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NORFOLK COUNTY COUNCIL

INSTITUTE OF SOCIAL
MEDICINE

10, PARKS ROAD,
OXFORD

ANNUAL REPORT

OF THE

COUNTY MEDICAL OFFICER

FOR

1946

T. RUDDOCK-WEST, M.D., D.P.H.

County Medical Officer

Public Health Officers of the County Council

WHOLE-TIME.

County Medical Officer:

T. RUDDOCK-WEST, M.D., B.S., D.P.H.

Deputy County Medical Officer:

W. R. CLAYTON HESLOP, M.D., F.R.C.S.E., D.P.H.

Senior Assistant County Medical Officer:

S. T. G. GRAY, M.B., CH.B., D.P.H. (From 1st July)

Clinical Tuberculosis Officers:

W. B. CHRISTOPHERSON, M.R.C.S., L.R.C.P.

H. B. HODSON, M.D., M.R.C.P., D.P.H.

D. MORRISON SMITH, M.B., CH.B. (Acting—to 10th Feb.)

Assistant County Medical Officers and District Medical Officers of Health:

L. G. ANDERSON, M.D., CH.B., D.P.H.

S. T. G. GRAY, M.B., CH.B., D.P.H. (To 30th June)

IRENE B. M. GREEN, M.D., B.S., D.P.H.

VIOLET M. JEWSON, M.A., M.B., CH.B.

J. W. McINTOSH, B.Sc.(P.H.), M.B., CH.B., F.R.S.C.E.

C. MARGARET McLEOD, M.B., CH.B.

MARY V. ROSE, M.B., B.S. (To 31st Aug.)

D. MORRISON SMITH, M.B., CH.B. (From 18th Feb.)

C. S. THOMSON, M.B., B.Ch., D.P.H. (From 25th Aug.)

Assistant Medical Officer and Medical Officer County Isolation Hospital:

S. T. G. GRAY, M.B., CH.B., D.P.H. (To 24th Aug.)

C. S. THOMSON, M.B., B.Ch., B.A.O., D.P.H. (From 25th Aug.)

Senior Dental Officer:

P. MILLICAN, L.D.S.

Assistant Dental Officers:

C. BAINES, L.D.S. (To 30th April)

D. M. BRYANT, L.D.S. (To 26th Oct.)

A. J. CAIRNS, L.D.S. (To 28th July)

SADIE S. HOW, L.D.S.

J. NIXON, L.D.S.

E. C. PACKHAM, L.D.S.

C. K. TAYLOR, L.D.S. (From 9th Sept. to 23rd Nov.)

C. R. WOLFENDALE, L.D.S.

County Sanitary Inspector:

G. W. CURTIS, A.M.I.S.E., C.S.I.B., Meat and Food Inspectors' Cert.

Assistant County Sanitary Inspector:

A. J. ALLISON, C.S.I.B., Meat and Food Inspectors' Cert.

Supervisor of Midwives and Superintendent Health Visitor:

MISS M. V. E. DAVEY, S.R.N., S.C.M., R.S.I.Cert.

Senior Assistant Supervisor:

MISS D. E. UNSWORTH, S.R.N., S.C.M., H.V.Cert.

Assistant Supervisor:

MISS N. FOLLENFANT, S.R.N., S.C.M., H.V.Cert.

Health Visitor:

MISS D. PARKER, R.S.C.N., S.C.M.
also 139 District Nurse-Midwives (part-time)

Physiotherapists:

MRS. F. M. F. KEANE, C.S.P.
MISS N. POLGLASE (From 14th Oct. to 30th Nov.)
MISS F. W. THOMAS, C.S.P., O.N.C.
MISS M. H. WYER, C.S.P., O.N.C., O.T.C.

School Nurses and Child Life Protection Visitors:

MISS E. B. BYGRAVE, Trained Nurse
MRS. P. D. CHADWICK, R.S.C.N.
MISS D. M. HODGSON, S.R.N. (From 6th May)
MISS A. E. HOLDEN, R.S.C.N.
MRS. A. M. KNOTT, Trained Nurse, Sick Children
MRS. F. B. NEVILLE, S.R.N.
MRS. W. M. PETTS, S.R.N. (Full-time from 1st May)
MRS. M. I. QUALE, S.R.N.
MISS C. SHINGLETON, S.R.N.
MISS D. VICKERS, S.R.N.
MRS. C. WAINWRIGHT, Trained Nurse, Sick Children
MRS. E. WITTRED, S.R.N.

Dental Attendants:

MRS. M. BAINES (Part-time to 30th April)
MRS. J. J. FORSTER (To 23rd Nov.)
MISS P. M. HART (From 1st July)
MISS N. RADFORD
MRS. G. M. C. RICHES (To 31st Aug.)
MISS G. H. RICHES (From 8th July)
MISS B. ST. QUINTIN

Home Teachers and Visitors under the Blind Persons Act:

MISS H. G. BELLAMY, Cert. College of Teachers of the Blind
MISS M. R. GREEN (From 1st Oct.)
MISS K. M. HOLLIDAY, Cert. College of Teachers of the Blind.

Melton Lodge Orthopædic Home:

Matron: MISS A. L. M. HELLARD, S.R.N., S.C.M., R.F.N.
Head Teacher: MRS. P. M. LEGG, Cert. Teacher (Resigned Aug.)
MRS. R. W. REYNOLDS (Temporary from 29th July)

County Isolation Hospital:

Matron: MISS M. D. PATERSON, S.R.N., S.C.M., R.F.N.

Chief Clerk:

C. J. HUBBARD

PART-TIME.

Orthopaedic Surgeon:

H. A. BRITTAIN, M.A., MCH., F.R.C.S.

Consultants—Maternity Services:

M. W. BULMAN, M.D.(Obstet.), M.S., F.R.C.S., F.R.C.O.G.
J. O. HARRISON, M.B., F.R.C.S.
J. LEWIN, M.B., B.S., F.R.C.S.

Ophthalmic Specialists:

A. GREENE, M.D., F.R.C.S.I.
R. H. HUCKNALL, M.B., F.R.C.S.E., D.O.M.S. (From Nov.)
G. MAXTED, M.D., F.R.C.S.
S. T. PARKER, M.B., F.R.C.S.
W. E. RUTLEDGE, L.R.C.P., L.R.C.S., D.O.M.S.
DOROTHY K. SOUPER, M.A., M.B., D.O.M.S. (From Nov.)

Aural Specialists:

N. S. CARRUTHERS, F.R.C.S.E., D.L.O.
R. A. HIGHMOOR, F.R.C.S.E. (From Nov.)
J. LEWIN, M.B., F.R.C.S.

Medical Officers, Venereal Diseases Clinics:

A. G. SMITH, M.D., F.R.C.S., Norwich
J. W. MCINTOSH, M.B., CH.B., B.SC.(P.H.), F.R.C.S.E., King's Lynn

Consulting Heart Specialist:

W. A. OLIVER, M.D., M.R.C.P. (From Nov.)

Speech Therapist:

MISS DOREEN G. BARBER (From Sept.)

Pathologist:

G. P. C. CLARIDGE, M.B., B.SC.

County Analyst:

W. LINCOLNE SUTTON, F.R.I.C.

Inspectors under Food and Drugs Act:

A. R. BAILEY (From March)
E. R. GRAINGER (From April)
W. OLIVER
E. C. WESTWOOD

(These Officers are also Inspectors of Weights and Measures)

Medical Officers under the Poor Law Acts:

District Medical Officers	...	85
Medical Officers of Institutions	...	12
Public Vaccinators	...	80
Vaccination Officers	...	25

Milk and Dairies Acts:

Veterinary Inspectors	...	35
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Dental Surgeons:

Dental Officers under the Council's Schemes for Expectant and Nursing Mothers,
Tuberculosis, Blind Persons and Public Assistance 24

The delay in the presentation of this report is regretted.

In 1946 the birth rate per thousand of the estimated population was 19.79, an increase of 1.41 on the previous year, and .69 above the birth rate of England and Wales.

Illegitimate births decreased to the proportion of 1 in 11.7 births. The proportion of illegitimate births had risen from 1 in 11 in 1943, to 1 in 7.3 in 1945. The decrease in 1946 is a welcome indication of the restoration of normal home life after the end of the war.

The death rate of the year per 1000 estimated population was 12.18 as compared with 11.5 for England and Wales. The mortality rate in infants under 1 year of age per 1000 births was 31.46 as compared with 41.38 the previous year and as against 43.00 for England and Wales. The maternal mortality rate per 1000 births was 1.62 as compared with 1.30 for the country as a whole.

New cases of Pulmonary Tuberculosis notified during the year show a case rate of .85 as compared with .70 in 1945; the case rate for Non-Pulmonary cases being .34 as against .48 in the previous year.

Most of the staff who have been absent in H.M. Forces since the beginning and early days of the war returned to duty during 1946, and my thanks are due to them for the way in which they have rehabilitated and settled down to the work of the Department, undoubtedly easing the burden of the much depleted staff who had carried on in their absence.

Altogether 1946 has been a satisfactory year in that it has seen the restoration of various schemes which had to be suspended during the war years. It is hoped that 1947 will show still more improvement in this direction, and that a further stride forward will be made towards a recovery from the effect that war has had upon the community.

T. RUDDOCK-WEST.

Public Health Department,

29, Thorpe Road,

Norwich.

June, 1948.

Statistics and Social Conditions of the Administrative County.

AREA	...	...	...	...	...	1,302,744 acres
POPULATION—CENSUS, 1931	...	...	...	...	...	318,903
	Estimated by Registrar-General					334,050
PRODUCT OF PENNY RATE for general purposes	...					£5,240
RATEABLE VALUE for general purposes	...	...	...	...	...	£1,301,398

BIRTHS AND DEATHS.

	Total.	M	F.
Live births—			
Legitimate	6049	3091	2958
Illegitimate	563	276	287
Birth rate per 1000 of the estimated population:	19.79		
Still Births	168	91	77
Rate per 1000 total (live and still) births:	24.63		
Deaths	4071	2037	2034
Death rate per 1000 of the estimated population:	12.18		
Deaths from Puerperal Causes—			
	Deaths.	Rate per 1000 total (live and still) births.	
Puerperal sepsis	1	0.15	
Other puerperal causes	10	1.49	
Total	11	1.66	
Death rate of Infants under 1 year of age—			
All infants per 1000 live births			31.46
Legitimate infants per 1000 legitimate live births			29.75
Illegitimate infants per 1000 illegitimate live births			49.73
Deaths from Cancer (all ages)			674
Deaths from Measles (all ages)			
Deaths from Diarrhoea (under 2 years of age)			20
Deaths from Whooping Cough (all ages)			11

The following table shows the number of live births registered and the birth rates during the past five years:—

	URBAN.		RURAL.		ADM. COUNTY.		Rate for
Year	Net No. Regstd.	Rate.	Net. No. Regstd.	Rate.	Net. No. Regstd.	Rate.	England & Wales.
1942	1130	17.42	4901	18.41	6031	18.25	15.8
1943	1114	17.43	4693	17.78	5807	17.70	16.5
1944	1363	21.28	5248	19.77	6611	20.06	17.6
1945	1137	18.01	4832	18.46	5969	18.38	16.1
1946	1351	20.48	5261	19.62	6612	19.79	19.1

The following table gives a comparison of the number of deaths and death rates during the past five year:—

Year.	URBAN.		RURAL.		ADM. COUNTY.		Rate for England & Wales.
	No. of Deaths.	Crude Death Rate.	No. of Deaths.	Crude Death Rate.	No. of Deaths.	Crude Death Rate.	
1942 ...	927	14.29	3341	12.55	4268	12.89	11.6
1943 ...	865	13.54	3277	12.41	4142	12.63	12.1
1944 ...	865	13.50	3344	12.59	4209	12.77	11.6
1945 ...	857	13.57	3198	12.22	4055	12.48	11.4
1946 ...	870	13.19	3201	11.94	4071	12.18	11.5

The maternal mortality rate per 1000 births was 1.66, compared with 1.06 for England and Wales.

The following table gives the causes of death in 1946 at specified ages:—
(Figures given by Registrar-General)

CAUSES OF DEATH.		Total all Ages.	0-	1-	5-	15-	45-	65-
Typhoid and Paratyphoid Fevers ...	...	—	—	—	—	—	—	—
Cerebro-spinal Fever ...	...	5	—	1	—	2	1	1
Scarlet Fever ...	...	—	—	—	—	—	—	—
Whooping Cough ...	...	11	9	2	—	—	—	—
Diphtheria ...	...	1	—	—	1	—	—	—
Tuberculosis of the Respiratory System ...	...	94	—	1	—	55	27	11
Other Forms of Tuberculosis ...	...	26	—	8	5	6	6	1
Syphilitic Diseases ...	...	12	1	—	—	—	11	—
Influenza ...	...	46	1	1	—	2	12	30
Measles ...	...	—	—	—	—	—	—	—
Acute Polio-myelitis and Polio-encephalitis ...	...	—	—	—	—	—	—	—
Acute inf. encephalitis ...	...	2	—	—	—	—	2	—
Cancer of Buc. Cav. and Œsoph. (M) Uterus (F) ...	...	71	—	—	—	4	23	44
Cancer of Stomach and Duodenum ...	...	113	—	—	—	1	25	87
Cancer of Breast ...	...	61	—	—	—	4	21	36
Cancer of all other sites ...	...	429	—	—	2	21	128	278
Diabetes ...	...	56	—	—	—	4	7	45
Intra-cranial Vascular Lesions ...	...	509	1	—	1	8	82	417
Heart Disease ...	...	1164	—	—	—	22	135	1007
Other diseases of Circulatory System ...	...	157	—	—	—	—	15	142
Bronchitis ...	...	158	2	—	2	5	21	128
Pneumonia ...	...	123	24	6	—	6	24	63
Other Respiratory Diseases ...	...	38	—	1	—	—	13	24
Ulcer of Stomach or Duodenum ...	...	28	—	—	—	2	13	13
Diarrhœa under 2 years ...	...	20	20	—	—	—	—	—
Appendicitis ...	...	10	—	—	2	2	2	4
Other Digestive Diseases ...	...	81	3	3	3	4	19	49
Nephritis ...	...	84	—	2	—	10	19	53
Puerperal and Post-abortive Sepsis ...	...	1	—	—	—	1	—	—
Other Maternal Causes ...	...	10	—	—	—	10	—	—
Premature Birth ...	...	58	58	—	—	—	—	—
Con. mal., birth inj., infant dis. ...	...	92	74	3	4	5	5	1
Suicide ...	...	38	—	—	—	18	12	8
Road Traffic Accidents ...	...	49	—	2	2	13	16	16
Other violent causes ...	...	73	9	1	4	13	10	36
All other causes ...	...	451	6	6	4	40	65	330
All causes ...	...	4071	208	37	30	258	714	2824

General Provision of Health Services in the Area.

LABORATORY.

8085 specimens were examined at the Public Health Laboratory during the year.

AMBULANCE FACILITIES, NURSING IN THE HOME, HOSPITALS, LOCAL GOVERNMENT ACT, 1929.

There has been no alteration in these Services.

HOSPITAL CAR SERVICE.

The Hospital Car Service (organised by the St. John Ambulance Brigade, the British Red Cross and the W.V.S.) which commenced in this County 1st August, 1945, continues to provide valuable assistance in connection with the attendance of patients at hospitals, clinics, etc.

Maternity and Child Welfare.

MIDWIFERY SERVICES.

As Local Supervising Authority for the whole of the administrative County, notifications were received by the Council Council from 206 midwives of their intention to practice in the area.

MIDWIVES' ACT, 1936.

Full particulars of the Council's scheme and agreement with the Norfolk Nursing Federation appeared in the Report for 1937.

Section 6 of the Act has been applied to the area.

INSPECTION OF MIDWIVES.

360 routine inspection visits were paid during the year. Special visits to cases requiring supervision were also paid wherever necessary.

Under the rules of the Central Midwives' Board midwives are required to summon medical help under certain specified emergencies, and to notify the Local Supervising Authority that they have done so. 571 notifications were received in respect of domiciliary cases, and 142 for patients in Institutions.

At the end of the period under review, 31 domiciliary and 3 institutional midwives were qualified to administer analgesia in accordance with the requirements of the Central Midwives' Board. Training in this work continues as vacancies can be obtained. 73 such administrations in domiciliary practice were made during the year.

OPHTHALMIA NEONATORUM.

The cases notified are shewn in the following table:—

Year.	Cases.			Vision un- impaired.	Vision im- paired.	Vision Lost.	Deaths.	Under treatment at end of year.
	Notified.	Treated.						
		At Home.	At Hospital.					
1942	16	15	1	16	—	—	—	—
1943	10	8	5	10	—	—	—	—
1944	13	11	2	13	—	—	—	—
1945	21	16	5	21	—	—	—	—
1946	15	13	2	14	—	—	—	1

PUERPERAL PYREXIA.

46 notifications were received, 9 being in respect of institutional cases. In no case was it necessary to ask for a second opinion, 11 patients were removed to hospital, whilst 10 other cases were in hospital when notified.

INSTITUTIONAL PROVISION FOR MOTHERS AND CHILDREN.

23 beds were provided in 8 of the Public Assistance Institutions for maternity cases, 177 mothers being admitted to these beds during the year. In addition, the Emergency Maternity Home, Stow Vicarage, was taken over entirely by the Council during the year, and the accommodation of 20 beds was used for the reception of 203 expectant mothers, 184 of whom came from the area. Other anticipated normal cases were admitted by arrangement to the Wisbech County Maternity Home (15), and Hartismere House, Eye (6).

During the year, admission of 35 girls to voluntary Homes for unmarried mothers and other Institutions was authorised. 25 of these cases were dealt with at Cliff Hostel, Norwich, a Home run by the Diocesan Moral Welfare Association, at which the County Council reserves 6 beds.

Stow Hall, near Downham Market (West Norfolk), and Drayton Hall near Norwich (East Norfolk), have been acquired for use at Maternity Homes, and adaptations are in progress. When completed these two Homes will help to alleviate the present shortage of accommodation in the County.

MATERNAL MORTALITY.

The causes of death due to pregnancy or childbirth are given by the Registrar-General as follow:—

Puerperal Sepsis	...	...	1
Other Puerperal Causes	...	...	10
Total	...	...	11

Year.	Maternal Deaths.	No. of Births.	Rate per 1000 total Births.	England and Wales.
1937	8	4878	1.58	3.11
1938	10	4861	1.98	3.08
1939	20	4907	4.01	2.82
1940	9	4992	1.67	2.16
1941	12	5667	2.12	2.23
1942	7	6238	1.12	2.01
1943	11	5978	1.84	2.29
1944	13	6611	1.97	1.93
1945	8	6151	1.30	1.79
1946	11	6780	1.62	1.06

The cases of women who died in, or immediately following, childbirth were investigated, and confidential reports sent to the Chief Medical Officer of the Ministry of Health.

I wish again to record my appreciation of the co-operation of the medical practitioners in reporting voluntarily all such cases, and enabling the desired confidential reports to be completed.

NOTIFICATION OF BIRTHS.

The County Council is Maternity and Child Welfare Authority for the whole of the Administrative County, with the exception of King's Lynn Borough.

5327 births (live and still) were notified in the County Maternity and Child Welfare Area.

HEALTH VISITING.

With the exception of a few areas, the County is covered by the District Nurse-Midwives as part-time Health Visitors, there being only one whole-time Visitor.

The following is a brief summary of the health visitors' work during the past five years:—

Year.	Expectant Mothers.		Infants under 1 year.		Children 1—5 years.	Grand Total.
	First Visits.	Total Visits.	First Visits.	Total Visits.		
1942	4735	19971	4477	36098	54216	110285
1943	4447	21116	4539	42916	56091	120123
1944	4683	22512	5007	43376	53823	119711
1945	4092	19552	4619	42411	54106	116069
1946	4900	22624	5018	44054	56802	123480

MATERNITY AND CHILD WELFARE CENTRES.

31 Infant Welfare Centres are provided and maintained by the County Council. In addition there are 2 centres provided and maintained by Voluntary Associations aided by grants from the Council. Grants are also made to 2 centres outside the County in respect of attendances made by Norfolk mothers and children. 20 Weighing Centres are also provided by Voluntary Associations.

ANTE- AND POST-NATAL WORK.

The Ante-Natal Scheme was described fully in the 1937 Report. During 1946, 1154 expectant mothers were examined ante-natally.

The number of mothers who were referred and examined under the Post-Natal Scheme was 93. There is also a Voluntary clinic at which 3 ante-natal and 11 post-natal examinations were made.

WAR-TIME NURSERIES.

Part-time Nurseries provided by the Council under Circular 2383, and situated at Aylsham, Emneth, Wymondham and Thetford, were handed over to the Ministry of Education on 1st April.

ANCILLARY SERVICES.

FREE DOCTOR OR MIDWIFE.

When a case is unsuitable to be undertaken by a midwife and the patient is unable to engage a doctor privately, arrangements are made by the Council for medical attendance and, if necessary, hospital treatment.

HOME HELPS.

Under the scheme for the provision of financial assistance towards the cost of home helps employed at the time of confinement, assistance was provided in 64 cases during the year. The Council does not employ the home helps, but in necessitous cases contributes varying proportions of their wages.

TONSILS AND ADENOIDS.

Arrangements are made for general practitioners on an approved panel to carry out tonsil and adenoid operations in cases referred by medical officers of the Infant Welfare Centres. The cost of this is borne by the Council.

BIRTH CONTROL.

Arrangements continue for the facilities of the Norwich Mothers' Clinic for Constructive Birth Control and the Cambridge Women's Welfare Association to be available for County mothers, in cases where further pregnancies would, in the opinion of their medical attendant, prove detrimental to health.

PREVENTION OF BLINDNESS.

A scheme was instituted in 1933 for young children with defective vision to be examined by the part-time Ophthalmic Specialists. 8 children were examined during 1946.

HEALTH PROPAGANDA.

The annual grant of 10/- per 1000 of population to the Central Council for Health Education has continued, and the services available are utilised whenever possible.

MILK SCHEME FOR NECESSITOUS EXPECTANT OR NURSING MOTHERS AND YOUNG CHILDREN.

The administration of this scheme throughout the area is carried out by the County Council. All applications are considered by one Committee. A scale of income has been adopted as a guiding factor, but each case is dealt with on its merits, and once the medical need is established, grants are made to many cases which would not otherwise have been eligible.

No liquid milk is supplied, but 29,261 lbs. of dried milk was issued.

UNMARRIED MOTHERS AND ILLEGITIMATE CHILDREN.

Grants are made to the various Moral Welfare Associations covering the area, and during the period under review, some 285 cases were dealt with by the workers concerned, including 25 cases at Cliff Hostel.

In addition, during the year financial help has been given to 9 girls who have been sent to Rescue Homes or Mother and Baby Homes in various parts of the country.

DENTAL SCHEME FOR NECESSITOUS EXPECTANT AND NURSING MOTHERS.

This scheme which was inaugurated in 1926, continues to be a great help to mothers. Treatment is given by a panel of qualified dental surgeons, similar fees being paid to those in force in respect of National Health Insurance patients.

DENTAL TREATMENT—M. & C.W.

No. of cases authorised financial assistance towards treatment.	No. of cases in which treatment was completed during the year.			
	1946 authorisation.		1945 authorisation.	
	Extractions, etc.	Dentures.	Extractions, etc.	Dentures.
161	92	48	35	77

CHILD LIFE PROTECTION.

The administration of Sections 206-220 of the Public Health Act, 1936, remains as outlined in previous reports, with the exception that all the routine visiting is done by the 11 School Nurses, with supervisory visits by members of the medical staff and the staff of the Superintendent Health Visitor.

The following figures indicate the position at the beginning and end of the year:—

1. Foster Parents.

No. on Register on 1st January, 1946	...	...	174
No. on Register on 31st December, 1946	...	...	139

2. Nurse Children.

No. on Register on 1st January, 1946	...	...	190
No. removed from Register during the year	...	...	127
No. of New Registrations	...	...	110
No. on Register on 31st December, 1946	...	...	173

3. Homes.

Voluntary	...	...	...	...	2
Private	...	...	...	...	1

(These homes were not exempted from visiting, and there were 21 children resident at the end of the year.)

In no case were foster mothers guaranteed payment by the Welfare Authority. No deaths of foster-children were recorded.

4. Visits made by Inspectors during year.

No. of Primary Reports:—					
(a) Homes	...	...	...	...	118
(b) Nurse Children	...	...	...	...	110
No. of Further Reports on Nurse Children	...	...	...	...	499

ADOPTION OF CHILDREN (REGULATION) ACT, 1939.

No of persons who gave notice under Section 7 (3) during the year	31
Total No. of children "adopted" during the year	12
No. of such children under supervision at the end of the year	19

MATERNITY AND NURSING HOMES.

The following table gives particulars of the action which has been taken under Sections 187-199 of the Public Health Act, 1936, during the year ended 31st December, 1946:—

No. of applications for registration	...	...	...	5
No. of applications refused	...	...	...	—
No. of registrations cancelled	...	...	...	5
Total No. of Homes registered at 31st December, 1946	...	...	...	27
No. of beds provided:—				
Maternity	...	...	...	51
Others	...	...	...	142

No applications have been received under Section 194 of the Act for delegation of powers.

One of these Homes has been closed temporarily, but registration has not been cancelled.

Orthopædic Treatment.

The administration of the Scheme has been continued on the lines of previous years, and arrangements for treatment have worked smoothly. Unfortunately there has been no easing of the position with regard to the hospitals' waiting lists for patients requiring operative treatment. At the end of the year there were 55 cases awaiting admission to the Norfolk and Norwich Hospital and 49 to the Jenny Lind Hospital.

The number of cases on the register continues to increase, and it was found necessary to appoint a fourth Physiotherapist towards the end of the year. Miss N. Polglase was appointed, but resigned before the end of the year, leaving a vacancy. Miss M. H. Wyer returned from war service on the 1st April.

ASCERTAINMENT.

942 cases were added to the register during the year, consisting of 653 education, 177 maternity and child welfare, 18 tuberculosis and 94 public assistance patients.

CLINICS HELD BY ORTHOPÆDIC SURGEON.

62 clinics were held, 50 at Norwich and 12 at King's Lynn, 1297 patients were examined, 313 new and 984 old cases. 671 were education, 263 maternity and child welfare, 187 tuberculosis, and 176 public assistance cases. 42 King's Lynn children under 5 years of age were also examined.

HOSPITAL TREATMENT.

145 individual cases received in-patient treatment during the year. The patients were in hospital for a total of 19,341 days, an approximate average of 53 beds occupied daily throughout the year.

CASES ON THE REGISTER.

At the end of the year there were 3071 current cases on the register:—

	E.	M.C.W.	T.B.	P.A.	Totals.
Flat feet and valgus ankles ...	678	71	—	59	808
Claw feet ...	46	1	—	15	62
Hammer toes ...	26	7	—	7	40
Hallux valgus ...	28	—	—	20	48
Other toe deformities ...	12	10	—	10	32
Knock Knees ...	496	124	—	9	629
Bow Legs ...	74	80	—	3	157
Arthritis ...	6	—	—	20	26
Congenital deformities:—					
Hip ...	22	6	—	10	38
Feet ...	76	56	—	32	164
Hand ...	7	3	—	—	10
Toes ...	1	5	—	1	7
Arm ...	2	—	—	—	2
Legs ...	1	—	—	1	2
Others ...	1	1	—	—	2
Spastic paralysis ...	47	1	—	20	68
Infantile paralysis ...	33	11	—	45	89

Muscular dystrophy and atrophy	2	—	—	1	3
Erb's Paralysis	4	3	—	1	8
Spinal deformities	148	5	76	76	305
Round Shoulders	27	1	—	2	30
Hip diseases (not congenital)	9	1	33	10	53
Wry Neck	58	16	—	5	79
Chest	35	—	—	6	41
Spina bifida	4	2	—	1	7
Osteomyelitis	16	1	—	15	32
Amputations	7	—	—	15	22
Old injuries	15	2	—	6	23
Multiple deformities	1	2	—	2	5
Miscellaneous	64	19	—	25	108
Posture	85	—	—	11	96
Rickets	11	8	—	—	19
Knee	—	—	21	—	21
Wrist	—	—	1	—	1
Shoulder	—	—	5	—	5
Sternum	—	—	1	—	1
Sacro iliac joint	—	—	4	—	4
Elbow	—	—	6	—	6
Feet	—	—	2	—	2
Fingers	—	—	2	—	2
Toes	—	—	—	—	—
Multiple	—	—	8	—	8
Ankle	—	—	2	—	2
	2042	436	165	428	3071

CASES DISCONTINUED.

711 patients have been discharged from the scheme during the year as follows:—

	E.	M. & C.W.	T.B.	P.A.	Total.
Cured	98	14	4	10	126
No further treatment required	89	6	1	19	115
Left school—no further treatment required	210	—	—	—	210
Treatment would not benefit	7	1	—	—	8
Treatment not necessary	40	4	1	5	50
Removed from County	67	22	8	6	103
Treatment refused	14	7	—	9	30
Private treatment	9	3	—	1	13
Died	2	3	4	2	11
Untraceable	30	12	—	3	45
	566	72	18	55	711

These figures include 123 patients entered and removed from the register during the year.

MELTON LODGE.

22 beds were available at Melton Lodge throughout the year, the number being reduced to this figure owing to shortage of nursing staff. There have been a total of 7547 in-patient days, an average of $20\frac{1}{2}$ beds occupied daily. Of these $18\frac{1}{2}$ have been occupied by Norfolk patients.

SERVICES OF THE PHYSIOTHERAPISTS.

8005 treatments were given or examinations made by the Physiotherapists. Two physiotherapists were engaged fully on this work throughout the year. From the 1st April a third was engaged on this work for 3 sessions weekly, the remainder of her time being devoted to treating the patients in Melton Lodge and Gt. Yarmouth Borough cases. This was under the terms of the old agreement which was renewed after being suspended during the war. A fourth was also engaged on the work for a month in the King's Lynn area but resigned, and the vacancy has not yet been filled.

Prevalence of and Control over Infectious and other Diseases.

The County Isolation Hospital serves the whole of the administrative county except King's Lynn M.B., Cromer, Sheringham and North Walsham Urban Districts and Erpingham and Marshland Rural Districts. Its normal accommodation is 60 patients.

Admission of patients is arranged through the Public Health Department, and is restricted to cases where:—

- (a) The home conditions are such that it is impossible to isolate the patient.
- (b) The patient's condition is such that skilled nursing is essential.

No. of patients in Hospital on 1st January, 1946	...	...	...	...	...	22
No. of patients admitted	...	...	...	...	...	202
No. of patients who died in Hospital	...	...	...	...	...	9

On 1st January, 1947, there were 12 patients in the Hospital.

Patients admitted were suffering from the following diseases:—

Scarlet Fever	...	...	...	...	...	66
Diphtheria	...	...	...	...	...	25
Diphtheria Carriers	...	...	...	...	...	10
Puerperal Pyrexia	...	...	...	...	...	4

Meningitis	2
Dysentery	3
Measles and Rubella	13
Chickenpox	1
Glandular Fever	1
Streptococcal Infections	9
Paratyphoid	1
Typhoid Carriers	1
Food Poisoning	1
Erysipelas	1
Tonsillectomy	2
Broncho-pneumonia	8
Enteritis	1
Infective Jaundice	2
Carcinoma	1
Ophthalmia Neonatorum	2
Nursing Mothers	2
Babies with Mothers	5
Skin Diseases	20
Miscellaneous	15
Births in Hospital	2
Pregnancy	3
Venereal Disease	1
	202

DEATHS.

The deaths were due to:—

Diphtheria	1
Meningitis	1
Pneumonia	1
Broncho-pneumonia	4
Infective Mononucleosis	1
Pemphigus Vulgaris	1
	9

COUNTY SMALLPOX HOSPITAL.

No patients were admitted.

NOTIFICATIONS.

The following table gives particulars of notifications of infectious diseases received for the whole of the Administrative County and the number of deaths from certain of the diseases:—

Disease.	No. of cases notified.	Deaths as given by Registrar-General.
Diphtheria	35	1
Scarlet Fever	324	—
Erysipelas	72	Not given
Puerperal Pyrexia	44	1
Measles	2968	—
Whooping Cough	1053	11
Chickenpox	15	Not given
Ophthalmia Neonatorum	17	Not given
Dysentery	58	Not given
Typhoid Fever	2	—
Paratyphoid Fever	2	—
Pneumonia	242	123
Tuberculosis (Pulmonary)	284	94
Tuberculosis (Non-Pulmonary)	113	26
Cerebro-spinal Fever	3	5
Polioencephalitis	—	2
Poliomyelitis	—	
Encephalitis Lethargica	2	—
Acute Inf. Encephalitis	—	2
Infective Jaundice	275	Not given
Malaria	29	Not given
Smallpox	—	Not given
Enteric Fever	—	Not given
Total	5538	265

CANCER.

The death rates per 1000 population during the last seven years have been:—

1940	1941	1942	1943	1944	1945	1946
1.79	1.92	1.97	1.91	1.92	1.91	2.02

The age distribution of the deaths registered in 1946 was as follows:—

	0-1	1-5	5-15	15-45	45-65	65-	Total
Males ...	0	0	2	13	90	251	356
Females ...	0	0	0	17	107	194	318
Total ...	0	0	2	30	197	445	674

The facilities for treatment remain as set out in the Report for 1938.

VENEREAL DISEASES.

Under the Public Health (V.D.) Regulations of 1916, treatment centres are established at the Norfolk and Norwich Hospital and the West Norfolk and King's Lynn Hospital.

638 new patients (excluding Service cases) from the administrative county attended during the year, as follows:—

Clinic.	Syphilis.	Gonorrhœa.	Non-V.D. and undiagnosed conditions.	Total.
Norwich ...	94	107	256	457
King's Lynn	14	51	116	181
Total ...	108	158	372	638

The following table shows the total attendances made by Norfolk patients at each clinic during the past five years:—

Year.	Norwich.	King's Lynn.
1942 ...	9132	1900
1943 ...	5901	2292
1944 ...	3895	2209
1945 ...	2381	2274
1946 ..	3065	1574

In-patient Treatment.

	Norwich.	K. Lynn.
(a) Total number of persons admitted ...	54	10
(b) Aggregate number of "in-patient" days ...	408	82

Defence Regulations—Regulation 33b.

The number of contacts notified under Defence Regulation 33b was 18, including 2 for whom two or more Forms I were received.

Of those for whom Form I was received, 6 were found. All of these had submitted to examination voluntarily.

The two contacts for whom two or more Forms I were received were found and one examined after persuasion. Form 5 was issued eventually and the man was deported to Eire. In the other instances examination was made after Form 2 had been served.

Difficulty has been experienced in many instances due to incorrectness and vagueness of names and addresses given. In this connection valuable assistance has been given by the Chief Constable and his staff in identifying the person in question.

TUBERCULOSIS.

No change has been made in the scheme of treatment. Two Tuberculosis Officers cover the County and normally each has the help of a Nurse. Unfortunately, during 1946, the Western Area vacancy was still unfilled.

Incidence—Comparative Statement.

The number of new cases reported by formal notification or otherwise, and the case rates per 1000 of the population, during the past 5 years, are as follows:—

Year.		Number of Pulmonary cases.		Case- rate.		Number of Non-pulmonary cases.		Case- rate.
1942	...	212	...	.64	...	159	...	.48
1943	...	209	...	.64	...	152	...	.46
1944	...	312	...	.94	...	162	...	.49
1945	...	246	...	.70	...	159	...	.48
1946	...	284	...	.85	...	113	...	.34

The mortality figures for the same 5 years are as follows:—

Year.		Number of Pulmonary cases.		Case- rate.		Number of Non-pulmonary cases.		Case- rate.
1942	...	115	...	.35	...	27	...	.08
1943	...	103	...	.31	...	29	...	.09
1944	...	120	...	.36	...	31	...	.09
1945	...	102	...	.31	...	22	...	.06
1946	...	94	...	.28	...	26	...	.07

Examinations and Dispensary Records.

During the year, 1517 new cases (including 309 contacts) were examined. Of these 512 were diagnosed as definitely tuberculous, while 556 cases were regarded as sufficiently suspicious to justify their being kept under observation.

2352 patients (910 pulmonary, 558 non-pulmonary, and 884 doubtful) were on the Dispensary Register on 31st December, 1946.

In the year under review, 558 cases were written off, 107 as recovered, 230 as non-tuberculous, 91 dead and 130 removed from the County or otherwise lost sight of.

2423 X-ray photographs were taken during the year.

820 artificial pneumothorax refills were given by the Tuberculosis Officers to 68 patients.

Residential Treatment.

381 patients were treated in sanatoria or hospitals, of whom 235 were discharged and 17 died, leaving 129 in-patients on 31st December.

Sanitary Circumstances.

I. HOUSING.

As intimated in my previous report, the technical Sub-Committee formulated a standard of fitness for existing houses for the purpose of the Rural Housing Survey as envisaged by the Hobhouse Report. The County Joint Housing Advisory Committee accepted this standard and intended to publish it, though up to the present this had not been done. At this juncture, therefore, it is appropriate to place on record the Technical Sub-Committee's standard for existing houses and this is included at the end of this section of the report.

It is estimated that of the 83,530 houses in the rural districts, 58,577 are classified as "working class" houses, thus falling within the scope of the survey. At the end of the year the majority of the county local authorities had commenced the survey, but the rate of progress has been hampered chiefly by the shortage of qualified staff and the many urgent duties resulting from modern legislation.

The volume of housing applications resulting from overcrowding and the many defects associated with old and condemned property continues to increase. So far as selection is possible those cases concerning the welfare of young children and disabled persons are made the subject of special recommendations for re-housing priority.

STANDARD FOR EXISTING HOUSES.

(1) **Siting.**

- (a) Each house shall have adequate land space which is sufficient for : —
 - (i) Free circulation of air.
 - (ii) Disposal of household refuse, night soil and drainage where necessary.
- (b) The means of approach to the house shall be satisfactory at all times of the year, and each house shall have a secondary means of access to facilitate the removal of house refuse.

(2) **Structure.**

- (a) The external fabric shall be of sound materials; weatherproof, and in good state of repair.
- (b) All roofs (other than thatched roofs) shall be provided with eaves, gutters and down spouts with satisfactory means of disposal of rain water.
- (c) In the case of thatched roofs, the ground surface immediately adjoining the house shall be paved for a width of 2 ft. and drained as necessary, and the house wall protected by impervious rendering for a height of 2 feet.

(3) **Dampness.**

- (a) Houses suffering from serious permanent dampness of walls and/or ground floors, shall be regarded as totally unfit for human habitation if it is impossible to remedy the dampness.
- (b) Unless adequate measures (e.g. verticle damp-proof course or a dry area) have been taken, no floor shall be below the level of the surrounding ground.

(4) **Height of Rooms used for Human Habitation.**

- (a) It is desirable that all rooms shall be at least 8 feet high.
- (b) In no case shall a ground floor room less than 6' 9" high be accepted as suitable for human habitation.
- (c) Rooms situated wholly or partly in the roof shall be at least 6' 6" high over not less than two thirds of the floor space of the room. For this purpose the term "floor space" is as defined in the Overcrowding Act.

(5) Lighting and Ventilation.

- (a) Every habitable room shall be provided with a window or windows which shall open directly into the external air and be free from obstruction and which shall:—
 - (i) have a total area not less than 1/10 of the floor area of the room
 - and (ii) be so constructed that a total area not less than 1/20 of the floor area of the room may be opened, and to the extent of this requirement the windows can be opened at the top.
- (b) Where the distance from the floor to the bottom of the window is less than 2' 6", the window area below that height shall be discounted.
- (c) Efficient alternative means of ventilation shall be provided if there is no chimney flue.

(6) Size and Internal Arrangement.

- (a) The staircase, which shall be well lighted and provided with a hand-rail, shall be so placed as to allow *separate* access to all bedrooms.
- (b) No room of less than 50 sq. feet effective floor area (vid. Item 4) shall be regarded as a habitable room (vid. Housing Act, 1936). Moreover, the minimum width of any habitable room shall be not less than 5 ft.
- (c) There shall be at least one room suitable for use as a living room with a superficial area of not less than 100 sq. ft.

(7) Amenities.

(a) HEATING.

There shall be adequate and fixed heating arrangements in at least one living room and one bedroom.

(b) COOKING.

There shall be adequate cooking arrangements provided as an owner's fixtures. For this purpose adequate cooking arrangements are:—

- (i) A portable or fixed electric or gas cooking range, or
- (ii) A solid fuel cooking stove with oven.

(c) WATER.

- (i) Every house shall have an adequate supply of wholesome water within a distance not greater than 100 ft. from the dwelling.
- (ii) In cases where the supply is taken from a public main the service pipe shall terminate inside the house.

(d) DRAINAGE.

Every house shall have a sink and adequate arrangements for disposal of waste water. The latter may be by surface disposal provided there is adequate land space, or by drainage to a cesspool or sewer.

(e) SANITARY CONVENIENCES.

Each house shall have an adequate and separate sanitary convenience. For this purpose "adequate" means a water closet or a pail closet (including a chemical closet)

(f) **WASHING FACILITIES.**

- (i) Each house shall have adequate washing facilities and proper means for the heating of water sufficient for all household and personal needs.
- (ii) In no case shall a furnace pan be situated in the main living room.

(g) **FOOD STORE.**

Every house shall have adequate and cool food store suitably lighted and ventilated to the external air.

(h) **GENERAL.**

- (i) All yards and passages used in common shall be paved with concrete or other suitable material and drained. Adequate paving shall also be provided in individual cases where necessary.
- (ii) Each house shall be provided with facilities for the storage of fuel, etc.

CLASSIFICATION.

Each house should be classified according to the degree to which it falls short of the standard and according to the extent of the work which would be involved in bringing it up to this standard.

Thus, classification should be as follows:

CATEGORY I.

Those houses which comply with the standard in all respects.

CATEGORY II.

Those houses in respect of which *minor* repairs or improvement are necessary and which can be dealt with by informal action or by action under the Public Health or Housing Acts.

CATEGORY III.

Those houses which are capable of being brought up to the standard but which require more extensive repair, structural alteration, or improvement.

CATEGORY IV.

Those houses which justify, and qualify for reconditioning with assistance under the Housing (Rural Workers') Act.

CATEGORY V.

Those houses which cannot reasonably be brought up to the standard and which should be demolished.

II. WATER AND SEWERAGE SCHEME.

During the year a great deal of the County Sanitary Officer's time was devoted to investigation of the water supply and sewerage schemes prepared by local county authorities in accordance with the Rural Water Supplies and Sewerage Act, 1944. This involved much detailed investigation with local authorities, Consulting Engineers and the Ministry of Health to ensure the implementing of the County Council's policy in relation to the method of providing piped water supplies and sewerage facilities to the various localities.

A deputation from the County Water Supplies and Sewerage Committee discussed with the Ministry of Health representatives the question of estimated consumption for the purpose of calculating the new water scheme. As a result of the evidence presented to the Ministry of Health agreement as to a basis of design to meet the present and future requirements for all schemes in the county districts was reached, and amounted to 25 g.p.h.p.d. together with an additional quantity for trade and agricultural requirements equivalent to 5 g.p.h.p.d.

13 investigations were made in respect of school water supplies and samples were submitted for bacteriological examination and chemical analysis.

III. RIVERS AND WATER POLLUTION.

Further investigations were made regarding the pollution of the River Waveney.

An unusual instance of contamination of a pond with phosphorous due to military action was dealt with.

IV. SHELL FISHERIES IN THE WASH AREA.

Further discussions have taken place with the Eastern Sea Fisheries Committee and with the Local Authorities concerned regarding the provision of shell fish cleansing beds in the Wash area.

Arrangements have been made for preliminary investigations to be carried out regarding the cost, type, capacity and siting of the proposed beds.

V. MILK AND DAIRIES.

(a) On the 31st December, 1946, 423 producers held Accredited licences and 293 Tuberculin Tested licences. 772 samples were taken from the T.T. producers, and of these 87 failed to pass either the methylene blue or coliform tests. 1278 samples were submitted from Accredited producers and of these 218 failed to pass either of the tests.

834 visits were made to Tuberculin Tested and Accredited premises, prospective designated milk producers, and in connection with cases brought before the Committee.

On the 1st July, 1946, the County Council resumed direct responsibility for the Tuberculin Tested and Accredited schemes. As a result of the greatly increased work in connection with routine sampling of the designated herds, the Committee authorised the appointment of an additional Assistant County Sanitary Inspector and three Sampling Officers for the purpose.

(b) Tuberculosis in Milk.

During the year 761 samples were taken from all sources for biological examination. In 54 cases the examination could not be completed owing to the premature death of the guinea pig, or otherwise. Of the 707 completed examinations, 14 (1.98%) samples were found to contain tubercle bacilli. The necessary investigations to eliminate the source of infection were carried out by the Ministry of Agriculture and Fisheries.

(c) Milk in Schools Scheme.

On the 31st December, 1946, 484 schools were participating in the scheme. 55 inspections of school milk producer's premises were made.

GENERAL.

(a) **ICE CREAM.** Investigations were made regarding the state of ice cream sold in the coastal areas. The primary samples submitted to the laboratory for examination gave very unsatisfactory results, but improvement was subsequently effected.

(b) **MEAT HANDLING.** An organised complaint regarding the conditions of handling meat in a county Urban District was investigated and dealt with.

(c) **REFUSE DUMPS.** Organised complaints regarding the condition of a refuse dump and disposal of refuse were investigated and necessary remedial action taken.

(d) **DISINFECTION.** Disinfection facilities are available at the County Isolation Hospital, East Dereham, and a large number of articles of bedding, clothing, etc., were steam disinfected during the year.

Blind Persons Acts, 1920 and 1938.

These Acts are administered by the County Council through the Public Health and Assistance Committee.

REGISTRATION.

During the year ended 31st March, 1947, 87 new cases were examined, 46 of whom were certified to be blind within the meaning of the Act. Of these, 28 were over 70, 4 between 65 and 70, 8 between 50 and 65, whilst the remaining 6 were under 50 years of age.

The total number of blind persons in the Register was 650, compared with 700 the previous year.

A Prevention Register is kept of those persons who have been examined and certified to be at present NOT blind within the meaning of the Act, but who have eye defects from which there is a possibility of their becoming blind at some future date. A supplementary Register of those de-certified is also kept for follow-up purposes.

All persons able to travel are examined by ophthalmic specialists at Norwich or King's Lynn, and the Form of Report and Certificate issued by the Ministry of Health is completed in each case. Persons unable to travel through ill-health are examined at their homes by members of the Council's whole-time Medical Staff.

TRAINING.

6 children are being educated at the East Anglian School for the Blind under the Education Committee's scheme.

HOME WORKERS.

There are now 6 Home Workers in the County.

EMPLOYMENT.

In addition to 18 Workshop Employees at the Norwich Blind Institution and the Home Workers, 17 persons are able to support themselves from their earnings in various occupations. The unemployable blind number 590.

HOME TEACHING AND VISITING.

Two whole-time Teachers possess the certificate of the College of Teachers for the Blind. In order to be in personal touch with the blind persons, I occasionally accompany the Home Teachers for a day's visits.

4872 visits were made during the year, in comparison with 4817 last year.

A further Assistant Home Teacher was appointed during the year and she commenced duty on the 1st October, 1946.

WELFARE.

The 6 invalid chairs loaned by the Council have been in continual use throughout the year, and a further self-propelling chair has been purchased for a necessitous case.

In cases recommended by the Home Visitors, assistance has been given for the purchase of clothing, dental treatment, medical requisites, etc.

The Norwich Institution for the Blind make grants to recommended cases from charitable funds to cover such things as outings, holidays and other extra comforts not normally provided.

SOCIAL CENTRES.

During the year two Social Centres for the blind were commenced, one at North Walsham and the other at Diss. These Centres are held monthly and blind folk are brought in from a radius of approximately 10 miles. The Norwich Institution for the Blind is financially responsible and assistance is given by the W.V.S., B.R.C.S., and North Walsham Rotary Club.

MAINTENANCE GRANTS.

The financial circumstances of all the unemployables are carefully enquired into and, where necessary, their income is augmented. 340 persons (including 2 evacuees) were receiving allowances at the end of March, 1947. The total amount of these grants during the year exceeded £16,000.

Emergency Services.

CASUALTY BUREAU.

The Bureau, which had served the whole of the geographical county since 13th September, 1939, was closed on 30th September, 1946.

In addition to supplying the bed-states to the Regional Office of the Ministry, the Bureau dealt with the notification of 35,395 admissions to Hospitals. The transfer of 9,279 patients from Hospitals to the British Red Cross Convalescent Homes was also arranged. Altogether over 90,000 notifications of admission, discharge, or transfer, were dealt with. During the whole of the period the Chief Clerk (Mr. C. J. Hubbard) undertook the duties of Officer in Charge.