

[Report 1960] / Medical Officer of Health, Nottingham City.

Contributors

Nottingham (England). City Council.

Publication/Creation

1960

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CITY OF NOTTINGHAM

**EIGHTY-EIGHTH
ANNUAL REPORT**

OF THE


HEALTH SERVICES

1960

MEDICAL OFFICER OF HEALTH
WILLIAM DODD, M.D.

NOTTINGHAM

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FOREWORD

The essential statistics of the Committee's work during the year show little alteration and, with one exception, indicate the degree of improvement normally expected with effective services.

The exception was the maternal mortality rate and as the report indicates at page 21 there were 8 deaths associated with child bearing. However, of these two were those of mothers resident outside the City.

It will not escape notice that venous thrombosis in one form or other appeared to be a predisposing factor. From this thoughts naturally arise, especially when in many directions study is being given to arterial disease, as to how far the effectiveness of the venous system may be deteriorating.

It is known that considerable and increasing numbers of women and men require constant medical attention over many years for disorders of the veins of the lower limbs—popularly referred to as 'varicose veins'.

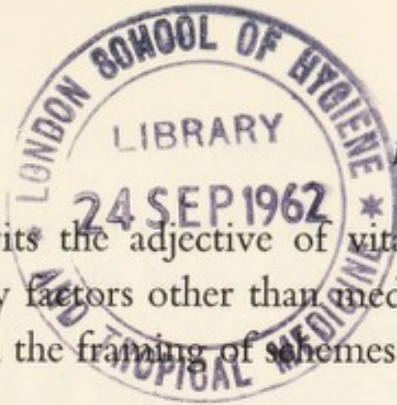
This condition does not occur in the populations of the countries which are regarded as backward and where, in some respects, a more natural way of life is followed. Is it that our nutrition, good though it is regarded by the epicure, has so far diverged from fundamental requirements, or is it simply one other result of the discovery of petrol?

Plainly put do we sit and ride too much?

Do we use our feet far too little?

★ ★ ★

Consideration of the whole picture of the health of the community takes one far from the traditional consideration of annual statistics. In these changing days it is the study of social



trends and problems which merits the adjective of vital, and which calls for the study of many factors other than medical to make progress, however slight, in the framing of schemes which may lead, in time, to a solution.

This report publishes two sets of figures—the accuracy of which have been checked—relating to immigrants. The figures will be found on pages 27 and 55 and relate on the one hand to applications for admission to hospital for confinements because of housing conditions and, on the other, to the number of immigrants who were notified as being tuberculous.

These two factors affect the City's facilities and a careful appraisal of them is being made.

Let it not be thought, however, that the attitude here is anything but one of welcome to immigrants.

★ ★ ★

The figures on page 33 recording the number and causes of midwives requests for medical aid give rise to reflection.

It will be seen that in many instances the number of calls in recent years, with only a small increase in the total number of domiciliary confinements, is much in excess of 7-8 years ago. For ruptured perineum alone there was double the number of cases necessitating attention in 1952.

And this with a service which is well equipped and, as the years pass it is naturally expected, increasing in efficiency.

This note is to draw attention to the facts and to record that a review of facts is being undertaken.

★ ★ ★

There were, during the year, two major matters concerning the environment and which occupied the Committee's staff in major efforts.

The first arose when an application was received for the continuation of a licence for an old established offensive trade.

This business, which had been established some 80 years ago when, doubtless, the approach was different in that potential hazards were either unexplained or unappreciated, had long since been regarded as badly sited according to modern standards, and not only unpleasant to residents within a radius of one mile but also on occasions constituting actual danger.

It was surprising, and even dismaying, to find that representatives of a modern national concern—of which the offensive trades branch is a subsidiary—displayed an outlook which, if the historical records were accurately written, was precisely that of many decades ago.

However, the report records that a satisfactory conclusion was reached in that the offensive trade will be re-established in an area where few can be adversely affected.

★ ★ ★

The second matter of environment was in many ways monstrous. The Central Electricity Generating Board—it transpired shortly before a public enquiry opened in November—proposed to establish within two and a half miles of the City centre a mammoth power station which, if proceeded with, will be the largest in Europe.

The fundamental facts as published are so enormous as almost to fail to convey their magnitude.

It was declared at the enquiry that the power station, when fully complete in ten years' time, will be burning 10,000,000

tons of coal a year. Broken down this means in the region of 30,000 tons daily—some 60 or so train loads. Further when consumed the coal will produce thousands of tons of ash each day. Of the gases, 180,000 tons of sulphur dioxide will be dispersed annually and 12 million gallons of cooling water will be evaporated daily.

So much for the consumption of solid fuel which will lead ultimately to an annual output of 4,000 megawatts (the intended output of the Berkeley Point Nuclear Station, now under construction is expected to be in the region of 367 megawatts).

The coal will be pulverised and an area of some 80 acres is projected for storage to a depth of 30 feet.

For this power station an area of approximately 500 acres—in a green belt—is contemplated. The power house itself will be, like many others, 200 feet high. The cooling towers, of which there will be 8, will rise to a height of 450 feet—150 yards—while the two chimney stacks will be no less than 650 feet.

The height of Blackpool Tower is 520 feet.

And the net result, if the views of the Central Electricity Generating Board are accepted, is that no atmospheric pollution will result.

No pollution, nothing but blue sky and clear air!

Can it be wondered that the Council's witnesses completely repudiated such an unrealistic view?

At the time of writing this foreword the enquiry closed after a 14 days hearing.

The year 1960 was notable for the number of changes amongst the senior staff.

Dr. Elspeth M. Warwick, who had so competently filled the office of Deputy Medical Officer of Health since 1953, was appointed to the medical staff of the Scottish Department of Health, and Dr. K. W. Matheson of Edinburgh was appointed to succeed her.

Dr. Patricia Shaw, in October, elected to make her retirement from full time work. While new appointments were inevitable it is satisfying to record that Dr. Ian G. P. Fraser and Dr. A. D. Bostock were promoted from Senior Assistant Medical Officer grade to that of Senior Medical Officer.

WILLIAM DODD.

24th February, 1961.

HEALTH DEPARTMENT,
HUNTINGDON HOUSE,
NOTTINGHAM.

TELEPHONE No. 50551

PART I

VITAL STATISTICS

VITAL STATISTICS*

	1960	1959
POPULATION	313,760	313,300
AREA IN ACRES	18,364	18,364
NO. OF MARRIAGES—CHURCH 1,799. REGISTRY OFFICE 939.	2,738	2,633

LIVE BIRTHS

LEGITIMATE	MALES	2,760	FEMALES	2,476	..	5,236	5,077
ILLEGITIMATE	„	246	„	245	..	491	547
„	births expressed as a percentage of all births					8.57%	9.73%
TOTAL NO. OF BIRTHS .. .. .					..	5,727	5,624
Live Birth Rate per 1,000 of population .. .. .					..	18.25	17.95

STILLBIRTHS

LEGITIMATE	MALES	48	FEMALES	56	..	104	100
ILLEGITIMATE	„	3	„	5	..	8	14
TOTAL NO. OF STILLBIRTHS .. .. .					..	112	114
Stillbirth Rate per 1,000 live and stillbirths .. .. .					..	19.18	19.87
TOTAL NO. OF LIVE AND STILLBIRTHS .. .. .					..	5,839	5,738

INFANT DEATHS

Infant Mortality Rate	TOTAL	..	22.87	24.18
„ „ „	legitimate births	..	22.91	24.62
„ „ „	illegitimate births	..	22.40	20.11
Neo-Natal Mortality Rate —first four weeks of life			15.02	17.25
Early Neo-Natal Mortality Rate —first week of life			12.05	13.33
Peri-Natal Mortality Rate	..	..	31.00	32.93

MATERNAL DEATHS (see page 21)

Maternal Mortality Rate per 1,000 live and stillbirths	6	2
	1.03	0.35

DEATHS AT ALL AGES

MALES	1,710	FEMALES	1,675	..	3,385	3,597
<hr/>						
Death Rate	per 1,000 of population			..	..	10.79 11.48

* Provisional. See Page 13.

POPULATIONS, BIRTH, DEATH, INFANT AND MATERNAL MORTALITY RATES

	Estimated Population	Birth-rate	Death-rate	Infant mortality	Maternal mortality
		per 1,000 population		rate per live births	1,000 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
32 ..	270,700	16·4	12·5	80	3·0
33 ..	283,030†	15·8	13·4	85	3·5
34 ..	281,850	15·6	12·3	69	2·4
35 ..	280,200	15·7	12·5	81	4·4
36 ..	279,400	15·2	13·2	89	4·5
37 ..	278,800	16·0	13·4	80	2·8
38 ..	278,300	15·6	12·7	71	1·8
39 ..	278,800	15·8	13·3	66	1·3
40 ..	263,600	16·5	15·5	61	2·7
41 ..	258,100	16·0	14·0	80	2·8
42 ..	255,900	18·2	13·1	62	2·5
43 ..	265,400	19·1	14·3	65	1·38
44 ..	262,310	21·7	13·2	56	·85
45 ..	265,090	19·7	12·9	53	1·33
46 ..	283,160	22·0	12·5	42	1·09
47 ..	291,150	23·9	12·3	50	1·26
48 ..	296,900	19·8	10·9	44	·49
49 ..	300,640	18·9	11·8	38	·51
50 ..	307,000	17·4	11·1	31	·37
51 ..	306,600	16·97	11·98	33	·57
52 ..	310,700†	16·71	10·74	28	·38
53 ..	311,500	16·64	11·01	27	·77
54 ..	311,500	16·05	10·61	24	·59
55 ..	312,000	15·67	11·28	28	·60
56 ..	312,500	16·50	11·15	22	·76
57 ..	312,600	17·52	10·82	23	·36
58 ..	313,000	17·82	10·93	22	1·05
59 ..	313,300	17·95	11·48	24	·35
60 ..	313,760	18·25	10·79	23	1·03

* Borough Boundary Extension.

† City Boundary Extension.

ANALYSIS OF DEATHS FROM BIRTH TO 5 YEARS

REGISTERED CAUSES OF DEATH	0—7 days	8—14 days	15—21 days	22—28 days	TOTAL 0—28 Days	TOTAL UNDER 1 YEAR	1 year	2 years	3 years	4 years	TOTAL 1—4 YEARS
Prematurity	36	2	—	—	38	38	—	—	—	—	—
Congenital malforma- tions	7	5	2	1	15	21	2	1	—	2	5
Birth injuries	8	—	—	—	8	8	—	—	—	—	—
Atelectasis	13	1	—	—	14	14	—	—	—	—	—
Haemolytic disease of the newborn	1	—	—	—	1	1	—	—	—	—	—
Bronchitis	—	—	1	—	1	9	—	—	—	—	—
Pneumonia, all forms ..	1	2	—	1	4	16	3	1	—	—	4
Other respiratory diseases and con- ditions	—	—	—	—	—	—	—	—	—	—	—
Gastro-intestinal infec- tion including dysentery	—	—	—	1	1	4	2	—	—	—	2
Measles	—	—	—	—	—	—	—	—	—	—	—
Whooping cough	—	—	—	—	—	—	—	—	—	—	—
Meningococcal infections	—	—	1	—	1	3	—	—	—	—	—
Non-meningococcal meningitis	—	—	—	—	—	—	—	—	1	—	1
Tuberculosis	—	—	—	—	—	—	—	—	—	—	—
Syphilis	—	—	—	—	—	—	—	—	—	—	—
Leukaemia	—	—	—	—	—	—	—	—	1	—	1
Malignant neoplasms ..	—	—	—	—	—	—	—	—	—	—	—
Abdominal emergencies	1	—	—	—	1	4	—	—	—	—	—
Suffocation (overlying)	—	—	—	—	—	2	—	—	—	—	—
Accident (a) motor ..	—	—	—	—	—	—	—	—	1	—	1
(b) other ..	—	—	—	—	—	1	1	2	—	—	3
Other conditions	2	—	—	—	2	10	2	2	—	1	5
TOTALS	69	10	4	3	86	131	10	6	3	3	22

FINAL STATISTICS

	1960	1959	1958	1957	1956
POPULATION	313,760	313,300	313,000	312,600	312,500
AREA IN ACRES	18,364	18,364	18,364	18,364	18,364
NO. OF MARRIAGES	2,738	2,633	2,580	2,838	2,952

Live Births

LEGIT. M. 2,749 F. 2,456 ..	5,205	5,077	5,063	5,021	4,771
ILLEGIT. M. 267 F. 257 ..	524	547	514	457	384
ILLEGIT. expressed as percentage of all births	9.15%	9.73%	9.2%	8.34%	7.45%
TOTAL BIRTHS	5,729	5,624	5,577	5,478	5,155
LIVE BIRTH RATE	18.26	17.95	17.82	17.52	16.50

Stillbirths

LEGIT. M. 46 F. 54 ..	100	100	109	96	117
ILLEGIT. M. 7 F. 8 ..	15	14	22	13	8
TOTAL STILLBIRTHS	115	114	131	109	125
STILLBIRTH RATE	19.68	19.87	22.95	19.51	23.67
Total Live and Stillbirths ..	5,844	5,738	5,708	5,587	5,280

Infant Deaths

..	133	136	123	126	113
Infant Mort. Rate—Total ..	23.22	24.18	22.05	23.00	21.92
„ „ „ —legit. births ..	23.63	24.62	20.94	22.91	21.59
„ „ „ —illegit. births ..	19.08	20.11	33.07	24.07	26.04
Neo-Natal Mortality Rate ..	15.36	17.25	15.42	15.15	15.13
Early Neo-Natal Mortality Rate ..	12.22	13.33	11.83	10.19	12.41
Peri-Natal Mortality Rate ..	31.66	32.93	34.51	31.14	32.76

Maternal Deaths

..	3	2	5	2	4
MATERNAL MORTALITY RATE ..	0.51	0.35	1.05	0.36	0.76

Deaths at all Ages

M. 1,721 F. 1,720 ..	3,441	3,597	3,421	3,383	3,485
DEATH RATE	10.97	11.48	10.93	10.82	11.15

ANALYSIS OF DEATHS

Total Deaths ..	1960	1959	1958	1957	1956
	3,441	3,597	3,421	3,383	3,485
Deaths under 1 year	133	136	123	126	113
„ 1—4 years	22	22	23	18	20
„ 5—44 „	199	189	171	215	191
„ 45—64 „	824	876	817	843	820
„ 65 and over	2,263	2,374	2,287	2,181	2,341
Causes of Deaths:—					
Coronary disease, angina	503	430	434	412	406
*Heart disease	470	499	492	476	528
Vascular lesions of nervous system ..	462	501	441	449	498
*Malignant and lymphatic neoplasms	288	286	255	291	326
Defined and ill-defined diseases—					
various	283	277	273	308	272
Bronchitis	242	298	322	248	269
Pneumonia	209	193	173	181	192
Malignant neoplasm, lung, bronchus	172	166	144	149	131
*Circulatory disease	152	146	130	146	181
Malignant neoplasm, stomach ..	76	96	89	86	75
Accidents, other than motor vehicle					
accidents	75	72	79	73	85
Malignant neoplasm, breast ..	71	62	58	55	56
Hypertension with heart disease ..	66	92	100	68	97
Motor vehicle accidents	42	57	30	43	36
*Diseases of respiratory system ..	37	52	22	34	27
Congenital malformations	35	33	37	40	27
Suicide	33	44	36	46	28
Ulcer of stomach and duodenum ..	31	46	40	39	40
Malignant neoplasm, uterus ..	31	39	43	30	26
Diabetes	30	16	28	14	19
Tuberculosis, respiratory	25	26	49	37	35
Nephritis and nephrosis	25	25	28	25	37
Hyperplasia of prostate	21	17	10	20	12
Gastritis, enteritis and diarrhoea ..	13	16	12	9	21
Other infective and parasitic diseases	12	8	12	6	9
Influenza	9	57	32	56	17
Leukaemia, aleukaemia	9	22	23	19	15
Syphilitic disease	7	12	12	9	8
Homicide and operations of war ..	5	2	1	8	2
Pregnancy, childbirth, abortion ..	3	2	6	2	4
Tuberculosis, non respiratory ..	2	3	5	2	3
Meningococcal infection	2	—	2	—	2
Measles	—	1	2	2	1
Acute poliomyelitis	—	1	1	—	—
Whooping cough	—	—	—	—	—
Diphtheria	—	—	—	—	—

* Not given otherwise in table.

PART II

PERSONAL HEALTH SERVICES

National Health Service Acts 1946-1957

Mental Health Act 1959

HEALTH CENTRES

MATERNAL AND CHILD HEALTH

**PREVENTION OF ILLNESS, CARE AND
AFTER-CARE**

IMMUNISATION

HOME NURSING SERVICE

HOME HELP SERVICE

MENTAL HEALTH SERVICE

CITY AMBULANCE SERVICE

HEALTH CENTRES

THE JOHN RYLE HEALTH CENTRE

In the 8th year since the Centre has existed work continued smoothly and entirely without incident, both in the general medical services and in the various services provided by the local health authority.

Although originally, as has previously been recorded, the building was adapted during construction from the shell of four houses, the amount of wear has not been substantial and the suitability of the design and finish could not have been seriously criticised.

With the interest from various organised bodies and individuals continuing, it was not surprising that a number of visitors from home and overseas were welcomed to the City for the purpose of seeing the Centre.

As has previously been mentioned the degree of success of the Centre has been restricted by the distance by which this building, sited to meet only the early needs of the developing Estate, is now removed from the geographical centre of the completed area.

Further too the provision of general medical services by doctors at their own homes and surgeries on the Estate has materially affected the present day position.

MATERNAL AND CHILD HEALTH

Live Births. There were 5,727 babies born to mothers living within the City, giving a birth rate of 18·25.

Stillbirths. There were 112 stillbirths during the year, 2 less than in 1959, giving a rate of 19·18. A detailed enquiry into the cause of each was carried out, of which the findings are shown on page 23.

Year	Live Births			Stillbirths		
	Nottingham		England & Wales	Nottingham		England & Wales
	Number	Rate	Rate	Number	Rate	Rate
1947 ..	6,960	23·9	20·6	156	21·9	24·1
48 ..	5,887	19·82	17·9	141	23·3	23·2
49 ..	5,703	19·96	16·7	116	19·9	22·7
50 ..	5,363	17·47	15·8	107	19·5	22·7
51 ..	5,203	16·97	15·5	114	22·72	23·0
52 ..	5,191	16·71	15·3	120	22·58	22·7
53 ..	5,185	16·64	15·5	107	18·97	22·5
54 ..	5,001	16·05	15·2	101	19·79	23·5
55 ..	4,893	15·67	15·0	125	24·91	23·2
56 ..	5,155	16·50	15·6	125	23·67	22·9
57 ..	5,478	17·52	16·1	109	19·51	22·5
58 ..	5,577	17·82	16·4	131	22·95	21·6
59 ..	5,624	17·95	16·5	114	19·87	21·0
60 ..	5,727	18·25	17·1	112	19·18	19·7

Infant Mortality. The number of deaths occurring in children under 1 year of age was 131; the infant mortality rate was 22·87. The tables overleaf show a comparison of local and national rates and an analysis of the causes of death.

Year	Nottingham		England & Wales
	Number	Rate	Rate
1947 ..	351	50	41.4
48 ..	261	44	33.9
49 ..	219	38	32.4
50 ..	165	31	29.6
51 ..	170	32.7	29.7
52 ..	146	28.13	27.6
53 ..	140	27.00	26.8
54 ..	122	24.35	25.4
55 ..	137	28.00	24.9
56 ..	113	21.92	23.7
57 ..	126	23.00	23.1
58 ..	123	22.05	22.2
59 ..	136	24.18	22.0
60 ..	131	22.87	21.7

Death due to	Number of deaths							
	1953	1954	1955	1956	1957	1958	1959	1960
Prematurity ..	49	33	34	35	36	44	34	38
Congenital malformations ..	17	22	32	18	31	29	27	21
Birth injuries ..	16	11	10	7	13	9	15	8
Atelectasis ..	6	1	4	9	4	1	8	14
Respiratory diseases ..	30	28	41	21	28	27	35	25
Gastro intestinal infection ..	5	3	2	2	2	1	1	4
Other causes ..	17	24	14	21	12	12	16	21
	140	122	137	113	126	123	136	131

Neo-Natal Mortality. During the first month of life 86 infants failed to survive, the death rate being 15.02, calculated as the number of deaths under four weeks per 1,000 live births.

The result of a detailed enquiry into each death is given on page 24.

Death rates per 1,000 live births		
Year	Under 4 weeks	From 4 weeks to 1 year
1951 ..	19.80	12.9
52 ..	17.91	10.22
53 ..	16.39	10.61
54 ..	14.80	9.55
55 ..	16.76	11.24
56 ..	15.13	6.79
57 ..	15.15	7.85
58 ..	15.42	6.63
59 ..	17.25	6.93
60 ..	15.02	7.85

Early Neo-Natal Mortality. The number of deaths was 69, giving a rate of 12·05 (number of deaths occurring during the first week of life per 1,000 live births).

Peri-Natal Mortality. There were 181 deaths. The rate of 31·00 has been calculated from the number of stillbirths and deaths occurring during the first week of life per 1,000 live and stillbirths.

An analysis of the cause of death is given; prematurity still remains the chief factor, as will be seen from the table below.

Primary factors in causation	Deaths	
	Total	Premature infants
Ante-natal causes:		
Toxaemia including haemorrhage ..	18	12
A.P.H. without toxaemia	14	12
Rh. incompatibility	3	2
Intra-natal causes:		
Injury	13	9
Asphyxia	13	—
Other	—	—
Post-natal causes:		
Infection only	4	2
Congenital malformation	30	19
Prematurity only	38	38
Other causes	7	3
Unknown	41	24
All causes	181	121

Illegitimate Births. A table is given in which are shown the number of illegitimate births which occurred and also the percentage of the total number of live births. A contrast is made with that for the country as a whole.

This figure shews a decline, but is, even so, in advance of that of about a decade ago.

Year	Illegitimate Live births		
	Nottingham		England & Wales
	Number	% of total	% of total
1949 ..	442	7.8	5.1
50 ..	386	7.2	5.1
51 ..	342	6.7	4.8
52 ..	382	7.4	4.8
53 ..	366	7.1	4.7
54 ..	375	7.5	4.7
55 ..	354	7.2	4.7
56 ..	384	7.4	4.8
57 ..	457	8.3	4.8
58 ..	514	9.2	4.9
59 ..	547	9.7	5.1
60 ..	491	8.6	N.A.

The infant mortality rate for illegitimate children was 22.40 as compared with 20.11 last year; the corresponding rate for those born in wedlock was 22.91.

Prematurity. The number of live babies born prematurely was 465, being 8.12% of the total live births. Of the stillborn, 70 were premature as also were 72 of the infants who died during their first year.

The neo-natal mortality rate per 1,000 premature babies was 122.58 compared with 5.51 for mature infants. The death rate from 4 weeks to 1 year was 32.25 for premature and 5.70 for mature babies.

From the table on page 23 it can be seen that maternal toxæmia caused 17.4% and congenital malformation 24.6% of the deaths of babies born dead and prematurely.

Mortality of premature babies related to weight and place of birth

Birth weight	Born at home							Born in hospitals and nursing homes		
	No. born	Transferred to hospital			Nursed at home			No. born	No. died	%
		No.	Died	%	No.	Died	%			
Up to & incl. 3 lb. 4 oz...	6	5	2	40.0	1	0	0	46	33	71.74
3 lb. 4 oz.—4 lb. 6 oz...	16	14	1	7.14	2	0	0	75	16	21.33
4 lb. 6 oz.—4 lb. 15 oz.	29	6	0	0	23	0	0	57	2	3.51
4 lb. 15 oz.—5 lb. 8 oz...	79	4	2	50.0	75	0	0	157	1	0.63
TOTALS ..	130	29	5	17.24	101	0	0	335	52	15.52

Maternal Deaths. There were eight deaths of mothers, two of whom were not resident in the City. The maternal mortality rate was 1.03. The cause of death was certified in each case as follows:—

1. I (a) Pulmonary embolism aged 39 years
(b) Stasis ulceration of left leg
6 months pregnant. Post mortem examination.
2. I (a) Mitral stenosis aged 32 years
(b) Chronic rheumatic heart disease
II Pregnancy. Post mortem examination.
3. I (a) Pulmonary embolus aged 38 years
(b) Left internal iliac vein thrombosis
(c) Recent childbirth. Post mortem examination.
- *4. I (a) Pulmonary embolus aged 23 years
(b) Pregnancy and previous thrombosis.
5. I (a) Acute yellow atrophy aged 19 years
(b) Pre-eclamptic toxæmia. Post mortem examination.
6. I (a) Pulmonary embolus aged 29 years
II 17 days delivered. Post mortem examination.
7. I (a) Uraemia aged 23 years
(b) Carcinomatosis
(c) Granulose cell carcinoma of ovary
12 weeks pregnant
Abdominal hysterotomy.
- *8. I (a) Chronic diabetes (unstable) aged 23 years
complicated by
(b) Pregnancy and miscarriage. Post mortem examination.

* Not resident in the City.

The "Report on Confidential Enquiries into Maternal Deaths in England and Wales 1955-1957" showed that while toxæmia of pregnancy continued to be the highest cause of death, the second was pulmonary embolism. Contrary to the national findings, the latter accounted here for half the deaths which occurred, each case being associated with venous thrombosis in the pelvis or leg.

ANALYSIS OF STILLBIRTHS

	Born at			Legitimate	Sex		Premature	Maceration	Post mortem	Other complica'tns.			A.N.care*			Place in family					Age of mother									
	Hospital	Home	Nursing Home		M.	F.				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			
Total	23	20	3	-	21	8	15	17	8	4	5	4	14	9	11	3	11	4	1	1	6	4	6	1	6	-	-	-	-	-
Congenital malformation ..																														
Hazard of birth :																														
(a) Injury ..	2	2	-	-	2	1	1	-	-	2	1	1	-	1	1	-	1	-	1	-	-	-	1	-	1	-	-	-	-	-
(b) Asphyxia ..	6	5	1	-	6	3	3	-	-	3	3	1	2	4	1	1	1	1	1	2	-	-	2	1	1	2	-	-	-	-
(c) Other ..	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Maternal toxæmia																														
(a) With A.P.H.†	9	9	-	-	9	4	5	8	2	3	1	1	7	7	2	-	3	3	1	1	1	1	5	2	-	1	-	-	-	-
(b) No A.P.H. ..	9	9	-	-	9	5	4	4	3	4	3	1	5	5	4	-	1	3	-	-	5	-	1	-	4	4	-	-	-	-
A.P.H. without toxæmia ..	14	13	1	-	14	8	6	12	3	3	3	4	7	8	4	2	1	4	2	1	6	-	1	3	5	4	1	-	-	-
Rhesus incompatibility ..	3	3	-	-	2	2	1	2	1	2	1	-	2	1	2	-	-	1	-	1	1	-	-	2	-	-	1	-	-	-
Other causes ..	5	4	1	-	4	1	4	2	3	2	2	1	2	2	2	1	2	1	1	-	1	-	3	1	1	-	-	-	-	-
Unknown ..	41	27	13	1	37	19	22	24	27	3	14	1	26	17	13	11	17	8	5	2	9	8	11	9	6	5	2	-	-	-
TOTAL ..	112	92	19	1	104	51	61	69	47	26	33	14	65	54	40	18	37	25	12	7	31	13	30	24	19	22	-	-	-	-

* 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 " " 6 " " " second " " " "

Inadequate attendances only in last 3 months.

† Ante-partum hæmorrhage.

ANALYSIS OF NEO-NATAL DEATHS

	Total	Born at			Sex	Premature	Age at death				Post mortem	Other complic'ns.				A.N.care*			Place in family				Age of mother								
		Hospital	Nursing Home	Legitimate			M. F.	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 ..	11	7	4	-	11	6	5	2	3	1	3	4	9	2	1	8	5	5	1	4	2	1	1	3	-	5	2	1	2	1	-
Hazard of birth :																															
(a) Injury ..	12	9	3	-	11	9	3	9	4	4	3	1	8	4	1	7	3	9	-	6	1	4	1	-	1	2	4	1	3	1	-
(b) Asphyxia ..	7	5	1	1	6	3	4	-	6	1	-	-	6	-	3	4	4	3	-	1	1	2	1	2	1	1	2	1	2	-	-
(c) Other ..	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Rhesus incompatibility ..	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Infection :																															
(a) Resp'y. ..	6	3	3	-	6	2	4	2	-	-	2	4	6	1	-	5	2	3	1	1	2	1	2	-	-	3	3	-	-	-	-
(b) Gastro-intest. ..	1	1	-	-	1	1	-	-	-	-	-	1	-	-	-	-	1	-	-	-	-	-	1	-	-	1	-	-	-	-	-
(c) Other ..	7	3	4	-	7	5	2	2	-	-	2	5	3	1	2	4	4	3	-	2	1	2	2	-	-	5	2	-	-	-	-
Prematurity only ..	39	39	-	-	35	19	20	39	27	3	8	1	9	17	9	13	14	12	13	17	6	6	3	7	3	17	9	6	1	3	-
Other causes ..	2	-	2	-	2	2	-	1	2	-	-	-	1	-	-	2	1	-	1	-	-	1	1	-	-	-	-	-	1	1	-
Unknown ..	1	1	-	-	-	1	-	1	-	-	-	1	-	-	-	1	1	-	-	-	1	-	-	-	-	-	1	-	-	-	-
TOTAL ..	86	68	17	1	79	48	38	56	42	9	18	17	42	26	16	44	35	35	16	31	14	17	12	12	5	34	23	9	9	6	-

* 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 " " 6 " " " " second " " " "
 Inadequate attendances only in last 3 months.

MIDWIFERY SERVICE

The domiciliary midwives attended 2,876 or 50·2% of the total of confinements within the City. In addition, they continued the nursing, on their return home after confinement, of 544 initially booked mothers who had been admitted to hospital because of abnormality.

Midwives' booking clinics were established at 8 centres instead of midwives going to the mother's home. This arrangement has proved an invaluable saving of a busy midwife's time. In addition, bookings were made at two centres at the same time as the doctor's sessions.

Midwives continued to attend at the surgeries of 6 general practitioners.

Maternity Medical Services. More general practitioners were booked by mothers although fewer in proportion attended at domiciliary confinements, 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
52	2,534	996	39·3	307	12·1
53	2,680	1,251	46·7	363	13·5
54	2,541	1,355	53·3	352	13·9
55	2,521	1,478	58·6	323	12·8
56	2,646	1,705	64·4	292	11·0
57	2,844	1,972	69·2	308	10·8
58	2,863	2,088	72·9	274	9·6
59	2,933	2,105	71·8	247	8·4
60	2,876	2,237	77·7	214	7·4

Medical Aid. Calls continued to increase, as indicated in the table on page 33.

Eye Conditions. There were 7 notified cases of ophthalmia neonatorum, of which 1 occurred in hospital.

In addition 162 other eye infections required supervision.

Maternity Emergency Service. There was a slight increase in the use of the obstetric unit from the City Hospital to emergencies in home confinement, as is shown in the table.

USE OF OBSTETRIC UNIT			
	1958	1959	1960
Post partum haemorrhage, primary	18	5	11
" " " secondary	1	—	1
" " " with shock	—	4	3
Retained placenta	17	17	19
" " and post partum haemorrhage ..	7	7	4
" " and delay in second stage ..	1	—	—
Uterine inertia	—	1	—
Severe anaemia	—	1	—
Prolapsed cord	1	—	—
Ante partum haemorrhage	2	1	3
Malpresentation	2	1	—
Foetal distress	—	1	—
Obstetric shock	2	1	2
Asphyxiated baby	—	1	1
Eclampsia	—	—	2
Abortion	—	—	1
	<u>51</u>	<u>40</u>	<u>47</u>

Hospital Admission. There were 53 admissions to hospital at the midwives' request, an increase of 23 since last year.

Hospital Confinements. Arrangements were made for 445 mothers to be delivered in hospital because of unsatisfactory home conditions; most of them were immigrants, approximately half the number being West Indian. An analysis is given of the applicants' homeland.



A midwife's equipment —



— 4 Stones of it!

	1957	1958	1959	1960
Country of origin	Number of applicants			
British Isles	402	476	412	444
West Indies	167	229	161	223
India and Pakistan ..	19	27	22	31
Others	41	27	20	26

Analgesia. The use of pethidine during confinement decreased during the year; it was administered to 892 mothers. It was combined with gas and air analgesia in 589 cases, with trichloroethylene in 127 and with both in 12 cases.

Inhalation analgesia was used in 1,934 or 66·9% of domiciliary confinements. Gas and air was administered to 1,480 mothers, trichloroethylene to 442, and both to 12.

Groups of midwives shared the eleven sets of apparatus which were available for the giving of trichloroethylene.

Oxygen. Each midwife carried a "Sparklet" apparatus; oxygen was administered to 31 babies by inhalation.

Transport. Allowances were made to 31 midwives who used their own car in the course of their duties; 2 motor scooters were in use and 14 cycles; there were 6 learner-drivers; in addition two cyclists have been approved for car allowances. On occasion, the Council's car service was used when necessary.

Relief Arrangements. Owing to the arduous nature of the midwife's work, the Ministry of Health has requested Local Authorities to give details of the arrangements in operation for relief duty.

The domiciliary midwives worked in pairs, relieving each other as far as possible for off duty, holidays and sick leave. The off-duty consisted of 38 hours (two consecutive nights and the intervening day) for three weeks out of every four, an 18 hour period at two weekends, and 110 hours at the fourth weekend, allowing five consecutive nights off duty; this period included the off-duty day of the following week.

The possibility of introducing a night rota system has been discussed with the midwives; but the majority were not in favour of it on account of the frequency of fog.

X-ray Examination. By October 1st arrangements were complete for large film chest x-ray examination of all mothers attending the City's ante-natal clinics. With the co-operation of the appropriate hospital management committee these examinations were carried out at the City Hospital, Highbury Hospital, the General Hospital and the Forest Dene Chest Clinic. 504 attended and there were 222 defaulters.

Blood Examination. There was an increase in the number of examinations. The obstetricians at the City Hospital requested that all women sent for admission on social grounds should have had blood examinations completed before being referred. This was the practice for women referred from the ante-natal clinics, but it was necessary to make similar arrangements for mothers attending general practitioners. There was an increase in the number referred by the latter, mostly requested on social grounds. For this group 574 first samples of blood were taken for haemoglobin estimation and W.R. testing, 331 of these required blood grouping and rhesus testing, while 79 further samples were required for examination for rhesus antibodies and 73 for haemoglobin re-estimations. Haemoglobin estimations were carried out in 65·6% of domiciliary cases.

In some instances, haemoglobin and W.R. investigations and blood grouping were not carried out by general practitioners undertaking the ante-natal care of patients who were booked for home confinement.

In total, 1,896 first and 1,434 repeat specimens were taken for haemoglobin examination and 796 blood films were examined. A total of 1,326 blood samples was sent for blood grouping and rhesus typing.

Midwives took samples from mother and baby on 104 occasions at the request of the Regional Blood Transfusion Laboratory. On 4 occasions samples of the mother's saliva were forwarded on request when the presence of rare antibodies was suspected.

Relaxation and Mothercraft. As formerly, these were held at 5 centres; another class was instituted at the Ernest Purser Welfare Centre. The classes were designed primarily for mothers expecting to be confined at home, the hospitals making their own provision for booked patients.

Altogether 483 mothers attended a total of 286 sessions, the average attendances being 5.9.

Consultant Clinic. There was an increase of expectant mothers referred to this weekly clinic at the Edwards Lane Welfare Centre; 459 attended together with 4 in the post-natal period as well as 510 return cases.

Home Care of Premature Babies. Of 11 midwives trained for this work, three full time midwives and one part-time carried out these specialised duties.

CARE OF PREMATURE BABIES

Premature babies born at home	130
Subsequently removed to hospital	29
Discharged from hospital for domiciliary care	203
Visits paid during the year	5,592

Staff. The staff consisted of 46 full-time midwives and 4 employed part-time for nursing only. Three midwives left and 10 full-time and 3 part-time midwives joined the staff. In September a full-time relief midwife was appointed, for whom it was necessary to provide transport. On the basis of the recommendation of the Cranbrook Committee 55 full-time midwives would be required to meet the needs of the present population.

Owing to long periods of sickness and 3 midwives absent on maternity leave, the increase in staff made no reduction in the case load; this was 111 for a midwife with a pupil and 87 for a midwife working alone.

Sickness accounted for the loss of 465 days, and there were 378 days for maternity leave; on the basis that each midwife took 131 off duty days, the total time lost was the equivalent of $3\frac{1}{2}$ midwives.

In February, Miss E. S. Creer resigned her position as Non-medical Supervisor of Midwives to take up a similar post in Liverpool; the senior assistant, Miss P. J. Lambert, succeeded her.

Miss I. Strickson retired in September after 30 years as a midwife in Nottingham, 23 of them with this authority. In 1953 she was awarded a Coronation Medal in recognition of 16 years continuous service.

Miss M. Tomlinson retired on 13th November from full-time duties as a midwife after 32 years' work, 19 of which were spent with this authority, and having spent the last 10 years as a premature baby midwife. She commenced part-time duties on 14th November, as temporary assistant to the non-medical supervisor.

Training. Statutory refresher courses were attended by 8 midwives; in addition 2 midwives attended Parentcraft Courses and one attended the first course organised by the Royal College of Midwives for those interested in the training of midwives.

University College Hospital, London, sent 8 medical students to Nottingham for training in domiciliary midwifery. As in former years they lodged at the City Hospital and at the Women's Hospital. They attended 20 out of 48 calls.

Midwifery Training. In association with the Firs Maternity Hospital, 29 places were provided for the district training of pupil midwives for Part II of the Certificate of the Central Midwives Board.

CONFINEMENTS IN THE CITY

PLACE	NOTTINGHAM mothers			NOTTINGHAMSHIRE mothers etc.			TOTALS
	Total	Live	Stillborn	Total	Live	Stillborn	
At home—conducted by midwife ..	2,662	2,648	14	6	6	—	2,668
" " " acting as maternity nurse ..	214	209	5	—	—	—	214
" " " by doctor ..	3	3	—	—	—	—	3
" " " conducted by midwife ..	3	3	—	—	—	—	3
" " " in private practice ..	3	3	—	—	—	—	3
" " " no-one in attendance ..	3	3	—	—	—	—	3
Hospitals—City ..	2,885	2,866	19	6	6	—	2,891
Firs ..	1,882	1,805	77	446	424	22	2,328
Women's ..	477	474	3	393	387	6	870
" " " ..	233	226	7	1,144	1,091	53	1,377
" " " St. Mary's Annexe ..	25	25	—	84	84	—	109
Highbury ..	161	159	2	826	810	16	987
Nursing Homes—St. Idloes ..	2,778	2,689	89	2,893	2,796	97	5,671
County midwives ..	62	61	1	54	52	2	116
" " " ..	62	61	1	54	52	2	116
TOTALS ..	5,726	5,617	109	2,953	2,854	99	8,679

MULTIPLE DELIVERIES

PLACE OF CONFINEMENT	Twins		
	Total	City	Out of City
At home—conducted by midwife	7	7	—
“ “ “ “ “ acting as .. maternity nurse	6	6	—
Hospitals—City	61	47	14
Firs	6	4	2
Women's	31	7	24
“ St. Mary's Annexe	—	—	—
Highbury	16	3	13
Nursing Homes	—	—	—
TOTALS	127	74	53

MEDICAL AID CALLS TO DOCTORS

Aid was sought for:—

Mothers—	1953	1954	1955	1956	1957	1958	1959	1960
Ruptured perineum	360	412	376	387	447	517	533	581
Pyrexia	59	54	41	55	101	69	73	61
Abnormal presentation ..	23	19	22	36	45	42	45	60
Prolonged labour ..	65	52	46	61	74	87	83	103
Ante-partum haemorrhage ..	56	38	41	36	52	61	70	69
Post-partum haemorrhage ..	33	44	39	38	45	52	43	47
Retained placenta ..	27	28	20	18	25	22	30	32
Obstetric shock ..	8	10	2	3	2	—	5	4
Abortion and miscarriage ..	37	15	28	34	39	32	23	21
Phlebitis	11	17	10	5	32	23	17	22
Premature labour	30	33	49	42	68	66	62	58
Pre-eclamptic toxæmia *	*	*	*	*	37	17	28	70
Hypertension ..	*	*	*	*	*	20	9	15
Breast conditions ..	*	*	*	*	*	34	29	27
Urinary conditions	*	*	*	*	*	18	11	11
Foetal distress ..	*	*	*	*	*	44	31	62
Premature rupture of membranes ..	*	*	*	*	*	*	32	29
Anaemia	*	*	*	*	*	*	7	7
Other conditions ..	76	103	147	174	106	31	68	85
	785	825	821	889	1,073	1,135	1,199	1,364

* Previously included in "other conditions".

Infants—	1953	1954	1955	1956	1957	1958	1959	1960
Prematurity ..	25	23	11	13	14	20	11	13
Stillbirths ..	29	2	3	5	7	7	2	1
Asphyxia and cyanosis ..	15	28	14	21	21	30	31	17
Jaundice ..	12	6	7	6	2	10	7	7
Deformity ..	9	17	13	7	8	17	17	9
Skin conditions ..	13	8	15	2	16	15	18	12
Eye discharges ..	149	139	127	134	143	133	140	163
Respiratory disorders *	*	*	*	*	*	12	16	16
Alimentary conditions *	*	*	*	*	*	12	5	4
Other conditions ..	39	64	55	26	50	11	21	32
Sent to Eye Infirmary for advice ..	11	—	—	—	—	—	—	—
	<u>302</u>	<u>287</u>	<u>245</u>	<u>214</u>	<u>261</u>	<u>267</u>	<u>268</u>	<u>274</u>

* Previously included in "other conditions"

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+
15	4	11	13	2	3	5	5	2	—

ADMISSIONS TO CITY HOSPITAL DIRECT FROM CITY MIDWIVES

Mothers—	1956	1957	1958	1959	1960
Retained placenta ..	3	3	5	1	—
Premature labour ..	7	7	5	9	13
Ante-partum haemorrhage	4	4	7	10	10
Post-partum ..	—	5	4	1	2
Threatened abortion ..	—	1	—	—	2
Toxaemia ..	—	1	—	2	3
Prolonged labour ..	2	2	—	1	5
Malpresentation ..	2	1	3	2	5
Unbooked social emergency	2	—	—	—	1
Hypertension ..	1	1	3	—	—
Foetal distress ..	—	1	—	—	2
Other conditions ..	—	—	6	—	2
Premature rupture of membranes ..	—	—	—	—	7
	<u>21</u>	<u>26</u>	<u>33</u>	<u>26</u>	<u>52</u>
Infants—					
Cyanosis ..	—	3	—	—	—
Haemoptysis ..	—	1	—	—	—
Prematurity ..	—	—	—	4	1

REQUIREMENTS OF CENTRAL MIDWIVES BOARD

In June the Central Midwives Board published its twenty-third edition which contained a number of amendments in the Code of Practice of the Board. Among others, the term "maternity nurse" was abolished, and it was no longer necessary for a midwife to notify the local supervising authority of the introduction of artificial feeding.

Midwives' notifications to Local Supervising Authority:

	1956	1957	1958	1959	1960
Notifying liability to become a source of infection ..	198	158	95	99	70
* ,, commencement of artificial feeding:					
domiciliary cases ..	191	220	225	238	127
institutional cases	603	304	322	393	282
,, death of infants—					
as midwives ..	4	3	5	10	2
* ,, as maternity nurses ..	1	2	2	1	—
,, stillbirths—					
as midwives ..	17	17	22	15	14
* ,, as maternity nurses ..	8	12	5	3	5
,, intention to practise ..	..	152	143	139	162

* Notification discontinued July 1st.

Distribution:

Domiciliary service ..	49				
City Hospital ..	26				
Firs Maternity Hospital ..	13				
Women's Hospital ..	21				
Highbury ..	16				
Nursing homes and Nursing co-operations ..	5				
Private practice ..	4				
	—	134			
Ceasing to practise in this area ..	..	..	28		
Practising at end of year ..	..	..	134		

VISITS BY MIDWIVES

Ante-natal ..	..	..	23,668	
Post-natal ..	..	..	51,813	
Special ..	..	..	6,896	

HEALTH VISITING

Staff. The staffing position in this service remained approximately the same. Four health visitors who had completed the course of training in Nottingham, and one from the training course at the Battersea Polytechnic were appointed.

Resignations were received from five health visitors and one employed part-time; at the end of the year, there were two part-time and 31 full-time health visitors, and eight clinic nurses.

Home Visits. Health visitors were relieved of some of their clinic duties by the employment of clinic nurses; this enabled them to increase the number of selective home visits, particularly those to the homes of pre-school children.

HOME VISITS

VISITS IN CONNECTION WITH	1955	1956	1957	1958	1959	1960
Pre-school children:						
Primary visits	4,706	5,024	5,332	5,398	5,346	5,500
Revisits under 1 year ..	40,958	33,306	34,237	35,287	35,081	36,529
,, 1-5 years	53,160	48,360	48,969	53,085	53,998	55,275
Expectant mothers:						
Primary visits	340	375	350	440	419	476
Revisits	181	329	320	391	357	476
Old people:						
Primary visits	737	452	565	532	474	567
Revisits	4,312	3,795	3,568	4,107	4,299	4,332
Stillbirth enquiry	47	58	43	64	61	45
Neo-natal	35	21	34	20	23	13
B.C.G. vaccination	1,130	1,265	963	378	4	4
Vaccination and immunisation	23	92	178	131	61	484
Infectious disease	35	1,075	115	32	4	2
Hospital after-care	50	105	163	105	175	78
Boarding-out	8	—	—	—	—	—
Housing	10	58	135	120	94	45
Diabetic	7	119	99	97	57	103
Eye conditions	167	180	129	74	39	13
Other	2	377	582	363	638	312
TOTAL NUMBER OF HOME VISITS	105,908	94,991	95,782	100,624	101,130	104,254
" NO ACCESS " VISITS	19,584	15,309	14,278	15,575	18,463	19,669

Dental Care. Mothers and Children. During 1960, arrangements continued to be supervised by the Principal School Dental Officer. Treatment for children of pre-school age was made available at most of the school dental clinics, thereby reducing delay in the treatment of urgent cases. Dental treatment of mothers continued to be available at the General Dispensary and at the Central School Clinic in Chaucer Street, where dental X-ray examinations were also carried out.

No dental inspections were attempted at welfare centres or nurseries owing to lack of dental officer staff. Patients continue to be referred by medical officers of welfare centres and by general medical practitioners.

Dental Inspection and Treatment	Mothers			Children		
	1958	1959	1960	1958	1959	1960
Number examined ..	616	530	463	464	463	422
„ needing treatment ..	589	527	461	430	437	410
„ treated ..	457	490	451	374	437	406
„ made dentally fit ..	386	440	398	374	Nil	149
1. No. of sessions ..	106	108	101	22	22	19.5
2. „ „ attendances for inspection and treatment	1,441	1,449	1,366	436	493	475
3. Scalings and gum treatment ..	58	58	44	—	—	—
4. No. of fillings ..	140	100	76	3	8	4
5. Silver nitrate treatment only ..	13	8	2	—	—	—
6. No. of crowns and inlays ..	—	—	—	—	—	—
7a. „ „ teeth extracted under general anaesthetic ..	2,448	2,783	2,589	839	1,073	1,125
7b. „ „ teeth extracted under local anaesthetic ..			285	—	—	—
8. „ „ general anaesthetics ..	497	545	533	400	480	453
9a. Dentures provided: full upper or lower ..	130	166	200	—	—	—
9b. partial upper or lower ..	58	48	44	—	—	—
10. Radiographs ..	24	14	13	—	—	—
11. Other operations ..	N.A.	N.A.	484	—	—	—

Welfare Centres. The Welfare Centre at Huntingdon Street was closed on 16th June and on 20th June clinic facilities commenced at the Baptist Chapel, Sherwood Rise.

For attendances see page 41.

Deafness in Pre-School Children. Routine screening tests were carried out at all the Infant and Toddler clinics with the exception of those held at Sherwood Rise and Bilborough; other arrangements were made for the testing of children living in these two districts.

Altogether 636 children were tested as follows:—

Aspley	87
Basford	117
Bulwell	29
Edwards Lane	125
Ernest Purser	102
Radford	45
Sneinton	94
Hyson Green	24
John Ryle	13

Co-operation with Hospitals and General Practitioners.

Throughout the year family doctors and the health visitors worked closely together, particularly in matters relating to young children and the elderly, and one health visitor continued to give health education talks to expectant mothers in a general practitioner's surgery.

Health visitors continued to attend the diabetic clinics at both the City Hospital and General Hospital, providing the link between the home and the consultant physician. The Deputy Superintendent Health Visitor continued to attend the former and another health visitor the latter hospital to confer with the almoners on the care of patients on their return home.

Upbringing of Infants. The enquiry into the habits and customs usual in the care of infants conducted by the Professor of Philosophy at the University of Nottingham was completed in August 1960, after the health visitors had returned 507 questionnaires. The results are expected to be published in 1961, and are awaited with interest.

Refresher Courses. One health visitor attended a course arranged by the Royal College of Nursing in London in July; one attended that of the Women Public Health Officers' Association held at Oxford, in the same month, and a third the Association's Winter School in London in December.

Consultant Clinics. The paediatric clinic was transferred from Huntingdon Street to the Ernest Purser Welfare Centre in July 1960. A total of 51 new cases was referred by medical officers to the consultant paediatrician, and 155 children were seen as return cases.

There were 24 children examined at the ear, nose and throat clinic held at the Edwards Lane Welfare Centre; of those 14 were recommended for operation.

The number of children recommended for orthopaedic care was 36; flat feet and knock knees continued to be the commonest conditions requiring referral.

Transport. Allowances for the use of their cars were made to 9 health visitors.

Health Visitors' Training Course. This course of three terms' duration was continued jointly with Nottinghamshire and was held at the Adult Education Centre of the University of Nottingham.

The present course commenced on 3rd October with 7 students for the city, 3 for Nottinghamshire, 4 for Derbyshire, 1 for the County of Lincoln, parts of Lindsey, 1 for Sheffield, 1 for Barnsley, and 1 independent student. Practical training was arranged for the students in rural and urban areas.

A total of 182 students has been trained since the commencement of the course in 1947, and 80 have entered the City Service.

Welfare Foods. Arrangements continued for the distribution of dried milk and vitamin preparations at all infant clinics and at the distribution centre at Canning Circus. The Women's Voluntary Service continued distribution at the centre held at the Clifton Youth Club.

Amounts distributed	1956	1957	1958	1959	1960
National dried milk — 20 oz. tins ..	186,681	140,582	110,013	107,133	93,740
Orange juice — 6 oz. bottles ..	246,403	253,348	164,260	173,315	161,353
Cod liver oil — 6 oz. bottles ..	34,748	29,060	18,043	18,320	17,651
Vitamin tablets — packets of 20 ..	18,787	17,539	17,860	17,608	17,651

Birth Control. The Nottingham Women's Welfare Centre held sessions at the General Dispensary three times a week; a total of 117 sessions took place. The Health Committee continued its annual subscription.

The following table shows the number of women attending.

Attended on own initiative	635
From Maternal and Child Welfare Centres	52
„ Chest Clinic	16
„ Practitioners	204
„ City Hospital	8
„ Health Visitors	6
„ Probation Officers	5
„ Neighbouring towns	474
„ Sub-Fertility	5
„ Marriage Guidance	20
Transfers	71

ATTENDANCES AT WELFARE CENTRES.

	ANTE-NATAL AND POST-NATAL CLINICS						INFANT CLINICS				TODDLER CLINICS			
	No. of sessions	New cases	Return visits	Post-natal visits	Total attendances	Average per session	No. of sessions	New cases	Attendances	Average per session	No. of sessions	New cases	Attendances	Average per session
Aspley ..	100	156	1,182	56	1,394	13.9	100	248	3,377	33.8	42	6	401	9.6
Bilborough ..	51	59	418	26	503	9.8	48	184	2,145	44.7	43	31	476	11.1
Basford ..	48	94	674	39	807	16.8	96	240	4,304	44.8	51	5	541	10.6
Bulwell ..	54	174	1,021	76	1,271	23.5	99	279	3,861	39.0	39	8	491	12.6
Edwards Lane ..	48	112	829	37	978	20.4	99	220	4,598	46.4	51	15	919	18.0
Ernest Purser ..	103	234	1,526	96	1,856	18.0	103	417	4,558	44.3	47	5	431	9.3
*Huntingdon Street	137	497	1,420	76	1,993	14.5	102	439	3,525	34.6	51	16	456	8.9
Hyson Green ..	—	—	—	—	—	—	100	397	6,110	61.1	—	—	—	—
Jarvis Avenue ..	—	—	—	—	—	—	48	87	1,455	30.3	21	26	185	8.8
John Ryle H.C. ..	51	37	365	27	429	8.4	146	494	5,427	37.2	48	22	646	13.5
Lenton Abbey ..	—	—	—	—	—	—	12	19	179	14.9	—	—	—	—
Radford ..	151	370	1,767	115	2,252	14.9	151	522	5,342	35.4	64	50	926	14.5
Sneinton ..	102	256	1,513	79	1,848	18.1	101	444	4,857	48.1	52	50	516	9.9
Wollaton ..	—	—	—	—	—	—	39	117	1,717	44.0	—	—	—	—
TOTALS ..	845	1,989	10,715	627	13,331	15.7	1,244	4,107	51,455	41.4	509	234	5,988	11.8
Consultant clinic ..	51	459	510	4	973	19.0								

* Clinic held at Sherwood Rise from 20.6.1960

DAY NURSERIES

The number of places in seven nurseries was 269, being 23 for children 0-6 months old, 83 for those 6 months-2 years and 163 for children aged 2-5 years.

Priority for Admission. Social need continued to be the sole criterion for admission; urgent cases were placed immediately as waiting lists were small.

Reason for admission	1955	1956	1957	1958	1959	1960
Parent sole bread-winner ..	34%	41%	45%	46%	47%	47%
Family income insufficient	25%	15%	11%	6%	19%	16%
Parent invalid, in prison, etc.	10%	8%	13%	19%	4%	8%
Bad housing conditions ..	17%	18%	13%	10%	14%	9%
Mother a nurse, teacher, etc.	5%	7%	6%	5%	4%	5%
Temporary special requests	9%	11%	12%	14%	12%	15%

Infectious and other Diseases. At the end of January there was an outbreak of dysentery in Queen's Drive Nursery where 16 children and 1 member of the staff were affected; the nursery was closed to new admissions for 5 weeks.

Sycamore Road Nursery had a similar outbreak in February involving 4 children and 2 staff; no new children were admitted during the 4 weeks of quarantine.

Pierrepoint Nursery also had an outbreak affecting 17 children and 4 staff; admissions were resumed after 4 weeks. In each nursery children who were found to be infected but without symptoms were not excluded.

The number of children suffering from infectious diseases which, in the aggregate, necessitated the imposition of quarantine measures for 47 weeks is given in the table below:—

Infectious Disease	Number of cases						
	1954	1955	1956	1957	1958	1959	1960
Measles ..	5	163	—	60	62	48	43
Sonne dysentery	73	32	84	14	15	30	51
Chicken pox ..	33	30	12	28	1	2	15
Mumps ..	19	14	12	11	—	10	1
Whooping cough	11	7	6	—	—	—	1
German measles..	2	4	45	22	2	—	—
Scarlet fever ..	3	3	1	—	3	—	1
Poliomylitis ..	—	1	1	—	—	—	—
Gastro-enteritis ..	—	—	—	—	12	—	—
Tuberculosis ..	—	—	—	—	1	—	—

Attendances. The total for the year was 50,532.

Age Groups	Average daily attendance							
	1953	1954	1955	1956	1957	1958	1959	1960
0 — 6 months ..	15	11	10	10	12	11	8	10
6 months — 2 years	73	86	86	87	83	80	76	75
2 years — 5 years	165	168	170	165	148	139	136	129
TOTALS ..	253	265	266	262	243	230	220	214
Percentage total places ..	73·2%	75·9%	76·2%	75·1%	69·6%	72·0%	77·0%	79·1%

Charges. The standard daily charge remained at 7/- with a sliding scale to a minimum of 1/2d.

There were 158 applications for a reduction in fees, of which 153 were granted.

Training Centre. Students attended from the City, from the Counties of Nottinghamshire, Derbyshire, Leicestershire, Lincoln, Parts of Kesteven and Lindsey, and from the city of Lincoln. They spent two days each week at the training centre and three days in the nurseries and nursery schools.

In July a total of 39 students sat the examination of the National Nursery Examination Board; 38 were successful. In September the new session opened with 93 students of whom 50 were new entrants and 43 starting their second year.

Two students from the Children's Department attended the Training Centre for six months to gain experience of young children. They were followed by another two for a similar period.

A medical officer of the staff continued teaching sessions twice weekly at the centre.

Training Nurseries. From January to September there were 12 first year students and 12 in their second year; from September onwards there were also 12 students in each year.

NURSERIES AND CHILD MINDERS (REGULATION) ACT, 1948

During the year two applications were approved, one for 4 children and one for 3 children. Four registrations lapsed.

In December the number of minders registered was 2 making provision for 6 children.

ATTENDANCES AT DAY NURSERIES

	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
JANUARY ..	-	129	200	-	84	442	44	322	254	40	152	408	44	249	181	-	239	554	20	228	288
FEBRUARY ..	26	112	353	-	123	439	50	299	289	51	169	472	38	240	195	-	197	458	31	205	382
MARCH ..	65	202	476	-	204	506	92	341	372	31	215	485	42	312	230	-	251	541	27	181	366
APRIL ..	54	124	344	-	123	431	39	235	265	12	131	225	29	305	142	-	174	463	30	158	323
MAY ..	54	190	492	-	140	509	70	283	383	39	280	461	53	381	169	10	253	613	78	235	443
JUNE ..	11	221	408	-	123	505	75	248	392	39	279	396	54	368	183	12	227	505	94	213	360
JULY ..	-	230	344	-	40	340	68	264	418	21	209	278	75	375	188	1	229	441	82	222	312
AUGUST ..	8	128	177	-	75	236	38	108	183	24	101	224	26	207	77	15	85	176	22	90	179
SEPTEMBER	12	224	384	-	154	522	83	289	381	29	256	542	5	429	209	48	174	519	51	205	458
OCTOBER ..	6	116	238	-	137	509	75	266	333	15	247	513	-	415	216	26	224	527	49	208	477
NOVEMBER ..	32	218	396	-	134	549	48	343	373	-	232	530	-	319	162	33	277	590	27	233	449
DECEMBER ..	9	152	325	-	80	405	33	275	298	-	183	455	-	207	81	37	257	430	2	195	364
TOTALS	277	2,046	4,137	-	1,417	5,393	715	3,273	3,941	301	2,454	4,989	366	3,807	2,033	182	2,587	5,817	514	2,373	4,401
	6,400			6,810			7,929			7,744			6,206			8,586			7,288		

Age Groups A: 0-6 months. B: 6 months-2 years. C: 2 years-5 years.
 Total Attendances „ 2,355. „ 17,957. „ 30,711 Grand Total: 51,023.

THE CARE OF ILLEGITIMATE CHILDREN

As in previous years, mothers who were expecting illegitimate children were interviewed and 108 were given advice and assistance with the following result.

	1957	1958	1959	1960
Admitted to Mother and Baby Home	18	19	30	27
Awaiting admission	5	9	2	8
Confinement in hospital	17	54	31	28
,, at parents' home	11	14	9	8
,, in nursing home	—	1	1	—
Admitted to homes outside City ..	11	11	9	8
Left City before delivery	4	1	3	4
Admitted to hospital	—	—	—	1
Still under consideration	4	10	16	24
TOTAL	70	119	101	108

Mother and Baby Home. This home provided for the care of 8 mothers and 6 babies. During the year 27 mothers were admitted, 4 of these being admitted after confinement, thus constituting a change in the use of the home. Apart from mothers resident in the City, one was admitted from Nottinghamshire.

The mothers remained until suitable accommodation and employment had been found for them, the average length of stay being 7 weeks.

During their stay the health of the mothers and babies was satisfactory with the exception of two babies. One had congenital heart disease and subsequently died after returning home.

The other, a twin, sustained a fracture of the vault of the skull when his mother fell after leaving the ambulance when returning from hospital, but appeared to make a satisfactory recovery.

MOTHER AND BABY HOME

Mothers in the home 1st January	5
„ admitted before confinement	23
„ „ after confinement	4
„ returned to parents' home with baby	17
„ „ „ lodgings with baby	2
„ „ „ domestic post with baby	—
„ married putative father	—
„ leaving before confinement	1
„ returning to parents' home from hospital with baby	3
„ who cancelled booking	12
Babies admitted to Children's Home	1
„ placed for adoption	5*
Remaining on December 31st	3

* including twins

As has been observed in the country as a whole, the rise in promiscuity among young teenagers is reflected in the age distribution of such admissions to the Mother and Baby Home.

Of these young mothers from 15–18 years, seven were on probation or under supervision by the Children's Department.

AGE DISTRIBUTION

	1957	1958	1959	1960
Age groups 15-16	1	3	2	6
17-18	5	6	8	10
19-20	6	5	4	6

Homes in other Cities. The policy of sending very young or difficult mothers to homes away from the City was continued and arrangements were made for 8 such mothers.

PREVENTION OF ILLNESS, CARE AND AFTER-CARE

CARE OF OLDER PEOPLE

The expansion of services for the care of older people continued, both in the number of individuals assisted and in the extent of the services provided. The details of this progress are given under appropriate headings. The number of difficult individual problems did not change appreciably, and absorbed much time and attention, particularly the problems associated with the confused older person living alone.

Voluntary Services. The gradual expansion of the Women's Voluntary Service visiting scheme continued in close liaison with a Senior Medical Officer in the Health Department. There were 29 voluntary workers who visited old people.

Health Visiting. There were several different sources from which information about older people in need was received and these are shown in the accompanying table. The numbers referred by each agency vary widely from year to year. The total number of new cases showed an increase of nearly 20 per cent, but the number of re-visits was approximately the same as in previous years.

Agencies through which assistance was arranged by the health visitors are listed in the table below. The number of visits paid and the amount of assistance arranged indicate the extent to which this work occupies the health visitor's time.

Each week a health visitor continued to attend at the Geriatric Units of the General Hospital and the City Hospital. Similarly the preparation of sociological reports of cases on the waiting list continued.

Cases reported by	1955	1956	1957	1958	1959	1960
General practitioners ..	69	42	37	54	48	46
Geriatric unit—after care ..	116	88	125	139	116	114
" " —reports ..	40	49	80	54	53	84
Welfare Serv. Dept. ..	48	18	27	29	8	26
Relations and neighbours ..	80	38	33	44	43	46
Health Department ..	109	74	81	96	30	60
Clergy ..	—	—	3	1	1	—
Voluntary organisations ..	86	62	26	30	11	24
Health visitors ..	161	36	25	37	106	88
General Hospital ..	44	45	53	40	32	45
Others ..	—	—	—	8	26	34
Total new visits ..	753	452	490	532	474	567
Re-visits ..	4,312	3,795	3,643	4,107	4,299	4,332
	5,065	4,247	4,133	4,639	4,773	4,899

Assistance arranged through	1955	1956	1957	1958	1959	1960
General practitioner ..	240	219	157	198	118	174
Home helper ..	334	224	217	214	113	213
Public health inspector ..	40	22	25	26	35	54
Convalescence ..	19	19	14	25	32	60
Housing Department ..	27	21	23	39	42	29
Welfare Serv. Dept. ..	74	71	107	98	84	102
National Assist. Board ..	97	57	63	52	64	56
Council of Social Service ..	46	28	42	24	26	29
W.V.S. clothing ..	76	64	69	85	80	76
Blind Institute ..	16	8	16	11	8	6
General Dispensary:						
Chiropody ..	59	55	58	84	46	67
W.V.S.: Meals on wheels ..	37	35	51	78	65	66
Relatives—advice ..	180	203	145	97	113	100
Total ..	1,245	1,026	987	1,031	826	1,032

Chiropody. Following the issue of Ministry of Health circular 11/59, proposals for an extension of the chiropody service were prepared and in due course were approved by the Minister.

The new service came into operation on the 1st September and provided treatment through the agency of the Nottingham General Dispensary for three priority groups, the aged, the handicapped and expectant mothers.

New patients were recommended by general practitioners, medical officers, health visitors, home nurses, and midwives. The table shows the number of persons treated in each priority group, and the total number of treatments given.

Priority Group	No. of Patients	No. of Treatments
Aged	104	117
Handicapped	16	19
Expectant Mothers	1	2
TOTAL	121	138

Of the 121 patients, 101 were treated at surgeries of the General Dispensary, and 20 were treated at their homes.

Prior to the 1st September, the staff of the General Dispensary carried out 306 treatments at sessions reserved for cases recommended by the Health Department.

During the year, however, a large number of other patients received many thousands of treatments at the General Dispensary, being already in attendance there before the Local Health Authority's scheme came into operation. The necessary records having been kept from the 1st January, financial responsibility was accepted for **3,239 patients** who received a total of **20,731 treatments**.

NUFFIELD HOUSE

With the cessation of the grant from the Nuffield Provincial Hospitals Trust, the maintenance of the premises and other running costs of the Octagon Club for old people were taken over by the Corporation.

In the five years since it was established, Nuffield House has made a valuable contribution not only to the prevention of mental deterioration in the aged but also as a means of caring for some older people who would otherwise require admission to hospital.

This dual purpose of prevention of illness and community care forms a part of the implementation of the Corporation's proposals under the Mental Health Act, 1959.

Attendance. The average daily attendance was 50 and at the end of the year there were 92 persons on the register compared with 70 persons at the beginning of the year. Difficulties experienced by older persons in making the daily journey to the club and, in the case of new members, joining an established group, resulted in a loss of some members after an attendance of less than five days.

The tables classify the new members during 1960, according to the reason for their attendance, in three groups; those persons discharged from the mental hospital who needed day care; those living alone and who needed interests and companionship; and those living with relatives, who by their attendance both widened their interests and eased the burden of care at home. An impression of the physical and mental benefit received is also given.

During the year, ten members died and a number were admitted to hospital.

NEW MEMBERS					
MEN					
Reason for attendance	Benefitted	No change	Deteriorated	Short* stay	Total
Hospital discharge ..	5	2	1	2	10
Living alone	2	1	—	1	4
Relief for relative ..	—	2	—	—	2
TOTAL	7	5	1	3	16
WOMEN					
Reason for attendance	Benefitted	No change	Deteriorated	Short* stay	Total
Hospital discharge ..	8	3	—	9	20
Living alone	14	2	1	6	23
Relief for relative ..	11	3	—	6	20
TOTAL	33	8	1	21	63

* Attended less than 5 days

Staff. The complement of supervisory and occupational staff remained unchanged. It was found impossible to appoint a married couple as resident caretaker and cook but the employment of daily domestic staff proved a satisfactory arrangement.

Occupations, etc. The increased attendance resulted in a lack of space for handwork and social activities but this did not prevent some extension of the range of articles produced. This now includes log baskets in rushwork made by the men. All the goods have found a ready sale at the relatives' evenings held on several occasions during the year.

A better mutual understanding of the problems of the old people is achieved at the informal discussions between relatives and the staff at these gatherings.

PREVENTION OF BREAK-UP OF FAMILIES

The Co-ordinating Committee of the statutory and voluntary social services met on 15 occasions. The meetings were convened by the Children's Officer and were attended by representatives of Corporation departments and other organisations concerned with the families under consideration.

The number of family problems considered was 30, of which 13 were discussed on more than one occasion. There were 19 new cases reported during the year by various agencies as follows:

Children's Department	..	3
Education	..	3
Housing	..	3
Welfare	..	3
N.S.P.C.C.	..	2
Health Department	..	1
Nottingham Council of Social Service	..	1
Estates Department	..	1
Juvenile Court	..	1
Probation Officer	..	1
		<hr/>
		19

A feature of this work was the problem families, particularly those families in arrears of rent and those who passed from crisis to crisis and were considered repeatedly by the Committee. A great amount of time was spent in supervision of these cases by many workers in the organisation concerned, though multiple visiting was kept to a minimum.

The prevention of the disintegration of "home" for the children of these families was the aim of the committee's work, even though the parents continued to be unable or unwilling to meet the demands of society.

TUBERCULOSIS

Bacille-Calmette-Guerin Vaccination. Tuberculin tests were carried out by the multiple puncture method on young contacts of tuberculosis at special sessions at the Chest Centre. Of all contacts examined, 608 were tuberculin tested and of these 506 were vaccinated.

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
58 ..	345	3,248	10	.308
59 ..	288	2,896	7	.242
60 ..	191	2,676	8	.3

Rehousing. The decrease in the number of recommendations for rehousing of tuberculosis cases followed the trend of recent years, as also did the general trend of social work in this field.

Year	Recommendations made	Families re-housed		Total
		Re-lets	New	
Prior to 1953 ..	356	86	148	234
53 ..	183	77	124	201
54 ..	100	65	51	116
55 ..	110	64	39	103
56 ..	123	54	52	106
57 ..	78	43	39	82
58 ..	52	24	27	51
59 ..	41	10	37	47
60 ..	31	22	6	28
TOTALS ..	1,074	445	523	968

Care Committee. Owing to the progressive reduction in the work of this Committee, meetings are held monthly instead of weekly as was necessary in former years. The accompanying table indicates the ways in which patients were assisted.

	1955	1956	1957	1958	1959	1960
Milk at reduced rate ..	310	297	215	259	197	112
Referred to National Assistance Board ..	313	327	244	285	286	264
Loan of bedding ..	182	150	127	142	88	53
„ „ nursing equipment ..	155	169	147	163	79	50
Domestic help { Home Help Service ..	56	51	47	64	19	21
{ Other help ..	11	11	7	13	48	16
Clothing provided ..	107	75	76	85	68	35
Employment arrangements ..	161	196	104	112	79	83
Training course ..	33	46	39	44	33	26
Convalescence ..	17	13	9	9	16	21
Other matters ..	161	166	137	261	286	243
TOTAL ..	1,506	1,501	1,152	1,437	1,199	924

Occupational Therapy. The Welfare Services Department provided occupational therapy for five cases. Patients attended at the Occupational Centre, or, if housebound, were visited by the occupational therapist.

The British Red Cross Society assisted four cases.

Notification of Tuberculosis in Immigrants. The total number of notifications of tuberculosis continued to fall at a satisfactory rate. Note, however, was taken of the nationalities of persons newly notified and the table below gives the number of cases occurring in immigrants.

As will be seen from the statistics on page 56 the numbers of new notifications in 1959 was 288 and in 1960 was 191.

Nationality				1960	1959
Polish .. ..	..	..	..	10	8
Asian .. ..	..	..	..	9	18
African .. ..	..	..	..	2	1
European .. ..	..	..	..	2	10
West Indies .. ..	..	..	..	1	2
Eire .. ..	..	..	..	1	1
TOTAL .. ..	..	..	..	25	40

STATISTICS OF TUBERCULOSIS

	PULMONARY			NON-PULMONARY			Total					
	Adults		Child- ren	Adults		Child- ren	1960	1959	1958	1957	1956	1955
	M.	F.		M.	F.							
Cases B/Fwd. ..	1,378	1,368	249	36	120	32	3,183	3,359	3,728	3,719	3,740	3,673
Transfers from other areas ..	32	25	—	2	1	—	60	67	81	57	50	35
"Lost" cases returned ..	4	1	—	—	1	—	6	5	3	8	9	3
NEW CASES ..	1,414	1,394	249	38	122	32	3,249	3,431	3,812	3,784	3,799	3,711
	97	56	14	10	13	1	191	288	345	362	329	386
Cases written off ..	1,511	1,450	263	48	135	33	3,440	3,719	4,157	4,146	4,128	4,097
	260	245	39	7	18	7	576	536	798	418	409	357
Children becoming adults	1,251	1,205	224	41	117	26	2,864	3,183	3,359	3,728	3,719	3,740
	+ 5	+ 3	— 8	+ 1	—	— 1						
Cases on Register at end of year ..	1,256	1,208	216	42	117	25	2,864	3,183	3,359	3,728	3,719	3,740
DETAILS OF CASES WRITTEN OFF:												
Recovered ..							395	292	406	247	186	161
Deaths — all causes ..							60	61	75	63	78	69
Transferred to other areas or lost sight of ..							121	183	317	108	145	127
DEATHS FROM TUBERCULOSIS ..							24	29	54	39	38	56
DEATH RATE PER 1,000 POPULATION ..							0.08	0.09	0.17	0.12	0.12	0.18
EXAMINATION OF CONTACTS:												
No. of contacts examined ..							2,676	2,896	3,248	4,501	2,911	2,630
do. found to be tuberculous ..							8	7	10	33	5	16
Percentage do. do. ..							0.3	.242	.308	.73	.17	.6
WORK OF THE HEALTH VISITORS:												
No. of visits paid to patients' homes ..							12,769	13,781	13,605	12,105	13,098	15,236

LOAN OF NURSING EQUIPMENT

' Small ' Items

Article	From Home Nursing Service					From Chest Clinic				
	1956	1957	1958	1959	1960	1956	1957	1958	1959	1960
Air rings ..	378	453	351	311	270	27	11	1	3	1
Bed pans ..	766	947	846	893	848	13	8	1	2	3
Back rests ..	294	428	448	458	445	32	15	4	4	5
Barrier outfits ..	609	797	470	513	596	—	—	—	—	—
Cradles ..	62	68	87	74	82	—	—	—	—	—
Crutches ..	12	22	22	21	20	—	—	—	—	—
Draw sheets ..	178	222	210	234	225	—	—	—	—	—
Feeding cups ..	31	42	41	43	42	—	—	—	—	—
Incontinent gowns ..	21	26	13	30	32	—	—	—	—	—
Infectious outfits	28	28	18	23	9	—	—	—	—	—
Mackintosh sheets ..	765	947	847	848	797	24	8	2	1	1
Midwifery outfits ..	35	36	16	29	36	—	—	—	—	—
Sorbo cushions	193	323	357	476	435	5	5	3	3	2
Syringes 5cc. T.B. ..	587	789	427	478	571	—	—	—	—	—
Syringes 2cc. ..	15	9	15	2	5	—	—	—	—	—
Syringes others	3	13	6	13	28	—	—	—	—	—
Urinals ..	350	445	442	443	402	13	12	5	4	2
TOTALS ..	4,327	5,595	4,616	4,889	4,843	114	59	16	17	14

' Large ' Items

Article	Issued from									
	Health Services Store					Chest Clinic				
	1956	1957	1958	1959	1960	1956	1957	1958	1959	1960
Air beds ..	—	1	—	5	2	1	—	1	—	—
Bed tables ..	1	2	1	—	—	5	4	—	1	1
Bedsteads ..	48	52	43	44	36	30	16	8	7	6
Commodes ..	101	119	108	105	155	2	2	2	1	—
Elbow crutches	1	2	1	—	1	—	—	—	—	—
Invalid chairs	99	114	96	97	139	2	4	3	1	1
Mattresses ..	58	66	57	51	53	37	24	10	10	6
Spinal carriages	2	1	2	—	1	—	—	—	—	—
Walking tripods	—	—	3	1	4	—	—	—	—	—
TOTALS ..	310	357	311	303	391	77	50	24	20	14

CONVALESCENCE

The total number of patients referred for convalescence was 215 as compared with 236 last year; each was recommended by the family doctor.

Altogether 129 patients were sent away, approximately half of them going to the Sheffield Regional Hospital Board Homes at Skegness. Of those sent to Independent Homes 3 paid the whole cost themselves. The Health Committee assisted financially with maintenance for 56 patients, of whom 22 were also helped with fares. The usual stay of two weeks was extended in the case of 3 patients who needed a longer period of convalescence.

Patients not eligible for help by the Health Committee were referred, wherever possible, to other agencies, including the Nottingham Council of Social Service and the Nottingham Co-operative Society.

Arrangements were made for four elderly couples to convalesce at the same or adjacent convalescent homes. In three cases of long-standing illness arrangements were made for the invalid to be admitted to hospital while the married partner was given a rest at a convalescent home.

Convalescence arranged 1955 — 1960

Name of Convalescent Home	1955	1956	1957	1958	1959	1960
Regional Hospital Board Homes						
<i>Sheffield Region:</i>						
Carey House, Skegness	53	48	40	47	54	37
Seely House, Skegness	17	24	19	32	37	30
Sheffield Works' Conv. Assn.:—						
Claremont House, Matlock ..	6	7	3	9	2	1
Stubben Edge Hall, Ashover ..	—	1	—	1	1	—
Langwith Lodge, Nether Langwith	—	—	—	—	—	2
<i>Leeds Region:</i>						
Ilkley Conv. Hospital	1	—	—	—	—	—
<i>South East Metropolitan Region:</i>						
Thomas Lye C.H., Brighton ..	—	1	1	1	—	—
<i>South West Metropolitan Region:</i>						
Walton-on-Thames	1	—	—	—	—	—
TOTAL	78	81	63	90	94	70
Independent Homes						
Hunstanton C.H.	9	9	5	4	2	8
West Hill C.H., Southport ..	5	4	2	1	—	—
Sheffield Works, Conv. Assn.:						
Claremont House, Matlock ..	3	4	5	6	6	6
Stubben Edge Hall, Ashover ..	1	1	1	2	2	1
Evelyn Devonshire Home, Buxton ..	4	—	1	1	1	4
George Woofinden Home, Mablethorpe	12	19	22	28	28	38
All Saints', Eastbourne	—	—	—	1	—	—
John Howard C.H., Brighton ..	—	1	1	—	1	—
Boarbank Hall, Grange-over-Sands ..	1	—	—	1	1	1
Charnwood Forest Children's C.H. ..	1	—	—	—	1	—
Seabright C.H., St. Anne's	1	—	—	—	—	—
St. Michael's C.H., Clacton	1	—	—	—	—	—
Mental-After-Care Assn. Home,						
Westgate	—	1	—	—	—	1
Westwood C.H., Blackpool	—	—	1	—	—	—
Friendly Societies' C.H., Herne Bay ..	—	—	1	—	—	—
Catherine House, St. Leonards-on-Sea ..	—	—	1	—	—	—
Sundial Rest Home, Hallaton	—	—	—	1	—	—
Bolton Hospital Saturday Council,						
Milne, Southport	—	—	—	—	1	—
TOTAL	38	39	40	45	43	59

An analysis of the number of convalescents under the type of illness from which they were recovering is shown for the years 1955-1960.

Type of Illness	Numbers sent to Regional Hospital Board Homes						Numbers sent to Independent Homes					
	1955	1956	1957	1958	1959	1960	1955	1956	1957	1958	1959	1960
Respiratory ..	23	17	23	32	31	15	4	6	10	10	4	14
Cardiac ..	8	13	9	10	13	12	7	11	7	5	5	6
Digestive ..	13	14	-	5	15	8	3	-	1	2	1	-
Nervous ..	3	5	6	6	2	5	8	4	6	9	10	15
Urinary ..	3	1	3	5	3	3	2	1	-	1	-	1
Reproductive	5	3	2	6	9	7	-	-	-	-	2	-
Skin ..	3	4	-	-	-	-	2	-	-	-	-	-
Rheumatic ..	8	6	10	6	4	8	3	3	2	6	6	7
Injury ..	1	1	3	5	4	-	-	-	-	-	-	2
Debility ..	4	11	4	6	4	4	8	14	13	8	13	13
Endocrine ..	1	-	-	-	1	-	-	-	-	-	-	-
Diabetic ..	5	2	3	3	2	4	-	-	-	1	-	-
Others ..	1	4	-	6	6	4	1	-	1	3	2	1

HEALTH EDUCATION

The essence of propaganda lies in the accurate timing of a cogent message; to this end the choice of themes for the display window and for the subject of posters was made by a staff committee drawn from branches of the department. The committee was composed of two medical officers, a senior health visitor, an administrator, a public health inspector, a mental welfare social worker and the health education assistant. Six meetings were held at intervals of approximately two months, when material submitted by publishers was critically examined. Suitable posters were chosen for display at specified times and in appropriate places, but many were discarded as failing to convey their intended point simply and effectively.

Films and film strips were also considered and recommended as suitable, or otherwise, for a variety of purposes.

★ ★ ★

A Local Government Exhibition inspired by the Nottingham Branch of NALGO was held for one week from the 22nd to 27th August. Naturally all the 22 departments of the Council's Services made their exhibits but while the Health Department exhibited various aspects of the Health Services, an opportunity was presented for health education as such.

A film strip of some 34 transparencies based on the Annual Report of the Medical Officer of Health and showing the work of most departments, was made. During the six days of the exhibition this strip was shown at intervals four times daily, and the showing was accompanied by a recording by the Medical Officer of Health indicating outstanding points of interest in the various pictures.

The 'show' was well received and the impression was left that not only was it a most effective piece of health education, but

IMMUNISATION

A programme of recognised procedures was fully maintained throughout the year.

In September, protection against tetanus was offered as a routine to all infants commencing a course of immunisations. It was also made available to children who had previously been immunised against diphtheria and whooping cough only. The material used at all the Welfare Centres, the triple antigen, diphtheria-pertussis-tetanus, superseded a combined antigen, diphtheria-pertussis formerly administered.

Earlier protection against whooping cough appeared desirable and thus, after careful consideration, the immunisation time table was revised. It now is:—

Triple antigen (4 injections)	..	..	at 2, 3, 4 and 12 months of age.
Smallpox vaccination	..	..	„ 5 months of age.
Poliomyelitis vaccination (3 injections)	..	..	„ 7, 8 and 15 months of age.
Diphtheria and tetanus " booster " dose.	..	..	„ school entry.
B.C.G. vaccination	..	..	„ 13 years.

Poliomyelitis Vaccination. In February this was extended, as had been anticipated, to persons aged 28 to 39 years and to certain special classes and their families. The latter included dental surgeons and their staff, nurses not working in hospital, health services staff, and persons travelling outside Europe. The response by the under 40 age group was both slow and poor, especially as many employers readily made premises available and permitted vaccination during working hours.

Arrangements were made for the vaccination of expectant mothers at the time of their first visit to the ante-natal clinic. Again the result was disappointing, although a number having already been immunised did not, therefore, require it.

General practitioners played a greater part in the programme, having given 17% of all injections compared with 12% in 1959. In December improved supplies of vaccine permitted the issue of stocks to doctors possessing suitable facilities for refrigeration. It was hoped that the arrangement would result in a higher acceptance by those under 40 years of age.

The tables show the number of injections given in 1960 as well as the numbers under 40 years of age fully immunised since this form of vaccination commenced.

	Number of injections given during 1960						Total
	0—4 years	5—14 years	15—27 years	28—39 years	Expectant mothers	Others	
First ..	3,726	1,356	3,713	10,813	1,673	253	21,534
Second ..	3,858	1,367	3,830	10,203	1,700	190	21,148
Third ..	5,020	5,713	13,250	1,092	2,431	837	28,343
TOTALS	12,604	8,436	20,793	22,108	5,804	1,280	71,025

	Number of persons fully immunised at 31.12.60*				
	0—4 years	5—14 years	15—27 years	28—39 years	Total
No. of persons ..	11,052	37,140	27,988	1,092	77,272
Estimated population	25,200	49,000	55,840	54,178	184,218
% Fully immunised	43·8	75·8	50·1	2·0	41·0

* 5,702 persons in some of the special priority groups are not included.

Smallpox Vaccination. A temporary marked decline in the numbers vaccinated resulted from the revision of the whole immunisation timetable, for instead of being the first procedure,

vaccination was deferred until the infant was aged 5 months; the situation is expected to correct itself during 1961.

Primary vaccinations numbered 2,881 as opposed to 3,977 in 1959.

ANALYSIS OF VACCINATIONS

	Numbers of Persons Vaccinated						
	Age at 31.12.60					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	2,447	215	82	137	2,881	952	1,929
Re- Vaccination	—	28	47	268	343	327	16

INFANT VACCINATION

	Primary vaccinations under 1 year of age	Percentage of births during same period
1952	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
58	3,456	65·3
59	3,504	64·8
60	2,447	43·0

B.C.G. Vaccination. This involved 3 visits to each senior school and the sessions as at present arranged, which must be at fixed intervals, enabled all 13 year olds who accepted to be vaccinated in the course of the school year.

The trend was for fewer children to be found tuberculin positive and therefore a greater percentage of those tested required to be vaccinated. In 1960 there were 13% positive reactors compared to 21% in 1955.

The statistics for the year and the preceding years are shown in the table.

	1955	1956	1957	1958	1959	1960
Schools visited	54	54	53	47	57	46
No. of 13 year olds ..	3,850	4,641	5,605	4,369	5,660	6,410
„ acceptances	2,867	3,271	4,160	2,949	3,775	4,443*
„ refusals	946	1,235	1,327	1,340	1,732	1,853
„ others	37	135	118	80	153	114
No. tested	2,769	3,261	4,138	2,741	3,574	4,154
negative reactors ..	2,148	2,502	3,333	2,274	3,069	3,553
vaccinated	589	698	700	399	418	524†
positive reactors ..						
Post vaccination tests:						
At eight weeks:						
No. tested	1,686	2,105	614	—	—	—
Positive reactors ..	1,610	1,994	587	—	—	—
Negative „	8	3	—	—	—	—
Inspection only ..	—	—	2,130	2,198	2,823	2,908
At one year:						
No. tested	1,595	2,052	2,221	2,348	2,035	673
Positive reactors ..	1,376	1,940	2,075	2,200	1,830	626
Negative „	139	33	11	5	42	15
Absent from reading ..	80	79	135	143	163	32
No. revaccinated ..	30	10	2	5	40	15
At two years:						
No. tested	—	477	1,009	935	1,348	232
Positive reactors ..	—	433	944	837	1,225	212
Negative „	—	19	1	3	7	6
Absent from reading ..	—	25	11	95	116	14
No. revaccinated ..	—	12	—	3	7	6
Complications	—	1	1	—	—	—

* Average % of acceptances 1955-1960 was 70.3%.

† Average % of positive reactions 1955-1960 was 16.1%.

Diphtheria Immunisation. The following tables show the numbers injected and fully immunised.

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
1951 ..	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
58 ..	3,595	939	3,423	1,111	6,154	160
59 ..	3,704	662	3,186	1,180	3,142	113
60 ..	4,167	820	3,744	1,243	2,483	249

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

Progressive totals of children fully immunised at 31st December

	0—4 years		5—14 years		0—14 years	
	No.	Percent.	No.	Percent.	No.	Percent.
1951 ..	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
58 ..	14,725	60	42,840	87	57,565	78
59 ..	16,862	68	40,658	82	57,520	78
60 ..	17,154	68	41,398	84	58,552	79

The normal "booster" dose is given within 3 years of school entry, and primary immunisation is also offered to any children in this group who require it. This procedure, however, had

been suspended while the poliomyelitis programme was carried out. As a result 1,380 children had entered senior schools and were at an age when immunisation had to be preceded by Schick testing in order to establish their state of immunity or sensitivity to the injection. Of this number 465 required to be immunised.

Whooping Cough and Tetanus Immunisation. The change-over from combined antigen to triple antigen has been discussed. In the following table, 807 of the children have also been protected against tetanus. These were either immunised by general practitioners or commenced immunisation at Welfare Centres in September or later.

The new immunisation timetable was responsible for the numbers starting immunisation being greater than in 1959.

Immunised	1955	1956	1957	1958	1959	1960
By General Practitioners	1,566	1,294	1,224	1,099	1,174	1,233
By Health Dept. Medical Officers	2,018	1,769	2,214	2,466	2,503	2,950
TOTAL	3,584	3,063	3,438	3,565	3,677	4,183

Yellow Fever Vaccination. From 1st July 1960 the Immunisation Department was designated a vaccination centre by the Minister of Health.

Sessions started on 20th July 1960 and were held every Wednesday afternoon. The service was available both to civilians and to members of the armed forces.

The number of persons vaccinated was 124.



A home nurse's working bag.



Comfortable again.

HOME NURSING SERVICE

There was little variation in the work either in volume or character. The proportions of cases of chronic illness showed a slight increase with a corresponding slight increase in the number of visits. However, owing to the amount of nursing care necessary the average time taken for visits was longer. Confronted with so much suffering in many of the households visited the nursing sisters were taxed both mentally and physically.

In comparison with the fall in recent years in the number of cases of tuberculosis nursed, there was a small increase in 1960. This was due to the earlier discharge from hospital for selected patients. It was found that where home conditions were satisfactory and nursing care available, the improvement in their conditions was fully maintained. There was a small increase in the number of patients with cancer attended but there was a larger increase in the number of visits paid to them.

Poor social conditions aggravating ill health still required labour, initiative and much time, together with co-operation with other services. The reward, as always, was the improvement brought about in the happiness of the patients and the relief of some of their suffering.

Relief of pain for the patient and some assured rest at night for the relatives gave their own reward to the nurses carrying out late duties. With many visits to be made sometimes in adverse weather conditions, and spread all over the City, available time did not permit of all calls being made by evening relief nurses carrying out these duties. In consequence their work was supplemented by nurses making visits after completing

the normal daily duties and so, due to the importance of the actual hour at which injections for the relief of pain had to be given, many family doctors carried out these duties themselves.

The advantage to the patients who were visited by nurses was that they also received the essential amount of nursing to make them comfortable.

Staff. Appointments to work in County districts accounted for 4 resignations, and 1 nurse returned to hospital work while 2 married mothers resigned to give full time to their domestic responsibilities.

An independent student returned to her religious community at the end of her district training.

Nine additional students were appointed to the staff prior to commencing training for the Queen's Roll.

It was not possible to fill the vacancy of a third assistant superintendent.

Sick Leave. During the first 3 months of the year there was a considerable number of absences, which totalled 23 nurses, for short periods, in addition to 4 nurses absent for periods up to six months. In the remaining 9 months there were only 17 absences due to illness after the strength was increased by the recruitment of student nurses.

Compassionate Leave. More nurses requested compassionate leave, because of the illnesses of their children, than in 1959; in all a total of 11. Two members of the staff were granted maternity leave.

Transport. Car allowances were paid to 3 administrators and to 32 nurses including 7 male nurses. There were 5 cars purchased or exchanged through the car purchase scheme. A car owned by the Corporation was used on alternate evenings by the 2 nurses carrying out late duty visits.

Autocycles. Loss of time, inconvenience and expenditure on repairs was minimised by a further purchase of Lambrettas which proved to be popular; nine machines were in continuous use.

Houses and Flats.

Houses — 1 Furnished, 10 Unfurnished, and furnished rooms at office accommodation.

Flats — 3 Furnished. 2 Unfurnished.

Telephones. There were 52 installations in use at the end of the year and ten instruments were shared; only 10 nurses were without a telephone at home.

Training. Nine students were successful in the examination for the Queen's Roll. Training for the new District Nurse Training and Queen's Roll commenced in September with 7 students and in October the total was brought to 15 including 5 'independent' students. This was a record number for a training course here.

The number of independent students was more than in previous years; two were overseas students and all had had experience of work in other countries.

Students from Hospital. No student nurses visited during the year.

Refresher Courses. A 7 day course held at the University of Nottingham was attended by 4 sisters and 1 male nurse as non-resident students. This course gave opportunity to those nurses who hitherto had been unable to attend residential courses outside Nottingham because of their domestic responsibilities. This course was appreciated and proved successful.

Courses held at Bedford and at Birmingham were each attended by 2 nurses for 7 days.

Two assistant superintendents attended for one day at the Professional Nurses and Midwives Conference held in London during October.

Visitors. Miss F. A. Heaney, Representative Nursing Officer of the Ministry of Health, for District Nurse Training and Miss M. W. Slight, Ministry of Health Regional Nursing Officer, paid an informal visit during October in connection with the new training syllabus for district nurses.

3

*Includes 800 visits to inspect nursing equipment on loan.

*Includes 800 visits to inspect nursing equipment on loan.

Comparative index of work over 7 years

	1954	1955	1956	1957	1958	1959	1960
Register 1st January ..	1,226	1,345	1,492	1,568	1,726	1,617	1,621
New patients ..	5,860	6,340	5,927	5,758	5,359	5,115	4,989
Total visited ..	7,086	7,685	7,419	7,326	7,085	6,732	6,610
Register 31st Dec.	1,345	1,492	1,568	1,726	1,617	1,621	1,719
Total nursing visits	217,033	229,882	240,133	246,292	234,274	222,898	224,594
„ supervisory visits ..	1,951	1,772	3,085	2,581	2,247	2,341	2,366
Case load—visits per month per nurse ..	329	314	317	317	300	278	276
Type of Illness	1954	1955	1956	1957	1958	1959	1960
Circulatory and cardiac ..	952	1,087	1,181	1,368	1,426	1,340	1,229
Respiratory ..	1,474	1,687	1,384	1,445	1,279	830	785
Digestive ..	916	1,071	1,042	976	991	1,117	1,041
Urinary ..	186	178	198	194	173	177	168
Reproductive ..	267	276	285	298	228	254	233
Nervous and cerebral ..	688	758	937	942	963	900	900
Carcinoma ..	465	417	397	447	426	473	537
Diabetic ..	258	243	278	297	309	283	275
Ulcer of leg ..	158	166	138	135	125	104	120
Tuberculosis ..	493	371	326	291	211	175	210
Burns, scalds, injury, etc. ..	480	626	486	256	453	718	734
Due to senility ..	589	603	461	456	350	133	241
Infectious fevers ..	15	34	14	19	9	20	7
Rheumatism, arthritis ..	145	168	292	202	142	208	130
TOTALS ..	7,086	7,685	7,419	7,326	7,085	6,732	6,610
Age groups of Patients	1954	1955	1956	1957	1958	1959	1960
5 years and under	2.1%	2.2%	3.3%	2.5%	1.5%	1.7%	1.8%
6 — 16 years ..	2.2%	1.7%	2.9%	2.5%	1.9%	1.9%	2.2%
17 — 45 „ ..	12.7%	11.9%	18.6%	18.7%	14.3%	16.1%	15.5%
46 — 60 „ ..	21.4%	21.3%	24.2%	25.2%	27.1%	26.0%	26.1%
Over 60 „ ..	61.6%	62.9%	51.0%	54.1%	55.2%	54.3%	54.4%

HOME HELP SERVICE

A review of the work undertaken during 1960 revealed a close similarity to that of the past ten years. Although the actual number of new applications dealt with was less than in the previous year—many enquiries could not be proceeded with as immediate help was not available—there was an increase in the total number of cases assisted.

The long standing cases—those carried forward each year—presented a serious problem as there was an increase of over 200 on the previous year's figures. Approximately 95% of these cases were aged infirm persons living alone, and becoming less active each year. Many were quite incapable of maintaining even a moderate standard of personal cleanliness; a condition which quickly became obvious when left without a helper for a week or two.

A reduction of help to 600 cases did provide a very limited amount for more persons, but restricted the assistance given in some homes. Only the most essential duties could be undertaken in the short time, particularly in the case of aged persons living alone and who required help for such needs as bathing, hair washing and attention to feet. A number of home helpers made themselves responsible for this personal care, which they often undertook after working hours.

From the table will be seen the increase of cases which received less than four hours help.

Average hours worked weekly			
Hours		No. of cases	
		1959	1960
Up to 4	..	1,181	1,726
5 .. 9	..	1,395	1,134
10 .. 14	..	242	169
15 .. 19	..	64	52
20 .. 24	..	43	31
25 .. 46	..	180	71

This limitation of help also brought a corresponding increase in the number of personal calls from general practitioners for special cases of illness. In such cases the help was increased where possible upon the information supplied by the doctor.

A sample survey of 529 cases, approximately 25% of the normal weekly case load, revealed a high proportion of aged persons living alone and without relatives. It was noticeable that women were in the majority. Of the cases in the survey 29 were under 60 years of age and not included in any further research. The remaining 500 persons each occupied a family house of four, six or more rooms, and usually lived only in one or two.

Very few of the married sons or daughters of those over 60 years of age were able to assist in any way; some were themselves in need of help. Many lived at some distance, as did most of the other relatives, brothers, sisters, nieces, nephews, etc., and could only be contacted in an emergency. The name and address of the nearest relative was obtained for this purpose in all cases, when the initial enquiry was made.

The following table reveals the nearest relative of persons aged over 60 and also those entirely alone. Excluded from the 500 cases are 84 persons who had spouses.

Degree of Relationship

Age	Son		Daughter		Sister		Brother		Niece or nephew		No living relative		TOTAL	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
60/70 ..	1	12	2	25	-	5	-	3	-	2	3	15	6	62
71/80 ..	8	39	16	69	1	14	1	9	2	11	19	46	47	188
81/94 ..	9	15	4	33	1	8	-	2	-	9	2	30	16	97
TOTALS ..	18	66	22	127	2	27	1	14	2	22	24	91	69	347
.. ..	84		149		29		15		24		115		416	

These people are representative of the bulk of the cases requiring continuous help from year to year; a goodly proportion are bedfast, others confined to the house. The lack of relatives presents a problem, particularly during the winter months when many of the old people are confined to bed, with chest illnesses.

Maternity Cases. There was a reduction in the requests for help but advance bookings were up to last year's level. The maximum of two weeks help, except where additional help was requested by the doctor or midwife, was strictly adhered to.

Tuberculosis Cases. Requests for help were again low in this group. Most were from persons returning home following treatment in hospital, and still spending some time in bed each day.

Mental Illness. Requests for help were higher. It was not easy to assess the necessary amount of help. In some instances the person in need of help showed suicidal tendencies, and made attempts at suicide by gassing, or overdose of sleeping tablets.

These incidents usually occurred during the days the helper did not attend, which would appear to indicate that loneliness is one of the causes of mental illness in the elderly.

It was possible to introduce a number of these persons to different outside activities, thereby bringing them into contact with other people; "over 60" clubs, afternoon whist drives, and women's meetings, held in the various churches and chapels proved helpful, and provided a much needed change.

Social cases. Young families bereft of their mother's care through illness, admittance to hospital, or death, caused an increase in the number of social cases assisted. In one home, nine children—the eldest aged 12—continued to live a normal family life under the motherly care of an experienced home helper. Full-time help was required for all these family cases, as there were two or three toddlers in need of full attention. This was the only group, other than maternity cases, to which full-time help was allocated.

Waiting List. This figure remained almost static throughout the year, despite every effort to reduce it and 262 cases were without help at the end of December, applications for 39 of whom were received during November and December.

An average of 25 new cases helped per week was maintained throughout the year, though often at the expense of other cases being placed back on the waiting list as less urgent. Whilst this method was satisfactory in supplying the more urgent cases, the persons from whom help was withdrawn frequently had deteriorated when the helper resumed and as a result additional help was necessary to restore cleanliness both to the person and home.

Administration and Staff. The continual development of new housing estates and the re-housing of old people from slum clearance property, resulted in a serious reduction in visits by

District Organisers and Caseworkers. This applied more particularly to the Western and Eastern areas, where bus services are either non-existent or infrequent. Cases on the Bestwood Park Estate took over an hour, as there was often some distance to walk from the nearest bus stop.

The provision of a car was urgently needed in both these areas.

The resignation and non-replacement of the senior clerk in the wages and accounts section created pressure on the remaining staff. A limited amount of temporary assistance was obtained, but was not altogether satisfactory. The non-replacement was due to the expectation that calculation and payment of wages will in 1961 be absorbed by the City Treasurer's Department.

Finance. Although the new scale of assessment introduced in 1959 caused a considerable reduction in the number of full and part cost cases, the income for the year reached that of 1959. Monies recovered from persons failing to disclose full capital resources at the initial application produced a sum of £430. 18s. 0d. Details are given.

- (1) Elderly couple in receipt of Old Age Pension and National Assistance only — no savings.

Some months after help commenced these people were granted a pension from a voluntary organisation but failed to disclose this, as the man considered it was a voluntary gift. Whilst discussing another case with the secretary of this organisation, the above case was referred to and the amount of pension stated by the secretary. When told that the man had not disclosed the pension, the secretary said that he had also received a lump sum which had been paid into the bank. The man was instructed to pay the assessed amount for help supplied since receiving the pension.

Amount collected £12. 16s. 0d.

- (2) Elderly couple — both ill. Declared no savings or investments at initial enquiry — only income Old Age Pension etc., nil assessment.

Help continued for wife after husband's death. She also, repeatedly denied that she or her husband had any capital. Wife died within the year. The helper attending at the time, disclosed that the will stated

the house was given to a local church. The solicitor confirmed this. He agreed to accept the claim for all help supplied, against the estate.

Amount collected £200. 13s. 4d.

- (3) Two elderly sisters living together in house owned by the younger sister shared the expenses. The son of one sister died leaving the whole of his estate (£2,000) to his mother, who was at this time critically ill, and unable to discuss any business matters. Upon the death of this sister some two weeks later the money passed to the other sister, who eventually agreed to pay for all help supplied. The information about the son's estate was given by an old colleague of the son.

Amount collected £133. 7s. 8d.

- (4) Elderly couple — husband semi-invalid, retired from Police Force on small pension also in receipt of Old Age Pension. Wife seriously ill. When the initial application for help was made, both stated most emphatically that their savings were exhausted due to the husband's compulsory retirement on health grounds. The wife had worked as a home helper until admitted to hospital some 12 months previously.

During a visit some six weeks prior to her death, the wife revealed that she had saved all her wages and purchased Savings Certificates, and had an amount of cash in the bank. She also said that she had not disclosed these savings to her husband until, realising the nature of her illness, she decided to withdraw the certificates and let her husband re-invest them in his name, to avoid any difficulty after her death. These people were informed they would be required to pay for the help supplied to date as total capital over maximum figure.

Amount collected £22. 13s. 3d.

- (5) Elderly couple — wife completely senile and unable even to dress herself without assistance. Husband a retired naval officer, ill and confined to bed. Stated naval pension and Old Age Pension his only sources of income — no savings.

Apparently the husband had completely dominated this woman's life, paid all household accounts, bought her clothing, and lived in a very poverty stricken manner. It was not until after his death a visiting relative was informed that he had left a large sum of money. Unfortunately his widow was quite incapable of dealing with the matter. An approach was made to the solicitor, and a cheque in payment of the full amount was received.

Amount collected £61. 7s. 9d.

It was observed from time to time that many of these elderly people appeared to have forgotten that such items as Savings Certificates, War Bonds, etc., can be redeemed for cash at any time; they were usually hidden in some supposedly safe place and eventually forgotten.

Payment for help provided was usually made regularly. In only very few cases was it necessary to press for payment. The total amount of monies irrecoverable for the year amounted to £25.

No. of Helpers at 31st December								
	1954	1955	1956	1957	1958	1959	1960	
Full-time	170	224	132	182	136	136	150	
Part-time	284	226	295	333	327	325	308	
Casual	30	10	15	6	8	12	2	
TOTAL ..	484	460	442	521	471	473	460	
Hours worked								
Weekly average ..	11,544	11,655	11,333	10,933	12,057	12,226	11,200	
Result of Applications								
Help supplied	1,296	1,309	1,385	1,189	1,305	1,405	1,254	
Awaiting help ..	218	132	69	24	42	43	39	
Advance maternity bookings	38	50	42	42	39	48	49	
Not qualifying ..	151	137	25	19	22	36	33	
Cancelled or arranged own help	393	438	662	537	512	487	494	
TOTAL ..	2,096	2,066	2,183	1,811	1,920	2,019	1,869	

Analysis of Cases Assisted and Payments made:

	Full cost	Part cost	Nil	Total
Old Age Pensioners:				
Chronic illness	227	200	2,272	2,699
Acute illness	14	4	16	34
Others:				
Chronic illness	24	14	53	91
Blind	3	—	8	11
Acute illness	75	23	57	155
Maternity	83	55	14	152
Tuberculosis	2	1	24	27
Social cases	1	3	10	14
TOTAL	429	300	2,454	3,183*

* Includes 1,929 cases carried forward to 1960.

ANNUAL EXPENDITURE AND INCOME SINCE INCEPTION

Financial year	Expenditure	Income
	£	£
1944/5 ..	50	15
45/6 ..	1,343	725
46/7 ..	2,647	1,408
47/8 ..	5,363	2,603
48/9 ..	10,591	3,639
49/50 ..	17,672	4,621
50/1 ..	27,191	3,369
51/2 ..	46,966	4,359
52/3 ..	78,342	5,249
53/4 ..	93,423	5,445
54/5 ..	99,347	5,895
55/6 ..	106,444	6,818
56/7 ..	115,174	8,369
57/8 ..	120,204	8,184
58/9 ..	133,328	9,391
59/60 ..	133,627	8,405
*60/61 ..	134,431	7,984

* Approximate actual

MENTAL HEALTH SERVICE

The close co-operation with the mental hospital dating from 1948, along lines now advocated by the Mental Health Act, continued.

It was a year of transition. For the first ten months, the established system functioned like a well lubricated machine, the last two months were dominated by anxieties associated with the "running in" of new procedures.

It was with some sadness that the service came to the end of the old road. During the preceding twelve years, a system had been developed which had given satisfaction to practitioners, patients and public, and which had coped effectively with the demands made upon it. Changes in the law altered the terminology and mechanics of work for the mentally disordered, but these changes affected neither the basic facts of mental illness or intellectual capacity, nor the social problems arising from them. It remains to be seen whether the new concepts will lead to any better results in care, protection and support for those for whose benefit the law was changed.

It was soon apparent that admission to hospital under compulsory procedures, a process with which the service is vitally concerned, was more time consuming under the new legislation than under the old. This could mean that either an increase in man power will become necessary, or disappointingly, there will be less time to devote to the principal aims of the mental health service, the general care and rehabilitation of the mentally disordered in the community.

Mental Illness (1st January—31st October). Comparison with previous years is possible only up to the end of October, to which stage there was a reduction in the number of calls upon the service, 972 cases being referred for hospital admission as against 1,012 in the same period in the previous year.

It was perhaps significant, in the light of changes to come, that despite the fall in the number of cases referred, there was an increase of 25 in those reported from medical sources. A tendency was noted for medical practitioners to ask in general terms about services available for the mentally ill, rather than immediately to report patients as being in need of hospital admission.

The reduction in the number of cases reported resulted in a small reduction in the number of cases requiring after-care. On 31st October, 1960, there were 933 cases on the after-care registers as against 992 at the same time in the previous year. A reduction in this total was welcomed as the concentration of work possible on fewer cases was more effective than when the jam of effort had to be spread too thinly over the bread of need.

Community Care. In the after-care field, the service continued to be busily occupied in assisting those recovering from mental illness to overcome social problems which in many cases had contributed to the breakdown—and which in some cases were a bar to full recovery.

The problems fell under three main headings, employment, accommodation and personal relationships. Seeking work suitable to the capacity of the client continued to consume much of the mental welfare officers' time, but was considered time very well spent.

Accommodation for those having no home of their own continued to be a problem which not always could be solved, but there was reason to feel that if there was some help from the local authority in the form of supplementary payments, or willingness to assume responsibility for accidental damage, the problem of finding lodgings need not be an insoluble one. Full acceptance of the mentally disordered by the community was not yet fully achieved, but there was evidence that underground springs of sympathy, understanding and helpfulness existed awaiting discovery by the skilled diviner, and occasionally bursting spontaneously through the surface.

The problems of personal relationships were of two opposite kinds: on the one hand those who by difficult conduct during the illness had estranged friends and relatives, and on the other hand, those who had withdrawn from human contact, and needed to be reintegrated with society. The smoothing out of friction which had arisen between members of a family, although often far from easy, was found to be less difficult than re-establishing contact for those who had withdrawn.

Mental Health Act 1959. 1st November, 1960, when the main provisions of the Mental Health Act became operative, started a new era in the care of the mentally disordered and there was a change in the content of the work undertaken by the Mental Health Service. However, whilst the new admission procedures had to be applied immediately, it was apparent that it would be some time before the new concepts became fully understood.

At first there was no significant change in the number of calls on the Service, nor in the number of people admitted to hospital for during November and December, 171 cases were reported as against 180 in the same period in 1959, and of these, 92 were admitted to hospital as against 89 in the previous year.

Only 6 cases were admitted in the first instance on applications for observation under Sect. 25, and in no case was an application for treatment made under the provisions of Sect. 26. A tendency was noted to delay reporting cases until urgent action was necessary under Sect. 29, under the provisions of which Section 33 cases were admitted to hospital.

In 53 cases, the mental welfare officers, at times acting alone and at others in co-operation with general practitioners or consultant psychiatrists were able to prevail upon the persons concerned to take advantage of informal admission.

By 31st December, 8 cases more than in the last two months of 1959 had been admitted under compulsory procedures, and 5 less had taken advantage of informal admission. The variation was no more than might be found in comparing any two short periods in consecutive years.

Initially the increased length of time required to carry through the new procedures as compared with the old was noticeable. It may be that to a degree, lack of familiarity with new procedures was responsible, though, nevertheless, it seemed that even when experience has been gained the various steps will take more time. If this view is confirmed it may mean that, in due course, an increase in staff will be necessary.

Though the period under review was too short for conclusions to be drawn, the transitional period was smoother than might have been anticipated; the coming year seems likely to be full of interest and opportunity.

Subnormality. Admissions to Hospital. Work for the severely subnormal continued under the handicap of insufficient hospital accommodation for those needing this form of care. During the year 21 long term admissions to hospital were made,

but at the end of the year, the urgent waiting list remained at 37 cases (18 males and 19 females) whilst a further 39 cases (23 males and 16 females) were on the ordinary waiting list.

Great use was made of short-term provision. No fewer than 89 cases were admitted for periods from 14 days to 2 months to afford relief to hard pressed families. In only a small percentage of these cases was the crisis a temporary one, for which this short term admission was the complete answer. In a considerable proportion of the cases, this was only a palliative measure until permanent accommodation became available. Several cases had to be registered for further care immediately on coming home from a previous admission, and in several cases, the same child was given more than one spell of short term care during the course of the year.

Community Care. On 1st January, community care was being provided for a total of 869 mentally subnormal persons.

Apart from the fact that the new definitions of mental subnormality may bring into the scope of this work persons not catered for under the old Mental Deficiency Act, the provisions of the Mental Health Act are unlikely greatly to affect the nature of the essential social work for the mentally subnormal.

This work continued to be based on regular home visiting both to advise parents and to observe standards of home care. Seeking employment occupied much of the time of the mental welfare officers, together with general guidance to families, particularly where all the members were of limited intelligence.

City Occupation Centre. There were 176 names on the register when the year opened. Few casual vacancies occurred and the waiting list grew. In anticipation of projected extensions to the accommodation, a policy of controlled overcrowding was

decided upon. The number of names on the register was increased to 192 which was felt to be the maximum number which the present buildings could contain. This entailed making use of the dining room as a class room at certain periods and making full use of the additional accommodation available through taking over the old caretaker's lodge as a clay modelling and pottery department.

The pottery craft was further developed during the year. In addition to the brick kiln built by the Superintendent, an electric kiln was also installed, and it became possible to glaze the better articles produced. This was a valuable department. The process of refining the raw clay, dug from the centre grounds, required a good deal of labour and some of the processes were carried out by very low grade trainees for whom it is difficult to find a sufficient variety of occupation.

Clay modelling had considerable influence on behaviour problems; open masturbation has quite ceased. "Wedging" the clay was found to be an excellent and satisfying outlet for aggressive tendencies. The pottery produced was crude, and it was noticeable how closely free design and decoration resembled the work of primitive peoples. Quality of both design and finish improved with practice and by the year end, useful small pottery articles, small dishes, ashtrays, etc., were being produced. All age groups were given periods in this department.

The chain link fencing machine installed in the previous autumn began to show results. A team of five adult male trainees, with several reserves, were trained to the point where they could operate the machine without close supervision. First intentions were to produce sufficient material to replace the existing wooden fence surrounding the Occupation Centre which fence is in poor condition and costly to maintain.

This work was interrupted on receipt of an order for material from the Baths Committee for 275 yards of fencing 7 ft. 6 ins. high, to enclose one of the outdoor swimming baths. The commercial use of their product gave the trainees concerned, and in fact, the whole department, a great sense of satisfaction and it was noticeable that work became more purposeful when the product was seen to be collected by lorry and taken away for use elsewhere.

Work was resumed on producing fencing for the Centre itself, and a further activity was developed in making the concrete posts to which it will be attached. Towards the year end, arrangements were in hand for beginning the erection of the first lengths of the new fencing.

Training in Junior and Intermediate Departments continued along already well established lines. Promotion from Junior to Intermediate Department at appropriate times became more difficult owing to the lack of vacancies occurring in the Adult Department, to which senior members of the Intermediate Department could be transferred. Some juniors had to be promoted because they became physically beyond retention in the Junior Department with the consequence that a serious bottleneck developed in the Intermediate Department emphasizing the very urgent need for additional training centre accommodation for which, despite the additional numbers admitted earlier in the year, a waiting list was accumulating.

Nuffield House. Details of the work of the Octagon Club in the prevention of mental deterioration in the aged and in caring for some who would otherwise require to be in hospital, appear on page 51.

**NUMBER OF PERSONS REPORTED AS MENTALLY ILL
NOVEMBER AND DECEMBER, 1960**

					Under 65 years		Over 65 years		Totals
					M.	F.	M.	F.	
Reported by:—									
Police	..	..	..		8	7	—	3	18
Hospitals	..	..	..		7	5	1	4	17
Medical practitioners	..	..	..		15	23	20	27	85
Relatives	..	..	..		7	11	2	3	23
Others	..	..	..		9	6	5	8	28
TOTAL					46	52	28	45	171
Disposal:—									
Admitted under Sect. 25	..				1	4	—	1	6
„ „ „ 26	..				—	—	—	—	—
„ „ „ 29	..				9	16	4	4	33
„ as informal patient	..				17	14	12	10	53
Other admissions	..	..			—	—	—	—	—
TOTAL ADMITTED TO HOSPITAL					27	34	16	15	92
For community care	..				2	4	2	15	23
Not accepted	..	..			17	14	10	15	56
TOTAL					46	52	28	45	171

NUMBERS OF PERSONS REPORTED AS MENTALLY ILL*

	Under 65 years		Over 65 years		Totals										
	M.	F.	M.	F.	1960	1959	1958	1957	1956	1955	1954	1953	1952	1951	1950
Reported by:															
Police ..	60	51	8	19	138	173	192	132	112	105	141	148	118	125	92
General Hospitals ..	48	42	14	10	114	154	158	121	157	151	157	107	90	112	90
Medical practitioners ..	78	117	61	119	375	468	399	341	386	388	343	331	283	277	254
Relatives ..	43	60	12	36	151	179	196	181	176	139	159	118	187	91	74
Others ..	45	66	21	62	194	218	216	174	153	138	113	95	69	89	76
Total ..	274	336	116	246	972	1,192	1,161	949	984	921	913	799	747	694	586
Disposal:—															
Admitted to hospital:—															
Under Section 16 ..	—	—	—	—	—	2	—	—	1	—	5	2	3	6	—
" " 20 ..	71	111	17	25	224	297	333	268	284	262	271	242	237	216	133
As a voluntary patient ..	—	—	—	—	—	10	125	168	136	211	223	235	221	173	223
Others ..	77	78	61	92	308	341	188	104	138	69	1	—	—	—	—
For community care ..	148	189	78	117	532	650	646	540	559	542	500	479	461	395	356
Not accepted ..	14	23	12	65	114	131	177	121	58	49	51	58	110	118	96
" " "	112	124	26	64	326	411	338	288	367	330	362	262	176	181	134
Total ..	274	336	116	246	972	1,192	1,161	949	984	921	913	799	747	694	586

* Figures for 1960 represent 10 months only—to 31st October.

CITY OCCUPATION CENTRE

Analysis of defectives on the register on 31st December

Age Groups	Intelligence Quotients						Totals
	Below 30	30 to 40	41 to 50	51 to 70	71 to 80	Not tested	
FEMALES:							
Under 7 years ..	—	—	—	—	—	1	1
7 to 11 „ ..	—	6	5	2	—	7	20
12 to 15 „ ..	1	5	10	8	—	3	27
16 to 20 „ ..	—	4	8	2	—	1	15
21 to 39 „ ..	—	4	6	2	—	1	13
40 years and over	—	1	2	—	—	—	3
	1	20	31	14	—	13	79
MALES:							
Under 7 years ..	—	—	1	—	—	2	3
7 to 11 „ ..	2	14	8	2	1	4	31
12 to 15 „ ..	2	6	4	6	—	7	25
16 to 20 „ ..	—	15	4	5	1	4	29
21 to 39 „ ..	1	10	5	4	—	1	21
40 years and over	—	2	1	—	—	1	4
	5	47	23	17	2	19	113

MENTAL DEFICIENCY ACTS, 1913—1938

NEW CASES REPORTED	M.	F.	Totals					
			1960	1959	1958	1957	1956	1955
Subject to be dealt with—								
<i>Reported by Local Education Authority:</i>								
Sect. 57(3) Education Act, 1944	11	16	27	36	21	36	32	25
" 57(5) " " "	11	4	15	8	6	11	20	21
<i>Reported by other sources</i>	4	5	9	7	13	11	16	11
Not at present subject to be dealt with—								
Cases for whom the Local Health Authority may subsequently become liable	9	5	14	19	15	8	17	19
	35	30	65	70	55	66	85	76
Disposal of Cases—								
Admitted to Institution	4	2	6	5	9	3	8	1
Place of Safety	—	—	—	—	—	1	1	—
Placed under Statutory supervision	22	23	45	46	31	54	59	56
Placed under Voluntary supervision	9	5	14	19	15	8	17	19
	35	30	65	70	55	66	85	76
CASES ASCERTAINED PRIOR TO 1960 WHO DURING THE YEAR WERE								
Admitted to institution	12	3	15	21	59	39	15	17
Placed under guardianship	—	—	—	1	—	—	1	1
	47	33	80	92	114	105	101	94
CASES TRANSFERRED DURING THE YEAR:								
From guardianship to institution	—	—	—	—	5	6	4	1
TOTAL OF ASCERTAINED CASES:								
In institutions	283	244	527	529	531	481	460	453
Under guardianship	5	4	9	9	11	29	35	42
" Statutory supervision	327	268	595	578	562	570	564	517
" Voluntary supervision	166	124	290	278	304	288	289	321
In "Places of Safety"	—	—	—	—	—	13	5	4
	781	640	1,421	1,394	1,408	1,381	1,353	1,337

CITY AMBULANCE SERVICE

Foreword. I have pleasure in acknowledging this contribution by Mr. Ben England, M.I.Mech.E., M.Inst.T., the General Manager, on the thirteenth year of the Nottingham City Ambulance Service, and also his ready co-operation at all times.

Salaried Staff. The establishment of salaried staff consists now of an Ambulance Officer, a Deputy Ambulance Officer, a Radio Officer, six male Control Room Officers, a female Control Room Assistant, two shorthand typists, and a female clerk.

The post of Deputy Ambulance Officer, which was vacant at the close of 1959, was filled in February by the appointment of Mr. S. Ogden, who had previously served in the ambulance services of Oldham County Borough and of the Lancashire County Council.

The post of Staff Officer, Civil Defence, which also was vacant at the end of 1959, was filled in February by the appointment of Mr. R. Parkes, who was previously a leading driver in the Nottingham City Ambulance Service.

A female clerk was added to the staff in May, to fill a long-felt need for clerical assistance.

Employees. In view of the increase in work in 1959 compared with 1958, and as this increase could be foreseen to be likely to continue—as indeed it has done, as shown by the figures in appendix C—a recommendation was made to the Health Committee that the number of driver/attendants should be increased by five. The Health Committee approved this, but the Rate Estimates Sub-Committee allowed only two additional employees to be engaged.

The Health Committee, realising the seriousness of the position, referred the matter back to the Rate Estimates Sub-Committee, with a request that the application be reconsidered.

Simple arithmetic shows that it will be necessary to engage a further four driver/attendants when the 42 hour week comes into operation on 1st January 1961 in order to maintain the status quo in respect of man-hours, but prudence, foresight, and common sense indicate that more than four additional employees must be engaged if the still-rising tide of patients, as shown in this year's figures, is to be catered for.

The position at the end of 1960 in respect of employees is:— one senior leading driver, seven male leading drivers, fifty-three male driver-attendants, and eleven female driver-attendants, making a total of 72 employees.

It is necessary to stagger the number of employees on duty during the day and night. The following table shows the availability of employees during a normal working day.

PERIOD OF DAY	11.00 p.m. till 7.20 a.m.	7.20 a.m. till 8.00 a.m.	8.00 a.m. till 8.20 a.m.	8.20 a.m. till 8.30 a.m.	8.30 a.m. till 9.00 a.m.	9.00 a.m. till Noon	Noon till 2.00 p.m.	2.00 p.m. till 3.00 p.m.
No. of employees on duty ..	8	12	14	19	30	42	44	42

PERIOD OF DAY	3.00 p.m. till 4.00 p.m.	4.00 p.m. till 4.20 p.m.	4.20 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 8.00 p.m.	8.00 p.m. till 10.00 p.m.	10.00 p.m. till 11.00 p.m.
No. of employees on duty ..	44	42	37	26	15	14	12	10

Ambulance Stations. WILFORD SUB-STATION, in Clifton Lane, was opened on 18th June 1960, and the sub-station at the Guildhall which had been in operation since 1948, was closed on that date.

The three stations now in use are:—

CENTRAL AMBULANCE STATION, in Beechdale Road, which houses the Ambulance Officer and Deputy Ambulance Officer, the Control, and 21 vehicles; one ambulance and one dual-purpose vehicle is manned throughout the twenty-four hours, the other vehicles being manned for varying periods between 7.20 a.m. and 10.00 p.m.

CARLTON ROAD SUB-STATION, which houses four vehicles; one ambulance is manned continuously, the other vehicles being manned between 8.30 a.m. and 5.00 p.m.

WILFORD SUB-STATION, which houses four vehicles; one ambulance is manned continuously, the other vehicles being manned between 8.20 a.m. and 5.00 p.m.

Vehicle Fleet. At the 31st December 1960 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.	5	—	—	—	—	3	1	—	—	5	1
S.C.	—	—	—	4	3	2	2	—	1	—	2

Ambs. = Number of ambulances in each group.

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

Three new sitting-case vehicles were ordered during the year, but delivery will not be effected until 1961.

In the recommendation to the Health Committee mentioned under the heading **Employees**, it was also recommended that two additional dual-purpose vehicles should be obtained. This the Health Committee approved, but the Rate Estimates Sub-Committee disallowed the recommendation. The Health Committee were of the opinion that the Rate Estimates Sub-Committee could be assisted by being supplied with further information, so the matter was returned to the Rate Estimates Sub-Committee for reconsideration.

Training of Employees. 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 Diploma of the Institute of Certified Ambulance Personnel.

The lack of training of personnel is one of the shortcomings of the Ambulance Service—not only locally, but nationally. In an attempt to improve this in Nottingham, at least in so far as first aid is concerned, the Ambulance Officer formed a Division of the St. John Ambulance Brigade in March from among the staff and employees of the Nottingham City Ambulance Service. The Ambulance Officer gives most of the instruction to this Division and the opportunity is taken to include as much training as is practicable in general ambulance procedures.

Unfortunately, this venture has not received the support it deserves, the membership being composed mainly of enthusiasts who are no longer engaged in the practical aspects of ambulance work. The interest shown by the members is, however, very stimulating, the instruction and resultant discussions always over-running the allotted time, often by a considerable amount.

No official training is being given to newly-recruited employees, as insufficient staff and employees are available to make it practicable, the driver-attendants in particular being required on the road during the whole of their periods of duty.

Civil Defence. All volunteers have undertaken training in first aid, map reading, loading and unloading of ambulances, collection of casualties, and all other subjects relevant to ambulance work.

Ministry of Health Circular 9/60, which changed the name of this Section of the Civil Defence Corps from Ambulance and Casualty Collecting Section to Ambulance and First Aid Section, and which caused the Section to be reorganised into columns, companies, and platoons, has given fresh impetus to Civil Defence training. This has coincided very fortunately with the improved facilities for this type of training on the new rescue set at the Civil Defence Training Ground at Edwards Lane, which will enable more realistic training to be carried out.

Another departure from long-established training which the circular has brought about is a Leadership Course for potential officers. Hitherto the Civil Defence Ambulance Section has been instructed and officered almost entirely by the peacetime officers, but now there will be a need to appoint many volunteer officers to enable the Section to train in platoons and smaller units under their own individual volunteer officers.

It is fortunate that another peacetime officer qualified as an Ambulance and First Aid Section Instructor at the Home Office Civil Defence School during the year. Having four centrally-trained Instructors will be of great assistance in carrying out the amount of training now made necessary by the new formations and the number of members in the Section.

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

During the year 9 pupils have passed the Ministry of Transport driving test, of which 8 were members of the ambulance and First Aid Section and one was a member of the Headquarters Section.

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 Outpatient Department is still in use, but modifications have been made during the year to the duties of the officer manning it, in order to obtain greater efficiency from the employees and from the vehicles.

Publicity. The City Ambulance Service was featured in the Health Department's exhibit at the Local Government Exhibition held at the People's College of Further Education from 22nd to 27th August, and an article on its formation and work appeared in the August issue of the Diary of Entertainments and Events issued by the Publicity and Information Department of the Nottingham Corporation.

One of the female drivers was the subject of an article and large photograph in the Nottingham Evening Post in October. This newspaper, together with others circulating in the City, also carried in its correspondence columns during September and October a number of letters which arose from the proposal to increase the number of employees and vehicles.

A talk has been given by the Ambulance Officer to an organisation in the City and various organised parties have been shown over the Central Ambulance Station, including the Control and the vehicles. Every opportunity is taken in these contacts with

the public to impress upon them the need for ensuring that the calls made upon the service are for cases in which no other form of transport will suffice.

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 568 on 12th December, compared with 528 on 8th October, 1959, the previous record day.

The record day's mileage of 1,957 on 2nd November 1959 was exceeded on 31st March, when the vehicles of this Service ran 1,980 miles.

During 1960 a total of 125,597 patients was conveyed over a distance of 470,140 miles, as tabulated in appendix A; the increase in the number of patients compared with 1959 was 14,586, and the increase in mileage was 16,454 miles.

The demand on the Ambulance Service has again been increased in 1960: in my report for 1959 I drew attention to the fact that 10,000 patients had been carried in each of two months, this creating a new monthly record for the Service, but in 1960 there have been only three months in which 10,000 patients were not carried, and the lowest total in those months was only 437 below 10,000. In 1960, also, the number of patients carried in a month exceeded 11,000 on three occasions, thus creating a new record.

In 1958 the Service passed 100,000 patients as a year's total for the first time: in 1960 the total is 125,597. Taking 10,500 as the approximate monthly figure, it can be seen that the Service is being called upon to perform more than fourteen months' work in twelve months compared with only two years ago, and this with only two extra driver-attendants and no extra vehicles.

Much time has been spent by the Ambulance Officer this year in attending meetings and conferences intended to keep the load on the ambulance service down to the minimum and to provide the hospitals with an effective flow of patients; the Ambulance Officer's attendances included one conference in Sheffield, called by the Sheffield Regional Hospital Board and designed to study the outpatient problem, but there is no indication that the upward curve is going to level out: I feel that more driver-attendants and more vehicles are absolutely essential.

Mental Patients. In May 1959 the Mapperley Hospital began to take day patients for occupational treatment, and the number carried now is about 60 per day, or 15,600 per annum: these patients are included in the total of patients given in appendix A. The figure of 15,600 mental patients per annum is not fully demonstrated by the increase of 14,021 outpatients in 1960 compared with 1959, because the number of mental patients per day gradually increased as the year progressed.

It is clear that this constitutes a considerable additional burden on the Ambulance Service, but it is expected to increase to 130 patients per day.

Productivity. Under this heading in my report for 1959 I drew special attention to the very great increase in productivity since 1948, as shown by the figures in columns 5 and 6 of appendix C.

As I said last year, all this demonstrates great strides in economy of use, and it is a striking instance of increased productivity. Increased productivity, however, can be a warning that too-great risks are being taken: such is the case, inasmuch as every employee and every vehicle is occupied. There is no margin for emergencies.

Notice the decreased cost per vehicle mile: so much extra mileage has had to be run compared with 1959 that the cost has been reduced.

It is fortunate that there has been a decrease in the demand for long-distance journeys in 1960 compared with 1959: had the level of demand remained the same, or increased, the position would have been extremely embarrassing, because the 14,586 increase in the number of patients carried was due principally to an increase in outpatients travelling to local hospitals: in fact, 14,021 of the increase of 14,586 was so caused. A greater number of long-distance journeys would have prevented many outpatients being carried.

The number of places to which patients can be sent by train is diminishing, due to the spread of diesel train service, and so any rise in demand for long-distance journeys will inevitably cause the figure for long-distance journeys by ambulance service vehicles to rise: diesel trains cannot accommodate stretchers.

The transportation of one patient on a long-distance journey can occupy a vehicle and crew for many hours, or even for the whole of a working day: to do this more frequently than has been necessary and also to carry the increase in local outpatients with the present resources of driver-attendants and vehicles would be impossible.

The following list of long-distance journeys will illustrate the work to which I am referring.

Long-distance Journeys.

Road Journeys by Ambulance Service Vehicles

Sheffield	..	..	..	..	..	34
Buxton	..	..	..	..	..	6
Leeds	..	..	..	..	..	5
Aylesbury, Birmingham, Chepstow, Oxford, Skegness and Taplow (Bucks.)	..	..	..	..	..	2 each

Ashbourne, Bangor (Caernarvonshire), Beverley (Yorks.), Blackburn, Bristol, Cleethorpes, Coventry, Crewe, Gainsborough (Lincs.), Grimsby, Leamington, Lincoln, Marlborough (Wilts.), Matlock, Stoke-on-Trent and Stourbridge (Worcs.)	1 each
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A decrease of 15 compared with the 1959 total of 88 long-distance road journeys.

Rail Journeys

British Railways have again given great assistance in the conveyance of patients on journeys outside the City, a number of which are arranged and carried through at very short notice.

The following journeys have been undertaken by rail during 1960:—

Sheffield	37
Skegness	25
Derby	20
London	11
Chapel Allerton (Yorks.)	7
Ashover (Derbyshire)	5
Lincoln, Matlock and Walton-on-Thames (Surrey) ..	4 each
Bexhill-on-Sea (Sussex), Grimsby, Ilford (Essex) and Leamington Spa	3 each
Boston (Lincs.), Buxton, Carshalton (Surrey), Lough- borough, Maghull (Lancs.), Nether Langwith (Notts.), Newcastle-on-Tyne, Stoke Mandeville (Bucks.) and Worthing (Sussex)	2 each
Alderley Edge (Cheshire), Beckenham (Kent), Bognor Regis, Bradford, Broadstairs, Bromley (Kent), Cardiff, Chatham (Kent), Farnham (Bucks.), Gainsborough (Lincs.), Glasgow, Grange-over-Sands (Lancs.), Heysham Docks, Kettering, Lancaster, Leeds, Leighton Buzzard (Beds.), Luton, Mablethorpe, Maltby (Yorks.), Margate, Mexborough (Yorks.), Much Hadham (Herts.), Newport (Isle of Wight), Norwich, Peter- borough, Repton (Derbys.), Ryde (Isle of Wight), Scunthorpe, Sidcup (Kent), Sunderland, Taunton, Waltham Cross (Herts.), Washingborough (Lincs.), Welling (Kent) and Wick (Caithness, Scotland) ..	1 each

A total of 198 patients was conveyed by rail, a decrease of 20 compared with 1959. On some journeys more than one patient was carried.

Bus Journeys

Arrangements were made with the several bus undertakings for the carriage of 36 patients:—

Skegness	..	..	..	..	..	25
Matlock	..	..	..	..	..	6
Mablethorpe	..	..	..	..	..	3
Ripley and Sheffield	..	..	..	..	..	1 each

A decrease of 7 compared with the 1959 total of 43 patients.

Emergency Cases. There has been no major disaster this year.

Emergency cases for the year have totalled 5,759, compared with 5,647 during 1959. The highest number of emergency cases on any day was 34 on 25th November, compared with 31 cases on the 7th August and 25th December 1959. Appendices A and C set forth the figures.

Rechargeable Mileage. During the year, 855 patients have been conveyed for 30 other authorities, giving rechargeable figures of 1,873 sitting-case vehicle miles and 2,375 ambulance miles.

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

During the year, 1,196 journeys have been made, covering a distance of 4,275 miles, compared with 1,172 journeys and 4,754 miles in 1959.

In view of the demands which are being made upon the Ambulance Service, I feel that serious consideration must be given to the advisability of the Ambulance Service being required to carry out this and other ancillary functions, which could be carried out by vehicles other than ambulance service vehicles.

Progress. The report gives an indication of the pressure which has been put upon the Ambulance Officer, the other officers, and the employees of the Ambulance Service. Their task of meeting constantly increasing demands for ambulance transport

has been accomplished as well as it has been accomplished only by reason of energetic, able, and unsparing efforts on the part of all who are employed in the Ambulance Service.

The Ambulance Service has thus managed to struggle through another year, but resources have been strained frequently to their fullest extent. It is imperative, therefore, that the Service should have more men and vehicles in 1961 in order that the work may be undertaken with less risk of the demand exceeding the potential capacity to respond.

Appreciation. I extend my warmest commendation to the staff and employees of the Service for their work during a very difficult 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 1960 the Ambulance Service consisted of the following:—

Salaried staff in the grading scheme	13
Senior leading driver	1
Leading drivers	7
Male driver-attendants	53
Female driver-attendants	11
	<hr/>
Total personnel	85
	<hr/>

Permanent fleet

Ambulances	15
Sitting-case cars	3
Dual-purpose vehicles	11
	<hr/>
	29
	<hr/>
Ambulance stations	3

APPENDIX A.

1960	Emergencies		Admission		Discharges		Outpatients		Unclassified		Analgesia		Service		Total	
	P.	M.	P.	M.	P.	M.	P.	M.	P.	M.	J.	M.	M.	P.	M.	M.
JANUARY ..	382	1,778	894	6,872	754	3,496	7,979	24,221	43	544	92	327	1,637	10,052	38,875	
FEBRUARY ..	422	1,938	896	6,630	742	3,564	8,066	23,658	45	800	101	346	1,526	10,171	38,462	
MARCH ..	448	1,961	960	7,863	836	3,673	8,491	24,506	52	534	121	439	1,792	10,787	40,768	
APRIL ..	488	2,286	891	6,507	722	3,434	7,405	21,141	57	626	112	304	1,631	9,563	35,929	
MAY ..	529	2,661	889	6,231	810	3,620	8,735	24,440	60	610	86	279	2,219	11,023	40,060	
JUNE ..	464	2,221	891	6,647	849	3,564	7,659	22,288	53	830	96	362	1,716	9,916	37,628	
JULY ..	497	2,374	851	6,376	815	3,439	7,794	23,765	52	586	87	310	1,647	10,009	38,497	
AUGUST ..	536	2,500	796	5,866	756	3,535	7,655	22,936	50	607	101	429	2,088	9,793	37,961	
SEPTEMBER ..	460	2,259	871	5,844	815	3,379	8,318	24,433	67	731	133	453	1,872	10,531	38,971	
OCTOBER ..	495	2,194	926	6,553	913	3,806	8,836	25,089	47	603	93	385	1,772	11,217	40,402	
NOVEMBER ..	492	2,256	874	6,184	949	4,272	9,378	26,970	58	370	108	382	1,510	11,751	41,944	
DECEMBER ..	546	2,784	1,044	7,015	877	4,216	8,272	24,281	45	463	66	259	1,625	10,784	40,643	
TOTAL ..	5,759	27,212	10,783	78,588	9,838	43,998	98,588	287,728	629	7,304	1,196	4,275	21,035	125,597	470,140	

P. = Patients. M. = Miles. J. = Journeys.

PATIENTS AND MILES BY EACH TYPE OF VEHICLE

Month	Ambulances		Sitting-Case Cars		Dual-purpose Vehicles		Total	
	Patients	Miles	Patients	Miles	Patients	Miles	Patients	Miles
1960								
Jan. . .	4,867	21,151	1,059	4,138	4,126	13,586	10,052	38,875
Feb. . .	4,676	20,083	1,246	4,979	4,249	13,400	10,171	38,462
Mar. . .	5,280	20,269	1,095	5,390	4,412	15,109	10,787	40,768
April . .	4,651	18,077	815	4,288	4,097	13,564	9,563	35,929
May . .	4,966	19,623	1,230	5,764	4,827	14,673	11,023	40,060
June . .	4,901	20,206	940	4,381	4,075	13,041	9,916	37,628
July . .	4,672	19,592	1,096	4,651	4,241	14,254	10,009	38,497
Aug. . .	4,621	19,731	1,121	5,270	4,051	12,960	9,793	37,961
Sept. . .	4,747	19,774	1,149	4,819	4,635	14,378	10,531	38,971
Oct. . .	5,305	21,598	995	4,047	4,917	14,757	11,217	40,402
Nov. . .	5,755	22,238	1,115	4,360	4,881	15,346	11,751	41,944
Dec. . .	5,336	22,498	787	3,281	4,661	14,864	10,784	40,643
	59,777	244,840	12,648	55,368	53,172	169,932	125,597	470,140

Ambulances	..	..	59,777	244,840
Sitting-case cars	..	..	12,648	55,368
Dual-purpose vehicles	..	..	53,172	169,932
Totals . .	..	..	125,597	470,140

The total of 470,140 miles includes 4,275 *analgesia miles*; for details of those, please see appendices A and C.

APPENDIX C.
FINANCIAL SUMMARY AND STATISTICAL RECORD FROM 1948 to 1960

Year ended on 31st December	Total miles 1	Analgesia miles 2	Patient and Service miles 3	Total Patients 4	Average miles per patient 5	Patients Carried per thousand miles run 6	Cost per Vehicle Mile for year ended on preceding 31st March 7	Maxi- mum mileage on any one day 8	Maximum No. of Patients on any one day 9	Highest No. of Emergency Calls on any one day 10	Total Expenditure for year ended on preceding 31st March 11
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
1958	396,834	4,954	391,880	100,079	3.92	255.38	42.73	1,798	468	33	70,521
1959	453,686	4,754	448,932	111,011	4.04	247.28	40.80	1,957	528	31	85,730
1960	470,140	4,275	465,865	125,597	3.71	269.60	37.47	1,980	568	34	85,605

APPENDIX D.

ABSTRACT OF ACCOUNTS FOR THE YEAR ENDED
31st MARCH, 1960

	<i>Amount</i> £	<i>Amount</i> £	<i>d. per mile</i>
INCOME			
Recharges to Other Authorities ..	632		·327
Recharges of Other Departments of the Corporation	1,210		·625
Miscellaneous Hire	41		·021
Transfer to Renewal and Repairs Fund ..	8,347		4·314
	<hr/>		<hr/>
	10,230		5·287
	<hr/>		<hr/>
EXPENDITURE			
Salaries and Wages			
Salaries of Ambulance Officer and staff ..	7,569		3·912
Wages of driver/attendants	37,478		19·370
National Insurance and Superannuation ..	3,367		1·740
	<hr/>	48,414	
Premises			
Repair and maintenance of buildings and grounds	344		·178
Fuel, light, cleaning materials and water ..	1,508		·779
Furniture and fittings	35		·018
Rent and rates	1,819		·940
	<hr/>	3,706	
Supplies, Equipment and Tools			
First aid equipment and supplies ..	200		·103
Maintenance and operation of wireless equipment	639		·330
Uniforms	744		·385
Laundry	388		·201
Other equipment	91		·047
	<hr/>	2,062	
Transport			
Petrol and oil	6,507		3·363
Repair and maintenance of vehicles ..	6,107		3·156
Railway fares of patients and escorts ..	227		·117
Licences, carriage and car allowances ..	155		·080
Contribution to Renewal and Repairs Fund	6,000		3·101
	<hr/>	18,996	
<i>Carried forward</i>		<hr/>	<hr/>
		73,178	37·820

	Amount £	Amount £	d. per mile
<i>Brought forward</i>		73,178	37·820
Establishment Expenses			
Printing, stationery, advertising and postages	524		·271
Telephones	510		·264
Insurance	728		·376
Travelling, subsistence and conference expenses	27		·014
Contribution to Central and Departmental administration	3,452		1·784
	<hr/>	5,241	
Agency and Voluntary Services			
Ambulance hire		142	·073
Miscellaneous Expenses			
Audit stamp duty and miscellaneous expenses		77	·040
		<hr/>	<hr/>
		78,638	40·642
		<hr/>	<hr/>
Debt Charges			
Loan Interest and management charges ..	2,493		
Loan Redemption	4,474		
	<hr/>	6,967	
Revenue Contributions to Capital Outlay			
Purchase of ambulances and cars ..	8,347		
City Engineer's services—Wilford Station	759		
	<hr/>	9,106	
		<hr/>	<hr/>
		94,711	
		<hr/>	<hr/>
Capital Expenditure			
Ambulance Station:— Beechdale ..		12	
Wilford		7,514	
		<hr/>	<hr/>
		7,526	
		<hr/>	<hr/>

London, 18th June 1871

My dear Sir,

I have the honor to acknowledge the receipt of your letter of the 14th inst.

in relation to the proposed alterations in the City of London.

I have also the honor to acknowledge the receipt of your letter of the 15th inst.

in relation to the proposed alterations in the City of London.

I have also the honor to acknowledge the receipt of your letter of the 16th inst.

in relation to the proposed alterations in the City of London.

I have also the honor to acknowledge the receipt of your letter of the 17th inst.

in relation to the proposed alterations in the City of London.

I have also the honor to acknowledge the receipt of your letter of the 18th inst.

in relation to the proposed alterations in the City of London.

I have also the honor to acknowledge the receipt of your letter of the 19th inst.

in relation to the proposed alterations in the City of London.

I have also the honor to acknowledge the receipt of your letter of the 20th inst.

in relation to the proposed alterations in the City of London.

I have also the honor to acknowledge the receipt of your letter of the 21st inst.

in relation to the proposed alterations in the City of London.

I have also the honor to acknowledge the receipt of your letter of the 22nd inst.

in relation to the proposed alterations in the City of London.

I have also the honor to acknowledge the receipt of your letter of the 23rd inst.

in relation to the proposed alterations in the City of London.

I have also the honor to acknowledge the receipt of your letter of the 24th inst.

in relation to the proposed alterations in the City of London.

I have also the honor to acknowledge the receipt of your letter of the 25th inst.

in relation to the proposed alterations in the City of London.

I have also the honor to acknowledge the receipt of your letter of the 26th inst.

in relation to the proposed alterations in the City of London.

I have also the honor to acknowledge the receipt of your letter of the 27th inst.

PART III

ENVIRONMENTAL SERVICES

Clean Air Act 1956

Factories Acts 1937-1959

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 DISEASES

FOOD SUPERVISION AND INSPECTION

HOUSING

SANITARY SERVICES

INFECTIOUS DISEASES

The table given below is compiled mainly from formal notifications of cases of infectious disease, some of which were subsequently amended.

	1960	1959	1958	1957	1956	1955	1954
	Total	Totals					
Food poisoning	33	151	50	51	22	56	59
Paratyphoid fever	1	2	—	—	1	5	—
Poliomyelitis:							
paralytic ..	3	9	4	17	13	26	10
non-paralytic ..	1	—	—	3	1	6	—
Typhoid fever ..	—	1	1	—	—	—	—
Dysentery ..	261	285	514	485	1,222	110	396
Pertussis ..	232	206	153	247	1,024	566	1,042
Measles ..	3,054	1,852	2,782	4,882	165	6,935	666
Pneumonia ..	152	189	222	274	144	184	144
Scarlet fever ..	198	510	481	332	241	147	450
Erysipelas ..	12	18	20	25	25	21	24
Cero-spin. fever ..	4	4	9	5	8	11	9
Puerp. pyrexia ..	15	31	17	35	20	28	91
Encephalitis:							
infective ..	1	3	—	—	—	1	1
post infectious	8	2	5	3	—	4	8
Ophth. Neonat...	7	11	9	6	3	24	8

Food Poisoning. After a considerable increase in 1959, the numbers in 1960 returned to the level of previous years. The 33 cases were made up mainly from sporadic incidents, but 4 of them occurred in family contacts of 3 of the original cases.

Paratyphoid. An isolated case occurred in a person shortly after returning from holiday abroad. Friends from North Africa, also on holiday, who were staying in the same house in France, were a possible source of infection as the infecting organism was *S. paratyphi A* which is uncommon in Europe.

Such cases underline the value of typhoid-paratyphoid vaccination before travelling to foreign countries.

Dysentery. There were 261 notified cases; a low incidence, though the annual variation is wide. Outbreaks occurred in 3 nurseries and in one children's home, involving a total of 52 children and 7 members of staff.

Gastro-Enteritis. This disease is not notifiable. During the year there were 96 admissions to hospital, with one death in a child aged 7 months. Two deaths occurred at home in infants aged 3 weeks and 15 months.

Poliomyelitis. Notifications were received on 10 occasions and of these 3 paralytic and 1 non-paralytic were finally confirmed. The latter was diagnosed as a result of laboratory investigations, after discharge from hospital. All cases occurred in the unvaccinated.

One of these came from a family of 8 children of whom 4 had been vaccinated, and a second from a family of 9, all of whom were unprotected. In both of these cases, other children in the family were found, by laboratory tests, to be carrying the organism although having no symptoms of the disease.

		Paralytic	Non-Paralytic	Total	Deaths
1953	..	20	9	29	2
54	..	10	—	10	—
55	..	26	6	32	1
56	..	13	1	14	—
57	..	17	3	20	—
58	..	4	—	4	1
59	..	9	—	9	1
60	..	3	1	4	—

Age Group		1953		1954		1955		1956		1957		1958		1959		1960	
		M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
0 — 4	..	8	6	1	3	1	4	3	2	7	4	—	1	3	2	1	1
5 — 9	..	4	—	3	2	7	1	3	4	2	2	—	—	—	—	—	—
10 — 14	..	—	1	—	—	6	—	—	—	1	1	—	—	—	—	1	—
15 — 24	..	3	3	—	—	5	2	1	1	2	—	—	1	1	—	—	—
25+	..	1	3	1	—	4	2	—	—	—	1	2	—	2	1	1	—
TOTALS	..	29		10		32		14		20		4		9		4	

Pertussis. Of the 232 cases of whooping cough notified, 15 required admission to hospital; only 30 had been fully immunised. Of the cases in children under 5 years of age, nearly all were unimmunised; the parents of about one third of this age group had not sought protection for their children.

For 5 years there have been no deaths in the City from the disease and the marked reduction in cases following large scale immunisation has been maintained.

	1952	1953	1954	1955	1956	1957	1958	1959	1960
Notifications ..	1,240	1,042	1,104	566	1,024	247	153	206	232
Deaths ..	3	3	0	2	0	0	0	0	0
No. immunised	—	—	—	3,584*	3,063	3,438	3,565	3,677	4,183

* First year of vaccination on a large scale.

ANALYSIS BY AGES

	M.	F.	Total
Under 1 year	11	22	33
1 — 4 years	64	44	108
5 — 9 „	40	41	81
10 — 14 „	3	6	9
15+	—	1	1

Measles. There were 3,054 cases notified and 23 were admitted to hospital. No deaths occurred.

Diphtheria. A nurse in a general hospital was notified as a case of diphtheria. The organism was isolated from a swab taken during routine investigations after she became ill. It was shown to be *C diphtheriae mitis* which was thought to have a low degree of virulence, but was later proved to be avirulent.

The patient was transferred to an infectious diseases hospital where she made an uninterrupted recovery; she had not been immunised.

Further investigations and follow-up of the patient led to the opinion that this was not a case of diphtheria. It was concluded that she had been a carrier suffering from an undiagnosed intercurrent infection.

All nursing staff at the hospital, and patient contacts, had swabs taken as a precautionary measure. Two members of the

staff and one patient were found to be carriers. They were isolated and treated until further swabs proved negative.

The nursing staff were subsequently Schick tested and those found to have positive reactions were accordingly immunised.

A man due to be admitted to hospital for medical investigation was found, by routine throat swab, to be a carrier of *C. diphtheriae* mitis. He was isolated at home, where all further swabs were negative. There were no positive contacts.

Venereal Disease. New cases of gonorrhoea, 451, contrasted with 570 in 1959, when the incidence was exceptionally high. The number of new cases of syphilis, compared with 49 in 1959, fell to 45, which is the lowest number for 5 years.

Encephalitis. A man aged 34 years became acutely ill and died within 24 hours of admission to hospital. Post mortem investigations showed that he had been suffering from acute infective encephalitis, but the causal organism was not identified.

Post-infective encephalitis followed mumps in 7 patients, aged 5, 6, 8, 11, 14, 38 and 38 years. No deaths occurred.

A baby of 4 months died 11 days after smallpox vaccination. The cause of death was shown at post mortem examination to be due to encephalitis and this was attributed to the vaccination, of which it is a rare complication.

Cerebro-Spinal Fever. Four cases were notified—all in children. There was one death, in hospital, of a girl aged 6 years.

Contacts or Carriers of Infectious Disease. Certificates for exclusion from work under Ministry of Health Circular 115/48 were issued on 23 occasions.

Dysentery	..	..	10	Food Poisoning	..	..	4
Scarlet Fever	..	..	4	Gastro Enteritis	..	..	3
Paratyphoid	..	..	1	Poliomyelitis	..	..	1



Sampling your milk
Sampling your milk



. . . . and inspecting your joint.



FOOD SUPERVISION AND INSPECTION

FOOD HYGIENE

The great amount of work involved in ensuring the hygienic preparation, storage, exposure for sale and delivery of food, did not produce immediate and spectacular results. Nevertheless, it was apparent from the schemes of improvement, reconstruction and installation of modern equipment in food premises, that the owners were becoming aware that food hygiene was good business and that an informed public demanded a high standard of hygiene. It was a source of satisfaction that prospective owners of food businesses, and architects, sought the advice of the public health inspectors on the requirements of the Food Hygiene Regulations before constructing or adapting premises, with the result that a good standard was achieved at the outset. Furthermore, it was possible to discourage the use of premises which were structurally unsuitable.

The improvement of premises and the provision of new equipment only solved part of the problem as, unfortunately, food was so often exposed to the risk of contamination by the thoughtless behaviour of individual food-handlers. It was in this aspect of food hygiene that inspectors exercised vigilance in an endeavour to draw attention to bad practices.

On 1st October the Food Hygiene (General) Regulations 1960 came into force repealing the Regulations made in 1955. The new Regulations contained some improvements on the previous ones and were extended to apply to food businesses carried on from home-going ships and moored vessels after the 1st November, 1961.

The sale of open food from stalls and vehicles was kept under observation and was generally satisfactory. An improvement was noticeable in the sale of food at the Goose Fair held in October.

Proceedings were instituted in the following cases in respect of offences against the Food Hygiene Regulations:—

- | | |
|---|---|
| (a) Obstruction of a public health inspector in the execution of the Regulations | Employee fined £2. |
| For aiding and abetting in the obstruction of the inspector | Owner fined £4. |
| (b) Failure to provide and maintain suitable and sufficient wash hand-basins at a greengrocery shop | Owner fined £5, plus £2. 2s. 0d. costs. |
| (c) Owner of confectionery shop using tobacco while handling open food | Owner fined £5, plus £2. 2s. 0d. costs. |
| (d) Failure to provide suitable and sufficient wash hand-basins at a greengrocery shop | Owner fined £10, plus £1. 10s. 0d. costs. |

The number of complaints of foreign matter in food was eleven. They concerned the presence of:—

string in bread
 „ „ sausage rolls
 insects in flour confectionery
 a mouse in fried chips
 a nail in a cake
 tobacco in a bun, and
 a piece of paper in a bottle of milk.

Legal proceedings were instituted in four cases; one was dismissed but in the others, penalties of:—

£5, £10 and £10

were imposed. In the complaint of string in a loaf of bread, evidence became available that an employee at the bakery was entirely responsible and proceedings were successfully taken against him.

In the course of 7,367 visits to various food premises it was necessary to draw attention to 398 defects and contraventions of the Regulations. Requirements, including those outstanding from 1959 were met in 493 cases.

Food Premises Supervised	1956	1957	1958	1959	1960
Grocers and provision dealers including off-licence premises ..	1,244	1,252	1,248	1,229	1,251
Butchers and meat products manufacturers	449	456	451	435	403
Hotels, public houses and clubs ..	437	437	435	433	427
Sweet shops	399	399	400	391	408
Fruit and vegetable dealers ..	379	372	388	378	371
Factory canteens, etc. ..	224	227	231	232	255
Restaurants, snack bars, etc. ..	243	221	218	227	230
Bread, pastry, and confectionery dealers including bakehouses ..	176	166	159	148	141
Fried fish and chip shops ..	134	145	144	142	138
Wet fish, poultry, game, etc., dealers	62	68	65	58	59
Wholesale food dealers	44	47	47	48	46
School kitchens	53	55	56	56	59
Ice-cream manufacturers	18	18	18	14	13
Mobile food shops	32	27	31	27	24
Foodstalls in markets:					
Wholesale	41	43	43	43	42
Retail	85	97	99	99	108
Miscellaneous	80	95	91	89	71
Dairies	5	5	5	5	5
TOTAL OF VISITS	3,808	4,183	4,225	6,090	7,367

Premises registered under Sect. 16, Food and Drugs Act, 1955					
Premises used for the sale of ice-cream					1,209
" " " " manufacture of ice-cream					13
" " " " preparation or manufacture of sausages, or potted, pressed, pickled or preserved food					349
TOTAL					1,571

The number of inspections of registered premises was 2,156.

FOOD SAMPLING

A total of 47 samples of food was sent for bacteriological examination comprising eight samples of potted meat, twenty-one of coconut and eighteen of assorted nuts. All the samples were satisfactory.

Samples were also taken as follows:—

Formal	..	..	501	Analysed by City Analyst.
Informal	..	..	498	do.
Informal Milk	..	..	543	Tested by inspector.
			<hr/> 1,542 <hr/>	

The following were found not genuine:—

<i>Formal.</i>	<i>Action taken.</i>
Minced beef and gravy—words “and gravy” on the label were not clearly legible.	Warning letter from Town Clerk to canners.
Blackcurrant pies—filling contained also a proportion of apple.	Letter from Chief Public Health Inspector to manufacturer.
Potted meat—contained only 78% meat.	Warning letter from Town Clerk to manufacturer/retailer.
<i>Informal.</i>	<i>Action taken.</i>
Two samples of casserole steak (Australian)—low in meat content.	No action in absence of legal standards.
Can of casserole steak alleged to have caused illness.	Check sample found to be satisfactory—no further action.
Minced beef and gravy—labelling unsatisfactory.	Followed by formal sample.
Rum and coffee sweets—only trace of alcohol found.	Further samples satisfactory—manufacturer to amend labels to read “Flavoured”.
Super double concentrated tomato puree (Italian)—with only 28.7% tomato solids.	Letter from Chief Public Health Inspector to importers.
Tonic stout mixture without complete declaration of contents.	Letter from Chief Public Health Inspector to manufacturers—labelling corrected.

Informal.

Potted meat—only 76.5% meat owing to excess moisture content.

Pork luncheon meat—contained only 74% meat.

Dried apricots—contained hairs, small stones, etc.

Glaze cherries (pre-packed)—not labelled with list of ingredients.

Clear mixed pickles—contents not fully declared on label.

Chillie pickle—no list of ingredients on label.

Tincture of iodine—deterioration due to evaporation of bottle contents.

Potted meat—contained only 72.2% meat.

Potted meat—contained only 92.5% meat.

Rum beans—liquid centres and rum flavour but no alcohol content.

Cheese spread with patches of discolouration, live mites, etc.

Chopped pork with beef and ham—contained only 78% meat.

Pork dripping—contained 8.5% moisture due to jelly content.

Fruit syrup (Continental)—incomplete labelling.

Action taken.

Manufacturer visited and advised by inspector.

Correspondence between Chief Public Health Inspector and wholesaler/importers.

Seller advised by inspector.

Letter from Chief Public Health Inspector to packers—labelling to be corrected.

Letter from Chief Public Health Inspector to manufacturers.

Letter from Chief Public Health Inspector to packers. Stocks withdrawn for re-labelling.

Old stock. Seller surrendered remaining stock for destruction.

Followed by formal sample.

Followed by formal sample found to be satisfactory.

Letter from Chief Public Health Inspector to manufacturers—immediate labelling adjustment arranged.

Letter from Chief Public Health Inspector to manufacturers who are investigating production methods.

Further action under consideration.

Seller advised *re* labelling.

Packers and sampling officer of their area advised by inspector.

Sampling of MILK and ICE-CREAM—see pages 127 and 130.

Sampling of "OTHER FOODS"—see page 134.

MEAT SUPPLY

All slaughtering in the City was carried on in the public slaughterhouse owned by the Corporation. Works of improvement completed earlier in the year included an increase in the overall intensity of artificial light in the slaughterhalls and those places where meat inspection was carried out. These improvements made it possible for the Minister of Agriculture, Fisheries and Food by means of an Appointed Day Order to apply the Slaughterhouse (Hygiene) Regulations 1958 and the Slaughter of Animals (Prevention of Cruelty) Regulations 1958 in full to the public slaughterhouse from 1st October. Nottingham was, therefore, among the first towns in the country to which those important regulations applied in full.

Transport. Vehicles used for the transport of meat were inspected regularly both at the public slaughterhouse and at the time of the delivery of meat to the retail butchers' shops. It was found necessary on several occasions to draw the attention of owners and drivers to contraventions of the Food Hygiene Regulations and verbal warnings were confirmed in writing by the Chief Public Health Inspector.

Disposal of Condemned Food. All meat and offals found on inspection to be unfit were removed by approved firms from the slaughterhouse for manufacture into animal feeding stuffs and fertilisers. The Meat (Staining and Sterilization) Regulations 1960 came into operation on the 1st November. The Regulations required that unsterilized unfit meat should not be removed from the slaughterhouse to other premises for processing except in closed and locked containers or vehicles bearing a notice of adequate size and conspicuously visible stating distinctly and legibly that the meat was not for human consumption. Such

control of condemned meat was long overdue. Other food-stuffs were disposed of by the Corporation's Cleansing Department in controlled refuse tips.

For details of unsound food surrendered see page 133.

**CARCASES INSPECTED
and
CARCASSES CONDEMNED**

	Cattle exclud- ing Cows	Cows	Calves	Sheep and Lambs	Pigs	Total
Number killed and inspected	14,485*	4,185	2,492	60,785	28,889	110,836
All Diseases except tuberculosis and cysticerci :						
Whole carcasses condemned ..	12	22	13	100	69	216
Carcasses part (or organ) condemned ..	4,781	2,985	11	1,112	2,627	11,516
Percentage affected ..	33·09	71·85	0·96	1·99	9·33	—
Tuberculosis only :						
Whole carcasses condemned ..	19	10	—	—	2	31
Carcasses part (or organ) condemned ..	245	375	1	—	691	1,312
Percentage affected ..	1·82	9·19	0·04	—	2·39	—
Cysticercosis :						
Carcasses part (or organ) condemned ..	237	61	—	—	—	298
Carcasses submitted to treatment by refrigeration ..	26	4	—	—	—	30
Generalised and totally condemned ..	—	—	—	—	—	—

* Bulls 7 : bullocks 8,013 : heifers 6,465.

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	1960	1959	1958	1957	1956
Processing establishments	4	3	4	4	4
Distributors operating from wholesale dairies	8	8	7	8	10
Distributors operating from dairies outside the City	11	11	11	11	11
Distributors—shopkeepers	630	666	660	630	599

LICENSING

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

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

LICENCES GRANTED	1960	1959	1958	1957	1956
Dealers' — to pasteurise	4	4	4	4	4
„ „ sterilise	4	4	4	4	4
„ „ sell T.T. milk	64	157	81	64	57
„ „ „ pasteurised milk	441	615	514	441	418
„ „ „ sterilized milk	696	782	764	696	685
Supplementary—to sell T.T. milk	10	10	10	10	10
„ „ „ pasteurised milk	11	11	11	11	11
„ „ „ sterilised milk	10	10	10	10	10

SAMPLING

BACTERIOLOGICAL EXAMINATION

Examination for Tubercle Bacilli. Of 112 samples taken—including 40 of designated milks—all showed negative results to biological tests.

Two tests were not completed owing to technical difficulties at the laboratory.

The percentage of positive results in previous years is given:

1960	..	..	..	..	..	Nil
59	..	..	..	..	..	0.917 per cent.
58	..	..	..	..	..	Nil
57	..	..	..	..	..	Nil
56	..	..	..	..	..	1.00 per cent.
55	..	..	..	..	..	5.10 " "
54	..	..	..	..	..	5.77 " "
53	..	..	..	..	..	5.64 " "
52	..	..	..	..	..	4.71 " "
51	..	..	..	..	..	9.18 " "
50	..	..	..	..	..	5.40 " "

Tuberculin Tested Milk—Raw. Of 96 samples procured all but 2 complied with the prescribed standards.

Pasteurised Milk—including tuberculin tested milk (pasteurised). Samples of pasteurised milk sold under licence numbering 614 were subjected to the half-hour Methylene Blue Test; only 2 failed to satisfy the test.

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

Sterilised Milk. A total of 154 samples processed under licence was obtained for examination; four samples were found to be unsatisfactory due to errors not connected with the processing methods.

CHEMICAL EXAMINATION

Samples analysed by the Public Analyst

	No. of samples	Average per cent of fat	Average per cent of solids not fat
January	47	3.546	8.797
February	52	3.628	8.830
March	51	3.680	8.811
April	35	3.485	8.537
May	30	3.652	8.869
June	33	3.536	8.601
July	37	3.921	8.791
August	56	3.916	8.795
September	34	3.906	8.839
October	53	3.805	8.872
November	20	3.762	8.781
December	31	3.970	8.792
AVERAGES	40	3.733	8.776
The standard for milk is 'fat' 3.0% and 'solids-not-fat' 8.50%.			

Of the 543 informal samples subjected to the Gerber test by the inspector, 57 or 10.49% were unsatisfactory.

ACTION TAKEN ON UNSATISFACTORY MILK SAMPLES

<i>Samples taken formally and found not genuine</i>	<i>Action Taken</i>
12 samples from 7 producers were deficient in milk-fat content.	Letters from Chief Public Health Inspector to producers.
18 samples from 8 producers were deficient in solids-not-fat content.	do.
5 samples from 3 producers were deficient in milk-fat and milk solids-not-fat.	do.
2 samples from a consignment of 5 churns of Channel Island milk were low in fat content but the fat average satisfied the standard.	Letter from Chief Public Health Inspector advising producer.
1 sample from a consignment of 7 churns of Channel Islands milk was low in fat content but the fat average satisfied the standard.	do.
A sample of milk sold in a snack bar contained added water 15%.	Prosecution. Proprietors fined £20 with £3. 10s. 0d. costs.
Five samples of milk from a consignment of seven churns contained added water, 3.4%, 13.6%, 5.9%, 12.2% and 8.7% respectively.	Prosecution. Producer fined £20 with £3. 3s. 0d. costs.
A sample of hot milk sold in a snack bar contained added water 14% and a fat deficiency of 30%.	Legal proceedings pending.
A sample of milk sold in a cafe was low in milk-fat content.	Warning letter from Town Clerk to proprietor.

ICE CREAM

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

A total of 1,892 inspections was made.

Registrations in force at the end of the year:—

MANUFACTURERS:

" Hot Mix " method	..	..	4	
" Cold Mix " method	..	..	9	
			—	13

VENDORS AND DEALERS:

" Pre-packed " ices	..	..	964	
" Loose " ices	..	..	245	
			—	1,209
New registrations	..	..	99	
Transfers of registrations	..	..	50	

Sampling: Ice Cream. A total of 25 samples was taken for analysis: all conformed to the standard required by the Food Standards (Ice Cream) Regulations 1959.

Lollies. Bacteriological examination was made of 27 lollies. Seven taken from one source were found to be unsatisfactory and unsold stocks were withdrawn from sale.

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

Grade	Time taken to reduce Methylene Blue	No. of specimens reducing Methylene Blue
1	4 or more hours	145
2	2½—4 „	22
3	1 —2 „	9
4	0 — ½ „	5

FERTILISERS AND FEEDING STUFFS ACT 1926

FERTILISERS AND FEEDING STUFFS REGULATIONS, 1960

Samples taken	Satisfactory	Unsatisfactory	Total
FERTILISERS:			
Bone meal (raw)	1	1	2
Sulphate of potash	1	—	1
Steamed bonemeal	—	1	1
Garden fertiliser	1	1	2
Compound fish manure	1	—	1
"Solufeed" fertiliser	1	—	1
Nitrate of soda	1	—	1
Pure dried blood	1	—	1
Superphosphate of lime	1	—	1
Basic slag	1	—	1
FEEDING STUFFS:			
Layers' mash	3	—	3
„ pellets	1	—	1
Laying meal	—	1	1
Winter layers meal	1	—	1
Pig food no. 1 (sow and weaners)	1	—	1
Growers' pellets	1	—	1
Pig food no. 2 (fattening)	1	—	1
Balancer meal	1	—	1
Poultry meal	1	—	1
Chicken food (day old)	1	—	1
TOTALS	20	4	24

Action taken on unsatisfactory samples was as follows:—

- Bone meal (raw) .. Followed by a satisfactory formal sample.
- Steamed bone meal .. Manufacturers advised by inspector.
- Laying meal Manufacturers advised by inspector *re* mixing methods.
- Garden fertiliser .. Sellers advised by inspector.

A letter was sent by the Chief Public Health Inspector to a seller regarding unsatisfactory method of marking of items sold by him.

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	14
Transfer of licences	Nil
Persons ceasing to operate under the Act	12

A letter was sent by the Chief Public Health Inspector to one seller for a minor infringement of the Act.

SHELL FISH

Shellfish from various sources were received at the Sneinton Wholesale Fish Market. The total weight found to be unfit for human consumption was 7 tons 10 cwt.

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

Origin of Layings	No. of samples					
	1955	1956	1957	1958	1959	1960
Bangor	—	—	—	—	—	4
Boston, Lincolnshire	3	7	14	20	20	12
Brancaster, Norfolk	—	1	—	—	—	—
Conway	—	—	—	—	2	4
North Shields	1	—	—	—	—	—
Port Madoc, N. Wales	7	2	8	8	2	1
Ireland	2	3	3	14	—	1
Denmark	—	3	1	5	7	—

DETAILS OF UNSOUND FOOD SURRENDERED

Food other than meat	In stones					
	1955	1956	1957	1958	1959	1960
Bacon	168	127	95½	105½	140	156½
Butter	1½	1	1½	4½	5½	3
Canned goods ..	4,488½	3,614½	4,124	5,094½	4,974	5,099½
Cakes and pastry ..	24	4½	24½	18	4	21
Cheese	598½	81	249	196½	68	57
Chocolate and sweets	5½	2½	3½	38	8½	77½
Coffee	1½	—	1½	—	6	7
Conserves	1½	6½	70½	32½	25	60
Cooked meat ..	—	—	—	2½	—	—
Dried fruit	25½	29	8½	33½	34½	57
„ milk	41	49	—	—	8	11
Eggs—dried	38½	—	—	—	—	—
„ —liquid	—	2	2	—	3	—
„ —shell	11½	—	28	6	—	3
Fish	871	906	436½	358½	572	873
Fruit	144½	78	56	463½	82	1,460
Flour	7½	1½	5½	14	114½	7
Margarine	18	½	29	—	2	29½
Miscellaneous ..	26½	32	159½	240	825	175½
Poultry	29½	81½	42½	5	105	43½
Rabbits	27½	4½	—	13	1½	2
Sausage	59	47½	29	41½	41½	99
Shell fish	1,068½	1,498½	1,077	376½	1,098	1,200
Sugar	1½	3	½	—	1	55½
Synthetic cream ..	59	—	—	3	5	10
Vegetables	563½	380½	315½	935	2,973	914½
TOTAL	8,282	6,951½	6,759½	7,981½	11,097	10,422

Meat	Home-killed			Imported		
	in stones			in stones		
	1958	1959	1960	1958	1959	1960
Beef	11,053	6,928	4,981	64	81	25
Mutton and Lamb ..	306½	425	442	8½	45	5
Pork	3,133½	3,289½	1,761	—	1½	7
Veal	62	51	58½	—	—	—
Offals	18,815½	19,821½	15,223	44½	152	132
TOTAL	33,370½	30,515	22,465½	117	279½	169

GRAND TOTAL SURRENDERED 1958: 33,487½ stones = approx. 209 tons.

„ „ „ 1959: 30,794½ „ = „ 192½ „

„ „ „ 1960: 22,634½ stones = approx. 141½ 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	353	—	353	44	—	44	397	—	397
Milk, processed	80	2	82	3	3	6	83	5	88
Milk, canned, condensed	—	17	17	—	—	—	—	17	17
Butter, cream, cheese and other dairy products	—	12	12	—	1	1	—	13	13
Ice cream and frozen lollies	—	25	25	—	—	—	—	25	25
Open meat products	—	17	17	2	8	10	2	25	27
Canned or preserved meats and meat products	1	13	14	—	2	2	1	15	16
Canned or pre-packed fish and fish products	—	14	14	—	—	—	—	14	14
Soups	—	15	15	—	—	—	—	15	15
Oils and fats	12	8	20	—	—	—	12	8	20
Fresh fruits and vegetables	—	17	17	—	—	—	—	17	17
Canned or preserved fruits and vegetables	—	59	59	—	4	4	—	63	63
Sweets, sugar confectionery, etc.	—	22	22	—	2	2	—	24	24
Jams, conserves, fruit curds, jellies, etc.	—	28	28	—	—	—	—	28	28
Bread, biscuits, etc.	—	14	14	—	—	—	—	14	14
Flours and flour mixtures	—	26	26	—	—	—	—	26	26
Cakes and puddings	—	3	3	1	—	1	1	3	4
Canned or pre-packed puddings	—	16	16	—	—	—	—	16	16
Cereals	—	14	14	—	—	—	—	14	14
Food flavourings and colourings	—	8	8	—	—	—	—	8	8
Food drinks and non-alcoholic beverages	—	47	47	—	1	1	—	48	48
Spices, sauces and condiments	—	63	63	—	2	2	—	65	65
Wines, spirits and other alcoholic beverages	5	2	7	—	—	—	5	2	7
Drugs (internal and external use)	—	19	19	—	1	1	—	20	20
Baking powders and raising preparations	—	6	6	—	—	—	—	6	6
Miscellaneous	—	7	7	—	—	—	—	7	7
TOTALS	451	474	925	50	24	74	501	498	999

HOUSING

The year was a period of steady progress in slum clearance in the course of which 386 houses were demolished, mostly in the Radford, Sneinton and Carrington areas.

Confirmation was received in March from the Minister of Housing and Local Government in respect of 191 unfit houses in the Hyson Green area and in November of 310 unfit houses in the Willoughby Street area, the latter following a Public Inquiry held in April. A further 391 houses were represented, mostly in the Old Basford area.

The detailed inspection of houses in the Bulwell district was started. The inspection of the properties comprising the current five-year programme of clearances will be completed during 1961. Thought was given to the further schemes which may arise in the next 15 to 20 years, mainly in the St. Ann's Well Road and Meadows districts.

A table giving details relating to the demolition, closing and repair of houses under the Housing and Public Health Acts appears on pages 137 and 138.

The number of applications for Certificates of Disrepair under the provisions of the Rent Act 1957 continued to fall. Many tenants who could have justifiably exercised their rights under the Act failed to do so, possibly under the mistaken impression that once having served a Form "G" on their landlord they were unable to do so on a later occasion.

Certificates of Disrepair	1958	1959	1960
Rent Act, 1957:			
Part I. Applications for Certificates of Disrepair:			
1. No. of applications for certificates ..	515	116	46
2. „ „ decisions not to issue certificates ..	14	4	3
3. „ „ „ to issue certificates:			
(a) in respect of some but not all defects ..	324	82	24
(b) „ „ „ all defects ..	177	29	19
4. No. of undertakings given by landlords ..	464	85	33
5. „ „ „ refused ..	6	1	1
6. „ „ „ certificates issued ..	132	29	11
Part II. Applications for Cancellation of Certificates:			
7. Applications by landlords for cancellation of certificates ..	128	41	18
8. Objections by tenants to cancellation of certificates ..	42	20	8
9. Decision to cancel in spite of tenant's objection ..	11	3	5
10. Certificates cancelled by local authority ..	81	36	15

WOMEN HOUSING OFFICERS

A staff of four women housing officers made 14,484 visits to houses on Corporation estates and in the course of their inspections reported 1,432 defects to the Estates and Housing Department. In addition these officers visited, prior to re-housing, the tenants of houses situated in areas the subject of Clearance Schemes and, where necessary, took steps to prevent the reinfestation of the new houses by the transmission of vermin.

THE YEAR'S WORK

Inspection of Dwelling-houses

	1956	1957	1958	1959	1960
Dwelling-houses inspected for housing defects under the Public Health or Housing Acts ..	9,040	8,225	7,696	6,201	6,135
Inspections made for the purpose ..	18,161	14,862	15,821	14,030	11,394
Dwelling-houses—included under sub-head above—which were inspected and recorded under the Housing Consolidated Regulations 1925 and 1938 ..	1,025	992	985	789	831
Inspections made for the purpose ..	6,166	5,891	5,229	4,326	3,925
Dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation ..	28	1,025	845	679	84
Dwelling-houses — exclusive of those referred to under the preceding sub-head — found not to be in all respects reasonably fit for human habitation ..	4,501	3,484	3,549	3,195	3,350

Informal Action

Defective dwelling-houses rendered fit in consequence of informal notices by the Local Authority or their officers ..	3,540	2,787	2,883	2,367	3,243
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Action Under Statutory Powers

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

Dwelling-houses in respect of which notices were served requiring repairs ..	997	922	985	738	747
Dwelling-houses in which defects were remedied after service of formal notices:—					
1. By owners ..	839	684	725	666	598
2. By Local Authority in default of owners ..	201	161	164	122	103

	1956	1957	1958	1959	1960
2. Proceedings under the Public Health Acts.					
Dwelling-houses in respect of which notices were served requiring defects to be remedied	568	428	780	939	1,132
Dwelling-houses in which defects were remedied after service of formal notices:—					
1. By owners	494	302	185	643	769
2. By Local Authority in default of owners ..	113	119	359	283	524
3. Proceedings under Sect. 17 of the Housing Act, 1957.					
Dwelling houses in respect of which demolition orders were made	2	10	—	3	—
Dwelling-houses demolished in pursuance of demolition orders	18	12	5	6	—
Closing Orders made ..	3	3	4	3	3

SANITARY SERVICES

The staffing position in the Chief Public Health Inspector's Department deteriorated due to retirements and resignations and for a considerable period there was a staff deficiency of about one-third. There was, consequently, difficulty in maintaining the sanitary services.

Statutory action in respect of a large offensive trades factory was taken under the provisions of the Public Health Act 1936.

The firm had operated for about half a century in a residential area and for the past six years it had been expected that the business would be transferred to a site outside the City. Circumstances arose, however, under which the Company considered it advisable to remain at the existing premises.

The Corporation decided that their consent to carry on the offensive trades would not be granted after the 30th April 1960. An appeal against the decision was heard in the Magistrates' Court in June 1960 and was disallowed. By an agreement subsequently arrived at the trades will be re-established on the site outside the City previously referred to and the existing premises vacated within a specified period. The action thus completed will remove a long-standing cause of complaint by residents in the vicinity.

The first Smoke Control Order made by the City Council under the Clean Air Act 1956 came into operation on the 1st December. The Order applied to a central area of the City, 57.6 acres in extent and containing 845 industrial, commercial, residential and other properties.

The area is bounded by:—

Upper Parliament Street	Castle Gate
Clumber Street	Castle Road
High Street	Castle Place
Bridlesmith Gate	Lenton Road
St. Peter's Gate	Park Valley and
St. Peter's Square	Park Row
Albert Street.	

Surveys continued in the area of the City to the south of the river Trent and in an extension to the central zone already established with a view to further orders being made at an early date.

WATER

The water supply to the City was satisfactory in quality throughout the year. Supplies were adequate, though it was necessary to impose a ban on the use of hosepipes for car washing and garden watering during the summer months.

Bacteriological analyses of supplies from each source were carried out monthly. Samples of water, both prior to and after treatment, were examined from those works where treatment is carried out. During the year, 204 samples were taken and *B. coli* was absent in 200 mls. of all treated water. Of these samples 36 were of water which was not subsequently treated, and in no case was *B. coli* present in less than 100 mls.

Chemical analyses were also made monthly, and the extent and results of these examinations are indicated by the findings for the month of December 1960—see Table.

The only water which has any plumbo-solvent tendency is the upland supply from the Derwent Valley Water Board, which provides about 25% of the needs of the Water Area. This tendency is counteracted by the automatic addition of lime to bring the pH. value up to 8.3.

The number of houses supplied in the City on the 31st December, 1960, was 101,071, and the estimated population 313,760. All are supplied directly from the mains; 11 houses have no piped water supply.

Analyses from each source of supply											December, 1960
	Basford Pumping Station	Bestwood Pumping Station	Boughton Pumping Station	Burton Joyce Pumping Station	Eastwood Filtration Works	Halam Pumping Station	Lambley Pumping Station	Papplewick Pumping Station	Rufford Pumping Station	Salterford Pumping Station	
				Boreholes 2, 3 and 4							
These samples contain per 1,000,000 parts:—											
	Water prior to treatment	Water prior to treatment	Water prior to treatment	Water not treated	Water prior to filtration	Water after filtration	Water prior to treatment	Water prior to treatment	Water prior to treatment	Water after treatment	
Total Solids dried at 180°C.	430.00	260.00	220.00	360.00	105.00	105.00	190.00	215.00	225.00	265.00	
Suspended Matter	Absent	Absent	Absent	Absent	Absent	Absent	Absent	Absent	Absent	Absent	
Chlorides as chlorine	46.15	28.40	35.50	17.75	14.20	14.20	14.20	21.30	21.30	21.30	
Oxidised Nitrogen as nitrate	10.00	6.50	5.00	0.31	0.31	0.31	1.50	2.88	0.93	3.70	
Oxidised Nitrogen as nitrite	0.006	0.001	0.004	Absent	0.001	0.001	0.004	Absent	Absent	Absent	
Free and saline Ammonia	0.004	0.012	0.004	0.008	0.004	0.004	0.004	0.012	0.004	0.004	
Albuminoid Ammonia	0.008	0.008	0.004	0.008	0.004	0.004	0.004	0.008	0.004	0.004	
Temporary Hardness	160.00	80.00	105.00	180.00	20.00	20.00	110.00	55.00	70.00	55.00	
Permanent Hardness	185.00	92.00	79.00	104.00	32.00	32.00	18.00	73.00	62.00	73.00	
Oxygen absorbed in 4 hrs. @ 80°F. from N/80 KmnO4	0.00	0.00	0.00	0.00	0.20	0.08	0.00	0.00	0.00	0.00	
pH value	7.50	7.80	7.60	7.40	8.00	8.00	7.90	7.90	7.60	8.00	
Appearance	★	★	★	★	★	★	★	★	★	★	
Odour	None	None	None	None	None	None	None	None	None	None	
Taste and Colour	Normal	Normal	Normal	Normal	Normal	Normal	Normal	Normal	Normal	Normal	
Heavy Metals	Absent	Absent	Absent	Absent	Absent	Absent	Absent	Absent	Absent	Absent	
Free Chlorine	Absent	Absent	Absent	Absent	Absent	Absent	Absent	Absent	Absent	Absent	

★ Clear and bright

SWIMMING BATHS

There are ten public swimming baths in the City—seven being indoor and three open air pools. Six of the indoor baths are open for swimming summer and winter. A total of 45 samples of water was sent to the City Analyst for bacteriological test and, with one exception, all were satisfactory.

In addition, four samples of water taken from the paddling pool at Bulwell Lido were satisfactory.

The source of water for the swimming baths is from the town mains except in the case of Highfields Lido where the water is drawn from the Highfields Lake. Each bath is equipped with a filtration plant and the water is chlorinated to "break-point". The indoor baths are not emptied except in cases of repair or for painting purposes, which may be at intervals of four to five years, but additional water is added daily for make-up purposes.

SEWERAGE

Apart from certain areas where a total of 32 premises are connected to cesspools, the whole of the drainage of the city is on the combined or separate system of main drainage.

Six of the houses on cesspool drainage are to be dealt with in 1962, though the conversion of the remainder to a piped sewerage system will require large capital schemes and may have to await the general redevelopment of the areas in which they are located.

Three main problems now requiring attention are:—

- (a) The flooding of areas caused by watercourses of inadequate capacity (e.g. the River Leen).

- (b) The inadequacy of certain of the main outfall sewers and the capacity of the main pumping station which deals with approximately one third of the sewage in the City,
and
- (c) The replacement of sewers which have become defective due either to mining subsidence and/or old age.

Each year sees at least one major scheme undertaken but, due to the high capital cost of works of this type, the process of improving the whole drainage system of the City, although steady, is a slow one.

SEWAGE PURIFICATION

The purification of sewage from Nottingham is carried out in a modern aeration plant which has recently been put into operation to replace the old system of irrigation on the land.

In conjunction with this, a power station has been built to provide the plant with its requirements of electricity from the methane gas derived from the fermentation of the sewage sludge.

ATMOSPHERIC POLLUTION

Emissions of dark smoke from chimneys are regulated by the Dark Smoke (Permitted Periods) Regulations 1958 made under the Clean Air Act, 1956.

RECORD OF OBSERVATIONS

Monthly average emission of dense smoke per chimney in minutes									
	1952	1953	1954	1955	1956	1957	1958	1959	1960
JAN. ..	1.65	1.63	1.64	1.82	1.04	0.82	0.38	0.47	0.66
FEB. ..	1.46	1.75	1.24	1.14	1.18	0.52	0.69	0.23	1.70
MAR. ..	1.42	1.82	0.90	0.74	—*	0.56	0.62	0.82	0.42
APRIL ..	1.68	1.07	1.25	1.23	0.97	1.17	1.41	0.73	0.33
MAY ..	1.16	1.10	0.93	1.63	0.91	0.69	0.89	0.82	0.71
JUNE ..	1.36	1.82	0.84	1.02	0.95	0.54	0.29	0.56	0.60
JULY ..	0.84	0.94	1.05	1.05	0.96	0.75	0.49	0.38	0.38
AUG. ..	0.92	0.56	1.09	1.06	0.72	0.43	—*	0.56	0.83
SEPT. ..	0.94	0.89	0.91	0.86	1.25	1.38	0.61	0.52	0.60
OCT. ..	1.35	1.13	1.23	0.85	0.79	1.06	0.56	0.40	0.60
NOV. ..	1.53	1.15	0.92	1.49	0.70	0.53	0.41	0.80	0.38
DEC. ..	1.17	1.18	1.23	0.87	0.84	0.77	0.53	0.70	0.43

* No observations taken.

Observations and notices	1952	1953	1954	1955	1956	1957	1958	1959	1960
Half-hourly observations of chimneys ..	1,329	1,103	1,238	1,188	1,062	984	577	286	176
Total no. of minutes dense smoke emitted	1,691	1,382	1,347.5	1,337	995	786	424	158	120
Average no. of minutes of dense smoke per chimney ..	1.3	1.3	1.1	1.15	0.94	0.80	0.97	0.55	0.68
Intimation notices served	69	49	40	46	29	13	9	—	—
Advisory visits including verbal cautions ..	409	417	470	442	378	390	272	217	188
Statutory notices served ..	17	10	8	7	3	1	2	3	8
Complaints investigated ..	128	156	168	186	137	151	184	161	143
Cases where work was executed for smoke and/or grit nuisance abatement ..	36	33	37	41	34	39	25	27	27

Nature and cost of work carried out by owners

	1952	1953	1954	1955	1956	1957	1958	1959	1960
Chimney stacks erected or extended ..	9	7	13	7	8	7	3	5	5
Chimney stacks dismantled ..	2	5	6	1	2	5	1	1	3
Boilers converted from hand to mechanical stoking ..	20	4	5	8	16	12	7	2	6
Mechanical stokers overhauled or renewed ..	18	5	9	4	7	7	11	15	11
New boilers installed ..	9	5	11	8	10	11	8	12	11
Grit arresting apparatus installed ..	—	2	3	2	—	4	2	3	3
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	6	13	10	6
Filters and scrubbers for nylon plant ..	—	—	1	—	—	—	—	—	—
Miscellaneous ..	—	—	5	20	9	8	6	2	7
Estimated cost to the owners ..	£ 74,710	£ 38,050	£ 68,640	£ 42,035	£ 54,130	£ 131,090	£ 37,800	£ 66,715	£ 73,960

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. Five of these stations, namely, Basford, Mapperley, Meadows, Clifton and Wollaton also have the volumetric apparatus for the daily determination of smoke or suspended matter and sulphur dioxide. The instrument at Wollaton was operated from the 1st September, 1960.

Summary of Measurements

(a) Deposit gauges and lead peroxide apparatus.†

	Deposited Solid Matter in Tons per Square Mile			Lead Peroxide
	Annual	Max. monthly	Av. monthly	Max. figures mgm. S.O. ₂ per day per 100 sq. cm.
City Centre ..	218·61*	26·58 : Dec.	19·87	4·23 : Dec.
Basford ..	396·39	44·95 : Dec.	33·03	3·08 : Dec.
Bulwell ..	216·82	22·54 : Nov.	18·07	2·02 : Feb.
Clifton ..	143·09	19·86 : Dec.	11·92	1·75 : Dec.
Meadows ..	264·60	30·70 : Dec.	22·05	4·69 : Jan.
Mapperley ..	153·08	16·77 : Dec.	12·76	1·90 : Jan.
Wollaton ..	119·31	13·67 : Dec.	9·94	1·08 : Dec.
Av. for City ..	215·98	—	18·23	—

* 11 months results.

† For full details see pages 156 and 157.

(b) Volumetric apparatus.

Concentration of smoke expressed as Milligrammes per 100 cu. metres of air															
MONTH	BASFORD			MEADOWS			MAPPERLEY			CLIFTON			WOLLATON		
	High	Low	Av.	High	Low	Av.	High	Low	Av.	High	Low	Av.	High	Low	Av.
JANUARY ..	166	21	45	112	2	35	125	5	27	71	1	15	-	-	-
FEBRUARY	131	21	45	74	3	30	73	5	24	49	0	16	-	-	-
MARCH ..	44	14	24	33	4	14	16	4	9	14	1	5	-	-	-
APRIL ..	60	14	24	59	6	20	36	4	13	20	1	7	-	-	-
MAY ..	29	4	11	21	4	10	20	2	8	12	1	4	-	-	-
JUNE ..	15	5	9	14	2	7	12	2	6	11	0	4	-	-	-
JULY ..	17	4	9	18	3	7	9	2	4	4	0	1.5	-	-	-
AUGUST ..	24	2	10	20	3	10	13	2	6	12	2	5	-	-	-
SEPT. ..	51	6	18	43	3	13	38	4	11	17	1	5	24	2	7
OCTOBER	73	9	32	59	5	24	24	4	14	29	2	10	36	5	14
NOV. ..	77	13	38	70	3	19	50	6	21	47	0	9	51	2	13
DEC. ..	167	15	60	116	3	45	113	6	35	70	0	24	103	2	7
AVERAGES	71	11	27	53	3	20	46	4	15	30	1	9	54	3	10

Concentration of Sulphur Dioxide expressed in parts per 100 million volumes of air															
MONTH	BASFORD			MEADOWS			MAPPERLEY			CLIFTON			WOLLATON		
	High	Low	Av.	High	Low	Av.	High	Low	Av.	High	Low	Av.	High	Low	Av.
JANUARY ..	34.9	4.4	9.7	27.9	0.5	8.6	28.6	1.4	6.2	25.6	1.5	6.1	-	-	-
FEBRUARY	24.5	3.2	9.6	16.8	1.8	8.0	19.4	1.5	5.7	10.0	1.5	6.2	-	-	-
MARCH ..	10.2	2.3	5.0	11.7	2.3	4.6	10.2	0.2	2.4	7.4	1.1	2.8	-	-	-
APRIL ..	10.5	2.4	5.7	16.5	2.0	5.8	9.5	1.8	3.7	7.8	1.8	4.0	-	-	-
MAY ..	9.9	1.2	4.4	9.3	1.7	4.1	8.3	1.0	2.8	5.4	0.5	2.7	-	-	-
JUNE ..	5.7	1.4	3.8	8.9	1.5	3.9	4.4	0.5	2.4	3.4	0.7	2.3	-	-	-
JULY ..	5.6	1.1	3.2	6.5	2.0	3.6	5.8	0.6	2.1	3.7	1.0	2.2	-	-	-
AUGUST ..	5.5	1.3	3.3	7.9	0.1	3.0	5.7	1.0	2.9	4.1	0.5	1.7	-	-	-
SEPT. ..	8.0	1.9	4.0	7.9	0.2	2.5	7.1	1.0	3.4	6.5	0.4	2.5	3.0	0.2	1.1
OCTOBER	9.4	1.1	4.7	13.5	1.5	5.2	10.6	1.4	3.1	11.9	0.9	3.8	3.8	0.2	1.3
NOV. ..	17.0	4.5	7.7	15.0	2.1	5.3	9.5	2.3	4.8	12.1	0.8	4.3	7.8	0.4	1.6
DEC. ..	28.6	4.2	12.0	26.2	2.6	9.9	22.0	2.8	8.8	21.8	1.4	8.6	8.4	0.6	2.1
AVERAGES	14.15	2.4	6.1	14.0	1.5	5.4	11.7	1.3	4.0	10.0	1.0	3.9	5.7	0.4	1.5

APPROVAL OF FURNACE INSTALLATIONS

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

In 15 cases notices of proposals to install were received and 5 plans and specifications were submitted and approved.

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

Legal Action

Two firms were prosecuted under the Clean Air Act, 1956, in respect of excessive emissions of smoke. In one case a fine of £5 with three guineas costs was imposed, and in the other, there were two offences which resulted in a fine of £5 on each charge.

Smoke Control Areas

The Nottingham No. 1 Smoke Control Area came into being on the 1st December, 1960, and the Nottingham No. 2 Area was given provisional approval by the Minister on 20th July.

SHOPS ACT, 1950

An application was granted to the organiser of a public exhibition for the extension of the closing hours for retail trade or business which was subsidiary or ancillary to the main purpose of the exhibition.

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

PUBLIC HEALTH ACT, 1936

Workplaces. Action was taken at six workplaces to secure an improvement in the sanitary accommodation.

Common Lodging Houses. The two establishments in the City were satisfactorily conducted.

Canal Boats. The canals and other navigable waters within the City were visited on twenty-one occasions and twenty-seven boats were inspected; there were no women or children in these boats.

It was not necessary to serve a notice for any contraventions, no case of infectious disease was reported, nor was it necessary to detain any boat for cleansing or disinfection.

The registrations of two boats were cancelled during the year and the total number of boats now registered by the authority is 37.

KNACKERY

There is one knackery in the City of modern construction situated on land owned by the Corporation at the Eastcroft Depot; the premises were supervised and found to be satisfactory.

RAG FLOCK AND OTHER FILLING MATERIALS ACT, 1951

The Chief Public Health Inspector and two members of his staff are authorised officers for all purposes of the Act.

Licences and registrations in force :—

Upholstery premises registered	..	..	30
Licences to store rag flock	..	..	2

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

	Action taken
Sample (No. 5 Informal) of Cotton Flock contained excess trash to the extent of 8.4%.	Upholsterer returned stocks for replacement and improved his storage conditions.
Sample (No. 20 Informal) of Cotton Felt had a dust index in excess of the standard.	Letter and specimen sent by Chief Public Health Inspector to manufacturers for investigation.

MEASURES AGAINST RODENT AND INSECT PESTS

An infestation of rats on outlying allotments caused considerable damage to produce in the autumn and in spite of attempts at control by individual garden-holders the rodents became very numerous by the time the assistance of the department was sought. Simultaneous treatment of all gardens in the infested area brought about a rapid improvement in the situation although the difficulty of obtaining access to many of the gardens hampered the work of the operators.

Infestations at dwellinghouses and business premises have remained at a low level but building sites continued to be a source of trouble and regular visits were necessary to ensure that infestation did not go unchecked.

Fortunately the number of bug infestations was well below last year's figure. Nuisance from the common cockroach in dwellinghouses remained at a high level but the German cockroach, which was such a persistent pest of hotel and restaurant kitchens until recent years, is now rarely encountered.

An exceptionally large number of wasps' nests was destroyed. Many were in cavity walls or other inaccessible places where householders without special equipment could not deal with them. During April and May many reports were received that

gardens were being invaded by wasps but in each case the nuisance was found to be due to vast numbers of mining bees emerging from burrows in lawns and hedgerows. As these are beneficial insects the tenants were advised to take no action against them.

The hot summer of 1959 followed by the mild winter was reflected in the large number of requests for assistance in the control of insect pests in the spring.

Rodent and Insect Control	1955	1956	1957	1958	1959	1960
Properties surveyed ..	4,925	5,682	6,310	7,120	6,508	5,763
Infestations dealt with:						
rats	1,478	1,817	1,660	1,194	1,397	1,210
mice	622	678	536	466	487	543
insects	643	608	833	1,306	1,488	1,273
Total visits	14,972	14,839	17,426	17,694	15,453	14,195

An indication of the variety of insects received by the Pests Officer for identification included the following:—

Beetles				Flies			
Anobium punctatum (Furniture beetle)	1			Calliphora erythrocephala (Blow fly)	1		
Attagenus pellio	4			Culex pipiens (mosquito) .. .	1		
Attagenus piceus (Black carpet beetle)	1			Drosophila spp. (Fruit fly) .. .	1		
Cockchafers	1			Pollenia rudis (Cluster fly) .. .	1		
Cryptophagus spp. (Plaster beetle)	1			Sciara spp. (Fungus fly) .. .	1		
Carabids (Ground beetle) .. .	1			Stomoxys irritans (Horn fly) .. .	1		
Dor beetles	1			Thaumatomyia notata (Yellow swarming fly)	1		
Dermestes lardarius (Bacon beetle)	1						
Ptinus tectus (Spider beetle) .. .	1						
Lathridius nofider (Plaster beetle)	3						
Stegobium paniceum (Drug store beetle)	3						
Larvae				Miscellaneous			
Culex pipiens (Mosquito) .. .	3			Bryobia praetiosa (Gooseberry mite)	5		
Dermestes lardarius (Bacon beetle)	1			Ctenocephalides felis (Cat flea)	2		
Ephestia elutella (Cacao moth) .. .	1			Mining bees	14		
Musca domestica (House fly) .. .	1			Nomad bees	1		
				Springtails	2		

HEATING APPLIANCES — FIREGUARDS ACT, 1952

During the course of visits to various shops no unguarded heating appliances were found.

FACTORIES ACTS, 1937 TO 1959

PRESCRIBED PARTICULARS ON THE ADMINISTRATION OF THE FACTORIES ACT, 1937.

PART I OF THE ACT.

1. **Inspections** for the purposes of provisions as to health (including inspections made by Public Health Inspectors).

Premises (1)	Number on register (2)	Number of		
		Inspections (3)	Written notices (4)	Occupiers prosecuted (5)
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities ..	190	83	2	—
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority ..	2,006	544	43	1
(iii) Other premises in which Section 7 is enforced by the Local Authority (excluding out-worker's premises) ..	—	12	—	—
TOTAL	2,196	639	45	1

2. Cases in which **Defects** were found.

Particulars (1)	Number of cases in which defects were found				Number of cases in which prosecutions were instituted (6)
	Found (2)	Remedied (3)	To H.M. Inspector (4)	By H.M. Inspector (5)	
Want of cleanliness (S.1) ..	24	35	—	11	—
Inadequate ventilation (S.4) ..	1	2	—	—	—
Sanitary conveniences (S.7):					
(a) Insufficient ..	1	5	—	2	—
(b) Unsuitable or defective ..	22	30	—	1	1
(c) Not separate for sexes ..	—	4	—	1	—
Other offences against the Act, (not including offences relating to Outwork) ..	37	52	—	9	—
TOTAL	85	128	—	24	1

PART VIII OF THE ACT
OUTWORK

SECTION 110.

Nature of work	No. of out-workers in August list required by Section 110 (1) (c)	
	1959	1960
Wearing apparel, making, etc. cleaning and washing ..	798	978
Household linen	34	48
Lace, lace curtains and nets	858	853
Curtains and furniture hangings	—	1
Nets, other than wire nets	194	112
Paper bags	5	5
Carding, etc., of buttons, etc.	24	29
TOTAL	1,913	2,026

SECTION 111.

No instances of work in unwholesome premises were found; no notices were served, nor were any prosecutions undertaken.

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 ..	14.62	11.75	26.37	14.70	15.17	29.87	7.69	12.76	20.45	13.20	12.84	26.04	5.77	6.30	12.07	5.64	7.24	12.88	7.80	6.86	14.66
February	15.09	8.07	23.16	17.80	9.34	27.14	13.58	6.72	20.30	14.20	6.57	20.77	8.87	4.50	13.37	6.50	4.00	10.50	6.42	4.26	10.68
March ..	10.63	6.45	17.08	13.07	7.54	20.61	9.48	5.80	15.28	11.34	7.00	18.34	9.70	4.73	14.43	4.23	4.84	9.07	7.03	3.11	10.14
April ..	12.71	5.07	17.78	21.27	5.13	26.40	13.61	4.18	17.79	15.57	5.83	21.40	8.53	3.06	11.59	7.97	3.03	11.00	11.68	3.41	15.09
May ..	10.50	4.38	14.88	15.04	4.67	19.71	11.60	4.18	15.78	14.50	5.84	20.34	8.17	2.50	10.67	5.10	3.03	8.13	8.38	2.43	10.81
June ..	9.98	5.14	15.12	32.58	6.10	38.68	11.43	3.01	14.44	11.70	6.30	18.00	9.14	4.20	13.34	6.57	3.03	9.60	9.12	3.11	12.23
July ..	9.65	5.99	15.64	34.94	7.24	42.18	12.26	4.87	17.13	10.94	3.50	14.44	6.54	2.73	9.27	5.97	2.10	8.07	5.30	3.58	8.88
August ..	13.17	5.66	18.83	33.28	8.40	41.68	11.93	5.80	17.73	19.64	8.64	28.28	8.10	4.20	12.30	5.20	3.97	9.17	8.24	3.92	12.16
September	11.62	6.55	18.17	24.18	8.40	32.58	10.57	5.90	16.47	13.54	6.14	19.68	10.80	4.00	14.80	4.84	3.17	8.01	6.49	4.05	10.54
October	DAMAGED			22.14	10.04	32.18	8.19	9.05	17.24	10.94	10.00	20.94	4.44	5.13	9.57	4.04	4.90	8.94	3.99	4.73	8.72
November	16.93	8.07	25.00	29.91	10.50	40.41	13.03	9.51	22.54	17.27	8.40	25.67	8.60	6.30	14.90	4.60	5.67	10.27	3.65	5.67	9.32
December	15.28	11.30	26.58	33.05	11.90	44.95	11.93	9.74	21.67	19.73	10.97	30.70	9.30	7.47	16.77	8.07	5.60	13.67	13.34	6.52	19.86
TOTAL ..	140.18	78.43	218.61	291.96	104.43	396.39	135.30	81.52	216.82	172.57	92.03	264.60	97.96	55.12	153.08	68.73	50.58	119.31	91.44	51.65	143.09

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 ..	4.04	1.96	1.53	4.69	1.90	1.06	1.67
February ..	4.11	1.96	2.02	4.68	1.90	0.89	1.42
March ..	2.47	1.39	0.94	3.27	1.02	0.87	1.00
April ..	2.77	2.12	1.06	2.83	1.06	0.48	0.94
May ..	1.57	0.81	0.73	1.65	0.82	0.39	0.58
June ..	1.29	0.78	0.54	1.73	0.56	0.34	0.37
July ..	1.70	1.12	0.51	2.05	0.67	0.31	0.54
August ..	1.40	0.95	0.57	1.79	0.48	0.27	0.47
September ..	1.87	1.22	0.76	2.13	0.63	0.58	0.52
October ..	2.08	1.59	0.87	2.58	0.92	0.58	0.89
November ..	3.55	2.68	1.44	3.42	1.67	0.57	1.01
December ..	4.23	3.08	1.84	4.12	1.61	1.08	1.75

THE YEAR'S WORK

NOTICES

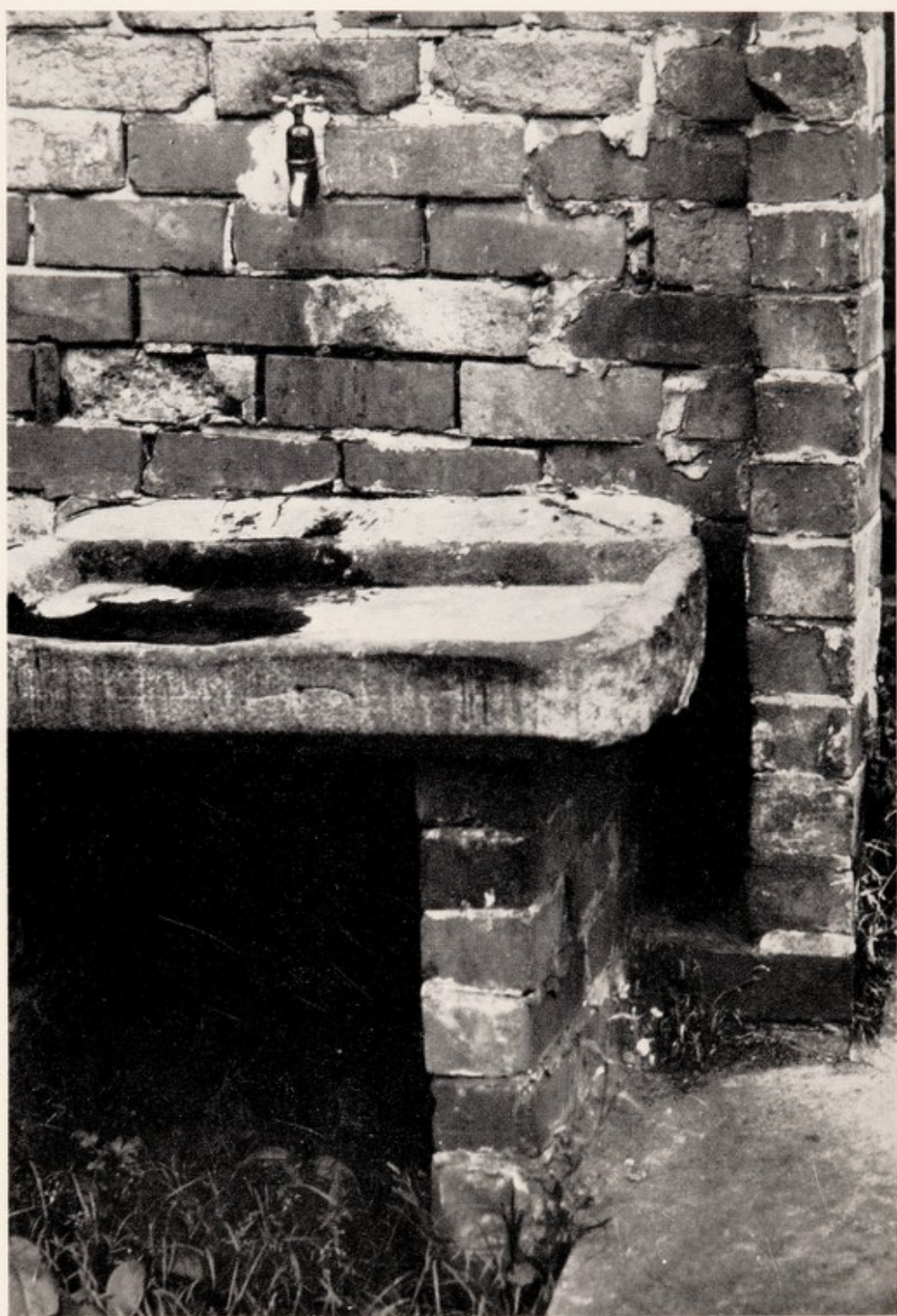
INFORMAL

	1956	1957	1958	1959	1960
TOTAL NUMBER COMPLIED WITH ..	9,218	7,453	7,116	6,399	5,981

Nuisances found	Nuisances, etc., remedied				
	1956	1957	1958	1959	1960
Houses—filthy	28	15	9	17	17
„ —verminous	2	—	—	—	—
Drains—clearance of	197	65	78	191	157
„ —repair of	252	225	226	257	117
Panterpits—abolition of ..	2	2	9	—	—
Additional water-closets—provision of	3	4	9	4	24
Water-closets —clearance of ..	20	19	59	11	43
„ „ —repair of	2,100	1,030	1,086	1,425	853
Closets—cleansing of	2	3	7	6	9
Courts, yards and passages—					
paving of	7	2	10	1	1
cleansing of	12	17	18	4	13
repair of	269	168	299	343	262
Nuisance from pigs	1	18	—	1	3
„ „ fowls	3	5	5	5	2
„ „ other animals	4	5	6	2	7
„ „ accumulation of refuse ..	38	52	56	68	82
Dustbins—provision of	2,116	1,933	1,406	1,027	876
Miscellaneous nuisances	84	48	45	69	24
Tents, vans and sheds	73	40	72	34	13
Houses-let-in-lodgings	2	1	2	13	42
Factories with mechanical power ..	30	3	5	34	54
„ without mechanical power ..	—	2	6	2	2
Workplaces	—	2	6	8	7
TOTAL	5,245	3,659	3,419	3,520	2,608

Defects in houses	Defects remedied				
	1956	1957	1958	1959	1960
Roofs	1,910	1,652	1,847	1,492	1,753
Walls	1,325	1,049	1,200	1,248	1,031
Floors and ceilings	931	747	758	732	686
Windows	1,474	1,025	1,187	1,331	1,262
Fireplaces	512	275	256	295	268
Coppers	24	36	21	11	4
Sinks provided	34	19	30	28	59
„ —repair of	182	155	189	191	149
Defective water pipes and fittings ..	227	129	87	80	28
„ rainwater conductors	965	879	1,303	653	964
Others	1,032	843	1,420	1,967	1,815
TOTAL	8,616	6,809	8,298	8,028	8,019
Number of defective houses dealt with	4,580	3,632	3,719	3,144	3,371





A family's water supply.



Shade and Light.

STATUTORY

Enactment	Complied with				
	1956	1957	1958	1959	1960
Public Health Act, 1936					
Sect. 39 Drainage	301	239	315	364	419
„ 44 Inadequate closet accommodation	7	2	5	7	8
„ 45 Closets	33	16	10	16	13
„ 56 Paving of courts, yards and passages, dwelling-houses	111	92	176	519	636
„ 75 Dustbins	593	610	316	342	323
„ 83 Dirty houses	—	—	6	2	—
„ 92 Houses	195	90	53	53	171
„ 287 Notice of entry	7	7	6	3	2
Nottingham Corporation Act, 1923					
Sect. 73 Repair of water-closets	410	194	210	272	164
Nottingham Corporation Act, 1952					
Sect. 72 Cleansing and repair of drains, water-closets, and soil pipes	87	60	92	130	148
„ 80 Repair of houses	—	—	—	—	4
Housing Act, 1957					
Sect. 9	1,040	845	889	777	701
TOTAL	2,784	2,155	2,078	2,485	2,589

Consequent upon the failure of owners to comply with statutory notices, the Corporation ordered work on private contractors and recovered expenses incurred in 734 cases as follows:—

ACT	1956	1957	1958	1959	1960
	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.
Nottingham Corporation Act, 1923, Section 73 ..	178 4 8	139 15 5	140 10 3	211 12 6	92 16 3
Nottingham Corporation Act, 1952, Section 72 ..	66 1 3	78 8 9	145 0 3	137 4 7	156 0 7
Nottingham Corporation Act, 1952, Section 80 ..	- - -	14 0 11	- - -	- - -	28 11 6
Housing Act, 1957, Sects. 9 and 10 ..	3,184 3 7	2,671 2 3	2,634 18 6	2,155 13 4	1,735 14 7
Public Health Act, 1936 —Sect. 39 ..	270 17 9	255 12 2	281 16 8	159 14 8	211 19 11
„ „ —Sect. 44 ..	- - -	- - -	14 12 8	181 3 2	104 2 6
„ „ —Sect. 45 ..	69 18 4	18 19 1	6 0 3	4 16 0	4 3 0
„ „ —Sect. 56 ..	357 3 5	543 10 1	949 1 6	442 9 4	688 7 4
„ „ —Sect. 92 ..	- - -	- - -	- - -	2 9 1	- - -
	4,126 9 0	3,721 8 8	4,172 0 1	3,295 2 8	3,021 15 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 £154. 15s. 4d.

NUMBER OF INSPECTIONS

	1956	1957	1958	1959	1960
First visits ..	17,267	12,593	13,963	14,030	11,394
Re-visits ..	20,847	17,526	16,945	14,862	13,771
TOTAL ..	<u>38,114</u>	<u>30,119</u>	<u>30,908</u>	<u>28,892</u>	<u>25,165</u>

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

Staff. With the completion of over 250,000 injections against poliomyelitis, the impetus of the programme inevitably waned and during the year, as a result, the clerical staff was reduced by two full-time as well as three part-time clerks. Therefore, though there were three vacancies at the end of 1959, there were only two in December 1960, despite the fact that resignations outnumbered appointments by 13 to 12.

Of those who resigned, no less than 8 went to other Local Authorities and other departments of the City Council for posts at a higher rate of pay; 3 resigned owing to pregnancy while 1 entered a Teachers' Training College and another emigrated to America.

Accommodation. Additional space which became available at Huntingdon House was taken over by the Health Services and afforded much needed relief in the pressure of accommodation. At last a room, albeit relatively small and with a low ceiling was able to be set aside for the use of the staff, with only occasional official use for the purpose of lectures and meetings.

During the last few days of the year more progress was made in the plan for a new Health Services Headquarters. A meeting took place with a Sub-Committee of the Finance Committee, which, it was hoped, would be the prelude to a series of further meetings to finalise the plans and costings.

Cleaning Arrangements. The scheme whereby all cleaning arrangements at Huntingdon House were undertaken by a specialist firm had some setbacks after a good start.

For the first months the new arrangements worked well but subsequently a deterioration set in. Difficulties arose not only over the standard of cleanliness achieved but also over security

arrangements which were particularly complicated since a number of other concerns shared the total accommodation in Huntingdon House.

After the lapse of the first contract period, fresh estimates were sought and the new contract placed with a different firm who, however, submitted the lowest tender. It is thought that the original firm underestimated and were not, therefore, able to provide the service specified. The new contract price was still lower than the cost of direct labour.

Late in the year a further contract was placed for cleaning to be undertaken at another of the administrative premises in Mansfield Road.

Staff Relations. The quarterly publication, now named "The Glancet" went from strength to strength and provided a valuable link with all grades of staff in the various departments of the Health Services. So far the burden of contributions has fallen heavily on a few people. This was not recognised as being, by any means, inevitable and active steps were taken to increase the contributions to the magazine from a much wider circle.

Five Day Week. This became well established and the principle that routine matters were not dealt with on Saturdays was completely accepted. Few members of the public called or telephoned, and the number of occasions when messages received could not be left until after the week-end was very small indeed.

Cremations and any other urgent matters continued to be dealt with by the small skeleton staff maintained for those purposes. All post received on Saturday mornings was opened and scrutinised but again there were only a very few documents which required immediate attention.

EPILEPSY AND CEREBRAL PALSY

The number of persons known to be suffering from Epilepsy and Cerebral Palsy is shown below. Although an individual may be known to more than one service of the Local Authority he is shown in the table under the service mainly responsible for his welfare. There has been a review of the cases formerly known to the Welfare Service; as a result some have been transferred to other services and some have been removed from the list as there had been no contact with them for some time:—

	Local Education Authority	Mental Health Services	Welfare Services	Others	TOTAL
Cerebral Palsy . .	25	55	30	29	139
Epilepsy . .	120	107	32	12	271
Cerebral Palsy and Epilepsy . .	3	18	—	—	21

ESTABLISHMENTS FOR MASSAGE OR SPECIAL TREATMENT

There were eight applications for licences and twelve for renewal of licences under the Nottingham Corporation Act, 1952; conditions were satisfactory in all cases. Certificates of exemption were received in respect of six registered members of the Chartered Society of Physiotherapists or the Faculty of Physiotherapy.

INCIDENCE OF BLINDNESS

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 ..	23	3	-	26
(b) Treatment (medical, surgical or optical)	18	1	-	18
(2) Cases at (1) (b) above which on follow up action have received treatment ..	11	1	-	15
Partially-Sighted				
(1) Cases registered during the year in respect of which para. 7(c) of Forms B.D.8 recommends :				
(a) No treatment ..	1	-	-	2
(b) Treatment (medical, surgical or optical)	11	2	-	8
(2) Cases which received follow up treatment ..	8	2	-	7
Number of blind persons on register at 31st December ..				711
Number of partially sighted persons on register at 31st December ..				110

Ophthalmia Neonatorum

There were no cases of impairment of sight.

NATIONAL ASSISTANCE ACTS, 1948 — 1951

It was not necessary to consider any case for compulsory removal under Section 47, for the third year in succession.

Eight homes of elderly people who had allowed themselves and their homes to deteriorate were visited by a Senior Medical Officer and the Deputy Chief Public Health Inspector.

Assistance was arranged through relatives or neighbours, or by the home help service to ensure help with the housework, shopping and cooking and to combat the loneliness experienced by many of these old people. The Women's Voluntary Service supplied clothing and provided some cases with the Mobile Meals Service.

NOTTINGHAM CREMATORIUM

From the table it will be seen that although the total number of cremations dropped, apparently due to the opening of a crematorium at Mansfield, there was a small rise in the percentage of the City residents who chose this means of disposal.

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 all City deaths
1951 ..	2,856	+ 19%	1,051	15%	28·6%
52 ..	2,777	— 3%	969	— 8%	29·0%
53 ..	3,126	+ 13%	1,139	18%	33·2%
54 ..	3,578	+ 14%	1,311	13%	39·7%
55 ..	3,940	+ 10%	1,432	9%	40·6%
56 ..	3,806	— 3%	1,528	7%	43·8%
57 ..	3,481	— 9%	1,477	— 3%	43·7%
58 ..	3,967	+ 14%	1,619	9%	47·3%
59 ..	3,972	+ 0·1%	1,731	7%	48·1%
60 ..	3,658	— 7·9%	1,692	— 2·2%	50·0%

Cremation and Residence

PLACE OF RESIDENCE	NO. OF CREMATIONS				
	1956	1957	1958	1959	1960
City	1,528	1,477	1,619	1,731	1,692
County excluding West Bridgford ..	1,279	1,378	1,686	1,694	1,388
West Bridgford	186	179	206	179	222
Other areas	813	447	456	368	356
TOTAL	3,806	3,481	3,967	3,972	3,658

NURSING AGENCIES

The licences of two nursing agencies, having originally been granted in 1945, were renewed in December. There were fifteen state registered nurses, two state certified midwives and four enrolled assistant nurses on the registers.

NURSING HOMES

The number of registered nursing homes remained at six. The existing 64 beds included 10 for maternity cases and the remainder for medical and surgical conditions.

All the homes were regularly inspected by a medical officer; the non-medical supervisor of midwives visited the maternity home.

PUBLIC MORTUARY

To the mortuary in Canal Street, 439 bodies were taken, and autopsies to determine the cause of death were performed there on 425 of them. The corresponding figures for 1959 were 471 and 450.

Most of the bodies were subject to the Coroner's jurisdiction and were those of persons whose death had occurred within the City.

ULTRA VIOLET RAY CLINIC

SUMMARY OF THE WORK

	1954	1955	1956	1957	1958	1959	1960
Cases brought forward ..	200	201	237	281	299	551	542
New cases ..	551	432	380	355	353	328	277
Total treated	751	633	617	636	652	879	819
City patients ..	719	604	600	632	649	873	813
County patients	32	29	17	4	3	6	6
	751	633	617	636	652	879	819
Adult patients male ..	218	190	175	192	195	302	241
Adult patients female ..	315	300	312	313	325	468	417
Patients 5-15 yrs.	90	80	93	101	98	77	117
Patients 0-5 yrs.	128	63	37	30	34	32	44
	751	633	617	636	652	879	819
Cases discharged or ceased to attend ..	550	396	336	337	101	337	301
Cases carried forward ..	201	237	281	299	551	542	518
	751	633	617	636	652	879	819
No. of treatments:							
total given ..	14,699	13,238	11,313	12,395	13,270	12,897	11,445
average per patient ..	19.6	20.9	18.3	19.5	20.3	14.7	14.0

OF THE MOUNTAIN RANGES

MOUNTAIN RANGES						
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
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PART V

HEALTH COMMITTEE

” ” STAFF

” ” REPORTS TO THE CITY
COUNCIL

SICKNESS RETURNS — MINISTRY OF NATIONAL INSURANCE

FINANCIAL SUMMARY

HEALTH COMMITTEE

1960

LORD MAYOR:

COUNCILLOR ROLAND ELSON GREEN, J.P.

CHAIRMAN:

ALDERMAN ERNEST PURSER

VICE-CHAIRMAN:

COUNCILLOR DR. ERNEST WANT, M.B., CH.B.

ALDERMAN R. ARBON

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

ALDERMAN MRS. M. E. WOOD

COUNCILLOR R. BRADLEY

COUNCILLOR J. E. DEXTER

COUNCILLOR DR. G. K. EMSLEY, M.R.C.S., L.R.C.P.

COUNCILLOR N. A. HEWARD

COUNCILLOR MRS. G. M. F. HORNE

COUNCILLOR W. H. MURDOCK

COUNCILLOR A. W. NORWEBB, A.R.S.H., J.P.

COUNCILLOR S. THOMAS, A.M.I.MECH.E.

COUNCILLOR H. WILSON

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. To 8.5.60.

KENNETH W. MATHESON, M.B., Ch.B., D.C.H., D.P.H., B.Sc.

From 11.7.60.

Senior Medical Officers—

PATRICIA H. S. SHAW, M.D., D.P.H., Barrister-at-Law. To 31.10.60.

L. ANN WILSON, M.D., B.Sc., D.C.H., D.P.H.

IAN C. BRANNEN, M.B., Ch.B., M.R.C.P.E., D.P.H. To 17.8.60

IAN G. P. FRASER, M.B., Ch.B., D.P.H. From 18.8.60.

ANTHONY D. BOSTOCK, M.B., Ch.B., D.P.H. From 1.11.60.

Senior Assistant Medical Officers—

IAN G. P. FRASER, M.B., Ch.B., D.P.H. To 17.8.60.

IAN K. HAY, M.B., Ch.B., D.P.H. To 25.8.60.

ANTHONY D. BOSTOCK, M.B., Ch.B., D.P.H. From 4.4.60. To 31.10.60.

N. MERCY PLOWRIGHT, M.B., Ch.B., D.C.H., D.P.H. From 18.8.60.

WILLIAM L. PALMER, M.B., B.S., D.T.M. & H., D.P.H. From 1.9.60.

DORIS STORY, M.B., B.S., D.P.H. From 1.11.60.

Medical Officers—

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

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

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

N. MERCY PLOWRIGHT, M.B., Ch.B., D.C.H., D.P.H. To 17.8.60.

DORIS STORY, M.B., B.S., D.P.H. To 31.10.60.

ARTHUR J. PAUL, M.B., B.S., D.P.H. From 1.10.60.

E. MALCOLM CLARK, M.R.C.S., L.R.C.P., D.T.M. & H. From 12.12.60.

In conjunction with Sheffield Regional Hospital Board

A. C. BLANDY, M.A., M.B., B.Ch., M.R.C.P., M.R.C.S., D.P.H.

Consultant Paediatrician

J. KAMIENIECKI, Ph.D., M.A., LL.M.

Senior Psychologist

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

Consultant Psychiatrist

H. J. MALKIN, M.D., F.R.C.S., F.R.C.O.G., L.R.C.P.

Consultant Obstetrician

J. V. WHITAKER, M.B., Ch.B., D.T.M. & H., D.P.H.

Chest Physician

City Analyst—

W. W. TAYLOR, B.Sc., F.R.I.C. †

John Ryle Health Centre—

Secretary—MISS J. E. SMITH. To 14.5.60.

MRS. N. J. DEAKIN. From 3.5.60.

† Part-time.

Superintendent Nursing Officer—

MISS M. EDWARDS, S.R.N., S.C.M., S.R.F.N., H.V., P.H.N. Admin. Cert.

Midwifery Service—

Supervisor—MISS E. S. CREER, S.R.N., S.C.M., M.T.D. To 28.2.60.

MISS P. J. LAMBERT, S.R.N., S.C.M., M.T.D., H.V.

Q.N. From 29.2.60.

Assistant Supervisor—MISS P. J. LAMBERT, S.R.N., S.C.M., M.T.D.,
H.V., Q.N. To 28.2.60.

Midwives—44 Full-time.

4 Part-time.

Health Visiting Service—

Deputy Superintendent—MISS M. L. DEVERELL, S.R.N., S.C.M., H.V.,
P.H.N. Admin. Cert.

Health Visitor Tutor—MISS D. T. HOGG, S.R.N., S.C.M., H.V. Tutor Cert.

Senior Tuberculosis Visitor—MISS E. CALEY, S.R.N., S.C.M.

Welfare Centre Superintendents 8

Health Visitors—General 23

„ Part-time 2

Tuberculosis 6

Students 7

Day Nurseries—

Supervisor—MISS K. THOMPSON

BULWELL *Matron*—MRS. Y. CHAPMAN, C.N.N.

Nursery Nurses—5

Warden—1

DOWSON *Matron*—MRS. P. BATES, C.N.N.

Nursery Nurses—5

Warden—1

HEATHCOAT STREET .. *Matron*—MISS M. R. M. DALE, C.N.N.

Nursery Nurses—5

Warden—1

PIERREPONT *Matron*—MISS E. I. WALKER, R.S.C.N.

Nursery Nurses—5

Warden—1

QUEEN'S DRIVE *Matron*—MRS. E. MACKINTOSH, S.R.N., S.C.M.

Nursery Nurses—5

Warden—1

RADFORD *Matron*—MRS. M. A. R. NAYLOR, S.R.N.

Nursery Nurses—5

Warden—1

SYCAMORE ROAD *Matron*—MRS. H. ROSS, R.S.C.N., C.N.N.

Nursery Nurses—5

Warden—1

Mother and Baby Home—*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**Social Workers—**

MISS M. BOTTOMS.

MRS. C. M. ROSE. To 30.6.60.

MISS M. H. WILLIAMS.

MRS. G. M. BROWN, B.A. From 14.11.60.

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

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

Assistant Superintendent—

MISS W. V. SHELTON, S.R.N., S.C.M., H.V., Q.N.

Home Nurses —58 — Full-time.

2 — Part-time.

15 — Students.

Home Help Service—*Organiser*—MRS. L. E. GRAY.*Deputy Organiser*—MISS M. J. MELLOR. To 14.10.60.*District Organisers*—

MRS. S. M. KLYMKO, B.Sc.

MRS. E. COLE.

MRS. E. M. CRICH.

MISS M. PALMER.

Case Workers — 8.*Home Helpers*—Full-time —150.

—Part-time —310.

Mental Health Service—*Mental Health Officer*—J. E. WESTMORELAND.*Deputy Mental Health Officer*—G. E. HIBBARD.*Senior Social Worker*—MISS M. PIMLOTT.*Social Workers*—4 **Mental Welfare Officers*—6.*Occupation Centre Superintendent*—D. H. CATER, R.M.N.,, „ *Staff*—15.

* 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., P.H.I.Cert.
Senior Clerks—17.
Clerks General Division, all sections—Full-time 52.
 —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, P.H.I.Cert.
 „ *Housing Inspector*—J. D. McDONALD, M.R.S.H.
Public Health Inspectors, all branches—22.
 „ „ „ *Trainees* — 6.
Smoke Inspector—1.
Technical Assistants—2.
Women Housing Officers—4.

Ambulance Service—

General Manager —B. ENGLAND, M.I.Mech.E., M.Inst.T.
Ambulance Officer—C. G. DEWEN, F.I.C.A.P.

Ultra Violet Ray Clinic—

HENRY N. JAFFE, M.B., B.S. †
Senior Nurse/Attendant—MRS. G. M. WHITTINGTON, S.R.N.
Nurse/Attendant—1.

Other Staff—

<i>Caretakers</i>	..	..	..	4	
<i>Cleaners</i>	..	..	..	17	Full-time
				10	Part „
<i>Cook/Housekeepers</i>	..	..	..	2	
<i>Cooks</i>	..	..	..	11	
<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>	..	..	..	6	
<i>Seamstress</i>	..	..	..	1	Part-time
<i>Storemen</i>	..	..	..	2	

† Part-time.

REPORTS

OF THE

HEALTH COMMITTEE

TO THE

CITY COUNCIL

AS TO THE MAKING OF PROPOSALS FOR CARRYING OUT
THE DUTIES OF THE CITY COUNCIL UNDER THE MENTAL
HEALTH ACT, 1959, AND SECTION 28 OF THE NATIONAL
HEALTH SERVICE ACT, 1946.

THE HEALTH COMMITTEE

Beg to report

That the Mental Health Act, 1959, contained important provisions relating to the care and treatment of persons suffering from mental disorder. Section 6 of the Act authorises local health authorities to make provision for such persons in their Proposals made under section 28 of the National Health Service Act, 1946, (which relates to the functions of local health authorities with respect to the prevention of illness and the care and after-care of patients), and the Minister of Health has made a direction requiring all local health authorities to make arrangements for the prevention of mental disorder and for the care of persons suffering from mental disorder and for the after-care of such persons.

It is a requirement of the National Health Service Act, 1946, that the arrangements for carrying out these duties shall be set out in Proposals made by the local health authority and approved by the Minister of Health. Your Committee's Proposals are set out in the appendix to this report. Part A of the Proposals contains a review of the existing arrangements, and it will be noted that at the present time a comprehensive service is being provided within the framework of the statutory provisions which were in force prior to the passing of the Mental Health Act, 1959. Part B of the Proposals consists of a statement of future plans; some of these are long term projects, but others are of immediate importance. In particular, provision is made for the provision of a junior training centre and of an adult training

centre within the next three years. The Finance Committee have considered the financial implications of these two schemes and have agreed to their inclusion in the Proposals.

Your Committee now recommend the Council to make the Proposals in accordance with the draft set out in the Appendix hereto and to instruct the Town Clerk to submit them to the Minister of Health for approval.

Dated this 8th day of March, 1960.

ERNEST PURSER,
CHAIRMAN.

CITY OF NOTTINGHAM
MENTAL HEALTH SERVICE

PROPOSALS

FOR CARRYING OUT THE DUTIES OF THE COUNCIL UNDER THE MENTAL HEALTH ACT, 1959 AND SECTION 28 OF THE NATIONAL HEALTH SERVICE ACT, 1946.

PART A

STATEMENT OF SERVICES WHICH WILL BE PROVIDED AT
THE DATE OF THE APPROVAL OF THESE PROPOSALS BY
THE MINISTER OF HEALTH.

1. GENERAL.

The scheme set out in these proposals will replace:—

- (a) all existing proposals approved by the Minister relating to the prevention of mental illness and the care or after-care of persons suffering from mental illness or mental defectiveness under Section 28 of the National Health Service Act, 1946; and
- (b) all existing proposals approved by the Minister for carrying out duties under the Lunacy and Mental Treatment Acts, 1890-1930 and the Mental Deficiency Acts, 1913-1938, after the relevant sections of these Acts have been repealed.

2. ORGANISATION AND STAFF.

(a) *Organisation.*

The Local Health Authority has delegated to its Health Committee the duty of carrying out its functions as approved by the Minister of Health under the Lunacy and Mental Treatment Acts, 1890-1930, and the Mental Deficiency Acts, 1913-1938, in accordance with Section 51 of the National Health Service Act, 1946. The Health Committee acts through a Mental Health and Prevention, Care and After-Care Sub-Committee.

The Medical Officer of Health is responsible to the Health Committee for the organisation, control and administration of the Mental Health Service and the Physician Superintendent of Mapperley Hospital, at present designated Medical Officer of Mental Health, acts as psychiatric adviser to the Service and co-ordinates the work of the hospital staff.

The Local Health Authority and Hospital services have been integrated by means of joint use of staff. The Psychiatric Adviser and other consultants at Mapperley Hospital give part-time service in the ascertainment of mental defectives, carry out domiciliary visits with the mental welfare officers, and advise on after-care and community care. The Medical Officer of Health is, at present, a member of the Hospital Management Committee of Mapperley Hospital.

Social workers employed by the Hospital Management Committee undertake after-care and community care and the mental welfare officers of the Local Health Authority attend case conferences at the hospital and visit patients in hospital before discharge.

Liaison is maintained with the general practitioners, who have the opportunity of attending case conferences.

(b) *Staff.*

In addition to those detailed in other sections of this part of these proposals, the following staff is employed in the Mental Health Service.

		Number of Staff.		Whole-time or Part-time.	
(i)	Medical. Designation.				
	Physician Superintendent, Mapperley Hospital (Psychiatric Adviser to the Service)	..	..	1	Part-time
	Consultant Psychiatrists, Mapperley Hospital	..	..	4	" "
	Senior Hospital Medical Officers, Mapperley Hospital	..	..	2	" "
	Physician Superintendent, Aston Hall Hospital	..	..	1	" "
	Senior Medical Officer, Health Department	..	..	1	" "
	Senior Assistant Medical Officer	..	..	1	" "

<i>Designation.</i>				<i>Number of Staff.</i>	<i>Whole-time or Part-time.</i>
(ii) Non-Medical					
Social Workers,					
Mapperley Hospital	..	..	..	4	Part-time
Mental Health Officer	..	..	..	1	Whole-time
Deputy Mental Health Officer	..	..	..	1	" "
Mental Welfare Officers	..	..	..	7	" "
Clerical Officers	..	..	..	5	" "

(c) *Training.*

For mental welfare officers, in-service training is arranged, and advantage is taken of suitable refresher courses.

3. SERVICES TO BE PROVIDED.

The Local Health Authority will carry out its duties under Section 28 of the National Health Service Act, 1946, in accordance with the provisions contained in both parts of these proposals.

4. JUNIOR TRAINING CENTRE.

(a) *Accommodation provided.*

One non-residential Occupation Centre is provided by the Local Health Authority, and there are 93 persons under the age of 16 years on the register. No residential centre is provided and no arrangements for training are made with any voluntary association.

(b) *Staff.*

The City Occupation Centre referred to in paragraph (a) is organised into three departments with overlapping age groups. Some of the staff are not, therefore, engaged solely with the training of persons under the age of 16 years. These staff are shown as part-time in the following list:—

<i>Designation.</i>				<i>Number of Staff.</i>	<i>Whole-time or Part-time.</i>
Superintendent, City Occupation Centre				.. 1	Part-time
Supervisor, Intermediate Department				.. 1	" "
" Junior Department				.. 1	Whole-time
Assistant Supervisors				.. 3	" "
" "				.. 1	Part-time
General Duties Assistant				.. 1	Whole-time
" " "				.. 2	Part-time

The Superintendent of the centre is a Registered Mental Nurse, and also possesses the Diploma in Teaching of the Mentally Handicapped of the National Association for Mental Health.

The Supervisor of the Intermediate Department has passed Section B of the examination for a Registered Nurse, Mental Deficiency.

The Supervisor of the Junior Department is an Associate of the London College of Music, whilst two other members of the staff have minor music qualifications. All the assistant supervisors have served a period of twelve months training on probation at the Centre.

(c) *Transport Arrangements.*

Three double-decker buses pick up the trainees at prearranged points, to which the trainees are taken by parents, relatives or friends.

The assistant supervisors and general duties assistants travel on the buses.

(d) *Ancillary Services.*

- (i) A mid-day meal is provided.
- (ii) Arrangements are made for annual medical examination by medical officers of the Local Health Authority and psychiatric re-examinations by the Physician Superintendent of the Aston Hall Mental Deficiency Hospital take place periodically.
- (iii) Where dental treatment is considered necessary, parents make arrangements with dental practitioners within the general dental services.

5. ADULT TRAINING CENTRE.

(a) *Accommodation provided.*

At the same occupation centre referred to in Section 4 (a) above there are on the register 83 trainees over the age of 16 years. No residential accommodation is provided and no arrangements for training are made within any voluntary association.

(b) *Staff.*

Those members of the staff not solely engaged in the training of persons over the age of 16 years are shown as part-time on the following list:—

<i>Designation.</i>	<i>Number of Staff.</i>	<i>Whole-time or Part-time.</i>
Superintendent, City Occupation Centre ..	1	Part-time
Supervisor, Intermediate Department ..	1	„ „
Supervisor, Adult Male Department ..	1	Whole-time
Assistant Supervisors	3	„ „
„ „ ..	1	Part-time
„ „ Trainee ..	1	Whole-time
General Duties Assistants	2	Part-time
Cook/Assistant Supervisor	1	„ „

The Centre Superintendent and the Supervisor of the Intermediate Department have the qualifications mentioned in Section 4 (b) above. All the assistant supervisors have trained for a period of twelve months at the Centre, and the trainee is now doing similarly.

(c) *Transport and Ancillary Services.*

These are as detailed in Section 4, paragraphs (c) and (d) above.

(d) *Type of Work.*

The work done at the Centre includes various handicrafts and domestic training for the women, and for men, a wide variety of occupations ranging from pottery to gardening in addition to simple factory type processes requiring the use of light machinery.

6. RESIDENTIAL ACCOMMODATION.

The Local Health Authority does not provide residential accommodation either directly or through any body or authority for any class of the mentally disordered.

7. HOME TRAINING.

No home or group teachers are employed by the Local Health Authority; instead efforts are made to bring to the Occupation Centre those capable of being trained.

8. DAY CENTRE, SOCIAL CLUBS AND OTHER ACTIVITIES.

The Corporation has a day occupation centre—known as Nuffield House—for elderly psychiatric cases conveyed by door to door transport. About 50 persons attend daily; there are 80 on the register. Handwork suitable for either sex is arranged and some men engage in gardening. A mid-day meal is provided.

There is a social club organised in connection with St. Ann's Hospital, and the Nottingham Association for Mental Health runs a club for sub-normal men. This association receives a grant from the Local Health Authority and the Local Education Authority accepts responsibility for the salaries of the club leaders.

None of these services is shared with those provided for other classes of the handicapped.

9. HOME VISITING SERVICE.

The general arrangements provide for regular visits to the sub-normal; after-care visiting of the mentally disordered on discharge from hospital—unless contra-indicated by psychiatric opinion—and community care of persons with psychiatric or related problems not requiring in-patient treatment. These visits are carried out by the 7 mental welfare officers and the 4 hospital social workers under the direction of the Mental Health Officer. Liaison is maintained with general practitioners, other services of the Local Health Authority, other departments of the Local Authority, and officers of the Ministry of Labour and National Service, and the National Assistance Board.

PART B

STATEMENT OF FUTURE PLANS SUBSEQUENT TO THE DATE
OF THE APPROVAL OF THESE PROPOSALS BY THE MINISTER
OF HEALTH.

1. GENERAL.

The Local Health Authority undertakes to make appropriate arrangements for the provision of services to meet the needs of the mentally disordered living in the community, and to make the services known to, and available to, those who are in need of them.

2. ORGANISATION AND STAFF.

The arrangements described in Section 2 of PART A of these proposals will continue with expansion as and when this is deemed necessary by the Local Health Authority.

In particular, where it is considered necessary by the Authority, additional staff, both medical and non-medical will be engaged. When a nationally recognised form of training for mental welfare officers becomes available, existing officers may be sent from time to time to undertake this in order to obtain the national qualification.

Further, when it is deemed desirable by the Local Health Authority, advantage may be taken of any service provided by or through any voluntary organisation or other local health authority.

3. SERVICES TO BE PROVIDED.

As undertaken in Section 3 of PART A, the Local Health Authority will carry out its duties under Section 28 of the National Health Service Act, 1946, in accordance with the provisions contained in both parts of these proposals.

4. JUNIOR TRAINING CENTRES.

The Local Health Authority proposes to extend the present junior training facilities to include severely subnormal children of a lower age exhibiting more severe defects than those at present in attendance. In particular, during the period to April, 1963, a special care unit for up to 50 places will be established probably as part of the present Occupation Centre, but, if necessary, elsewhere. A special staffing ratio of at least 1 : 6 children will be required for this group of children. Those defectives capable of using the present method of transport for trainees at the Occupation Centre will continue to do so, but for others it may be necessary to transport them to and from their homes.

Arrangements for transport, meals and medical inspection will continue as at present, but provision for dental treatment, for physiotherapy and for added social training may be made.

It is anticipated that the above arrangements will meet the needs for Junior Training Centres, but if it appears to the Local Health Authority that additional arrangements are required including the provision of more Centres, or extensions to existing ones, such additional Centres or extensions and other arrangements will be provided.

In the period to April, 1963, it is not considered that residential training centre accommodation for the under 16 age group will be required, but if then, or later, it becomes apparent to the Local Health Authority that there is a need for such residential accommodation, the necessary provision will be made.

The duties of the Local Health Authority under this Section of these proposals may be carried out directly by the Authority, or in conjunction with other local health authorities, or through arrangements made with voluntary bodies.

5. ADULT TRAINING CENTRES.

The Local Health Authority proposes within the period to April 1963, to set up, probably within the curtilage of the City Occupation Centre, but, if deemed necessary, on a site elsewhere, an adult workshop of up to 50 places in the first instance. The workshop will provide for adults of both sexes who are judged capable of being trained for ordinary or sheltered employment elsewhere. Staff will be provided in the ratio of at least 1: 12 adults, and transport and ancillary services may be provided as detailed in Sections 4 and 5 of PART A and Section 4 of PART B of these proposals.

The Authority recognises that as adult training develops, it may be necessary to provide additional facilities. If this appears to the Local Health Authority to become necessary, sheltered workshop accommodation or additional workshop accommodation and ancillary services may be provided either by extension of the accommodation mentioned in the preceding paragraph, or by the establishment of additional workshops elsewhere.

In the period to April, 1963, it is not considered that residential training centre accommodation for the over 16 age group will be required, but if then, or later, it becomes apparent to the Local Health Authority that there is a need for such residential accommodation, the necessary provision will be made.

The duties of the Local Health Authority under this Section of the proposals may be carried out directly by the Authority, or in conjunction with other local health authorities, or through arrangements made with voluntary bodies.

6. RESIDENTIAL ACCOMMODATION.

The Local Health Authority recognises that there may be a need to provide residential accommodation for the following groups:—

- (i) sub-normal persons attending the training centres or working in sheltered employment where the family is incapable of giving the care required;
- (ii) persons working in the open community who despite psychiatric treatment remain socially inadequate, and
- (iii) aged persons attending a day centre and requiring special care and supervision not being hospital treatment.

It is not anticipated that residential accommodation will be required for more than 25 persons in each of groups (i) and (ii) and 50 in group (iii).

In the period to April 1963, it is not considered that residential accommodation for these groups will be required, but if then, or later, it becomes apparent to the Local Health Authority that there is a need, such residential accommodation to the extent of, or in excess of, the numbers mentioned in the preceding paragraph, the necessary provision will be made.

The duties of the Local Health Authority under this Section of these proposals may be carried out directly by the Authority, or in conjunction with other local health authorities or through arrangements made with voluntary bodies or through boarding out with private persons.

7. HOME TRAINING.

The arrangements set out in Section 7 of PART A of these proposals will continue, but if it should become apparent to the Local Health Authority that there is a need for home teachers or "group" teachers, the necessary arrangements will be made.

8. DAY CENTRES, SOCIAL CLUBS AND OTHER ACTIVITIES.

If it becomes apparent to the Local Health Authority that there is a need for day centres, social clubs and other activities additional to those mentioned in Section 8 of PART A of these proposals, the necessary provision will be made.

The duties of the Local Health Authority under this Section of these proposals may be carried out directly by the Authority or in conjunction with other local health authorities or through arrangements made with voluntary bodies.

9. HOME VISITING SERVICE.

The general arrangements for home visiting set out in Section 9 of PART A of these proposals cover the full range of prevention, care and after-care of the mentally disordered, and no new developments are envisaged, though expansion will take place as deemed necessary by the Local Health Authority.

10. GUARDIANSHIP.

The Local Health Authority undertake to exercise their functions under the Mental Health Act, 1959, in respect of persons placed under guardianship, whether under that of the Authority or of other persons.

This report was submitted to the City Council at their meeting on the 4th April, 1960, and was adopted.

AS TO ADDITIONAL PROPOSALS UNDER SECTION 28 OF
THE NATIONAL HEALTH SERVICE ACT, 1946, TO AUTHORISE
THE PROVISION OF CHIROPODY SERVICES.

THE HEALTH COMMITTEE

Beg to report

That following a change in government policy, it has now become possible to make provision for a chiropody service. Your Committee have for several years been conscious of the need for such a service, particularly for old people, but hitherto it has only been possible to provide a very limited service by arrangement with the Nottingham General Dispensary.

Initially, it is proposed to continue and develop the arrangements by which chiropody treatment for old people is provided by the Nottingham General Dispensary as agents for the City Council, but in due course, it may well prove desirable to provide chiropody services in other ways for other classes of persons.

In the first instance, a charge of 2/6d. per treatment will be made, except to old age pensioners in receipt of supplementary allowances from the National Assistance Board who will be treated free, but this, along with all other aspects of the scheme, will be subject to periodic review.

It is a requirement of the National Health Service Act, 1946 that a local health authority's Proposals for carrying out its duties under the Act must be submitted to the Minister of Health for his approval. Accordingly, your Committee recommend the Council to make the additional Proposals set out in the Appendix to this report and submit them to the Minister for his approval.

If approved, these Proposals will authorise the provision of chiropody services in any way that is likely to be required in the foreseeable future.

Dated this 8th day of March, 1960.

ERNEST PURSER,
CHAIRMAN.

Appendix.

CITY OF NOTTINGHAM
ADDITION TO PROPOSALS
NATIONAL HEALTH SERVICE ACT, 1946, SECTION 28
PREVENTION OF ILLNESS, CARE AND AFTER-CARE
E. CHIROPODY ARRANGEMENTS

PRESENT ARRANGEMENTS.

The Corporation makes an annual grant to the Nottingham General Dispensary, which reserves appointments every week for twelve old people recommended for treatment by the local health authority. Transport is provided by the authority's ambulance service.

PROPOSED DEVELOPMENTS.

Future arrangements for the service may be undertaken either wholly or in part by the local health authority or by the agency of voluntary organisations or of chiropodists in private practice.

In particular:—

- (i) A chiropody service may be provided for all groups of the City's population, those comprising the elderly, handicapped and expectant mothers being the first groups to be considered.
- (ii) Chiropody clinics may be established according to need.
- (iii) Domiciliary services may be organised for persons who are unfit on medical grounds to attend for treatment.
- (iv) Joint arrangements may be made with neighbouring local health authorities.
- (v) Transport as necessary will continue to be provided by the ambulance service.

This report was submitted to the City Council at their meeting on the 4th April, 1960, and was adopted.

MINISTRY OF NATIONAL INSURANCE SICKNESS RETURNS

The number of claims for sickness benefit gives an indication of sickness of the population month by month.

Average No. of sickness claims per week					
	1956	1957	1958	1959	1960
JANUARY ..	1,942	1,315	2,209	1,708	1,512
FEBRUARY ..	1,991	1,332	1,669	2,541	1,563
MARCH ..	1,426	1,343	1,395	1,528	1,392
APRIL ..	1,064	1,004	1,066	1,117	1,192
MAY ..	1,005	1,069	903	940	1,161
JUNE ..	962	863	964	926	909
JULY ..	909	846	880	869	826
AUGUST ..	749	825	749	847	867
SEPTEMBER ..	1,101	2,438	1,009	1,047	1,074
OCTOBER ..	1,282	3,666	1,233	1,275	1,326
NOVEMBER ..	1,273	1,569	1,339	1,331	1,292
DECEMBER ..	1,052	1,511	1,120	935	1,195

RESPIRATORY INFECTIONS

NOTIFICATIONS OF PNEUMONIA												
	Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.
1960 ..	13	17	25	18	12	10	3	4	9	13	8	20
1959 ..	26	34	32	14	8	18	6	6	3	11	8	7
1958 ..	39	49	20	25	12	5	4	10	8	5	15	16
1957 ..	30	13	7	13	12	11	6	13	22	80	31	26
1956 ..	25	17	28	11	4	12	1	3	8	2	5	14

DEATHS			
	Influenza	Bronchitis	Pneumonia
1960*	9	205	187
1959	57	298	193
1958	32	322	173
1957	56	248	181
1956	17	269	192

* Provisional

COST OF HEALTH SERVICES

SERVICE	ACTUAL COST Year ended 31st March, 1960						ESTIMATED COST Year ending 31st March, 1961		
	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) ..	7,545	4,263	—	3,282	.18	2.51	3,045	.16	2.33
Public Health Inspection and other services ..	49,399	2,056	33	47,310	2.53	3 0.24	49,808	2.62	3 2.10
Health Centres ..	2,750	749	—	2,001	.11	1.53	2,028	.11	1.55
Maternal and Child Health ..	103,541	15,306	—	88,235	4.72	5 7.59	91,259	4.80	5 9.81
Midwifery ..	66,886	3,548	—	63,338	3.39	4 0.52	67,354	3.54	4 3.52
Health Visiting ..	38,964	2,035	280	36,649	1.96	2 4.07	41,958	2.21	2 8.09
Home Nursing ..	71,314	1,814	—	69,500	3.72	4 5.24	71,192	3.75	4 6.46
Vaccination and Immunisation ..	24,362	—	—	24,362	1.30	1 6.66	25,011	1.32	1 7.13
Ambulance ..	93,501	9,020	—	84,481	4.52	5 4.72	86,853	4.57	5 6.44
Prevention of Illness, Care and After-Care ..	29,009	4,066	—	24,943	1.34	1 7.11	32,151	1.69	2 0.59
Mental Health ..	36,824	800	—	36,024	1.93	2 3.60	38,462	2.02	2 5.42
Home Help ..	133,627	8,405	—	125,222	6.70	7 11.92	127,048	6.69	8 1.18
Other expenses ..	75	—	2,239	Cr. 2,164	Cr. .12	Cr. 1.66	557	.03	.43
TOTAL ..	657,797	52,062	2,552	603,183	2 8.28	38 6.05	636,726	2 9.51	40 7.05

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