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CITY OF NOTTINGHAM

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**EIGHTY-THIRD  
ANNUAL REPORT  
OF THE  
HEALTH SERVICES  
1955**


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MEDICAL OFFICER OF HEALTH  
WILLIAM DODD, M.D.

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## PREFACE

This report, though recording some new departures, reflects largely a year of consolidation and improvement.

There is no outstanding item of the vital statistics which calls at this stage for serious reflection. Some figures show an expected improvement ; others, notably the infant mortality, are not as good as the previous best. Deductions and hopes from annual figures are not always of the soundest and trends over five or, better still, ten years, provide a clearer indication of the efficacy of, and demand for, the social services.

★ ★ ★

Three establishments came into being. Taken in chronological order, the converted Rosebery House, formerly an occupation centre for mental defectives, came into operation as a Welfare Centre in January and replaced very moderate premises which the Health Committee until that time had rented.

The newly named Nuffield House was opened in May as an occupation centre and club for old people. This centre, one of the first of its kind in the country, was, as is more fully recorded on page 48, the outcome of assistance from the Nuffield Provincial Hospitals Trust, and was opened by the Hon. Sir Geoffrey Gibbs, K.C.M.G., the Chairman of the trustees of the Nuffield Foundation.

This service for old people, with their widely differing outlook and physical capacity, is one which needs a good deal of thought and practical endeavour and though, as yet, no beneficial result has been achieved, significant facts have, nevertheless, been deduced and confirmed. The primary intention was that the club should provide interest and should seek to improve nutrition, so that thereby the members would be assisted to regain their usefulness in society. There was no departure from this intention,

but it emerged that the old people—and they are the soundest judges of their needs—attended the club, not for an activity, but mainly as a place where in their lonely days they found additionally a welcome and some security.

The third event was the opening of an ad hoc Welfare Centre at Sneinton, the second only in this City. The effect of the new centre on the statistics of health for the district, one formerly associated with a high infant mortality rate and poor housing, must be awaited, but an improvement must be energetically sought.

★ ★ ★

The rapid expansion of the Home Help Service up to 1952 has, through three years when it was subjected to a financial ceiling of £100,000, been consolidated. It is now providing helpers, with a degree of restriction in individual cases, for an increased number of homes, especially where the household is that of one—an aged—person.

It is to those who are working in, or who have intimate knowledge of, this Service, that the diminishing ability of the succeeding generations to care for their older relatives is most evident. Due to many social changes, a partnership between relatives and the Authority on which fully effective services should pivot does not yet appear likely to come into being.

An effectiveness in assisting those families whose problems arise out of misfortune or improvidence has been a reward of the Service. It is worthy of consideration that the chain of circumstances and of mistakes which lead to some families being unable to provide for themselves either as a unit or as individuals, is often interrupted and the family best set on its way to recovery, by the presence in the home of a helper who, by example and by precept, displays the attributes of a successful citizen.

★ ★ ★

The continued progress in the campaign against tuberculosis was notable. The figures for the first full year of the Bacille-Calmette-Guerin vaccination of schoolchildren within the year prior to their leaving school are commendable. The acceptance rate, though hardly high enough yet, is nevertheless a good one, indicating as it does the interest of all teaching staffs, especially head teachers, and the enthusiasm of the majority of parents.

There were much improved figures for immunisation against diphtheria now carried out as a combined measure with vaccination against whooping cough. Without making any claim at this stage, it is worthy of note that notifications of the latter show an appreciable reduction as compared with the last four years.

Everyone will look forward to the production of a wholly safe vaccine against poliomyelitis, and it seems that before long such a product will be introduced. Nevertheless, while the occurrence of a single case of this illness excites public comment, it is necessary, for an objective approach, to compare the Nottingham figures for poliomyelitis this year—there were 32 and 1 death—with the figures for diphtheria 10 years ago when there were 110 cases with 8 deaths.

★ ★ ★

The probability of an increased rate of slum clearance was confirmed by the representation for demolition of nearly one half of the total of unfit houses in the City. Much thought during this and previous years was given to the stage at which property could be regarded as outworn and incapable of being brought nearer the present day minimum standards. Major factors which weighed in this consideration were the type of construction as well as the presence of damp.

In many cases the latter was much in evidence and whether occurring alone or coupled with the absence of air and light, was accepted as a factor in the presence of which healthy living could never be achieved.

The Denman Street and St. Peter's Street areas—the two embracing a total of 800 houses—had many such houses which were emphatically recommended for demolition when they were the subject of a public inquiry held in September.

★ ★ ★

No active steps were taken towards implementing the decision of late 1954 that a considerable area around the City centre shall be declared a smokeless zone.

The report of the Beaver Committee was considered by the Health Committee, but decisive action was deferred pending the acceptance by Parliament of the text of the Clean Air Bill.

Naturally, criticism both here and in other places has been directed against the cost of declaring areas smokeless, though the Beaver Report made it clear that capital costs would be fully recouped within a period of 15 years by effecting really worthwhile economies which would accrue to corporate authorities as well as to firms and individual householders. The position was best summarised by the saying of a well known protagonist for clean air that 'it isn't a case of whether we can afford it but a case of whether we can afford to do without it'.

The figures now collected for five years and shown on pages 131 and 133 reflect the degree of pollution in various well-known areas within the City.

★ ★ ★

With calls for recruitment on all sides, especially for female labour, the maintenance of staff particularly in the clerical and health visiting departments, required constant thought despite the attraction of improved salaries and conditions. The same was true also for sanitary inspectors.

At the time of writing, the deficiency in the clerical staff numbers five, the health visiting service is scarcely 50% of what is regarded as the establishment for a City of this character, while

seven vacancies exist—three for district superintendents—within the sanitary inspectorate. It is not only inevitable that services were restricted but that developments and improvements which are essential for the maturation of the still imperfect National Health Service were and must continue to be held up.

The City Council promptly implemented the improved conditions published by the various negotiating bodies for all grades and, too, applied measures within their direct jurisdiction to ameliorate the worsening position.

★ ★ ★

Reference was made in the report for 1954 to the expectation of a reduction in the medical aid calls to mothers during confinements. The table on page 30 shows rising figures for the past four years and calls for careful interpretation. If women, many of whom have become mothers for the first time before they reach their prime, are to continue vital and active members of society, no preventable impairment of health must occur as a result of childbirth.

It may be that one of the recommendations of the report of the Working Party on Midwives published in 1949 that the case load for the district midwife should not exceed 55 confinements annually, should now be applied. Thus, more attention could be devoted to ante-natal measures with an anticipation of fewer minor complications during, and few sequelae following, the confinement.

WILLIAM DODD.

*19th January, 1956.*

HEALTH DEPARTMENT,  
HUNTINGDON STREET,  
NOTTINGHAM.

## PART I

### VITAL STATISTICS

## VITAL STATISTICS\*

GENERAL

POPULATION	..	..	..	..	..	311,500
AREA IN ACRES	..	..	..	..	..	18,364
AVERAGE NO. OF PERSONS PER ACRE	..	..	..	..	..	16·9
NO. OF MARRIAGES—Church 1,735, REGISTRY OFFICE 1,099	..	..	..	..	..	2,834

BIRTHS**Live**

LEGITIMATE	..	Males	2,332	Females	2,248	..	4,580
ILLEGITIMATE	..	„	174	„	157	..	331
				Total	..	..	4,911
<b>Birth-rate</b> per 1,000 of population	..	..	..	..	..	..	15·77

**Still**

LEGITIMATE	..	Males	65	Females	53	..	118
ILLEGITIMATE	..	„	5	„	2	..	7
				Total	..	..	125
<b>Stillbirth-rate</b> per 1,000 live and stillbirths	..	..	..	..	..	..	24·82

DEATHS**All Causes**

Males	....	1,771	Females	1,732	Total	..	3,503
<b>Death-rate</b> per 1,000 of population	..	..	..	..	..	..	11·24

**Maternal Mortality**

<b>Rate</b> per 1,000 births (live and still)	..	..	..	..	..	0·79
---	----	----	----	----	----	------

**Infant Mortality**

No. of deaths of infants under 1 year	..	..	..	..	..	133
<b>Rate</b> per 1,000 relevant live births	..	..	..	..	..	27·08
Illegitimate	..	..	..	..	..	42·30
Legitimate	..	..	..	..	..	25·98

\* Provisional, See page 13.

## ANALYSIS OF DEATHS FROM BIRTH TO 5 YEARS

## DEATHS OF INFANTS

## Birth to 1 year

CAUSES OF DEATH	Under 1 Week	1—2 Weeks	2—3 Weeks	3—4 Weeks	TOTAL UNDER 1 MONTH	1—3 Months	3—6 Months	6—9 Months	9—12 Months	TOTAL UNDER ONE YEAR
CERTIFIED .. ..	66	6	4	3	79	21	21	8	4	133
UNCERTIFIED .. ..	—	—	—	—	—	—	—	—	—	—
Haemolytic disease of new-born .. ..	1	—	—	—	1	—	—	—	—	1
Whooping cough .. ..	—	—	—	—	—	1	—	—	—	1
Cerebro-spinal fever .. ..	—	—	—	—	—	—	—	1	—	1
Bronchitis .. ..	—	—	—	—	—	4	6	—	1	11
Pneumonia (all forms) .. ..	2	—	1	2	5	9	11	3	1	29
Gastro-intestinal infection .. ..	—	—	—	—	—	—	—	1	—	1
Gastritis .. ..	—	—	—	—	—	—	—	—	1	1
Suffocation (overlying) .. ..	—	—	—	—	—	—	1	—	—	1
Difficulty or injury at birth .. ..	10	—	—	—	10	—	—	—	—	10
Atelectasis .. ..	4	—	—	—	4	—	—	—	—	4
Premature births .. ..	31	2	1	—	34	—	—	—	—	34
Congenital malformations .. ..	17	4	1	1	23	5	2	—	—	30
Other causes .. ..	1	—	1	—	2	2	1	3	1	9
TOTALS .. ..	66	6	4	3	79	21	21	8	4	133

## DEATHS OF CHILDREN

## 1—5 years

CAUSES OF DEATH	1—2 yrs.	2—3 yrs.	3—4 yrs.	4—5 yrs.	Total
Respiratory infection ..	4	1	—	—	5
Gastro-enteritis ..	3	—	—	—	3
Other infections ..	1	1	—	1	3
Abdominal emergency ..	1	—	—	—	1
Accident (a) Motor ..	—	2	1	—	3
(b) Other ..	—	1	—	—	1
Other conditions ..	—	—	2	2	4
TOTALS ..	9	5	3	3	20

# POPULATIONS, BIRTH, DEATH, INFANT AND MATERNAL MORTALITY RATES

	Estimated Population	Birth-rate	Death-rate	Infant	Maternal
		per 1,000 population		Death-rate per 1,000 births	
1851-1855 ..	55,883	—	—	—	—
1856-1860 ..	59,741	36·8	27·2	209	—
1861-1865 ..	75,765	34·8	24·9	192	—
1866-1870 ..	88,040	31·3	23·8	200	—
1871-1875 ..	89,510	34·1	24·9	192	—
1876-1880 ..	142,756*	34·6	21·7	175	—
1881-1885 ..	208,937*	36·6	20·9	174	—
1886-1890 ..	229,762	30·4	17·9	168	—
1891-1895 ..	219,770	29·5	18·3	174	—
1896-1900 ..	235,200	28·9	18·5	191	—
1901-1905 ..	246,020	27·7	17·2	170	—
1906-1910 ..	260,483	26·1	15·8	152	4·54
1911-1915 ..	264,316	22·9	15·1	137	3·66
1916-1920 ..	264,151	19·1	16·0	113	4·66
1921-1925 ..	268,900	20·4	12·9	90	3·34
1926-1930 ..	266,000	17·5	13·6	88	3·78
1931 ..	270,900	17·2	13·6	82	4·1
1932 ..	270,700	16·4	12·5	80	3·0
1933 ..	283,030†	15·8	13·4	85	3·5
1934 ..	281,850	15·6	12·3	69	2·4
1935 ..	280,200	15·7	12·5	81	4·4
1936 ..	279,400	15·2	13·2	89	4·5
1937 ..	278,800	16·0	13·4	80	2·8
1938 ..	278,300	15·6	12·7	71	1·8
1939 ..	278,800	15·8	13·3	66	1·3
1940 ..	263,600	16·5	15·5	61	2·7
1941 ..	258,100	16·0	14·0	80	2·8
1942 ..	255,900	18·2	13·1	62	2·5
1943 ..	265,400	19·1	14·3	65	1·38
1944 ..	262,310	21·7	13·2	56	·85
1945 ..	265,090	19·7	12·9	53	1·33
1946 ..	283,160	22·0	12·5	42	1·09
1947 ..	291,150	23·9	12·3	50	1·26
1948 ..	296,900	19·8	10·9	44	·49
1949 ..	300,640	18·9	11·8	38	·51
1950 ..	307,000	17·4	11·1	31	·37
1951 ..	306,008	16·97	11·98	33	·57
1952 ..	306,600	16·71	10·74	28	·38
1953 ..	310,700†	16·64	11·01	27	·77
1954 ..	311,500	16·05	10·61	24	·59
1955 ..	311,500	15·77	11·24	27	·79

\* Borough Boundary Extension.

† City Boundary Extension.

## FINAL STATISTICS

POPULATION—Mid year estimate of Registrar General .. 312,000

BIRTHS**Live**

					1955.	1954.
LEGITIMATE	Males	2,317	Females	2,222	.. 4,539	4,626
ILLEGITIMATE	„	187	„	167	.. 354	375
TOTAL	..	..	..	..	.. 4,893	5,001
<b>Birth-rate</b>	per 1,000 of population	..	..	..	15·67	16·05
EXCESS OF BIRTHS OVER DEATHS	..	..	..	..	1,368	1,695

**Still**

LEGITIMATE	Males	63	Females	53	.. 116	91
ILLEGITIMATE	„	7	„	2	.. 9	10
TOTAL Stillbirths	..	..	..	..	.. 125	101
<b>Stillbirth-rate</b>	per 1,000 live and stillbirths	..	..	..	24·91	19·79

DEATHS**All Causes**

	Males	1,792	Females	1,733	.. 3,525	3,306
<b>Death-rate</b>	per 1,000 of population	..	..	..	11·28	10·61

**Maternal Mortality Rate** .. .. 0·60 0·59**Infant Mortality**

No. of deaths of Infants under 1 year	..	..	137	122
<b>Rate</b> per 1,000 relevant live births	..	..	28·00	24·35
Illegitimate	..	..	33·90	27
Legitimate	..	..	27·54	24

## ANALYSIS OF DEATHS

Total Deaths .. .. .	1955	1954	1953
	3,525	3,306	3,430
Deaths under 1 year .. .. .	137	122	140
„ 1— 5 years .. .. .	20	24	21
„ 5—45 „ .. .. .	217	196	223
„ 45—65 „ .. .. .	817	786	826
„ 65 and over .. .. .	2,334	2,178	2,220
<b>Causes of Deaths :—</b>			
*Heart disease .. .. .	520	505	545
Vascular lesions of nervous system .. .. .	471	429	449
Coronary disease, angina .. .. .	349	349	299
Bronchitis .. .. .	296	253	291
*Malignant and lymphatic neoplasms .. .. .	293	281	303
Defined and ill-defined diseases—various .. .. .	285	289	300
Pneumonia .. .. .	243	184	225
*Circulatory disease .. .. .	186	159	142
Malignant neoplasm, lung, bronchus .. .. .	135	121	102
Malignant neoplasm, stomach .. .. .	101	89	92
Hypertension with heart disease .. .. .	99	93	98
Accidents, other than motor vehicle accidents .. .. .	58	65	71
Tuberculosis, respiratory .. .. .	52	73	84
Malignant neoplasm, breast .. .. .	47	56	51
Suicide .. .. .	46	45	39
Congenital malformations .. .. .	45	31	23
Nephritis and nephrosis .. .. .	44	32	27
Ulcer of stomach and duodenum .. .. .	43	48	42
*Diseases of respiratory system .. .. .	32	35	29
Motor vehicle accidents .. .. .	31	20	18
Malignant neoplasm, uterus .. .. .	29	33	25
Leukaemia, aleukaemia .. .. .	25	14	8
Diabetes .. .. .	19	20	26
Hyperplasia of prostate .. .. .	16	25	27
Syphilitic disease .. .. .	15	15	13
Influenza .. .. .	15	10	44
Gastritis, enteritis and diarrhoea .. .. .	9	13	22
Measles .. .. .	5	1	—
Tuberculosis, non respiratory .. .. .	4	4	8
Other infective and parasitic diseases .. .. .	3	4	14
Pregnancy, childbirth, abortion .. .. .	3	3	4
Meningococcal infection .. .. .	2	3	2
Whooping cough .. .. .	2	—	4
Homicide and operations of war .. .. .	1	4	1
Acute poliomyelitis .. .. .	1	—	2
Diphtheria .. .. .	—	—	—

\*Not given otherwise in table.

## PART II

### PERSONAL HEALTH SERVICES

National Health Service Acts 1946-1952

HEALTH CENTRES

MATERNAL AND CHILD HEALTH

PREVENTION OF ILLNESS, CARE AND  
AFTER-CARE :

IMMUNISATION AND VACCINATION

HOME SERVICES :

HOME NURSING SERVICE

HOME HELP SERVICE

MENTAL HEALTH

CITY AMBULANCE SERVICE

## HEALTH CENTRES

### JOHN RYLE HEALTH CENTRE

The Clifton Estate which this Centre serves is now in the fourth year of construction and is approaching completion.

Little more than minor adjustment to the established usage was required ; the daily procedure worked smoothly for morning and evening surgeries, while weekend and night arrangements were carried out without a hitch.

Despite regular use, the original decorations wore well, though a start was made with renovations where necessary.

The Centre at which members of four firms of doctors provide medical services, though centrally sited in the developing estate when built, has now become eccentrically placed and less convenient for many of those dwelling in Clifton.

The holding of surgeries in their houses by two other doctors—each of whom has an assistant—actually resident on the estate westward of the Centre and therefore better placed as regards the focal point and shops of the area, appeared to affect the degree of success as reflected in the number of attendances at the Centre.

That this was in no way attributable to the design, suitability and convenience of the suites in the Centre—waiting, consulting and examination rooms—is known from the views of patients and doctors using them, others in the City who are fully familiar with the lay-out, and a considerable number of visitors from

various areas. Of the latter—and there were many—it was noticeable that their thoughts on projected Health Centres concerned those likely to be established in newly created residential parts.

Though the section of the Centre for general medical services was fully adequate, the first floor accommodation in this adapted residential block became less convenient as the number of residents, and therefore the number of mothers and children, increased. The number of clinic sessions held was disproportionate to corresponding areas in other parts of the City and pointed to the early need for the consideration of permanent premises.

An attractive site adjacent to other public buildings and the main shopping area in the geographic centre of the estate has been available from the outset and plans are in an advanced stage of completion. Restrictions on capital expenditure, however, applied by the Government in the Autumn, will affect the starting date and therefore completion of the new Centre.

## MATERNAL AND CHILD HEALTH

**Live Births.** There were 4,911 City births notified, representing a provisional birth rate of 15·77, which is the lowest figure recorded here since 1938.

The number of births decreased by 27 compared with 1954.

There were 331 illegitimate births ; 13 less than in 1954.

**Stillbirths.** There were 125 stillbirths, representing a rate of 24·82 per thousand live and stillbirths. This rate which increased compared with 1954 has fluctuated widely over the 10 years shown in the table.

Year	Birth Rates			Stillbirth Rates		
	Nottingham	England & Wales	Great Towns	Nottingham	England & Wales	Great Towns
1946 ..	22·05	19·2	22·2	22·69	27·2	29·3
1947 ..	23·9	20·6	23·0	21·9	24·1	25·9
1948 ..	19·82	17·9	20·0	23·3	23·2	25·3
1949 ..	18·96	16·7	18·7	19·9	22·7	24·4
1950 ..	17·47	15·8	17·6	19·5	22·7	24·8
1951 ..	16·97	15·5	17·3	22·72	23·0	25·4
1952 ..	16·71	15·3	16·9	22·58	22·7	24·6
1953 ..	16·64	15·5	17·0	18·97	22·5	24·8
1954 ..	16·05	15·2	15·98	20·24	23·5	23·0
1955 ..	15·77	15·0	N/A*	24·82	23·1	N/A*

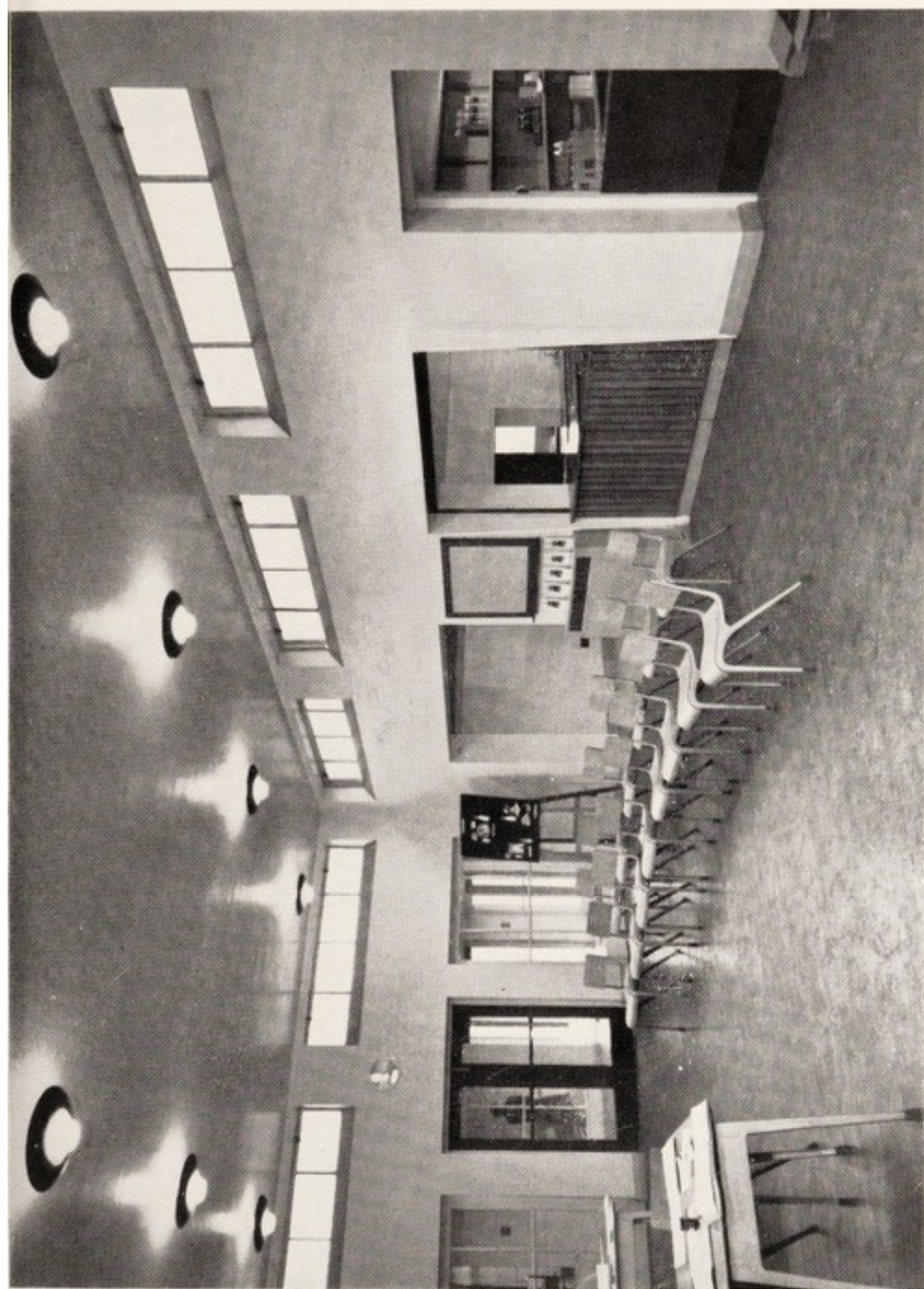
\* Not now available.

The result of the detailed enquiry into each stillbirth is shown in the table on page 23. Congenital malformation was the cause in 16·8%, maternal toxæmia 18·4% and ante-partum hæmorrhage in 10·4% of the total. In 31·2% of cases the cause was unknown.

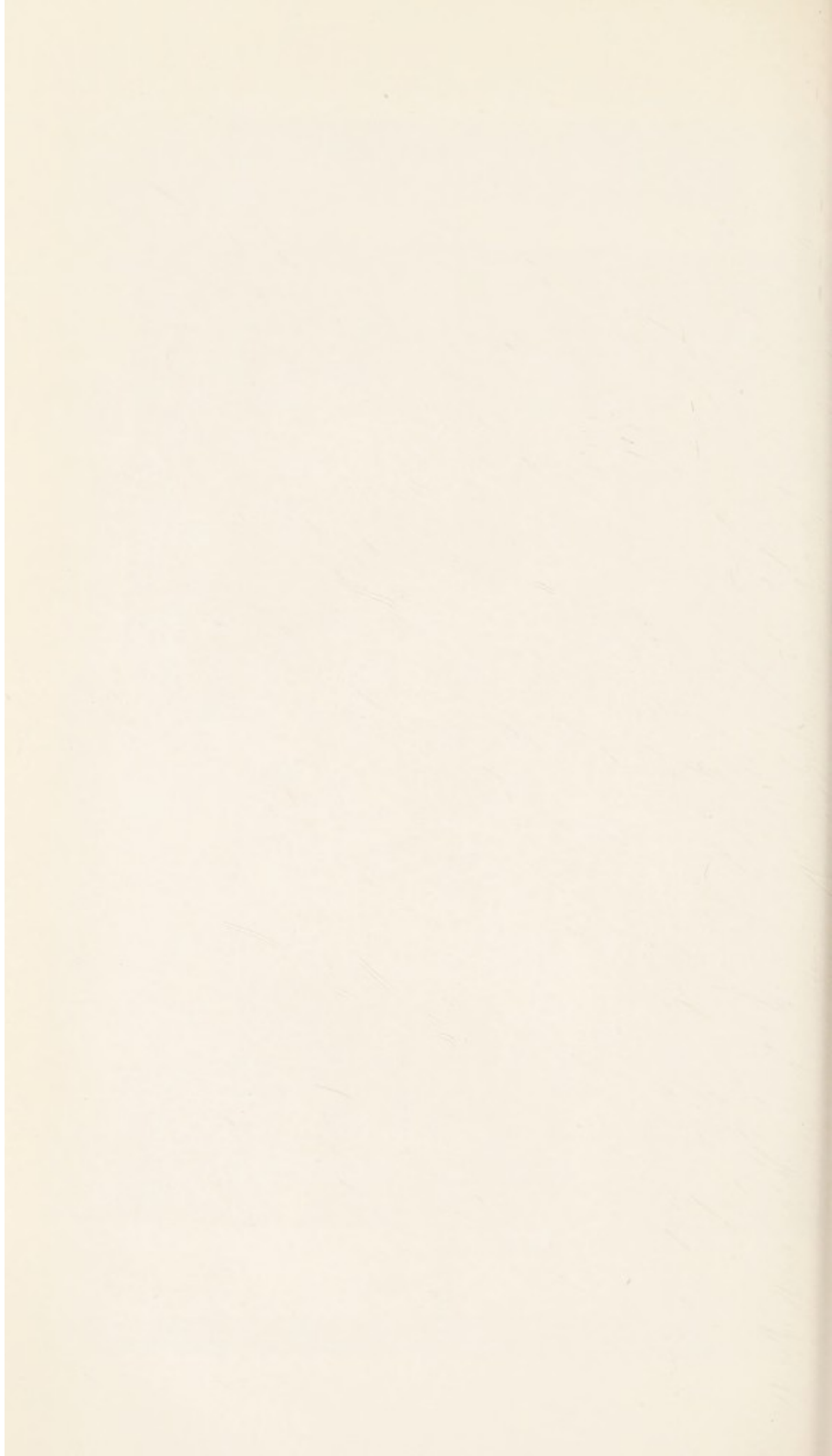




SEE PAGE 63



WAITING HALL, SNEYTON WELFARE CENTRE



**Infant Mortality.** The number of deaths of infants under one year was 133, representing a rate of 27·08 per thousand live births, an interruption of the downward trend, as the table shows.

Year	Nottingham	England & Wales	Great Towns
1946 ..	42	42·9	45·0
1947 ..	50	41·4	47·0
1948 ..	44	33·9	42·9
1949 ..	38	32·4	37·0
1950 ..	31	29·6	33·8
1951 ..	33	29·7	33·9
1952 ..	29	27·6	31·2
1953 ..	26	26·8	30·8
1954 ..	24·5	25·4	27·5
1955 ..	27·08	24·9	N/A*

\* Not now available.

The increase in infant death rate was not confined to neo-natal deaths—the rate between four weeks and one year also increased.

Death rates per 1,000 live births		
Year	Under 1 month	From 1 month to 1 year
1950 ..	16·9	13·7
1951 ..	20·73	11·9
1952 ..	18·21	10·57
1953 ..	15·39	10·34
1954 ..	14·78	9·72
1955 ..	16·09	11·00

#### Deaths of Infants — Causes and Rates

	1951	1952	1953	1954	1955
<b>Total Death Rate</b>					
<b>All Causes</b>	33	29	26	24·5	27·08
<b>Proportionate Death Rate</b>					
<b>Individual Causes</b>					
Respiratory Diseases .. ..	7·8	5·2	5·7	5·6	8·14
Diarrhoea and Enteritis .. ..	·2	·8	·9	0·6	0·20
Congenital Malformations .. ..	5·1	4·7	3·0	4·5	6·11
Prematurity .. ..	11·9	10·2	9·4	6·7	6·92
Atrophy, Debility, Marasmus and Atelectasis .. ..	1·7	1·4	1·1	0	0·81
Birth Injury .. ..	1·7	2·8	2·9	2·2	2·04
Other Causes .. ..	4·6	3·9	3·0	4·9	2·85

Prematurity accounted for 26% of infant deaths and continued to be the chief cause. Respiratory infections caused 65% of the deaths between four weeks and one year.

The illegitimate death rate was 42·3 per thousand illegitimate births, compared with legitimate infant death rate of 25·98.

**Neo-Natal Mortality.** Deaths of infants under one month numbered 79, a neo-natal mortality rate of 16·09.

The result of the detailed enquiry into each neo-natal death is given on page 22. Prematurity alone accounted for 35·4% of deaths and congenital malformations for 27·8%.

Death occurred during the first day in 58·2% of the infants dying and 84·8% were dead within one week of birth.

**Peri-Natal Mortality.** This is the number of stillbirths and deaths under four weeks of age per 1,000 live and stillbirths and is influenced largely by the health of mothers during pregnancy and labour. The rate was 40·5 ; a detailed analysis of causes is given.

Peri-natal deaths						
Primary factors					Total	Premature infants
Ante-natal causes :						
Toxaemia including haemorrhage ..					23	18
A.P.H. without toxaemia .. ..					13	8
Rh. incompatibility .. ..					2	1
Intra-natal causes :						
Injury .. .. .					17	4
Asphyxia .. .. .					9	3
Others .. .. .					3	-
Post-natal causes :						
Infection only .. .. .					7	4
Congenital malformation .. ..					43	27
Prematurity only .. .. .					28	28
Other causes .. .. .					19	7
Unknown .. .. .					40	21
All causes .. .. .					204	121

**Prematurity.** Of the live births 8.35% were premature, an increase compared with percentages of 7.0 in 1954 and 7.7 in 1953. No less than 58.4% of stillbirths were prematurely born and also 42.8% of total infants dying.

The neo-natal mortality rate per thousand premature babies was 121.95 compared with 8.44 for mature infants ; the figures for 1954 were 118.5 and 7.0. The death rate from four weeks to one year was 17.07 for premature and 10.44 for mature infants.

A separate analysis of the causes of stillbirths and neo-natal deaths in these infants showed that of those stillborn 24.6% were due to maternal toxæmia and 21.9% to congenital malformation.

Prematurity itself as the cause of death was the only factor found in 35.4% of neo-natal deaths in these infants.

#### Mortality related to weight and place of birth

Birth weight	Born at home							Born in hospitals and nursing homes		
	No. born	Transferred to hospital			Nursed at home			No. born	No. died	%
		No.	Died	%	No.	Died	%			
Upto & incl. 3 lb. 4 oz...	10	10	7	70.0	-	-	-	33	18	54.5
3 lb. 4 oz.— 4 lb. 6 oz...	16	14	1	7.1	2	-	-	73	12	16.4
4 lb. 6 oz.— 4 lb. 15 oz.	26	8	1	12.5	18	1	5.6	50	1	2.0
4 lb. 15 oz.— 5 lb. 8 oz...	86	9	6	66.7	77	2	2.6	116	8	6.9
TOTALS	138	41	15	36.6	97	3	3.1	272	39	14.3



## ANALYSIS OF STILL BIRTHS

	Born at			Legitimate.		Sex		Prem- ature.		Macer- ation.		Post- mortem		Other complic- ns.				A.N.care*			Place in family					Age of mother						
	Hospital	Home	Nursing Home	Yes	No	M.	F.	Yes	No	Yes	No	Yes	No	Prep.	Labour	None	Adequate	Barely adequate	Inade- quate	1	2	3	4	5 or over	15- 19	20- 24	25- 29	30- 34	35- 39	40-45- 44 49		
Total																																
Congenital malformation ..	21	16	5	-	21	-	6	15	5	4	17	2	19	13	-	8	7	12	2	10	5	1	4	1	3	7	5	3	1	2	-	
Hazard of birth :																																
(a) Injury ..	7	5	-	2	7	-	3	4	7	-	7	-	6	2	-	5	5	2	-	3	4	-	-	-	-	2	3	2	-	-	-	
(b) Asphyxia ..	9	5	4	-	9	-	5	4	3	6	1	8	-	9	3	-	6	6	-	3	1	4	1	-	3	-	-	1	5	2	1	-
(c) Other ..	2	1	1	-	2	-	1	1	2	1	1	1	-	2	1	-	1	1	-	1	1	-	-	-	-	-	1	1	-	-	-	
Maternal toxæmia																																
(a) With A.P.H.†	5	4	1	-	5	-	4	1	4	1	3	2	1	4	1	-	4	3	2	-	3	1	1	-	-	1	2	1	1	-	-	
(b) No A.P.H. ..	18	16	2	-	16	2	10	8	14	4	13	5	1	17	5	-	13	8	7	3	5	4	2	3	4	2	3	6	5	1	1	-
A.P.H. without toxæmia ..	13	12	1	-	13	-	6	7	8	5	3	10	-	13	-	-	13	7	4	2	2	4	3	1	3	-	5	5	2	1	-	-
Rhesus incompatibility ..	1	1	-	-	1	-	-	1	1	-	1	-	1	-	-	1	-	1	-	-	-	-	-	-	-	-	-	-	1	-	-	-
Other causes ..	10	8	2	-	8	2	4	6	6	4	7	3	-	10	5	1	4	3	4	3	2	3	-	1	4	-	2	2	1	3	2	-
Unknown ..	39	25	13	1	35	4	24	15	21	18	26	13	3	36	11	-	28	24	10	5	15	6	5	7	6	2	11	8	9	5	3	1
TOTAL ..	125	93	29	3	117	8	63	62	73	52	59	66	8	117	41	2	82	64	43	18	42	32	14	16	21	8	32	32	29	14	9	1

\* Classification of Ante-Natal Care adopted as in the "Maternity in Great Britain" Survey.

**Adequate** at least 9 clinic attendances starting in the first 3 months of pregnancy.

**Barely adequate**

**Inadequate** attendances only in last 3 months.

† Ante-partum haemorrhage.

## DOMICILIARY MIDWIFERY SERVICE

The domiciliary midwives attended 2,521 or 50·1% of the total City confinements, a decrease of 20, to which is related a fall in the birth rate from 15·85 to 15·77. In addition to the nursing of those delivered at home, 102 women admitted to hospital on account of abnormality returned home after delivery or treatment to the care of the midwife originally booked. There was a higher number—53—of unbooked cases.

City midwives attended the ante-natal sessions at the welfare centres in their districts. Ante-natal clinics held by three general practitioners at their surgeries were also attended by the district midwife.

**Maternity Medical Service.** General practitioner obstetricians were booked by mothers and were present at domiciliary confinements as follows :—

Year	Total home confinements	Confinements			
		Doctors booked		Doctors present	
		No.	% total	No.	% total
1951	2,493	809	32·8	331	13·2
1952	2,534	996	39·3	307	12·1
1953	2,680	1,251	46·7	363	13·5
1954	2,541	1,355	53·3	352	13·9
1955	2,521	1,478	58·6	323	12·8

**Medical Aid.** City midwives called a doctor to mothers in 32·7% of confinements compared with 32·5% in 1954, 30·4% in 1953 and 25·1% in 1952. Rupture of the perineum accounted for 45·6% of the calls.

**Maternity Emergency Service.** The obstetric flying squad from the City Hospital was called for emergency treatment in the home in 12 cases. The conditions treated were retained placenta 5 cases, one being complicated by post-partum haemorrhage, which occurred alone in 4 cases; intra-partum haemorrhage 2 cases; prolonged second stage 1 case.

**Hospital Admission.** Under the standing arrangement with the City Hospital, 30 cases were admitted direct from City midwives, compared with 31 in 1954 and 50 in 1953.

**Hospital Confinements for Social Reasons.** Of the hospital confinements, 534 or 23·3% were booked for social reasons. Applications numbered 571 compared with 534 in 1954.

**Analgesia.** Pethidine was administered to 948 women, or 37·6% of domiciliary confinements. It was associated with gas and air analgesia in 755 of these cases, with trichloroethylene in 13 cases, and with both in 9 cases.

Gas and air was used as an analgesic at 1,672 domiciliary confinements, or 66·2% compared with 62% in 1954 and 59% in 1953.

Trichloroethylene was administered in 42 cases by domiciliary midwives under supervision by the general practitioner, whose machine was used.

Two machines purchased by the Health Committee came into use in November and were available for 6 midwives.

**Mass Radiography.** The number of women referred to the Chest Radiography Centre was 1,927, of whom 65·9% attended. In order to reduce the high defaulter rate, a system of issuing all appointments directly to mothers at ante-natal clinics was started in November.

**Blood Examinations.** Haemoglobin estimations, blood and rhesus grouping and tests for venereal disease continued as routine examinations at ante-natal clinics. Where the haemoglobin level was 70% or less, a complete blood examination was undertaken and the estimations were repeated at not longer than monthly intervals.

**Relaxation.** A course in relaxation and training for childbirth, arranged and conducted for City midwives by a physiotherapist, was completed by 11 midwives in February.

Classes conducted by midwives were started in April at the Basford, Clifton, Edwards Lane and Radford Centres, and in August at the Sneinton Centre. The class at the Huntingdon Street Centre was conducted by a physiotherapist until the end of November; on her resignation midwives took over. Mothercraft teaching, an important part of such classes, was shared equally between health visitors and midwives.

Altogether 305 mothers attended an average of 4 sessions each. Not more than 8 mothers were accepted at a session and at some centres two sessions were necessary.

**Consultant Clinic.** The weekly clinic at Edwards Lane Welfare Centre continued, and 440 women were referred by medical officers of the welfare centres.

**Home Care of Premature Babies.** Special training in premature baby care has now been undertaken by six midwives and two others are completing the training ; three were engaged full-time and two part-time in this work.

Of 138 premature babies born at home 41 were transferred to hospital. Those born in hospital and sent home to the care of the midwives numbered 176 ; more than twice the number in 1952.

A total of 4,987 visits was paid.

**Post Graduate Courses.** Refresher courses were attended by four midwives. Training in premature baby care at Sorrento Hospital, Birmingham, was undertaken by four midwives. Instruction in the administration of trichloroethylene, as required by the rules of the Central Midwives Board, to enable midwives to administer this form of analgesia on their own responsibility, was given at the Health Department to all midwives.

**District Training.** In association with the Firs Maternity Hospital, district training for Part II of the certificate of the Central Midwives Board was available for 16 students. From four courses a total of 32 pupil midwives was trained.

## CONFINEMENTS IN THE CITY

			<i>Nottingham mothers</i>	<i>Occurred in the City.</i>
<b>Total No.</b>	..		4,973	7,153
Attended by City midwives	..	2,521		
„ „ private midwives	..	5		
„ „ „ doctors	..	2		
Attendant not known	..	3		
		————	2,531	2,531
In hospital	..	..	2,287	4,355
„ nursing homes	..	..	155	267

## WORK OF CITY MIDWIVES

**Home Births** (live and still) :

Single deliveries	..	..	2,505	
Multiple deliveries	..	..	32	
			————	
Babies delivered	..			2,537

**Visits to Mothers—**

Ante-natal	..	..	..	..	22,617
Post-natal	..	..	..	..	49,176

In connection with hospital bookings for social reasons, follow-up of ante-natal clinic defaulters, additional visits to infants, labour prior to delivery, etc. .. .. . 3,624

———— 75,417

**WORK OF SUPERVISORS OF MIDWIVES**

Visits to Midwives and inspection of records and equipment ..	184
Inspection of midwives in Nursing Homes .. .. .	11
Special domiciliary visits :	
Expectant and nursing mothers .. .. .	229
Stillbirths .. .. .	10
Puerperal Pyrexia .. .. .	32
Skin conditions .. .. .	14
Office interviews regarding hospital confinements .. ..	571

**REQUIREMENTS OF CENTRAL MIDWIVES BOARD****Midwives notifications to Local Supervising Authority :**

Notifying intention to practise .. ..	152
Ceasing to practise in this area .. .. .	10
Practising at end of year .. .. .	142

**Distribution :**

Domiciliary service ..	45
City Hospital .. ..	35
Firs Maternity Hospital ..	16
Women's Hospital ..	23
Highbury .. ..	16
Nursing homes and Nursing co-operations	12
Private practice ..	5
—	152

## Notifying medical aid calls to doctors from midwives :

	<i>City Midwives</i>		<i>Nursing Homes</i>		<i>Total</i>	
To mothers	824		11		835	
„ infants	242		1		243	
Aid was sought for :—						
			1952	1953	1954	1955
<b>Mothers—</b>						
Ruptured perineum	..	..	320	360	412	376
Pyrexia	..	..	39	59	54	41
Abnormal presentations		..	18	23	19	22
Prolonged labours	..	..	60	65	52	46
Ante-partum haemorrhage		..	15	56	38	41
Post-partum haemorrhage		..	35	33	44	39
Retained placenta	..	..	27	27	28	20
Obstetric shock and collapse		..	6	8	10	2
Abortion and miscarriage		..	36	37	15	28
Phlebitis	..	..	13	11	17	10
Stillbirths	..	..	8	29	2	3
Premature labours	..	..	8	30	33	49
Other conditions	..	..	57	76	103	147
			<u>642</u>	<u>814</u>	<u>827</u>	<u>824</u>
<b>Infants—</b>						
Prematurity	..	..	30	25	23	11
Asphyxia and cyanosis	..	..	17	15	28	14
Jaundice	..	..	4	12	6	7
Deformity	..	..	6	9	17	13
Skin conditions	..	..	9	13	8	15
Eye discharges	..	..	82	149	139	127
Other conditions	..	..	46	39	64	55
Sent to Eye Infirmary for advice	..		10	11	—	—
			<u>204</u>	<u>273</u>	<u>285</u>	<u>242</u>

Notifying liability to become a source of infection ..	60
„ commencement of artificial feeding :	
Domiciliary cases .. .. .	141
Institutional cases .. .. .	552
„ deaths of infants—as midwives .. ..	1
„ „ as maternity nurses .. ..	2
„ stillbirths—acting as midwives .. ..	18
„ „ „ maternity nurses .. ..	11

#### ADMISSIONS TO CITY HOSPITAL DIRECT FROM CITY MIDWIVES

##### Mothers—

Premature labours .. .. .	9
Ante-partum haemorrhage .. .. .	6
Threatened abortion .. .. .	1
Toxaemia .. .. .	2
Prolonged labour .. .. .	3
Malpresentation .. .. .	4
Unbooked social emergency .. .. .	3
Obstetric shock .. .. .	2
—	30

#### MATERNAL DEATHS

##### City Cases :

##### *All occurred in hospital :*

Septic abortion and general peritonitis .. ..	1
Abortion and general peritonitis .. ..	1
Massive intra-peritoneal haemorrhage ; ruptured uterus ; former lower segment Caesarean Section .. ..	1
Congestive cardiac failure :	
Aortic stenosis and incompetence.	
Pregnancy, confinement 2 mths. previously ..	1

## PUERPERAL PYREXIA

Cases Notified	Arising in		Nursed at home	Admitted to hospital	Age Groups			
	Hospital	Home			15—20	20—25	25—35	35—40
28	8	20	20	—	3	11	13	1

## OPHTHALMIA NEONATORUM

Cases notified	..	..	..	..	24
Domiciliary confinements	..	..	..	..	22
Institutional	..	..	..	..	2

In connection with the above, 45 home visits were paid ; eye conditions other than ophthalmia neonatorum necessitated 387 visits.

## HEALTH VISITING

**Staff.** On completion of training, three health visitors joined the staff and, allowing for appointments and resignations, the staff numbered 31 at the end of the year.

This is only half the number needed to carry out adequately their duties to the whole family and in order that their time should be used to the greatest advantage, clinic nurses and clerks continued to assist at clinics, the number of the former in November being increased to cover all but one clinic session.

The number of voluntary workers remained small; their service, nevertheless, was of notable help.

**Home Visits.** The average case load in December was 705 children under the age of five years and each health visitor visited an average of 737 families in her area. There was some development of her duties to the whole family, as shown in the table.

Visits to pre-school children—			1954	1955
Primary visits .. ..			4,864	4,706
Revisits under 1 year ..			41,833	40,958
„ 1 — 5 years ..			49,664	53,160
<b>Other visits—</b>				
Old people :				
Primary visits .. ..	822		737	
Revisits .. ..	1,932		4,312	
B.C.G. vaccination .. ..	1,085		1,130	
Ante-natal :				
Primary visits .. ..	188		340	
Revisits .. ..	65		181	
Ophthalmia neonatorum :				
Primary visits .. ..	43		34	
Revisits .. ..	142		133	
Hospital after-care .. ..	62		50	
Infectious disease .. ..	42		35	
Stillbirth enquiry .. ..	34		47	
Neo-natal death enquiry ..	23		35	
Boarding-out .. ..	25		8	
Vaccination .. ..	20		23	
Housing .. ..	13		10	
Diabetic .. ..	—		7	
Miners' death survey ..	—		2	
			4,496	7,084
Total number of home visits ..			100,857	105,908
“ No access ” visits .. ..			18,201	19,584

**Liaison with General Practitioners.** Progress continued in the development of a two-way liaison between general practitioners and health visitors ; this was mainly concerned with problems of the aged, but contact was also made regarding expectant mothers, children and family problems. Some practices produced a greater number of social problems than others, but altogether health visitors actively co-operated with 90 of the 143 principals and partners in the City.

**Liaison with Hospitals.** Sociological reports were made, as in the past two years, to enable the priority for admissions to be assessed and also to judge progress after discharge ; social difficulties becoming apparent during in-patient care were discussed with the health visitors and in many cases solved prior to discharge. Similarly health visitors assisted in solving problems arising on discharge, especially in chronic cases.

During the year a similar liaison with the General Hospital developed, and in October a further step forward was made in linking the preventive and curative services when a health visitor became a member of the diabetic team. The value and importance of the work to be done in such cases was welcomed by general practitioners, whose request that the service of this health visitor be available to them by direct contact was readily agreed to.

**Health Visitor Training Course.** This course of three terms duration run jointly with Nottingham County and accommodated in the Adult Education Centre of the University of Nottingham, was maintained. The present course started in October and a total of 8 students was accepted, 5 being for the City and 3 for Nottinghamshire.

Since the commencement of training in October 1947 up to July 1954, a total of 127 students was accepted for training, 57 being for the City.

**Welfare Centres.** In January the Welfare Centre at Basford was transferred from a church hall to Rosebery House, converted after its former use as an Occupation Centre.

A new centre built at Beaumont Street, Sneinton, at a cost of £20,300, was opened on July 28th by Dr. G. E. Godber, D.M., F.R.C.P., D.P.H., Deputy Chief Medical Officer, Ministry of Health. Plans of the two centres appear between pages 36 and 37.

As at Basford, not only did facilities become available for the conduct of ante-natal, infant and toddler clinics, but also it was possible to extend the centre activities to include relaxation classes and mothers' clubs.

**Centre Attendances.** The number of individual children under 1 year attending Welfare Centres showed a decrease of 108, but a review of attendances showed that the percentage of City children of this age group who attended rose to 72%, being 71% in 1954.

Over 1 year of age, 6,896 individual children attended the clinics, an increase of 161, and representing 39·8% of children aged 1-5 years.

**Dental Care. Mothers.** Arrangements made with the General Dispensary continued whereby one session a week was devoted to mothers. The number of women referred was 414 and 324 attended. The acceptance rate for treatment increased and arrangements for additional sessions are in hand.

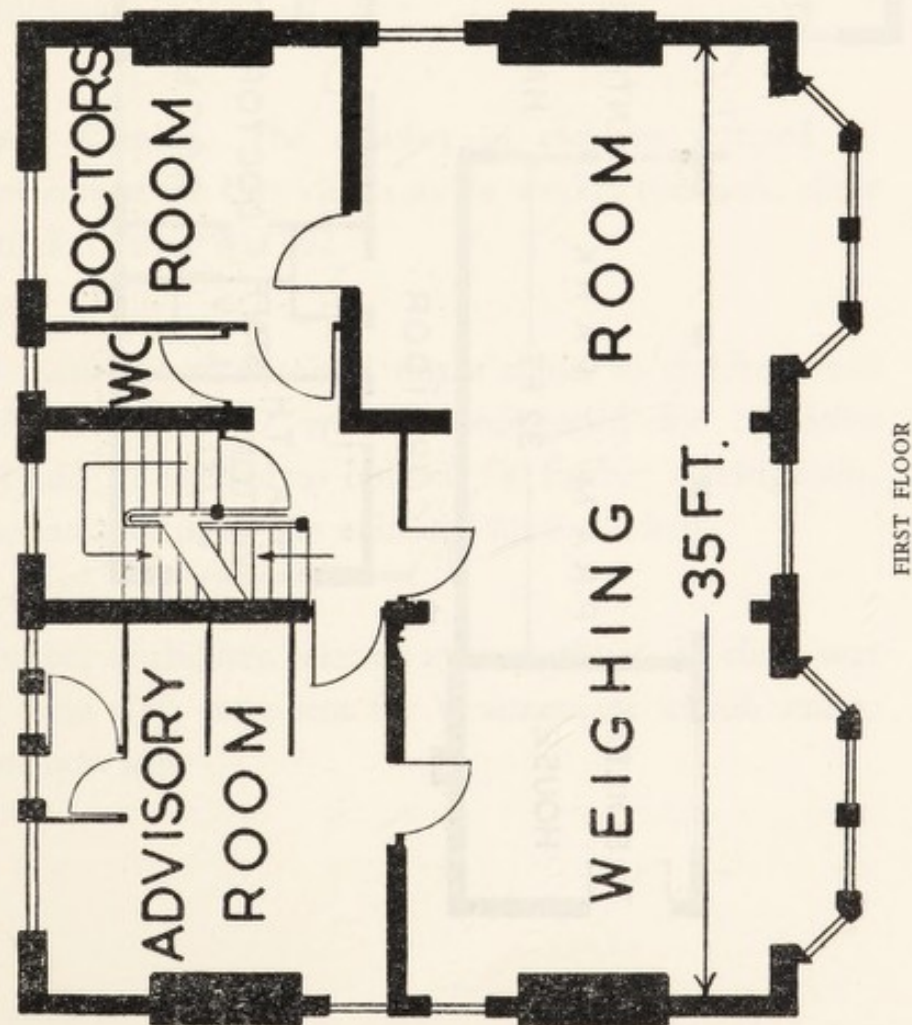
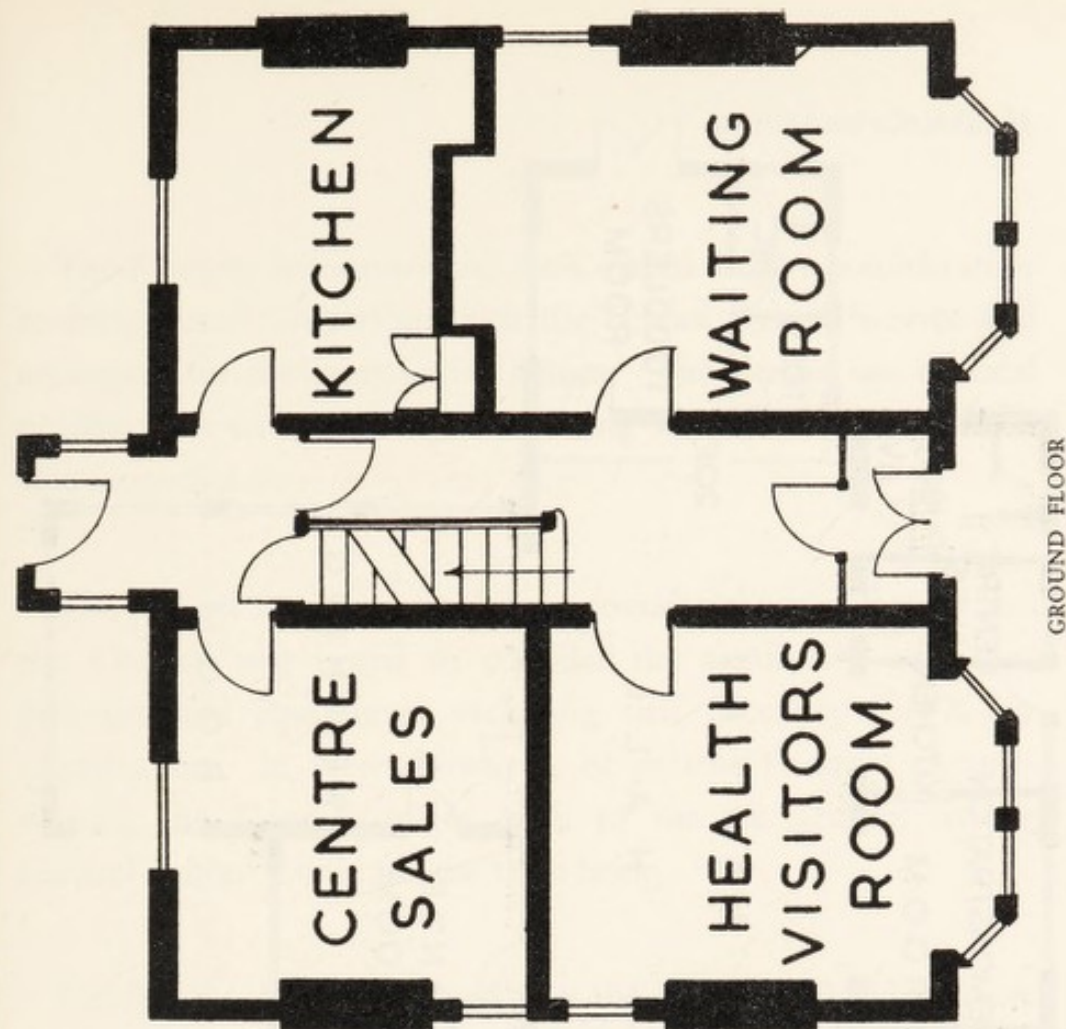
**Children.** At the Central School Clinic a dental surgeon working under the Principal School Dental Officer attended approximately fortnightly to give treatment, including conservative, to pre-school children referred from welfare centres and day nurseries. Following treatment, children were recalled for inspection every six months. Inspection of all children over two years was carried out at the day nurseries twice yearly.

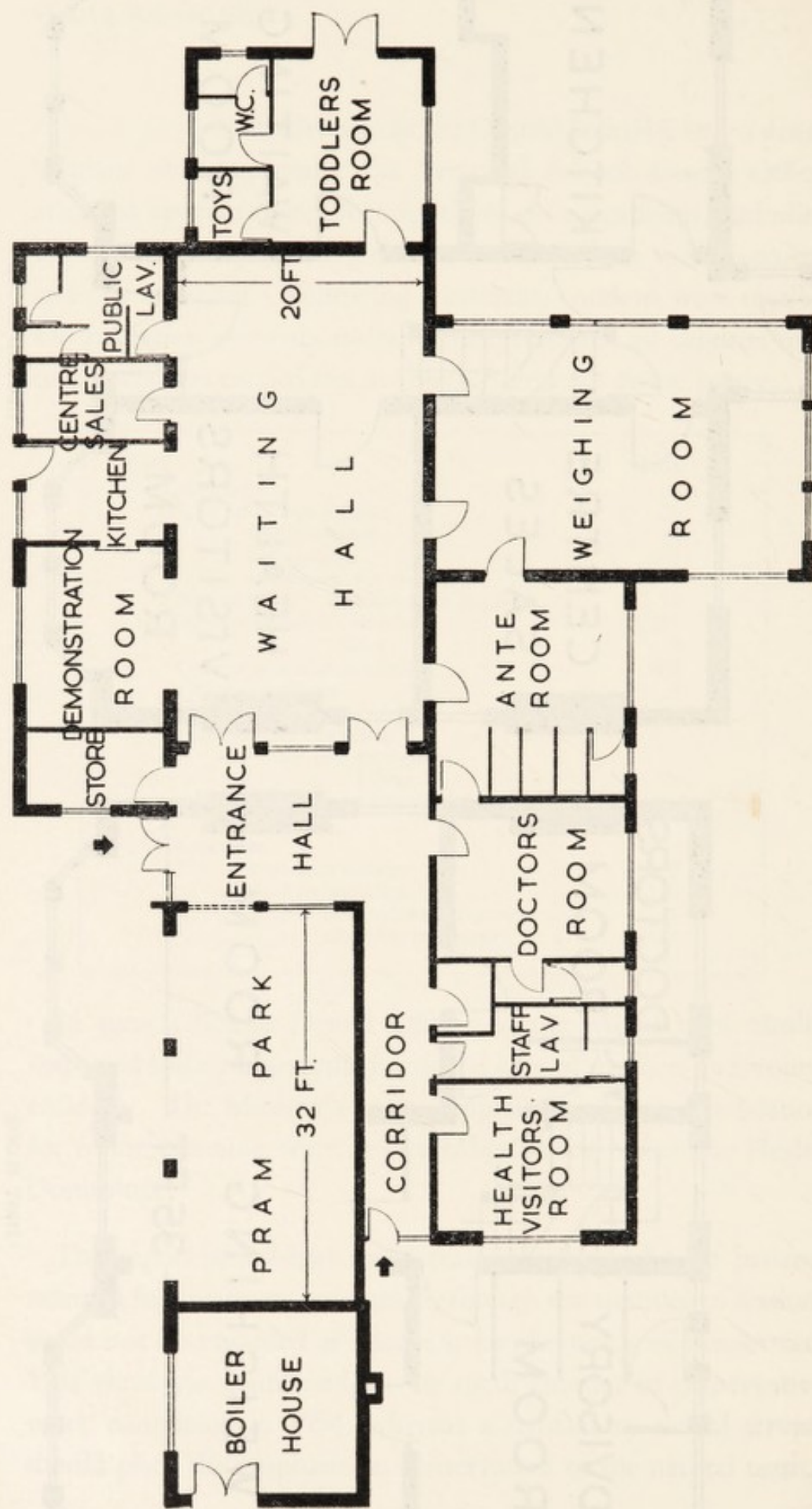
	1955
<b>Treatment :</b>	
No. of extraction sessions . . . . .	26
"  "  filling sessions . . . . .	1
"  "  cases treated . . . . .	501
"  "  attendances for treatment . . . . .	611
No. attended ; treatment not required . . . . .	16
Temporary teeth extracted . . . . .	1,213
"  "  filled . . . . .	9
General anaesthetics given . . . . .	580
Other procedures . . . . .	3
Of the 501 cases treated :	
496 cases had extractions.	
2 "  "  fillings.	
3 "  "  extractions and fillings.	
<b>Inspections :</b>	
No. of inspection sessions . . . . .	2
"  "  children inspected . . . . .	138
"  "  "  not requiring treatment . . . . .	112
"  "  "  requiring treatment . . . . .	26

In June a Senior Dental Officer of the Ministry of Health inspected the arrangements for dental care of mothers and young children. The Minister's critical appraisal and recommendation for future planning were in December placed before the Health Committee.

The report stated that an increase in the number of patients referred for treatment was noted, though the number of sessions could not be regarded as adequate for the needs of the service. This view was confirmed by the small amount of conservative work completed in 1954, whereas a satisfactory dental service should place the emphasis on conservation of the natural teeth,

ROSEBERRY HOUSE WELFARE CENTRE





WELFARE CENTRE, SNEINTON

The Minister recommended the Council to give consideration to integrating this service with the School Dental Service and arranging for the joint use of clinics. The greater use of local practitioners with a view to increasing sessions to six per week was suggested.

The present accommodation was considered unsatisfactory and the Council was urged to consider the acquisition of better premises and equipment, including that necessary for X-ray examination. In view, however, of present financial circumstances, the Council might wish to use the facilities at the Central School Clinic for the time being.

Finally, the Minister hoped that the Council would increase the amount of their propaganda in connection with dental health education.

**Consultant Clinics.** The number of children referred by medical officers of the City clinics to the weekly paediatric clinic at Huntingdon Street was 202.

At the monthly ear, nose and throat clinic, 96 children were examined. Of these 77 were recommended for operative treatment and 13 referred to hospital for further investigation. No immediate treatment was indicated for 6 children.

The number of children referred to the orthopaedic clinic was 103 ; of these 60% were sent for treatment of knock knees, flat feet and bow legs.

**Welfare Foods.** Arrangements continued for the distribution of dried milk and vitamin preparations available under the welfare foods scheme either from all infant clinic sessions or the central distribution office at Canning Circus.

Amounts distributed :

National dried milk—tins	..	..	194,985
Orange juice—bottles	..	..	221,868
Cod liver oil—bottles	..	..	37,492
Vitamin tablets—packets	..	..	17,636

**Transport.** Two health visitors were given a car allowance during the year, bringing the total to 7 and three other health visitors used Douglas Vespa auto-cycles provided by the Corporation. Such transport was invaluable where the nature of her work took the health visitor to all parts of the City.

### BIRTH CONTROL

The Nottingham Women's Welfare Centre held thrice weekly sessions at the Nottingham General Dispensary. A total of 83 women attended the centre on the recommendation of their family doctors and 868 on their own initiative.

The Corporation continued to give financial assistance for women referred from the Welfare and Chest Centres ; of 160 and 47 referred, 110 attended.

## ATTENDANCES AT WELFARE CENTRES.

	ANTE-NATAL AND POST-NATAL CLINICS						INFANT CLINICS				TODDLERS' CLINICS			
	No. of Sessions	New Cases	Return Visits	Post-Natal Visits	Total Attendances	Average per Session	No. of Sessions	New Cases	Attendances	Average Attendances	No. of Sessions	New Cases	Attendances	Average Attendances
Aspley ..	99	209	1,197	53	1,459	15	99	210	3,474	35	48	6	544	11
Bilborough ..	52	79	606	37	722	14	100	223	3,247	32	52	14	521	10
Basford ..	49	126	758	32	916	19	96	173	4,159	43	52	20	549	11
Bulwell ..	52	122	585	40	747	14	99	236	3,783	38	51	15	463	9
Edwards Lane ..	48	69	475	28	572	12	93	233	3,198	34	52	9	787	15
Huntingdon Street ..	100	417	1,865	73	2,355	24	95	341	3,892	41	52	36	588	11
Hyson Green ..	—	—	—	—	—	—	100	275	4,264	43	—	—	—	—
Jarvis Avenue ..	48	77	472	35	584	12	99	125	2,173	22	50	11	406	8
Lenton Abbey ..	—	—	—	—	—	—	52	46	1,027	20	—	—	—	—
Radford ..	152	485	2,527	181	3,193	21	152	604	7,138	47	61	73	1,130	19
Sneinton ..	99	188	1,206	69	1,463	15	100	368	3,882	39	54	47	622	12
Wilford Road ..	102	245	1,781	94	2,120	21	102	246	3,287	32	47	24	512	11
John Ryle H. C. ...	52	83	649	45	777	15	143	295	4,401	31	47	7	595	13
TOTALS ..	853	2,100	12,121	687	14,908	17.4	1,330	3,375	47,925	36	566	262	6,717	12
Consultant Clinic ..	52	440	408	42	890	17.1								

## DAY NURSERIES

The number of approved places in the 9 nurseries remained at 29 for children 0-6 months old, 106 for those 6 months-2 years, and 214 for children aged 2-5 years. Allowance was made for inevitable daily absences by maintaining on the register an additional number of children varying from 5-15% according to the nursery.

**Priority for Admission.** Social need was the sole criterion for admission and the small waiting lists ensured that applications requiring urgent help could be considered without delay. The demand for temporary accommodation was a little lower, being 9% of all admissions compared with 14% in 1954.

Reason for admission	1954	1955
Parent sole bread-winner .. ..	32%	34%
Family income insufficient .. ..	20%	25%
Parent disabled, chronic invalid or in prison	9%	10%
Bad housing conditions .. ..	19%	17%
Mother in employment, e.g., nurse, teacher ..	6%	5%
Temporarily accommodated on special requests .. ..	14%	9%

**Infectious Diseases.** Mild outbreaks of dysentery occurred at 3 nurseries—Pierrepont, Sycamore Road and Dowson.

At Pierrepont an outbreak started early in June and affected 7 children in the 1-2 years group, 1 student nursery nurse, and 2 home contacts in one family. No new admissions were permitted for one month.

In July an outbreak at Sycamore Road affected 15 children in the age group 1-5 years, 4 being under 2 years ; 2 staff were also infected and 4 home contacts in 3 families. New admissions were accepted in August when the nursery re-opened after the annual 2 weeks holiday.

At Dowson in December 7 children were found to be infected, 1 being over 2 years. No staff but 2 family contacts were affected. New admissions were still not accepted when the nursery closed for the Christmas holiday.

Measles commenced early in January in one nursery and by February affected four others. At the end of March all nurseries had cases reported. There were during this period 160 cases and attendances were considerably reduced. By the end of April only one nursery remained in quarantine.

No. of cases					
Measles .. .. .	..	..	..	..	163
Sonne dysentery ..	..	..	..	..	32
Chicken pox .. ..	..	..	..	..	30
Mumps .. .. .	..	..	..	..	14
Whooping cough ..	..	..	..	..	7
German measles ..	..	..	..	..	4
Scarlet fever .. ..	..	..	..	..	3
Poliomyelitis .. ..	..	..	..	..	1

**Attendances.** The total attendance of 63,422 was higher by 783 despite a small decrease in the 0-6 months age group. This represented, relative to the total places, an average daily attendance of 76.2%.

AGE GROUPS	Average daily attendance				
	1951	1952	1953	1954	1955
0 — 6 months ..	92	14	15	11	10
6 months — 2 years ..	92	71	73	86	86
2 years — 5 years ..	168	164	165	168	170
TOTALS .. .. .	260	249	253	265	266
Percentage total places ..	76.6%	73.2%	73.2%	75.9%	76.2%

**Charges.** Charges remained at a maximum of 5/- per day ; in case of hardship, a sliding scale operated down to a minimum charge of 1/- per day. A total of 180 applications for reduction of fees was made ; 169 were granted.

**Training Centre.** Students attended from the City, Nottinghamshire, South Derbyshire and North Leicestershire. They spent two days each week at the training centre and three days in the nurseries and nursery schools. All 40 students who sat the examination of the National Nursery Examination Board were successful, 37 passing at the first attempt. When the new course opened in September, 40 students started training, bringing the number attending the centre up to 85.

A medical officer of the Health Department staff continued to give 2 teaching sessions weekly at the centre.

**Training Nurseries.** From January to September there were 14 first and 15 second year students in the City training nurseries, and from September onwards 14 first and 16 second year, a total of 59 students.

## ATTENDANCES AT DAY NURSERIES

	ARNOLD ROAD			BELLS LANE			BULWELL			DOWSON			HEATHCOAT STREET			PIERREPONT			95 QUEEN'S DRIVE			RADFORD			SYCAMORE ROAD		
	A	B	C	A	B	C	A	B	C	A	B	C	A	B	C	A	B	C	A	B	C	A	B	C	A	B	C
JANUARY ..	12	170	366	9	225	302	17	162	379	-	137	422	32	257	233	36	150	406	26	255	189	-	188	411	19	244	341
FEBRUARY ..	18	123	294	4	274	377	20	185	427	-	146	295	62	294	270	40	128	429	41	230	249	-	172	421	9	94	264
MARCH ..	22	75	329	-	320	351	10	146	221	-	58	316	70	369	276	41	72	348	32	151	161	19	232	467	14	220	471
APRIL ..	12	118	373	-	176	236	5	156	294	-	139	405	60	184	199	9	126	377	43	219	225	44	79	236	12	249	420
MAY ..	19	163	470	9	168	368	16	186	339	-	154	430	60	250	325	5	127	486	20	256	253	40	206	388	-	258	513
JUNE ..	10	150	571	31	253	496	21	113	281	-	214	495	83	318	358	27	84	491	32	303	309	30	279	449	3	252	545
JULY ..	2	183	611	32	183	515	14	111	379	-	158	429	72	293	359	16	96	463	35	256	270	31	241	423	-	137	346
AUGUST ..	-	69	277	5	112	238	11	83	225	-	80	211	24	109	153	-	107	273	14	114	156	33	109	208	9	68	154
SEPTEMBER	4	180	592	-	259	394	20	187	458	-	188	464	102	261	272	-	248	554	40	291	294	58	257	456	65	243	462
OCTOBER ..	3	142	493	16	255	430	-	207	451	-	214	482	97	244	264	-	209	484	39	326	279	50	202	400	57	194	505
NOVEMBER..	15	138	586	4	256	477	-	243	543	-	213	495	99	343	320	7	166	569	40	286	217	54	319	508	76	185	559
DECEMBER ..	29	120	444	-	161	382	5	179	437	-	82	350	36	306	255	17	123	432	28	155	261	31	264	359	47	140	424
TOTALS	146	1,631	5,406	110	2,642	4,566	139	1,958	4,434	-	1,783	4,794	797	3,228	3,284	198	1,636	5,312	390	2,842	2,863	390	2,548	4,726	311	2,284	5,004
	7,183			7,318			6,531			6,577		7,309				7,146			6,095			7,664			7,599		

Age Groups  
AttendancesA : 0-6 months.  
" 2,481B : 6 months-2 years.  
" 20,552C : 2 years-5 years.  
" 40,389.

Total : 63,422.

## MOTHER AND BABY HOMES

For reasons outlined in the last report, the mothers and babies at Queen's Drive were transferred to The Hollies at the end of 1954. Applications for residential accommodation remained at a level sufficient to fill only one home, and in April, after careful consideration of all factors, the Health Committee decided that the Queen's Drive Home should be closed permanently.

The Hollies, with accommodation for 8 mothers and 6 babies, admitted 26 mothers during the year and 4 places were booked for 1956.

Emphasis continued to be laid on rehabilitation of the mother so that she and her child could take their place together in the community. The mothers remained until satisfactory employment and accommodation either with relatives in lodgings or a residential post were found. The average stay was  $7\frac{1}{2}$  weeks, a shorter time than previously brought about by the development of more intensive case work. The health of the mothers and babies throughout was satisfactory.

Mothers in the home 1/1/55 .. .. .	3
Admitted to the home .. .. .	26
Returned home with baby .. .. .	11
Went into lodgings with baby .. .. .	7
Domestic post with baby .. .. .	3
Left with baby to get married .. .. .	3
Baby stillborn .. .. .	1
Babies adopted .. .. .	2
Remaining in the home at 31/12/55 .. .. .	2

Four mothers expecting illegitimate children were accommodated in homes outside the City, one by reason of extreme youth.

St. Joseph's Roman Catholic Home, Barrowash ..	1
Quarry Maternity Home, Lincoln ..	3

**Illegitimate Children.** The Superintendent Health Visitor, who is responsible for assisting mothers expecting illegitimate children, interviewed 95 women with the outcome as follows :—

Admitted to Mother and Baby Home ..	22	
Awaiting admission to Home in 1956 .. ..	4	
Hospital confinement arranged .. ..	42	
Confinement at own home .. ..	6	
Homes outside City .. ..	4	
Left City before delivery .. ..	12	
Still under consideration .. ..	5	
	—	95

## PREVENTION OF ILLNESS, CARE AND AFTER-CARE

### NEEDS OF THE AGED

The service for the elderly followed the same lines as previously ; the first thought was to take such measures as would ensure that the old persons stayed in their homes.

While the numbers remained of the same order, it was possible to detect a trend towards referral at a somewhat earlier stage of deterioration. This trend was of great practical importance as only in the early stages could deterioration be effectively overcome.

There was a number of cases referred too late for rehabilitation to approach complete success. In some it was felt that zeal for reformation of life, habits and environment could perhaps be carried too far ; sometimes it appeared that the old people should be left in conditions which, however disagreeable they might be to the onlooker, yet were those to which they were accustomed and in which a degree of enjoyment was attained. Drastic measures were always avoided.

**Health Visiting Service.** The total number of visits for various purposes showed a great increase—a summary of these, with subsequent assistance arranged, is given opposite.

Source of report	1954	1955
General practitioners .. ..	55	69
Geriatric unit for after care .. ..	177	116
" " " sociological reports .. ..	88	40
Welfare Services Department .. ..	58	48
Relations and neighbours .. ..	77	80
Health Department .. ..	25	109
Clergy .. ..	3	—
Voluntary organisations .. ..	123	86
Health visitors .. ..	216	161
General Hospital .. ..	—	44
Total new visits .. ..	822	753
Re-visits .. ..	1,932	4,312
	2,754	5,065

Assistance arranged through	1954	1955
General practitioner .. ..	83	240
Home helper .. ..	189	334
Sanitary inspector .. ..	20	40
Convalescence .. ..	6	19
Housing Department .. ..	7	27
Welfare Services Department .. ..	55	74
National Assistance Board .. ..	77	97
Council of Social Service .. ..	14	46
Women's Voluntary Service—clothing .. ..	42	76
Blind Institute .. ..	9	16
Chiropody .. ..	28	59
Meals on wheels .. ..	21	37
Discussions with relatives .. ..	78	180
Total .. ..	629	1,245

The satisfactory arrangements for liaison with the City Hospital Geriatric Unit were further developed. The weekly visit to the hospital was extended to include the wards where, seeing patients who were shortly to be discharged or who were known before admission, a continuity of supervision was obtained. The exchange of information was of value in many cases.

Similar arrangements at the General Hospital were also found useful.

During the summer, with less pressure on hospital beds, sociological reports on patients on the Geriatric Unit waiting lists were not asked for.

**Chiropody.** The General Dispensary undertook at a weekly session foot treatment for a limited number of old people recommended by the Health Department. Transport to and from the Dispensary was an essential adjunct ; indeed, had it not been available, many old people would have been unable to attend.

There were 72 first and 347 subsequent attendances.

**Older People's Advisory Clinic.** The attendance at the Wilford Road Welfare Centre was on the whole disappointing. Altogether 22 patients attended and their subsequent visits numbered 40.

The need most frequently found was chiropody, for which about 50% were referred. Referrals were also made for home help and for social and housing problems. Some people were advised to consult their family doctors for minor ailments which were giving trouble ; those with serious complaints were already attended by their own doctor more or less regularly.

**Nuffield House,** an occupation centre for elderly psychiatric patients, was officially opened in May by Sir Geoffrey Gibbs, Chairman of the Governing Trustees of the Nuffield Provincial Hospitals Trust, from which a grant made possible this pioneer venture.

A house in Claremont Road was bought in 1954 ; alterations and adaptations were put in hand at once. These were mainly the installation of central heating, additional sanitary accommodation and such partitions and doors as were necessary as fire precautions. Redecoration was carried out in the modern idiom, with bright paintwork and contrasting walls. The furniture, too, was modern, mainly in light oak.

The full complement of 40 old people was not reached by the end of the year ; at the outset, there was a deliberate slowness in admitting so that the members could get to know one another and form a stable group. It was found, somewhat unexpectedly, that only about a third of those recommended to the club did, in fact, come regularly. Of these, some came two days a week and some the full five days.

The occupations showed considerable variety ; the most popular were woodwork, rugmaking, basketry and knitting. The quality and quantity of output improved throughout the year.

The following figures give an indication of the first eight months' work :—

Age	Up to 64	65-74	75 +	Total
Men ..	3	4	5	12
Women ..	2	12	6	20

The script of the brochure prepared for the opening ceremony is reprinted below.

#### TEXT OF BROCHURE

**Nuffield House** is the outcome of the thoughts of the Nuffield Provincial Hospitals Trust, the Nottingham Area No. 3 Hospital Management Committee and the Corporation of the City of Nottingham.

It provides a daily centre—the first of its kind—for older people, especially those in whom some degree of mental breakdown has been present and in whom stability has been restored.

The Trust generously gave the capital cost for the premises and have promised a maintenance grant for 3 years, thereby demonstrating its fundamental interest in pioneer work, particularly insofar as it relates to mental health. In this field an important role is played by the Sheffield Regional Hospital Board and the Nottingham Area No. 3 Hospital Management Committee.

The building has been acquired by the Corporation and adapted for the present purpose. As local health authority the Corporation are directly interested in the health and well-being of older people and this establishment will enable them to extend their activities in this respect.

#### DESCRIPTION OF THE CENTRE

**Exterior.** The Centre is a two storeyed, detached house situated in rather less than an acre of ground and lying between Claremont Road and Ebury Road with access from both. About two-thirds of the grounds consist of lawns with decorative shrubbery ; the remainder provides a kitchen garden and 6 small individual gardens.

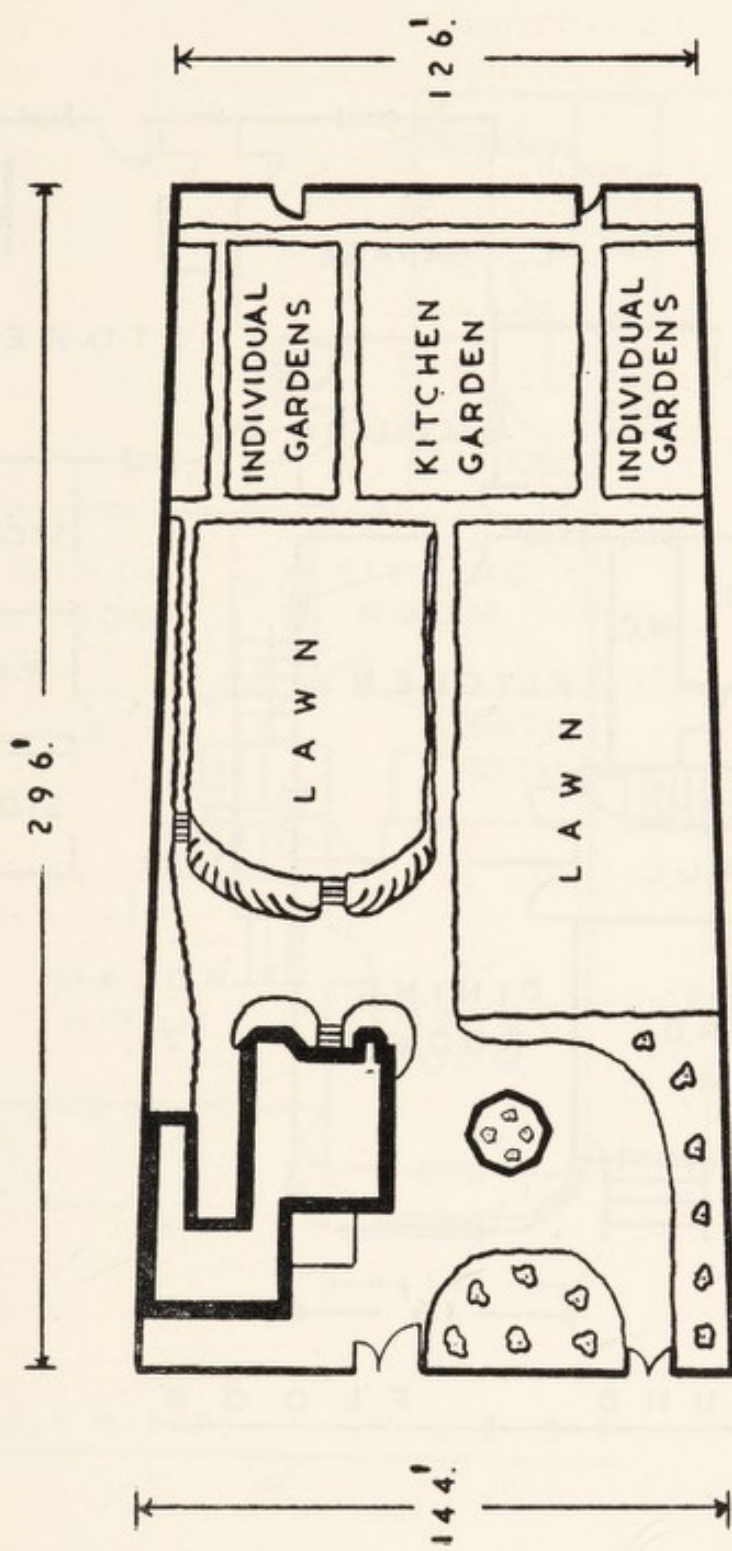
The paths in the grounds will permit of a degree of graded exercise and have received names, as have certain rooms in the house, related to the successful enterprises of Viscount Nuffield throughout his unique career.

**Interior.** The house was a spacious late-Victorian residence, disposed on two floors, which embraced two reception rooms, dining room, kitchen, four bedrooms and attached staff quarters.

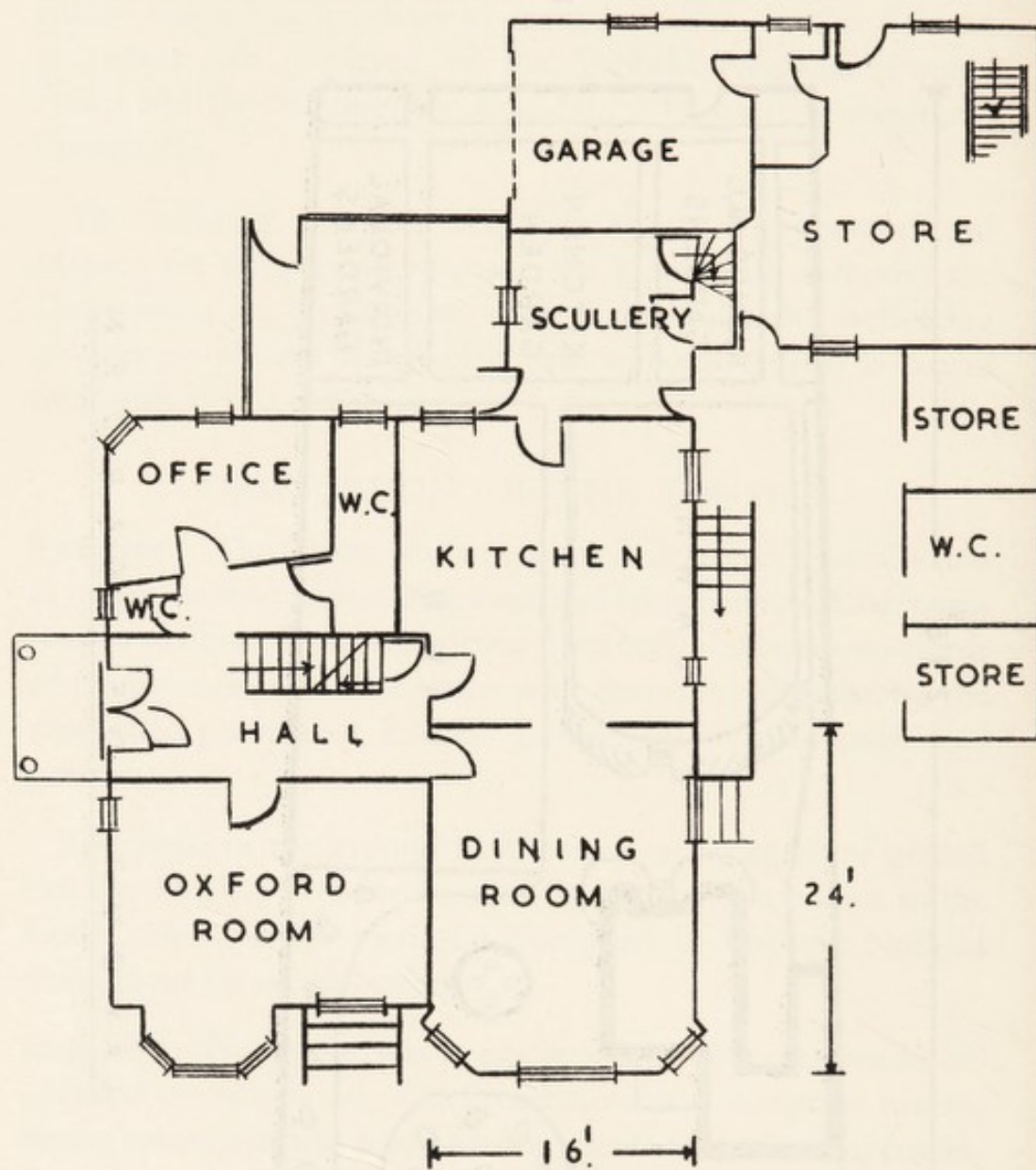
After adaptation, the ground floor affords a large work room, dining room with accommodation for 20 people, a correspondingly large kitchen suitably equipped and an office.

On the first floor there are two large work rooms and a somewhat smaller recreation room.

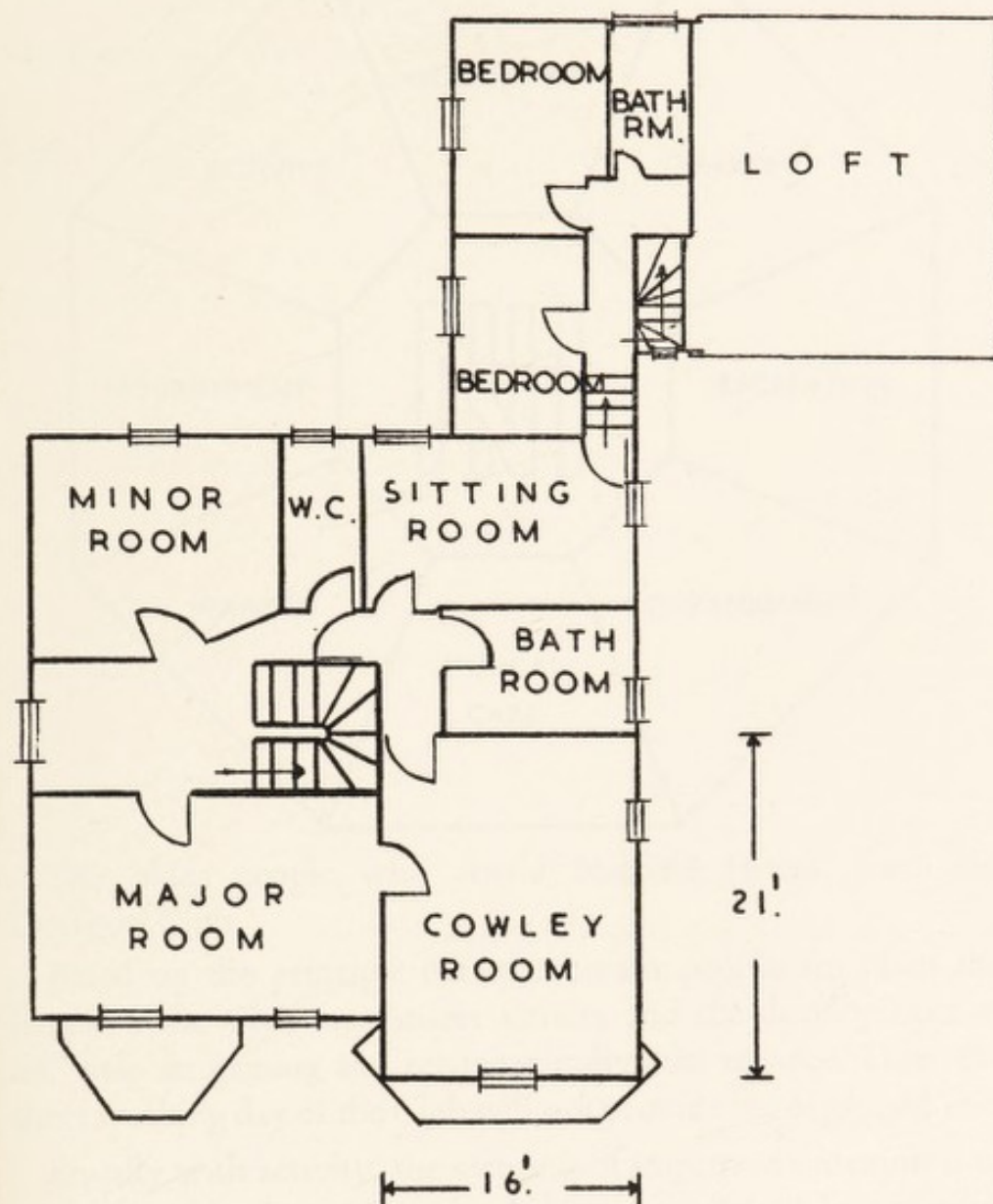
A new central heating plant has been installed.



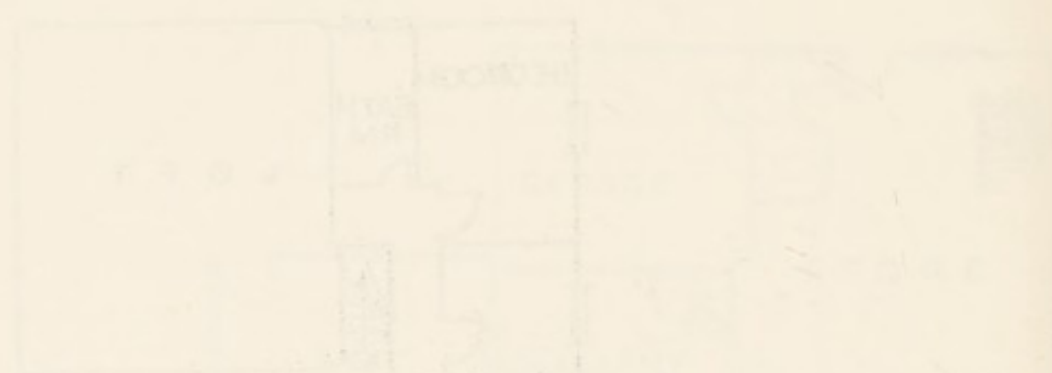
L A Y O U T   O F   G A R D E N



GROUND FLOOR



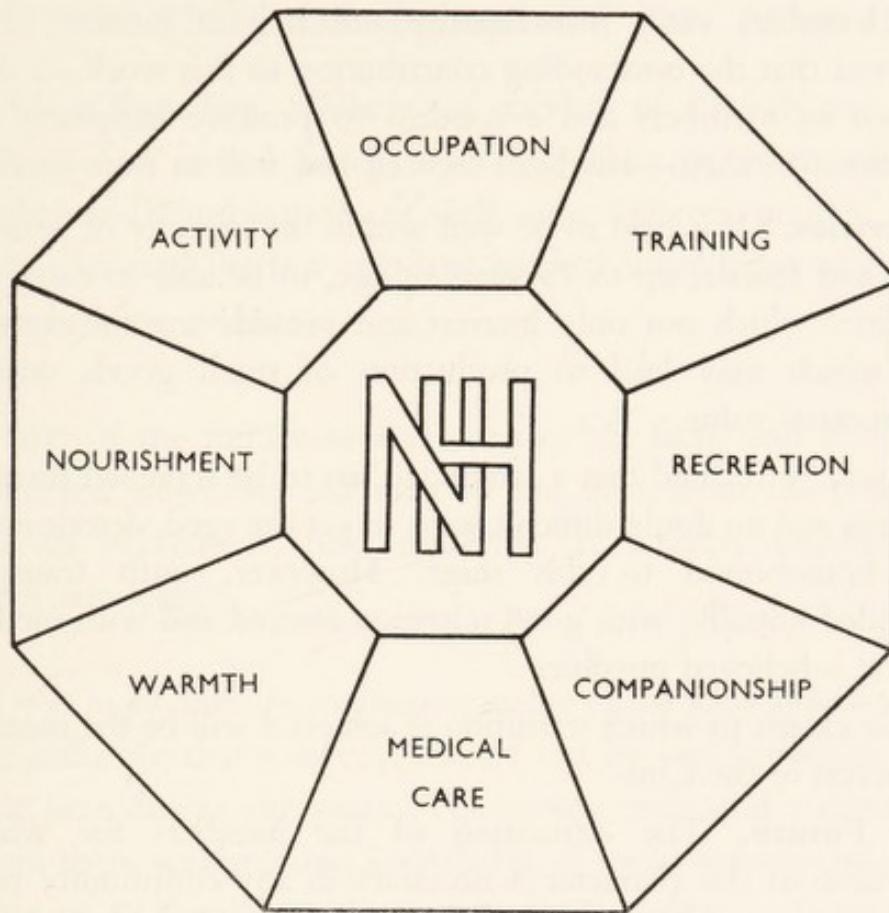
F I R S T F L O O R



Scale 1/4" = 1'-0"

FIRST FLOOR

### THE OCTAGON CLUB



The older people who attend Nuffield House, form the Octagon Club.

Based on the principle that the busiest people are often the happiest, the Club emphasizes activity and the development of self help in gaining and retaining individual reliance. Thus, the short working day of the Club will not provide for organised rest.

Equally with activity, the securing of improved nutrition is of outstanding importance, and a balanced meal will be regarded as a major event in the day's programme.

That training and a degree of competition will be necessary to achieve suitably directed activities is recognised, whilst the intrinsic value of such a Centre will be companionship and interesting occupation.

**The Rôle of the Staff.** One of the most important factors will be the success of the staff of three working as a team to

produce and apply ideas—if necessary unorthodox—which will lead members away from apathy and lack of interest. It is believed that the outstanding contribution to this work—a deep interest in members and a concern to produce happiness and usefulness in them—has been secured and will in time succeed.

**Activities.** It is held to be well within the capacity of persons, male and female, up to 75 years of age, to be able to carry out activities which not only interest and provide mental exercise, but which may lead to production of small goods with a commercial value.

It will be realised that a long road has to be travelled through devious and no doubt difficult ways to get the aged, deteriorating and housebound to this stage. However, with transport provided initially, with good nutrition assured and with medical care, it is believed possible.

The extent to which transition is achieved will be the measure of success of the Club.

**The Future.** The estimation of the numbers for whom provision of this character is necessary in any community tends to be inaccurate, but it is known that the proportion is high and the actual numbers considerable. With this in mind it is inevitable that, assuming the satisfactory development and smooth working in due course of a complex scheme of arrangements, the extension of the principle to influence as many old people as possible must be considered.

It is intended that though the accommodation of the Centre as judged by the number of mid-day meals which can be provided is about 40, membership of the Club will be extended to 100 or more members, who will attend for just so much as is necessary to enable them to attain self respect and to avoid becoming a liability to the community.

The extent to which the influence of a club of this kind can be spread to those who can benefit by it, will be a measure of the Authority's success in their efforts to resolve the complex problems of the old person.

## PREVENTION OF BREAK-UP OF FAMILIES

**Problem Families.** Where the stability of a family as a unit is threatened several factors operate. They occur in varying number and combinations as well as at different periods, each tending toward the low standard reached when signs of breakdown become evident.

Some of the influences are known, but facts, and therefore considered views, are still sketchy and thus, from the point of view of prevention, field measures are scarcely beyond the embryonic stage.

It was in an attempt to discover more of the facts and to assess their influence that a survey, carried out by health visitors, was made here during the year. The survey embraced a group of whom there was previous knowledge of social deficiencies, consisting of 49 families with a total of 277 children. It was not claimed that the main indications from the study provided conclusions, but there was some confirmation of findings in other areas and some direction emerged for subsequent investigation.

In more than half the group the family was in excess of 8 members. Many mothers and some fathers were of poor mentality and poor housing conditions appeared on occasions to be linked with ill-health of the mother. In nearly one fifth the 'parents' were not married.

Statutory and voluntary agencies for children had knowledge of many cases—Education Department, Children's Department, National Society for the Prevention of Cruelty to Children, etc., etc.

Textiles, household necessities, etc., it was found were provided from the Women's Voluntary Service and the Council of Social Service, and in about one third the family income was supplemented by the National Assistance Board.

**Families in Difficulty.** Of those in difficulties a few needed outside help to overcome the crisis, particularly when the mother was ill. In these cases the Home Help Service was of particular value, and 65 families were so assisted, thus enabling the children to remain in the family circle.

Illness or inadequacy of the mother in 8 instances complicated a family situation already precarious and the home helper was called by for example, Probation Officers, School Welfare Officers, National Assistance Board, or National Society for the Prevention of Cruelty to Children.



For further investigation a committee was set up with representatives of the various services concerned in the Health Department—health visitor, social worker, mental health worker, organiser of the home help service, sanitary inspector, etc. The committee was set up under the chairmanship of a medical officer with the broad mandate of present and future ascertainment of families whose social needs are more repeated and persistent than the average, to report on procedures, both routine and special, to be applied to actual problem families and, above all, to recommend preventive measures capable of practical application.

## TUBERCULOSIS

**Work of Chest Centre.** A downward trend in the incidence of tuberculosis was shown by the reduction in the number of contacts found to be tuberculous.

Year	New cases confirmed	Contacts examined	Found tuberculous	
			No.	Percentage
1949 ..	581	924	34	3.7
1950 ..	517	858	29	3.4
1951 ..	506	1,087	28	2.6
1952 ..	459	2,138	34	1.6
1953 ..	534	2,171	35	1.6
1954 ..	428	2,172	30	1.4
1955 ..	386	2,630	16	.608

**Bacille - Calmette - Guerin Vaccination.** Regular sessions were held for the investigation of child contacts and, where necessary, for vaccinations, of which 630 were carried out.

**Re-housing.** The Committee met approximately every 4 weeks to consider applications for re-housing of tuberculous families. The re-housing was speedily accomplished except in those families who preferred to go into older houses at a cheaper rent.

**Care Committee.** Both the number of patients referred and the items of help given showed an increase. Grants decided at the weekly meeting included milk at a reduced rate, loans of bedding and equipment and domestic help; all other forms of help were arranged by the social worker.

	1954	1955
Milk at reduced rate .. ..	333	310
Referred to National Assistance Board for allowances .. ..	326	313
Loan of bedding .. ..	127	182
„ „ nursing equipment .. ..	157	155
Home Help Service	51	56
Domestic help { Other help .. ..	15	11
Clothing provided .. ..	74	107
Employment arrangements .. ..	144	161
Training course .. ..	27	33
Convalescence .. ..	13	17
Other matters .. ..	135	161
<b>TOTAL .. ..</b>	<b>1,402</b>	<b>1,506</b>

Co-operation was maintained with the National Assistance Board who helped with supplementary allowances, clothing and bedding grants.

The Ministry of Labour was helpful in finding suitable employment for patients returning to work, and, if necessary, periods of rehabilitation or training were arranged.

Valued assistance from the Children's Department was continued, so that mothers were able to accept sanatorium treatment without worrying about their children.

Free loan of nursing equipment was continued ; an important provision for patients nursed at home.

The Home Help Service did good work in helping patients living alone, or in families where the mother was ill. Where a helper was not available, the Care Committee continued to make small allowances to friends and neighbours for their help.

Seventeen patients were referred for convalescence and of these six went away and made good progress. The remainder were either found to be unsuitable or returned to work before a vacancy was available.

## TUBERCULOSIS REGISTER

	PULMONARY			NON-PULMONARY			Total		
	Adults		Child- ren	Adults		Child- ren	1955	1954	1953
	M.	F.		M.	F.				
Cases B/Fwd. ..	1,390	1,602	468	34	106	73	3,673	3,786	3,587
Transfers from other areas ..	8	20	—	1	6	—	35	58	52
"Lost" cases returned ..	3	—	—	—	—	—	3	9	6
	1,401	1,622	468	35	112	73	3,711	3,853	3,645
NEW CASES ..	196	135	35	3	13	4	386	428	534
	1,597	1,757	503	38	125	77	4,097	4,281	4,179
Cases written off ..	151	122	58	7	9	10	357	608	393
	1,446	1,635	445	31	116	67	3,740	3,673	3,786
Children becoming adults ..	+8	+20	—28	+1	+6	—7			
Cases on Register at end of year ..	1,454	1,655	417	32	122	60	3,740	3,673	3,786
DETAILS OF CASES WRITTEN OFF :—									
Recovered .. .. .	..	..	..	..	..	..	161	237	149
Deaths .. .. .	..	..	..	..	..	..	69	89	110
Transferred to other areas or lost sight of .. .. .	..	..	..	..	..	..	92	282	134
DEATHS :—									
Total No. .. .. .	..	..	..	..	..	..	69	89	110
Rate per 1,000 population—Pulmonary .. .. .	..	..	..	..	..	..	0·21	0·28	0·33
do. — All forms .. .. .	..	..	..	..	..	..	0·22	0·28	0·35
Average Rate per 1,000 population for past 10 years—									
Pulmonary .. .. .							0·46		
do. — All forms .. .. .							0·49		
EXAMINATION OF CONTACTS :—									
No. of contacts examined clinically and radiologically	2,630	2,172	2,171						
do. found to be tuberculous .. .. .	16	30	35						
Percentage .. .. .	·6	1·4	1·6						
WORK OF THE TUBERCULOSIS HEALTH VISITORS :									
No. of visits paid to patients' homes .. .. .	15,236	14,012	12,677						

## LOAN OF NURSING EQUIPMENT

## ' Small ' Items

Article	From Home Nursing Service			From Chest Clinic		
	1953	1954	1955	1953	1954	1955
Air Rings .. ..	421	484	516	33	43	25
Bed pans .. ..	567	682	812	18	20	15
Back Rests .. ..	224	277	343	22	39	36
Barrier Outfits .. ..	490	567	577	—	—	—
Cradles .. ..	50	72	83	1	1	1
Crutches .. ..	10	10	20	—	—	—
Draw sheets .. ..	186	213	123	—	—	—
Feeding cups .. ..	54	36	35	—	—	—
Incontinent gowns .. ..	40	49	27	—	—	—
Infectious Outfits .. ..	35	45	45	—	—	—
Mackintosh sheets .. ..	517	705	860	13	29	18
Midwifery Outfits .. ..	—	—	19	—	—	—
Sorbo Cushions .. ..	73	117	159	3	1	4
Syringes 5cc. .. ..	490	475	506	—	—	—
Syringes 2cc. .. ..	35	43	21	—	—	—
Urinals .. ..	242	317	376	11	22	13
TOTALS .. ..	3,434	4,092	4,522	101	155	112

## ' Large ' Items

Article	Issued from					
	Health Services Store			Chest Clinic		
	1953	1954	1955	1953	1954	1955
Air Beds .. ..	8	3	2	1	—	—
Bed Tables .. ..	6	3	3	5	10	2
Bedsteads .. ..	23	52	40	21	26	30
Commodes .. ..	38	85	75	1	2	—
Elbow Crutches .. ..	—	—	1	—	—	—
Invalid Chairs .. ..	84	104	108	10	6	8
Mattresses .. ..	35	63	48	25	35	40
Spinal Carriages .. ..	7	—	2	—	—	—
Walking Aid .. ..	—	—	1	—	—	—
Walking Tripods .. ..	—	1	—	—	—	—
TOTALS .. ..	201	311	280	63	79	80

## CONVALESCENCE

Of the 181 patients referred by general practitioners, convalescence was arranged for 116. Some of the remaining 65 were referred to the Nottingham Co-operative Society which has a convalescence scheme for members, or to the Nottingham Council of Social Service, while others withdrew their application or were unable to accept the arrangements made.

Selection of all patients was made, after discussion of individual cases with the general practitioners concerned, so that those patients most likely to benefit from convalescence received financial assistance. About 20% of the patients assisted were recovering from mild mental disturbances and as such were not eligible for admission to Regional Hospital Board homes.

Financial assistance was given to 33 patients :

Maintenance and fares	..	..	31
„ only	..	..	2

In addition, 5 paid the whole cost themselves. The normal period of convalescence was two weeks and this year extensions were allowed in 4 cases.

It was possible to increase the care given to some on their return to ensure their re-adjustment to home conditions. A number of these patients were elderly people living alone and loneliness had played a part in aggravating their illness. After their physical improvement in the convalescent home, the social worker sought for means to relieve the loneliness, such as an introduction to a club or arranging for a voluntary visitor.

## Comparative figures of admissions arranged 1953-1955 :—

Name of Convalescent Home	1953	1954	1955
<b>Regional Hospital Board Homes.</b>			
<i>Sheffield Region :</i>			
Carey House, Skegness—Women .. ..	45	51	53
Seely House, Skegness—Men .. ..	25	14	17
Burley Auxiliary Hospital .. ..	—	4	—
Sheffield Works' Convalescent Association, Claremont House for Women—Matlock ..	—	—	6
<i>Oxford Region :</i>			
Freeland House .. ..	—	1	—
<i>East Anglia Region :</i>			
Suffolk Convalescent Home, Felixstowe ..	2	2	—
<i>Leeds Region :</i>			
Ilkley Convalescent Hospital .. ..	—	—	1
<i>South East Metropolitan Region :</i>			
Thomas Lye Convalescent Home, Brighton ..	—	3	—
Birchington on Sea Diabetic Convalescent Home ..	—	1	—
<i>South West Metropolitan Region :</i>			
Walton-on-Thames .. ..	—	—	1
TOTAL .. ..	72	76	78
<b>Independent Homes.</b>			
Hunstanton Convalescent Home .. ..	6	14	9
West Hill Convalescent Home, Southport ..	2	7	5
Sheffield Works' Convalescent Association Claremont House for Women, Matlock ..	3	1	3
Stubben Edge Hall for Men, Ashover .. ..	3	4	1
Evelyn Devonshire Home, Buxton .. ..	—	2	4
George Woofinden Home, Mablethorpe .. ..	—	2	12
All Saints, Eastbourne .. ..	2	2	—
John Howard Convalescent Home, Brighton ..	—	2	—
St. Joseph's Convalescent Home, Bournemouth ..	—	2	—
Boarbank Hall, Grange-over-Sands .. ..	—	4	1
Charnwood Forest Children's Convalescent Home, Loughborough .. ..	—	1	1
Seabright Convalescent Home, St. Anne's ..	—	1	1
Thomas Banting Memorial Home, West Worthing ..	1	—	—
St. Michael's Convalescent Home, Clacton-on-Sea ..	—	—	1
TOTAL .. ..	17	42	38

**Reasons for Convalescence.** Comparative figures for the last three years :—

Type of Disease	Patients sent to Regional Hospital Board Homes			Patients sent to Independent Homes		
	1953	1954	1955	1953	1954	1955
Respiratory .. ..	16	16	23	8	9	4
Cardiovascular .. ..	13	6	8	2	6	7
Digestive .. ..	12	5	13	2	3	3
Nervous and cerebral .. ..	1	9	3	1	5	8
Urinary .. ..	1	1	3	1	1	2
Reproductive .. ..	5	1	5	—	2	—
Skin .. ..	—	4	3	—	1	2
Rheumatic .. ..	6	5	8	1	3	3
Injury .. ..	2	5	1	—	—	—
General debility .. ..	14	21	4	2	11	8
Endocrine — Thyroid .. ..	2	—	1	—	1	—
Diabetic .. ..	—	3	5	—	—	—
Others .. ..	—	—	1	—	—	1

## HEALTH EDUCATION

This work under the administrative guidance of a senior medical officer and the overall supervision of the deputy superintendent health visitor, increased. Much of it was undertaken by health visitors, while sanitary inspectors also undertook talks to schools and adult organisations.

At welfare centres, group teaching in the form of ten-minute talks, continued at all ante-natal clinics ; health visitors with midwives undertook the mothercraft teaching at relaxation classes. At infant and toddler clinics a monthly programme of topics was followed and there was an increase in the number of talks given. In November mothers' clubs were started at Rosebery House and Sneinton welfare centres and the response was excellent. Whilst the basic aim was the promotion of health education, sewing and cookery classes under selected teachers were provided and voluntary workers were important members of the group.

Mothercraft classes at the Firs Maternity Hospital continued to be given by health visitors at one ante-natal clinic and at the evening relaxation class. At the City Hospital individual advice on baby care was given at one of the post-natal clinics.

An increasing demand for lectures by schools, youth and adult organisations was met. In the latter group, 43 lectures covering a wide variety of subjects were given ; 25 by health visitors and 18 by sanitary inspectors.

**In-Service Training.** Two health visitors attended the summer school of the Central Council for Health Education at Bangor and subsequently showed enthusiasm, not only in accepting lecture engagements, but also in adding to the steadily increasing stock of visual aids,

In June a two-day course on 'Human Relations' was conducted by Dr. Dalzell Ward and Dr. Emrys Davies of the Central Council for Health Education. Altogether 60 members of Departments of the Health Services attended.

A course of 6 sessions on the technique of public speaking was held in July and 20 members attended from health visitor, midwifery and sanitary inspector staffs. This proved of great value and further courses will be arranged.

**Welfare Foods Distribution Centre.** The position of this centre on the Canning Circus made it an important point for disseminating information to the general public. A monthly window display of topical health projects was maintained.

**Monthly Subjects**

January	Welfare foods.	July	Beach dangers
February	Home accidents	August	Food poisoning
March	Atmospheric pollution	September	Rats and mice
April	Food health	October	Coughs and sneezes
May	Care of the teeth	November	Smoke abatement
June	Fly menace	December	Home accidents

## IMMUNISATION AND VACCINATION

The establishment of a new routine following considerable change last year was one of the main concerns. Combined immunisation against diphtheria and whooping cough was accepted by parents of infants, as was B.C.G. vaccination against tuberculosis by parents of 13 year old schoolchildren. Vaccination against smallpox was still declined for the majority of infants.

### COMBINED IMMUNISATION AGAINST DIPHTHERIA AND WHOOPING COUGH

Combined immunisation against diphtheria and whooping cough was available at all welfare centres in the infant clinics. Immunisation was offered to the parents of all babies beginning at the age of four months. The response was good and by the age of one year 57% had completed a course of three injections. In many cases immunisation was carried out by the family doctor and the result of the joint effort shows clearly in the tables.

Combined Immunisation			
Carried out by General Practitioners	..		1,566
Under Health Department arrangements	..		2,018
TOTAL	..	..	3,584

Although combined immunisation was advised at the age of four months, older children were not excluded if they had not already begun a course against diphtheria only. Whooping cough immunisation alone was not provided at the Centres, but if desired was carried out by the family doctors.

It is too early to estimate the effect of combined immunisation on the incidence of whooping cough, but it is hoped that the reduction in the number of cases to 566 as compared with over a thousand in each of the five previous years may be significant.

**Immunisation against Diphtheria.** Since the introduction of combined immunisation, the need for that against diphtheria alone was reduced. There was, however, a small demand and regular sessions were held at six centres. These will be continued as long as necessary.

Schools were visited by a medical officer and nurse regularly. Each year, special attention is paid to primary and junior schools and every third year the secondary modern and grammar schools are included. These triennial visits began in the autumn term of this year and in the few schools that were visited the response was quite satisfactory.

In all schools "booster" doses or courses of primary immunisation were given as necessary.

The following figures refer to immunisation against diphtheria including the figures both for combined immunisation and diphtheria alone.

## ANALYSIS OF IMMUNISATIONS

## Numbers carried out

	Primary Immunisations				Re-inforcing Injections	
	Pre-school children	School children	Under Health Dept. arrangements	*By General Practitioners	Under Health Dept. arrangements	*By General Practitioners
1950 ..	4,106	544	4,175	475	2,156	34
51 ..	3,907	860	4,026	741	3,267	80
52 ..	3,686	1,206	4,102	790	4,871	142
53 ..	3,609	779	3,182	1,206	3,418	143
54 ..	3,436	753	2,525	1,664	3,161	227
55 ..	<b>4,390</b>	<b>1,001</b>	<b>3,723</b>	<b>1,668</b>	<b>3,540</b>	<b>218</b>

\* Those cases for which a record card was sent to the Health Department.

## Progressive totals of children fully immunised at 31st December

	0—5 years		5—15 years		0—15 years	
	No.	Percent.	No.	Percent.	No.	Percent.
1950 ..	15,467	55	35,220	82	50,687	71
51 ..	15,513	55	36,203	84	51,716	73
52 ..	14,562	52	38,593	90	53,155	75
53 ..	14,198	53	39,752	86	53,950	74
54 ..	13,761	53	40,731	87	54,492	75
55 ..	<b>14,481</b>	<b>57</b>	<b>42,063</b>	<b>88</b>	<b>56,544</b>	<b>77</b>

## Numbers and percentage of children immunised

	Estimated population	Children immunised	Percentage immunised
Age 0—1 year ..	5,060	3,356	66
„ 1—5 years ..	20,340	11,125	55
„ 5—15 years ..	47,600	42,063	88
Age 0—15 years ..	73,000	56,544	77

## NUMBERS OF CHILDREN IMMUNISED ANNUALLY 1947 — 1955

AGE	1947	1948	1949	1950	1951	1952	1953	1954	1955	Total No. of Children Immunised	Percentage of Child Population Immunised since 1941
Under 1 year	27	264	326	218	321	395	514	649	3,356	0 — 5 years 14,481	Estimated Population 0 — 5 years = 25,400  Percentage immunised = 57
1 Year +	2,614	3,759	3,043	2,809	2,900	2,715	2,548	2,321	688		
2 Years +	601	807	564	412	470	344	323	227	169		
3 Years +	121	180	261	184	113	128	126	78	101		
4 Years +	90	137	180	178	103	104	61	82	76		
5 Years +	279	346	321	305	279	283	224	285	330	5 — 15 years 42,063	Estimated Population 5 — 15 years = 47,600  Percentage immunised = 88
6 Years +	214	362	351	287	205	220	232	257	275		
7 Years +	138	182	155	112	68	79	99	128	161		
8 Years +	126	191	69	60	38	106	63	66	106		
9 Years +	120	151	60	13	22	131	71	30	31		
10 Years +	97	111	36	25	26	138	61	22	29		
11 Years +	73	69	31	18	15	103	61	16	31		
12 Years +	75	49	32	11	77	36	3	8	11		
13 Years +	—	73	16	5	59	40	1	6	7		
14 Years +	—	—	28	7	45	30	1	11	14		
15 Years +	—	—	—	6	26	28	—	3	6		
Total	4,575	6,681	5,473	4,650	4,767	4,892	4,388	4,189	5,391		

### VACCINATION AGAINST SMALLPOX

Vaccination sessions were held at nine centres which was an increase of three in previous years. This improved the facilities for families living in outlying districts and it is expected that the effect will be reflected in future reports.

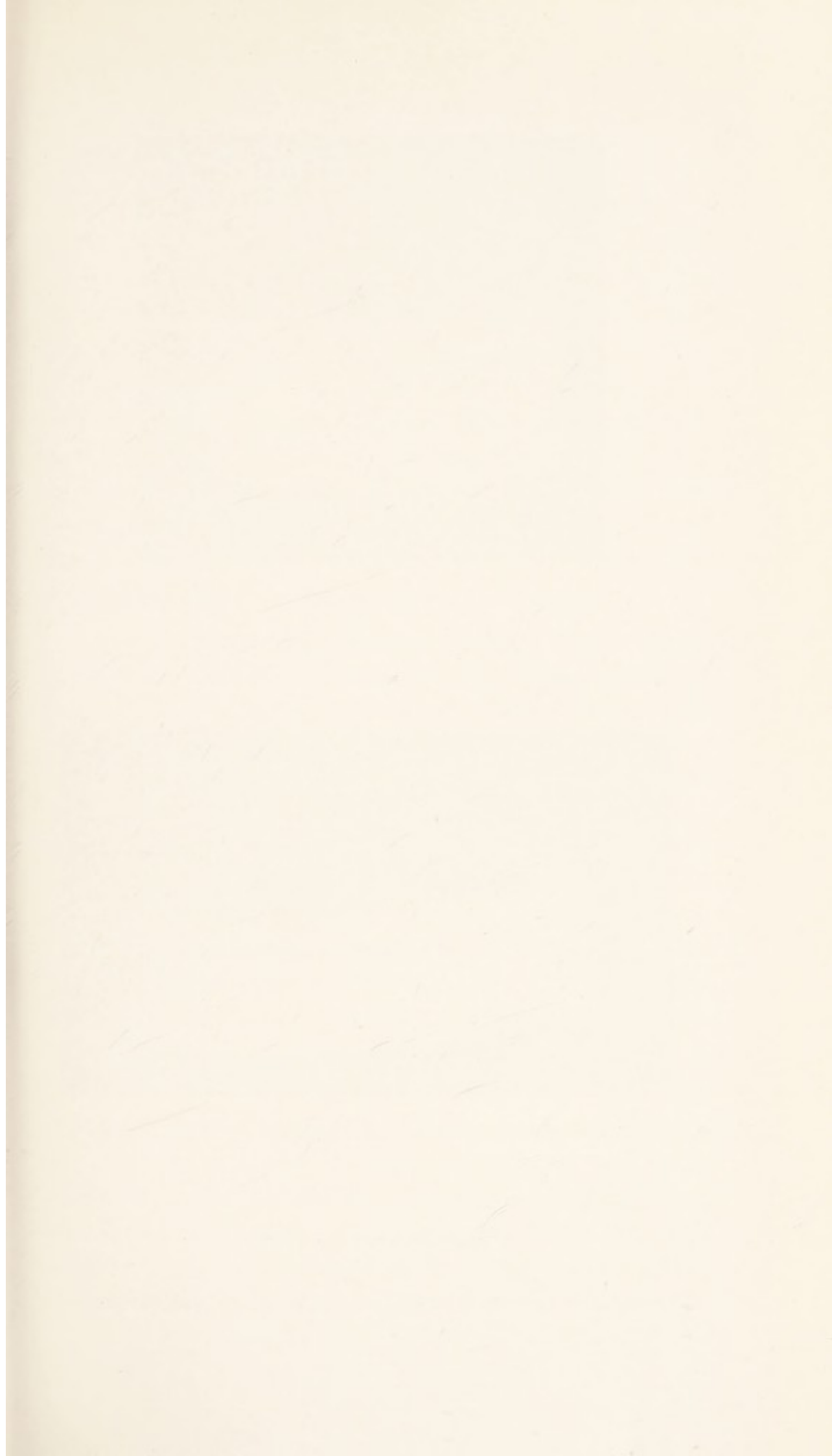
Following the issue of Ministry of Health Circular 6/55, arrangements for vaccination of staff at the Coppice and Mapperley Hospitals were requested. A medical officer visited each hospital and 75 vaccinations were performed.

### ANALYSIS OF VACCINATIONS

	Numbers of Persons						
	Age at 31.12.55					By General Practi- tioners	Under Health Dept. arrange- ments
	Under 1 yr.	1—4 yrs. incl.	5—14 yrs. incl.	15 yrs. & over	Total.		
Primary Vaccination	1,143	218	45	166	1,572	762	810
Re- Vaccination	—	10	34	400	444	287	157

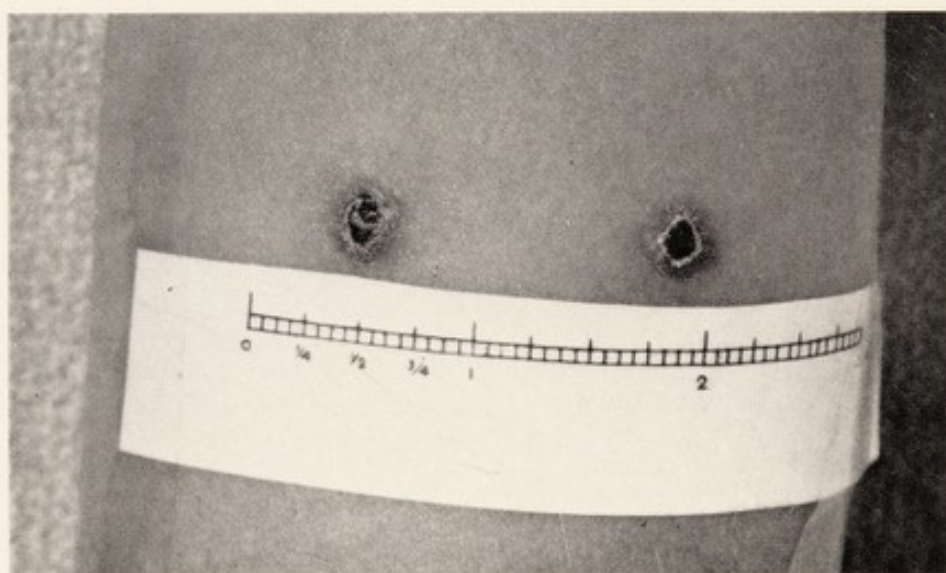
### INFANT VACCINATION

	Primary Vaccinations under 1 year of age	Percentage of births during same period
1951	2,135	41·8
1952	1,992	39·4
1953	2,056	39·4
1954	1,971	37·9
<b>1955</b>	<b>1,143</b>	<b>22·6</b>





POSITIVE MULTIPLE PUNCTURE REACTION



B.C.G. VACCINATION AT HEIGHT OF REACTION

MEASUREMENTS SHOW INCHES

**B. C. G. VACCINATION OF SCHOOL CHILDREN**

B.C.G. vaccination against tuberculosis of thirteen year old boys and girls has now been available for eighteen months. On the whole the organisation of the scheme was unaltered but there were changes in the technique.

The arrangements in force were briefly as follows. After parental consent for testing and vaccination had been obtained, each child had a Mantoux test on the left forearm, which was read three days later. Those whose reaction was negative were vaccinated on the left upper arm and the positive reactors referred for chest X-ray. Eight weeks later the site of vaccination was inspected and retesting took place.

Previously an intradermal Mantoux test using P.P.D.1/1000 was performed. In the summer, Heaf's Multiple Puncture Technique was introduced using P.P.D. 2.0 mg/ml. The test was pleasanter for the children as it was performed more rapidly and the absence of a syringe and needle was more acceptable. The result of the test was somewhat more easily interpreted and the evidence of a positive reaction remained long enough to avoid retesting of absentees in many cases. A clearly positive result has been photographed and is shown opposite. After vaccination, there was rarely a negative result whereas this was frequently the case with the weaker 1/1000 solution. This obviated the need for retesting with a greater strength which was impracticable when dealing with large numbers.

The dose of vaccine was administered in two parts about  $1\frac{1}{2}$  inches apart. The local reaction was considerably less than when injected at one site while the conversion rate was equally satisfactory. The appearance of the reaction at eight weeks is also illustrated opposite. The photograph shows the raised edge encircling a scab which falls off leaving a pink depressed scar which fades in the course of time and becomes inconspicuous.

All positive reactors to the preliminary test were referred to the Chest Radiography Centre. This year, further observation at the Chest Centre was necessary for 4 children and two of these were admitted to a sanatorium for full investigation as active cases of tuberculosis. As these two attended the same school, a survey of the staff and contacts is in progress. Of the four children referred for investigation last year, one was discharged almost immediately and three have been followed up at the Chest Centre while still attending school.

The total acceptance rate showed a slight decrease, but the percentage of positive reactors remained about the same. Re-testing of those who had been vaccinated was carried out at the end of one year using the intradermal Mantoux test (P.P.D. 1/1000) and as a result a few who are due to leave school shortly have been re-vaccinated.

	1954	1955
Schools visited .. .. .	38	54
No. of 13 year olds .. .. .	3,289	3,850
„ acceptances .. .. .	2,599 (79%)	2,867 (74%)
„ refusals .. .. .	648	946
„ others .. .. .	45	37
No. tested .. .. .	2,516	2,769
negative reactors vaccinated .. .. .	1,884	2,148
positive reactors .. .. .	557 (22%)	589 (21%)
Post vaccination tests :		
At eight weeks :		
No. tested .. .. .	803	1,686
Positive reactions .. .. .	721	1,610
Negative reactions .. .. .	39	8
At one year :		
No. tested .. .. .	—	1,595
Positive reactions .. .. .	—	1,376
Negative reactions .. .. .	—	139
Absent from reading .. .. .	—	80
No. revaccinated .. .. .	—	30
Complications .. .. .	1	0
Accelerated reaction .. .. .	1	—

## HOME NURSING SERVICE

An overall increase was shown in the work carried out : the number of patients nursed was 8·5% over last year's total and the visits were 5·9% greater. Of the requests for nursing, by far the largest number again came from general practitioners.

The following is a summary of the work done :

	1952	1953	1954	1955
Patients on register 1st January ..	927	1,116	1,226	<b>1,345</b>
New Patients .. .. .	4,791	5,499	5,860	<b>6,340</b>
Total visited .. .. .	5,718	6,615	7,086	<b>7,685</b>
Patients on register 31st December	1,116	1,226	1,345	<b>1,492</b>
Total nursing visits .. ..	202,993	200,242	217,033	<b>229,882</b>
„ supervisory visits .. ..	1,606	2,018	1,951	<b>1,772</b>
Case load — visits per month per nurse .. .. .	352	303	329	<b>314</b>

**Clinical Survey.** Two groups of patients were largely responsible for the increase in the number of visits. These were firstly the chronic heart cases, which required the most time and skill. Secondly, there were the acute respiratory infections which showed a remarkable increase during the month of March. These were mainly infections of brief duration ; each patient needed only a few visits.

More patients with cerebral and nervous diseases were nursed, but the number of visits did not show a proportionate increase. This was due to the nurses' teaching of independence wherever possible ; the good weather of the summer was found to encourage such patients to become more mobile and get out of doors. After the initial acute episode was over, regular supervision was continued, though there were longer intervals between visits.

This continuous visiting was of value in prevention ; slight setbacks were noted and suitable action taken. Maintenance of morale was important, as these patients easily relapsed into bedfastness, a condition which needs prolonged nursing care.

A change occurred in the domiciliary treatment of the tuberculous. At the beginning of the year, anti-biotics were often given orally, but the tendency in the latter part of the year was to revert to intra-muscular injections. A new development was a course of streptomycin by injection to patients who continued to work, thus necessitating visits in the evening. The falling incidence of tuberculosis was indicated by the 25% reduction in the number of cases nursed.

Illnesses Classified							
				1952	1953	1954	1955
Circulatory and Cardiac	..	..	..	643	747	952	1,087
Respiratory	..	..	..	1,095	1,402	1,474	1,687
Digestive	..	..	..	826	971	916	1,071
Urinary	..	..	..	170	196	186	178
Reproductive	..	..	..	202	203	267	276
Nervous and Cerebral	..	..	..	553	593	688	758
Carcinoma	..	..	..	337	375	465	417
Diabetic	..	..	..	197	255	258	243
Ulcer of Leg	..	..	..	153	155	158	166
Tuberculosis	..	..	..	576	554	493	371
Burns, Scalds, Injury, etc.	..	..	..	320	250	480	626
Due to senility	..	..	..	410	690	589	603
Infectious Fevers	..	..	..	26	41	15	34
Rheumatism, Arthritis	..	..	..	210	183	145	168
TOTALS	..	..	..	5,718	6,615	7,086	7,685

Age groups of Patients						
			1952	1953	1954	1955
5 years and under	..	..	2.5%	2.75%	2.1%	2.2%
6 — 16 years	..	..	3.1%	2.5%	2.2%	1.7%
17 — 45 years	..	..	11.1%	13.25%	12.7%	11.9%
46 — 60 years	..	..	20.0%	20.5%	21.4%	21.3%
Over 60 years	..	..	63.3%	61.0%	61.6%	62.9%

**Injections.** An increase of 14·6% was shown, accounted for by the increased use of anti-biotics as prophylactic measures. The figure of over 10,000 does not include injections when these were given as an item in the general care of the patient, e.g. insulin in diabetes and mersalyl in heart failure.

**Children's Nursing Unit.** Plans were made to inaugurate a unit by which sick children could be nursed in their homes, thus avoiding the psychological damage which occurs when a small child is taken away from its familiar surroundings and people. It proved impossible to attract state registered nurses with sick children's training, so that the scheme has had to be postponed until suitable members of the staff can be given special training in a children's hospital.

**Transport and Communication.** The number of owner driven cars showed an increase, from 21 to 32. This was partly offset by a reduction in the number of Douglas Vespa autocycles in use ; eight were retained and four were transferred to other Services.

The " Assisted Purchase " scheme was used by four of the nurses who acquired cars.

The number of telephone installations was increased so that all nurses except those in lodgings had this means of communication.

**Housing.** In March the Estates Committee agreed to provide houses for home nurses when and where required. Four additional houses were allocated ; one flat was given up and one flat, hitherto housing one nurse, was adapted for two student nurses.

Difficulty was experienced in finding suitable accommodation for young unmarried nurses, many of whom came to do four or six months training for the Queen's Roll. These nurses had no furniture and at this stage in their careers had no wish to acquire any. Finding lodgings presented a serious problem, as special facilities for care of equipment were needed and landlords often preferred to have boarders who did not need anything extra. The provision of furnished flats or houses would solve this difficulty.

The total accommodation was :—

Houses :	2 furnished.	11 unfurnished.
Flats :	1 furnished.	4 unfurnished.

**Training.** The courses for the Queen's Roll were continued with satisfactory results. In the course which began in October, 1954, eleven nurses sat for the examination in February and ten passed, of whom three obtained credits in the written papers, one in the practical and one a double credit, the latter being the only one awarded in the whole country.

In the following course, seven nurses entered and all passed the examination. Currently, 18 nurses are training ; some will take the examination in February, some in May. For the first time, nurses from other authorities joined the course.

**Lifting of heavy patients.** During recent years, the nursing world has become increasingly aware of the injuries which occur from the lifting of helpless patients, one result of which has been the increased incidence of prolapsed intervertebral disc. Home nurses are particularly vulnerable, in that acting alone they must attend to such patients without assistance from a colleague.

## 7

\*Classified in other Columns—Not to be included in Topic



With these hazards in mind, two courses of instruction in weight lifting by proper safe methods were given by an official of the National Council for Physical Recreation. The methods, essentially the substitution of the strong thigh muscles for those of the back when lifting a patient, were carried into practice by all who attended the demonstrations. The ease with which the nurses accomplished manoeuvres, which hitherto had been difficult and even impossible, was striking.

**Refresher Courses.** The Superintendent and an assistant superintendent each attended a week's course at Roffey Park, Sussex. Two male nurses went to Keble College, Oxford, and one female nurse to the Royal College of Nursing, London, all for one week courses. In addition, four nurses had one day each at the 'Nursing Times' lectures in London. The course on 'Human Relations', under the aegis of the Central Council for Health Education, held in the Health Department, was attended by two assistant superintendents and five nurses.

## HOME HELP SERVICE

An increasing number of applications from all sources made it clear that there was no reduction in the demand for the Service.

**Staff and Administration.** A deputy organiser was appointed and took up her duties in March. This strengthening of the central office staff allowed more time to be devoted to new developments, staff meetings, etc. The appointment of two additional caseworkers eased in the Southern District the pressure of case visiting as well as making it possible to keep the office open throughout the day. In general, however, the supervision and administration of 450—500 helpers necessitated a great amount of office work and tended to limit the time available for visiting.

The engagement as helpers of women able to work 30-44 hours weekly increased the hours worked per week from 1,100 in January to 1,450 in December ; this was achieved with almost the same number of helpers.

**Aged and Physically Infirm.** Help for this class was still the major demand. The restriction of help to not more than four hours daily on any case permitted help to be provided to more households but, even so, not all requests were met immediately.

An interesting table showing help supplied to chronic cases since 1948 is given :—

Year help commenced	Receiving help 1.1.55	Terminated 1955	Still receiving help 1.1.56
1948 .. ..	4	2	2
1949 .. ..	23	7	16
1950 .. ..	59	13	46
1951 .. ..	100	20	80
1952 .. ..	184	49	135
1953 .. ..	277	79	198
1954 .. ..	652	308	344
TOTALS ..	1,299	478	821

**Hospital Cases.** The pressure from hospitals remained heavy; often these ex-patients, especially if living alone, needed help over a long period. It was usually difficult to find relations or neighbours sufficiently free to give some daily assistance. In allocating help the time given to each individual was limited so that the maximum number could be assisted. True, some had to be re-admitted to hospital mainly because of this limitation, but it was felt that those who needed care throughout the twenty-four hours could not be maintained in safety by the domiciliary services.

**Problem Families.** Requests for assistance were received from the Probation Officer, Welfare Officers and Officers of the N.S.P.C.C. In each case initially a selected helper was provided and the Organiser visited the home, usually in the evening. The interviews took place on a friendly basis and related to wife's housekeeping allowance, hire-purchase payments and debts. Guidance was warmly received and the contact in the home did something to encourage the husband and wife to plan and keep to a programme.

The helper assisted especially the family unit, and remained full-time until the house was cleaned and the home running on a reasonable basis. Help was then reduced to half-time and ultimately to three half-days per week. The improvement in some homes of this type was outstanding.

**Tuberculosis.** Although helpers realised that the risk of infection was slight and were re-assured by the arrangements for chest X-ray and by the instructions issued, there was still difficulty in obtaining sufficient helpers for cases under treatment at home. Help was usually required for a lengthy period, particularly in the homes of young mothers with small children.

Seldom would relatives take the responsibility for the children and without a helper it would have been necessary to admit the mother to a sanatorium and place the children in the care of the Children's Officer, leaving the husband to cope with the home as best he could while carrying on his employment.

**Night Help Service.** Due to the difficulty of finding suitable women, it was not always possible to meet demands, though there were periods when the cases were insufficient to keep more than two or three women working full-time. This fluctuation of need did not encourage women to volunteer for the work. In most cases help was required immediately, but since this was not always possible to provide, admission to hospital became inevitable.

**Maternity Cases.** From a total of 278 applicants, 160 received help and 113 of the remainder withdrew their applications because of inability to pay the assessed amount.

It was clear that the maternity grant did not go far in meeting the additional expense inherent in the addition to a family, especially if the confinement took place at home.

**Incontinent Patients.** Incontinency among the older patients was a difficulty. In many of the homes of those so suffering there were poor washing facilities and only a limited quantity of hot water; the small amount of personal clothing or bed clothing added to the difficulty. A partial solution was found in the use of commercial laundrettes in selected cases.

**Waiting List.** A weekly average of 25 urgent cases received help very shortly after applying for it. In addition, those who had waited 2-3 weeks were also assisted.

The number on the list, fluctuating between 150-200 cases, remained high even though in some instances help was reduced to as little as 2 hours. Loss of time through sickness among helpers was substantial and was a further factor in the fluctuation.

**Financial Assessment.** There was an increase in the number of persons paying full costs for help, mainly maternity cases. The amount recovered was £6,500, an increase of £500, but due to a rise in the total wages bill from £73,000 to £78,000 the percentage recovered remained at 8·3.

ANALYSIS OF ASSESSMENTS	1953	1954	1955
	%	%	%
Cases paying full cost .. ..	22·0	24·25	25·4
„ „ part cost .. ..	18·5	15·5	14·3
„ „ nothing .. ..	59·5	60·25	60·3

## THE YEAR'S WORK

Date	No. of helpers	Cases being assisted			Waiting list	Weekly wages bill
		General	Maternity	Night		
31. 3.55 ..	469	1,174	8	—	225	£ 1,431
30. 6.55 ..	457	1,206	9	2	162	1,603
29. 9.55 ..	439	1,294	10	1	108	1,426
15.12.55 ..	443	1,445	9	1	123	1,582

## No. of Helpers at 31st December :

	1953	1954	1955
Full time .. ..	173	170	224
Part time .. ..	135	284	226
Casual .. ..	158	30	10
<b>TOTAL .. ..</b>	<b>466</b>	<b>484</b>	<b>460</b>

## Hours worked :

Weekly average .. ..	10,947	11,544	11,655
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## Result of Applications :

Help supplied .. ..	1,107	1,296	1,309
Awaiting help .. ..	173	218	132
Advance maternity bookings ..	38	38	50
Not qualifying .. ..	174	151	137
Cancelled or arranged own help ..	337	393	438
	<b>1,829</b>	<b>2,096</b>	<b>2,066</b>

## Analysis of Cases Assisted and Payments made :

	Full cost	Part cost	Nil	Total
Old Age Pensioners :				
Chronic illness .. ..	108	155	1,384	1,647
Acute illness .. ..	30	25	170	225
Others :				
Chronic illness .. ..	72	28	109	209
Blind .. ..	1	2	41	44
Acute illness .. ..	111	26	93	230
Maternity .. ..	90	58	23	171
Tuberculosis .. ..	5	12	43	60
Social cases .. ..	3	1	8	12
Night cases .. ..	3	1	6	10
<b>TOTAL .. ..</b>	<b>423</b>	<b>308</b>	<b>1,877</b>	<b>2,608*</b>

\*Includes 1,299 cases receiving help on 1st January, 1955.

## MENTAL HEALTH SERVICE

The service continued successfully along the lines initiated in 1948 without any major changes and the joint user arrangements for staff continued.

There was an increase of one in the number of social workers, which brought to 13 the total staff available for after-care work.

**Co-operation.** Co-operation between the departments of the Health Services by means of the monthly meetings under the chairmanship of the Medical Officer of Health, and between departments of the Corporation through frequent personal contact by officers concerned, continued satisfactorily.

**Training.** No recruits were trained during the year, as the only vacancy was filled by an experienced officer from another authority.

## MENTAL ILLNESS

**Admissions to Hospital.** There were no admissions on summary reception orders, nor were any of those admitted under Sect. 20 of the Lunacy Act subsequently certified.

By permission of the Ministry of Health, in June a number of wards of Mapperley Hospital were de-designated, and the provisions of the Lunacy and Mental Treatment Acts no longer applied to them. The effect of this was that persons were able to enter or leave these wards without any formality. The new arrangement proved of value where persons were apprehensive about signing a voluntary form, and 7·5% of those reported for investigation were encouraged to take advantage of this less formal method of admission.

Persons over 65 years of age reported were visited by a mental hospital consultant, who made a bed available where admission was necessary and otherwise advised on the appropriate action to be taken. The practice continued of admitting aged persons to hospital for periods of one month at a time to relieve relatives; thus most use was made of the accommodation in the geriatric wards. Those unfit for discharge at the end of one month were allowed to stay for a further period.

Of the cases not accepted for admission to hospital, 79 appeared to be in need of psychiatric advice, and an appointment was made for them at an out-patient clinic. More than half of this group had been referred by medical practitioners, giving support to an opinion already held that the family doctor regarded the service not only as one arranging admission to hospital of the chronic and acute cases, but also as a means of ensuring the early treatment of incipient mental illness.

**Community Care.** Except in the few cases where the medical discharge notes advised against the procedure, all persons discharged from hospital were visited at home.

Rehabilitation after mental breakdown remained more difficult than after physical illnesses, particularly where the breakdown had been prolonged; the assistance of a social worker was often essential for long periods. Among the problems encountered were domestic disharmony, return to employment or re-employment, and the difficulties, major and minor, which beset a person who has been unfit for a considerable time.

Advances in psychiatric medicine, which enabled long-term patients to return to normal life, created problems. For example there were instances where, a patient having spent years in hospital, the family had disintegrated and there was actually no home to which he or she could be discharged. Solutions to this type of problem are still being sought.

In other cases, prolonged absence from employment had led to loss of skill and a reduction in value in the labour market.

While the patient was still in hospital, first attempts were made to find work for him. This accomplished, his rehabilitation was assisted by using the hospital for a period as a hostel, and as familiarity with the outside world developed and capacity to do the work was shown, suitable living accommodation in lodgings or rooms was found.

**Case Load.** The average number of hospital ex-patients under after-care was 820 ; with a maximum of 847 during March and a fall to 792 in August. The amount of work required in particular cases varied considerably, but a case load of over 800 was higher than could be effectively carried unless a large percentage required only limited action. Experience showed that intensive work on the difficult cases was preferable to diffusing the total effort over too wide a field, and therefore the after-care register was regularly revised.

#### PERSONS IN NEED OF ADMISSION TO HOSPITAL

	Under 65 years		Over 65 years		Totals
	M.	F.	M.	F.	
<b>Reported by :</b>					
Police .. .. .	40	41	10	14	105
General hospitals ..	42	60	14	35	151
Medical practitioners ..	68	124	86	110	388
Relatives .. .. .	42	55	14	28	139
Others .. .. .	31	59	16	32	138
<b>TOTAL</b> .. .. .	<b>223</b>	<b>339</b>	<b>140</b>	<b>219</b>	<b>921</b>
<b>Disposal :</b>					
Admitted hospital :					
Under Sect. 16 .. ..	—	—	—	—	—
do. Sect. 20 .. ..	86	115	28	33	262
As a voluntary patient ..	37	91	24	59	211
Others .. .. .	8	4	24	33	69
	131	210	76	125	542
For community care ..	2	6	11	30	49
Not accepted .. ..	90	123	53	64	330
<b>TOTAL</b> .. .. .	<b>223</b>	<b>339</b>	<b>140</b>	<b>219</b>	<b>921</b>

## MENTAL DEFICIENCY

**Institutional Accommodation.** It was possible to admit only 19 cases to institutions. The total remaining on the waiting list on 31st December was 138, compared with 125 at the end of 1954. One defective, ordered by the Court to be detained in prison as the only available 'Place of Safety', had to remain there for five months before it was possible for him to be transferred to an institution.

In a number of homes it was evident that only removal to an institution of a grossly defective child could relieve the tension which existed, but because of overcrowding in institutions little use could be made of the short term care provisions of Circular 5/52. However, the mental hospital again gave invaluable help by admitting, for 2-3 weeks, low grade defectives whose parents were breaking down under the strain. Owing to the limited number of beds available there were occasions when several defectives required admission, though only one bed was available; a total of 16 families was assisted in this way.

Increased institutional accommodation for mental defectives continued to be a pressing need. The misery caused in many homes by low grade and uncontrollable defectives could be fully appreciated only by those in day to day contact with them. It is impossible to compute the amount of suffering endured, particularly by the mothers.

Almost as great an anxiety to the social workers were those, mostly middle-aged, defectives who were living at home with aged and failing parents, and where there was nobody willing and able to care for the defective after the parents' death. There were 45 such cases.

**Supervision of Mental Defectives.** Defectives under guardianship and supervision were visited regularly—quarterly to those on licence at addresses in the City—and reports were sent to the institutions concerned. The number of home visits paid was 3,198.

A good deal of the effort of the service was directed toward getting defectives into employment and more than half of those who were 16 years old or more had paid work. Many higher grade defectives obtained work through the Employment Exchange, some only after the intervention of the mental welfare officers, while employment for those bordering on unemployability was secured by the direct approach of the officers to sympathetic employers.

Male defectives were employed in a variety of labouring jobs. Some were able to do simple repetitive jobs in factories and a few were accepted for work at local collieries. Females were placed in factory work, in laundries and as cleaners.

Unemployable defectives over the age of 16 years received weekly allowances from the National Assistance Board, and officers of the Service and those of the Board co-operated closely.

With few exceptions, the mental welfare officer was a welcome visitor to the home and his advice was sought on many matters in addition to those directly concerning the defective.

### **The City Occupation Centre**

**Accommodation.** There is accommodation for 150 defectives. The numbers on the register rose from 131 on 1st January to 143 on 31st December, with an average daily attendance of 119. The centre was open during primary school terms from Monday to Friday each week, 10 a.m. to 3.30 p.m. daily.

**Training.** The buildings stand in several acres of ground, and gardening was an essential item on the training programme for the adult males. Potatoes, the yield of which in a dry summer was disappointing, and other vegetables were grown for consumption in the centre. Work on lawns and the planting of shrubs and flowers continued and a start was made on preparing additional ground for vegetable growing.

A two-fold purpose was achieved by this concentration on gardening. Not only were these efforts of benefit to the centre, but the skills acquired were useful at home, unlike some of the handicrafts which could only be carried out at the centre under supervision ; one boy secured employment with a nurseryman as a direct result of his training. The men and boys also had regular physical training and organised games.

In the junior department considerable emphasis was laid on personal hygiene, general habit training and simple handwork, with much time devoted to musical games and dancing in the interests of physical development. In the intermediate department handwork was carried to a more advanced stage, physical training was continued and the timetable was arranged in a way which permitted the boys to pass gradually under male supervision.

The adult females were given physical exercise through the medium of country dancing and games, notably badminton, which though not played skillfully, gave considerable enjoyment to a number who were becoming reluctant on account of age to take part in organised physical training. The handwork in this department reached a high level and as a result of patient instruction some of the women became expert in embroidery.

An innovation was the establishment of a domestic science class under the cook/assistant supervisor. The girls and women were taught kitchen routine, table laying, cutlery cleaning and simple cookery. The latter proved very popular and some of the girls became proficient in the preparation of small cakes and simple dishes.

**Admission of Low Grade Defectives.** Among those attending the centre was a number of low grade defectives, accepted purely on a trial basis to relieve the situation at home. Some had to be excluded after a few weeks because their habits and behaviour were so faulty, but others showed some improvement and were allowed to continue in attendance, though they placed an undue strain on the staff.

**Open Day.** This was held on 21st July when over 160 relatives and friends attended and were impressed by displays of physical training, dancing and puppetry; the display of handicraft products was the subject of extremely favourable comment. Arrangements were made that parents of trainees could have first refusal of articles made by their children, and the balance was offered for sale at the end of the day.

**Transport.** By arrangement with the City Transport Department, three double-deck buses on private hire conveyed the trainees daily between the centre and all parts of the City. The cost of transport was borne entirely by the Health Committee.

**Medical Examinations.** The Physician Superintendent of Aston Hall Mental Deficiency Hospital continued to take great interest in the centre and paid regular visits to examine new entrants and to re-examine some of those previously seen.

## MENTAL DEFICIENCY ACTS, 1913—1938

NEW CASES REPORTED	M.	F.	Totals	
			1954	1955
<b>Subject to be dealt with—</b>				
Reported by Local Education Authority :				
Sect. 57(3) Education Act, 1944 .. .. .	19	6	20	25
Sect. 57(5) " " " " .. .. .	11	10	18	21
Reported by other sources .. .. .	7	4	7	11
<b>Not at present subject to be dealt with—</b>				
Cases for whom the Local Health Authority may subsequently become liable .. .. .	12	7	19	19
	49	27	64	76
<b>Disposal of Cases—</b>				
Admitted to Institution (under Order) .. .. .	1	—	3	1
Placed in Institutions (Sect. 3) .. .. .	—	—	—	—
Placed under Statutory supervision .. .. .	36	20	42	56
" " Voluntary supervision .. .. .	12	7	19	19
	49	27	64	76
<b>CASES ASCERTAINED PRIOR TO 1955 WHO BECAME THE SUBJECT OF AN ORDER DURING THE YEAR.</b>				
Admitted to institutions .. .. .	6	11	11	17
Placed under guardianship .. .. .	1	—	2	1
	56	38	77	94
<b>CASES TRANSFERRED DURING THE YEAR.</b>				
From guardianship to institution .. .. .	1	—	1	1
<b>TOTAL OF ASCERTAINED CASES.</b>				
In institutions .. .. .	212	241	450	453
Under guardianship .. .. .	22	20	46	42
Under Statutory supervision .. .. .	307	210	512	517
Under Voluntary supervision .. .. .	173	148	283	321
In " Places of Safety " .. .. .	3	1	4	4
	717	620	1,295	1,337

# **CITY OCCUPATION CENTRE** **Analysis of defectives on the register on 31st December**

Age Groups	Intelligence Quotients						Totals	Classification		
	Below-30	30 to 40	41 to 50	51 to 70	71 to 80	Not tested		Feeble-minded	Imbecile	Idiot
FEMALES :										
Under 7 years	2	—	—	1	—	—	3	—	2	1
7 to 11 "	4	4	6	2	—	—	16	1	14	1
12 to 15 "	2	3	3	3	—	—	11	3	5	3
16 to 20 "	2	5	6	1	—	1	15	3	12	—
21 to 39 "	—	1	5	1	—	—	7	5	2	—
40 years and over	—	—	2	—	—	—	2	1	1	—
	10	13	22	8	—	1	54	13	36	5
MALES :										
Under 7 years	2	1	—	—	—	—	3	—	2	1
7 to 11 "	10	7	5	3	—	—	25	2	17	6
12 to 15 "	3	9	5	4	2	—	23	3	17	3
16 to 20 "	3	4	9	6	—	—	22	6	15	1
21 to 39 "	4	2	2	4	1	—	13	5	8	—
40 years and over	—	2	1	—	—	—	3	1	2	—
	22	25	22	17	3	—	89	17	61	11

## CITY AMBULANCE SERVICE

This contribution by Mr. Ben England, M.I.Mech.E., M.Inst.T. is again gratefully acknowledged.

**Introduction.** This is the eighth annual report of the Nottingham City Ambulance Service. The Service commenced its duties on the 5th July 1948. A report was presented to cover the period from that date until the 31st December 1948, and subsequent annual reports, each covering a calendar year from the 1st January to the 31st December, have been presented.

**Management of the Service.** The General Manager of the City Transport Department is the chief officer of the Ambulance Service, and as General Manager of the City Ambulance Service is responsible direct to the Health Committee, which provides the Ambulance Service.

**Salaried Staff.** The salaried staff consists of an Ambulance Officer, a Deputy Ambulance Officer, a Radio Officer, six Control Room Officers, and two shorthand-typists. There has been an increase of one Control Room Officer since the last Annual Report ; this became necessary owing to the increased number of calls on the Service.

A Staff Officer (Civil Defence) has been seconded to the Ambulance Service to assist with the training of the Civil Defence Ambulance Section Volunteers and is under the supervision of the full-time Ambulance Officer (Mr. A. K. Hicks) of the City Ambulance Service.

**Employees.** There are six male leading drivers, forty-seven male driver-attendants, one male attendant, and nine female driver-attendants, making a total number of 63 employees. This total is three more than last year's total.

The following table shows the availability of employees during a normal working day.

Period of Day	Mid-night till 7.20 a.m.	7.20 a.m. till 8.30 a.m.	8.30 a.m. till 9.00 a.m.	9.00 a.m. till 9.40 a.m.	9.40 a.m. till 10.00 a.m.	10.00 a.m. till 2.00 p.m.	2.00 p.m. till 4.00 p.m.	4.00 p.m. till 5.00 p.m.	5.00 p.m. till 6.00 p.m.	6.00 p.m. till 10.00 p.m.	10.00 p.m. till Mid-night
No. of employees on duty	8	12	23	30	31	32	31	33	15	13	10

**Ambulance Fleet.** At the 31st December 1955, the ages of the ambulances and sitting-case vehicles were as follows :—

	AGE IN YEARS OF AMBULANCES AND SITTING-CASE VEHICLES										
	Under one year	One to two	Two to three	Three to four	Four to five	Five to six	Six to seven	Seven to eight	Eight to nine	Nine to ten	Over ten years
Ambs.	—	2	—	—	5	2	3	—	2	—	5
S.C.	2	2	—	—	1	1	1	—	—	—	1

Ambs. = Number of ambulances in each group.

S.C. = Number of sitting-case vehicles in each group.

At present the strength of the permanent fleet is nineteen ambulances, four sitting-case cars and four convertibles. Two new convertibles have been added to the fleet during this year, and became necessary because of the increase of work.

Twelve of the ambulances are equipped with Novox resuscitation apparatus, and additional sets are available for other vehicles as required. Of the two Riley rocking stretchers to aid artificial respiration, one is kept at Parliament Street Depot and the other at the Guildhall sub-station.

**New Ambulance Stations.** During the year the Ministry of Health have approved in principle the plans for the new Ambulance Stations at Beechdale and Wilford.

Tenders for the Beechdale station have been received and submitted to the Ministry of Health.

Tenders for the Wilford Station will shortly be invited.

**Garage Accommodation.** The vehicles are accommodated as follows :—

Garages	By Day	By Night
<i>For Ambulances.</i>		
Heathfield Hospital .. .. .	2	2
Sherwood Hospital .. .. .	4	4
Guildhall .. .. .	5	3
Parliament Street Depot of the City Transport Department .. .. .	8	8
New Fire Station, Shakespeare Street .. .. .	—	2
<i>For Sitting-Case Vehicles.</i>		
Sherwood Hospital .. .. .	—	—
Guildhall .. .. .	1	1
Parliament Street Depot of the City Transport Department .. .. .	7	7
New Fire Station, Shakespeare Street .. .. .	—	—
TOTAL, ALL VEHICLES .. .. .	27	27

**Training of Employees.** The employees annually pass an examination in first aid in order to receive their proficiency pay. The majority are examined by the St. John Ambulance Association and some by the British Red Cross Society.

A course of post-entry training, as suggested by the Ministry of Health, has been undertaken by the employees. Lectures are given by the Ambulance Officer, by the Deputy Ambulance Officer, and by the Staff Officer (Civil Defence). At the termination of the course the employees undertake a written examination. The results are a guide for promotion when vacancies arise,

**Co-operation with Police and Fire Service.** Complete harmony exists between the City Police, the City Fire Brigade, and the City Ambulance Service, giving maximum efficiency in the interdependence of all services in serving the public.

**Co-operation with Other Authorities.** Co-ordination with neighbouring authorities is maintained in order that economy in the use of ambulances shall be exercised at all times, and so that mutual assistance shall be readily available in the event of any major accident.

**Civil Defence.** The training of Civil Defence Ambulance Section volunteers has increased during the year, and as was foreshadowed in my previous report the training periods have been increased from two nights per week to three. To help the officers with the work it has been necessary to appoint a Staff Officer (Civil Defence). He was appointed by the Civil Defence Committee and seconded to the full-time Ambulance Service. The volunteers attend from September until June each year, and undertake training in first aid, map reading, the loading of ambulances, the collection of casualties, the rescuing of persons from crashed aircraft, and all subjects relevant to ambulance work. Meetings are held three evenings a week, each volunteer being invited to attend once weekly on the day of his choice, but some of them attend twice weekly.

The driving instruction of the volunteers is progressing favourably. Eight of the Ambulance Service personnel act as part-time driving instructors for the driving school, and there is an average of twelve volunteers under instruction at any one time. The driving school is supervised by officers of the full-time Ambulance Service. The Civil Defence Ambulance Section, has for training purposes, six ambulances. Those vehicles were transferred from the City Ambulance Service when they became obsolete for civil use in peacetime.

During the past year 10 volunteers have passed the Ministry of Transport driving test and are now able to drive the ambulances without supervision.

**Emergency Calls.** On the 18th August 1955, a call was received at 3.09 p.m. from the City Fire Brigade stating that they had received a special service call to the factory of F. G. Pearce Ltd., Grant Street, Nottingham. On arrival the Fire Brigade found that a number of people were suffering from the effects of ammonia fumes. One ambulance was dispatched immediately, and the crew was told to give a detailed report on arrival at the scene. The ambulance reported on the scene at 3.11 p.m. and the crew reported that they were taking four casualties to hospital. Those casualties arrived at the hospital at 3.17 p.m. From the first report it was abundantly clear that a considerable number of casualties could be expected. The Ambulance Officer and Deputy Officer reported at the scene and took over the control of the ambulances. Five ambulances were detailed to cover the incident. The majority of the casualties collapsed about one hour after the first call was received, due to delayed action from the fumes which travelled into nearby houses. Fortunately the workers had not been dispersed and the casualties were within a short distance of the factory. A total of eighteen casualties was taken to the hospital, all except two being female employees of the factory ; the remaining two were members of the City Fire Brigade. The incident was clear at 5.15 p.m.

Emergency calls for the year have totalled 4,935, compared with 4,673 during 1954. The highest number of emergency calls in one day was 34 on 18th August 1955, compared with 29 calls on the 9th October 1954.

**Conveyance of Analgesia Apparatus.** The conveyance of the analgesia apparatus, mentioned in the previous report, continues to be undertaken by the Service.

During the year, 2,092 journeys have been made, covering a distance of 7,069 miles.

These calls are additional to the normal Service commitments and require immediate response.

**Mileage, Patients, and Out-Patients.** The highest number of patients carried on any one day during the year was 429 on 10th November 1955, compared with 350 on 12th July 1954, the previous record day. The record day's mileage of 1,663 on the 29th March 1954 was exceeded on 4th October 1955, when the vehicles of this Service ran 1,865 miles.

During 1955, a total of 93,405 patients and out-patients was conveyed over a distance of 389,311 miles, as tabulated in appendix B : 7,069 of those miles were in connection with the conveyance of analgesia apparatus, which conveyance commenced on 5th November 1954. After deducting the analgesia miles in 1954 and 1955 (in order to make an accurate comparison) the figures show an increase of 37,005 miles (10·72%) over 1954; adding in the analgesia miles there is an increase of 43,399 miles (12·55%) over 1954. The increase in the number of patients over 1954 was 6,050 (6·93%).

**Sub-Control.** To maintain the necessary control of the vehicles and to cope with the increasing number of patients, it has been found necessary to put into operation a sub-control. This is sited at the General Hospital in the out-patients' department. It is manned by one of the Control Room Officers, and he has at his disposal four sitting-case vehicles. His main task is to deal with the transport of patients attending the General Hospital out-patients' departments and to return them to their homes after treatment.

The scheme commenced on 3rd March 1955 and was given a trial for six months : the results proved that it is essential that this sub-control should be continued. It has taken away a considerable amount of work from the main control, it has allowed patients to be taken into hospital on time for treatment, and has allowed a quicker return home after treatment. This has given satisfaction to all concerned.

**Walkie-Talkie Apparatus.** Walkie-talkie apparatus was purchased during 1955. It was bought in order that it could be used, if necessary, for the control of a large number of ambulances at the scene of a major accident. Better control would be given at the scene. Extensive trials have been made with the co-operation of British Railways and in local industrial premises. It was used with good results during the visit of Her Majesty the Queen to the Royal Show, and also in connection with a railway accident.

**Royal Visit and Royal Agricultural Show—5th to 8th July 1955.** In co-operation with the City Police, ambulances were stationed at vantage points along the route to be taken by the royal party. One ambulance was stationed at the Midland Station one hour before the arrival of the royal party. After the procession and the crowds had cleared away from the immediate vicinity of the station the ambulance took up a fresh position near the city centre because of the crowds at the Council House ; the driver of the ambulance was in radio contact with main ambulance control. Another ambulance was stationed in Friar Lane, to be used for the conveyance of casualties from the first aid hut in the Old Market Square, and also to cater for incidents which might have arisen in the immediate vicinity. Because of the crowds, the ambulance was in position one hour before the time for the arrival of the royal party, and remained until the crowd had cleared. This ambulance also was in radio contact with main control. It was necessary to station an ambulance in

Nottingham Forest two hours before the arrival of the royal party, because the school children who were given a holiday were presenting a gymnastic display. The ambulance remained in position until the crowd cleared.

The number of casualties from the crowds en route was remarkably few. At the Forest, however, the picture was different ; the sun was shining and it was a really hot day. On arrival at the scene the full-time ambulance service contacted the first aid post of the voluntary organisations to ensure complete co-operation during the display by the children. A steady stream of patients was brought to the ambulance. The voluntary organisations on the site could not cope with the many calls and the full-time ambulance personnel went amongst the crowds to fetch and treat casualties. The climax came at about the time the royal party were due to leave the Forest. The ambulance crew on the site became inundated with requests for assistance, and additional ambulances were soon on the scene. By this time the crowds were on the move. The value of the walkie-talkie in talking to the ambulances was proved in this instance. As each ambulance came into the main drive of the Forest it was directed by walkie-talkie to casualties on the site.

On the site of the Royal Show at Wollaton Park the St. John Ambulance Brigade and the British Red Cross Society had arranged to have first-aid tents inside each entrance in addition to a reception station near the centre ring, but it had been arranged that the City Ambulance Service should convey patients from the site to hospital. Thirteen calls were received from the Show ground. On the last day of the Show, because of the crowds and the heat, it was considered necessary to have an ambulance on the site.

**Railway Stoppage, 29th May to 15th June 1955.** It was expected that owing to the railway stoppage there would be an

increase of patients to be conveyed by road on long-distance journeys. However, the road journeys during that period did not increase to any great extent. During the period only nine long-distance journeys were undertaken, they having been to Dudley, Ilkley, Wolverhampton, Woodhall Spa, Hunstanton, Leeds, Mablethorpe, and two journeys to Sheffield.

**Long-Distance Journeys.** British Railways are giving considerable help in the conveyance of patients over long distances. By rail the following journeys have been undertaken during 1955 :—

Fourteen journeys to Skegness.

Six journeys to London.

Three journeys to Sheffield.

Two journeys each to Chepstow (Monmouthshire), Leeds, Manchester, Southampton, Whitchurch (Shropshire).

One journey each to Ashford (Kent), Birmingham, Bristol, Blackpool, Cheltenham, Carlisle, Dudley (Worcestershire), Exeter, Folkestone (Kent), Farnborough (Hampshire), Grimsby, Herne Bay (Kent), Ilkley, Jarrow-on-Tyne, Luton, Maidenhead (Berkshire), Norwich, Reading, Torquay, Waltham Cross (Hertfordshire), Warrington.

A total of 54 patients was conveyed by rail, a decrease of 32 compared with 1954.

#### **Road Journeys**

Sixty-seven journeys to Sheffield.

Ten journeys to Leeds.

Eight journeys to Skegness.

Six journeys to Woodhall Spa.

Three journeys each to Alderley Edge (Cheshire), Birmingham, Ilkley, Mablethorpe.

Two journeys each to Aylesbury, Blackpool, Hunstanton, Kettering, London, Peterborough.

One journey each to Aston-on-Clun (Shropshire), Bridgend (Glamorgan-shire), Chepstow, Dudley, Doncaster, Ellesmere Port (Cheshire), Gainsborough, Huddersfield, Hull, Liverpool, Lymington (Hampshire), Manchester, Pontefract (Yorks.), Rotherham, Sutton Coldfield, Stoke-on-Trent, Stockton-on-Tees, Stafford, Southport, Shrewsbury, Scunthorpe (Lincs.), Sutton (Surrey), Taunton, Wolverhampton, Walsall, West Bromwich.

An increase of 46 compared with the 1954 total of 95 long-distance journeys.

**Progress.** During the last twelve months the number of calls on the Ambulance Service has increased. The Service has managed to cope with the continually-increasing work, but resources have been strained at times to their fullest extent, and again I must stress that the Service needs more men and vehicles in order that the work may be undertaken without undue risk of the demand exceeding the availability.

It is with great pleasure that I express thanks to the staff and employees for their loyal co-operation and assistance during the past year.

**Working Expenses per Vehicle Mile.** Separate figures are not available for ambulances and for sitting-case vehicles : the working expenses per vehicle mile since the inauguration of the service are tabulated in appendix D : they are intended to be an indication of the trend of working expenses, so they exclude loan charges, ambulance services hired, the cost of land and services for new ambulance stations, the installation of wireless equipment, and the cost of any vehicles bought out of revenue.

**Summary.** At the 31st December 1955, the Ambulance Service consisted of the following :—

Salaried staff in the grading scheme	..	11
Leading Drivers	.. ..	6
Male driver-attendants	.. ..	47
Male attendant	.. ..	1
Female driver-attendants	.. ..	9
		—
Total personnel	.. ..	74
		—

**Permanent Fleet :**

Ambulances	..	..	..	19
Sitting-case cars	..	..	..	4
Convertibles	..	..	..	4
				—
				27
				==
Ambulance stations	..	..	..	4

## APPENDIX A.

**RECHARGEABLE MILEAGE 1955**

## CLASSIFIED UNDER MONTHS.

			<i>Sitting-case vehicles</i>	<i>Ambulances.</i>
January	..	..	987	733
February	..	..	736	1,233
March	..	..	439	1,226
April	..	..	989	1,245
May	..	..	899	1,533
June	..	..	853	1,429
July	..	..	642	1,615
August	..	..	601	738
September	..	..	1,112	1,167
October	..	..	802	1,442
November	..	..	1,004	1,358
December	..	..	706	1,390
			—	—
			9,770	15,109
			==	==

## CLASSIFIED UNDER AMBULANCE AUTHORITIES.

			<i>S.C. Vehicles</i>	<i>Ambulances</i>	<i>Patients</i>
Nottinghamshire County	..	..	1,644	4,166	928
Derbyshire County	..	..	6,585	8,586	1,116
Brighton County Borough	..	..	31	—	1
Derby County Borough	..	..	52	60	4
Leicestershire County Council	..	..	333	274	18
Kesteven (Lincs.)	..	..	453	1,412	55
Halifax County Borough	..	..	31	—	1
Kent County Council	..	..	—	47	2
Lindsey (Lincs.)	..	..	83	142	7
Eastbourne County Borough	..	..	—	38	2
Cornwall County Council	..	..	—	27	1
Essex County Council	..	..	—	6	1
West Riding of Yorkshire	..	..	25	—	2
Manchester County Borough	..	..	33	27	2
Blackpool County Borough	..	..	65	—	1
Surrey County Council	..	..	7	19	2
Great Yarmouth County Borough	..	..	34	—	1
Norwich County Borough	..	..	17	—	1
Devon County Council	..	..	—	22	2
Cheshire County Council	..	..	24	28	2
Oxford County Council	..	..	34	—	1
London County Council	..	..	49	14	5
Birmingham County Borough	..	..	—	28	1
Leicester County Borough	..	..	—	73	2
Sheffield County Borough	..	..	95	73	4
Soke of Peterborough	..	..	102	—	1
Rutland County Council	..	..	31	—	1
Gateshead County Borough	..	..	34	—	1
Middlesex County Council	..	..	—	8	1
Lancashire County Council	..	..	—	34	1
Grimsby County Borough	..	..	8	—	2
Flintshire County Council	..	..	—	25	1
			<u>9,770</u>	<u>15,109</u>	<u>2,170</u>

## APPENDIX B.

1955	Road Accidents		Other Accidents		Sudden Illness		Maternity		Admission		Discharge		Out-patients		Inter-hospital		Unclassified		Mental		Infectious		Gas & Air		Ser-vice	Total	
	P	M	P	M	P	M	P	M	P	M	P	M	O.P.	M	P	M	P	M	P	M	P	M	J.	M		O.P.& P.	M
Jan.	46	193	231	1,070	149	589	136	1,036	679	4,522	564	2,968	4,913	14,319	732	2,676	38	575	32	297	388	1,967	124	477	548	7,908	31,237
Feb.	60	248	191	804	112	422	142	1,066	580	3,244	532	3,480	4,643	13,205	795	2,450	36	784	15	206	461	1,933	123	496	563	7,567	28,901
March	49	245	185	895	120	485	163	1,081	595	3,329	576	3,095	4,984	14,710	784	2,768	43	477	51	503	469	2,638	211	629	864	8,019	31,719
April	74	271	182	817	122	553	130	964	556	3,309	476	2,916	4,475	14,057	790	2,387	25	580	30	273	480	2,017	154	523	686	7,340	29,353
May	78	343	225	1,072	112	510	143	1,084	506	3,170	487	3,033	4,565	15,518	890	3,148	35	478	34	811	533	2,100	217	662	604	7,608	32,533
June	50	218	208	982	94	422	142	1,036	457	3,272	474	3,140	4,763	16,504	959	3,252	37	475	23	353	466	2,052	223	728	723	7,673	33,157
July	81	387	270	1,302	165	678	140	1,051	512	3,495	569	3,758	4,827	16,365	733	2,400	36	519	41	455	519	2,059	158	507	643	7,893	33,619
Aug.	68	370	265	1,123	157	677	134	936	487	3,180	349	2,170	5,023	16,487	812	3,068	35	361	45	788	438	1,726	214	765	793	7,813	32,444
Sept.	68	277	216	1,074	124	482	127	922	483	3,117	516	3,294	4,822	16,482	799	3,587	34	1,181	29	287	508	1,714	225	736	850	7,726	34,003
Oct.	58	271	224	1,100	156	628	118	878	501	3,225	500	3,559	5,035	16,651	930	4,002	41	781	23	285	447	1,782	149	529	1,735	8,033	35,426
Nov.	60	284	173	843	143	568	140	1,049	541	3,579	462	3,784	5,318	17,039	918	3,394	28	595	41	524	505	1,705	127	420	784	8,329	34,568
Dec.	82	359	194	838	143	609	139	1,047	545	3,240	508	3,613	4,648	15,636	790	3,143	38	533	22	305	387	1,704	167	597	727	7,496	32,351
TOTAL	774	3,466	2,564	11,920	1,597	6,623	1,654	12,150	6,442	40,682	6,013	38,810	58,016	186,973	9,932	36,275	426	7,339	386	5,087	5,601	23,397	2,092	7,069	9,520	93,405	389,311

P. = Patients.

O.P. = Out-Patients.

M. = Miles.

J. = Journeys.

## APPENDIX C.

## PATIENTS AND MILES BY EACH TYPE OF VEHICLE

Month	Ambulances		Sitting-Case Cars		Convertibles		Total	
	Patients	Miles	Patients	Miles	Patients	Miles	Patients	Miles
1955								
Jan. ..	5,662	22,154	1,438	6,735	808	2,348	7,908	31,237
Feb. ..	5,719	20,671	1,266	6,483	582	1,747	7,567	28,901
Mar. ..	5,762	22,885	1,538	6,518	719	2,316	8,019	31,719
Apr. ..	5,316	20,834	1,339	6,190	685	2,329	7,340	29,353
May ..	5,613	22,386	1,323	7,839	672	2,308	7,608	32,533
June ..	5,736	23,092	1,284	7,664	653	2,401	7,673	33,157
July ..	5,996	24,341	1,205	6,798	692	2,480	7,893	33,619
Aug. ..	5,997	23,422	1,084	6,606	732	2,416	7,813	32,444
Sept. ..	5,541	24,190	1,459	7,526	726	2,287	7,726	34,003
Oct. ..	6,087	25,408	1,307	7,698	639	2,320	8,033	35,426
Nov. ..	6,430	26,082	1,257	6,342	642	2,144	8,329	34,568
Dec. ..	5,550	23,695	1,124	5,697	822	2,959	7,496	32,351
	69,409	279,160	15,624	82,096	8,372	28,055	93,405	389,311

Ambulances ..	..	..	69,409	279,160
Sitting-case cars ..	..	..	15,624	82,096
Convertibles ..	..	..	8,372	28,055
			<hr/>	<hr/>
Totals ..	..	..	93,405	389,311
			<hr/>	<hr/>

The total of 389,311 miles includes 7,069 analgesia miles :  
for details please see appendices B and D.

## EMERGENCY PATIENTS

## Emergency Patients conveyed during 1955

January ..	..	426
February ..	..	363
March ..	..	354
April ..	..	378
May ..	..	415
June ..	..	352
July ..	..	516
August ..	..	490
September ..	..	408
October ..	..	438
November ..	..	376
December ..	..	419

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4,935

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APPENDIX D.  
FINANCIAL SUMMARY AND STATISTICAL RECORD FROM 1948 to 1955

Year ended on 31st December	1	2	3	4	5	6	7	8	9	10	11
	Total miles	Gas and Air Miles (Analgesia)	Patient miles	Total Patients and Out-Patients	Average miles per patient	Patients Carried per thousand Miles run	Working Expenses per Vehicle Mile for year ended on preceding 31st March	Record Day's Mileage	Maximum No. of Patients on any one day	Highest No. of Emergency Calls on any one day	Total Expenditure for year ended on preceding 31st March
1948 .. (6 months)	147,317	—	147,317	23,301	6.32	158.17	d. —	—	—	—	£ —
1949	301,426	—	301,426	54,297	5.55	180.13	22.66	1,498	246	27	28,154 (9 months)
1950	321,673	—	321,673	62,858	5.12	195.41	27.92	1,445	287	25	37,440
1951	343,150	—	343,150	68,896	4.98	200.78	27.80	1,544	296	34	39,513
1952	328,078	—	328,078	71,737	4.57	218.66	30.16	1,395	325	35	49,788
1953	309,115	—	309,115	75,104	4.12	242.96	31.40	1,445	324	29	46,785
1954	345,912	675	345,237	87,355	3.95	253.03	34.06	1,663	350	29	49,664
1955	389,311	7,069	382,242	93,405	4.09	244.36	34.17	1,865	429	34	58,578

## APPENDIX E.

REVENUE ACCOUNT FOR THE YEAR ENDED 31st MARCH  
1955

## EXPENDITURE

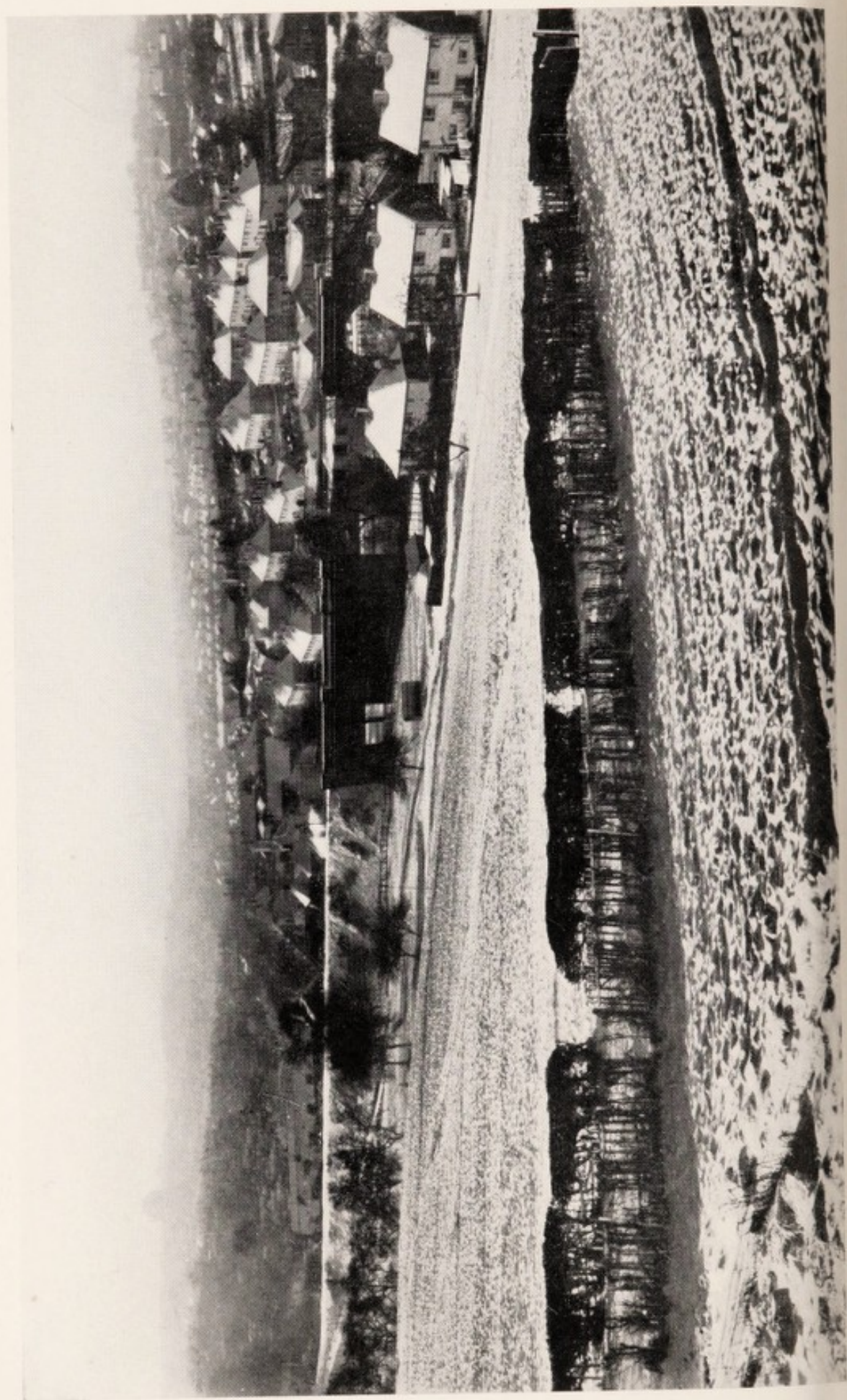
	<i>Actual Amount</i>	<i>d. per mile</i>
	£	
Maintenance and cleaning vehicles ..	5,087	3·480
Wages of drivers and attendants ..	24,912	17·041
Salaries of Ambulance Officer and staff ..	4,609	3·152
National Insurance contributions ..	839	·574
Superannuation contributions .. ..	1,023	·700
Uniforms .. .. .	1,210	·827
Licences and insurance of vehicles ..	365	·250
Petrol and oil .. .. .	5,947	4·068
Ambulance services hired .. ..	379	·259
First aid equipment and supplies ..	368	·252
Maintenance and repairs of buildings ..	445	·304
Heating, lighting, and cleaning of buildings	605	·414
Furniture and equipment of ambulance stations .. .. .	50	·034
Nottingham City Transport administrative charges .. .. .	1,318	·902
Rents, rates and insurance .. ..	754	·516
Printing, stationery, advertising and postages	390	·267
Office expenses .. .. .	4	·003
Telephones .. .. .	330	·226
Contribution towards central administrative expenses .. .. .	1,016	·695
Miscellaneous .. .. .	111	·076
Contribution towards capital expenditure ..	6,256	4·280
Maintenance and operation of wireless equipment .. .. .	567	·388
Loan Charges .. .. .	1,993	1·362
	<u>£58,578</u>	<u>40·070</u>

## INCOME

Sale of ambulances .. .. .	150	·103
Conveyance of Analgesia equipment ..	142	·097
Use of Wireless Station .. .. .	57	·039
Recharges to Other Authorities ..	3,012	2·061
Government grant .. .. .	27,493	18·806
	<u>£30,854</u>	<u>21·106</u>









LOOKING SOUTH FROM PORCHESTER ROAD ON 25TH JULY, 1955



## **PART III.**

### **ENVIRONMENTAL SERVICES**

Factories Act 1937

Food and Drugs Acts 1938-1950

Housing Acts 1936-1949

Housing Repairs and Rents Act 1954

Nottingham Corporation Acts 1923-1952

Public Health Acts 1875-1936

Shops Act 1950

**INFECTIOUS AND INFECTIVE DISEASES**

**FOOD SUPERVISION AND INSPECTION**

**HOUSING**

**SANITARY SERVICES**

## INFECTIOUS AND INFECTIVE DISEASES

### SUMMARY OF NOTIFICATIONS

	1955					1954	1953
	Numbers each Quarter				Total	Totals	
	1st	2nd	3rd	4th			
Measles ..	5,513	1,350	58	14	6,935	666	3,323
Whooping cough ..	185	127	170	84	566	1,042	1,104
Scarlet fever ..	28	26	30	63	147	450	401
Pneumonia ..	88	34	17	45	184	144	257
Dysentery ..	3	28	34	45	110	396	111
Puerperal pyrexia	8	8	5	7	28	91	58
Erysipelas ..	5	8	—	8	21	24	39
Ophthalmia neonatorum	9	10	3	2	24	8	5
Poliomyelitis : paralytic ..	1	2	12	11	26	10	20
non-paralytic	—	1	4	1	6	—	9
Encephalitis : infective ..	—	—	—	1	1	1	—
post infectious	3	1	—	—	4	8	5
Food poisoning	6	10	23	17	56	59	21
Cerebro-spinal fever ..	1	2	4	4	11	9	13
Paratyphoid fever	—	—	5	—	5	—	—

**Measles.** After a year of comparative freedom from the disease, the number of cases began to increase in the last quarter of 1954. A maximum of 5,513 was reached in the first quarter of 1955 and thereafter the notifications declined rapidly. The disease presented in a relatively mild form but 62 cases were admitted to hospital and there were 4 deaths.

**Whooping Cough.** The incidence was again lower than in the five previous years, but 2 deaths occurred in children aged 1 month and 15 months and 25 cases were admitted to hospital.

		1950	1951	1952	1953	1954	1955
Notifications	..	1,424	1,345	1,240	1,104	1,042	566
Deaths	..	5	7	3	3	0	2

Immunisation on a large scale has been carried out for a little over a year.

**Scarlet Fever.** The number of cases—147—was less than 1954 when there were 450, but there was an increase in the last quarter. For the most part the disease occurred in a mild form but 30 cases had to be admitted to hospital. No deaths occurred.

**Acute Anterior Poliomyelitis and Polio-Encephalitis.** The number of cases was higher but by no means reached the proportions of some other areas. A total of 32 cases were confirmed including 26 with paralysis but none were notified as polio-encephalitis. There was 1 death.

#### ANALYSIS BY AGES

Age group	1954		1955	
	Male	Female	Male	Female
0 — 5 ..	1	3	1	4
5 — 10 ..	3	2	7	1
10 — 15 ..	—	—	6	—
15 — 25 ..	—	—	5	2
25+ ..	1	—	4	2

#### SEASONAL INCIDENCE

	Winter	Spring	Summer	Autumn
1954 ..	2	2	5	1
1955 ..	1	3	16	12

**Dysentery.** The number of cases notified was small ; there were seven outbreaks of insignificant proportions and in December a number of junior school children throughout the city were affected.

**E. Coli Gastro-Enteritis.** During the year 83 cases were admitted to hospital from various parts of the city.

In May, two children of the same family from another town were admitted to Redcot Residential Nursery. They were both found to have gastro-enteritis and were transferred to the Isolation Hospital. Full investigation of the staff and children revealed one symptomless carrier who quickly responded to treatment.

Early in July, a baby from the same nursery had to be transferred to the Isolation Hospital but none of the others was affected.

In September, another baby was admitted to hospital with symptoms, but no pathogenic organism was found. Three other babies had milder symptoms and in one of these, as also in a symptomless child, E. Coli was found ; all the staff were negative. Again in December, a new admission was found to be infected, but there were no other cases.

**Food Poisoning (Salmonella).** An outbreak of S. enteritidis occurred in the Nurses' Home of one of the hospitals ; six nurses were affected. Investigation showed an assistant cook to be a symptomless carrier. She was admitted to hospital for treatment and no further cases occurred.

Investigation of an outbreak of paratyphoid in a neighbouring town revealed a salmonella infection in tomato pork sausages made by a Nottingham firm. Two employees were found to be infected but by a different variety of salmonella and further infected samples of sausage were discovered. Production was suspended while the ingredients were examined but these proved to be negative. The opportunity was taken to secure some improvements in the manufacturing room including the replacement by stainless steel of the wooden tables.

**Paratyphoid B.** A serious outbreak occurred in September and October in a neighbouring town but no cases were found in the City. Previously, several contacts had been reported from other towns but none was found to be affected. In August, a patient in a general hospital was diagnosed as having Paratyphoid B. but she had acquired her infection while on holiday and was unconnected with the local outbreak. Four other cases occurred which were unrelated to each other and the origins could not be traced.

**Venereal Disease.** A report from the Special Treatment Centre shows that there were amongst City residents 17 male and 23 female new cases of syphilis and 146 male and 38 female cases of gonorrhoea.

A social worker attended at Amberley House—the female clinic—for 4 sessions weekly and gave special attention to expectant mothers, those who were making arrangements for the adoption of their child, and boys under 15 years of age.

There were 521 attendances by female patients and 13 by boys, as compared with 583 and 22 in 1954.

Of the expectant mothers attending, 32 did so for syphilis, 3 for gonorrhoea and 33 for non-venereal conditions, as against 27, 7 and 16 the previous year.

**Contacts or Carriers of Infectious Diseases.** Authority given under Ministry of Health Circular 115/48 authorising the Medical Officer of Health to certify contacts or carriers of infectious disease for exclusion from work in order to receive sickness benefit was exercised on 19 occasions. In each case the person was concerned with food handling and it was not possible to provide suitable alternative employment. Certificates were issued in respect of dysentery on 4 occasions, scarlet fever on 6, food poisoning on 3, poliomyelitis on 2 and paratyphoid on 4.

## FOOD SUPERVISION AND INSPECTION

### FOOD HYGIENE

It was difficult to maintain regular routine visits to food premises owing to the serious shortage of sanitary inspectors. In spite of this, however, every endeavour was made to keep under supervision those premises where food was prepared and in greater risk of being contaminated.

In July the Royal Show was held in Wollaton Park and inspectors maintained a close watch on the cafes and kiosks. The co-operation of the catering contractors resulted in the sale of food being carried on in a most hygienic manner.

Complaints of food containing foreign matter or otherwise contaminated showed an increase and related to such things as nails, metal, glass, paper, maggots and even the tail of a mouse. In 14 cases warning letters were sent whilst 5 offenders were prosecuted. One of these 5 cases was in connection with a piece of string in a loaf of bread ; subsequently the defendant company appealed to the Divisional Court and the appeal was allowed.

Proceedings under Sect. 13 of the Food and Drugs Act, 1938, were taken against the owner of a cafe for failing to take reasonable steps to prevent contamination of food during preparation and fines totalling £9. 0s. 0d. were imposed.

Registrations of premises under Sect. 14 of the Act for the manufacture of sausages and potted foods, etc., numbered 3 and 2 notifications were received of changes in the occupation of premises already registered ; the total number is 323.

In enforcing the observance of the provisions of the Food Handling Byelaws it was found necessary to take legal action against three offenders who failed to protect food from contamination. One case concerned the sale of ' hot dogs ' from a dirty mobile vehicle and the owner and employee were fined.

On the evidence of the Police a butcher was fined for exposing meat to contamination by a cat left overnight in a shop. A further case related to the storage of bread rolls in a dirty vehicle at a 'hot dog' stall at the Goose Fair.

In the course of 3,659 visits to various food premises it was necessary to draw attention to 181 defects and contraventions of the Acts and the Food Bye-laws. Requirements, including those outstanding from 1954, were met in 236 cases.

Food Premises Supervised	1954	1955
Grocers and provision dealers including off-licence premises ..	1,222	1,231
Butchers and meat products manufacturers .. ..	448	448
Hotels, public houses and clubs .. .. .	416	429
Sweet shops .. .. .	369	385
Fruit and vegetable dealers .. .. .	350	361
Factory canteens, etc. .. .. .	245	199
Restaurants, snack bars, etc. .. .. .	234	204
Bread, pastry, and confectionery dealers including bakehouses	180	163
Fried fish and chip shops .. .. .	165	161
Wet fish, poultry, game, etc., dealers .. .. .	86	75
Wholesale food dealers .. .. .	57	51
School kitchens .. .. .	50	52
Ice-cream manufacturers .. .. .	33	19
Mobile food shops .. .. .	9	11
Foodstalls in Markets :		
Wholesale .. .. .	40	40
Retail .. .. .	98	94
Miscellaneous .. .. .	74	55
Dairies .. .. .	8	7

### FOOD SAMPLING

A total of 99 samples of potted meat and 15 samples of cereal filler were taken from registered premises and sent for bacteriological examination ; every report was satisfactory.

Samples of Chinese egg—15 dried egg, 8 liquid egg and 2 dried egg albumen—were submitted for bacteriological examination and from two samples of dried egg an organism of the salmonella group was cultured. Appropriate steps were taken to ensure that none was used for human consumption.

Samples were taken as follows :—

Formal samples	..	662	Analysed by Public Analyst.
Informal	„	342	do.
Informal milk samples		502	Tested by Inspector.
		<hr/> 1,506 <hr/>	

The following were found not genuine :—

<i>Formal</i>	<i>Action Taken</i>
Pork Sausage—deficient in meat content.	Letter from Town Clerk to manufacturer.
„ „ „ „ „	Letter from Chief Sanitary Inspector to sellers and manufacturer.
„ „ „ „ „	Prosecution—case dismissed
„ „ „ „ „	Deemed no action advisable
Non-brewed Condiment — deficient in acetic acid content.	Manufacturer verbally advised by Inspector.
Full Cream Cheese—high moisture and low milk-fat contents did not justify the description.	Warning letter from Town Clerk to manufacturers.
Chopped Bacon—contained extraneous dry starchy matter.	„ „ „
Salad Cream—deficient in edible vegetable oil content.	„ „ „
<i>Informal</i>	
Pork Sausage—deficient in meat content.	Followed by formal sample.
„ „ „ „ „	„ „ „
„ „ „ „ „	„ „ „
„ „ „ „ „	„ „ „
„ „ „ „ „	„ „ „
„ „ „ „ „	„ „ „
Non-brewed Condiment — deficient in acetic acid content.	„ „ „
Full Cream Cheese—containing excess moisture and low in milk-fat.	„ „ „
Chopped Bacon — containing starchy matter.	„ „ „
Tinned Mandarin Oranges with odour and taste of paraffin oil.	Investigated — source not traceable.
Pork Sausages (canned)—deficient in meat content.	Followed by formal sample.

<i>Informal</i>	<i>Action taken</i>
Lemonade—containing traces of disinfectant.	Manufacturers seen and advised by Inspector.
Eccles Cakes—misleading label, regarding butter content.	Letter from Chief Sanitary Inspector to sellers.
Salad Cream—deficient in edible vegetable fat content.	Followed by formal sample.
Meat Pie—contained only 16·6% of meat.	Further samples to be obtained.

**Sampling of MILK and ICE CREAM**—see pages 120 and 122.

**Sampling of "OTHER FOODS"**—see page 127.

**Disposal of Condemned Food.** All meat and offals found on inspection to be unfit were removed from the slaughterhouses by approved firms for manufacture into animal feeding stuffs and fertilisers. Other foodstuffs were disposed of by the Corporation's Cleansing Department in controlled refuse tips.

For details of unsound food surrendered, see page 126.

### THE MEAT SUPPLY

The City abattoir and two privately owned slaughterhouses were in use.

Some amendment of the law in respect of slaughtering hours is much overdue. The staff of meat inspectors was seriously depleted and the tendency for slaughtering to take place at irregular hours on practically every day, including Saturday and Sunday, necessitated long hours of work to maintain an efficient inspection service. Despite the difficulty, all carcasses were inspected, and an improvement in quality was found.

Animals waiting slaughter at the abattoir were inspected as far as practicable and any showing abnormal conditions were dealt with without delay.

In cases of doubt confirmatory opinions on specimens were obtained from the Public Health Laboratory or from the Veterinary Inspectors of the Ministry of Agriculture, Fisheries and Food, Animal Health Division.

# **CARCASES AND OFFAL INSPECTED AND CONDEMNED IN WHOLE OR IN PART**

	Cattle exclud- ing Cows	Cows	Calves	Sheep and Lambs	Pigs	Horses	Total
Number killed ..	15,345*	6,065	5,506	58,104	75,004	—	160,024
Number inspected ..	15,345	6,065	5,506	58,104	75,004	—	160,024
<b>All Diseases except tuberculosis and cysticerci :</b>							
Whole carcasses condemned ..	8	23	18	67	92	—	208
Carcasses part (or organ) condemned	2,433	1,610	12	871	1,386	—	6,312
Percentage affected ..	15.9	26.9	.54	1.6	1.9	—	—
<b>Tuberculosis only :</b>							
Whole carcasses condemned ..	63	66	2	—	55	—	186
Carcasses part (or organ) condemned	1,648	1,746	—	—	4,692	—	8,086
Percentage affected	11.1	29.8	.036	—	6.3	—	—
<b>Cysticercosis :</b>							
Carcasses part (or organ) condemned	214	50	—	—	—	—	264
Carcasses submitted to treatment by refrigeration ..	51	9	—	—	—	—	60
Generalised and totally condemned	—	—	—	—	—	—	—

\* Bulls 498 :      bullocks 8,597 :      heifers : 6,250.

**Handling and Transport of Meat.** This showed some improvement. Several wholesalers purchased new vehicles during the year and one wholesaler had in use a new type of meat vehicle equipped with mechanical means of loading.

## THE MILK SUPPLY

### REGISTRATIONS

The conditions under which milk was produced, stored, treated and distributed were regularly examined to ensure that the statutory requirements applicable to the trade were observed.

REGISTRATIONS AT 31ST DECEMBER			
Processing establishments .. .. .			4
Distributors operating from wholesale dairies ..			14
"        "        "        dairies outside the			
the City ..			11
"        —shopkeepers .. .. .			631

### LICENSING

MILK (SPECIAL DESIGNATIONS) (RAW MILK) REGULATIONS, 1949

MILK (SPECIAL DESIGNATIONS) (PASTEURISED AND STERILISED MILK) REGULATIONS, 1949

LICENCES GRANTED			
Dealers' licences to pasteurise milk .. .. .			4
"        "        "        sterilise milk .. .. .			4
"        "        "        sell tuber. tested milk ..			74
"        "        "        "        pasteurised milk ..			404
"        "        "        "        sterilized milk ..			706
Supplementary licences to sell tuber. tested			
milk ..			10
"        "        "        "        pasteurised milk ..			11
"        "        "        "        sterilised milk ..			10

### SAMPLING

#### BACTERIOLOGICAL EXAMINATION

**Examination for Tubercle Bacilli.** Of 98 samples, including 11 of designated milks, 93 showed negative results to biological tests.

Positive results in 5 were followed by action under the Tuberculosis Order, 1938 : the percentage of such results is given :

1955 .. .. .	5.10 per cent.
1954 .. .. .	5.77 " "
1953 .. .. .	5.64 " "
1952 .. .. .	4.71 " "
1951 .. .. .	9.18 " "
1950 .. .. .	5.40 " "

**Tuberculin Tested Milk—Raw.** Of 158 samples procured all but 10 complied with the prescribed standards.

**Pasteurised Milk—including tuberculin tested milk (pasteurised).** Samples of pasteurised milk sold under licence numbering 741 were subjected to the half-hour Methylene Blue Test; all were satisfactory.

To test the efficiency of pasteurisation, these samples were also subjected to the Phosphatase Test and 724 were proved to have been satisfactorily treated.

**Sterilised Milk—including tuberculin tested sterilised milk.** A total of 242 samples processed under licence was obtained for examination; one only was found to have been unsatisfactorily treated.

#### CHEMICAL EXAMINATION

Samples analysed by the Public Analyst

	No. of samples	Average per cent of fat	Average per cent of solids not fat
January .. ..	39	3.794	8.841
February .. ..	39	3.650	8.783
March .. ..	63	3.752	8.704
April .. ..	42	3.631	8.783
May .. ..	40	3.532	8.679
June .. ..	75	3.385	8.707
July .. ..	47	3.594	8.719
August .. ..	29	3.527	8.506
September .. ..	60	3.688	8.681
October .. ..	63	3.933	8.779
November .. ..	73	3.745	8.776
December .. ..	60	3.818	8.724
AVERAGES .. ..	52.5	3.670	8.723
The standard for milk is 'Fat' 3.0% and 'Solids-not-Fat' 8.50%.			

Of the 502 informal samples subjected to the Gerber test by the inspector, 63 or 12.5% were of an unsatisfactory quality.

**ACTION TAKEN ON UNSATISFACTORY MILK SAMPLES**

Samples taken formally and found not genuine	Action taken
9 milks from 4 producers—deficient in milk-fat content.	Letters from Chief Sanitary In- spector to producer and Milk Production Officer.
20 milks from 8 producers—deficient in milk solids other than fat.	„ „ „ „
23 milks from 8 producers—deficient in milk fat and/or milk solids other than fat.	„ „ „ „
3 milks from one producer— deficient in milk fat and 1 contain- ed added water 7%.	Warning letter from Town Clerk to producer.

**ICE CREAM**

All manufacturers or dealers in ice cream must be registered under the provisions of the Nottingham Corporation Act, 1935; premises used by those persons must be registered under the provisions of the Food and Drugs Act, 1938.

2,302 inspections were made.

**Registrations** in force at the end of the year :—

**MANUFACTURERS.**

“ Hot Mix ” method	..	..	7
“ Cold Mix ” method	..	..	12
		—	19

**VENDORS AND DEALERS.**

“ Pre-packed ” ices	..	..	744
“ Loose ” ices	..	..	239
		—	983

New registrations	..	..	42
Transfer of registrations	..	..	81

**Sampling.** A total of 47 samples of ice cream was taken for analysis ; all conformed to the standard required by the Food Standards (Ice Cream) Order, 1953.

**Grading.** Samples for bacteriological grading by the Methylene Blue Reduction test were taken as under :—

Grade	Time taken to reduce Methylene Blue (hours)	No. of specimens reducing Methylene Blue
1	4½ or more	198
2	2½ — 4	79
3	½ — 2	30
4	0	5

In addition, six miscellaneous samples were taken for bacteriological examination and included milk powder, one iced lollie, water used for the sterilization of palette knives, and chocolate.

#### FERTILISERS AND FEEDING STUFFS ACT, 1926

Samples Taken	Satisfactory	Unsatisfactory	Total
<b>FERTILISERS :</b>			
" Nitro-Chalk " .. ..	1	—	1
Soluble Fertiliser .. ..	1	—	1
Sulphate of Potash .. ..	1	—	1
" Welgro " Fertiliser .. ..	1	—	1
Basic Slag .. ..	1	—	1
" Fertiloids " (National Growmore)	—	2	2
Fertiliser Bone Meal .. ..	1	1	2
Meat and Bone Fertiliser .. ..	1	—	1
Dried Blood .. ..	—	2	2
<b>FEEDING STUFFS :</b>			
Layers' Mash .. ..	1	1	2
Balancer Meal .. ..	—	2	2
Poultry Meal .. ..	—	1	1
Layers' Pellets .. ..	1	—	1
Pig Meal No. 2 (Fattening) .. ..	1	1	2
Sow and Weaner Meal .. ..	—	1	1
Grower's Ration Pellets .. ..	1	—	1
High Yield Dairy Ration .. ..	—	2	2
<b>TOTALS .. ..</b>	<b>11</b>	<b>13</b>	<b>24</b>

Action taken on unsatisfactory samples was as follows :—

"Fertiloids" (National Growmore)	..	Letter from Chief Sanitary Inspector to manufacturers.
Fertiliser Bone Meal	..	Followed by a satisfactory formal sample.
Layers' Mash	..	Letter from Chief Sanitary Inspector to manufacturers re labelling.
Pig Meal No. 2 (Fattening)	..	
Balancer Meal	..	Result reported to Administrative Authority in area of origin.
Balancer Meal	..	Warning letter from Town Clerk to manufacturers.
Poultry Meal	..	Prosecution—Seller fined £2. 2s. 0d. with £2. 2s. 0d. Costs.
Sow and Weaner Meal	..	Letter from Chief Sanitary Inspector to manufacturers.
High Yield Dairy Ration	..	Warning letter from Town Clerk to manufacturers.
Dried Blood	..	Warning letter from Town Clerk to seller.

### SHELL FISH

Shell fish from various sources were received into the Sneinton Wholesale Fish Market. The total weight found to be unfit for human consumption was 6 tons 13 cwts.

Thirteen samples of mussels were taken all of which were found to be satisfactory. Details are given :—

Origin of Layings				No. of Samples
Boston, Lincolnshire	..	..	..	3
Ireland	..	..	..	2
North Shields	..	..	..	1
Port Madoc, N. Wales	..	..	..	7

In addition two samples of whelks were taken and were found to be wholesome.

**PHARMACY AND POISONS ACT, 1933**

This Act permits the sale of poisons in Part II of the Poisons List by persons whose names and premises are entered in the Local Authority's list.

Applications for entry received—all approved..	..	20
Transfer of licences .. .. .	..	1
Registrations not renewed owing to discontinuance of Sales of Part II Poisons .. .. .	..	17

## DETAILS OF UNSOUND FOOD SURRENDERED

Food other than meat	In Stones	
	1954	1955
Bacon .. ..	174	168
Butter .. ..	12½	1½
Canned goods .. ..	8,122½	4,488½
Cakes and pastry .. ..	43	24
Cheese .. ..	43½	598½
Chocolates and sweets .. ..	10	5½
Coffee .. ..	3½	1½
Conserves .. ..	173	1½
Cooked meat .. ..	82½	—
Dried fruit .. ..	37	25½
Dried milk .. ..	8½	41
Eggs—dried .. ..	63	38½
Eggs—liquid .. ..	322½	—
Eggs—shell .. ..	3	11½
Fish .. ..	807	871
Fruit .. ..	144½	144½
Flour .. ..	35½	7½
Margarine .. ..	—	18
Miscellaneous .. ..	459½	26½
Poultry .. ..	68½	29½
Rabbits .. ..	193	27½
Sausage .. ..	81½	59
Shell fish .. ..	409	1,068½
Sugar .. ..	24	1½
Synthetic cream .. ..	3½	59
Vegetables .. ..	1,352½	563½
TOTAL .. ..	12,677½	8,282

Meat	Home killed	Imported
	in stones	
Beef .. ..	14,114½	209½
Mutton and Lamb .. ..	352½	—
Pork .. ..	3,993½	—
Veal .. ..	121½	—
Offals .. ..	17,423	31
TOTAL .. ..	36,005½	240½
GRAND TOTAL SURRENDERED: 36,245½ stones = approx. 226½ tons.		

## DETAILS OF SAMPLING "OTHER FOODS"

Item	Genuine			Unsatisfactory			Totals		
	Formal	In-formal	Total	Formal	In-formal	Total	Formal	In-formal	Total
Milk, raw .. .. .	434	—	434	56	—	56	490	—	490
Milk, processed .. .. .	140	1	141	—	1	1	140	2	142
Milk, canned .. .. .	—	12	12	—	—	—	—	12	12
Butter, cream, cheese and other dairy products .. .. .	—	9	9	1	1	2	1	10	11
Ice Cream and frozen lollies .. .. .	—	47	47	—	—	—	—	47	47
Open meat products .. .. .	6	15	21	6	9	15	12	24	36
Canned or preserved meats and meat products .. .. .	1	14	15	—	—	—	1	14	15
Canned or prepacked fish and fish products .. .. .	—	12	12	—	—	—	—	12	12
Soups .. .. .	—	3	3	—	—	—	—	3	3
Oils and fats .. .. .	12	8	20	—	—	—	12	8	20
Fresh fruits and vegetables .. .. .	—	4	4	—	—	—	—	4	4
Canned or preserved fruits and vegetables .. .. .	—	42	42	—	1	1	—	43	43
Sweets, sugar confectionery etc. .. .. .	1	14	15	—	—	—	1	14	15
Jams, conserves, fruit curds, jellies, etc. .. .. .	—	16	16	—	—	—	—	16	16
Bread, biscuits, etc. .. .. .	—	1	1	—	2	2	—	3	3
Baking powder and raising preparations .. .. .	—	1	1	—	—	—	—	1	1
Flours .. .. .	—	13	13	—	—	—	—	13	13
Cake, pudding and other flour mixtures .. .. .	—	2	2	—	—	—	—	2	2
Canned or pre-packed puddings .. .. .	—	3	3	—	—	—	—	3	3
Cereals .. .. .	—	2	2	—	—	—	—	2	2
Food flavouring and colouring .. .. .	—	1	1	—	—	—	—	1	1
Food drinks and non-alcoholic beverages .. .. .	1	40	41	—	1	1	1	41	42
Spices, sauces and condiments .. .. .	—	30	30	2	2	4	2	32	34
Wines, spirits and other alcoholic beverages .. .. .	2	11	13	—	—	—	2	11	13
Drugs, internal and external use .. .. .	—	20	20	—	—	—	—	20	20
Miscellaneous .. .. .	—	4	4	—	—	—	—	4	4
TOTALS .. .. .	597	325	922	65	17	82	662	342	1004

## HOUSING

Under the provisions of Sect. 1 of the Housing Repairs and Rents Act 1954, the Corporation submitted to the Minister of Housing and Local Government proposals for dealing with 2,610 unfit houses under Parts II and III of the Housing Act 1936.

Of these, 800 houses were represented for clearance, comprising 23 areas in Denman Street and 4 areas in St. Peter's Street ; Compulsory Purchase Orders were made and in September a Public Inquiry was held. The decision of the Minister is awaited.

Subsequently a further 414 houses, mostly situated in the Sneinton district, were represented with a view to their demolition under Clearance or Compulsory Purchase Orders. Nearly half of the unfit houses included in the programme of slum clearance were, therefore, the subject of official representations before the end of the year.

A table giving details relating to the demolition, closing, and repair of houses under the Housing and Public Health Acts is given on page 129.

**Certificates of Disrepair.** The table shows action taken upon applications by tenants for the issue of certificates of disrepair and by landlords for the revocation of such certificates.

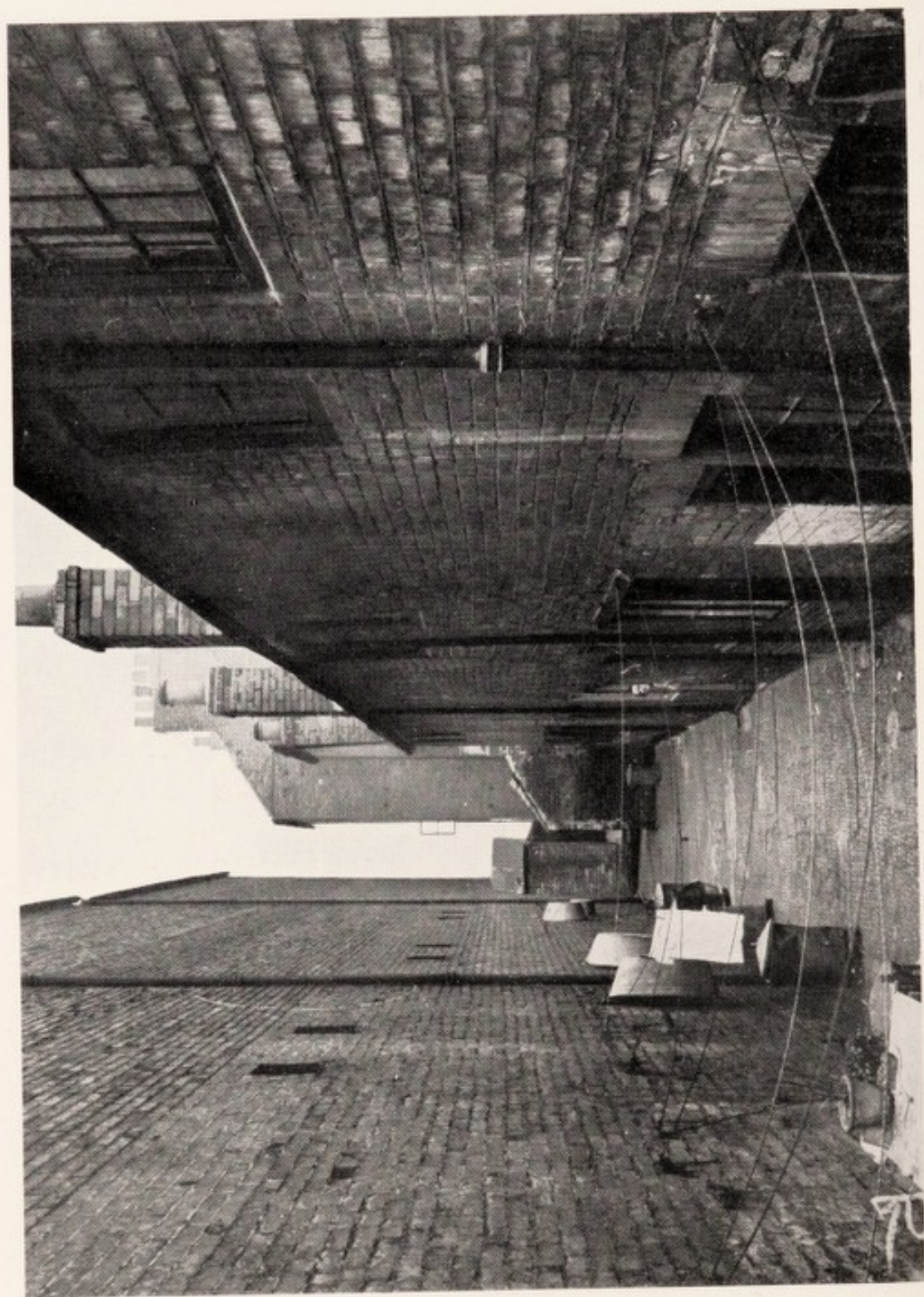
Applications for certificates	..	..	..	93
"    withdrawn	..	..	..	9
"    granted	..	..	..	62
"    refused	..	..	..	22
Certificates revoked	..	..	..	54
Applications for the revocation of certificates				
refused	..	..	..	2

### WOMEN HOUSING OFFICERS

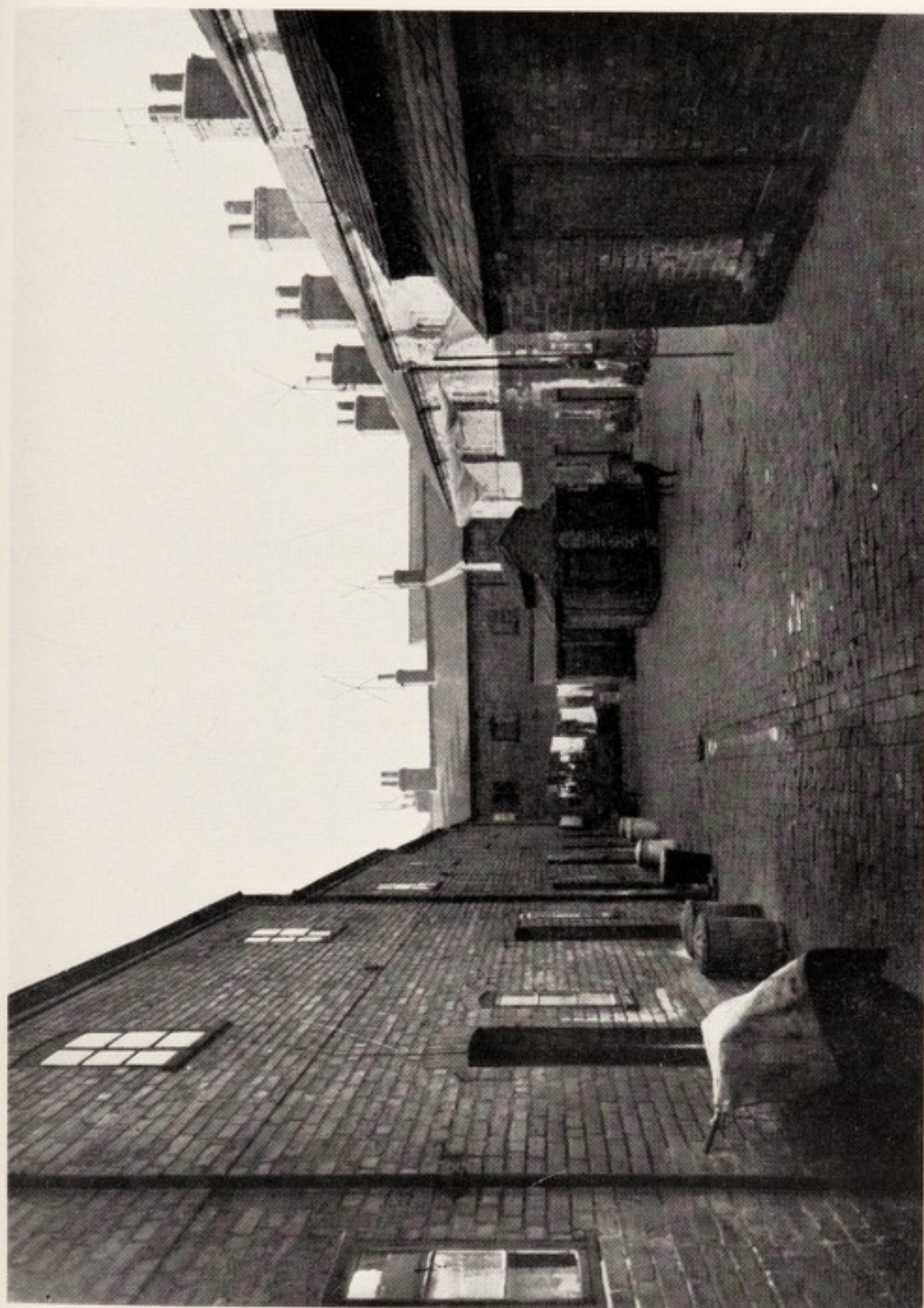
Defects reported to the Estates Department numbered 4,012 and were found in the course of 14,873 visits.

The number of staff and their duties remained as mentioned in previous reports.





" . . . THE ABSENCE OF AIR AND LIGHT . . . "



A ROOM WITH A VIEW :



## THE YEAR'S WORK

**Inspection of Dwelling-houses**

	1954	1955
Dwelling-houses inspected for housing defects under the Public Health or Housing Acts .. ..	10,559	9,508
Inspections made for the purpose .. ..	19,935	17,608
Dwelling-houses—included under sub-head above—which were inspected and recorded under the Housing Consolidated Regulations 1925 and 1938 ..	784	1,214
Inspections made for the purpose .. ..	3,684	5,411
Dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation .. ..	5	428
Dwelling-houses—exclusive of those referred to under the preceding sub-head—found not to be in all respects reasonably fit for human habitation ..	5,969	4,697

**Informal Action**

Defective dwelling-houses rendered fit in consequence of informal notices by the Local Authority or their officers .. ..	4,976	4,279
--	-------	-------

**Action under Statutory Powers****1. Proceedings under Sect. 9, 10 and 16 of the Housing Act, 1936.**

Dwelling-houses in respect of which notices were served requiring repairs .. ..	779	1,200
Dwelling-houses in which defects were remedied after service of formal notices :—		
1. By owners .. ..	589	898
2. By Local Authority in default of owners ..	190	208

**2. Proceedings under the Public Health Acts.**

Dwelling-houses in respect of which notices were served requiring defects to be remedied ..	1,199	899
Dwelling-houses in which defects were remedied after service of formal notices :—		
1. By owners .. ..	962	838
2. By Local Authority in default of owners ..	113	143

**3. Proceedings under Sects. 11 and 13 of the Housing Act, 1936.**

Dwelling-houses in respect of which demolition orders were made .. ..	3	9
Dwelling-houses demolished in pursuance of demolition orders .. ..	17	17

**4. Proceedings under Sect. 12 of the Housing Act, 1936 and Sect. 10 of the Local Government (Miscellaneous Provisions) Act, 1953.**

Closing Orders made .. ..	4	5
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## SANITARY SERVICES

Reference must again be made to the shortage of Sanitary Inspectors which resulted in the curtailment of certain duties—mainly connected with shops and workplaces—so that slum clearance and food inspection could be given priority.

The conversion of pail to water closets in the old Clifton Village continued, work being carried out at over half the houses; sewers are now available for completion of the scheme.

Complaints frequently arose from the occupation of land by caravan dwellers; successful proceedings were taken against one landowner and several occupiers of caravans. The recurring nuisances which arise on a large number of small sites in populous districts would be solved if a Corporation owned site with proper amenities were provided.

Responsibility for measures against rodent and insect pests on Corporation Housing Estates was transferred from the Estates Department to the Chief Sanitary Inspector's Department in August; one team of operators now undertakes all pest destruction work.

## WATER

Close co-operation continued between the Water and Health Departments to safeguard the purity of the water supply, which was satisfactory.

## SWIMMING BATH WATER

There was no alteration in the swimming accommodation. The exceptionally warm summer caused an increased number of samples to be taken; of 80, only 2 were found to be under-chlorinated. Of 8 samples taken from the paddling pool at Bulwell Lido, 1 was similarly unsatisfactory.

## ATMOSPHERIC POLLUTION

The standard of smoke emission from chimneys in Nottingham, other than those of private houses, is two minutes black smoke in the aggregate during a continuous period of thirty minutes ; any emission in excess of that limit is deemed to be a nuisance.

Inferior or unsuitable fuels were again responsible for some complaints of excessive emissions of smoke.

Monthly average emission of dense smoke per chimney in minutes					
	1951	1952	1953	1954	1955
January ..	1.95	1.65	1.63	1.64	1.82
February ..	1.93	1.46	1.75	1.24	1.14
March ..	2.28	1.42	1.82	0.90	0.74
April ..	1.49	1.68	1.07	1.25	1.23
May ..	1.60	1.16	1.10	0.93	1.63
June ..	1.76	1.36	1.82	0.84	1.02
July ..	1.49	0.84	0.94	1.05	1.05
August ..	1.16	0.92	0.56	1.09	1.06
September ..	1.05	0.94	0.89	0.91	0.86
October ..	1.21	1.35	1.13	1.23	0.85
November ..	1.61	1.53	1.15	0.92	1.49
December ..	1.87	1.17	1.18	1.23	0.87

Observations and notices	1951	1952	1953	1954	1955
Half-hourly observations of chimneys .. ..	1,351	1,329	1,103	1,238	1,188
Total no. of minutes dense smoke emitted ..	2,135	1,691	1,382	1,347.5	1,337
Average no. of minutes of dense smoke per chimney	1.6	1.3	1.3	1.1	1.15
Intimation notices served	93	69	49	40	46
Advisory visits including verbal cautions ..	413	409	417	470	442
Statutory notices served ..	22	17	10	8	7
Complaints investigated ..	136	128	156	168	186
Cases where work was executed for smoke and/or grit nuisance abatement	56	36	33	37	41

Work carried out by owners	1951	1952	1953	1954	1955
Chimney stacks erected or extended .. ..	8	9	7	13	7
Chimney stacks dismantled	7	2	5	6	1
Boilers converted from hand to mechanical stoking .. ..	6	20	4	5	8
Mechanical stokers overhauled or renewed ..	11	18	5	9	4
New boilers installed ..	13	9	5	11	8
Grit arresting apparatus installed .. ..	2	—	2	3	2
Grit arresting apparatus repaired .. ..	1	—	12	2	—
Steam cranes replaced by diesel .. ..	—	—	—	2	—
Steam locomotives replaced by diesel .. ..	1	—	—	2	—
Conversion from coal to oil fuel or gas .. ..	1	—	—	3	—
Filters and scrubbers for nylon plant .. ..	—	—	—	1	—
Miscellaneous .. ..	6	—	—	5	20
Estimated cost to the owners .. ..	£69,600	£74,710	£38,050	£68,640	£42,035

**Measurement of Atmospheric Pollution.** Seven stations, each equipped for the measurement of deposited solids from the atmosphere and of the sulphur content of the air, continued in operation.

**Summary of Analyses\***

	Deposited Solid Matter in Tons per Square Mile			Lead Peroxide
	Annual	Max. monthly	Av. monthly	Max. figures mgm. S.O. <sub>3</sub> per day per 100 sq. cm.
City Centre ..	208·57	21·76 : May	17·38	4·46 : Dec.
Basford † ..	223·73	26·50 : June	20·34	2·21 : Dec.
Bulwell ..	193·17	22·24 : Mar.	16·09	2·49 : Feb.
Clifton † ..	114·37	12·29 : Mar.	10·39	2·12 : Feb.
Meadows ..	213·64	22·61 : April	17·80	4·58 : Dec.
Mapperley† ..	114·65	12·93 : May	10·42	2·48 : Dec.
Wollaton ..	93·63	10·10 : May	7·80	1·27 : Feb.
Av. for City ..	165·96	—	14·32	—

\*For full details see page 142.

†Only 11 months results available.

The Department of Scientific and Industrial Research point out that "month to month variations in deposited matter are often the result of variations in weather, and a long period of observation, perhaps five years, is needed before reliable conclusions can be drawn about the average level of pollution or about the rate at which it is being produced".

**Approval of Furnace Installations.** The provisions of Section 85 of the Nottingham Corporation Act 1952, make it an offence to instal any furnace for steam raising or for any manufacturing or trade purposes, unless the furnace is, so far as practicable, capable of being operated continuously without emitting smoke. Plans and specifications of proposed new furnaces may be submitted to the City Council for approval and six installations were approved by the Health Committee after appropriate amendments had been made.

All plans and specifications submitted under Building Byelaws to the City Engineer's Department were perused and advice given on proposed fuel burning installations where necessary.

**FACTORIES ACT, 1937**

The tables indicate the scope and extent of work carried out. No prosecutions and no references to H.M. Inspectors were necessary.

**PART I****Inspections for purposes of provisions as to health.**

Premises	No. on register	Inspections made	Written notices served
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities .. .. .	251	154	3
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authorities .. .. .	2,076	841	28
(iii) Other Premises in which Section 7 is enforced by the Local Authority (excluding outworkers premises) ..	—	1	—
<b>TOTAL .. .. .</b>	<b>2,327</b>	<b>996</b>	<b>31</b>

**Details of Defects.**

Nature	Found by sanitary inspectors	Referred by H.M. Inspectors	Remedied*
Want of cleanliness .. .. .	4	—	4
Overcrowding .. .. .	—	—	—
Unreasonable temperature .. .. .	—	—	—
Inadequate ventilation .. .. .	—	—	—
Ineffective drainage of floors .. .. .	2	—	2
Sanitary conveniences :			
(a) Insufficient .. .. .	1	—	6
(b) Unsuitable or defective .. .. .	36	15	50
(c) Not separate for sexes .. .. .	5	—	5
Other offences against the Act (not including offences relating to outwork)	2	—	3
<b>TOTAL .. .. .</b>	<b>50</b>	<b>15</b>	<b>70</b>

\* Includes defects found but not remedied in 1954.

**Outwork.**

Outworkers employed in the City totalled 2,235 and 1,776 visits were paid to their premises which, in 4 cases, were found to be unwholesome.

Nature of Work	No. of Outworkers	
	1954	1955
Lace, lace curtains and nets .. .. .	1,211	1,055
Wearing apparel : Making etc., cleansing and washing .. .. .	960	960
Nets, other than wire nets .. .. .	89	141
Carding, etc., of buttons, hooks and eyes, pins and hair pins. .	39	36
Household linen .. .. .	38	29
Brass and brass articles .. .. .	17	8
Weaving of textile fabrics .. .. .	3	3
Paper bags .. .. .	—	3
TOTAL .. .. .	2,357	2,235

**SHOPS ACT, 1950**

Statutory closing hours of shops were generally complied with though some shopkeepers were warned regarding hours of closing and Sunday trading. Two traders were prosecuted and fined for the sale of groceries on Sunday.

The organisers of the Midlands Radio Exhibition and the Nottingham Ideal Home Exhibition were again granted an extension of the hours of closing for retail business.

The Clifton Half-Holiday Closing Orders Revocation Order made by the City Council came into force on the 7th February, enabling shop keepers in the City south of the River Trent to select the day of the week for early closing.

**PUBLIC HEALTH ACT, 1936**

**Workplaces.** Action was required in 5 cases of unsatisfactory sanitary accommodation for employees, and in 2 cases because of uncleanliness of premises.

**Common Lodging Houses.** Two establishments in the City were satisfactorily conducted.

**Canal Boats.** The canals and other navigable waters within the City were visited on six occasions and eleven boats were inspected ; the inspector was allowed free access to the cabins.

One notice was issued against the owner of a boat contravening Section 255 (3) of the Public Health Act, 1936, in failing to produce the Registration Certificate.

No case of infectious disease was reported nor was it necessary to detain any boat.

There were no new registrations ; the number of boats in use and registered by this Authority is forty-one.

**KNACKERY**

The work at the one knackers' yard in the City was supervised and found to be satisfactory.

**RAG FLOCK AND OTHER FILLING MATERIALS ACT, 1951**

The Chief Sanitary Inspector and four other Inspectors are authorised officers for the purposes of this Act.

Licences and registrations in force :—

Upholstery premises registered	..	..	37
Licences to store rag flock	..	..	4

A total of 71 informal samples of various materials was taken and 2 were found to be unsatisfactory :—

	Action Taken
Sample No. 58—Rag Flock—excess of 0·3% of soluble impurities.	Subsequent formal sample—satisfactory.
Sample No. 66—Cotton Felt—excess of 0·2% of trash.	do. do.

### MEASURES AGAINST RODENT AND INSECT PESTS

Control measures against rats and mice continued to show good results. Though there were no large colonies, the need to search for rats and exterminate them without delay remained essential. When investigating complaints, neighbouring premises were also surveyed and many unsuspected infestations were discovered at an early stage. Much more could be done by householders to make conditions unfavourable for breeding by removing harbourages and by the proper storage of food and refuse.

Occupiers of domestic and business premises were assisted in the identification and destruction of a variety of insect pests. There was a marked decrease in the number of houses infested with bed-bugs.

Nuisances from mosquitoes were widespread due largely to the favourable weather conditions and the accumulation of small quantities of stagnant water in rainwater gullies, water butts, storage tanks and garden ponds.

### Rodent and Insect Control

Properties surveyed .. .. .	4,925
Infestations dealt with :	
rats .. .. .	1,478
mice .. .. .	622
insects .. .. .	643
Total visits .. .. .	14,972

**HEATING APPLIANCES (FIREGUARDS) ACT, 1952**

In 25 visits paid to premises, including auction rooms, 1 calor gas heater and 3 electric heaters were found to be unsatisfactory and were withdrawn from sale.

## THE YEAR'S WORK

## NOTICES

## INFORMAL

	1954	1955
TOTAL NUMBER COMPLIED WITH .. ..	10,782	9,765

Details of Nuisances Found	Nuisances, etc., remedied	
	1954	1955
Houses —filthy .. ..	31	31
„ —verminous .. ..	1	1
Drains —clearance of .. ..	129	293
„ —repair of .. ..	324	277
Panterpits—abolition of .. ..	3	4
Additional water-closets—provision of .. ..	—	14
Water-closets—clearance of .. ..	58	32
„ „ —repair of .. ..	2,009	2,167
Closets—cleansing of .. ..	13	8
Courts, yards and passages—paving of .. ..	13	34
„ „ „ —cleansing .. ..	7	8
„ „ „ repair of .. ..	242	308
Nuisance from pigs .. ..	3	1
„ „ fowls .. ..	4	2
„ „ other animals .. ..	7	3
„ „ accumulations of refuse .. ..	29	38
Dustbins—provision of .. ..	2,243	1,708
Miscellaneous nuisances .. ..	365	121
Tents, vans and sheds .. ..	5	32
Houses-let-in-lodgings .. ..	23	3
Factories with mechanical power .. ..	212	42
„ without mechanical power .. ..	5	2
Workplaces .. ..	24	3
TOTAL .. ..	5,750	5,132

Defects in Houses	Defects remedied	
	1954	1955
Roofs .. ..	1,890	2,318
Walls .. ..	1,579	1,873
Floors and ceilings .. ..	1,096	1,201
Windows .. ..	1,760	1,701
Fireplaces .. ..	784	614
Coppers .. ..	63	41
Sinks provided .. ..	55	70
„ —repair of .. ..	212	235
Defective water pipes and fittings .. ..	196	122
„ rainwater conductors .. ..	1,291	1,260
Others .. ..	900	1,386
TOTAL .. ..	9,826	10,821
Number of defective houses dealt with	5,969	4,697

## STATUTORY

## Notices under Public Health Act, 1936

					Complied With	Complied With
					1954	1955
Sect. 39	Drainage	..	..	..	381	423
„ 44	Inadequate closet accommodation	..			11	3
„ 45	Closets	..	..	..	72	54
„ 56	Paving of courts, yards and passages, dwelling-houses	..	..		125	126
„ 75	Dustbins	..	..	..	668	499
„ 83	Dirty houses	..	..	..	4	1
„ 92	Houses	..	..	..	569	432
„ „	Others	..	..	..	2	—
„ 287	Notice of entry	..	..	..	8	6

## Notices under Nottingham Corporation Act, 1923

Sect. 73	Repair of water-closets	..	..	331	458
----------	-------------------------	----	----	-----	-----

## Notices under Nottingham Corporation Act, 1952

Cleansing and repair of drains, water-closets and soil pipes	..	..	..	..	96	116
---	----	----	----	----	----	-----

## Notices under Housing Act, 1936

Sect. 9	..	..	..	..	822	1,106
TOTAL	..	..	..	..	3,089	3,224

Consequent upon the failure of owners to comply with statutory notices, the Corporation ordered work on private contractors and recovered expenses incurred in 614 cases as follows :—

ACT		1954	1955
		£ s. d.	£ s. d.
Nottingham Corporation Act, 1923, Sect. 73	..	173 1 1	284 15 6
" " " " 1952, " 72	..	11 11 5	78 19 6
Housing Act, 1936, Sects. 9 and 10	..	2,267 9 0	2,748 14 4
Public Health Act, 1936, Sect. 39	..	504 16 9	390 3 10
" " " " " 44	..	- - -	155 12 9
" " " " " 45	..	144 5 1	95 10 2
" " " " " 56	..	265 0 4	333 4 8
		3,366 3 8	4,087 0 9

The cost of new dustbins supplied by the Corporation where owners or occupiers had not complied with notices served and where steps were taken to recover this amount was £183. 15s. 1d.

#### NUMBER OF INSPECTIONS

					1954	1955
First visits	..	..	..	..	18,695	16,931
Re-visits	..	..	..	..	26,955	24,736
TOTAL	..	..	..	..	45,650	41,667

# MEASUREMENT OF ATMOSPHERIC POLLUTION

## DEPOSIT GAUGES

Deposited solid matter in tons per square mile per month.

	City Centre			Basford			Bulwell			Meadows			Mapperley			Wollaton			Clifton		
	Insol- uble	Sol- uble	Total	Insol- uble	Sol- uble	Total	Insol- uble	Sol- uble	Total	Insol- uble	Sol- uble	Total	Insol- uble	Sol- uble	Total	Insol- uble	Sol- uble	Total	Insol- uble	Sol- uble	Total
January ..	10.76	7.90	18.66	14.20	10.00	24.20	8.28	7.43	15.71	11.97	7.67	19.64	7.57	5.00	12.57	3.83	4.00	7.83	6.01	5.28	11.29
February	10.64	5.32	15.96	12.60	5.83	18.43	7.29	5.56	12.85	8.67	4.43	13.10	5.67	4.20	9.87	4.17	4.02	8.19	3.82	3.55	7.37
March ..	13.30	7.84	21.14	8.70	7.00	15.70	15.28	6.96	22.24	10.30	5.88	16.18	6.90	4.44	11.34	4.67	4.44	9.11	6.62	5.67	12.29
April ..	11.85	6.91	18.76	15.20	6.00	21.20	10.97	5.63	16.60	16.34	6.27	22.61	7.13	3.64	10.77	6.13	3.50	9.63	6.45	4.05	10.50
May ..	11.23	10.53	21.76	No results available			11.73	8.12	19.85	14.60	7.47	22.07	8.37	4.56	12.93	6.10	4.00	10.10	7.40	4.73	12.13
June ..	11.00	9.88	20.88	16.70	9.80	26.50	10.11	7.62	17.73	13.27	7.47	20.74	7.67	5.14	12.81	4.47	4.67	9.14	No results available		
July ..	9.94	3.59	13.53	15.04	3.33	18.37	10.70	1.86	12.56	10.47	2.75	13.22	No results available			5.33	0.93	6.26	6.99	1.89	8.88
August ..	10.07	2.53	12.60	13.64	3.33	16.97	12.82	3.08	15.90	9.07	1.67	10.74	7.13	1.87	9.00	5.83	1.50	7.33	9.15	1.38	10.53
September	10.31	4.84	15.15	13.04	4.67	17.71	10.83	4.41	15.24	12.30	4.66	16.96	5.37	2.33	7.70	3.53	1.87	5.40	7.16	2.36	9.52
October	9.68	7.24	16.92	14.44	6.23	20.67	7.45	4.87	12.32	10.57	7.00	17.57	4.04	3.37	7.41	3.10	3.27	6.37	7.67	3.89	11.56
November	10.53	5.60	16.13	12.84	7.47	20.31	10.50	4.71	15.21	12.04	6.67	18.71	6.47	3.60	10.07	2.47	2.80	5.27	5.27	3.78	9.05
December	10.63	6.45	17.08	14.10	9.57	23.67	10.93	6.03	16.96	13.70	8.40	22.10	5.40	4.78	10.18	5.50	3.50	9.00	7.47	3.78	11.25
<b>Total ..</b>	<b>129.94</b>	<b>78.63</b>	<b>208.57</b>	<b>150.50</b>	<b>73.23</b>	<b>223.73</b>	<b>126.89</b>	<b>66.28</b>	<b>193.17</b>	<b>143.30</b>	<b>70.34</b>	<b>213.64</b>	<b>71.72</b>	<b>42.93</b>	<b>114.65</b>	<b>55.13</b>	<b>38.50</b>	<b>93.63</b>	<b>74.01</b>	<b>40.36</b>	<b>114.37</b>

## ATMOSPHERIC SULPHUR

Expressed as milligrammes of Sulphate per day per 100 sq. cm. of Lead Peroxide.

	City Centre	Basford	Bulwell	Meadows	Mapperley	Wollaton	Clifton
January ..	2.17	2.07	1.77	2.20	1.75	1.03	1.93
February ..	3.59	1.62	2.49	3.89	1.79	1.27	2.12
March ..	2.18	1.98	1.18	2.35	1.55	0.82	1.63
April ..	2.33	1.20	1.01	2.54	1.05	0.48	0.74
May ..	2.16	1.09	0.85	2.91	1.11	0.35	0.76
June ..	1.31	0.73	0.59	2.14	0.67	0.35	—
July ..	1.11	0.62	0.51	1.62	0.56	0.33	0.46
August ..	0.99	0.70	0.58	1.51	0.53	0.16	0.49
September ..	2.08	0.95	0.80	2.54	0.91	0.27	0.46
October ..	3.47	1.62	1.14	3.83	1.44	0.56	1.09
November ..	4.08	2.00	1.66	3.92	1.84	1.11	1.55
December ..	4.46	2.21	1.91	4.58	2.48	0.96	1.36



## PART IV.

### MISCELLANEOUS

EPILEPSY AND CEREBRAL PALSY

ESTABLISHMENTS FOR MASSAGE OR SPECIAL  
TREATMENT

INCIDENCE OF BLINDNESS

NATIONAL ASSISTANCE ACTS 1948  
and 1951—RECORD OF CASES

NOTTINGHAM CREMATORIUM

NURSES ACT 1943—NURSING AGENCIES

NURSING HOMES

PUBLIC MORTUARY

ULTRA VIOLET RAY CLINIC

## EPILEPSY AND CEREBRAL PALSY

The numbers of persons known to be suffering from epilepsy and cerebral palsy are given below. In both instances an increase is shown as more cases are being brought to notice.

	Local Education Authority	Mental Health Service	Others	Total
Cerebral Palsy ..	67	52	60	179
Epilepsy .. ..	79	79	31	189
Cerebral Palsy and Epilepsy .. ..	2	8	—	10

During the year the Welfare Services Committee made schemes under Section 29 of the National Assistance Act, 1948, for persons who are deaf or dumb and for handicapped persons (other than the blind or partially sighted and the deaf or dumb); registers of such persons were being compiled.

## ESTABLISHMENTS FOR MASSAGE OR SPECIAL TREATMENT

### NOTTINGHAM CORPORATION ACT, 1952

There were 14 applications for renewals and 3 for new licences; conditions were satisfactory in all cases except one new applicant, whose premises were found to be unsuitable.

Registered members of the Chartered Society of Physiotherapists or the Faculty of Physiotherapy are exempted from annual licensing, but are required to submit certificates of exemption signed by independent medical practitioners. Certificates of exemption were received in respect of 8 registered members of these professional bodies and their premises were inspected in accordance with the bye-laws made under this Act.

## INCIDENCE OF BLINDNESS

### A. Follow-up of Registered Blind and Partially Sighted Persons.

The number on the Blind Persons Register at the end of the year was 651, an increase of 33 on the previous year. More effective ascertainment and greater awareness of the advantages of registration appear to be the reasons for this increase.

Blind	Cause of Disability			
	Cataract	Glaucoma	Retrolental Fibroplasia	Others
(1) Cases registered during the year in respect of which para. 7(c) of Forms B.D.8 recommends :				
(a) No treatment ..	14	6	-	22
(b) Treatment (medical, surgical or optical)	14	6	-	11
(2) Cases at (1) (b) above which on follow up action have received treatment ..	6	6	-	9
<b>Partially-Sighted</b>				
(1) Cases registered during the year in respect of which para. 7(c) of Forms B.D.8 recommends :				
(a) No treatment ..	-	1	-	2
(b) Treatment (medical, surgical or optical)	5	2	-	4
(2) Cases which received follow up treatment ..	3	2	-	1

### B. Ophthalmia Neonatorum.

No cases of impairment of sight were notified.

### NATIONAL ASSISTANCE ACTS, 1948 — 1951

An analysis is given of the nine cases referred for consideration of compulsory removal. All were visited by a medical officer and a sanitary inspector, except one in whom a sudden illness supervened, which necessitated admission to hospital a few hours after referral. Statutory action was avoided in every case, because persuasion was successful in inducing the patients to accept institutional treatment.

Result of Visit	1954	1955
Statutory action.. ..	-	-
Voluntarily removed to hospital or Part III accommodation ..	4	7
Voluntarily removed for cleansing..	3	-
Removed under Sect. 20, Lunacy Act, 1890 .. ..	1	-
Under observation at home ..	2	1
No action required .. ..	2	1
Died .. ..	1	-

## NOTTINGHAM CREMATORIUM

The number of cremations—3,940 was the highest on record. The figures for the past 8 years are given.

Year	ALL CREMATIONS		CREMATIONS OF CITY RESIDENTS		
	No.	Increase over previous year	No.	Increase over previous year	Percentage of total deaths
1948	1,420	13%	559	18%	17·2%
1949	2,000	41%	759	36%	21·3%
1950	2,402	20%	917	21%	26·9%
1951	2,856	19%	1,051	15%	28·3%
1952	2,777	— 2·8%	969	— 8·4%	30·5%
1953	3,126	13%	1,139	18%	34·5%
1954	3,578	14%	1,311	13%	39·9%
1955	3,940	10%	1,432	9%	40·9%

### Cremation and Residence

PLACE OF RESIDENCE	NO. OF CREMATIONS	
	1954	1955
City .. .. .	1,311	1,432
County excluding West Bridgford	949	1,169
West Bridgford .. .. .	150	169
Other areas .. .. .	1,168	1,170
<b>TOTAL .. .. .</b>	<b>3,578</b>	<b>3,940</b>

## NURSING AGENCIES

Two agencies which were first licensed in 1945 had their licences renewed, the staff, premises and records being found satisfactory. These agencies had on their registers, 35 State Registered Nurses, 5 State Certified Midwives, 11 State Enrolled Assistant Nurses and 1 Registered Mental Nurse.

A licence granted in November, 1954, remained in force ; this agency intended to employ 60 State Registered Nurses, 20 State Certified Midwives and 30 State Enrolled Assistant Nurses.

## NURSING HOMES

Nursing homes registered under the Public Health Act, 1936, Sects. 187-195, numbered 8 in mid-January, when 2 homes surrendered their certificate. Following removal to larger premises in April, one home doubled its accommodation and was re-registered for 10 maternity beds ; three months later an additional 3 beds were registered for general medical cases.

In December there were 24 maternity beds in 4 nursing homes and 48 beds for other cases in 6 homes, 2 of the latter also admitting maternity cases.

## PUBLIC MORTUARY

As many undertakers now have private mortuaries, the number of bodies received at the Leenside Mortuary fell to 397, the majority of which were subject to the jurisdiction of the City Coroner ; 318 post-mortem examinations were carried out.

The mortuary was staffed by two full-time trained attendants, who also assisted the pathologists at post-mortem examinations.

The recent modernisation of the premises and equipment has been fully justified.

## ULTRA VIOLET RAY CLINIC

### SUMMARY OF THE WORK

Analysis of cases :			1954	1955
Cases from previous year	..		200	201
New cases	..	..	551	432
			<hr/>	<hr/>
Total cases treated	..	..	751	633
City patients	..	..	719	604
County patients	..	..	32	29
			<hr/>	<hr/>
			751	633
Adult patients male	..	..	218	190
„ „ female	..	..	315	300
Patients 5-15 years	..	..	90	80
„ 0-5 years	..	..	128	63
			<hr/>	<hr/>
			751	633
Cases discharged or ceased to attend..			550	396
„ carried forward	..	..	201	237
			<hr/>	<hr/>
			751	633
No. of treatments :				
total given	..	..	14,699	13,238
average per patient	..	..	19.6	20.9



## PART V.

### HEALTH COMMITTEE

” ” STAFF

” ” REPORT TO THE CITY  
COUNCIL

### SICKNESS RETURNS—MINISTRY OF NATIONAL INSURANCE

### FINANCIAL SUMMARY

## HEALTH COMMITTEE

1955

LORD MAYOR :

COUNCILLOR LEONARD MITSON, J.P.

CHAIRMAN :

ALDERMAN ERNEST PURSER

VICE-CHAIRMAN :

COUNCILLOR Miss GLEN BOTT, J.P., M.B., B.S., F.R.C.O.G.

ALDERMAN R. ARBON

ALDERMAN W. CRANE, C.B.E., M.A., J.P.

ALDERMAN H. O. EMMONY, J.P.

COUNCILLOR L. ANDERSON

COUNCILLOR H. J. H. BRYAN

COUNCILLOR C. CAMERON, J.P.

COUNCILLOR Mrs. L. E. CHAMBERS, J.P.

COUNCILLOR J. LLEWELLYN DAVIES, F.R.C.S.

COUNCILLOR C. E. GIBBS

COUNCILLOR W. H. MURDOCK

COUNCILLOR Mrs. K. A. RITCHIE

COUNCILLOR Dr. E. WANT, M.B., Ch.B.

COUNCILLOR Mrs. M. E. WOOD

## HEALTH COMMITTEE STAFF

### Medical Officer of Health—

WILLIAM DODD, M.D., M.R.C.P., D.P.H.

### Deputy Medical Officer of Health—

ELSPETH M. WARWICK, M.B., Ch.B., D.P.H.

### Senior Medical Officers—

PATRICIA H. S. SHAW, M.D., D.P.H., Barrister-at-Law.

*Prevention Care and After-Care.*

FRANCES M. EARLE, M.D., D.C.H., D.P.H.

*Maternal and Child Health.*

### Senior Assistant Medical Officers—

J. V. L. FARQUHAR, M.A., M.R.C.S., L.R.C.P., D.P.H.      To 15.10.55.

W. MARY MARKHAM, M.R.C.S., L.R.C.P., D.C.H.

### Medical Officers—

FREDA M. CHALKLEY, M.R.C.S., L.R.C.P.

JANET B. DALGETTY, M.B., Ch.B.

SYLVIA M. MATTHEWS, M.B., B.S.

NELLIE M. PLOWRIGHT, M.B., Ch.B., D.C.H.

MEGAN E. WILKINSON, M.B., Ch.B.

### City Analyst—

W. W. TAYLOR, B.Sc., F.R.I.C.    †

### John Ryle Health Centre—

*Secretary*—MISS J. E. SMITH.

### Midwifery Service—

*Supervisor*—MISS E. E. JONES, S.R.N., S.C.M., H.V., Q.N.

*Asst.*    „    MISS M. M. LE MANQUAIS, S.R.N., S.C.M.,

R.F.N., M.T.D.

To 6.9.55.

„    „    MISS G. J. BOOKER, S.R.N., S.C.M., H.V.

From 19.9.55.

*District Midwives* —36 Full-time.

3 Part-time.

### Health Visiting Service—

*Superintendent*—MISS M. W. BEATTY, S.R.N., S.C.M.

*Deputy Superintendent*—MISS M. MACFIE, S.R.N., S.C.M.

*Student Health Visitor Tutor*—MISS D. T. HOGG, S.R.N., S.C.M.

*Senior Health Visitor*—

1

*Welfare Centre Superintendents*—

8

*Health Visitors* —General    ..    ..    23

Tuberculosis    ..    ..    6

Students    ..    ..    5

† Part-time.

**Day Nurseries—***Supervisor*—MISS K. THOMPSON.

ARNOLD ROAD	..	<i>Matron</i> —MISS E. HALLS, C.N.N. <i>Nursery Nurses</i> —5 <i>Warden</i> 1
BELLS LANE	..	<i>Matron</i> —MISS M. R. M. DALE, C.N.N. <i>Nursery Nurses</i> —5 <i>Warden</i> 1
BULWELL	..	<i>Matron</i> —MISS D. GARSIDE, S.R.N. To 30.9.55. ,, MRS. Y. CHAPMAN, C.N.N. From 1.10.55. <i>Nursery Nurses</i> —5 <i>Warden</i> 1
DOWSON	..	<i>Matron</i> —MRS. P. BATES, C.N.N. <i>Nursery Nurses</i> —4 <i>Warden</i> 1
HEATHCOAT STREET		<i>Matron</i> —MISS J. TALBOT. <i>Nursery Nurses</i> —5 <i>Warden</i> 1
PIERREPONT	..	<i>Matron</i> —MISS E. I. WALKER, R.S.C.N. <i>Nursery Nurses</i> —5 <i>Warden</i> 1
QUEEN'S DRIVE	..	<i>Matron</i> —MRS. E. MACKINTOSH, S.R.N., S.C.M. <i>Nursery Nurses</i> —6
RADFORD	..	<i>Matron</i> —MRS. M. A. R. NAYLOR, S.R.N. <i>Nursery Nurses</i> —5 <i>Warden</i> 1
SYCAMORE ROAD		<i>Matron</i> —MRS. H. ROSS, R.S.C.N., C.N.N. <i>Nursery Nurses</i> —5 <i>Warden</i> 1

**Mother and Baby Home—The Hollies—***Matron*—MRS. M. SHAW, S.C.M.*Deputy Matron*—MISS L. PLUMB, S.R.N., S.C.M. From 18.4.55.**Octagon Club—Nuffield House—***Supervisor*—MRS. I. M. BEDFORD.

From 18.4.55.

*Occupational Assistants*—2**Tuberculosis—**

JOHN V. WHITAKER, M.B., Ch.B., D.T.M. &amp; H., D.P.H. ★

**Social Workers—**

MISS G. HATTON.

MISS M. BOTTOMS.

MISS S. WEST.

**Home Nursing Service—***Superintendent*—Miss M. M. KNOTT, S.R.N., S.C.M., H.V., Q.N.*Senior Assistant Superintendent—*

Miss E. E. SRIGLEY, S.R.N., S.C.M., H.V., Q.N.

*Assistant Superintendents—*

Miss B. BREWER, S.R.N., S.C.M., H.V., Q.N. From 12.12.55.

Mrs. B. E. DAVIS, S.R.N., Q.N. From 1.5.55.

*Home Nurses—* 51 — Full-time.

5 — Part-time.

17 — Students.

**Home Help Service—***Organiser*—Mrs. L. E. GRAY.*Deputy Organiser*—Miss M. J. MELLOR. From 9.3.55.*District Organisers—*

Miss S. M. BOSWELL, B.Sc.

Mrs. D. M. CLULOW. To 3.6.55.

Mrs. E. M. CRICH. From 18.7.55.

Mrs. K. A. STEVENSON.

Miss E. L. WILSON.

*Case Workers* — 8.*Home Helpers* —Full-time —224.

—Part-time —226.

—Casual — 10.

**Mental Health Service—**

DUNCAN MACMILLAN, M.D., B.Sc., F.R.C.P.E., D.Psych. \*

Physician-Superintendent, Mapperley Hospital.

HENRY FISHER, M.D., L.R.C.P., L.R.C.S., D.P.M.\*

Dep. Physician-Superintendent, Mapperley Hospital.

THOMAS R. FORSYTHE, M.D., D.P.M. \* To 21.5.55.

Consultant Psychiatrist, Mapperley Hospital.

WILFRID L. JONES, M.B., B.S., D.P.M. \*

Consultant Psychiatrist, Mapperley Hospital.

JULIUS KAMIENIECKI, Ph.D., M.A., LL.M. \*

Senior Psychologist.

KENNETH O. MILNER, M.D., M.R.C.S., L.R.C.P., D.P.M. \*

Physician-Superintendent, Aston Hall Institution.

*Mental Health Officer*—J. E. WESTMORELAND.*Deputy Mental Health Officer*—G. E. HIBBARD.*Head Social Worker*—Miss M. PIMLOTT.*Social Workers*—4. \**Duly Authorised Officers*—6.*City Occupation Centre Organiser*—D. H. CATER.*City Occupation Centre Staff*—11.

\* In conjunction with Sheffield Regional Hospital Board.

**Administrative and Clerical—***Administrative Officer*—C. V. TUBB, D.P.A.,, *Asst.* —F. F. PELLATT, D.P.A., Cert. R.S.H. From 3.8.55.*Chief Clerk*—J. C. SLIGHT.*Senior Clerks*—10.*Clerks, General Divisions, all sections*—Full-time 43.

Part-time 13.

**Ambulance Service—***General Manager*—B. ENGLAND, M.I.Mech.E., M.Inst.T.*Ambulance Officer*—A. K. HICKS.*Deputy „ „* —R. G. YATES.**Sanitary Inspection Service—***Chief Sanitary Inspector*—A. WADE, M.B.E., F.R.S.H.*Deputy Chief Sanitary Inspector*—R. YOUNG, M.R.S.H.*Senior Inspector of Meat and other Foods*—F. RICHARDSON, Cert.R.S.H.*Senior Housing Inspector*—J. D. McDONALD, M.R.S.H.*Sanitary Inspectors, all branches* —25.,, „ *Trainees* — 2.*Smoke Inspector*—1.*Women Housing Officers*—3.**Ultra Violet Ray Clinic—**

HENRY N. JAFFE, M.B., B.S. †

SOPHIA K. G. STUART, M.A., M.B., Ch.B. †

*Secretary/Attendant*—MRS. D. A. MORRIS.*Nurse Attendants*—2.**Other Staff—**

<i>Caretakers</i>	..	..	..	4	
<i>Cleaners</i>	..	..	..	16	Full-time
				16	Part „
<i>Cook/Housekeepers</i>	..	..	..	4	
<i>Cooks</i>	..	..	..	11	
<i>Laundry Hands</i>	..	..	..	2	Full „
				2	Part „
<i>Maintenance Assistant</i>	..	..	..	1	
<i>Mortuary Attendants</i>	..	..	..	2	
<i>Nursing Aid</i>	..	..	..	1	Part „
<i>Rodent Operators</i>	..	..	..	7	
<i>Seamstress</i>	..	..	..	1	Part „
<i>Storemen</i>	..	..	..	2	
<i>Van Drivers</i>	..	..	..	3	

† Part-time.

HEALTH REPORT 1955

# REPORT

OF THE

HEALTH COMMITTEE

TO THE

CITY COUNCIL

**AS TO THE REVOCATION OF WEEKLY HALF HOLIDAY  
ORDERS FOR SHOPS ON THE SOUTH SIDE OF THE RIVER  
TRENT IN THE CITY OF NOTTINGHAM.**

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**THE HEALTH COMMITTEE**

Beg to report

That orders made under the Shops Acts are in force in the City which require shops where certain trades are carried on to be closed for the weekly half holiday either on Thursday or on Saturday afternoons. In general a shopkeeper not affected by one of these orders is required to close on one afternoon in each week, but may select his own day.

A request has been received from four shopkeepers on the Clifton Estate who are affected by half holiday closing orders for permission to close on Wednesday afternoons in order to conform with the general practice of other shops in the locality. The number of shops in this area is likely to increase rapidly in the next few years and your Committee are of opinion that while it is reasonable to revoke the existing orders so that shopkeepers may close on Wednesday afternoons if they so wish, nevertheless Wednesday half holiday closing ought not at this stage to be made compulsory.

Your Committee have taken all the steps required by the Shops Act, 1950 and the Shops Regulations, 1912 for ascertaining the opinion of the occupiers of the seven shops affected. All are in favour of the proposal.

They therefore recommend the Council to make the Order set out in the appendix to this report and authorise the Town Clerk to take all necessary steps for putting into force and carrying out the Order.

Dated this 21st day of December, 1954.

ERNEST PURSER,  
CHAIRMAN.

APPENDIX.

---

SHOPS ACT, 1950

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**CLIFTON HALF HOLIDAY CLOSING ORDERS  
REVOCATION ORDER.**

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The Lord Mayor, Aldermen and Citizens of the City of Nottingham in pursuance of the powers conferred on them by the Shops Act, 1950, and after due compliance with its provisions do hereby order as follows :—

1. This Order may be cited as the Clifton Half Holiday Closing Orders Revocation Order.
2. Insofar as they relate to the weekly half-holiday closing of shops situate within the City of Nottingham South of the River Trent the Orders of the City Council mentioned in the Schedule hereto are hereby revoked.

THE SCHEDULE.

15th May, 1913.	Order as to the weekly half-holiday for the shops of barbers, hairdressers, chemists, druggists and drapers.
16th April, 1919.	Order as to the weekly half-holiday for the shops of ironmongers.
6th December, 1920.	Butchers weekly half-holiday and closing order.
5th December, 1921.	Order as to a weekly half-holiday for the shops of boot and shoe retailers.

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*This report was submitted to the City Council at their meeting on the 7th February, 1955, and was adopted.*

# MINISTRY OF NATIONAL INSURANCE SICKNESS RETURNS

The number of claims for sickness benefit in Nottingham and the immediately surrounding areas gives an indication of sickness of the population month by month.

	Nottingham (& District part) Area*		City of Nottingham*							
	Average No. of sickness claims per week		Notifs. of pneumonia		Deaths attributed to conditions associated with influenza					
					Influenza		Bronchitis		Pneumonia	
	1955	1954	1955	1954	1955	1954	1955	1954	1955	1954
JANUARY ..	1,914	1,751	36	24	2	3	16	10	44	41
FEBRUARY ..	1,567	1,578	26	21	2	—	12	13	38	40
MARCH ..	1,563	1,262	26	18	5	—	9	7	50	29
APRIL ..	1,090	970	19	9	1	—	5	8	21	17
MAY ..	927	1,051	4	14	1	—	3	3	22	18
JUNE ..	946	864	7	2	—	—	2	5	19	12
JULY ..	759	801	5	6	—	—	2	1	14	18
AUGUST ..	830	693	9	6	1	—	2	1	15	12
SEPTEMBER ..	996	989	1	2	1	—	2	3	17	11
OCTOBER ..	1,271	1,205	9	3	—	—	9	1	29	15
NOVEMBER ..	1,379	1,291	15	8	—	1	13	4	32	26
DECEMBER ..	1,205	1,414	14	31	2	5	16	11	29	48

\* The two areas are not identical.

## COST OF HEALTH SERVICES

SERVICE	Actual Cost—Year ended 31st March, 1955						Estimated Cost— Year ending 31st March, 1956		
	Gross Expenditure	Income other than Government Grants	Government Grants	Net Expenditure to be met from Rates	Equivalent Rate Poundage	Cost per head of Population	Estimated Net Expenditure to be met from Rates	Equivalent Rate Poundage	Cost per head of Population
Administration (not charged to other services) .. ..	£ 4,686	£ 4,000	£ —	£ 686	s.    d. .07	s.    d. .53	£ 1,619	s.    d. .16	s.    d. 1 25
Sanitary Inspection and Other Services .. ..	38,674	6,066	1,161	31,447	3 15	2 0 23	34,618	3 46	2 2 67
Health Centres .. ..	2,378	528	927	923	.09	.71	893	.09	.69
Maternal and Child Health .. ..	83,561	12,552	35,445	35,564	3 56	2 3 40	38,427	3 84	2 5 61
Midwifery .. ..	40,353	1,626	19,348	19,379	1 94	1 2 93	22,651	2 27	1 5 45
Health Visiting .. ..	27,881	630	13,467	13,784	1 38	10 62	16,097	1 61	1 0 40
Home Nursing .. ..	44,969	1,141	21,941	21,887	2 19	1 4 86	25,714	2 57	1 7 81
Vaccination and Immunisation .. ..	5,724	—	2,864	2,860	.29	2 20	3,647	.37	2 81
Ambulance Service .. ..	58,578	3,362	27,493	27,723	2 78	1 9 36	28,607	2 86	1 10 04
Prevention of Illness, Care and After-Care .. ..	24,264	8,026	8,085	8,153	.82	6 28	10,493	1 05	8 08
Mental Health .. ..	23,683	516	11,528	11,639	1 17	8 97	13,023	1 30	10 03
Home Help .. ..	99,347	5,895	46,789	46,663	4 67	2 11 95	51,728	5 17	3 3 86
Other Expenses .. ..	2,670	1,116	734	820	.08	.63	451	.05	.35
TOTAL .. ..	456,768	45,458	189,782	221,528	1    10 19	14    2 67	247,968	2    0 80	15    11 05

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