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Contributors

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North Riding of Yorkshire County Council

ANNUAL REPORT


OF THE

COUNTY MEDICAL OFFICER
OF HEALTH

FOR THE YEAR

1958





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PREFACE

To the Members of the County Council of the North Riding of Yorkshire.

Mr. Chairman, My Lord, Ladies and Gentlemen,

I have pleasure in submitting my report for the year 1958 and regret that its presentation has been delayed. A separate report is presented each year to the Education Committee on the work of the school health service but points relating to the co-ordination of services in the medical field are mentioned in this report. The names of members of the Health Committee and its functions and those of the executive sub-committees are set out in the Year Book for members : the members and duties of area sub-committees also appear there.

The tables at the end of the printed text in this report are compiled in accordance with Circular 22/58 and the comments relate to subjects on which the Ministry of Health desires to have information.

During 1958 the campaign against poliomyelitis was expanded to cover, in addition to children and young persons, adults exposed to special risks. The system of distribution from County Hall and from the area offices of various vaccines supplied by the central purchasing scheme of the Ministry of Health continued as in the previous year : the problem of providing an antigen stable at ordinary atmospheric temperatures persists and until such a vaccine can be provided, a great deal of time and travelling will be required in County areas. The emphasis in newspapers and on radio on the prevention of poliomyelitis made the work of the ordinary health visitor and other staff in securing consents for vaccination against smallpox, diphtheria and whooping cough more difficult. Reference to the Tables at the end of the text of the Report will show that there was no known case of diphtheria in the Riding in the year under review, and that the notifications of whooping cough were 40% of those in the preceding year ; this happy state of affairs cannot last, however, unless a high degree of communal immunity against these two potentially dangerous diseases can be maintained by intensive efforts.

A very full report on the survey of rural water supplies is included in the sanitary section of the Report : the long-awaited " Vail Report " was considered at a series of meetings of the Rural Water Supplies and Sewerage Committee ; the latter had not reached any definite conclusions at the end of the year under review. Members who are particularly interested in this scheme should turn to page 47 for detailed information.

The Minister of Health, after consultation with the Board of Control, issued a circular letter to local health authorities regarding steps to be taken to implement some of the recommendations in the Report of the Royal Commission on the law relating to mental illness and mental deficiency, because new legislation was, in the opinion of the Minister's advisers, not essential for the proposed alterations in accepted procedures. The main change which followed Circular 2/58 was the informal admission of defectives to institutions and hospitals in all cases except those where legal action was necessary to enforce admission, *e.g.* when the alleged defective was neglected, ill-treated, or guilty (by decision of a court) of an offence. Guardianship cases were also reviewed in accordance with the Minister's request, and ambulance transport was arranged under the National Health Service Act, 1946, instead of the Mental Deficiency Act, 1913. Patients in mental deficiency hospitals were also reviewed and many remained in the care of the staff of the institution without any formal order. The recently enacted Mental Health Act, 1959, (not yet in force except for one small section) provides for a period of transition between the old and the new administrative procedures and will receive full consideration when the "appointed day" has been fixed.

In 1950, nearly 800 deaths were ascribed to malignant conditions and the distribution of these cases is given in Table 4 at the end of the text. There was a marked difference of mortality between some urban areas and the rural parts of the Riding. The average age of the residents and the degree of atmospheric pollution may have considerable importance in this difference. The problem of how to stop young people starting to smoke in the face of the propaganda (direct and indirect) of the tobacco manufacturers' advertising campaign, has yet to be solved. Most people will prefer to leave the situation as it is rather than attempt costly counter propaganda, which would have to be paid for out of rates, whereas the manufacturers are encouraged by the terms of all recent Finance Acts to spend money on advertising : this is just one more business expense !

In conclusion I wish to thank members of the Health Committee for their continuing support and my colleagues in the other departments at County Hall for their co-operation. To the staff in the central office and to the other staff employed all over the Riding, I extend my best thanks, for without their loyal support the routine work of the health department in the field of prevention and early treatment of disease would have been impossible.

I remain,

Mr. Chairman, My Lord, Ladies and Gentlemen,

Your obedient servant,

J. A. FRASER,
County Medical Officer.

County Hall,
Northallerton.

NORTH RIDING OF YORKSHIRE COUNTY COUNCIL.

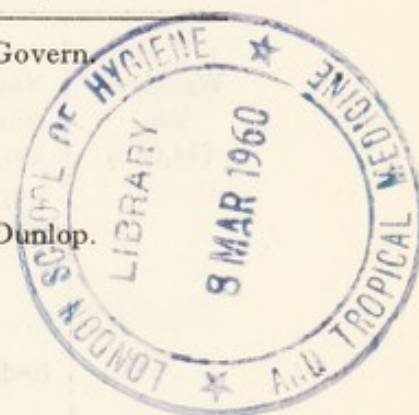
ANNUAL REPORT OF THE COUNTY MEDICAL OFFICER OF HEALTH

GENERAL PROVISION OF HEALTH SERVICES IN THE AREA.

STAFF OF COUNTY HEALTH DEPARTMENT (at 31/12/58).

County Medical Officer of Health	..	J. A. Fraser, M.B., Ch.B., D.P.H.
Deputy County Medical Officer of Health		J. T. A. George, M.D., Ch.B., D.P.H.
Medical Officer for Maternity and Child Welfare	}	Marjorie J. M. Dow, M.B., Ch.B., D.P.H.
Assistant Medical Officer—Mobile Maternity & Child Welfare Unit	}	Mary G. McDonald, M.B., Ch.B., D.P.H.
Chief Dental Officer	..	I. J. Faulds, L.D.S.
District Medical Officers of Health	..	See Table on pages 7 and 8.
Chest Physicians	..	V. Ryan, M.D., B.A.O., D.P.H.
(All part-time, in direct contract with Leeds or Newcastle-upon-Tyne Regional Hospital Boards)		G. Walker, M.B., M.R.C.P.(E), D.P.H. R. B. N. Wilsdon, M.D., M.R.C.P. S. P. Wilson, M.D., M.Sc., D.P.H. Kathleen M. Barran, M.B. W. Davidson, M.B.E., M.B., D.P.H. D. P. Degenhardt, M.D., M.R.C.P.
Superintendent Nursing Officer	..	Frances S. Leader, (left 31/3/58.) S.R.N., S.C.M., H.V.CERT.
Deputy Superintendent Nursing Officer	..	Lilian Mann, S.R.N., S.C.M., H.V.CERT.
Chief County Health Inspector	..	G. D. Aspin, C.S.I.B., A.F.S.(E).
County Health Inspectors	..	D. Nurse, M.R.S.I. R. Wharin, M.S.I.A.
Chief Clerk	..	H. A. Roebuck, D.P.A.
County Ambulance Officer	..	M. F. Smith
Senior Sectional Clerks	..	T. A. Hutchinson. Margaret Blair, D.P.A. A. R. Elliott. W. E. Lloyd. C. Rutherford.

Area and estimated mid-1958 Population	County Districts	Assistant County Medical Officer	Medical Officer of Health for Sanitary Services
Thornaby (44,380)	Thornaby Borough Stokesley R.D.	J. McGovern, M.B., Ch.B., D.P.H., Area Health Office, Francis Street, Thornaby-on-Tees.	J. McGovern.
Eston .. (35,310)	Eston U.D. ..	J. A. Dunlop, M.B., Ch.B., D.P.H., Health Office, Cleveland House, Grangetown, Middlesbrough.	J. A. Dunlop.
Redcar .. (38,010)	Redcar Borough Saltburn & Marske U.D.	H. Pattinson, M.B., Ch.B., D.P.H., Area Health Office, "Teeswold," Coatham Road, Redcar.	H. Pattinson.
Guis- borough (30,320)	Guisborough U.D. Loftus U.D. Skelton & Brotton U.D.	W. H. Butcher, V.R.D., M.A., D.M., D.P.H., (Retired) D. H. S. Griffith, L.R.C.P., D.P.H., D.I.H. Commenced 1-4-58. Area Health Office, Park Lane, Guisborough	W. H. Butcher. Retired 31-3-58. D. H. S. Griffith.
Whitby .. (23,090)	Whitby U.D. .. Whitby R.D.	B. Schroeder, M.B., Ch.B., D.P.H. Area Health Office Grape Lane, Whitby.	B. Schroeder.
Ryedale .. (29,090)	Malton U.D. Malton R.D. Pickering U.D. Pickering R.D. Helmsley R.D. Kirbymoorside R.D.	W. R. M. Couper, M.B., Ch.B., D.P.H., Area Health Office, Train Lane, Pickering.	W. R. M. Couper.
Bulmer .. (53,470)	Easingwold R.D. Flaxton R.D. Wath R.D.	H. Gray, M.D., Ch.B., D.P.H., Area Health Office, Manor Road, Easingwold.	H. Gray.
	Thirsk R.D. ..		*W. G. MacArthur, M.B., 144, Front Street, Sowerby, Thirsk.



Area and estimated mid-1958 population	County Districts	Assistant County Medical Officer	Medical Officer of Health for Sanitary Services
Wensleydale (34,650)	Northallerton U.D. Northallerton R.D. Aysgarth R.D. Leyburn R.D. Masham R.D. Bedale R.D.	J. L. Cotton, M.B., Ch.B., D.P.H., Area Health Office, Leyburn.	J. L. Cotton. *A. W. Hansell, M.B., Woodrow, Bedale.
Richmond (41,900)	Richmond Borough Richmond R.D. Croft R.D. Startforth R.D. Reeth R.D.	F. W. Gavin, M.D., Ch.B., D.P.H., Area Health Office, Quaker Lane, Richmond	F. W. Gavin. *W. C. Spiers, M.B., Langhorne House, Reeth, Richmond.
Scarborough (57,380)	Scarborough Borough Scalby U.D. Scarborough R.D.	W. G. Evans, M.B., B.Chir., D.P.H., Area Health Office, King Street, Scarborough	W. G. Evans, (also Divisional School Medical Officer) Elizabeth R. Cameron, M.B., Ch.B., D.P.H., Deputy M.O.H., Borough of Scarborough

* These officers are not debarred by their terms of appointment from private medical practice.

STATISTICS AND SOCIAL CONDITIONS OF THE AREA.
GENERAL STATISTICS.

Area (in acres)	..	..	..	..	..	1,354,657
Number of separate private dwellings occupied (Census 1951)						99,836
Number of private households (1951)	..	..	..	..	..	102,704
Average number of persons per house (1951)	..	..	..	..	..	3.37
Population (Census 1931)						
Urban Districts	182,279	—				
Rural Districts	148,822	—	..	..	..	331,101
Population (Census 1951)	..					
Urban Districts	204,416	—				
Rural Districts	173,793	—	..	..	..	378,209
Population (estimated to mid year 1958)						
Urban Districts	209,200	—				
Rural Districts	178,400	..	..	..	..	387,600
Rateable Value (1st April, 1959)	..	..	..	..	..	£4,924,249
Estimated product of a penny rate	..	..	..	..	..	£19,495

Area.

The North Riding of Yorkshire is the third county in order of size in England, its acreage being 1,354,657. Its geographical character varies from the populous industrial district adjacent to the County Borough of Middlesbrough to the sparsely populated dales and moorland districts; there are also smaller aggregations of population in inland districts and on the seaboard which forms the eastern boundary of the Riding: north of York too, there are heavily populated parishes in the Flaxton Rural District.

The administrative county includes four municipal boroughs (Redcar, Richmond, Scarborough and Thornaby-on-Tees), ten urban districts and twenty rural districts.

In nearly its whole length, the northern boundary is formed by the river Tees, separating the Riding from the County of Durham; the eastern boundary is the seaboard; on its southern boundary the Riding abuts on the East and West Ridings and the City of York; on its western side is the Pennine Chain and the Lake District. Running almost north and south from Cleveland to the Vale of York is a range of hills known in its first portion as the Cleveland Hills and merging into the Hambleton Hills. In the western portion there are three main dales—these are Teesdale, Swaledale and Wensleydale proceeding from north to south.

Population.

The population as estimated by the Registrar General at mid-year 1958, is set out in the table below ; the population for the years 1931, 1938, 1954, 1955, 1956, and 1957 are also shown for comparative purposes :—

Year.		Urban Population	Rural Population	Total
1931	.. ..	182,279	148,822	331,101
1938	.. ..	186,000	147,500	333,500
1954	.. ..	205,800	175,700	381,500
1955	.. ..	206,700	177,300	384,000
1956	.. ..	207,900	179,100	387,000
1957	.. ..	208,800	177,800	386,600
1958	.. ..	209,200	178,400	387,600

Social Conditions and Occupations.

The main industries in the north-eastern part of the Riding are the manufacture of steel and heavy chemicals : the latter industry is being rapidly developed. On the seaboard there are many holiday resorts ; and in the rural districts agriculture and allied industries provide employment for many.

Extracts from Vital Statistics of the Year.

		Total	M	F	
Live Births	Legitimate	6,425	3,307	3,118	Birth rate per 1,000 of the estimated home population 17·3
	Illegitimate	286	155	131	
Still births	..	152	69	83	Rate per 1,000 total (live and still) births 22·15.
Deaths	..	4,654	2,403	2,251	Death rate per 1,000 of the estimated home population 12·0.
					Rate per 1,000 total Deaths (live and still) births
Deaths from pregnancy, childbirth, abortion				1	·15
Death rate of infants under 1 year of age :					
All infants per 1,000 live births				..	24·1
Legitimate infants per 1,000 legitimate live births				..	24·0
Illegitimate infants per 1,000 illegitimate live births				..	28·0
Deaths from measles (all ages)				..	1
Deaths from whooping cough (all ages)				..	nil

Live Births and Birth Rates.

During the year ended 31st December, 1958, the live births registered in and belonging to the Riding numbered 6,711 (311 births more than the previous year, an increase of 4·8%).

The birth rate for the Riding as a whole was 17·3 (per 1,000 estimated population), being higher than the rate for England and Wales—16·4.

Particulars of the rates in the several sanitary districts of the Riding are shown in Table I of the statistical tables appended to this report.

Illegitimacy.

The number of illegitimate live births registered during the year was 286 (7 more than in 1957) ; although this number has increased, the position shows a marked improvement on 1944 and 1945 when the numbers were 462 and 547 respectively.

On the basis of population the illegitimate birth rate was .74 compared with .72 in 1957 and .63 in 1956, the rate per 1,000 live births being 42.62 as compared with 43.59 in 1957 and 39.17 in 1956.

Stillbirths.

The number of stillbirths registered in 1958 was 152 (a decrease of 13 on the previous year). Further analysis of these figures into sexes indicates that there were 69 male and 83 female stillbirths. The rate per 1,000 total births was 22.15 in 1958 ; this rate compares with 25.13 in 1957 and 23.47 in 1956.

Deaths and Death Rates.

During 1958 the total number of deaths registered for the Riding was 4,654 (2,403 males and 2,251 females). The total figure gives an annual death rate of 12.0 in 1958 (per 1,000 estimated population), which is slightly higher than the figure for the previous year (11.3) ; in terms of urban and rural districts the death rates for the seven years ended 31st December, 1958, were as follows:—

		Death Rates.						
		1952	1953	1954	1955	1956	1957	1958
North Riding :—								
Urban Districts	..	12.3	12.2	12.1	12.2	12.3	12.1	13.1
Rural Districts	..	9.9	10.3	10.7	10.4	10.4	10.3	10.7
Administrative County		11.2	11.3	11.5	11.4	11.4	11.3	12.0
England and Wales	..	11.3	11.4	11.3	11.7	11.7	11.5	11.7

The particulars of the number of deaths and the rates in the several sanitary districts are tabulated at the end of this report.

Mortality at Different Ages from various Causes.

The details supplied by the Registrar General are shewn on Table 3 at the end of this report.

The principal causes of death in the County during 1958 were as follows, the figures for 1957 and 1956 being also given.

	1956	1957	1958
Influenza	37	57	27
Heart diseases	1,632	1,653	1,751
Other circulatory diseases	181	179	178
Bronchitis	166	154	184
Pneumonia	127	130	187
Congenital Malformations	40	37	34
Tuberculosis of the respiratory system	31	26	26
Tuberculosis (other forms)	3	5	9
Cancer, malignant disease	756	703	797
Vascular lesions of nervous system	685	664	737
Nephritis and nephrosis	40	47	40

The position in the various sanitary districts is set out fully in Tables 4, 5, 6, 8 and 9. Whereas in 1938, 11 deaths were ascribed to diphtheria, one was allocated to this cause in the years 1948, 1949 and 1957, 2 in 1953 and none in the years 1950, 1951, 1952, 1954, 1955, 1956 and 1958.

Cancer, Malignant Disease.

Cancer was responsible for 797 deaths in the Riding in 1958 and the following tabular statement shows the position for the last ten years :—

DEATHS AND DEATH RATES FROM CANCER.

Year.	Total Number of Deaths.			Death rate per 1,000 population.			
	County.	Urban Districts.	Rural Districts.	County Districts.	Urban Districts.	Rural Districts.	England & Wales
1949	633	390	243	1.79	1.93	1.61	1.87
1950	626	352	274	1.66	1.72	1.59	1.89
1951	646	403	243	1.70	1.98	1.38	1.96
1952	700	431	269	1.85	2.13	1.53	1.99
1953	696	442	254	1.84	2.16	1.47	1.99
1954	674	401	273	1.77	1.95	1.55	2.04
1955	723	435	288	1.88	2.10	1.62	2.06
1956	756	458	298	1.95	2.20	1.66	2.07
1957	703	421	282	1.82	2.02	1.59	2.09
1958	797	463	334	2.06	2.21	1.87	2.12

Infantile Mortality.

There was a decrease in the number of deaths of infants under 1 year, the total number for the year under review being 162, 8 less than the previous year. The infantile mortality rate of 24.1 compares with 26.6 for the previous year and 22.5 for England and Wales.

The following table shows the infant mortality rates for the last 10 years.

Year	Urban Districts.	Rural Districts.	Administrative County	England & Wales.
1949	41.7	36.1	39.3	32.0
1950	36.0	34.2	35.2	29.8
1951	38.5	27.3	33.7	29.6
1952	24.3	30.1	26.9	27.6
1953	33.0	26.8	30.2	26.8
1954	32.5	20.9	27.6	25.5
1955	28.0	27.4	27.7	24.9
1956	29.7	20.2	25.6	23.8
1957	28.5	24.0	26.6	23.0
1958	28.7	18.0	24.1	22.5

The main causes of deaths among children under one year of age were as follows :—

	1958
Congenital malformations	25
Pneumonia	38
Bronchitis	7
Gastritis, enteritis and diarrhoea	2

Measles.

During 1958 there were 2,522 notified cases of measles ; this figure excludes all known cases of Rubella. Only one death was ascribed in 1958 to this disease ; for the last ten years the number of measles deaths totals 23. This seems to indicate that the treatment of the complications of measles is now much more effective than it was in the years before 1939 for there were 72 deaths from measles in 1934, and 18 in 1936.

Whooping Cough.

The total number of notified whooping cough cases in the Riding was 180 compared with 446 for 1957 ; no death was registered as being due to this condition. The morbidity following whooping cough is not known, but one comes across the secondary effects of brain haemorrhage which seems to follow attacks of pertussis. This incidence of serious complications should stimulate parents to accept protection against this unpleasant disease.

Infantile Paralysis.

There were 25 notifications of acute poliomyelitis (paralytic and non-paralytic) or of acute encephalitis during the year under review, with no deaths, as compared with 23 notifications and 3 deaths in 1957. It will be recalled that the responsibility for the treatment of paralytic conditions following this type of virus infection lies with the regional hospital boards, but notification secures active enquiries into the sanitary conditions, particularly the disposal of excreta and refuse, nuisance from flies or from cesspits.

Administration.

The local health services have been administered as in previous years ; the report of the county medical officer for 1954 set out in detail the powers and duties and methods of administration and it is not proposed to repeat them this year.

Use of voluntary organisations.

In general, the local health authority uses voluntary organisations where such bodies can do the work satisfactorily and with less formality than officers of the Council ; for example, for the care of the unmarried mothers and the adoption of children, the County Council makes grants to various Diocesan bodies who provide after-care workers and make arrangements in connection with admissions to hostels and allied matters. The payments for the use of the hostels are now generally made on a customer basis. The County Council also uses the Scarborough Council for Social Service in connection with tuberculosis after-care but has now terminated all contractual arrangements with the St. John Ambulance Brigade for the provision of ambulance services.

CARE OF MOTHERS AND BABIES.

At 91 places in the Riding, child welfare clinics are held as compared with 91 in 1957, 89 in 1956 and 55 in 1947. In 24 out of the 91 centres, ante-natal patients are also examined. The total number of attendances at infant welfare centres remains relatively stationary, the total attendances at infant welfare centres in the administrative county in 1958 being 62,637 as compared with 61,749 in 1957, and 60,397 in 1956. As regards the care of premature infants the provision of certain equipment on loan continues ; two more nurses have been given a special course of training for this purpose.

The average annual attendance per county administered centre is 688 as compared with 679 in the previous year. The average number per session attending was 28 as against 27 in 1957. The following table gives numerical details of the clinics held, the persons who attended and the attendances for the year 1958.

INFANT WELFARE CENTRES.

Area	Number of centres provided at end of year	Number of Child Welfare sessions held during the year	Number of children who first attended a centre during the year, and who at their first attendance were under 1 year of age	Number of children who attended during the year and who were born in :			Total Number of children who attended during the year	Number of attendances during the year made by children who at the date of attendance were :		
				1958	1957	1956-53		Under 1 year	1 but under 2	2 but under 4
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)
1	8	271	805	586	470	218	1,274	7,566	1,098	524
2	3	152	558	431	326	101	858	6,700	279	84
3	4	152	399	366	289	226	881	4,705	921	701
4	8	232	486	400	336	315	1,051	5,031	1,147	1,101
5	6	139	206	157	136	156	449	1,751	449	498
6	11	144	252	157	156	250	563	1,465	798	964
7	25	447	693	574	533	495	1,602	6,373	1,490	1,390
8	10	194	355	367	246	535	1,148	3,297	943	1,604
9	10	220	610	680	265	308	1,253	4,777	911	777
10	6	318	494	454	313	316	1,083	4,056	708	529
Total	91	2,269	4,858	4,172	3,070	2,920	10,162	45,721	8,744	8,172

In addition North Riding children attended centres established by local authorities in adjacent areas as follows :—

Barnard Castle	24	7	3	5	4	12	20	4	3
Boroughbridge	51	9	9	8	9	26	97	60	73
Darlington ..	598	6	2	5	3	10	28	5	8
Middleton-in-Teesdale ..	24	1	—	1	3	4	7	4	1
York ..	309	8	7	2	2	11	90	7	5
Total ..	1,006	31	21	21	21	63	242	80	90

Supply of Dried Milk during 1958.

At short notice all local health authorities in England and Wales had to improvise arrangements for the distribution of National Dried Milk and vitamin foods in the summer of 1954. Fortunately most of the volunteers (small shop-keepers in the country areas as well as the Women's Voluntary Service) agreed to continue. In addition to the arrangements made for the distribution of the official preparations, many proprietary dried milks and other preparations are supplied at infant welfare centres and clinics: every encouragement has been given to mothers by the health visitors and other staff of the County Council to take up supplies of vitamin foods provided for them and for their children.

Care of Expectant and Nursing Mothers and Children under School Age.

Ante-natal clinics are held on premises owned or rented by the County Council at 37 places in the Riding either separately or in conjunction with infant welfare sessions; these are staffed by medical officers with special experience in this type of work. Two clinics at Dormanstown and Marske-by-the-Sea were discontinued during the year, owing to falling attendances.

Specimens of blood are taken at all the County Council ante-natal clinics for transmission to the pathological laboratories set up either in the hospital service or in the Regional Blood Transfusion Service. In certain areas, practitioners refer patients to the ante-natal clinics so that blood specimens can be taken. The number of women who thus attended decreased from 2,065 to 2,008 and the total number of ante-natal attendances at North Riding clinics decreased by 1,626.

Pregnant women from the Riding attended at the ante-natal clinics in Middlesbrough, Ripon and York. Unfortunately there is still a large proportion of ante-natal women whose blood is not taken for examination; this is only revealed when an investigation of stillbirths and neonatal deaths is carried out. The revision of the terms of service under the maternity medical scheme is long overdue.

As regards mothercraft training, this is one of the essential services provided at ante-natal and infant welfare clinics. The absence of such teaching at general practitioners ante-natal sessions is the main difference between a private ante-natal clinic and one operated by the local authority. Film strips, posters, leaflets and models have been used to illustrate the points in the talks given by medical officers and health visitors.

Maternity outfits are provided through clinics and through midwives for women who intend to have a domiciliary confinement. Each of the ten divisional offices has some accommodation for storage; in addition, midwives often hold two or three spare outfits in their houses. The outfit supplied includes all the items set out in the appropriate Ministry's circular.

Special sessions were held at Redcar, Scarborough, South Bank and Thornaby-on-Tees for those women who desired post-natal examination by a woman medical officer.

The following table shows the variation between the numbers of attendances made by women at county ante-natal clinics between 1954 and 1958. The fall in numbers can be ascribed to two causes, the tendency of hospital ante-natal clinics to hold on to their patients and not to refer them for health education to local authority clinics, and increased bookings by general practitioners.

Item	1954		1955		1956		1957		1958	
	Ante-Natal	Post-Natal	Ante-Natal	Post-Natal	Ante-Natal	Post-Natal	Ante-Natal	Post-Natal	Ante-Natal	Post-Natal
Clinics ..	41	4	40	4	39	4	39	4	37	4
Sessions ..	978	133	1,021	137	1,009	84	1,202	87	1,110	90
Women attending	2,062	82	3,734	60	2,617	52	2,065	56	2,008	33
Total Attendances	7,455	85	6,827	60	7,043	49	6,790	57	5,164	33

In many rural areas special transport is hired to convey mothers and young children to centres established in nearby townships. In 1958, 29 centres were provided with this additional service at an approximate cost of £800. Sessions are held weekly, fortnightly or monthly, depending upon the need and the availability of staff and premises. Medical advice was available to mothers at all centres either from whole-time medical officers or from part-time medical practitioners who were paid sessional fees. Qualified nursing staff were in attendance at all sessions.

Mobile Infant Welfare and Ante-Natal Unit.

Many of the rural villages and outlying hamlets in the North Riding within a radius of 25 miles of New Earswick are provided with a good service by means of a mobile clinic presented to the County Council in 1949 by the Joseph Rowntree Village Trust; this unit, during the year under review, was drawn by a 30 h.p. Ford Pilot car. The unit is staffed by a woman medical officer, a qualified health visitor and a driver/clerk. Waiting rooms are hired in villages for the use of those awaiting examination and advice. The car is also used for the purpose of transporting mothers and children from hamlets and outlying dwellings to and from the unit which is usually drawn up alongside a hired waiting room in one of the larger villages. The attendances are set out in the following table; these attendances are aggregated with those for static centres given on page 14.

	1954	1955	1956	1957	1958
Villages visited	21	21	20	19	19
Sessions held during the year ..	527	546	575	614	624
Expectant Mothers, Nursing Mothers and/or children using the service ..	1,407	1,204	1,177	1,042	945
Total number of attendances ..	7,373	6,383	5,875	5,642	5,301

Care of Unmarried Mothers and their Babies.

Grants were made to the following moral welfare associations who gave, through their paid and voluntary workers, valuable help and advice to expectant and nursing unmarried mothers :—York Diocesan Association for Moral Welfare (York and North Riding Branch) ; The Five Deaneries Moral Welfare Association ; Co-ordinating Moral Welfare Council for the Deaneries of Middlesbrough, Guisborough and Stokesley ; Richmondshire Moral Welfare Association.

Twenty unmarried mothers were admitted to Heworth Moor House, York, during 1958 and eleven to a similar home at 21 Albemarle Crescent, Scarborough.

In addition 20 patients were admitted during the year 1958 to mother and baby homes at Harrogate, Hull, Leeds, Newcastle and Winchester. The social workers employed by the diocesan associations gave excellent service in this branch of public health.

The Care of Crippled Children (pre-school age groups).

Orthopaedic clinics, attended by an orthopaedic surgeon or orthopaedic registrar, were held in premises provided by the County Council at Thornaby, South Bank, Saltburn, Guisborough, Redcar, Carlin How, Whitby, Malton, Northallerton, Richmond and Scarborough ; clinics were also held at the Adela Shaw Orthopaedic Hospital, Kirkbymoorside and, by arrangement with the York City Council, in the York School Clinic.

Some 408 children attended orthopaedic clinics during the year ; of these 224 were new cases. The total number of attendances at these clinics during the year was 1,031, as compared with 902 in 1957.

Children over the age of two years who are materially handicapped by crippling defects are dealt with under regulations made by the Minister of Education under the Education Act, 1944. Admissions of crippled children under the age of two years to hospitals were arranged for 15 children during 1958 : none of these children was suffering from tuberculosis.

Dental Treatment of Expectant and Nursing Mothers and Children under the age of 5 years not attending a maintained school.

The table below shows that some 69 mothers were treated in 1958 as compared with 79 in 1957 and that 51 of these were made dentally fit before the end of the year. The great shortage of dental staff has made it difficult to cope with the demand for treatment in the school health service but professional staff are encouraged to give more time to conservative treatment to mothers and young children instead of doing extractions and providing dentures ; there is great scope for the future employment of oral hygienists particularly in connection with the teeth of pregnant women and of nursing mothers immediately after the end of the puerperium. There has been an appreciable increase however in the number of children treated in a conservative manner, as a result of an offer to 3 year olds on the occasion of their Third birthday. The teeth of most of these children are reasonably sound : a great contrast is noted between the volunteers at 3 and the general examination of school entrants.

(a) Number provided with dental care.

	Examined	Needing Treatment	Treated	Made Dentally Fit
Expectant and Nursing Mothers	86	83	69	51
Children Under 5 ..	341	286	288	304

(b) Forms of dental treatment provided.

	Scalings and gum treatment	Fillings	Silver nitrate treatment	Crowns or Inlays	Extractions	General Anaesthetics	Dentures provided		Radiographs
							Full upper or lower	Partial upper or lower	
Expectant & Nursing Mothers	12	50	—	—	244	37	35	9	4
Children under 5	3	77	45	—	369	188	—	—	—

Family Planning.

Grants of £25 each were made to the local branches of the Family Planning Association at Northallerton, Richmond, Saltburn, Scarborough and Thornaby.

DOMICILIARY MIDWIFERY SERVICE.**Domiciliary Midwifery.**

The whole of the domiciliary midwifery service provided under s. 23 is administered directly by the County Council. Since 1949 there has been a decline in domiciliary midwifery and it is not now the policy of the County Council to make new appointments of whole-time midwives; nurses in urban areas are appointed as district nurse/midwives. At the end of the year under review 15 whole-time midwives and 1 part-time were still employed in urban districts, 31 full-time nurses (plus 4 part-time) undertook combined duties and 59 nurses (plus 3 part-time) were carrying out generalised duties in rural districts.

The number of domiciliary confinements during the year is set out in the table below. For comparative purposes, figures for the years 1950, 1955, 1956 and 1957 are also given :—

	1950	1955	1956	1957	1958
Total Domiciliary Confinements ..	3,017	2,306	2,316	2,349	2,410
(a) attended by midwives ..	2,068	1,791	1,806	1,889	1,886
(b) attended by maternity nurses ..	949	515	510	460	524
Percentage of total notified births ..	56.5	39.9	37.6	37.0	46.4

Deliveries attended by midwives employed by the County Council during 1958 :—

Doctor not booked		Doctor booked		Total
Doctor present at time of delivery of child	Doctor not present at time of delivery of child	Doctor present at time of delivery of child	Doctor not present at time of delivery of child	
35	196	483	1,690	2,404

Only 1,544 of these 2,404 babies were wholly breast fed on the fourteenth day in spite of the best efforts of the county midwives ; unfortunately much modern advertising is directed towards the use of dried milk foods.

During the year, 742 cases delivered in institutions were attended by domiciliary midwives after discharge from institutions before the fourteenth day, compared with 554 in the preceding year and 560 in 1956.

It is interesting to note that in 1947, the last complete calendar year before the 'appointed day,' the percentage of domiciliary confinements in the Riding was 91%.

Unfortunately admission on social grounds to many of the units in or near the Riding is still uncontrolled : early application is in some cases the only method of selection. It is most desirable that the knowledge and experience of the County Council's midwives and health visitors should be fully used when decisions are made regarding the degree of priority for women who claim admission because of social conditions : maternity homes were originally provided as a form of rehousing during the puerperium, for those cases where conditions at home were unsatisfactory. Two nursing officers inspect midwives employed in private nursing homes or in maternity homes where there is no resident medical officer, and those practising privately within the administrative area of the authority, as well as the directly employed midwives. Midwives employed by the County Council attended refresher courses during 1958, as required by regulations.

Ante-natal supervision is provided by medical officers and midwives at the ante-natal clinics and at certain infant welfare centres, as well as at special midwives' clinics ; in addition, those midwives who are booked by expectant mothers who don't attend clinics, visit their patients at intervals. There is, on the whole, good co-operation between county midwives and general practitioners who undertake domiciliary midwifery under the maternity medical services scheme.

Notification of Intention to Practise.

It is the duty of every midwife who wishes to practise in the area of a local supervising authority to notify that authority each year of her intention to do so ; the following table shows the number who registered during the year 1958 in various categories (figures for preceding year in brackets).

No. of Midwives	Employed by the County Council	Engaged in private practice	Employed by Hospital Management Committees
181 (177)	117 (115)	4 (4)	48 (51)

* In addition 12 midwives were employed at the Military Families Hospital at Catterick Camp.

The Ministry of Health made, under Section 6 of the Midwives Act, 1936, an order which came into effect on the 1st September, 1938, prohibiting unqualified women from acting as maternity nurses for gain. Acting on the Defence (General) Regulations, 1939 (Regulation 33) the County Council still employed on midwifery duties during 1958 one person who had surrendered her certificate under the Midwives Act, 1936.

Medical Aid Records.

The Central Midwives Board is empowered by statute to make rules regulating supervision and restricting, within due limits, the practice of midwives. A midwife acting as such, or as a maternity nurse, is obliged to observe these rules. One of the most important of these rules is that she must send for medical aid in all cases of illness of the patient or child or for any abnormality occurring during pregnancy, labour or lying-in period. The following table shows the nature of some of the reports sent in by the county midwives, district nurse/midwives, independent midwives and midwives employed in maternity homes or nursing homes during the period under review as compared with the previous four years :—

	1954	1955	1956	1957	1958
Requests for medical aid ..	532	515	585	654	612
Stillbirth reports ..	37	39	43	38	51
Rise in temperature ..	20	14	11	32	16
Death of mother ..	2	1	—	1	—
Death of infant ..	8	20	12	12	8
Laying out dead body ..	27	17	11	15	11
Artificial feeding ..	261	283	377	467	498
Liability to be a source of infection	47	43	50	46	27

The following is a classification of the stages when midwives had to summon medical aid—

	1954	1955	1956	1957	1958
During pregnancy ..	88	85	94	97	89
During labour ..	284	283	331	347	354
During lying-in period ..	88	69	84	110	84
In respect of child ..	72	78	76	100	85

Liability to be a Source of Infection.

In accordance with the Rules of the Central Midwives Board, there is an obligation on a midwife to notify the local supervising authority when she is liable to be a source of infection. The number of notifications received each year since 1948 has varied from 103 in 1948, to 25 in 1953, 50 in 1956, 46 in 1957 and 27 in 1958. The medical officers in charge of the ten administrative areas have been given the duty of ensuring that proper steps are taken by each midwife before she returns to duty. In this connection, the assistance of the Public Health Laboratory Service is gratefully acknowledged for investigations into nose, throat, ear and other infections of midwives when the safety of the mothers and babies requires such steps to be taken.

Maternal Mortality.

There was only one maternal death in the administrative Riding during the year. (See table 6).

Premature Births.

PREMATURE LIVE BIRTHS										PREMATURE STILL-BIRTHS			
Born in hospital		Born at home and nursed entirely at home		Born at home and transferred to hospital on or before 28th day		Born in nursing home and nursed entirely there		Born in nursing home and transferred to hospital on or before 28th day		Born in hospital	Born at home	Born in nursing home	
Total	Survived 28 days	Total	Survived 28 days	Total	Survived 28 days	Total	Survived 28 days	Total	Survived 28 days				
287	239	94	91	20	15	8	8	1	1	54	15	—	
										1955	1956	1957	1958
Total premature live births						..	375	409	414	410			
Total premature still-births						..	66	82	75	69			

Notification of Puerperal Pyrexia.

During 1951 the Minister of Health, in exercise of his powers under Sections 143 and 283 of the Public Health Act, 1936, and other enabling powers, varied the regulations which are called Puerperal Pyrexia Regulations 1939 and the Public Health (Notification of Puerperal Fever and Puerperal Pyrexia) Regulations, 1926 and 1928. Puerperal Pyrexia was defined as "any febrile condition occurring in a woman in whom a temperature of 100·4° Fahrenheit (38° Centigrade) or more had occurred within fourteen days after childbirth or miscarriage."

In 1958, 26 notifications were received; the circumstances of 19 patients who had a rise in temperature were investigated by the superintendent nursing officers.

Public Health (Ophthalmia Neonatorum) Amendment Regulations, 1937.

Ophthalmia neonatorum is an infectious condition of the eyes of infants commencing within twenty-one days of the date of birth, and under these Regulations the duty of notifying cases is placed on the medical practitioner in attendance. If a midwife is in attendance, she is obliged by the Rules of the Central Midwives Board to call in a doctor where there is any eye discharge, however slight. In 1958, one case was reported and made a satisfactory recovery. The superintendent nursing officers investigated 17 cases of "sticky eye"; this minor eye condition is more common now than the routine use of silver nitrate solution has stopped both in hospitals and in private practice.

Analgesia used by Midwives.

At the end of 1958, 105 domiciliary midwives employed in the Council's service were qualified to use gas and air analgesia as compared with 104 on 31-12-56 and 102 on 31-12-55.

The following table may be of interest and concerns the midwives employed by the County Council (the figures in brackets are those for 1957).

Domiciliary midwives trained to use gas/air apparatus	Sets of apparatus	Total domiciliary births	Patients receiving gas/air from domiciliary midwives		Patients receiving pethidine from domiciliary midwives	
			Doctor not present	Doctor present	Doctor not present	Doctor present
105 (105)	89 (81)	2,410 (2,339)	1,078 (1,026)	248 (270)	938 (871)	247 (262)

HEALTH VISITING.

The general arrangement is that in populous areas certificated health visitors are employed on health visiting and school nursing duties. Thirty-six such nurses were employed in 1958. In addition one qualified health visitor was employed jointly on tuberculosis and venereal disease work in the Scarborough district and an experienced but uncertificated health visitor continued tuberculosis visiting and school nursing in the Thornaby area.

In rural districts nurses are employed on generalised duties; 28 of these nurses hold the health visitors' certificate. In one area, health visitors attend on Saturday mornings in rotation at the local hospital and obtain a list of children who have been admitted during the preceding days and of those who are likely to be discharged home during the following week. Any information available regarding pending discharge is telephoned to the home nurses via the area office so that they can make any necessary preparations.

The total number of visits of all kinds made by health visitors amounted to 107,929 in 1958 as compared with 116,260 in 1957, 103,862 in 1956 and 96,975 in 1949. There was some difficulty in recruiting health visitors in spite of the County Council's scheme for the provision of scholarships which were not all allocated because of lack of applicants. Health visiting had to be more selective in areas where there was a shortage of staff. The following table sets out details of visits made by the health visitors during 1958, classified as requested by the Ministry of Health.

	Expectant mothers	Children under 1 yr. of age	Children age 1 and under 2 yrs	Children age 2 but under 5 years	Tuber- culous House- holds	Other cases
Effective Visits	1,566	29,875	16,266	33,257	3,238	14,368
Ineffective Visits	204	3,217	1,806	3,035	660	437

The total number of children under 5 years of age visited was 31,477 ; 21,806 households were concerned in these visits.

Training.

The County Council has offered scholarships each year valued at £240 each to enable suitable nurses to take the health visitors course of training at recognised centres. Since July, 1948, 34 scholarships have been granted to suitable candidates and with two exceptions the students have obtained the qualifying certificate : 3 more scholarships were awarded during 1958. A condition attached is that the recipient must work in the administrative county for a period of two years after obtaining the certificate of the Royal Society for Health.

In addition facilities have been afforded to the Principal of the Bolton Technical College for H.V. students to obtain a week's experience in rural areas during the course of training. The County Council's health visitors find accommodation for these students and take them on their rounds as well as having the students as helpers at ante-natal clinics and infant welfare centres.

HOME NURSING SERVICE.

When the County Council took over the home nursing service from district nursing associations in July, 1948, it was decided to employ whole-time home nurses in the urban areas. Following the decline in domiciliary midwifery, it has become the practice to appoint doubly qualified nurses to undertake combined duties in these districts. On 31-12-58 there were 18 whole-time home nurses, 13 part-time home nurses, 31 nurses (and 4 part-time) undertaking midwifery and home nursing, and in the rural districts 62 nurses were undertaking duties of a generalised character : home nurses have worked very well with the general practitioners and complaints regarding them are rare.

The main types of cases attended by home nurses are medical, surgical and tuberculosis cases. About 70% of the cases fall into the "medical" category. There is no night nursing service as such, although many nurses do an evening round; a night nursing service does not seem practicable or justifiable in an area which is mainly rural.

During the year under review, 24,525 patients received domiciliary visits to the total number of 203,023 and an analysis of these patients is set out below.

Type of Case	Medical	Surgical	Infectious Diseases	Tuberculosis	Maternal complications	Others	Total
Number of cases	18,906	5,111	18	413	70	7	24,525
Number of visits	151,154	37,645	54	9,175	824	4,171	203,023

Of the total patients 3,166 were over the age of 65 at the date of the first visit and 97,470 such visits were made. 3,705 visits were made on 605 children who were under the age of 5 at the first visit.

Training.

Arrangements are made through the Queen's Institute of District Nursing for suitable candidates to take a four or six months' course of district training. In some cases recipients of health visitors scholarships undertake combined district and health visitors training under the auspices of the Queen's Institute Scheme.

VACCINATION AND IMMUNISATION.

The health visitors are given the duty of stimulating the interest of parents in immunisation of the child population against diphtheria and poliomyelitis but it is more difficult to interest a parent in vaccinating a child. The virtual disappearance of diphtheria and smallpox tends to make parents careless and difficult to convince on the merits of protective measures. Many practitioners, though they have a financial incentive to immunise, are not active in this matter until a case of diphtheria occurs, or a positive swab is reported.

During 1952 the County Council added a scheme for immunising children against whooping cough and for some years both single antigens and a combined pertussis was supplied. In deference to a statement from the Medical Research Council, however, the increased danger of paralysis following the mixed antigens was recognised and since December, 1957, the Council has only supplied single antigens under its proposals. The need for early administration of whooping cough vaccine arises because of the fact that the prevention of this disease during the first few months of life is very important but a child does not react properly to the diphtheria antigens till some five or six months later.

In most districts sessional arrangements have been made for the administration of booster doses to children on entry to school and later during school life as may appear expedient. In 1939 there were 332 cases of diphtheria and 12 deaths from this disease : after a long interval of apparent freedom, three cases were notified in 1957 and one proved fatal. The opinion is still held that the personal influence of doctor, health visitor or midwife is the most effective agent in securing parental consent to immunisation : leaflets and advertisements are not nearly so effective but, the results of the use of films with sound commentaries are promising.

A fee of 5/- is paid to medical practitioners for every notification of immunisation or vaccination except when sessions are organised by the Council's staff when the proper sessional fee is payable.

The following tables give the number of children within specified age groups who had, at the end of 1958, been immunised or vaccinated. Comparative figures are given for the preceding six years.

DIPHTHERIA IMMUNISATION.

Year	Estimated population under 5 yrs.	Children under 5 immunised	Estimated population 5-14 yrs.	5-14 yrs. children immunised	Total est. pop. under 15 yrs.	Total children immunised under 15 yrs.
1952	30,900	16,425	55,900	37,869	86,800	54,294
1953	30,000	14,668	57,000	49,743	87,000	64,411
1954	30,200	16,529	57,800	54,067	88,000	70,596
1955	30,000	15,960	59,300	55,182	89,300	71,142
1956	30,100	17,144	60,200	51,495	90,300	68,639
1957	30,300	17,015	60,300	52,624	90,600	67,639
1958	30,900	17,480	60,400	52,928	91,300	70,408

It will be noted that 53.2% of the younger age group received immunisation in 1952, 48.9% in 1953, 54.7% in 1954, 53.2% in 1955, 56.6% in 1956, 56.2% in 1957 and 56.5% in 1958. In the older age group the immunity index was 44.5.

SMALLPOX VACCINATION.

The following table sets out the position as regards vaccination against smallpox in the year under review ; it will be seen that the position is slightly improved as regards protection of infants.

Year	Vaccinations				Re-vaccinations			
	Under 1 yr.	1-14 years	15 yrs. & over	Total	Under 1 yr.	1-14 years	15 yrs. & over	Total
1950	851	434	221	1,506	34	98	424	556
1951	1,135	428	296	1,859	21	83	686	790
1952	1,360	364	296	2,020	1	95	656	752
1953	1,682	549	454	2,685	—	215	812	1,027
1954	1,705	306	223	2,234	5	218	573	796
1955	1,525	275	153	1,953	7	149	296	452
1956	1,850	264	166	2,280	13	100	262	375
1957	1,897	257	139	2,293	2	120	293	415
1958	2,306	351	168	2,825	—	147	305	452

POLIOMYELITIS VACCINATION.

During 1958 the anti-poliomyelitis campaign was continued, the numbers of children vaccinated being dependent on the amount of vaccine received ; this was always insufficient for the demand. The scheme was extended to cover those born in 1933-1942 inclusive, but during the year under review few of those eligible applied for vaccination. Most of the clinic sessions were carried out by the medical staff of the authority and the following table shows the work done in 1958.

Number of Persons	Year of Birth		Expec- tant mothers	General Practitioners, Ambulance Staff, Hospital Staff and families
	1943— 1957	1933— 1942		
Given two injections ..	33,453	296	381	540
Given one injection ..	1,492	67	31	256
Awaiting vaccination ..	1,988	86	23	56
Total ..	36,933	449	535	852

On 31-12-58, 10,112 persons in the eligible groups had received three injections.

AMBULANCE SERVICE.

The Service has been provided in the following ways :—

1. A direct Service by the Health Committee.
2. Agency arrangements through the S.J.A.B.
3. Customer arrangements with adjoining authorities.
4. The Hospital Car Service and its volunteer drivers.

Development of the Service.

During the year arrangements were made to discontinue the St. John Ambulance Brigade Agency. The service which they had provided at South Bank and Great Ayton was superseded by a County service provided from Redcar and Guisborough as from 1st April, 1958, and the service from the remaining Agency Station at Carlin How was terminated on 30th June, 1958. The latter was replaced by a temporary County station at North Skelton pending the building of a permanent Station.

Radio Control.

The scheme of radio control which was being installed during the last quarter of 1957 was extended to include the new stations at Guisborough and North Skelton and the whole scheme was fully operational on 30th June, 1958.

Statistics.

As will be seen by the figures given below there has been a further decrease in mileage in spite of an increase in the number of patients carried. This is due to the introduction of

- (a) Radio Control.
- (b) Increased co-ordination of journeys.
- (c) Dual purpose vehicles with a larger carrying capacity.

Standby.

As a result of the decision of the Industrial Disputes Tribunal in November, 1957, that standby duty must be restricted to duty at home, arrangements were made to provide alternative means of night cover throughout the Riding. The Redcar and Scarborough depots and the Haxby, Northallerton and Thornaby Stations had to be manned at night and as a result of this decision, 13 additional driver/attendants were authorised. Arrangements were made for "standby" to be undertaken at home (with the exception of Redcar and Scarborough depots which have crews on night duty) telephones being installed in the homes of men able to undertake such duty.

Personnel.

The number of personnel directly employed by the County Council on the 1st January and 31st December, 1958, was as follows :—

Depot/Station	1/1/58	31/12/58
Redcar Depot ..	16	21
Scarborough Depot ..	15	19
Northallerton Station ..	6	7
Thirsk Station ..	8	8
Haxby Station ..	7	8
Malton Station ..	6	6
Richmond Station ..	7	7
Whitby Station ..	3	3
Thornaby Station ..	5	7
Kirkbymoorside Station ..	4	4
Bainbridge Station ..	3	3
Guisborough Station ..	—	6 (1 vacancy)
North Skelton Station ..	—	4
	80	103

Vehicles.

The total number of county owned vehicles on 1st January and 31st December, 1958, was 70 and 74 respectively, made up as follows :—

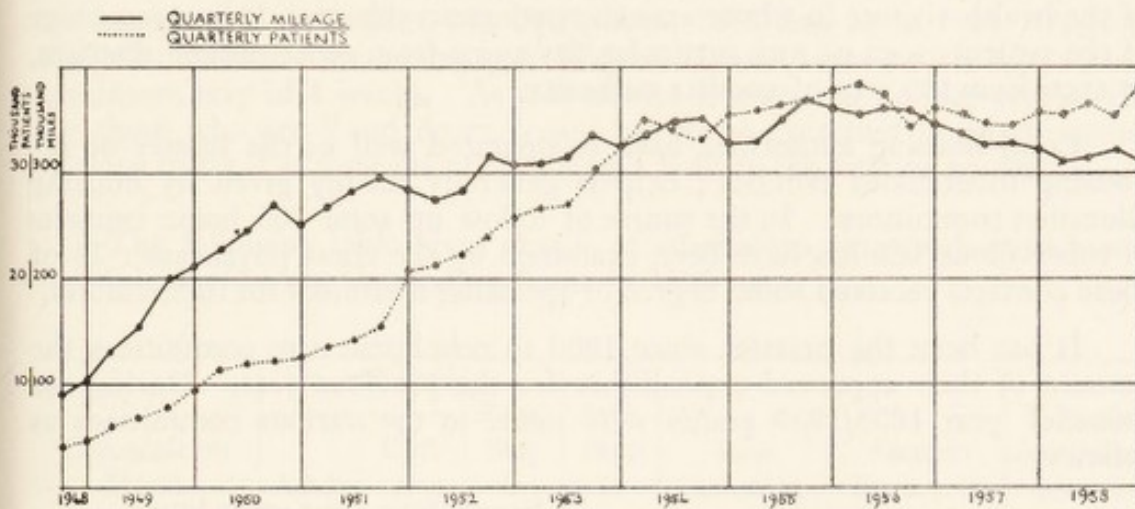
	AMBULANCES			DUAL PURPOSE VEHICLES			
	Petrol	Diesel	Redun- dant	L.T.A.	Others	Redun- dant	Total
1st Jan. 1958 ..	21	10	—	17	22	—	70
31st Dec. 1958	21	10	1	22	16	4	74

During the year one ambulance and one large sitting case vehicle were purchased from the St. John Ambulance Brigade (both vehicles were in good second hand condition) and orders were placed for one new diesel ambulance and 3 light transit ambulances ; all these vehicles were bought as replacements.

The number of patients carried and the mileage undertaken during the calendar years 1952-1958 is given below :—

Year	Patients Carried	Mileage
1952 ..	90,451	1,168,924
1953 ..	116,517	1,271,027
1954 ..	134,737	1,355,759
1955 ..	149,399	1,402,950
1956 ..	147,062	1,390,834
1957 ..	140,147	1,288,011
1958 ..	144,953	1,242,171

The improved mileage per patient is illustrated in the graph given below :—



SECTION 28, PREVENTION OF ILLNESS— CARE AND AFTER-CARE.

(a) TUBERCULOSIS.

The proposals made by the County Council under Section 28 of the National Health Service Act, 1946, as approved by the Minister of Health provide for the carrying out of the Health Committee's functions by area sub-committees ; in fact several of the functions of the Health Committee under Section 28 are carried out by area after-care committees. Care committees are established in seven out of ten health areas ; care work in the other three is carried out directly by the local health sub-committees ; the grants made during 1958 are set out below.

The provision of open air shelters is dealt with centrally because of their cost and in order to solve problems of storage and use. Extra nourishment, beds, bedding and nursing requisites can be obtained on a recommendation made by a chest physician or general practitioner to the local health office, or to County Hall.

Materials for occupational therapy for patients discharged from sanatoria are provided through voluntary organisations, *e.g.* the British Red Cross Society, or care committees. No reasonable request for materials has ever been refused ; no trained occupational therapist was available during 1958.

Each person notified as suffering from tuberculosis can obtain on the recommendation of the chest physician one pint of extra milk per day without charge. Additional nourishment is dealt with by care committees on the recommendation of the family practitioner or of the chest physician in special cases.

Owing to the rural nature of this county and to the policy of providing chest clinics in the major towns in or adjacent to the Riding, it has not usually been practicable to arrange for the regular attendance at these clinics of the health visitors in whose area the patients reside, as a large percentage of the patients seen on any particular day come from other nurses' districts, or even from the area of another authority.

Local housing authorities have co-operated well in the matter of re-housing tuberculous families ; help is generally readily given by housing allocation committees. In the course of follow up some 705 home contacts of tuberculous families have been examined by the chest physicians : 14 of these contacts received some degree of specialist treatment for tuberculosis.

It has been the practice since 1950 to reimburse care committees the amount of their approved expenditure for the previous year. During the financial year 1958/1959 grants were made to the various committees as follows :—

Care Committee	Gross Expenditure	Income from non-C.C. sources	Net expenditure reimbursed by County Council
	£	£	£
Eston ..	335	5	330
Redcar ..	62	3	59
Guisborough ..	18	4	14
Whitby ..	110	42	68
Ryedale ..	18	—	18
Bulmer ..	86	—	82
Scarborough ..	220	—	220

(b) MENTAL ILLNESS OR DEFECTIVENESS.

Arrangements for the care and after-care of persons suffering from mental illness or defectiveness are dealt with by the Mental Health services sub-committee of the Health Committee ; see page 34 for details of the work of this standing sub-committee.

(c) OTHER TYPES OF ILLNESS.

As regards illness generally, certain items of equipment, *e.g.* special beds and mattresses, can be obtained on request from local health offices ; in addition each home nurse has access to a supply of nursing requisites which she may leave on loan in a patient's home without charge. Health visitors are being used by medical officers of health in certain areas to follow up cases of notifiable disease and to ensure that adequate nursing is available ; they are better able to give advice to parents on the prevention of further infection and the care of children than sanitary staff, particularly now that terminal disinfection has been virtually abandoned except after certain serious diseases, *e.g.* tuberculosis, typhoid fever and smallpox.

(d) CONVALESCENT HOME ACCOMMODATION.

Convalescent accommodation was offered to 22 individuals in 1958 as compared to 24 in 1957, 34 in 1956, 53 in 1955 and 48 in 1954. Accommodation is found for adults and children of both sexes and is limited to a maximum stay of 4 weeks. As this service is a type of holiday-rest service for those who are "run down" care has to be exercised to guard against persons using it as a means of obtaining a holiday for little or no cost.

The following table gives details of admissions to convalescent homes through the County Council's scheme in 1958 :—

Convalescent Home	No. admitted				Total Stay in days	Aver. Stay in days	Cost including travelling	Amount Recovered	Nett cost (excluding admini- stration)
	Adults		Chil- dren						
	M	F	M	F					
West Hill, Southport	—	1	—	—	14	14	£ s. d. 13 10 8	£ s. d. 2 2 0	£ s. d. 11 8 8
Semon, Ilkley	1	3	—	—	63	15.75	36 0 0	12 5 0	23 15 8
Blackburn, St. Annes	—	5	—	—	70	14	62 10 8	4 6 10	58 3 10
The Haven, Scarborough	1	1	—	—	28	14	17 19 8	14 2	17 5 6
Bearwood, Scarborough	2	7	—	—	119	13.22	83 1 8	27 2 1	55 19 7
Tanllyfan, Colwin Bay	—	—	—	1	70	70	46 3 10	2 12 6	43 11 4

PROTECTION OF CHILDREN FROM TUBERCULOSIS.

During 1958, 34 employees of the Children's Committee were surveyed in connection with their work or proposed employment in close contact with groups of children ; the cost is charged to Section 28 of the National Health Service Act, 1946. Some of these examinations are carried out by the Mass Radiography Service when surveys are being held in a suitable locality ; in other cases arrangements are made with a private radiologist, who uses full size films.

In addition to the above, 186 persons employed by the Education Committee and 98 applicants for admission to a teachers' training college were x-rayed. The co-operation of the medical and technical staff of the mass miniature radiography units has been much appreciated. As in previous years I am indebted to Dr. G. Walker, the chest physician to the Northallerton area, for his helpful advice in doubtful cases.

HEALTH EDUCATION.

Advice on personal and environmental hygiene is freely given by health visitors employed by the County Council to mothers with children under school age and to families in which a clinical case of tuberculosis has occurred ; generally the advice is welcomed and accepted. Advice is also given on health matters at infant welfare centres, ante-natal and post-natal clinics, both orally and by means of pamphlets. Members of the medical staff have also given talks in their own areas as local M.O.H. ; the three county health inspectors have systematically dealt with the peculiar problems of food handling in talks given to employees in the schools meals service. A film projector has been provided by the Council to help in this work : films are hired from time to time. Film strips are also provided for general use.

DOMESTIC HELP SERVICE.

The domestic help service continues to expand. In 1947, 46 families were given help by 45 part-time helpers as compared with 681 families in 1954, 705 in 1955, 766 in 1956, 845 in 1957, and 953 families in 1958. In December 1957 the number of helpers employed by the County Council was 25 whole-time and 150 part-time ; in December 1958 the corresponding service had 20 whole-time and 196 part-time employees. It has been found desirable in rural areas to employ part-time domestic helps in order to avoid waste of time in travelling between towns and villages.

The County Council's proposals under the National Health Service Act 1946, provided for the employment of the equivalent of 80 full-time workers either in a whole-time or part-time capacity for the purpose of providing domestic help for those in need. Priority is given (i) to women having a domiciliary confinement, (ii) to persons requiring help because of sickness or pregnancy of the housewife or her absence in hospital, (iii) to other cases of acute illness particularly of children, where there is a number of healthy children to be cared for, and thereafter (iv) to aged persons or chronic sick persons who are unable to obtain admission to hospital. During the year under review the establishment was increased from 90 to 97 full time helps or their equivalent in part-time workers.

At the end of the year under review, the standard charge to persons obtaining domestic help was 3/-d. per hour, recovery of whole or part of the cost of providing the service from the person receiving domestic help is assessed according to a scale of assessment. The following table gives the number of helps employed, the hours worked, the families who received help and those who paid the standard charge in each of the ten health areas of the Riding.

Area	Domestic Helps			Recipients of Domestic Help	
	Employed or registered at end of year		Hours worked	No. who received help	No. who paid standard charge
	Whole-time	Part-time			
Thornaby ..	7	7	20,562	93	13
Eston ..	2	20	34,814½	172	9
Redcar ..	1	15	19,260	127	27
Guisborough ..	3	12	17,293	66	10
Whitby ..	1	7	10,249	52	8
Ryedale ..	—	38	21,423	67	—
Bulmer ..	—	28	12,997	72	4
Wensleydale ..	—	32	16,651	79	9
Richmond ..	—	25	15,009	59	10
Scarborough ..	6	12	21,120½	166	35
Totals ..	20	196	189,379	953	125

MENTAL HEALTH SERVICES OF THE AUTHORITY.

Mental Deficiency.

During 1958 the County Council employed three whole-time mental health workers. All are authorised under the Mental deficiency Acts and with the exception of those functions performed according to statute by registered mental practioners, they made all the routine and statutory visits under these Acts. In addition, they supervised and reported on defectives on licence and holiday leave, when requested do so, by the Superintendents of the mental deficiency hospitals. During 1958 the mental health workers made 2734 visits. During the year one of the mental health workers continued to work at the Alderman Cockerill Occupation Centre (Scarborough) as temporary supervisor because of difficulties in obtaining suitable applicants for this post. She eventually returned to her district in September, 1958. This meant that in this area only urgent visiting was carried out during the period when she was at the Scarborough centre ; there is therefore some decline in the number of visits made by the mental health workers during this year. Although the authority's nine part-time duly authorised officers are authorised under the Mental Deficiency Acts as well as the Lunacy Acts, their work in the former connection has been confined to occasional presentation of petitions.

Psychiatrists employed by Leeds and Newcastle-upon-Tyne Regional Hospital Boards have continued to be available for consultations and advice and this arrangements has continued to work satisfactorily during 1958. The help and advice given during the year has been much appreciated, not least by the parents of children seen by the psychiatrists.

Admission to Hospital.

Local Authorities welcomed Ministry of Health circular 2/58 informing them that wherever possible mental deficiency hospitals were prepared to accept patients on an informal basis. Since the issue of this circular, the majority of patients have been informally admitted. Although the hospital authorities have generally conformed to the Minister's wishes only a very small number were actually discharged. The result has been therefore that the new arrangements has done little to reduce the long waiting lists for admission of urgent cases ; the admission rate still falls short of that required to stop the long waiting list from growing even longer.

In certain instances it has even been found difficult to obtain vacancies in cases where the courts wished to deal with patients under the provisions of S. 8 of the Mental Deficiency Act 1913.

Hospital admissions, discharges and deaths in 1958 as compared with those in the six previous years are given in the following table :—

Year	Admitted		Discharged		Deaths	
	M.	F.	M.	F.	M.	F.
1952	7	22	3	5	4	2
1953	18	16	2	3	4	4
1954	26	7	2	5	2	1
1955	10	6	4	9	2	4
1956	21	21	7	6	2	2
1957	14	4	8	13	4	4
1958	15	13	10	11	7	3

Details of the numbers of defectives in hospital, on licence from institutions and under guardianship on 31st December, 1958, are as follows :—

	M.	F.	Total
(i) Defectives in Regional Hospital Board Hospitals on 31st December, 1958 :—			
Under 16 years of age 34 23 57
Over 16 years of age 192 200 392
(ii) On Licence from Institutions :—			
Under 16 years of age — — —
Over 16 years of age 27 11 38
(iii) In Rampton and other State Institutions :—			
Under 16 years of age — — —
Over 16 years of age 9 4 13
(iv) Under Guardianship :—			
Under 16 years of age 1 2 3
Over 16 years of age 4 — 4

Notifications.

Eighty-seven cases were notified for the first time during 1958 from the following sources :—

	M.	F.
(i) Under Section 57 (3) Education Act, 1944	5	8
(ii) Under Section 57 (5) Education Act, 1944	14	14
(iii) Other sources, subject to be dealt with	11	7
(iv) Reported but not ascertained on 31-12-58	14	14

Some of these 87 were dealt with as follows during 1958 :—

	M.	F.
(i) Admitted to Institutions	6	2
(ii) Placed under statutory supervision	19	21
(iii) Placed under voluntary supervision	4	2

The total numbers of defectives on the register on December 31st, 1958, were as follows :—

	M	F
(i) In institutions (including those on licence therefrom) ..	262	238
(ii) Under guardianship	5	2
(iii) In " place of safety "	—	—
(iv) Under statutory supervision	190	216
(v) Number of persons who are not " Subject to be dealt with " but under some degree of supervision	50	46

During the year 17 defectives were admitted to hospitals under the control of the regional hospital boards under the provisions of Ministry of Health Circular 5/52 ; no additional expenditure for accommodation has been incurred by the authority.

Mental Illness.

Nine duly authorised officers carry out duties under the Lunacy and Mental Treatment Acts. These officers are also authorised under the Mental Deficiency Acts and are employed as district welfare officers ; 21% of the salary of each is allocated to mental health. During 1958 these officers made 1,169 visits in connection with statutory duties under the Lunacy and Mental Treatment Acts and 400 visits in connection with after-care. In addition mental health workers have carried out home visits to discharged patients in suitable circumstances.

Lunacy and Mental Treatment Statistics.

Visits made in connection with the care and after care of patients (excluding those necessary for admission to hospital) 870

North Riding patients
admitted to hospital.

	1953	1954	1955	1956	1957	1958
	—	—	—	—	—	—
(i) Voluntary	.. 384	427	493	513	548	565
(ii) Certified	.. 160	157	174	195	116	93
(iii) Temporary	.. 10	7	5	10	8	7
(iv) Section 20 cases	.. 84	69	57	72	65	60
(v) Urgency orders	.. 13	20	—	—	28	46

Occupation Centres.

Provision of occupation centre accommodation for children in the Riding was virtually completed with the opening of the Dales Occupation Centre in March, 1958. Further details of this centre are given later in this report under the appropriate heading. Difficulty has been experienced in obtaining qualified staff for occupation centre vacancies and consequently the County Council agreed to support the in-service training courses arranged by the National Association for Mental Health through their Northern Branch. A course based on Newcastle was eventually arranged by the Association and one "unqualified" occupation centre supervisor was sent by the authority on this course. The county council has agreed to send one member of the existing staff of the occupation centres to a similar course each year. Leave of absence with pay is granted and the authority are also responsible for the fees.

(a) ALDERMAN COCKERILL OCCUPATION CENTRE—SCARBOROUGH.

The names of 16 children were on the register at the end of the year. Transport was provided by the county ambulance service. A mid-day meal is supplied through the school meals service ; meals are provided free in approved cases. One third of a pint of milk is supplied daily to children under the age of 16 years. Medical and dental inspections of the children attending the centre were carried out during the year. During the year Mrs. W. French was appointed supervisor at the centre and her place as assistant supervisor was taken by Mrs. J. Wright.

There was an average attendance for the calendar year of 81.5%.

(b) CLEVELAND OCCUPATION CENTRE.

The additional accommodation provided at this centre in 1955 was more than full during 1958, there being 61 children on the roll at the end of the year. There was an exceptionally high percentage of attendance during the year, the last two quarters being 92% and 94% respectively with an overall average for the year of 87%. During the year Miss J. Brown was appointed assistant supervisor in place of Mrs. Lozman who resigned. An Open Day was held on 17th July, 1958, at which £40 was raised by the sale of articles made at the centre. Miss M. Walburn, supervisor at the centre, was accepted for the in-service training course for the Diploma of the National Association for Mental Health.

An inspector from the Board of Control visited the centre during the year. Transport for children attending the centre continued as before: the county ambulance service and private hire cars were used. A mid-day meal was provided through the school meals service. Milk for children under the age of 16 years is provided daily.

(c) THE DALES OCCUPATION CENTRE.

This centre was opened to take children from a very large rural area and was in the nature of an experiment. The centre takes in children from a radius of about 20 miles. All the children travel by public service vehicle with escorts: Contract tickets are provided both for children and escorts. One notable feature has been the co-operation from the various bus companies when dealing with these children. As is the case with other centres in the Riding, a mid-day meal is provided through the school meals service and milk is supplied to children under the age of 16 years.

The centre was opened to children on 3rd March, 1958. Miss M. Walburn was seconded from the Cleveland Occupation centre to supervise the opening of the centre and Miss A. L. Emmerson was appointed as assistant supervisor. Miss A. C. E. Robinson was appointed as an assistant supervisor and took up her duties on 10-3-1958. On Miss Walburn's return to the Cleveland Occupation Centre, Miss Emmerson was appointed acting supervisor. There were 17 children on the register when the centre opened. An official opening of the centre took place on 16th May, 1958, when County Councillor J. Hudson, the Chairman of the Mental Health Services Sub-Committee performed the opening ceremony.

In December, 1958, 23 children were on the roll. An average attendance of 77% was maintained during 1958 which is rather remarkable when one considers the large area from which these children are drawn and the fact that all have to travel by public service vehicle.

(d) WHITBY OCCUPATION CLASS.

This class ceased in 1957 due to the fact that the mental health worker who arranged this class took over the supervision of the Alderman Cockerill Occupation Centre as already described. In addition the number of children and young adults attending the centre had fallen. On her return to field work it was found that there were too few defectives suitable for the class to warrant its re-opening.

(e) OCCUPATION CENTRES CONTROLLED BY OTHER BODIES.

Children living near Middlesbrough, York and Darlington continued to attend centres controlled by these authorities ; at the end of the year nine North Riding children were attending York centre, six the Middlesbrough centre and one the Darlington centre. In addition, seven children were attending Claypenny Hospital occupation centre on a day basis.

Industrial Centre.

The County Council, having completed provision for the younger defectives turned its attention to the provision of an industrial centre training for older defectives. A series of talks took place between officers of the County Council and the Ministry of Health on the proposed scheme. Suitable premises were required for this training and occupational therapy and because no one centre can provide for older persons in a rural area it was decided that residential accommodation should be provided in the form of a hostel for both sexes. Initially it is expected that the hostel will accommodate some fourteen males and six females and that the centre will in addition give training of one kind or another to a further 40 males and females attending five days a week. Towards the end of 1958 the sub-committee recommended that negotiations for the purchase of a large well-built Victorian house called Upsall Hall, near Nunthorpe, be opened and the County Council agreed to this step. It was hoped to start using these premises early in 1959, but the legal formalities had not been completed on 31-12-59. There seems to be little doubt that all the available accommodation could be used as soon as the centre is ready and that it will be necessary to make increased provision in the very near future. It is hoped that this venture will help to reduce the number awaiting admission to hospital, particularly by making it possible for stable high grade defectives to be discharged from institutions and releasing beds for some of the more urgent cases on the long waiting lists.

PUBLIC HEALTH ACT, 1936 (NURSING HOMES).

The number of nursing homes registered at the end of 1958 was 11 one less than in the previous year. Any premises which are the subject of an application for registration are inspected and reported upon by a medical officer ; after registration, nursing homes are supervised and inspected by officers of the medical department.

The number of beds provided in these nursing homes at the end of 1958 was 158 (maternity 22 ; others 136).

Co-operation with the County Welfare department regarding the registration of privately owned homes for old people was fully maintained as in previous years.

BLIND PERSONS.

The number of persons whose names were on the register of blind persons at 31st December, 1958, was 754. Of these 85 (39 males, 46 females) were ascertained on form B.D.8 during 1958.

The numbers of registered blind persons for whom operative treatment for cataract or glaucoma had been recommended since 1934 are 130 and 6 respectively.

During 1958 operative treatment for cataract was recommended for 20 persons (17 of whom were registered during the year and three were registered during previous years), and three were recommended for operative treatment for glaucoma (one of whom was registered during a previous year). Seven of these blind persons have received treatment for cataract ; three died before an operation could be performed ; five refused treatment on the grounds of age and illhealth ; one left the district and there is no information available ; one has not had treatment because the general condition did not permit ; and in three cases the question of operation was pending. Of the glaucoma cases, two had operative treatment and one treatment by drugs.

TUBERCULOSIS.

New Cases.

The number of notifications of all forms of tuberculosis received in 1958 was 192 as compared with 175 in 1957.

Table I shows the number of new notifications during the last twelve years:

TABLE I.

Year	Total	Pulmonary	Non-Pulmonary
1947	262	200	62
1948	331	243	88
1949	280	213	67
1950	267	224	43
1951	298	250	48
1952	224	188	36
1953	266	231	35
1954	233	202	31
1955	193	169	24
1956	214	192	22
1957	175	156	19
1958	192	169	23

Table II shows the number of primary notifications of new cases of tuberculosis in age and sex groupings and Table III the age and sex distribution of new cases notified and deaths during the year.

TABLE II.

Formal Notification.

Age-Periods	Number of Primary Notifications of new cases of tuberculosis													
	Under 1 year	1-	2-	5-	10-	15-	20-	25-	35-	45-	55-	65-	75-	Total (all ages)
Pulmonary—														
Males ..	—	3	1	3	4	12	12	11	19	8	15	8	1	97
Females ..	—	—	6	5	5	6	17	11	8	4	8	—	2	72
Non-														
Pulmonary														
Males ..	—	—	—	1	2	1	—	2	1	—	—	—	—	7
Females..	—	—	3	1	1	1	3	3	1	1	1	1	—	16

TABLE III.

Age Periods	NEW CASES NOTIFIED.				DEATHS			
	Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary	
	M.	F.	M.	F.	M.	F.	M.	F.
0- ..	—	—	—	—	—	—	1	—
1- ..	4	6	—	3	—	—	—	—
5- ..	7	10	3	2	—	—	—	—
15- ..	54	42	4	8	4	2	1	1
45- ..	23	12	—	2	4	5	2	—
65- ..	9	2	—	1	8	3	2	2

In Table IV the distribution of new cases district by district with comparative figures for the five preceding years is given : the deaths from tuberculosis are similarly set out in Table 5 at the end of this report

TABLE IV.

District	1953		1954		1955		1956		1957		1958	
	Pul.	Non-Pul.	Pul.	Non-Pul.	Pul.	Non-Pul.	Pul.	Non-Pul.	Pul.	Non-Pul.	Pul.	Non-Pul.
URBAN DISTRICTS.												
Eston	47	5	21	2	20	4	37	-	25	5	47	7
Guisborough ..	-	-	3	-	5	1	2	-	2	1	3	2
Loftus	-	-	1	1	2	-	3	1	1	-	4	-
Malton	-	-	1	-	-	-	-	-	-	-	2	-
Northallerton ..	6	1	4	1	3	1	2	-	5	-	2	1
Pickering	-	-	-	-	1	1	1	-	-	-	-	-
Redcar	35	7	20	4	27	1	29	1	20	2	15	2
Richmond	4	-	4	-	3	1	5	-	2	-	6	-
Saltburn	3	2	4	1	2	-	4	-	5	-	3	-
Scalby	2	-	2	1	2	-	3	1	-	-	4	-
Scarborough ..	29	4	17	4	24	3	20	2	9	-	21	2
Skelton & Brotton	-	-	11	1	4	-	5	3	9	-	4	-
Thornaby-on-Tees	27	2	28	-	17	-	17	-	14	1	8	-
Whitby	-	-	3	1	3	2	7	1	7	3	3	-
Total Urban ..	153	21	119	16	113	14	135	9	99	12	122	14
RURAL DISTRICTS.												
Aysgarth	5	-	1	2	1	-	2	1	-	-	-	-
Bedale	5	-	3	1	1	-	2	1	2	-	3	-
Croft	-	-	2	-	-	-	-	-	4	-	2	-
Easingwold ..	7	-	5	1	3	1	9	4	3	-	2	-
Flaxton	7	4	6	1	11	5	10	3	8	1	9	3
Helmsley	-	-	2	-	2	-	2	-	1	2	1	-
Kirbymoorside ..	2	1	2	-	-	-	1	1	-	-	-	1
Leyburn	2	-	7	1	3	-	2	-	2	-	-	-
Malton	1	-	3	-	1	-	-	-	1	-	3	-
Masham	-	-	-	1	1	-	-	-	-	-	-	-
Northallerton ..	4	1	3	-	1	-	1	-	3	-	2	-
Pickering	1	-	2	-	-	-	-	-	2	1	1	-
Reeth	-	2	2	-	1	1	-	-	-	-	1	-
Richmond	15	3	16	2	13	1	9	1	13	-	9	3
Scarborough ..	3	1	1	1	-	-	2	-	3	-	1	-
Startforth	-	-	2	-	-	-	-	-	-	1	-	-
Stokesley	17	2	10	1	8	1	11	-	7	1	9	-
Thirsk	7	1	10	1	4	-	4	1	3	-	2	1
Wath	1	-	-	1	1	-	1	-	3	-	2	1
Whitby	1	-	6	2	5	1	1	1	2	1	-	-
Total Rural ..	78	14	83	15	56	10	57	13	57	7	47	9
Administrative County	231	35	202	31	169	24	192	22	156	19	169	23

Deaths and Death Rate.

35 deaths were ascribed to tuberculosis in 1958 as compared with 31 in 1957, 34 in 1956, 43 in 1955 and 50 in 1954.

Table V which follows shows the mortality from pulmonary and non-pulmonary tuberculosis over the last ten years and gives the corresponding figures for England and Wales.

		Deaths from Pulmonary Tuberculosis.									
		1949	1950	1951	1952	1953	1954	1955	1956	1957	1958
No. of deaths		127	104	70	60	42	39	35	31	26	26
Rate per 1,000 population		0.36	0.28	0.18	0.16	0.11	0.10	0.09	0.08	0.07	0.07
		Deaths from Non-Pulmonary Tuberculosis.									
		1949	1950	1951	1952	1953	1954	1955	1956	1957	1958
No. of deaths		20	13	16	9	17	11	8	3	5	9
Rate per 1,000 population		0.06	0.03	0.04	0.02	0.04	0.03	0.02	0.008	0.01	0.02
The death rates in England and Wales were :—											
Pulmonary tuberculosis		.403	.321	.275	.212	.179	.160	.131	.109	.095	.089
Non-Pulmonary tuberculosis		.054	.043	.041	.028	.022	.019	.015	.012	.012	.011

The whole-time and part-time health visiting staff of the Riding made 3,898 visits in connection with the after-care of tuberculous persons. The Home nurses also made 9,175 visits to 413 tuberculous patients.

During 1952 the Public Health (Tuberculosis) Regulations, 1930, were revoked; these were replaced by the Public Health (Tuberculosis) Regulations, 1952. The new Regulations no longer require medical officers of health to keep a register of tuberculosis notifications, but the Minister of Health expressed the view that they should continue to do so.

The requirement in the 1930 Regulations for providing information of a tuberculosis patient entering or leaving a sanatorium or hospital was omitted from the present Regulations. The Minister has, however, asked Hospital Boards and Committees to ensure that this information (as for any patient with a notifiable disease) is sent by the institution staff concerned to the medical officer of health of the district to which the patient belongs.

Contacts of cases of tuberculosis are examined by the chest physicians. This also applies in those cases where tuberculosis is not ascertained until after the death of the patient. In the County area during 1958, 705 contacts were examined as a result of 169 notified cases of pulmonary disease. The corresponding figures for 1957 were 864 and 156 respectively. Of the 705 contacts examined 14 were found to have tuberculosis.

There is no specific county-wide scheme for ascertaining early cases amongst children and others. Some are detected by the mass radiography service ; others are referred to chest physicians by general practitioners ; they are then kept under supervision and if necessary admitted to hospital. Mass radiography surveys are helpful but are only held at infrequent intervals in the more populated parts of the Riding. The selective radiography of patients referred by family doctors is more productive of results than the regular visits of the M.M.R. units, for experience shows that the same groups of volunteers come forward each time and many who fear to be found to require investigation stay away.

Many cases of tuberculosis after reaching a stage of quiescence return to their former employment. If that is entirely unsuitable, the patient is referred to the Ministry of Labour Resettlement Officer with a view to finding more suitable employment. Disablement Resettlement Officers and chest physicians have generally kept in close touch regarding quiescent and "cured" cases of pulmonary tuberculosis.

PREVALENCE OF INFECTIOUS DISEASES.

The number of infectious diseases notified to the local medical officer of health of the several sanitary districts during 1958 is given in table 7 at the end of this report ; it will be seen that no notification of diphtheria was received.

The Public Health (Infectious Diseases) Regulations, 1953, which came into operation on the 1st April, 1953, superseded the Public Health (Infectious Diseases) Regulations, 1927, and the Infectious Diseases (London) Regulations 1927. In their general substance and form, the new regulations are similar to the old ; that is to say, they require notification of malaria, dysentery, acute primary pneumonia and acute influenzal pneumonia, and provide for preventive steps to be taken against a spread of certain diseases specified in the fourth schedule to the regulations. The provisions about action to be taken by local authorities and medical officers of health against the risk of food poisoning applied under the old regulations to enteric fever and dysentery. They now apply to "typhoid fever, para-typhoid fever and other salmonella infections, dysentery and staphylococcal infection likely to cause food poisoning." The new regulations provide for action to be taken, not only as regards a person suffering from the disease in question, but also a person shown to be a carrier of the disease ; and a person in either class may now be prevented, not only from continuing to work in an occupation connected with food or drink, but also from entering such an occupation.

VENEREAL DISEASES.

The following table gives the summary of the first attendances made by North Riding patients at the hospital named during the years 1949 to 1958 :—

Treatment Centre.	Number of North Riding patients treated for the first time.									
	1949	1950	1951	1952	1953	1954	1955	1956	1957	1958
Darlington Hundens Hospital ..	39	55	30	24	23	41	22	27	21	20
Harrogate General Hospital ..	6	11	1	1	2	9	2	1	3	—
Leeds General Infirmary ..	2	6	8	2	8	1	—	—	—	—
Middlesbrough General Hospital ..	167	159	121	112	100	105	90	91	101	113
Scarborough Hospital	108	95	52	74	54	37	32	27	33	27
Stockton & Thornaby Hospital ..	48	33	25	33	26	17	7	29	15	*
York County Hospital	44	27	27	30	41	27	26	38	39	41
South Shields ..	—	—	—	—	4	—	1	—	1	—
Totals ..	414	386	264	276	258	237	180	213	213	201

* Figures not available.

LABORATORY FACILITIES.

A comprehensive service is available at the two laboratories of the Public Health Laboratory Service that have been established at Northallerton and Middlesbrough. In addition to undertaking the examination of specimens the directors of the laboratories can help when required in epidemiological field work in co-operation with medical officers of health. The Middlesbrough laboratory serves in addition to Tees-side, the southern part of County Durham and the northern half of the Riding. The Northallerton laboratory serves the remainder of the Riding, except for the Scarborough area which relies on a similar laboratory at Hull and to a lesser degree on a clinical laboratory at the Scarborough Hospital for this service.

The Northallerton laboratory is also a main distributing centre for diphtheria prophylactics and vaccine lymph for immunising persons against diphtheria and smallpox respectively.

ENVIRONMENTAL HYGIENE.

Details of the work of the county health inspectors are given in subsequent sections of this Report, but the following statistical summary of visits and sampling gives some indication of the diversity and extent of their duties.

	Visits	Samples
Visits in relation to works of water supply	101	
Samples of water submitted for examination		460
Visits in relation to works of sewage disposal	145	
Samples submitted for chemical analysis		2
Inspections of pasteurising plants and premises	190	
Samples of milk taken from pasteurising plants		406
Bottle rinses taken at pasteurising dairies		414
Visits to school premises (all purposes)	1,559	
Samples of school milk supplies		1,443
Samples of milk from school canteens and kitchens		41
Samples of milk from Children's and Old People's Homes		67
Samples of milk taken at Ministry of Health hospital farms		24
Section 31—Food and Drugs Act, 1955 :		
(i) Samples of non-designated milk submitted for biological examination		213
(ii) Samples of milk submitted for Ring test		107
Samples of milk taken in Specified Areas		1,153
Diseases of Animals (Waste Foods) Order, 1957	193	
Refuse disposal—inspection of tips	41	
Swimming baths—water purification	27	
Ministry Meetings or inquiries attended	17	
Miscellaneous visits	144	
	<hr/> 2,417	<hr/> 4,330

The number of inspections and samples taken has been maintained and compares favourably with previous years despite the added duties of the past two years in connection with Specified Areas and Diseases of Animals Waste Food treatment.

In carrying out their duties the county health inspectors gratefully acknowledge the co-operation received from the directors and staffs of the Public Health laboratories, engineering inspectors of the Ministry of Housing and Local Government, inspectors of the River Boards and the majority of the public health inspectors of county districts.

HOUSING.

Statistical returns submitted by local authorities show that there were 118,918 houses in the county administrative area at the end of 1958. The total number of new houses erected during the year was 2,441, an increase of 442 over the previous year, largely due to private building development. The general trend indicated in the columns of the accompanying statistical table (page 72) as compared with previous years, is a decline in the number of unfit houses and houses requiring repairs or structural alterations. This may be attributed to the fact that local authorities formerly preoccupied with re-housing by new building, have turned their attention to the provision of satisfactory housing by the improvement of existing properties. Furthermore, post-war legislation as typified by the Housing Act, 1945, Housing Repairs and Rents Act, 1954, since consolidated in the Housing (Financial Provisions) Act, 1958, has provided greater incentive for expenditure on property suitable for improvement by reconditioning and the provision of modern amenities. The number of houses unfit in all respects has dropped from 1,280 in 1957 to 569 in 1958 ; similarly the number of houses requiring repairs or structural alterations fell from 2,673 in 1957 to 1,700 in 1958. In both cases the reduction occurred in the rural districts, but having regard to differing environmental circumstances, urban and rural statistics cannot be correlated. Progress in meeting additional housing needs has now reached the stage to permit a resurgence of demolition in respect of individual unfit houses and clearances areas, action which has been largely in abeyance during the post-war period of acute housing shortage. Many local authorities in the Riding have already taken such action and this will be the subject of comment in a later report.

WATER SUPPLY.

The most important event of the year was the publication of the summary of the Yorkshire (East and North Ridings) Water Survey by the Ministry of Housing and Local Government. The summary is comprehensive and detailed ; the suggestions therein have proved to be controversial, as was anticipated, but have stimulated discussion on re-grouping of water undertakings, which is now accepted as desirable and inevitable. To meet the existing and future water supply needs over the next twenty-five to thirty years in the domestic, industrial and agricultural fields, recommendations are made to :—

- (a) make the fullest possible use of existing satisfactory sources, to abandon unsatisfactory or uneconomical sources and to construct suitable new ones ;
- (b) provide where necessary, efficient treatment plants ;
- (c) improve suitable existing service reservoirs, abandon unsuitable ones and construct new ones ;
- (d) re-arrange existing pipe networks, enlarge as required and lay new trunk and minor mains necessary for efficient distribution of water.

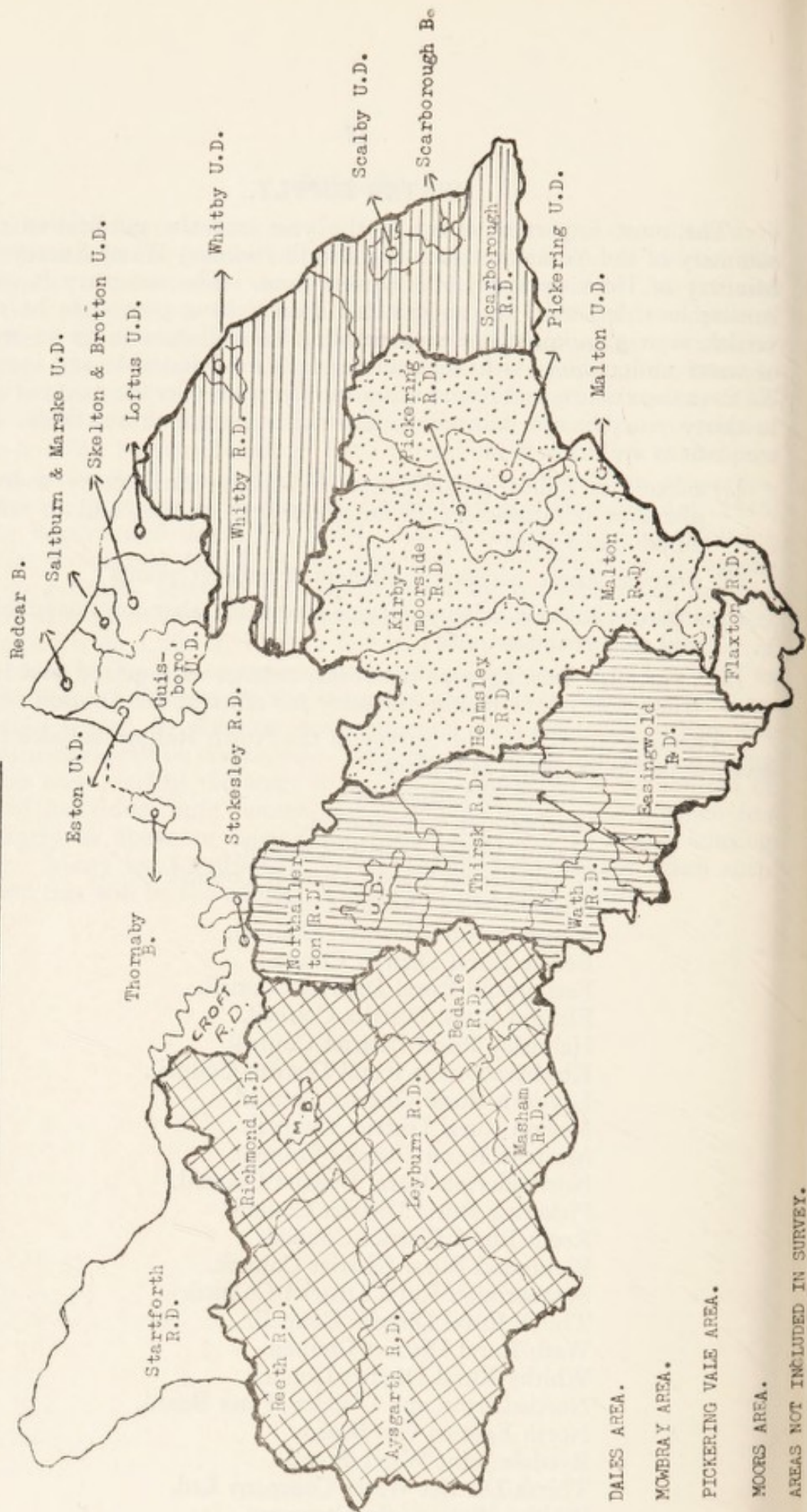
The area covered by the Survey in the North Riding includes twenty-seven water undertakers, as follows :—

Richmond Corporation.
 Scarborough Corporation.
 Malton Urban District Council.
 Northallerton Urban District Council.
 Scalby Urban District Council.
 Aysgarth Rural District Council.
 Bedale Rural District Council.
 Easingwold Rural District Council.
 Flaxton Rural District Council.
 Helmsley Rural District Council.
 Kirkbymoorside Rural District Council.
 Leyburn Rural District Council.
 Malton Rural District Council.
 Masham Rural District Council.
 Northallerton Rural District Council.
 Pickering Rural District Council.
 Reeth Rural District Council.
 Richmond Rural District Council.
 Scarborough Rural District Council.
 Thirsk Rural District Council.
 Wath Rural District Council.
 Whitby Rural District Council.
 Northallerton and District Water Board.
 North Eastern Gas Board.
 Ryedale Joint Water Board.
 Thirsk District Water Company Ltd.
 Whitby Waterworks Company.

WATER SUPPLY SURVEY

REVISION OF SUPPLY AREAS SUGGESTED BY MINISTRY OF HOUSING AND LOCAL GOVERNMENT.

NORTH RIDING OF YORKSHIRE



The Report suggests re-grouping of these undertakers into four all-purpose Water Boards namely, the Dales Water Board, Mowbray Water Board, Pickering Vale Water Board, Moors Water Board. The areas covered by these Boards are shown on the accompanying map and the constituent authorities are listed below :—

DALES WATER BOARD.

Richmond Corporation.
 Aysgarth Rural District Council.
 Bedale Rural District Council.
 Leyburn Rural District Council.
 Masham Rural District Council.
 Reeth Rural District Council.
 Richmond Rural District Council.

MOWBRAY WATER BOARD.

Northallerton Urban District Council.
 Easingwold Rural District Council.
 Northallerton Rural District Council.
 Thirsk Rural District Council.
 Wath Rural District Council.
 Northallerton and District Water Board.
 Thirsk District Water Company Ltd.

PICKERING VALE WATER BOARD.

Malton Urban District Council.
 Norton Urban District Council.
 Flaxton Rural District Council.
 Helmsley Rural District Council.
 Kirkbymoorside Rural District Council.
 Malton Rural District Council.
 Norton Rural District Council.
 Pickering Rural District Council.
 North Eastern Gas Board.
 Ryedale Joint Water Board.

MOORS WATER BOARD.

Scarborough Corporation.
 Scalby Urban District Council.
 Scarborough Rural District Council.
 Whitby Rural District Council.
 Whitby Waterworks Company.

From the outset it was apparent that whilst the majority of the twenty-seven water undertakers in the North Riding accepted the need for re-grouping they were not prepared to agree to the re-groupings suggested in the Ministry's report. Reasons advanced for opposition to the proposed re-groupings were :—

- (a) loss of local autonomy for water supply ;
- (b) discarding of existing undertakings considered suitable for retention ;
- (c) disruption of existing groupings which have adequate resources and are functioning satisfactorily ;
- (d) disregard of geographical features *i.e.* natural water-sheds.
- (e) possibility of inadequate representation on Area Boards resulting in uneven development and unfair distribution of financial burden.

The Rural Water Supplies and Sewerage Committee to which the detailed examination of the Ministry's water survey report was referred by the County Council, was also unable to accept the recommendations made in the report, as a whole ; furthermore, having regard to the initial opposition of the majority of the county district councils to the re-grouping, the Committee considered it essential that an effort should be made to sponsor alternative re-groupings which would form the basis of agreement for voluntary acceptance by the county district councils. For this purpose the Committee called upon the Chief County Health Inspector to prepare, in consultation with Local Authorities, a report on the re-grouping of the water undertakings ; this report was in course of preparation at the end of the year under review.

During the year, new schemes for the provision or improvement of water supplies were prepared and reviewed in the light of the recommendations made in the Ministry's report on the reorganisation of water supplies from the angle of distribution and the major proposals submitted were in respect of areas supplied from existing joint water boards.

Ten new schemes for the provision of water supplies or improvements to existing supplies were submitted by local authorities during the year. All the schemes were examined by the county health inspectors who reported on the purity and adequacy of the supplies after field investigations ; these reports form the bases on which the County Council sent the observations summarised below to the local authorities concerned.

Authority	Date submitted	Scheme	Estimated Cost	Observations by County Council
Thallerton D.C.	11-11-58	Extension of water main from Darlington Street to Danby Wiske road.	£ 2,500	Approved in principle but considered to be entirely for agricultural purposes.
Pickering U.D.C.	18-12-58	Bulk supply of water from Ryedale Joint Water Board ; improvement and extension of distribution main in the urban district (revised).	10,113	Approved in principle but major part of scheme considered to be for agricultural needs.
Ryedale Joint Water Board	25-1-58	Extension of supplies from a proposed reservoir in Swainsea Lane, Pickering, to serve rural locality north of the reservoir in the Pickering R.D.	13,684	Approved in principle.
Wiggwold R.D.C.	26-11-58	Link water main—Huby to Stillington Road.	3,374	Approved in principle.
Hasley R.D.C.	31-8-58	Cold Kirby, Old Byland, Rievaulx, Scawton.	33,700	Approved in principle.
Burn R.D.C.	1-8-58	Augmentation of Sowden Beck scheme—Condensor Wood, Preston-under-Scar.	2,416	Approval withheld—supply not considered satisfactory in quality.
Pickering R.D.C.	30-1-58	Extension of water main from a proposed new reservoir in Swainsea Lane, Pickering, to serve Newton-under-Rawcliffe.	2,450	Approved in principle.
North R.D.C.	28-5-58	Boldron and Bowes.	55,460	Approved in principle, but County Council consider major part of scheme as being for agricultural needs
Thirsk R.D.C.	29-11-58	Augmentation of water supplies to Birdforth, Dalton, Hutton Sessay, Sessay, Thirskleby.	9,100	Approved in principle.
Wey R.D.C.	9-12-58	Ainthorpe and Danby.	4,300	Approved in principle.

One meeting convened by the Minister of Housing and Local Government to consider proposals for improvements to the water supply of Hudswell and Slegill in the Richmond rural district was attended by the Chief County Health Inspector who reported thereon.

The county health inspectors made 101 visits in connection with new sources of water supply or improvements to existing supplies.

County Supervision and Sampling of Water Supplies.

460 samples of water were taken by the county health inspectors during the year ; the majority of these were taken at schools but sources of supply under consideration as the nuclei of new schemes were also sampled. The installation of individual tap filters which was in the experimental stage in 1957 has continued to be successful giving 100% satisfactory results from filtered water submitted for bacteriological examination ; this has enabled a reduction to be made in the number of schools boiling water prior to consumption. 30 schools have yet to be provided with satisfactory water supplies or to have filters installed ; this figure may appear to be high but having regard to the rural nature of the greater part of the Riding and consequent difficulties in the development of mains water supplies, reduction is inevitably slow.

The results of the samples taken are given below :—

Test	No. taken	Satis- factory	Unsatis- factory
Bacteriological examination . .	459	361	93
Chemical analysis . .	1	1	—

5 samples were broken in transit.

Frequent samples of raw and chlorinated water have been taken at the Ryedale Joint Water Board pumping station at East Ness ; these samples have shown a consistently high degree of purity. Tests of water for residual chlorine were also made on a number of chlorinated supplies.

A review of the activities of local authorities in connection with water supplies shows for the most part that they were concerned with the extension of mains to serve areas in which new building development was in progress ; special mention should, however, be made of the following :—

GUISBOROUGH U.D.

A new service reservoir and ancillary works were completed at Pinchinthorpe.

LOFTUS U.D.

Scaling dam reservoir was completed. (Tees Valley and Cleveland Water Board).

SKELTON AND BROTON U.D.

The village of Moorsholm was connected to the Lockwood Beck supply of the Tees Valley and Cleveland Water Board.

HELMSLEY R.D.

Extension of Piethorne supply to Carlton village.

PICKERING R.D.

Extensions of mains linking Thornton Dale to Marishes.

SCARBOROUGH R.D.

Construction of borehole at Nettledale Lane, Snainton.

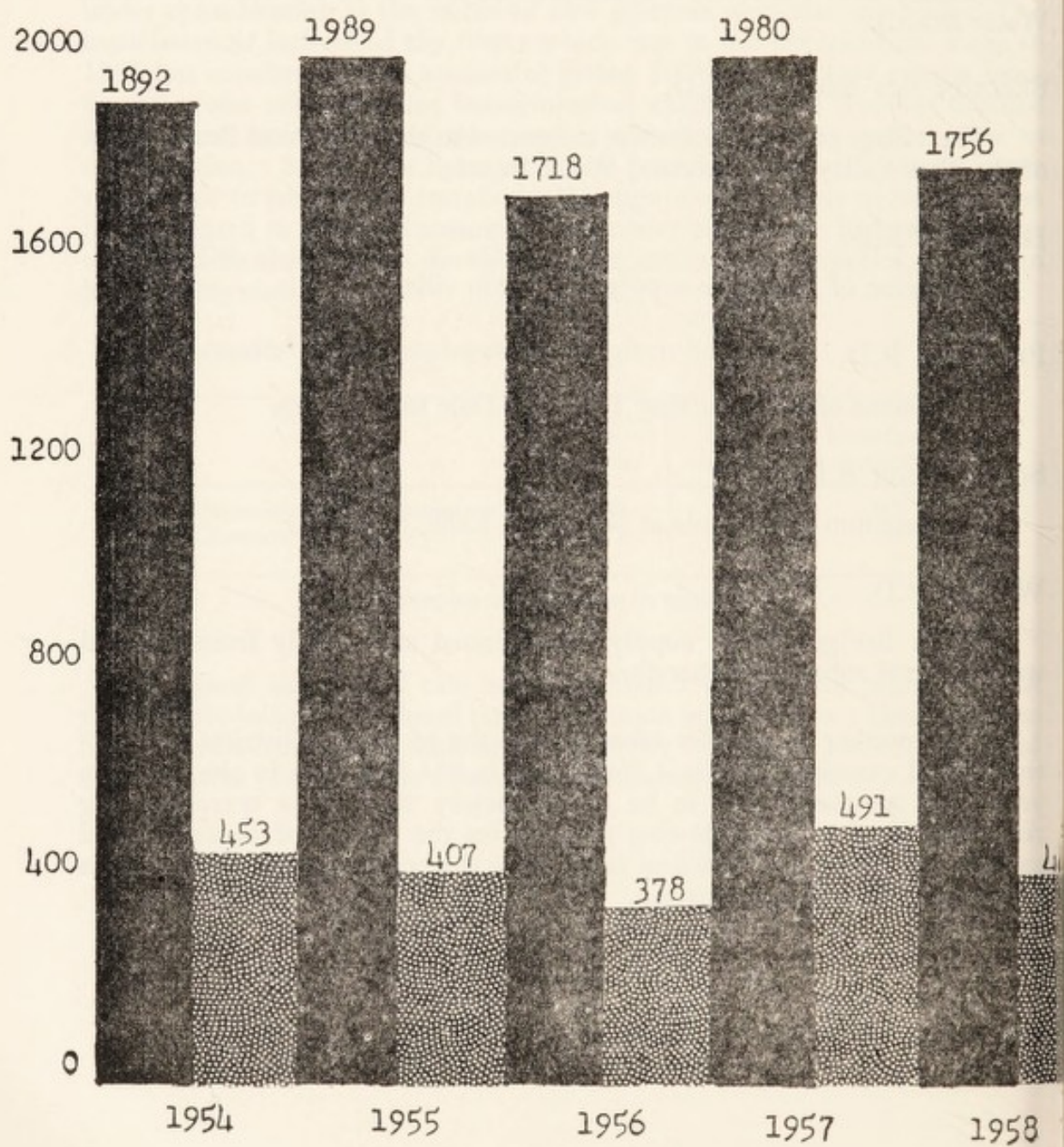
WHITBY R.D.

Egton Bridge private supply discontinued and supply from regional water scheme substituted therefor.

The number of samples taken by officers of county districts for bacteriological examination was 1,756 which is 224 less than in the previous year ; the number found to be unsatisfactory was 402 a corresponding reduction of 89. The following graph gives the results of bacteriological examination, and the statistical table gives the results of chemical analysis and bacteriological examination.

RESULTS OF BACTERIOLOGICAL EXAMINATION
OF WATER SAMPLES

■ Number of samples taken
▨ Number of unsatisfactory samples



DISTRICT	Chemical analysis			Bacteriological examination			Mains Supplies
	Total taken	Satisfactory	Unsatisfactory	Total taken	Satisfactory	Unsatisfactory	
URBAN.							
*Eston ..	—	—	—	—	—	—	1
Guisborough ..	1	1	—	6	6	—	2
Loftus ..	7	3	4	33	11	22	1
Malton ..	—	—	—	18	18	—	1
Northallerton ..	—	—	—	68	50	18	1
Pickering ..	—	—	—	42	38	4	1
*Redcar Borough ..	8	8	—	16	15	1	1
Richmond Borough ..	2	2	—	24	24	—	2
Saltburn & Marske ..	—	—	—	—	—	—	1
Scalby ..	104	104	—	20	20	—	2
Scarborough Borough ..	4	4	—	368	352	16	3
Skelton & Brotton ..	—	—	—	25	19	6	1
*Thornaby Borough ..	—	—	—	2	2	—	1
Whitby ..	—	—	—	9	9	—	1
Total Urban ..	126	122	4	631	564	67	19
RURAL.							
Aysgarth ..	—	—	—	33	16	17	17
Bedale ..	1	1	—	15	15	—	1
Croft ..	—	—	—	20	—	20	5
Easingwold ..	—	—	—	121	73	48	2
Flaxton ..	—	—	—	30	25	5	2
Helmsley ..	—	—	—	99	71	28	6
Kirkbymoorside ..	—	—	—	130	99	31	11
Leyburn ..	—	—	—	11	9	2	17
Malton ..	—	—	—	9	8	1	1
Masham ..	8	6	2	8	7	1	6
Northallerton ..	—	—	—	24	21	3	2
Pickering ..	—	—	—	26	13	13	11
Reeth ..	—	—	—	50	15	35	20
Richmond ..	—	—	—	80	66	14	3
Scarborough ..	1	1	—	238	196	42	8
Startforth ..	5	5	—	68	37	31	7
Stokesley ..	2	2	—	40	25	15	2
Thirsk ..	—	—	—	10	5	5	9
Wath ..	—	—	—	87	77	10	7
Whitby ..	—	—	—	26	12	14	15
Total Rural ..	17	15	2	1125	790	335	152
Administrative County	143	137	6	1756	1354	402	171

* Supply provided by Tees Valley Water Board.

Each year I have stressed the need for sampling at the point of consumption irrespective of the source of supply and treatment prior to distribution. I make no apology for bringing this again to the notice of those local authorities in the Riding who fail to carry out this essential precaution.

One of the most cogent reasons for regular sampling at the point of consumption is afforded by the knowledge that with few exceptions water supplied throughout the Riding relies on one line of defence for potability, namely chlorination, and this area is for the greater part a National Park where access to gathering grounds is often unrestricted

SEWERAGE AND SEWAGE DISPOSAL.

Since the Rural Water Supplies and Sewerage Act, 1944, was enacted 247 schemes for the provision or improvement of sewerage and sewage disposal facilities in the Riding have been submitted to the County Council for observations ; many of these schemes are still in abeyance mainly because of high cost. Despite the progress which has been made, more especially in recent years, there are still *circa* 230 parishes in the Riding which have no satisfactory sewerage or sewage disposal arrangements ; these are of course in the rural parts, but they also include a number of sizeable villages. During the past year, twelve schemes for sewerage and sewage disposal have been submitted and examined by the county health inspectors, five have been in respect of new works and seven for extensions to sewers and additions to disposal works.

The local authorities, areas concerned, estimated costs and County Council observations are summarised in the following schedule :—

Authority	Date submitted	Scheme	Estimated Cost	Observations by County Council
elton and .. Brotton U.D.C.	21-8-58	Moorsholm (amended).	£ 30,000	Approved in principle, but attention drawn to the high cost due to the acceptance of farm drainage.
dale R.D.C. ..	19-4-58	Leeming, Leeming Bar and Londonderry.	26,716	Pending.
elmsley R.D.C.	10-1-58	Reconstruction of Helmsley sewage disposal works.	23,250	Approved in principle.
lyburn R.D.C. ..	12-7-58	Hornby.	2,469	Approved in principle.
orthallerton .. R.D.C.	14-4-58	Extension of Romanby sewerage and sewage disposal scheme.	15,250	Approved in principle, but County Council consider scheme arises mainly from new building development.
akering R.D.C.	28-11-58	Sinnington (3rd revision).	22,780	Approved in principle.
chmond R.D.C.	11-4-58	Sewer extension and addition to Scotton sewage disposal works.	1,839	Approved in principle.
artforth R.D.C.	30-9-58	Romaldkirk.	4,620	Approved in principle.
okesley R.D.C.	23-10-58	Low Worsall.	3,890	Approved in principle.
do ..	19-11-58	Great Ayton—flood relief.	4,250	Approved in principle but County Council consider that proposals fail to meet problem of inadequacy of sewerage system in general.
do ..	19-11-58	Yarm.	70,250	Approved in principle but Rural District Council advised to add filtration treatment.
irsk R.D.C. ..	27-5-58	Proposed sewage pumping station at Thirsk Junction.	1,620	Approved in principle.
do ..	27-5-58	Provision of ejector station at Miry Hole, South Kilvington.	1,700	Approved in principle.

Fourteen meetings convened by the Minister of Housing and Local Government to consider new schemes or to investigate progress with existing schemes were attended by the county health inspectors who submitted reports thereon. Details of the authorities concerned and the schemes under review are as follows :—

Authority	Date of Meeting	Scheme
Bedale R.D.C. ..	16-1-58	Bedale and Aiskew.
do ..	21-8-58	do
Flaxton R.D.C. ..	16-1-58	New Earswick.
do ..	19-3-58	Strensall sewage disposal works extension.
do ..	29-4-58	Sand Hutton.
Helmsley R.D.C. ..	17-9-58	Helmsley—reconstruction of sewage disposal works.
Leyburn R.D.C. ..	9-7-58	Harmby and Spennithorne.
Malton R.D.C. ..	11-6-58	Slingsby.
Richmond R.D.C. ..	14-1-58	Eppleby.
do ..	14-1-58	Melsonby.
do ..	30-9-58	Middleton Tyas—reconstruction of sewage disposal works.
Scarborough R.D.C. ..	17-9-58	Seamer Regional Scheme (part).
Wath R.D.C. ..	11-12-58	Rainton with Newby.
Whitby R.D.C. ..	16-4-58	Egton and Egton Bridge.
do ..	16-4-58	Grosmont.

The county health inspectors, in addition to examining new proposals and inspecting work in progress on new schemes, made routine inspections of disposal works which had been the subject of grant under the Rural Water Supplies and Sewerage Acts ; 145 visits were made during the course of these duties.

A brief summary of the more important work undertaken by county district councils during the year is as follows :—

GUISBOROUGH U.D.

Completion of new sewage disposal plant at Dunsdale.

FLAXTON R.D.

Pumping station and rising main completed to Stockton-on-Forest.

MALTON R.D.

Slingsby sewage disposal works completed.

MASHAM R.D.

Masham town disposal works reconstructed.

PICKERING R.D.

Middleton disposal works completed.

RICHMOND R.D.

Eppleby works completed.

WHITBY R.D.

Lythe and Stainsacre schemes completed.

Apart from the foregoing work many of the county district councils carried out extensions to sewers to meet the needs of new building development.

The need for sewerage and sewage disposal facilities in many areas is urgent ; even in the rural areas building development is taking place and lack of adequate sewerage and sewage disposal facilities is resulting in the use of individual disposal units of the septic tank type. Apart from the objection to a multiplicity of individual disposal units, they are largely a waste of money as eventually they are connected to a comprehensive disposal scheme when this becomes available ; they are therefore purely temporary to meet the immediate needs of the community which should have available mains disposal schemes.

REFUSE COLLECTION AND DISPOSAL.

Forty-one inspections of refuse disposal tips have been made by the county health inspectors during the year. Twenty local authorities claim to operate controlled tipping, the word "claim" is used advisedly, as only a minority carry out controlled tipping strictly in accordance with Ministry recommendations ; six local authorities operate partially controlled tips ; one, operates partially controlled tipping and incineration : one incineration entirely and six, uncontrolled tipping. Annually, evidence is forthcoming that difficulties are being experienced by local authorities in finding tipping sites ; when found, costs of haulage to the sites and maintenance in accordance with acceptable public health standards are often burdensome to small rural authorities. In past reports I have mentioned that a possible remedy for these problems lay in the provision of combined disposal tips or other forms of refuse disposal for adjoining county districts ; such systems are being successfully operated in other counties and increased length of haul is being offset by reduced operating costs at the actual place of disposal. A list giving details of the methods of refuse disposal, frequency of collection and estimated cost in operation by local authorities in the Riding is appended.

District	Estimated cost of service	Method of refuse disposal	Frequency of collection, improvement to service, etc.
URBAN.			
Eston	£ 23,065	Controlled tipping	Weekly collection
Guisborough	6,600	do	do
Loftus	4,304	do	do
Malton	3,867	Partially controlled	do (remote rural premises—monthly)
Northallerton	3,530	Uncontrolled tipping	do
Pickering	1,750	do	Bullamoor and Hailstone Moor—3 weekly collection Weekly collection in town area. Quarterly collection at Stape and Bean Shear
Redcar Borough	18,618	Controlled tipping	Weekly collection
Richmond Borough	3,783	do	do
Saltburn & Marske	6,284	do	do
Scalby	4,477	do	do (Outlying farms—fortnightly)
Scarborough			
Borough	48,283	do	do
Skelton & Brotton	6,203	do	do
Thornaby Borough	9,025	do	do
Whitby	9,854	Incineration	do
RURAL.			
Aysgarth	940	Partially controlled	Fortnightly collection. Remote areas monthly
Bedale	4,500	Controlled tipping	Bins collected weekly in Bedale and Aiscliffe Fortnightly collections in other areas. Ashpits cleared every 12 weeks.
Croft	934	Partially controlled	Fortnightly collection. Over Dinsdale—monthly
Easingwold	4,500	Controlled tipping	Weekly collection—Linton R.A.F. Station. Every 10 days—other areas.
Flaxton	5,375	Partially controlled	Weekly collection.
Helmsley	1,575	Controlled tipping	Fortnightly collection.
Kirkbymoorside	1,941	Partially controlled	Weekly collection in Kirkbymoorside, Nawton, Wombledon, Kirby Mills, Keldholme and Welburn. Monthly in Farndale. Fortnightly elsewhere.
Leyburn	2,720	Controlled tipping	Weekly collection—Leyburn and Middleham Fortnightly collection—remainder of area
Malton	800	do	Collection monthly.
Masham	878	Uncontrolled tipping	Weekly collection—Masham, Swinton and Burton. Monthly collection—Ellingstring, Ellington, Fearby and Healey.
Northallerton	4,190	Partially controlled	Weekly collection.
Pickering	873	Uncontrolled tipping	Fortnightly in Thornton-le-Dale. Every 3 weeks elsewhere.
Reeth	1,200	Uncontrolled tipping	Weekly collection. Farms monthly.
Richmond	3,000	Controlled tipping	Weekly collection.
Scarborough	1,454	do	Fortnightly collection from large communities Monthly collection from small communities.
Startforth	2,940	Partially controlled	Weekly collection (Outlying parts 2–4 weeks).
Stokesley	13,965	Controlled tipping	Weekly collection.
Thirsk	12,000	do	Weekly collection from bins and pails. Monthly collection from privy middens and ashpits. Six monthly—septic tanks.
Wath	1,109	do	Weekly collection at Dishforth R.A.F. Station. Fortnightly collection elsewhere
Whitby	7,617	Uncontrolled 86% Incineration 14%	Weekly collection in 30 villages. Fortnightly collection in 22 villages.

NUISANCES.

The annual decrease in the number of inspections under Part III of the Public Health Act, 1936, continues, but to a lesser degree ; the numbers of nuisances found, informal notices served and complied with, have increased, it would appear, however, that the co-operation of the public continues unabated, as the number of occasions necessitating recourse to statutory notices has decreased.

Having regard to the time involved in carrying out 14,100 inspections, no summary of the work of officers of local authorities would be complete without details thereof, which are given in the following statistical table :—

NUISANCE INSPECTIONS (other than Housing inspections).

DISTRICT	No. of inspections	Nuisances found	Informal notices served	* Complied with	Statutory notices served	* Complied with	Legal proceedings
URBAN.							
Eston	1617	1759	742	742	6	8	1
Guisborough	365	342	146	121	—	—	—
Loftus	121	22	22	24	—	—	—
Malton	20	15	15	13	—	—	—
Northallerton	75	25	22	21	—	—	—
Pickering	59	43	36	36	—	—	—
Redcar Borough†	7080	7049	7019	7002	—	—	—
Richmond Borough	97	130	20	15	6	6	—
Saltburn & Marske	98	28	28	28	—	—	—
Scalby	100	60	60	60	—	—	—
Scarborough Borough	1403	217	183	125	34	6	—
Skelton & Brotton	119	116	3	2	—	—	—
Thornaby Borough	774	594	375	351	44	58	—
Whitby	149	138	61	61	—	—	—
RURAL.							
Aysgarth	63	40	7	6	1	1	—
Bedale	43	34	36	34	—	—	—
Croft	27	27	27	27	—	—	—
Easingwold	141	113	87	74	2	2	—
Flaxton	72	69	69	66	4	4	—
Helmsley	3	3	—	—	—	—	—
Kirkbymoorside	73	31	—	—	—	—	—
Leyburn	263	49	33	30	—	—	—
Malton	93	27	12	12	—	—	—
Masham	20	17	9	9	—	—	—
Northallerton	302	238	130	121	—	—	—
Pickering	6	2	2	2	—	—	—
Reeth	39	27	8	8	—	—	—
Richmond	34	32	32	30	1	1	—
Scarborough	64	41	26	26	—	—	—
Startforth	103	28	26	24	—	—	—
Stokesley	53	53	35	32	3	3	—
Thirsk	445	90	78	60	1	1	—
Wath	35	25	25	25	—	—	—
Whitby	144	75	43	43	—	—	—
Totals	14,100	11,559	9,417	9,230	102	90	1

* These figures include notices pending at the end of 1957.

† These figures include nuisances found during housing inspections, which are not included in the returns of other authorities.

MILK SUPPLIES.

Milk (Special Designation) (Pasteurised and Sterilised Milk)
Regulations, 1949-1953.

Pasteurising plants operating under the above Regulations are licensed by the County Council ; four plants have been operating during the year, two Holder type and one H.T.S.T. type for the full year and one Holder type for eleven months, the licence in respect of the latter being surrendered on the 30th November, 1958.

In pursuance of statutory obligations of the licensing authority to ensure maintenance of satisfactory standards of handling, treatment and storage of pasteurised milk, inspections of dairy premises and plants have been made at least weekly throughout the year by the county health inspectors; samples have been taken for methylene blue reduction and phosphatase tests and samples failing the latter test have been further checked by biological examination.

A summary of the samples taken with results of statutory tests and biological examinations is given in the following table :—

Plant No.	Type	No. of Inspections	No. of samples taken	Phosphatase test		Methylene Blue test		Biological examination	
				Passed	Failed	Passed	Failed	Negative	Positive
1	Holder	33	102	100	2	83	—	2	2
2	do	53	104	102	—	86	—	—	—
3	do	50	96	94	2	82	—	—	—
4	H.T.S.T.	54	104	104	—	101	1	—	—
TOTALS ..		190	406	400	4	352	1	2	2

Rinse tests to check the cleanliness of milk bottles have been carried out frequently throughout the year, groups of six bottles being taken from bottle washing plants for this purpose. The progressive improvement in bottle cleanliness in recent years has not been maintained largely owing to default by one producer who has now ceased production ; even so, the percentage of failures of 10·7 compares favourably with the years prior to 1956 when failures varied between 10·37 and 31·7%. The inevitable comment on bottle rinse failures must be that the disposable milk container is long overdue for general use in this country.

The results of bottle rinse tests taken from each licensed plant are given below :—

Dairy	Method of bottle cleansing	No. of bottles taken	Satisfactory	Unsatisfactory
No. 1	Machine	156	89	49
No. 2	do	90	66	6
No. 3	do	84	72	12
No. 4	do	84	72	6
Totals	..	414	299	73

Food and Drugs Act, 1955.**Section 31—milk-borne infectious disease.**

Milk produced from non-designated herds continues to be retailed for human consumption without heat-treatment in areas not "specified" under sections 37—41 of the above Act; this raw non-designated milk is a potential source of infection by milk-borne diseases of bovine origin, *i.e.* tuberculosis and brucellosis (undulant fever), to the consumer. Tuberculin testing of herds in "Specified Areas" and areas of Attestation has considerably reduced the incidence of tuberculosis but *brucella abortus* remains a hazard; it is therefore essential for consumer safety to sample milk from the herds of producer retailers as often as possible. The county health inspectors have taken 213 samples from these herds during the year with the following results :—

No. taken	Tubercle bacilli		Brucella abortus		No. of samples not examined
	Negative	Positive	Negative	Positive	
213	193	1	185	5	19 not examined for Tubercle bacilli 23 " " " " Br. abortus

Notification of the presence of tubercle bacilli in one sample and *brucella abortus* in five samples was given to the District Medical Officer and the Divisional Veterinary Officer of the Ministry of Agriculture, Fisheries and Food. Following notification of two suspected cases of undulant fever in humans, special investigations into milk supplies were made during which 33 samples of milk were taken from two herds concerned. Nine samples were found to be positive for the presence of *brucella abortus* in the herd from which milk was consumed by the person in whom the diagnosis of undulant fever was confirmed.

Milk Sampling at Hospital Dairy Farms.

At the request of the Ministry of Health, milk produced at hospital farms was sampled in accordance with their scheduled requirements; 24 samples of tuberculin tested milk were taken by the county health inspectors from Clifton Hospital and Fairfield Sanatorium farms, all passed the methylene blue reduction test, eight which were submitted for biological examination were free from tubercle bacilli and *brucella abortus*.

Milk Supplies to Old People's Homes, Children's Homes and Nurseries.

Sixty-seven samples of milk supplied to the twenty-three Homes and Nurseries were taken by the county health inspectors ; the results of testing and biological examination are given below :—

Grade	Samples taken	Meth : Blue test		Phosphatase test		Tubercle bacilli		Brucella abortus	
		Passed	Failed	Passed	Failed	Neg.	Pos.	Neg	Pos.
Pasteurised ..	57	50	1	56	—	—	—	—	—
Tuberculin Tested ..	9	1	—	—	—	7	—	7	—
Non-designated ..	1	—	—	—	—	1	—	1	—

School Milk Supplies

During the year under review there has been little change in the apportionment of grades of milk supplied to schools ; as the type of milk supplied is dependent upon availability of supplies in the area, the elimination of the few remaining non-designated supplies is unlikely pending the specification of the western area of the Riding. The following is a comparative statement of the number of schools supplied with various types of milk during the past three years.

	1956	1957	1958
Pasteurised milk ..	341	348	343
Tuberculin tested milk ..	44	46	49
Non-designated milk ..	25	19	17
Dried milk ..	7	6	6

Heat treated milk is supplied to 82·7% of the schools and raw milk to 16% ; included in the latter figure is 5% non-designated milk which is only supplied to remote rural schools where designated milk is not available and facilities for the preparation of dried milk would be difficult to provide. Non-designated supplies are sampled for biological examination at three monthly intervals, the full schedule of school milk sampling routine being as follows :—

Grade of Milk	Frequency of sampling	Frequency of Testing		
		Phosphatase	Methylene Blue	Biological
Tuberculin Tested	six monthly	—	—	Six monthly
Pasteurised ..	quarterly	quarterly	quarterly	as required
Non-designated ..	quarterly	—	—	quarterly

The county health inspectors made 1,559 visits to schools taking 1,443 samples of milk for submission to statutory tests and/or biological examination ; the results are summarised in the following table :—

Grade	No. taken	Methylene Blue test		Phosphatase test		Biological examination		Brucella abortus	
		Passed	Failed	Passed	Failed	Tb. Neg.	Tb. Pos.	Neg.	Pos.
Pasteurised	1263	1123	32	1250	7	—	—	—	—
Tuberculin Tested	112	13	2	—	—	97	—	93	4
Non-designated	68	—	—	—	—	68	—	66	2

The foregoing statistics show a marked improvement in the standard of heat-treated milk supplied to schools, only seven phosphatase failures occurring during the year as compared with forty-three in 1957 ; six of these failures were from milk produced at pasteurising plants outside the North Riding administrative area. Biological examination of 165 samples gave negative results for tubercle bacilli but brucella abortus was present in four samples of tuberculin tested milk and two samples of non-designated milk.

In all cases where samples failed the statutory tests or were positive on biological examination the supply was immediately re-sampled ; producers of milk showing the presence of brucella abortus were visited by the county health inspectors, 74 samples were taken from individual animals for Ring test, 10 gave positive results and the milk from these animals was excluded from the school supplies. As a result of this speedy investigation which was made possible by the co-operation of the Public Health Laboratory service, District Medical Officers were spared the need to serve statutory notices under Regulation 20, Part VII, of the Milk and Dairies Regulations, 1949.

Action by the Ministry of Agriculture, Fisheries and Food was again restricted to the giving of advice on vaccination.

Milk Supplies to School Canteens and Kitchens.

As the milk supplied to school canteens and kitchens often differed from that supplied to schools and such milk was not necessarily heated to sterilising point in use, a routine system of sampling was introduced in the later half of the year. Forty-one samples were taken, two samples of milk pasteurised outside the North Riding failed the phosphatase test ; a summary of the grades sampled and results of tests is given below :—

Grade	Samples taken	Meth : Blue test		Phosphatase test		Tubercle bacilli		Brucella abortus	
		Passed	Failed	Passed	Failed	Neg.	Pos.	Neg.	Pos.
Pasteurised ..	33	31	2	33	—	—	—	—	—
Tuberculin Tested ..	2	—	—	—	—	2	—	2	—
Non-designated ..	6	—	—	—	—	6	—	6	—

Food and Drugs Act, 1955.

Milk (Special Designation) (Specified Areas) Orders, 1954-1956.

No further areas of the Riding have been "specified" for the sale of designated milk during the year ; territorially the "specified" and "non-specified" areas are fairly equal but the more populous areas are included in the former. The accompanying map shows the specified areas in relation to the attested areas and free testing areas in the Riding. Although the sale of non-designated milk is still permissible in the western half of the Riding sales are not extensive, pasteurised milk from a pasteurising plant in Leyburn rural district and from plants in York and Darlington is available over a considerable part of this area ; in addition most of the producer-retailer milk sold is from attested herds, and although technically classed as non-designated it is equivalent to tuberculin tested milk from the animal health and consumer standpoint. "Consents" for the sale of non-designated milk in the "Specified" areas are few and have only been necessary to afford supplies to remote areas with few consumers. Contraventions of the "specified" areas Orders have been restricted to four retailers who pleaded ignorance of the law and the contraventions were not repeated after initial warning ; in this connection it would seem opportune to point out that the plea of ignorance has, by the passage of time, lost any validity.

A summary of the results of statutory tests and biological examinations carried out on samples taken by the county health inspectors is given in the following table.

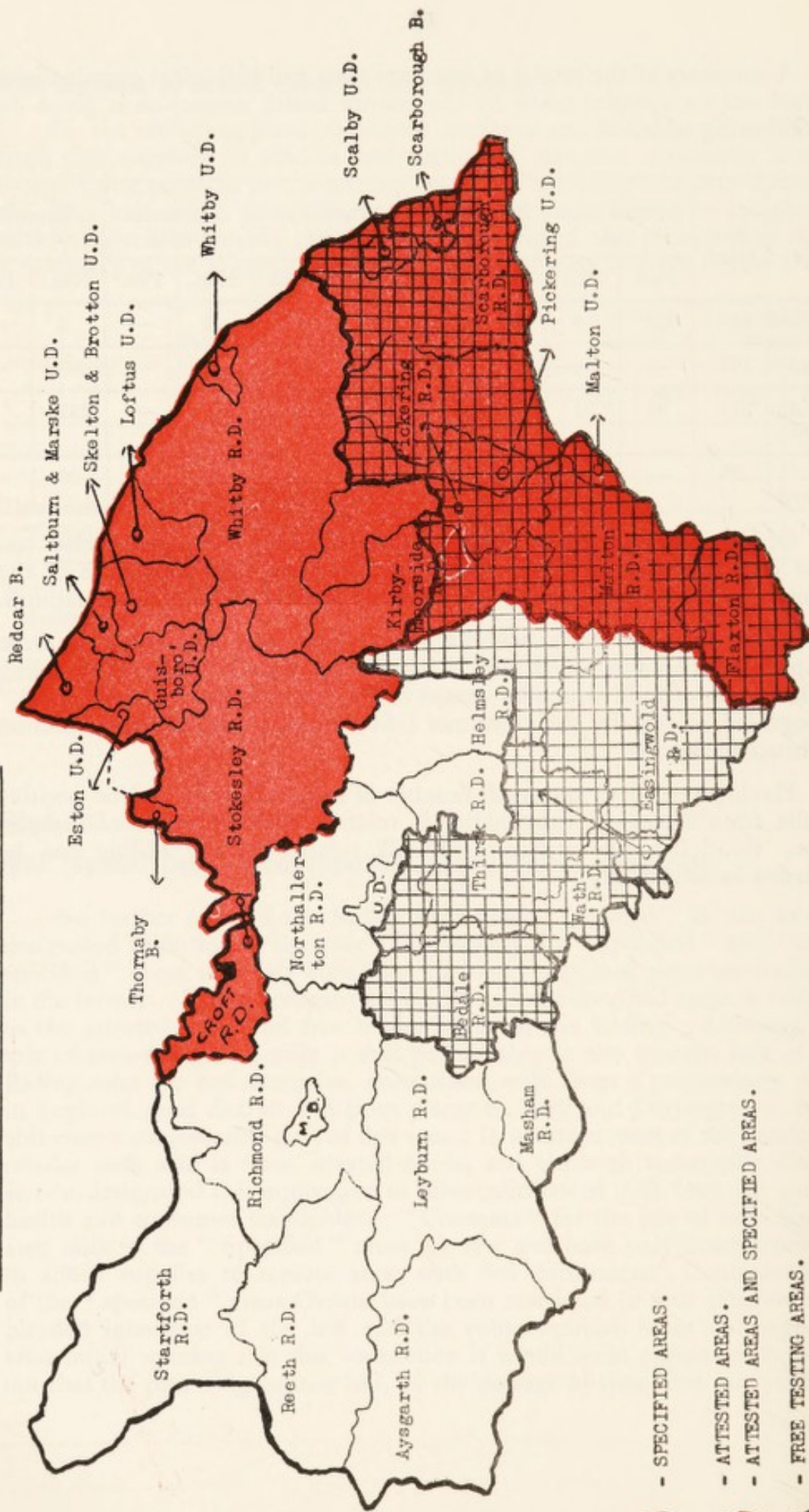
Grade	No. taken	Meth : Blue test		Phosphatase test		Turbidity test		Tubercle bacilli		Brucella abortus	
		Pass	Fail	Pass	Fail	Pass	Fail	Neg.	Pos.	Neg.	Pos.
Pasteurised	689	624	9	680	9	—	—	2	—	2	—
Sterilised	167	—	—	—	—	167	—	—	—	—	—
Tuberculin Tested	271	91	37	—	—	—	—	231	—	221	5
Non-designated	26	—	—	—	—	—	—	20	—	20	—

Of the nine samples of pasteurised milk failing the phosphatase test eight were produced at pasteurising plants outside the jurisdiction of the county council. The responsible authorities were notified of these failures.

As in previous years brucella abortus has been isolated only from samples of tuberculin tested milk, a cogent argument for frequent sampling of this grade of milk which by reason of its classification as "designated" is regarded as safe by the consumer; five samples gave positive reaction for brucella abortus.

Having regard to the small number of sample failures and/or positive results from biological examination in relation to the number of samples taken, viz. 1,153, the standard of milk retailed in the Riding can be regarded as satisfactory.

NORTH RIDING OF YORKSHIRE



- SPECIFIED AREAS.
- ATTESTED AREAS.
- ATTESTED AREAS AND SPECIFIED AREAS.
- FREE TESTING AREAS.
- FREE TESTING AND SPECIFIED AREAS.

INSPECTION AND SUPERVISION OF FOOD AND FOOD SHOPS.

During the year 6,452 inspections have been made by officers of local authorities in connection with food hygiene ; a number of authorities have extended their efforts to obtain improvement in food handling by giving lectures and film shows to employees in the food trade. The number of inspections varies considerably and in some rural districts is inadequate to ensure proper supervision (see table below) ; in this connection one regrets the need to draw attention to the wide divergence in the interpretation of the Food Hygiene Regulations, which is apparent throughout the Riding. Statistical returns show that 734 (11·4%) unsatisfactory conditions were found and that only one statutory notice was required to obtain compliance with the Food Hygiene Regulations, 632 defects being remedied voluntarily by the food traders.

DISTRICT	No. of inspections	No. of unsatisfactory conditions found	No. remedied	
			Informally	Statutorily
A.—URBAN.				
Eston	113	12	12	—
Guisborough	73	—	—	—
Loftus	91	18	15	—
Malton	24	—	—	—
Northallerton	159	42	37	—
Pickering	37	—	—	—
Redcar	784	198	149	—
Richmond	78	32	24	—
Saltburn and Marske	60	18	18	—
Scalby	60	—	—	—
Scarborough	1,836	160	160	—
Skelton and Brotton	16	—	—	—
Thornaby-on-Tees	766	26	26	—
Whitby	415	14	10	—
Total Urban	4,512	520	451	—
B.—RURAL.				
Aysgarth	64	6	4	—
Bedale	28	10	10	—
Croft	10	—	—	—
Easingwold	180	48	23	1
Flaxton	135	9	8	—
Helmsley	135	—	—	—
Kirkbymoorside	117	11	11	—
Leyburn	43	11	7	—
Malton	12	—	—	—
Masham	22	18	18	—
Northallerton	40	14	13	—
Pickering	2	2	2	—
Reeth	134	11	11	—
Richmond	335	35	35	—
Scarborough	87	—	—	—
Startforth	47	3	3	—
Stokesley	17	—	—	—
Thirsk	491	30	30	—
Wath	22	2	2	—
Whitby	19	4	4	—
Total Rural	1,940	214	181	1
Administrative County	6,452	734	632	1

The standard of food handling in school kitchens was good and reflects creditably on the advisory service of the school meals organisers ; periodic inspections of the school kitchens by the county health inspectors showed them to be well maintained. No outbreak of food poisoning attributable to school meals occurred during the year.

There was a marked decrease in the number of food poisoning notifications during the year, 15 cases being notified as against 60 in 1957.

Food and Drugs Act.

Sampling under the Food and Drugs Act for adulteration, inferior quality and false description, is carried out by the Weights and Measures Inspectors, and I am indebted to the Chief Inspector (Mr. W. C. Harrison) for the following statistics :—

Total number of Samples taken	Number Genuine	Number Adulterated	Number Inferior	False Description
784	776	2	6	—

The following table shows the number and type of samples taken during the year of which some were found to be adulterated or of inferior standard.

Type of sample	Samples taken	Number adulterated	Number inferior	False description
Baking Powder	16	—	1	—
Milk	359	—	4	—
Polony	5	1	—	—
Stewed Steak	1	—	1	—
Vinegar	29	1	—	—

Section 1					Section 2				
Station	Distance	Time	Speed	Remarks	Station	Distance	Time	Speed	Remarks
1	0.0	0.00	0.00	Start	1	0.0	0.00	0.00	Start
2	0.1	0.01	0.01		2	0.1	0.01	0.01	
3	0.2	0.02	0.02		3	0.2	0.02	0.02	
4	0.3	0.03	0.03		4	0.3	0.03	0.03	
5	0.4	0.04	0.04		5	0.4	0.04	0.04	
6	0.5	0.05	0.05		6	0.5	0.05	0.05	
7	0.6	0.06	0.06		7	0.6	0.06	0.06	
8	0.7	0.07	0.07		8	0.7	0.07	0.07	
9	0.8	0.08	0.08		9	0.8	0.08	0.08	
10	0.9	0.09	0.09		10	0.9	0.09	0.09	
11	1.0	0.10	0.10		11	1.0	0.10	0.10	
12	1.1	0.11	0.11		12	1.1	0.11	0.11	
13	1.2	0.12	0.12		13	1.2	0.12	0.12	
14	1.3	0.13	0.13		14	1.3	0.13	0.13	
15	1.4	0.14	0.14		15	1.4	0.14	0.14	
16	1.5	0.15	0.15		16	1.5	0.15	0.15	
17	1.6	0.16	0.16		17	1.6	0.16	0.16	
18	1.7	0.17	0.17		18	1.7	0.17	0.17	
19	1.8	0.18	0.18		19	1.8	0.18	0.18	
20	1.9	0.19	0.19		20	1.9	0.19	0.19	
21	2.0	0.20	0.20		21	2.0	0.20	0.20	
22	2.1	0.21	0.21		22	2.1	0.21	0.21	
23	2.2	0.22	0.22		23	2.2	0.22	0.22	
24	2.3	0.23	0.23		24	2.3	0.23	0.23	
25	2.4	0.24	0.24		25	2.4	0.24	0.24	
26	2.5	0.25	0.25		26	2.5	0.25	0.25	
27	2.6	0.26	0.26		27	2.6	0.26	0.26	
28	2.7	0.27	0.27		28	2.7	0.27	0.27	
29	2.8	0.28	0.28		29	2.8	0.28	0.28	
30	2.9	0.29	0.29		30	2.9	0.29	0.29	
31	3.0	0.30	0.30		31	3.0	0.30	0.30	
32	3.1	0.31	0.31		32	3.1	0.31	0.31	
33	3.2	0.32	0.32		33	3.2	0.32	0.32	
34	3.3	0.33	0.33		34	3.3	0.33	0.33	
35	3.4	0.34	0.34		35	3.4	0.34	0.34	
36	3.5	0.35	0.35		36	3.5	0.35	0.35	
37	3.6	0.36	0.36		37	3.6	0.36	0.36	
38	3.7	0.37	0.37		38	3.7	0.37	0.37	
39	3.8	0.38	0.38		39	3.8	0.38	0.38	
40	3.9	0.39	0.39		40	3.9	0.39	0.39	
41	4.0	0.40	0.40		41	4.0	0.40	0.40	
42	4.1	0.41	0.41		42	4.1	0.41	0.41	
43	4.2	0.42	0.42		43	4.2	0.42	0.42	
44	4.3	0.43	0.43		44	4.3	0.43	0.43	
45	4.4	0.44	0.44		45	4.4	0.44	0.44	
46	4.5	0.45	0.45		46	4.5	0.45	0.45	
47	4.6	0.46	0.46		47	4.6	0.46	0.46	
48	4.7	0.47	0.47		48	4.7	0.47	0.47	
49	4.8	0.48	0.48		49	4.8	0.48	0.48	
50	4.9	0.49	0.49		50	4.9	0.49	0.49	
51	5.0	0.50	0.50		51	5.0	0.50	0.50	
52	5.1	0.51	0.51		52	5.1	0.51	0.51	
53	5.2	0.52	0.52		53	5.2	0.52	0.52	
54	5.3	0.53	0.53		54	5.3	0.53	0.53	
55	5.4	0.54	0.54		55	5.4	0.54	0.54	
56	5.5	0.55	0.55		56	5.5	0.55	0.55	
57	5.6	0.56	0.56		57	5.6	0.56	0.56	
58	5.7	0.57	0.57		58	5.7	0.57	0.57	
59	5.8	0.58	0.58		59	5.8	0.58	0.58	
60	5.9	0.59	0.59		60	5.9	0.59	0.59	
61	6.0	0.60	0.60		61	6.0	0.60	0.60	
62	6.1	0.61	0.61		62	6.1	0.61	0.61	
63	6.2	0.62	0.62		63	6.2	0.62	0.62	
64	6.3	0.63	0.63		64	6.3	0.63	0.63	
65	6.4	0.64	0.64		65	6.4	0.64	0.64	
66	6.5	0.65	0.65		66	6.5	0.65	0.65	
67	6.6	0.66	0.66		67	6.6	0.66	0.66	
68	6.7	0.67	0.67		68	6.7	0.67	0.67	
69	6.8	0.68	0.68		69	6.8	0.68	0.68	
70	6.9	0.69	0.69		70	6.9	0.69	0.69	
71	7.0	0.70	0.70		71	7.0	0.70	0.70	
72	7.1	0.71	0.71		72	7.1	0.71	0.71	
73	7.2	0.72	0.72		73	7.2	0.72	0.72	
74	7.3	0.73	0.73		74	7.3	0.73	0.73	
75	7.4	0.74	0.74		75	7.4	0.74	0.74	
76	7.5	0.75	0.75		76	7.5	0.75	0.75	
77	7.6	0.76	0.76		77	7.6	0.76	0.76	
78	7.7	0.77	0.77		78	7.7	0.77	0.77	
79	7.8	0.78	0.78		79	7.8	0.78	0.78	
80	7.9	0.79	0.79		80	7.9	0.79	0.79	
81	8.0	0.80	0.80		81	8.0	0.80	0.80	
82	8.1	0.81	0.81		82	8.1	0.81	0.81	
83	8.2	0.82	0.82		83	8.2	0.82	0.82	
84	8.3	0.83	0.83		84	8.3	0.83	0.83	
85	8.4	0.84	0.84		85	8.4	0.84	0.84	
86	8.5	0.85	0.85		86	8.5	0.85	0.85	
87	8.6	0.86	0.86		87	8.6	0.86	0.86	
88	8.7	0.87	0.87		88	8.7	0.87	0.87	
89	8.8	0.88	0.88		89	8.8	0.88	0.88	
90	8.9	0.89	0.89		90	8.9	0.89	0.89	
91	9.0	0.90	0.90		91	9.0	0.90	0.90	
92	9.1	0.91	0.91		92	9.1	0.91	0.91	
93	9.2	0.92	0.92		93	9.2	0.92	0.92	
94	9.3	0.93	0.93		94	9.3	0.93	0.93	
95	9.4	0.94	0.94		95	9.4	0.94	0.94	
96	9.5	0.95	0.95		96	9.5	0.95	0.95	
97	9.6	0.96	0.96		97	9.6	0.96	0.96	
98	9.7	0.97	0.97		98	9.7	0.97	0.97	
99	9.8	0.98	0.98		99	9.8	0.98	0.98	
100	9.9	0.99	0.99		100	9.9	0.99	0.99	
101	10.0	1.00	1.00		101	10.0	1.00	1.00	
102	10.1	1.01	1.01		102	10.1	1.01	1.01	
103	10.2	1.02	1.02		103	10.2	1.02	1.02	
104	10.3	1.03	1.03		104	10.3	1.03	1.03	
105	10.4	1.04	1.04		105	10.4	1.04	1.04	
106	10.5	1.05	1.05		106	10.5	1.05	1.05	
107	10.6	1.06	1.06		107	10.6	1.06	1.06	
108	10.7	1.07	1.07		108	10.7	1.07	1.07	
109	10.8	1.08	1.08		109	10.8	1.08	1.08	
110	10.9	1.09	1.09		110	10.9	1.09	1.09	
111	11.0	1.10	1.10		111	11.0	1.10	1.10	
112	11.1	1.11	1.11		112	11.1	1.11	1.11	
113	11.2	1.12	1.12		113	11.2	1.12	1.12	
114	11.3	1.13	1.13		114	11.3	1.13	1.13	
115	11.4	1.14	1.14		115	11.4	1.14	1.14	
116	11.5	1.15	1.15		116	11.5	1.15	1.15	
117	11.6	1.16	1.16		117	11.6	1.16	1.16	
118	11.7	1.17	1.17		118	11.7	1.17	1.17	
119	11.8	1.18	1.18		119	11.8	1.18	1.18	
120	11.9	1.19	1.19		120	11.9	1.19	1.19	
121	12.0	1.20	1.20		121	12.0	1.20	1.20	
122	12.1	1.21	1.21		122	12.1	1.21	1.21	
123	12.2	1.22	1.22		123	12.2	1.22	1.22	
124	12.3	1.23	1.23		124	12.3	1.23	1.23	
125	12.4	1.24	1.24		125	12.4	1.24	1.24	
126	12.5	1.25	1.25		126	12.5	1.25	1.25	
127	12.6	1.26	1.26		127	12.6	1.26	1.26	
128	12.7	1.27	1.27		128	12.7	1.27	1.27	
129	12.8	1.28	1.28		129	12.8	1.28	1.28	
130	12.9	1.29	1.29		130	12.9	1.29	1.29	
131	13.0	1.30	1.30		131	13.0	1.30	1.30	
132	13.1	1.31	1.31		132	13.1	1.31	1.31	
133	13.2	1.32	1.32		133	13.2	1.32	1.32	
134	13.3	1.33	1.33		134	13.3	1.33	1.33	
135	13.4	1.34	1.34		135	13.4	1.34	1.34	
136	13.5	1.35	1.35		136	13.5	1.35	1.35	
137	13.6	1.36	1.36		137	13.6	1.36	1.36	
138	13.7	1.37	1.37		138	13.7	1.37	1.37	
139	13.8	1.38	1.38		139	13.8	1.38	1.38	
140	13.9	1.39	1.39		140	13.9	1.39	1.39	
141	14.0	1.40	1.40		141	14.0	1.40	1.40	
142	14.1	1.41	1.41		142	14.1	1.41	1.41	
143	14.2	1.42	1.42		143	14.2	1.42	1.42	
144	14.3	1.43	1.43		144	14.3	1.43	1.43	
145	14.4	1.44	1.44		145	14.4	1.44	1.44	
146	14.5	1.45	1.45		146	14.5	1.45	1.45	
147	14.6	1.46	1.46		147	14.6	1.46	1.46	
148	14.7	1.47	1.47		148	14.7	1.47	1.47	
149	14.8	1.48	1.48		149	14.8	1.48	1.48	
150	14.9	1.49	1.49	</					

HOUSING

DISTRICT	Total Number of houses in district	Number inspected during year	Number found to be satisfactory in all respects	Number with minor defects only	Number requiring repairs or structural alterations
A.—URBAN.					
1. Eston ..	10,543	1,191	431	742	188
2. Guisborough ..	3,081	242	—	129	113
3. Loftus ..	2,626	178	9	134	35
4. Malton ..	1,357	200	50	88	44
5. Northallerton ..	2,222	170	—	49	83
6. Pickering ..	1,471	49	5	17	20
7. Redcar ..	9,129	261	164	—	92
8. Richmond ..	1,685	374	68	246	57
9. Saltburn & Marske	3,662	29	—	—	29
10. Scalby ..	2,485	150	100	11	31
11. Scarborough ..	13,846	301	—	81	159
12. Skelton & Brotton ..	4,200	343	—	74	218
13. Thornaby-on-Tees ..	6,651	428	184	77	34
14. Whitby ..	3,868	15	—	—	—
Total Urban ..	66,826	3,931	1,011	1,648	933
B.—RURAL.					
1. Aysgarth ..	1,249	26	12	14	—
2. Bedale ..	2,504	575	202	270	—
3. Croft ..	663	7	—	—	—
4. Easingwold ..	3,311	44	37	3	—
5. Flaxton ..	7,603	135	—	63	22
6. Helmsley ..	1,426	51	—	—	38
7. Kirkbymoorside ..	1,510	37	37	—	—
8. Leyburn ..	1,981	566	310	96	113
9. Malton ..	1,856	70	—	10	20
10. Masham ..	548	98	24	37	22
11. Northallerton ..	2,850	104	—	15	13
12. Pickering ..	1,825	87	12	46	22
13. Reeth ..	893	116	5	84	20
14. Richmond ..	3,295	83	16	—	22
15. Scarborough ..	2,663	90	59	17	13
16. Startforth ..	1,421	411	53	307	4
17. Stokesley ..	7,174	—	—	—	—
18. Thirsk ..	4,114	90	—	—	70
19. Wath ..	722	60	376	130	10
20. Whitby ..	4,484	346	49	44	21
Total Rural ..	52,092	2,996	1,192	1,136	76
Administrative County ..	118,918	6,927	2,203	2,784	1,709

Number suitable for improvement under Housing Acts	Number unfit in all respects	Number of Houses erected		Housing Act, 1949. Sec. 20.			
		By Local Authority	By Private Persons	Number of appli- cations received	Number of Grants made	Number of Grants refused	Number of Grants pending
16	—	186	49	16	2	—	14
3	1	64	73	3	3	—	—
—	—	21	7	2	2	—	—
7	11	10	6	7	6	—	—
8	40	22	18	8	7	—	—
19	7	7	4	16	16	—	—
—	6	70	43	—	—	—	—
57	3	—	7	5	5	—	—
5	2	73	170	6	5	1	—
15	8	15	58	14	11	2	1
85	61	42	43	85	85	—	—
—	6	44	39	20	18	—	2
—	133	50	19	12	8	—	4
—	12	29	26	14	14	—	—
215	290	633	562	208	182	3	21
—	—	—	1	4	4	—	—
175	28	36	15	15	11	—	4
7	—	—	4	7	7	—	—
2	2	4	14	29	18	2	9
23	22	15	516	20	7	13	—
8	5	—	2	8	8	—	—
—	—	—	5	13	12	1	—
37	8	—	7	14	14	—	—
30	10	6	4	29	29	—	—
9	29	—	1	8	6	—	2
43	14	10	16	45	43	2	—
32	2	—	2	27	27	—	—
14	1	—	1	6	4	2	—
21	45	—	6	21	21	—	—
18	1	—	53	14	12	—	—
—	7	—	1	9	9	—	—
—	—	48	393	18	16	2	—
67	20	42	12	67	67	—	—
60	49	3	5	12	12	—	—
99	36	3	21	43	43	—	—
645	279	167	1,079	409	370	22	15
860	569	800	1,641	617	552	25	36

TABLE 1.

Number of Births in each District during 1958.

DISTRICT.	Estimated mid-year home population 1958.	Total live births.	Illegiti- mate live births.	Birth- rate per 1,000 popu- lation.	Excess of births over deaths. (Natural increase)	Natural increase per 1,000 popu- lation.
A.—URBAN.						
1. Eston ..	35,310	804	42	22.8	448	12.7
2. Guisborough ..	9,830	207	3	21.1	86	8.7
3. Loftus ..	7,620	142	3	18.6	47	6.2
4. Malton ..	4,160	70	2	16.8	7	1.7
5. Northallerton ..	6,230	99	2	15.9	17	2.7
6. Pickering ..	4,100	55	3	13.4	— 13	..
7. Redcar ..	28,410	531	26	18.7	191	6.7
8. Richmond ..	6,110	132	12	21.6	66	10.8
9. Saltburn and Marske	9,600	195	11	20.3	99	10.3
10. Scalby ..	6,580	81	1	12.3	— 14	..
11. Scarborough ..	43,180	584	52	13.5	—180	..
12. Skelton and Brotton	12,870	221	12	17.2	61	4.7
13. Thornaby-on-Tees	23,720	511	23	21.5	269	11.3
14. Whitby ..	11,480	197	9	17.2	— 4	..
Total Urban ..	209,200	3,829	201	18.3	1,080	5.2
B.—RURAL						
1. Aysgarth ..	3,350	46	2	13.7	3	.9
2. Bedale ..	8,450	153	5	18.1	75	8.9
3. Croft ..	2,320	37	1	15.9	23	9.9
4. Easingwold ..	11,880	202	2	17.0	89	7.5
5. Flaxton ..	24,140	430	8	17.8	155	6.4
6. Helmsley ..	5,320	57	4	10.7	— 5	..
7. Kirkbymoorside ..	4,940	57	2	11.5	1	.2
8. Leyburn ..	6,350	84	4	13.2	..	..
9. Malton ..	5,520	89	4	16.1	16	2.9
10. Masham ..	1,620	24	..	14.8	1	.6
11. Northallerton ..	8,650	147	6	17.0	51	5.9
12. Pickering ..	5,050	49	..	9.7	— 15	..
13. Reeth ..	1,970	25	1	12.7	5	2.5
14. Richmond ..	26,260	471	21	17.9	280	10.7
15. Scarborough ..	7,620	84	2	11.0	— 18	..
16. Startforth ..	5,240	79	2	15.1	26	5.0
17. Stokesley ..	20,660	428	8	20.7	202	9.8
18. Thirsk ..	13,830	228	9	16.5	74	5.4
19. Wath ..	3,620	32	2	8.8	22	6.1
20. Whitby ..	11,610	160	2	13.8	— 8	..
Total Rural ..	178,400	2,882	85	16.2	977	5.5
Administrative County	387,600	6,711	286	17.3	2,057	5.3
Totals for 1957 ..	386,600	6,400	279	16.6	2,042	5.3

TABLE No. 2.

Number of Deaths in each District during 1958.

DISTRICT.	Estimated mid-year home population, 1958	Total deaths.	Death-rate per 1,000 population.	Deaths under 1 year.	Total infantile mortality per 1,000 live births.	Illegitimate children, deaths under 1 year.	Illegitimate children, deaths under 1 year per 1,000 illegitimate live births.
A.—URBAN.							
1. Eston ..	35,310	356	10.1	27	33.6	1	23.8
2. Guisborough ..	9,830	121	12.3	9	43.5	..	..
3. Loftus ..	7,620	95	12.5	6	42.3	..	..
4. Malton ..	4,160	63	15.1	2	28.6	..	..
5. Northallerton ..	6,230	82	13.2	6	60.6	..	..
6. Pickering ..	4,100	68	16.6	4	72.7	..	..
7. Redcar ..	28,410	340	12.0	9	16.9	..	..
8. Richmond ..	6,110	66	10.8	6	45.5	1	83.3
9. Saltburn and Marske ..	9,600	96	10.0	5	25.6	..	..
10. Scalby ..	6,580	95	14.4	3	37.0	..	..
11. Scarborough ..	43,180	764	17.7	9	15.4	..	..
12. Skelton and Brotton ..	12,870	160	12.4	6	27.1	1	83.3
13. Thornaby-on-Tees ..	23,720	242	10.2	13	25.4	..	..
14. Whitby ..	11,480	201	17.5	5	25.4	1	111.1
Total Urban ..	209,200	2,749	13.1	110	28.7	4	19.9
B.—RURAL.							
1. Aysgarth ..	3,350	43	12.8	2	43.5	..	..
2. Bedale ..	8,450	78	9.2	2	13.1	..	..
3. Croft ..	2,320	14	6.0	..	..	..	..
4. Fasingwold ..	11,880	113	9.5	4	19.8	..	..
5. Flaxton ..	24,140	275	11.4	7	16.3	..	..
6. Helmsley ..	5,320	62	11.7	2	35.1	1	250.0
7. Kirkbymoorside ..	4,940	56	11.3	..	..	..	..
8. Leyburn ..	6,350	84	13.2	1	11.9	..	..
9. Malton ..	5,520	73	13.2	3	33.7	..	..
10. Masham ..	1,620	23	14.2	..	..	..	..
11. Northallerton ..	8,650	96	11.1	5	34.0	3	500.0
12. Pickering ..	5,050	64	12.7	..	..	..	..
13. Reeth ..	1,970	20	10.2	..	..	..	..
14. Richmond ..	26,260	191	7.3	7	14.9	..	..
15. Scarborough ..	7,620	102	13.4	3	35.7	..	..
16. Startforth ..	5,240	53	10.1	..	..	..	..
17. Stokesley ..	20,660	226	10.9	8	18.7	..	..
18. Thirsk ..	13,830	154	11.1	5	21.9	..	..
19. Wath ..	3,620	10	2.8	1	31.3	..	..
20. Whitby ..	11,610	168	14.5	2	12.5	..	..
Total Rural ..	178,400	1,905	10.7	52	18.0	4	47.1
Administrative County ..	387,600	4,654	12.0	162	24.1	8	28.0
Totals for 1957 ..	386,600	4,358	11.3	170	26.6	14	50.2

TABLE 3.

Deaths according to Age-Groups, 1958.

CAUSES OF DEATH.	Sex	AGGREGATE OF URBAN DISTRICTS										AGGREGATE OF RURAL DISTRICTS							
		All Ages	0-	1-	5-	15-	25-	45-	65-	75-	All Ages	0-	1-	5-	15-	25-	45-		
ALL CAUSES	M	1404	62	10	7	15	44	380	423	463	999	32	10	5	15	41	225		
	F	1345	48	1	8	4	41	220	356	667	906	20	..	3	3	32	149		
1. Tuberculosis, respiratory	M	9	..	..	..	..	1	3	4	1	7	..	..	..	..	3	11
	F	8	..	..	..	..	1	4	2	1	2	..	..	..	..	1	11
2 Tuberculosis, other	M	4	..	1	..	..	1	..	2	..	2	..	..	..	..	1	11
	F	1	..	..	..	1	..	..	..	..	2	..	..	..	..	..	..
3 Syphilitic disease	M	3	..	..	..	..	..	2	1	..	..	..	..	..	..	..	..
	F	4	..	..	..	..	..	1	1	2	2	..	..	..	..	..	..
4 Diphtheria	M	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
	F	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
5 Whooping cough	M	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
	F	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
6 Meningococcal infections	M	..	..	..	..	..	..	..	..	..	1	..	1	..	..	..	..
	F	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..
7 Acute poliomyelitis	M	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
	F	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
8 Measles	M	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
	F	..	..	..	..	..	..	..	..	..	1	1	..	..	..	..	..
9 Other infective and parasitic diseases	M	2	..	..	..	1	..	1	..	..	4	..	..	..	1	..	22
	F	1	..	..	1	..	..	..	..	..	1	..	..	..	..	..	..
10 Malignant neoplasm, stomach	M	35	..	..	..	..	2	12	14	7	21	..	..	..	..	1	66
	F	29	..	..	..	..	..	4	15	10	22	..	..	..	..	2	66
11 Malignant neoplasm lung, bronchus,	M	75	..	..	..	..	4	48	21	2	37	..	..	..	..	1	188
	F	19	..	..	..	..	1	6	9	3	8	..	..	..	..	1	22
12 Malignant neoplasm breast,	M	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
	F	41	..	..	..	..	4	20	9	8	26	..	..	..	..	3	100
13 Malignant neoplasm uterus,	F	29	..	..	..	..	6	9	12	2	20	..	..	..	..	2	122
14 Other malignant and lymphatic neoplasms	M	135	..	2	3	..	5	46	44	35	98	..	..	..	..	5	27
	F	90	..	..	2	..	4	27	29	28	95	..	..	1	1	9	21
15 Leukaemia, aleukaemia	M	5	..	..	..	..	1	2	1	1	5	..	..	..	..	1	11
	F	5	..	..	1	..	1	1	1	1	2	..	..	..	..	..	1
16 Diabetes	M	2	..	..	..	..	..	..	1	1	2	..	..	..	..	..	..
	F	6	..	..	..	..	..	4	2	..	10	..	..	..	..	1	2
17 Vascular lesions of nervous system	M	157	..	..	..	..	..	28	56	73	153	..	..	..	1	2	26
	F	251	..	..	..	1	3	36	76	135	176	..	..	..	..	1	29
18 Coronary disease, angina	M	313	..	..	..	..	10	110	112	81	196	..	..	..	..	6	64
	F	196	..	..	..	..	2	31	79	84	114	..	..	..	..	..	18
19 Hypertension with heart disease	M	14	..	..	..	..	1	1	6	6	22	..	..	..	..	..	6
	F	28	..	..	..	..	..	6	5	17	29	..	..	..	..	..	4
20 Other heart disease	M	213	..	..	..	..	2	19	50	142	152	..	..	..	..	2	14
	F	285	..	1	..	..	4	14	41	225	189	..	..	..	..	..	14
21 Other circulatory disease	M	44	..	..	..	..	..	7	20	17	39	..	..	..	..	..	2
	F	52	..	..	1	..	1	6	12	32	43	..	..	..	..	2	1
22 Influenza	M	9	..	..	..	1	..	3	4	1	2	..	..	..	..	..	..
	F	11	..	..	..	..	1	4	4	2	5	..	..	..	..	..	1
23 Pneumonia	M	74	15	1	..	1	3	15	24	15	49	10	3	..	1	2	8		
	F	41	9	..	..	..	..	7	9	16	23	4	..	..	1	1	6
24 Bronchitis	M	68	3	..	..	..	1	24	22	18	44	..	1	..	2	1	13
	F	47	3	..	..	..	..	9	15	20	25	1	..	..	..	1	3
25 Other diseases of respiratory system	M	10	1	..	..	..	..	6	1	2	6	..	..	..	1	..	1
	F	8	..	..	..	..	..	1	3	4	..	..	..	..	..	..	..
26 Ulcer of stomach and duodenum	M	21	..	..	..	..	..	9	4	8	6	..	..	..	1	1	3
	F	4	..	..	..	..	..	1	1	2	3	..	..	..	..	..	2
27 Gastritis, enteritis and diarrhoea	M	4	1	..	..	..	..	2	..	1	5	1	..	1	..	..	..
	F	1	..	..	..	..	..	..	..	1	2	..	..	..	..	..	..

[illegible]

TABLE 4.

Deaths in Sanitary Districts from the seven chief causes, 1958.

DISTRICT	Cancer.		Heart disease.		Respiratory non-tuberculosis.		Tuberculosis-Pulmonary.		Other Tuberculosis.		Other circulatory disease.		Vascular lesions, nervous system.
	No.	Death rate per 1,000 population.	No.	Death rate per 1,000 population.	No.	Death rate per 1,000 population.	No.	Death rate per 1,000 population.	No.	Death rate per 1,000 population.	No.	Death rate per 1,000 population.	No.
A.—URBAN.													
1. Eston	63	1.78	104	2.95	41	1.16	2	.06	1	.03	14	.40	53
2. Guisborough	14	1.42	37	3.76	23	2.34	..	..	..	..	2	.20	26
3. Loftus	15	1.97	25	3.28	9	1.18	..	..	..	..	6	.79	20
4. Malton	10	2.40	26	6.25	3	.72	..	..	..	..	2	.48	8
5. Northallerton	15	2.41	25	4.01	4	.64	1	.16	..	..	4	.64	17
6. Pickering	9	2.20	26	6.34	2	.49	..	..	..	..	3	.73	10
7. Redcar	69	2.43	116	4.08	24	.84	1	.03	1	.03	23	.81	38
8. Richmond	16	2.62	22	3.60	11	1.80	..	..	..	..	2	.33	9
9. Saltburn and Marske	17	1.77	44	4.58	6	.63	1	.10	..	..	2	.21	12
10. Scalby	18	2.74	44	6.69	2	.30	..	..	1	.15	1	.15	14
11. Scarborough	128	2.96	352	8.15	63	1.46	8	.19	2	.05	23	.53	100
12. Skelton & Brotton	22	1.71	54	4.20	19	1.48	1	.08	..	..	5	.39	28
13. Thornaby-on-Tees	49	2.07	71	2.99	35	1.48	3	.13	..	..	8	.34	24
14. Whitby	18	1.57	103	8.97	6	.52	..	..	..	..	1	.09	49
Total Urban	463	2.21	1049	5.01	248	1.19	17	.08	5	.02	96	.46	408
B.—RURAL.													
1. Aysgarth	6	1.79	16	4.78	1	.30	..	..	..	..	2	.60	11
2. Bedale	18	2.13	28	3.31	6	.71	..	..	..	..	4	.47	14
3. Croft	2	.86	5	2.16	..	..	..	..	..	..	..	..	4
4. Easingwold	17	1.43	42	3.54	13	1.09	..	..	..	..	4	.34	15
5. Flaxton	46	1.91	122	5.05	27	1.12	..	..	..	..	10	.41	31
6. Helmsley	11	2.07	23	4.32	5	.94	..	..	..	..	4	.75	13
7. Kirkbymoorside	7	1.42	17	3.44	3	.61	..	..	..	..	8	1.62	12
8. Leyburn	21	3.31	30	4.72	4	.63	..	..	..	..	3	.47	14
9. Malton	8	1.45	27	4.89	7	1.27	1	.18	1	.18	..	..	15
10. Masham	4	2.47	11	6.79	1	.62	..	..	..	..	1	.62	6
11. Northallerton	13	1.50	34	3.93	5	.58	..	..	..	..	11	1.27	14
12. Pickering	6	1.19	28	5.54	6	1.19	..	..	..	..	2	.40	15
13. Reeth	3	1.52	11	5.58	..	..	..	..	..	..	..	..	4
14. Richmond	41	1.56	41	1.56	21	.80	4	.15	2	.08	7	.27	36
15. Scarborough	15	1.97	39	5.12	9	1.18	2	.26	..	..	2	.26	22
16. Startforth	12	2.29	16	3.05	4	.76	..	..	1	.19	1	.19	10
17. Stokesley	46	2.23	77	3.73	13	.63	..	..	..	..	14	.68	39
18. Thirsk	31	2.24	69	4.99	9	.65	1	.07	..	..	2	.14	16
19. Wath	1	.28	3	.83	2	.55	..	..	..	..	..	..	..
20. Whitby	26	2.24	63	5.43	11	.95	1	.09	..	..	7	.60	38
Total Rural	334	1.87	702	3.93	147	.82	9	.05	4	.02	82	.46	329
Administrative County	797	2.06	1751	4.52	395	1.02	26	.07	9	.02	178	.46	737

TABLE 5.

Number of Deaths from certain Diseases in each District during 1958.

DISTRICT.	Pulmonary tuberculosis.				Other tuberculosis.				All tuberculosis.				Influenza.		Bronchitis and other respiratory diseases.	
	Primary Notifications.	Deaths.	Notification-rate per 100 deaths.	Death-rate per 1,000 population.	Primary Notifications.	Deaths.	Notification-rate per 100 deaths.	Death-rate per 1,000 population.	Primary Notifications.	Deaths.	Notification-rate per 100 deaths.	Death-rate per 1,000 population.	Deaths.	Death-rate per 1,000 population.	Deaths.	Death-rate per 1,000 population.
A.—URBAN.																
1. Eston ..	47	2	2350.0	.06	7	1	700.0	.03	54	3	1800.0	.08	2	.06	21	.59
2. Guisborough ..	3	..	..	..	2	..	..	..	5	..	..	..	..	..	19	1.93
3. Loftus ..	4	..	..	..	..	..	..	..	4	..	..	..	2	.26	5	.66
4. Malton ..	2	..	..	..	..	..	..	..	2	..	..	..	1	.24	1	.24
5. Northallerton ..	2	1	200.0	.16	1	..	..	..	3	1	300.0	.16	2	.32	3	.48
6. Pickering ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	2	.49
7. Redcar ..	15	1	1500.0	.03	2	1	200.0	.03	17	2	850.0	.07	1	.03	10	.35
8. Richmond ..	6	..	..	..	..	..	..	..	6	..	..	..	..	..	3	.49
9. Saltburn and Marske ..	3	1	300.0	.10	..	..	..	..	3	1	300.0	.10	1	.10	4	.42
10. Scalby ..	4	..	..	..	..	1	..	.15	4	1	400.0	.15	..	..	2	.30
11. Scarborough ..	21	8	262.5	.19	2	2	100.0	.05	23	10	230.0	.23	4	.09	30	.69
12. Skelton and Brotton ..	4	1	400.0	.08	..	..	..	..	4	1	400.0	.08	1	.08	12	.93
13. Thornaby-on-Tees ..	8	3	266.7	.13	..	..	..	..	8	3	266.7	.13	3	.13	16	.67
14. Whitby ..	3	..	..	..	..	..	..	..	3	..	..	..	3	.26	5	.44
Total Urban ..	122	17	717.6	.08	14	5	280.0	.02	136	22	618.2	.11	20	.10	133	.64
B.—RURAL.																
1. Aysgarth ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	.30
2. Bedale ..	3	..	..	..	..	..	..	..	3	..	..	..	1	.12	4	.47
3. Croft ..	2	..	..	..	..	..	..	..	2	..	..	..	..	..	..	..
4. Easingwold ..	2	..	..	..	..	..	..	..	2	..	..	..	..	..	7	.59
5. Flaxton ..	9	..	..	..	3	..	..	..	12	..	..	..	1	.04	18	.75
6. Helmsley ..	1	..	..	..	..	..	..	..	1	..	..	..	1	.19	2	.38
7. Kirkbymoorside ..	..	..	..	..	1	..	..	..	1	..	..	..	..	..	..	..
8. Leyburn ..	..	..	..	..	..	..	..	..	..	..	..	..	1	.16	2	.31
9. Malton ..	3	1	300.0	.18	..	1	..	.18	3	2	150.0	.36	..	..	5	.91
10. Masham ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	.62
11. Northallerton ..	2	..	..	..	..	..	..	..	2	..	..	..	..	..	1	.12
12. Pickering ..	1	..	..	..	..	..	..	..	1	..	..	..	..	..	3	.59
13. Reeth ..	1	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..
14. Richmond ..	9	4	225.0	.15	3	2	150.0	.08	12	6	200.0	.23	1	.04	2	.08
15. Scarborough ..	1	2	50.0	.26	..	..	..	..	1	2	50.0	.26	..	..	5	.66
16. Startforth ..	..	..	..	..	..	1	..	.19	..	1	..	.19	..	..	4	.76
17. Stokesley ..	9	..	..	..	..	..	..	..	9	..	..	..	1	.05	8	.39
18. Thirsk ..	2	1	200.0	.07	1	..	..	..	3	1	300.0	.07	..	..	4	.29
19. Wath ..	2	..	..	..	1	..	..	..	3	..	..	..	..	..	1	.28
20. Whitby ..	..	1	..	.09	..	..	..	..	..	1	..	.09	1	.09	7	.60
Total Rural ..	47	9	522.2	.05	9	4	225.0	.02	56	13	430.8	.07	7	.04	75	.42
Administrative County ..	169	26	650.0	.07	23	9	255.6	.02	192	35	548.6	.09	27	.07	208	.54

TABLE 6.

Number of Deaths from certain Diseases in each District during 1958.

DISTRICT	Pregnancy, childbirth, abortion.		Congenital malformations.	
	Deaths	Death-rate per 1,000 births.	Deaths	Death-rate per 1,000 births.
A.—URBAN.				
1. Eston	7	8.70
2. Guisborough ..	1	4.83	1	4.83
3. Loftus
4. Malton
5. Northallerton	1	10.10
6. Pickering
7. Redcar	3	5.65
8. Richmond
9. Saltburn and Marske
10. Scalby	2	24.69
11. Scarborough	3	5.14
12. Skelton and Brotton	2	9.05
13. Thornaby-on-Tees	1	1.96
14. Whitby	2	10.15
Total Urban ..	1	.26	22	5.75
B.—RURAL.				
1. Aysgarth
2. Bedale
3. Croft
4. Easingwold	1	4.95
5. Flaxton	1	2.33
6. Helmsley	1	17.54
7. Kirkbymoorside
8. Leyburn
9. Malton	4	44.94
10. Masham
11. Northallerton
12. Pickering
13. Reeth
14. Richmond
15. Scarborough
16. Startforth
17. Stokesley	3	7.01
18. Thirsk	2	8.77
19. Wath
20. Whitby
Total Rural	12	4.16
Administrative County ..	1	.15	34	5.07

TABLE 7.

Notification of Infectious Disease in 1958, as given in the weekly returns rendered by Medical Officers of Health.

DISTRICT.	Smallpox.	Scarlet fever.	Diphtheria.	Enteric Fever, includes typhoid & paratyphoid.	Acute Pneumonia.	Cholera.	Plague.	Meningococcal Infection.		Acute poliomyelitis.	Acute encephalitis.	Food poisoning.	Dysentery.	Ophthalmia neonatorum.	Erysipelas.	Malaria (at home).	Malaria (abroad).	Chickenpox.	Measles (excluding Rubella)	Whooping cough.	Puerperal pyrexia.	Tuberculosis		
								Paralytic	Non-paralytic													Respiratory	Meninges & C.N.S.	Other
—URBAN																								
Easton	39				8			1	7	1		1	6	1	2				235	3	1	47		7
Easingborough	16				2			1	2						1			1	7		2	3		2
Goftus	1				2										1				60			4		
Malton								1											2			2		
Northallerton												2	5								1	2		1
Pickering																			7					
Redcar	19				6					2		1							188	7	1	15		2
Richmond	2												5					1	4	1		6		
Salisbury & Marske	2				2														46	1	3	3		
Scarborough	4				8														104	16		4		
Whitby	14		1		19			1	1			2			1		1		693	50	9	21	1	1
Whitby	1				18														44	1		4		
Whitby	6				11			1	2				11		1				111	4	3	8		
Whitby	3				6			1					1		1				100	1	3	3		
Total Urban	107	1	82	4	3	11	3	6	28	1	7	1	2	1601	84	23	122	1	13					
1957	134	3	120	3	10	4	1	2	55	25	1	4	3	1953	188	22	99	12						
—RURAL.																								
Gysgarth															2				16	21				
Bedale	5				17														6	3		3		
Goftus																						2		
Hasingwold	20				4			1	1			2	128		1				107	2		2		
Malton	13				2				1			2	23		1				219			9		3
Helmsley	4				1														45			1		
Whitby								2											25					1
Whitby					2							1							35	16				
Malton								1							1				77			3		
Malham																			1					
Northallerton					1														7			2		
Pickering	1							1											23	10		1		
Reeth					3														1			1		
Richmond	1				12			2	2				6		1		1	35	12	1	2	9	2	1
Scarborough	1				2														159	42		1		
Whitby	9				4								8							1				
Whitby	37				24								6		1			51	155			9		
Whitby	7				5														17			2		1
Whitby	2				1			1		1									8			2		1
Whitby	1				3							2			1				8					
Total Rural	101		81	5	6	1	1	7	171		8	1	86	921	96	3	47	2	7					
1957	81		140	2	4		2	5	87		7	4	89	2741	258	4	57	1	6					
Administrative County	208	1	163	9	9	12	3	1	13	199	1	15	2	88	2522	180	26	169	3	20				
1957	215	3	1	260	5	14	4	1	4	60	112	1	11	7	89	4694	446	26	156	1	18			

TABLE 8.

Number of Deaths from Infectious Diseases in each District during 1958.

DISTRICT.	Diph- theria.		Measles.		Whooping cough.		Pneu- monia	
	Deaths.	Death-rate per 1,000 population.	Deaths.	Death-rate per 1,000 population.	Deaths.	Death-rate per 1,000 population.	Deaths	Death-rate per 1,000 population.
A.—URBAN.								
1. Eston	20	·57
2. Guisborough	4	·41
3. Loftus	4	·52
4. Malton	2	·48
5. Northallerton	1	·16
6. Pickering
7. Redcar	14	·49
8. Richmond	8	1·31
9. Saltburn and Marske	2	·21
10. Scalby
11. Scarborough	33	·76
12. Skelton and Brotton	7	·54
13. Thornaby-on-Tees	19	·80
14. Whitby	1	·09
Total Urban	115	·55
B.—RURAL.								
1. Aysgarth
2. Bedale	2	·24
3. Croft
4. Easingwold	6	·51
5. Flaxton	9	·37
6. Helmsley	3	·56
7. Kirkbymoorside	3	·61
8. Leyburn	2	·31
9. Malton	2	·36
10. Masham
11. Northallerton	4	·46
12. Pickering	3	·59
13. Reeth
14. Richmond	19	·72
15. Scarborough	1	·13	..	..	4	·52
16. Startforth
17. Stokesley	5	·24
18. Thirsk	5	·36
19. Wath	1	·28
20. Whitby	4	·34
Total Rural	1	·006	..	..	72	·40
Administrative County	1	·003	..	..	187	·48

TABLE 9.—DEATHS, with their causes, in each District during 1968.

DISTRICT.	All causes.																																				DISTRICT.	
	Tuberculosis, respiratory.																																					
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36		
A.—URBAN.																																						
1. Eton ..	213	143	2	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	Eton ..	1.	
2. Gainsborough ..	54	57	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	Gainsborough ..	2.	
3. Lofus ..	51	44	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	Lofus ..	3.	
4. Mafun ..	34	29	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	Mafun ..	4.	
5. Northallerton ..	44	38	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	Northallerton ..	5.	
6. Pickering ..	34	34	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	Pickering ..	6.	
7. Redcar ..	109	141	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	Redcar ..	7.	
8. Richmond ..	35	21	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	Richmond ..	8.	
9. Saltburn and Mankie ..	45	51	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	Saltburn and Mankie ..	9.	
10. Seaford ..	46	49	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	Seaford ..	10.	
11. Scarborough ..	328	426	9	9	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	Scarborough ..	11.	
12. Skelton and Eborac ..	99	76	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	Skelton and Eborac ..	12.	
13. Thornaby-on-Tees ..	119	123	9	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	Thornaby-on-Tees ..	13.	
14. Whitby ..	102	99	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	Whitby ..	14.	
Total Urban ..	1404	1345	9	8	4	1	3	4	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	Total Urban ..	14.	
B.—RURAL.																																						
1. Aysgarth ..	22	21	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	Aysgarth ..	1.	
2. Bedale ..	35	43	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	Bedale ..	2.	
3. Croft ..	6	8	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	Croft ..	3.	
4. Easingwold ..	65	48	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	Easingwold ..	4.	
5. Flaxton ..	128	147	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	Flaxton ..	5.	
6. Helmsley ..	33	29	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	Helmsley ..	6.	
7. Kirkstonside ..	19	37	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	Kirkstonside ..	7.	
8. Leyburn ..	31	33	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	Leyburn ..	8.	
9. Malton ..	97	56	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	Malton ..	9.	
10. Masham ..	9	14	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	Masham ..	10.	
11. Northallerton ..	47	43	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	Northallerton ..	11.	
12. Pickering ..	29	35	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	Pickering ..	12.	
13. Reth ..	7	13	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	Reth ..	13.	
14. Richmond ..	145	146	4	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	Richmond ..	14.
15. Scarborough ..	56	46	2	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	Scarborough ..	15.
16. Salford ..	22	39	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	Salford ..	16.
17. Skelton ..	112	114	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	Skelton ..	17.
18. Thirsk ..	83	71	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	Thirsk ..	18.
19. Wath ..	8	2	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	Wath ..	19.
20. Whitby ..	84	84	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	Whitby ..	20.
Total Rural ..	999	906	7	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	Total Rural ..	20.

