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LEICESTER COUNTY COUNCIL

ANNUAL REPORT

of the

COUNTY
MEDICAL OFFICER OF HEALTH
FOR THE YEAR
1964

G. H. GIBSON, M.B., Ch.B., D.P.H., COUNTY MEDICAL OFFICER OF HEALTH TELEPHONE: LEICESTER 20451





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COUNTY HEALTH DEPARTMENT, 17 FRIAR LANE, LEICESTER, August 1965

Mr. CHAIRMAN, LADIES and GENTLEMEN,

I have the honour to present my Annual Report on the work of the County Health and Welfare Department for the year 1964.

A study of the various statistics shows them to be on the whole satisfactory. Special attention might be drawn to the remarkably low infant mortality rate, which at 12.46 per 1,000 live births has reached a level which comparatively recently would have seemed impossible. No case of poliomyelitis was notified during the year: we must not allow ourselves to become complacent, as a fall in the level of immunity or a change in virulence of the disease might lead to a recurrence. On the other side of the picture, the death rates from cancer of the lung and from accidents on the road or in the home, must give us cause for concern. It is a challenge to health education that such conditions seem sometimes to be accepted by the general public almost as a matter of course, in striking comparison with the reaction to the occurrence of one or two cases of some infectious disease.

The Report outlines the many activities of the Department and a brief survey of the development of the Mental Health Service during the past ten years is included. While there have been no significant alterations in circumstances compared with previous years, comment has been kept to a minimum: the appropriate statistics have been retained although in some instances the somewhat elaborate comparisons with previous years which have been shown in recent Reports have been curtailed or omitted when they seem to have become less relevant to our present problems.

I am glad to have the opportunity of expressing my thanks to the members of the Department's staff for their work during the year, as well as for their help in the preparation of the Report. We are grateful for the ready co-operation of the Chief Officers of other County Departments and their staffs and to the many organisations both statutory and voluntary with which our work brings us into contact. Lastly, I should like to record my appreciation of the constant support of the Chairman and members of the Health and Welfare Committee, and for the consideration shown to myself and all members of the staff.

I have the honour to remain,
Your obedient servant,
G. H. GIBSON,

County Medical Officer

HEALTH AND WELFARE COMMITTEE

(at 1.12.64)

HARVEY, L. W. (Chairman)

ALLEN, G. A.
COATES, Capt. W. G.
CRISP, R. L. D.
EADY, Mrs. N. M. E.
EGGINGTON, A. T.
GALLAGHER, M.
GELL, Mrs. V.
HART, A.
HEAP, J. L.
HOLMES, J. H.
HULL, L. W.
ILIFFE, J. H.
KEAY, Mrs. M. E., B.E.M.

LLOYD, Col. P. H., T.D., D.L. (ex-officio)
McHUGH, J. A.
MORRISON, Miss M. F. C. S.
MURPHY, R.
PAGE, Mrs. F. M.
RUTLAND, His Grace the Duke of (ex-officio)
SCOTT, A. F.
SHAW, J. J. H.
SHEFFIELD, Mrs. D. M.
SHERRIFF, J. E.
TANDY, E. W.
TOMPKINS, J. G. S.
WESTON, R. C.

YATES, F. (Vice-Chairman)

Members co-opted to the Health and Welfare Committee by the County Council on the nomination of various bodies:

NAME:

REPRESENTATION:

HODSON, Mrs. G. N. ABBOTT, Miss M.

KELLY, Dr. G. D.

. Leicestershire County Nursing Association . Leicestershire County Nursing Association

.. National Health Service (Leicestershire and Rutland)
Executive Council

TUGWELL, A. ..

.. Leicestershire and Rutland Association of Urban Authorities

SEVILLE, H. A... .. Lei

.. Leicestershire and Rutland Association of Rural District Councils

Members co-opted to the General Purposes Sub-Committee:

FACER, Miss L. . . Leicestershire Voluntary Association for Cripples' Welfare MILLER, Miss I. H. . . Royal Leicester, Leicestershire and Rutland Incorporated Institution for the Blind.

Members co-opted to the County Homes Sub-Committee:

ARIS, W.

ERRINGTON, H. Y.

Members co-opted to the Mental Health Sub-Committee:

VALENTINE, Dr. A. A. . . Medical Superintendent, Glenfrith Hospital (One vacancy)

Sub-Committees of the Health Committee

(including terms of reference)

General Purposes Sub-Committee:

HARVEY, L. W. (Chairman)

YATES, F. (Vice-Chairman)

Ambulance Service Chiropody Service Health Centres Health Education

Registration of Nursing Homes Sewerage and water

Health Educati Home Safety Small dwellings Welfare of the blind, crippled, deaf

Housing (including housing of rural workers) and handicapped persons

Milk and Dairies

General matters not specifically referred to any other Sub-Committee

HEALTH AND WELFARE COMMITTEE—continued

Domiciliary Services Sub-Committee:

YATES, F. (Chairman)

Convalescent Home Treatment
Deafness in Young Children
Domestic Help Service
Health Visiting
Home Nursing
Maternity and Child Welfare
Midwifery
Nurseries and Child Minders
Other types of illness, including
venereal disease, care of epileptics
and care of patients discharged

EADY, Mrs. N. M. E. (Vice-Chairman)

Provision of nursing equipment and apparatus

Tuberculosis, including the provision of village settlements, workshops, hospital accommodation, night sanatoria, domiciliary visits to tuberculosis patients, and the setting up of a Care Committee

Unmarried Mothers Vaccination and Immunisation Welfare Foods

County Homes Sub-Committee:

HOLMES, J. H. (Chairman)

from hospital

SHAW, J. J. H. (Vice-Chairman)

All matters relating to the provision of residential accommodation for the aged and infirm, and temporary accommodation for persons in need thereof: the temporary protection of property of persons admitted to any hospital or old peoples' homes: the burial and cremation of the dead and the powers and duties of the County Council under Section 31 of the National Assistance Act, 1948, and the registration, etc., of disabled persons' and old persons' homes.

Mental Health Sub-Committee:

SHEFFIELD, Mrs. D. M. (Chairman)

MURPHY, R. (Vice-Chairman

All matters relating to mental health, including the Council's duties in respect of mental illness under Section 28 of the National Health Service Act, 1946; the Council's duties under the Mental Health Act, 1959; staffing and financial matters appertaining to this Sub-Committee.

Representation on other Governing Bodies and Associations

Joint Consultative Committee for the Welfare of the Blind:

GALLAGHER, M., HARVEY, L. W., HOLMES, J. H., YATES, F.

Leicestershire County Nursing Association:

PAGE, Mrs. F. M., HOLMES, J. H., MORRISON, Miss M. F. C. S., ILIFFE, J. H.

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

ARIS, W. HARVEY, L. W. SHAW, J. J. H. EADY, Mrs. N. M. E. HEAP, J. L. WESTON, R. C.

Leicestershire Voluntary Association for Cripples' Welfare:

PAGE, Mrs. F. M., KEAY, Mrs. M. E., B.E.M., SHEFFIELD, Mrs. D. M.

Leicester and County Mission to the Deaf:

KEAY, Mrs. M. E., B.E.M.

HEALTH AND WELFARE COMMITTEE-continued

Royal Leicester, Leicestershire and Rutland Incorporated Institution for the Blind: HULL, L. W. SEVILLE, H. A. (one vacancy) YATES, F.

Wycliffe Society for Helping the Blind:

KEAY, Mrs. M. E., B.E.M.

WESTON, R. C.

Southern Regional Association for the Blind:

YATES, F.

Friends of Markfield After-Care Committee:

MURPHY, R.

WESTON, R. C.

Leicestershire Rural Community Council:

HART, A.

YATES, F.

East Midlands Old People's Welfare Committee of the National Council of Social Services:

WESTON, R. C.

Leicestershire Old People's Welfare Association:

ARIS, W.

SHAW, J. J. H.

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 Officers:

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

Assistant County Medical Officers:

BENNETT, JOAN G. H., M.B., B.CH., B.A.O.
PENTON, G., M.B., B.S., B.A.O., D.C.H.
SUGDEN, MARGARET E., M.B., CL.B., M.R.C.S., L.R.C.P. (appointed 1.1,64)

Senior Assistant County Medical Officer; Medical Officer of Health, Loughborough M.B.: HOLDERNESS, R. C., M.B., B.S., M.R.C.S., L.R.C.P., D.P.H.

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

ROSS, A. C., M.B., CH.B., D.P.H.

Assistant County Medical Officer;

Medical Officer of Health, Barrow-upon-Soar Rural District:

HALL, J. W., M.D., B.S., 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.

Assistant County Medical Officer:

Medical Officer of Health, Hinckley Urban District and Market Bosworth Rural

District:

KERSHAW, J. B., M.B., B.S., M.R.C.S., L.R.C.P., D.P.H.

Chief 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.

STAFF OF THE PUBLIC HEALTH DEPARTMENT

-continued

School Dental Surgeons:

LATIMER, R., L.D.S. (part-time) MURRAY, L., L.D.S. (resigned 11.5.64) CASWELL, Miss J., L.D.S. (resigned 31.10.64)

County Health Inspector: GREGORY, S. A., F.R.S.H., F.A.P.H.I.

Assistant County Health Inspector: BUTTON, D. D., M.A.P.H.I., A.R.S.H.

Superintendent Health Visitor and School Nurse (combined duties):
HORNSBY, Miss A., R.G.N., S.C.M., H.V.CERT.

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

OXFORD, Miss F. M. G. (appointed 1.1.64)

Health Visitors and School Nurses (combined duties):

ALDERTON, Miss M. B. ANDERSON, Miss J. A. (resigned 30.6.64)BAINES, Mrs. D. G. BAXTER, Miss D. G. (Diabetic H.V.) BLACK, Miss E. J. BOON, Miss K. F. BOWMER, Miss A. N. CAPELL, Miss V. P. (appointed 2.11.64)CARTER, Miss W. D. COULSON, Mrs. G. E. DANIELS, Miss J. DALBY, Mrs. D. M. DIBLE, Miss H. DOHERTY, Miss E. M. DUNNE, Mrs. B. DYSON, Miss J. M. (Health Education H.V. resigned 15.7.64) EVANS, Mrs. E. (Health Education H.V. appointed 15.6.64) FARMER, Mrs. D. FOINETTE, Mrs. N. FOXLEY, Miss E. M. (resigned 18.11.64GARRETT, Mrs. N. I. GRATELEY, Mrs. S. T. GRIMES, Mrs. H. M. (appointed 2.3.64)HOLMES, Miss A. L. HUDSON, Mrs. B.

JARVIS, Miss M. JONES, Mrs. K. B. KEITH, Miss L. (resigned 22.2.64) KERRY, Mrs. E. (part-time) KLEIN, Mrs. D. M. I. LANCASTER, Miss A. H. McDONAGH, Miss K. McILRATH, Miss G. MOULD, Miss L. M. NUTTING, Miss M. PATERSON, Miss M. J. (resigned 30.6.64)PEARCE, Miss S. M. PEARSONS, Mrs. O. PHILIP, Miss M. E. POTTER, Mrs. M. (appointed 1.10.64) ROBINSON, Miss E. RODDIS, Miss M. J RUNSWICK, Mrs. H. (Health Education H.V. resigned 31.1.64) SAGE, Miss R. E. SARGEAUNT, Mrs. B. Z. SIMMS, Miss A. E. SIMMONS, Miss B. W. SMITH, Miss E. F. V. SWINGLER, Miss M. E. WHYTOCK, Mrs. R. M. (part-time) WAINWRIGHT, Mrs. A. WILLIAMS, Mrs. B. M. (Health Education H.V. appointed 2.11.64)

STAFF OF THE PUBLIC HEALTH DEPARTMENT -continued

Social Worker: NAYLOR, P. W.

Occupational Therapists:

BORDOLI, Mrs. M. GODWIN, Miss K. (resigned 30.6.64) WILLIAMS, Mrs. E. M.—Welfare Assistant

Non-Medical Supervisor of Midwives:
ALLINSON, Miss L., S.R.N., S.C.M., H.V.CERT.
(on the Staff of the Leicestershire County Nursing Association)

Domestic Help Organiser:
HAMER, Mrs. A. L. E., M.B.E. (deceased 18.4.64)
GAMBLE, Miss B. (appointed 24.4.64)

Ambulance Officer: DIXON, S. S.

Deputy Ambulance Officer: HAYES, R. V. (appointed 1.5.64)

Principal Mental Welfare Officer: FORDHAM, W. J.

Senior Mental Welfare Officers: NEWTON, Mrs. M., D.P.A.; WEST, Miss D. I.; WINSTANLEY, J.

Mental Welfare Officers:

CHRISTIAN, Miss G. H. CLARKE, P. PUGH, Miss J. S. FAIRBROTHER, Mrs. D. SIMMONS, P.

> Training Centres Organiser: BUSHELL, R. S.

Principal Administrative Assistant: READ, E. F., A.C.I.S.

Senior Administrative Officer (County Homes): FREER, N. C.

Welfare Officer (County Homes):
WILLEY, E. RAWLINSON, W. L. (appointed 10.8.64)

Resident Officers at County Homes:

Catherine Dalley House, Scalford Road, Melton Matron, Mrs. D. J. Ruddock Mowbray

Enderby House, Leicester Road, Narborough. . Secretary, Mr. H. S. Painter Matron, Mrs. M. G. Painter

Hastings House, 59a Regent Street, Lough- Matron, Miss E. F. F. Blencowe

hastings House, 59a Regent Street, Lough- Matron, Miss E. F. borough

Knighton House, 341 London Road, Leicester Matron, Miss F. E. Holland Moat House, New Road, Burbage . . . Matron, Miss W. M. Wheeler

St. Luke's, Leicester Road, Market Harborough Matron, Mrs. M. J. Wood

STAFF OF THE PUBLIC HEALTH DEPARTMENT

-continued

West Haven, Station Road, Market Bosworth, Nuneaton	Secretary, Mr. A. D. Allen Matron, Mrs. M. E. Allen
Woodmarket House, Lutterworth, Rugby	Secretary, Mr. D. H. K. Gilson Matron, Mrs. G. M. Gilson
Loudoun House, Ridgway Road, Ashby-de-la- Zouch	Matron, Mrs. M. C. C. Silverwood
Tillson House, Bradgate Drive, Coalville	Matron, Miss R. Reid
Lenthall House, Market Harborough	Matron, Mrs. E. M. Bullivant
Officers at Training C	Centres:
Coalville Adult Training Centre, Stephenson House, Ashby Road, Coalville	
Desford Adult Training Centre, Peckleton Lane, Desford	Manager, Mr. J. A. Porter
Coalville Junior Training Centre, c/o St. John Ambulance H.Q., Forest Road, Coalville	Supervisor, Miss J. Meadows
Dorothy Goodman Training Centre, Middlefield Lane, Hinckley	Supervisor, Mrs. M. E. Knight
Loughborough Training Centre, Ashmount, Bridge Street, Loughborough	Supervisor, Mrs. K. M. West
Melton Mowbray Training Centre, Trades and Labour Hall, Park Lane, Melton Mowbray	Supervisor, Mrs. R. M. Baker
Wigston Training Centre, Birkett House, Central Avenue, Wigston Magna	Supervisor, Mrs. J. L. East
Garthorpe Adult Training Centre, Garthorpe, Nr. Melton Mowbray. (Opened 9-11-65)	Supervisor, Mrs. J. O. Green

DISTRICT MEDICAL OFFICERS OF HEALTH

Area URBAN:	Name		Office Address and Telephone No.
Ashby-de-la-Zouch	Dr. A. M. W. Segerda	1	Council Offices, Kilwardby Street, Ashby-de-la-Zouch (Tel. Ashby-de-la-Zouch 2853)
Ashby Woulds	Dr. A. M. W. Segerda	1	Council Offices, Moira (Tel. Swadlincote 7474)
Coalville	Dr. A. Hamilton		Council Offices, London Road, Coalville (Tel. Coalville 2283)
Hinckley	Dr. J. B. Kershaw		Council Offices, Station Road, Hinckley (Tel. Hinckley 3771)
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 3662)
Oadby	Dr. R. W. Kind		Council Offices, Oadby (Tel. Oadby 3266)
Shepshed	Dr. A. M. W. Segerda	1	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. Segerda	1	South Street, Ashby-de-la-Zouch (Tel. Ashby-de-la-Zouch 2783)
Barrow-upon-Soar	Dr. J. W. Hall		Council Offices, 31 Fowke Street, Rothley (Tel. Rothley 2391)
Billesdon	Dr. J. Young		Council Offices, Thurnby (Tel. Thurnby 2182)
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 2161)
Market Bosworth	Dr. J. B. Kershaw		Council Offices, Market Bosworth (Tel. Market Bosworth 234, 371)
Market Harborough	Dr. R. W. Kind		42 High Street, Market Har- borough (Tel. Market Harborough 3291)
Melton and Belvoir	Dr. J. Young		Warwick Lodge, Melton Mowbray (Tel. Melton Mowbray 3343)

STATISTICS AND SOCIAL CONDITIONS OF THE AREA

NATURAL AND SOCIAL CONDITIONS

With an administrative area of 806 square miles, the County of Leicester lies geographically in the centre of England. Its extreme length north to south is 44 miles and from east to west 39 miles. The undulating surface of the County varies in height from 100 to 912 feet above sea level.

Traditional industries, such as farming, coal-mining and engineering, which were originally associated with the hosiery and footwear industries, are now very diversified and include the manufacture of machine tools, scientific instruments, electronic equipment and road-making machinery.

There are over 1,900 miles of road within the County and the M1 Motorway is being extended through Leicestershire.

STATISTICS OF THE AREA

A ! A		I takan	50 010		Whole County
Area in Acres (Census in 1961)		Urban Rural	56,910 458,492		515,402
Population (Registrar-Gen	eral's est		d-year 1964)	:	
		Urban	195,090		494 500
Patachla malua sa at lat A		Rural	239,430		434,520
Rateable value as at 1st A					£14,855,978
Estimated product of penr	ny rate,				£62,278
Live births		Urban Rural	3,607 4,575		8,182
Live birth-rate		Urban	18.49		
(per 1,000 population)		Rural	19.11		18.83
Illegitimate live births exp as a percentage of total liv		Urban	3.77%		
		Rural	3.95%		3.87%
Stillbirths		Urban Rural	54 76		130
Stillbirth rate (per 1,000 total births)		Urban Rural	14.75 16.34		15.64
Total live and stillbirths		Urban Rural	3,661 4,651		8,312
Infant montality (deaths :		Kurar	4,001		0,012
Infant mortality (deaths one year of age)		Urban Rural	45 58		103
Infant mortality rate thousand live births)	(per	Urban	12.47		
		Rural	12.68	• •	12.46
Legitimate Infant Mortality (per thousand legitimate					
births)		Urban	12.39		10.50
		Rural	12.74	••	12.59

STATISTICS OF THE AREA—continued

Illegitimate Infant Mortality rate (per thousand illegitimate live				
births)	Urban	14.76		10.00
	Rural	11.49		12.62
Neo-natal mortality (deaths	1220			
under four weeks of age)	Urban	32		
	Rural	43		75
Neo-natal mortality rate (per				
thousand live births)	Urban	8.87		
	Rural	9.40		9.16
Early Neo-natal mortality (deaths				
under one week)	Urban	32		
	Rural	35		67
Early Neo-natal mortality rate				
(per thousand live births)	Urban	8.87		
(per modulia ire onino)	Rural	7.65		8.19
Perinatal mortality (stillbirths			100	0
and deaths under one week)	Urban	86		
and deaths under one week)	Rural	111		197
Desired and the control	Ruidi	111		101
Perinatal mortality rate (per	Urban	23.49		
thousand live and stillbirths)	Rural			00 00
		23.86		23.82
Maternal mortality	Urban	7		
	Rural	1		1
Maternal mortality rate (per				
thousand live and stillbirths)	Urban	_		
	Rural	0.21		0.12
Deaths	Urban	1,887		
	Rural	2,348		4,235
Death-rate	Urban	9.67		
	Rural	9.80		9.74

POPULATION OF THE COUNTY

The Registrar-General's estimate at mid-year 1964 is given below, together with that of 1963.

			Estimated Mid-year	Estimated Mid-year
Urban Districts:			1963	1964
Ashby-de-la-Zo	uch		 7,560	7,510
Ashby Woulds			 3,370	3,370
Coalville			 26,840	27,070
Hinckley			 42,000	42,270
Loughborough .	M.B		 38,990	39,270
Market Harboro	ough		 12,020	12,300
Melton Mowbra	ay		 16,310	16,850
Oadby			 14,050	14,710
Shepshed			 7,420	7,500
Wigston			 23,440	24,240
Total	Urban Distri	cts	 192,000	195,090

POPULATION OF THE COUNTY-continued

			Estimated Mid-year	Estimated Mid-year
Rural Districts:			1963	1964
Ashby-de-la-Zouch		 	13,680	13,650
Barrow-upon-Soar		 	60,200	61,490
Billesdon		 	20,810	21,140
Blaby		 	60,380	62,980
Castle Donington		 	10,040	10,130
Lutterworth		 	13,060	13,300
Market Bosworth		 	28,240	28,460
Market Harborough		 	9,310	9,540
Melton and Belvoir		 	18,770	18,740
Total Rural	Districts	 	234,490	239,430
Total population of who	le county	 	426,490	434,520

The following table gives the population figures for the past 20 years.

Year	Urban Population	Rural Population	Whole County Population
1945	145,100	162,590	307,690
1946	150,930	168,100	319,030
1947	154,450	172,880	327,300
1948	158,960	178,840	337,800
1949	160,490	181,710	342,200
1950	163,780	183,900	347,680
1951	162,700	184,800	347,500
1952	162,100	186,600	348,700
1953	163,500	188,000	351,500
1954	164,970	189,630	354,600
1955	166,600	191,900	358,500
1956	168,300	196,300	364,600
1957	171,100	202,200	373,300
1958	174,200	207,200	381,400
1959	176,600	212,900	389,500
1960	179,630	218,690	398,320
1961	186,150	224,620	410,770
1962	189,520	229,510	419,030
1963	192,000	234,490	426,490
1964	195,090	239,430	434,520

LIVE BIRTHS

(rates calculated per thousand population)

In 1964 the total number of births recorded in the County rose, from 7,964 to 8,182, resulting in a birth-rate increase of 0.1 to 18.8. The rate for England and Wales was 18.4. There were 4,176 male and 4,006 female births during 1964; a rate of 104.2 male to 100 female births.

There was an increase in the number of illegitimate live births; from 294 to 317, resulting in an increase in the rate from 0.69 to 0.73.

The number of births and the birth-rate at 10 year intervals for the past 50 years is given below.

	Url	ban	Ru	Rural		Whole County		
Year	No.	Rate	No.	Rate	No.	Rate	England and Wales	
1914	2,404	22.8	3,196	21.0	5,600	21.8	22,2	
1924	2,205	19.41	2,925	18.34	5,130	18.8	18.8	
1934	1,843	14.9	2,888	15.3	4,731	15.2	14.8	
1944	3,120	21.3	3,416	20.8	6,536	21.1	17.6	
1954	2,465	14.9	2,680	14.1	5,145	14.5	15.2	
1964	3,607	18.5	4,575	19.1	8,182	18.8	18.4	

STILLBIRTHS

(rates calculated per thousand live and stillbirths)

The number of stillbirths, 130, is the lowest since 1960. The stillbirth rate, 15.6 is the lowest recorded; the comparative rate for England and Wales is 16.3. Once again a total of eight illegitimate stillbirths were recorded.

		Legit	imate	Illegit	imate	To	tal
	Year	No.	Rate	No.	Rate	No.	Rate
1954		 139	26.2	10	1.9	149	28.1
1955		 108	19.9	5	0.9	113	20.8
1956		 142	24.6	6	1.0	148	25.6
1957		 121	19.7	7	1.1	128	20.8
1958		 156	23.9	9	1.4	165	25.3
1959		 146	21.0	8	1.2	154	22.2
1960		 122	16.9	8	1.1	130	18.0
1961		 142	18.5	8	1.0	150	19.6
1962		 128	15.9	8	1.0	136	16.9
1963		 134	16.5	8	1.0	142	17.5
1964		 122	14.7	8	0.9	130	15.6

NEO-NATAL DEATHS

(rates calculated per thousand live births)

The early neo-natal death rate resumed a decline during 1964. There were 27 fewer neo-natal deaths in 1964 than in the previous year and the rate decreased by 3.6 over the same period.

EARLY NEO-NATAL DEATHS

	Urban		Rural		Whole County	
Year	No.	Rate	No.	Rate	No.	Rate
1960	43	13.6	36	9.2	79	11.2
1961	36	10.5	41	10.0	77	10.3
1962	46	13.1	32	7.3	78	9.9
1963	42	11.7	50	11.4	92	11.5
1964	32	8.8	35	7.6	67	8.2

NEO-NATAL DEATHS

		Url	ban	Ru	ral	Whole	County
	Year	No.	Rate	No.	Rate	No.	Rate
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
1956		 52	20.0	40	13.2	92	16.4
1957		 53	19.0	55	16.3	108	17.4
1958		 30	10.3	40	11.6	70	11.0
1959		 40	13.4	47	12.4	87	12.8
1960		 47	14.3	40	10.2	87	12.3
1961		 40	11.7	46	11.3	86	11.5
1962		 58	16.5	38	8.6	96	12.2
1963		 46	12.9	56	12.7	102	12.8
1964		 32	8.9	43	9.4	75	9.2

INFANT MORTALITY

(rates calculated per thousand live births)

The table below records the falling Infant Mortality rate over the last ten years. Leicestershire's rate in 1964 was 7.5 lower than that for England and Wales.

	Ur	ban	Ru	ral	Whole	County	England
Year	No.	Rate	No.	Rate	No.	Rate	Wales
1954	70	29.4	70	27.0	140	28.1	25.4
1955	65	25.6	54	19.6	119	22.5	24.9
1956	65	25.0	65	21.6	130	23.2	23.8
1957	71	25.5	76	22.6	147	23.9	23.1
1958	51	17.5	59	17.1	110	17.3	22.5
1959	52	17.4	70	18.4	122	18.0	22.2
1960	76	24.1	61	15.6	137	19.4	21.9
1961	59	17.3	59	14.4	118	15.7	21.4
1962	79	22.5	57	13.0	136	17.2	21.6
1963	61	17.1	73	16.6	134	16.8	20.9
1964	45	12.5	58	12.7	103	12.5	20.0

Percentages of Deaths in Early Neo-Natal, Neo-Natal and Infant Age Groups

The following table gives the number and percentage of deaths in the age groups under one week, one to four weeks, and four weeks to one year for the last three years.

		under week	1,000	one to weeks		one year
Year	No.	%	No.	%	No.	%
1962	78	57.3	18	13.2	40	29.4
1963	92	68.6	10	7.5	32	23.9
1964	67	65.0	8	7.7	28	27.1

MATERNAL MORTALITY

During the post-war years the maternal mortality rate rose considerably and in 1945 16 deaths occurred in this category. However, the number of deaths nowadays is very small. Only two have been recorded since 1962. The current maternal mortality rate in this County is 0.12 per thousand live and stillbirths. The latest rate available for England and Wales is 0.28.

INFANT MORTALITY

The following table analyses into individual causes the 103 infant deaths which occurred in 1964, compared with the figures for 1963.

	Y	ear l	963	Y	ear 1	964
Cause of death	M.	F.	Total	M.	F.	Tota
Motor Vehicle Accidents	 _	_	_	_	_	_
Leukaemia and aleukaemia	 -	1	1	-	-	-
Pneumonia	 6	8	14	5	5	10
Bronchitis	 2	4	6	-	1	1
Other diseases of respiratory system	 1	1	2	2	1	3
Gasteritis enterius and diarrhoea	 -	1	1	4	1	5
Nephritis and nephrosis	 -	1	- 1	-	-	-
Congenital malformation	 13	9	22	11	11	22
Other defined and ill-defined diseases	 37	44	81	42	18	60
All other accidents	 1	5	6	2	-	2
Totals	 60	74	134	66	37	103

As the group "other defined and ill-defined diseases" accounts for over half the total infant deaths in 1964 it has been broken down into the following sub-divisions:

Cerebral haemorrhage					4
Birth injury of brain					1
Post-natal asphyxia and	atelectas	ie .		187	
Atelectasis (all forms)	···				4
Asphyxia					4
					*
Immaturity with or with	out me	ntion o	tother		
subsidiary condition:					
Prematurity					15
Haemolytic disease of the		n:			
Haemolytic disease of the n	ewborn				3
Other conditions:					
Anaemia					3
Anoxia					3
Cardiac failure					2
Cold syndrome	2.0				1
Cardio respiratory failure					2
Fibrocystic disease of pancr	eas				1
Hyaline membrane disease					2
Intracranial haemorrhage					1
Meningitis					2
Peritonitis					1
Postmaturity					1
Pulmonary syndrome					3
Respiratory failure					3
Septicaemia					1
Suprarenal haemorrhage					3
			1000000	83.55	

DEATHS (all causes and all ages)

The number of deaths from all causes was 4,235, a decrease of 187 over the previous year. There were fewer neoplasm deaths recorded in 1964. Diseases of the circulatory system accounted for fewer deaths than in the previous three years. Deaths from diseases of the digestive system continue to increase.

The number of deaths from accidents, 181, is the highest recorded for this cause.

I.	INFECTIVE AND PARAS DISEASES	ITIC		Year 1960	Year 1961	Year 1962	Year 1963	Year 1964
	1. Tuberculosis, respiratory			20	20	15	11	17
	2. Tuberculosis, other			2	3	2	4	2
	3. Syphilitic disease			8	10	5	6	4
	4. Diphtheria			-	-	_	_	_
	5. Whooping cough			-	_	_	_	_
	6. Meningococcal infections				1	1		1
	7. Acute poliomyelitis.			1	_		_	_
	8. Measles				2	_	_	1
	9. Other infective and parasiti			6	8	11	10	9
	o. Other infective and parasid	c discus					- "	
II.	NEOPLASMS							
	10. Malignant neoplasm, stom	ach		99	83	96	128	117
	11. Malignant neoplasm, lung	, bronc	hus	137	171	167	165	175
	12. Malignant neoplasm, brea	st		67	76	75	78	75
	13. Malignant neoplasm, uteri	us		31	30	29	28	23
	 Other malignant and neoplasms 		phatic	339	371	346	393	385
	15. Leukaemia, aleukaemia			25	19	17	21	22
	zor zoemacina, areanacina							
III.	ALLERGIC, ENDOCRINE METABOLIC, AND TIONAL DISEASES		TEM,					
	16. Diabetes			31	30	30	39	31
VI.	DISEASES OF THE NE		1277					
	17. Vascular lesions of the ne	rvous s	ystem	613	611	676	735	637
VII.	DISEASES OF THE CIRC SYSTEM							
	18. Coronary disease, angina			642	664	684	712	736
	19. Hypertension with heart of			108	116	96	106	89
	20. Other heart disease			598	633	628	605	522
	21. Other circulatory disease			192	181	209	193	190
VIII.	DISEASES OF THE RES SYSTEM	PIRAT	ORY					
	22. Influenza			11	112	16	16	24
	23. Pneumonia			153	180	175	190	191
	24. Bronchitis			174	196	205	212	223
	25. Other diseases of the respi	ratory s	ystem	34	44	48	49	44

IX.	DISEASES OF THE DIGESTIVE SYSTEM		Year 1960	Year 1961	Year 1962	Year 1963	Year 1964
	26. Ulcer of stomach and duodenum 27. Gastritis, enteritis and diarrhœa	::	25 21	38 20	36 16	26 18	42 24
X.	DISEASES OF THE GENITO- URINARY SYSTEM						
	28. Nephritis and nephrosis 29. Hyperplasia of prostate	::	28 27	42 20	41 28	32 14	31 19
XI.	DELIVERIES AND COMPLICATIO OF PREGNANCY, CHILDBIRTH AND THE PUERPERIUM						
	30. Pregnancy, childbirth, abortion		3	2	2	1	1
KIV.	CONGENITAL MALFORMATION	S			-		
	31. Congenital malformations		44	38	58	33	35
XVI.	SYMPTOMS, SENILITY AND II DEFINED CONDITIONS	LL-					
	32. Other defined and ill-defined disease	es	366	338	374	391	355
XVII.	ACCIDENTS, POISONINGS AND VIOLENCE						
	33. Motor vehicle accidents		64	53	51	69	77
	34. All other accidents		101	103	93	96	104
	35. Suicide		36	48	41	34	30
	36. Homicide and operations of war		2	2	1	7	-

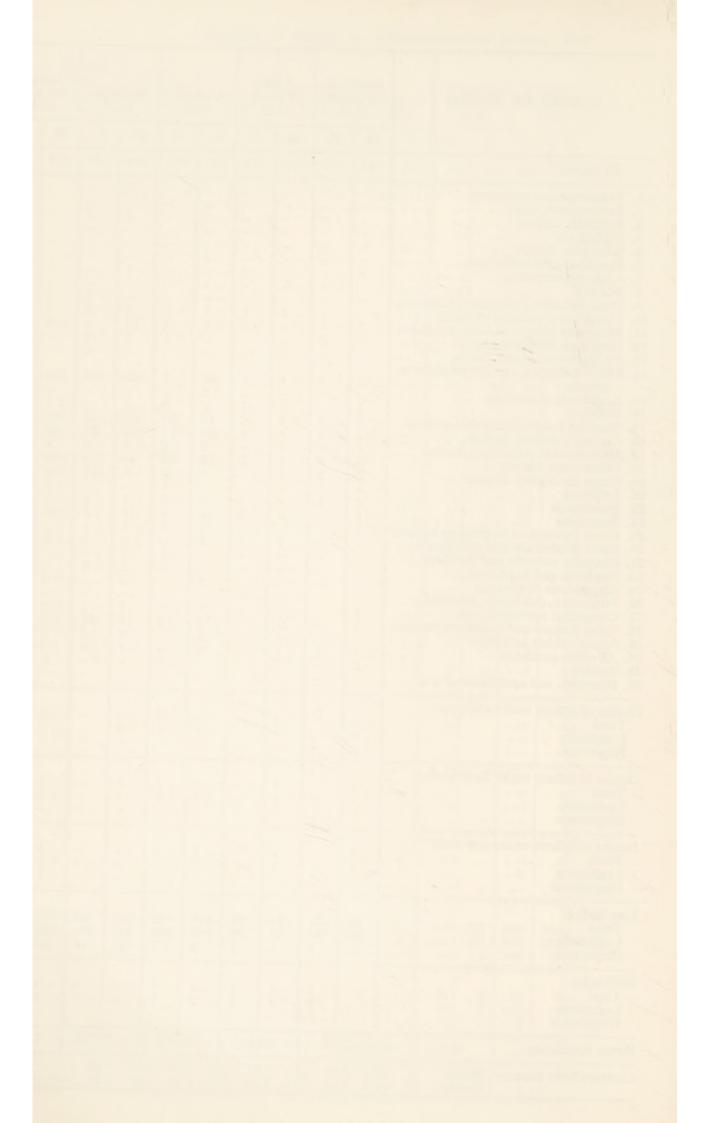
The table below shows total deaths and rates per 1,000 population at ten year periods. It will be noted that the rate for England and Wales this year is only .3 less than in 1944.

		Url	oan	Ru	ral	Whole	County	Rate for
Year	-	No.	Rate	No.	Rate	No.	Rate	England and Wales
1944		1,608	11.00	1,862	11.35	3,470	11.18	11.6
1954		1,716	10.41	1,933	10.19	3,649	10.29	11.3
1964		1,887	9.67	2,348	9.80	4,235	9.74	11.3

Causes of Death at Different Periods of Life in the Administrative County of Leicester, 1964

											WHO	OLE	COI	UNT	Y											1	AGGRI	GATE	s		
CAUSES OF DEATH	Un 4 we		& u	reeks inder year	1	_	5	_	15-	_	25	5—	34	5—	4.	5—	5	5—	6	5—	75	& over	Urba	n Dis	tricts	Rus	ral Dis	tricts	W	nole Co	unty
	M.	F.	M.	F.	M.	F.	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	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2	1	4	1	5	3	1	-	3	2	5	9	3	12	12	5	17
2. Tuberculosis, other	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	_	1	-	-	_	-	1	_	_	-	1	1	2	1	1	2
3. Syphilitic disease	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	_	_	-	-	1	1	2	1	1	2		2	9	1	3	4
4. Diphtheria	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	_	_	_					1 2	-		, ,	
5. Whooping cough	-	_	-	-	-	-	-	-	-	-	-	-	_	-	_	-	_	_	_	_	_	_			_					_	-
6. Meningococcal infections	-	-	-	-	-	1	-	-	_	-	_	-	_	_	_	_	_	_						1			1		-		- 5
7. Acute poliomyelitis	-	-	-	-	-	_	_	-	_	-	_	_	_		_						_		Ī		-	-		1	-	1	1
8. Measles	-	_	-	_	-	_	_	_	_	_	-	_	_	_	_		_	_					T.	-	_	-	-	_	-	-	-
9. Other infective and parasitic diseases	-	_	_	_	-	_	_	_	_	_	1		_				1	3	1	2	-	-	_	-	-	-	1 5	-		-	-
10. Malignant neoplasm, stomach	-	_	_	_	_	_	_	_	_	_	-			1	5	7	19	11	20	1000	-	1	2	. 5	7	1	1	2	3	6	9
11. Malignant neoplasm, lung, bronchus	-	_	_		_	_				_	2		5	2	20			12000		11	14	29	19	27	46	39	32	71	58	59	117
12. Malignant neoplasm, breast	_		_	_	_					-	_			7		5	49	5	49	10	19	9	65	8	73	79	23	102	144	31	175
13. Malignant neoplasm, uterus	_	_		000	_						1300	-	-		- 7	10	1	23	-	14	-	20	1	32	33	-	42	42	1	74	75
14. Other malignant & lymphatic neoplasms	_			-	1	2	2	2	2	-	-	-	- 1	3	-	11	-	2	-	3	-	4	-	9	9	-	14	14	-	23	23
15 I automorio alculumente		-	_	-		1	2	2	1	1	3	5	7	7	12	12	51	35	62	46	76	59	98	61	159	118	108	226	216	169	385
10 Disham		=	-	-	-		1,333	2	1	-	-	7	2	1	3	3	1	1	1	2	2	-	3	4	7	9	6	15	12	10	22
17 Versules Indian of	_	_		-	-	-	-	-	-	-	-	-	-	-	-	2	3	2	5	4	7	8	9	2	11	6	14	20	15	16	31
18 Carana di	_	-	-	-	-	-	-	-	1	-	2	1	1	3	16	14	42	37	77	97	137	209	125	165	290	151	196	347	276	361	637
		-	-	-	-	-	-	-	-	-	3	-	17	2	47	5	140	40	145	91	111	135	221	120	341	242	153	395	463	273	736
19. Hypertension with heart disease	-	-	-	-		-	-	-	-	-	1	-	-	-	1	1	12	4	8	20	15	27	17	28	45	20	24	44	37	52	89
20. Other heart disease	-	-	-	-	-	-	-	-	1	1	-	1	3	4	11	7	16	18	46	53	149	212	102	114	216	124	182	306	226	296	522
21. Other circulatory disease	-	-	-	-	-	-	-	-	-	1	-	1	-	6	5	2	19	6	23	20	47	60	44	58	102	50	38	88	94	96	190
22. Influenza	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1	2	1	3	6	10	4	7	11	5	8	13	9	15	24
23. Pneumonia	3	2	2	3	2	1	-	-	1	1	1	1	2	-	2	2	11	7	22	19	58	51	50	45	95	54	42	96	104	87	191
24. Bronchitis	-	-	-	1	1	-	1	-	-	1	-	-	1	-	7	1	39	8	68	18	53	24	75	31	106	9.5	22	117	170	53	223
25. Other diseases of respiratory system	-	-	2	1	-	-	-	-	1	-	1	-	2	1	1	1	7	1	3	2	8	13	9	9	18	16	10	26	25	19	44
26. Ulcer of stomach and duodenum	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	10	1	6	3	15	7	16	4	20	15	7	22	31	11	42
27. Gastritis, enteritis and diarrhœa	-	-	4	1	1	-	-	-	-	-	-	-	-	-	_	2	1	2	4	2	4	3	4	4	8	10	6	16	14	10	24
28. Nephritis and nephrosis	-	-	-	-	-	-	1	-	1	-	1	-	1	2	_	1	4	4	3	2	4	7	8	7	15	7	9	16	15	2000	20
29. Hyperplasia of prostate	-	-	-	-	-	-	-	-	-	-	-	-	_	-	-	_		2	6	- 2	13		11		11	8	9	16		16	31
30. Pregnancy, childbirth, abortion	-	-	-	-	-	-	-	-	-	1	_	_	_	_	_	_					10		133		1.1			8	19	-	19
31. Congenital malformation	7	6	4	5	-	1	-	2	-	_	_	1	2	1	2	1	1		1		1		10	7	17	-	1	1	-	1	1
32. Other defined and ill-defined diseases	40	17	2	1	3	1	5	1	4	2	5	3	2	8	8	10	20	14	26	33	45	105		100000	1000000	8	10	18	18	17	35
33. Motor vehicle accidents	-	-	-	-	1	-	4	1	18	4	6	3	4	2	11	1	5	2	7737	27.33	53		69	77	146	91	118	209	160	195	355
34. All other accidents	-	_	2	-	5	2	_	-	5	1	4	_	1	_	5	1	8	6	5	5	1	4	23	8	31	32	14	46	55	22	77
35. Suicide	-	-	-	-	-	_	-		1	1		2	î		5	3	2	100		6	16	37	21	28	49	30	25	55	51	53	104
36. Homicide and operations of war	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	3	3 -	5	1 _	3 -	6	8 -	14	7	9	16	13	17	30
TOTALS	50	25	16	12	14	9	15	8	36	14	30	18	51	50	164	103	468	238	595	475	904	1,040	1,016	071	1,887	1.005		2,348		1,992	

										-		-		Caus	es o	Dear	un in	Adm	inist	rative	Areas	, 196	4	-																
CAUSES OF DEATH	la-2 U	y-de- ouch D.	Asi Wor U.	D.	U	dville .D.	U	ckley .D.	Loug boros M.	ugh	Market Har- borough U.D.	Me Me	lelton swbesy U.D.	Oue U.	dby D.	Sheps U.I	hed).	Wigsts U.D.	n	Ashby-de la-Zouch R.D.	upor	rrow- n-Soar LD.	Billes R.I	don).	Blaby R.D.	Do	astle nington	Lue wee	rth	Mark Boswo R.D	erth	Marke Har- boroug R.D.	a M	Selton & Belvoir R.D.		Totals U.D.'s		Totals	1	Totals Whole
All causes	-	F.	M.	-	M.		М.	-	M.	-	M. F.		F.	М.	F.	M.	F.	м. 1	F. 1	M. F.	M.	F.	M.	F. 1	M. J. F	. м.	F.	М.	F.	M.		M. 1		LE	-	P.	-	R.D.'s		M.
	49	27	25	14	125	111	216	166	219	188	91 8	8 108	167	51	48	36	33	96	89	89 82	288	275	73	74 2	81 26	5 20	60	70	55	185 1	158	-	57 12	-	-	_	-	7 1,12		-
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of infants under one year: d: timate itimate	22 -	1 1 1	1	1111	5 5 -	2 2 -	6 6 -	111	6 5 1	4 4 -	2 -	2 2 -	1 1	4 4	2 2	1	-	2 2		-	6	5 5		2 11	11 10	1	-	2 2	1	4 4	2 1	1	3 3	1	31 30	14 13	35 34	23 22	36	6
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rths:	68								-				-	-	-	-	-	-	-	-	-	6	-		-	-	-	-			- 1	-	-	-	1	i	1	12	40	
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hs:									10	0 0	2	11	8	4	4	2	6	11 7		6	20	19	8 1	0 23	17	7			5 E				8	2	68	68	2,215 194	2,179	4,004 172	
timate		2	i	1	2 2	1	3	5 5	4	3	1 1	3 3	1	5 5	3	3 2		6 7		2 2	11 10	9	2 2	4 9	11	2	-	3		2 5		1	- 5	4	27 26	27 26	40	36	67	
Population	7,01	0	3,37	0	27,0	700	42,2	70	39,270	0	12,300	-	-	-	-	1	-			-	1	-	-		1 "	1	3	3 -		1 4		1 -	5	1	26	26	36	34	62	ш
ability Factors: Births Deaths	1.0		1.01		1,00	2	0.50	0	1.03		1,03	16,0		0.83		7,500		21,240	-	,650	61,40		21,140		2,980	10,13	10:	13,300	2	8,460	9,	540	18,7	100	195,0	290	219,	430	-	454,
arceurs	1,00		1.18		1.1	4	1.2	1	1,10		0.81	0.3		1.27		0.95		0.83	18	1,03	0,96	9	0.83 1.61		08.0	1.08	180	1,10		1.04	1.0.	.15	1.1	10	0.0	T-	0,9			0.97



GENERAL PROVISIONS OF HEALTH SERVICES FOR THE AREA

National Health Service Act, 1946

SECTION 21 Health Centres

No formal proposals for the provision of Health Centres was submitted during the year. It is, however, noticeable that there has recently been a very definite interest shown in the possibility of sharing accommodation between the various branches of the Health Services either by Health Centres in the accepted meaning of the term or by simpler and more informal arrangements.

There may well be interesting developments ahead of us.

SECTION 22

Care of Mothers and Young Children

Ante-Natal Services

Address of Ante-Natal Clinic	Sessions held
Health Clinic, Bridge Road, Coalville	Tuesdays and Thursdays, 9.30 a.m.
Health Clinic, The Lawns, Hinckley	Mondays and Thursdays, 2 p.m.
Lemyngton Street, Loughborough	Wednesdays, 2 p.m.
Health Clinic, High Street, Market Harborough	Tuesdays and Thursdays, 2.15 p.m.
Community Centre, Thurncourt Road,	
Thurnby Lodge	Fridays, 2 p.m.
Methodist Church Rooms, Glenfield	Mondays, 3 p.m.

Ante-Natal Clinics

The figures below relate to the number of expectant mothers who attended Ante- and Post-Natal Clinics in the County during 1964. Increases are recorded in attendances at clinics held by medical officers.

Total number of women i	in att	endance	for:
-------------------------	--------	---------	------

(i)	Ante-natal examination			647
(ii)	Post-natal examination			2
Total s	sessions held by:			
(i)	Medical Officers			201
(ii)	Midwives			46
(iii)	General Practitioners	employed	on a	
	sessional basis			-
				-
				247

Relaxation Classes

The following table shows the number of women attending classes, the source of bookings and the total number of attendances during the year.

Each class consists of relaxation and exercises in preparation for the confinement and instruction in pregnancy, labour, child care and related subjects.

	Institutional booked	832	
Number of Women who attended during the year	Domiciliary booked	530	
violation Strates and	Total	1,362	
Total attendances during year			

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

Owing to the continued shortage of dental staff, the suspension of treatment for expectant and nursing mothers, and pre-school children has of necessity been maintained, except in the Loughborough area. In other parts of the county, pre-school children are treated where application is made. Details of such treatment are included in the table below. Five expectant and nursing mothers were examined. 62 children under five, of the 194 examined, were found to need treatment. 53 of these were treated and made dentally fit by the end of the year.

Forms of dental treatment provided are given below:

	ings and Treatment	88	br coins or coins		Dent		aphs		
	Scalings Gum Trea	Fillings	Silver Nitrate Treatment	Crowns	Extract		Partial Upper or Lower	Radiographs	
Expectant and Nursing Mothers Children under five	- 3	1 33	- 18	-	18	-	1	-	-

Child Welfare Centres

Place	Address	Sessions held
Anstey	Church Hall,	ocosions nera
imotej	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	Parish Community	
	Centre	1st and 3rd Wednesdays, 2 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.
Birstall No. 1	Church Room	2nd and 4th Wednesdays, 2 p.m.
Birstall No. 2	Methodist Church	
	Room	1st and 3rd Thursdays, 2 p.m.
Blaby	Baptist Schoolroom	1st and 3rd Tuesdays, 2 p.m.
Braunstone	Trinity Church Room,	
	Narborough Road,	2nd and 4th Wednesdays, 2 p.m.
	Leicester	0.1.141.711.0
Braunstone East (opened 11,9,64)	St. Crispin's Hall,	2nd and 4th Fridays, 2 p.m.
(opened 11.9.04)	Turnbull Drive, Leicester	
Broughton Astley	Social Club Hall	1st and 3rd Tuesdays, 2 p.m.
Burbage	Methodist Church	in and old I desdays, 2 p.m.
Duroage	Schoolroom,	2nd and 4th Thursdays, 2 p.m.
	Windsor Street	
Castle Donington	Village Hall, Moira	
	Dale	1st and 3rd Mondays, 2.30 p.m.
Claybrooke Magna	Village Hall	1st and 3rd Thursdays, 2 p.m.
Coalville		
	Road	Tuesdays, 2 p.m.
Coalville (Greenhill	Charnborough Road	
Estate)	Baptist Church	2nd and 4th Mondays, 2 p.m.
Cosby	Methodist Schoolroom	1st and 3rd Wednesdays, 2.30 p.m.
Countesthorpe	0.1.1	and and 4th Thursdays 9 20
Croft	TH XIII XX II	2nd and 4th Thursdays, 2.30 p.m. 1st and 3rd Wednesdays, 2 p.m.
Croft Desford		
	Village Institute	1st and 3rd Tuesdays, 2 p.m.
Donisthorpe and Moira	Centenary Methodist Church Room, Donis-	2nd and 4th Tuesdays, 2 p.m.
	thorpe Road, Moira	and and a decodary, a pinn
Earl Shilton	St. John Ambulance	
	Brigade Hall,	1st and 3rd Thursdays, 2 p.m.
	Alexander Avenue	
Earl Shilton		
(The Cedars)	munity Centre,	Wednesdays, 2 p.m.
	Shilton Road, Barwell	
	arms troll	

Place		Address		Sessions held
Ellistown		Old Church School		1st and 3rd Thursdays, 2 p.m.
Enderby		Mission Room,		
		Moores Lane		1st and 3rd Wednesdays, 2 p.m.
Fleckney		Village Hall		2nd and 4th Tuesdays, 2 p.m.
Glenfield		Wesleyan Rooms		2nd and 4th Tuesdays, 2.30 p.m.
Glen Parva (W)		War Memorial Hall		2nd and 4th Wednesdays, 2 p.m.
Great Glen		Parochial Hall		2nd and 4th Fridays, 2 p.m.
Groby		Old School Rooms		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 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.
Huncote		Methodist Church,		
		Hinckley Road	• •	2nd and 4th Mondays, 2 p.m.
Ibstock		Baptist Chapel Schoolroom		2nd and 4th Thursdays, 2 p.m.
Vacquesth		Wesleyan Schoolroo		2nd and 4th Thursdays, 2 p.m.
Kegworth		High Street		2nd and 4th Wednesdays, 2.30 p.m.
Kibworth		Village Hall		2nd and 4th Wednesdays, 2.30 p.m.
Kirby Muxloe		St. Bartholomew's		min weathern, o, o, o pini,
		Church Rooms,		
		Main Street		2nd and 4th Tuesdays, 2.30 p.m.
Leicester Forest	East	St. Mary's Hall,		
		St. Mary's Avenue	,	1st and 3rd Mondays, 2 p.m.
		Braunstone Lane		
Long Clawson	••	Methodist Church Schoolroom		1st and 3rd Thursdays, 2 p.m.
Loughborough		Lemyngton Street		Tuesdays, Thursdays and Fridays
Loughoorough		Demyngton Street		2 p.m.
Loughborough		Emmanuel Church		named annual control of the control
		Hall, Forest Road		Mondays and Wednesdays, 2 p.m.
Lutterworth		Church Hall, Cover	ntry	
		Road		1st and 3rd Thursdays, 2.30 p.m.
Market Harboro	ugh	Health Clinic, High		W/- 1 1 0.20
Manhan TTanhanan		Street		Wednesdays, 2.30 p.m.
Market Harboro	ugn	Community Centre, Southern Estate		1st, 3rd and 5th Tuesdays, 2.30 p.m.
Markfield		Miners' Institute		1st and 3rd Thursdays, 2 p.m.
Measham		The Surgery,		- v. dila via Thursdays, 2 p.m.
(opened 16,10,		Iveagh House		1st and 3rd Fridays, 2 p.m.
Melton Mowbra		Health Clinic,		Herbit Language
		Asfordby Road		Mondays and Wednesdays, 2 p.m.
Mountsorrel		Church Hall		1st and 3rd Tuesdays, 2.30 p.m.
Narborough		Robjohn Hall		2nd and 4th Wednesdays, 2 p.m.

Place	Address	Sessions held
Newbold Verdon	Church Hall	2nd and 4th Thursdays, 2 p.m.
Oadby	Baptist Schoolroom	Mondays, 2 p.m.
Old Dalby (W)	Ordnance Depot	1st and 3rd Wednesdays, 2 p.m.
Queniborough	St. Mary's Church	
	Hall	2nd and 4th Wednesdays, 2 p.m.
Quorn	Village Hall	1st and 3rd Wednesdays, 2.30 p.m.
Ratby	Old People's Welfare	
	Hall	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.
Sapcote	Working Men's Club	1st and 3rd Mondays, 2 p.m.
(opened 19.7.65)	and Institute	
Scraptoft	Village Institute	1st and 3rd Wednesdays, 2 p.m.
Shepshed	St. Winefride's Parish	
	Hall, Charnwood	2nd and 4th Wednesdays, 2 p.m.
	Road	
Sileby	The Institute,	
	Cossington Road	1st and 3rd Tuesdays, 2.15 p.m.
South Wigston	Health Clinic,	W/ 1- 1- 0
O. I. OWN	Countesthorpe Road	Wednesdays, 2 p.m.
Stapleton (W)	Village Hall	2nd Tuesdays, 2 p.m.
Stoke Golding (W)		2nd and 4th Thursdays, 2 p.m.
Stoney Stanton	Working Men's Club and Institute	2nd and 4th Tuesdays, 1.30 p.m.
Contan	D 10 W	2nd and 4th Tuesdays, 1.00 p.m.
Syston	Red Cross Hall, Chapel Street	Mondays, 2.30 p.m.
Thorpe Acre	Community Centre	Fridays, 2 p.m.
Thringstone	Community Centre	2nd and 4th Tuesdays, 2.30 p.m.
Thurcaston	Village Memorial Hall	lst and 3rd Wednesdays, 2 p.m
Thurmaston	Bethel Methodist	· · · · · · · · · · · · · · · ·
2 Harmoton	Church Room	2nd and 4th Tuesdays, 2.30 p.m.
Thurnby Lodge	Thurnby Lodge Com-	
Estate	munity Centre	Thursdays, 2 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	The Poplars,	
	Leicester Road	Mondays, 2 p.m.
Wigston Fields	Methodist Churchrooms	
	Frederick Street	Thursdays, 2.30 p.m.
	Wigston Magna	
Wigston Magna	Methodist Church	
	Rooms, Moat Street	2nd and 4th Thursdays, 2,30 p.m
Woodhouse Eaves	Village Hall	2nd and 4th Mondays, 2 p.m.
Wymeswold	Village Hall	2nd and 4th Tuesdays, 2 p.m.
(W) Donates a mi	siahina santra salu aus tu	
(w) Denotes a we	eigning centre only—run by	the Health Visitor for the District.

Summary of Infant Welfare Centre Clinics

				1963	1964
Number of sessions held during year				 2,325	2,420
Number of children attending during year				 13,130	13,929
Number of sessions he	eld by:				
Medical Officers				 557	725
Health Visitors				 1,312	1,418
G.P's. on a sessiona	l basis			 456	277

The Domiciliary Care of Premature Infants

In 1964 the number of premature live births shows a decrease of 30 over the previous year but is still higher than the average in the county over the last seven years.

The tables below give the premature live birth figures for this county and also those for England and Wales.

Premature Live Births

Leicestershire

	1958	1959	1960	1961	1962	1963	1964
Born in Institutions	247	271	273	308	335	344	332
Born at Home or in a Nursing Home	110	118	120	133	116	134	117
Total	357	389	393	441	451	478	448
% Premature live births of total live births	5.6	5.7	5.6	5.9	5.7	5.9	5.8

England and Wales

% Premature live births of total live births	6.8	6.7	6.7	6.7	7.6	7.7	
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^{*}Not available

Details of premature stillbirths notified during 1964 are set out below, with the 1963 figures for comparison.

			1963	1964
In hospital			 55	69
At home or in	n a nursing	g home	 21	9
				_
Т	otal		 76	78
			_	

PREMATURE STILLBIRTHS	dua		Born	At home or in a nursing home	61	60	1	60	1	6															
PREN	19		H	In hospital	7	21	18	œ	15	69															
		al on		In 7 and under 28 days	1	1	1	1	1	1															
10	g home	Transferred to hospital on or before 28th day	Died	In l and under 7 days	1	1	1	1	61	61															
				Within 24 hrs. drith	1	1	1	1	1	1															
	a nursir	Transi		Total births	1	4	12	7	7	30															
SIRTH	PREMATURE LIVE BIRTHS Born at home or in a nursing home Nursed, entirely at home or in a nursing home or in a nursing home or in a nursing home	e or in a		In 7 and under 28 days	1	1	1	1	1	1															
URE LIVE F		ely at he	rely at h sing hor	Died	In I and under 7 days	1	-	1	- 1	1	1														
		d, entir		Within 24 hrs. driid lo	1	1	1	1	ı	63															
EMAT		Nurse or ii		Total births	1	61	6	14	62	87															
PR			In 7 and under 28 days	1	1	1	1	1	63																
		*Born in hospital	Died	In I and under 7 days	61	-	∞	1	2	13															
			Born in b	Born in h	Born in h	3orn in h	d ni no	d ni no	d ni no	d ni no	3orn in he	Sorn in he	3orn in he	Born in h	Born in l	Born in b	Born in ho	Born in ho	I	Within 24 hrs.	10	7	5	1	1
		*		sdriid IstoT	13	35	63	64	157	332															
					1. 2 lb. 3 oz. or less	2. Over 2 lb. 3 oz. up to and including 3 lb. 4 oz.	3. Over 3 lb. 4 oz. up to and including 4 lb. 6 oz	4. Over 4 lb. 6 oz. up to and including 4 lb. 15 oz	5. Over 4 lb. 15 oz. up to and including 5 lb. 8 oz.	6. Total															

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

Unmarried Mothers and their Children

The Health Visitors undertake the supervision of unmarried mothers and their children. The Superintendent Health Visitor, if necessary, makes arrangements for the confinement, domiciliary or institutional, or secures admission to a special home for such cases. An agreement is in force with the St. Saviour's Diocesan Maternity Home at Northampton, for the admission of unmarried expectant mothers. During their stay at the homes which is usually from a few weeks before the confinement to three months afterwards, training is given in domestic work and child welfare. Cases requiring special attention, which are unsuitable for this home are sent to other selected homes which cater for certain difficulties.

The Leicester Diocesan Moral Welfare Association arranges visits to cases in difficulty. An annual grant is made to the Association for its services in connection with unmarried mothers and their children.

The following table shows the number of illegitimate live births which have occurred during the past 20 years.

Year	Total live births	Illegitimate live births	Illegitimacy percentage of total live births
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
1956	 5,611	173	3.07
1957	 6,155	184	2.99
1958	 6,371	193	3.03
1959	 6,787	183	2.70
1960	 7,076	235	3.32
1961	 7,506	278	3.70
1962	 7,903	299	3.78
1963	 7,964	294	3.69
1964	 8,182	317	3.75

During the year 27 unmarried mothers were sent to the following homes:

17
2
2
2
1
1
1
1
_
27

Eye Treatment

Children of pre-school age who are found to require eye treatment are referred to the School Medical Department; prescriptions being dealt with by arrangement with the Sheffield Regional Hospital Board.

Day Nurseries

The attendances of the two day nurseries in the County, at Hinckley and Loughborough, and the number of welfare cases in attendance, have been reviewed from time to time and have remained at a satisfactory level.

				Hinckley	Loughborough	Totals
Number of app	roved pla	ces:				
0-2 years				15	15	30
2-5 years				25	35	60
Number of ch	ildren or	register,	31st			
December, 19	64:*			40	60	100
Average daily at	tendance	S				
0-2 years				9.75	8.75	18.5
2-5 years				27	30	57

^{*}Includes those attending part-time and so exceeds total approved places

Maternity Outfits

During the year, 3,606 standard outfits, together with a bottle of suitable antiseptic, were issued by the department. 691 modified outfits were issued for use in Maternity Hospital discharges up to three days after confinement. The higher issue figure for modified packs reflects a trend towards early discharge wherever possible.

Birth Control

Suitable cases are referred to clinics held by the Leicester & District Family Planning Association. A grant is made based on an annual mean of 40 county patients.

Deafness in Young Children

The special clinic for Young Deaf Children deals with cases referred by their own doctors or detected by routine testing at Infant Welfare Centres.

Mr. Jenkins, Ear, Nose and Throat Consultant sees any cases which are referred to him. Sir Alexander and Lady Ewing also visit and advise on cases presenting special problems.

Details of the work of the Clinic during the year are given below:

Number of clinics held			58
Number of children attended			90
Number of pre-school E.N.T. cl	inics		
(Mr. Jenkins)			11
Number of children seen at pre-	school E.N.T	. clinic	95
Total number of attendances			185
Results of new cases:			
Not deaf			14
Continued guidance			18
Awaiting final diagnosis			34
Issued with hearing aids			9
Receiving home tuition			13
Admitted to special schools			2
Visits by Clinic Consultant			
Number of visits			2
Number of children seen			24
Results of Consultant's Inve	estigations:		
Continued guidance			17
Not deaf			6
To be issued with hearing aid	i		1
For admission to special scho	ol		-
Screening at Infant Welfare	e Centres :		
Number of sessions			2
Number of children passed so	creening		28
Number of children failed scr	reening		-

Dr. Marjorie L. Campbell, who is in charge of the Leicestershire Pre-School Audiology Clinic, writes:

"Professor Sir Alexander Ewing retired this year from the Chair of Audiology and Education of the Deaf at Manchester University and paid his farewell visit as Consultant to our Clinic in December 1964.

This was a sad occasion for the Clinic staff, all of whom had received training at the Department of Audiology, Manchester University, and who, with one exception, have worked in the Clinic since it was started in 1956. The first Lady Ewing—Mrs. Irene Ewing as she then was—was our much loved

Consultant from the beginning until her death in 1959 and Sir Alexander then retained our association with the honoured name of Ewing by agreeing to become our Consultant. Latterly he has been accompanied by the second Lady Ewing who has contributed from her own great experience.

We shall always remember with affection and gratitude the wise council, stimulation and encouragement which we invariably received with each visit and wish Sir Alexander and Lady Ewing many happy years to come."

We are glad to be able to report that Sir Alexander's successor in the Chair of Audiology has agreed to become our Consultant, so retaining our connection with the Manchester Department.

Congenital Malformation

In the Autumn of 1963 the Ministry of Health asked Local Authorities to submit monthly returns of congenital abnormalities discovered at birth. This scheme commenced in January 1964: the information is received on the birth notification cards and is checked and coded by a Medical Officer of my Department on a standard form. 127 live births and 26 stillbirths with either single or multiple malformations were reported in the year; of these births 79 were male, 72 female and 2 of indeterminate sex. 62 malformations were slight and the remainder varied from serious to being incompatible with life. The information is also recorded in the County Handicap Register.

CONGENITAL MALFORMATIONS-1964

Stillbirth	hs						
	Anencephalus						9
	Spina Bifida						1
10	Hydrocephalus						3
	Anencephalus						2
	Spina Bifida						2
	Hydrocephalus						2
	Spina Bifida						-
	Anencephalus)	
						}	1
	Indeterminate sex)	
	Anencephalus)	
	Spina Bifida					>	1
	Thoracic hemivertab	rae					
	Hydrocephalus)	
	Spina Bifida						1
	Indeterminate sex						-
	Defect of alimentary	system					
	Hydrocephalus)	
	Spina Bifida						
	Talipes					>	1
	Multiple malformat	tions of	uro-gen	ital and	alimenta	ary	
	systems						

	Transposition of great v	essels)	
	Interatrial septal defect					,
	Cleft palate					1
	Cleft lip,					
	Renal agenesis					1
	Other					3
	Other					3
						_
			Total			26
						-
Live B	irths					
	Arnold Chiari malforma	tion				1
	Encephalocele	ition				1
	Hydrocephalus					3
	Spina Bifida					16
	Defects of ear, not othe	errica statad				1
	01.6.11	iwise stated		**		7
						9
	Cleft palate Intestinal atresia					1
						1
	Hirchsprungs disease	• • •				1
	Other defects of aliment					2
	Congenital heart disease	, not otherw	ise stated			
	Tetralogy of Fallot					1
	Interatrial Septal defect					2
	Interventricular Septal					1
	Defect of kidney and u					1
	Hypospadius, epispadia					12
	Other defects of male g					2
	Defects of female genita					1
	Defects of lower limb,		e stated			4
	Reduction deformities of	of limbs				2
	Polydactyly					7
	Syndactyly					6
	Dislocation of hip					1
	Talipes					26
	Other defects of hand					1
	Defects of skull and fac	e				2
	Other defects of spine					1
	Chondrodystrophy					1
	Branchial cleft					1
	Vascular defect of skin		Tourse de la contraction de la	and n	nucous	
	membranes, including	g lymphatic	defects			10
	Other defects of skin					10
	Mongolism					6
	Other chromosomal syn	dromes				2
	Other					2
						_
			Total			145

Observation Register

A pilot scheme is being prepared for the Melton and Belvoir R.D.C. and Melton Mowbray U.D.C. areas to commence in January, 1965.

This register will contain the names and addresses of babies born in these areas who by reason of the family, prenatal, birth perinatal or postnatal histories are likely to be at risk of developing mental or physical handicap so that such handicaps may be diagnosed and treated at the earliest possible date.

The information will be received from domiciliary midwives on a prescribed form and from St. Mary's Hospital, Melton through the kind cooperation of the Matron, Miss Jack.

Cerebral Palsy

Dr. R. W. Kind, Assistant County Medical Officer, has submitted the following report:

At the Leicester Royal Infirmary Dr. Matheson, Consultant Paediatrician, and Dr. Simpson, Consultant in Physical Medicine, provide a combined clinic for cerebral palsy cases. My association with this clinic is now in its tenth year and it would appear opportune to report on its work.

During this ten year period a total of two hundred and fifty cerebral palsied children under the age of sixteen have been examined and their progress followed.

With an incidence of 1.7 per thousand children cerebral palsy now provides the commonest form of physical handicap. The unique characteristic of cerebral palsy is that children affected by it may show not only disablement in the spheres of motor control and co-ordination, but are likely to have impairment of vision, hearing, touch and awareness of bodily movement and position. More important even than these effects is the likelihood of disturbance of perception. At least half of the cerebral palsied children in our schools have such disturbances. In recent years attention has been focused on a probably much larger group of children who have been termed cases of "minimal cerebral dysfunction" who display such disturbances. The importance of early diagnosis is vital to these childrens' education. Attention needs to be drawn to the often subtle ways in which failure to learn can be due to perceptual deficits. It would appear that teachers in training are insufficiently acquainted with the problems of perceptual failure and, since the initiative for ascertainment tests lies largely with them, many cases must be presumed to go undiscovered.

Summa	ry of Cas	es			
Male			81	Pre-school age	33
Female			83	Aged 5 to 16 years	131
	Total		164	Total	164
			_		_
Educabi	lity				
Pre-schoo	ol age:			School age:	
Educable			7	Educable	89
Uneduca	ble		20	Ineducable	40
Not yet a	issessed		6	Not formally assessed	2
					_
	Total		33	Total	131

Disposal of School Age Group

Educable			Ineducable		
Day School		63	Training Centre		9
ESN Schools		7	Residential Care		5
CP Schools		17	At home		26
Home Tuition		2			
		-			-
Total	١	89	Tota	1	40
		_			-

The continued assessment of children with cerebral palsy is time consuming. I provide a monthly clinic at which to investigate cases referred to me from the Royal Infirmary combined clinic or by colleagues working with the authority. 118 of the current list of cerebral palsied children have been fully assessed and the following table shows the distribution of I.Q.s obtained using the Terman-Merrill Form L/M.

I.Q. Distribution

Туре	40 — 50	50 — 60	60 — 70	70 — 80	80 — 90	90 — 100	100 — 110	110 — 120	Over
Left Hemiplegia	 2	2	4	4	4	7	5	1	-
Right Hemiplegia	 -	4	4	5	4	7	8	-	1
Tetraplegia	 1	2	2	2	3	3	4	-	1
Paraplegia	 -	-	1	-	2	1	2	-	2
Athetoid	 1	1	1	-	2	-	-	1	1
Ataxic	 2	-	3	-	3	3	2	1	-
Mixed	 1	2	1	1	-	4	-	-	-
Totals	 7	11	16	12	18	25	21	3	5

Welfare Foods

There are now 129 distribution centres in the county, of which 72 are at Infant Welfare Centres, and the remainder at post offices, shops and private homes.

Great help is given by the Women's Voluntary Service, who deal very efficiently with the distribution in the larger towns, and who also find distributors, if requested, in the rural areas.

Figures for issues of Welfare Foods continue to show a decline.

The table below shows issues for the past five years.

	Dried Milk tins	Orange Juice bottles	Cod Liver Oil bottles	Vitamin A & D Tablets packets
1960	 78,114	206,492	25,274	25,126
1961	 70,801	129,119	16,998	19,687
1962	 58,740	78,449	7,039	13,732
1963	 51,103	86,391	6,365	12,733
1964	 45,109	84,813	5,689	12,167

SECTION 23

Midwifery

This service is administered in the main by the Leicestershire County Nursing Association, acting as agents of the County Council. Only in certain urban areas does the County Council employ a small number of whole-time midwives.

Number of Midwives Practising

A total of 160 midwives practised in the area at 31.12.64. Of these, 102 were domiciliary and 58 institutional midwives. The County Council employed 14 whole-time midwives, 89 were employed by the County Nursing Association, 6 were in private practice and 41 of the 58 institutional midwives were in hospitals in the National Health Service.

Number of cases attended

A summary of the cases attended in the County by domiciliary and institutional midwives during 1964 is given in the following table. 1,923 cases were delivered in institutions but were discharged before the tenth day and thus came under the care of the domiciliary midwives.

Number of domiciliary confinements attended by midwives under N.H.S. arrangements			Number of cases delivered in hospitals and other institutions but discharged and attended by domiciliary midwives before
Doctor not booked	Doctor booked	Total	the 10th day
75	3,039	3,114	1,923

Confinements in Institutions, 1964

1. Confinements occurring in institutions in the county:

Institution	County Cases	Non-County Cases	Total Cases
Ashby and District Hospital	286	47	333
Kırby Muxloe, Roundhill Nursing Home	754	211	965
Loughborough General Hospital	266	4	270
Loughborough Radmoor Nursing Home	108	8	116
Lutterworth Cottage Hospital	87	4	91
Market Harborough and District Hospital	212	39	251
Melton Mowbray St. Mary's Hospital	512	20	532
Totals	2,225	333	2,558
		-	

2. Confinements of county cases occurring in institutions outside the county:

Institution			(Cases
Leicester Royal Infirmary Maternity Hospi	ital			1,260
Leicester General Hospital				655
Leicester, St. Francis Private Hospital				212
Nuneaton, George Eliot Hospital				213
Leicester, Westcotes Maternity Hospital				180
Nottingham, Women's Hospital				95
Derby City Hospital				83
St. Mary's Hospital, Harborough Magna				50
Burton-on-Trent, Andressey Hospital				44
Burton-on-Trent, General Hospital				22
Oakham, Memorial Hospital				34
St. Mary's Hospital, Kettering				21
Nightingale Maternity Hospital, Derby				18
Grantham and Kesteven General Hospital				13
Grantham, Hill View Hospital				12
Queen Mary's Maternity Home, Derby				12
There was a total of 64 confinements at 33	2 hospita	als which	h had	
fewer than 10 confinements of Leicesters				64
				2,988

All Confinements (Institutional & Domiciliary)

A marked swing has been recorded in the number of institutional confinements occurring during the year, and this heading accounted for 64% of all confinements. In the table below figures for the previous four years are given for comparison.

Confinements	1960	1961	1962	1963	1964
Institutional	4,167	4,505	4,643	4,882	5,546
	58.23%	59.02%	58.36%	59.85%	64.17%
Domiciliary	2,989	3,128	3,313	3,275	3,097
	41.77%	40.98%	41.64%	40.15%	35.83%
Total	7,156	7,633	7,956	8,157	8,643

Inspection of Midwives

Inspection of midwives and also the general nurses is carried out by officers on the staff of the County Nursing Association. During the year a total of 157 routine inspections were made of general nurses and 136 of midwives (this figure includes County Council, Independent and Hospital midwives).

Transport for Nurses & Midwives

At the end of 1964 a total of 146 cars were in use, 67 being supplied by the County Council.

	County Council Cars	County Nursing Association Cars	Private Cars
County Council Midwives	 6	-	8
C.N.A. Administration Staff	 -	1	2
Nurse/Midwives and Nurses	 55	-	68*
Spare Cars	 6	-	-
Totals	 67	1	78

^{*} Including 3 scooters.

Post-Graduate Courses

During the year four County Council midwives and 12 midwives employed by the County Nursing Association attended refresher courses.

Houses for District Nurses and Midwives

The following is a summary of the housing situation:

	C.N.A. Nurses	L.C.C. Midwives
Owned by County Council	17	1
Owned by County Nursing Association	9	-
Owned by District Nursing Association	6 ~	1
Owned by Nurses	59	5
Council houses let to C.N.A. or L.C.C	9	1
Council houses let direct to Nurses	20	7
Private houses let to C.N.A. or District Associa-		
tions	3	-
Private houses let to Nurses	6	-
Furnished rooms	1	-
		_
Total	130	15

SECTION 24

Health Visiting

The Health Visiting staff visited a total of 48,857 cases. Details of these are given below. Duties in connexion with the School Health Service are not included.

Visits made to:				Cases	
Children born in 1964				8,089	
,, ,, 1963				7,695	
,, ,, 1959-62				23,877	
Total number of children					39,661
Persons aged 65 or over					2,962
Special visits at request o	f G.P.	or hospi	tal to 1	persons	
aged 65 or over					1,189
Mentally disordered person	ns				106
Special visits at request of	G.P.	or hospit	al to m	nentally	
disordered persons					41
Persons discharged from	hospit	al other	than	mental	
hospital					143
Special visits at request o	f G.P.	or hospi	tal to	persons	
discharged from hospital					97
Visits to tuberculous house	holds				879
Households visited on acco	ount of	other infe	ctious	diseases	88
Other cases					2,395
Visits regarding diabetics					728
Lectures					498
Visits regarding unmarried	mother	rs			70
Total ca	ses				48,857

Courses

Eight members of the health visiting staff attended Refresher Courses during the year.

Investigation of applications for admission to maternity accommodation

The following table shows the numbers of such investigations, etc., during the past five years.

	1960	1961	1962	1963	1964
Investigations carried out	 1,285	1,310	1,242	1,372	1,279
Recommended for admission	 1,050	996	1,001	1,064	988
Not recommended for admission	 235	314	241	308	291

Investigation of applications for Chronic Sick accommodation

A total of 944 cases were investigated during the year, 41 more than the previous year.

The Health Visitors duties do not cease with the submission of the appropriate forms to the hospital authorities, as they continue visits in any cases where such help is advisable.

Health Visiting

The main step forward this year was the beginning of Health Visitor attachment to Group Practices working closely with general practitioners. Loughborough was the first area to go over to this service and the health visitors' districts were re-distributed to coincide with the general practitioners' patients instead of geographically as before. So far this has proved beneficial to both general practitioners and health visitors and a better understanding of each other's work has been achieved and I would say general practitioners have now a better understanding of the scope and depth of health visitors' knowledge and the help they can give them.

We have not been able to have complete attachment yet, partly because of shortage of staff and partly our desire to see how the experiment worked.

To date there are 17 health visitors in partial attachment and from the health visitors' point of view this is proving most stimulating.

Visits to old people continue to take up much of health visitors' time in ensuring they receive the social services they need. This can be time consuming and if a visit is missed through pressure of work the old person can become very fretful and feel neglected.

Plans to increase staff for extension of services are receiving a set-back at present due to a spate of retirements and inability to recruit new staff in sufficient numbers.

This year saw the preliminary discussions on the new programme of Health Visitor training and the establishment of the new post of Field Work Instructor.

The Health Visitors who went on Refresher Courses this year expressed their appreciation of being able to keep up with the latest trends.

Our Diabetic Health Visitor—Miss Baxter—was chosen to go to Toronto to give a paper on the health visitor's work in the care of patients suffering from Diabetes: this we regard as a great honour.

SECTION 25 Home Nursing

Equiv. Wholetime of (12) The following tables give details of Home Nursing staff and work undertaken by them during 1964. All the nurses are employees (13) Student Home Nurses Part-time (12) 1 Wholetim e (= 1 Equiv. Wholetime of (9) 8.0 (01) of the Leicestershire County Nursing Association acting as agents on behalf of the County Council. Enrolled Assistant Nurses Part-16 6 Wholetime 8 1 Equiv. Wholetime of (6) 31.0 0 State Registered Nurses (S.R.N., R.S.C.N., and R.F.N.) Part-9 62 Wholetime 35* 9 Equiv. Wholeof (3) Supervisory Nursing Staff 1.5 Administrative and Part-3 00 Whole-time 3 Vol. Org. 3

90
ses
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nn
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65
male
14
4
83
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-
30

Patients included in (2)-(7) who have had more than 24 visits during the year	(11)	1,510	108,078
Children included in (2)-(7) who were under 5 at the ime of the first visit during the vear	(10)	383	2,388
s in ho or or or the the	(6)	3,463	94,646
Totals	(8)	7,089	150,842
Others	(1)	I	1
Maternal Compli- cations	(9)	59	486
Tuber- culosis	(9)	48	2,333
Infectious Diseases	(4)	1	
Medicel Surgical	(3)	2,253	28,279
Medic*1	(2)	4,729	119,744
nimb success Sir law to success T gas county from at great \$7.80 bar sirin	(1)	Number of cases attended by Home Nurses of Vol. Org. during year	Number of visits paid by Home Nurses of Vol. Org. during year

SECTION 26

Vaccination against Smallpox and Poliomyelitis and Immunisation against Diphtheria and Whooping Cough

Vaccination against Smallpox

The following table shows the number of records of vaccination received by the Department during 1964. Most have been performed by general practitioners during either late 1963 or 1964.

Age at Vaccination	0–3 mths.	3-6 mths.	6–9 mths.	9–12 mths.	l yr.	2–4 yrs.	5-14 yrs.	15+ yrs.	Total
Vaccination	129	69	38	139	1,144	314	95	4	1,932
Re-vaccination	_	_	_	_	_	8	40	1	49

In 1959-61 inclusive (1962 omitted for comparison owing to abnormal figures) on average 3,490 Primary Vaccinations were recorded each year, about 55% of this number was recorded in 1964. The figures show that many children are being vaccinated in the second year of life, but there is a considerable measure of resistance from some parents and also some family doctors still prefer vaccination against smallpox in the first months of life. A leaflet is now sent to parents of new-born children advocating vaccination in the second year of life and it is hoped this will help to establish a pattern of vaccination at the later age.

Poliomyelitis Vaccination

The use of Salk Vaccine remains at a low level and the number of children protected by a quadruple vaccine designed to protect against Diphtheria, Whooping Cough and Tetanus as well as against Poliomyelitis remains static. The most significant figures suggest at least 62% of Leicestershire children born in 1963, and 68% born in 1962, have completed primary protection against Poliomyelitis.

The records of Poliomyelitis protection received during 1964 relate to vaccine given mainly in late 1963 or 1964 and are summarised below:

rimary Courses	No. of persons who have received a second injection of Salk Vaccine or third injection of Quadruple Vaccine	Oral Vaccine, three doses
Children born in 1964	75	531
Children born in 1963	169	3,925
Children born in 1962	50	939
Persons born 1944-61	36	895
Persons born 1934-43	7	173
Others	3	104
Totals	340	6,567

Persons having third inje ruple Vaccine after sec				-	
Quadruple Vaccine					32
Persons having one dose of Salk or three injection			two injec	tions	147
Reinforcement of polio probirthdays). Children a	given booster inj	ection of			
after primary protectio					43
Children given one do primary protection	se of Oral Vaco	ine follov	ving com	iplete 	2,287

Vaccination against Whooping Cough

Almost without exception protection was conferred by means of three injections of "Triple" Vaccine. During 1964 records were received of a total of 6,768 children who had completed a primary course of protection against whooping cough, of these 6,597 were under the age of five years.

Immunisation against Diphtheria

Number of children for whom records were received during the year 1964 are shown below:

Born in	1964	1963	1962	1961	1960	1954- 1959	1950- 1954	Totals
Primary Immunisation	2,572	3,708	391	114	55	127	54	7,021
Booster Injections	_	986	2,071	210	197	3,257	154	6,875

The returns show that about 75% of children in the County, born in 1963, have received primary protection against Diphtheria. This compares favourably with the national average of 69% for the same group of children.

Protection against Tetanus

The dangers associated with the use (especially repeated use) of Antitetanus serum (A.T.S.) following injury are well known and within the County encouragement is given to secure active protection to avoid these troubles. In spite of this we have no evidence to show that active immunisation is increasing following the use of A.T.S.

The total number of children having completed a primary course of protection during the year is uncertain but almost all the children having primary protection against diphtheria have a vaccine which also protects against tetanus. The number of records received in the year for primary courses against tetanus only was 301.

Though not part of the service organised under this Section of the National Health Service it may be recorded here that the department has given advice on health and International Travel Vaccination regulations to travellers on a number of occasions during the year.

SECTION 27

Ambulance Service

M.1 Motorway

On the 1st October the first section of the M.1 Motorway in Leicestershire to the Misterton Access Point was opened. To provide adequate cover for this section of the Motorway, and also for the further extension next year to Braunstone, the Lutterworth Ambulance Station became a 24 hour Station. The staff was increased to provide for the manning at all times of an additional ambulance based at Lutterworth specially equipped to deal with an accident occurring on the Motorway. The conditions obtaining on Motorways are quite different from those on other roads, and training has been given to all staff on the procedures to be adopted.

Training Scheme

The Training Scheme instituted in 1963 continued during 1964. All members of the staff appointed before March, 1964 completed a Standard Training Course during the year, and Advanced Training for these members commenced in October. This Advanced Training includes instruction on Motorway procedure mentioned above. In addition, the Advanced Course includes three days' instruction on Civil Defence Subjects.

Radio Telephone Communications

The change-over from A.M. (Amplitude Modulation) to F.M. (Frequency Modulation) Radio Telephone equipment was completed during the year and the improved reception with the F.M. system has been of great value in increasing the efficiency of the Service, particularly in the areas where reception was poor or non-existent with A.M. equipment.

Civil Defence

The training of members of the Ambulance and First Aid Section of the Leicestershire Division of the Civil Defence Corps by members of the Ambulance Service staff who are qualified instructors, has continued throughout the year at various centres in the County. During the year 19 volunteers undertook the Standard Test and 15 of these were successful. Two instructors, one locally trained and one Home Office trained, attended qualifying and requalifying Courses at the Home Office Civil Defence School, Falfield, obtaining Full and Credit Certificates respectively. In addition, two locally trained instructors attended Section Officers' Courses at Falfield.

Safe Driving Competition

117 Drivers were entered in the Safe Driving Competition for 1964 organised by R.O.S.P.A. and of these 85 (or 73%) gained awards.

Statistics

The numbers of staff and vehicles in use by the Ambulance Service at the end of the year are as follows:

Ambulances (2-4 St	tretche	rs)	 32
Dual-Purpose Vehic	cles (1	Stretcher)	 18
Sitting Case Vehicle	es		 4
Service Van			 1
			-
Total			 55
			-
Station Officers			 7
Shift Leaders			 27
Driver/Attendants			 87
Female Attendants			 71
Senior Controller			 1
Controllers			 3
Sub-Controller (L.I	R.I.)		 1
Control Assistants			 5
Mechanics			 5
Driver/Cleaner			 1
Total			 1441

The Ambulance Service carried 158,031 patients a total of 1,314,163 miles as follows:

National Health Ser	vice		Patients carried 139,136	Miles travelled 1,257,926
Other Services			18,895	56,237
		Total	158,031	1,314,163

Consister		Pati	Patients carried	pa			M	Miles travelled	po	
Station	Year 1960	Year 1961	Year 1962	Year 1963	Year 1964	Year 1960	Year 1961	Year 1962	Year 1963	Year 1964
5 Ireton Road, LEICESTER	35,774	35,928	31,828	32,157	27,670	295,180	281,514	268,573	248,915	229,860
Avenue Road, LEICESTER	21,046	22,166	24,759	27,064	29,904	152,335	152,497	174,879	231,831	246,362
Broad Street, COALVILLE	28,430	28,862	31,174	31,237	28,579	175,968	189,014	206,717	231,018	231,169
HINCKLEY	13,663	13,539	14,890	16,060	15,735	103,105	106,979	111,064	131,923	135,783
LOUGHBOROUGH	15,734	16,730	19,807	21,178	23,301	114,780	120,561	140,693	154,486	164,106
LUTTERWORTH	5,312	5,817	6,155	7,308	8,004	47,693	52,491	52,688	63,400	68,652
MARKET HARBOROUGH	e,6669	8,213	9,113	9,916	10,328	68,442	78,494	80,161	87,935	94,556
MELTON MOWBRAY	8,036	10,794	12,871	13,737	14,510	88,182	111,246	134,172	141,898	143,675
Totals	. 134,664	142,049	150,597	158,657	158,031	1,045,685	1,092,796 1,168,947		1,291,406	1,314,163

SECTION 28

Prevention of Illness, Care and After-Care

After-Care of Patients Discharged from Hospital

Patients discharged from hospital who are in need of nursing care in some form or other are looked after by the Home Nursing Staff of the Leicestershire County Nursing Association. When no nursing care is required a health visitor can usually deal with the case.

Convalescent Home Treatment

During 1964 the number of persons sent to convalescent homes was 84, and these were sent to the following homes:

Sheringham House Convalescent Hon	ne	 38
Hunstanton Convalescent Home		 18
Overstrand Hall Convalescent Home		 9
Roecliffe Manor Convalescent Home		 13
Metcalfe-Smith Home, Harrogate		 3
"The Towers", South Darenth		 1
Ormerod Home, St. Annes-on-Sea		 1
"Lanthorne", Broadstairs		 1
		-
		84

Diabetics

During 1963 The Health Visitor for the Care of Diabetics made 728 visits to such patients and also attended the diabetic clinic held at the Leicester Royal Infirmary.

Health Education

During 1964 two Health Visitors were appointed to the Health Education Section to replace staff who had left the area. They continued to promote various aspects of Health Education and accident prevention in the home.

Ante-Natal Classes continued to be well attended at all clinics with the midwives attending to give practical demonstrations of the Gas and Air Analgesics.

Promotion of Parentcraft Courses continued in senior schools with the cooperation of the Heads of Schools and departments, with Junior Schools requesting talks on personal hygiene with the emphasis on "Dental Health". A campaign was also promoted in Senior Schools, Youth Clubs, Young Wives' Groups, Women's Institutes and Parent-Teacher Associations on Venereal Diseases. This proved very rewarding in the lively discussions which took place before and after the use of Ministry sponsored films and filmstrips and posters and leaflets on this subject. Many teachers took an active part.

The Prevention of Accidents in the Home continued on a large promotion scale to get more local councils interested—with members of the Health Education staff attending local meetings both as liaison officers between County Home Safety Committee and local committees and in an advisory capacity giving help in obtaining and effectively using posters and leaflets in the area.

Preparations were commenced for a stand on Home Safety at the County Show, Braunstone Park for 1965.

Venereal Diseases

For some years now, increasing national concern has arisen over the rising figures for early cases of V.D.

This increase has been a steady one since 1955 and contrasts sharply with the steady decrease recorded during the ten post-war years.

When left untreated these highly infectious diseases can lead to serious illness and, contrary to general medical expectations, they have sometimes proved resistant to powerful antibiotics.

Because of the unsavoury nature of this subject V.D. Educational campaigns have proved difficult to publicise and for the general public it is not uncommon for the only source of information to be a poster displayed in a public convenience or Post Office.

In October this year the Ministry of Health issued a new leaflet on the subject for distribution to social workers and others in positions of influence and these have been issued to our Health Visitors, Psychiatric Social Workers, Education, Welfare & Child Care Officers.

Details of special treatment centres held at local hospitals are available in the department.

Provision of Incontinence Pads

Circular 14/63, issued by the Ministry of Health, encouraged local authorities to provide incontinence pads as part of their care and after-care arrangements. From the 1st October to the 31st December this year we have been running a pilot scheme in the Loughborough and Melton areas whereby domiciliary patients who are incontinent receive free issues of disposable pads. Stores of pads are held at Hastings House, Loughborough and Catherine Dalley Home, Melton Mowbray and are requisitioned by District Nurses.

This scheme has been greatly appreciated by patients, relatives and domiciliary nurses. No problems have arisen over the disposal of pads.

It is hoped that this scheme will be extended to the whole of the county area early next year.

Tuberculosis

The following is the joint report of the County Medical Officer and the Consultant Chest Physician.

				Year 1964		Year 1954	Average for ten years 1954 to 1963
Respiratory tub	erculosi	s:					
Notifications				71	82	186	120
Deaths				17	11	55	25
Death-rate				0.04	0.03	0.16	0.07
Non-respiratory	tuberc	ulosis:					
Notifications				16	19	- 56	30
Deaths				2	4	3	5
Death-rate				0.005	0.009	0.08	0.01
Total for both respiratory to			non-				
Notifications				87	101	242	150
Deaths				19	15	58	30

During the past year there has been a decrease in notifications of respiratory tuberculosis from 82 to 71, i.e. 13%. This reverses the trend of last year, which showed an upward swing of 17%. Of these 71 notifications of respiratory tuberculosis 3 occurred in coloured immigrants and 4 occurred in persons under the age of 14, before they could normally be expected to have been protected by the B.C.G. scheme. The deaths from respiratory tuberculosis this year show an increase from 11 in 1963 to 17 in 1964 and on looking through the age groups of these persons, there was no death below the age of 53. Sometimes the word tuberculosis is very loosely applied to a death certificate. Deaths seem to be regarded as arising from tuberculosis when it is perfectly true that the person has had tuberculosis, but the presence of the disease has played little or no part in the cause of death. One must, however accept this. Occasionally the reverse is true, but with the present average hospital death certificate being signed by a person who has not qualified in this country, there does appear to be undoubtedly more scope for inaccuracy than before. Turning to non-respiratory tuberculosis, these deaths have decreased from 4 to 2 in the year, but the numbers are in any case so low that further comment is unnecessary.

We have once more kept a register of resistant cases, as is now compulsory throughout the country, and the number of resistant cases in Leicestershire in 1964 was 26, which is one up on last year. As stated previously we do not appear to be getting new cases arising from these resistant cases and the potential infectivity of them seems to be limited. They are quite different from

the old type of tuberculosis case who never had any chemotherapy. The feature of the chronic in the old days was the volume of sputum, but the vast majority of these resistant cases have no sputum in the ordinary sense of the word, although tubercle bacilli can be cultured from laryngeal swabs, and this is undoubtedly the explanation of their infectivity being so limited. There is of course, a different problem in certain parts of the country with a large immigrant population, where people are presenting with active pulmonary tuberculosis requiring intensive treatment. They have become resistant because of inadequate treatment in the beginning which was largely inadequate on financial grounds. The drug Isoniazid is a very cheap one which people in foreign countries can afford. If however, it is not used in conjunction with other drugs, resistance soon develops and it is well known that it is the lack of finance, resulting in the use of the cheapest single form of antituberculous chemotherapy which is the cause of resistant tuberculosis in many foreign immigrants.

Chest Clinic Service

There is nothing further to report about the development of the Chest Clinic Service in Leicestershire. Once more we would like to pay tribute to the District Nurses, who have helped us in the treatment of nine cases of respiratory and non-respiratory tuberculosis.

Mass Radiography Unit

The Mass Radiography Unit visited in 1964 Loughborough, Market Harborough, Lutterworth, Carlton Hayes Hospital, Wigston, Narborough and Enderby, and in addition certain specific industrial surveys were under taken. The groups X-rayed consisted of: the general public, cases referred by doctors, and strongly tuberculin positive school children. This was the first time that the unit had visited Narborough and Enderby. 27,648 people were X-rayed, an increase of 6,000 over 1963, and 16 cases (14 male and 2 female) of pulmonary tuberculosis requiring close supervision were discovered, giving a rate of 0.58 per 1,000 as against 0.77 per 1,000 in 1963. 6 cases of carcinoma of the lung were discovered, as against 8 cases in 1963. 546 students were X-rayed and 2 were found to have pulmonary tuberculosis, giving a rate of 3.66 per 1,000.

Home Help Department

In 1964 the assistance of a Home Help was required in 14 households. In 5 of these the patient was classified as infectious and in the other 9 the patients were non-infectious. We would like to thank the Home Help Service for the help they so willingly give to us with our patients.

Prevention, Care and After-Care

The total number of new notifications, both respiratory and non-respiratory, was 87 and from these 1,230 contacts were examined for the first time, 9 of whom were found to be suffering from tuberculosis. This is a larger number of contacts examined in proportion to last year and a smaller number of active cases found. All contacts under the age of 40 were tuberculin tested and 534 were vaccinated with B.C.G.

During the year a patient was admitted to Markfield Hospital, suffering from open pulmonary tuberculosis, who was a midwife and had been working in the babies' nursery in a large maternity home in the County. Fortunately it was possible to determine fairly accurately the period during which she had been a possible source of infection and it was decided to offer at the appropriate time tuberculin testing to all infants considered to be at risk.

Those totalled 436, of whom 350 lived in the County; most of the remainder were resident in the County Borough of Leicester, although a few were from neighbouring Counties. Of the 350 in the County, it was possible to contact all but one, and the great majority of those living elsewhere were also dealt with. Fortunately, no positive results were obtained.

Only in one case was the offer of tuberculin testing refused. The patients' doctors were kept informed of the position, and thanks in no small extent to their handling of their patients, there was remarkably little undue alarm among the mothers relieved though they were that all results were satisfactory.

The scheme for the X-raying of primiparae was continued and 1,164 expectant mothers were X-rayed, none of whom were found to have active pulmonary tuberculosis. This is however, no indication of the value of the scheme. Quite a large number were found to have inactive tuberculosis and in all these cases arrangements are made for the expectant mother to have a postnatal X-ray and for the baby to have B.C.G. This is a very true aspect of preventive medicine.

We always comment in discussing the work of the chest service, about the never-ending problem of carcinoma of the lung. In 1964 175 persons died from this condition in Leicestershire 144 of whom were men and 31 women. As a matter of comparison, last year the figures were 145 men and 20 women. The fact that carcinoma of the lung is rising in women is well recognised by everyone working in the chest service.

B.C.G.—School Leavers

The scheme for B.C.G. vaccination of school leavers continued during the year and the figures are given in the table below.

Year	Total Number of School Leavers offered Vaccination	Number of consents given	Number given Tuberculin Test	Number Positive	Number Negative	Number Vaccinated
1959	4,729	3,506 (74%)	3,304	908 (27%)	2,339 (71%)	2,267
1960	5,639	4,420 (78%)	4,196	906 (22%)	3,210 (77%)	3,198
1961	7,465	5,980 (80%)	5,524	923 (17%)	4,453 (81%)	4,418
1962	6,655	5,398 (81%)	5,128	853 (17%)	4,177 (81%)	4,132
1963	6,538	5,108 (78%)	4,731	637 (13%)	4,081 (86%)	4,056
1964	5,408	4,315 (79%)	4,109	545 (13%)	3,359 (81%)	3,264

The Future

There is ground for satisfaction in the reduction of notifications in the past year. Nevertheless there is a very definite feeling of anxiety in the chest service as a whole about the fact that we appear to have reached a low level of tuberculosis which it will be very difficult to get any lower, and each year, despite the advance in chest medicine as a whole, the number of persons with a specific knowledge of tuberculosis, and furthermore a specific interest in tuberculosis, is tending to diminish. From the aspect of preventive medicine it would indeed be a tragedy if after such progress the tuberculosis problem got to a certain level and stayed there. We referred in our report last year to the fact that we must not be satisfied with a stand-still position, because this would eventually lead to tuberculosis slowly getting out of control and becoming once more a grave problem.

T.B.1-Return showing the work of the Chest Clinics during the year 1964

			Respiratory	ratory		4	Non-respiratory	spirato	ry
		W.	F.	Ch.	Total	W.	H.	Ch.	Total
Ą.	(2) Transfers from clinics under other H.M.C's or B.G's during the year (3) Children transferred to adults during the year (4) Cases lost sight of which returned to clinic during the year	633 17 2 1	405 19 1	3 1 1	1,085 39 3	12 1	101	82	208
B.	Number of NEW CASES diagnosed as tuberculous during the year: T.B. MINUS T.B. PLUS	36	4 11	es -1	15 48	6161	10 60	- 1	00 10
	Totals of A and B	697	440	54	1,191	86	110	59	225
o'	Number of cases in (1) Recovered	111 26 18 1	74 3 112 17	r- 01 00	192 29 32 3 19	I c2 4	25 2 5	0 01 01	45 42 11
	Totals of C	167	96	12	275	17	32	13	62
D	D. Number of notified cases of T.B. on clinic registers on 31st DECEMBER, 1964	530	344	42	916	69	78	16	163
			Res	pirato	Respiratory and Non-respiratory	Non-re	espirat	ory	
		M.	r.	F.		Ch.	h.	Tc	Total
ші	(a) Total number of new cases (excluding transfers) examined during the year (b) Number of those in (a) (1) Diagnosed as tuberculous who attended as Con- (2) Not tuberculous tacts and who were: (3) Not determined (as at 31st December, 1964)	1,981 1 128 2	981 1 128 2	2, 24	2,248 3 226 1	1,177 5 862 2	377 5 862 2	5,4	5,406 9 1,216 5

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.2-Tuberculosis (Respiratory and Other). Notifications, Deaths and Death Rates

Death Rates	Urban Rural County	0.21 0.11 0.16 0.01 0.005 0.008	0.12 0.08 0.10 0.02 0.03 0.03	0.08 0.10 0.09 0.02 0.005 0.01	0.07 0.04 0.06 0.02 0.01 0.01	0.07 0.03 0.05 0.006 0.04 0.02	0.05 0.05 0.05 0.01 0.01 0.01	0.05 0.05 0.05 0.006 0.005 0.005	0.06 0.04 0.05 0.02 0.00 0.007	0.003 0.004 0.004 0.005 0.004 0.005	0.02 0.03 0.03 0.005 0.01 0.009	0.08 0.01 0.01 0.01	0.03 0.05 0.04 0.00 0.008 0.005
ths	Whole	35 83	36	83.30	21 5	20	18	200	33	15	11 *	255	17
Number of Deaths	Rural	20	16	19	00 61	r- 00	10	=-	∞	10	r-00	12 3	12 2
Nu	Urban	35	20	14	133	13	00 61	9	12	1	4-1	13	2
ications	Whole	186	188	135	124 31	128 32	92	99	97 29	70	82 19	120 30	71 16
Number of Notifications	Rural	95 37	91	58	60	55	48 16	44 14	41	44	33	57	41
Numb	Urban	91 19	97	77	64 12	73	44	55 10	56	26 6	49 12	63 13	30
	Localisation	Respiratory Other	Respiratory Other	Respiratory Other	Respiratory Other	Respiratory Other	Respiratory Other	Respiratory Other	Respiratory Other	Respiratory Other	Respiratory Other	Respiratory Other	Respiratory Other
	Year	1954	1955	1956	1957	8261	1959	1960	1961	1962	1963	Average for above ten years	1964

T.B.3-Tuberculosis, Notifications and Deaths. Showing Age Periods, year 1964

			1							1
	spiratory	Females		.1	1	1	1	1	1	1
rhs	Non-Respiratory	Males		1	1	1	1	1	1	1
DEATHS	Non-Respiratory Respiratory	Females		1	1	1	1	61	8	10
		Males		1	1	1	1	9	9	12
		Females		1	1	60	19	1	1	111
ASES		Males		1	1	60	1	٦	1	10
NEW CASES	atory	Females		61	-	4	4	7	1.0	192
	Respiratory	Males		1	1	4	14	192	141	523
	AGE PERIOD			:	:	:	:	:	:	:
					:	:	:	:	:	Total
				0-	-6	16-	25-	45-	-69	

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 1964

	Estimated	Notifica Tuber		Deaths from Tuberculosis		
District	population mid-year		Non- Respiratory	Respiratory	Non- Respiratory	
Urban						
Ashby-de-la-Zouch	7,510	1	-	-	-	
Ashby Woulds	3,370	-	-	-	-	
Coalville	27,070	4	2	-	-	
Hinckley	42,270	8	2	2	-	
Loughborough M.B.	39,270	10	3	1	-	
Market Harborough	12,300	1	-	-	-	
Melton Mowbray	16,850	1	2	-	-	
Oadby	14,710	_	1	-	-	
Shepshed	7,500	-	-	_	-	
Wigston	24,240	5		2	-	
Totals	195,090	30	10	5	-	
Rural						
Ashby-de-la-Zouch	13,650	3	-	-	-	
Barrow-upon-Soar	61,490	9	2	2	-	
Billesdon	21,140	2	-	-	1	
Blaby	62,980	14	3	2	-	
Castle Donington	10,130	2	-	1	1	
Lutterworth	13,300	1	-	1	-	
Market Bosworth	28,460	7	-	6	-	
Market Harborough	9,540	1	-	-	-	
Melton and Belvoir	18,740	2	1	-	-	
Totals	239,430	41	6	12	2	

Chiropody Service

The review of this service undertaken in 1963 was completed this year. No major alterations in the administration of the service were considered necessary. The cost of the Scheme has increased steadily since its inception in 1960 but the figures for 1964 indicate a slowing down of this expansion—probably because the county's urban areas are now adequately covered. This has presented difficulties in extending the service to sparsely populated districts and has resulted in an increased demand for domiciliary treatments.

As a result of the review mentioned above and in an effort to assist smaller voluntary organisations who encounter financial difficulties, these organisations are now permitted to increase the basic charge of 2/- up to a maximum of 2/6d., the balance to be retained by the association towards the cost of accommodation and/or transport provided.

No variation was made in the scheme to allow for the payment of travelling expenses to chiropodists or for the provision of transport for patients.

At the end of the year 66 organisations were providing a service and the figures below show the rapid expansion of this service. 1961 was the first full year of operation and within four years the number of organisations has doubled and the number of domiciliary treatmen's has more than trebled.

Year	Number of organisations approved at end of year	Number of sessions	Number of sessional treatments	Number of domiciliary treatments	
1960	15	398	3,845	414	
1961	32	1,243	11,179	2,096	
1962	46	1,787	15,824	3,851	
1963	55	2,213	19,362	5,300	
1964	66	2,562	21,942	6,436	

SECTION 29 Domestic Help Service

It will be noted from the following statistics that the number of home helps on the register has again fallen slightly below the previous year's figure, also this year the decrease has made its mark insofar as there are corresponding decreases in the number of hours actually worked and the number of home helps' daily attendances. Local full employment, providing a wide range of work, hours and rates of pay, has definitely affected recruitment, hence the number of appointments made did not equal the number of resignations, but fortunately the latter number was the lowest since 1960.

				Year 1964	Year 1963	Year 1962
Full-time Home He	elps			38	33	33
Part-time Home He	lps			386	414	437
Total number of Households covered				3,804	3,611	3,369
Daily attendances of	Home	Helps		118,571	119,848	111,792
Home Help hours				566,878	579,591	551,776
Households assisted					charge of the	
Maternity				830	821	820
General illness				334	303	316
Tuberculosis				14	12	16
Chronic sick				202	215	200
Aged: Ill and Infi	rm			2,382	2,237	2,000
Night Help				1	3	1
Problem Families				10	12	7
Other Emergencie	s			5	8	9
Laundry only				26	-	-
Average home help h	nours pe	r household	l per			
week				$7\frac{2}{12}$	7 7	81

The number of households attended in all categories increased by a total of 193, compared with the previous year, and the average home help hours per household per week decreased by 25 minutes. To achieve this result Area Officers have obviously applied much skill in the allocation of help available week by week, which, of course must always be according to the known existing need in the home.

At the beginning of the year the Supplementary Service was inaugurated, as an extension of the present home help service, and the first auxiliaries were engaged. Time has proved that two were required on a short-term basis only but five have given long-term service.

The first auxiliary engaged mid-January is still able to look after her neighbour, aged 88. The official morning and evening services of this auxiliary,

65

E

plus the good neighbourly acts performed throughout the day by her and her brother (both on retirement pensions), together with the services of a home help, have definitely made it possible for this elderly lady to remain in her own home for yet another year, with a certain degree of personal care and safety.

In one short-term case an elderly lady of 93, suffering from advanced carcinoma, was able to remain at home for an additional three months, only because it was possible to engage a neighbour officially as an auxiliary to look to the patient's needs each morning and evening during this period of time, in addition to the attendances of the home help and others during the day. Her removal to hospital was thus prevented until shortly before her death.

Another point of interest is that although from the 1st of April onwards the partial abolition of charges was in operation, the two categories mainly affected, i.e. the aged and chronic sick, increased by a total of 132 cases in comparison with the 1963 figures, in which year there was an increase of 252 cases over and above the figures for 1962.

The Hinckley, Coalville and Market Harborough Washing Centres have again given good service throughout the year, a service which is very obviously much appreciated by the recipients. In Coalville the facilities have been extended to households where, although a home help was not being provided, difficulties were being experienced by relatives: it has proved possible to do this without any adverse effect on the working of the Centre and this principle is being extended to other areas. Households in need of help are referred by the home nursing service.

Four 12-day Courses of Instruction for Home Helps, attended by 55 home helps, were held during the year.

Mental Health Act, 1959

Mental Health Service

The annual report on this service for the year 1954 included a history of the service or facilities from 1832 up to that year. It would, therefore, seem appropriate to review the decade that has passed since then and to record the present position.

The 1954 report concluded with the hope that the Royal Commission then sitting would recommend a change in the law to enable patients with mental illness to be dealt with in the same way as patients with other illnesses. This did happen and the change was incorporated in the Mental Health Act 1959. The general theme of the recommendations and of the Act was a change of emphasis from institutional care to care in the community for all types of mental disorder. The Act came into force on November 1st, 1960. The changes were accepted over-enthusiastically in certain quarters with the result that patients were either not admitted to hospital or discharged at an early date without too much thought being given to the effect on the rest of the family. As usual, however, common sense is beginning to prevail.

Apart from the removal of formalities where the patient is willing to enter hospital, the main change affecting local authorities was the section which placed on them the responsibility to provide hostels for patients who did not require medical or nursing care but could not live at home for any reason. Training Centres, previously occupation centres, have now to be available to all children fit to attend. The authority has to employ a staff of mental welfare officers to give help to patients before admission to hospital and after discharge as well as to patients who do not require hospital treatment. The latter function is one of the most important branches of preventive medicine in the Health Department to-day.

Care and after-care is a matter of team work between the Mental Hospitals and the Mental Welfare Officers. Progress in this respect varies with the personalities and outlook of the people concerned. It is pleasing to report that progress is accelerating quite rapidly as the benefits of co-operation show results.

The county has been divided into four areas with a Mental Welfare Officer and a Senior Mental Welfare Officer for each area. Mental Welfare Officers are seconded to courses approved by the Council for Training in Social Work and there are at present two on such courses.

In addition to their work in the community, the officers attend clinics to assist the consultants at Ashby-de-la-Zouch, Hinckley, Loughborough, Leicester Royal Infirmary and Melton Mowbray. A Welfare Officer also regularly attends Glenfrith Hospital to assist with community problems of the subnormal patients there.

The building of a home for the senile mentally ill, who do not require hospital care, is a matter of some urgency, but extensive search has, so far failed to produce a suitable site.

Alterations to a building, previously used as a children's home, are planned to provide a hostel for twenty sub-normal men and the same number of women. When this hostel is opened, it is hoped that the reduced demand on the hospital service will enable beds used for this type of patient to be converted for the accommodation of low grade cases for whom there is an urgent waiting list. The only relief that can be given to them at present is short stay care in hospital under the scheme which Dr. A. A. Valentine operates to the benefit of so many at a considerable amount of trouble to himself.

The greatest change has taken place in the training centres in the past ten years. In 1954 the last centre that was open on a part-time basis became full time. The number of trainees has increased from 185 to 325 and this has, of course, meant many changes in buildings, some deliberately planned but some clearly expediences as a result of increased numbers.

Centres became more available as transport was increasingly provided. The whole county, with the exception of isolated areas in the extreme north and extreme south, was covered by 1955. The transfer of the Loughborough centre from hired premises to its own building in 1957 marked the beginning of a process that has still to be completed. The Wigston Centre moved to an old day nursery, which has since had to be extended, in 1958; and 1961 saw the opening of the first purpose-built centre in the county at Hinckley. All connected with the service have commented on the improved alertness, behaviour and health of the children on moving to a suitable building from church halls and even on the difference between the children at Hinckley and those in adapted buildings.

By 1960 there were 200 trainees of all ages in the centres and overcrowding was particularly bad at Wigston. Plans had been made to provide adult centres and, through the kind co-operation of the Leicester No. 3 Hospital Management Committee, the adults from Wigston were transferred as day patients to the workshops at Leicester Frith Hospital until an adult centre could be opened.

The service was by 1960 growing to such a size that it was necessary to appoint a full time Centre Organiser to take over and carry on the work so ably performed by Mrs. M. Newton, along with her work as Mental Welfare Officer. The centres would not be where they are to-day if the groundwork had not been so well done by her.

The next important event was the opening of the first adult centre at Coalville for 60 trainees in 1962, followed by the opening of a second adult centre for 100 trainees at Desford in 1963. The separation of adults and children was completed in 1964 when the adults at Melton Mowbray had to be moved to a disused school at Garthorpe, as an interim measure, because of overcrowding in the rented hall at Melton Mowbray. These centres are not only important for the extra places they give but for the complete change of outlook that resulted in all the centres and among the trainees as a result of separating adults from children. In the first place there was a sudden increase in demand for places for all ages. Parents of children wanted them to attend now that there were no adults and relatives of adults felt that they were going to work and not suffering the indignity of "going to school", as they described the all-age centre. The greatest change was in the adults and among their relatives. At the adult centre the trainee does ordinary work-most of it on sub-contract from factories-and almost overnight the whole outlook and behaviour of the majority of the trainees changed to a mature and more adult one both at the centre and at home. Each trainee receives a gratuity of a few shillings from the profit from the work carried out, and this has resulted in many amusing and touching incidents. There was the man in his thirties who refused to drink orange juice at home and demanded beer because he was now an ordinary working man. A mother broke down with emotion when her son brought home his first gratuity. Although it was only small it showed, at long last, that he was grown up and had justified himself. There was some doubt in the minds of people in industry when they were asked to provide work for the centres but the standard of work done by the trainees was such that there was soon plenty of work for everybody. A special word of thanks is due, therefore, to those firms that provided work in the first place.

As mentioned earlier there are now 325 trainees in the centres. The whole county is covered by transport by means of hired buses which do 325,000 miles per year.

The centres are situated as follows:

Adult Centres

Coalville Specially built centre shortly to be extended by taking

over the disused fire station.

Desford Rented industrial premises, ideal for the purpose, which

it is hoped to purchase in the future.

Garthorpe A small village school in an isolated area. Trainees will

transfer to a new centre proposed for the Mountsorrel

area.

Junior Centres

Loughborough A converted house with an annexe. A site is being negotiated for a purpose built centre in the future.

Coalville Rented rooms in a hall. A site is being negotiated for a

purpose built centre.

Hinckley Purpose built centre.

Wigston A converted day nursery with additions. To be further

modernised in the future.

Melton Mowbray A rented hall which is now quite unsuitable for the

numbers attending. It is hoped to open a purpose built

centre in 1966.

When all the new junior centres have been built and the Wigston Centre modernised the problem of training centres for children should be satisfied. Mention has been made of a proposed adult centre at Mountsorrel. While the numbers attending junior centres will remain reasonably constant, the demand for adult centres will continue to grow. Trainees are transferred at the age of sixteen but they may remain in the adult centres for the rest of their lives. This results in a steady in-flow which is not compensated for by any considerable number leaving. Further adult centres will, therefore, be required in the future.

All the centres are very fortunate in the interest taken in them by the various branches of the Society for Mentally Handicapped Children. No appeal from a centre for help is ever refused. Apart from helping the centres in many ways, the Society pays for a week's holiday at the sea for all trainees. The numbers are now so large, however, that difficulty is being experienced in raising sufficient funds to pay for this.

No review would be complete without a reference to the change in the public attitude to patients with mental disorder. Although there is considerable room for further improvement, treatment in a hospital for mental illness is now increasingly regarded as being similar to that for an ordinary illness. Patients, reluctant to attend in the first place, find that the old stigma is disappearing and willingly attend for further treatment if necessary. Parents of sub-normal children have ceased to be ashamed of them and find, by joining the Society for Mentally Handicapped Children, help and strength to deal with the problems presented by such children. The Society has done much to educate the general public and one of the best ways of helping a distraught mother who finds she has a mentally handicapped child is to put her in touch with other mothers who have met and overcome a similar situation.

A great deal of progress has been made in the past ten years and, if impatience is expressed about what has still to be done, it is salutary to again read the review written in 1954 and compare what took a hundred years to do.

Mental Illness Statistics

	•		Admissions by Mental Welfare Officers under Mental Health Act, 1959			
	per flan at		Males	Females	Totals	
Section 25		 	35	46	81	
Section 26		 	11	9	20	
Section 29		 	47	73	120	
Informal		 	53	99	152	
CI.	Totals	 	146	227	373	

Number of visits by Officers After-care and other psychotic patients

4,588

Training Centre Statistics

Number on Register 31st December, 1964.

103.4	M	ales	Fem	ales		
Centre	—16	+16	-16	+16	Total	
Coalville Junior	13	-	17	-	30	
Hinckley Junior	19	1 2 1	10	-	29	
Loughborough Junior	15	- 11	12	nus - es	27	
Melton Mowbray Jnr.	8	LV Total	12	-	20	
Wigston Junior	36	-	21	-	57	
Desford Adult	-	55	- n-	35	90	
Garthorpe Adult	-	7	-	9	16	
Coalville Adult	11-110	31		25	56	
Total	91	93	72	69	325	

NOTIFICATION OF BIRTHS

(Public Health Act, 1936-Section 203)

Notifications of births are received in the Department from the midwives in attendance at confinements. Information is exchanged with the Registrars of Births in order to discover any births not notified or not registered within the statutory time limits of the Regulating Acts. All births are scrutinised for cases of prematurity and illegitimacy and these cases are referred to the Health Visitors for special report and supervision.

Below are particulars of births which were recorded during the year:

Births occurring within	the co	untv:		Live Births	Still Births	Total Births
Domiciliary:	· me co	uiitj.		2711 1110	211111	Dittil
County patients				3,061	16	3,077
Other Authority p				21	1	22
Institutional:						
County patients				2,225	18	2,243
Other Authority p	atients			335	2	337
					_	
				5,642	37	5,679
					_	
County births occurrin	g outsic	le the (County:			
Domiciliary				27	-	27
Institutional				2,970	74	3,044
					_	
				2,997	74	3,071
Net births to County r	esidents	:				
Domiciliary				3,088	16	3,104
Institutional				5,195	92	5,287
					_	_
				8,283	108	8,391
					_	

REGISTRATION OF NURSING HOMES

(Public Health Act 1936—Sections 187-194)

All registered nursing homes are visited by officers of this Department and of the Leicestershire County Nursing Association. At present there are seven nursing homes registered in the county.

		Number of bed		
Address	Maternia di Matern	laternity	General	Total
Burton Hall, Burton-on-the-Wolds		-	14	14
The Loughborough Nursing Home Ltd., Rad	moor			
Road, Loughborough		5	10	15
The Old Vicarage Nursing Home, Rothley		-	17	17
Cheshire Foundation Home, Staunton Harold	Hall	-	42	42
"Berrystead", 1001 Melton Road, Syston		-	20	20
"Roundhill", Kirby Muxloe		40	-	40
"Coventry House", Melton Mowbray		-	12	12
		_	_	_
Totals		45	115	160
		_	-	_

NATIONAL ASSISTANCE ACT, 1948

The National Assistance Act, 1948 (Amendment Act 1962) sets out the powers and duties of authorities in the care of old people and the appropriate circular (No. 12/62) sets out the main problems and emphasises the needs for co-operation between the various bodies concerned including voluntary organisations. There are many people engaged in the care of old people and very many organisations of all types have an interest in this field, not only those which deal specifically with the care of aged but others such as Churches who include this work as part of their normal activities. The need for co-operation between all these bodies is abundantly clear especially in such fields as routine visiting, and in those activities in which the County Council and the District Councils both have powers.

COUNTY HOMES

1964 was an uneventful year in so far as no new homes were opened during the year. Despite the growth of domiciliary services, and the efforts made in maintaining old people in the community by such means as the provision of special housing schemes, there remains a very real need for increased provision of residential accommodation, and our Ten Year Plan allows for considerable development of new homes as well as the gradual replacement of the older homes, formerly Public Assistance Institutions. Much work has been done on those older homes, but although greatly improved they cannot be made completely adequate for modern standards and they are, of course, expensive to maintain.

However good the accommodation, the happiness and well being of the old people depends to a very considerable extent on the staff, and the responsibilities falling on the senior members especially are very constant and very real. The position is not improved by the virtual impossibility in many areas of securing resident staff.

One very noticeable result of the improvement in the services available in the community is the increasing frailty of the old people on admission; the great majority require very considerable assistance from the staff. Details of the accommodation in homes in the county at the end of the year are given in the following table:

Home		Men	Women	Tota
Hastings House, Loughborough		 64	60	124
Woodmarket House, Lutterworth		 28	43	71
West Haven, Market Bosworth		 26	29	55
St. Lukes, Market Harborough		 24	23	47
Enderby House, Narborough		 29	26	55
Knighton House, Leicester:				
Martin Home		 _	24	24
Gloucester Home		 4	12	42
Catherine Dalley House, Melton Mow	bray	 - 4	13	43
Loudoun House, Ashby-de-la-Zouch		 - 4	17	47
Tillson House, Coalville		 4	18	48
Moat House, Burbage		 4	17	47
Lenthall House, Market Harborough			51	51
Total		171	205	654
Total		 27	18	004

At St. Luke's, Market Harborough, temporary accommodation is set aside in the casual block for up to 40 persons.

On 31st December 1964, the number of beds occupied was:
Men 223. Women 410. Temporary accommodation *15. Total 648.

Accommodation for county cases is also arranged in other homes throughout the country and details of such cases are as follows:

Home		Men	Women	Total
Other local authority homes		6	11	17
Epileptic Colonies		5	3	8
Homes for the Blind		14	22	36
Homes for the Deaf and Dumb		1	1	2
Voluntary Old People's Homes		4	15	19
British Legion Homes		1	-	1
Homes for the Disabled, etc.		7	4	11
Total		38	56	94

MEALS ON WHEELS

The Meals on Wheels Service is operated by members of the W.V.S. who make the administrative arrangements and carry the meals to home-bound or handicapped persons.

The amount of effort put into this task is very great and our sincere thanks are due to very many people and also to the suppliers of the meals.

The demands for the Service now seem to be reasonably well met although in the County community it is impossible to cover the needs in every little village, where possibly the needs are more readily met by neighbours and friends than in the larger communities.

The number of meals distributed in the various areas is shown on the following list. The new schemes during the year were from:

Measham Coleorton Birstall Ashby Woulds Barrow-upon-Soar Shepshed

and these new schemes account for 4,622 of the increase of 12,250 in the number of meals compared with the previous year.

Loughborough				7,041
Market Harboro	ugh			1,991
Kibworth				1,092
Blaby				3,621
Quorn	S			1,862
Coalville				1,773
Narborough, Bra	unstone	and Er	nderby	3,678
Wigston				3,466
Hinckley				5,807
Castle Donington	1			3,212
Ashby-de-la-Zou	ch			1,328
Kegworth				1,118
Glenfield, Kirby	Muxioe			1,211
Scraptoft				2,876
Mountsorrel				1,721
Woodhouse Eave	s			2,074
Anstey				1,733
Ibstock				2,162
Measham				1,165
Coleorton				1,335
Birstall				1,315
Ashby Woulds				361
Barrow-upon-Soa	ar			230
Shepshed				216

In addition to the above there is a Luncheon Club at Loughborough where 2,594 meals were served during the year.

REGISTRATION OF OLD PEOPLE'S HOMES

There are five homes registered in the County:

Address	Number of beds
Hallaton Manor Rest Home, Hallaton	30 (males and females)
Brocks Hill Eventide Home, Oadby	12 (females)
"Aigburth", Manor Road, Oadby	30 (males and females)
"The Willows" Nursing Home, Coventry	
Road, Market Harborough	15 (males and females)
"Sandringham", 74 Coventry Road, Market	
Harborough	6 (males and females)

Housing of the Aged

There has been widespread interest and activity in the provision by District Councils of sheltered housing for the aged, with supervision by wardens, and there is no doubt that accommodation of this type is the best solution for the problems of many old people, who are enabled to lead a more independant life in their own homes than is possible with the best will in the world in the residential old peoples' home. There will always, of course, be a need for both types of accommodation; they are complementary to each other and not substitutes.

There are interesting local variations in design and administration, but it is increasingly apparent that the ability and personality of the warden is the key factor in the success of any scheme.

The following list shows the number of such units occupied at the end of the year, and details are also given of projects definitely approved at that time. Several other projects are known to be in an advanced planning stage.

Housing Units approved in Principle by Leicester County Council:

Location		Units Occupied	Approved but not yet occupied	Proposed or under construction
Bottesford		18	_	_
Castle Donington		_	_	16
Enderby		21		_
Glenfield		8	7	_
Glen Parva		8	2	_
Heather		_	-	20
Houghton-on-the-Hi	11	8	_	_
Ibstock		18		_
Kirby Muxloe		11	12	_
Loughborough		_	_	52
Market Harborough		20	_	_
Measham		15	_	_
Narborough		10	_	_
Shepshed		28	-	_

BLIND PERSONS

The Royal Leicester, Leicestershire and Rutland Institution for the Blind has continued to provide the welfare services for the blind as agent for the County Council and during 1964/65 the Management Committee has taken important decisions which are calculated to be in the best interests of the Institution and the blind people it serves.

The most obvious of these has been the closing of the Institution's Retail Shop in Granby Street, Leicester, after a period of nearly ninety years. As is well known, this shop existed primarily as an outlet for the products of the Workshops for the Blind but during recent years, the pattern of production in the Workshops has changed to the extent that during the last three or four years, less than 10% of the output of the Workshops was, by its very nature, suitable for the retail trade. For example, the whole of the production of the Cardboard Box Department, which it is the Institution's policy to continue to expand until approximately half the Workshop personnel are employed in it, goes direct to boot and shoe and hosiery manufacturers. Practically the whole of the heavy baskets made in the Workshops fulfil Government Contracts and similarly most mats are made to special orders and a large proportion of the brushes manufactured by the blind are purchased by local authorities. All this, coupled with the Committee's decision to close the Boot and Shoe Repair and Knitting Departments at the Workshops, meant that virtually the only goods made by the blind in Leicester suitable for sale through the Retail Shop were those made in the light basket department. Thanks to the co-operation of local traders, no difficulty is anticipated in disposing of these articles.

Thus it will be seen that the need to continue to operate the Retail Shop, with all its attendant overhead costs, had largely ceased to exist and in view of the very small trading profit made on the Shop, the Management Committee formed the opinion that a more satisfactory use could be made of this important asset by leasing the premises and using the income from the lease to develop the services to the blind.

As a result of the disposal of the premises in Granby Street, and to streamline the administration of the Institution the office staff has been transferred to the Workshops, and it is hoped that the new offices, which are now being built, will be ready for occupation by the Autumn of 1965.

A further major decision taken by the Management Committee during the year now being reviewed is to provide as quickly as possible a new home for elderly blind people of both sexes. The Institution has acquired a two-acre site on the Hinckley Road at Leicester Forest East and is to build there a new home to accommodate 40 blind people. Planning of the Home is now proceeding and it is hoped to commence its building during the summer of 1965.

and to complete it some eighteen months thereafter. It has been decided to dispose of the Lyndwood site although, of course, possession of the House will be retained until the new Home is completed.

The Institution is anxious to be able to provide short-term accommodation for those elderly blind people who now live with relatives to enable the latter to be relieved of this responsibility during holidays, etc.

There are now 851 people resident in the County whose names are included on the register of blind persons and 181 on the register of the partially sighted.

The Home Teaching Service has been fully maintained and a complete programme of visits, classes, socials and outings has been carried through. 7,451 visits to blind people in their own homes have been made, 381 lessons given and 65 classes arranged.

An innovation by the Welfare Department has been the commencement of a library of the large print books published by Mr. F. A. Thorpe, a member of the Institution's Committee. These books have filled a need which has been felt for many years and the many expressions of thanks which have been received from those with poor sight, many of whom have not read for years, is clear proof of the value of these books.

Summer and Christmas gifts have again been distributed to the unemployable blind, the Assisted Holidays scheme has helped some 350 blind people and their guides to enjoy a holiday which would otherwise have been difficult, if not impossible, for them. In this connection, the holiday caravan sited at Hunstanton proved extremely popular and was fully booked throughout the summer season. In addition wireless sets and talking books for the blind have been distributed and maintained by the Institution. It is pleasing to be able to report that since the introduction of the new tape-recorder type of talking book, very considerable progress has been made in reducing the waiting period for those requiring these machines.

It has already been mentioned that the Committee's decision to close down the Boot and Shoe Repair Department and the Knitting Department at the Workshops was about to be implemented. Discussions took place with the National League of the Blind on the re-training of the operatives from these Departments in new trades and agreement reached on the conditions of their transfer. It is intended progressively to increase the size of the Cardboard Box Department.

Sales from the Workshops showed a satisfactory increase over the previous year and it is pleasing to note from the accounts that the trading loss is lower than in 1963/64.

At Prebend House a full programme to interest, educate and entertain the blind members has been maintained throughout the year. Work has commenced on a scheme to incorporate the caretaker's cottage at the rear of Prebend House into the main building and also to provide additional office accommodation. When this has been completed, it will be possible to make fuller use of the space in the cottage for activities planned for the blind.

The work of the Institution for the Blind has always attracted the sympathy and support of men and women of goodwill and the year 1964/65 has been no exception. The Management Committee is conscious of the fact that its work would be impossible without the help in so many ways of so many people and it expresses its warm appreciation of all that is done in so many ways for the blind. The Committee is grateful too for all the co-operation and help it and its officers receive from both National and Local statutory bodies and pledges itself to continue its policy of working in the closest possible association with all who have the welfare of the blind at heart.

REGISTERED BLIND PERSONS

Number of Blind Persons in Age Groups

	-06	51	20	53	
	108	94	109	109	
	-08	141	138	138	45 -
	70-	214	198	197	1964
	65-	62	78	76	
	-09	54	58	09	
	-09	89	75	75	
SQ	40-	49	52	55	
AGE PERIODS	30-	30	56	58	63
GE P	21-	25	29	27	1963
A	16-	13	==	11	
	111-	12	14	15	
	Ę.	11	00	10	
	4	1	1	61	
	6	1	1	1	962
	2-	1	1	1	198
	1	i	1	I	
	٩	1	1	1	
Hightee	as at Dec. 31st	1962	1963	1964	TOTALS

HANDICAPPED PERSONS

The work of expansion of the service for the Physically Handicapped continues with the emphasis at the present time being on the provision of advice, help and occupational therapy within the home. New cases referred very often need considerable help and advice with difficulties resulting from a chronic illness which may come at any stage in life. In addition to advice of a general nature all types of aids to daily living can be supplied and in certain cases financial help given where adaptations prove necessary.

The Occupational Therapy staff was increased to three during the year, but owing to staffing difficulties the total number of cases visited did not increase greatly. A two day Exhibition of Aids and Services for the Physically Handicapped was held again this year, this time at Hinckley. As this type of exhibition has a limited appeal attendance is not usually large, but there is little doubt that it proved worthwhile. At the exhibition a small group of physically handicapped people were in attendance demonstrating their skills.

It has been possible to provide a chiropody service for a number of severely handicapped people under pensionable age.

Mention should be made of the activities of the Leicestershire Voluntary Association for Cripples Welfare, details of which can be found in their Annual Report, and the British Red Cross Society, who as agents for the special equipment and aids for the Physically Handicapped provide much help in this direction.

DEAF

The Leicester and County Mission for the Deaf and the Loughborough and District Mission act as agents for the County Council, receiving an annual grant. At the end of 1964 there were 158 county cases on the registers of those two societies.

Here again the transitional stage from the educational field to adult life is most important, especially in view of the recent development in early diagnosis training and education of the deaf child.

NURSERIES AND CHILD MINDERS REGULATION ACT, 1948

The Minister of Health recently expressed concern that unregistered child minders may be operating in some parts of the country and all authorities were asked to review their administration of the Act to ensure that this did not happen.

The procedure for registration and supervision in this county is carefully maintained and is summarised below:

All applicants under the Act are initially required to visit the Department to discuss their plans with the Senior Medical Officer concerned. The premises are then inspected and a report on the applicant, staff, if any, and suitability of the premises is submitted to the appropriate Committee, together with recommendations to ensure safe conditions in the accommodation and provision of suitable toilet facilities. These recommendations must be implemented before children are received.

The applicant and staff are also required to have satisfactory chest X-rays with repeats at intervals and to produce character references or submit the names of referees.

A daily attendance register must be maintained and any infectious diseases in the group must be notified to my office. It is the applicant's responsibility to have his/her own doctor on call for emergencies and periodic spot-checks are made by my Assistant Medical Officers to see whether recommendations have been carried out and to observe the attitude of the children, the state of accommodation and other pertinent matters.

The current total number of persons registered under the Act is 38—this includes persons holding Play-groups as well as those undertaking part-time and full-time day care. Places for over 525 children are provided.

The procedure already mentioned is, of course, only applied to persons making a formal application so it is possible that unregistered child minders may be operating within the county.

However, two points render this unlikely:

- (i) Our Health Visitors are continually on the alert for unregistered child minders and draw attention to the Act's requirements at Infant Welfare Clinics
- (ii) The number of persons applying for registration for whole day care of children has hardly altered in the last fifteen years. Expansion has occurred—but only in respect of part-time care for children over three years old where meals are not provided. These applications for parttime registration have come almost exclusively from good residential districts and suggest no attempt to meet industrial needs or those of mothers requiring to work.

A list of registered child minders is available to members of the public on request.

NOTIFICATIONS OF INFECTIOUS DISEASES

Tables I and II given below show the prevalence of infectious disease in the county during 1964.

Table I-Original and corrected notifications

Diseas	se		Total cases (original notifications)	Total cases (corrected notifications)
Diphtheria		 		_
Erysipelas		 	18	17
Scarlet Fever		 	142	140
Puerperal Pyrexia		 	11	11
Tuberculosis (lungs)		 	74	73
(non-resp.)		 	17	15
Pneumonia		 	38	41
Whooping Cough		 	127	127
Measles		 	4,403	4,395
Dysentery		 	82	79
Poliomyelitis (paralytic)		 	-	-
(other form	ns)	 	-	- 11
Food Poisoning		 	18	13
Encephalitis		 	-	-
Meningococcal Meningit	is	 	10	9
Typhoid		 	2	2
Ophthalmia Neonatorum	1	 	1	2
Anthrax		 	-	-
Paratyphoid		 	-	-

Table II-Corrected notifications in age groups

		Age groups									
Disease	0-	1-	3-	5-	10-	15-	25 and over	Age unknown	Totals		
Scarlet Fever	1	11	20	83	14	4	2	5	140		
Whooping Cough	13	26	23	52	8	1	2	2	127		
Acute Poliomyeli-											
tis: Paralytic	-	-	-	-	-	-	-	- 1	-		
Non-paralytic	-	-	-	-	-	-	-	-	-		
Measles	144	1,050	1,157	1,894	100	21	5	24	4,395		
Diphtheria	-	-	-	-	-	-	-	-	-		
Dysentery	1	12	8	20	14	7	3	3	79		
Meningococcal					1100000						
infections	-	3	3	2	-	1	-	-	9		

Table II-Corrected notifications in age groups-continued

	Age groups (years)						
Disease	0-	5-	15-	45-	65 and over	Age unknown	Totals
Acute Pneumonia	2	5	7	15	12	_	41
Smallpox Acute Encephalitis:	-	-	-	-	_	- 1	-
Infective	-	_	-	-	-	-	-
Post-infectious Enteric or Typhoid	-	-	-	-	-	-	-
Fever	-	-	2	-	-	-	2
Paratyphoid Fevers	-	-	-	-	-	-	-
Erysipelas	-	-	3	7	6	1	17
Food Poisoning	2	2	7	2	-	-	13

Acute Poliomyelitis

Original		notifications	Correcte	Deaths (poliomyelitis	
Year Paralytic	Non-paralytic	Paralytic	Non-paralytic	and polio- encephalitis)	
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
1956	7	4	6	1	1
1957	39	30	34	27	3
1958	5	3	5	1	-
1959	-	-	-	-	-
1960	2	4	2	3	1
1961	3	1	3	1	-
1962	5	-	5	-	-
1963	-	-	-		-
1964	-	-	-	-	-

SANITARY CIRCUMSTANCES OF THE AREA

This section of the report, together with those on Housing and Inspection of Food, has been drawn up by Mr. S. A. Gregory, the County Health Inspector, I should like to thank him for his assistance.

WATER SUPPLY

The table below gives details of the rainfall recorded at the Wigston Sewage Disposal Works. I am grateful to Mr. F. Isherwood, A.M.I.C.E., M.I.Mun.E., the Engineer and Surveyor to the Wigston Urban District Council, who has kindly supplied the records for the year.

Rainfall in 1964

Rain Gauge	 Diameter of funnel	 8 in.
	Height of top above ground	 9 in.
	Height of ground above sea level	 259 ft.

Month		Total depth	Greatest fall in 24 hours	No. of days with .01 in. or	No. of days with .04 in. or
		Inches Inches		more	more
January		.77	.20	11	5
February		.79	.19	15	8
March		2.87	.96	16	8
April		2.34	.41	20	14
May		1.09	.16	14	9
June		3.28	.60	16	13
July		1.39	.37	12	9
August		1.83	.69	10	9
September		0.60	.30	5	5
October		1.18	.32	19	7
November		1.08	.24	16	8
December		2.00	.33	16	12
Totals		19.22	_	170	117

The rainfall figures for the last ten years:

Year		Rainfall in inches		Year		Rainfall in inches			
1955	 		22.11	1960	 		32.57		
1956	 		26.81	1961	 		22.76		
1957	 		27.55	1962	 		22.14		
1958	 		29 45	1963	 		23.79		
1959	 		17.92	1964	 		19.22		

Average for ten years: 24.43 inches.

The table below relates to samples of water from wells:

	Satisfa	ictory	Unsatisfactory			
District	Chemical	Bacterio- logical	Chemical	Bacterio- logical		
Urban Districts						
Ashby-de-la-Zouch	_	_	_	_		
Ashby Woulds	_	_	_	_		
Coalville	_	_	_	3		
Hinckley	_	47	_	3		
Loughborough M.B.	_	_	-	-		
Market Harborough	_	2		-		
Melton Mowbray	_	_		_		
Oadby	-	_	_	_		
Shepshed	_	-	_	_		
Wigston	-	3	_	_		
Rural Districts						
Ashby-de-la-Zouch	-	1	-	4		
Barrow-upon-Soar	_	2	_	5		
Billesdon	_	4	_	14		
Blaby	_	_	_	3		
Castle Donington	_	5	_	2		
Lutterworth	-	6	_	15		
Market Bosworth	_	2	_	3		
Market Harborough	_	_	-	-		
Melton and Belvoir	-	32	-	2		
Totals	_	104	_ :	54		

Apart from 1959, the rainfall for the year, 19.22 inches, was the lowest for over twenty years. Again the highest monthly figure was in one of the summer months, namely June, when 3.28 inches were recorded. Only six samples of mains water were found to be unsatisfactory on bacteriological examination and five of these were from a private quarry supply, which is being superseded by Leicester Corporation Water. In the Ashby-de-la-Zouch Rural District a connection was made with the Swadlincote and Ashby Joint Water Board main at Worthington to give 60,000 gallons per day to relieve a shortage. Poor pressure was experienced in parts of Castle Donington and Kegworth at times of peak demand and additional 6" mains are planned to cope with this. There were also shortages in the parts of Market Bosworth Rural District supplied from the South Staffordshire Water Board and Coalville Urban District. In addition to the increase in demand due to new housing, water consumption is steadily rising as housing conditions improve. It would appear to be worthwhile giving serious consideration to any device

which would save water for W.C. flushing purposes. Two to three gallons of water are used at each flush and this will rise as the low level suites replace the old high level cisterns. Complaints were received in a number of districts of discoloured mains water, some of abnormal taste and odour, and some of "Asellus Aquaticus." The latter trouble was dealt with by local treatment, mainly by flushing the mains.

There are now 142,338 houses with internal water supply, 436 from external standpipes and 2,655 supplied from wells.

		Urban districts	Rural districts
Piped supplies substituted for well sup	plies	1	145
Wells closed		1	72
Wells cleansed, repaired, etc		_	5

The North West Leicestershire Water Board, 1964

After protracted negotiations, the above order was made on the 26th October, 1964, and came into operation on the 30th October.

The constituent districts and the number of members of the Joint Board to be elected by the councils are as follows:

Loughborough Borough Council		 6 members
Ashby-de-la-Zouch Urban District Cour	ncil	 1 member
Ashby Woulds Urban District Council		 1 member
Coalville Urban District Council		 4 members
Shepshed Urban District Council		 1 member
Swadlincote (Derby) Urban District Cou	ıncil	 3 members
Ashby-de-la-Zouch Rural District Council	cil	 2 members
Basford (Notts) Rural District Council		 1 member
Castle Donington Rural District Council	1	 2 members
Market Bosworth Rural District Council		 1 member

In the case of Ashby-de-la-Zouch and Market Bosworth Rural Districts, the order applies to those parts of the districts, which are not already within the limits of supply of the Leicester Corporation, by virtue of the Leicester Water Order, 1959.

The River Dove Water Board Order has been amended to delete reference to Castle Donington and Coalville Councils and Loughborough Corporation. The allocation of water from the River Dove now reads:

Water Authority	Maximum daily quantity of water				
Leicester Corporation		9,876,000 gallons			
North West Leicester Water Board		3,963,000 gallons			

The amalgamation of water undertakings in the county is now complete, following the establishment of the new water board and this should lead to the elimination of local shortages of water supply.

New Water Schemes completed during the year

Hinckley Urban District

New water tower at Barwell brought into operation.

Barrow-upon-Soar Rural District

Mains extension to Cotes Road, Barrow and Walton Lane, Walton-on-the-Wolds laid.

Blaby Rural District

Main extension at Thurlaston, to serve six properties formerly supplied from the brook, laid.

Castle Donington Rural District

One million gallon capacity reservoir at the Coppice, Castle Donington, put into commission.

9" main laid to serve new Airport.

Lutterworth Rural District

Main extension from Knaptoft Reservoir to North Kilworth and thence to Irongates reservoir at Walcote to augment supply for the Lutterworth area.

Market Harborough Rural District

Main extension from Weston-by-Welland (Northants) to supply village of Welham. This scheme completes the mains supply to all villages in the district.

Melton and Belvoir Rural District

Main laid to Cold Overton.

In addition service mains have been laid throughout the county to serve new housing development.

Efforts have been made to revive the Copt Oak area water scheme to serve properties in Castle Donington, Barrow-upon-Soar and Market Bosworth Rural Districts. At the end of the year, progress had been made and it is hoped that agreement will be reached by the district councils, so that this last major part of the county will be provided with mains water.

RURAL WATER SUPPLIES AND SEWERAGE ACTS, 1944-1961

The following schemes have been submitted by district councils during the year and approved in principle by the county council:

Water	Supplies
-------	----------

		Estimated
Local Authority	Parishes and Areas Affected	cost
Barrow-upon-Soar R.D.	Barkby Road, Queniborough	£1,980
Castle Donington R.D	Windmill Fields Estate, Castle Donington	£10,560
Billesdon R.D	Whatborough Farm	£2,400
Market Bosworth R.D	Kirkby Old Parks Farm, Peckleton	£1,800
Leicester Corporation	Misterton Small-Holdings	£3,875
Sew	verage and Sewage Disposal	
Market Bosworth R.D	Botcheston, Newtown Unthank and Desford	£84,900
Market Bosworth R.D	Sheepy Mill	£950

Section 56, Local Government Act, 1958

Sewerage and Sewage Disposal

Blaby R.D.			Braun	stone	(M1 Service	ce I	Area)			£8,000	
The total	number	of	schemes	now	approved	is	230.	of which	TO8	are for	

The total number of schemes now approved is 230, of which 108 are for water and 122 for sewerage.

RURAL WATER SUPPLIES AND SEWERAGE ACTS, 1944-1961

The following grants were approved during the year:

		cui.		County
V-	F	Estimated	Ministry	
Local Authority	Scheme	Cost	Grant	Grant
	Water Supplies			
		£	£	£
Barrow-upon-Soar R.D.	Barkby Road, Queniborough	1,980	81x12 yrs.	75*x12 yrs.
Billesdon R.D	Illston, Rolleston, Noseley			
	and Goadby	11,541	502x12	*502x12
			yrs.	yrs.
Castle Donington R.D	Long Lane, Kegworth	1,897	450	450
Leicester Corporation	Stockerston	4,234	1,382	1,382
	(Originally)	6,000	1,900	1,900
*Guara	ntee payment to Leicester Cor	poration		
s	ewerage and Sewage Dispos	sal		
Barrow-upon-Soar R.D.	Seagrave	32,608	10,689	10,689
	Warwick Road, Whetstone			
Blaby R.D	D 1 D 1 0			
	Stanton	4,450	1,120	1,120
Castle Donington R.D	Breedon-on-the-Hill			

Sewerage and Sewage Disposal-continued

					County
		E	stimated	Ministry	Council
Local Authority	Scheme		Cost	Grant	Grant
			£	£	£
Castle Donington R.D	Long Whatton ar	nd Dise-			
	worth		61,917	30,300	18,000
	(Originally)		54,585	27,000	15,700
Castle Donington R.D	Tonge		8,967	2,946	2,946
Market Bosworth R.D	Bagworth and Battr	am	31,334	15,000	9,250
Market Bosworth R.D	Market Bosworth as	nd			
	Carlton		151,250	15,960	15,960
Market Bosworth R.D	Sheepy and Ratcli	ffe Culey			
	(Sheepy Mill Ext	ension)	1,030	280	280
Market Harborough R.D.	Thorpe Langton		10,937	2,260	2,260
	(Originally)		12,800	2,560	2,560
Market Harborough R.D.	Gumley		12,173	2,845	2,845
	(Originally)		13,000	2,985	2,985
Market Harborough R.D.	Mowsley and Laugh	hton	32,509	7,020	7,020
	(Originally)		35,500	7,610	7,610
Melton and Belvoir R.D.	Wymondham		53,041	11,090	11,090
Melton and Belvoir R.D.	Redmile, Barkstone	and			
	Plungar		107,000	23,124	23,124

Sewerage Schemes and major improvements at disposal works, completed during the year

Ashby-de-la-Zouch Urban District

Extensions to the sewers at Boundary and provision of a new outfall sewer and a new sewerage scheme to serve the northern side of the district.

Loughborough Municipal Borough

The extensions to the Swingbridge Disposal Works substantially complete.

Oadby Urban District

Complete modernisation of sewage disposal works.

Wigston Urban District

New storm tanks constructed at Lansdown Grove

Ashby-de-la-Zouch Rural District

Recirculation plant for effluent installed at Worthington.

Barrow-upon-Soar Rural District

Seagrave sewers laid to discharge to Sileby works. Queniborough works being extended,

Blaby Rural District

Broughton Road Scheme, Stoney Stanton.
Warwick Road Scheme, Whetstone.
Narborough and Cosby storm water tanks.
Blaby and Whetstone pumping station and storm tanks.

Billesdon Rural District

Tugby scheme.

Castle Donington Rural District

Tonge scheme, with pumping station to Breedon-on-the-Hill.

Lutterworth Rural District

Sewers laid at Gilmorton, Kimcote and Walton.

Market Bosworth Rural District

Congerstone, Bilstone and Shackerstone scheme, with works at Bilstone. Sheepy Mill scheme. Groby (Stage III).

Market Harborough Rural District

Cranoe scheme, with sludge disposal to Hallaton.

Foxton scheme, including provision for new prison. (86 houses and 750 prisoners).

Slawston, Blaston, to discharge to enlarged and modernised works at Hallaton.

SANITARY INSPECTION

Inspection by District Councils

Summary action	Convic-	obtained		1	1.	1	1	1	1	1	1	1	1		1	4	1	00	1	1	1	1	1	00	
Summa	Sum-	issued		1	1	1	1	1	1	1	1	1	1		1	4	1	60	1	1	1	1	1	8	
ved	itory	Other		1	1	27	4	1	61	1	1	1	1		1	7	1	3	1	1	20	1	23	50	
Notices ser	Statutory	Housing		1	1	43	4	1	1	1	1	1	1		1	54	1	4	1	+	1	1	19	125	
Number of Notices served	Preliminary	Other		11	14	103	99	262	212	12	7	12	450		82	61	00	281	28	co	176	61	7	1,846	
Z	Prelin	Housing		1	4	83	76	24	80	10	1	42	21		1	128	1	45	24	1	1	34	10	581	
No. of	Inspections			1,563	1,404	6,106	8,961	16,312	8,982	1,447	3,058	1,992	4,388		3,281	6,389	2,438	12,212	1,652	2,223	7,423	4,033	5,397	99,261	
No. of premises	defects or	nuisances dealt with		24	65	1,366	1,771	635	806	225	153	205	777		93	1,002	103	1,466	79	436	146	142	46	9,642	
,	complaints	received		26	81	304	446	607	428	176	173	54	774		98	704	103	875	79	436	187	155	59	5,753	
				:	:	:	:	:	:	:	:	:	:		:	:	:	:	:	:	:	:	:	:	
				ch	:	:	:	f.B	ızh		:		:		ch	1r	:	:	:	:	:	ich	oir	:	
		District	Urban Districts	Ashby-de-la-Zouch	Ashby Woulds	Coalville	Hinckley	Loughborough M.B.	Market Harborough	Melton Mowbray	Oadbv	Shepshed	Wigston	Rural Districts	Ashby-de-la-Zouch	Barrow-upon-Soar	Billesdon	Blaby	Castle Donington	Lutterworth	Market Bosworth	Market Harborough	Melton and Belvoir	Totals	

CLOSET ACCOMMODATION

The following table shows the position as regards closet accommodation in the county at 31st December 1964, and includes details of conversions:

			1			Converted to	Converted to Water closets	
District		Privies	Pail closets	Water closets	Total	Privies	Pail closets	to Pail closets
Urban Districts								
Ashby-de-la-Zouch .	:	1	12	2,407	2,419	1	1	1
Ashby Woulds	:	1	14	1,130	1,144	1	1	1
Coalville	:	10	64	10,139	10,213	1	ı	1
Hinckley	:	1	67	16,635	16,702	1	16	1
Loughborough M.B.	:	00	47	17,356	17,411	1	1	1
Market Harborough .	:	1	10	4,454	4,464	1	1	1
Melton Mowbray	:	1	10	5,325	5,335	1	1	1
Oadby	:	1	5	4,669	4,674	1	1	1
Shepshed	:	10	14	2,944	2,968	1	1	1
Wigston	:	1	14	9,830	9,844	1	1	1
Rural Districts	*							
Ashby-de-la-Zouch .	:	1	538	4,055	4,594	60	49	1
Barrow-upon-Soar	:	1	396	20,073	20,469	1	46	1
Billesdon	:	+	199	6,087	6,290	1	64	1
Blaby	:	1	210	21,357	21,567	1	53	1
Castle Donington	:	28	96	3,862	3,986	1	80	1
Lutterworth	:	10	530	3,943	4,478	1	57	1
Market Bosworth .	:	1	843	7,954	8,797	1	69	1
Market Harborough .	:	14	76	3,750	3,840	1	9	1
Melton and Belvoir	:	100	746	5,681	6,527	19	45	1
Totals	:	180	3,891	151,651	155,722	67	353	1

Public Cleansing

As will be seen from the table, the majority of the district councils provide a weekly refuse collection service, but this is only under normal conditions. At holiday times, the service is often suspended and numerous complaints are received from irate householders, when the dustbins are not emptied on the usual day. In spite of the extra cost, the paper sack system has much to commend it and it might be easier to recruit labour if this cleaner and less-arduous method was introduced more generally.

			Meth	od of Disp	oosal
District	No. of vehicles used	Frequency of Refuse Collection	No. of Con- trolled Tips	No. of Crude Tips	Incinera-
Urban Districts					
Ashby-de-la-Zouch	2	Weekly	1(p.c.)	-	-
Ashby Woulds	1	Weekly	1	-	-
Coalville	6	Weekly	3	-	-
Hinckley	7	Weekly	1	1*	-
Loughborough M.B.	10	Weekly	1	-	-
Market Harborough	2	Weekiy	1	-	-
Melton Mowbray	3	Weekly	1	-	-
Oadby	5	Weekly	1	-	-
Shepshed	1	Weekly	-	1	-
Wigston	4	Weekly	1	-	-
Rural Districts					
Ashby-de-la-Zouch	4	6 days	3	1	-
Barrow-upon-Soar	11	Weekly	2	-	-
Billesdon	4	Weekly	1	-	-
Blaby	13	Weekly	1	-	-
Castle Donington	3	Weekly	2	-	-
Lutterworth	3	Weekly	-	2(p.c.)	-
Market Bosworth	7	Weekly	2	2	-
Market Harborough	3	Ft'nightly	-	4	-
Melton and Belvoir	5	12 days	5	-	-
Totals	94	_	27	11	_

^{*}Partially controlled for trade refuse where most of the combustible material is burnt. p.c. (Part controlled).

The majority of suitable sites for "controlled" tipping are rapidly being filled in and holes in the ground are becoming valuable commodities. With more packaging of all types of food stuffs, including the humble potatoes and many other vegetables, the bulk and character of refuse is changing rapidly. District councils will have to give serious consideration to combining

for disposal purposes, maybe by pulverisation or incineration. Many of the polythene-type wrapping do not decompose, as paper does in a tip and with more houses being centrally heated by gas, electricity or oil, the ash content of household refuse is also decreasing. The problems facing those responsible for organising the refuse collection service are not confined to staff shortage!

Complaints

The following complaints were received during the year and were mainly dealt with by reference, directly, to the district council officers concerned.

General sanitary i	natters	 	59
Housing		 	15
Water Supplies		 	5
			79

Caravan Sites and Control of Development Act, 1960

The major problem under the above Act, now seems to be the stationing of caravans on unlicensed sites. These are however mostly dealt with by informal action. In two cases the owners of unlicensed sites were prosecuted and fines of £50 and £10 with 3 guineas costs, were imposed. Informal notices were served in connection with minor contraventions of licensing conditions and after formal action, one site had additional sanitary conveniences installed. There are now 69 licences for single vans and 10 for larger sites, in the county districts.

Shops Act, 1950

Defects	Outstanding from previous year	Defects found	Defects remedied	Outstanding 31st Decem- ber, 1964
Sanitary conveniences	32	44	56	20
Temperature	7	87	23	71
Ventilation	9	25	12	22
Washing facilities	9	81	30	60
Lighting	-	6	4	2
Facilities for taking meals	4	3	3	4

Public Swimming Pools

After many years of voluntary effort, sufficient money had been raised by a Swimming Pool Association, together with a grant from the Education Authority, for a start to be made on the construction of a full-scale swimming bath with ancillary facilities. Another district council is about to start a similar project. In spite of daily tests for chlorine residual and pH by the Superintendent at one public bath, 22 out of 47 samples taken by the Public Health Inspector, were found to be unsatisfactory. The council decided to reconstruct the bath. At another bath the chlorination and filtration plant was overhauled.

School Swimming Pools

The first swimming pool at a county school, was opened in 1960 at Hind Leys Secondary School, Shepshed. This pool was constructed by voluntary labour, through the Parent/Teacher organisation and included chlorination and filtration plant.

In 1961 a smaller "learner" pool, with a maximum depth of 3 feet, was opened at Shelthorpe School, Loughborough. This pool also included chlorination and filtration plant and an electric heating unit.

These pools set the pattern for those which followed and the advice of the County Medical Officer and the County Architect is given before contracts are accepted by the school organisations, which raise the money for providing the swimming pools.

There are now swimming pools at the following schools in the county:

Brockington, Enderby

Heathfield, Earl Shilton

Hinckley Grammar School (built as a covered pool)

Claybrooke Magna

Humphrey Perkins, Barrow-upon-Soar

Mountfields, Loughborough

Castle Donington Secondary

Maplewell Hall Special School

Anstey Latimer Street

Whitwick C.E.

Ashby Grammar

Roundhill, Thurmaston

Melton Mowbray Grammar

Brooksby Hall Farm Institute

The pools at Hind Leys and Shelthorpe, have now been covered over, whilst at Birstall and Kegworth pools are under construction.

Several other school pools are at an advanced planning stage and it seems likely that the idea will continue, especially in areas where public swimming baths are not available, or within easy reach of the schools.

Adequate filtration and chlorination of swimming pool water is essential to maintain the water in a safe condition at all times, and particularly to ensure that no pathogenic organisms are present in the water. Chlorination provides the answer, since a free chlorine residual will kill any organisms introduced into the water by the swimmers. This, however, must be accom-

panied by proper filtration at the correct "turnover" rate. The recommended rate is 6 hours for open-air and 4 hours for covered pools. This, in effect, means that all the water in the pool passes through the filter in 6 and 4 hours respectively, and also permits chlorine to be added to the water at a constant rate.

The supervision of the treatment plants at schools is a very important matter and the caretakers are usually given the responsibility for this, sometimes with the assistance of the Physical Education staff. In the case of the small schools, with part-time caretakers, there is a difficulty, but regular visits by the County Health Inspectors during the swimming season has proved effective. Spot tests using a comparator to check the chlorine residual and pH (acidity or alkalinity) of the water, are carried out at the time the pool is inspected. If necessary, samples of the bath water are taken for bacteriological examination, but so far, no unsatisfactory reports have been received on samples submitted to the Public Health Laboratory.

The swimming season for open-air pools is controlled by the weather, and if breakdowns occur in the chlorination or filtration plants, valuable time can be lost. It has been found that small spare parts can be obtained direct from the suppliers quite quickly, and our milk sampling officer, who is very mechanically minded, can fit these replacement parts on his sampling rounds. This saves both time and expense as most of the firms who supply the equipment are in the London area and a small replacement costing a few shillings costs several pounds to install if a man comes from London to do the job.

One hundred and seventy one visits were paid to the swimming pools at the schools during the year and the headmasters welcomed the advice given by the County Health Inspectors.

Food Hygiene Regulations, 1955

Statutory proceedings, following complaints from the public, were undertaken where foreign bodies were found in a variety of foods. The majority of food firms take great care to prevent contamination of their products and in some cases it is difficult to discover where supervision breaks down. In most cases the human element is responsible; sometimes it may even be a disgruntled employee who is to blame. Incorrect turnover of perishable stock, particularly in some of the smaller shops, is responsible for complaints of mouldy pies and a temporary power-cut can cause spoilage in refrigerated cabinets.

The following is a brief summary of some of the penalties incurred following prosecutions:

Stub of cigarette filter tip	in Stea	k and	
Kidney Pie			Fine £10
Metal in slice of bread			Fine £15
Mouldy pork pies			Fine £5

Foreign object in pork pie	Fine £15 plus Analyst's Fee £3 18s.
Dirty milk bottle and cor	ntaminated
milk	Fine £20
Mouldy meat pie	Fine £5 plus costs
Mouldy apple pie .	Fine £5 plus costs
Sale of milk in bottle contai	ning paint Fine £15 plus costs

.. Fine £5 plus costs

In connection with the latter offence, "no smoking" in food shops should apply to customers as well as assistants. Some large stores selling mixed merchandise, request no smoking and it is a pleasure to walk round these shops, which look really clean and efficient.

Assistant smoking in food shop

	No. of premises inspected.	No. of inspections made for the purpose.	No. of informal notices served.	No. of informal notices complied with.	No. of informal notices outstanding Dec. 31st.
Urban Districts :					
Ashby-de-la-Zouch	 14	43	17	9	1
Ashby Woulds	 8	68	6	6	-
Coalville	 293	1,130	44	30	52
Hinckley	 347	480	31	27	8
Loughborough M.B.	 675	3,310	14	14	1
Market Harborough	 95	459	25	27	7
Melton Mowbray	 40	75	=	-	-
Oadby	 39	141	5	6	2
Shepshed	 18	25	-	.7	-
Wigston	 114	207	24	14	46
Ashby-de-la-Zouch	 67	133	21	13	9
Barrow-upon-Soar	 301	884	44	40	7
Billesdon	 81	175	1	1	
Blaby	 350	809	90	85	25
Castle Donington	 34	40	4	4	
Lutterworth	 18	18	-	-	-
Market Bosworth	 19	25	6	6	-
Market Harborough	 91	275	10	10	-
Melton and Belvoir	 252	284	22	22	
Totals	 2,856	8,581	364	314	157

Pet Animals Act, 1951

32 inspections at the 22 licensed premises were carried out during the year. No contraventions were found.

Rag Flock and other Filling Materials Order, 1951

Little difficulty is experienced in the supervision of the conditions applicable to this order. No samples of rag flock were taken from the 16 licensed upholstery premises, 6 for the storage and one for the manufacture of rag flock.

Clean Air Act, 1960

No further Smoke Control Orders were made during the year but the increasing popularity of central heating must be having a marked effect on air pollution. Factory managements appreciate that black smoke is money going up the chimney, and in most cases do their best to install efficient boiler plant.

The problem in rural districts is less marked than in heavily built up urban areas, but one district council examined a scheme for a substantially built-up part of their district. Action has been deferred for two years.

Noise Abatement Act, 1960

Many noise nuisances were abated following informal action on the part of the district Public Health Inspectors. The R.S.P.C.A. has been found helpful in dealing with cases of noisy dogs. Local meetings between factory managements, residents and council officers have also proved effective in ironing out difficulties over noise from factory processes. The exchange of views often helps to clear the air and prevent things from getting out of perspective.

"Beat Groups" at Village Hall dances, often cause annoyance to local residents who have not become accustomed to the modern sound, which disturbs the peace of the villages. The transistor radio, carried around by teenagers, is a mixed blessing, when people want to get away from the noise and bustle of life. In this jet-age, even the remote countryside is no longer a haven of peace and quiet.

HOUSING

The district council's work in dealing with unfit houses continued during the year at much the same rate as in 1963. The table which follows summarises the position. The competition for available building land and the high cost, confines the building of council houses mainly to rehouse families living in unfit houses.

		1963	1964
Houses demolished in clearance areas		214	242
Number of persons displaced from above		186	559
Individual houses demolished		272	224
Number of persons displaced from above		436	354
Unfit houses closed		62	72
Number of persons displaced from above		168	131

Grant aid for the improvement of houses lacking essential amenities was made by the district councils as follows:

Discretionary grants 278 applications—262 approved

Standard grants 934 applications—904 approved

During the year, 804 houses were improved with grant aid.

House Building

4,668 houses were completed in 1964, 648 by local councils and 4,020 by private enterprise, compared with 4,108 (692 council and 3,416 private) in the previous year. At the end of the year 676 local authority and 3,245 private enterprise houses were in the course of erection. The rate of house building is thus still increasing slightly and the demand by owner/occupiers continues.

2,117 applications for council houses, as compared with 1,784 in 1963 were received, leaving 5,653 (5,135, 1963) outstanding at the end of the year. With an aging population, the number of under-occupied council houses must be considerable, and in spite of the problem of moving older people, whose children have left home, to smaller houses, it would appear that this re-allocation of council houses, will have to be faced. Generally, people are more mobile under present conditions and they may be less reluctant to move than they were twenty years ago. It is better to transfer house, whilst in the early fifties rather than wait until retirement age when finances become more difficult.

	Number of Council Houses in District	Numb Post- Hou Bu	oer of -war ises		oleted	cour	ses in se of ion at f year
District	in 1939	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	483	384	25	46	22	7
Ashby Woulds	138	222	83	_	5	-	2
Coalville	538	*1,283	1,508	139	157	60	102
Hinckley	1,525	1,881	2,929	40	300	30	265
Loughborough M.B.	1,003	2,086	1,040	20	150	77	187
Market Harborough	319	593	993	8	117	_	83
Melton Mowbray	231	1,097	1,410	18	177	-	137
Oadby	46	271	2,866	_	168	65	182
Shepshed	217	553	504	29	101	_	73
Wigston	348	944	3,488	5	352	100	158
Rural Districts	1				-		10000
Ashby-de-la-Zouch	322	741	531	27	83	25	56
Barrow-upon-Soar	621	2,314	6,778	10	602	63	381
Billesdon	14	†320	1,283	8	70	12	104
Blaby	442	\$1,706	7,480	126	1,028	181	915
Castle Donington	166	745	411	104	131	4	142
Lutterworth	353	753	777	14	133	9	110
Market Bosworth	400	1,488	1,825	44	213	24	203
Market Harborough	193	458	348	4	102	4	69
Melton and Belvoir	204	901	474	27	85	_	69
Totals	7,243	18,839	35,112	648	4,020	676	3,245

^{*}East Midland Housing Association 48 in addition

[†]Leicester Corporation 2,930 in addition. ‡Leicester Corporation 2,127 in addition.

ADE FIT WHICH EMEDIED	Under Housing Act, 1957. Sections 24 and 27	1	1	1	1	1	1	1	ı	1	1		1	1	1	1	1	1	1	1	1	61
UNFIT HOUSES MADE FIT AND HOUSES IN WHICH DEFECTS WERE REMEDIED	After formal notice under Public Health Act, 1957. Sections 9 and 16	- 1	1	20	es	1	1	1	1	6	1		1	16	67	9	1	1	1	1	35	121
UNFIT HC AND HO DEFECTS	After informal action by local authority	7	eo	235	126	233	92	15	7	6	150		25	126	43	33	52	3	170	15	4	1,348
OLISHED DURING UNDER CT, 1957	Parts of build- ings closed	1	1	1	1	1	1	1	1	1	1		1	1	1	7	1	1	1	1	1	1
DEM SED EAR NG A	Closed in pursuance of an undertaking given by owners and	4	1	5	3	60	7	1	1	1	1		1	4	1	14	1	22	1	9	80	72
HOUSES DE OR CLOSEI THE YEAI HOUSING	Demolished as a result of formal or informal procedure	4	1	20	99	142	1	22	1	20	1		11	72	20	29	1	1	40	11	47	466
OUSES	Number of houses found to be in a state so dangerous to health as to be unfit for human	16	145	143	5	33	00	40	11	00	54		9	208	4	75	19	1	29	11	36	851
INSPECTION OF HOUSES DURING THE YEAR	Number of houses (included in previous column) inspected under the Housing Consoli- dated Regulations, 1925 and 1932	1	1	143	5	33	00	1	1	10	54		1	108	1	243	1	1	1	1	22	626
INSE	Total Number of houses inspected for housing defects (Public Health and Housing Acts)	27	290	291	932	473	184	150	200	88	708		135	754	62	306	37	114	838	125	632	6,646
	DISTRICT	Urban Districts Ashby-de-la-Zouch	Ashby Woulds	Coalville	Hinckley	Loughborough M.B.	Market Harborough		Oadby	Shepshed	Wigston	Rural Districts	Ashby-de-la-Zouch	Barrow-upon-Soar	Billesdon	:	Castle Donington	Lutterworth	Market Bosworth	Market Harborough	Melton and Belvoir	Totals

INSPECTION AND SUPERVISION OF FOOD

BIOLOGICAL MILK SAMPLING

The sampling of raw milk is generally confined to supplies which are retailed raw. Again, no samples showed evidence of infection with Myco tuberculosis.

All raw milk samples are examined at the Public Health Laboratory for Brucellosis. One large producer/retailer, who had a clear record over a number of years, experienced a breakdown in his herd with abortion. This was quickly picked up during routine sampling and an investigation of the herd carried out. The raw milk was diverted for pasteurisation (later only the milk from cows shown to be infected). Of 60 in-milk cows in the herd at the start of the investigation, II were shown to be giving milk infected with Brucella abortus by the direct culture laboratory technique. The investigation was complicated by the action of the farmer's veterinary surgeon, who had innoculated all the cows in the herd with S19 vaccine, following the first abortion. The assistance of the Divisional Veterinary Officer of the Ministry of Agriculture, Fisheries and Food was sought and the farmer advised to isolate all infected and doubtful cows during the investigation. Whilst building up his herd again, all cows and heifers coming into milk were sampled, as were cows bought on the open market, before their milk was put into the bulk supply. One of the cows bought in, a pedigree Jersey, was shown to be infected. Eventually, 23 cows were removed from the herd and all but two (including the Jersey referred to above) were sold for slaughter. This again illustrates the unfortunate position as it is today. There is no compulsion for known infected cows to be sold only for slaughter and thus a clean herd can become infected by the introduction of an infected cow. This single investigation involved the taking of 51 bulk and 373 individual samples of milk.

No case of Undulant Fever has come to light amongst this farmer's customers, probably on account of the prompt action taken. General Practitioners in the area were made aware of the circumstances by the District Medical Officer of Health.

Since farmers, and farm-workers' families, are at risk from Brucellosis, a screening survey has been commenced on all milk going into the dairies for processing. This will be reported on when it has been completed.

I am grateful to Dr. N. S. Mair, the Director of the Public Health Laboratory, and Mr. Findlay, the Divisional Veterinary Officer for their assistance and co-operation.

Clinical Examination of Cattle

The following figures are taken from the quarterly reports of the Divisional Veterinary Officer:

Milk and Dairies:	Number of Herd Inspections	Number of Cattle Examined
(a) Clinical examination of dairy cattle .	. 1,514	48,557
animala anaminad	of . 133,402	
Brucella abortus		
Number of calves vaccinated under C	Calf Vaccination	
Scheme	5,	643

Milk Pasteurising Plants

Nine plants were in operation at the beginning of the year. From 1st April, Hinckley Urban District Council took over the duties of a Food and Drugs Authority and became responsible for the two processing plants in their area. One of these was closed later in the year and the business transferred to another dairy in the county.

405 inspections of the licensed plants were carried out by the County Health Inspector and 584 samples of milk were taken for laboratory examination. Two phosphatase test failures were reported. These were both from the same plant and probably arose because of insufficient instruction being given to the person responsible.

114 samples of washed bottles were taken for sterility tests. 12 of these were reported as not complying with the standard of the Public Health Laboratory. These all came from the same dairy and follow-up samples were taken but it was found almost impossible to guarantee good results from this washing machine. (The dairy closed early in 1965). Apart from this particular plant the results showed that the equipment in use is capable of good results and is properly maintained. 50 samples of washed churns were also taken. Five of these, in one batch, were unsatisfactory, and it was found that there was a defect in the steam pipe to the steriliser of the washer concerned. This was remedied and subsequent results were satisfactory.

The following table shows the amount of milk processed at the various dairies in the county:

Туре	of Plar	nt	Capacity in gallons per hour	Daily output in gallons
H.T.S.T.			250	950
H.T.S.T.			1,200	15,000
H.T.S.T.			800	3,750
H.T.S.T.			350	2,500
H.T.S.T.			350	1,000
Holder			75	320
Holder			100	100

In addition to the samples of milk taken at the processing dairies, 233 samples of pre-packed milk were taken from dealers, either on the rounds or from shops.

Milk to Schools and County Council Establishments

All supplies of milk to schools, county homes, children's homes, residential and private schools are approved by the County Health Inspector. The table below shows the designation of milks supplied to the various types of school. 480 samples of milk were submitted to the Public Health Laboratory for the methylene blue and phosphatase test in the case of pasteurised milks and for biological test in the case of raw milks.

Sch	Schools		Tuberculin Tested	Pasteurised	Totals	
Grammar			_	14	14	
Modern			_	17	17	
Primary			7	247	254	
High			_	16	16	
Residential			_	3	3	
Private			1	22	23	
Totals			8	319	327	

Milk and Dairies Regulations 1963

		Out- standing, 31.12.64	1	1	1	1	1	1	1	1	1	1		1	1	1	1	1	1	1	1	ı	1
	Distributors	Remedied	1	1	1	1	1	1	1	1	1	1		1	es	1	1	1	1	1	1	1	4
Contraventions	Q	Found	1	1	1	1	1	1	1	1	1	1		1	63	1	1	1	1	1	1	1	4
Contra		Out- standing, 31.12.64	1	1	1	4	1	1	1	1	ı	67		1	ı	I	1	+	1	1	1	1	9
	Dairies	Remedied	1	1	1	1	1	1	1	1	1	63		1	1	1	1	1	1	1	1	1	4
		Found	1	1	1	5	1	1	1	1	1	1		1	1	1	1	1	1	1	1	ı	7
	ctions	Distribu- tors	1	1	1	13	21	19	9	6	1	1		4	49	1	28	15	12	11	4	7	198
	Inspections	Dairies	ı	1	9	13	6	9	00	1	20	4		83	1	1	12	ı	01	1	1		84
	Register	Distribu- tors	4	9	39	31	25	7	4	6	1	53		67	12	1	28	15	62	18	12	7	251
	No. on Register	Dairies	1	1	6	9	15	67	4	1	4	67		3	1	1	2	1	2	1	1	1	52
			:	:	:	:	:	:	:	:	:	:		:	:	:	:	:	:	:	:	:	:
	Disease		Urban Districts Ashby-de-la-Zouch	Ashby Woulds	Coalville	Hinckley	Loughborough M.B.	Market Harborough	Melton Mowbray	Oadby	Shepshed	Wigston	Rural Districts	Ashby-de-la-Zouch	Barrow-upon-Soar	Billesdon	Blaby	Castle Donington	Lutterworth	Market Bosworth	Market Harborough	Melton and Belvoir	Totals

	Number	Number of premises registered	gistered		Number	Number of samples collected	collected	ram d
District	Manufacture and Retail	Manufacture only	Retail only	Grade 1	Grade 2	Grade 3	Grade 4	Total
Urban Districts Ashby-de-la-Zouch	1	1	32	ı	1	1	1	1
Ashby Woulds	1	1	7	1	1	1	1	1
Coalville	1	1	105	57	67	60	63	64
Hinckley	1	1	188	00	63	1	63	13
Loughborough M.B	1	1	210	60	1	1	1	60
Market Harborough	1	1	62	ı	1	1	1	1
Melton Mowbray	1	1	54	9	1	1	1	9
Oadby	1	1	23	00	1	1	1	00
Shepshed	1	1	26	9	1	1	1	9
Wigston	1	1	98	34	4	00	1	41
Rural Districts								
Ashby-de-la-Zouch	1	1	63	16	1	1	1	16
Barrow-upon-Soar	1	1	187	00	60	1	1	13
Billesdon	1	1	28	14	1	ca	1	16
Blaby	1	1	130	151	19	4	1	174
Castle Donington	1	1	67	1	1	1	1	1
Lutterworth	1	1	72	1	1	1	1	1
Market Bosworth	1	1	114	1	1	1	1	1
Market Harborough	1	1	41	1	1	1	1	1
Melton and Belvoir	1	1	76	54	5	ı	1	59
Totals	60	1	1,506	365	36	13	5	419
			THE COLUMN					T

Per cent of samples within Grade I \dots 87.11 % Per cent of samples within Grades I and II \dots 95.70 %

MEAT INSPECTION

Two slaughterhouses ceased to be licensed, but an additional one came into use, leaving 60 at the end of the year. 100% meat inspection was achieved and as this involved 170,815 animals, a considerable amount of overtime and weekend work was involved. Over 18,000 more animals were killed this year than in 1963, mainly at three large wholesale slaughterhouses.

District	No. of slaughter- houses	Total No. of animals slaughtered	Total No. of animals examined	No. of knackers' yards	No. of inspec- tions
Urban Districts					
Ashby-de-la-Zouch	1	3,823	3,823	_	-
Ashby Woulds	1	262	262	_	-
Coalville	4	6,785	6,785	_	-
Hinckley	5	9,776	9,776	1	5
Loughborough M.B.	2	4,285	4,285	1	23
Market Harborough	1	51,858	51,858	_	-
Melton Mowbray	1	16,945	16,945	1	6
Oadby	2	13,499	13,499	_	_
Shepshed	1	1,311	1,311	-	_
Wigston	1	3,204	3,204	1	3
Rural Districts					
Ashby-de-la-Zouch	2	2,154	2,154	1	3
Barrow-upon-Soar	9	4,918	4,918	_	-
Billesdon	1	655	655	_	_
Blaby	8	21,420	21,420	_	_
Castle Donington	3	5,104	5,104	_	-
Lutterworth	7	2,996	2,996	1	2
Market Bosworth	4	16,088	16,088	_	-
Market Harborough	2	2,833	2,833	_	_
Melton and Belvoir	5	2,899	2,899	_	-
Totals	60	170,815	170,815	6	42

Carcases Inspected and Condemned

1955, and other legislation of and edvertisement of the cha Public Congral Decum	Cattle exclu- ding Cows	Cows	Calves	Sheep and Lambs	Pigs
Number killed (if known)	24,480	1,331	856	107,087	37,047
Number inspected	24,480	1,331	856	107,087	37,047
All Diseases except Tuberculosis: Whole carcases condemned	14	6	38	185	84
Carcases of which some part or organ was condemned	5,433	391	9	3,704	2,978
Percentage of number in- spected affected with disease other than tuber- culosis	22.25%	29,82%	5.49%	3.63%	9.72%
Tuberculosis only: Whole carcases condemned	124	_		_	2
Carcases of which some part or organ was condemned	17	6	_	and a	319
Percentage of number in- spected affected with tuberculosis	0.07 %	0.45%	-	-	0.87%
Cysticercosis: Carcases of which some part or organ was con- demned	71	1	_	_	_
Carcases submitted to treatment by refrigeration	48	1	-	_	-

FOOD AND DRUGS

Food and Drugs Act, 1955

The provisions of the Food and Drugs Act, 1955, and other legislation relating to the composition, adulteration, labelling and advertisement of food and drugs are administered by the Inspectors of the Public Control Department of the County Council for the whole of the county area with the exception of the Hinckley Urban District.

I am grateful to Mr. F. W. Arnold for supplying the following summary of the samples taken during 1964:

	7,100	nber ained	Unsati	sfactory	
Commodity	Formal	Informal	Formal	Informal	Why Unsatisfactory
Foodstuffs:					
Milk	 -	970*	-	4	Slightly deficient in milk fat content
Almonds	 -	2	_	_	
Anchovies in Olive Oil	 _	1	-	-	
Apple Dumpling	 _	1	_	_	
Bakers Cheese	 -	1	_	1	Low in fat content
Beans in Tomato Sauce	 -	1	-	-	
Beef Extract	 -	1	_	_	
Beef, Potted	 -	1	-	-	
Beef Stock Cubes	 -	1	-	-	
Biscuits	 -	14	-	-	
Black Pudding	 -	4	-	-	
Blackcurrant Drink	 _	1	_	-	
Bread Sauce	 -	1	-	-	
Breakfast Grill	 -	1	-	-	
Brewers Yeast Flakes	 -	1	_	-	
Butter	 _	2	_	_	
Cakes and Pastries	 -	8	-	-	
Cashew Nuts	 -	2	-	-	
Cheese	 -	4	-	1	Had appearance and com- position of soft cheese
Cheese with Beer	 _	1	_	_	position of our contract
Cheese Sticks	 _	1	-	-	
Cherries, drained	 _	1	_	_	
Cherries, glacé	 _	1	-	-	
Chicken Essence	 -	1	_	_	
Chicken and Mushroom	1	1	-	-	
Christmas Pudding	 -	8	-	-	
Chocolate Liqueurs	 -	1	-	1	Contained insufficient al- cohol to justify des- cription "Full Strength"
Coconut	 _	2	_	_	on engin

		Nun	nber nined	Unsati	sfactory	· ·
Commodity	y	Formal	Informal	Formal	Informal	Why Unsatisfactory
Coffee		-	1	-	-	
Corned Beef		-	1	-	-	
Corn Oil		-	1	-	-	
Cornish Pasty		-	1	-	-	
Crab Spread		-	1	-	-	
Cream(2*)		-	5	-	-	
Curry Powder		-	2	_	-	
Custard Powder		-	1	_	-	
Dairy Topping		-	1	-	1	Had the composition of cream. Insufficient in- dication of contents.
Dehydrated Vegeta	bles	-	4	-	1	Packet not labelled "Dried" or "Dehyd- rated"
Diabetic Milk Choo	colate	-	2	-	-	
Dried Fruit		-	12	-	1	Contained excessive sul- phur dioxide preserva- tive
Drinking Chocolate		-	1	-	-	
Faggots		-	4	-	-	
Fish Cakes		-	8	-	-	
Flan Filling		-	2	-	-	
Flour		-	1	-	-	
Fruit, Tinned		-	10	_		
Fruit pies		-	1	-	-	
Ginger		-	2	_	-	
Gravy Browning		-	1	-	-	
Hamburgers		-	6	-	-	
Haslet		-	2	-	-	
Herbs, dried		-	8	-	-	
Herring Fillets		-	1	-	-	
Honey		-	5	-	-	
Horseradish Sauce		-	1	-	-	
Ice Cream (134*)		2	137	-	2	Contained only 2% fat
Irish Stew		-	1	-	-	
Iron Brew		-	1	_	_	
Iron Brew Essence		-	2	-	2	Iron content only 1.58% instead of 2.5% as declared
Jam		-	6	-	-	
Jelly/Jelly Crystals		-	3	-	-	
Jelly with fruit		-	2	-	-	
Lamb with peas an		-	1	-	-	
Lard		-	4	-	-	
Lemon Cheese		-	1	-	-	
Lemon Curd		-	2	-	-	
Lolly Mix		-	1	-	-	

			nber ained	Unsati	sfactory			
Commodity		Formal	Informal	Formal	Informal	Why Unsatisfactory		
Macaroon Paste		-	1	_	-			
Malt Vinegar		-	4	-	-			
Margarine		-	7	-	-			
Marmalade		-	2	-	-			
Marzipan		-	7	-	-			
Meat Pies		-	2	-	1	Contained only 18% meat		
Meatless steaks		-	1	-	-			
Milk Ice		-	1*	-	-			
Milk, 18% Butterfat		-	1	-	-			
Milk, evaporated		-	1	-	-			
Milk powder		-	4	-	-			
Mincemeat		-	4	-	-			
Mousse		-	4	-	-			
Mushroom Ketchup		-	1	-	-			
Mustard		-	1	-	-			
Nutmegs, ground		-	1	-	-			
Olive Oil		-	1	-	-			
Orange Essence		-	1	-	-			
Orange drink		-	9	-	-			
Orange juice		-	1	-	-			
Paprika		-	1	-	-			
Parsley, dried		-	1	-	-			
Pasties		-	2	-	-			
Pastry		-	4	-	-			
Pea Flour		-	3	-	-			
Peanut Butter		-	2	-	-			
Pepper		_	1	_	-			
Pickled Red Cabbage		-	1	-	-			
Pie Filling		-	11	-	-			
Pilchards in Tomato		-	1	-	-			
Plums in syrup		-	1	-	-			
Pork and Goose Liver Pat	e	-	1	-	-			
Pork Pie		-	2	-	-			
Potato Crisps/Sticks, etc.		-	10	-	-			
Potted Meat paste		1	-	-	-			
Poultry Seasoning		-	1	-	-			
Prawns		-	1	-	-			
Prepacked Meal		_	2	-	-			
Prunes		_	1		_			
	9-3-1		1					
Raspberries, tinned			200			decomposite the state of		
Raspberry flavour spread		-	1	-	-			
Raspberry Yogurt		-	1	-	-			
Rice, ground		-	2	-	-			
Salmon spread		-	1	-	-			
Salt		-	1	-	-			
Sauce Mix		1	_	-	-			

	-	nber ained	Unsati	sfactory	
Commodity	Formal	Informal	Formal	Informal	Why Unsatisfactory
Sausages, Beef	16	4	1	-	Contained undisclosed sulphur dioxide pre- servative
Sausages, Pork	34	1	3	-	2 contained undisclosed sulphur dioxide pre- servative. 1 contained only 58% meat
Sausages, Cocktail	-	2	-	-	the second second
Sausage Meat, Beef	-	1	_	-	
Sausage Meat, Pork	_	1	_	-	
Sausage Rolls	_	1	-	-	
Scampi	-	1	_	-	
Semolina	-	1	-	-	
Shandy	-	1	-	-	
Shrimps	-	1	-	-	
Soft Drinks	-	31	-	1	Iron brew deficient in declared iron content
Soup Mix/Powder	-	11	-	-	
Spice	-	1	-	-	
Sponge Cake Mix	-	1	-	-	
Steak and Kidney Pies	-	7	-	1	Contained only 11% meat
Stuffing Mix	1	-	-	-	
Sweets	1	2	-	-	
Table Cream	-	2	-	-	
Tea	-	2	-	-	
Toffee Apples	-	1	-	-	
Tomatoes, tinned	-	2	-	-	
Vegetable Curry with Rice	-	1	-	-	
Vegetable Salad, dehydrated	-	1	-	-	
Yeast Extract	-	2	-	-	
Beer, Wines and Spirits			1		
Beer, canned	-	2	-	-	
Brandy	-	28*	-	-	
Gin	-	56*	-	-	
Ginger Beer Shandy	-	1	-	-	Corpus de Laborat de Laborat de la constantina della constantina d
Rum	-	38*	-	-	
Tonic Wine	-	2	-	_	
Vodka	1	15* 55*	-	-	
Whisky	-	99*	-	_	
Medicines, Tonics, etc.					
Adults Nerve Tonic	-	1	-	-	
Antacid Mints	-	1	-/	-	
Antiseptics/Lozenges	-	3	-	-	
Anti-Smoking Pastilles	-	1	-	-	
Aspirin Tablets	-	2	-	-	

	Number Obtained		Unsatisfactory		
Commodity	Formal	Informal	Formal	Informal	Why Unsatisfactory
Breath Purifier	_	1	-	_	
Bronchial Mixture	-	1	-	-	
Calamine Lotion	-	1	-	-	
Cold Powders	-	1	-	-	
Cold Sore Lotion	-	1	-	-	
Cough Mixture/Pastilles	-	4	-	-	
Energy Tablets	-	1	-	-	
Epsom Salts	-	1	-	-	Charles Committee
Eye Lotion	-	1	-		Tell cost enamely
Gastro Enteritis Tablets	-	1	-		The state of the s
Gee's Linctus	-	1	-	-	Some Real company
Glauber's Salt	-	1	-	-	The second second
Glycerin of Thymol Com-					A STATE OF THE PARTY OF THE PAR
pound	-	1	-	-	A Plantage
Halibut Liver Oil Capsules	-	1	-	-	A CONTRACTOR OF THE PARTY OF TH
Indigestion Tablets	-	2	-	-	
Laxative Tablets	-	1	-	-	
Linctus of Codeine	-	1	-	-	
Pain Relievers	-	3	-	-	
Protein Nerve Tonic	-	1	-	-	
Quinine and Cinnamon	-	1	-	-	
Rose Hip Syrup	-	1	-	-	
Sleeping Tablets	-	1	-	-	
Slimmer Treatment	-	1	-	1	One set of tablets contain- ed three times the stated amount of vitamin B ₁
Vitamin Tablets	-	3	-	-	
Water Sterilizing Tablets	-	1	-	-	
Zinc Ointment	-	1	-	-	
Totals	57	1,704	4	18	
Grand Totals	1,761		22		Supplemental Control
Previous Year	1,791		39		

^{*}Samples tested departmentally

The sampling rate for the county was 4.5 per thousand population. 22 samples were unsatisfactory (1.2% of the total) and of these seven were labelling irregularities. None of the unsatisfactory samples was the subject of court proceedings.

The samples shown were obtained from a variety of sources including, in addition to shops, cafes and snack bars, fish and chip shops, food factories and processing houses, hawkers, licensed premises (both food and drink), market stalls, mobile shops, roundsmen and deliverymen, vendors advertising in print, by film or by roadside sign, vending machines and, of course, the usual attention was paid to the supplies of schools, county homes, hospitals, etc.

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