mission Room ..	1st and 3rd Wednesdays, 2 p.m.
Glenfield ..	Wesleyan Rooms ..	2nd and 4th Tuesdays, 2.30 p.m.
Groby ..	Congregational Church ..	1st and 3rd Fridays, 2 p.m.
Hathern ..	Village Hall ..	2nd and 4th Wednesdays, 2 p.m.
Hinckley ..	Health Clinic, The Lawns ..	Tuesdays and Wednesdays, 2.30 p.m.
Houghton-on-the-Hill	Village Hall ..	1st and 3rd Mondays, 2 p.m.
Hugglescote ..	Baptist Room ..	2nd and 4th Mondays, 2.30 p.m.
Ibstock ..	Baptist Chapel Schoolroom ..	2nd and 4th Thursdays, 2.30 p.m.
Kegworth ..	Wesleyan Schoolroom, High Street ..	2nd and 4th Wednesdays, 2.30 p.m.
Kibworth ..	Village Hall ..	2nd and 4th Wednesdays, 2.30 p.m.
Leicester Forest East	St. Mary's Hall, St. Mary's Avenue, Braunstone Lane ..	1st and 3rd Mondays, 2 p.m.
Long Clawson ..	Methodist Church Schoolroom ..	1st and 3rd Thursdays, 2 p.m.
Loughborough ..	Lemyngton Street ..	Tuesdays, Thursdays and Fridays, 2 p.m.
Lutterworth ..	Church Hall, Coventry Road ..	1st and 3rd Thursdays, 2.30 p.m.
Market Bosworth ..	St. Peter's Hall ..	1st and 3rd Tuesdays, 2 p.m.
Market Harborough	Welland House, The Square ..	Wednesdays, 2.30 p.m.
Markfield ..	Miners' Institute ..	1st and 3rd Thursdays, 2 p.m.
Melton Mowbray ..	Health Clinic, Asfordby Road ..	Wednesdays, 2 p.m.

Place		Address		Sessions held
Mountsorrel	..	Church House	..	1st and 3rd Tuesdays, 2.30 p.m.
Narborough	..	Robjohn Hall	..	2nd and 4th Wednesdays, 2 p.m.
Newbold Verdon	..	Church Hall	..	2nd and 4th Thursdays, 2 p.m.
Oadby	..	Baptist Schoolroom	..	1st and 3rd Wednesdays, 2.45 p.m.
Old Dalby	..	Ordnance Depot	..	1st and 3rd Wednesdays, 2 p.m.
Quorn	..	Church Rooms	..	1st and 3rd Wednesdays, 2.30 p.m.
Ratby	..	Church Rooms	..	1st and 3rd Tuesdays, 2 p.m.
Rearsby	..	Village Hall	..	1st and 3rd Tuesdays, 2.30 p.m.
Rothley	..	Village Hall	..	1st and 3rd Mondays, 2.30 p.m.
Scraptoft	..	Village Institute	..	2nd and 4th Wednesdays, 2.30 p.m.
Shelthorpe	..	Old Isolation Hospital		Mondays and Wednesdays, 2 p.m.
Shepshed	..	Adult School, 50 Forest Road		2nd and 4th Wednesdays, 2.30 p.m.
Sileby	..	The Institute, Cossington Road		1st and 3rd Tuesdays, 2.15 p.m.
South Wigston	..	Health Clinic, Countesthorpe Road		Wednesdays, 2 p.m.
Stoney Stanton	..	Working Men's Club and Institute		2nd and 4th Tuesdays, 2 p.m.
Syston	..	Red Cross Hall	..	Mondays, 2.30 p.m.
Thorpe Acre	..	Community Centre	..	Fridays, 2 p.m.
Thurcaston	..	Village Memorial Hall		1st and 3rd Wednesdays, 2 p.m.
Thurmaston	..	Bethel Methodist Church Room	..	2nd and 4th Tuesdays, 2.30 p.m.
Thringstone	..	Community Centre	..	2nd and 4th Tuesdays, 2.30 p.m.
Whetstone	..	Congregational School- room		2nd and 4th Tuesdays, 2.30 p.m.
Whitwick	..	Primitive Methodist Schoolroom		Mondays, 2.30 p.m.
Wigston Fields	..	Methodist Churchrooms Frederick Street Wigston Magna		1st and 3rd Thursdays, 2.30 p.m.
Wigston Magna	..	Methodist Church Rooms, Moat Street		2nd and 4th Thursdays, 2.30 p.m.
Woodhouse Eaves	..	Village Hall	..	2nd and 4th Tuesdays, 2 p.m.
Wymeswold	..	Village Hall	..	2nd and 4th Tuesdays, 2 p.m.

During 1955, only one new centre was opened, that at Thringstone, bringing the total of infant welfare centres in the county to 68. During the year the special vehicle for use in providing transport in the more rural areas was put into service and has proved of great value.

Summary of Statistics

	1955	1954
Number of meetings held during the year	2,038	1,964
Mothers :		
Number of mothers who attended for the first time ..	3,595	3,587
Number of mothers who attended during the year ..	7,916	7,572
Number of attendances during the year	66,299	49,755
Children :		
Number of children who attended for the first time and were under one year of age	3,665	3,370
Total number of children who attended during the year	8,948	8,676
Number of attendances during the year	73,000	73,010
Number of examinations by Medical Officers :		
First examinations	3,106	2,928
Total examinations	8,925	8,663
Number of weighings by Health Visitors	71,291	71,347

Individual Child Welfare Centres. Average Attendances per Meeting

Centre	Year 1954		Year 1955	
	Mothers	Children	Mothers	Children
Anstey	30.0	30.7	22.4	23.3
Asfordby	40.3	41.2	34.1	40.0
Ashby-de-la-Zouch	34.8	35.8	28.0	28.5
Bagworth	17.8	18.3	13.8	14.7
Barlestone	16.5	19.5	17.1	19.4
Barrow-upon-Soar	16.1	18.3	20.3	22.1
Barwell	31.6	34.6	23.1	27.9
Birstall	56.4	60.3	73.3	78.8
Blaby	30.2	33.5	36.2	42.7
Bottesford	10.2	10.8	8.6	8.9
Braunstone	42.6	43.2	43.7	45.8
Broughton Astley	24.5	28.2	29.9	32.8
Burbage	37.5	40.8	31.5	36.5
Castle Donington	19.0	24.9	22.6	25.9
Claybrooke Magna	21.0	25.7	24.0	28.9
Coalville	35.0	36.7	28.7	29.4
Cosby	22.6	24.7	19.6	21.4
Countesthorpe	35.4	40.3	23.5	27.2
Croft	23.1	31.7	19.1	24.1
Desford	34.9	40.0	32.4	37.6
Donisthorpe and Moira	20.5	21.0	29.8	30.0
Earl Shilton	20.2	20.8	17.0	17.6
Earl Shilton (The Cedars)	22.3	22.5	28.8	29.8

(Table continued on next page)

<i>continued</i> Centre	Year 1954		Year 1955	
	Mothers	Children	Mothers	Children
Ellistown	23.8	24.5	21.4	23.7
Enderby	40.7	47.0	30.9	35.7
Glenfield	40.9	46.1	30.6	33.3
Groby	14.8	15.6	19.6	20.5
Hathern	21.3	23.5	19.1	22.8
Hinckley	47.1	49.9	45.2	47.6
Houghton-on-the-Hill ..	24.1	27.1	26.6	30.0
Hugglescote	20.0	21.0	31.0	31.8
Ibstock	30.1	30.8	22.5	24.5
Kegworth	17.8	21.2	14.0	17.0
Kibworth	11.0	11.4	9.2	9.2
Leicester Forest East ..	26.6	27.2	32.3	33.7
Long Clawson	15.9	16.2	14.2	14.6
Loughborough	54.0	60.9	52.2	59.2
Lutterworth	53.5	67.4	43.7	54.9
Market Bosworth	16.7	18.6	13.0	13.5
Market Harborough ..	38.9	40.9	39.2	40.2
Markfield	35.7	32.1	32.1	33.7
Melton Mowbray	58.8	63.0	60.8	65.6
Mountsorrel	30.8	33.5	25.9	27.2
Narborough	31.8	36.8	31.5	35.9
Newbold Verdon	22.8	26.1	21.0	23.3
Oadby	27.9	28.5	32.7	34.8
Old Dalby	7.2	9.3	12.0	13.6
Quorn	39.1	45.4	38.9	44.6
Ratby	23.9	25.4	23.4	25.7
Rearsby	15.0	18.0	11.2	12.7
Rothley	29.0	34.4	25.0	29.0
Scraptoft	18.6	19.8	33.3	34.5
Shelthorpe	28.0	35.3	25.6	29.9
Shepshed	49.5	50.1	46.5	39.1
Sileby	66.8	81.2	59.4	73.7
South Wigston	49.4	54.6	46.8	49.1
Stoney Stanton	41.6	49.2	49.0	59.6
Syston	40.3	41.8	47.2	48.8
Thorpe Acre	30.6	42.4	35.4	44.9
Thringstone (opened 26.4.55)	—	—	19.9	20.8
Thurcaston	15.8	19.1	13.0	15.9
Thurmaston	42.1	48.8	41.8	47.2
Whetstone	17.2	19.1	15.3	16.9
Whitwick	45.0	46.1	38.2	38.5
Wigston Fields	35.9	37.6	49.3	50.7
Wigston Magna	32.3	34.6	36.6	38.8
Woodhouse Eaves	22.0	24.3	26.3	28.2
Wymeswold	20.4	24.7	26.3	28.3

Note : The centre at Old Dalby is purely a "weighing centre" run by the Health Visitor for the district.

The Domiciliary Care of Premature Infants

All babies whose weight at birth is less than $5\frac{1}{2}$ lb. are reckoned as Premature Infants. Special cots and equipment are held in store and are available on loan for the nursing of these babies.

Premature Births

The following is a record of premature births during the year—all figures refer to notified births after correction for transfers. These premature births born either at home or in a maternity home are referred to the Health Visiting Staff so that any necessary advice may be given or special treatment arranged.

1. Number of Premature Live births notified :

(a) In hospital	..	..	..	..	218
(b) At home	..	..	..	..	92
(c) In private nursing homes			..	..	33
Total	..	..	..	..	343

2. Number of Premature Stillbirths notified :

(a) In hospital	..	..	..	..	38
(b) At home	..	..	..	..	13
(c) In private nursing homes			..	..	3
Total	..	..	..	..	54

PREMATURE LIVE BIRTHS															PREMATURE STILLBIRTHS			
Weight at birth (1)	†Born in Hospital			Born at home and nursed entirely at home			Born at home and transferred to hospital on or before 28th day			Born in nursing home and nursed entirely there			Born in nursing home and transferred to hospital on or before 28th day			Born in hospital (17)	Born at home (18)	Born in nursing home (19)
	Total (2)	Died within 24 hrs. of birth (3)	Survived 28 days (4)	Total (5)	Died within 24 hrs. of birth (6)	Survived 28 days (7)	Total (8)	Died within 24 hrs. of birth (9)	Survived 28 days (10)	Total (11)	Died within 24 hrs. of birth (12)	Survived 28 days (13)	Total (14)	Died within 24 hrs. of birth (15)	Survived 28 days (16)			
(a) 3 lb. 4 oz. or less (1,500 gms. or less)	20	11	6	4	3	1	11	1	8	2	-	-	3	-	3	13	3	-
(b) Over 3 lb. 4 oz. up to and including 4 lb. 6 oz. (1,500-2,000 gms.)	51	4	39	8	-	8	3	-	3	3	-	2	1	-	1	14	5	2
(c) Over 4 lb. 6 oz. up to and including 4 lb. 15 oz. (2,000-2,250 gms.)	44	1	43	7	-	6	3	1	2	4	-	4	-	-	-	6	2	-
(d) Over 4 lb. 15 oz. up to and including 5 lb. 8 oz. (2,250-2,500 gms.)	103	1	102	55	-	52	1	-	1	20	-	20	-	-	-	5	3	1
Totals ..	218	17	190	74	3	67	18	2	14	29	-	26	4	-	4	38	13	3

+The group under this heading will include cases which may be born in one hospital and transferred to another

The Care of Illegitimate Children

A grant is made to the Leicester Diocesan Moral Welfare Association for its services in connection with the care of illegitimate children. Visits are made by their Welfare Officer to some cases of difficulty.

The illegitimacy rate still continues to fall and is now approaching the level of the pre-war years as is shown in the following table which gives details of the illegitimacy rates over the past twenty years.

Year	Total live births	Illegitimate live births	Illegitimacy percentage of total live births
1936 ..	4,419	134	3.03
1937 ..	4,488	150	3.34
1938 ..	4,633	126	2.72
1939 ..	4,620	152	3.30
1940 ..	5,174	158	3.34
1941 ..	5,299	198	4.12
1942 ..	5,508	240	4.36
1943 ..	6,102	320	5.24
1944 ..	6,536	385	5.89
1945 ..	5,783	532	9.20
1946 ..	6,563	383	5.84
1947 ..	6,948	324	4.66
1948 ..	6,363	297	4.66
1949 ..	5,936	226	3.81
1950 ..	5,624	209	3.71
1951 ..	5,567	198	3.56
1952 ..	5,463	213	3.90
1953 ..	5,422	188	3.46
1954 ..	5,145	169	3.28
1955 ..	5,297	168	3.17

Unmarried Mothers and their Children

The agreement with the St. Saviour's Diocesan Maternity Home at Kingsthorpe, Northampton, was continued during the year and nine unmarried mothers were admitted from this County.

A further eleven unmarried mothers were also sent to the following homes :

Salvation Army Home, Birmingham	..	..	1
"The Quarry", Lincoln	..	..	5
St. Martin's Home, Hereford	..	..	3
Borrowash House, Borrowash, Derby	..	..	2

Eye Treatment

Children of pre-school age requiring eye treatment are referred to the School Medical Department and prescriptions are dealt with by arrangement with the Sheffield Regional Hospital Board.

Day Nurseries

Details of attendances at the Day Nurseries are given in the following table :

	Hinckley	Lough- borough	Market H'boro'	South Wigston	Syston	Totals
No. of approved places:						
0—2 years ..	15	15	9	9	10	58
2—5 years ..	25	35	26	26	20	112
No. of children on register, 31st Dec., 1955 :						
0—2 years . . .	13	11	8	4	9	45
2—5 years ..	26	49	15	22	23	135
Average daily attendances :						
0—2 years ..	11	11	7	5	9	43
2—5 years ..	21	32	14	18	19	104

Maternity Outfits

Maternity outfits, together with a suitable antiseptic, are issued for use at domiciliary confinements. During the year 2,480 outfits were issued from the department and from other depots throughout the county.

Birth Control

By arrangement with the City of Leicester cases are referred to the City Birth Control Clinic. During 1955 a total of 85 cases were so referred.

Deafness in Young Children

The arrangements with the City of Leicester whereby County Health Visitors hold special sessions for county cases at the City of Leicester Deaf Clinic continued during the year. Between 1st January and 31st December, 1955, 14 children were dealt with at the clinic making a total of 99 attendances. In addition, the specially trained health visitors commenced a survey of children attending welfare centres and day nurseries.

Welfare Foods

The distribution of National Welfare Foods has continued to function smoothly and satisfactorily. The help given by the Women's Voluntary Service and the many other voluntary workers in all parts of the county is much appreciated. All distribution centres are now manned by these volunteers, making it possible to reduce the cost of the service by dispensing with paid assistants.

During the year nearly half a million items of welfare foods were distributed, details being given below :

Quarter ending	Dried Milk, tins	Orange Juice, bottles	Cod Liver Oil, bottles	Vitamin A & D Tabs., packets
2nd April, 1955 ..	39,019	51,897	12,735	4,275
2nd July, 1955 ..	26,394	56,985	9,731	4,100
1st October, 1955 ..	38,152	70,842	9,860	4,379
31st December, 1955	35,827	58,562	13,531	5,305
Totals ..	139,392	238,286	45,857	17,059

SECTION 23

Midwifery

The midwifery service has continued to be administered mainly under agency arrangements with the Leicestershire County Nursing Association. This body employs the majority of nurse-midwives with the exception of a small number of whole-time midwives who are employed directly by the County Council.

Number of Midwives Practising

There has been no alteration in the number of midwives who notified their intention to practice during the year under review, the number remaining static at 159. This figure comprises 113 domiciliary and 46 institutional midwives, as is shown in the following table.

	Number of Midwives practising in the area of the Local Supervising Authority at end of year		
	Domiciliary Midwives	Midwives in Institutions	Total
(a) Midwives employed by the Authority	13	—	13
(b) Midwives employed by Voluntary Organisations :			
(i) Under arrangements with the Local Health Authority in pursuance of Section 23 of the National Health Service Act, 1946	88	—	88
(ii) Otherwise (including Hospitals not transferred to the Minister under the National Health Service Act)	2	—	2
(c) Midwives employed by Hospital Management Committees or Boards of Governors under the National Health Service Act :			
(i) Under arrangements with the Local Health Authority in pursuance of Section 23 of the National Health Service Act, 1946	—	—	—
(ii) Otherwise	—	38	38
(d) Midwives in Private Practice (including Midwives employed in Nursing Homes)	10	8	18
Totals	113	46	159

Number of cases attended

In addition to cases attended by domiciliary midwives shown in the following table there were 1,449 cases delivered in institutions but were discharged before the fourteenth day and therefore came under the care and attention of the domiciliary midwives.

NUMBER OF DELIVERIES ATTENDED BY MIDWIVES IN THE AREA DURING THE YEAR							Cases in Institutions
Domiciliary Cases							
Doctor not booked		Doctor booked		Totals			
Doctor present at time of delivery of child (2)	Doctor not present at time of delivery of child (3)	Doctor present at time of delivery of child (either the booked Doctor or another) (4)	Doctor not present at time of delivery of child (5)				
(1)	(2)	(3)	(4)	(5)	(6)	(7)	
(a) Midwives employed by the Authority ..	3	72	101	448	624	—	
(b) Midwives employed by Voluntary Organisations : (i) Under arrangements with the Local Health Authority in pursuance of Section 23 of the National Health Service Act, 1946 ..	8	83	400	1,144	1,635	—	
(ii) Otherwise (including Hospitals not trans- ferred to the Minister under the National Health Service Act) ..	—	—	—	7	7	—	
(c) Midwives employed by Hospital Management Committees or Boards of Governors under the National Health Service Act ..	—	—	—	—	—	1,162	
(d) Midwives in Private Practice (including Mid- wives employed in Nursing Homes) ..	1	5	4	29	39	469	
Totals ..	12	160	505	1,628	2,305	1,631	

on the possibility of devising improved or new methods of producing analgesia suitable for use by midwives", issued its report. Among its recommendations, the Committee suggested that midwives acting on their own responsibility, after adequate instruction, be permitted to administer Trichloroethylene B.P. (this is better known under its proprietary name of "Trilene"). Shortly after this the Central Midwives' Board amended their rules to include the use of "Trilene" by referring to inhalation analgesic instead of reference to nitrous oxide and air. In this county during the year under review no use was made however of "Trilene". The analgesics in normal use were gas and air and pethidine and details of the cases in which these were used are given in the table below.

Administration of Inhalational Analgesics

	(1)	(2)	Number of sets of apparatus for the administration of analgesics in use at end of year		Number of cases in which inhalational analgesics were administered by midwives in domiciliary practice during the year :				Number of cases in which pethidine was administered by midwives in domiciliary practice during the year :	
			Gas and air (3)	"Trilene" (4)	When doctor was present at time of delivery of child (5)	"Trilene" (6)	Gas and air (7)	When doctor was not present at time of delivery of child (8)	When doctor was present at time of delivery of child (9)	When doctor was not present at time of delivery of child (10)
(a) Domiciliary Midwives employed directly by the Local Health Authority	13		13	-	69	-	393	-	29	129
(b) Domiciliary Midwives employed under Section 23 by voluntary organisations as agents of Local Health Authority	86		83	-	159	-	807	-	129	381
(c) Domiciliary Midwives employed under Section 23 by hospital authorities as agents of Local Health Authority	-		-	-	-	-	-	-	-	-
(d) Domiciliary Midwives in private practice or employed by organisations not acting as agents of Local Health Authority	2		1	-	-	-	6	-	-	7
Totals	101		97	-	228	-	1,206	-	158	517

Notifications received from Midwives

The following notifications were made by midwives in the county during the year :

Requests for medical aid	..	..	..	355
Liability of a midwife to be a source of infection ..			..	55
Midwife having "laid out the dead" ..			..	31
Death of mother or child : mother ..			..	—
child ..			..	11
The occurrence of a stillbirth ..			..	37
The commencement of artificial feeding ..			..	248

A breakdown of the 355 requests for medical aid is given below :

Mother—Pregnancy and Labour

Abortion	9
Albuminuria	1
Ante-partum Hæmorrhage ..	12
Fœtal distress	3
Hypertension	2
Malpresentation	12
Miscarriage	5
Obstetric shock	1
Post-partum hæmorrhage ..	19
Premature labour	5
Prolonged labour	23
Retained placenta	15
Ruptured perineum	149
Vaginal laceration	1
Uterine inertia	6

Mother—Lying-in Period

Breast condition	..	..	8
General condition	..	..	6
Leg condition	..	..	4
Oedema	..	..	2
Pain in chest	..	..	1
Puerperal Pyrexia	..	..	3
Pyrexia	..	..	17

Baby

B.B.A.	..	..	4	Prematurity	..	..	8
Cyanosis	..	..	5	Skin condition	..	..	4
Deformity	..	..	2	Stillbirth	..	..	2
Eye condition	..	..	7	Vomiting	..	..	1
Epistaxis	..	..	1	General condition	..	..	17

Infectious Disease (Midwifery)

During the year there were no notifications of cases of Ophthalmia Neonatorum or Pemphigus Neonatorum. There were however 14 cases of Puerperal Pyrexia, seven of these being domiciliary confinements and seven institutional confinements.

Inspection of Midwives

The non-medical supervision of midwives is carried out by officers on the staff of the County Nursing Association and the following is a summary of this work (which also includes general nursing inspections).

	Number of Routine Inspections		Number of Special Inspections	
	General Nursing	Midwifery	General Nursing	Midwifery
Nurse Midwives ..	257	306	—	17
General Nurses ..	40	—	5	—
County Council Midwives	—	51	—	3
Independent Midwives ..	—	23	—	—
Homes and Hospitals ..	10	19	1	—
Totals	307	399	6	20

Transport for Midwives

There are very few midwives in the county who are not now using a motor car on their district. The majority of these cars have been provided by the County Council although there is an increasing tendency for the midwives to provide their own cars. There are now 42 private cars compared with 29 at the end of 1954. Disposition of all motor cars is shown in the following table :

	County Council Cars	County Nursing Association Cars	Private Cars
County Council Midwives ..	4	—	8
C.N.A. Administration Staff ..	—	1	3
Nurse/Midwives and Nurses ..	62	1	31
Spare Cars	2	1	—
Totals	68	3	42

Post-Graduate Courses

Arrangements were made for midwives to attend refresher courses at the Sorrento Maternity Hospital but owing to the fact that towards the end of the year the Central Midwives' Board withdrew recognition of the Sorrento Post-Graduate course for the purpose of Rule G.I, it was necessary to make fresh arrangements to send the midwives to courses arranged by the Royal College of Midwives. In all ten midwives attended refresher courses.

Houses for District Nurses and Midwives

During the year the house built by the County Council for the nurse at Woodhouse Eaves was occupied and houses at Gilmorton and Countesthorpe were purchased by the County Council.

The present situation regarding houses is as follows :

Houses owned by the County Council (including flats)	..	7
Houses owned by County Nursing Association		8
Houses owned by District Nursing Associations		9
Houses owned by nurse/midwives..		9
Council houses rented to County Nursing Association or County Council		3
Council houses rented direct to nurse/midwives		34
Other houses rented to County Nursing Association or District Nursing Associations		6
Privately-owned houses rented to nurses		29
Furnished rooms, etc.		12
Caravans owned by nurse/midwives		1
Total	..	118

SECTION 24

Health Visiting

The following is a statistical record of the main duties only of the Health Visiting Staff during the year under review :

Children under 1 year of age :

First visits	..	..	..	..	5,552
Total visits	..	..	..	..	37,441

Children age 1 and under 2 years :

Total visits	..	..	..	..	20,161
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Children age 2 but under 5 years :

Total visits	..	..	..	..	46,524
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Number of children under 5 years visited during the year

..	..	..	..	..	23,128
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Expectant mothers :

First visits ..	..	..	..	..	1,098
Total visits	..	..	..	..	2,137

Tuberculous households :

Total visits	..	..	..	..	1,202
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Visits re :

Stillbirths ..	..	..	..	..	88
Illegitimate children..	..	..	..	..	1,300
Premature infants	..	..	..	..	2,966
Post-natal cases	..	..	..	..	828
Maternity cases for admission to hospital	..	..	..	..	1,043
Chronic sick cases	..	..	..	..	702
Immunisation	..	..	..	..	3,158
Vaccination	..	..	..	..	560
Tuberculosis	..	..	..	..	4,024
Diabetic cases	..	..	..	..	1,663
Miscellaneous	..	..	..	..	2,360

Total number of households visited	..	..	..	..	19,775
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Attendances at :

Infant Welfare Centres	..	..	..	..	2,289
Ante-natal Clinics	..	..	..	..	191
Post-natal Clinics	..	..	..	..	3
Chest Clinics	..	..	..	..	794
Diabetic Clinics	..	..	..	..	100
Deaf Clinic	..	..	..	..	72

Staff Establishment

The authorised establishment is as follows :

- 1 Superintendent Health Visitor
- 1 Deputy Superintendent Health Visitor
- 1 Health Visitor for Health Education
- 1 Health Visitor for the Care of Diabetics
- 39 Health Visitors

A full list of the Health Visiting Staff is given at the beginning of this report under the Staff of the Department.

Training of Health Visitors

At the end of the year there was one student Health Visitor taking the training course held by the City of Leicester Health Department.

Post-Graduate Courses

Two health visitors attended courses organised by the Royal College of Nursing held in London and a further two health visitors attended courses arranged by the Women Public Health Officers' Association in Leicester and Cambridge. The Second International Congress of the International Diabetes Federation was held at Cambridge in July and was attended by three members of the health visiting staff.

Investigation of applications for admission to maternity accommodation

The number of cases investigated by the health visiting staff increased by nearly 100 over the previous year ; 876 compared with 796 in 1954. Of the cases investigated, 777 were recommended for admission to a maternity hospital.

Investigation of applications for Chronic Sick accommodation

The investigation of these cases continues to take more and more of the health visitor's time as each year the number of cases continues to rise. This year the total jumped to 441 from 333 in 1954.

The Changing Work of the Health Visitor

As mentioned in last year's report, the Health Visitor is becoming more and more the family advisor and is now the key medico-social worker. Co-operation with general practitioners has become much more satisfactory and they frequently call upon the Health Visitor to visit special cases.

Selective visiting continues and special visits are paid to certain families with the aim of preventing a breakdown. Visits to many of these families are

very time consuming but can be very rewarding as the people feel they have a friend who is not only sympathetic but has the right answers to their problems and so can help them with difficulties which are threatening to overwhelm the family. Sometimes, on the other hand, it can be disheartening to a Health Visitor to see so little apparent result from much effort.

More and more time is being spent by the Health Visitor in visits to the aged and chronic sick. The liaison between the Health Visitor and hospitals with regard to discharged patients for follow-up visits remains good.

Visits to children under two, of course, remain the primary concern, those over two have, of necessity, to be less frequently visited but the Health Visitor must judge which families can be safely left to visits at longer intervals and which need more guidance.

SECTION 25

Home Nursing

The following tables give details of Home Nursing staff and work carried out by them during 1955. All the nurses are employees of the Leicestershire County Nursing Association acting as agents on behalf of the County Council.

(1)	Administrative and Supervisory Nursing Staff			State Registered Nurses (S.R.N., R.S.C.N., and R.F.N.)			Enrolled Assistant Nurses			Student Home Nurses		
	Whole-time (2)	Part-time (3)	Equiv. Whole-time of (3) (4)	Whole-time* (5)	Part-time* (6)	Equiv. Whole-time of (6)* (7)	Whole-time* (8)	Part-time* (9)	Equiv. Whole-time of (9)* (10)	Whole-time* (11)	Part-time* (12)	Equiv. Whole-time of (12)* (13)
(a) L.H.A.	—	—	—	—	—	—	—	—	—	—	—	—
(b) Vol. Org.	—	3	1½	19	53	33½	1	35	21½	—	—	—
				3	—	—	—	—	—	—	—	—

*Male nurses should be included and also shown separately in the boxes

(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)
	Medical	Surgical	Infectious Diseases	Tuber- culosis	Maternal Compli- cations	Others	Totals	Patients included in (2)-(7) who were 65 or over at the time of the first visit during the year (9)	Children included in (2)-(7) who were under 5 at the time of the first visit during the year (10)	Patients included in (2)-(7) who have had more than 24 visits during the year (11)
Number of cases attended by Home Nurses during the year: (a) L.H.A. ..	—	—	—	—	—	—	—	—	—	—
(b) Vol. Org. under arrangements with the Authority ..	7,313	3,332	11	149	65	868	11,738	4,840	787	1,740
Number of visits paid by Home Nurses during the year: (c) L.H.A. ..	—	—	—	—	—	—	—	—	—	—
(d) Vol. Org. under arrangements with the Authority ..	146,912	40,841	77	7,144	636	18,137	213,747	84,144	4,714	110,046

A REVIEW OF MIDWIFERY AND HOME NURSING IN LEICESTERSHIRE

(Dr. MARJORIE L. CAMPBELL, Senior Medical Officer)

When, with the Health Act of 1946, the County Council first became responsible for the domiciliary nursing of sick patients in their own homes, an agreement was entered into with the Leicestershire County Nursing Association whereby the latter was to provide a comprehensive 24-hour service for the whole of the administrative area. The confidence thus expressed by the County Council in the ability of the County Nursing Association to undertake this work was based on the experience of 38 years' close relationship with it since its inception in 1910. The Association is now 45 years old, and it seems a suitable time to review briefly the nature and changes in the work it has supervised during a period in which medicine has made more advances than in the whole of preceding history.

The Midwives' Act of 1902 had secured the formation of the Central Midwives' Board and had appointed every Council of a County or County Borough as the Local Supervising Authority within its said area. It had also laid down that after April, 1910, no woman should habitually and for gain attend women in childbirth, other than under the direction of a qualified medical practitioner, unless she was a certified midwife, and that it was the duty of the County Council as the Local Supervising Authority of Midwives to exercise general supervision, investigate charges of malpractice, etc., and appoint inspectors of those midwives, most of whom were in private practice and many of whom were "Bona Fide" midwives, i.e. not certificated but having been able to produce evidence at the time of the passing of the Act that they had been for at least one year in bona fide practice as a midwife and bore a good character. It is interesting to note that then, as now, there was a shortage of midwives, and the Medical Officer of Health's Report for 1909 shews that the Local Supervising Authority were concerned about this situation and decided that the best way to obtain a sufficient supply of suitable midwives was to form a County Nursing Association and encourage the formation of local nursing associations which should have midwives on their staff. The County Nursing Association, therefore, was formed in March, 1910, "to aid and promote nursing throughout the county especially to supply efficiently trained midwives in conformity with the Act of Parliament now coming into force, and village nurses either as Visiting District or Cottage Resident Nurses".

The County Nursing Association invited parishes or combination of parishes to form local associations and to affiliate according to the rules. It offered to provide such local associations with a fully-qualified hospital trained nurse, a village nurse or a cottage resident nurse, and to supply this nurse with uniform, bag and equipment for a year, to inspect her work where

the Local Nursing Association desired and to remove and replace her if she proved to be unsuitable ; and it promised to assist local associations in poor districts, under certain conditions, with grants of money to aid their work.

Local associations, of which about five already existed in the county, consisted of a voluntary committee or in some cases a single individual responsible for raising the funds for paying their nurse. They were autonomous bodies and could engage their own nurse or nurses. Funds were usually raised by subscriptions, concerts and sales of work. Patients either paid what they could at the time of their illness or subscribed a small amount yearly, or did not pay at all. The districts varied in their procedure and in some the nurse's salary was paid by a single benefactor.

Three associations affiliated at once, one joined later in the year and a new local association started work in the autumn of 1910. The County Council granted £169 annually for Midwifery Training Scholarships and £75 for General Nursing, and arrangements were made for selecting and training candidates. Four health visitors were appointed for the first time to the Medical Officer of Health's staff and their duties included the supervision of the midwives in the area. The Committee of the County Nursing Association, in presenting their first Annual Report, recorded their most grateful thanks to the Medical Officer of Health for all the help and assistance he had given to the scheme and details connected with the organisation of the work and selection of probationers.

In the second year of the County Nursing Association's existence, another ten district nursing associations affiliated and the first central office was established in South Wigston. It was also used as a home for emergency nurses when not employed ; the initial expenses of this home were defrayed by public subscription. This year also saw the establishment of registered districts, whereby villages too small or too poor to afford a permanent nurse were able to have one when required. In 1912 the coming into force of the Insurance Act greatly increased the amount of office work, and the honorary secretary, who had also acted as lady superintendent, resigned the latter office whilst retaining the honorary secretaryship. One of the health visitors who had been an inspector of midwives was appointed as Superintendent residing at the Emergency Home, the post thus becoming a salaried one for a fully-trained nurse with the Central Midwives' Board Certificate.

The funds of the County Nursing Association were derived from subscriptions, aided by monies interested people had raised by entertainments and sales of work, and the early annual reports shew the Committee always a little worried about the financial aspect. In 1913 discussions were held with Friendly and Approved Societies about the question of nursing under the Insurance Act and the Sanatoria Sub-Committee of the Leicestershire Health Insurance Committee recommended that the services of the nurses of the

Leicestershire County Nursing Association should be utilised at an agreed fee in cases of domiciliary treatment of tuberculosis. An allocation was also received for the first time from the income of the King Edward VII Memorial Fund.

The war years 1914-18 saw a period of steady expansion and an enormous increase in the work of the County Superintendent and Secretary, the latter becoming a paid post from 1917. Training grants for midwives and district nurses were continued by the County Council but it was difficult to find pupils, owing to the greater attraction of war work and war wages. The work of finding these candidates and supervising them whilst in training was delegated to the County Superintendent, who reported in 1916-17 that 115 villages had been canvassed for this purpose. Visits also had to be paid again and again to all places wishing to form Nursing Associations, and sometimes almost insuperable difficulties had to be overcome. The 1917-18 report states in that year 44 villages had been visited 148 times in connection with forming nursing associations in new districts, and 22 of these villages had been canvassed from house to house. The County Superintendent also gave lectures and addresses in villages and ran a course in ambulance instruction for men orderlies. In her spare time she appears to have inaugurated the first infant welfare centre in the county at South Wigston. One senses a feeling of excitement and expectancy in the later war year reports—the Government was bringing out a new scheme for the care of maternity and child welfare and would for the first time give financial assistance to district nursing. When it came, the Maternity and Child Welfare Act of 1919 was a milestone, the County Council's powers to make arrangements for attending to the health of expectant and nursing mothers and of children under five years were increased, a Maternity and Child Welfare Committee was formed, on which the County Nursing Association was represented, and the County Nursing Association was entrusted with carrying out the scheme for the care of maternity. This consisted in supplying midwives to "necessitous districts", i.e. where more midwives were necessary, or to necessitous women unable to afford fees. The payment of doctors' fees for attending such patients was also provided for by this Act.

This scheme naturally greatly increased the County Nursing Association's work and by 1919 it was found necessary to appoint an Assistant Superintendent while six certificated midwives were on call at the Central Office and Home, now transferred to St. Peter's Road, Leicester. The Local Education Authority had voted a substantial sum towards training midwives, but ideal pupils were still proving difficult to find. The terrible influenza epidemics of the post-war years made the utmost demand on the district nurses, but it is recorded that a steady response was made to all calls.

During the next fifteen years the area covered in Leicestershire by affiliated District Nursing Associations steadily increased. In 1920, 55 were in existence

and by 1935 there were 81. It was a time, especially in the twenties, of acute financial anxiety for the Committee, which was compelled to increase affiliation fees from 10s. per annum to £1 per annum in 1920, for although money was coming in for midwifery from public funds no grants were received for a general nursing service except for tubercular cases. In 1921 sanatorium benefit was transferred to Local Authorities and the district nurses continued to attend domiciliary and shelter cases. The Nurses' Home and Central Office had been moved that year to a large old house, in Highfield Street, an additional heavy expense as it had to be purchased and not rented as were the other premises. In 1922-23 a Special Appeal was launched to raise £3,000 which was successful, but it was not until 1927-28 that the Committee could report that the financial position had improved. Meantime the County Nursing Association was increasing in prestige and was represented on other bodies interested in public work. In 1920 it had affiliated to the Queen Victoria Jubilee Institute for Nurses, the pioneer Institute of District Nursing, and was represented on their Council. Affiliation with "Queen's" gave the County Nursing Association the opportunity of having specially trained nurses for the sick, later, superintendents would be Queen's trained and the Committee would be kept abreast of all the most modern thought and trends in district nursing care; hospital nurses could now, too, be sent to train at Queen's District Homes and part of the grant from the Leicestershire Education Committee was used in this way. It was an interesting period of improvement in all the social services as the State gradually felt its way towards social security. Assurance and Friendly Societies were conferring with representatives of nursing associations and by 1923 the Scheme inaugurated by the Queen Victoria's Jubilee Institute, by which most of the best known approved societies agreed to pay certain amounts per visit for the nursing of their members, came into being and was accepted by many of the district associations. Other district associations with local collectors ran their own "Provident Schemes", under which subscribers, for the sum of a penny or twopence per week (for districts varied in their charges) were covered for home nursing of themselves and their non-wage-earning children in times of illness. The greater part of a nurse's salary, however, had still to be raised by voluntary funds. Much thought also was given to the question of nurses' pensions, and in 1928 a Pension Committee was appointed and two schemes adopted: the Federated Superannuation Scheme for fully-trained hospital nurses and a Pension Scheme for district nurse midwives inaugurated by the Equitable Assurance Society. The County Nursing Association was quick to realise the value of these schemes which were adopted for its own staff, and it urged the district associations to follow suit.

During this period the Ministry of Health was urging a complete coverage in midwifery over the county and arrangements had to be made to supply a service in the sparsely-populated rural areas where no single parish could support a district nurse midwife. In 1923 the Maternity and Child Welfare

Committee decided to group such parishes into convenient units, placing a midwife as near the centre as possible, subsidising her and giving her a bicycle allowance and grant for initial expenses. The supervision and control of these midwives was given to the County Nursing Association. The Annual Report of 1923 notes that it was proving very difficult to find houses for them, a cry that was to echo down the years to the present day. Later the County Council paid grants to midwives who would take cases outside their usual district or area.

Midwives' qualifications were changing. In his Report for 1926, the Medical Officer of Health said that in 1905, 91 midwives had notified their intention to practice in the county, and of these 89 were "bona fide" and four certificated. In 1926, 191 midwives notified their intention to practise and 161 were certificated with only 21 "bona fide". In that year, too, the course of training was lengthened from four months to six for hospital-trained nurses and from six months to a year for others. The value of ante-natal examinations was becoming increasingly recognised and midwives were offered grants by the Ministry of Health and County Council to obtain two months' post-certificate courses. Arrangements were also made in 1930 for county midwives to attend the Leicester and Leicestershire Maternity Hospital ante-natal clinics at a charge of 5s. 6d. per session ; this charge being paid by the County Council. Two ante-natal clinics had been established, one at Hinckley (1927) and the other at South Wigston (1929), with a medical officer in charge and existing primarily for midwives' cases.

A highlight of the twenties was the provision of a motor car for the superintendents in 1927 ; up to this time they had to travel by train to their destination, bringing their bicycles with them so that they could bicycle over the district being inspected with the nurse. This proved so time-saving that in 1934 the County Nursing Association decided to purchase eight cars, to be hired out to district nursing associations for the use of their nurses at the very modest charge of £15 per annum. It was hoped that this would be a lead to encourage districts to take in a wider area and to cover parts of the county still un-nursed. It proved to be a popular and successful measure. The money was raised by a special subscription, and an appeal made by the Honourable Harold Nicolson on the Midland Regional programme, "The Week's Good Cause", on 26th January, 1936, also brought a good response.

In 1934 the Garden Scheme was first officially organised in Leicestershire by the County Nursing Association, the National Gardens Scheme having been inaugurated in 1927. Twenty-one owners of gardens kindly opened them to the public, in aid of District Nursing in the County. With the exception of the years 1941-47, this scheme has operated ever since and the very considerable task of organising it yearly has always been undertaken voluntarily by the Secretary or by her assistant.

In 1935, the County Nursing Association celebrated its 25th Anniversary

by presenting long-service badges to nurses who had served for 10 years or more under its supervision. The alteration of the City of Leicester boundaries also occurred in that year, necessitating a considerable reshuffle of the areas of the Nursing Association on the periphery of the city.

The Midwives Act of 1936 was the most important event as yet to occur in the history of nursing in the county. The Act, which was designed to improve the status of midwives and to secure an adequate supply of certificated midwives for attendance on women in their own homes, laid upon the County Council as the local Supervising Authority the duty of providing this service either itself or by arrangements with welfare councils or voluntary organisations.

The position in the county before the Act became law was that the Leicestershire County Nursing Association and its affiliated District Nursing Associations covered the greater part of the area ; a certain number of unaffiliated district nursing associations existed, also employing district nurse/midwives and a number of midwives practised independently. Of the 226 midwives notifying their intention to practise in that year, 222 held the certificate of the Central Midwives' Board. The County Nursing Association was asked to undertake the work of carrying out the requirements of the Act, which involved much reorganisation of the service. Unaffiliated district nursing associations were asked to affiliate and new associations were formed where independent midwives practised, whilst, where this was not feasible, boundaries were extended to take in un-nursed areas. The County Council itself engaged 11 whole-time midwives to work in urban areas where a sufficient number of cases occurred and, by special arrangements with the Welfare Councils, at Loughborough and at Market Harborough. It gave initial grants of money to newly-formed or newly-affiliated district nursing associations and initiated a scheme for providing cars and telephones wherever it was considered to be necessary.

Midwives' salaries were standardised and improved, the County Council making good the extra amounts where needed. A standard of charges was laid down for maternity and midwifery cases and conditions of service for the midwives who were now provided with uniform or, in the case of Queen's Nurses, given a uniform allowance. The County Council also made grants towards the salaries of the Central Office staff, the secretaryship becoming a full-time post. Midwives were required to attend at regular periods for post-graduate instruction and all relief arrangements for holidays, sickness or study became the responsibility of the County Nursing Association.

The requirements of the new Act naturally greatly increased the work and scope of the central staff. Part of the nurses' home had been converted into a flat as an economy measure in the early thirties and this had to be taken back into the home as the number of relief nurses was raised from six to 14. By dividing some of the larger rooms it was found possible to provide sleeping

accommodation for 10 nurses. A warden was appointed and the home was largely refurnished. By 1938 eight new nursing associations had been formed and affiliated, 35 telephones installed and nine cars provided by the County Council, one of which was for a whole-time midwife. A new scheme was drawn up during this year to provide free nursing of subscribers taken ill during temporary residence in another nursing association's area ; an acknowledgment in the annual report shows that the Leicester District Nursing Association not only entered into the scheme but was instrumental in drawing it up.

The following year saw the Superintendent and her deputy acting for the first time as Inspectors of Midwives for a quarter of the county. This work, as noted earlier, had previously been done by selected health visitors with the necessary qualifications. Now it gradually was to become the responsibility of the County Nursing Association. In 1944 a much larger area was undertaken and a second Assistant Supervisor was appointed, but the County Council whole-time midwives continued to be supervised by the Health Visitor Superintendent until 1949.

The war years were now upon the country and a very great strain was thrown upon the resources of the County Nursing Association and district nursing. Midwifery was, naturally, work of national importance and midwives were not free to offer themselves for other forms of national service, but there was a great shortage of nurses which became more acute as time went on. The district associations were in financial difficulties, for entertainments were still counted upon to provide a considerable source of that revenue and most village halls had been taken over for the emergency services ; other charitable organisations, such as the Red Cross and the Soldiers' Comforts Funds, had claims on the subscribers purse and most of the voluntary workers of the committees were also engaged in some form of war work. The nurses were shouldering a very heavy burden with great spirit ; understaffing and the steady inflow of evacuated mothers and children into the area greatly increased their work. Cars were difficult to obtain and night work in the black-out an almost intolerable strain. The weather, too, was exceptionally severe and it is recorded that in the winters of 1940, 41 and 42 when snow made country roads unusable to cars many nurses had to walk as much as 10 miles a day, which they did uncomplainingly.

In November, 1940, the County Nursing Association offices and home in Highfield Street was rendered uninhabitable by enemy action and the relief nurses had to be accommodated in private houses. How the situation was coped with is best described by quoting verbatim, the foreword of the 31st Annual Report.

"In the midst of war, this house was purchased and presented to the Leicestershire County Nursing Association by its Chairman, Florence Julia Fielding Everard".

These words are inscribed on a bronze tablet that the Committee has placed in the hall at 21 Stoneygate Road, Leicester, the new Headquarters of the Leicestershire County Nursing Association.

It tells in a few simple words, the story of how, in a time of great anxiety, when the Association was homeless and faced with what seemed insuperable difficulties, Mrs. Bernard Everard came forward and presented a house, beautifully furnished and perfectly equipped for the purpose of the Association.

Here, surrounded with every comfort that thoughtful care could provide, the nurses live when they are resting and the staff works under ideal conditions.

These few lines of grateful appreciation are dedicated to one who, not only by her munificent gift, but also in her many years of untiring work for the welfare of the Association, has earned the respect and affection of all who are privileged to work with her.

June, 1941.

21 Stoneygate Road,
Leicester.

The nurses and staff found the new home most comfortable and the existence of a large room on the third floor made it possible to hold conferences and special meetings on the premises.

In June, 1940, the County Council asked the County Nursing Association at very short notice to help them equip and staff a Maternity Unit for evacuated expectant mothers. In a matter of days this was done and the County Superintendent resided there and ran the home for six months.

The war went on ; the shortage of midwives in the county was acute and by 1943 there were 10 unstaffed districts, whilst the number of emergency nurses in the Home was down to seven. It was only by herculean efforts of all concerned, and the help of other district nursing associations in allowing their nurses to attend cases in adjacent districts, that the service was maintained : but it was maintained and a special word of thanks to the honorary secretaries and nurses for their co-operation and loyalty occurs in the County Superintendent's Annual Report.

In 1944, the Rushcliffe Committee Report was published, placing nurses' salaries on a national basis with substantial increases for district nurses attending, on a yearly average, more than 30 midwifery or maternity cases. The Council of the County Nursing Association adopted this report in full and the nursing associations also agreed to do so. There was an increased grant from the County Council to all nursing associations carrying out midwifery services but it meant an additional burden of expenditure both on headquarters and district nursing associations and another special appeal for funds was launched. This expenditure was later offset to some extent by the Ministry of Health grants towards Rushcliffe salaries.

No account of the County Nursing Association in the 1940s, however brief, should omit the Works Provident Scheme which, whilst it occasioned a vast amount of clerical work and personal appearances of the Secretary and Superintendent in business firms and collieries, provided a most valuable contribution to the Association's funds and left a goodwill which exists to the present day in the form of voluntary contributions.

This scheme, which was worked in conjunction with the Leicester District Nursing Association and with the co-operation of the local district associations was planned to provide every worker in the county and city with free nursing care by the payment of 1d. per week through his or her place of employment, the firms agreeing to make the necessary deductions. As many county dwellers worked in the city and some city dwellers in the county, the difficulties of apportioning the correct sums to each district might have been overwhelming had it not been for the kindness of the well-established Saturday Hospital Society which provided free hospital treatment for a penny a week contributions. The Saturday Hospital Fund agreed to allow the deduction for home nursing to be made with that of the Saturday Hospital Society, thereby greatly reducing the amount of clerical work in the firms concerned.

The scheme, which commenced in 1943, had a membership of over 25,000 county workers by 1948.

The Beveridge Report in 1942, which has been described as the most important single report in the social history of our country (Frazer—*A History of English Public Health*) laid down the pattern of the future Welfare State. The Chairman of the County Nursing Association, the Secretary and the Superintendent attended many meetings concerned with medical planning for the future, including a meeting convened by the Queen's Institute of District Nursing in Birmingham which resulted in the formation of the Midland District Co-ordination Committee. The Government White Paper on the National Health Service (1945) shewed that it intended Domiciliary Nursing to play an important part in the future nursing services and in 1945 the Queen's Institute convened a conference in London to consider the Ministry of Health's proposals for the future of the nursing service to which all associations were invited. The County Nursing Association decided at this time to include 10 more members of the District Nursing Associations on the Executive Committee so as to have the benefit of their practical experience at this important period of change.

In 1946 the National Health Service Act was passed to become effective from the 5th July, 1948. The President of the County Nursing Association in her Report for 1946-47 expressed the hope that the splendid service of the voluntary district nursing associations during many years would be recognised by the Local Authority and that use would be made of their experience in drawing up its plan for the new service which had to be submitted to the Ministry by 31st August that year (1947).

That the value of this work and experience was indeed realised and appreciated was shewn in December, 1947, when the County Council invited the County Nursing Association to act as its agent in providing a domiciliary midwifery and nursing service. The County Nursing Association agreed to do so with the help of its district nursing associations and a new chapter in its history began.

By the new Act, the County Council now became the Welfare Authority for the whole of its administrative area, the Maternity and Child Welfare functions of Loughborough Municipal Borough and Market Harborough Urban District Council being transferred to it.

The County Nursing Association in mid-1947 had 81 affiliated district nursing associations employing 81 district nurse/midwives and 15 district nurses only—these figures including the nurses on the Emergency Staff at the home. The County Nursing Association now became the direct employer of all these nurses and of the district nurse/midwife at Market Harborough. The County Council had 14 full-time midwives in its employ, including three at Loughborough. There was one unaffiliated district nursing association in the county employing a nurse/midwife and 50 independent midwives.

The County Council agreed to reimburse the County Nursing Association 95% for the cost of running the service, the remaining 5% to be found by the Association in order to preserve its voluntary status. This sum, at first a variable amount, was fixed at £1,400 per annum in 1953. It is raised by voluntary contributions as heretofore and by the County Council crediting the Association yearly with a sum representing the value of its assets—e.g. headquarters, cars and nurses' homes owned by the Association, etc.

District nursing associations lost their autonomy, they had no longer to pay affiliation fees nor were they responsible for any payment in connection with the service. They still have, however, an important part to play in the new service. The County Nursing Association has altered its constitution and each nursing association is entitled to have representation on its Council. Although they no longer make their appointments they are always invited to attend selection committees and are given notice of the illness or resignation of their nurse. They were allowed to retain any monies they had at the time of the change over, but guaranteed to pay a yearly contribution to the County Nursing Association. Some districts have handed over their assets, such as nurses' houses, in lieu of this contribution and others have placed their monies in the care of the County Nursing Association. A few district nursing associations have disbanded but the majority remain, although it is hard to replace members when they retire. They give valuable help to the headquarters staff in giving information generally about local conditions and in finding accommodation for nurses, and most of the associations have been extremely kind in providing furnishings and comforts for their nurses' houses.

The Works Provident Scheme was wound up when the Act came into force but many of the firms and collieries still give generous contributions to the funds.

It is now seven years since the Act came into force and we can discuss some of the changes that have taken place in that time. Housing for nurses, as has been mentioned earlier, has always been difficult but during the post-war years has become almost a nightmare worry to the administrative staff. The demand for domiciliary nurses all over the country greatly exceeds the supply and no advertisement for a vacancy meets with any response unless living accommodation is guaranteed; nor are lodgings acceptable, the home nurse, quite rightly, wanting a home of her own. The staff of relief nurses living at the headquarters nurses' home has gradually dwindled away, it being found impossible to recruit replacements, and the system of reliefs is now altered, nurses in adjoining areas relieving each other where possible and married nurses willing to do part-time relief work from their own homes being engaged when they can be found. The Loughborough District Nurses' Home, a beautifully appointed house presented to the County Nursing Association by the Loughborough District Nursing Association in 1948, had to be turned into self-contained flats before vacancies in that area could be filled. Local Housing Authorities are approached whenever possible and for the most part are extremely helpful, but they have their own long waiting lists. Some of the district nursing associations have given their funds towards buying a house for their nurse. The County Council has been able to purchase a house on one of the new housing estates at Kibworth and two older ones at Countesthorpe and Gilmorton and has itself built two houses for nurses, one at Kirby Muxloe and the other at Woodhouse Eaves. A third is planned at Market Harborough but the County Council's powers in this respect are very much restricted by present difficulties in capital expenditure. Although it is the aim of the County Nursing Association to provide a nurses' house in every district it is realised that this is a very long-term policy.

Interesting developments in the service include the training of all the domiciliary midwives in giving gas and air anaesthesia, commencing in the county in 1946 with the kind co-operation of the Matron of the Leicester Royal Maternity Hospital. Now, of course, this is part of routine training in midwifery but, from 1946-52, 90 county nursing association and county midwives received instruction at the hospital.

From 1948 male Queen's District Nurses have been on the staff and their services in heavy male cases is greatly appreciated.

In 1950 a new service was started for providing special equipment and nursing care to premature babies in their own homes. Nine County Nursing Association nurses have received special training in premature baby nursing, two at Newcastle-on-Tyne and seven at Sorrento Hospital, Birmingham, and are available in any area with special cots and equipment when requested.

The County Council has developed a very complete Home Help Service with preparation courses at which the County Nursing Association assists by allowing each trainee to visit homes with a nurse and to learn from her how she may be of assistance and also the technique of behaviour in a patient's house.

District nurses are now known as Home Nurses, although most of them prefer the old title. Their conditions of service have improved in many ways, especially in getting about their work as the majority now have cars which are either provided and serviced through the County Council or for which they receive a travelling allowance if privately owned. They have become eligible to take part in the Local Government Superannuation Scheme and the Whitley Council salaries award in 1953 has resulted in financial betterment. The discoveries of penicillin, the sulpha drugs and the antibiotics have enabled many interesting cases to be nursed at home which would otherwise have been removed to hospital and, since the use of streptomycin in the treatment of tuberculosis, they have given injections under the direction of the Chest Physicians and contributed to the remarkable advances made in the conquest of this disease.

On the midwifery side the position is perhaps less happy. The percentage of hospital deliveries is increasing and with the pressure on bed accommodation some hospitals are discharging patients to their own homes early on in the puerperium with the domiciliary midwife to visit. The entitlement of every expectant mother, since the Act, to have a doctor in attendance is admirable but sometimes very confusing to midwives, many of whom feel that they have lost status and are becoming maternity nurses only. This is a matter that is now under discussion.

It is not possible in this review to include every aspect of the service, but enough has been said, I think, to show what admirable work has been done by the combined efforts of devoted voluntary and professional personnel throughout the years ; and meanwhile the partnership between the County Council and County Nursing Association goes forward with the same idea with which it started, to give the best possible home nursing and midwifery care to the people living in the area.

In conclusion, I should like to express my gratitude for the help I have received from past and present members of the County Nursing Association and County Health Department staffs in compiling this review.

SECTION 26

Vaccination against Smallpox and Immunisation against Diphtheria

Vaccination against Smallpox

The following table shows the number of vaccinations carried out and is based on certificates received from general practitioners during the year. It is obvious from the very small number of children who have been vaccinated or re-vaccinated during the year that parents have little or no interest in having their children vaccinated against smallpox and it is only when there is an outbreak of smallpox in some part of the country that there is any increase in the number of children vaccinated.

Age at 31st December, 1955 i.e. born in the year	Under 1	1—	2 to 4	5 to 14	15 or over	Total
	1955	1954	1951-53	1941-50	Before 1941	
Number vaccinated ..	642	498	74	73	249	1,436
Number re-vaccinated ..	—	—	19	33	426	478

Immunisation against Diphtheria

Immunisation against diphtheria continues to be carried out by medical practitioners who send a record of each child immunised to this department.

There has been a decrease of 158 in the number of primary immunisations and also a corresponding decrease of 116 in the number of booster doses over the figures for 1954.

At the end of the year 72.68% of all children under the age of five years had completed a course of immunisation. Of the children between the ages of five and fifteen only 31.47 had completed a course.

It is also very pleasing to record that for the fifth year in succession there has been no confirmed case of diphtheria in the county.

SECTION 27

Ambulance Service

There have again been increases in the number of patients carried and the number of miles travelled by the county ambulance service. The table opposite gives the relevant statistics over the past five years and illustrates the ever-increasing demand on this service. This trend is not purely a local one but is national and it has led to the Minister of Health appealing to hospitals (who are the largest single users of the ambulance service) and to local authorities for greater economy in the use of ambulance transport.

The Hospital Car Service was used to a somewhat smaller extent in 1955 than in the previous year but even so 1,099 patients were carried and 19,068 miles were travelled.

Details of vehicles in use and staff employed at 31st December, 1955, are given below :

Vehicles :				Staff			
Ambulances (including three used for Civil Defence)	..	..	26	Driver/Attendants (including Head Drivers)	..	..	74
Transits	..	..	16	Attendant/Telephonists	..	..	2
Utilecons	..	..	2	Male Attendant	..	..	1
Sitting Case Cars	..	..	1	Female Attendants	..	..	4
Stores Van	..	..	1	Part-time Attendants (female)	..	..	5
Mortuary Van	..	..	1	Mechanics	..	..	5
			—				—
			47				91
			—				—

The ambulance service also undertakes the repair and maintenance of approximately 100 cars owned by the County Council (mainly nurses' cars) as well as dealing with its own vehicles.

Station	Patients carried					Miles travelled				
	Year 1951	Year 1952	Year 1953	Year 1954	Year 1955	Year 1951	Year 1952	Year 1953	Year 1954	Year 1955
5 Ireton Road, LEICESTER ..	18,741	21,515	20,039	31,360	26,030	246,920	231,127	260,112	273,703	230,296
Avenue Road, LEICESTER ..	14,058	17,184	16,269	16,007	18,170	122,212	113,549	104,287	112,563	135,445
Avenue Road, COALVILLE ..	9,817	14,863	17,195	18,685	20,674	112,662	122,876	132,746	129,894	139,643
Elizabeth Road, HINCKLEY ..	7,707	11,390	11,950	12,917	12,874	83,550	92,032	94,868	91,621	88,738
Forest Road, LOUGHBOROUGH ..	6,934	9,117	10,466	12,364	17,128	72,566	81,331	83,767	85,885	109,237
Leicester Road, LUTTERWORTH ..	3,624	4,119	3,798	4,813	4,561	47,731	43,886	38,169	38,596	40,993
St. Luke's, MARKET HARBOROUGH	5,618	6,668	8,368	8,549	8,484	65,331	67,314	73,747	78,779	78,836
War Memorial Hospital, MELTON MOWBRAY ..	4,364	6,417	6,492	7,222	7,328	54,509	71,935	77,469	86,088	78,643
Totals ..	70,863	91,273	103,577	111,917	115,249	805,481	824,050	865,165	897,129	901,551

SECTION 28

Prevention of Illness, Care and After-Care

After-Care of Patients Discharged from Hospital

Cases discharged from hospital who still require some nursing care are referred to the County Nursing Association ; other cases are dealt with mainly by the Health Visiting Staff.

Convalescent Home Treatment

During 1955 a total of 67 persons were sent to convalescent homes, all paying their own travelling expenses.

Details of the individual homes to which patients were sent are given below:

Hunstanton Convalescent Home	22
St. Josephs Convalescent Home, Southbourne	17
"Leconfield", Bonchurch, Isle of Wight	10
Charnwood Forest Convalescent Home, Woodhouse Eaves	4
Maitland House, Frinton-on-Sea	4
Rest Home for Mothers and Babies, Winterton House, Wendover	5
Overstrand Convalescent Home	2
Essex Convalescent Home, Clacton-on-Sea	1
Roecliffe Manor, Woodhouse Eaves	3
Victorian Convalescent Home for Women, Bognor Regis	1
Total	67

Diabetics

The Health Visitor specially appointed for the care of diabetics paid a total of 1,663 visits to such patients in the county and made 100 attendances at the Diabetic Clinic of the Royal Infirmary.

Health Education

The health education lectures, films and filmstrips have been continued throughout the year. As far as Infant Welfare Centres are concerned 63 centres have been visited with a total of 130 visits. Almost all centres have had at least one visit during the year, but the usual request has been for either monthly or quarterly visits. However, it has only been possible to do this for 10 centres. Visits to other organisations totalled 47. Below is a detailed list of the various organisations visited with the respective audiences :

	Visits	Audiences
Infant Welfare Centres	130	1,751
Ante-Natal Clinics	6	77
Home Help Training Courses	16	282
Schools	4	244
Student Health Visitors	4	27
Young Wives' Groups	4	92

Nursery School Staff	1	12
Nursery School Mothers' Club	1	15
Parent Teachers' Association	1	45
Clubs	4	166
Mothers' Union	2	35
Town Women's Guild	1	11
Women's Institutes	2	90
Youth Fellowship	1	14
Totals	177	2,861

The above figures relate only to the work of the special Health Visitor for Health Education and do not include talks given by other members of the Health Department.

Tuberculosis

The following is a list of Chest Clinics held in the county :

Hinckley ..	Hinckley and District Hospital	Mondays 10 a.m. and 2 p.m. Thursdays 10 a.m. and 2 p.m.
Leicester ..	194 London Road ..	Mondays 9.30 a.m. Tuesdays 9.30 a.m. and 2 p.m. Wednesdays 2 p.m. Thursdays 9.30 a.m. and 2 p.m. Fridays 9.30 a.m.
Loughborough ..	"Ashmount", Bridge Street	Mondays 9.30 a.m.
Markfield ..	The Sanatorium ..	Tuesdays 9.30 a.m. Wednesdays 2 p.m. Fridays 9.30 a.m. Saturdays 9.30 a.m.
Melton Mowbray	War Memorial Hospital	Tuesdays 10 a.m. and 2 p.m.

The following is the Joint Report of the County Medical Officer and Consultant Chest Physician :

	Year 1955	Year 1954	Average for pre- ceding ten years
Respiratory tuberculosis :			
Notifications	188	186	214
Deaths	36	55	93
Death-Rate	0.10	0.16	0.28
Non-respiratory tuberculosis :			
Notifications	27	56	65
Deaths	10	3	18
Death-Rate	0.03	0.008	0.05
Total for both respiratory and non-respiratory tuberculosis :			
Notifications	215	242	279
Deaths	46	58	111

T.B.1—Return showing the work of the Chest Clinics during the year 1955

	Respiratory				Non-respiratory			
	M.	F.	Ch.	Total	M.	F.	Ch.	Total
A. (1) Number of notified cases of T.B. on clinic registers on 1st JANUARY, 1955	773	658	79	1,510	111	110	146	367
(2) Transfers from clinics under other H.M.C.'s or B.G.'s during the year	49	57	4	110	4	2	—	6
(3) Children transferred to adults during the year	3	10	—	13	3	3	—	6
(4) Cases lost sight of which returned to clinic during the year	—	—	—	—	—	—	—	—
B. Number of NEW CASES diagnosed as tuberculous during the year :								
T.B. MINUS	39	36	21	96	5	5	5	15
T.B. PLUS	52	24	1	77	2	1	1	4
Totals of A and B	916	785	105	1,806	125	121	152	398
C. Number of cases in A and B written off clinic registers during the year :								
(1) Recovered	32	21	9	62	13	14	9	36
(2) Died (all causes)	27	12	—	39	1	2	—	3
(3) Removed to other H.M.C. or B.G. clinics	43	29	5	77	—	3	2	5
(4) Children transferred to adults during the year	—	—	13	13	—	—	6	6
(5) Other reasons	5	4	1	10	1	1	1	3
Totals of C	107	66	28	201	15	20	18	53
D. (1) Number of notified cases of T.B. on clinic registers on 31st DECEMBER, 1955	809	719	77	1,605	110	101	134	345
(2) Number of above known to have had positive sputum within preceding six months	83	35	1	119	—	—	—	—
E. (a) Total number of new cases (excluding transfers) examined during the year								
(b) Number of those in (a) who attended as Con-	1,270			1,028	921			3,219
tacts and who were :	4			5	9			18
(1) Diagnosed as tuberculous	239			300	501			1,040
(2) Not tuberculous	—			—	—			—
(3) Not determined (as at 31st December, 1955)	—			—	—			—

NOTES.—(1) "Children" means persons under the age of 15. When a case, first diagnosed and placed on the register as a child, reaches 15 it is transferred to the adult register, but is *not* counted as a new case.

(2) As a few cases attend from outside the County, the table does not show the exact position relating to Leicestershire.

T B 3 Tuberculosis (Domiciliary and Other) Notifications, Deaths and Death Rates

Year	Localisation	Number of Notifications			Number of Deaths			Death Rates		
		Urban	Rural	Whole County	Urban	Rural	Whole County	Urban	Rural	Whole County
1945 ..	Respiratory .. Other ..	109 28	108 39	217 67	59 16	52 16	111 32	0.41 0.11	0.32 0.10	0.36 0.10
1946 ..	Respiratory .. Other ..	94 35	91 51	185 86	48 19	52 12	100 31	0.32 0.13	0.31 0.07	0.31 0.10
1947 ..	Respiratory .. Other ..	130 40	100 35	230 75	72 16	52 10	124 26	0.47 0.10	0.30 0.06	0.38 0.08
1948 ..	Respiratory .. Other ..	87 34	99 44	186 78	69 9	50 14	119 23	0.43 0.06	0.28 0.08	0.35 0.07
1949 ..	Respiratory .. Other ..	131 21	108 34	239 55	58 9	61 6	119 15	0.36 0.06	0.34 0.03	0.35 0.04
1950 ..	Respiratory .. Other ..	113 26	103 21	216 47	41 5	46 6	87 11	0.25 0.03	0.25 0.03	0.25 0.03
1951 ..	Respiratory .. Other ..	135 21	110 36	245 57	49 3	37 6	86 9	0.30 0.02	0.20 0.03	0.25 0.03
1952 ..	Respiratory .. Other ..	109 21	121 43	230 64	37 7	33 7	70 14	0.23 0.04	0.18 0.04	0.20 0.04
1953 ..	Respiratory .. Other ..	109 27	92 41	201 68	25 —	32 8	57 8	0.15 0.00	0.17 0.04	0.16 0.02
1954 ..	Respiratory .. Other ..	91 19	95 37	186 56	35 2	20 1	55 3	0.21 0.01	0.11 0.005	0.16 0.008
Average for above ten years ..	Respiratory .. Other ..	111 27	103 38	214 65	49 9	44 9	93 18	0.32 0.06	0.24 0.05	0.28 0.05
1955 ..	Respiratory .. Other ..	97 17	91 10	188 27	20 4	16 6	36 10	0.12 0.02	0.08 0.03	0.10 0.03

T.B.3—Tuberculosis, Notifications and Deaths. Showing Age Periods, year 1955

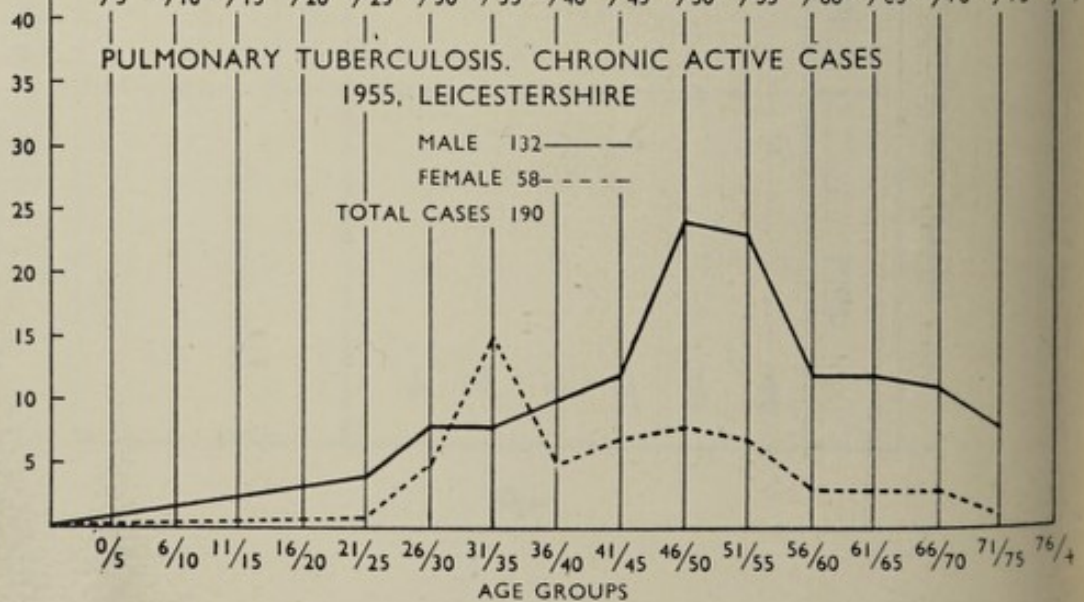
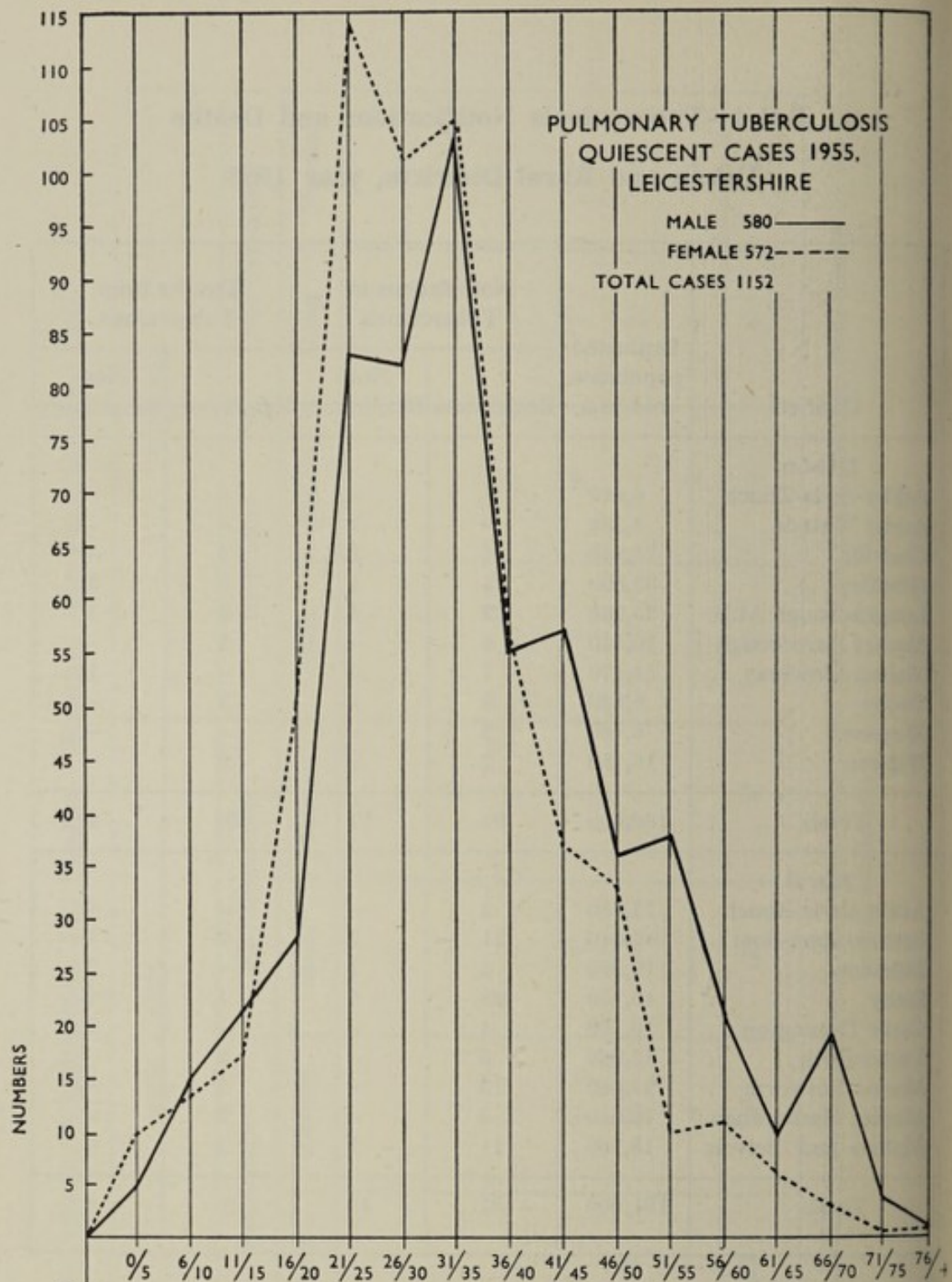
AGE PERIODS	NEW CASES				DEATHS			
	Respiratory		Non-Respiratory		Respiratory		Non-Respiratory	
	Males	Females	Males	Females	Males	Females	Males	Females
0—	—	—	—	—	—	—	—	—
1—	1	3	2	1 ¹	—	—	—	1
5—	7	12	6	1	—	—	—	—
15—	57	51	8 ¹	7	5	4	2	2
45—	33 ⁴	16 ¹	2 ²	— ¹	13	4	2	2
65—	7 ²	1	—	— ¹	8	2	—	1
Total ..	105 ⁶	83 ¹	18 ³	9 ³	26	10	4	6

NOTE.—The figures in small type show additional cases which came to the notice of the County M.O.H. other than by formal notification

T.B.4—Tuberculosis Notifications and Deaths

Urban and Rural Districts, year 1955

District	Estimated population mid-year	Notifications of Tuberculosis		Deaths from Tuberculosis	
		Respiratory	Non- Respiratory	Respiratory	Non- Respiratory
Urban					
Ashby-de-la-Zouch	6,610	—	—	—	—
Ashby Woulds ..	3,390	—	1	—	—
Coalville	25,840	16	1	2	—
Hinckley	39,800	24	4	5	2
Loughborough M.B.	35,960	32	6	6	1
Market Harborough	10,440	6	—	1	—
Melton Mowbray ..	14,470	7	2	—	1
Oadby	6,880	3	1	3	—
Shepshed	6,460	2	—	—	—
Wigston	16,750	7	2	3	—
Totals ..	166,600	97	17	20	4
Rural					
Ashby-de-la-Zouch	13,850	2	—	—	—
Barrow-upon-Soar ..	49,640	21	2	9	1
Billesdon	10,210	4	1	—	2
Blaby	40,150	28	6	1	2
Castle Donington ..	10,130	4	—	—	1
Lutterworth ..	12,060	5	—	2	—
Market Bosworth ..	27,060	13	—	1	—
Market Harborough	10,040	3	—	2	—
Melton and Belvoir	18,760	11	1	1	—
Totals ..	191,900	91	10	16	6



During the year 1955 the mortality from pulmonary tuberculosis decreased very significantly from 16 per 100,000 to 10 per 100,000, the number of deaths being 36 as compared with 55. This is very encouraging after the static position for the two previous years. The notifications of pulmonary tuberculosis remain virtually unaltered, being 188 against 186, and in the case of non-respiratory tuberculosis the notifications have decreased from 56 to 27, but there has been an increase in the deaths from 3 to 10. This is quite a large increase and is worth while investigating in more detail. Six of these cases were not known to us before death : of these, two had meningitis—one a baby less than two years of age—and the other a woman of 50 who developed tuberculous meningitis following a long-standing non-tuberculous debilitating condition ; two had spinal disease, aged 39 and 54 years respectively ; one had renal tuberculosis, aged 53 years, and one was certified as dying from secondary anaemia to glandular tuberculosis, aged 50 years. Of the remaining four cases, one had Addison's disease superimposed on long-standing renal tuberculosis, the second was a case of renal tuberculosis of nine years' duration ; the third was one of a tuberculous spine of 29 years' duration and the fourth a case of tuberculous meningitis who, five years previously, had had a right nephrectomy, subsequently developing miliary tuberculosis from which she made a complete recovery for two years, and then died of meningitis. This last case is rather unique because meningitis of this type was rarely seen, and recovery from miliary tuberculosis was unusual, until the advent of chemotherapy.

Once again we have investigated the problem of chronic cases in the county, and out of a total register of 1,628 cases of pulmonary tuberculosis there remained at 1st October, 1955, 190 cases which we considered should still be kept in this category, a decrease of 16 on the previous year. We have prepared graphs to show the age groups of our cases and they bear a very marked similarity to last year's table. Analyzing the chronic cases, out of a total of 190, 132 were male and 58 female—a ratio of 5 to 2. In the male by far the highest group was between the 45 to 60 years, and for women the peak was round the mid-thirties. (A factor which tends to add to our problem is the increase in the cases which have recently been transferred from Leicester City under rehousing schemes to new council estates which are just over the boundary into the County. This, of course, is inevitable in any large city's rehousing scheme ; 44 cases come into this category.) We find that 25 out of the 36 pulmonary deaths (26 men and 10 women) were known chronic active cases and this represents a very high proportion—i.e. 69% of the total. Of the other 11 deaths recorded during the year, two occurred within a few days of diagnosis and most of the remainder were elderly persons, some of whom were diagnosed post-mortem. It is perhaps worthy of note that only four deaths from pulmonary tuberculosis occurred in persons under the age of 35, and not one of these was under 25 years. We can now look forward to the day when no newly-diagnosed case of pulmonary tuberculosis will die. Of the

remaining number of 1,438 cases, 1,151 are quiescent and 287 non-quiescent, an increase of 127 cases in the number of those who are now quiescent, and 27 in the number considered non-quiescent. Looking at the graph of our quiescent cases, out of 1,152 the number in each sex is again almost identical—580 men and 572 women—with no difference according to age.

Chest Clinic Service

We have really little to add to our remarks of last year, when we indicated that the re-organisation of the Chest Clinic Service was now virtually complete. The additional accommodation at Markfield to accommodate the Coalville Chest Clinic is due to come into operation early in 1956, and it is hoped that the Loughborough Chest Clinic will be accommodated in the new Out-Patients' Department at Loughborough General Hospital towards the end of 1956. The trends noticed in the alteration of domiciliary treatment continue with a definite change of pattern: acceptance of long-term chemotherapy as an essential part of the treatment of pulmonary tuberculosis means that the vast majority of patients on discharge from sanatorium, even though apparently very fit, will continue to have chemotherapy for a very long period. The type of chemotherapy is a form which can be taken by mouth and will not involve so much the use of the District Nurse for the giving of injections as before. The absence of a waiting list for the sanatorium reduces the necessity of commencing treatment at home prior to admission—except where it is considered desirable purely on medical grounds. We would again like to pay tribute to the excellent work done by the District Nurses: we are grateful to them and to the County Nursing Association. Without their help so readily given during the past five years, whatever the demands on them, we could not have reached the present satisfactory situation.

Mass Radiography Unit

During the past year the M.R.U. visited Loughborough, Hinckley and Sileby, in addition to undertaking the annual X-raying of school-leavers, a total of 22,315 being X-rayed and 31 cases of active pulmonary tuberculosis being discovered. Of these, 23 were discovered in Loughborough where the rate was higher than average, being approximately 2 per 1,000 as against 1 per 1,000 for Hinckley. It must be noted that under the present M.R.U. X-ray, as far as the County is concerned, it is impossible for the M.R.U. to get round to give anything like a yearly cover. It is two and a half years since the Unit visited Loughborough and two years since it was in Hinckley. There is a place in Mass Radiography for a smaller type of Unit than the existing M.R.U., which could deal with office and business contacts, school-leavers—particularly those who are Mantoux positive—and supplement annually the existing chest clinic X-ray facilities in each town of the county.

Home Help Department

Once again we would like to express our thanks for the willing and excellent assistance given to us by the Home Help Department who, during the past year, have supplied us with 64 Home Helps in tuberculous households.

Prevention, Care and After-Care

The total number of new cases, both respiratory and non-respiratory, was 215 and from these cases 1,058 new contacts were examined for the first time, 18 of whom were found to be suffering from active pulmonary tuberculosis. All contacts under the age of 30 were tuberculin tested and 553 were found to be tuberculin negative and were given B.C.G. The method of tuberculin testing by Heaf Gun has been used entirely through the year 1955 and has been found a simple and accurate method of tuberculin sensitivity. The scheme of contact examination is being extended, with the patient's consent, to cover works and office contacts. This is most essential and is something which should be developed. We have good co-operation from any firm where a case of tuberculosis amongst their employees has been diagnosed, and it is now becoming an accepted thing that X-ray facilities should be available to anyone at work who has been in known contact with a case of tuberculosis.

The scheme for the X-raying of primiparae has been put into operation ; 1,209 were examined (representing rather more than half those eligible), but only one was found to have active tuberculosis. We continue to believe strongly in the necessity for giving convalescence to some of our long-standing patients, for the reasons outlined in the report of last year.

Rehabilitation

All new patients are advised to register under the Disabled Persons (Employment) Act, 1944, and so become entitled to preferential treatment in employment. The conditions under which a patient is working when first diagnosed are considered and any necessary investigations carried out, with his consent, if it is thought he may have been a source of infection to others. After recovery from illness, a change of occupation may be necessary : in suitable cases full advantage is taken of the excellent facilities provided by the Ministry of Labour Training Centre at Humberstone Lane. When a school-child is confined to his house for prolonged periods, it is essential that his education be continued, and the Director of Education has been most helpful in arranging home teaching.

Almoner's Department

The County Almoner is very firmly established as an essential part of the Chest Service. Her association with the health visitors is very happy and the co-operation of Health Visitor and Almoner results in an adequate management of the patients' social problems. We are still unsuccessful in our attempts

to obtain a second Almoner, but the need for such an appointment is still present.

After-Care Committee

The After-Care Committee is still functioning sympathetically and happily and is becoming more widely known throughout the County. Once again we would like to express our appreciation of the work done by the various groups of the Friends of Markfield and the very generous support they give to the After-Care Funds.

B.C.G. Vaccination of School Leavers

Towards the end of 1954 a start was made with the vaccination of school leavers, and in 1955 the scheme was extended, as will be seen from the figures given below. It is hoped that in 1956 all eligible children will be offered vaccination and that the proportion of parents giving their consent will increase.

No complications of any importance were reported, and the scheme worked very smoothly, thanks to no small extent to the co-operation of the school teachers. No unusual distribution of positive tuberculin results was observed during the year.

	Total Number of School Leavers	Number of Consents given	Number given Tuberculin	Number positive	Number negative	Number B.C.G. vaccinated
1954	409	243 (59%)	234	105 (46%)	126 (54%)	126
1955	1,759	1,074 (61%)	1,037	357 (34%)	656 (66%)	654

Future Development

The future of the Chest Service, with particular reference to the eradication of tuberculosis, is something which gives everyone plenty of food for thought, and the prospect of eradication may be nearer than we anticipate : certainly the means are there, if they can be applied. B.C.G. vaccination of school leavers will reduce the incidence of pulmonary tuberculosis, but in industry there must be employed a large number of adolescents who are tuberculin negative and who have entered industry before the facilities for B.C.G. for school-leavers were available to them. The efficacy of B.C.G. (in which so many of us believed) has finally been confirmed by the report of the Medical Research Council B.C.G. Trial. They have found that the incidence of

pulmonary tuberculosis was five times as great in those who, having been found tuberculin negative, were not vaccinated with B.C.G., as compared with those who, when found to be tuberculin negative, were vaccinated with B.C.G. This report does not present a challenge as to the advisability of an attempt being made—particularly in industrialized areas—to determine the tuberculin state of persons under the age of 30, with a view to vaccinating the negative reactors with B.C.G. It would be an enormous task, but one which it might be proper for the Chest Service to consider in certain areas.

Reference was made in our last report to a Pilot Survey to assess the value of tuberculin testing of all five-year-old school entrants, with a view to following up contacts of positive cases. This survey, though small, did not appear to justify a further extension of the scheme at the moment because it is so time-consuming in a County Area. It is perhaps better at the moment to concentrate on establishing B.C.G. vaccination for school-leavers, without closing our minds to the possibility of including the tuberculin testing of five-year-old school entrants as a routine.

SECTION 29

Domestic Help Service

The work of this service was dealt with at some length in last year's report and it is only necessary to give this year's figures along with those for 1954. These figures show the ever-increasing amount of work done by the home help for the chronic sick and old people.

	1955	1954
Full-time Home Helps	71	84
Part-time Home Helps	365	333
Number of hours completed :		
On duty	479,422	431,714
Travelling time		24,530
Cases Assisted :		
Maternity	606	574
General Illness	446	597
Chronic sick	391	165
Tubercular : Infectious	31	74
Non-infectious	33	
Old age, illness and infirmity	881	783
Other (emergencies)	10	23
Problem families	8	—
Night help	7	12
Number of preparation courses held	5	4
Number of home helps attending such courses	78	63
Number of home helps who passed course ..	78	60

SECTION 51

Mental Health Service

Mental Illness

During the year 95 males and 120 females were removed to Mental Hospitals under Sections 16 and 20 of the Lunacy Acts.

The scheme mentioned in my report of last year about the division of the County into five areas has proved very satisfactory. Reports from each area confirm the advantages of an officer being responsible for one particular district, thereby enabling him or her to be personally acquainted with the area and the people resident therein. It would be impossible to convey the volume and exact nature of the work undertaken by the Mental Health Officers in print as a great deal of their time is given, apart from their statutory duties, in help and guidance to patients and their relatives in advising on problems created by mental strain and stress.

I am pleased to report that during the year the use of Section 20 of the Lunacy Act (Duly Authorised Officers Three-day Order) has proved helpful. The use of this Order to allow patients to be taken into hospital for a period of observation has resulted in over 40% of the patients who go in under this section remaining in hospital on a voluntary basis. Many of these patients are aged people and I am still concerned about the number of old people who have to be removed to the Mental Hospital for care, and look forward to the time when separate establishments for this class of patient are provided in this area.

The liaison between the Mental Health Officers and the hospital staff remains good and it is hoped that a scheme for further development of after-care may soon be in operation.

Mental Deficiency

Statistics relating to Mental Defectives as at 31st December, 1955, are given below :

Under Institutional Care	..	..	..	..	441
Under Guardianship	..	..	..	..	23
Under "Place of Safety"	..	..	..	..	1
Under Statutory Supervision	..	..	..	..	453
Under Voluntary Supervision	..	..	..	..	30
*Under training at Occupation Centre or at home	..	..	..	..	174

Cases waiting Institutional Care :

Males over 16	..	25	Females over 16	..	20
Males under 16	..	19	Females under 16	..	6

*The figure in the report of 1954 should have been 135 not 185 as printed.

The difficulty in securing hospital accommodation for low-grade patients is causing considerable concern to the Local Authority and a great deal of hardship to their relatives. In many cases the demands on the patience and care of the patients results in a breakdown in the health of the mother before a vacancy can be found for the patient.

Occupation Centres

The five Occupation centres continued to expand, the numbers on the registers having increased by more than 25%, from 121 to 157 during the year. This large increase was mainly through the extension of the transport scheme to bring in patients from Market Harborough to the Wigston Centre, and from Ashby-de-la-Zouch and intermediate villages to the Coalville Centre. The transport scheme now practically covers the County where need exists. Only isolated cases in the extreme North and South remain outside the scheme.

It is noticeable that at all centres there has been a steady stream of entrants, due to the increased readiness of parents to give their children an opportunity of being trained. The increased numbers are creating difficulties at some of the centres as the rented premises do not possess sufficient toilet accommodation, space for open-air recreation or rooms for adequate grouping, particularly of adult patients.

Eleven patients in the Melton Mowbray area continue to benefit by the Home Training Scheme.

History was made during 1955, when for the first time all County and City Centre patients and staff were congregated together on the occasion of the Sports Day at Glenfrith Hospital by the kind invitation of Leicester No. 3 Hospital Management Committee. The event was a great success, and I am informed that it is likely to be repeated.

It is hoped that at some future date an arrangement will be made for the adult defectives to receive some type of industrial training. Coupled with a residential hostel it might eventually allow defectives to take part in normal employment. A large proportion of children leaving school who are educationally sub-normal suffer from a mild behaviour defect, and hostel training might help them with guidance on their financial and social problems. A number of educationally sub-normal children have either no home or the home is found to be unsuitable.

NOTIFICATION OF BIRTHS

(Public Health Act, 1936—Section 203)

Births are usually notified by the midwives in attendance at the confinements although liaison is maintained with the Registrars of Births in order to

discover any births that have not been notified or not registered within the time limits laid down by statute.

Births that may need special supervision or report, i.e. premature births and illegitimate births, are referred to the Health Visiting Staff for their attention.

The following table is a summary of births recorded during 1955 :

	Live Births		Stillbirths		Total
	Dom.	Inst.	Dom.	Inst.	
Total occurring in Leicestershire	2,204	1,689	30	29	3,952
Births occurring in Leicestershire					
"Transferred Out"	7	209	—	2	218
	2,197	1,480	30	27	3,734
Births occurring outside Leicestershire					
"Transferred In"	12	1,638	—	54	1,704
Net Leicestershire Births ..	2,209	3,118	30	81	5,438

There has been yet another fall in the number of domiciliary confinements. It should be remembered that in 1938 the proportion of domiciliary to institutional confinements was three to one ; today for every two children born at home three are born in hospital. The relevant statistics for 1938, 1954 and 1955 are :

	Domiciliary Births		Institutional Births	
1938	3,181	- 75.3%	1,047	- 24.7%
1954	2,265	- 42.5%	3,065	- 57.5%
1955	2,239	- 41.2%	3,199	- 58.8%

REGISTRATION OF NURSING HOMES

(Public Health Act 1936—Sections 187-194)

All nursing homes, registered as such by the County Council, are inspected from time to time by the department's medical officers and also by the non-medical supervisors of midwives employed by the Leicestershire County Nursing Association.

One nursing home, that at Newton Burgoland, with one maternity bed, was closed in May, 1955. Early in 1955, Group Captain Cheshire, v.c., intimated that he intended to purchase Staunton Harold Hall, a Georgian mansion which had been the seat of the Ferrers family for many years, and convert it into a nursing home for the chronic sick. As the house was in a very delapi-

dated state of repair it was not until November, 1955, that it was possible to register it as a nursing home to accommodate seven patients. By the end of the year a great many improvements had been made and permission was granted for a total of 11 patients to be admitted.

Nursing homes that were still registered at the end of the year are given below :

Address	Number of beds		
	Maternity	General	Total
"Glencoe", 25 London Road, Coalville.. ..	8	—	8
The Loughborough Nursing Home Ltd., Radmoor Road, Loughborough	5	5	10
"Roundhill", Syston Road, Thurmaston ..	12	—	12
Rothley Temple Nursing Home, Rothley ..	—	20	20
Cheshire Foundation Home, Staunton Harold Hall	—	11	11
Walberton Rest and Convalescent Home, Stamford Road, Kirby Muxloe	—	33	33
Totals	25	69	94

NATIONAL ASSISTANCE ACT, 1948

The County Council has already received approval from the Ministry of Health in respect of schemes made under Section 29 of the above Act for promoting the welfare of the majority of persons who are afflicted by some form or other of physical handicap. At the present time these schemes are being implemented by making as full use as is possible of the many voluntary organisations.

THE ROYAL LEICESTER, LEICESTERSHIRE AND RUTLAND INSTITUTE FOR THE BLIND

I am indebted to Mr. E. J. Venn, Secretary to the Blind Institution, for the following report on welfare for the blind.

"The year has been one of steady progress in the work of the Institution. The new services inaugurated last year have become part of the pattern of local blind welfare work. Prebend House became fully operative during the year as a centre for the recreation, informal education and social rehabilitation of the blind under the guidance of a full-time organiser and assistant. A modern central heating system has been installed and the centre is very comfortably furnished and is provided with a well-equipped stage. The opportunities afforded by the centre, as detailed last year, are much appreciated by the blind folk and the Institution is most satisfied with the progress

of this new venture. The other new service—the provision of talking books—continues to grow.

Registration

On the 31st December, 1955, there were 705 blind people on the county register compared with 684 the previous year. The partially-sighted register also similarly increased from 74 to 89. The number of newly-registered blind people during the year was 119 and the number of newly-registered partially-sighted persons was 26.

The following table shows the position so far as following-up the recommendations of the Ophthalmic Surgeons in respect of cases registered during the year are concerned :

Follow-up of Registered Blind and Partially-Sighted Persons

	<i>Cause of Disability</i>			
	<i>Cataract</i>	<i>Glaucoma</i>	<i>Retrolental Fibroplasia</i>	<i>Others</i>
(i) Number of cases registered during the year, in respect of which Section F of Form B.D.8 recommends :				
(a) No Treatment	27	16	1	57
(b) Treatment (Medical, Surgical or Optical)	25	10	—	9
(ii) Number of cases at (i) (b) above, which on follow-up action have received treatment ..	11	9	—	9
NOTE : Cases at (i) (a) above which have received hospital supervision, as recommended on Form B.D.8 (Revised)	6	8	—	8

Social Welfare

The Home Teaching Service has continued its good work and our social and welfare work in general has continued in the same pattern. The summer holiday scheme was again very successful, and the scheme which has operated for the past few years, giving blind people a wide choice of resorts, has much to commend it over the perhaps more normal permanent holiday home.

Employment

Full employment of the blind has been maintained both in the worksnops (where sales have again increased), in the Home Workers' Scheme and in

open industry. As at the 31st March, 1956, 28 county blind people were engaged in the workshops, one less than last year, but an increase is shown so far as blind people engaged in open industry are concerned, where the number has risen from 39 to 45 at present.

The rehabilitation and training schemes and the placements service for open industry have co-ordinated together and no real difficulties were experienced during the year in finding suitable employment in open industry.

Special reference must be made to the promotion by the Institution of the use of an audible comparator for operation by two blind people at Loughborough. The comparator enables the blind operators to segregate components into oversize, correct and undersize groups working to 1/1,000th of an inch. The operators carry out the classifications by listening for a ring or one of two distinct buzzes. The introduction of this new instrument will widen the scope for the employment of blind people in inspection work in the engineering industry and enables the blind to carry out the work equally as well as the sighted.

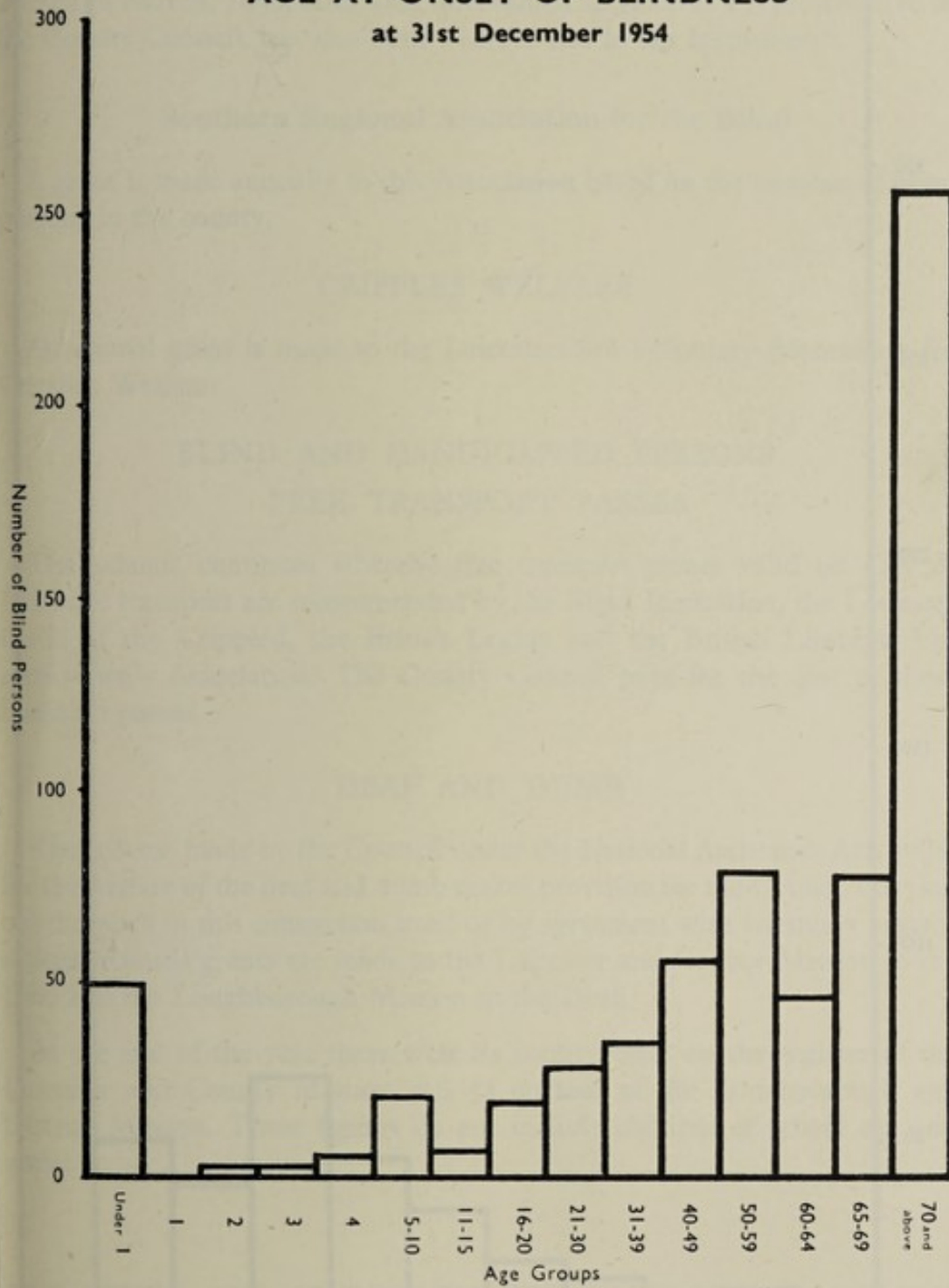
Workshops

At the workshops, following recommendations from the Local Authorities' Advisory Committee and consideration by the Local Joint Consultative Committee for the Welfare of the Blind, new and higher standards have been adopted for new entrants to the workshops. The Local Joint Consultative Committee also during the year investigated the desirability of introducing a new incentive bonus scheme into the workshops and, in fact, a new scheme, based on current standards for admission to the workshops, became operative with effect from the 1st January, 1956.

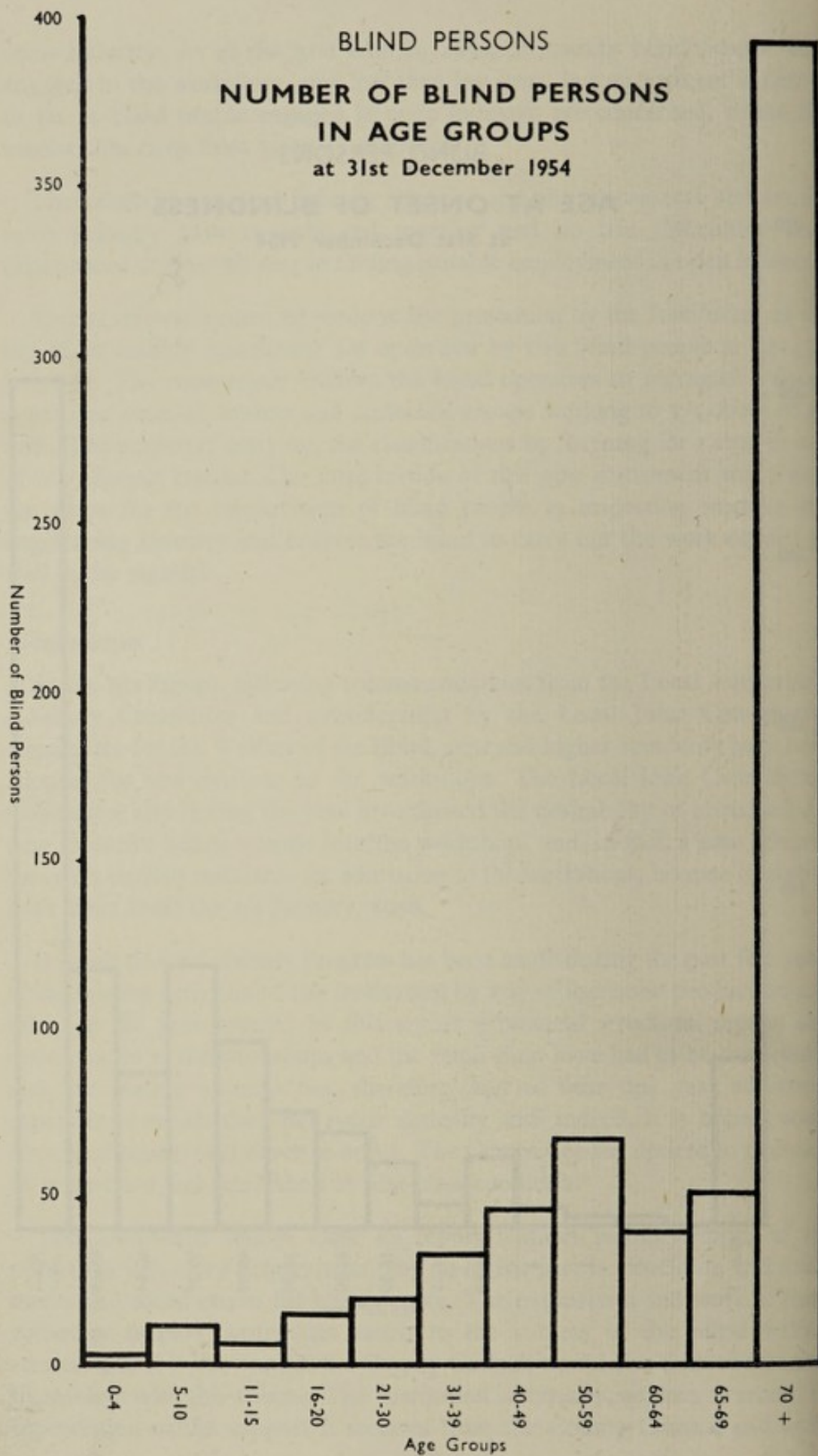
It is felt that satisfactory progress has been made during the past few years in the trading activities of the Institution by way of increased production and sales. In the year covered by this report substantial structural repairs and maintenance at the workshops and the retail shop have had to be carried out and the trading account has, therefore, had to bear this year additional expenditure which does not occur annually and, indeed, it is hoped, some structural repairs will never re-occur. The Committee has desired to maintain its workshops and retail shop in first-class condition.

The Institution cannot close its report without paying tribute to the numerous voluntary helpers who play an active part in providing entertainments and social events for blind people. The enthusiasm and work of these voluntary helpers contributes much to the success of the blind welfare services and it is known that the County Council would also wish to associate themselves with this tribute. The Institution is, equally, anxious to record its appreciation of the support it receives from the County Council and again

BLIND PERSONS
AGE AT ONSET OF BLINDNESS
at 31st December 1954



BLIND PERSONS
NUMBER OF BLIND PERSONS
IN AGE GROUPS
at 31st December 1954



expresses its pleasure at the harmonious relationship and mutual confidence existing between the County Council and the Institution. It was with sincere regret that the Committee heard that Alderman G. H. Mawby had decided not to seek re-election after many years' valuable service as one of the County Council's representatives on the Institution. The death of Alderman J. T. Forsell in March, 1956, after long and valued services as a representative of the County Council, has also been a severe loss to the Institution".

Southern Regional Association for the Blind

A grant is made annually to this Association based on the number of blind persons in the county.

CRIPPLES WELFARE

An annual grant is made to the Leicestershire Voluntary Association for Cripples Welfare.

BLIND AND HANDICAPPED PERSONS

FREE TRANSPORT PASSES

The scheme continues whereby free transport passes valid on City of Leicester transport are recommended by the Blind Institution, the Leicester Guild of the Crippled, the British Legion and the British Limbless Ex-servicemen's Association. The County Council pays for the cost of these transport passes.

DEAF AND DUMB

The scheme made by the Council under the National Assistance Act, 1948, for the welfare of the deaf and dumb makes provision for the Council carrying out the work in this connection itself or by agreement with voluntary organisations. Annual grants are made to the Leicester and County Mission to the Deaf and the Loughborough Mission to the Deaf.

At the end of the year there were 84 county cases on the register of the Leicester and County Mission and 54 on that of the Loughborough and District Mission. These figures do not include children of school age and under.

NURSERIES AND CHILD MINDERS REGULATION ACT, 1948

At the 31st December, 1955, there were five persons registered as daily minders and 24 children were provided for.

NOTIFICATIONS OF INFECTIOUS DISEASES

The prevalence of infectious disease, with the exception of measles, has remained favourable throughout the county. Details of cases of infectious disease notified during 1955 are given in the following tables :

Table I—Original and corrected notifications

Disease	Total cases (original notifications)	Total cases (corrected notifications)
Scarlet Fever	208	208
Whooping Cough	806	803
Acute Poliomyelitis : paralytic	9	6
non-paralytic	5	3
Measles	7,475	7,474
Diphtheria	—	—
Acute Pneumonia	307	306
Dysentery	369	345
Smallpox	—	—
Acute Encephalitis : infective	—	—
post-infectious	1	1
Enteric or Typhoid Fever	—	—
Paratyphoid Fevers	4	4
Erysipelas	36	36
Meningococcal Infections	6	6
Food Poisoning	45	23
Puerperal Pyrexia	13	12
Ophthalmia Neonatorum	1	1
Malaria	1	1

Table II—Corrected notifications in age groups

Disease	Age groups (years)							Age unknown	Totals
	0—	1—	3—	5—	10—	15—	25 and over		
Scarlet Fever ..	1	29	44	121	15	3	3	1	208
Whooping Cough	47	187	234	315	11	4	4	1	803
Acute Poliomyelitis : Paralytic	1	1	—	3	—	—	1	—	6
Non-paralytic	—	—	—	2	—	—	1	—	3
Measles ..	148	1,381	1,805	3,880	186	26	30	18	7,474
Diphtheria ..	—	—	—	—	—	—	—	—	—

Table II—Corrected notifications in age groups—*continued*

Disease	Age groups (years)						Totals
	0–	5–	15–	45–	65 and over	Age unknown	
Acute Pneumonia ..	37	23	59	95	90	2	306
Dysentery	77	157	72	19	9	11	345
Smallpox	–	–	–	–	–	–	–
Acute Encephalitis :							
Infective	–	–	–	–	–	–	–
Post-infectious ..	1	–	–	–	–	–	1
Enteric or Typhoid							
Fever	–	–	–	–	–	–	–
Paratyphoid Fevers ..	–	2	–	2	–	–	4
Erysipelas	1	2	9	15	9	–	36
Meningococcal Infections	5	–	–	1	–	–	6
Food Poisoning ..	4	7	9	3	–	–	23

Disease	Age group not stated
Puerperal Pyrexia	12
Ophthalmia Neonatorum ..	1
Malaria	1

Details of Scarlet Fever, Whooping Cough, Measles, Diphtheria and Acute Poliomyelitis are given in the following year-to-year records. The figures for 1955 compare favourably with previous years except in the case of measles notifications which were very high indeed, and scarlet fever notifications after remaining steady for the last ten years or so suddenly dropped by half.

Scarlet Fever

Year	Notifications	Year	Notifications
1946	544	1951	305
1947	447	1952	468
1948	585	1953	492
1949	444	1954	420
1950	529	1955	208

Whooping Cough

Year	Notifications	Deaths
1946	1,027	8
1947	718	9
1948	1,701	6
1949	1,158	7
1950	1,232	1
1951	1,732	3
1952	1,047	3
1953	1,220	—
1954	1,049	3
1955	803	—

Measles

Year	Notifications	Deaths
1946	632	—
1947	4,818	9
1948	4,013	1
1949	3,096	3
1950	4,056	3
1951	4,632	—
1952	1,902	—
1953	6,165	—
1954	729	—
1955	7,474	3

This is the highest number of cases of measles ever recorded since this disease became notifiable in 1939.

Diphtheria

Year	Original notifications	Corrected notifications	Deaths
1901	247	—	53
1911	306	—	28
1921	404	—	28
1931	166	—	12
1941	605	—	3
1942	459	—	27
1943	144	—	7
1944	89	61	3
1945	84	63	7
1946	59	34	—
1947	32	13	1
1948	20	7	1
1949	15	3	1
1950	15	2	—
1951	5	—	—
1952	8	—	1
1953	6	—	—
1954	1	—	—
1955	—	—	—

Acute Poliomyelitis

Year	Original notifications		Corrected notifications		Deaths (poliomyelitis and polio- encephalitis)
	Paralytic	Non-paralytic	Paralytic	Non-paralytic	
1946	1		1		—
1947	31		23		2
1948	15		9		1
1949	66		62		10
1950	46	14	41	10	8
1951	20	5	17	3	—
1952	13	3	11	2	—
1953	28	12	31	11	3
1954	9	1	7	—	—
1955	9	6	5	3	1

SANITARY CIRCUMSTANCES OF THE AREA

For the particulars given in this section of the report and also those under Housing and the Inspection and Supervision of Food, I am grateful to Mr. S. A. Gregory, the County Sanitary Officer.

WATER SUPPLY

The following rainfall figures were recorded at the Wigston Urban District Council's Sewage Farm, Countesthorpe, and I am indebted to Mr. Gordon J. Wooton, M.I.Mun.E., M.R.S.H., Engineer and Surveyor to the Wigston Urban District Council, who kindly supplied the figures :

Rainfall in 1955

Rain Gauge .. Diameter of funnel .. 8 in.
 Height of top above ground .. 6 in.
 Height of ground above sea level .. 259 ft.

Month	Total depth	Greatest fall in 24 hours		No. of days with .01 in. or more	No. of days with .04 in. or more
	Inches	Inches	Date		
January ..	1.69	.40	10	16	10
February ..	1.61	.39	4	16	12
March ..	2.39	.72	25/26	11	8
April ..	.95	.35	28	9	8
May ..	3.53	1.11	17	22	18
June ..	3.24	.99	7	11	10
July ..	1.09	.69	17	4	3
August ..	1.34	.41	2	10	6
September ..	1.13	.34	22	11	6
October ..	1.48	.49	5	11	8
November ..	1.15	.39	6	10	7
December ..	2.51	.70	11	20	15
Total ..	22.11	—	—	151	111

The rainfall for the year was below the average for the preceding ten years (26.05 inches) and unless there are heavy falls in the early months of next year the parts of the county without mains supplies will probably suffer from water shortages.

The following are the rainfall figures for the last ten years:

Year	Rainfall in inches			
1946 ..	..	..	..	30.69
1947 ..	..	..	..	20.44

1948	..	..	..	29.34
1949	..	..	..	26.22
1950	..	..	..	25.15
1951	..	..	..	30.13
1952	..	..	..	25.64
1953	..	..	..	21.82
1954	..	..	..	29.18
1955	..	..	..	22.11

There were no complaints concerning the bacteriological standard of mains water and the unsatisfactory results recorded in the table below relate to surface wells and raw water before treatment. In one district there were complaints of small live worms in the water and upon investigation it was found that the offending creatures were the larvae of the common midge which were evidently breeding in an uncovered storage reservoir. The raw water from a bore was filtered and chlorinated before passing to the storage reservoir from whence it was delivered to the distribution mains without further treatment. Repeated samples of water from this source proved to be bacteriologically satisfactory but householders did not view livestock in their water supplies with enthusiasm.

District	Satisfactory		Unsatisfactory	
	Chemical	Bacterio-logical	Chemical	Bacterio-logical
Urban Districts				
Ashby-de-la-Zouch	—	—	—	—
Ashby Woulds ..	—	—	—	—
Coalville ..	—	—	—	1
Hinckley ..	—	3	—	3
Loughborough M.B.	—	—	—	—
Market Harborough	—	3	—	—
Melton Mowbray..	—	—	—	—
Oadby	—	—	—	—
Shepshed ..	—	—	—	—
Wigston ..	—	—	—	—
Rural Districts				
Ashby-de-la-Zouch	—	2	—	9
Barrow-upon-Soar	—	5	—	5
Billesdon ..	—	6	1	11
Blaby	3	3	—	5
Castle Donington..	—	—	—	1
Lutterworth ..	—	4	—	13
Market Bosworth..	2	6	3	12
Market Harborough	—	1	—	3
Melton and Belvoir	7	7	14	14
Totals ..	12	40	18	77

Of 112,876 houses in the county, 101,904 have internal mains water supply, 1,873 are supplied by stand-pipes from mains supplies and 9,099 rely on wells.

In the Urban Districts restrictions were imposed at Ashby Woulds; Hinckley and Melton had difficulty in maintaining a constant supply, and the same applied at Shepshed in the higher parts of the district. Wigston experienced some shortages in parts of the district during peak consumption periods.

The position in the Rural Districts was much the same as in previous years. There were local shortages in the Billesdon area and water was carted when necessary. Outlying farms and North Kilworth in the Lutterworth district were short of water but the situation should ease when the mains supply from Husbands Bosworth is available. There were reduced pressures in the pumping mains of Outside Water Undertakings in Market Bosworth district, and water was carted to supplement well supplies. Supplies were inadequate in parts of Market Harborough Rural District and 27,300 gallons of water were carted to Husbands Bosworth, Great Easton and Stonton Wyville. In the Melton and Belvoir district mains supplies were curtailed at Long Clawson, Hose, Harby, Burton Lazars and Thorpe Arnold. There were shortages with well supplies at Waltham, Frisby-on-the-Wreake, Great Dalby, Kirby Bellars and Thorpe Satchville to relieve which, water was carted by the Council.

Mains extensions were laid by all district councils to cover new housing development and also to improve the supply in some cases.

The new bore holes and pumps at Holly Hayes in the Coalville Urban District were commissioned in November and are now in continuous operation. The central filtration and treatment scheme and the three new wells for the Market Harborough Urban District scheme were completed and should come into early operation. Work proceeded on the new service reservoir and pumping station in the Shepshed Urban District.

Barrow Rural District Council have completed their post-war schemes for mains water supplies and with the exception of two small parishes the whole of their area is now covered.

In Castle Donington Rural District a new 3 in. main was laid in Hemington Lane to supply houses with polluted supplies.

Lutterworth Rural District : New mains from Walcote to South Kilworth, Peatling Parva to Gilmorton, Knaptoft Reservoir to Bruntingthorpe Airfield. New storage reservoir at Knaptoft (500,000 gallons) completed.

Market Bosworth Rural District : Southern Area scheme almost completed and with a further extension to Orton-on-the-Hill all the parishes will have mains water supply.

Market Harborough Rural District : Mains laid at Mowsley, Gumley and

Laughton, and will be supplied from the new Knaptoft reservoir. Mains proceeding for Husbands Bosworth and Great Easton.

Melton and Belvoir Rural District : Water mains laid at Hose and Harby, Wycomb and Chadwell, and Burrough and Pickwell. The Redmile, Barkestone and Plungar scheme was nearing completion at the end of the year.

The bulk of the work which can be carried out in the county without waiting for the new supply from the River Dove has now been completed.

	Urban districts	Rural districts
Piped supplies substituted for well supplies ..	6	498
Wells closed	4	42
Wells cleansed, repaired, etc. .. .	4	17

River Dove Water Board

The River Dove Water Board Order, 1955, was made on 1st July and became operative on 12th August. Prior to this a Managing Committee had been set up to enable preliminary action to be taken so that delays would be avoided and water obtained at the earliest possible date.

The Constitution of the Board is laid down in the Order as follows :

Eight members to be elected by the Leicester Corporation

Two members to be elected by the Loughborough Corporation

Three members to be elected by the Urban Authorities

Two members to be elected by the Rural Authorities

One member to be elected by the County Council

The annual quantity of water which is authorised for abstraction is given in the order as five thousand, two hundred million gallons and certain conditions as to abstraction are laid down depending on the measured flow of the River Dove.

After so many delays it is pleasing to be able to report that progress is being made towards obtaining the additional water supplies that are urgently needed by the Constituent Authorities. Owing to the steadily increasing demands, both domestic and industrial, it will be necessary for economy to be exercised for several years in many parts of the county. There is no need to stress the importance of not wasting water to rural inhabitants, but town-folk need to be reminded that a constant wholesome water supply is a valuable and necessary asset to our way of life and should not be wasted unnecessarily.

SEWERAGE AND SEWAGE DISPOSAL

Good progress was made during the year with schemes of sewerage and sewage disposal and the district councils recognise the need for sewerage to follow the provision of mains water at the earliest possible date. In spite of continued labour problems, pail closets throughout the county are mostly emptied weekly with disposal to agricultural land, sewers or treatment works. The following is a summary of work in progress or completed during the year :

Ashby-de-la-Zouch Urban District

New Packington Sewerage Scheme commenced.

Ashby Woulds Urban District

Improvement work on sewers and disposal works where affected by mining subsidence.

Coalville Urban District

Main drainage scheme, Northern Outfall

First contract comprising 30 in.—18 in. diameter sewer from Snarrows to Whitwick almost completed. Second contract from Whitwick to Greenhill Road completed. Nine inch diameter pumping main from Bardon Road to Northfield Drive completed.

Hinckley Urban District

Main Sketchley Works extensions completed.

Small works at Burbage overhauled.

Loughborough Municipal Borough

Reconstruction of main sewage disposal works 90% completed at end of year.

Oadby Urban District

New 18 in. diameter relief sewer laid.

Ashby-de-la-Zouch Rural District

Appleby Magna scheme being carried out.

Worthington scheme being carried out.

Heather scheme completed.

Barrow-upon-Soar Rural District

Birstall and Wanlip scheme completed.

Billesdon Rural District

Scraptoft, Thurnby and Bushby scheme completed.

Stoughton scheme proceeding.

Billesdon scheme proceeding.

Tilton-on-the-Hill scheme proceeding.

Blaby Rural District

Blaby and Whetstone. Work of reconstructing and extending works well advanced.

Braunstone. New sludge drying beds completed.

Enderby. Reconstruction works well advanced.

Kilby. Scheme completed.

Thurlaston. Scheme proceeding.

Castle Donington Rural District

Breedon-on-the-Hill and Tonge scheme proceeding.

Castle Donington sewage works—reconstruction commenced.

Lutterworth Rural District

Claybrooke and Ullesthorpe scheme in progress.

Market Bosworth Rural District

Bagworth, Battram and Thornton scheme completed.

Desford and Ratby reconstruction of works commenced.

Nailstone scheme completed.

RURAL WATER SUPPLIES AND SEWERAGE ACTS, 1944-1955

The following schemes have been submitted with application for grant aid under these Acts during the year :

Sewerage and Sewage Disposal		Estimated
Local Authority	Parishes and Areas affected	cost £
Market Bosworth R.D.C. . .	Fenny Drayton	11,430
Blaby R.D.C.	Elmesthorpe	11,000
Market Bosworth R.D.C. . .	Barton-in-the-Beans	8,250

Water Supplies		Estimated
Local Authority	Parishes and Areas affected	cost £
Ashby-de-la-Zouch R.D.C.	Lount	2,738
Billesdon R.D.C.	Allexton	1,235
Billesdon R.D.C.	Hungerton and Illston Hill	16,900
Castle Donington R.D.C. . .	Extension—Long Lane, Kegworth (revised)	2,100
Castle Donington R.D.C. . .	Main—Reservoir to Park Lane	3,710
Melton and Belvoir R.D.C.	Coston and Sewstern	9,000

The above nine schemes brings the total up to 153 which have now been considered. These involve 72 for water supply and 81 for sewerage and sewage disposal.

The following provisional grants under the Acts were indicated during the year.

Sewerage and Sewage Disposal

Local Authority	Scheme	Estimated Cost £	County	
			Council Grant £	Ministry Grant £
Ashby-de-la-Zouch R.D.C.	Packington	21,300	7,000 (prov.)	7,000
Barrow R.D.C.	Birstall	115,000	32,500	50,000
Market Bosworth R.D.C. . .	Nailstone (Stage 2) ..	13,450	3,975	5,500
Castle Donington R.D.C. . .	Breedon-on-the-Hill and Tonge	27,890	9,000	11,000
	increased from	19,587	7,000	7,000
Shepshed U.D.C.	Extension to works ..	15,300	*3,060	does not qualify
Ashby-de-la-Zouch R.D.C.	Bosworth Road, Measham	9,500	2,767	160 p.a. for 30 yrs.
Ashby-de-la-Zouch U.D.C.	New Packington	9,050	*1,700	not applicable
Billesdon R.D.C.	Stoughton	15,750	3,750	3,750
Blaby R.D.C.	Blaby-Whetsone works ..	10,750	*2,000	not applicable
Blaby R.D.C.	Kilby	14,778	3,800	7,000
Market Bosworth R.D.C. ..	Ibstock	15,650	4,000	4,000
Market Harborough R.D.C.	Theddingworth	14,500	4,500	4,519

*Grant under P.H. Act, 1936, Sec. 307

Water Supplies

Local Authority	Scheme	Estimated Cost £	County	
			Council Grant £	Ministry Grant £
Barrow R.D.C.	South Croxton	3,900 (1949)	nil	nil
Blaby R.D.C.	Thurlaston	8,270 (actual cost)	2,200	2,200
Melton and Belvoir R.D.C.	Saxby	3,557	250	500
Shepshed U.D.C.	Water supply scheme ..	11,400	nil	does not qualify
Ashby-de-la-Zouch R.D.C.	Lount	3,740	550	550
Ashby Woulds U.D.C.	Blackfordby Lane, Moira	645	nil	215 (agri. grant)
Melton and Belvoir R.D.C.	Redmile, Barkestone, Plungar	20,800	6,775	7,250
Melton and Belvoir R.D.C.	Long Clawson and Harby	3,850	350	350

SANITARY INSPECTION

Sanitary Inspection by District Councils

District	No. of complaints received (a)	No. of premises where defects or nuisances dealt with (b)	No. defects or nuisances dealt with in (b)	No. of Inspections made	Number of Notices served			Summary action	
					Preliminary		Statutory	Sum-mones issued	Convic-tions obtained
					Housing	Other			
Urban Districts									
Ashby-de-la-Zouch ..	129	121	191	3,912	27	48	—	—	—
Ashby Wolds ..	31	31	31	1,651	1	2	—	—	—
Coalville ..	330	1,444	1,970	5,543	154	170	7	—	—
Hinckley ..	344	1,423	824	10,412	78	157	—	2	2
Loughborough M.B.	484	439	742	18,440	23	387	12	—	—
Market Harborough	321	783	1,384	3,259	153	328	—	—	—
Melton Mowbray ..	179	224	341	2,565	25	52	15	—	—
Oadby ..	60	44	56	1,958	—	41	—	—	—
Shepshed ..	111	87	132	1,966	62	24	8	—	—
Wigston ..	284	554	484	2,287	38	468	7	—	—
Rural Districts									
Ashby-de-la-Zouch ..	724	410	818	1,938	21	116	—	2	2
Barrow-upon-Soar ..	547	831	1,064	6,542	211	35	19	8	8
Billesdon ..	92	102	102	4,967	10	51	4	—	—
Blaby ..	383	483	621	6,244	52	168	2	—	—
Castle Donington ..	336	225	225	1,767	29	82	—	—	—
Lutterworth ..	79	99	151	2,549	—	16	—	—	—
Market Bosworth ..	213	179	151	8,828	—	148	—	1	1
Market Harborough	168	152	250	5,925	49	37	—	—	—
Melton and Belvoir ..	429	97	97	7,551	21	7	—	—	—
Totals ..	5,244	7,728	9,634	98,304	954	2,337	74	13	13

CLOSET ACCOMMODATION

The following table shows the position as regards closet accommodation in the County at 31st December, 1955, and includes details of conversions.

District	Privies	Pail closets	Water closets	Total	Converted to Water closets		Privies converted to Pail closets
					Privies	Pail closets	
Urban Districts							
Ashby-de-la-Zouch	33	25	2,044	2,102	—	2	—
Ashby Wolds	8	24	781	813	—	1	—
Coalville	40	121	8,713	8,874	4	6	—
Hinckley	—	218	13,417	13,635	—	2	—
Loughborough M.B.	15	87	15,144	15,246	—	1	—
Market Harborough	—	14	5,090	5,104	—	1	—
Melton Mowbray	—	8	4,790	4,798	—	—	—
Oadby	—	12	2,749	2,761	—	—	—
Shepshed	29	131	2,195	2,355	—	8	—
Wigston	—	23	6,050	6,073	—	—	—
Rural Districts							
Ashby-de-la-Zouch	160	1,281	2,711	4,152	1	88	5
Barrow-upon-Soar	30	1,228	15,404	16,662	—	47	—
Billesdon	4	581	2,400	2,985	—	83	—
Blaby	2	687	12,500	13,189	—	238	—
Castle Donington	37	273	3,195	3,505	1	23	—
Lutterworth	34	1,669	2,026	3,729	—	40	—
Market Bosworth	2	1,849	6,679	8,530	—	89	2
Market Harborough	73	201	3,167	3,441	5	3	—
Melton and Belvoir	314	2,896	2,546	5,756	3	51	3
Totals	781	11,299	111,601	123,710	14	673	10

COMPLAINTS

The following complaints were received during the year and were referred to district officers :

General sanitary matters	..	..	32
Housing	..	..	49
Water supplies	..	..	6
			87

Public Cleansing

The refuse collection services of the district councils are carried out entirely by direct labour, but owing to the difficulty of keeping an adequate labour force for these duties there has been some deterioration in the frequency of collection in some urban areas of the county. The position concerning vehicles used, frequency of collection and disposal methods employed are as follows :

District	No. of vehicles used	Frequency of Refuse Collection	Method of Disposal		
			No. of Con- trolled Tips	No. of Crude Tips	Incinera- tion
Urban Districts					
Ashby-de-la-Zouch ..	1	Weekly	2	—	—
Ashby Woulds ..	1	Weekly	1	—	—
Coalville	6	8-9 days	2	—	—
Hinckley	7	7-20 days	1	1†	—
Loughborough M.B.	10	8-10 days	1*	—	—
Market Harborough ..	1	Weekly	1	—	1
Melton Mowbray ..	2	10 days	1	—	—
Oadby	2	9 days	1	—	—
Shepshed	1	Weekly	—	1	—
Wigston	3	Weekly	1	—	—
Rural Districts					
Ashby-de-la-Zouch ..	4	9 days	3	1	—
Barrow-upon-Soar ..	9	Weekly	2	—	—
Billesdon	3	Weekly	1	—	—
Blaby	9	Weekly	1	—	—
Castle Donington ..	2	10 days	2	—	—
Lutterworth	4	Weekly	—	3	—
Market Bosworth ..	5	Weekly	—	5	—
Market Harborough ..	3	Fort- nightly	—	4	—
Melton and Belvoir ..	4	Weekly	5	—	—
Totals	77	—	25	15	1

*Consolidation of refuse by mechanical bulldozer and lifting of soil and resoiling by scraper and bulldozer.

†Partially controlled for trade refuse. Most of combustible material burnt.

Camping Sites and Caravans

Of the 67 sites used for camping purposes during the year, 50 were licensed by the district councils, the remainder being used for short periods by Youth Organisations. The majority of the licensed sites were once again in the Charnwood Forest area of the Barrow-upon-Soar Rural District.

The number of caravans licensed under Section 269 of the Public Health Act, 1936, continued to show an increase over the county as a whole and 340 licenses were issued. It appears that living permanently in a caravan does not worry a section of the community although it is difficult to assess whether economics decide the issue in many cases. If the cost of house building continues to rise, it seems likely that caravans may have to come to stay as permanent homes. This may present local housing authorities with more problems when the life of a modern caravan nears its end.

Shops Act, 1950

The following table summarises the work carried out by the district councils under this Act :

Defects	Outstanding from previous year	Defects found	Defects remedied	Outstanding 31st Decem- ber, 1955
Sanitary conveniences ..	7	42	39	10
Temperature	1	15	16	—
Ventilation	—	11	10	1
Washing facilities ..	3	22	22	3
Lighting	—	10	10	—
Facilities for taking meals	2	5	5	2

Swimming Baths and Pools

One hundred and thirty-three visits were paid to eight public and three privately-owned swimming baths and pools which were in use in the urban districts during the year. All samples of bath water were found to be satisfactory, as would be expected with efficient chlorination plants.

In the rural districts, six privately-owned pools were in use and were inspected as the occasion demanded.

The Pet Animals Act, 1951

Twenty-five premises were registered under this Act and only two minor contraventions were observed in 60 visits.

Prevention of Damage by Pests Act, 1949

Full-time or part-time operators under the supervision of the sanitary inspectors carried out treatment and control work in connection with infestations of rats and mice.

The regular attention to sewers, refuse tips, sewage works and other likely reservoirs of infestation appears to have paid dividends in that no serious trouble was reported during the year.

Rag Flock and Other Filling Materials Order, 1951

Nineteen premises were registered for upholstery and five for the storage of rag flock and all registered premises are inspected regularly.

Samples of sheet wadding, coir fibre and rag flock were taken for analysis and found to be satisfactory.

HOUSING

The district councils received 2,596 applications for council houses during the year, and on the 31st December, 1955, there were 8,557 outstanding applications, which was 1,678 less than at the same time in the previous year.

One thousand, one hundred and sixty-five houses were completed by the local authorities and 2,257 by private enterprise, a decrease of 152 in the case of the former and an increase of 871 in the case of the latter over the figures for 1954. In addition there were 3,515 houses under construction at the end of the year, of which 2,192 were by private enterprise.

The number of council houses being built is tending to fall, while private houses, mostly for owner-occupiers, have continued to show an increase.

District	Number of Council Houses in District in 1939	Total Number of Post-war Houses Built		Houses completed during year 1955		Houses in course of erection at end of year	
		Local Auth'y.	Private Enter- prise	Local Auth'y.	Private Enter- prise	Local Auth'y.	Private Enter- prise
Urban Districts							
Ashby-de-la-Zouch	163	260	102	6	47	60	30
Ashby Woulds ..	138	212	6	—	3	—	1
Coalville	538	828	389	40	57	96	41
Hinckley	1,525	1,398	920	82	289	166	245
Loughborough M.B.	1,050	1,424	350	123	80	127	120
Market Harborough	319	447	134	38	32	—	71
Melton Mowbray ..	231	701	217	128	67	64	63
Oadby	46	206	478	14	222	6	190
Shepshed	217	308	144	8	65	52	31
Wigston	360	710	607	62	228	60	241
Rural Districts							
Ashby-de-la-Zouch	322	422	127	34	21	164	32
• Barrow-upon-Soar ..	613	1,636	1,218	150	383	76	413
Billesdon	14	254	445	*18	142	18	59
Blaby	442	1,149	1,334	124	426	142	536
Castle Donington ..	166	452	131	92	29	90	25
Lutterworth	353	436	151	72	24	36	6
Market Bosworth ..	400	1,059	514	33	106	97	57
Market Harborough	193	388	70	20	10	2	9
Melton and Belvoir	320	600	173	121	26	68	22
Totals ..	7,410	12,890	7,510	1,165	2,257	1,323	2,192

*In addition, 207 houses were built in the area by the Leicester City Council

DISTRICT	INSPECTION OF HOUSES DURING THE YEAR			HOUSES DEMOLISHED OR CLOSED DURING THE YEAR					DWELLING HOUSES REPAIRED					
	Total Number of houses inspected for housing defects (Public Health and Housing Acts)	Number of houses (included in previous column) inspected under the Housing Consolidated Regulations, 1925 and 1932	Number of houses found to be in a state so dangerous to health as to be unfit for human habitation	HOUSING ACT, 1936			Housing Act, 1949	Local Government (Misc. Provs.) Act, 1953	INFORMAL ACTION	FORMAL ACTION				
				Demolished as a result of formal or informal procedure (Section 11)	Closed in pursuance of an undertaking given by owners and still in force (Section 11)	Parts of buildings closed (Section 12)				Closed as a result of closing orders under Section 10(1) and 11(2)	Closing Orders made under Section 10(1)	Number of houses rendered fit as result of action under Public Health and Housing Acts	Number of houses in which defects were remedied after service of formal notices	Housing Act, 1936 (Section 9, 10, 11 and 16)
Urban Districts														
Ashby-de-la-Zouch ..	378	—	3	—	2	—	—	—	378	2	—			
Ashby Woulds ..	70	—	11	—	—	—	—	—	—	—	—			
Coalville	413	35	250	1	—	3	1	—	87	9	5			
Hinckley	353	118	118	9	—	—	—	—	97	1	—			
Loughborough M.B.	724	46	678	7	—	—	—	7	444	—	12			
Market Harborough	402	44	38	7	—	1	—	—	117	—	—			
Melton Mowbray ..	142	14	14	—	6	1	—	7	57	—	—			
Oadby	61	—	36	—	—	—	—	—	41	2	—			
Shepsbed	141	24	10	5	—	—	—	—	34	28	—			
Wigston	95	39	41	1	—	—	—	4	45	7	—			
Rural Districts														
Ashby-de-la-Zouch ..	160	—	80	12	—	—	—	5	57	2	—			
Barrow-upon-Soar ..	715	118	496	25	1	—	—	—	184	23	—			
Billesdon	327	104	76	—	—	—	—	—	6	4	—			
Blaby	316	114	58	4	8	—	—	13	119	4	1			
Castle Donington ..	144	33	10	3	—	—	—	—	111	—	—			
Lutterworth	362	—	350	—	—	—	3	—	7	—	2			
Market Bosworth ..	2,109	—	153	—	1	—	—	—	137	6	—			
Market Harborough	710	—	107	—	—	—	—	9	21	—	—			
Melton and Belvoir ..	831	422	47	4	17	—	—	—	219	—	—			
Totals ..	8,453	1,111	2,576	78	35	5	4	45	2,161	88	20			

SLUM CLEARANCE PROGRAMME

(District Councils' returns to the Ministry of Housing and Local Government)

DISTRICT	Part 1 The total problem		Part 2 Orders already made, etc.		Part 3 Action in the first five years				
	Estimated number of houses unfit for human habitation and suitable for action under Section 11 or 25 of the Housing Act, 1936 (i)	Period in years necessary for securing the demolition of all the houses in (i) (ii)	Number of houses in (i) in clearance areas already covered by operative clearance or compulsory purchase orders or owned by the Local Authority (iii)	Number of houses already in clearance areas for which clearance or compulsory purchase orders have been submitted to the Ministry, but have not become operative (iv)	Number of houses already in clearance areas and for which clearance or compulsory purchase orders are to be made or for purchase by agreement within the five years (v)	Number of houses to be included in clearance areas still to be declared, or included in clearance or compulsory purchase orders submitted to Ministry (vi)	Number of houses under (iii), (iv), (v) and (vi) to be patched (if necessary) and retained within the five years under Section 2, Housing Repairs and Rents Act, 1954, for temporary accommodation (vii)	Number of houses under (iii), (iv), (v) and (vi) to be demolished in the five years (viii)	Number of houses (including those already comprised in operative demolition orders) to be demolished as a result of action under Section 11 of the Housing Act, 1936 (ix)
Urban Districts									
Ashby-de-la-Zouch ..	363	5	—	—	—	363	—	363	11
Ashby Woulds ..	11	5	—	—	11	—	—	11	—
Coalville ..	292	5	—	—	—	231	—	231	61
Hinckley ..	627	5	83	—	34	469	—	586	41
Loughborough M.B.	843	9½	38	—	14	550	120	482	21
Market Harborough	49	10	—	—	—	—	—	—	31
Melton Mowbray ..	135	5	—	—	—	120	—	120	15
Oadby ..	33	5	—	—	—	31	—	31	2
Shepshed ..	88	5	9	—	—	37	—	46	42
Wigston ..	400	15	21	7	18	102	—	150	2
Rural Districts									
Ashby-de-la-Zouch ..	187	5	19	6	9	74	—	108	79
Burrow-upon-Soar ..	496	5	173	—	13	8	—	160	302
Rillesdon ..	80	5	—	—	—	—	—	—	80
Ulaby ..	332	8	—	—	—	150	—	150	50
Castle Donington ..	185	10	—	—	—	40	—	40	52
Lutterworth ..	347	8	—	—	—	170	—	170	30
Market Bosworth ..	399	5	—	—	—	45	—	—	354
Market Harborough	107	10	—	—	—	11	—	—	77
Melton and Belvoir ..	300	5	—	—	—	260	—	220	40
Totals ..	5,274	—	343	13	99	2,661	120	2,868	1,290

All the district councils have shown a keen interest in the problem of dealing with sub-standard houses, and the extent of the problem to be tackled can be seen from the summary of the programmes submitted to the Ministry of Housing and Local Government by the respective authorities.

Summary of Housing Work

There was an increased use of the Improvement Grant provisions of the Housing Act, 1949, with 663 applications received and 546 granted.

Seventy-eight houses were demolished as a result of formal or informal procedure under Section 11 of the Housing Act, 1936, with 287 persons displaced. Thirty-five houses were closed under the same section, with 144 persons displaced. Five parts of buildings were closed, Section 12, displacing 21 persons. Under the Housing Act, 1949, Sections 10 (1) and 11 (2) four houses were closed with 14 persons displaced. Closing orders under the Local Government (Misc. Prov.) 1953 accounted for 45 houses and displaced 127 persons.

Fifty-two houses were demolished in Clearance Areas, displacing 111 persons and 94 houses were dealt with under the Housing Repairs and Rents Act, 1954.

INSPECTION AND SUPERVISION OF FOOD

BIOLOGICAL MILK SAMPLING

The programme of milk sampling for biological examination was again drawn up by the Public Health Laboratory in consultation with the County Sanitary Officer. The supply of guinea pigs was adequate to allow for all milk sold without heat-treatment to be sampled regularly at the farms concerned, and the results obtained indicate that an orderly system of sampling is the most satisfactory on a long-term basis.

Seven hundred and forty-five routine samples of milk were taken during the year and the post-mortem examination of the guinea pigs inoculated revealed evidence of Myco. tuberculosis in only 11 cases. These and four others reported by outside authorities were referred to the Divisional Veterinary Officer of the Ministry of Agriculture, Fisheries and Food for investigation. His investigations resulted in five cows being slaughtered under the Tuberculosis Order, 1938, and all these cows were found to have tuberculous udders. Three notices under Regulation 20 of the Milk and Dairies Regulations, 1949, were served by District Medical Officers and the notices were withdrawn on receipt of the final certificate that the herds were free from infection.

In addition to the guinea pig test for *Brucella abortus*, all herd samples of milk were examined by Dr. N. S. Mair, Director of the Public Health Laboratory, by his direct culture technique. This has been described in detail in the Monthly Bulletin of the Ministry of Health and the Public Health Laboratory Service (1955, 14 : 184). The results were available within four or five days of the samples being taken with the result that individual cow samples could be proceeded with in the knowledge that the milk supply was still infected. Thirty-seven routine samples were found to be infected with *Brucella abortus* and 565 individual samples were taken with the willing co-operation of the farmers concerned. The milk from all the cows found to be infected was excluded from retail sale and a large number of the cows in question were fattened by the farmers and sold for slaughtering. The system of routine and individual cow samples has been found to work well towards controlling milk supplies infected with *Brucella abortus*, and the serving of notices by District Medical Officers involving the interruption of retail arrangements and compensation, has been largely avoided.

It would have been impossible to carry out the biological sampling work without the willing co-operation of Dr. Mair and I am indebted to him for his help.

Clinical Examinations and Tuberculin Testing of Cattle

The Divisional Veterinary Officer has kindly supplied the following information, and I take pleasure in recording my appreciation of his readiness to co-operate and assist with the work of the department when requested :

	No. of herd inspections	No. of cattle examined
(a) Clinical examination of dairy cattle :		
Tuberculin Tested and Attested Herds	1,519	64,596
Non-designated herds	1,122	17,124
(b) Tuberculin Testing of Attested Herds :		
Number of cattle tested		80,276
Number of reactors found		306 (0.38%)

At the end of the year the number and classes of dairy herds were :

Tuberculin Tested and Attested	875
Tuberculin Tested and Supervised	12
Tuberculin Tested only	5
Non-designated Attested	140
Non-designated Supervised	8
Non-designated (not Attested or Supervised)	1,285

Milk Pasteurising Plants

Fourteen pasteurising plants were licensed and supervised by the County Council as the Food and Drugs Authority at the beginning of the year, but in February one of these plants closed down. Fortunately this was the plant which was the least efficient in the county and where the dairyman had previously been before the committee to show why his license should not be cancelled.

The efficiency of the 13 remaining plants over the year was excellent and their daily output again rose.

Six hundred and sixty-four inspections were made by the County Sanitary Officer and his staff, and 917 samples of pasteurised milk were taken at the processing dairies. A monthly summary of the sample results is sent to the dairyman and also to the Sanitary Inspectors of the county districts in which the plant is situated.

A check is also kept on the bacteriological state of dairy equipment and to test the efficiency of bottle and churn washings ; 400 bottles were taken after washing for sterility test and 334 were found to be satisfactory ; 181 churns were tested, and of these only 23 were unsatisfactory. The Public Health Laboratory provisional standard was used as the guide for a satisfactory standard as there is no legal requirement at the present time.

The following table shows the type of plant in operation, with their hourly capacity and daily output :

Type of Plant	Capacity in gallons per hour	Capacity daily output in gallons
H.T.S.T.	1,000	8,000
H.T.S.T.	350	2,500
H.T.S.T.	400	1,300
H.T.S.T.	150	680
H.T.S.T.	350	1,050
H.T.S.T.	350	800
H.T.S.T.	220	1,250
Holder (continuous) ..	400	2,000
Holder	200	620
Holder	100	400
Holder	100	100
Holder	75	300
Holder	75	140

Specified Areas

The whole of the county with the exception of Melton Mowbray Urban District, Melton and Belvoir Rural and Lutterworth Rural Districts is now "specified" and only Pasteurised, Tuberculin Tested and Sterilised Milk can now be sold in the districts concerned.

The Milk (Special Designation) (Specified Areas) (No. 2) Order, 1955, included the Urban Districts of Hinckley, Market Harborough, Oadby and Wigston, and the Rural Districts of Barrow-upon-Soar, Billesdon, Blaby, Market Bosworth and Market Harborough, and came into force from 6th December, 1955. All retailers in these districts were visited to check their intentions before the operative date and there were very few difficulties except in isolated villages. In one village no retailer could be persuaded to deliver the small quantity of milk required daily and the Ministry gave a special dispensation for a producer/retailer to deliver undesignated milk to about ten families.

Retailers in the Specified Areas are checked periodically as to their sources of supply and samples of milk are taken for statutory tests with biological examination in the case of tuberculin tested milk ; 206 samples of pasteurised milk, two of sterilised milk and 114 of tuberculin tested milk were taken in this connection.

Milk Supplies to Schools and County Council Establishments

The County Sanitary Department supervises the supply of milk to all schools and other county council establishments, namely 300 schools, two

residential schools, six county homes, nine children's homes and five day nurseries. The Milk Sampling Officer took 783 samples of milk for examination by the Public Health Laboratory and in the case of raw tuberculin tested milk frequent samples for biological examination were obtained.

As will be seen from the following table concerning the Milk in Schools Scheme, the majority of the milk supplied to schools is pasteurised. The Primary Schools in some of the rural parts of the county are rather isolated and the only milk retailed is tuberculin tested or undesignated. So far it has not been possible to arrange a pasteurised supply to 31 schools, but this will be done as soon as retailers extend their rounds and cover the rural schools.

Schools Supplies at 31st December, 1955

Schools			"Tuberculin Tested"	"Pasteurised"	Totals
Secondary Grammar	..		1	11	12
Secondary Technical	..		—	3	3
Secondary Modern	..		—	25	25
Primary	..	..	30	229	259
Nursery	..	..	—	1	1
Residential	..	..	—	2	2
Totals	..	..	31	271	302

Milk and Dairies Regulations 1949

District	No. on Register		Inspections		Contraventions						
					Dairies		Distributors				
	Dairies	Distributors	Dairies	Distributors	Found	Remedied	Out-standing, 31.12.55	Found	Remedied	Out-standing, 31.12.55	
Urban Districts											
Ashby-de-la-Zouch ..	4	11	34	—	5	5	—	—	—	—	—
Ashby Woulds ..	—	—	—	—	—	—	—	—	—	—	—
Coalville ..	12	39	40	74	—	—	—	—	—	—	—
Hinckley ..	9	23	36	30	13	9	4	2	4	1	—
Loughborough M.B. ..	17	6	68	23	—	—	—	—	—	—	—
Market Harborough ..	3	3	27	—	1	2	—	—	—	—	—
Melton Mowbray ..	6	1	13	2	—	—	—	—	—	—	—
Oadby ..	1	4	—	—	—	—	—	—	—	—	—
Shepshed ..	6	1	52	—	—	—	—	—	—	—	—
Wigston ..	2	30	8	54	—	—	—	7	7	—	—
Rural Districts											
Ashby-de-la-Zouch ..	2	18	5	26	—	—	—	—	—	—	—
Barrow-upon-Soar ..	27	1	69	2	6	6	—	—	—	—	—
Billesdon ..	—	—	—	—	—	—	—	—	—	—	—
Blaby ..	11	30	69	30	1	1	—	—	—	—	—
Castle Donington ..	—	14	—	12	—	—	—	1	2	—	—
Lutterworth ..	4	4	19	19	—	—	—	—	—	—	—
Market Bosworth ..	18	140	37	44	9	9	—	1	1	—	—
Market Harborough ..	3	9	36	108	—	—	—	—	—	—	—
Melton and Belvoir ..	4	53	14	149	—	—	—	7	7	—	—
Totals ..	129	387	527	573	35	32	4	18	21	1	—

District	Number of premises registered			Number of samples collected				
	Manufacture and Retail	Manufacture only	Retail only	Grade 1	Grade 2	Grade 3	Grade 4	Total
Urban Districts								
Ashby-de-la-Zouch ..	—	—	21	—	—	—	—	—
Ashby Wolds ..	—	—	8	—	—	—	—	—
Coalville ..	1	—	82	18	5	1	—	24
Hinckley ..	3	—	114	—	—	—	—	—
Loughborough M.B. ...	5	—	146	25	6	—	1	32
Market Harborough ..	—	—	32	—	—	—	—	—
Melton Mowbray ..	—	—	45	6	—	—	—	6
Oadby ..	—	—	9	—	—	—	—	—
Shepshed ..	—	—	12	15	2	—	—	17
Wigston ..	—	—	66	6	4	—	—	10
Rural Districts								
Ashby-de-la-Zouch ..	—	1	36	16	8	1	—	25
Barrow-upon-Soar ..	3	—	108	17	6	7	4	34
Billesdon ..	—	—	12	—	2	2	—	4
Blaby ..	—	—	80	65	9	3	—	77
Castle Donington ..	—	—	26	—	—	—	—	—
Lutterworth ..	3	—	35	—	—	—	—	—
Market Bosworth ..	2	—	52	—	—	—	—	—
Market Harborough ..	—	—	24	—	—	—	—	—
Melton and Belvoir ..	—	—	56	12	2	—	—	14
Totals ..	17	1	964	180	44	14	5	243

Per cent of samples within Grade I 74.07 per cent

Per cent of samples within Grades I and II 92.1 per cent

MEAT INSPECTION

One hundred and eighteen slaughterhouses were licensed during the year and, as will be seen from the table below, the majority were in the rural districts, where the distance between the slaughterhouses makes meat inspection an onerous and time-consuming duty. Much time is spent by the sanitary inspectors in waiting for butchers to finish dressing carcasses before inspection can be carried out, and the practice of killing over week-ends has continued. Under the present arrangements overtime is unavoidable and much of this is done without payment or time off in lieu.

District	No. of slaughter-houses	Total No. of animals slaughtered	Total No. of animals examined	No. of knackers' yards	No. of inspections
Urban Districts					
Ashby-de-la-Zouch	2	4,048	4,048	—	—
Ashby Woulds ..	3	not known	115	—	—
Coalville	7	12,445	12,445	—	—
Hinckley	7	12,408	12,408	1	12
Loughborough M.B.	7	6,573	6,573	1	38
Market Harborough	1	8,393	8,393	—	—
Melton Mowbray..	1	8,386	8,386	1	5
Oadby	3	2,994	2,994	—	—
Shepshed	1	817	817	—	—
Wigston	2	3,783	3,731	1	10
Rural Districts					
Ashby-de-la-Zouch	6	2,388	2,388	2	5
Barrow-upon-Soar	15	6,161	6,161	2	18
Billesdon	3	418	200	—	—
Blaby	12	5,886	5,886	—	—
Castle Donington	3	8,131	8,131	1	4
Lutterworth ..	9	2,201	2,201	1	1
Market Bosworth..	16	11,203	11,203	—	—
Market Harborough	6	1,425	1,425	—	—
Melton and Belvoir	14	2,850	2,850	3	3
Totals ..	118	100,510	100,355	13	96

Carcases Inspected and Condemned

	Cattle exclu- ding Cows	Cows	Calves	Sheep and Lambs	Pigs
Number killed (if known)	13,003	1,763	929	51,473	33,279
Number inspected ..	12,946	1,763	928	51,316	33,230
All Diseases except Tuberculosis :					
Whole carcasses condemned	12	6	24	144	34
Carcasses of which some part or organ was con- demned	1,732	440	8	1,172	1,351
Percentage of number in- spected affected with disease other than tuber- culosis	13.4%	25.29%	3.4%	2.5%	4.1%
Tuberculosis only :					
Whole carcasses condemned	13	8	1	—	10
Carcasses of which some part or organ was con- demned	746	419	—	—	906
Percentage of number in- spected affected with tuberculosis	5.8%	24.2%	0.12%	—	2.7%

FOOD AND DRUGS

Food and Drugs Act, 1938

The provisions of the Food and Drugs Act, 1938, relating to the composition and adulteration of food and drugs, were administered by the Weights and Measures Inspectors of the County Council. The following is a summary of the samples taken during 1955 and the County Analyst's reports :

	Samples Analysed	Samples Unsatisfactory
Milk	193	17
Almonds, Ground	1	
Baking Powder	2	
Bread and Butter	1	
Butter	4	
Chicken Soup Powder	1	
Coffee	6	
Coffee and Chicory Mixture	2	
Cream	1	
Cream Toffee	1	
Curry Powder	1	
Custard Powder	1	
Fish Cakes	1	
Foam Crystals	1	
Fruta Milk	1	
Ice Cream	20	
Ice Cream with added cream	1	
Jam—Blackcurrant	1	
Jam—Strawberry	1	
Jelly	3	
Lard	2	
Lemon Juice	1	
Luncheon Meat	1	
Margarine (with 25% Cream)	1 % of butter fat not stated	1
Marzipan	1 Ingredients not stated	1
Oranges	4	
Orange Juice	1	
Pepper	7	
Pork Pie	4	
Raspberry Vinegar	1 Contained illegal preservative	1
Sage	1	
Salad Cream	5	
Sausages—Beef	17	
Sausages—Pork	22	
Sausages—Unclassified	1	
Steak and Kidney Pie	1	
Tea	6	
Thyme and Parsley	1	

			Samples Analysed	Samples Unsatisfactory
Toast and Butter	..	..	1	
Tomato Juice Cocktail	..	..	1	
Vinegar Malt	..	..	1	
			—	—
			323	20
			—	—
Wines, Spirits, etc.				
Beer	..	..	4	
Brandy	..	..	4	
Gin	..	..	17	
Port Wine	..	..	2	
Rum	..	..	4	
Whisky	..	..	18	
			—	
			49	
			—	
Medicines, Tonics, etc.				
Asprin Tablets	..	..	1	
Bismuth Magnesia and Soda Mint Elix			1	
Bronchial Catarrh Syrup	..	..	1	
Bronchial Mixture	..	..	1	
Compound Mixture of Hypophosphates			1	
Emulsion	..	..	1	
Glycerine of Thymol	..	..	1	
Halibut Oil Capsules	..	..	1	
Influenza Mixture	..	..	3	
Lemon, Glycerine and Honey Mixture			1	
Linctus of Codeine	..	..	1	
Malt Extract	..	..	1	
Mentholated Calsom	..	..	1	
Nerve Tonic	..	..	2	
Syrup of Garlic	..	..	1	
Vitamin and Mineral Capsules ..	..	..	1	
Vitamin Capsules	..	..	3	
Whooping Cough Mixture	..	..	1	
Warm Syrup	..	..	1	
			—	
			24	
			—	
"Appeal to Cow" milk samples ..	..	..	20	
			—	—
Grand Totals	..	..	416	20
			—	—
1952	..	..	454	11
1953	..	..	444	31
1954	..	..	449	26

Proceedings arising out of three samples of milk containing added water which were taken in the last quarter of 1954, resulted in the seller being fined £7 os. od. and £11 11s. od. costs.

Of the 17 samples of milk which failed to pass the prescribed test, 11 were deficient in fat. Of these, three showed only insignificant deficiencies and eight indicated that some abnormalities existed in the herds concerned. The Veterinary Officer of the Ministry of Agriculture, Fisheries and Food was informed of this.

The six remaining samples showed the presence of added water and where, in one case, this was only a very small amount, the owner was cautioned. The other five samples all came from one producer, who was prosecuted and fined £5 os. od., plus £10 10s. od. costs.

The sample of raspberry vinegar had been found to contain a preservative which was not listed in the Public Health (Preservatives in Food) Regulations. The manufacturers were cautioned.

The sample of margarine had been enclosed in a wrapper marked "with 25% fresh dairy cream" but had no statement as to butter fat. The Ministry of Food advised that there was no offence but considered the claim undesirable. The point is to be incorporated in the new Food and Drug Regulations.

The carton containing the sample of marzipan had not been labelled as to its ingredients as required. No action had been taken however, due to the reasonable doubt the manufacturers may have had as to this necessity.



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