

**[Report 1957] / Medical Officer of Health, Nottingham City.**

**Contributors**

Nottingham (England). City Council.

**Publication/Creation**

1957

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CITY OF NOTTINGHAM

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**EIGHTY-FIFTH  
ANNUAL REPORT**

OF THE

**HEALTH SERVICES**

**1957**


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MEDICAL OFFICER OF HEALTH  
WILLIAM DODD, M.D.

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**Nottingham :**

DERRY AND SONS, LIMITED, PRINTERS



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## FOREWORD

At the time of compiling this report the Preventive Health Service here has three outstanding pre-occupations ; large-scale vaccination against poliomyelitis, an accelerated drive in slum clearance and the taking of a proportionate share in the National Survey of Perinatal Mortality. It should not be thought from this that other matters can be laid aside, for in every department without exception pressure of work, to meet the still increasing demands, can accurately be described as continuous.

★ ★ ★

By now vaccination against poliomyelitis, though started less than two years ago, has become a procedure which is fully accepted and which is performed as a routine. Previously only available to certain limited age groups of children, the announcement of the Ministry of Health on September 11th that henceforward children from six months to 15 years of age were to be included, indicated a very considerable stepping up of the work. Circular 16/57 stated that not only were considerable numbers of children to be offered vaccination, but that an exceptional effort was to be made to complete the procedure before the summer of 1958.

Immediate steps were taken here to organise a large scheme of vaccination and authority was obtained for the additional clerical, nursing and medical staff necessary.

In previous registrations of the eligible classes consent forms and letters to parents were sent by post to their home addresses, but on this occasion, with the larger numbers involved and the greater proportion of school children, it was decided to work almost entirely through the schools. When the necessary printing was completed, December was upon us—the worst fortnight for the schools in the entire year, with dark days, examinations and Christmas festivities.

However, registration had to be accomplished and with the exceptional goodwill of all those in charge of schools, a flood of acceptances had already been received some days before Christmas and without a further load being thrown on the Postmaster-General !

As January 15th, the day for making a final return of actual acceptances to the Ministry of Health approached—a return on which the amount of vaccine for the year would be based—a total number of 23,740 of a possible 60,150 satisfied all who had worked before Christmas for this very end.

Then came the actual work and at the date of writing these comments some 5,000 first injections have already been given and the team work essential for the carrying out of large-scale vaccination is being 'run in'. Within a very short time three teams will be carrying out vaccination of entire schools and it is fully expected that by the time cases of poliomyelitis might be expected, a very considerable proportion of the children of this City will have been protected.

It is impossible to discuss this most recent type of vaccination without some comparison with other forms of immunisation. Only ten years ago preventive procedures by injection were regarded by the public with doubt and some misgivings even though in many regards the problem then was much greater. The numbers of cases and deaths annually from diphtheria were some scores of times larger than those experienced with poliomyelitis and many years of persistent effort were required before reaching the necessary degree of group immunity which has since resulted in the complete absence of cases over many years. The last case of diphtheria in Nottingham was in 1949—the only case in the year.



Not only do the present acceptance rates for poliomyelitis vaccination plainly reflect the present concern—indeed the impatience—of parents to have their children protected, but many other written and verbal communications make clear their emphatic wish. This is very significant to those who provide the facilities and to those who organise the practical fieldwork.

Where tens of thousands of vaccinations have to be performed somebody has to be first, somebody will come in the middle group—maybe three or four months hence—and somebody, too, must inevitably be at the end of the queue. It needs to be emphatically stated and widely appreciated that even ‘as fast as possible’ has a limit and that somebody will have to wait. However, with the same emphasis is the assurance given that no child will be exposed to the risk of poliomyelitis for one day longer than circumstances demand.

In support of this assurance are the facts reported on page 76 that the vaccination of those children in the earlier registrations has been almost completed.

★ ★ ★

The Foreword to the Annual Report for 1950 urged that the full resumption of slum clearance, then gaining momentum after the war, should be pressed in parallel with the building of houses for the many people who made up the waiting list. The Estates and Housing Committee during the past year has not only kept up the pace achieved in recent years, but has increased it. The result is that the phasing of the entire slum clearance programme is now ahead of the anticipated schedule and the Radford area is clear evidence of the increase. Demolitions are going apace, while at the same time the beginning of the future shape of the area can be discerned.

As far as can be ascertained, those who formerly lived in the development areas and who have been rehoused, are settling to their new environment, meeting their communal obligations and benefiting from the change. No cases are known indicating real difficulty or financial strain which might result in some degree of under-nutrition.

Representations of the properties in the remaining areas which are included within the five year plan will be made without any delay. This may seem an easy statement to make, but with the numbers of Public Health Inspectors continuing to dwindle, it will call for added effort to substantiate it.



Without drawing attention to individual vital statistics, it can be recorded that the indices of the social state and of the effectiveness of the services provided, continue to be satisfactory. Infant mortality has fallen to a rate which is less than half of that of only ten years ago. On analysis, however, the fact emerges that almost the entire improvement has affected infants between the ages of one month and a year. Neonatal and perinatal mortality are still stubbornly stationary and the causes of mortality during this period effectively elude the enquirers. The stubbornness, as the table on page 21 indicates, has been recognised for some five years and the need for a balanced, well-controlled and penetrating enquiry has become obvious. Steps towards the initiation of such an enquiry have been taken nationally during the past two years and now the National Survey—referred to on page 29—is about to commence. Many of the pitfalls and inaccuracies which must be guarded against in order to seek valid conclusions during an enquiry on a national scale, were uncovered during a pilot survey in Nottingham in the early summer of last year.



The National Birthday Trust and its advisory body of distinguished professional men and women is to be congratulated on the scope of the survey and none can fail to express the hope that out of the results a dramatic fall of the infant mortality rate to an undreamed-of level may become possible.

★ ★ ★

It is many hundreds of years since the British Isles was the subject of an invasion. But since the war each year has seen the influx of unarmed peoples of other lands. Most of the newcomers, in general welcomed as friends, are already members of the British Commonwealth, but membership of a family, large or small, cannot overlook the fact that difficulties exist and serious problems of various natures have to be overcome. The nature of these problems and their acuteness on occasions has led to the view expressed by some that the ability of the population to absorb into the existing conditions the cultures of these immigrants will be so strained as to lead to failure. Not only is that an extreme view but one which is not in parallel with historical facts, and while for many years, decades possibly, difficulties will continue, our new neighbours will ultimately take their communal place.

As examples of the practical difficulties, passing reference is made on page 28 to that of language, but of the social angularities, divergent outlooks have thus far been the most real. Nevertheless, the work is lightened by humorous slants, as indicated by the young woman from the West Indies who, when about to have her baby here, thought that her compulsory contribution would be that of offering her newborn to the State !

★ ★ ★

The pollution of the atmosphere, whether it be in the so-called fresh air or that inside buildings, has been a subject of almost continuous comment throughout the country.

Progress towards the establishment of a smoke control area in the City Centre has been slow not only, it must be stated, because of other considerable commitments with Smoke and Health Inspectors, but because circumstances have compelled attention to other and pressing needs.

As for the type of pollution now spoken of topically when referring to cigarette smokers, serious consideration has been given to the development of well-considered measures designed to stem the rate of increase of the annual numbers of deaths from cancer of the lung. The Government's statement of 27th June, 1957, established, if not a complete indictment of cigarette smoking, then a very strong probability of guilt.

The figures of deaths from this cause here during the past two years were 133 and 151 and the Health Committee at a recent meeting approved the allocation of a sum of money to be spent during 1958 on the dissemination of facts as outlined in the Ministry of Health Circular No. 7/57.

\* \* \*

A significant table appears on page 132 under Milk Supply—Sampling—Bacteriological Examination. For the first time tubercle bacilli were not found in any of the many samples of milk examined in the course of the year. With the action projected by the Government for the extension of attested herds throughout the country, is it too much to anticipate that this year's results of bacteriological examination will become routine ?

Further indication of the improvement of the health of meat-producing cattle is given in the progressive fall since 1951 of the total weight of meat surrendered as being unfit for human consumption from approximately 530 to 230 tons.



No doubt linked with improvement in food manufacture is also the fall during the same period of "Other Foods" surrendered from approximately 14,400 to 6,800 stones.

★ ★ ★

Though falling outside the year under review, the announcement in the New Year's honours list of the conferment of a knighthood on Alderman William Crane demands recording. In the field of housing the Alderman has been outstanding for nearly a quarter of a century but for the same period too he has served as an active member of the Health Committee. In making this record of the well merited honour, satisfying equally to his friends as to Sir William himself, congratulations are offered from past and present members of the Health Committee's staff, together with their thanks for his counsel and support on numerous occasions.

WILLIAM DODD.

*1st February, 1958.*

HEALTH DEPARTMENT,  
HUNTINGDON STREET,  
NOTTINGHAM.

## PART I

### VITAL STATISTICS

## VITAL STATISTICS\*

### GENERAL

POPULATION	..	..	..	..	..	312,600
AREA IN ACRES	..	..	..	..	..	18,364
AVERAGE NO. OF PERSONS PER ACRE	..	..	..	..	..	17.02
NO. OF MARRIAGES—CHURCH 1,824, REGISTRY OFFICE 1,014	..	..	..	..	..	2,838

### BIRTHS

#### Live

LEGITIMATE	..	Males	2,547	Females	2,496	..	5,043
ILLEGITIMATE	..	„	207	„	217	..	424
			Total	..	..	..	5,467
<b>Birth-rate</b> per 1,000 of population			..	..	..	..	<b>17.49</b>

#### Still

LEGITIMATE	..	Males	62	Females	34	..	96
ILLEGITIMATE	..	„	11	„	3	..	14
			Total	..	..	..	110
<b>Stillbirth-rate</b> per 1,000 live and stillbirths			..	..	..	..	<b>19.72</b>

### DEATHS

#### All Causes

Males	..	1,698	Females	1,656	Total	..	3,354
<b>Death-rate</b> per 1,000 of population			..	..	..	..	<b>10.73</b>

#### Maternal Mortality

<b>Rate</b> per 1,000 births (live and still)	..	..	..	..	..	..	<b>0.54</b>
---	----	----	----	----	----	----	-------------

#### Infant Mortality

No. of deaths of infants under 1 year	..	..	..	..	..	..	127
<b>Rate</b> per 1,000 relevant live births	..	..	..	..	..	..	<b>23.23</b>
Illegitimate	..	..	..	..	..	..	<b>33.02</b>
Legitimate	..	..	..	..	..	..	<b>22.41</b>

\* Provisional, See page 15.

## 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 .. ..	65	12	2	5	84	18	15	5	5	127
UNCERTIFIED .. ..	—	—	—	—	—	—	—	—	—	—
Insufflation of stomach contents .. ..	—	—	—	—	—	—	—	—	—	—
Haemolytic disease of new-born .. ..	1	—	—	—	1	—	—	—	—	1
Whooping cough .. ..	—	—	—	—	—	—	—	—	—	—
Cerebro-spinal fever .. ..	—	—	—	—	—	—	—	—	—	—
Bronchitis .. ..	—	3	—	—	3	4	3	1	2	13
Pneumonia (all forms) .. ..	3	2	—	1	6	4	2	2	2	16
Gastro-intestinal infection .. ..	—	—	—	—	—	1	—	—	1	2
Gastritis .. ..	—	—	—	—	—	—	—	—	—	—
Suffocation (overlying) .. ..	—	—	—	—	—	—	1	—	—	1
Difficulty or injury at birth .. ..	11	—	—	1	12	1	—	—	—	13
Atelectasis .. ..	3	1	—	—	4	—	—	—	—	4
Premature birth .. ..	34	2	—	—	36	—	—	—	—	36
Congenital malformations .. ..	11	4	1	2	18	6	5	2	—	31
Other causes .. ..	2	—	1	1	4	2	4	—	—	10
TOTALS .. ..	65	12	2	5	84	18	15	5	5	127

## DEATHS OF CHILDREN

## 1—5 years

CAUSES OF DEATH	1—2 yrs.	2—3 yrs.	3—4 yrs.	4—5 yrs.	Total
Respiratory infection ..	3	1	—	—	4
Gastro-intestinal infection	—	—	—	—	—
Other infections ..	—	—	—	—	—
Abdominal emergency ..	1	—	—	1	2
Accident (a) Motor ..	—	1	1	—	2
(b) Other ..	1	—	—	—	1
Leukaemia .. ..	—	2	1	—	3
Other conditions ..	1	1	—	1	3
TOTALS .. ..	6	5	2	2	15



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

	Estimated Population	Birth-rate	Death-rate	Infant mortality	Maternal mortality
		per 1,000	population	rate per 1,000 live births	total 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 ..	306,600	16·97	11·98	33	·57
1952 ..	310,700†	16·71	10·74	28	·38
1953 ..	311,500	16·64	11·01	27	·77
1954 ..	311,500	16·05	10·61	24	·59
1955 ..	312,000	15·67	11·28	28	·60
1956 ..	312,500	16·50	11·15	22	·76
1957 ..	312,600	17·49	10·73	23	·54

\* Borough Boundary Extension.

† City Boundary Extension.

## FINAL STATISTICS

POPULATION—Mid year estimate of Registrar General .. 312,600

BIRTHS**Live**

				1957.	1956.	1955.	1954.
LEGITIMATE	Males 2,525	Females 2,496		5,021	4,771	4,539	4,626
ILLEGITIMATE	„ 227	„ 230		457	384	354	375
TOTAL	.. ..	.. ..		5,478	5,155	4,893	5,001
<b>Birth-rate</b>	per 1,000 of population	..		17·52	16·50	15·67	16·05
EXCESS OF BIRTHS OVER DEATHS	..			2,095	1,670	1,368	1,695

**Still**

LEGITIMATE	Males 60	Females 36		96	117	116	91
ILLEGITIMATE	„ 9	„ 4		13	8	9	10
TOTAL	.. ..	.. ..		109	125	125	101
<b>Stillbirth-rate</b>	per 1,000 live and stillbirths			19·51	23·67	24·91	19·79

DEATHS**All Causes**

	Males 1,712	Females 1,671		3,383	3,485	3,525	3,306
<b>Death-rate</b>	per 1,000 of population	..		10·82	11·15	11·28	10·61

**Maternal Mortality Rate** .. 0·36 0·76 0·60 0·59**Infant Mortality**

No. of deaths of Infants under 1 year	..			126	113	137	122
<b>Rate</b>	per 1,000 relevant live births	..		23·00	21·92	28·00	24·35
Illegitimate	.. ..	.. ..		24·07	26·04	33·90	27
Legitimate	.. ..	.. ..		22·91	21·59	27·54	24

ATTACH OPPOSITE PAGE 14.



## ANALYSIS OF DEATHS

Total Deaths .. .. .	1957	1956	1955	1954
	3,383	3,485	3,525	3,306
Deaths under 1 year .. .. .	126	113	137	122
" 1—5 years .. .. .	18	20	20	24
" 5—45 .. .. .	215	191	217	196
" 45—65 .. .. .	843	820	817	786
" 65 and over .. .. .	2,181	2,341	2,334	2,178
<b>Causes of Deaths :—</b>				
*Heart disease .. .. .	476	528	520	505
Vascular lesions of nervous system ..	449	498	471	429
Coronary disease, angina .. .. .	412	406	349	349
Defined and ill-defined diseases— various .. .. .	308	272	285	289
*Malignant and lymphatic neoplasms ..	291	326	293	281
Bronchitis .. .. .	248	269	296	253
Pneumonia .. .. .	181	192	243	184
Malignant neoplasm, lung, bronchus ..	149	131	135	121
*Circulatory disease .. .. .	146	181	186	159
Malignant neoplasm, stomach .. .. .	86	75	101	89
Accidents, other than motor vehicle accidents .. .. .	73	85	58	65
Hypertension with heart disease .. ..	68	97	99	93
Influenza .. .. .	56	17	15	10
Malignant neoplasm, breast .. .. .	55	56	47	56
Suicide .. .. .	46	28	46	45
Motor vehicle accidents .. .. .	43	36	31	20
Congenital malformations .. .. .	40	27	45	31
Ulcer of stomach and duodenum .. ..	39	40	43	48
Tuberculosis, respiratory .. .. .	37	35	52	73
*Diseases of respiratory system .. ..	34	27	32	35
Malignant neoplasm, uterus .. .. .	30	26	29	33
Nephritis and nephrosis .. .. .	25	37	44	32
Hyperplasia of prostate .. .. .	20	12	16	25
Leukaemia, aleukaemia .. .. .	19	15	25	14
Diabetes .. .. .	14	19	19	20
Syphilitic disease .. .. .	9	8	15	15
Gastritis, enteritis and diarrhoea .. ..	9	21	9	13
Homicide and operations of war .. ..	8	2	1	4
Other infective and parasitic diseases ..	6	9	3	4
Tuberculosis, non respiratory .. .. .	2	3	4	4
Pregnancy, childbirth, abortion .. ..	2	4	3	3
Measles .. .. .	2	1	5	1
Meningococcal infection .. .. .	—	2	2	3
Whooping cough .. .. .	—	—	2	—
Acute poliomyelitis .. .. .	—	—	1	—
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

HOME NURSING SERVICE

HOME HELP SERVICE

MENTAL HEALTH

CITY AMBULANCE SERVICE

## HEALTH CENTRES

### JOHN RYLE HEALTH CENTRE

Now in its sixth year, the claim is made that the structure, designed originally as a block of four dwellings, continues to fulfil its purpose admirably. The routine of twice-daily surgeries and the holding of clinics for mothers and for children under five years of age continued unchanged and, with only one exception, was satisfactory.

The exception was that the eccentricity of the site of the Centre became more marked as building moved towards completion at the south end of the estate. One heard it said repeatedly that if the permanent health centre could be erected on the intended site near the junction of Southchurch Drive and Ruddington Road, then the attendances might be expected to rise appreciably.

It must be recorded that the only reason why plans already prepared have not been acted upon has been the increasing financial stringency of the past two years. Nevertheless, active steps will be taken during 1958 to obtain authority from the Ministry of Health to proceed.



## MATERNAL AND CHILD HEALTH

**Live Births.** City mothers gave birth to 5,467 babies—an increase of 309 over last year—and the birth rate was 17·49.

Illegitimate births showed a substantial increase of 79 on 1956, there being 424.

**Stillbirths.** The total of 110 gives a rate of 19·72 per 1,000 live and stillbirths ; a notable fall from 24·4.

Year	Birth Rates			Stillbirth Rates		
	Nottingham	England & Wales	Great Towns	Nottingham	England & Wales	Great Towns
1947 ..	23·9	20·6	23·0	21·9	24·1	25·9
48 ..	19·82	17·9	20·0	23·3	23·2	25·3
49 ..	19·96	16·7	18·7	19·9	22·7	24·4
50 ..	17·47	15·8	17·6	19·5	22·7	24·8
51 ..	16·97	15·5	17·3	22·72	23·0	25·4
52 ..	16·71	15·3	16·9	22·58	22·7	24·6
53 ..	16·64	15·5	17·0	18·97	22·5	24·8
54 ..	16·05	15·2	15·98	19·79	23·5	23·0
55 ..	15·67	15·0	N/A*	24·91	23·2	N/A*
56 ..	16·50	15·6	N/A*	23·67	22·9	N/A*
57 ..	17·49	16·1	N/A*	19·72	22·4	N/A*

\* Not now available.

A detailed enquiry into each stillbirth was carried out and the results are shown in a table on page 25. The main causes were maternal toxæmia 30%, hazard of birth 15% and congenital malformation 15%. In 30% the cause was unknown.

**Infant Mortality.** The figure of 127 deaths of infants before reaching the first birthday gives a rate of 23·23 per 1,000 live births. While this is—as the table shows—an increase on last

year, it is still the second best figure recorded in the City, though somewhat higher than the national figure. Nevertheless, the persistent increase in effectiveness of the services is seen when compared with the rate of 50 obtaining only ten years ago.

Year	Infant Mortality Rates		
	Nottingham	England & Wales	Great Towns
1947 ..	50	41.4	47.0
48 ..	44	33.9	42.9
49 ..	38	32.4	37.0
50 ..	31	29.6	33.8
51 ..	33	29.7	33.9
52 ..	29	27.6	31.2
53 ..	26	26.8	30.8
54 ..	24.5	25.4	27.5
55 ..	28.00	24.9	N/A*
56 ..	21.92	23.7	N/A*
57 ..	23.23	23.0	N/A*

\* Not now available.

### Causes and Rates of Infant Mortality

	1952	1953	1954	1955	1956	1957
<b>ALL CAUSES</b>	<b>Infant Mortality Rate</b>					
	29	26	24.5	28.00	21.92	23.23
<b>INDIVIDUAL CAUSES</b>	<b>Proportionate Infant Mortality Rate</b>					
Respiratory diseases ..	5.2	5.7	5.6	8.18	3.88	5.49
Gastro intestinal infection	0.8	0.9	0.6	0.20	0.18	0.36
Congenital malformations	4.7	3.0	4.5	6.54	3.70	5.49
Prematurity .. ..	10.2	9.4	6.7	7.15	6.79	6.95
Atrophy, Debility, Marasmus and Atelectasis	1.4	1.1	—	0.82	1.94	0.73
Birth injury .. ..	2.8	2.9	2.2	2.25	1.36	2.38
Other causes .. ..	3.9	3.0	4.9	2.86	4.07	1.83

There was a fall in the percentage of infant deaths ascribed to prematurity, to 29·9 as against 31·3 in 1956. Respiratory infection as a single factor was still the cause of most deaths between 4 weeks and 1 year.

The illegitimate death rate was 33·0 per thousand illegitimate births compared with the legitimate death rate of 22·4.

**Neo-Natal Mortality.** The number of infants not surviving the first month of life was 84, the death rate being 15·4.

In this group 45·2% died within 24 hours of birth and 77·4% did not survive for one week.

Death rates per 1,000 live births		
Year	Under 1 month	From 1 month to 1 year
1951 ..	20·73	11·9
52 ..	18·21	10·57
53 ..	15·39	10·34
54 ..	14·78	9·72
55 ..	16·76	11·24
56 ..	15·12	6·80
57 ..	15·37	7·86

The result of the detailed enquiry into each neo-natal death is given on page 24. Prematurity alone accounted for 34·5% of deaths ; other main causes were congenital malformations 22·6%, hazard of birth 23·8% and infection 10·7%.

**Peri-Natal Mortality.** This rate of 31·4 has been calculated from the number of stillbirths and deaths under one week of age per 1,000 live and stillbirths. The total of deaths was 175 and a detailed analysis of causes and numbers is given.



Primary factors					Total	Premature infants
Ante-natal causes :						
Toxaemia including haemorrhage	..				32	25
A.P.H. without toxaemia	..				10	6
Rh. incompatibility .. ..	..				1	—
Intra-natal causes :						
Injury .. .. .	..				16	7
Asphyxia .. .. .	..				16	4
Other .. .. .	..				1	—
Post-natal causes :						
Infection only .. .. .	..				2	1
Congenital malformation	..				28	21
Prematurity only .. .. .	..				28	28
Other causes .. .. .	..				4	1
Unknown .. .. .	..				37	23
All causes .. .. .					175	116

**Prematurity.** Of the live births, 8·2% were premature compared with 7·1% last year and 8·4% in 1955. No less than 62·7% of babies stillborn were premature as, too, were 63·1% of the infants which died.

The neo-natal mortality<sup>\*</sup> rate per 1,000 premature babies was 118·0 compared with 5·5 for mature infants ; the figures for 1956 were 128·1 and 6·5. The death rate from 4 weeks to 1 year was 20·0 for premature and 7·9 for mature infants.

An analysis of stillbirths of premature infants showed that 36·2% were due to maternal toxæmia, and 17·4% to congenital malformation. Prematurity alone was responsible for the majority of neo-natal deaths.

#### Mortality related to weight and to 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	%			
Up to & incl. 3 lb. 4 oz. . .	2	2	2	100·0	0	0	0	30	20	66·7
3 lb. 4 oz.—4 lb. 6 oz. . .	31	25	6	24·0	6	0	0	58	9	15·5
4 lb. 6 oz.—4 lb. 15 oz. . .	29	7	1	14·3	22	1	4·6	79	7	8·9
4 lb. 15 oz.—5 lb. 8 oz. . .	88	9	3	33·3	79	1	1·3	132	12	9·1
TOTALS . .	150	43	12	27·9	107	2	1·9	299	48	16·1

# ANALYSIS OF NEO-NATAL DEATHS

	Born at			Legitimate.		Sex.	Prematurity.		Age at death			Post mortem	Other complications.				A.N. care*			Place in family					Age of mother								
	Hospital	Home	Nursing Home	Yes	No		Yes	No.	0-23 hrs.	24-47 hrs.	3-7 days		8-28 days	Preg.	Labour	None	Adequate	Barely adequate	Inadequate	1	2	3	4	5 or over	15-19	20-24	25-29	30-34	35-39	40-44	45-49		
Congenital malformation ..	19	13	6	-	17	2	12	7	11	8	5	2	5	7	11	8	4	4	11	9	9	1	6	5	1	1	1	8	3	4	2	-	1
Hazard of birth :																																	
(a) Injury ..	17	9	8	-	13	4	13	4	7	10	7	6	1	3	11	6	10	5	2	8	6	3	5	2	3	4	3	2	3	4	3	2	-
(b) Asphyxia ..	3	2	1	-	3	-	2	1	1	2	2	1	-	-	3	-	2	-	1	1	1	1	1	2	-	-	2	-	1	-	-	-	-
(c) Other ..	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Rhesus incompatibility ..	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Infection :																																	
(a) Resp'y. ..	8	4	4	-	7	1	3	5	2	6	-	-	2	6	8	-	2	2	4	4	4	-	5	2	-	-	1	2	4	2	-	-	-
(b) Gastro-intest. ..	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
(c) Other ..	1	1	-	-	1	-	1	-	1	-	-	-	-	1	1	-	-	-	1	1	-	1	-	-	-	-	-	-	-	1	-	-	-
Prematurity only ..	29	23	5	1	24	5	21	8	29	-	19	8	1	1	14	15	22	1	6	10	15	4	8	7	4	2	8	3	10	6	3	1	-
Other causes ..	3	-	3	-	2	1	1	2	-	3	2	-	-	1	3	-	-	1	2	1	-	2	1	1	-	-	1	-	1	2	-	-	-
Unknown ..	4	1	3	-	4	-	1	3	2	2	3	1	-	-	3	1	2	-	2	2	2	-	-	2	-	1	1	-	2	1	1	-	-
TOTAL ..	84	53	30	1	71	13	54	30	53	31	38	18	9	19	54	30	42	13	29	36	37	11	27	22	12	8	15	8	27	18	18	9	3

\* 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.

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100
1	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100

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



## ANALYSIS OF STILLBIRTHS

Total	Born at			Legitimate.		Sex		Prematurity.		Maceration.		Post-mortem		Other complications.		A.N.care*			Place in family					Age of mother									
	Hospital	Home	Nursing Home	Yes	No	M.	F.	Yes	No	Yes	No	Yes	No	Preg.	Labour	None	Adequate	Barely adequate	Inadequate	1	2	3	4	5 or over	15-19	20-24	25-29	30-34	35-39	40-44	45-49		
Congenital malformation ..	16	12	4	16	-	-	-	7	9	12	4	6	10	1	15	11	1	4	5	11	-	9	4	-	-	3	2	6	5	2	-	1	-
Hazard of birth :																																	
(a) Injury ..	2	2	-	2	-	-	-	1	1	1	1	-	2	2	-	-	1	-	1	-	1	1	-	1	-	-	1	-	1	-	-	-	-
(b) Asphyxia ..	13	4	9	13	-	-	-	10	3	3	10	4	9	-	13	7	3	3	6	4	3	1	2	3	4	2	1	2	4	3	1	-	-
(c) Other ..	1	1	-	1	-	-	-	-	1	-	1	1	-	-	1	1	-	-	-	-	1	1	-	-	-	-	1	-	-	-	-	-	-
Maternal toxæmia																																	
(a) With A.P.H.†	11	11	-	11	-	-	-	8	3	8	3	2	9	1	10	2	1	8	1	7	3	3	2	1	2	1	3	2	3	2	-	-	-
(b) No A.P.H. ..	21	20	1	17	4	17	4	17	4	17	4	16	5	1	20	9	1	11	8	10	3	10	4	2	2	3	7	3	3	3	2	-	-
A.P.H. without toxæmia ..	10	10	-	8	2	7	3	6	4	1	9	1	9	-	10	5	2	3	3	3	4	2	1	2	3	2	-	3	4	2	1	-	-
Rhesus incompatibility ..	1	1	-	1	-	-	-	1	-	-	1	-	1	1	-	-	1	-	-	1	-	-	-	1	-	-	1	-	-	-	-	-	-
Other causes ..	2	2	-	2	-	-	-	1	1	1	1	-	2	1	1	2	-	2	-	-	-	-	-	-	2	-	-	-	-	-	2	-	-
Unknown ..	33	13	16	25	8	21	12	21	12	14	19	14	19	3	30	7	5	21	13	13	7	15	5	6	-	7	4	8	9	6	5	1	-
TOTAL ..	110	76	30	96	14	73	37	69	41	44	66	10	100	46	13	51	39	48	23	42	19	16	10	23	12	30	26	21	14	7	-	-	

\* 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	"	"	"	"	"	" second "
Adequate	"	"	"	"	"	" "

**Inadequate**

† Ante-partum haemorrhage.

### MIDWIFERY SERVICE

The domiciliary midwives attended 2,844, or 52%, of the total City confinements, an increase of 198 which is related to an increase in the birth rate from 16.53 to 17.49. In addition to the nursing of mothers delivered at home, 238 admitted to hospital because of abnormality returned home, after delivery or treatment, to the care of the midwife originally booked. They also nursed 42 mothers who were booked for and delivered in hospital and who were discharged about the second day after delivery.

The City midwives continued to attend ante-natal sessions at the welfare centres in their district. A new departure was initiated in October at the Huntingdon Street welfare centre ; the holding by the midwives of the district of a clinic where mothers booked for home confinement attended for ante-natal examination in the intervals between the regular routine visits for examination by the clinic medical officer.

Midwives also attended at the surgeries of 5 general practitioners.

**Maternity Medical Services.** An increasing number of general practitioner obstetricians was booked by mothers though these attended at domiciliary confinements in a decreasing proportion as the table indicates.

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
1956	2,646	1,705	64.4	292	11.0
1957	2,844	1,972	69.2	308	10.8



**Medical Aid.** Many more calls were sent by midwives to general practitioners—see page 33. It will be seen that there was a pronounced rise in the number of cases of ruptured perineum, pyrexia and phlebitis. All calls originated from City midwives with the exception of 3 from nursing homes.

**Ophthalmia Neonatorum.** There were 6 cases notified following home confinements. A total of 16 visits was necessitated for these, while 316 visits were paid for other eye conditions.

**Maternity Emergency Service.** The obstetric flying squad from the City Hospital was called for home emergencies in 33 cases, a marked increase over last year when there were 14 calls only.

Post partum haemorrhage, primary .. ..	10
"    "    "    secondary .. ..	1
Retained placenta .. ..	10
"    "    and post partum haemorrhage ..	5
Obstetric shock .. ..	4
Prolapsed cord .. ..	2
Foetal distress .. ..	1

**Hospital Admission.** Under a long-standing arrangement with the City Hospital, 30 cases were admitted direct from City midwives compared with 21 in 1956 and 30 in 1955.

**Hospital Confinements for Social Reasons.** Of a total of 1,557 confinements in the City Hospital, arrangements for admission of 399 mothers had previously been made because of unsatisfactory home conditions.

The applications received and considered in the Health Department numbered 629 ; a home visit was made in each case. In order to assist the hospital over a period of staffing difficulties, the request from a proportion of mothers was declined, whereas normally they would have been recommended for hospital admission.



The claim is made that all requests were carefully and impartially decided. The difficulties of judging them were manifold, more especially those which arose from members of the British Commonwealth recently arrived in this country. Apart from the weighing of relevant factors, language difficulties were experienced with this group and even more with a group of 30 or so who came from six Continental countries.

A grouping is given of the countries of origin of the various applicants.

British Isles	..	..	..	..	..	402
Commonwealth countries	..	..	..	..	..	189
Italy, Russia, Hungary, etc.	..	..	..	..	..	38

**Analgesia.** Pethidine was administered to 1,044 mothers. It was used with gas and air analgesia in 756 cases, with trichloroethylene in 132 and with both in 16 cases.

Inhalational analgesia was used in 2,024, or 71·1%, domiciliary confinements. Gas and air was administered to 1,720 mothers, trichloroethylene to 286, and both to 18. Four trichloroethylene machines were available for use by groups of midwives.

**Mass Radiography.** The number of mothers referred to the Centre was 1,883 and the proportion of those who kept their appointments—nearly three-quarters—showed an increase.

**Blood Examination.** Haemoglobin estimations, blood and rhesus grouping and tests for venereal disease were continued as routine examinations at ante-natal clinics. In those cases where the haemoglobin level was 70% or less, a blood film was examined and estimations were repeated at not longer than monthly intervals.

**Relaxation.** Classes conducted by midwives continued at the John Ryle Health Centre and at the Basford, Edwards Lane, Radford, Sneinton and Huntingdon Street Welfare Centres. Mothercraft teaching, an important part of such classes, was undertaken by both health visitors and midwives.

Altogether 542 mothers attended a total of 286 sessions ; the average attendance was 6.

**Consultant Clinic.** There were 430 expectant mothers referred to the weekly clinic at the Edwards Lane Welfare Centre ; 438 return visits were paid.

**Home Care of Premature Babies.** There were 6 midwives who had received special training ; three were engaged full-time and one part-time in the work.

Of 150 premature babies born at home, 43 were transferred to hospital ; those born in hospital and sent home to the care of the midwife numbered 185. A total of 5,395 visits was paid.

**Survey into Peri-Natal Mortality.** The National Birthday Trust Fund will conduct during March, April and May, 1958, an enquiry into the obstetric and social circumstances, the distribution and pathology of all stillbirths and neo-natal deaths.

The Trust deemed two pilot surveys to be necessary and the first took place in Nottingham during the week 8th-14th April. A questionnaire was completed for each delivery—both domiciliary and institutional—of City mothers by the midwife who attended. The co-operation of general practitioners and consultant obstetricians was sought as necessary. The births numbered 110, of which 58 took place at home.

A follow-up visit of all babies included in the survey was undertaken by the health visitors six weeks later and a short questionnaire was completed for each one.



**Staff.** In the early part of the year the staff was below strength and at one time there were ten vacancies. However, by October all vacancies had been filled and two additional appointments made, bringing the establishment up to 43 midwives. The shortage was aggravated by the loss due to maternity leave and to sickness of a total of 960 days ; the equivalent of the work of three midwives.

In November approval was given to the appointment, in accordance with the Whitley Council grades, of a Superintendent of the District Midwives' Home (Training), Bramcote House, and a Senior Midwifery Sister-in-Charge of the Cranmer Street Hostel.

**Training.** Postgraduate Study for Midwives. Refresher courses were attended by 8 midwives ; attendance at a course of training in premature baby care was necessarily difficult because of the temporary shortage of midwives—see above—in relation to the increased number of births.

On 7th March a postgraduate lecture on post partum haemorrhage was given to 27 midwives by Miss Dorothy M. Shotton, M.B., Ch.B., M.R.C.O.G., Obstetric Surgeon to the United Birmingham Hospitals ; home nurses and health visitors were also present.

The non-medical assistant supervisor of midwives attended in January a course on parentcraft, group teaching and relaxation.

In February the non-medical supervisor was present at a seminar on Education for Motherhood arranged by the Central Council for Health Education, and in April she attended a refresher course for supervisors arranged by the Royal College of Midwives.



**Medical Students.** Since February, 1956, students from University College Hospital, London, have been instructed in the conduct of home deliveries by City midwives. The students, who were housed at the City Hospital, undertook at least six deliveries there before attending domiciliary cases. A total of 68 cases was attended by 16 students.

**District Training for Pupil Midwives.** In association with the Firs Maternity Hospital, 16 places for district training for Part II of the Certificate of the Central Midwives Board were provided. From four courses a total of 31 pupil midwives was trained.

## CONFINEMENTS IN THE CITY

PLACE	NOTTINGHAM mothers			NOTTINGHAMSHIRE mothers, etc.			TOTALS
	Total	Live	Stillborn	Total	Live	Stillborn	
At home—conducted by midwife ..	2,540	2,524	16	—	—	—	
"    " acting as maternity nurse	304	291	13	—	—	—	
	2,844	2,815	29	—	—	—	2,844
Hospitals—City ..	1,557	1,499	58	316	301	15	1,873
Firs ..	608	598	10	305	302	3	913
Women's ..	141	133	8	779	733	46	920
St. Mary's Annexe	20	20	—	65	65	—	85
Highbury ..	136	135	1	931	914	17	1,067
	2,462	2,385	77	2,396	2,315	81	4,858
Nursing Homes—St. Idloe's ..	99	98	1	68	67	1	167
Balmoral ..	43	43	—	19	19	—	62
St. Ann's ..	7	6	1	2	2	—	9
Gregory Boulevard	5	5	—	1	1	—	6
	154	152	2	90	89	1	244
Private midwives ..	3	3	—	—	—	—	3
Unknown ..	1	1	—	—	—	—	1
TOTALS ..	5,464	5,356	108	2,486	2,404	82	7,950

## MULTIPLE DELIVERIES

PLACE OF CONFINEMENT	Twins		
	Total	City	Out of City
At home—conducted by midwife .. ..	8	8	—
“ “ “ “ “ acting as maternity nurse	4	4	—
Hospitals—City .. ..	48	39	9
Firs .. ..	9	7	2
Women's .. ..	26	1	25
“ St. Mary's Annexe .. ..	—	—	—
Highbury .. ..	13	2	11
Nursing Homes—St. Idloe's .. ..	2	2	—
St. Ann's .. ..	1	1	—
TOTALS .. ..	111	64	47

In addition one set of triplets was born at the City Hospital.

## MEDICAL AID CALLS TO DOCTORS

Aid was sought for :—

	1952	1953	1954	1955	1956	1957
<b>Mothers—</b>						
Ruptured perineum ..	320	360	412	376	387	447
Pyrexia .. ..	39	59	54	41	55	101
Abnormal presentation ..	18	23	19	22	36	45
Prolonged labour ..	60	65	52	46	61	74
Ante-partum haemorrhage ..	15	56	38	41	36	52
Post-partum haemorrhage ..	35	33	44	39	38	45
Retained placenta ..	27	27	28	20	18	25
Obstetric shock ... ..	6	8	10	2	3	2
Abortion and miscarriage ..	36	37	15	28	34	39
Phlebitis .. ..	13	11	17	10	5	32
Premature labour ..	8	30	33	49	42	68
Pre-eclamptic toxæmia ..	★	★	★	★	★	37
Other conditions ..	57	76	103	147	174	106
	<u>634</u>	<u>785</u>	<u>825</u>	<u>821</u>	<u>889</u>	<u>1,073</u>

★ Previously included in “other conditions.”



			1952	1953	1954	1955	1956	1957
<b>Infants—</b>								
Prematurity	..	..	30	25	23	11	13	14
Stillbirths	..	..	8	29	2	3	5	7
Asphyxia and cyanosis	..	..	17	15	28	14	21	21
Jaundice	..	..	4	12	6	7	6	2
Deformity	..	..	6	9	17	13	7	8
Skin conditions	..	..	9	13	8	15	2	16
Eye discharges	..	..	82	149	139	127	134	143
Other conditions	..	..	46	39	64	55	26	50
Sent to Eye Infirmary for advice	..	..	10	11	—	—	—	—
			212	302	287	245	214	261

## PUERPERAL PYREXIA

Cases Notified	Arising in		Nursed at home	Admitted to hospital	Age Groups				
	Hospital	Home			15—20	20—25	25—35	35—40	40+
33	11	22	21	1	5	6	18	3	1

**ADMISSIONS TO CITY HOSPITAL DIRECT FROM CITY  
MIDWIVES**

					1955	1956	1957
<b>Mothers—</b>							
Retained placenta	..	..	..	..	—	3	3
Premature labour	..	..	..	..	9	7	7
Ante-partum haemorrhage	..	..	..	..	6	4	4
Post-partum „	..	..	..	..	—	—	5
Threatened abortion	..	..	..	..	1	—	1
Toxaemia	..	..	..	..	2	—	1
Prolonged labour	..	..	..	..	3	2	2
Malpresentation	..	..	..	..	4	2	1
Unbooked social emergency	..	..	..	..	3	2	—
Obstetric shock	..	..	..	..	2	—	—
Hypertension	..	..	..	..	—	1	1
Foetal distress	..	..	..	..	—	—	1
					30	21	26
<b>Infants—</b>							
Cyanosis	..	..	..	..	—	—	3
Haemoptysis	..	..	..	..	—	—	1

# **REQUIREMENTS OF CENTRAL MIDWIVES BOARD**

## **Midwives' notifications to Local Supervising Authority :**

	1955	1956	1957
Notifying liability to become a source of infection .. .. .	60	198	158
„ commencement of artificial feeding :			
Domiciliary cases ..	141	191	220
Institutional cases ..	552	603	304
„ death of infants—as midwives ..	1	4	3
„ „ as maternity nurses ..	2	1	2
„ stillbirths—acting as midwives ..	18	17	17
„ „ „ maternity nurses ..	11	8	12
Notifying intention to practise .. .. .	..	..	152

## **Distribution :**

Domiciliary service ..	52
City Hospital ..	33
Firs Maternity Hospital ..	16
Women's Hospital ..	20
Highbury „ ..	18
Nursing homes and Nursing co-operations	10
Private practice ..	3
—	152
Ceasing to practise in this area .. .. .	42
Practising at end of year .. .. .	110

# **WORK OF SUPERVISORS OF MIDWIVES**

Visits to midwives and inspection of records and equipment ..	255
Inspection of midwives in nursing homes .. .. .	12
Special domiciliary visits :	
Expectant and nursing mothers .. .. .	100
Stillbirths .. .. .	2
Puerperal pyrexia .. .. .	4
Ophthalmic conditions .. .. .	27
Skin conditions .. .. .	1
Office interviews with midwives .. .. .	527
„ „ regarding hospital confinements .. .. .	629
Home visits regarding hospital confinements .. .. .	30
Special visits to midwives' hostel .. .. .	123
Other visits .. .. .	73

## HEALTH VISITING

The deputy superintendent health visitor resigned to take another post. Her successor commenced duty in July.

A small number of voluntary workers gave of their valuable services. As in previous years, clinic nurses and clerks assisted at welfare sessions, thus freeing the health visitor to carry out her main duties. A continuing shortage of the latter, however—the net result of resignations and appointments resulting in a staff of 30 in December—led to a degree of incompleteness in the carrying out of the work, even with selective visiting.

## HOME VISITS

VISITS IN CONNECTION WITH	1954	1955	1956	1957
Pre-school children :				
Primary visits . . . . .	4,864	4,706	5,024	5,332
Revisits under 1 year . . . . .	41,833	40,958	33,306	34,237
„ 1-5 years . . . . .	49,664	53,160	48,360	48,969
Expectant mothers :				
Primary visits . . . . .	188	340	375	350
Revisits . . . . .	65	181	329	320
Ophthalmia neonatorum				
Primary visits . . . . .	43	34	45	19
Revisits . . . . .	142	133	135	110
Old people :				
Primary visits . . . . .	822	737	452	565
Revisits . . . . .	1,932	4,312	3,795	3,568
Stillbirth enquiry . . . . .	34	47	58	43
Neo-natal „ . . . . .	23	35	21	34
B.C.G. vaccination . . . . .	1,085	1,130	1,265	963
Vaccination and immunisation . . . . .	20	23	92	178
Infectious disease . . . . .	42	35	1,075	115
Hospital after-care . . . . .	62	50	105	163
Boarding-out . . . . .	25	8	—	—
Housing . . . . .	13	10	58	135
Diabetic . . . . .	—	7	119	99
Other . . . . .	—	2	377	582
TOTAL NUMBER OF HOME VISITS . . . . .	100,857	105,908	94,991	95,782
“ NO ACCESS ” VISITS . . . . .	18,201	19,584	15,309	14,278



**Welfare Centres.** The facilities provided for various sessions in Health Committee and in rented premises were the same as in 1956, national financial considerations preventing the construction of further centres. Sketch plans are in existence for the consideration of two new buildings as soon as finance permits.

The same series of clinics was provided and a summary of the numbers of attendances appears on page 42.

**Dental Care. Mothers.** Commencing in January, revised arrangements supervised by the Principal School Dental Officer became operative. As a result the service was expanded to include inspection sessions on rota at welfare centres, a development which it was anticipated would lead to an increase in conservative care. Further expansion is visualised.

Treatment continued to be given at the General Dispensary, and arrangements were made for dental X-rays to be taken at the Central School Clinic.

**Children.** Those under 5 years of age referred from welfare centres and day nurseries were given the necessary attention at the Central School Clinic and subsequent to treatment the children were inspected six-monthly.

Dental inspection of the 2-5 year group attending day nurseries was carried out once during the year.

DENTAL INSPECTIONS :

At welfare centres or nurseries :					<i>Mothers</i>	<i>Children</i>
No. of sessions	..	..	..	..	8	1
„ inspected	..	..	..	..	89	34
„ referred for treatment	..	..	..	..	58	6
„ not requiring treatment	..	..	..	..	31	28
<hr/>						
Referred to dental clinic by medical officers of welfare centres	..	..	..	..	637	569

## TREATMENT OF MOTHERS AND CHILDREN :

			<i>Mothers</i>	<i>Children</i>
No. of sessions held	..	..	89	22
Total attendances	..	..	1,193	591
No. who attended—no treatment required	..	..	39	34
„ „ defaulted	..	..	128	53
No. treated	..	..	528	482
Type of treatment :				
Extractions	..	..	431	480
Fillings	..	..	12	2
„ and extractions	..	..	9	—
Dentures	..	..	78	1
Scalings	..	..	45	—
X-rays	..	..	4	—
Other	..	..	13	—

**Deafness in Pre-school Children.** Routine screening tests were carried out at the infant and toddler clinics held at the Aspley, Basford, Bulwell, Ernest Purser and Radford welfare centres. Special arrangements were made to examine at home children, from other centres, in whom deafness was suspected.

After a period during which routine testing of infants was carried out on their reaching the age of six months, a return to nine months was made in February.

Altogether 717 children were tested and of these 2 appeared to have partial deafness. The children were referred to an otologist under whose supervision the hearing has improved in both cases.

The two children mentioned in the Report for 1956 have since been admitted to the nursery class at the Nottingham School for the Deaf.

**Co-operation with Hospitals and General Practitioners.** Two-way liaison was maintained. It was notable that, in the main, mutual assistance was sought in matters affecting child patients and the aged. Work with general practitioners was to a great extent between certain firms and the health visitors.



**Surveys.** A number of enquiries were made, the most important of which are referred to below.

**Poliomyelitis.** An enquiry directed by the Medical Research Council into the age at which children first show evidence of infection and thus begin to acquire immunity, was commenced in June and will be continued until March, 1958.

From the children brought into the survey, faecal specimens were obtained for examination by the Public Health Laboratory. Fifteen children, in yearly age groups from 5 months upwards, were selected each week and the health visitor provided the link between their mothers and the laboratory.

**Leukaemia.** In the last report some notes were included on an investigation carried out here as part of a national survey into the deaths of a number of children who died from this condition. Subsequently, on the results it was decided to continue the enquiry to adult deaths. This was sponsored by the Medical Research Council and, in collaboration with the Research Committee of the Society of Medical Officers of Health and the College of General Practitioners, was directed throughout the individual areas by the Department of Social Medicine of the University of Oxford.

The Medical Officer of Health had been informed of a number of cases of child leukaemia and, with the co-operation of general practitioners, relatives of the diseased child were interviewed by a member of the medical staff. Relatives of a healthy 'control' child of the same age and sex and living in the same locality were also interviewed.

It is anticipated that some 15 cases from the City will ultimately be included in the national total.



**Cancer of the Lung.** Again contributing to large-scale research, health visitors investigated 133 deaths which had occurred during 1956 and completed questionnaires which sought to establish a relationship between this form of cancer and atmospheric pollution.

**Welfare of children in hospital.** A Committee appointed by the Central Health Services Council, with Sir Harry Platt, P.P.R.C.S., as Chairman, had this subject embraced within its terms of reference, medical and nursing arrangements being specifically excluded. The National Association for Maternal and Child Welfare, gathering evidence from various parts of the country, asked that health visitors in Nottingham should collect facts prior to collation by the Association and submission to the Committee. To this end some 20 questionnaires were completed.

**Postgraduate Study. Lectures.** Two lectures were delivered at the Sneinton Welfare Centre and on both occasions approximately 100 members of staff of various departments attended. The first was delivered on the 16th March by Dr. W. Warren, M.D., D.P.M., a physician of the Bethlem Royal and Maudsley Hospitals. Dr. Warren's subject was 'The limits of normality in the psychological development of the child'.

The second was delivered on the 7th December by Dr. Kenneth S. Holt, M.D., M.R.C.P., D.C.H., of the staff of the Department of Child Health of the University of Sheffield, and the subject was 'The promotion of mental health'.

**Courses.** A welfare centre superintendent attended a course at Southampton University from 30th March—6th April and two other superintendents a refresher course at Cambridge from 20th July—3rd August, organised by the Women Public Health Officers' Association. One health visitor attended the annual summer school of the Central Council for Health Education held at Bangor from 20th-30th August.

**Consultant Clinics.** The number of new cases referred by medical officers of the welfare centres to the weekly paediatric clinic at Huntingdon Street was 64 ; return visits numbered 174.

At the ear, nose and throat clinic, 42 children were examined. Of these, 29 were recommended for operation and 9 for medical care ; no immediate treatment was indicated for 4 children.

The number of children referred to the orthopaedic clinic was 97 ; of these 83 were sent for remedial treatment of postural defects—all of minor degree.

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

Amounts distributed	1955	1956	1957
National dried milk — 20 oz. tins ..	195,943	186,681	140,582
Orange juice — 6 oz. bottles ..	225,757	246,403	253,348
Cod liver oil — 6 oz. bottles ..	38,987	34,748	29,060
Vitamin tablets — packets of 45 ..	17,677	18,787	17,539

**Transport.** Eight health visitors were using cars at the end of the year.

#### BIRTH CONTROL

The Nottingham Women's Welfare Centre held thrice-weekly sessions at the Nottingham General Dispensary. A total of 145 women attended on the recommendation of their family doctors and 831 on their own initiative.

The Health Committee continued to give financial assistance for women referred from the Welfare Centre and from the Chest Centre ; of 89 and 27 referred, 95 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	181	1,288	59	1,528	15.4	99	216	3,704	37.4	50	2	613	12.3
Bilborough	51	66	461	23	550	10.8	101	188	3,010	29.9	51	16	500	9.8
Basford	50	99	746	57	902	18.0	99	171	3,785	38.2	50	7	584	11.7
Bulwell	51	125	682	53	860	17.0	100	240	3,812	38.1	51	2	739	14.5
Edwards Lane	49	69	596	32	697	14.2	100	252	3,534	35.3	50	—	644	12.9
Ernest Purser	101	204	1,414	64	1,682	16.7	101	290	4,274	42.3	49	9	399	8.1
Huntingdon Street	111	439	1,942	75	2,456	22.1	101	383	4,299	42.6	51	21	560	11.0
Hyson Green	—	—	—	—	—	—	94	292	5,299	56.4	—	—	—	—
Jarvis Avenue	50	47	389	27	463	9.3	100	109	2,225	22.2	50	2	343	6.9
John Ryle H.C.	51	67	642	30	739	14.5	147	472	5,502	37.4	46	43	645	14.2
Lenton Abbey	—	—	—	—	—	—	49	52	1,060	21.6	—	—	—	—
Radford	151	422	2,412	108	2,942	19.5	152	572	6,111	40.2	60	37	965	16.1
Sneinton	101	178	1,276	61	1,515	15.0	101	343	4,610	45.6	50	34	655	13.1
TOTALS	865	1,897	11,848	589	14,334	16.5	1,344	3,580	51,225	32.1	558	173	6,747	12.1
Consultant Clinic	50	430	438	13	881	17.6								



## 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. Additional numbers of children, varying from 5-15% according to the nursery, were maintained on the registers.

**Priority for Admission.** Social need continued to be the sole criterion for admission and the small waiting lists allowed of immediate placing where there was urgency. The percentage of cases admitted because one parent was sole breadwinner increased further.

Reason for admission			1954	1955	1956	1957
Parent sole bread-winner	..	..	32%	34%	41%	45%
Family income insufficient	..	..	20%	25%	15%	11%
Parent invalid, in prison, etc.	..	..	9%	10%	8%	13%
Bad housing conditions	..	..	19%	17%	18%	13%
Mother a nurse, teacher, etc.	..	..	6%	5%	7%	6%
Temporary special requests	..	..	14%	9%	11%	12%

**Infectious Diseases.** Bulwell Nursery, the children of which were affected by dysentery in December, 1956, accepted new admissions in mid-January.

In May a mild outbreak of dysentery occurred in Arnold Road Nursery and affected 14 children aged 1-5 years. One home contact was positive, but no staff were affected.

The occurrence of various cases—see table below—caused the imposition of quarantine measures which were necessary in the aggregate for a total of 80 weeks. Naturally the total attendance was affected.

	1954	1955	1956	1957
Measles .. .. .	5	163	—	60
Sonne dysentery .. .. .	73	32	84	14
Chicken pox .. .. .	33	30	12	28
Mumps .. .. .	19	14	12	11
Whooping cough .. .. .	11	7	6	—
German measles .. .. .	2	4	45	22
Scarlet fever .. .. .	3	3	1	—
Poliomyelitis .. .. .	—	1	1	—

**Attendances.** The total annual attendance of 58,417 was lower by 3,697. No less than 1,782 of this decrease—nearly a half—was attributed to a fall in demand for places at Arnold Road, the outcome of a trend which was brought to the notice of the Health Committee in July. The attendance at Bulwell also dropped by 1,660, the result of quarantine for 18 weeks for 4 infectious diseases.

The average *daily* attendance in relation to the total places is shown.

AGE GROUPS	Average daily attendance					
	1952	1953	1954	1955	1956	1957
0 — 6 months .. .. .	14	15	11	10	10	12
6 months — 2 years .. .. .	71	73	86	86	87	83
2 years — 5 years .. .. .	164	165	168	170	165	148
TOTALS .. .. .	249	253	265	266	262	243
Percentage total places .. .. .	73·2%	73·2%	75·9%	76·2%	75·1%	69·6%

**Charges.** The standard charge per day remained at 7/- with a sliding scale operating down to a minimum charge of 1/2d.

A total of 198 applications for reduction of fees was made ; 195 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.

At the examination of the National Nursery Examination Board all but one of 36 students succeeded at the first attempt. When the new course opened in September, 43 students started training, bringing the number of first and second year students to 87.

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

**Training Nurseries.** From January to September there were 16 first and 13 second year students in the seven City training nurseries, and from September onwards 14 first and 15 second year, a total of 58 students.

**Refresher Courses.** Nine matrons attended a four-day course at the Nursery Training Centre, Nottingham.

## **NURSERIES AND CHILD MINDERS (REGULATION) ACT, 1948**

Five persons were registered as child minders ; in two cases for 2 children, in two others for 3 children, and in one case for 9 children.

Applications from 4 persons were refused.



## 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 ..	-	116	317	27	195	348	17	53	146	-	109	479	28	308	248	3	228	410	20	305	213	41	238	472	26	178	432
FEBRUARY ..	-	122	302	20	194	290	46	140	286	-	120	407	71	304	284	32	198	409	16	211	309	37	213	414	34	179	406
MARCH ..	-	139	282	21	232	299	45	178	387	-	159	414	66	310	307	37	236	441	10	258	374	30	244	423	56	203	450
APRIL ..	12	123	296	5	188	220	57	172	358	-	128	399	53	269	297	35	137	248	25	283	221	24	219	384	50	192	368
MAY ..	19	65	229	5	282	380	65	139	308	-	119	509	87	345	323	22	204	520	33	356	217	33	257	489	70	197	311
JUNE ..	12	109	210	15	178	353	41	118	255	-	41	309	67	256	297	12	191	421	43	222	121	28	223	385	33	157	208
JULY ..	40	145	338	41	193	455	46	265	377	-	49	488	85	263	394	-	165	433	62	208	101	-	310	471	57	146	313
AUGUST ..	22	54	128	20	73	132	4	120	171	-	29	183	32	84	127	-	123	116	13	111	69	5	87	179	26	91	115
SEPTEMBER	36	146	291	31	182	410	21	228	465	-	66	426	76	210	304	21	208	470	43	214	171	35	220	434	57	187	379
OCTOBER ..	21	126	213	4	171	377	17	240	376	-	88	464	67	276	319	17	211	427	39	317	244	29	234	532	74	239	478
NOVEMBER ..	20	143	210	18	173	387	43	224	396	-	162	480	82	234	307	19	170	460	33	325	216	21	246	504	67	236	409
DECEMBER ..	12	114	163	-	119	284	19	154	275	-	129	368	67	198	219	12	120	342	28	219	175	-	173	376	32	182	307
	204	1,402	2,979	207	2,180	3,935	421	2,031	3,800	-	1,190	4,926	781	3,057	3,426	210	2,191	4,697	365	3,029	2,431	283	2,664	5,063	582	2,187	4,176
TOTALS	4,585			6,322			6,252			6,116			7,264			7,098			5,325			8,010			6,945		

Age Groups      A : 0-6 months.      B : 6 months-2 years.      C : 2 years-5 years.

Attendances      "      3,053.      "      19,931.      "      35,433.

Total : 58,417.

### CARE OF ILLEGITIMATE CHILDREN

The Superintendent Health Visitor, who assists mothers expecting illegitimate children, interviewed 70 women and arranged as follows. The decrease both in the number of interviews with the superintendent health visitor and in the number of admissions was surprising in view of the increase in illegitimate births by 79.

	1956	1957
Admitted to Mother and Baby Home ..	26	18
Awaiting admission to Home ..	2	5
Hospital confinement arranged ..	31	17
Confinement at own home arranged ..	10	11
Sent to Homes outside City ..	14	11
Left City before delivery ..	2	4
Still under consideration ..	8	4
	— 93	— 70

**The Hollies Mother and Baby Home.** Accommodation remained available for 8 mothers and 6 babies. During the year 19 mothers were admitted, 14 of them during the ante-natal period.

Emphasis continued to be laid on rehabilitation of the mother so that she and her child could together take their places in the community. The mothers remained until employment and accommodation either with relatives or in lodgings, or a residential post, were found ; the average stay was five and a half weeks. The health of the mothers and babies throughout was satisfactory.

	1956	1957
Mothers in the home 1st January ..	2	4
Admitted to the home ..	26	19
Returned home with baby ..	8	5
Went into lodgings with baby ..	6	9
Babies admitted to Children's Home ..	2	—
Babies adopted ..	7	5
Left before confinement ..	1	1
Remaining in the home at 31st December ..	4	3

**Homes in Other Cities.** The Health Committee's policy of sending very young mothers to a home away from their accustomed environment was adhered to. Two young girls, one 15 and the other 16 years of age, were admitted to The Quarry Maternity Home, Lincoln.



## PREVENTION OF ILLNESS, CARE AND AFTER-CARE

### CARE OF THE AGED

There was no outstanding new development during the year but there was a much needed consolidation of the progress of previous years.

The trend of earlier referrals, first noticed in 1955, continued, mainly by reason of a close liaison with family doctors. There were, however, a few cases of social breakdown which necessitated much attention from various departments of the Health Services, and it was disturbing to find even a few old people living in uncivilised conditions.

**Health Visiting Service.** There was a small decrease in the visits and in the cases referred for other assistance. The Geriatric Unit of the City Hospital asked for sociological reports on 152 persons on the waiting list ; of these, 72 were already known to the health visitors.

The tables give a summary of the work done.

Cases reported by	1954	1955	1956	1957
General practitioners .. ..	55	69	42	37
Geriatric unit for after care ..	177	116	88	125
"    "    " sociological reports	88	40	49	80
Welfare Services Department ..	58	48	18	27
Relations and neighbours .. ..	77	80	38	33
Health Department .. ..	25	109	74	81
Clergy .. ..	3	—	—	3
Voluntary organisations .. ..	123	86	62	26
Health visitors .. ..	216	161	36	25
General Hospital .. ..	—	44	45	53
Total new visits .. ..	822	753	452	490
Re-visits .. ..	1,932	4,312	3,795	3,643
	2,754	5,065	4,247	4,133



Assistance arranged through	1954	1955	1956	1957
General practitioner .. ..	83	240	219	157
Home helper .. ..	189	334	224	217
Public Health inspector .. ..	20	40	22	25
Convalescence .. ..	6	19	19	14
Housing Department .. ..	7	27	21	23
Welfare Services Department .. ..	55	74	71	107
National Assistance Board .. ..	77	97	57	63
Council of Social Service .. ..	14	46	28	42
Women's Voluntary Service— clothing .. ..	42	76	64	69
Blind Institute .. ..	9	16	8	16
Nottingham General Dispensary : Chiropody .. ..	28	59	55	58
W.V.S. : Meals on wheels .. ..	21	37	35	51
Relatives—advice .. ..	78	180	203	145
Total .. ..	629	1,245	1,026	987

**Chiropody.** The weekly sessions at the General Dispensary continued and in all 512 treatments were given.

**Voluntary Organisations.** A beginning was made in the Spring with a visiting scheme inaugurated by the W.V.S. with close co-operation of the Health Department. As a preliminary a meeting of potential visitors was arranged at which the scheme was outlined and the methods of successful visiting were explained by a senior medical officer. Subsequently, informal case conferences of visitors were held at about eight-weekly intervals. The arrangement was found to be a useful complement to the statutory service.

In February, 'Old People's Week' was organised by the Old People's Welfare Committee of the Nottingham Council of Social Service and material was lent for the exhibition.

**Nuffield House.** The initial intention to review the results of the first three years' working has now to be carried out and to this end the following report has been prepared.

The project of an occupational centre for elderly persons in the City of Nottingham was initiated by an offer, late in 1953, from the Nuffield Provincial Hospitals Trust to provide and equip premises for the purpose. The Health Committee, to whom all duties coming within the scope of the National Health Service Acts are delegated by the City Council, recognised an opportunity of extending in a new direction the services provided under Sect. 28 of the 1946 Act and accepted the offer.

As to the apportionment of cost, it was agreed that the Trust, after meeting the capital expenditure, should provide up to £2,000 for three years towards the salaries of the occupational staff, the materials for occupation and towards maintenance of the premises. The Corporation's contribution would cover other salaries, wages, provisions, transport, etc.

### PREMISES

During 1954 the Corporation acquired No. 16 Claremont Road, a Victorian family house standing in an acre of ground. It contained three reception rooms, four bedrooms, bathroom, kitchen and cellar, and a staff flat.

Adaptations were necessary, the main being the installation of central heating, fire prevention partitions and additional toilet accommodation. The kitchen was equipped to provide a mid-day meal for 50 people.

The rooms were redecorated in bright colours and the furnishings chosen were light and gay; special care was taken to obtain comfortable chairs which would be firm yet easy to rise from.

The house, now named Nuffield House, was ready for use on 1st May, 1955.



## **OBJECT**

This was clearly seen—the prevention by simple measures of mental and physical breakdown and the avoidance of admission or re-admission to a mental hospital.

### **First intentions**

- (1) To provide an interest for those men and women who had shown signs of mental instability by arranging for daily—or as much as needed—attendance at a centre where they were seen to be welcome and wanted.
- (2) To establish facilities for creative work indoor and outdoor.
- (3) To improve nutrition by giving at least one good meal each day.
- (4) To overcome the handicap of immobility through the use initially of motor transport.
- (5) Through medical supervision, to recognise early symptoms or signs of mental deterioration.

### **Means of implementation**

It was believed that the creation of a 'club' atmosphere had attractions ; thus, the not inappropriate name of 'The Octagon Club' was selected and those attending were spoken of as 'members'.

The most suitable hours for the whole year were taken as 9.30 a.m.—4.30 p.m. ; the difficulties arising from inability and inertia were not yet fully recognised.

The indoor workrooms were incorporated in Nuffield House for the men and women separately, with a further one to act as a common room. Various parts of the grounds were suitable for outdoor activities and a number of plots—individual gardens—were laid out.

## **STAFF**

In addition to those for domestic work, a supervisor and two occupational assistants, one male and one female, were appointed. When the added numbers attending the centre justified it in 1957 an assistant supervisor was appointed.



### INITIAL ROUTINE

The running of the club had necessarily to be elastic until it was seen how members responded.

Most of the time in the morning and in the afternoon was planned to be spent in occupations. During the morning a fresh orange drink was given and at mid-day a good two-course meal was served.

Medical supervision was carried out by a senior medical officer of the Health Department staff and by the Physician Superintendent of the Mapperley Hospital who advised on matters of psychiatry. A close liaison was maintained with family doctors.

Consultations took place frequently and particularly regarding the selection of persons likely to benefit as members. It was thought that the centre would be of especial benefit to those who

- (1) lived alone and who were lonely ;
- (2) lived with relatives
  - (a) where the relatives were out all day ;
  - (b) where the relatives, because of the continual presence of the old person, were tense and unhappy ;
- (3) were ex-patients of the St. Francis Hospital—a part of the main hospital but situated some two miles from it—in need of continued supervision.

### DEVELOPMENT

From a slow and tedious beginning progress, at varying rates, has been continuous, membership being built up till daily attendance of 40 or more was achieved in the summer of 1957.

At first the people newly brought together had no sense of cohesion and, until a group feeling began to appear, the number of members admitted was increased only slowly. It was soon found that if men or women did not find congenial companions, they did not stay.

At Nuffield House the group feeling took time to develop and came imperceptibly, though after only eight months some of the original members took a proprietary interest in showing the way to new ones who were accordingly more easily assimilated into the group.

A varying proportion of members attended for the full five days every week—at one date a check showed 56% were so coming, at another 71%. Others were regular attenders for 1-4 days weekly depending largely on their home arrangements. In this way it was possible to keep on the register a larger number than the 40 originally envisaged as attending every day.

### **FOOD**

The mid-day meal has proved very acceptable—menus are varied in content—and most of the members take it with relish. When the numbers reached 24, two sittings were arranged ; two members of the staff have their meal with each sitting.

### **OCCUPATIONS**

The occupations among the men are woodwork, basketry, rug-making, weaving and the making of sea grass stools ; those among the women are knitting and sewing. Some of the members are capable of undertaking comparatively advanced work ; the men have made themselves a carpenters' bench and have turned out some well-finished shelves and other pieces of furniture. The sea grass stools provide an opportunity for team work ; one man threads the grass round the wooden rim while another keeps it taut. Three men work together to set up the looms for weaving.

The men show more enterprise than the women in attempting new handicrafts, though a few of the older men, who are not capable of sustained effort, enjoy the tasks of sandpapering and oiling wood and of metal polishing.

Most of the women are able to knit and sew, but their work often shows a poor technique ; few of them master anything but the simplest stitches. They show pleasure in working with bright colours and in making small articles which do not take long to finish.

After working for some weeks there is usually a very noticeable improvement in members' work ; stitches are regular, weaving is even, baskets are symmetrical. A series of articles demonstrating the stages of improvement is kept to form an interesting exhibit.

About a third of the members, 11 men and 24 women, are so infirm physically and mentally that they are unable to do any occupations and, in fact, they are like children in need of 'minding'.



## TRANSPORT

This has been a difficult problem. Original thoughts were that when the number of members reached 16 or so, a small coach would be the most suitable means of conveyance to and from the centre. This meant that members would be picked up from certain collecting points at a fixed time as is done satisfactorily with young mental defectives who attend an occupation centre. In practice it became apparent that most of the Nuffield House members were far too frail ; some were quite unable to walk even a hundred yards to the 'bus.

A sixteen-seater 'bus was then hired from a private firm. This made two journeys morning and evening, but the time taken was considerable ; some of the members were in the 'bus for two hours.

In November, 1956, a twelve-seater Bedford Kenex Roadmaster, Mark V, was purchased. This vehicle was adapted by lowering the step and placing a firm vertical handrail at the entrance. Three journeys were made each morning to pick up 33 people and no journey took longer than an hour. Even so the arrival of members extended from 9.45 a.m. to 12.30 p.m. and departures beginning at 3.30 p.m. were not completed until 5.30 p.m.

Only a few members managed to get to the centre by themselves and as the numbers increased, transport had to be supplemented by private hire. Not all who are offered a place in the centre accept it and there is reason to believe that the free transport is an important factor with many of those who agree to attend.

## RESULTS

### The attendance

Up to 30th November, 1957, 138 members were enrolled, their ages being :—

			<i>Men</i>	<i>Women</i>	<i>Total</i>
Up to 69	..	..	18	30	48
70 - 79	..	..	17	56	73
Over 80	..	..	5	12	17
			<hr/> 40	<hr/> 98	<hr/> 138
			<hr/> <hr/>	<hr/> <hr/>	<hr/> <hr/>

Shortly after the opening of the club the average number was 3 per day. In January, 1956, it was 10·3, in December of the same year it was 25·4, while the figures for October, 1957, showed an average attendance of 39·1; the highest on any one day was 48.

In November, 1957, the majority of 71% were attending for the full five days, 14% for four days, 15% for three days and less.

At the time of writing only 46 members were regular attenders, though it is worth noting that while during the first year's working there was a relatively high number who ceased to attend, during the second year there were many fewer. The following analysis indicates the causes for leaving :—

	<i>Men</i>	<i>Women</i>	<i>Total</i>
<i>Left because of</i>			
Admission to hospital or residential accommodation	10	22	32
Own accord .. .. .	10	30	40
Death .. .. .	7	9	16
Obtaining work .. .. .	2	2	4
	—	—	—
Total .. .. .	29	63	92
	==	==	==

The admission to hospital was due mainly to mental deterioration, though three cases developed physical illness. Admission to residential accommodation administered by the Welfare Services Department was arranged when the family could no longer manage the old person, or where the member, living alone, was not safe to be left.

Of those who ceased attending of their own accord, the majority considered they were too busy or too well balanced to continue. This was not looked on as a failure; it may have been the reverse.

### **Effect on members**

Only 90 members who started to attend the club regularly before the 1st November, 1957, and attended for at least four weeks are considered.



It is not easy to measure the benefit or deterioration, mental and physical, in members, but in spite of this the following gives a fair picture :—

	<i>Men</i>	<i>Women</i>	<i>Total</i>
Benefited —ceased attending ..	9	21	30
„ —still attending ..	10	23	33
No change .. ..	7	16	23
Not improved .. ..	—	4	4
			—
			90
			==

The indices of benefits gained were an increase of alertness and sociability and an improvement in cleanliness and appearance. Of the four women who did not benefit, three showed an initial improvement but subsequently deteriorated mentally and were admitted to St. Francis Hospital. The fourth showed very little improvement during the thirteen weeks she attended and then had a stroke ; she, too, was admitted to hospital.

It is apparent that members wish to conform to the standard which has been set. There is very little trouble over meals or places in the workroom, and their relationship to one another is usually good.

One example of benefit is of a woman who lived with her sister to whom she had not spoken for two years. After a few weeks at Nuffield House she became friendly and talkative at home.

Another is of a man of 66 who had had several accidents and was full of complaints about his aches and pains. He had lost his wife some years previously and was lonely, miserable and depressed. He decided to work in the garden and has made such a success of his task that he is now quite a different being. Two others act as his labourers, being instructed by him, and the trio work happily together.

It is of interest that seven members returned after periods of non-attendance, in one case nearly two years. They asked if they could be reinstated and as this was arranged without delay, they settled down as if there had not been any interruption.

It has been found that many members are upset by any disturbance of their routine. For instance, when they know of the two days' closure of the club at Bank Holidays, they tend to be restless and in many cases do their handicrafts badly and make mistakes.

Sometimes members have to be admitted to hospital for two or three weeks while their relations go for a holiday. This break in continuity made the old people regress, so it was decided to try the experiment of fetching them daily to the club from the hospital. This was done in nine cases and in six it was successful.

### **The effect on members' families**

The benefits extend far beyond the members themselves.

A review was made in September, 1957, of thirty members attending regularly and who were living with relations; fifty-nine were concerned. In all cases, due to the difficulties of managing the old person, there had been some tension in the home, but this was resolved after attendance at Nuffield House had started. Further, in seventeen cases, twenty relatives were enabled to go to work without anxiety, and of these at least twelve would have been prevented from going to work at all.

The responsibility of taking a parent into their home sometimes devolves upon more than one family and quarrels arise about sharing the burden fairly. This occurred in three cases, but once the parent was attending regularly, the recriminations ceased. Sometimes the member shared the home with an equally elderly spouse or other elderly relative who is often physically incapable of giving them all the attention they wish. In such circumstances great relief has been given to four wives and four elderly sisters. In another case the relations were constantly telephoning to the Mental Health Department, but this has now ceased as their anxiety has been alleviated.

Three evening sessions, to which the relations were invited, have been held and they have met the staff and discussed difficulties. It is quite remarkable to hear how much they appreciate the relief from the perpetual care of the old relative. As a result they are willing to keep them at home and do not try to force admissions to hospital or residential accommodation.



### SAVING OF HOSPITAL BEDS

The cases of seventy members were analysed according to the channel through which they were recommended for attendance at Nuffield House. It was found that thirty-four came from hospital, either immediately on discharge or after a varying time at home. Thirty-six were recommended as the result of domiciliary consultation with the Physician Superintendent of the Mapperley Hospital. In his opinion, practically the whole of this group would otherwise have required admission to hospital ; actually only two had subsequently to be admitted.

Among those who were admitted from hospital, there was one man who had been in four times between 1949 and 1955. The spells were for many months' duration, so that in effect he was very little at home during the six years. He attended Nuffield House on opening, since when there has never been any question of his re-admission to hospital.

### COSTS

The capital expenditure on Nuffield House was £9,000 and was met by the Nuffield Provincial Hospitals Trust ; the annual cost for 1956/57 was £5,768, and for 1957/58 the estimated cost is £6,397.

### THE FUTURE

As a provision for a certain type of elderly person, Nuffield House has already played a part in alleviating difficulties in Nottingham—albeit for a small number—and is a valuable experiment. There is evidence to suggest that its influence should be spread wider, particularly with a view to the prevention of mental ill-health. Further time, however, is necessary to continue building up the organisation, to increase the numbers of members, and to be able to assess the results of their attendance.

Success finally must be judged by the number of people that the Club influences and by the extent to which the onset of a confused existence is delayed, or even abolished. Much more time, however, is imperative if this preventive function is to be achieved.

**PREVENTION OF BREAK-UP OF FAMILIES**

The co-ordinating committee, of which the Children's Officer is the convenor, met on 15 occasions. Those attending represented various departments of the Corporation, viz., Children's, Education, Health, Housing, Probation and Welfare Departments. The National Assistance Board, Ministry of Labour and National Society for the Prevention of Cruelty to Children also sent representatives, for many of the families were a common problem. Thus, all those concerned with an individual family met together and the pooling of information was valuable. Decisions as to the management of each case were arrived at jointly.

Since the first meeting of the committee in October, 1956, a total of 22 cases have been considered. Referral was often a joint decision by various workers, but usually one department or body undertook to bring the circumstances of the family before the committee, as follows :—

Health Department	..	..	..	..	8
Children's Department	..	..	..	..	3
Children's Hospital Almoner	..	..	..	..	1
Education Department	..	..	..	..	4
National Assistance Board	..	..	..	..	2
N.S.P.C.C.	..	..	..	..	1
Magistrates' Court	..	..	..	..	1
Probation Department	..	..	..	..	1
Welfare	..	..	..	..	1
					— 22

The agreed course of action varied from case to case, and many families were subject to constant review. In one instance the committee decided to recommend that a mother and her four children be sent for a period of recuperation and rehabilitation to Crowley House, Birmingham. The Health Committee subsequently accepted financial responsibility for a stay of six weeks, the Minister of Health having agreed that the Authority's proposals under the National Health Service Act, 1946, Sect. 28, covered this form of care.



## TUBERCULOSIS

The preventive work of the tracing of contacts, their examination and, where necessary, vaccination with B.C.G., and the rehousing of families where tuberculous infection was known, made steady progress.

## RESULTS OF EXAMINATION OF CONTACTS

Year	No. of new cases of Tuberculosis Notified	No. of Contacts examined	Found tuberculous	
			No.	Percentage
1949 ..	581	924	34	3.7
50 ..	517	858	29	3.4
51 ..	506	1,087	28	2.6
52 ..	459	2,138	34	1.6
53 ..	534	2,171	35	1.6
54 ..	428	2,172	30	1.4
55 ..	386	2,630	16	.608
56 ..	329	2,911	5	.17
57 ..	362	4,501	33	.73

**Bacille-Calmette-Guerin Vaccination.** Sessions were held for the testing of child contacts and where found to be tuberculin negative, vaccination was carried out. This resulted in 490 vaccinations.

**Rehousing.** The staff committee met as often as was necessary to consider applications for rehousing. Those granted were families where there was danger of infection to healthy persons from too close proximity with the patient. The figures since 1952 are :—

Year	Recommendations made	Families re-housed		
		Re-lets	New	Total
Prior to 1952 ..	233	—	—	—
1952 ..	123	86	148	234
1953 ..	183	77	124	201
1954 ..	100	65	51	116
1955 ..	110	64	39	103
1956 ..	123	54	52	106
1957 ..	78	43	39	82
TOTALS ..	950	389	453	842
Waiting list at 31st December, 1957		..	108	

**Care Committee.** The cases assisted showed a decrease. The main reason for this reduction was the absence of a social worker for some three months when requests for help were dealt with by other members of the staff.

	1954	1955	1956	1957
Milk at reduced rate .. ..	333	310	297	215
Referred to National Assistance				
Board for allowances .. ..	326	313	327	244
Loan of bedding .. ..	127	182	150	127
„ „ nursing equipment .. ..	157	155	169	147
Domestic help { Home Help Service	51	56	51	47
{ Other help .. ..	15	11	11	7
Clothing provided .. ..	74	107	75	76
Employment arrangements .. ..	144	161	196	104
Training course .. ..	27	33	46	39
Convalescence .. ..	13	17	13	9
Other matters .. ..	135	161	166	137
TOTAL .. ..	1,402	1,506	1,501	1,152

**Other Assistance.** More difficulty was experienced in finding light work suitable to the requirements and ability of quiescent patients. The Ministry of Labour, however, continued to reinstate persons in employment and also, in selected cases, made arrangements for rehabilitation and training courses.

In cases where the mothers of young families were tuberculous, the Children's Department took the children into care to ensure either complete rest at home for the mother, or to allow of her admission to a chest hospital.

The scheme for the provision of occupational therapy at home was continued by the British Red Cross Society.

Domestic difficulties were alleviated, where appropriate, through the Home Help Service or by Care Committee grants to meet the cost of laundry or to pay neighbours who had given assistance with the housework.



## TUBERCULOSIS REGISTER

	PULMONARY			NON-PULMONARY			Total				
	Adults		Child- ren	Adults		Child- ren	1957	1956	1955	1954	1953
	M.	F.		M.	F.						
Cases B/Fwd ..	1,503	1,648	352	39	125	52	3,719	3,740	3,673	3,786	3,587
Transfers from other areas ..	34	17	3	1	2	-	57	50	35	58	52
"Lost" cases returned ..	5	2	-	-	1	-	8	9	3	9	6
	1,542	1,667	355	40	128	52	3,784	3,799	3,711	3,853	3,645
NEW CASES ..	159	123	51	13	13	3	362	329	386	428	534
	1,701	1,790	406	53	141	55	4,146	4,128	4,097	4,281	4,179
Cases written off ..	185	162	47	5	10	9	418	409	357	608	393
	1,516	1,628	359	48	131	46	3,728	3,719	3,740	3,673	3,786
Children becoming adults ..	+11	+13	-24	+1	+2	-3					
Cases on Register at end of year ..	1,527	1,641	335	49	133	43	3,728	3,719	3,740	3,673	3,786
DETAILS OF CASES WRITTEN OFF :—											
Recovered ..							247	186	161	237	149
Deaths ..							63	78	69	89	110
Transferred to other areas or lost sight of ..							108	145	127	282	134
DEATH RATE PER 1,000 POPULATION ..							0.20	0.25	0.22	0.28	0.35
EXAMINATION OF CONTACTS :—											
No. of contacts examined ..							4,501	2,911	2,630	2,172	2,171
do. found to be tuberculous ..							33	5	16	30	35
Percentage do. do. ..							.73	.17	.6	1.4	1.6
WORK OF THE HEALTH VISITORS :											
No. of visits paid to patients' homes ..							12,105	13,098	15,236	14,012	12,677

## LOAN OF NURSING EQUIPMENT

## 'Small' Items

Article	From Home Nursing Service					From Chest Clinic				
	1953	1954	1955	1956	1957	1953	1954	1955	1956	1957
Air rings ..	421	484	516	378	453	33	43	25	27	11
Bed pans ..	567	682	812	766	947	18	20	15	13	8
Back rests ..	224	277	343	294	428	22	39	36	32	15
Barrier outfits ..	490	567	577	609	797	—	—	—	—	—
Cradles ..	50	72	83	62	68	1	1	1	—	—
Crutches ..	10	10	20	12	22	—	—	—	—	—
Draw sheets ..	186	213	123	178	222	—	—	—	—	—
Feeding cups ..	54	36	35	31	42	—	—	—	—	—
Incontinent gowns ..	40	49	27	21	26	—	—	—	—	—
Infectious outfits ..	35	45	45	28	28	—	—	—	—	—
Mackintosh sheets ..	517	705	860	765	947	13	29	18	24	8
Midwifery outfits ..	—	—	19	35	36	—	—	—	—	—
Sorbo cushions ..	73	117	159	193	323	3	1	4	5	5
Syringes 5cc. T.B. ..	490	475	506	587	789	—	—	—	—	—
Syringes 2cc. ..	35	43	21	15	9	—	—	—	—	—
Syringes others ..	—	—	—	3	13	—	—	—	—	—
Urinals ..	242	317	376	350	445	11	22	13	13	12
TOTALS ..	3,434	4,092	4,522	4,327	5,595	101	155	112	114	59

## 'Large' Items

Article	Issued from									
	Health Services Store					Chest Clinic				
	1953	1954	1955	1956	1957	1953	1954	1955	1956	1957
Air beds ..	8	3	2	—	1	1	—	—	1	—
Bed tables ..	6	3	3	1	2	5	10	2	5	4
Bedsteads ..	23	52	40	48	52	21	26	30	30	16
Commodes ..	38	85	75	101	119	1	2	—	2	2
Elbow crutches ..	—	—	1	1	2	—	—	—	—	—
Invalid chairs ..	84	104	108	99	114	10	6	8	2	4
Mattresses ..	35	63	48	58	66	25	35	40	37	24
Spinal carriages ..	7	—	2	2	1	—	—	—	—	—
Walking aid ..	—	—	1	—	—	—	—	—	—	—
Walking tripods ..	—	1	—	—	—	—	—	—	—	—
TOTALS ..	201	311	280	310	357	63	79	80	77	50



## CONVALESCENCE

Family doctors referred 151 of their patients—fewer by 25 than last year—for arrangements to be made for convalescence following various illnesses.

The usual length of stay was a fortnight, though exceptionally there was an added week. Of the total applications, 103 persons qualified and arrangements were made. As the table shows opposite, about 60% were accommodated at the Sheffield Regional Hospital Board homes for men and women at Skegness. For the remainder various vacancies were procured, though the majority went to the nearby East Coast at Mablethorpe. Of this group for whom arrangements were made in independent homes, the Health Committee paid maintenance as well as fares for 33 persons and maintenance only for 3 persons ; 4 applicants met the cost themselves.

A number of those referred were not actually in need of convalescence as envisaged by the Health Committee, that is, they were not recovering from serious illness or accident and likely to be fit for activity on their return. Nevertheless, they were offered advice and in some instances were referred to voluntary agencies from whom some financial help was obtained.

It was possible to arrange a satisfactory stay for 4 married couples, one of which, while not themselves recovering from illness, were suffering from the effects of the prolonged care of a mentally defective daughter who had been admitted to hospital to allow her parents to get some respite. In the other 3 cases husband and wife were recovering after one had nursed the other through a prolonged illness.

Comparative figures of admissions arranged 1953-1957 :—

Name of Convalescent Home	1953	1954	1955	1956	1957
<b>Regional Hospital Board Homes</b>					
<i>Sheffield Region :</i>					
Carey House, Skegness .. .. .	45	51	53	48	40
Seely House, Skegness .. .. .	25	14	17	24	19
Burley Auxiliary Hospital .. .. .	—	4	—	—	—
Sheffield Works' Conv. Assn. :-					
Claremont House, Matlock .. .. .	—	—	6	7	3
Stubben Edge Hall, Ashover .. .. .	—	—	—	1	—
<i>Oxford Region :</i>					
Freeland House .. .. .	—	1	—	—	—
<i>East Anglia Region :</i>					
Suffolk C. H., Felixstowe .. .. .	2	2	—	—	—
<i>Leeds Region :</i>					
Ilkley Conv. Hospital .. .. .	—	—	1	—	—
<i>South East Metropolitan Region :</i>					
Thomas Lye C. H., Brighton .. .. .	—	3	—	1	1
Birchington-on-Sea Diabetic C. H. .. .. .	—	1	—	—	—
<i>South West Metropolitan Region :</i>					
Walton-on-Thames .. .. .	—	—	1	—	—
TOTAL .. .. .	72	76	78	81	63
<b>Independent Homes</b>					
Hunstanton C. H. .. .. .	6	14	9	9	5
West Hill C. H., Southport .. .. .	2	7	5	4	2
Sheffield Works' Conv. Assn. :-					
Claremont House, Matlock .. .. .	3	1	3	4	5
Stubben Edge Hall, Ashover .. .. .	3	4	1	1	1
Evelyn Devonshire Home, Buxton .. .. .	—	2	4	—	1
George Woofinden Home, Mablethorpe .. .. .	—	2	12	19	22
All Saints', Eastbourne .. .. .	2	2	—	—	—
John Howard C. H., Brighton .. .. .	—	2	—	1	1
St. Joseph's C. H., Bournemouth .. .. .	—	2	—	—	—
Boarbank Hall, Grange-over-Sands .. .. .	—	4	1	—	—
Charnwood Forest Children's C. H., Loughborough .. .. .	—	1	1	—	—
Seabright C. H., St. Anne's .. .. .	—	1	1	—	—
Thomas Banting Home, Worthing .. .. .	1	—	—	—	—
St. Michael's C. H., Clacton .. .. .	—	—	1	—	—
Mental After-Care Assn. Home, Westgate-on-Sea .. .. .	—	—	—	1	—
Westwood Conv. Home, Blackpool .. .. .	—	—	—	—	1
Friendly Societies' Conv. Home, Herne Bay .. .. .	—	—	—	—	1
Catherine House, St. Leonards-on-Sea .. .. .	—	—	—	—	1
TOTAL .. .. .	17	42	38	39	40



An analysis of the number of persons under the type of illness from which they were recovering is shown for the years 1953-1957.

Type of Illness	Patients sent to Regional Hospital Board Homes					Patients sent to Independent Homes				
	1953	1954	1955	1956	1957	1953	1954	1955	1956	1957
Respiratory ..	16	16	23	17	23	8	9	4	6	10
Cardiac ..	13	6	8	13	9	2	6	7	11	7
Digestive ..	12	5	13	14	-	2	3	3	-	1
Nervous ..	1	9	3	5	6	1	5	8	4	6
Urinary ..	1	1	3	1	3	1	1	2	1	-
Reproductive ..	5	1	5	3	2	-	2	-	-	-
Skin ..	-	4	3	4	-	-	1	2	-	-
Rheumatic ..	6	5	8	6	10	1	3	3	3	2
Injury ..	2	5	1	1	3	-	-	-	-	-
Debility ..	14	21	4	11	4	2	11	8	14	13
Endocrine ..	2	-	1	-	-	-	1	-	-	-
Diabetic ..	-	3	5	2	3	-	-	-	-	-
Others ..	-	-	1	4	-	-	-	1	-	1

## HEALTH EDUCATION

In support of a recommendation that the field of health education be widened and that a full-time medical officer should be appointed to direct it, a report from the Medical Officer of Health was considered at the January meeting of the Health Committee.

The recommendation was adopted but as a result of the heightening of the financial stringency in the early part of the year, the recommendation did not secure the necessary finance and therefore was not proceeded with.

Extracts of the report are given.

- “ 1. In considering health education no new principle is involved.
2. Health education is a vital part of preventive health work—a function now widely recognised.
3. Since 1950 increasing attention has been given to teaching health principles as an essential part of the work of a Health Department.
4. In 1954 the Health Committee
  - (a) Accepted the need for the expansion of health education activities to a wider public.
  - (b) Approved the appointment of a Senior Assistant Medical Officer, a portion of whose time was to be devoted to building up a team of speakers, directing and extending their activities and himself carrying out health teaching.
5. In 1955 the Committee approved a course in public speaking techniques for health visitors and for other staff who now devote some of their time to various health education activities. These activities include the running of mothers clubs at five Welfare Centres and the meeting of many requests for speakers from adult organisations, trade unions and youth clubs. The work with the youth clubs has re-emphasised the interest of young people in accurate knowledge which, it is only too clear, they do not possess and the need for meeting this demand is recognised by their leaders. An extract from a report to the Youth Club Committee of the Education Committee on a conference for young women is repeated.



'The Talks on health provoked much discussion throughout the week. Amongst subjects discussed were sex education, mothercraft and personal hygiene. The majority felt that whilst they thought they had some knowledge on these subjects, they did not know whether it was correct and were anxious for exact information.

They asked whether it would be possible for courses on health education for groups of twenty girls to be arranged as they felt that it is not possible to talk frankly and discuss personal problems when the number in the groups is too large.

It would require skilful handling because the girls felt that courses should be open to girls in factories as well as youth clubs and schools, and it is absolutely essential to have the right approach'.

Experience shows that there will be a satisfactory response to this step and furthermore it is known that once work has commenced with organised bodies the response is an accelerating one".

A departmental committee of four members sat regularly to consider the window display at Canning Circus and the planning of health education generally.

Group teaching continued in the form of ten-minute talks and discussions at ante-natal, infant and toddler clinics. Health visitors shared with midwives the mothercraft teaching at relaxation classes and continued fortnightly visits to an ante-natal clinic held by a group of general practitioners at their surgery.

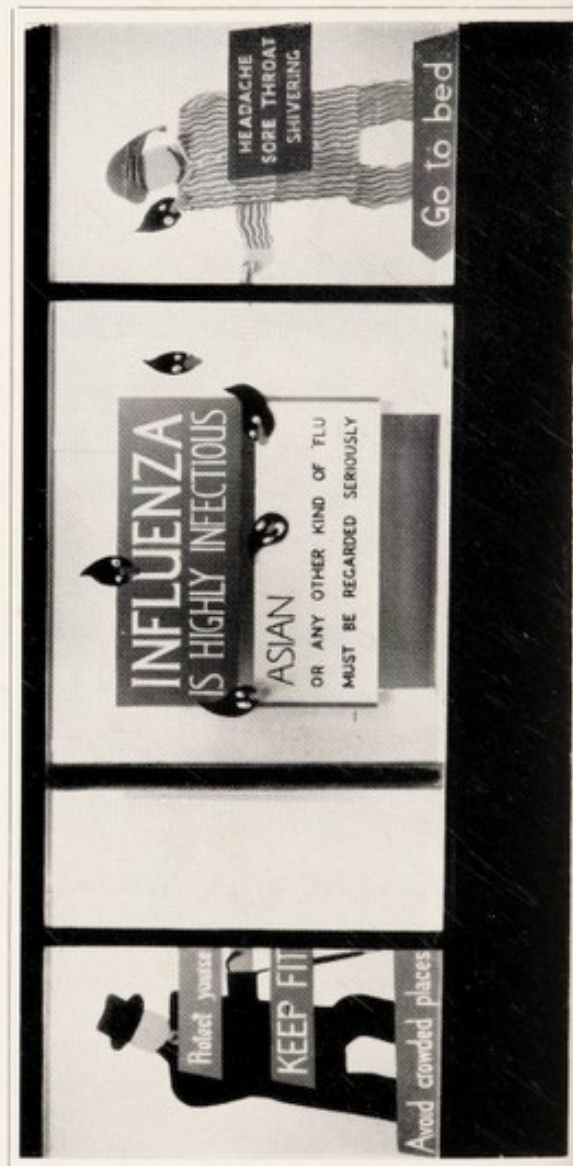
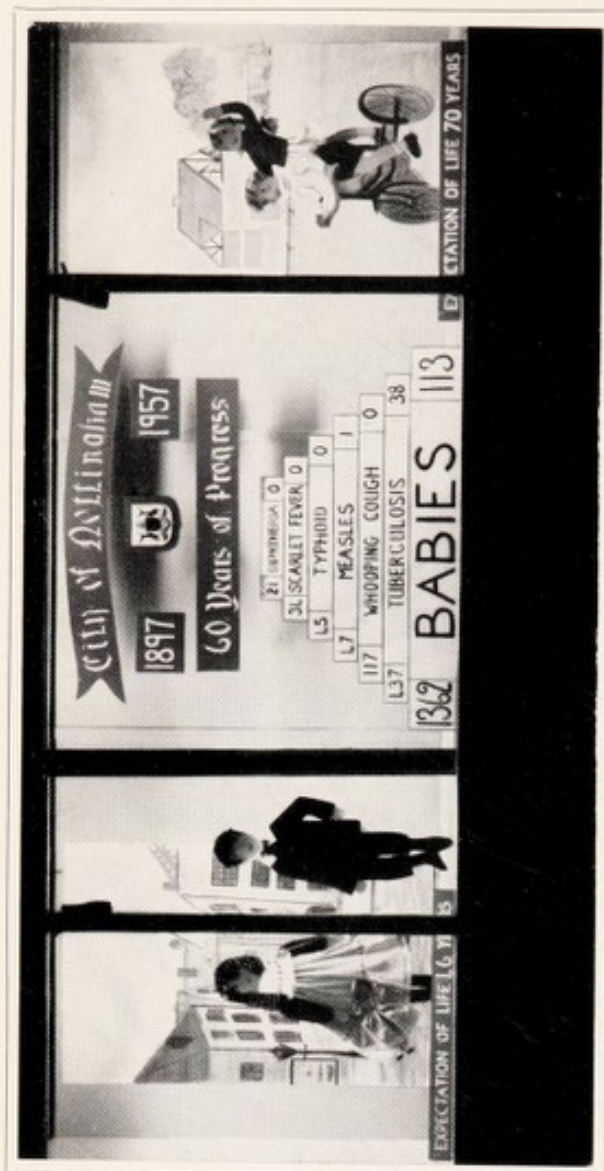
Mothercraft classes at the Firs Hospital were held by a health visitor at one ante-natal clinic and at the evening relaxation class.

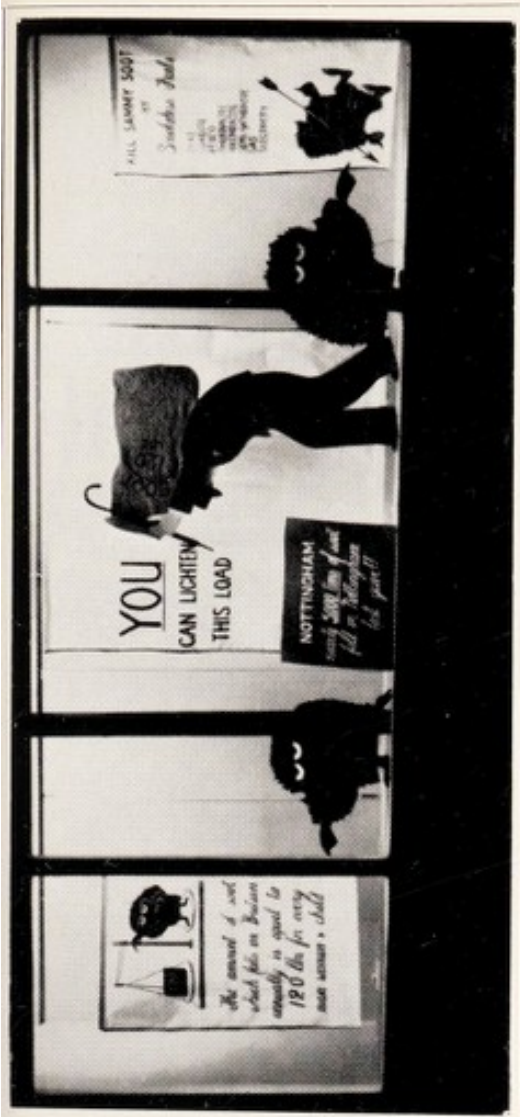
The mothers' clubs at the Ernest Purser and Rosebery House welfare centres met regularly, as did the one at the Edwards Lane welfare centre sponsored by the Nottingham Association of Women's Clubs.

Requests for 35 talks on a variety of subjects were met by medical officers, health visitors and public health inspectors.













The stock of visual aids was increased as a result of the work of the full-time assistant, an artist of merit. In May a demonstration on the preparation of visual aids was given by her to students of the Leicester Domestic Science Training College.

The Summer School of the Central Council for Health Education at Bangor from 20th to 30th August was attended by one health visitor.

**Demonstration Window.** Topical health projects were displayed regularly and aroused considerable interest.

**Displays**

January	Rules for good health	July	Summer hazards
February	Immunisation	August	Poisonous berries
March	Smoke abatement	September	Dental care
April	Home safety	October	Smoke abatement
May	Foot health	November	Influenza
June	Food hygiene	December	



## IMMUNISATION

Since 1953 the addition of new types of inoculation to those against smallpox and diphtheria necessitated a steady increase in staff and, more recently, in accommodation. With the prospect of even further expansion a review of the past four years is worthwhile.

Early in 1954 B.C.G. vaccination against tuberculosis for 13 year old school children was initiated and has since become a routine. Later the same year combined immunisation against diphtheria and whooping cough was introduced. This replaced immunisation against diphtheria alone and was carried out during the course of the routine children's clinics instead of being organised in special sessions. It was a popular measure and increased considerably the number of children immunised against diphtheria in their first year. In 1955 and 1956 vaccination against smallpox was first offered also at the ordinary clinics held at Welfare Centres instead of at *ad hoc* sessions—these latter were finally discontinued during 1957—with a marked increase in the acceptance rate.

Throughout the four years of review, immunisation of school children against diphtheria was constant at a satisfactory level. With, however, the increasing development of large scale vaccination against poliomyelitis, children were due for both at about the same time and thus, in order to disturb the school curriculum as little as possible and to avoid frequent injections for individual children, diphtheria immunisation was reduced during the last eight months of 1957.

The increase in various forms of inoculation culminated in the acquisition of new accommodation for the whole of the Immunisation Department at 134 Mansfield Road. These

premises were occupied on the 30th December and enquiries regarding all types of immunisation will be dealt with there.

The buildings include much needed room for the use of nursing staff to clean, prepare and store equipment, for the storage of records and also provide improved offices.

### COMBINED IMMUNISATION AGAINST DIPHTHERIA AND WHOOPING COUGH

Arrangements continued as before and there was an increase in the number of immunisations carried out, particularly in the Welfare Centres.

Combined Immunisation	1955	1956	1957
Carried out by General Practitioners ..	1,566	1,294	1,224
Under Health Department arrangements ..	2,018	1,769	2,214
TOTAL .. .. .	3,584	3,063	3,438

The number of cases of whooping cough in young children was very small but there was no widespread outbreak at any age.

### IMMUNISATION AGAINST DIPHTHERIA

Vaccination against poliomyelitis competed with immunisation against diphtheria in the schools. An attempt was made to provide both concurrently, but eventually was found to be impracticable. From 5th April routine sessions ceased and thereafter only a small number of reinforcing injections were given or primary courses completed. The tables which follow, therefore, show a fall in the number of children completely immunised. This will be rectified in the coming year.



## 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 ..	4,390	1,001	3,723	1,668	3,540	218
56 ..	3,125	787	2,586	1,326	2,628	159
57 ..	3,487	345	2,589	1,243	1,266	143

\* 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 ..	14,481	57	42,063	88	56,544	77
56 ..	14,133	57	42,980	88	57,113	78
57 ..	14,253	59	42,832	87	57,085	78

## Numbers and percentage of children immunised

	Estimated population	Children immunised	Percentage immunised
Age 0—1 year ..	4,910	2,950	60
„ 1—5 years ..	19,390	11,303	58
„ 5—15 years ..	49,200	42,832	87
Age 0—15 years ..	73,500	57,085	78

## NUMBERS OF CHILDREN IMMUNISED ANNUALLY 1949 — 1957

AGE	1949	1950	1951	1952	1953	1954	1955	1956	1957	Total No. of Children Immunised	Percentage of Child Population Immunised since 1943
Under 1 year	326	218	321	395	514	649	3,356	2,514	2,950	0 — 5 years 14,253	Estimated Population 0 — 5 years = 24,300  Percentage immunised = 59
1 Year +	3,043	2,809	2,900	2,715	2,548	2,321	688	388	348		
2 Years +	564	412	470	344	323	227	169	90	72		
3 Years +	261	184	113	128	126	78	101	74	60		
4 Years +	180	178	103	104	61	82	76	99	60		
5 Years +	321	305	279	283	224	285	330	318	101	5—15 years 42,832	Estimated Population 5 — 15 years = 49,200  Percentage immunised = 87
6 Years +	351	287	205	220	232	257	275	86	46		
7 Years +	155	112	68	79	99	128	161	47	36		
8 Years +	69	60	38	106	63	66	106	21	37		
9 Years +	60	13	22	131	71	30	31	17	37		
10 Years +	36	25	26	138	61	22	29	17	47		
11 Years +	31	18	15	103	61	16	31	54	21		
12 Years +	32	11	77	36	3	8	11	68	—		
13 Years +	16	5	59	40	1	6	7	57	9		
14 Years +	28	7	45	30	1	11	14	62	8		
15 Years +	—	6	26	28	—	3	6	—	—		
Total	5,473	4,650	4,767	4,892	4,388	4,189	5,391	3,912	3,832		



### VACCINATION AGAINST SMALLPOX

An increase in the number of children vaccinated in infancy was recorded. The occurrence of a small outbreak of smallpox in this country during the summer accounted for some of the increase but the major part is due to the discontinuation of special sessions since vaccination is now available at all clinics attended by infants. This has proved to be a satisfactory arrangement, particularly when offered before the course of combined immunisation becomes due.

### ANALYSIS OF VACCINATIONS

	Numbers of Persons Vaccinated						
	Age at 31.12.57					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	2,229	408	100	166	2,903	1,038	1,865
Re- Vaccination	—	15	37	358	410	377	33

### INFANT VACCINATION

	Primary Vaccinations under 1 year of age	Percentage of births during same period
1951 .. ..	2,135	41·8
52 .. ..	1,992	39·4
53 .. ..	2,056	39·4
54 .. ..	1,971	37·9
55 .. ..	1,143	23·2
56 .. ..	1,537	29·8
57 .. ..	2,229	45·4

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

The vaccination of 13 year old school children became acknowledged as a routine ; the acceptance rate for the year was 74%. Details of the work carried out are given in the table below.

Of 3,333 children vaccinated, only one developed complications—that in a girl who developed an axillary abscess which responded to treatment.

The site of vaccination was inspected in every child after eight weeks, while about 14% were retested. In this group no negative reactors were found after eight weeks. Retesting of a large proportion was undertaken when one year had passed and after two years of all those still remaining at school.

Of the positive reactors X-rayed after the first test, two were found to have chest lesions which required further investigation and were referred to the Chest Clinic. Of them one was admitted to hospital.

During the year two cases of tuberculosis were notified, occurring in a boy and a girl who were both vaccinated in 1955. The first was that of a tuberculous meningitis where the clinical diagnosis appeared to be definite although tubercle bacilli were not isolated. The boy recovered completely in about three months. A follow-up test undertaken one year after his vaccination has given a positive result, but before the second could be done at the end of a further year, he had been taken ill.

The other case was that of a girl who had a chest lesion which was discovered on routine X-ray during her final term at school. There could be no record of her reaction subsequent to vaccination as she failed to attend for tests.



	1954	1955	1956	1957
Schools visited .. ..	38	54	54	53
No. of 13 year olds ..	3,289	3,850	4,641	5,605
„ acceptances .. ..	2,599*	2,867	3,271	4,160 (74·0%)
„ refusals .. ..	631	946	1,235	1,327
„ others .. ..	59	37	135	118
No. tested .. ..	2,516	2,769	3,261	4,138
negative reactors vaccinated	1,884	2,148	2,502	3,333
positive „ .. ..	557†	589	698	700 (16·9%)
Post vaccination tests :				
At eight weeks :				
No. tested .. ..	803	1,686	2,105	614
Positive reactions ..	721	1,610	1,994	587
Negative „ .. ..	39	8	3	—
Inspection only ..				2,130
At one year :				
No. tested .. ..	—	1,595	2,052	2,221
Positive reactions ..	—	1,376	1,940	2,075
Negative „ .. ..	—	139	33	11
Absent from reading ..	—	80	79	135
No. revaccinated ..	—	30	10	2
At two years :				
No. tested .. ..	—	—	477	1,009
Positive reactions ..	—	—	433	944
Negative „ .. ..	—	—	19	1
Absent from reading ..	—	—	25	11
No. revaccinated ..	—	—	12	—
Complications	1	—	1	1

\* Average % of acceptances 1954-57 was 74.

† Average % of positive reactions 1954-57 was 20·2.

### VACCINATION AGAINST POLIOMYELITIS

From January to mid-March no vaccine was received. Subsequently, as supplies arrived at irregular intervals and in varying quantities, a vaccination programme was only carried out with difficulty. Nevertheless, by the end of the summer term a large proportion of the children registered in 1955 were dealt with. Injections were not suspended for the poliomyelitis 'season' but in the autumn term an outbreak of influenza seriously disorganised the arrangements.

In June children born in 1955 and 1956 became registrable and there were 4,000 acceptances. Vaccination of these began in December.

A press statement by the Ministry of Health on September 11th announced that increased supplies of the American and Canadian Salk type vaccine would be available during the first six months of 1958. It was then stated that school children aged 11-14, expectant mothers, general practitioners and their families and also ambulance crews and their families could be registered for vaccination during next year. In addition a second chance was to be given to parents who had failed to register their children previously.

It was decided to distribute notices and consent forms to parents of school children through the schools, to expectant mothers and the parents of pre-school children mainly through the Welfare Centres, and to others from the central office of the Health Department. It was realised that the nearness to the end of term and Christmas might complicate the arrangements, but as the amount of vaccine to be supplied for the City was dependent on the number of acceptances received by the 13th January, 1958, the despatch of some 60,000 invitations was carried through.

The result was as follows :—

	Nos. registered	Estimated potential
School children born 1943—1946 ..	14,500	22,000
Children born 1947—1957 ..	9,000	34,000
Expectant mothers .. ..	70	3,600
General practitioners and their families .. ..	100	350
Ambulance staffs and their families ..	70	200
<b>TOTAL .. ..</b>	<b>23,740</b>	<b>60,150</b>



**Vaccinations carried out during the year**

No. completing vaccination	..	13,020
No. given one injection only	..	1,769

**VACCINATION AGAINST INFLUENZA**

A small quantity of vaccine was made available in October for members of Health Services in close contact with sick people. Although the epidemic was drawing to a close and many had already had an attack, vaccination was accepted by 210 persons. These included general practitioners, home nurses, midwives, home helpers and ambulance crews.

## HOME NURSING SERVICE

A mild winter caused a reduction during the first three months of the year in the number of new calls for nursing. However, a larger number than usual—mainly those with long-standing illnesses—was carried over from the previous year, so that for this period the number of nursing visits paid was average.

The volume of work continued similar to that of previous years until October, when an epidemic of so-called Asian 'flu' was experienced. Nursing was necessary not only for an increased number of fresh cases complicated by lobar pneumonia, but also for chronically ill patients usually cared for by relatives who themselves became ill. In many households the nurse found several members of the family ill as well as her original patient and had to extend her care to them. Many of the nurses, too, became sick so that the pressure on the remainder was considerable. Vaccination against influenza became available in November and was accepted by 26 nurses.

The table overleaf shows the comparative index of work over 6 years ; a detailed table is found on page 83.

**Staff.** An average of 65 nursing sisters was maintained with slight variation through the greater part of the year. There were, of course, appointments and resignations and two of the latter were occasioned by the nurses' intention to return to hospital nursing.

An assistant superintendent left in August to take up an appointment as area nursing officer for Hertfordshire and at the end of the year the vacancy was still unfilled. This, combined with the absence on study leave of the second Assistant Superintendent inevitably added to the load of the Superintendent and Assistant Superintendent. The organisation was such, however, that for the period of vacancy the additional administrative duty was successfully met.



## Comparative index of work over 6 years

	1952	1953	1954	1955	1956	1957
Register 1st January	927	1,116	1,226	1,345	1,492	1,568
New Patients ..	4,791	5,499	5,860	6,340	5,927	5,758
Total visited ..	5,718	6,615	7,086	7,685	7,419	7,326
Register 31st Dec. ..	1,116	1,226	1,345	1,492	1,568	1,726
Total nursing visits	202,993	200,242	217,033	229,882	240,133	246,292
„ supervisory visits ..	1,606	2,018	1,951	1,772	3,085	2,581
Case load—visits per month per nurse ..	352	303	329	314	317	317

Type of Illness	1952	1953	1954	1955	1956	1957
Circulatory and						
Cardiac ..	643	747	952	1,087	1,181	1,368
Respiratory ..	1,095	1,402	1,474	1,687	1,384	1,445
Digestive ..	826	971	916	1,071	1,042	976
Urinary ..	170	196	186	178	198	194
Reproductive ..	202	203	267	276	285	298
Nervous and						
Cerebral ..	553	593	688	758	937	942
Carcinoma ..	337	375	465	417	397	447
Diabetic ..	197	255	258	243	278	297
Ulcer of Leg ..	153	155	158	166	138	135
Tuberculosis ..	576	554	493	371	326	291
Burns, Scalds, Injury, etc. ..	320	250	480	626	486	256
Due to senility ..	410	690	589	603	461	456
Infectious Fevers ..	26	41	15	34	14	19
Rheumatism, Arthritis ..	210	183	145	168	292	202
TOTALS ..	5,718	6,615	7,086	7,685	7,419	7,326

Age groups of Patients	1952	1953	1954	1955	1956	1957
5 years and under	2.5%	2.75%	2.1%	2.2%	3.3%	2.5%
6 — 16 years ..	3.1%	2.5%	2.2%	1.7%	2.9%	2.3%
17 — 45 years ..	11.1%	13.25%	12.7%	11.9%	18.6%	18.7%
46 — 60 years ..	20.0%	20.5%	21.4%	21.3%	24.2%	25.2%
Over 60 years ..	63.3%	61.0%	61.6%	62.9%	51.0%	54.1%

**Transport.** There are now 32 cars owned by nurses, who receive an allowance for their upkeep, and one Corporation car. The 'Assisted Purchase' scheme was used by 2 nurses who acquired cars as an initial purchase, and 6 nurses exchanged their cars under this scheme.

As one by one the Douglas Vespa auto-cycles bought about 1952 become unserviceable, replacement is necessary, and as an alternative a Lambretta motor-scooter has been tried. So far it has been an improvement. White crash helmets have replaced the navy-blue ones originally issued. Not only do they make the wearer more easily visible at night, but the quality is better, and in two accidents in which nurses were involved, head injuries appeared to have been prevented by them.

**Houses and Flats.** These have been increased by four unfurnished houses. The present position is :—

Houses	2 furnished	14 unfurnished
Flats	3 „	3 „

**Telephones.** The number remains at 46.

**Training.** Nurses from a course of training which commenced in 1956 were examined in January when five were successful, and another group were examined in May when four passed, one nurse being awarded a credit.

Another course now proceeding opened in October.

As part of their instruction in the preventive services, 9 student nurses from the City Hospital accompanied home nurses on their visits.

**Postgraduate Study. Lectures.** A course of lectures on 'Lifting and Posture' was held in September at Regent Street ; 11 nurses attended.



In November the Director of the Public Health Laboratory in Nottingham, Dr. E. R. Mitchell, addressed 48 nurses on 'Bacteriology and Domiciliary Practice'.

**Courses.** One of the Superintendents was accepted to attend a special teaching course for senior ward sisters arranged by 'The King Edward's Hospital Fund for London'.

Three Queen's nurses attended a course of one week's duration at Bangor. Two male nurses similarly attended a course in Glasgow and two State Enrolled Assistant Nurses attended a short course in Birmingham.

\*includes 200 visits to inspect nursing equipment on loan.

N.P.—New Patients.

P.N.—Patient Number.

\*Classified in other Columns--Not to be included in Totals

\*includes 200 visits to inspect nursing equipment on loan.



# RECORD

Month	No. of Patients	Digestive				Patients Taken Off Register				Circulatory		on Register
		Total	Acute	Chronic	Discharge	Completed	Discharge	Chronic	Discharge	Completed	Discharge	
Jan.	1,258	272	5,103	20,469	191	90	70	113	388	3	453	1,692
Feb.	1,673	490	5,133	19,331	137	83	68	143	463	4	453	1,692
March	1,667	484	5,131	20,843	201	78	76	110	463	4	453	1,692
April	1,678	411	5,082	20,304	135	83	50	132	463	4	453	1,692
May	1,651	488	5,144	21,103	184	83	50	132	463	4	453	1,692
June	1,670	419	5,094	19,276	168	85	27	150	463	4	453	1,692
July	1,670	419	5,103	20,313	164	86	25	119	463	4	453	1,692
Aug.	1,648	411	5,028	19,976	170	84	24	101	463	4	453	1,692
Sept.	1,649	431	5,078	19,301	183	83	60	70	463	4	453	1,692
Oct.	1,678	621	5,223	23,816	283	108	69	112	463	4	453	1,692
Nov.	1,746	470	5,231	20,643	222	82	24	121	463	4	453	1,692
Dec.	1,731	347	5,234	21,306	236	88	23	104	463	4	453	1,692
TOTAL	17,711	—	—	246,392	2,330	1,033	763	1,370	—	—	—	—

\*Includes 300 visits to inspect nursing equipment on loan

Grand Total of Patients Nursed : 7,738

No. of Patients Nursed

7,738

## HOME HELP SERVICE

Contrary to expectations and to previous experience, enquiries for the service showed a small decrease. Not all these enquiries resulted in applications for help ; some enquirers withdrew on being told that payment would probably have to be made. Further, some enquirers did not realise that the households entitled to help were laid down by statute and were limited to those where there is a person who is ill, a lying-in or expectant mother, mentally defective, aged or a child below school age. Thus the final applications also showed a decrease, i.e., from 2,183 to 1,811.

Homes needing help every day—there were 178—were those that caused the greatest continuous pressure on the service and a detailed account of this group is given.

At all of these homes a helper had attended daily for at least three months, while 41 had help for periods from 5-8 years. The amount of help varied from 1-4 hours in all, but 3 'social' cases necessitated an average of 7 hours daily due to the permanent or temporary absence of the mother. For an account of such a case see page 87.

Of the 178 cases, 57% were over 70 years of age, while only 14% were below 50. Half of them were persons living alone ; 26 were married couples and the remainder lived with their married son or daughter.

In 118 cases no charge was made, in 50 part cost was paid and in 10 full cost.

The need for a helper in this group arose from :—

Senility .. ..	34	Tuberculosis .. ..	10
Rheumatism .. ..	30	Asthma and bronchitis .. ..	9
Heart disorder .. ..	34	Amputation of legs .. ..	4
Stroke or paralysis .. ..	28	Social causes .. ..	3
Cancer .. ..	11	Miscellaneous .. ..	15



**Administration and Staff.** The district organisation was improved by the transference in January of the Western Office to premises in Gregory Boulevard, a more central situation than the former office in the temporary welfare centre at Bilborough.

Sick absence followed the usual pattern until October-November, when the influenza epidemic was the cause of 70-80 helpers being absent at one time. Vaccine against influenza became available in November and December and 55 helpers were inoculated.

**Demand.** The main demand, as always, was for aged persons, many living alone and many so infirm that they could not manage to care for themselves or their homes. In some cases, the setting up of the younger generation in a Council house on a distant estate meant that the older people could no longer count on daily help from them.

**Maternity.** The requests from expectant mothers showed little variation from recent years. Many of these came from middle class citizens who normally did not use the service. Some of the applications were cancelled on account of the cost.

There were strong criticisms concerning the requirement to pay one half of the home confinement grant in addition to the assessed sum. Those criticising did not realise that this grant was designed to include a substantial element for attendance and had earmarked it for necessities such as extra bedding, etc. The necessity for payment was the main reason why no less than 136 applications of a total of 301 were cancelled by those who expected the service to be provided entirely gratis.

**Tuberculosis.** The applications for help have declined over the past four years as the number of notified cases has fallen. Help in most cases was given over a long period and with the gradual improvement in the patient's condition was reduced till finally only two half days weekly were necessary for the heavy housework.

There was no improvement in the recruitment of helpers for this branch of the service.

**Night Help.** Help was provided for 24 cases. The demand was sporadic and by its irregularity made it impossible to keep helpers waiting to be sent for. There were few helpers willing to accept night duty and, unless they could be given regular work, they asked to work by day. They were then not willing to turn over to night duty at short notice and therefore some of the applications for immediate night help had to be refused for lack of a suitable helper. Sometimes the need was for a few nights only while awaiting admission to hospital ; sometimes it was for two or three nights a week to let hard pressed relatives have some sleep.

**Social Cases.** These cases, as explained above, comprised those where the mother was absent and there were young children. As the children grew older and went to school, it was possible to reduce the helper's hours in term time. These cases were perhaps the most rewarding of all, as the presence of the home helper was the main cause of keeping the family together.

The value of the service is exemplified by a single case.

In the Spring of 1956 a husband and his three children, whose aggregate ages did not exceed 10 years, was left by his young, unstable wife. Since that time the wife has not returned and thoughts of reconciliation have long since passed. The husband, hard-working and trustworthy, was determined to keep his home together and his standing with his employers was such that they gave him paid leave for 4 weeks while he was reorientating himself and his family to a new type of life. Towards the end of this period, a helper—a childless widow—went to the home, where she has worked continuously up to the time of writing. She has become a true mother's substitute, with mutual affection and kindness. The home is now well run and the husband co-operates, taking his share of duty when he is not working throughout the week-end.



The alternative to this arrangement—and it is not an uncommon occurrence—would have been for the children to be taken into care, a procedure to which all workers in the social field would seek to find an alternative.

As for the cost, some 3,700 hours have led the Health Committee to an outlay of £550, towards which the husband on assessment has contributed £135. The cost of care would have been about £1,650 in a residential home or £400 in foster homes. The latter compares financially, with the great difference that it would probably have meant separation of the three children from each other and from father and home.

**Mental Illness.** Requests for help for patients recently discharged after treatment in a mental hospital have shown some increase. In the case of housewives, most of whom were 35-45 years of age, the helper had a dual role : she undertook the housework which the ex-patient was yet unable to do and she had also to encourage her return to normal life. Often in these cases the voluntary visits made by the helper in her own time on Sundays reinforced her work during the week.

**Waiting List.** The carry over of long term cases showed an increase and, in consequence, the list remained heavy until the last quarter of the year, when more helpers joined the service.

**Income.** Approximately 72% of the cases did not make any payment towards the cost of the help provided. Others, paying part of full cost, contributed £7,726, a decrease of £666 on 1956.

Full cost cases had paid since April, 1956, an administration charge of 3d. an hour ; this charge was applied to part cost cases on 1st September, and amounted to 6d. for every 5/- charged. It is anticipated this will result in a yearly income of £300.

## THE YEAR'S WORK

Date	No. of helpers	Cases being assisted			Waiting list	Weekly wages bill
		General	Maternity	Night		
28. 3.57 ..	418	1,398	8	3	140	£ 1,481
27. 6.57 ..	446	1,498	7	3	52	1,773
26. 9.57 ..	451	1,324	4	2	244	1,555
12.12.57 ..	490	1,562	9	3	132	1,811

## No. of Helpers at 31st December :

			1953	1954	1955	1956	1957
Full-time	..	..	173	170	224	132	182
Part-time	..	..	135	284	226	295	333
Casual	..	..	158	30	10	15	6
TOTAL		..	466	484	460	442	521

## Hours worked :

Weekly average	..	10,947	11,544	11,655	11,333	10,933
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## Result of Applications :

Help supplied	..	..	1,107	1,296	1,309	1,385	1,189
Awaiting help	..	..	173	218	132	69	24
Advance maternity bookings			38	38	50	42	42
Not qualifying	..	..	174	151	137	25	19
Cancelled or arranged own help	..	..	337	393	438	662	537
TOTAL		..	1,829	2,096	2,066	2,183	1,811

## Analysis of Cases Assisted and Payments made :

			Full cost	Part cost	Nil	Total
Old Age Pensioners :						
Chronic illness	..	..	206	162	1,661	2,029
Acute illness	..	..	20	10	85	115
Others :						
Chronic illness	..	..	37	21	90	148
Blind	..	..	2	4	30	36
Acute illness	..	..	115	31	83	229
Maternity	..	..	91	61	13	165
Tuberculosis	..	..	5	3	30	38
Social cases	..	..	4	1	5	10
Night cases	..	..	3	6	15	24
TOTAL		..	483	299	2,012	2,794*

\*Includes 1,605 cases receiving help on 1st January, 1957.



## MENTAL HEALTH SERVICE

**Co-operation.** The close co-operation between the authority and the mental hospital enjoyed since 1948 continued and was further developed.

The mental welfare officers had free access to the hospital in the course of their duties as well as when admitting cases, and had frequent opportunities for discussion with the medical staff on those occasions and at case conferences. The nursing staff, however, had only limited opportunities of participating in and understanding the comprehensive service which has been achieved.

During the year, therefore, a successful arrangement was initiated in seconding, as an observer, one nurse at a time—alternately from the male and female staff—to the Mental Health Department. The object was to assist the nurses to a better appreciation of the overall scope of the service and to enable them to understand the services available to patients on discharge from hospital.

The scheme was a success from the beginning and already a cross-section of the staff, from charge nurses to second year students, have been seconded. It is expected that eventually this period will be included in the curriculum of all student nurses.

## MENTAL ILLNESS

**Admissions to Hospital.** Again there were no admissions on Summary Reception Orders under Section 16 of the Lunacy Act, and no case admitted by other procedures was subsequently

certified. Only one Summary Reception Order was made with respect to a patient who was admitted to Mapperley Hospital late in 1956.

The number of cases reported for investigation with a view to hospital admission had shown a continuous rise in each year from 1948-1956 inclusive. During 1957 the number of cases reported dropped slightly for the first time to 949 from 984 in the previous year. The percentage of cases reported and actually admitted to hospital has remained constant at 57%.

It would seem that the service can anticipate being called upon to investigate between 900-1,000 each year.

The persons referred to the authority were those where :—

- (a) The onset was acute and emergency procedures were necessarily invoked.
- (b) Advice had failed to persuade those with long standing disorder to take voluntary action in their own interests.

Of the cases finally admitted to hospital, in only approximately one-half were compulsory procedures necessary, the remainder being admitted voluntarily after investigation by a mental welfare officer.

Efforts were made in all suitable cases to avoid admission altogether and the fullest use was made of out-patient facilities. Of the 180 cases under the age of 65 reported by medical practitioners, out-patient appointments were arranged for 35 before undertaking further action ; in many cases continued out-patient attention met the need.

Where persons aged 65 years and over were reported, domiciliary visits by a psychiatrist accompanied by a mental welfare officer were continued as in former years with satisfactory results.



**Community Care.** The after-care of persons discharged from hospital continued to be an exacting, time-consuming, but rewarding part of the work.

A total of 820 names on the after-care register was carried over from 1957 and it was found possible to reduce this considerably. However, the number rose steadily, until by the end of November a record figure of 949 persons was reached. In December, some who it was judged would be able to meet their problems unaided, were removed from the lists, leaving 922 active cases.

The name of any person who might have benefited by continued after-care was only removed from the registers with reluctance. It was realised, nevertheless, that a point exists beyond which effective service could not be given and a process of selection was necessary to reduce the number to a level at which the service could work efficiently.

The steep rise in the number of after-care cases was the result of several factors. Some chronic cases were discharged from the mental hospital to the care of relatives, who required the close support of the social workers in the task they had undertaken. Other cases were discharged at a stage where, no longer requiring hospital care, they were not yet fit to stand on their own in the community. There was also an increase in the number of cases requiring guidance in financial and domestic difficulties. Consequently these cases were still the object of active attention which could not be terminated as new ones were added to the registers.

Although there was no measure as to the effect of the after-care service, there was no doubt as to its value in terms of human happiness and general benefit to the community.

## PERSONS IN NEED OF ADMISSION TO HOSPITAL

	Under 65 years		Over 65 years		Totals
	M.	F.	M.	F.	
<b>Reported by :</b>					
Police .. ..	56	49	15	12	132
General hospitals .. ..	48	51	7	15	121
Medical practitioners .. ..	75	105	60	101	341
Relatives .. ..	48	75	30	28	181
Others .. ..	46	53	13	62	174
<b>TOTAL .. ..</b>	<b>273</b>	<b>333</b>	<b>125</b>	<b>218</b>	<b>949</b>
<b>Disposal :</b>					
Admitted hospital :					
Under Sect. 16 .. ..	—	—	—	—	—
do. Sect. 20 .. ..	97	132	19	20	268
As a voluntary patient .. ..	43	82	11	32	168
Others .. ..	7	10	42	45	104
	147	224	72	97	540
For community care .. ..	14	15	21	71	121
Not accepted .. ..	112	94	32	50	288
<b>TOTAL .. ..</b>	<b>273</b>	<b>333</b>	<b>125</b>	<b>218</b>	<b>949</b>

## MENTAL DEFICIENCY

**Admissions to Institutions.** The acute shortage of institutional accommodation for mental defectives was eased for a limited amount of new accommodation became available at Aston Hall and in the Autumn the partly complete Balderton Hospital, near Newark, received its first patients. In all 48 cases were admitted to institutions as against 27 in the previous year ; a most notable advance.

The new accommodation was principally for high and medium grade defectives and the waiting list of urgent low grade cases was little affected—only three patients of idiot grade were admitted during the year.



There is still a great need for accommodation for low grade children. Throughout the service no greater unhappiness was found than that suffered by desperate mothers trying to care for these children, whose need for institutional care was apparent to all.

**Supervision of Mental Defectives.** On 1st January the total number of defectives under guardianship and supervision, both voluntary and statutory, numbered 888 : in December it was 887. Home visits totalled 3,597.

With the older defectives the main activity of the mental welfare officers was directed to the finding of suitable employment for all those considered capable of earning in any capacity. With the higher grades, jobs were obtained through the Ministry of Labour but with less promising material the mental welfare officers made considerable efforts by personal contact and succeeded in placing a number of defectives who would not otherwise have obtained work. One firm persuaded somewhat reluctantly about four years ago to employ a low grade feeble-minded man in certain routine work to relieve skilled operatives, telephoned during 1957 to the Mental Health Department to say that the experiment had succeeded and that, as the business was expanding, they would like a similar man to assist the one already employed !

In the case of younger defectives, while ensuring that home conditions for them do not fall below an accepted standard, the mental welfare officers helped and advised the parents over difficulties encountered with their children. In many cases the relationship established was such that they found themselves becoming guide, philosopher and friend to the family, and were consulted on all manner of problems outside the scope of their duties.







‘ . . . . . quite low-grade defectives are capable of being trained . . . . . ’





‘ . . . . . Some of this training could be given in the form of group training, . . . . . ’





## CITY OCCUPATION CENTRE

**Accommodation and Staff.** The year opened with 155 trainees on the register and at the close there were 164 ; the daily average attendance was 124 and in all 24,703 attendances were made.

Although the Centre was established with 150 places—and daily attendances often approximated to this figure—the existing buildings could accommodate about 175. The numbers could not be increased, however, without additional staff.

The supervisory staff numbered 11, excluding the Organiser, which, for the 164 on the register, gave a ratio of one to fifteen. Having in mind the Board of Control recommendation of one member of staff to each 15 defectives, the staff would require to be increased by at least one for a register of 180.

There was no doubt that quite low grade defectives are capable of being trained to a surprising extent if sufficient staff time can be devoted to them. Some of this training could be given in the form of group training, but a good deal of individual attention is required also to make maximum progress and with a proportion of one to fifteen it was found impossible to give the necessary time or to achieve the best result. It was felt that a staff ratio of one to ten would lead to greater progress and results would be more quickly obtained, though the employment of additional teachers would only enable the numbers received in the Centre to increase very slightly.

In this connection the economic factors of an occupation centre, as with all social services, are difficult to assess. The capital cost and maintenance of an occupation centre can be clearly shown. Its direct income from the sale of craftwork is almost negligible. The real value cannot be assessed. Those



experienced in the work were of opinion that the defectives in the Centre could have caused actual damage within the community in excess of the whole running costs if they had been left at large, undisciplined and untrained.

This assessment does not take into account the value to hard pressed parents of daily relief from heavy responsibility and the happiness brought to the defectives by the training, affection, and social outlet which they gain through attendance at the Centre. It is not without significance that although a number of the trainees have given clear evidence of behaviour problems and potential delinquency prior to admission to the Centre—this is particularly true among the adult trainees—only one defective on the register of the Centre has been before the Courts—some years ago—after beginning to attend at the Occupation Centre.

**Training.** This continued on lines now well established.

The accent in the Junior Department was on toilet, habit, and sense training, with particular attention to physical habilitation. As the children passed through the Centre with various phases of their personal training completed, instruction in craftwork began and was followed into the Adult Department.

There were two notable innovations during the year. Clay and paper pulp modelling were found to be of value in reducing behaviour problems in difficult adolescent boys and it was believed that this activity should be available to all trainees. It is, however, a 'dirty' occupation and it was not possible to have it carried on in the classrooms. A quite ambitious plan was therefore embarked upon.

Adjacent to the male workshops was a wooden bungalow in disrepair, at one time the caretaker's residence. For this the Organiser produced a scheme of repairs and decorations as a work project for the adult trainees with the object of conversion to a modelling and basketry department where all classes could be instructed.

The work began immediately prior to the summer holiday and was completed by December. All boarding had been renailed and replaced where necessary, a number of rotted window sills and a door were replaced and the whole structure was treated with creosote ; doors and window frames being painted. Only minor repairs were needed inside, but extensive decoration was necessary.

A useful workroom was thus created and in the process a number of the adult male trainees became adept in the use of paint brushes and in the proper application of material.

To complete the scheme it is proposed to build on a piece of land beside the bungalow a kiln where the clay modelling will become pottery.

The second innovation was the installation of certain power tools. Hitherto no mechanical aids had been in use in the workshop or gardens. It was felt much better from a training angle to use hand processes and in the employment of the adult males who are attending the Centre indefinitely for occupation rather than training, there was no object in striving to get work done faster. There should always be available work of such a nature to keep these men steadily occupied so that they would return to their homes tired after a day at the Centre.



However, with the growing prospect that a number might eventually find employment, it was felt that they should be taught the purpose of and, most important, respect for the dangers of mechanical tools. To this end a fractional horse power electrical drill of the familiar handyman type was installed with a range of auxiliary tools ; small circular saw, drilling machine, lathe, and fret saw. The cost of wood prohibits its free use for teaching purposes, but by arrangement with a local firm, a large quantity of semi-scrap wood was obtained upon which the trainees could try their 'apprentice' skills at sawing, drilling, etc. Careful tuition was given, with strong emphasis on safety factors.

**Further Employment.** Although both children and adults attending occupation centres are of a level of intellect at which they could be described as unemployable, by the joint efforts of the Centre staff and the mental welfare officers, 7 trainees were found employment during the year. Not one of these could have been considered suitable for employment but for the period of training in the Occupation Centre where the habit of work had been carefully inculcated and a general smartening had taken place.

**Open Days.** The Open Days were this year held on July 16th and 18th at the end of the summer term. Following last year's successful innovation, the same plan of the Centre working to timetable with the teaching staff about their normal duties was adhered to. Parties of visitors were taken round by mental welfare officers, who explained the purpose behind the various activities.

Approximately 150 visitors—relatives and friends—saw the Centre during the four sessions, and considering that this took place during ordinary working hours, and having regard to the difficulties of reaching the Occupation Centre, this number was

regarded as satisfactory. It was sad, though, to note that certain defectives appeared to have nobody sufficiently interested to make any attempt to visit them.

Apart from the Open Days, the Organiser was willing to receive parents anxious to discuss specific points, and a number of parents made special journeys to the Centre throughout the year.

**Transport.** The arrangements whereby three double deck buses on hire from the City Transport convey the trainees to and from the Centre daily worked smoothly. In the Spring one route was extended to begin and end at Clifton. Thus the arrangements give reasonably full coverage to the whole City with the exception of the Lenton Abbey Estate where there is only one case suitable for the Occupation Centre.

**Medical Examination.**—The Physician Superintendent of Aston Hall Mental Deficiency Institution continued to take great interest in the activities of the Centre and despite a busy year with extensions taking place at Aston Hall, he found time for two sessions at the Centre, when he examined new entrants.



## MENTAL DEFICIENCY ACTS, 1913—1938

NEW CASES REPORTED	M.	F.	Totals		
			1957	1956	1955
<b>Subject to be dealt with—</b>					
<i>Reported by Local Education Authority :</i>					
Sect. 57(3) Education Act, 1944 ..	21	15	36	32	25
„ 57(5) „ „ „ ..	8	3	11	20	21
<i>Reported by other sources ..</i>	6	5	11	16	11
<b>Not at present subject to be dealt with—</b>					
Cases for whom the Local Health Authority may subsequently become liable ..	4	4	8	17	19
	39	27	66	85	76
<b>Disposal of Cases—</b>					
Admitted to Institution ..	2	1	3	8	1
Place of Safety ..	1	—	1	1	—
Placed under Statutory supervision	32	22	54	59	56
„ „ Voluntary supervision	4	4	8	17	19
	39	27	66	85	76
<b>CASES ASCERTAINED PRIOR TO 1957 WHO DURING THE YEAR WERE</b>					
Admitted to institution ..	29	10	39	15	17
Placed under guardianship ..	—	—	—	1	1
	68	37	105	101	94
<b>CASES TRANSFERRED DURING THE YEAR.</b>					
From guardianship to institution ..	4	2	6	4	1
<b>TOTAL OF ASCERTAINED CASES.</b>					
In institutions ..	235	246	481	460	453
Under guardianship ..	14	15	29	35	42
„ Statutory supervision ..	325	245	570	564	517
„ Voluntary supervision ..	166	122	288	289	321
In “Places of Safety” ..	12	1	13	5	4
	752	629	1,381	1,353	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	—	—	1	—	—	3	4	—	4	—	
7 to 11 "	4	3	7	2	—	1	17	2	15	—	
12 to 15 "	1	3	7	5	—	—	16	8	6	2	
16 to 20 "	1	3	3	3	—	—	10	3	7	—	
21 to 39 "	2	6	6	1	—	1	16	5	11	—	
40 years and over	—	1	2	—	—	—	3	2	1	—	
	8	16	26	11	—	5	66	20	44	2	
MALES :											
Under 7 years	—	—	2	—	—	2	4	1	3	—	
7 to 11 "	7	13	5	5	—	3	33	3	26	4	
12 to 15 "	5	7	6	2	—	2	22	4	12	6	
16 to 20 "	2	8	5	6	—	—	21	6	13	2	
21 to 39 "	5	3	3	3	1	—	15	4	11	—	
40 years and over	—	2	1	—	—	—	3	1	2	—	
	19	33	22	16	1	7	98	19	67	12	



## CITY AMBULANCE SERVICE

It is a pleasure to acknowledge the contribution of Mr. Ben England, M.I.Mech.E., M.Inst.T., the General Manager.

**Introduction.** This is the tenth annual report of the Nottingham City Ambulance Service to be presented since the inception of the Service on 5th July 1948. The first report covered the period from that date until the 31st December 1948, and subsequent annual reports have each covered a calendar year from the 1st January.

**Management of the Service.** The General Manager of the City Transport Department is also the General Manager of the City Ambulance Service. He is responsible direct to the Health Committee, which controls the 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.

The post of Staff Officer in the Civil Defence Ambulance Section, which was vacant at the date of the last annual report, was filled in February by the appointment of Mr. H. Down, who was previously with the Denbighshire County Council Ambulance Service. He is seconded from the Nottingham Division of the Civil Defence Corps for duty with the City Ambulance Service.

**Employees.** There are now six male leading drivers, fifty-two male driver-attendants, and twelve female driver-attendants, making a total of 70 employees, the same as during the preceding year: the one male attendant formerly employed has retired and has been replaced by a driver-attendant.

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 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 4.30 p.m.	4.30 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	27	35	38	36	38	24	15	12	8

**New Ambulance Stations.** Construction of the Beechdale Ambulance Station started in April and is progressing well. The contract date for completion is July 1958, but there is a possibility of an earlier finishing date.

A tender for the Wilford Ambulance Station has been accepted, subject to the granting of a loan by the Ministry of Health. When the Wilford Station is opened the Guildhall Ambulance Station will be closed.

Arrangements have been made, subject to approval by the Estimates Sub-Committee, to acquire part of the premises of Messrs. Shelbourne and Welbourn in Carlton Road.

**Ambulance Fleet.** At the 31st December 1957 the ages of the ambulances and of the 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	3	3	1	—	—	5	2	3	—	1
S.C.	2	—	2	2	—	1	—	1	1	—	—

Ambs. = Number of ambulances in each group.

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



The four new vehicles which were expected at the date of the last report were delivered during January and February.

**Resuscitation Apparatus.** Until the latter months of this year, the apparatus available for resuscitation of asphyxiated patients was as follows :—

**Eighteen Novox resuscitators**, of which fourteen were carried on ambulances and the remainder were retained at the Guildhall, City Hospital, and Parliament Street Ambulance Stations.

**Two Riley rocking stretchers**, one kept at the Guildhall Ambulance Station and the other at Parliament Street Ambulance Station.

This apparatus is still available, but towards the end of the year it was augmented by a Stephenson Minuteman Resuscitator. This is an American invention, manufactured in Great Britain by the British Oxygen Company Limited, under licence.

The Minuteman represents a great advance in the application of artificial respiration, as it performs this function without manual assistance and in addition is very light in weight. The apparatus enables a patient to be placed on a stretcher and conveyed to hospital without interruption of the artificial respiration. As the Service has only one of these machines it is still necessary for ambulance crews to perform manual artificial respiration and to apply the Novox apparatus until the Minuteman arrives from Parliament Street Ambulance Station.

**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 .. ..	3	2
Parliament Street Depot of the City		
Transport Department .. ..	11	11
Fire Station, Shakespeare Street ..	—	1
<i>For Sitting-Case Vehicles.</i>		
Sherwood Hospital .. ..	—	—
Guildhall .. ..	3	1
Parliament Street Depot of the City		
Transport Department .. ..	6	6
Fire Station, Shakespeare Street ..	—	2
TOTAL, ALL VEHICLES ..	29	29

**Training of Employees.** To receive their proficiency pay, employees must now either pass an annual examination in first aid arranged by the St. John Ambulance Association or the British Red Cross Society, or hold the Diploma of the Institute of Certified Ambulance Personnel.

This latter qualification has been approved during the last year and guidance is still awaited on the period of validity of the Diploma.

The majority of the employees are examined by the St. John Ambulance Association, some by the British Red Cross Society, and a few hold the Institute Diploma.

A course of post-entry training, as suggested by the Ministry of Health, is undertaken by employees from time to time. Lectures are given by the officers of the Service.

By the courtesy of the Medical Officer of Health, senior officers and selected Leading Drivers have attended courses on lifting given to the domiciliary nurses by a representative of the



Central Council for Physical Recreation. These courses have proved very instructive and arrangements are being made to train the employees in the methods taught.

**Health of Employees.** Opportunity is normally given to the employees to be vaccinated against smallpox and inoculated against typhoid, but this year the employees have been given also the opportunity of anti-influenza and anti-poliomyelitis injections.

Although the influenza wave was upon us before the anti-influenza injections were given, the Service was fortunate in that, compared with many other undertakings, only a small proportion of employees was infected, and the service given to the public did not suffer.

**Civil Defence.** Training is still being given at four evening sessions each week, but due to a further intake of members it was found necessary to run two classes on two of the evenings each week from March until the end of training in July. When training recommenced in October, these classes were amalgamated, although this has made the resulting classes larger than is convenient for some types of training.

The amalgamation was made necessary, however, by the results of the annual autumnal recruiting drive, which again produced a preponderance of volunteers for the Ambulance and Casualty Collecting Section. These new volunteers will be coming for sectional training in March 1958, when it will again be necessary to run extra classes.

All volunteers undertake training in first aid, map reading, loading and unloading ambulances, collection of casualties, rescue from crashed aircraft, and all subjects relevant to ambulance work. Most volunteers attend once weekly on the day of their choice, but some attend more than once.

Driving instruction remained suspended until petrol rationing ceased on 15th May, after which those pupils who were in the school at the commencement of petrol rationing resumed instruction and took their Ministry of Transport driving tests.

When these pupils had passed the Ministry of Transport test, the driving school was reorganised so that pupils could work to a timetable. Although the number of pupils now in training in the school at any one time has been lowered to six, it is hoped to provide the same number of drivers per year as before, and to obtain a quicker turnover.

The instruction is given by seven of the City Ambulance Service personnel under the supervision of the salaried officers.

During the year 11 pupils have passed the Ministry of Transport driving test ; of these 9 were members of the Ambulance and Casualty Collecting Section, 1 was a member of the Rescue Section, and 1 of the Headquarters Section.

The Civil Defence Ambulance Section now has seven ambulances and a Casualty Collecting Party van. This is one more ambulance than the Section owned last year, the extra vehicle having been acquired from the City Ambulance Service when it was replaced in that fleet. These vehicles are used for driving instruction and sectional training.

For teaching driving to volunteers in the Headquarters and Rescue Sections, the Civil Defence equipment van and rescue vehicles are used.

**Sub-Control.** The Sub-Control at the General Hospital Out-Patients' Department is now regarded as a permanent part of the organization of the Service : the Sub-Control is manned by one of the Control Room Officers who has at his disposal five



sitting-case vehicles. His main task is to deal with the transport of patients attending the General Hospital out-patients' clinics and to return them to their homes after treatment.

**Mileage and Patients.** The figures are in appendices A and C : the highest number of patients carried on any one day during the year was 402 on 23rd May, compared with 429 on 10th November 1955, the record day.

The record day's mileage of 1,865 on the 4th October 1955, was not exceeded, the highest day's mileage being 1,477 on 21st February.

During 1957 a total of 92,798 patients was conveyed over a distance of 369,790 miles, as tabulated in Appendix A : the decrease in the number of patients compared with 1956 was 2,753, and the decrease in mileage was 27,846 miles.

No reason can be given for the decrease in patients, which is the first in any year since the commencement of the Service, although it is interesting to note that this is the general tendency throughout the country. For the decrease in mileage there are two causes : firstly the slight saving in mileage resulting from the decrease in patients, but the major cause is the great decrease in patients carried by road on long-distance journeys.

This is a result of the period of petrol rationing during which time, as related in last year's report, great efforts were made to persuade hospitals to send patients by rail to economise in the use of petrol. These journeys having proved convenient and satisfactory, it has been possible to keep the hospitals to the general practice of sending long-distance cases by rail. This is emphasised in the paragraph dealing with long-distance journeys. The mileage showed a decrease previously when radio was

introduced in 1952, and 1953 showed a further reduction, but the total is still well above that obtaining before the introduction of radio.

**Emergency Calls.** There has been no major accident this year.

Emergency calls for the year have totalled 5,216, compared with 4,672 during 1956. The highest number of emergency calls on any one day was 33 on 29th June, compared with 30 calls on the 6th October 1956. Appendices A and C set forth the figures.

**Rechargeable Mileage.** During the year, 1,105 patients have been conveyed for 39 other authorities, giving rechargeable mileages of 2,637 sitting-case vehicle miles and 4,782 ambulance miles.

By the passing of the National Health Service (Amendment) Act 1957, ambulance services are now able to carry for reward those patients whose journeys are not covered by the National Health Service Act 1946, and to provide, again for reward, for the stationing of ambulances at large public gatherings.

This brings in revenue from patients being carried on holiday and to places other than those where medical treatment is received, from organisers of race and other meetings, and from the provision of an ambulance service on an agency basis for authorities which have a statutory obligation to provide such service.

**Conveyance of Analgesia Apparatus.** The conveyance of the analgesia apparatus continues to be undertaken by the Service.

During the year, 1,488 journeys have been made, covering a distance of 5,424 miles, compared with 1,993 journeys and 6,688 miles in 1956.



**Long-Distance Journeys.** British Railways have again given great assistance in the conveyance of patients on journeys outside the City, a number of which have been arranged and carried through at very short notice. As mentioned earlier in this report, it has been exceptional for a patient to be conveyed on a long journey by Ambulance Service vehicles during 1957.

Owing to the introduction of diesel trains to replace steam trains some difficulty is now being experienced in making arrangements for journeys by stretcher cases on rail, particularly towards the east and west coasts, the north of England, and Wales. The difficulty arises because of the construction of the new type coaches.

In April 1958 the steam trains to Derby, Grantham and Leicester will be replaced by diesels, which would appear to indicate that rail transport for all stretcher cases and some sitting-cases will be impracticable, but the Ministry of Health, which originally fostered the idea of rail transport, is being approached to ascertain if any special arrangements can be made for the continuance of this form of transport for patients.

#### **Rail Journeys**

The following journeys have been undertaken by rail during 1957 :—

Thirty-seven journeys to Sheffield.

Thirty-two journeys to Skegness.

Twenty-five journeys to Derby.

Fourteen journeys to Leeds.

Nine journeys to London.

Eight journeys to Leicester.

Six journeys to Ashover.

Five journeys to Buxton.

Four journeys each to Aylesbury, Lincoln, Matlock.

Three journeys each to Birmingham, Bournemouth, Liverpool.

Two journeys each to Doncaster, Droitwich, Glasgow, Manchester, Mansfield, Southport, Woodhall Spa.

One journey each to Alfreton, Banbury, Bebington (Cheshire), Bognor Regis, Burton-on-Trent, Bury, Carlisle, Chalfont St. Peter (Buckinghamshire), Chesterfield, Cleethorpes, Colwyn Bay, Corby (Northamptonshire), Coventry, Earsham (Norfolk), East Grinstead (Sussex), Edmonton (Middlesex), Ilam (Staffordshire), Farnham (Surrey), Fishguard, Grimsby, Harrow, Hastings, Headcorn (Kent), Herne Bay, Horsham (Sussex), Howdon-on-Tyne, Kettering, Kidderminster, Loughborough, Mablethorpe, Margate, Middlesbrough, Newark, Oxford, Peterborough, Poulton-le-Fylde (Lancashire), Retford, Salford, Scarborough, Sheepbridge (Derbyshire), Stafford, Taplow (Buckinghamshire), Tunbridge Wells, Upminster (Essex), Ventnor (Isle of Wight), Washingborough (Lincolnshire), Worthing, Wivenhoe (Essex).

A total of 249 patients was conveyed by rail, an increase of 140 compared with 1956. On some journeys more than one patient was carried.

#### **Bus Journeys**

Approval was given by the City Treasurer during the year for the payment of fares for the conveyance of selected patients by bus on suitable long-distance journeys instead of conveying them in Ambulance Service vehicles. These patients, as is the case with patients carried by rail, are conveyed in Ambulance Service vehicles to the Nottingham terminus and are then conveyed to the final address from the distal terminus by an ambulance vehicle of the appropriate authority.

Arrangements were made with the several bus undertakings for the carriage of 34 patients :—

Seventeen patients to Matlock  
Seven patients to Buxton.  
Five patients to Mablethorpe.  
Four patients to Skegness.  
One patient to Chapel St. Leonards.

#### **Road Journeys by Ambulance Service Vehicles.**

Thirty-three journeys to Sheffield.  
Ten journeys to Buxton.  
Two journeys each to Alderley Edge (Cheshire), Balby (Yorkshire).  
One journey each to Barnsley, Cheadle (Cheshire), Dudley, Grimsby, Lincoln, Lockington (Yorkshire), London, Oxford, Sandbach (Cheshire).



A decrease of 84 compared with the 1956 total of 140 long-distance road journeys.

**Appreciation.** It is with great pleasure that I express thanks to the staff and employees for their loyal co-operation and assistance during the 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 C : 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 1957, the Ambulance Service consisted of the following :—

Salaried staff in the grading scheme	..	11
Leading Drivers	.. .. .	6
Male driver-attendants	.. .. .	52
Female driver-attendants	.. .. .	12
		<hr/> 70
Total personnel	.. .. .	<hr/> 81

**Permanent Fleet :**

Ambulances	.. .. .	20
Sitting-case cars	.. .. .	3
Convertibles	.. .. .	6
		<hr/> 29
Ambulance stations	.. .. .	4

## APPENDIX A.

1957	Emergencies		Admission		Discharges		Outpatients		Unclassified		Analgesia		Service		TOTAL	
	P.	M.	P.	M.	P.	M.	O.P.	M.	P.	M.	J.	M.	M.	O.P. & P.	M.	M.
JANUARY ..	398	1,766	921	6,328	834	3,542	6,176	19,635	194	639	124	412	874	8,523	33,196	
FEBRUARY ..	337	1,545	850	5,610	824	3,472	5,237	16,875	151	520	122	425	914	7,399	29,361	
MARCH ..	429	2,011	782	5,148	874	3,627	5,426	17,481	212	845	161	530	1,084	7,723	30,726	
APRIL ..	415	1,951	849	5,475	809	3,474	5,218	16,729	180	498	125	457	853	7,471	29,437	
MAY ..	436	2,027	886	6,234	834	3,279	6,334	19,816	152	751	143	501	1,007	8,642	33,615	
JUNE ..	519	2,448	824	5,557	774	3,082	5,323	17,341	62	461	105	354	870	7,502	30,113	
JULY ..	441	2,054	839	5,795	881	3,471	6,056	20,003	77	542	94	374	819	8,294	33,058	
AUGUST ..	446	2,142	800	5,711	818	3,606	5,222	16,747	108	974	158	627	928	7,394	30,735	
SEPTEMBER ..	430	1,890	838	5,455	716	2,922	5,039	16,242	69	591	132	491	839	7,092	28,430	
OCTOBER ..	473	2,169	944	6,353	803	3,520	5,725	18,264	62	519	121	420	951	8,007	32,196	
NOVEMBER ..	456	2,000	834	5,335	843	3,392	5,422	17,060	84	399	94	343	983	7,639	29,512	
DECEMBER ..	436	1,987	912	6,270	779	3,301	4,895	15,776	90	626	109	490	961	7,112	29,411	
TOTAL ..	5,216	23,990	10,279	69,271	9,789	40,688	66,073	211,969	1,441	7,365	1,488	5,424	11,083	92,798	369,790	

P. = Patients. O.P. = Out-Patients. M. = Miles. J. = Journeys.



## APPENDIX B.

## PATIENTS AND MILES BY EACH TYPE OF VEHICLE

Month	Ambulances		Sitting-Case Cars		Convertibles		Total	
	Patients	Miles	Patients	Miles	Patients	Miles	Patients	Miles
1957								
Jan. ..	6,125	23,790	759	3,823	1,639	5,583	8,523	33,196
Feb. ..	5,059	20,520	784	3,650	1,556	5,191	7,399	29,361
Mar. ..	5,304	21,296	805	4,094	1,614	5,336	7,723	30,726
April ..	5,187	20,465	922	4,428	1,362	4,544	7,471	29,437
May ..	5,791	23,226	1,101	4,840	1,750	5,549	8,642	33,615
June ..	5,062	20,276	998	4,975	1,442	4,862	7,502	30,113
July ..	5,396	21,866	975	4,784	1,923	6,408	8,294	33,058
Aug. ..	4,913	21,053	1,071	4,866	1,410	4,816	7,394	30,735
Sept. ..	4,568	18,666	1,017	4,636	1,507	5,128	7,092	28,430
Oct. ..	5,212	21,076	965	4,869	1,830	6,251	8,007	32,196
Nov. ..	5,059	19,976	853	3,840	1,727	5,696	7,639	29,512
Dec. ..	4,577	19,393	914	4,208	1,621	5,810	7,112	29,411
	62,253	251,603	11,164	53,013	19,381	65,174	92,798	369,790

Ambulances .. ..	62,253	251,603
Sitting-case cars .. ..	11,164	53,013
Convertibles .. ..	19,381	65,174
Totals .. ..	92,798	369,790

The total of 369,790 miles includes 5,424 analgesia miles : for details please see Appendices A and C.

APPENDIX C.  
FINANCIAL SUMMARY AND STATISTICAL RECORD FROM 1948 to 1957

Year ended on 31st December	1	2	3	4	5	6	7	8	9	10	11
	Total miles	Analgesia miles	Patient and Service 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	Maxi- mum mileage on any one day	Maximum No. of Patients on any one day	Highest No. of Emergency Calls on any one day	Total Expenditure for year ended on 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
1956	397,636	6,688	390,948	95,551	4.09	244.41	33.45	1,658	425	30	60,947
1957	369,790	5,424	364,366	92,798	3.93	254.68	40.49	1,477	402	33	68,588



## APPENDIX D.

## REVENUE ACCOUNT FOR THE YEAR ENDED 31st MARCH 1957

INCOME	Amount £	d. per mile
Amount recharged to other authorities ..	2,264	1·402
Conveyance of analgesia equipment ..	386	·239
Contributions towards use of wireless station .. .. .	32	·020
Sale of cars and ambulances .. ..	670	·415
Government grant .. .. .	32,468	20·103
	<hr/> 35,820	<hr/> 22·179
<b>EXPENDITURE</b>		
Maintenance and cleaning of vehicles ..	6,416	3·973
Wages of driver/attendants and attendant ..	33,524	20·757
Salaries of Ambulance Officer and Staff ..	6,146	3·805
National Insurance contributions ..	1,176	·728
Superannuation—Employers contributions	1,275	·789
Superannuation—Equal Annual Charge ..	351	·217
Uniforms .. .. .	1,222	·757
Licences and insurances of vehicles ..	331	·205
Petrol and oil .. .. .	7,093	4·392
Ambulance services hired .. ..	427	·264
First aid equipment and supplies ..	423	·262
Maintenance and repair of buildings ..	147	·091
Heating, lighting and cleaning of buildings	695	·430
Furniture and equipment of ambulance stations .. .. .	100	·062
Nottingham City Transport administrative charges .. .. .	1,525	·944
Rents, rates and insurance .. ..	1,591	·985
Printing, stationery, advertising and postages	484	·300
Office expenses .. .. .	12	·007
Telephones .. .. .	416	·258
Maintenance and operation of wireless equipment .. .. .	575	·356
Contribution towards central administrative expenses .. .. .	1,253	·776
Miscellaneous .. .. .	207	·128
	<hr/> 65,389	<hr/> 40·486
Installation of wireless equipment ..	41	
Contribution towards Capital expenditure		
--Ambulance .. .. .	1,211	
Loan charges .. .. .	1,947	
	<hr/> 68,588	

## PART III.

### ENVIRONMENTAL SERVICES

Clean Air Act 1956

Factories Acts 1937 and 1948

Food and Drugs Acts 1938-1955

Housing Act 1957

Nottingham Corporation Acts 1923-1952

Public Health Acts 1875-1936

Rent Act 1957

Shops Act 1950

INFECTIOUS AND INFECTIVE DISEASES

FOOD SUPERVISION AND INSPECTION

HOUSING

SANITARY SERVICES



## INFECTIOUS AND INFECTIVE DISEASES

### SUMMARY OF CASES

	1957				1957	1956	1955	1954
	Numbers each Quarter				Total	Totals		
	1st	2nd	3rd	4th				
Measles ..	421	3,271	1,127	63	4,882	165	6,935	666
Whooping cough	134	74	29	10	247	1,024	566	1,042
Scarlet fever ..	117	67	62	86	332	241	147	450
Pneumonia ..	57	36	44	137	274	144	184	144
Dysentery ..	249	196	18	22	485	1,222	110	396
Puerperal pyrexia	9	10	12	4	35	20	28	91
Erysipelas	6	6	6	7	25	25	21	24
Ophthalmia neonatorum ..	2	1	3	—	6	3	24	8
Poliomyelitis :								
paralytic ..	1	—	10	6	17	13	26	10
non-paralytic ..	—	—	3	—	3	1	6	—
Encephalitis :								
infective ..	—	—	—	—	—	—	1	1
post infectious	1	—	—	2	3	—	4	8
Food poisoning ..	27	4	15	5	51	22	56	59
Cerebro-spinal fever ..	3	2	—	—	5	8	11	9
Paratyphoid fever	—	—	—	—	—	1	5	—

**Measles.** There were 4,882 cases, but only 37 were admitted to hospital. There were 2 deaths, one of which was due to encephalitis and the other to broncho-pneumonia.

**Whooping Cough.** Only 247 cases were notified, the lowest figure ever recorded ; there were no deaths. The number of children immunised in their first year continued to increase and it is hoped that this satisfactory trend will be maintained.

	1951	1952	1953	1954	1955	1956	1957
Notifications	1,345	1,240	1,042	1,104	566	1,024	247
Deaths ..	7	3	3	0	2	0	0

#### ANALYSIS BY AGES

	M.	F.	T.
Under 1 year .. ..	6	18	24
1 — 4 years .. ..	64	61	125
5 — 9 „ .. ..	38	54	92
10 — 14 „ .. ..	2	3	5
15+ .. ..	1	—	1

**Scarlet Fever.** There were 332 cases. The disease continued to be mild and there were no deaths.

**Acute Anterior Poliomyelitis and Polio-Encephalitis.** There were 20 confirmed cases, including 17 with paralysis ; no case was notified as polio-encephalitis and no deaths occurred. The highest incidence was in August, when there were 10 cases.

A boy aged seven years who had mild paralysis of all his limbs and abdominal muscles had completed vaccination against the disease six weeks previously. A boy aged six months who had completed combined immunisation against diphtheria and whooping cough eighteen days before the onset of his illness had paralysis of the injected arm.

For the first time typing of the causal organism was possible and in many cases faecal specimens from the affected person and the family contacts were examined. In some cases the diagnosis



was made retrospectively and later than the organism could be expected to be present. In the 10 cases where the virus could be identified, Type I was found in 9, and in the remaining case, Type III. In four of the families 9 symptomless excretors were found in a total of 22 contacts.

The following tables indicate the numbers of cases of poliomyelitis analysed under the types of disease and the number of deaths, the age groups affected and the seasonal occurrence.

		Paralytic	Non-Paralytic	Total	Deaths
1952	..	11	1	12	1
53	..	20	9	29	2
54	..	10	—	10	—
55	..	26	6	32	1
56	..	13	1	14	—
<b>57</b>	..	<b>17</b>	<b>3</b>	<b>20</b>	—

Age Group	1952		1953		1954		1955		1956		1957	
	M.	F.	M.	F.	M.	F.	M	F	M.	F.	M.	F.
0 — 5 ..	1	2	8	6	1	3	1	4	3	2	7	4
5 — 10 ..	2	—	4	—	3	2	7	1	3	4	2	2
10 — 15 ..	—	—	—	1	—	—	6	—	—	—	1	1
15 — 25 ..	1	3	3	3	—	—	5	2	1	1	2	—
25 + ..	2	1	1	3	1	—	4	2	—	—	—	1
TOTALS ..	12		29		10		32		14		20	

		Winter	Spring	Summer	Autumn
1952	..	1	1	2	8
53	..	2	3	12	12
54	..	2	2	5	1
55	..	1	3	16	12
56	..	—	4	2	8
57	..	1	—	14	5

**Dysentery.** The number of cases notified was 485. Most of the cases occurred in the first half of the year and the majority were under the age of ten years.

#### CLASSIFICATION IN AGE GROUPS

		M.	F.	Total
Under 5 years	..	86	70	156
5 — 9 years	..	78	82	160
10 — 14 years	..	30	26	56
15 years and over	..	41	72	113

As measures previously taken to limit the spread of infection proved to be unsatisfactory, there was a change in procedure commencing in September. School children with diarrhoea were excluded until free from symptoms ; there was no search for, or exclusion of, symptomless excretors, and routine sampling of contacts other than food handlers and special groups was discontinued. However, as there have been very few cases of dysentery since the introduction of these measures, it is not possible to comment on their effects.



**Food Poisoning.** Notifications totalled 51 compared with 22 last year. Admission to hospital was necessary in 9 cases.

The organisms responsible were as below, though in no case was the origin traced.

Salmonella typhimurium	..	..	..	41
„ heidelberg	..	..	..	3
„ reading ..	..	..	..	2
„ montevideo	..	..	..	3
„ newport ..	..	..	..	1
„ seftenberg	..	..	..	1

There were no outbreaks due to cl. Welchii or staphylococci.

A small outbreak occurred in February, involving 16 families and 24 cases. Children only were affected, all of whom appeared to have been infected about the same time. In most of these cases there was a history of cream buns having been bought from a particular bakery, which was subsequently inspected. All the workers there were interviewed and although symptomless, submitted faecal specimens, the results of which were negative. Exhaustive sampling of the various ingredients used in the manufacture of the buns also gave negative results, particular attention being paid to egg products.

**Influenza.** As did the rest of the country, Nottingham experienced an epidemic of influenza from August to October. The full number of cases cannot be known as it is not a notifiable disease and in addition the mildness of the average case did not justify a visit by the patient to the general practitioner. There were, however, some isolated outbreaks which were studied in some detail. Six practitioners acted as 'spotters', recorded their experiences and reported frequently to the Health Department; thus an overall picture was obtained.

The first indication of influenza in the City was in July when 1 child in a day nursery became ill and, four days later, 5 more children and 6 of the staff were similarly affected ; the illness was mild and lasted about four days. Laboratory investigations in 4 cases showed that 2 were positive for influenza A.

In the middle of August a small firm employing 70 workers reported that 40 were absent due to illness and during the next two days a further 11 were taken ill. By the end of the month all had recovered and were back at work. Pathological investigations were attempted but for various reasons could not be completed and were therefore inconclusive. A more spectacular outbreak then occurred in a training establishment of the National Coal Board just outside the City where a large number of boys were affected simultaneously and a more extensive laboratory investigation could be carried out. Many of the individuals resided in the City and influenza A was isolated from a large proportion of the specimens submitted.

When the schools re-opened after the summer holiday on 2nd September, the extent of the outbreak began to be more obvious and a sharp rise in absences was reported in the middle of the month. At the same time family doctors reported a big increase in cases, the majority of which were school children. Towards the end of the month more adults became affected. The Ministry of Pensions and National Insurance reported a 30% increase in the average number of claims which rapidly rose to 260%. The City Transport Department had 58% of the staff absent ; services had to be curtailed, but not seriously.

The peak was reached in the third week of October and thence forward there was a rapid decline in the number of new cases.



During the outbreak an increase in the number of notifications of pneumonia usual for the time of year was observed and many of these were stated to be 'influenzal'. During an eight week period from late September to late November, there were 106 notifications of pneumonia—96 of which were stated to be 'influenzal'—compared with 5 in the corresponding period of 1956. A total of 39 deaths was certified as due to influenza ; no especial age group was affected.

In the middle of December, 40 nurses at the General Hospital became ill and laboratory investigations confirmed the diagnosis of influenza.

**Anthrax.** A total of 3 cases occurred in the employees of one firm where they were all engaged in handling new hides arriving at the factory. All recovered.

**Encephalitis.** Of a total of 3 cases, 1 was the subject of a notification, while the other 2 came to light from the death registrations. The notified case occurred as a fatal complication of measles in a 7 year old child and the others, associated with influenza, occurred in a 31 year old man and in a child aged 5 years.

**Venereal Disease.** The number of new cases of syphilis was 75 , the highest since 1950 when there were 121 cases ; the increase was wholly in respect of males. Gonorrhoea showed an even greater increase ; the number of new cases was 452, the highest since 1947. The increase was among males, 377 cases compared with 168 in 1956, and largely related to immigrants. Among expectant mothers there were 19 cases of syphilis and 1 of gonorrhoea against 27 and 4 last year.

**Contacts or Carriers of Infectious Diseases.** Certificates for exclusion from work under Ministry of Health Circular 115/48 were issued for :—

Dysentery .. ..	14	Poliomyelitis .. ..	8
Scarlet fever .. ..	2	Food poisoning .. ..	1

## FOOD SUPERVISION AND INSPECTION

### FOOD HYGIENE

The Inspectors continued their efforts to improve the conditions under which food is prepared, stored, sold and delivered in the City.

The advice of the department on the requirements of the Food Hygiene Regulations, 1955 was sought in many cases by caterers and other food traders before establishing or taking over food businesses. Plans of buildings submitted to the City Engineer with a view to the erection or adaptation of buildings for use as food premises were made available to the Chief Public Health Inspector in order to ensure compliance with the Regulations.

The practice of selling open food for immediate consumption in the streets was investigated and legal proceedings were taken in respect of the sale of hot dogs from tricycles. The "vehicles" were unsatisfactorily maintained and ill-equipped and were operated by persons with little knowledge of the principles of hygiene.

Legal proceedings were instituted for offences against the Food Hygiene Regulations, 1955. The contraventions and the magistrates' decisions were :—

1. A butcher was fined a total of £8 for exposing food to the risk of contamination and failing to provide hand washing facilities and first aid equipment.
2. A bakery firm was fined a total of £17 for failing to keep the bakery and equipment clean and to provide hand washing facilities.
3. An ice-cream distributor was fined a total of £30 for failing to provide hand washing facilities on his vehicle when selling open ice-cream on two occasions.
4. Two "hot dog" salesmen were fined £6 and £5 respectively for failing to keep themselves and their clothing clean while selling open food from vehicles.
5. The proprietor of a "hot dog" business was fined £10 for exposing food to the risk of contamination.
6. A baker was fined £3 for smoking when handling confectionery.
7. A greengrocer was granted an absolute discharge on payment of costs in respect of an offence of allowing refuse to accumulate in the shop.



The presence of foreign matter in food continued to give concern. Complaints were received in 17 cases and concerned the presence of wood, glass, nails, insects, metals, oil and a button being found in such foods as bakery products, sausages, soft drink, green salad, and sugar confectionery. Legal proceedings were instituted in four cases and penalties of £5, £5, £2, and £10 were imposed.

The hazards associated with the use of returnable glass bottles in the distribution of milk were again apparent. Complaints received were in respect of glass splinters, a disc of stale curd and a piece of bicycle chain found in bottled milk. In three cases, warnings were given to the dairymen concerned and the other case was referred to the local authority of the district in which the dairy was situated.

In the course of 4,183 visits to various food premises, it was necessary to draw attention to 235 defects and contraventions of the Regulations. Requirements, including those outstanding from 1956, were met in 323 cases.

Food Premises Supervised	1954	1955	1956	1957
Grocers and provision dealers including off-licence premises .. .. .	1,222	1,231	1,244	1,252
Butchers and meat products manufacturers .. .. .	448	448	449	456
Hotels, public houses and clubs .. .. .	416	429	437	437
Sweet shops .. .. .	369	385	399	399
Fruit and vegetable dealers .. .. .	350	361	379	372
Factory canteens, etc. .. .. .	245	199	224	227
Restaurants, snack bars, etc. .. .. .	234	204	243	221
Bread, pastry, and confectionery dealers including bakehouses .. .. .	180	163	176	166
Fried fish and chip shops .. .. .	165	161	134	145
Wet fish, poultry, game, etc., dealers .. .. .	86	75	62	68
Wholesale food dealers .. .. .	57	51	44	47
School kitchens .. .. .	50	52	53	55
Ice-cream manufacturers .. .. .	33	19	18	18
Mobile food shops .. .. .	9	11	32	27
Foodstalls in markets :				
Wholesale .. .. .	40	40	41	43
Retail .. .. .	98	94	85	97
Miscellaneous .. .. .	74	55	80	95
Dairies .. .. .	8	7	5	5
<b>TOTAL OF VISITS .. .. .</b>	<b>5,794</b>	<b>3,659</b>	<b>3,808</b>	<b>4,183</b>

Premises registered under Sect. 16, Food and Drugs Act, 1955	
Premises used for the sale of ice-cream .. .. .	1,012
.. .. . manufacture of ice-cream .. .. .	18
.. .. . preparation or manufacture of sausages, or potted, pressed, pickled, or preserved food .. .. .	337
TOTAL .. .. .	1,367

The number of inspections made of registered premises was 2,753.

### FOOD SAMPLING

A total of 134 samples of food was sent for bacteriological examination comprising 8 samples of tinned meat, 68 samples of confectionery, 15 samples of prepared meats, 19 samples of frozen or dried egg and 24 samples of potted meat. With the exception of 9 samples of potted meat, all were satisfactorily reported upon.

Samples were taken as follows :—

Formal samples ..	638	Analysed by Public Analyst.
Informal samples ..	363	do.
Informal milk samples ..	527	Tested by inspector.
	<u>1,528</u>	

The following were found not genuine :—

<i>Formal</i>	<i>Action Taken</i>
Wonder Orange Drink — incorrectly labelled.	Warning letter from Town Clerk to manufacturer.
Glace Mints—contained excess Sulphur Dioxide.	do.
Pure Food Bone Meal Tablets—incorrect statements of content on label.	Referred by Town Clerk to Pharmaceutical Society.



<i>Informal</i>	<i>Action Taken</i>
Potted Meat—contained extraneous dry starchy matter.	Manufacturer interviewed —production ceased.
Wonder Orange Drink — unsatisfactory labelling	Followed by formal sample.
Pure Food Bone Meal Tablets—unsatisfactory labelling.	do.
Mixed Cut Peel—stated by Analyst to contain excess moisture and too little sugar —imported from South Africa.	No statutory action ; importers notified.
Butter Madeira Cake—contained no butter fat.	Verbal advice to manufacturer re description.
Glace Cherries—had undergone fermentation—considered low in sugar content.	Correspondence between Chief Public Health Inspector and manufacturers—stocks withdrawn.
Sweet Corn, Cream Style—imported from New Zealand—use of word “cream” criticised by Analyst.	Correspondence between Chief Public Health Inspector and importers.
Orange Squash—suspected of low orange juice content.	Further samples taken— manufacturer advised by Chief Public Health Inspector.
Pork Sausage—deficient in meat under repealed standard.	Letter from Chief Public Health Inspector to manufacturer.
Potted Meat—contained excess moisture.	Followed by formal sample —manufacturer advised by inspector.
Double Tea T.T.—misleading description.	Correspondence between Chief Public Health Inspector and blenders.
Marzipan Substitute (containing ground almonds)—Analyst considered almond content too low.	Description discussed with manufacturer.

<i>Informal.</i>	<i>Action Taken</i>
Luncheon Meat Loaf—Analyst considered it regrettable that an article of only 58% meat content should be imported from Australia.	No action.
Cream Buns—contained only a proportion of genuine cream—label misleading.	Manufacturer agreed to alter label and description.
Almond Flavouring—unsatisfactory type of packing, resulted in deposit of benzoic acid in bottles.	Packers interviewed by inspector. Stocks exhausted. Old packing discontinued.
Two Cream Cheeses—contained 28% and 30% milk fat respectively.	Letters from Chief Public Health Inspector to manufacturers.
Table Salt (Iodised)—Iodine content fell below the proportion claimed on label.	Investigation proceeding.
<b>Sampling of MILK and ICE CREAM—see pages 132 and 135.</b>	
<b>Sampling of "OTHER FOODS"—see page 139.</b>	

### THE MEAT SUPPLY

The whole of the slaughtering in the City was concentrated in the Public Abattoir and one privately owned slaughterhouse ; the latter building dealt only with the slaughter of pigs.

Inspection of every carcase was achieved but only by augmenting the depleted staff of full-time meat inspectors by district inspectors holding the meat certificate.

Confirmatory opinions on 15 specimens were obtained from the Public Health Laboratory and from the Veterinary Inspectors of the Animal Health Division of the Ministry of Agriculture, Fisheries and Food.

**Transport of.** The provisions of the Food Hygiene Regulations, 1955, relating to the handling and transport of meat were generally observed. Routine inspection was made of all vehicles used for the transport of meat from the abattoir.



**Disposal of Condemned Food.** All meat and offals found on inspection to be unfit were removed by approved firms from the slaughterhouses 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 138.

**CARCASES INSPECTED  
and  
CARCASSES CONDEMNED**

	Cattle exclud- ing Cows	Cows	Calves	Sheep and Lambs	Pigs	Total
Number killed and inspect- ed .. .. .	18,472*	6,050	4,894	70,167	55,442	155,025
<b>All Diseases except tuberculosis and cysticerci :</b>						
Whole carcasses condemned ..	15	22	17	69	73	196
Carcasses part (or organ) condemned ..	4,119	2,074	6	580	1,450	8,229
Percentage affected ..	22·37	34·64	0·47	0·92	2·75	—
<b>Tuberculosis only :</b>						
Whole carcasses condemned ..	33	73	2	—	34	142
Carcasses part (or organ) condemned ..	1,141	1,287	—	—	1,923	4,351
Percentage affected ..	6·30	22·47	0·04	—	3·53	—
<b>Cysticercosis :</b>						
Carcasses part (or organ) condemned ..	301	74	—	—	—	375
Carcasses submitted to treatment by refrigeration ..	43	13	—	—	—	56
Generalised and totally condemned ..	—	—	—	—	—	—

\* Bulls 148 ; bullocks 12,657 ; heifers 5,667.

## 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	1957	1956	1955
Processing establishments .. .. .	4	4	4
Distributors operating from wholesale dairies	8	10	14
"    "    "    dairies outside the the City ..	11	11	11
"    —shopkeepers .. .. .	630	599	631

## LICENSING

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

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

LICENCES GRANTED	1957	1956	1955
Dealers' licences to pasteurise milk .. ..	4	4	4
"    "    "    sterilise milk .. ..	4	4	4
"    "    "    sell tuber. tested milk ..	64	57	74
"    "    "    "    pasteurised milk ..	441	418	404
"    "    "    "    sterilized milk ..	696	685	706
Supplementary licences to sell tuber. tested milk ..	10	10	10
"    "    "    pasteurised milk ..	11	11	11
"    "    "    sterilised milk ..	10	10	10



## SAMPLING

## BACTERIOLOGICAL EXAMINATION

**Examination for Tubercle Bacilli.** Of 102 samples, including 19 of designated milks, all showed negative results to biological tests.

The percentage of positive results in previous years is given :

1957	..	..	..	..	Nil per cent.
56	..	..	..	..	1.00 " "
55	..	..	..	..	5.10 " "
54	..	..	..	..	5.77 " "
53	..	..	..	..	5.64 " "
52	..	..	..	..	4.71 " "
51	..	..	..	..	9.18 " "
50	..	..	..	..	5.40 " "

**Tuberculin Tested Milk—Raw.** Of 131 samples procured all but 11 complied with the prescribed standards.

**Pasteurised Milk—including tuberculin tested milk (pasteurised).** Samples of pasteurised milk sold under licence numbering 691 were subjected to the half-hour Methylene Blue Test ; 659 were satisfactory, and the tests on 32 were void because the atmospheric shade temperature exceeded the statutory limit.

To test the efficiency of pasteurisation, these samples were also subjected to the Phosphatase Test and 688 were proved to have been satisfactorily treated.

**Sterilised Milk—including tuberculin tested sterilised milk.** A total of 247 samples processed under licence was obtained for examination ; all satisfied the appropriate test.

## CHEMICAL EXAMINATION

## Samples analysed by the Public Analyst

	No. of samples	Average per cent of fat	Average per cent of solids not fat
January .. .. .	76	3.579	8.616
February .. .. .	64	3.615	8.714
March .. .. .	50	3.411	8.634
April .. .. .	38	3.360	8.642
May .. .. .	54	3.251	8.673
June .. .. .	49	3.602	8.739
July .. .. .	61	3.627	8.695
August .. .. .	26	3.526	8.790
September .. .. .	51	3.853	8.866
October .. .. .	72	3.846	8.862
November .. .. .	55	3.970	8.933
December .. .. .	24	4.020	8.923
AVERAGES .. .. .	51.66	3.638	8.757
The standard for milk is 'Fat' 3.0% and 'Solids-not-Fat' 8.50%.			

Of the 527 informal samples subjected to the Gerber test by the inspector, 79 or 14.9% were of an unsatisfactory quality.

## ACTION TAKEN ON UNSATISFACTORY MILK SAMPLES

Samples taken formally and found not genuine	Action taken
9 samples from 7 producers were deficient in milk fat content.	Letters from Chief Public Health Inspector to producers and Milk Production Officer.
14 samples from 5 producers were deficient in solids-not-fat content.	do. do.
44 samples from 16 producers were deficient in milk fat and/or milk solids-not-fat.	do. do.
10 milks from one producer were deficient in solids-not-fat and 8 of these contained added water 6%, 8%, 6%, 9%, 9%, 3.4%, 4% and 3% respectively.	Prosecution—producer acquitted—cowman convicted—fined £16 and £2. 5s. 0d. costs.



Samples taken formally and found not genuine	Action taken
4 milks from one producer were deficient in solids-not-fat and contained added water 3.5%, 7%, 5.9% and 6% respectively.	Prosecution—producer fined £8 and £7. 7s. 0d. costs.
2 Tuberculin Tested Channel Islands milks (Farm Bottled) were deficient in milk fat 5% and 6% respectively.	Prosecution—producer fined £2 and £2. 16s. 0d. costs.
1 Channel Islands milk from a consignment of 4 churns was low in fat content.	Letter from Chief Public Health Inspector to producer.
1 pint bottle of Pasteurised Milk deficient in milk fat 7%.	Warning letter from Town Clerk to dairyman.
5 milks from one producer were low in solids-not-fat and contained small amounts of extraneous water.	Warning letter from Town Clerk to producer.
Samples taken informally and found not genuine	Action taken
1 bottle of Sterilised Milk containing a 3" piece of bicycle chain.	Warning letter from Town Clerk to dairyman.
1 bottle of Pasteurised Milk containing a disc of stale milk curd.	Referred to Local Authority in whose area the dairy was situated.
2 Pasteurised Milks low in solids-not-fat content	Apparently due to poor quality milk from producers. Investigation proceeding.
1 Pasteurised Milk containing brownish deposit of stale milk curds.	Letter from Chief Public Health Inspector to dairyman.

### ICE CREAM

All manufacturers or dealers in ice cream must be registered under the provisions of the Nottingham Corporation Act, 1935 and their premises must also be registered under the provisions of the Food and Drugs Act, 1955.

A total of 2,023 inspections was made.

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

MANUFACTURERS.

" Hot Mix " method	..	7	
" Cold Mix " method	..	11	
		—	18

VENDORS AND DEALERS.

" Pre-packed " ices	..	787	
" Loose " ices	..	225	
		—	1,012
New Registrations	..	35	
Transfers of registrations	..	38	

**Sampling.** A total of 48 samples of ice-cream was taken for analysis ; all conformed to the standard required by the Food Standard (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	4 or more	201
2	2½—4	26
3	1 —2	2
4	0 — ½	2

In addition, 35 miscellaneous samples were taken for bacteriological examination and included 32 iced lollies, 1 sample of fruit pulp and 2 samples of fruit essences.



## FERTILISERS AND FEEDING STUFFS ACT, 1926

Samples Taken	Satisfactory	Unsatisfactory	Total
<b>FERTILISERS :</b>			
Hoof and Horn Fertiliser ..	2	—	2
Fine Bone Meal Fertiliser ..	—	1	1
Clays London Fertiliser ..	1	—	1
Superphosphate of Lime ..	1	—	1
Dried Blood ..	1	1	2
Liquid Green Fertiliser ..	1	—	1
Sulphate of Ammonia ..	1	—	1
Pest Killer and Fertiliser ..	1	—	1
Compound Fish Manure ..	1	—	1
" Co-Hop " Manure ..	1	—	1
" Tomatab " Fertiliser Tablets ..	1	—	1
<b>FEEDING STUFFS :</b>			
Laying Meal ..	1	1	2
Fattening Meal ..	1	—	1
Summer Layer's Mash ..	1	—	1
National Pig Food No. 1 (Sow and Weaners) ..	1	—	1
Baby Chicken Crumbs ..	1	—	1
Poultry Balancer Meal ..	1	—	1
Range Layer's Pellets ..	1	—	1
Layer's Mash ..	1	1	2
<b>TOTALS ..</b>	<b>19</b>	<b>4</b>	<b>23</b>

Action taken on unsatisfactory samples was as follows :-

Fine Bone Meal Fertiliser .. Warning letter from Town Clerk to manufacturers.

Dried Blood .. Referred to Inspector in supplier's administrative area.

Laying Meal .. Warning letter from Town Clerk to manufacturer.

Layer's Mash .. Letter to seller from Chief Public Health Inspector.

**SHELL FISH**

Shell fish from various sources were received at the Smeinton Wholesale Fish Market. The total weight found to be unfit for human consumption was 6 tons 14 cwt.

Twenty-six samples of mussels were taken, all of which were found to be satisfactory. Details are given :—

Origin of Layings	No. of Samples		
	1955	1956	1957
Boston, Lincolnshire .. ..	3	7	<b>14</b>
Brancaster, Norfolk .. ..	—	1	—
Port Madoc, N. Wales .. ..	7	2	<b>8</b>
North Shields .. ..	1	—	—
Ireland .. ..	2	3	<b>3</b>
Denmark .. ..	—	3	<b>1</b>

**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 .. ..	14
Transfer of licences .. ..	Nil
Registrations not renewed owing to discontinuance of sales of Part II poisons .. ..	4

Letters were sent by the Chief Public Health Inspector to five sellers for minor infringements of the Act.



## DETAILS OF UNSOUND FOOD SURRENDERED

Food other than meat	In Stones			
	1954	1955	1956	1957
Bacon .. ..	174	168	127	95 $\frac{3}{4}$
Butter .. ..	12 $\frac{1}{4}$	1 $\frac{1}{2}$	1	1 $\frac{3}{4}$
Canned goods ..	8,122 $\frac{1}{2}$	4,488 $\frac{3}{4}$	3,614 $\frac{1}{2}$	4,124
Cakes and pastry ..	43	24	4 $\frac{3}{4}$	24 $\frac{1}{2}$
Cheese .. ..	43 $\frac{1}{2}$	598 $\frac{1}{2}$	81	249
Chocolate and sweets	10	5 $\frac{1}{2}$	2 $\frac{1}{2}$	3 $\frac{1}{2}$
Coffee .. ..	3 $\frac{1}{2}$	1 $\frac{1}{2}$	—	1 $\frac{1}{2}$
Conserves .. ..	173	1 $\frac{1}{2}$	6 $\frac{3}{4}$	70 $\frac{1}{2}$
Cooked meat ..	82 $\frac{1}{2}$	—	—	—
Dried fruit .. ..	37	25 $\frac{1}{4}$	29	8 $\frac{3}{4}$
Dried milk .. ..	8 $\frac{1}{2}$	41	49	—
Eggs—dried .. ..	63	38 $\frac{3}{4}$	—	—
Eggs—liquid .. ..	322 $\frac{1}{4}$	—	2	2
Eggs—shell .. ..	3	11 $\frac{3}{4}$	—	28
Fish .. ..	807	871	906	436 $\frac{3}{4}$
Fruit .. ..	144 $\frac{3}{4}$	144 $\frac{1}{4}$	78	56
Flour .. ..	35 $\frac{1}{2}$	7 $\frac{3}{4}$	1 $\frac{1}{2}$	5 $\frac{1}{4}$
Margarine .. ..	—	18	4 $\frac{3}{4}$	29
Miscellaneous ..	459 $\frac{1}{2}$	26 $\frac{1}{2}$	32	159 $\frac{1}{2}$
Poultry .. ..	68 $\frac{3}{4}$	29 $\frac{1}{2}$	81 $\frac{3}{4}$	42 $\frac{1}{2}$
Rabbits .. ..	193	27 $\frac{1}{2}$	4 $\frac{1}{2}$	—
Sausage .. ..	81 $\frac{1}{2}$	59	47 $\frac{1}{2}$	29
Shell fish .. ..	409	1,068 $\frac{1}{4}$	1,498 $\frac{3}{4}$	1,077
Sugar .. ..	24	1 $\frac{1}{2}$	3	$\frac{1}{4}$
Synthetic cream ..	3 $\frac{3}{4}$	59	—	—
Vegetables .. ..	1,352 $\frac{1}{2}$	563 $\frac{3}{4}$	380 $\frac{1}{2}$	315 $\frac{1}{4}$
TOTAL .. ..	12,677 $\frac{1}{4}$	8,282	6,951 $\frac{3}{4}$	6,759 $\frac{3}{4}$

Meat	Home killed	Imported
	in stones	
Beef .. ..	12,991 $\frac{1}{2}$	106
Mutton and Lamb ..	276 $\frac{1}{4}$	—
Pork .. ..	3,352	—
Veal .. ..	76	—
Offals .. ..	19,834 $\frac{1}{4}$	15 $\frac{1}{2}$
TOTAL .. ..	36,530	121 $\frac{1}{2}$
GRAND TOTAL SURRENDERED: 36,651 $\frac{1}{2}$ stones = approx. 229 $\frac{1}{2}$ tons.		

## DETAILS OF SAMPLING OF "OTHER FOODS"

Item	Genuine			Unsatisfactory			Totals		
	Formal	In-formal	Total	Formal	In-formal	Total	Formal	In-formal	Total
Milk, raw .. .. .	404	—	404	84	—	84	488	—	488
Milk, processed .. .. .	130	17	147	2	5	7	132	22	154
Milk, canned condensed .. .. .	—	12	12	—	—	—	—	12	12
Butter, cream, cheese and other dairy products .. .. .	—	17	17	—	2	2	—	19	19
Ice cream and frozen lollies .. .. .	—	48	48	—	—	—	—	48	48
Open meat products .. .. .	1	31	32	—	3	3	1	34	35
Canned or preserved meats and meat products .. .. .	—	10	10	—	1	1	—	11	11
Canned or prepacked fish and fish products .. .. .	—	7	7	—	—	—	—	7	7
Soups .. .. .	—	3	3	—	—	—	—	3	3
Oils and fats .. .. .	8	3	11	—	—	—	8	3	11
Fresh fruits and vegetables .. .. .	—	5	5	—	—	—	—	5	5
Canned or preserved fruits and vegetables .. .. .	—	33	33	—	3	3	—	36	36
Sweets, sugar confectionery etc. .. .. .	—	14	14	1	1	2	1	15	16
Jams, conserves, fruit curds, jellies, etc. .. .. .	—	19	19	—	—	—	—	19	19
Bread, biscuits, etc. .. .. .	—	5	5	—	—	—	—	5	5
Baking powder and raising preparations .. .. .	—	6	6	—	—	—	—	6	6
Flours and flour mixtures .. .. .	—	16	16	—	—	—	—	16	16
Cakes and puddings .. .. .	—	3	3	—	2	2	—	5	5
Canned or pre-packed puddings .. .. .	—	3	3	—	—	—	—	3	3
Cereals .. .. .	—	3	3	—	—	—	—	3	3
Food flavourings and colourings .. .. .	—	8	8	—	1	1	—	9	9
Food drinks and non-alcoholic beverages .. .. .	—	30	30	1	3	4	1	33	34
Spices, sauces and condiments .. .. .	—	30	30	—	1	1	—	31	31
Wines, spirits and other alcoholic beverages .. .. .	4	2	6	—	—	—	4	2	6
Drugs, internal and external use .. .. .	1	10	11	—	—	—	1	10	11
Miscellaneous .. .. .	1	5	6	1	1	2	2	6	8
TOTALS .. .. .	549	340	889	89	23	112	638	363	1001



## HOUSING

The programme of slum clearance proceeded according to schedule and the demolition of the Denman Street areas was commenced.

Representations in respect of 953 unfit houses in the Abbey Street, Carrington, Commercial Street, Gregory Street, Hartwell Street, Hyson Green, Priory Street, Radmarsh Road, Tanner's Yard and Willoughby Street areas were submitted in September and at the end of the year, appropriate steps were being taken with a view to making Clearance or Compulsory Purchase Orders.

The next clearance areas to be dealt with are situated in the Bulwell and Basford districts.

A table giving details relating to the demolition, closing and repair of houses under the Housing and Public Health Acts appears on pages 142 and 143.

The Rent Act, 1957, came into operation in July, and replaced the provisions of the Housing Repairs and Rents Act, 1954 relating to rent increases and certificates of disrepair.

Details of action taken under the new and the old provisions during the year are given in the following table. This shows that greater advantage was taken of the 1957 Act by tenants of controlled houses to secure the execution of repairs *before* rent increases were payable.

Certificates of Disrepair					
Housing Repairs and Rents Act, 1954 (Period 1.1.57 to 5.7.57)					
Applications for certificates	..	..	..	..	6
„ granted	..	..	..	..	4
„ refused	..	..	..	..	2
Certificates revoked	..	..	..	..	9
Rent Act, 1957 (Period 6.7.57 to 31.12.57)					
Part I. Applications for Certificates of Disrepair :					
1. No. of applications for certificates	..	..	..	..	575
2. No. of decisions not to issue certificates	..	..	..	..	13
3. No. of decisions to issue certificates :					
(a) in respect of some but not all defects	..	..	..	..	303
(b) in respect of all defects	..	..	..	..	257
4. No. of undertakings given by landlords	..	..	..	..	288
5. No. of undertakings refused	..	..	..	..	22
6. No. of certificates issued	..	..	..	..	155
Part II. Applications for Cancellation of Certificates :					
7. Applications by landlords for cancellation of certificates	..	..	..	..	8
8. Objections by tenants to cancellation of certificates	..	..	..	..	1
9. Decision to cancel in spite of tenant's objection	..	..	..	..	1
10. Certificates cancelled by local authority	..	..	..	..	3

### WOMEN HOUSING OFFICERS

The staff of four women housing officers made 16,227 visits to houses on Corporation Housing Estates and reported 3,170 defects to the Estates Department.



## THE YEAR'S WORK

**Inspection of Dwelling-houses**

	1954	1955	1956	1957
Dwelling-houses inspected for housing defects under the Public Health or Housing Acts .. .. .	10,559	9,508	9,040	8,225
Inspections made for the purpose ..	19,935	17,608	18,161	14,862
Dwelling-houses — included under sub-head above — which were inspected and recorded under the Housing Consolidated Regulations 1925 and 1938 .. ..	784	1,214	1,025	992
Inspections made for the purpose ..	3,684	5,411	6,166	5,891
Dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation .. ..	5	428	28	1,025
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	4,501	3,484

**Informal Action**

Defective dwelling-houses rendered fit in consequence of informal notices by the Local Authority or their officers ..	4,976	4,279	3,540	2,787
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**Action Under Statutory Powers**

**1. Proceedings under Sect. 9, 10 and 16 of the Housing Act, 1936 and Sect. 9, 10 and 12 of the Housing Act, 1957.**

Dwelling-houses in respect of which notices were served requiring repairs	779	1,200	997	922
Dwelling-houses in which defects were remedied after service of formal notices :—				
1. By owners .. .. .	589	898	839	684
2. By Local Authority in default of owners .. .. .	190	208	201	161

## 2. Proceedings under the Public Health Acts.

Dwelling-houses in respect of which notices were served requiring defects to be remedied .. .. .	1,199	899	568	428
--	-------	-----	-----	-----

Dwelling-houses in which defects were remedied after service of formal notices :—

1. By owners .. .. .	962	838	494	302
----------------------	-----	-----	-----	-----

2. By Local Authority in default of owners .. .. .	113	143	113	119
--	-----	-----	-----	-----

## 3. Proceedings under Sects. 11 and 13 of the Housing Act, 1936 and Sect. 17 of the Housing Act, 1957.

Dwelling-houses in respect of which demolition orders were made ..	3	9	2	10
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Dwelling-houses demolished in pursuance of demolition orders ..	17	17	18	12
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## 4. Proceedings under Sect. 12 of the Housing Act, 1936 and Sect. 10 of the Local Government (Miscellaneous Provisions) Act, 1953 and Sect. 17 of the Housing Act, 1957.

Closing Orders made .. .. .	4	5	3	3
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## SANITARY SERVICES

The shortage of qualified public health inspectors continued at about one third of the establishment throughout the year. A staff of six trainee inspectors was maintained and will be available for appointment to statutory positions when they obtain their qualifications.

It was decided in principle to declare the City Centre to be a smoke control area and the Minister of Housing and Local Government gave preliminary approval in order that a detailed survey may be proceeded with. The proposed area is bounded by Upper Parliament Street, Clumber Street, High Street, St. Peter's Gate, Albert Street, Castle Gate, Castle Road, Lenton Road, Park Valley and Park Row. The date of the coming into operation of the project cannot be forecast and will depend on technical staff being available to deal with the conversion of furnaces and appliances.

A serious nuisance arising from excessive emissions of smoke and grit from a hospital chimney became the subject of statutory action under the nuisance provisions of the Public Health Act, 1936. The City Magistrates found the case proven and made a nuisance order requiring abatement. The Hospital Management Committee appealed in October to the Queen's Bench Divisional Court against the order on the ground that the magistrates had no jurisdiction because the hospital was occupied for the public services of the Crown. The Lord Chief Justice allowed the appeal "with some regret".

However, following the proceedings in the Magistrates' Court, the hospital authority put in hand the work of installing an additional boiler, grit arrestor and incinerator, and also arranged for a further boiler to be installed in 1958. When the scheme is completed, three modern boilers will be available and further nuisance should not arise.

## WATER

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

## SWIMMING BATHS

There are ten swimming baths in the City, all Corporation owned, five only remaining open for swimming during the winter months. During the year twenty-eight samples of water were taken, one of which was found to be under-chlorinated. Of three samples of water taken from the paddling pool at Bulwell Lido, one was found to be under-chlorinated.

## 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.

Monthly average emission of dense smoke per chimney in minutes						
	1952	1953	1954	1955	1956	1957
January ..	1.65	1.63	1.64	1.82	1.04	0.82
February ..	1.46	1.75	1.24	1.14	1.18	0.52
March ..	1.42	1.82	0.90	0.74	—*	0.56
April ..	1.68	1.07	1.25	1.23	0.97	1.17
May ..	1.16	1.10	0.93	1.63	0.91	0.69
June ..	1.36	1.82	0.84	1.02	0.95	0.54
July ..	0.84	0.94	1.05	1.05	0.96	0.75
August ..	0.92	0.56	1.09	1.06	0.72	0.43
September ..	0.94	0.89	0.91	0.86	1.25	1.38
October ..	1.35	1.13	1.23	0.85	0.79	1.06
November ..	1.53	1.15	0.92	1.49	0.70	0.53
December ..	1.17	1.18	1.23	0.87	0.84	0.77

\* No observations taken.



Observations and notices	1952	1953	1954	1955	1956	1957
Half-hourly observations of chimneys .. ..	1,329	1,103	1,238	1,188	1,062	<b>984</b>
Total no. of minutes dense smoke emitted .. ..	1,691	1,382	1,347·5	1,337	995	<b>786</b>
Average no. of minutes of dense smoke per chimney	1·3	1·3	1·1	1·15	0·94	<b>0·80</b>
Intimation notices served ..	69	49	40	46	29	<b>13</b>
Advisory visits including verbal cautions ..	409	417	470	442	378	<b>390</b>
Statutory notices served ..	17	10	8	7	3	<b>1</b>
Complaints investigated ..	128	156	168	186	137	<b>151</b>
Cases where work was executed for smoke and/or grit nuisance abatement ..	36	33	37	41	34	<b>39</b>

## Nature and cost of work carried out by owners

	1952	1953	1954	1955	1956	1957
Chimney stacks erected or extended .. ..	9	7	13	7	8	<b>7</b>
Chimney stacks dismantled ..	2	5	6	1	2	<b>5</b>
Boilers converted from hand to mechanical stoking ..	20	4	5	8	16	<b>12</b>
Mechanical stokers overhauled or renewed ..	18	5	9	4	7	<b>7</b>
New boilers installed ..	9	5	11	8	10	<b>11</b>
Grit arresting apparatus installed .. ..	—	2	3	2	—	<b>4</b>
Grit arresting apparatus repaired .. ..	—	12	2	—	—	—
Steam cranes replaced by diesel .. ..	—	—	2	—	—	—
Steam locomotives replaced by diesel .. ..	—	—	2	—	—	—
Conversion from coal to oil fuel or gas .. ..	—	—	3	—	10	<b>6</b>
Filters and scrubbers for nylon plant .. ..	—	—	1	—	—	—
Miscellaneous .. ..	—	—	5	20	9	<b>8</b>
Estimated cost to the owners	£74,710	£38,050	£68,640	£42,035	£54,130	<b>£131,090</b>

## 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 ..	215.34	26.03 : Dec.	17.95	4.59 : Feb.
Basford ..	244.05	34.64 : Dec.	20.34	2.52 : Feb.
Bulwell ..	194.59	22.98 : Dec.	16.22	2.35 : Feb.
Clifton ..	111.73	12.74 : June	9.31	1.58 : Dec.
Meadows ..	219.62	29.67 : Dec.	18.30	5.21 : Feb.
Mapperley ..	123.69	13.33 : May	10.31	2.61 : Dec.
Wollaton ..	81.52	11.43 : June	6.79	1.03 : Feb.
Av. for City ..	170.07	—	14.17	—

\* For full details see pages 156 and 157.

**Approval of Furnace Installations.** The provisions of Section 3 of the Clean Air Act, 1956, make it an offence to instal a furnace in a building or in any boiler or industrial plant attached to a building, etc. unless the furnace is, so far as practicable, capable of being operated continuously without emitting smoke when burning the type of fuel for which the furnace was designed.

In eighteen cases notices of proposals to instal new plant were received and four plans and specifications were submitted and approved.

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 ACTS, 1937 AND 1948

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 .. .. .	236	214	9
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authorities .. .. .	2,046	684	14
(iii) Other Premises in which Section 7 is enforced by the Local Authority (excluding outworkers premises) ..	—	17	—
TOTAL .. .. .	2,282	915	23

#### Details of Defects.

Nature	Found by public health inspectors	Referred by H.M. Inspectors	Remedied*
Want of cleanliness .. .. .	—	14	12
Overcrowding .. .. .	—	—	—
Unreasonable temperature .. .. .	—	1	1
Inadequate ventilation .. .. .	2	2	5
Ineffective drainage of floors .. .. .	—	—	—
Sanitary conveniences :			
(a) Insufficient .. .. .	—	2	2
(b) Unsuitable or defective .. .. .	27	74	76
(c) Not separate for sexes .. .. .	—	2	1
Other offences against the Act (not including offences relating to outwork) ..	31	—	28
TOTAL .. .. .	60	95	125

\* Includes defects found but not remedied in 1956.

**Outwork.**

Outworkers employed in the City totalled 2,129 and 1,713 visits were made to their premises which in all cases were found to be wholesome.

Nature of Work	No. of Outworkers			
	1954	1955	1956	1957
Lace, lace curtains and nets .. ..	1,211	1,055	986	<b>942</b>
Wearing apparel : Making etc., cleansing and washing ..	960	960	996	<b>1,004</b>
Nets, other than wire nets .. ..	89	141	115	<b>113</b>
Carding, etc., of buttons, hooks and eyes, pins and hair pins .. ..	39	36	35	<b>36</b>
Household linen .. ..	38	29	77	<b>23</b>
Brass and brass articles .. ..	17	8	12	<b>4</b>
Weaving of textile fabrics .. ..	3	3	1	<b>2</b>
Paper bags .. ..	—	3	5	<b>5</b>
TOTAL .. ..	2,357	2,235	2,227	<b>2,129</b>

**SHOPS ACT, 1950**

Applications were granted from the organisers of two public exhibitions for extensions of the closing hours for retail trade or business which was subsidiary or ancillary to the main purpose of the exhibitions.

Statutory closing hours were, generally, well observed by shopkeepers.



**PUBLIC HEALTH ACT, 1936**

**Workplaces.** Action was required in 17 cases of unsatisfactory sanitary accommodation for employees, two cases of inadequate ventilation of the workrooms and three cases of uncleanness 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 ten occasions and fourteen boats were inspected ; the inspector was allowed free access to the cabins.

One notice was issued against the owners of a boat regarding the failure of the Master to produce the certificate of registration.

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 was 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 Public Health Inspector and four members of his staff are authorised officers for all purposes of the Act.

Licences and registrations in force :—

Upholstery premises registered	..	..	..	..	35
Licences to store rag flock	..	..	..	..	4

A total of seventy-nine samples of various types of filling materials was taken and submitted for analysis and the following were found to be unsatisfactory :—

	Action Taken
Sample of Cotton Felt (No. 160 Informal) contained an excess of 0·8% of trash.	Followed by Formal Sample No. 200.
Sample of Cotton Felt (No. 200 Formal) contained an excess of 2·4% of trash.	Manufacturer was prosecuted and given an absolute discharge by the Court.
Sample of Cotton Felt (No. 179 Informal) contained an excess of 0·8% of trash.	None. Check on samples No. 160 and No. 200.
Sample of New Woollen Mixture Felt (Sample No. 199 Formal) contained an excess of 47 parts per 100,000 of chlorine in the form of soluble chlorides.	Letter from Town Clerk to manufacturer.
Sample of Coloured Cotton Felt (No. 1 Informal) had a dust index in excess of the standard.	None—Formal sample unobtainable.
Sample of Washed Flock (Layered) (No. 17 Informal) contained an excess of 7 parts per 100,000 of chlorine in the form of soluble chlorides.	Followed by formal sample No. 203.
Sample of Washed Flock (Layered) (No. 203 Formal) contained an excess of 13 parts per 100,000 of chlorine in the form of soluble chlorides.	Letter from Town Clerk to manufacturer.

### MEASURES AGAINST RODENT AND INSECT PESTS

The degree of infestation by rats and mice at business premises and dwelling-houses continued at a low level. It is becoming more evident that assistance is usually sought as soon as rat activity is suspected and that as a result, few major infestations are allowed to develop. The number of mice in business premises also seems to have declined, for many large premises which needed monthly treatment in the past now remain free from infestation for several months at a time.

Treatments at refuse tips were carried out at intervals throughout the year and no serious infestations developed.



The number of houses needing treatment for bugs was the lowest recorded, while flea infestations were again very few. Although many other insects were produced for identification, very few were of public health significance, although some were a source of considerable annoyance, e.g., several widely separated houses were invaded by small flies—(chloropids)—in the early autumn. Although harmless, they covered windows and ceilings in such vast numbers as to cause considerable alarm.

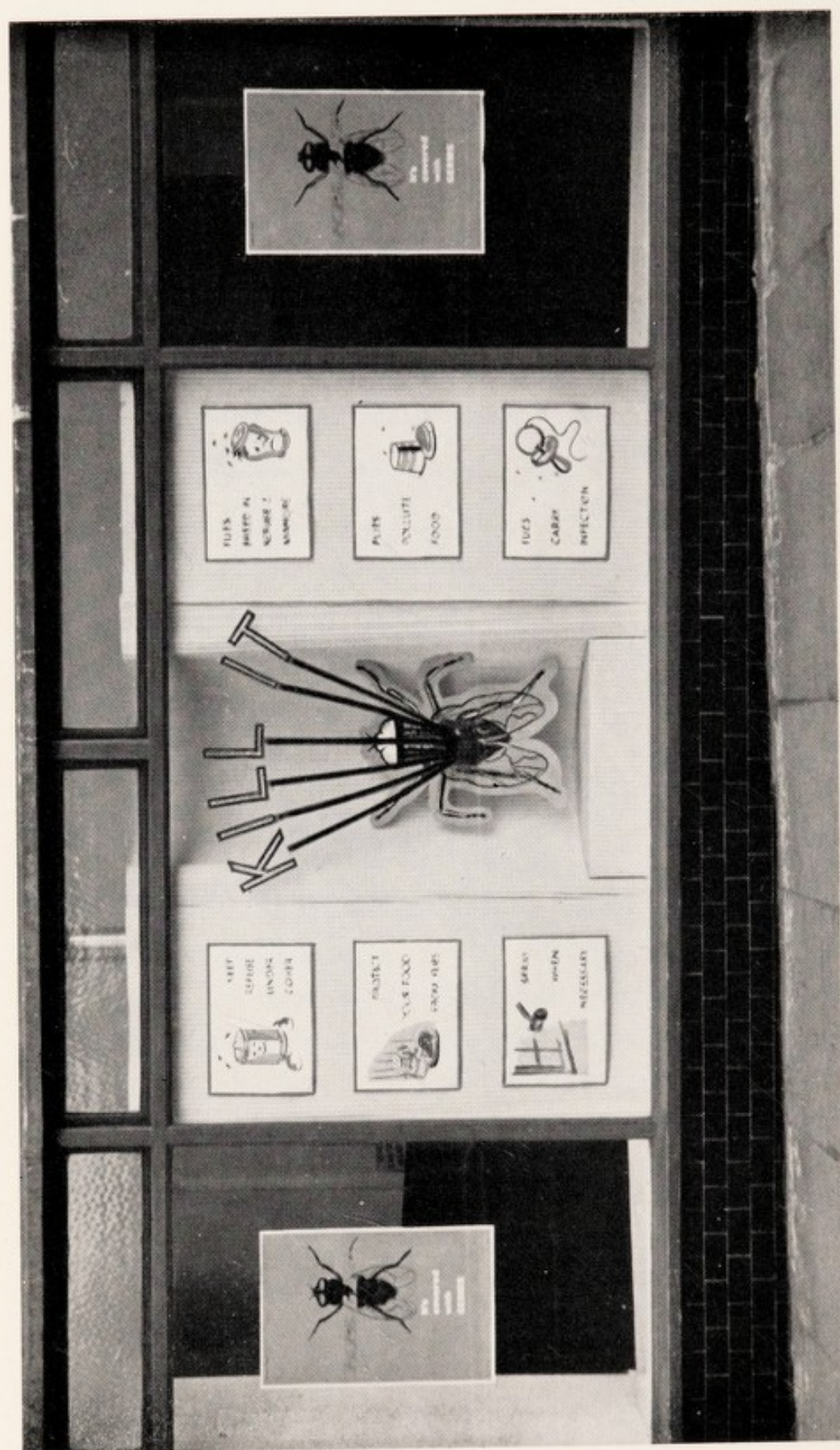
Rodent and Insect Control				1955	1956	1957
Properties surveyed	..	..	..	4,925	5,682	<b>6,310</b>
Infestations dealt with :						
rats	..	..	..	1,478	1,817	<b>1,660</b>
mice	..	..	..	622	678	<b>536</b>
insects	..	..	..	643	608	<b>833</b>
Total visits	..	..	..	14,972	14,839	<b>17,426</b>

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

New heating appliances exposed for sale in the City and examined by an inspector under the Act, were found to comply with the requirements. In three cases, however, second-hand dealers were found to be in possession of unguarded appliances which were withdrawn from sale after attention was drawn to them by the inspector.





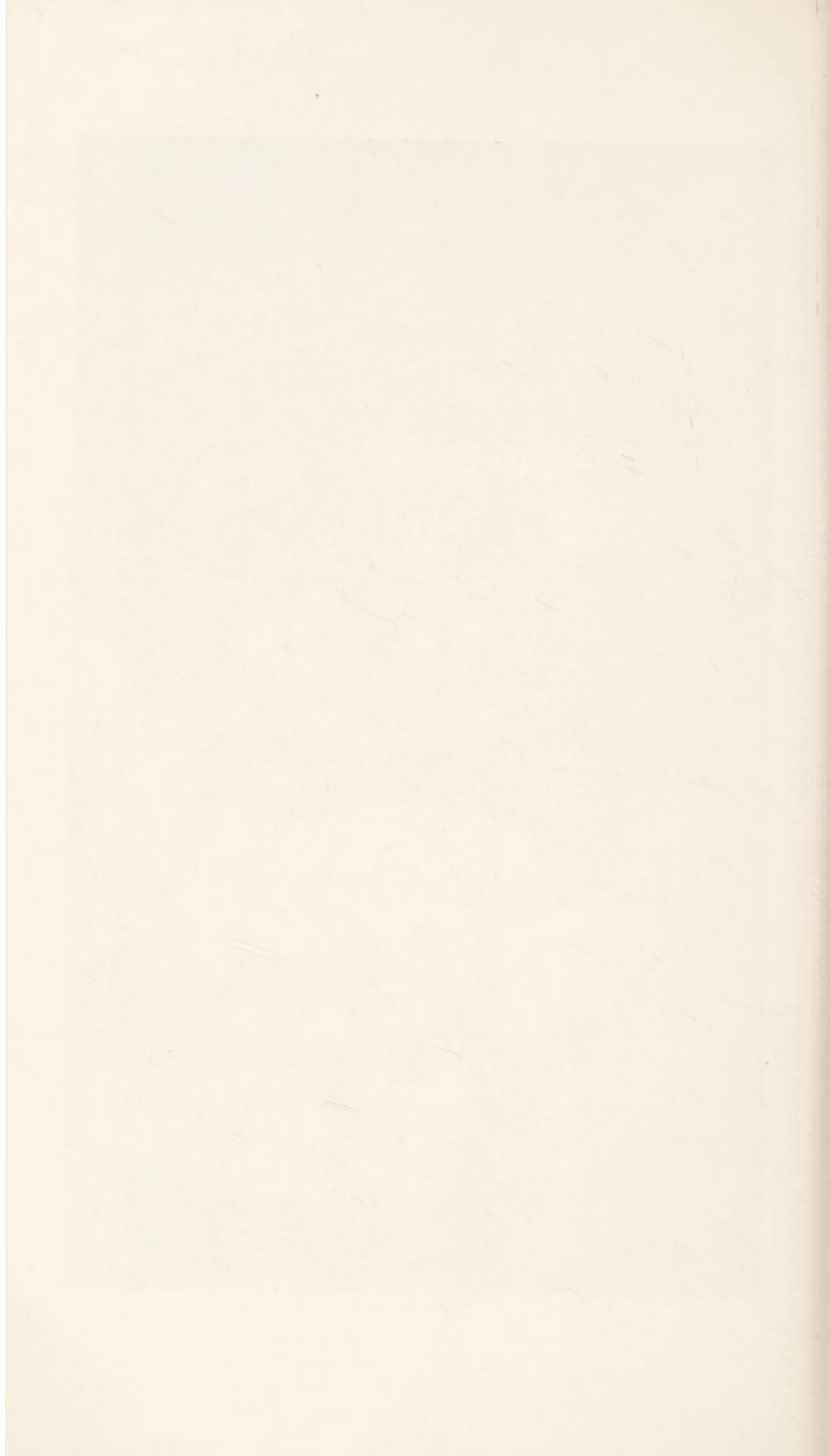


See page 69



See page 69





## THE YEAR'S WORK

## NOTICES

## INFORMAL

	1954	1955	1956	1957
TOTAL NUMBER COMPLIED WITH ..	10,782	9,765	9,218	7,453

Details of Nuisances Found	Nuisances, etc., remedied			
	1954	1955	1956	1957
Houses —filthy .. .. .	31	31	28	15
„ —verminous .. .. .	1	1	2	—
Drains —clearance of .. ..	129	293	197	65
„ —repair of .. .. .	324	277	252	225
Panterpits—abolition of .. ..	3	4	2	2
Additional water-closets—provision of ..	—	14	3	4
Water-closets —clearance of .. ..	58	32	20	19
„ „ —repair of .. .. .	2,009	2,167	2,100	1,030
Closets—cleansing of .. .. .	13	8	2	3
Courts, yards and passages —paving of ..	13	34	7	2
„ „ „ —cleansing of .. ..	7	8	12	17
„ „ „ —repair of .. .. .	242	308	269	168
Nuisance from pigs .. .. .	3	1	1	18
„ „ fowls .. .. .	4	2	3	5
„ „ other animals .. .. .	7	3	4	5
„ „ accumulation of refuse .. ..	29	38	38	52
Dustbins—provision of .. .. .	2,243	1,708	2,116	1,933
Miscellaneous nuisances .. .. .	365	121	84	48
Tents, vans and sheds .. .. .	5	32	73	40
Houses-let-in-lodgings .. .. .	23	3	2	1
Factories with mechanical power .. ..	212	42	30	3
„ without mechanical power .. ..	5	2	—	2
Workplaces .. .. .	24	3	—	2
<b>TOTAL .. .. .</b>	<b>5,750</b>	<b>5,132</b>	<b>5,245</b>	<b>3,659</b>

Defects in Houses	Defects remedied			
	1954	1955	1956	1957
Roofs .. .. .	1,890	2,318	1,910	1,652
Walls .. .. .	1,579	1,873	1,325	1,049
Floors and ceilings .. .. .	1,096	1,201	931	747
Windows .. .. .	1,760	1,701	1,474	1,025
Fireplaces .. .. .	784	614	512	275
Coppers .. .. .	63	41	24	36
Sinks provided .. .. .	55	70	34	19
„ —repair of .. .. .	212	235	182	155
Defective water pipes and fittings .. ..	196	122	227	129
„ rainwater conductors .. ..	1,291	1,260	965	879
Others .. .. .	900	1,386	1,032	843
<b>TOTAL .. .. .</b>	<b>9,826</b>	<b>10,821</b>	<b>8,616</b>	<b>6,809</b>
Number of defective houses dealt with ..	5,969	4,697	4,580	3,632



## STATUTORY

## Notices under Public Health Act, 1936

				Complied With			
				1954	1955	1956	1957
Sect. 39	Drainage	..	..	381	423	301	239
„ 44	Inadequate closet accommodation	..	..	11	3	7	2
„ 45	Closets	..	..	72	54	33	16
„ 56	Paving of courts, yards and passages, dwelling-houses	..	..	125	126	111	92
„ 75	Dustbins	..	..	668	499	593	610
„ 83	Dirty houses	..	..	4	1	—	—
„ 92	Houses	..	..	569	432	195	90
„ „	Others	..	..	2	—	—	—
„ 287	Notice of entry	..	..	8	6	7	7

## Notices under Nottingham Corporation Act, 1923

Sect. 73	Repair of water-closets	..	331	458	410	194
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## Notices under Nottingham Corporation Act, 1952

Cleansing and repair of drains, water-closets and soil pipes	..	..	96	116	87	60
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## Notices under Housing Acts 1936 and 1957

Sect. 9	..	..	822	1,106	1,040	845
TOTAL			3,089	3,224	2,784	2,155

Consequent upon the failure of owners to comply with statutory notices, the Corporation ordered work on private contractors and recovered expenses incurred in 541 cases as follows :—

ACT	1954	1955	1956	1957
	£ s. d.	£ s. d.	£ s. d.	£ s. d.
Nottingham Corporation Act, 1923, Section 73 ..	173 1 1	284 15 6	178 4 8	139 15 5
Nottingham Corporation Act, 1952, Section 72 ..	11 11 5	78 19 6	66 1 3	78 8 9
Nottingham Corporation Act, 1952, Section 80 ..	- - -	- - -	- - -	14 0 11
Housing Act, 1936, Sects. 9 and 10 ..	2,267 9 0	2,748 14 4	3,184 3 7	2,671 2 3
Housing Act, 1957, Sects. 9 and 10 ..				
Public Health Act, 1936 —Sect. 39 ..	504 16 9	390 3 10	270 17 9	255 12 2
„ „ —Sect. 44 ..	- - -	155 12 9	- - -	- - -
„ „ —Sect. 45 ..	144 5 1	95 10 2	69 18 4	18 19 1
„ „ —Sect. 56 ..	265 0 4	333 4 8	357 3 5	543 10 1
	3,366 3 8	4,087 0 9	4,126 9 0	3,721 8 8

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 £389. 2s. 11d.

#### NUMBER OF INSPECTIONS

	1954	1955	1956	1957
First visits .. ..	18,695	16,931	17,267	12,593
Re-visits .. ..	26,955	24,736	20,847	17,526
TOTAL .. ..	45,650	41,667	38,114	30,119



# MEASUREMENT OF ATMOSPHERIC POLLUTION

## DEPOSIT GAUGES

Deposited solid matter in tons per square mile per month.

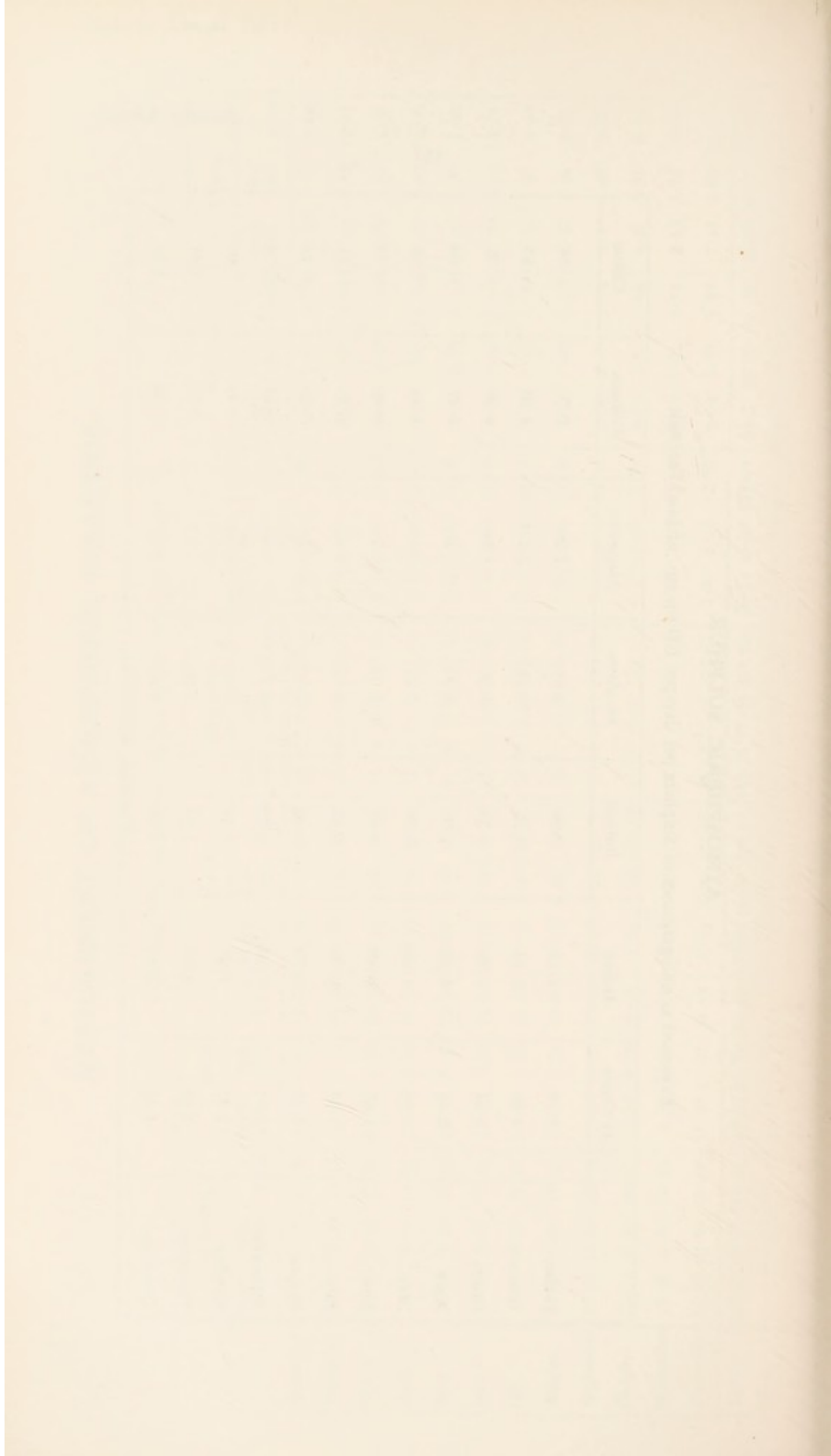
	City Centre			Basford			Bulwell			Meadows			Mapperley			Wollaton			Clifton		
	Insol- uble	Sol- uble	Total	Insol- uble	Sol- uble	Total	Insol- uble	Sol- uble	Total	Insol- uble	Sol- uble	Total	Insol- uble	Sol- uble	Total	Insol- uble	Sol- uble	Total	Insol- uble	Sol- uble	Total
January ..	12.19	6.07	18.26	11.20	6.09	17.29	6.56	5.37	11.93	18.20	5.13	23.33	6.24	2.56	8.80	3.10	1.63	4.73	3.34	2.72	6.06
February	10.83	5.30	16.13	12.24	8.07	20.31	10.34	6.73	17.07	10.54	5.83	16.37	5.70	3.27	8.97	3.83	2.23	6.06	7.26	3.55	10.81
March ..	11.23	6.34	17.57	11.75	6.29	18.04	12.62	6.26	18.88	11.00	5.84	16.84	8.74	4.44	13.18	5.34	2.57	7.91	5.34	3.31	8.65
April ..	12.61	4.51	17.12	17.84	3.50	21.34	10.83	2.78	13.61	8.90	3.43	12.33	5.40	1.40	6.80	4.67	1.63	6.30	7.97	2.03	10.00
May ..	8.86	4.38	13.24	18.17	5.07	23.24	12.09	3.22	15.31	11.00	5.34	16.34	9.60	3.73	13.33	3.80	2.30	6.10	4.49	3.20	7.69
June ..	11.26	4.05	15.31	12.37	4.30	16.67	13.26	3.48	16.74	11.40	4.20	15.60	9.44	3.73	13.17	9.10	2.33	11.43	10.33	2.41	12.74
July ..	9.39	4.78	14.17	10.57	4.90	15.47	9.91	4.87	14.78	9.07	6.27	15.34	8.04	3.08	11.12	3.53	2.45	5.98	5.37	3.07	8.44
August ..	11.07	5.99	17.06	11.24	7.26	18.50	9.44	6.05	15.49	12.77	6.13	18.90	5.30	2.40	7.70	4.27	1.40	5.67	6.45	2.36	8.81
September	10.50	10.24	20.74	12.44	14.00	26.44	10.31	10.02	20.33	8.59	11.67	20.26	5.77	4.56	10.33	3.30	2.70	6.00	4.93	4.49	9.42
October	13.73	6.78	20.51	13.64	4.90	18.54	11.56	4.74	16.30	14.70	7.97	22.67	6.37	3.60	9.97	4.53	2.13	6.66	4.80	3.31	8.11
November	12.52	6.68	19.20	7.27	6.30	13.57	5.83	5.34	11.17	6.84	5.13	11.97	4.07	3.27	7.34	3.10	2.01	5.11	5.13	3.55	8.68
December	15.44	10.59	26.03	21.57	13.07	34.64	15.05	7.93	22.98	19.57	10.10	29.67	7.84	5.14	12.98	5.64	3.93	9.57	7.47	4.85	12.32
TOTAL ..	139.63	75.71	215.34	160.30	83.75	244.05	127.80	66.79	194.59	142.58	77.04	219.62	82.51	41.18	123.69	54.21	27.31	81.52	72.88	38.85	111.73

## 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 ..	4.19	2.23	1.89	4.85	2.29	0.79	1.34
February ..	4.59	2.52	2.35	5.21	2.12	1.03	1.53
March ..	3.54	1.76	1.39	3.36	1.54	0.70	0.95
April ..	2.48	1.58	1.00	3.00	0.90	0.47	0.69
May ..	1.74	1.03	0.74	2.27	0.63	0.48	0.58
June ..	1.49	0.89	0.67	2.03	0.71	0.40	0.49
July ..	1.47	0.90	0.57	2.11	0.57	0.35	0.51
August ..	1.51	0.72	0.60	2.02	0.37	0.29	0.51
September ..	1.97	1.10	0.72	2.77	0.83	0.45	0.73
October ..	2.42	1.65	1.14	3.48	1.54	0.44	1.01
November ..	3.65	1.93	1.61	3.66	1.63	0.73	1.41
December ..	4.42	2.39	2.08	4.63	2.61	0.88	1.58





## PART IV.

### MISCELLANEOUS

ADMINISTRATION

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 AGENCIES ACT 1957

NURSING HOMES

PUBLIC MORTUARY

ULTRA VIOLET RAY CLINIC



## ADMINISTRATION

The turnover of staff was even higher than in 1956 ; there were 16 resignations and 18 appointments. Since the full time administrative and clerical staff numbered 64 at the end of the year, the rate of turnover was more than 25%.

The reasons for the resignations make interesting reading :—

To industry .. .. .	3	Pregnancy .. .. .	4
To other Local Government posts .. .. .	2	Husbands moved from City ..	2
Medical reasons .. .. .	1	Marriage .. .. .	1
Emigrated .. .. .	1	Nurse training .. .. .	1
Teacher training .. .. .	1		

With a high proportion of female clerks employed, many resignations were to be expected and, to combat this, efforts were continued to appoint male clerks where appropriate. The position, however, declined still further during the year when two male clerks resigned and only one applicant was suitable for appointment.

**Office Accommodation.** Progress was made with the plans for the building of a new headquarters. More detailed drawings were completed by the City Engineer's Department and were accepted by the Health Committee with a view to their submission to the Royal Fine Arts Commission.

The need for a central building accommodating all the departments was accentuated, late in the year, by the further dispersal of the staff of the administrative centre. This was brought about by a considerable increase in the work of the Immunisation Department leading to more staff to house and for which fresh premises were opened at 134, Mansfield Road.

**Finance.** With the continuing shortage of administrative staff, health visitors, midwives and public health inspectors, it was not surprising to find, only mid-way through the financial year, that the current estimates were £15,000 underspent.

Despite inducements in other directions it seems that a large City has not the same magnetism as other and more attractive parts of the country. To this extent, national scales of salaries can only mean that in the event of a national shortage of trained staffs, such shortage will be felt most severely by this and other similar Cities.

Even with the present staff vacancies, the gross cost of the Health Services in the City will, for the current financial year, be in the region of £600,000.

### EPILEPSY AND CEREBRAL PALSY

The number of persons known to be suffering from epilepsy and cerebral palsy is given below ; more cases of both diseases are being brought to notice.

Although an individual may be known to more than one service of the Local Authority, he is shown in the table as being known to the one mainly responsible for his welfare.

	Local Education Authority	Mental Health Services	Welfare Services	Others	Total
Cerebral Palsy ..	32	56	85	25	198
Epilepsy ..	89	93	79	5	266
Cerebral Palsy and Epilepsy ..	1	13	—	—	14



Schemes prepared by the Welfare Services Committee under Section 29 of the National Assistance Act, 1948, are gradually being developed for persons who are deaf or dumb and for handicapped persons (other than the blind or partially sighted and the deaf or dumb); the numbers on the register are increasing.

### **ESTABLISHMENTS FOR MASSAGE OR SPECIAL TREATMENT**

#### **NOTTINGHAM CORPORATION ACT, 1952**

There were 11 applications for renewals ; conditions were satisfactory in all cases.

Certificates of exemption were received in respect of 8 registered members of the Chartered Society of Physiotherapists or the Faculty of Physiotherapy.

## 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 684, an increase of 19 on the previous year.

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 ..	9	6	—	35
(b) Treatment (medical, surgical or optical)	13	3	—	17
(2) Cases at (1) (b) above which on follow up action have received treatment ..	7	3	—	13
<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	—	—	6
(b) Treatment (medical, surgical or optical)	10	1	—	6
(2) Cases which received follow up treatment ..	3	1	—	3

### B. Ophthalmia Neonatorum

No cases of impairment of sight were notified,



## NATIONAL ASSISTANCE ACTS, 1948 — 1951

Only one case was referred for examination with a view to compulsory removal, but it was not necessary to invoke the Act.

Result of Visit	1954	1955	1956	1957
Statutory action . . . . .	—	—	—	—
Voluntarily removed to hospital or Part III accommodation . . . . .	4	7	2	—
Voluntarily removed for cleansing . . . . .	3	—	—	—
Removed under Sect. 20, Lunacy Act, 1890 . . . . .	1	—	—	—
Under observation at home . . . . .	2	1	—	1
No action required . . . . .	2	1	—	—
Died . . . . .	1	—	1	—

### NOTTINGHAM CREMATORUM

A fall in the total number of cremations was the largest for over 20 years and is accounted for to some extent by the opening in 1956 of a crematorium at Derby.

The numbers for the past 10 years are given.

Year	ALL CREMATIONS		CREMATIONS OF CITY RESIDENTS		
	No.	Alteration from 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%
1956 ..	3,806	— 3·4%	1,528	7%	45·9%
1957 ..	<b>3,481</b>	— 8·5%	<b>1,477</b>	— 3·3%	<b>44·0%</b>

#### Cremation and Residence

PLACE OF RESIDENCE	NO. OF CREMATIONS			
	1954	1955	1956	1957
City .. .. .	1,311	1,432	1,528	<b>1,477</b>
County excluding West Bridgford ..	949	1,169	1,279	<b>1,378</b>
West Bridgford .. .. .	150	169	186	<b>179</b>
Other areas .. .. .	1,168	1,170	813	<b>447</b>
<b>TOTAL .. .. .</b>	<b>3,578</b>	<b>3,940</b>	<b>3,806</b>	<b>3,481</b>



## **NURSING AGENCIES**

The Nurses Agencies Act, 1957, a consolidating Act, came into force in April, replacing Part II of the Nurses Act, 1943, and the Nurses Act, 1945.

The existing licences granted in 1945 continued in force until the end of the year and were then renewed. In December these agencies had on their registers 23 State Registered Nurses, 4 State Certified Midwives, and 5 State Enrolled Assistant Nurses.

## **NURSING HOMES**

In November one Certificate of Registration was surrendered and at the end of the year there were 7 nursing homes registered under the Public Health Act, 1936. They were regularly inspected by a medical officer, and in the case of maternity homes, also by the non-medical supervisor of midwives.

A total of 18 maternity beds—in three homes—and 46 beds for other cases, were available.

## **PUBLIC MORTUARY**

The mortuary, sited adjacent to the police operational centre in Canal Street, received 552 bodies, the majority of which were subject to the jurisdiction of the City Coroner, as compared with 637 in 1956. Post mortem examinations were undertaken there in the investigation of the circumstances of 502 deaths.

# ULTRA VIOLET RAY CLINIC

## SUMMARY OF THE WORK

Analysis of cases :		1953	1954	1955	1956	1957
Cases from previous year ..	..	295	200	201	237	281
New cases ..	..	362	551	432	380	355
Total cases treated ..	..	<u>657</u>	<u>751</u>	<u>633</u>	<u>617</u>	<u>636</u>
City patients ..	..	644	719	604	600	632
County patients ..	..	13	32	29	17	4
		<u>657</u>	<u>751</u>	<u>633</u>	<u>617</u>	<u>636</u>
Adult patients male ..	..	161	218	190	175	192
„ „ female ..	..	258	315	300	312	313
Patients 5-15 years ..	..	91	90	80	93	101
„ 0- 5 years ..	..	147	128	63	37	30
		<u>657</u>	<u>751</u>	<u>633</u>	<u>617</u>	<u>636</u>
Cases discharged or ceased to attend ..	..	457	550	396	336	337
Cases carried forward ..	..	200	201	237	281	299
		<u>657</u>	<u>751</u>	<u>633</u>	<u>617</u>	<u>636</u>
No. of treatments :						
total given ..	..	12,759	14,699	13,238	11,313	12,395
average per patient ..	..	19·4	19·6	20·9	18·3	19·5





## PART V.

### HEALTH COMMITTEE

” ” STAFF

” ” REPORTS TO THE CITY  
COUNCIL

### SICKNESS RETURNS — MINISTRY OF NATIONAL INSURANCE

### FINANCIAL SUMMARY



HEALTH COMMITTEE

1957

LORD MAYOR :

ALDERMAN WILLIAM HICKLING, J.P.

CHAIRMAN :

ALDERMAN ERNEST PURSER

VICE-CHAIRMAN :

ALDERMAN 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.

COUNCILLOR M. W. CORDER

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

COUNCILLOR J. E. DEXTER

COUNCILLOR R. H. ELLIS

COUNCILLOR MRS. G. M. F. HORNE

COUNCILLOR T. W. McFADDEN

COUNCILLOR L. MITSON

COUNCILLOR W. H. MURDOCK

COUNCILLOR A. W. NORWEBB, J.P.

COUNCILLOR MRS. K. A. RITCHIE

COUNCILLOR MRS. M. E. WOOD

COUNCILLOR F. W. WOOTTON

## 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*

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

### Senior Assistant Medical Officers—

LESLIE G. HOUSDEN, O.B.E., M.D., L.R.C.P., M.R.C.S.      To 17.7.57.

MEGAN E. WILKINSON, M.B., Ch.B., D.P.H.

IAN C. BRANNEN, M.B., Ch.B., M.R.C.P., D.P.H.      From 22.7.57.

### Medical Officers—

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

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

PETER LAVIS, M.B., Ch.B.      From 7.8.57.

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

N. MERCY PLOWRIGHT, M.B., Ch.B., D.C.H.

### 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. S. CREER, S.R.N., S.C.M., M.T.D.

*Assistant Supervisor*—MISS G. J. BOOKER, S.R.N., S.C.M., M.T.D., H.V.

*District Midwives*—39 Full-time.

2 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.      To 4.5.57.

" " MISS E. LEES, S.R.N., S.C.M.      From 15.7.57.

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

*Senior Health Visitor*—(Tuberculosis) MISS E. CALEY, S.R.N., S.C.M.

*Welfare Centre Superintendents*— .. .. 8

*Health Visitors*—General .. .. 20

" Part-time .. .. 4

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
BELL'S 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> —MRS. Y. CHAPMAN, C.N.N. <i>Nursery Nurses</i> —5 <i>Warden</i> 1
DOWSON	..	<i>Matron</i> —MRS. P. BATES, C.N.N. <i>Nursery Nurses</i> —5 <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> —5 <i>Warden</i> 1
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.**Octagon Club—Nuffield House—***Supervisor*—MRS. I. M. BEDFORD.*Assistant Supervisor*—MRS. M. J. HEATHCOTE.*Occupational Assistants*—2.**Tuberculosis—**

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

**Social Workers—**

MISS M. BOTTOMS.

MISS S. WEST.

MRS. I. SHAW.

MISS M. H. WILLIAMS,

To 6.7.57.

From 1.10.57.

From 23.9.57.

**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.

To 12.8.57.

MRS. B. E. DAVIS, S.R.N., Q.N.

*Home Nurses*— 55 — Full-time.

6 — Part-time.

8 — Students.

**Home Help Service—***Organiser*—MRS. L. E. GRAY.*Deputy Organiser*—MISS M. J. MELLOR.*District Organisers*—

MISS S. M. BOSWELL, B.Sc.

MRS. E. M. CRICH.

MRS. E. L. MUSSON.

MISS M. PALMER.

From 1.2.57.

*Case Workers* — 8.*Home Helpers* —Full-time —182.

—Part-time —333.

—Casual — 6.

**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.WILFRID L. JONES, M.B., B.S., D.P.M. ★  
Consultant Psychiatrist, Mapperley Hospital.CLEMENT ROSE, M.D., M.R.C.S., L.R.C.P., 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 the 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.*Chief Clerk*—J. C. SLIGHT.*Senior Clerks*—13.*Clerks, General Divisions, all sections*—Full-time 48.

—Part-time 21.

**Public Health Inspection Service—***Chief Public Health Inspector*—A. WADE, M.B.E., F.R.S.H.*Deputy Chief Public Health Inspector*—R. YOUNG, M.R.S.H.*Senior Inspector of Meat and other Foods*—E. B. HOCKEN, Cert. R.S.H.

From 15.3.57.

*Senior Housing Inspector*—J. D. McDONALD, M.R.S.H.*Public Health Inspectors, all branches*—18." " " *Trainees* — 6.*Smoke Inspector*—1.*Women Housing Officers*—4.**Ambulance Service—***General Manager*—B. ENGLAND, M.I.Mech.E., M.Inst.T.*Ambulance Officer*—A. K. HICKS.*Deputy* " " —C. G. DEWEN.**Ultra Violet Ray Clinic—**

HENRY N. JAFFE, M.B., B.S. †

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

*Senior Nurse/Attendant*—MRS. A. GOFF, S.R.N.

To 19.10.57.

" " —MRS. G. M. WHITTINGTON, S.R.N.

From 2.12.57.

*Nurse/Attendant*—1.**Other Staff—**

<i>Caretakers</i>	..	..	..	4	
<i>Cleaners</i>	..	..	..	16	Full-time
				17	Part "
<i>Cook/Housekeepers</i>	..	..	..	3	
<i>Cooks</i>	..	..	..	10	
<i>Drivers</i>	..	..	..	4	
<i>Laundry Hands</i>	..	..	..	2	Full-time
				2	Part "
<i>Maintenance Assistant</i>	..	..	..	1	
<i>Mortuary Attendants</i>	..	..	..	2	
<i>Nursing Aid</i>	..	..	..	1	Part-time
<i>Rodent Operators</i>	..	..	..	7	
<i>Seamstress</i>	..	..	..	1	Part-time
<i>Storemen</i>	..	..	..	2	

† Part-time.

HEALTH REPORT 1957

# REPORTS

OF THE

HEALTH COMMITTEE

TO THE

CITY COUNCIL



**AS TO THE CONSTRUCTION OF A CENTRAL AMBULANCE  
STATION AT BEECHDALE ROAD.**

---

**THE HEALTH COMMITTEE**

Beg to report

That in November, 1955, they considered tenders for the construction of a central ambulance station at Beechdale Road and decided to accept the tender of Frost & Leatherland Limited in the sum of £53,598. 15s. 8d. The ambulance station is urgently required as the accommodation occupied by the ambulance service at the Parliament Street Transport Depot, the Central Fire Station and the City Hospital is needed for other purposes, and the location of the greater part of the ambulance fleet at Beechdale Road will greatly improve the service available to the public. At that time, however, owing to the restrictions on capital expenditure, the Ministry of Health declined to allow the building to proceed.

In the middle of 1956, a proposal by the National Coal Board to undermine this site in 1959 made it imperative to commence the building in the spring of this year so that it could be completed with structural precautions before mining settlement took place. If this is not done, the building cannot be commenced until the site is once again stable in about five years time.

In view of this, further representations were made and the Ministry of Health have now stated that sympathetic consideration will be given to an application for loan sanction in respect of the scheme provided that such application is submitted before the end of the present financial year and provided also that a reduction in cost of approximately £4,000 is effected. Your Committee consider that it is possible to make these savings and

accordingly propose to accept the tender of Frost & Leatherland Limited in the sum of £53,598. 15s. 8d., and thereafter to issue variation orders to achieve the required reduction in cost.

In addition to the cost of the building it will be necessary to expend a further sum, estimated at £1,740, on the following items :—

	£	s.	d.
Plant and Equipment .. .. .	162	0	0
Furniture and Fittings .. .. .	1,326	0	0
Tools, Accessories and Sundries .. .. .	110	0	0
Laundry Equipment .. .. .	142	0	0
	<hr/>		
	£1,740	0	0
	<hr/>		

Your Committee recommend the Council to approve their proposals for the building of the Ambulance Station at Beechdale Road and to authorise the Town Clerk to make application to the Minister of Health for consent to borrow £51,338.

As it is imperative that the building work should be completed before the site is affected by subsidence, your Committee further recommend the Council to enter into the Contract for the building work forthwith before the issue of the loan sanction.

Dated this 15th day of January, 1957.

ERNEST PURSER,

CHAIRMAN.

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*This report was submitted to the City Council at their meeting on the 4th February, 1957, and was adopted.*



## AS TO THE SITING OF A NEW AMBULANCE STATION AND THE APPROPRIATION OF LAND TO HEALTH PURPOSES.

---

### THE HEALTH COMMITTEE

Beg to report

That in accordance with the decision of the City Council at their Meeting on 4th February, 1957, further consideration has been given to the siting of an ambulance station to serve the southern part of the City and in particular the Clifton Estate.

Your Committee have for several years felt the need for a small ambulance station in this area and are satisfied that such a station together with the main ambulance station now being constructed at Beechdale Road and another small station near the City centre are necessary for the efficient operation of the ambulance service. Your Committee's views are supported by the Ministry of Health whose Officers in 1954 conducted an extensive survey of the City Ambulance Service. The Report of the survey on this point was as follows :—

“ We have carefully considered the need for the proposed new ambulance stations and we are satisfied that these new stations are justified and will enable better control over the service to be provided ”.

The area served by the new ambulance station would include Wilford Power Station, Clifton Colliery, Wilford Road including the Royal Ordnance Depot and the British Railways Locomotive Sheds, Castle Boulevard, Canal Street and Sneinton Dale to the City Boundary at Parkdale Road. The Council will appreciate that the station must be situated where good approach roads and the absence of intersecting lines of heavy traffic will enable an ambulance to reach a patient in the shortest possible time. In order to assess the merits of various sites, test runs were made to the scene of imaginary accidents in the area from the site of the new Beechdale Ambulance Station and from a number of other points near to which it might be possible to erect the subsidiary station, with the following results :—

## TIMES FOR TEST RUNS TO IMAGINARY ACCIDENTS.

	Centre of Clifton Estate	British Railways Middle Furlong Road	Clifton Colliery	Notts. County Football Ground
	<i>Minutes</i>	<i>Minutes</i>	<i>Minutes</i>	<i>Minutes</i>
Wilford Station Site ..	3½	4¾	3½	7
Beechdale Station Site ..	13½	9¾	10½	12½
P.D.S.A. Dunkirk ..	9½	5¾	6½	8½
Wells Road Railway Station Site ..	13½	9½	10	8

These test runs were made on a weekday afternoon, but owing to fuel rationing traffic was lighter than might normally be expected. Where appropriate a route over the new Clifton Bridge was selected and an estimate was made of the time taken to cover those parts of the route which are not yet available to traffic.

The imaginary accidents were reached far more quickly from the Wilford site which is shown on the plan accompanying this report,\* than from the other sites tested. The site has the added advantage that it is particularly near to the Clifton Estate to which ambulances are frequently called. For these reasons your Committee are of opinion that the site which the General Works and Highways Committee are prepared to make available is suitable for the erection of the ambulance station and they recommend the Council to appropriate it to that purpose.

Dated this 9th day of April, 1957.

ERNEST PURSER,  
CHAIRMAN.

\*Not reproduced.

*This report was submitted to the City Council at their meeting on the 3rd June, 1957, 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	
	1957	1956	1957	1956	1957	1956	1957	1956	1957	1956
JANUARY ..	1,315	1,942	30	25	—	—	11	10	57	46
FEBRUARY ..	1,332	1,991	13	17	—	2	5	25	36	96
MARCH ..	1,343	1,426	7	28	—	3	6	9	12	41
APRIL ..	1,004	1,064	13	11	—	—	2	13	20	26
MAY ..	1,069	1,005	12	4	—	—	1	5	17	27
JUNE ..	863	962	11	12	—	—	—	2	25	20
JULY ..	846	909	6	1	—	—	—	1	14	22
AUGUST ..	825	749	13	3	—	—	—	2	27	17
SEPTEMBER ..	2,438	1,101	22	8	—	—	6	6	26	22
OCTOBER ..	3,666	1,282	80	2	29	—	9	6	64	33
NOVEMBER ..	1,569	1,273	31	5	6	—	5	4	40	31
DECEMBER ..	1,511	1,052	—	14	—	—	—	7	—	56

\* The two areas are not identical.

## COST OF HEALTH SERVICES

SERVICE	Actual Cost—Year ended 31st March, 1957						Estimated Cost— Year ending 31st March, 1958		
	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
	£	£	£	£	s. d.	s. d.	£	s. d.	s. d.
Administration (not charged to other services) .. .. .	5,880	3,619	—	2,261	.13	1 74	2,138	.14	1 64
Public Health Inspection and Other Services .. .. .	44,772	8,149	1,538	35,085	1 98	2 294	42,315	2 71	2 8 50
Health Centres .. .. .	2,450	738	856	856	.05	.66	995	.06	.76
Maternal and Child Health .. .. .	101,175	16,849	42,033	42,293	2 38	2 8 48	43,907	2 81	2 9 72
Midwifery .. .. .	45,329	2,506	21,392	21,431	1 21	1 4 46	24,944	1 60	1 7 16
Health Visiting .. .. .	29,644	659	14,131	14,854	.84	11 41	15,967	1 02	1 0 26
Home Nursing .. .. .	55,487	1,539	26,974	26,974	1 52	1 8 72	31,329	2 00	2 0 06
Vaccination and Immunisation .. .. .	7,390	—	3,695	3,695	.21	2 84	5,495	.35	4 22
Ambulance .. .. .	68,588	3,352	32,468	32,768	1 85	2 1 16	35,728	2 29	2 3 44
Prevention of Illness, Care and After-Care .. .. .	26,019	4,281	10,791	10,947	.62	8 41	12,412	.79	9 53
Mental Health .. .. .	28,216	814	13,686	13,716	.77	10 53	15,171	.97	11 65
Home Help .. .. .	115,173	8,369	53,402	53,402	3 01	3 5 01	62,296	3 99	3 11 84
Other Expenses .. .. .	2,221	1,426	336	459	.03	.35	710	.05	.55
TOTAL .. .. .	532,344	52,301	221,302	258,741	1 2 60	16 6 71	293,407	1 6 78	18 9 33



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## READER'S NOTES









