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CITY OF NOTTINGHAM

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EIGHTY-NINTH  
ANNUAL REPORT

OF THE

HEALTH SERVICES

1961

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MEDICAL OFFICER OF HEALTH  
WILLIAM DODD, M.D.

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NOTTINGHAM

DERRY AND SONS LIMITED . PRINTERS



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MEDICAL OFFICER FOR HEALTH  
WILLIAM LINDSAY, M.D.

NOTTINGHAM

PRINTED AND SOLD BY THE CITY OF NOTTINGHAM

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## THE LATE ALDERMAN ERNEST PURSER

On Saturday, the 25th November, 1961, Alderman Ernest Purser died at his home in Mapperley. He had reached the advanced age of 89 years.

Alderman Purser was first elected to the Nottingham City Council in November, 1923, serving continuously until his death. He was made an Alderman in 1946, was Sheriff in 1933/34, and Lord Mayor in Coronation year 1936/37.


From the date of his election to the City Council, Alderman Purser was a member of the Health Committee until May 1961, when he resigned the Chairmanship of the Committee which he had held since November 1935.

"The Chairman" as he was invariably known to all members of the staff was held in great respect and affection. He made himself known to all grades of staff and worked hard and long in their interests, though, at the same time, requiring from each his or her full contribution to the service of the citizens to which he himself was dedicated.

His name is perpetuated in the Ernest Purser Welfare Centre, the latest building to be completed in the Health Services of the City. It was to pay tribute to his work that the Health Committee unanimously decided that this Centre should be named after him.



The Late Alderman Ernest Purser



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## FOREWORD

Health Services are very much a matter of people, both those who provide them and those who use them. It was into the first category that Alderman Ernest Purser was naturally placed, especially as his relinquishment of Committee office in May 1961 came after 26 years as the chairman; a long period during which wide experience of procedure and legislation was accumulated.

After the Alderman's retirement it was expected that we would see him frequently and, indeed, on occasions benefit by his advice. Reminiscence alone can be valuable!

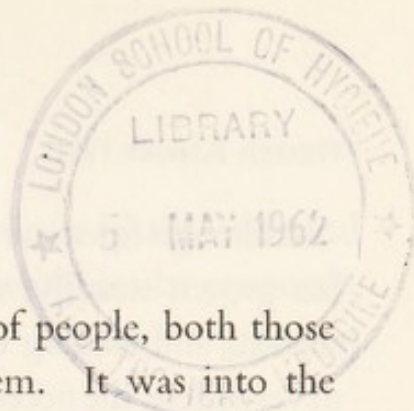
It was not to be and it is with a great sense of loss to many that a special note appears in this report.

★ ★ ★

The marked rise in the infant mortality rate from 23·22 to 27·29 demanded a careful and critical examination. It appears from an analysis of the causes of these deaths that the rise is, to an extent, accounted for by an increase in deaths of premature infants. An examination of various factors relating to prematurity such as the age of the mother, birth order, and the nationality of the mother, did not single out a cause which could be held responsible for the increase, though the high mortality of illegitimate infants was a contributory factor.

The incidence of prematurity was almost unchanged, but the proportion of these infants who were of very low birth weight and consequently suffered a high mortality was higher than in the previous year. Congenital malformations also accounted for more infant deaths and contributed to the increase in mortality in premature infants and in illegitimate infants.

★ ★ ★



Although for some years a concern about atmospheric pollution has grown steadily, marked by the establishment of measuring stations and leading to the creation of two smoke control areas, nevertheless, the necessity for a vigorous policy became even more patent.

That the City suffered from the imposition of daily and continuous precipitation of grit could not be denied. Clear evidence of this was seen in many places—notably in the southern third of the City—on external paintwork, in the dwellings both on furniture and linen, and even more grossly on the pavements. While the City Council, with the supervision of the North Wilford Power Station having passed to the Alkali Division of the Home Office, was impotent to take action, and with the only effective remedy—closing down—so drastic, it seemed that apart from the lessening of domestic smoke, the City must remain 'dirty' for some years. This is not a confession of failure but a statement of fact; certainly the reduction of domestic smoke is still a stiff and protracted task.

If doubt exists in the public mind as to the appalling pall, almost always apparent in any season, let those doubting look, from a vantage point, over the rooftops of the older and crowded areas of the City, and a remarkable sight of multiple jets of smoke—coming from almost every chimney—will be seen. Equally too, car owners who are still attached to the open fire, will recall the layers of grime which have accumulated on all cars during the past winter, and especially during periods of fog.

★ ★ ★

With a realisation of the high level of atmospheric pollution, the representatives of the Corporation faced, with a grim determination, the public enquiry—noted in this foreword last year—on the proposal of the Central Electricity Generating Board to establish an enormous power station at Holme Pierrepont.



Not only for a record, but for those who may read this and who may themselves at some time be faced with similar proposals, the essential facts that arose at the public enquiry are given on page 160.

★ ★ ★

Staffing is the most important single factor in any organisation and the preventive services of this City are no exception.

Continued difficulty was experienced in getting the required number of health visitors, midwives, public health inspectors, etc., and inevitably in those circumstances, the quality of work suffered.

The shortage of the various professional members of staff is a national one and is felt in some degree in most establishments. Thus not only are difficulties experienced by the local health authorities, but the hospitals too with a shortage of nursing staff—which in some places is acute—have problems which threaten to restrict their work.

In these circumstances it is not difficult to visualise that Hospital Management Committees would like more and more assistance by way of domiciliary services to permit, for example, early discharges from hospital, whether of maternity or of surgical cases. This places on the Local Authority Health Services a burden which, at least in present circumstances, can be met only with great difficulty.

★ ★ ★

No service, health or other, can expect to develop in aged buildings and with old fashioned equipment. Various residences adapted for this and that type of service are, at best, only a temporary arrangement but a tendency has developed to regard them as permanent and efforts to counter this and achieve progress have been nullified.



The need for expediting the expansion and re-organisation of national undertakings, whether industrial or otherwise, whether in these islands or overseas, is recognised by all and accepted as a fact without dispute. Equally the case can be made for a comparable development of Health Services—the service is national and is linked to an international organisation—for the value of the potential return is undoubted. All aspects of prevention should be playing an important role in the advance towards national well-being and prosperity.

Priorities of any kind and in any sphere are often difficult to determine and, therefore, the basis of decisions is rarely clear. Nevertheless, study of the figures given on page 169 is worthy of thought and poses the question as to the balancing of priorities.

★ ★ ★

Our congratulations to Mr. J. E. Westmoreland, the Mental Health Officer, on whom the honour of Membership of the Order of the British Empire was conferred by Her Majesty in the Birthday Honours list.

The honour gave pleasure to many of Mr. Westmoreland's friends and colleagues, not only in the Health Service here but also in wider national fields.

WILLIAM DODD,

*1st March, 1962.*

HEALTH DEPARTMENT,  
HUNTINGDON HOUSE,  
NOTTINGHAM.

TELEPHONE NO. 50551

# **PART I** --- **VITAL STATISTICS**

## VITAL STATISTICS\*

					1961	1960
POPULATION	..	..	..	..	313,280	313,760
AREA IN ACRES	..	..	..	..	18,364	18,364
NO. OF MARRIAGES	..	..	..	..	2,559	2,738

## LIVE BIRTHS

LEGITIMATE	MALES	2,690	FEMALES	2,561	..	5,251	5,205
ILLEGITIMATE	..	307	..	306	..	613	524
..	births expressed as a percentage of all						
	births	..	..	..	..	10.45%	9.15%
TOTAL NO. OF BIRTHS					..	5,864	5,729
Live Birth Rate per 1,000 of population					..	18.72	18.26

## STILLBIRTHS

LEGITIMATE	MALES	45	FEMALES	61	..	106	100
ILLEGITIMATE	..	7	..	4	..	11	15
TOTAL NO. OF STILLBIRTHS					..	117	115
Stillbirth Rate per 1,000 live and stillbirths					..	19.56	19.68
TOTAL NO. OF LIVE AND STILLBIRTHS					..	5,981	5,844

## INFANT DEATHS

INFANT DEATHS .. .. .					160	133
Infant Mortality Rate		TOTAL .. .		27.29	23.22	
..	..	legitimate births	..	25.14	23.63	
..	..	illegitimate ..	..	45.68	19.08	
Neo-Natal Mortality Rate—first four weeks of life				20.29	15.36	
Early Neo-Natal Mortality Rate—first week ..				16.20	12.22	
Peri-Natal Mortality Rate .. .				35.45	31.66	

## MATERNAL DEATHS (see page 22)

					..	3	3
Maternal Mortality Rate per 1,000 live and stillbirths					..	0.50	0.51

## DEATHS AT ALL AGES

MALES	1,831	FEMALES	1,855	..	3,686	3,441	
Death Rate per 1,000 of population					..	11.77	10.97

\* 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 1,000 live births    total births	
1851-1855 ..	55,883	—	—	—	—
1856-1860 ..	59,741	36.8	27.2	209	—
1861-1865 ..	75,765	34.8	24.9	192	—
1866-1870 ..	88,040	31.3	23.8	200	—
1871-1875 ..	89,510	34.1	24.9	192	—
1876-1880 ..	142,756*	34.6	21.7	175	—
1881-1885 ..	208,937*	36.6	20.9	174	—
1886-1890 ..	229,762	30.4	17.9	168	—
1891-1895 ..	219,770	29.5	18.3	174	—
1896-1900 ..	235,200	28.9	18.5	191	—
1901-1905 ..	246,020	27.7	17.2	170	—
1906-1910 ..	260,483	26.1	15.8	152	4.54
1911-1915 ..	264,316	22.9	15.1	137	3.66
1916-1920 ..	264,151	19.1	16.0	113	4.66
1921-1925 ..	268,900	20.4	12.9	90	3.34
1926-1930 ..	266,000	17.5	13.6	88	3.78
1931 ..	270,900	17.2	13.6	82	4.1
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	18.26	10.97	23	.51
61 ..	313,280	18.72	11.77	27	0.50

\* 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 .. ..	59	4	—	—	63	63	—	—	—	—	—
Congenital malforma- tions .. ..	12	5	4	1	22	31	1	3	—	—	4
Birth injuries .. ..	5	—	1	—	6	6	—	—	—	—	—
Atelectasis .. ..	11	—	—	—	11	11	—	—	—	—	—
Haemolytic disease of the newborn .. ..	1	—	—	—	1	1	—	—	—	—	—
Bronchitis .. ..	—	—	—	1	1	9	—	—	—	—	—
Pneumonia, all forms ..	2	1	—	1	4	13	3	—	—	1	4
Other respiratory diseases and con- ditions .. ..	—	—	1	—	1	2	—	—	—	—	—
Gastro-intestinal infec- tion including dysentery .. ..	—	—	—	—	—	4	1	—	—	—	1
Measles .. ..	—	—	—	—	—	—	1	—	—	—	1
Whooping cough .. ..	—	—	—	—	—	—	—	—	—	—	—
Meningococcal infections .. ..	—	—	—	—	—	—	—	1	—	—	1
Non-meningococcal meningitis .. ..	—	—	—	—	—	1	—	—	—	—	—
Tuberculosis .. ..	—	—	—	—	—	—	—	—	—	—	—
Syphilis .. ..	—	—	—	—	—	—	—	—	—	—	—
Leukaemia .. ..	—	—	—	—	—	—	—	—	1	2	3
Malignant neoplasms ..	—	—	—	—	—	1	—	—	—	—	—
Abdominal emergencies	1	1	1	—	3	3	—	—	—	—	—
Suffocation (overlying)	—	—	—	—	—	—	—	—	—	—	—
Accident (a) motor ..	—	—	—	—	—	—	—	—	—	—	—
(b) other .. ..	—	—	—	1	1	3	—	—	1	—	1
Other conditions .. ..	4	1	1	—	6	12	1	—	—	1	2
TOTALS .. ..	95	12	8	4	119	160	7	4	2	4	17

## **PART II**

# **THE PERSONAL HEALTH SERVICES**

National Health Service Acts 1946-1961

Mental Health Act 1959

**HEALTH CENTRES**

**MATERNAL AND CHILD HEALTH**

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

**IMMUNISATION**

**HOME NURSING**

**HOME HELP**

**MENTAL HEALTH**

**CITY AMBULANCE**



## HEALTH CENTRES

### THE JOHN RYLE HEALTH CENTRE

The continuance of financial restrictions leading to curtailment of capital expenditure on new buildings meant that for another year—and probably for others yet—the work of the centre, especially that of the local health authority, was undertaken in cramped rooms, which consequently became very crowded.

Nevertheless, despite this it was evident that the needs of the population of the estate, in so far as preventive work and general medical services were concerned, were met adequately and effectively.

That the centre suffers, in the eyes of the Clifton residents, from certain disadvantages seems to be reflected in the relatively low numbers of those who are on the list of the medical practitioners conducting surgeries at the centre. It is understood that the aggregate number of those registered with the doctors is less than the maximum permitted number on one individual's list. While acknowledging that the site, in relation to the rest of the estate, is unsuitably located and therefore inconvenient to many residents, it is not possible yet to assess the view expressed by some—medical and others—that general practitioner services are preferred when available at the home of the doctor.

It is hoped that the allocation of capital funds here will, within the next two years, permit the erection of a permanent Health Centre which, sited near the centre of the estate, may not only find more favour with the residents, but will also give the long needed facilities for the authority's own essential health services.

## MATERNAL AND CHILD HEALTH

**Live Births.** An increase again occurred in the number of babies born to mothers living in the City. There were 5,864 live births, giving a birth rate of 18·72, the highest since 1949.

**Stillbirths.** The number of stillbirths was 117, which gave a rate of 19·56 per thousand total births. The enquiry into the cause of each stillbirth was continued, and the results which are given on page 23 again show the predominance of prematurity without other known associated cause, congenital malformation, and maternal toxæmia in the aetiology of these foetal deaths.

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 ..	5,729	18·26	17·2	115	19·68	19·8
61 ..	5,864	18·72	17·4	117	19·56	18·7

**Infant Mortality.** The number of deaths occurring in children under 1 year of age was 160, giving an infant mortality rate of 27·29.



The analysis of registered causes of death in these children given on page 12 and summarised below in comparison with other years, shows that the number of deaths attributed to prematurity was responsible for a large part of the increase in infant mortality.

Death due to	Number of deaths							
	1961	1960	1959	1958	1957	1956	1955	1954
Prematurity .. ..	63	38	34	44	36	35	34	33
Congenital malformations	31	21	27	29	31	18	32	22
Birth injuries .. ..	6	8	15	9	13	7	10	11
Atelectasis .. ..	11	14	8	1	4	9	4	1
Respiratory diseases ..	24	25	35	27	28	21	41	28
Gastro intestinal infections	4	4	1	1	2	2	2	3
Other causes .. ..	21	23	16	12	12	21	14	24
	160	133	136	123	126	113	137	122

Comparison of Local and National Rates			
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 ..	133	23.22	21.8
61 ..	160	27.29	21.4

**Neo-Natal Mortality.** The majority, 80%, of the 119 infants who did not survive the first month of life died in the first week. The neo-natal mortality rate was 20.29 per 1,000 live births.

An enquiry into the cause of each death, including details of ante-natal care and confinement, was carried out and the results are tabulated 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 ..	15.36	7.86
61 ..	20.29	7.0

A table of mortality rates for the principal causes of death in this period, viz., prematurity and congenital malformations, derived from the neo-natal death enquiry, shows the increase in mortality in 1961 from these two causes.

#### NEO-NATAL MORTALITY RATES

Cause of Death	1961	1960	1959	1958	1957
Prematurity .. ..	9.0	6.8	6.0	7.2	5.3
Congenital malformations .. ..	4.9	1.9	5.1	3.7	3.4
Other causes .. ..	6.3	6.3	5.7	4.3	6.6

**Early Neo-natal Mortality.** The deaths of 95 infants occurred in the first week of life, giving a rate of 16.2 per thousand live births.

**Peri-natal Mortality.** The number of stillbirths and early neo-natal deaths totalled 212, giving a rate of 35.45 per 1,000 live and still births.

The ascertainable causes of these foetal and infant deaths extracted from the stillbirth and neo-natal death enquiry are analysed in the following table.



Primary factors in causation	Deaths	
	Total	Premature infants
Ante-natal causes:		
Toxaemia including haemorrhage ..	19	12
A.P.H. without toxaemia .. ..	10	6
Rh. incompatibility .. .. .	3	—
Intra-natal causes:		
Injury .. .. .	14	6
Asphyxia .. .. .	12	1
Other .. .. .	8	6
Post-natal causes:		
Infection only .. .. .	1	—
Congenital malformation .. ..	41	23
Prematurity only .. .. .	52	52
Other causes .. .. .	10	8
Unknown .. .. .	42	27
All causes .. .. .	212	141

**Illegitimate Births.** The illegitimacy rate increased in 1961 to 10·45% a figure which is nearly twice the national average in recent years. A comparison is made in the following table.

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 ..	524	9·1	5·4
61 ..	613	10·45	N.A.

Although there is not necessarily a higher mortality rate in illegitimate infants, as for example in 1960 when the rate for illegitimate infants was lower than that for legitimate infants, the greater hazard to life incurred by these children is shown by the increase in the infant mortality rate to 45·68 as compared with 19·08 in 1960. The corresponding rates for legitimate children were 25·14 in 1961 and 23·63 in the previous year.

**Prematurity.** The incidence of premature live births, which numbered 481, was 8·2% of all live births, showing little change from the figure of 8·12% for 1960. The mortality in the neo-natal period increased, however, and an analysis of these deaths by weight and place of birth showed that this was due partly to a greater number of deaths amongst those babies weighing over 4 lbs. 6oz. at birth. There was also an increase in the number of the smallest premature babies a group which has the highest mortality rate.

The neo-natal mortality rate per 1,000 premature babies was 158·0 compared with 7·97 for mature infants. The death rate from 4 weeks to 1 year was 20·79 for premature and 5·75 for mature babies.

In January, a baby weighing only 1 lb. 9 oz. was born at home at 24 weeks gestation, and according to practice was transferred to the City Hospital. After nearly 4 months and having achieved a weight of 4 lbs. 15 oz., the baby was discharged home to the care of the domiciliary premature baby nurse.



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...	12	9	5	55.55	3	3	100	56	38	67.86
3 lb. 4 oz.— 4 lb. 6 oz.	13	8	0	0	5	0	0	66	12	18.18
4 lb. 6 oz.— 4 lb. 15 oz.	22	6	3	50.00	16	0	0	71	5	7.04
4 lb. 15 oz.— 5 lb. 8 oz.	90	5	1	20.00	85	2	2.35	151	7	4.64
TOTALS ..	137	28	9	32.14	109	5	4.58	344	62	18.02

1. I (a) Fulminating bronchopneumonia aged 42 years  
(b) Influenza  
(c) 28 weeks pregnant. Essential hypertension.  
Post mortem examination.

\*2. I (a) Bilateral pulmonary infraction aged 27 years  
(b) Right pelvic vein thrombosis  
(c) Dilation of right side of heart.  
Post mortem examination.

\*3. Verdict: Extreme shock and vaso motor collapse  
consequent upon a transfusion reaction due  
to the presence of white cell anti-bodies in  
the deceased's blood.

Post mortem examination  
and inquest.

4. I (a) Acute left ventricular failure. aged 26 years  
(b) Toxaemia of pregnancy.  
(c) Caesarian section.  
Post mortem examination  
and inquest.

5. I (a) Generalised peritonitis aged 36 years  
(Baby born 30.11.61 in hospital).  
Investigation incomplete by 31.12.61.

\* Not resident in the City.

## ANALYSIS OF STILLBIRTHS

	Total	Born at			Sex		Premature	Maceration	Post mortem	Other complic'ns.			A.N.care*			Place in family					Age of mother							
		Hospital	Home	Nursing Home	Legitimate	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
Congenital malformation ..	24	21	3	-	23	8	16	18	7	2	9	1	14	7	11	6	12	4	5	2	1	7	2	9	4	2	-	-
Hazard of birth :																												
(a) Injury ..	8	8	-	-	6	6	2	3	-	7	2	1	5	1	6	1	4	1	1	1	1	2	1	1	2	2	-	-
(b) Asphyxia ..	4	2	2	-	4	1	3	-	1	2	1	-	3	2	1	1	-	-	1	1	2	-	-	1	2	1	-	-
(c) Other ..	6	6	-	-	5	2	4	4	1	1	1	2	3	3	1	2	3	1	1	-	1	2	1	-	1	1	-	-
Maternal toxæmia																												
(a) With A.P.H.†	13	13	-	-	12	6	7	7	5	4	9	-	4	2	5	6	6	3	2	1	1	1	5	5	1	1	-	-
(b) No. A.P.H. ..	6	6	-	-	6	1	5	5	3	1	5	-	1	-	6	-	4	-	1	1	-	1	2	-	-	3	-	-
A.P.H. without toxæmia ..	10	10	-	-	9	3	7	6	1	2	4	1	5	3	4	3	6	-	2	-	2	-	6	2	1	-	1	-
Rhesus incompatibility ..	2	2	-	-	2	1	1	-	1	-	2	-	-	1	-	1	-	1	1	-	-	-	-	1	-	1	-	-
Other causes ..	8	8	-	-	7	4	4	6	3	1	3	2	3	1	5	2	5	1	-	-	2	2	3	1	-	3	-	-
Unknown ..	36	28	8	-	32	19	17	24	23	7	15	3	18	12	17	7	15	6	7	2	6	6	7	7	7	4	5	-
TOTAL ..	117	104	13	-	106	51	66	73	45	27	51	10	56	32	56	29	55	17	21	8	16	21	26	27	18	7	-	-

\* Classification of Ante-Natal Care adopted as in the "Maternity in Great Britain" Survey.  
 Adequate at least 9 clinic attendances starting in the first 3 months of pregnancy.

Barely adequate " " 6 " " " second 3 " " "

Inadequate attendances only in last 3 months.

† Ante-partum hæmorrhage



## ANALYSIS OF NEO-NATAL DEATHS

	Born at				Sex	Premature	Age at death				Post mortem	Other complica'tns.					A.N. care*					Place in family					Age of mother																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																							
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\* 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 3 " " "

Inadequate attendances only in last 3 months.

### MIDWIFERY SERVICE

The domiciliary midwives attended 2,858, or 48.6% of the total, confinements of City mothers.

They continued the nursing on their return home after confinement of 464 mothers who had been booked initially, but who were admitted to hospital because of abnormality; they also nursed 260 mothers who were booked for hospital confinement and who were discharged home early.

In September, the Health Committee approved a temporary extension of home nursing after delivery at the City Hospital, because of the shortage of hospital midwives. The position was reviewed in December when it was decided to discontinue the arrangement as from 1st January, 1962, in view of the position of the home midwifery service.

As previously, midwives held a booking session weekly at 8 centres; bookings were also made at two centres at the same time as the doctor's sessions.

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

#### VISITS BY MIDWIVES

Ante-natal .. .. .	22,156
Post-natal .. .. .	44,782
Special .. .. .	7,499
Social emergency investigations ..	774

**Maternity Medical Services.** More general practitioners were booked by mothers and, following the recommendation of the Ministry of Health in its circular ECL. 81/60, operative from 1st



January, 1961, there was an increase of 3.0% in the number of confinements at which the general practitioner was present.

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
61	2,858	2,323	81.3	298	10.4

**Medical Aid.** The number of calls made to doctors through the Emergency Medical Service showed an overall increase of 8%, the main reasons being rupture of the perineum in 24.5% of births, prolonged labour occurring in 3% of pregnancies, while in 3.5% the cause was pre-eclamptic toxæmia. On analysis it appeared that primary suture of the perineum followed 7.4% of the total number of home confinements while 68.6% of patients with tears had been sutured previously. An analysis of medical aid calls is given on page 33.

**Eye Conditions.** There were 7 cases of ophthalmia neonatorum notified, one occurring in the child of a Jamaican woman who was confined at home, and was due to gonococcal infection, the first for many years.

**Maternity Emergency Service.** The number of calls for the Obstetric Unit from the City Hospital fell by one—as the table shows.

USE OF OBSTETRIC UNIT				
	1961	1960	1959	
Post partum haemorrhage, primary .. ..	19	11	5	
"    "    "    secondary .. ..	—	1	—	
"    "    "    with shock .. ..	3	3	4	
Retained placenta .. ..	16	19	17	
"    "    and post partum haemorrhage	3	4	7	
"    "    and delay in second stage ..	—	—	—	
Uterine inertia .. ..	—	—	1	
Severe anaemia .. ..	—	—	1	
Prolapsed cord .. ..	—	—	—	
Ante partum haemorrhage .. ..	2	3	1	
Malpresentation .. ..	—	—	1	
Foetal distress .. ..	3	—	1	
Obstetric shock .. ..	—	2	1	
Asphyxiated baby .. ..	—	1	1	
Eclampsia .. ..	—	2	—	
Abortion .. ..	—	1	—	
TOTALS .. ..	46	47	40	

**Hospital Admissions.** There were 47 admissions to hospital at the midwives' request, a decrease of 5 since last year.

**Hospital Confinements.** Arrangements were made for 377 mothers to be delivered in hospital because of unsatisfactory home conditions from a total of 731 applications. About 30% of the applicants were West Indian, some of whom were in an advanced state of pregnancy on arrival in this country. An analysis is given of the homeland of the applicants.

Country of origin	Number of applicants				
	1961	1960	1959	1958	1957
British Isles .. ..	406	444	412	476	402
West Indies .. ..	260	223	161	229	167
India and Pakistan ..	40	31	22	27	19
Others .. ..	25	26	20	27	41



**Analgesia.** Pethidine, used in approximately 34% of home confinements, was administered to 977 mothers as compared with 892 mothers last year. It was combined with gas and air analgesia in 526 cases, with trichloroethylene in 239 and with both in 8 cases.

Inhalation analgesia was used in 1,923 or 67.3% of domiciliary confinements. Gas and air was administered to 1,265 mothers, trichloroethylene to 646 and both to 12.

The equipping of every midwife with either a Trilene or a Gas and Air machine was completed in the course of the year.

**Oxygen.** Each midwife carried a "Sparklet" apparatus; oxygen was administered to 28 babies by inhalation.

**Transport.** Allowances were made to 38 midwives who used their own car in the course of their duty; 2 motor scooters and 7 cycles were also in use. On occasions the Council's light car service was also used.

**Relief Arrangements.** There was no change in these arrangements, but modifications were necessary from time to time to meet shortage of staff and absence owing to illness. The midwives because of the frequency of fog during the year preferred not to adopt the rota system.

**X-ray Examination.** Arrangement for large film chest X-ray examination was made at the first visit of all expectant mothers to the ante-natal clinics; 847 were examined and there were 414 defaulters.

**Blood Examinations.** The number of these examinations continued to increase. This is reflected in the number of mothers referred to hospital for booking on social grounds and included those who were under the care of the family doctor and who were

referred for blood examinations only. It also included blood examinations of those mothers attending the City's ante-natal clinics and who were booked for home confinement.

A total of 2,345 first and 1,365 repeat specimens were taken for haemoglobin examination, which included 1,142 first and 212 repeat samples taken from mothers referred by general practitioners.

Blood was sent for grouping and rhesus typing from 916 new cases, including 305 referred by family doctors, and a total of 452 repeat samples were examined for the presence of abnormal antibodies, including 125 sent by general practitioners. In addition 784 blood films were examined.

Midwives took samples from mother and baby on 122 occasions at the request of the Regional Blood Transfusion Laboratory. On 3 occasions samples of the mother's saliva were forwarded on request when the presence of rare antibodies was suspected.

Of a total of 2,345, Kahn tests performed, 9 were positive.

**Relaxation and Mothercraft.** As formerly, these classes were held weekly at 6 centres and were designed primarily for mothers expecting to be confined at home, the hospitals making their own provision for their patients.

Altogether 656 mothers attended a total of 274 sessions, the average attendance being 7.9.

**Consultant Clinic.** There was a decrease in the number of expectant mothers referred to this weekly clinic at the Edwards Lane Welfare Centre; 435 attended during the ante natal period, 10 in the post natal period, and there were 479 return visits.



**Home Care of Premature Babies.** Of 11 midwives trained for this work, four carried out these specialised duties.

One baby born prematurely at home weighed 1 lb. 9 oz. at birth, but was successfully nursed in hospital and subsequently at home. This is the smallest baby known to survive in the City.

#### CARE OF PREMATURE BABIES

	1961	1960
Premature babies born at home ..	137	130
Subsequently removed to hospital ..	28	29
Discharged from hospital for domiciliary care .. ..	273	203
Visits paid during the year .. ..	5,355	5,592

**Staff.** The staff consisted of 2 supervisors, 42 full time midwives and 5 employed part time for nursing only; 6 midwives left, 2 retired and 7 full time and one part time midwives joined the staff. In addition, one midwife was promoted to the post of Assistant Non-Medical Supervisor. On the basis of the recommendation contained in the Report of the Working Party on Midwives, in 1949, 55 full time midwives are required to meet the present number of births.

There was a slight reduction in the case load of home midwives due to an increase in the number of hospital confinements; the case load was 100 for midwives with a pupil and 76 for those practising alone. The relief this afforded was offset by long periods of sickness in addition to two midwives being absent on maternity leave, and by the early discharge of mothers from hospital.

The increase in sickness among midwives gave some cause for concern and it accounted for the loss of 800 days as compared with 465 days last year. There were 252 days for maternity leave so that, on the basis that each midwife took 129 off-duty days, the total time lost was the equivalent of  $4\frac{1}{2}$  midwives.



Miss E. Major retired on 21st April after 37 years' practice, 18 of which were spent as a City midwife.

Miss G. Pritchard retired on 6th October owing to ill health, after 10 years as a district midwife.

On 1st September Miss N. Antill commenced duty as Assistant Non-Medical Supervisor and Miss M. Tomlinson, the temporary assistant, retired.

**Training.** Statutory refresher courses were attended by 11 midwives; 8 midwives were trained in the teaching of relaxation to mothers.

University College Hospital, London, sent 6 medical students to Nottingham for training in domiciliary midwifery; they attended 35 confinements. As in former years they lodged at the City Hospital and at the Women's Hospital.

**Midwifery Training.** In association with the Firs Maternity Hospital 30 places were provided for district training of pupil midwives for Part II of the Certificate of the Central Midwives Board.

## **REQUIREMENTS OF THE CENTRAL MIDWIVES BOARD**

The Statutory Instrument, 1961, No. 810 which came into effect on 1st June authorised changes in the rules of the Central Midwives Board.

The principal changes affected the training of pupil midwives, and the prescribed uniform.

The Board also published a statement which came into force on 1st June regarding that part of the Population (Statistics) Act 1960 which concerned the notification of stillbirths and a consequential amendment to Notice No. 10 of the Midwives Code of Practice to include this enactment.

## CONFINEMENTS IN THE CITY

PLACE	NOTTINGHAM mothers			NOTTINGHAMSHIRE mothers etc.			TOTALS
	Total	Live	Stillborn	Total	Live	Stillborn	
At home—conducted by midwife ..	2,858	2,845	13	19	19	—	2,877
“ “ “ in private practice ..	17	17	—	—	—	—	17
Hospitals—City ..	2,875	2,862	13	19	19	—	2,894
“ “ “ Firs ..	2,008	1,938	70	505	481	24	2,513
“ “ “ Women's ..	496	476	20	403	399	4	899
“ “ “ “ St. Mary's Annexe ..	257	247	10	1,214	1,149	65	1,471
“ “ “ Highbury ..	25	25	—	83	83	—	108
“ “ “ “ “ “	171	168	3	871	853	18	1,042
“ “ “	2,957	2,854	103	3,076	2,965	111	6,033
Nursing Home—St. Idloes ..	47	47	—	43	43	—	90
County midwives ..	1	1	—	—	—	—	1
TOTALS ..	5,880	5,764	116	3,138	3,027	111	9,018



## MULTIPLE DELIVERIES

PLACE OF CONFINEMENT	Twins		
	Total	City	Out of City
At home—conducted by midwife .. ..	11	10	1
Hospitals—City .. ..	62	42	20
Firs .. ..	12	5	7
Women's .. ..	30	7	23
" St. Mary's Annexe .. ..	—	—	—
Highbury .. ..	17	4	13
Nursing Home .. ..	1	—	1
TOTALS .. ..	133	68	65

## MEDICAL AID CALLS TO DOCTORS

Mothers	1961		1960		1959	
	No.	% of home confinements	No.	% of home confinements	No.	% of home confinements
Ruptured perineum	699	24.46	581	20.10	533	18.17
Pyrexia ..	46	1.61	61	2.11	73	2.49
Abnormal presentation ..	68	2.40	60	2.08	45	1.53
Prolonged labour	93	3.25	103	3.57	83	2.83
Ante-partum haemorrhage ..	87	3.04	69	2.39	70	2.39
Post-partum haemorrhage ..	52	1.82	47	1.63	43	1.47
Retained placenta ..	29	1.01	32	1.11	30	1.02
Obstetric shock ..	2	0.07	4	0.14	5	0.17
Abortion and miscarriage ..	26	0.91	21	0.73	23	0.78
Phlebitis ..	24	0.84	22	0.76	17	0.58
Premature labour	57	1.99	58	2.01	62	2.11
Pre-eclamptic toxæmia ..	101	3.53	70	2.42	28	0.95
Hypertension ..	24	0.84	15	0.52	9	0.31
Breast conditions ..	29	1.01	27	0.93	29	0.99
Urinary conditions	11	0.38	11	0.38	11	0.37
Foetal distress ..	73	2.56	62	2.15	31	1.06
Premature rupture of membranes ..	53	1.85	29	1.00	32	1.09
Anaemia ..	8	0.28	7	0.24	7	0.24
Post maturity ..	13	0.46	*	*	*	*
Other conditions ..	77	2.69	85	2.95	68	2.32
Total ..	1,572	55.00	1,364	47.28	1,199	40.87

\* Previously included in "other conditions".



## MEDICAL AID CALLS TO DOCTORS

Infants	1961		1960		1959	
	No.	% of home confinements	No.	% of home confinements	No.	% of home confinements
Prematurity ..	8	0·28	13	0·45	11	0·37
Stillbirths ..	1	0·03	1	0·03	2	0·07
Asphyxia and Cyanosis ..	23	0·80	17	0·59	31	1·06
Jaundice ..	8	0·28	7	0·24	7	0·24
Deformity ..	14	0·49	9	0·31	17	0·58
Skin conditions ..	6	0·21	12	0·42	18	0·61
Eye discharges ..	82	2·88	163	5·65	140	4·77
Respiratory disorders ..	17	0·59	16	0·55	16	0·55
Alimentary conditions ..	8	0·28	4	0·14	5	0·17
Referred to Eye Hospital ..	1	0·03	*	*	*	*
Other conditions ..	26	0·91	32	1·11	21	0·71
Total ..	194	6·78	274	9·49	268	9·13

\* Previously included in "other conditions".

## PUERPERAL PYREXIA

Cases Notified	Arising in		Arising at home		Age Groups				
			Nursed at home	Admitted to hospital					
	Hospital	Home			15—19	20—24	25—34	35— 39	40+
35	25	10	9	1	7	10	15	3	—

## ADMISSIONS TO CITY HOSPITAL DIRECT FROM CITY MIDWIVES

Mothers	1961	1960	1959	1958	1957
Retained placenta ..	—	—	1	5	3
Premature labour ..	9	13	9	5	7
Ante-partum haemorrhage ..	6	10	10	7	4
Post-partum ..	3	2	1	4	5
Threatened abortion ..	2	2	—	—	1
Toxaemia ..	3	3	2	—	1
<i>Carried forward</i> ..	23	30	23	21	21

Admissions to City Hospital direct from City midwives—*continued*

Mothers	1961	1960	1959	1958	1957
<i>Brought forward</i> ..	23	30	23	21	21
Prolonged labour .. ..	4	5	1	—	2
Malpresentation .. ..	6	5	2	3	1
Unbooked social emergency ..	2	1	—	—	—
Hypertension .. ..	1	—	—	3	1
Foetal distress .. ..	—	2	—	—	1
Other conditions .. ..	8	2	—	6	—
Premature rupture of membranes	3	7	—	—	—
	<u>47</u>	<u>52</u>	<u>26</u>	<u>33</u>	<u>26</u>
<b>Infants</b>					
Cyanosis .. ..	—	—	—	—	3
Haemoptysis .. ..	—	—	—	—	1
Prematurity .. ..	2	1	4	—	—

## Midwives' notifications to Local Supervising Authority

	1961	1960	1959	1958	1957
Notifying liability to become a source of infection ..	30	70	99	95	158
* „ commencement of artificial feeding:					
domiciliary cases ..	—	127	238	225	220
institutional cases ..	—	282	393	322	304
„ death of infants—					
as midwives ..	9	2	10	5	3
* „ as maternity nurses	—	—	1	2	2
„ stillbirths—					
as midwives ..	13	14	15	22	17
* „ as maternity nurses	—	5	3	5	12
„ intention to practise ..	168	163	139	143	152

\* Notification discontinued July 1st, 1960.

## Distribution of practising midwives:

Domiciliary service ..	49
City Hospital .. ..	27
Firs Maternity Hospital ..	11
Women's Hospital .. ..	24
Highbury „ .. ..	8
Nursing homes and	
Nursing co-operations ..	4
Private practice .. ..	2

125

Ceasing to practise in this area ..	..	..	43
Practising at end of year .. ..	..	..	125



## HEALTH VISITING

**Staff.** New appointments during the year, which included seven health visitors who were successful in completing their course of training in Nottingham, led to an improvement in the staffing position so that at the end of the year there were 37 full time and 2 part time health visitors in the service; one resignation was received. Engaged on clinic duties were 1 full time and 4 part time nurses.

In spite of the increase in staff the number remained below establishment based on the recommendations of the Working Party on Health Visiting, 1956.

**Home Visits.** Routine and selective visiting was continued as in previous years: the number of visits made showed an increase of nearly 6,000 over the previous year.

## HOME VISITS

VISITS IN CONNECTION WITH	1961	1960	1959	1958	1957	1956
Pre-school children:						
Primary visits ..	5,665	5,500	5,346	5,398	5,332	5,024
Revisits under 1 year ..	37,122	36,529	35,081	35,287	34,237	33,306
,, 1-5 years ..	58,144	55,275	53,998	53,085	48,969	48,360
Expectant mothers:						
Primary visits ..	356	476	419	440	350	375
Revisits ..	314	476	357	391	320	329
Old people:						
Primary visits ..	493	567	474	532	565	452
Revisits ..	4,078	4,332	4,299	4,107	3,568	3,795
Stillbirth enquiry ..	7	45	61	64	43	58
Neo-natal ..	16	13	23	20	34	21
B.C.G. vaccination ..	7	4	4	378	963	1,265
Vaccination and immunisation ..	209	484	61	131	178	92
Infectious disease ..	6	2	4	32	115	1,075
Hospital after-care ..	74	78	175	105	163	105
Housing ..	63	45	94	120	135	58
Diabetic ..	106	103	57	97	99	119
Eye conditions ..	5	13	39	74	129	180
Other ..	584	312	638	363	582	377
NUMBER OF HOME VISITS	107,249	104,254	101,130	100,624	95,782	94,991
"NO ACCESS" VISITS ..	22,550	19,669	18,463	15,575	14,278	15,309
TOTAL VISITS ..	129,799	123,923	119,593	116,199	110,060	110,300



**Ascertainment of Deafness in Pre-School Children.** The existing arrangements with the hospital, general practitioner and school health services for the early diagnosis, treatment and training of children suffering from impairment of hearing were reviewed and, following this, general practitioners were informed of the facilities available.

During the year, 17 health visitors were trained by Dr. I. Taylor of the Department of Audiology and Education of the Deaf, University of Manchester, to carry out screening tests of hearing in young children. All the health visitors in the City, with the exception of two who were unable to attend the training sessions, were then capable of carrying out these tests.

The tests were carried out at infant and toddler clinics on babies at 9 months of age, particularly those in the "at risk" groups, and on other pre-school children suspected of deafness. Children failing three tests were referred to a consultant ear, nose and throat surgeon for investigation.

The number of children tested was 877 and 5 children were referred for investigation. Three of these were fitted with hearing aids, one is still under investigation, and the remaining child was not in need of treatment. Two of the three children fitted with aids had a family history of deafness and one of these was also a premature baby. The third was not in an "at risk" group.

#### SCREENING TESTS OF HEARING

Welfare Centre	1st Tests	Retests	Total
Aspley ..	54	—	54
Basford ..	134	—	134
Bilborough ..	115	6	121
Bulwell ..	32	1	33
Edwards Lane ..	85	3	88
Ernest Purser ..	123	4	127
Hyson Green ..	71	—	71
Jarvis Avenue ..	17	—	17
John Ryle ..	16	—	16
Radford ..	78	2	80
Sherwood Rise ..	44	1	45
Sneinton ..	102	1	103
Wollaton ..	6	—	6
<b>TOTAL ..</b>	<b>877</b>	<b>18</b>	<b>895</b>

**Co-operation with General Practitioners and with Hospitals.** Throughout the year family doctors and health visitors co-operated, particularly in relation to the care of young children and the elderly. One health visitor continued health education talks to expectant mothers in a general practitioner's surgery.

Arrangements are at present being considered for the experimental attachment of two health visitors to general practitioner partnerships.

Health visitors continued to attend diabetic clinics at both the City and General Hospitals, providing the link between the home and the consultant physician. In addition, the Deputy Superintendent and another health visitor attended these hospitals to confer with the almoners on the after-care of other patients on their return home. Health education talks were given by health visitors at the Firs Maternity Hospital.

**Upbringing of Infants.** A preliminary paper on the results of this survey, which was carried out with the assistance of health visitors, was read by Drs. L. J. and E. Newson of the Department of Psychology, University of Nottingham, at the meeting of the British Association for the Advancement of Science on 5th September. The suggestion that knowledge about child rearing practice is inadequate has stimulated wide interest in the final results of this work.

**Transport.** Nine health visitors received essential user allowances for their cars.

**Refresher Courses.** Five health visitors attended courses arranged by the Women Public Health Officers Association at Homerton College, Cambridge, Beaumont Hall, Leicester, and the Winter School in London respectively.

**Health Visitor's Training Course.** The course is administered jointly by the City and County of Nottingham.



Lectures were held at the Adult Education Centre of the University of Nottingham and practical training was arranged for students in rural and urban areas. During the year 17 students were successful in obtaining the Health Visitor's certificate; one was unsuccessful.

The 1961/62 course commenced in October with 11 students, including 4 from the City, 2 from Nottinghamshire, 4 from other authorities and 1 independent student.

**Visitors to the Department.** The work of health visitors was demonstrated to many, including student nurses from hospitals in the area. A student from the Public Health Nursing Administration Course of the Royal College of Nursing spent a two week period of observation here.

**Welfare Centres.** A review of the present and future needs for welfare centre facilities in the City was carried out during the year. The sites earmarked for 14 centres were considered, in relation to the needs of the population which they would be expected to serve, and an order of priority was suggested. In addition, there are 3 areas where services may be required after redevelopment.

The ownership of the rented premises at Jarvis Avenue changed hands during the year, and as the new owners wished to carry out extensive alterations it was necessary to discontinue the welfare centre sessions held there. An additional infant session was commenced at the nearest centre, Beaumont Street, Sneinton, to compensate for this closure.

The low attendances at the monthly infant clinic held at Lenton Abbey Congregational Church necessitated its discontinuation on 7th December. The session was transferred to the British Legion Hall, Wollaton, in order to provide a weekly infant clinic in that area.

For attendances see page 43.

**Consultant Clinics.** A total of 59 new cases was referred by medical officers to the weekly session held by the consultant paediatrician at the Ernest Purser Welfare Centre, and 157 children were seen as return cases.

The consultant ear, nose and throat clinic was held at Edwards Lane Welfare Centre according to demand, and of 25 children examined 12 were recommended for operation.

**Dental Care, Mothers and Children.** During 1961, arrangements continued to be supervised by the Principal School Dental Officer. Treatment for children of pre-school age was made available at all 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 the shortage of dental officers. Patients continue to be referred by medical officers of welfare centres and by general medical practitioners.



Dental Inspection and Treatment	Mothers			Children		
	1961	1960	1959	1961	1960	1959
Number examined ..	497	463	530	407	422	463
" needing treatment ..	497	461	527	399	410	437
" treated ..	477	451	490	398	406	437
" made dentally fit ..	430	398	440	109	149	Nil
1. No. of sessions ..	99	101	108	18	19.5	22
2. " " attendances for in- spection and treatment ..	1,424	1,366	1,449	460	475	493
3. Scalings and gum treatment ..	40	44	58	1	—	—
4. No. of fillings ..	32	76	100	—	4	8
5. Silver nitrate treatment only ..	3	2	8	—	—	—
6. No. of crowns and inlays ..	—	—	—	—	—	—
7a. " " teeth extracted under general anaesthetic ..	2,458	2,589	2,783	1,148	1,125	1,073
7b. " " teeth extracted under local anaesthetic ..	534	285		—	—	—
8. " " general anaesthetics ..	493	533	545	446	453	480
9a. Dentures provided: full upper or lower ..	211	200	166	—	—	—
9b. " partial upper or lower ..	44	44	48	—	—	—
10. Radiographs ..	17	13	14	—	—	—
11. Other operations ..	470	484	N.A.	—	—	—

**Welfare Foods.** The distribution of dried milk and vitamin preparations was continued at all infant clinics and at 4 other centres, as follows:—

Welfare Foods Distribution Centre, Canning Circus  
Bestwood Community Centre  
Sycamore " "  
Clifton Youth Club.

The revised charges for vitamin preparations announced by the Minister of Health were introduced in June. The amount of cod liver oil and orange juice distributed during the second half of the year fell to one third of the figure for the first half.

Amounts distributed	1961	1960	1959	1958	1957
National dried milk—20 oz. tins ..	80,206	93,740	107,133	110,013	140,582
Orange juice—6 oz bottles ..	95,576	161,353	173,315	164,260	253,348
Cod liver oil—6 oz. ,, ..	11,911	17,651	18,320	18,043	29,060
Vitamin tablets—packets of 20 ..	13,615	17,651	17,608	17,860	17,539

**Radioactive iodine in milk.** Arrangements were made for the distribution of dried and evaporated milk to the 6,060 children under the age of 12 months resident in the City. The allocation of milk for two weeks would be received at the Distribution Centre at Canning Circus for later dispersal to welfare centres and other distribution points, should the need arise.

**Family Planning.** The Nottingham Women's Welfare Centre held sessions at the General Dispensary three times a week; a total of 151 sessions took place. The pressure of work on the centre was eased by the opening of 4 clinics in neighbouring towns during the year.

Women were referred to the Family Planning Clinic by medical officers of welfare centres when indicated on medical grounds. The following table indicates the number of women referred by various agencies.

From Maternal and Child Welfare Centre	58
„ Chest Clinic .. ..	17
„ General Practitioner .. ..	162
„ Marriage Guidance .. ..	26
Transfers .. ..	60



## 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 ..	98	157	1,038	56	1,251	12.8	99	288	3,237	32.7	49	27	451	9.2
Basford ..	52	116	658	56	830	16.0	96	280	4,558	47.5	51	9	651	12.7
Bilborough ..	51	61	363	16	440	8.6	49	137	1,932	39.4	41	37	670	16.3
Bulwell ..	50	175	912	57	1,144	22.9	99	232	3,919	39.5	43	2	665	15.4
Edwards Lane ..	49	145	884	72	1,101	22.5	101	411	5,501	54.4	52	3	922	17.7
Ernest Purser ..	102	284	1,375	71	1,730	16.9	102	448	4,458	43.7	47	16	458	9.7
Hyson Green ..	—	—	—	—	—	—	100	402	5,601	56.0	—	—	—	—
*Jarvis Avenue ..	—	—	—	—	—	—	36	53	1,076	29.9	17	5	151	8.9
John Ryle H.C. ..	53	34	357	10	401	7.6	145	447	5,155	35.5	49	24	682	13.9
Lenton Abbey ..	—	—	—	—	—	—	12	13	116	9.6	—	—	—	—
Radford ..	149	497	1,851	82	2,430	16.3	151	530	5,538	36.7	63	30	889	14.1
Sherwood Rise ..	100	452	917	63	1,432	14.3	103	494	4,155	40.3	49	34	488	9.9
Sneinton ..	100	326	1,557	68	1,951	19.5	103	576	5,944	57.7	50	48	681	13.6
Wollaton ..	—	—	—	—	—	—	40	131	1,934	48.3	—	—	—	—
TOTALS ..	804	2,247	9,912	551	12,710	15.8	1,236	4,442	53,124	42.9	511	231	6,708	13.1
Consultant clinic ..	51	435	479	10	924	18.1								

\* Discontinued 26.9.1961.

## DAY NURSERIES

A review of the day nursery provision in the City was carried out during the year. It was considered that social need should continue to be the main criterion for admission and that, on the basis of the number of applications received, the places available in the seven nurseries were adequate to meet the demand by families with a social need for this accommodation.

The number of places available remained the same, being 23 for children 0-6 months old, 83 for those 6 months—2 years, and 163 for children aged 2—5 years.

The high proportion of children admitted to enable the sole breadwinner, usually the mother, to go out to work, is shown in the table analysing the reasons for admission.

Reason for admission	1961	1960	1959	1958	1957	1956
Parent sole bread-winner	49%	47%	47%	46%	45%	41%
Family income insufficient	17%	16%	19%	6%	11%	15%
Parent invalid, in prison, etc. . . . .	10%	8%	4%	19%	13%	8%
Bad housing conditions . .	9%	9%	14%	10%	13%	18%
Mother a nurse, teacher, etc. . . . .	4%	5%	4%	5%	6%	7%
Temporary special requests	11%	15%	12%	14%	12%	11%

**Attendances.** The total for the year was 48,407.



Age Groups	Average daily attendance							
	1961	1960	1959	1958	1957	1956	1955	1954
0—6 months ..	7	10	8	11	12	10	10	11
6 months—2 years ..	64	75	76	80	83	87	86	86
2 years—5 years	133	129	136	139	148	165	170	168
TOTALS ..	<u>204</u>	<u>214</u>	<u>220</u>	<u>230</u>	<u>243</u>	<u>262</u>	<u>266</u>	<u>265</u>
Percentage total places ..	76·2%	79·1%	77·0%	72·0%	69·6%	75·1%	76·2%	75·9%

**Charges.** The standard daily charge was 7/- with reductions to a minimum of 1/2d. according to a scale of assessment.

There were 145 applications for a reduction in the charge, of which 141 were granted.

**Infectious Diseases.** No serious outbreaks occurred in the nurseries during the year.

In one nursery, 4 cases of dysentery occurred and the policy of excluding only those children with symptoms was continued with apparent success.

Infectious Disease	Number of cases						
	1961	1960	1959	1958	1957	1956	1955
Measles ..	54	43	48	62	60	—	163
Sonne dysentery	4	51	30	15	14	84	32
Chicken pox ..	7	15	2	1	28	12	30
Mumps ..	—	1	10	—	11	12	14
Whooping cough	—	1	—	—	—	6	7
German measles ..	9	—	—	2	22	45	4
Scarlet fever ..	1	1	—	3	—	1	3
Poliomyelitis ..	—	—	—	—	—	1	1
Gastro-enteritis ..	—	—	—	12	—	—	—
Tuberculosis ..	—	—	—	1	—	—	—

**Staff.** Difficulty was experienced in obtaining trained staff to replace those who had resigned. Radford nursery had two vacancies for seven months and Queens Drive nursery was short of one member of staff for six months until the posts were filled by successful candidates from the training course.

Staff shortages placed a particularly heavy strain on the remaining nurses in the care of very young children, and occasionally it was necessary to divert new admissions to other nurseries.

**Training Centre.** Students attending the Nursery Nurses Training Course spent two days each week at the Centre and three days in nurseries and nursery schools.

There were 37 successful candidates of 42 students who sat the examination of the National Nursery Examination Board in July.

The teaching arrangements were reorganised so that the medical officer who participated in this work gave one lecture each week from the beginning of the school year in September. The 94 students were drawn from the City and nearby authorities.

**Training Nurseries.** Five of the City nurseries are approved for training purposes and provided practical experience for 12 first and 12 second year students.

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

Two applications for the registration of premises as day nurseries were approved during the year: these provided places for toddlers. One of them, registered for 48 children, was situated on the Clifton Estate where there is no Corporation nursery.



The other, open during the afternoon only, was run by a community centre for the mothers associated with that centre and provided 25 places. A third application was still under consideration at the end of the year.

The number of registered child minders remained at two, providing care for 6 children. One application for registration was refused.

## ATTENDANCES AT CITY DAY NURSERIES

	BULWELL			DOWSON			HEATHCOAT STREET			PIERREFONT			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 ..	16	188	292	-	106	560	32	220	255	9	158	418	16	214	109	28	129	394	20	213	243
FEBRUARY ..	28	244	356	-	107	504	47	233	272	2	157	386	19	163	91	15	111	516	13	229	424
MARCH ..	26	229	421	-	163	539	17	176	222	-	205	510	-	238	123	-	131	590	30	264	510
APRIL ..	5	169	407	-	108	446	55	237	285	-	192	438	-	223	135	-	66	412	31	197	387
MAY ..	4	159	448	-	105	474	72	228	331	-	161	471	47	307	115	-	96	550	53	213	422
JUNE ..	37	182	456	-	118	559	63	222	280	17	155	480	34	245	126	19	144	596	57	197	481
JULY ..	25	202	417	-	103	537	45	262	281	19	133	516	12	225	136	-	112	566	42	211	454
AUGUST ..	11	77	193	-	34	210	4	139	99	13	73	226	12	99	67	4	52	205	26	102	212
SEPTEMBER ..	26	171	375	-	115	554	22	338	264	30	228	516	49	274	168	21	139	470	69	222	449
OCTOBER ..	-	183	465	-	163	520	7	330	330	36	219	566	52	278	203	22	178	580	41	258	481
NOVEMBER ..	-	215	489	-	93	510	19	360	337	44	229	536	32	324	205	22	166	579	27	307	481
DECEMBER ..	-	123	288	-	78	378	16	241	245	25	133	394	38	209	171	16	96	386	17	233	329
TOTALS	178	2,142	4,607	-	1,293	5,791	399	2,986	3,201	195	2,043	5,457	311	2,799	1,649	147	1,420	5,844	426	2,646	4,873
	6,927			7,084			6,586			7,695			4,759			7,411			7,945		

Age Groups A: 0-6 months. B: 6 months-2 years. C: 2 years-5 years.  
 Total Attendances ,, 1,656. ,, 15,329. ,, 31,422 Grand Total: 48,407.







Things do change . . . .





. . . . don't they ?





## THE CARE OF ILLEGITIMATE CHILDREN

The procedure was that mothers who were expecting an illegitimate child and who were seeking advice were interviewed by a senior nursing officer. In the course of the year there was a considerable increase in the number seen and of a total of 244 mothers 88 were immigrants.

Of those applying, the majority did not need accommodation in the Mother and Baby Home but were guided as to the arrangements for and the place of confinement.

An analysis showing the place of confinement and the numbers admitted to the home is given in the table.

	1961	1960	1959	1958
Admitted to Mother and Baby Home	48	27	30	19
Awaiting admission .. ..	13	8	2	9
Confinement in hospital ..	104	28	31	54
„ at parents' home ..	3	8	9	14
„ in nursing home ..	1	—	1	1
Admitted to homes outside City ..	6	8	9	11
Left City before delivery ..	6	4	3	1
Still under consideration ..	61	24	16	10
Others .. ..	2	1	—	—
TOTAL .. ..	244	108	101	119

**Mother and Baby Home.** The arrangements for the care of the unmarried mother and her child were reviewed during 1961, as in recent years the home had been only partly occupied. It so happened, though, that the review coincided with a period of increased demand for places and the 8 beds and 6 cots of the home were fully occupied for much of the year. The review continues.

The average occupancy was 6·6 and the average length of stay was  $6\frac{1}{2}$  weeks, though some mothers who wished to have their children adopted remained for longer periods while the arrangements were completed.

Confinements took place in hospital and the mothers returned to the home after ten days.

Of the 48 mothers admitted, 46 were resident in the City.

#### MOTHER AND BABY HOME

	1961	1960
Mothers in the home 1st January .. .. .	3	5
„ admitted before confinement .. .. .	38	23
„ „ after confinement .. .. .	10	4
„ returned to parents' home with baby .. .. .	25	17
„ „ „ lodgings with baby .. .. .	6	2
„ married putative father .. .. .	4	—
„ leaving before confinement .. .. .	2	1
„ returning to parents' home from hospital with baby .. .. .	6	3
„ who cancelled booking .. .. .	9	12
Babies admitted to Children's Home .. .. .	2*	1
„ placed for adoption .. .. .	9	5*
Remaining on December 31st .. .. .	8	3

\* including twins

The ages of mothers admitted to the home are analysed in the following table.

#### AGE DISTRIBUTION

Age Group	1961	1960	1959	1958
Under 15 ..	1	—	—	—
15—16 ..	11	6	2	1
17—18.. ..	12	10	6	6
19—20.. ..	11	5	5	2
Over 20 ..	13	6	17	10

Arrangements were made, through the Southwell Diocesan Board of Moral Welfare, for one very young mother to enter a home in another locality.



## PREVENTION OF ILLNESS, CARE AND AFTER-CARE

### CARE OF OLDER PEOPLE

The requests for help in the care of older people showed little change; at the same time there was no diminution in the number of elderly men and women who were mentally confused, living alone and who needed continuous support.

By arrangement with the geriatric physician suitable patients were admitted to the City Hospital for short term care with the agreement of the family doctor. The knowledge that help was available when necessary brought much needed relief to families who as a result showed a greater willingness to undertake the care of an exacting relative.

**Voluntary Services.** The visiting scheme of the Women's Voluntary Service continued under the guidance of the Senior Medical Officer; 38 old people were visited by 31 members of the Service and the visits were made weekly except in the cases of acute sickness where the visitor called daily. In all, approximately 2,000 visits were made.

**Health Visiting.** Information about elderly people in need was received from many sources and though there were fewer new cases, the number of re-visits was approximately the same as in previous years. Agencies through which assistance was arranged by health visitors are listed in the table below.

Formerly sociological reports were prepared by health visitors for the guidance of the geriatric physician when arranging admission of old people to the unit at the City Hospital but,

following the appointment of Dr. Adolphe Bain in June as Assistant Physician, he undertook this work.

Each week a health visitor visited the geriatric unit of the City Hospital and that also of the General Hospital not only to receive information concerning those about to return home but also to report the progress of those who had returned to their families.

Cases reported by	1961	1960	1959	1958	1957	1956
General practitioners ..	41	46	48	54	37	42
Geriatric unit—after care	152	114	116	139	125	88
„ „ —reports ..	33	84	53	54	80	49
Welfare Serv. Dept. ..	11	26	8	29	27	18
Relations and neighbours	41	46	43	44	33	38
Health Department ..	46	60	30	96	81	74
Clergy .. ..	—	—	1	1	3	—
Voluntary organisations ..	15	24	11	30	26	62
Health visitors ..	65	88	106	37	25	36
General Hospital ..	45	45	32	40	53	45
Others .. ..	44	34	26	8	—	—
Total new visits ..	493	567	474	532	490	452
Re-visits .. ..	4,078	4,332	4,299	4,107	3,643	3,795
	4,571	4,899	4,773	4,639	4,133	4,247

Assistance arranged through	1961	1960	1959	1958	1957	1956
General practitioner ..	102	174	118	198	157	219
Home helper .. ..	193	213	113	214	217	224
Public health inspector ..	47	54	35	26	25	22
Convalescence .. ..	27	60	32	25	14	19
Housing Department ..	42	29	42	39	23	21
Welfare Serv. Dept. ..	94	102	84	98	107	71
National Assist. Board ..	64	56	64	52	63	57
Council of Social Service ..	26	29	26	24	42	28
W.V.S. clothing .. ..	49	76	80	85	69	64
Blind Institute .. ..	4	6	8	11	16	8
General Dispensary:						
Chiropody .. ..	65	67	46	84	58	55
W.V.S.: Meals on wheels ..	47	66	65	78	51	35
Relatives—advice .. ..	108	100	113	97	145	203
Total .. ..	868	1,032	826	1,031	987	1,026



**Chiropody.** During the first year since its inception the service ran smoothly; the number of attendances grew to that which had been anticipated.

New patients—old people, the physically handicapped and expectant mothers—were recommended by general practitioners, medical officers, health visitors, home nurses and by midwives; the table shows the number of persons treated in each group and the number of treatments given.

Priority Group	No. of Patients	No. of Treatments
Aged .. ..	1,462	1,944
Handicapped .. ..	236	282
Expectant mothers ..	53	45
TOTAL .. ..	1,751	2,271

Of the 1,751 patients, 1,549 were treated at the General Dispensary and 202 at home.

In addition to the above, 2,223 pensioners who were already attending the General Dispensary before the Local Authority's scheme was inaugurated, received 20,708 treatments.

A charge was made of 2/6d. per treatment irrespective of whether it was given at home or at the Dispensary, except for pensioners in receipt of a supplementary allowance from the National Assistance Board in which case the charge was waived.

## NUFFIELD HOUSE

The Octagon Club at Nuffield House continued to make a valuable contribution not only to the prevention of mental deterioration in the elderly but also as a means of caring for some older people who would otherwise have required admission to hospital.

**Attendance.** The average daily attendance was 40 and at the end of the year there were 76 persons on the register, compared with 77 at the beginning. Difficulties experienced by older persons in making the daily journey to the club, and, in the case of new members, of joining an established group, resulted in a loss of some members after an attendance of less than five days.

The average daily attendance of 50 during 1960 proved to be too many and as the club was only equipped for 40 members, it was necessary to restrict the numbers. Even so the increasing proportion of women over men caused cramped conditions in the women's workroom as for every man there were 8 women on the register at the end of the year.

The tables classify the members enrolled during 1961 into three groups, according to the reason for their attendance; those discharged from the mental hospital and who needed day care; those living alone who needed companionship; and those living with relatives, who by their attendance both widened their interests and eased the burden of care at home, thus maintaining the family unity.

During the year 18 members died and a number were admitted to a mental hospital. Residential accommodation was arranged under the National Assistance Act at various old peoples' homes for 5 members who could no longer live alone.



NEW MEMBERS					
MEN					
Reason for attendance	Benefitted	No change	Deteriorated	Short* stay	Total
Hospital discharge ..	—	1	—	1	2
Living alone .. ..	2	1	—	1	4
Relief for relative ..	2	—	—	—	2
TOTAL .. ..	4	2	—	2	8
WOMEN					
Reason for attendance	Benefitted	No change	Deteriorated	Short* stay	Total
Hospital discharge ..	1	3	—	2	6
Living alone .. ..	16	8	—	5	29
Relief for relative ..	11	9	—	3	23
TOTAL .. ..	28	20 <sub>7</sub>	—	10	58

\* Attended less than 5 days

**Staff.** The complement of supervisory and occupational staff remained unchanged, and the employment of daily domestic staff in place of a residential caretaker remained satisfactory.

**Occupations.** Although the attendances were slightly lower than last year, the women were still working under crowded conditions.

The purchase of a hand sewing machine enabled dressmaking and the making of children's clothes to be added to the other forms of occupation. The high standard of this work proved a stimulus to those doing other types of work and all the articles produced found ready sale among the members.

Social evenings for the relatives were held on several occasions during the year. A better mutual understanding of the problems of the members was achieved at these informal discussions between relatives and the staff.

**Transport.** At the end of September a 20 seater Spurmobus replaced the Bedford Minibus which had been in service for 5 years and which had proved too small and too light for the work required of it. This replacement reduced the travelling time of the members enabling them to spend a longer period at the club.

### PREVENTION OF BREAK-UP OF FAMILIES

Meetings of the Co-ordinating Committee of statutory and voluntary social services took place on 14 occasions.

The number of cases considered was 37, of which 29 were discussed for the first time during the year. The various agencies reporting new cases were as follows:

Children's Department	..	2
Education	..	5
Estates	..	2
Health	..	1
Housing	..	15
N.S.P.C.C.	..	4
		<hr/>
		29

The majority of the cases referred to the Committee for discussion were in arrears of rent. These caused concern, for if an eviction order was obtained the result might be the disruption of the family with the separation of the children from their parents. Efforts were made to encourage regular payment of rent in these cases by the worker most closely concerned with the family.



It was apparent that in some cases the family could not be made to realise their predicament until they had reached the very brink of disaster. The fact that in some other cases, money was found repeatedly at the last minute in order to delay a court order for possession of the house, suggested that this was a mode of living not an inability to manage their affairs.

Parents living in this way are able to do so only because the Corporation is concerned for the welfare of the children and is reluctant to take action to obtain possession of the house in these cases.

## 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, 598 were tuberculin tested and 530 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	.6
56 ..	329	2,911	5	.2
57 ..	362	4,501	33	.7
58 ..	345	3,248	10	.3
59 ..	288	2,896	7	.2
60 ..	191	2,676	8	.3
61 ..	179	2,385	22	.9

**Rehousing.** The number of recommendations for rehousing of tuberculosis cases showed a considerable decrease from last year, with a consequent reduction in the necessary social work.

Year	Recommen- dations 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
61 .. ..	5	5	0	5
TOTALS .. ..	1,079	450	523	973

**Care Committee.** Owing to the progressive reduction in the work of this Committee, meetings were held monthly instead of weekly as was necessary in former years. On account also of the decrease in need for nursing equipment, the stock previously held at the Forest Dene Chest Centre was transferred to the main nursing equipment store. Patients were helped with clothing not only by the National Assistance Board, but also by the British Legion, the Women's Voluntary Service, and through the almoner if in hospital; necessitous schoolchildren of a tuberculous parent were referred to the Education Department.

The Children's Department arranged for the care of 14 children from a total of 9 families while a parent was under treatment in hospital.



Type of Assistance	1961			1960	1959	1958
	Cases Crd. Fwd.	New Cases	Total	Cases	Cases	Cases
Milk at reduced rate ..	31	15	46	112	197	259
Referred to National Assistance Board ..	72	88	160	264	286	285
Loan of bedding ..	20	12	32	53	88	142
„ „ nursing equipment	22	—	22	50	79	163
Domestic help { Home Help	7	13	20	21	19	64
{ Service		2	2	16	48	13
{ Other help	—	58	58	*	*	*
Financial help ..	—	39	39	*	*	*
Housing ..	—	25	25	*	*	*
Advice ..	—	27	27	35	68	85
Clothing provided ..	—	16	16	*	*	*
Child care arranged ..	—	53	102	83	79	112
Employment arranged ..	49	9	14	26	33	44
Training arranged ..	5	8	8	21	16	9
Convalescence ..	—					
Other matters, inc. Occup. Therapy ..	94	58	152	243	286	261
TOTALS ..	300	423	723	924	1,199	1,437

\* Previously included in "Other matters".

**Occupational Therapy.** No patients were referred for occupational therapy to the Welfare Services Department though the British Red Cross Society provided occupation at home for three people who were housebound.

**Notification of Tuberculosis in Immigrants.** The total number of notifications of tuberculosis continued to fall; as previously, the nationality of persons notified was recorded, and the table below gives the number of cases occurring in immigrants.

Nationality	1961	1960	1959
Polish .. ..	—	10	8
Asian .. ..	11	9	18
African .. ..	—	2	1
European .. ..	4	2	10
West Indies .. ..	7	1	2
Eire .. ..	2	1	1
TOTAL .. ..	24	25	40

As will be seen from the statistics on page 60 the number of new notifications in 1960 was 191 as compared with 179 in the present year.

## STATISTICS OF TUBERCULOSIS

	PULMONARY			NON-PULMONARY			Total						
	Adults		Child- ren	Adults		Child- ren	1961	1960	1959	1958	1957	1956	1955
	M.	F.		M.	F.								
Cases B/Fwd. . .	1,256	1,208	216	42	117	25	2,864	3,183	3,359	3,728	3,719	3,740	3,671
Transfers from other areas . .	24	23	1	—	—	—	48	60	67	81	57	50	3
"Lost" cases returned . .	1	1	—	—	—	—	2	6	5	3	8	9	—
NEW CASES	1,281 103	1,232 52	217 5	42 6	117 8	25 5	2,914 179	3,249 191	3,431 288	3,812 345	3,784 362	3,799 329	3,711 38
Cases written off	1,384 274	1,284 190	222 24	48 13	125 23	30 1	3,093 525	3,440 576	3,719 536	4,157 798	4,146 418	4,128 409	4,091 35
Children becoming adults . .	1,110 + 3	1,094 + 7	198 -10	35 + 1	102 + 2	29 - 3	2,568	2,864	3,183	3,359	3,728	3,719	3,740
Cases on register at end of year . .	1,113	1,101	188	36	104	26	2,568	2,864	3,183	3,359	3,728	3,719	3,740
DETAILS OF CASES WRITTEN OFF:													
Recovered . . . . .							318	395	292	406	247	186	161
Deaths—all causes . . . . .							56	60	61	75	63	78	65
Transferred to other areas or lost sight of . . . . .							151	121	183	317	108	145	127
DEATHS FROM TUBERCULOSIS . . . . .							29	24	29	54	39	38	56
DEATH RATE PER 1,000 POPULATION . . . . .							0.09	0.08	0.09	0.17	0.12	0.12	0.18
EXAMINATION OF CONTACTS:													
No. of contacts examined—New 882													
Old 1,503 . . . . .							2,385	2,676	2,896	3,248	4,501	2,911	2,630
do. found to be tuberculous . . . . .							22	8	7	10	33	5	16
Percentage do. do. . . . .							0.92	0.3	0.242	0.308	0.73	0.17	0.6
WORK OF THE HEALTH VISITORS:													
No. of visits paid to patients' homes . . . . .							12,406	12,769	13,781	13,605	12,105	13,098	15,231



## CONVALESCENCE

Convalescent care, limited in most cases to a period of 2 weeks, was available, following a recommendation by the family doctor, for necessitous people recovering from illness or operation. Though 166 requests were received, fewer by 49 than during last year, it was possible to accept only 78, as the funds available were exhausted by July.

Those who could not be assisted were referred for help to a voluntary agency, either the British Legion, the Nottingham and Notts. Council of Social Service, the Nottingham Co-operative Society or the Nottingham Cripples Seaside Home and Mission.

Arrangements were made for 48 people to be admitted to independent homes, the Health Committee contributing towards the maintenance of 46—of whom 29 also needed assistance with fares—the remaining 2 people paying their own expenses. These arrangements formed, in the main, a recuperative holiday to offset winter illness and concerned men and women between 60 and 80 years of age.

Arrangements were also made through the Sheffield Regional Hospital Board for 30 people who had recently been discharged from hospital to recuperate at its home at Skegness, and, in other than exceptional circumstances, were limited to those under 70 years old.

The Welfare Services Committee did not itself undertake convalescent care but made a grant of £100 to Nottingham and Notts. Council of Social Service for use by the latter's Old Peoples' Welfare Committee towards recuperative holidays.

## Convalescence arranged 1956 — 1961

Name of Convalescent Home	1961	1960	1959	1958	1957	1956
<b>Regional Hospital Board Homes</b>						
<i>Sheffield Region:</i>						
Carey House, Skegness .. ..	17	37	54	47	40	48
Seely House, Skegness .. ..	12	30	37	32	19	24
Sheffield Works' Conv. Assn.:—						
Claremont House, Matlock ..	—	1	2	9	3	7
Stubben Edge Hall, Ashover ..	—	—	1	1	—	1
Langwith Lodge, Nether Langwith	—	2	—	—	—	—
<i>South East Metropolitan Region:</i>						
Thomas Lye C. H. Brighton ..	—	—	—	1	1	1
Metropolitan C. H., for Women, Bexhill-on-Sea .. ..	1	—	—	—	—	—
<b>TOTAL .. ..</b>	<b>30</b>	<b>70</b>	<b>94</b>	<b>90</b>	<b>63</b>	<b>81</b>
<b>Independent Homes</b>						
Hunstanton C. H. .. ..	2	8	2	4	5	9
West Hill C.H., Southport ..	—	—	—	1	2	4
Sheffield Works' Conv. Assn.:						
Claremont House, Matlock ..	4	6	6	6	5	4
Stubben Edge Hall, Ashover ..	2	1	2	2	1	1
Evelyn Devonshire Home, Buxton ..	4	4	1	1	1	—
George Woofinden Home, Mablethorpe	33	38	28	28	22	19
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	—	—	—
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	—	—	—
Hillside Nursing Home, Newark ..	1	—	—	—	—	—
Y.M.C.A., Skegness .. ..	1	—	—	—	—	—
<b>TOTAL .. ..</b>	<b>48</b>	<b>59</b>	<b>43</b>	<b>45</b>	<b>40</b>	<b>39</b>

An analysis of the number of convalescent people grouped under the type of illness from which they were recovering is shown for the years 1956-1961.



The types of illness requiring convalescent care showed little variation during the past 6 years, the main causes being respiratory infections, cardiac disease, digestive and nervous conditions, while general debility in older people resulting from malnutrition remained at the same high level.

A greater proportion of women than men—3 to 1—were recommended for a recuperative holiday.

Type of Illness	Numbers sent to Regional Hospital Board Homes						Numbers sent to Independent Homes					
	1961	1960	1959	1958	1957	1956	1961	1960	1959	1958	1957	1956
Respiratory ..	6	15	31	32	23	17	14	14	4	10	10	6
Cardiac ..	1	12	13	10	9	13	3	6	5	5	7	11
Digestive ..	6	8	15	5	—	14	1	—	1	2	1	—
Nervous ..	5	5	2	6	6	5	7	15	10	9	6	4
Urinary ..	—	3	3	5	3	1	—	1	—	1	—	1
Reproductive ..	2	7	9	6	2	3	1	—	2	—	—	—
Skin ..	—	—	—	—	—	4	—	—	—	—	—	—
Rheumatic ..	2	8	4	6	10	6	7	7	6	6	2	3
Injury ..	2	—	4	5	3	1	—	2	—	—	—	—
Debility ..	5	4	4	6	4	11	13	13	13	8	13	14
Endocrine ..	—	—	1	—	—	—	—	—	—	—	—	—
Diabetic ..	—	4	2	3	3	2	—	—	—	1	—	—
Others ..	1	4	6	6	—	4	2	1	2	3	1	—
TOTAL ..	30	70	94	90	63	81	48	59	43	45	40	39

## HEALTH EDUCATION

New leaflets and posters were considered by a staff committee consisting of representatives of the various sections of the Department and the health education assistant. The Medical Officer of Health presided at the meetings, of which 5 were held.

Much of the value of a leaflet for wide distribution lies in its power to attract the attention of those not basically interested in the subject portrayed. The message must be obvious. Some leaflets were rejected because of verbosity while others, which provided information on basic subjects, such as breast feeding, were accepted for selective distribution.

A number of three dimensional models were produced for use in "Clean Air" displays to emphasise the effects of atmospheric pollution on health. Posters on a variety of subjects were also designed and displayed in the Health Services Headquarters.

Although the power of mass media in the dissemination of health knowledge is immense, the application of this knowledge to individual problems can only be imparted by the personal approach. This aim was fostered by health visitors, who continued to give talks and to stimulate discussion in groups of mothers at infant welfare clinics, ante-natal clinics and relaxation classes. The Mothers Club which met on one afternoon each week at Rosebery House, Basford, provided another group with whom the health visitor concerned was able to discuss various health topics.

Talks were given by other members of staff to a number of organisations during the year.



January.	Clean Air—"Good Resolutions" —"Joining Forces" (Gas, Electricity and Smokeless Fuels)
February.	Coughs and Sneezes—"Cold Comfort"
March.	Clean Air—"Pollution by Smoke"
April.	Food Hygiene—"Dirty Food is Dangerous"
May.	Clean Air—"Make a Clean Sweep" (Smokeless Fuels)
June.	Daily Exercise Essential—In co-operation with the Ramblers Association Week
	Kill that Fly—"Guard Your Health this Summer"
July.	Anti-Litter—"Litter is Ugly and Dangerous to All"
August.	Clean Air—"Enjoy your Holiday"
September.	Coughs and Sneezes—"Winter Colds Ahead"
October.	Clean Air—"Score Now for Clean Air"
November.	Nutrition—"Balanced Diet"
December.	Coughs and Sneezes—"Spreading Infection" Christmas Greetings.

## IMMUNISATION

The proportion of pre-school children protected against poliomyelitis at 31st December, 1961, was 41·1% compared with 58·0% against smallpox and 73·5% against diphtheria. These forms of inoculation were given to infants in the order diphtheria first, smallpox second, and poliomyelitis last, and thus it may be that a lower acceptance was associated with diminishing attendances at infant clinics as children became older. It is difficult otherwise, in the light of the publicity in recent years, to understand the poor acceptance by parents for their children of poliomyelitis vaccination.

This appears to be borne out by the acceptance rate, 42·2%, for smallpox vaccination of infants during 1961. The rates for the preceding years were 65·3% in 1958, 64·8% in 1959 and 43·0% in 1960. The fall in 1960 was attributed to the mid-year change in the immunisation schedule when smallpox vaccination was phased to follow diphtheria immunisation instead of preceding it, but in 1961 with no such change, the former rate was not restored.

That various factors affect the acceptance of immunisation was shown by these figures for smallpox vaccination which up to 1948 was compulsory for infants, though parents were permitted to opt out on grounds of conscience. In 1938 only 32% of infants were vaccinated while in 1948 with compulsion just abolished the rate was even lower but by 1958 a percentage of 65 had been attained,



**Diphtheria Immunisation.** The number of infants under one year of age who were immunised was slightly higher than that in 1960. However, the rate, 73·9%, was virtually unchanged because there was an increase in the number of births. There was also some increase in acceptance for older children as a result of an outbreak of the disease—resulting in one death—in a neighbouring city.

It was decided that from September primary immunisation or reinforcing injections for entrants at infant schools would be offered only once annually instead of three times a year as had been the practice. It was felt that three visits each term by the immunisation teams to immunise groups which were often very small in number was an uneconomic use of medical staff and also caused undue disturbance of the school curricula.

#### ANALYSIS OF IMMUNISATIONS

##### Numbers carried out

	Primary Immunisations				Re-inforcing Injections	
	Pre-school children	School children	By Health Dept. Medical Staff	By General Practitioners	By Health Dept. Medical Staff	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
61 ..	5,022	1,078	4,580	1,520	3,135	304

**Progressive totals of children who had received a primary course of immunisation  
by 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
61 ..	19,118	73	40,724	84	59,842	80

**Whooping Cough Vaccination.** Children were mainly vaccinated with triple antigen (diphtheria-pertussis-tetanus) but combined antigen (diphtheria-pertussis) was used to complete courses of 3 injections which had commenced before 5th September, 1960.

**ANALYSIS OF VACCINATIONS**

	1961	1960	1959	1958	1957	1956
By General Practitioners	1,481	1,233	1,174	1,099	1,224	1,294
By Health Dept. Medical Staff .. ..	3,637	2,950	2,503	2,466	2,214	1,769
TOTAL .. ..	5,118	4,183	3,677	3,565	3,438	3,063

**Tetanus Immunisation.** As tetanus toxoid is one of the components of triple antigen the number of infants who were protected during 1961 reached a high level. Toxoid alone was also provided, if the parents so requested, for children for whom it had not previously been available. A total of 4,504 children had courses of 3 injections.



**Poliomyelitis Vaccination.** Children aged 5-11 years became eligible in April for fourth injections, and this was offered subsequently to children when they entered school. Vaccinations were commenced in July but were suspended in August and for the remainder of the year, owing to the national shortage of vaccine. This occurred at a time when the disease was receiving considerable public attention, and when the value of vaccination could have been pressed with effect. Owing to the inadequacy of supplies vaccination was largely restricted to expectant mothers and young children, as also to those due for second injections. The provision of vaccine for use by general practitioners was proportionately reduced.

The poor acceptance rate for pre-school children has already been recorded. Although acceptance by those aged 29-39 years was even lower, it was of less significance because the incidence of the disease is low at this age, and because of the progressive ageing of the younger more highly protected groups.

#### ANALYSIS OF VACCINATIONS

	Number of injections given during 1961					
	0-4 years	5-14 years	15-28 years	29-39 years	Others	Total
First ..	5,084	1,725	3,024	4,285	396	14,514
Second ..	4,530	1,527	2,752	4,313	451	13,573
Third ..	2,975	1,825	3,877	9,404	1,433	19,514
Fourth ..	10	1,595	3	—	—	1,608
TOTALS ..	12,599	6,672	9,656	18,002	2,280	49,209

## IMMUNITY INDEX

	Number of persons given 3 injections at 31.12.61				
	0—4 years	5—14 years	15—28 years	29—39 years	Total
No. of persons ...	10,682	38,028	39,404	12,305	100,419
Estimated population	26,000	48,400	59,959	50,059	184,418
% Fully immunised	41·1	78·6	65·7	24·6	54·5

**Smallpox Vaccination.** Reference has been made to the fact that the number of infants vaccinated during 1961 remained at the low level which obtained in 1960. Apart from the risk of the disease being brought into this country vaccination at an early age, when untoward reactions are less frequent, is very important in these days of increasing travel abroad.

## ANALYSIS OF VACCINATIONS

	Numbers of Persons Vaccinated					
	Under 1 year	1—4 years incl.	5—14 years incl.	15 years & over	Total	By Health Dept. Medical Staff
Primary Vaccination	2,463	486	142	178	3,269	946
Re-Vaccination	—	15	32	334	381	318

## 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
61 .. ..	2,463	42·2



**B.C.G. Vaccination.** The normal programme at senior schools continued during the school terms. The acceptance rate was little changed at 73·4% and the proportion of children found to have positive reactions to the Heaf test was 8·5%. Positive reactors to the test were routinely referred to Forest Dene Chest Centre for X-ray examination, and one girl who was discovered to have active tuberculosis was admitted to a chest hospital.

Post-vaccination Heaf testing of 14 and 15 year old children was discontinued from the beginning of the year. It was a control measure undertaken when B.C.G. vaccination was introduced for schoolchildren in 1954 and when there was limited experience in this country of its use on a wide scale. The number of children who have required re-vaccination has been insignificant.

#### ANALYSIS OF VACCINATIONS

	1961	1960	1959	1958	1957	1956
Schools visited . . .	51	46	57	47	53	54
No. of 13 year olds . .	5,306	6,410	5,660	4,369	5,605	4,641
„ acceptances . . .	3,897*	4,443	3,775	2,949	4,160	3,271
„ refusals . . .	1,297	1,853	1,732	1,340	1,327	1,235
„ others . . .	112	114	153	80	118	135
No. tested . . .	3,674	4,154	3,574	2,741	4,138	3,261
negative reactors						
vaccinated . . .	3,308	3,553	3,069	2,274	3,333	2,502
positive reactors . .	307†	524	418	399	700	698
Vaccination inspections . .	3,169	2,908	2,823	2,198	2,130	—

\* Average % of acceptances 1956-1961 was 70·3%.

† Average % of positive reactions 1956-1961 was 14·1%

**Yellow Fever Vaccination.** Routine sessions were held once weekly on Wednesday afternoons at 134 Mansfield Road, at which 365 persons were vaccinated.

## HOME NURSING SERVICE

The year was the tenth since the service was taken over by the Corporation. It was in fact, on the 20th August 1951 that the Minister of Health approved the transfer of the service from the Nottingham District Nursing Association to the Corporation. At a ceremony to mark the occasion, the President of the Association said, "We pass to the local health authority the torch to be kept permanently lit". The torch has indeed been refuelled many times, has shone brightly and will continue so.

It was convenient, therefore, to review the changes that have occurred.

There has been a greater demand for nursing coupled with a rising appreciation by hospitals, general practitioners and the general public of the type as also the scope of nursing at home. Patients who formerly were admitted to hospital have been nursed at home, skilfully, successfully, with a minimum disruption of the household and, moreover, more economically. Not only has the total work increased in that the number of patients nursed has grown from 4,806 in 1951 to 6,324 now, but the total number of visits has increased from 173,129 to 217,491.

However, the highest number of patients nursed in any one year was 7,685 in 1956 and the highest number of visits made was 246,292 in 1957. There is too some indication of change in the type of work and each year-end brings the comment that the time spent with individual cases tends to be longer. The increased use of various types of nursing equipment supports this—issues of items such as commodes and invalid chairs have risen from 242 in 1951 to 529, and such as bedpans, mackintosh sheets, and backrests from 1,776 in 1951 to 5,154. High priority is given to rehabilitation, to the instruction of relatives, and to the teaching of patients how to care for themselves. Not only



has the less essential been pruned but a higher proportion of those nursed have been acutely ill. The normal disabilities of old age alone are not a sufficient justification for supervision by a home nurse however welcome or desirable this may be. In fact the percentage of patients over 60 years of age has fallen from 64 in 1951 to 58, and was as low as 51 in 1956. This in spite of the progressive ageing of the population.

Such a growth in the service was only possible by adding to the nursing staff and thus from 45 nursing sisters in 1951, there was in 1961, a staff of 65, which included a small number of State Registered Nurses undergoing training for the Queen's Roll, and some part-time nurses who were concerned in particular with emergency visits in the evenings. The administrative staff now consists of a Superintendent and three assistant Superintendents, the third having been authorised in lieu of a tutor, when in 1956 the service was approved as a District Nurse Training Centre.

Now there seems to be room for consideration of the appointment of some trained attendants for the chronic sick, to give more opportunity for the Queen's nurses to carry out the nursing of the acutely ill and to institute rehabilitation for those likely to benefit by it.

It is evident that improved therapies, techniques, and equipment have made more possible. More nurses have cars or scooters, and telephones at home. Disposable equipment which is easier to carry and which saves time is increasingly used. However, more nurses are married and have young families, and in common with the general trend, single nurses live in flats or houses which they maintain themselves. Thus increased domestic duties aggravate the effect of the quicker tempo and heavier nursing, although these are offset by slightly shorter hours and longer holidays.

**The Year 1961.** There was no significant change from 1960 either in the type of the work or in the calls on the Service. A number of chronic sick patients for whom the attendance of a home nurse was requested ought to have been seen earlier, and no doubt others did not receive the care which was their due, but there is no yardstick with which to measure what has not been requested.

Because of the restricted time available the work of the evening nurses had to be supplemented by the day staff, and many family doctors undertook necessary visits themselves.

**Staff.** There was the expected number of resignations in the early part of the year; eleven were for domestic reasons. These nurses have been—at least temporarily—lost to nursing, but one went to work in the County. Replacement was initially slow but improved later and the strength at the year's end, including students, was 65, that is three less than the permitted maximum.

**Sick Leave.** The numbers of nurse-days lost was similar to that last year but owing to some long illnesses it was shared by 35 as opposed to 46 nurses in 1960.

**Maternity Leave.** This was granted to 4 nurses, the highest number in any one year.

**Compassionate Leave.** Considering the high proportion of married nurses, applications for compassionate leave were few, and totalled only 23 days.

**Transport.** Car allowances were paid to 4 administrators and 31 nurses including 7 male nurses; four cars were purchased through the assisted-purchase scheme.



The 1950 Ford Anglia owned by the Corporation and used by the late evening nurses was exchanged for a Morris Minivan which gave very satisfactory service.

Nine 'Lambrettas' were continuously in use and were so popular that there were further requests for similar machines.

Two new bicycles were purchased but this form of transport is now less popular under present-day conditions.

### **Houses and Flats.**

Houses — 1 furnished, 10 unfurnished.

Flats — 3 furnished, 2 unfurnished. Furnished accommodation at the Headquarters for 2 people.

**Telephones.** There were 50 Corporation and 5 private telephones at 31st December, 1961, but ten nurses were without telephones at home.

**Training.** In January, 16 candidates were successful in the examination for the Queen's Roll. It was the first year that this examination had to be approved by the Ministry of Health. Eleven successful students remained on the nursing staff. Of the other five, one returned to a religious community, one went to India to do missionary work, a third took up domiciliary work in Nigeria and the fourth went to work in London before returning to Jamaica.

The fifth took up administrative duties when, later in the year, she was appointed as third Assistant Superintendent—a post which had been unfilled for over two years.

In the 1961 course of training five students commenced in September, and four in October, a total of nine. No independent students joined and the low entry reflected the position throughout the country.

**Students from Hospital.** Twenty-one students from the City Hospital and 5 from the Children's Hospital paid home visits with Queen's nurses during the year.

**Refresher Courses.** The Superintendent and three nurses attended a course held at The University, Southampton, three nurses a course at Aberdare Hall, University of Cardiff, and an Assistant Superintendent and six nurses a course at Canterbury Hall, London.

**Conferences.** The Superintendent and an Assistant Superintendent attended a two day "Study day and conference" organised by the Queen's Institute in London. The Superintendent also attended the Standing Conference of Training Centre Superintendents at Brighton, and a conference on "Stroke Rehabilitation" in London.

The Superintendent was invited to assist with the examination for the Ministry of Health Certificate of District Nurse Training at Stoke-on-Trent.



## 77

Flack+Kurtz (98) claim no impact nursing education on licen.





## Comparative index of work over 7 years

	1961	1960	1959	1958	1957	1956	1955
Register 1st January ..	1,719	1,621	1,617	1,726	1,568	1,492	1,345
New patients ..	4,605	4,989	5,115	5,359	5,758	5,927	6,340
Total visited ..	6,324	6,610	6,732	7,085	7,326	7,419	7,685
Register 31st Dec.	1,707	1,719	1,621	1,617	1,726	1,568	1,492
Total nursing visits	217,491	224,594	222,898	234,274	246,292	240,133	229,882
„ supervisory visits ..	1,447	2,366	2,341	2,247	2,581	3,085	1,772
Case load—visits per month per nurse ..	279	276	278	300	317	317	314
<b>Type of Illness</b>	<b>1961</b>	<b>1960</b>	<b>1959</b>	<b>1958</b>	<b>1957</b>	<b>1956</b>	<b>1955</b>
Circulatory and cardiac ..	1,261	1,229	1,340	1,426	1,368	1,181	1,087
Respiratory ..	860	785	830	1,279	1,445	1,384	1,687
Digestive ..	801	1,041	1,117	991	976	1,042	1,071
Urinary ..	168	168	177	173	194	198	178
Reproductive ..	187	233	254	228	298	285	276
Nervous and cerebral ..	824	900	900	963	942	937	758
Carcinoma ..	506	537	473	426	447	397	417
Diabetic ..	272	275	283	309	297	278	243
Ulcer of leg ..	104	120	104	125	135	138	166
Tuberculosis ..	191	210	175	211	291	326	371
Burns, scalds, injury, etc. ..	529	734	718	453	256	486	626
Due to senility ..	344	241	133	350	456	461	603
Infectious fevers ..	13	7	20	9	19	14	34
Rheumatism, arthritis ..	264	130	208	142	202	292	168
TOTALS ..	6,324	6,610	6,732	7,085	7,326	7,419	7,685
<b>Age groups of Patients</b>	<b>1961</b>	<b>1960</b>	<b>1959</b>	<b>1958</b>	<b>1957</b>	<b>1956</b>	<b>1955</b>
5 years and under	1·2%	1·8%	1·7%	1·5%	2·5%	3·3%	2·2%
6 — 16 years ..	1·8%	2·2%	1·9%	1·9%	2·5%	2·9%	1·7%
17 — 45 „ ..	13·9%	15·5%	16·1%	14·3%	18·7%	18·6%	11·9%
46 — 60 „ ..	24·7%	26·1%	26·0%	27·1%	25·2%	24·2%	21·3%
Over 60 „ ..	58·4%	54·4%	54·3%	55·2%	54·1%	51·0%	62·9%

## LOAN OF NURSING EQUIPMENT

## 'Small' Items

Article	Issued by Home Nursing Service				
	1961	1960	1959	1958	1957
Air rings .. ..	279	271	314	352	464
Bed pans .. ..	896	851	895	847	955
Back rests .. ..	509	450	462	452	443
Barrier outfits ..	659	596	513	470	797
Cradles .. ..	96	82	74	87	68
Crutches .. ..	23	20	21	22	22
Draw sheets .. ..	196	225	234	210	222
Feeding cups .. ..	64	42	43	41	42
Incontinent gowns ..	12	32	30	13	26
Infectious outfits ..	7	9	23	18	28
Mackintosh sheets ..	809	798	849	849	955
Midwifery outfits ..	16	36	29	16	36
Sorbo cushions .. ..	492	437	479	360	328
Syringes 5cc. T.B. ..	649	571	478	427	789
Syringes 2cc. .. ..	8	5	2	15	9
Syringes others .. ..	14	28	13	6	13
Urinals .. ..	425	404	447	447	457
TOTALS .. ..	5,154	4,857	4,906	4,632	5,654

## 'Large' Items

Article	Issued from Health Service Store				
	1961	1960	1959	1958	1957
Air beds .. ..	—	2	5	1	1
Bed tables .. ..	2	1	1	1	6
Bedsteads .. ..	57	42	51	51	68
Commodes .. ..	222	155	106	110	121
Elbow crutches .. ..	—	1	—	1	2
Invalid chairs .. ..	178	140	98	99	118
Mattresses .. ..	64	59	61	67	90
Spinal carriages .. ..	—	1	—	2	1
Walking tripods .. ..	6	4	1	3	—
TOTALS .. ..	529	405	323	335	407



## HOME HELP SERVICE

On reviewing the work preparatory to writing this, the 17th Annual Report of the Service, three basic factors emerged which affected 85% of the help provided:—

- (a) The increased expectation of life.
- (b) The insufficient number of hospital beds for elderly bedfast persons.
- (c) The number of elderly persons in need of full-time care but without relatives.

In all these cases the daily minimum for help was three hours though the increased number of applications compelled a reduction of even these hours. When it was considered that personal washing—especially where there was incontinence—the making of fires, the preparation of food, some shopping, cleaning, etc. needed to be done, it was seen that such a short period was inadequate for both patient and helper.

There were some 500 applications which did not result in help being provided and, in about 400 instances, enquiry resulted in relatives or friends being eventually persuaded to assist. In cases where the applicants were in a position to pay full cost the nature of the work of the service seemed to be mistaken and they felt that they were entitled to priority.

The number of cases carried forward increased by 87 to 2,016, a number which results from the high percentage of bedfast persons living alone and being in need of full-time care. In some of the cases continuous help had been given for up to fourteen years and clearly would have to continue during the persons' life-time. The following was a typical example where help has been supplied since September, 1952.

An old lady over 80 years of age, with complete paralysis of the left side, and with her right leg amputated to thigh was sent home as not in need of further hospital care. As she was quite helpless full time daily help was

supplied in the first instance; this has now been reduced to three hours daily due to the increasing demand upon the Service. Her only relative was a mentally retarded son in his middle 40's, who does everything possible for his mother's comfort and well-being during evenings and week ends. Unfortunately he works long hours and is away from early morning until 5 o'clock in the evening.

In such cases a number of visits was paid late in the day; some helpers made five or six calls between 3.00 and 5.30 p.m.

In the short space of half an hour she attended to the fire, refilled hot water bottles and prepared tea, tended to personal needs and left the person as comfortable as possible for the night, finally locking the doors which might not be opened until the helper arrived next morning.

Reference was made previously to the aged requiring 85% of the total help provided by the Service. The remaining 15% consisted of short-term help for acute illness, social and maternity cases.

**Social Cases.** Into this class fell mainly those households where a family was temporarily deprived of the mother's care and as requests for help usually came from families occupying small houses where bedroom space was limited, it meant that daily help was the only solution.

In any case, it was frequently found that the father was anxious that the family should not be dispersed and certainly that the children should not be placed under care. This was desirable from the point of view of the authority in two respects; the first that the family should remain as a unit and secondly that the financial burden of official care was minimised.

Relatively small when viewed against the whole but nevertheless by their nature, a considerable problem, was that of old people who allowed their houses to become dirty—or as the Organiser of the Home Help Service described it, “indescribably filthy and often verminous”.



There was a greater number than in the previous year and they came to notice through the National Assistance Board and several departments of the Corporation.

In every instance the deterioration in both personal and home standards was of long standing and some were described as "the worst ever tackled in the history of the Service".

Two male helpers were required to spend weeks clearing out the verminous bedding and filth from several of the houses, which were only entered after repeated sprayings for infestation. In one house, the living room and bedroom floors were caked with dog excreta which had to be removed by scraping.

Strangely enough, most of the persons concerned, although elderly, were in good health and strongly resented the "interference of officials telling them how they should live". However, when the helper had been tactfully introduced there was not much difficulty in getting the co-operation and interest of the old person.

The result in every case was rewarding and ultimately help for one or two half days weekly was sufficient to maintain a satisfactory standard of cleanliness.

It was in such cases as these that the male helpers were a great asset.

The housing officers requested help for several old people shortly after their transfer from a clearance area to either a flat or bungalow, for it seemed that some who were transferred had neither the desire nor the ability to maintain a reasonable standard. In these cases it seems that some amount of continued help will be necessary to prevent a return to the old habits of the slums.

**Maternity Cases.** There was a small increase in the number of applications. Help was limited to two weeks unless further help was requested by the doctor. In each case a thorough enquiry was made initially as to the possibility of relatives or friends assisting. A revealing point was that in a number of cases those concerned had only recently come to reside in the City and as neither relatives nor friends were available, Home Help was the only alternative.

**Tuberculosis Cases.** It was gratifying to note that requests for help further decreased.

**Mental Illness.** There was a further increase in the number of applications, which, as last year, were mainly for women—usually the mother of a young family. The amount of help required was most difficult to assess, particularly when the person concerned shewed suicidal tendencies. It was noticed that it was necessary to increase the help in several instances following a period of treatment. The persons concerned appeared to have little or no interest in either house or family, but a real need for someone to whom they could unburden their minds.

There was no doubt that a sensible home helper did a great deal of good by introducing new interests, thus preventing the moods of depression and self-pity which many seemed incapable of shaking off.

**Waiting List.** About 200 cases remained on the list throughout the year. Though the amount provided by the Finance Committee for wages for the year remained the same, an increase in wage rates had a serious effect on the total number of hours available. An immediate withdrawal of help wherever practicable, and a further reduction of hours on every case, was the only way in which help could be allocated to urgent applications.



**Administration and Staff.** Staff resignations hitherto almost unknown in this Service, created considerable difficulty and overwork for the Organiser throughout the first eight months of the year. The vacancy created by the resignation of the Deputy Organiser in October, 1960, was not filled until April, consequently much of the Organiser's time was occupied in dealing with the work normally undertaken by her Deputy.

The resignations of three district organisers resulted in the promotion of three senior caseworkers to fill these vacancies, followed by the promotion of three junior caseworkers to seniors. Three junior caseworkers were then appointed to fill these vacancies. The work in the three districts so affected naturally slowed down, particularly visiting, as the newly appointed district organisers had the further responsibility of training the new caseworkers.

Two clerks were appointed to fill the vacancies created by two resignations in the general office. All new members of the staff appear to be interested in this unusual type of work, particularly the caseworkers. To quote one caseworker—"The days are not long enough. There is so much to do; I have never known the time pass so quickly".

The further development of new council estates, particularly in the Eastern District, created a noticeable increase in visits to cases of elderly people rehoused from demolition areas. The value of time saved by the use of a car was even more apparent in this particular district, as many of the houses and blocks of old peoples' flats are approximately ten minutes walking time from the nearest bus stop.

The long anticipated mechanisation of the wages section in the City Treasurer's Department, and reduction of time in the preparation of the wages sheets etc., made it no longer necessary to fill the vacancies caused by the resignations of one full time and one part time clerk.

**Finance.** The income for the year showed an increase of approximately £200.

An average of £200 was paid in at the Mansfield Road Central Office each Friday, the greater part of which was brought in by home helpers when collecting wages and instructions for the following week. Whilst this arrangement was highly satisfactory to the wages and accounts section, it did put a strain on the general office staff, who issued over 150 receipts on Fridays between 12 noon and 6.0 p.m.

There was a small increase in the number of full-cost cases, chiefly from persons who preferred to pay for a small amount of help rather than disclose their financial resources.

Amounts recovered from persons failing to disclose full financial details, or change in circumstances, totalled £559. 16s. 7d.

- (1) Elderly spinster—lived alone since death of parents some years ago—senile and very vague concerning financial affairs—in receipt of National Assistance and Old Age Pension—during visit of National Assistance Officer, mentioned she had a box with papers in but could not remember when last opened—key lost. Box opened—contents included sum of money in £1 notes and savings certificates issued 1916/17, total value over £1,000. National Assistance Board claimed £400. Neighbour agreed to accept responsibility for banking the remainder.

Amount collected £129. 12s. 7d.



- (2) Blind Old Age Pensioner and wife in receipt of National Assistance. One bankbook in name of husband produced by wife at initial and subsequent visits. Wife out on last visit—husband produced bankbook from drawer. Caseworker realised serial number did not agree with the one already shewn on assessment. Wife returned during discussion—strongly protested against this book being inspected, stated it was her personal property—money left by brother—informed all savings and income must be disclosed. Total savings exceeded £600.

Amount collected £82. 19s. 5d.

- (3) Elderly bed-fast Old Age Pensioner and invalid daughter in receipt of Old Age Pension and National Assistance, produced bankbook in father's name at initial interview. Daughter in receipt of National Assistance which did not meet her needs. Advised to make application for increased allowance, but refused to do so. When asked her reason, stated her mother had left her a little money in the bank. Permission given for bank account to be disclosed, savings certificates and cash over £800.

Amount collected £263. 13s. 5d.

- (4) From 5 other cases a total of £83. 11s. 2d. was collected.

No. of Helpers at 31st December							
	1961	1960	1959	1958	1957	1956	1955
Full-time .. ..	146	150	136	136	182	132	224
Part-time .. ..	304	308	325	327	333	295	226
Casual .. ..	20	2	12	8	6	15	10
TOTAL .. ..	470	460	473	471	521	442	460
Hours worked							
Weekly average ..	11,000	11,200	12,226	12,057	10,933	11,333	11,655
Result of Applications							
Help supplied ..	1,292	1,254	1,405	1,305	1,189	1,385	1,309
Awaiting help ..	46	39	43	42	24	69	132
Advance maternity bookings ..	55	49	48	39	42	42	50
Not qualifying ..	32	33	36	22	19	25	137
Cancelled or arranged own help ..	471	494	487	512	537	662	438
TOTAL .. ..	1,896	1,869	2,019	1,920	1,811	2,183	2,066

## Analysis of Cases Assisted and Payments made

	Full cost	Part cost	Nil	Total
Old Age Pensioners:				
Chronic illness .. ..	286	208	2,385	2,879
Acute illness .. ..	5	—	4	9
Others:				
Chronic illness .. ..	16	8	40	64
Blind .. ..	1	—	27	28
Acute illness .. ..	77	13	36	126
Maternity .. ..	111	46	15	172
Tuberculosis .. ..	2	1	18	21
Social cases .. ..	2	4	3	9
<b>TOTAL .. ..</b>	<b>500</b>	<b>280</b>	<b>2,528</b>	<b>3,308*</b>

\* Includes 2,016 cases carried forward to 1961.

## 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
60/1 ..	133,796	8,199
<b>*61/2 ..</b>	<b>143,029</b>	<b>8,400</b>

\* Approximate actual



## MENTAL HEALTH SERVICE

**Mental Illness.** The first year under the new legislation was full of interest. Work proceeded smoothly after the "trial" period during the last two months of 1960 and the tendencies then noted were confirmed. The new procedures for compulsory admission to hospital took more time than was the case when immediate action could be taken by the duly authorised officer. The necessity for obtaining at least one medical recommendation meant delay between the case being reported and admission taking place. In consequence, the patient became more disturbed, resulting in difficult removals. Considerable difficulty was experienced with cases occurring at night or at weekends—particularly those who came through the police and who had no regular medical attendant.

After a full year's experience of the operation of the Act, it was felt that the new procedures for dealing with urgent cases were not an improvement on the old. With less urgent cases however, applications for admission under Sections 25 and 26 worked smoothly, though the necessity for obtaining two medical recommendations, before the application could be completed, led to mental welfare officers being engaged on admissions for a greater time than formerly. Consequently, time spent on social work—which should be their primary activity—was reduced.

The number of cases referred with a view to hospital admission showed a decrease of 55 from the figure for the previous year, and there were 38 fewer admitted to hospital. As there was no similar reduction in the number of admissions to the mental

hospital, it was deduced that cases formerly referred to the service were being admitted directly, thus taking full advantage of the informal admission procedures.

Some general practitioners did not welcome the changes. Many expressed regret at the passing of the system whereby they could refer a patient and nothing further be required until the patient was discharged from hospital following treatment. Some also expressed distaste at being intimately concerned in the compulsory curtailment of the liberty of their patient.

**Community Care.** The quality of service developed from 1948 onwards was affected by the Mental Health Act, since the additional time expended on admissions curtailed that available for general social work. Thus it was difficult to maintain the standard of care already practised. Nevertheless, social problems which frequently had contributed to the breakdown and still remained a bar to recovery were tackled, often with gratifying results.

The case load had to be reduced because of staff shortage for part of the year. Though the seven mental welfare officers were available throughout the year, two of the four Mapperley Hospital social workers resigned, one for another appointment and the other to enter a university for further training. Suitable replacements were difficult to find, but one new worker commenced in the early Autumn; the other post was still vacant at the year end. Some cases had therefore to be terminated earlier than desirable, while others had less detailed attention than would have been wished. At the end of the year there were 778 cases compared with 949 at the end of 1960.

Problems continued to fall under three main headings; employment, accommodation and personal relationships. Much time was well spent seeking suitable work and most of the females



willing and able to undertake employment were placed while there was increased success in finding work for men.

The following details of cases illustrate the problems.

- (1) A spinster in late middle age had always lived with her parents until their deaths 15 and 10 years ago. Up till then she had been in employment as a secretary and was a smart well groomed woman. She continued to live alone in the family house but began to withdraw from society and to deteriorate mentally and socially. She became filthy, the house was uncared for and the garden completely overgrown. She lived like a recluse, but occasionally came out of her house shouting abuse at the neighbours and was a serious public nuisance. Finally she was compulsorily admitted to the mental hospital where she was treated for one month.

She was discharged, slightly improved, with prospects of further improvement if she could be persuaded to continue to take the tablets prescribed. At first the social worker met with great hostility. Practical help given in disposing of the accumulated rubbish and arranging for minor repairs to be done started to break through the resistance. She was induced to take her tablets more regularly, became relaxed and friendly and would discuss amicably the work necessary to get her house in good order again. She herself was incapable of dealing with her garden which had become a wilderness.

At that time another mental welfare officer was having difficulty in finding suitable occupation for a deteriorated schizophrenic male and it was suggested that this man might tackle the garden. He took to it with enthusiasm and the woman patient took an immediate interest in him and provided tea on the days he went to work. Each appeared to do the other a considerable amount of good.

In time the house and the patient became completely changed from when first seen and there was reasonable hope that the standard could be maintained, although it was evident that the continued support of the mental welfare officer was necessary for a lengthy period.

- (2) A slightly subnormal young man who had passed through an ordinary school prior to the family moving to Nottingham, was referred by the National Assistance Board at the age of 18½ years because of his bad work record. He had had numerous jobs, but was unable to keep one for any length of time. He was somewhat effeminate, garrulous, but scrupulously clean and capable at housework, being able to do the weekly wash, ironing, etc. His mother, an invalid with heart trouble, leaned heavily on him as a housekeeper, and did not really want him to take outside employment, but continually nagged, leading at times to violent quarrels. He began to stay out late at nights, and homosexual activities were suspected. Then the mother eventually had to go into hospital and the youth was persuaded to go informally to a hospital for subnormals for a period. Reports were far from encouraging as it was felt that he never would hold down regular employment.



On discharge home, trouble with mother was intensified; quarrels were frequent. Employment, which he held for 3 months, was found for him in a cafe but as a result of quarrels with his mother, he stayed away from work and lost the job. The mental welfare officer finally decided that there would be no satisfactory conclusion to the case whilst this youth lived with his mother.

A fresh job was found for him as a kitchen porter at a restaurant and, with the mother's consent, he went to live in lodgings. These were specially selected with a lodging house-keeper who had frequently taken subnormal lodgers and had some understanding of them. The youth confided in his landlady and acted on her advice. He continued to work successfully, paid occasional visits home and the mental welfare officer continued to act as liaison officer between the youth, his lodgings and his home.

This was another case where the support of the mental welfare officer was necessary over a long period; it will remain so until the youth eventually matures.

- (3) A woman aged 50 years had had a schizophrenic breakdown many years previously and after treatment in the mental hospital, was eventually discharged in a stabilized but very deteriorated condition. She lived with her parents who owned their small terrace house. The mother died just as the property was about to be compulsorily acquired for demolition.

There was no close relative, and the woman was left in the world, totally unequipped to live alone and with her house shortly to be taken from her. For many years, following her discharge from hospital, the mother had treated her like an infant and made no attempt to train her in any way. The senior mental welfare officer took the case in hand and for a period visited daily.

Alternative accommodation was provided by the Corporation in the form of a flat, and the patient was guided in disposing of all but the best pieces of furniture from her old home. Out of the little capital she had, new floor coverings were bought, various mental welfare officers volunteering to lay lino and do other preparatory tasks. On moving in, the senior social worker continued to pay very frequent visits, teaching the patient to budget her housekeeping money, how to shop, what food to buy and how to cook it. She was slowly rehabilitated and was managing successfully when serious illness intervened and she died in the arms of the senior mental welfare officer who was paying a visit at the time—a sad ending to a fine piece of social work.

- (4) A youth aged 16 years, the illegitimate child of a Nottingham woman and a half-caste American serviceman, was referred by the family doctor to the psychiatric out patient clinic where he was diagnosed as suffering from juvenile paresis due to congenital syphilis. He showed signs of



intellectual decline as well as conduct disorder, manifested by irritability and short temper on the one hand and stealing from his home on the other. He was accepted for community care by the Mental Health Service and arrangements were made for attendance at the City Occupation Centre.

He soon showed himself to be much brighter than most of the trainees there, but suffered from difficulties in concentration and an uncontrollable desire to wander away from a job after short spells. After some training, however, he showed signs of being able to do a small piece of work and to be happy in the company of adults. He was found part time employment helping the office caretaker with coal carrying and other simple tasks and he spent the rest of the day at the City Occupation Centre where he continued to make progress. He did this for several months and was punctual, obedient and always bright and cheerful.

His mother, who previously had considerable trouble with him, reported that she was amazed at the change that had been brought about. It is possible that in the not distant future, this youth may be placed in employment and eventually become self-supporting.

**Subnormality. Admission to Hospital.** The continuing shortage of accommodation in hospitals for the subnormal limited experience of the effect of the new admission procedures on this side of the work. It became apparent, however, that delinquents who probably would not have been regarded as defective within the definitions of the Mental Deficiency Act, could be informally admitted to hospital and thereby benefit from treatment.

The shortage of hospital accommodation for severely subnormal children continued, and despite widespread efforts, several difficult cases had to remain in their own homes, thus causing strain on the entire family.

Full use was made of short term care which was reasonably available and 97 cases were admitted. This provision was mostly used for the temporary relief of families whose life was disrupted by the presence of a difficult child in need of

permanent hospital care. Cases on the waiting list for permanent accommodation were given several spells in different hospitals during the course of the year. This was an expensive expedient and made inroads into the time of mental welfare officers who conveyed the cases to and from the hospitals. The nearest hospital for subnormals is some 15 miles from the City and the furthest in which vacancies were regularly obtained is situated almost 40 miles away. In such circumstances, admission to hospital meant a half day for two people with the same procedure to be repeated for the return three to four weeks later.

**Community Care.** On 1st January, community care was being provided for a total of 869 mentally subnormal persons increasing to 913 by the end of the year.

This work involved family casework of an exacting type. Where the presence of a severely subnormal child affected the entire family—often imposing almost intolerable strains—support by the mental welfare officer was often essential to keep the family together. With the severely subnormal adult, the situation was often complicated by the ageing of the parents, with the result that the mental welfare officer was acting as a prop to all the members of the family.

Regular home visiting continued to be the basis of this work, enabling home conditions to be closely observed and advice given to parents when necessary. With the adults, attempts were made to find suitable work for all those capable of undertaking any form of gainful employment, and close liaison was maintained with the Ministry of Labour and the Youth Employment Service.



**City Occupation Centre.** There were 192 names on the register when the year opened. The premises were originally assessed as suitable to provide 150 places and with the daily average attendance having risen to 164 overcrowding reached a point where further places could not be created and new admissions had to be limited to the filling of vacancies casually arising as a result of families departing from the City, or similar cause.

Training continued along lines well established and special attention was given to personal hygiene. Those who were not receiving adequate care at home were bathed regularly.

Outgrown children's clothing acquired by members of the teaching staff and by the mental welfare officers from a variety of sources, was very acceptable in enabling some of the trainees to be maintained on a level with the children better cared for.

During the year, the old close-board fence which had surrounded the Centre since its original erection as an isolation hospital was gradually replaced by chain link fencing, supported on concrete posts. The fencing and the posts were all made by the adult trainees while the whole work of erection was carried out by teams of severely subnormal youths under the direction of members of the teaching staff.

By the year end, the waiting list had risen to 91 which there was no hope of reducing until the projected extensions are completed.

## NUMBER OF PERSONS REPORTED AS MENTALLY ILL

	Under 65 years		Over 65 years		Totals
	M.	F.	M.	F.	
Reported by:—					
Police .. .. .	58	59	7	24	148
Hospitals .. .. .	54	61	16	23	154
Medical practitioners .. .. .	93	112	76	159	440
Relatives .. .. .	30	53	14	36	133
Others .. .. .	45	64	19	85	213
TOTAL .. .. .	280	349	132	327	1,088
Disposal:—					
Admitted under Sect. 25 ..	15	28	3	13	59
"    "    "    26 ..	1	—	—	—	1
"    "    "    29 ..	63	75	11	15	164
"    as informal patient ..	96	92	61	109	358
Other admissions .. .. .	2	2	—	—	4
TOTAL ADMITTED TO HOSPITAL	177	197	75	137	586
For community care .. .. .	11	18	18	106	153
Not accepted .. .. .	48	51	11	35	145
Referred to:—					
Welfare Services .. .. .	—	2	2	12	16
Family doctor .. .. .	22	24	15	25	86
O/P Clinic .. .. .	21	49	6	4	80
Day Hospital .. .. .	1	8	5	8	22
TOTAL .. .. .	280	349	132	327	1,088



## SUBNORMAL AND SEVERELY SUBNORMAL PERSONS

New Cases Reported	Males	Females	Totals
Reported by:—			
Local Education Authority ..	14	7	21
General Practitioners .. ..	—	2	2
Police and Courts .. ..	—	1	1
Other Sources .. ..	23	19	42
	37	29	66
Disposal of cases:—			
Admitted to hospital .. ..	2	4	6
Attending Training Centre ..	5	3	8
Waiting list for Training Centre ..	7	4	11
Community Care .. ..	23	18	41
	37	29	66

## CITY OCCUPATION CENTRE

## Analysis of trainees 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 . .	—	3	2	—	—	4	9
7 to 11 „ . .	1	1	2	2	—	4	10
12 to 15 „ . .	3	3	11	6	—	4	27
16 to 20 „ . .	2	3	8	4	—	—	17
21 to 39 „ . .	—	3	7	1	—	1	12
40 years and over	—	1	3	—	—	—	4
	6	14	33	13	—	13	79
MALES:							
Under 7 years . .	—	—	3	1	—	12	16
7 to 11 „ . .	1	8	5	1	1	4	20
12 to 15 „ . .	—	8	3	6	—	4	21
16 to 20 „ . .	2	7	5	6	2	3	25
21 to 39 „ . .	5	10	4	3	—	1	23
40 years and over	—	2	2	—	—	—	4
	8	35	22	17	3	24	109

## 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 fourteenth year of the Nottingham City Ambulance Service, and also his ready co-operation.

**Salaried Staff.** The year has been notable for the number of changes in designation which have taken place. The titles of Ambulance Officer and Deputy Ambulance Officer were discontinued and Chief Ambulance Officer and Deputy Chief Ambulance Officer substituted, in order that Civil Defence designations and peacetime designations should be the same.

The post of Radio Officer was abolished, and its holder became a Staff Officer, which is the description now applied to the former control room officers and control room assistant, as being more descriptive of their duties.

A new post, that of Station Officer, was instituted in April, and was filled by the promotion of the former senior leading driver, which post was discontinued.

The establishment of salaried staff consists now, therefore, of a Chief Ambulance Officer, a Deputy Chief Ambulance Officer, seven male staff officers, one female staff officer, a station officer, two shorthand-typists, and a clerk.

The post of Deputy Chief Ambulance Officer fell vacant in October, due to the resignation of Mr. S. Ogden in order to take up the post of Deputy County Ambulance Officer for Worcestershire. The position was filled in November by the promotion of Mr. F. Wilkinson from Staff Officer.



**Employees.** As forecast in my report for 1960, four additional driver/attendants were engaged in January to enable a 42 hour week rota to be worked, thus increasing the number of driver/attendants to 76. The promotion of the senior leading driver to the post of station officer in April, and the discontinuance of the senior leading driver's post, reduced the number of employees to 75.

In July approval was given by the Rate Estimates Subcommittee for the engagement of one additional driver/attendant, instead of the three for which application was made by the Health Committee. This addition again raised the total of employees to 76 when the additional driver/attendant commenced work in August.

As there has been only this very small increase in employees, in spite of the very large increase in work as shown in appendix C, every vehicle must be kept manned during the busy period of the day, and consequently an unsympathetic attitude has to be shown towards any requests by employees for absence for any purpose other than annual leave and sickness.

An application has been before the Rate Estimates Subcommittee throughout the year for two additional driver/attendants, and this application has been frequently urged by the Health Committee, but at the close of the year it remains deferred.

The position in respect of employees at the close of 1961 is, therefore, seven leading drivers, fifty-eight male driver/attendants, and eleven female driver/attendants.

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 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 9.34 a.m.	9.34 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	14	18	30	43	44	46	44

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	46	44	40	28	16	14	12	10

**Vehicle Fleet.** At the 31st December 1961, the ages of the ambulances and of the sitting-case vehicles in use 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
Amb.	1	5	—	—	—	—	3	1	—	—	4
S.C.	3	—	—	—	1	6	2	2	—	1	1

Amb. = Number of ambulances in each group.

S.C. = „ „ sitting-case vehicles in each group.



Three replacement ambulances were ordered during the year. These are of the latest construction in glass-fibre and it is hoped that they will be maintained with less expenditure of time and money than has been necessary on the vehicles of traditional construction. In addition, these vehicles are pleasantly light and airy, and are very comfortable for both the patients and crew. They are also more economical in petrol consumption than vehicles purchased previously.

The two additional dual-purpose vehicles which I mentioned in my last report as being reconsidered by the Rate Estimates Sub-Committee are still under consideration. There has, therefore, been no increase in the vehicle fleet since 1956, in spite of the phenomenal increase in patients and mileage, as shown in appendix C.

To alleviate the situation partially, the Health Committee authorised in February the temporary retention of three vehicles for which replacements had been delivered, thus raising the fleet strength to 32. This temporary increase was to remain in effect until the question of permanent extra vehicles should be settled: the matter has not yet been decided, and two of the retained vehicles have had to be scrapped. Other vehicles which have been replaced during the year have not been fit for temporary retention, so the number of vehicles in service at the close of the year is 30, although the permanent fleet is 29 vehicles.

It is interesting to observe the proportion of vehicles to patients over the years.

**Ratios of Employees and Vehicles to Patients.** The following table indicates the ratios of both employees and vehicles to patients carried during the years shown:—

Year		Patients	Driver Attendants	Ratio	Vehicles	Ratio
1949	..	54,297	60	1 : 904	22	1 : 2,468
50	..	62,858	61	1 : 1,030	22	1 : 2,857
51	..	68,896	61	1 : 1,129	26	1 : 2,649
52	..	71,737	55	1 : 1,304	25	1 : 2,869
53	..	75,104	58	1 : 1,294	23	1 : 3,265
54*	..	87,355	60	1 : 1,455	24	1 : 3,639
55*	..	93,405	63	1 : 1,482	27	1 : 3,459
56*	..	95,551	70	1 : 1,365	29	1 : 3,294
57	..	92,798	70	1 : 1,325	29	1 : 3,199
58	..	100,079	70	1 : 1,429	29	1 : 3,451
59	..	111,011	70	1 : 1,585	29	1 : 3,827
60	..	125,597	72	1 : 1,744	29	1 : 4,330
61	..	147,843	76†	1 : 1,945	30	1 : 4,928

\* The Annual Reports for these years commented upon the need for additional driver/attendants and vehicles, as the Service was stretched to the limit.

† 42 hour week introduced.

### **Ambulance Stations.** The three stations are:—

CENTRAL AMBULANCE STATION, in Beechdale Road, which houses the Chief Ambulance Officer and Deputy Chief Ambulance Officer, the Control, and 22 vehicles; one ambulance and one dual-purpose vehicle is manned throughout the twenty-four hours, the other vehicles being manned for varying periods between 8.00 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.



**Training of Employees.** The City Ambulance Service Division of the St. John Ambulance Brigade continues, and has attracted a few more members. The Division meets every Wednesday at 5.30 p.m., and the instruction is usually given by the Chief Ambulance Officer. The interest shown by the members is very rewarding, and most of the members are now studying for the preliminary examination of the Institute of Certified Ambulance Personnel.

Mr. J. B. Cochrane, M.B., Ch.B., M.R.C.O.G., consultant gynaecologist at the City Hospital, gave two well-attended lectures to the staff and employees during November.

**Civil Defence.** The Ambulance and First Aid Section has been increased again by a large intake of recruits enrolled in the autumn recruiting campaign. The volunteer officers have proved to be very useful, but the loss of the Deputy Chief Ambulance Officer (Mr. S. Ogden) as an instructor has increased the burden on the other instructors, which burden will not be relieved until the newly-appointed Deputy Chief Ambulance Officer can attend the Home Office Civil Defence School.

Driving instruction continues to be given by six of the City Ambulance Service personnel, under the supervision of the Staff Officer, Civil Defence.

During the year 9 pupils (of whom 8 were members of the Ambulance and First Aid Section and one was a member of the Headquarters Section) passed the Ministry of Transport driving test.

**Sub-Control.** The Sub-Control at the General Hospital Outpatient Department has been very useful in assisting in the provision of the most effective service.

**Publicity.** Various items of publicity have appeared in the local and national press. Most of these items have dealt with the specific or general difficulties in which the ambulance service has found itself, and all the publicity has been favourable.

**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 633 on 8th November, compared with 568 on 12th December 1960, the previous record day.

The record day's mileage of 1,980 on 31st March 1960, was exceeded on 11th January, when the vehicles ran 2,227 miles.

During 1961 a total of 147,843 patients was conveyed over a distance of 510,018 miles, as tabulated in appendix A: the increase in the number of patients compared with 1960 was 22,246, and the increase in mileage was 39,878 miles. The increase in patients is the largest yet experienced.

The demand on the ambulance service has again been increased in 1961: in my report for 1960 I drew attention to the fact that the number of patients carried in a month exceeded 11,000 on three occasions, thus creating a new record. In 1961, two months produced 13,000 patients each; seven months had 12,000 patients each; two months had 11,000 patients each; and in one month only 10,000 patients were carried.

There have been 29 vehicles in the permanent fleet since 1956 and the following figures show the growth in demand which has taken place during that time.



Year	Patients	Increase since 1956	Percentage increase since 1956	Miles	Increase since 1956	Percentage increase since 1956
1956	95,551	—	—	397,636	—	—
57	92,798	— 2,753	— 2·9	369,790	— 27,846	— 7·0
58	100,079	4,528	+ 4·7	396,834	— 802	— 0·2
59	111,011	15,460	+ 16·2	453,686	56,050	+ 14·1
60	125,597	30,046	+ 31·4	470,140	72,504	+ 18·2
61	147,843	52,292	+ 54·7	510,018	112,382	+ 28·2

The growth has been due to the increase in outpatient transport, as the following separate figures show:—

Year	Out-patients	Increase since 1956	Percentage increase since 1956	Out-patient miles	Increase since 1956	Percentage increase since 1956
1956	58,390	—	—	193,290	—	—
57	66,073	7,683	+ 13·2	211,969	18,679	+ 9·7
58	73,086	14,696	+ 25·2	228,277	34,987	+ 18·1
59	84,567	26,177	+ 44·8	272,041	78,751	+ 40·7
60	98,588	40,198	+ 68·8	287,728	94,438	+ 48·9
61	120,420	62,030	+ 106·2	323,668	130,378	+ 67·4

**Mental Patients.** The daily total of day patients attending Mapperley Hospital, which was 60 at the close of 1960, is now 160, in spite of efforts made during the year to secure a reduction in that number.

It is clear that this constitutes a considerable burden on the ambulance service.

**Surveys.** In November 1960, with the assistance of the City Treasurer, a survey of the work of the ambulance service was carried out, and the results obtained were the basis of the recommendation for an additional two dual-purpose vehicles and for two more driver/attendants.

In February 1961, the Ministry of Health surveyed the work of the service in connection with the transport of outpatients. A final report has not yet been submitted, but an interim report has suggested certain measures, not all of which have proved possible to institute.

A recent survey by an Organisation and Methods team on the Manchester Ambulance Service has revealed that the problems there are much the same as in Nottingham. It is interesting that many of the solutions put forward for Manchester are the same as those which have been proposed for Nottingham.

**Remuneration.** In December 1960, and March 1961, the male driver/attendants were awarded by national agreement substantial increases in wage rates, amounting in total of 23s. 8d. per week. The March 1961 agreement gave them also greatly enhanced rates for Saturday afternoon and Sunday work. This raised the earnings of the employees to a level which is higher than that received by the staff officers, who have to exercise supervision over the employees.

As a result of this, a recommendation for the regrading of the staff officers was made in the annual review of salaries.

**Productivity.** In the annual reports for 1959 and 1960 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.

1961 continues this trend, as various steps have been taken in administration to enable this to be done. Among measures introduced have been the obtaining of some degree of standardisation for requests for ambulance service transport; the acceptance of a modified form of standing order; and a method of employment of personnel for whom there are no vehicles when the sickness and holiday rate on the one hand and the vehicles out of service on the other, do not balance.

In order to keep available for use as many vehicles as practicable, new methods of maintenance have been used, in order that vehicles should not be off the road for running repairs; for periodic overhaul and attention vehicles must be held out of service, and this will create difficulty until additional vehicles become available to meet the increasing demands on the service.



Representatives of the Health Committee met representatives of the Nottingham No. 1 Hospital Management Committee in October, and it is hoped that the response by the hospital to the requests of the Corporation for various improvements will enable productivity to be increased, but it is unlikely to be so great as to preclude the need to engage more driver/attendants and to obtain additional vehicles.

I cannot do better than to repeat the warning I gave last year on the dangers of endeavouring to raise productivity to the ultimate possibility: "Increased productivity 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".

**Long-distance Journeys.** As I forecast last year, the number of journeys carried out by road will rise, due to more and more places becoming inaccessible by train due to the introduction of diesel services, which cannot accommodate stretchers: this year the number of journeys by train is less than last year, but the number of journeys by ambulance service vehicles has increased.

As I wrote last year, 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. When vehicles are engaged in this way, inevitably some other patients are without transport.

#### Road Journeys by Ambulance Service Vehicles

Leeds	..	..	..	..	..	..	20
Sheffield		..	..	..	..	..	17
Buxton	..	..	..	..	..	..	12
Doncaster and Skegness	..	..	..	..	..	..	4 each
Lincoln and Woodhall Spa		..	..	..	..	..	3 each

Ashover (Derbyshire), Kingston-upon-Hull, London, Manchester and Oxford .. .. .	2 each
Birmingham, Bognor Regis, Burton-on-Trent, Chester, Epsom, Gainsborough, Gloucester, Grantham, Hecking- ton (Lincs.), Langham (Rutland), Nuneaton, Oakham, Rotherham, Ruthin (Denbigh), Stoke-on-Trent and Wellingborough (Northants.) .. .. .	1 each

An increase of 16 compared with the 1960 total of 73 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 were arranged and carried through at very short notice.

The following journeys have been undertaken by rail during 1961:—

Sheffield .. .. .	27
London .. .. .	21
Skegness .. .. .	19
Matlock .. .. .	9
Ashover .. .. .	7
Lincoln .. .. .	6
Leamington Spa .. .. .	5
Leeds .. .. .	4
Broadstairs, Derby and Woodhall Spa .. .. .	3 each
Bognor Regis, Burton-on-Trent, Buxton, Doncaster, Gainsborough, Grimsby, Halifax, Ilkley, Newcastle- on-Tyne and Sunderland .. .. .	2 each
Aberdeen, Bath, Birmingham, Bradford, Brighton, Cars- halton, Chester, Claxby (Lincs.), Drewsteignton (Devon), Dudley, Dundee, East Grinstead, Frinton-on- Sea, Glastonbury, Harrogate, Harrow-on-the-Hill, Hounslow, Hunstanton, Isleworth, Langwith Lodge (Notts.), Leicester, Louth (Lincs.), Margate, Mitcham, Newark, Oldham, Redcar, Rochdale, Rugby, Ruislip, Scunthorpe, Seaford (Sussex), Southampton, St. Leonards-on-Sea, Taplow, Taunton, Wichenford (Worcestershire) and Worthing .. .. .	1 each



A total of 181 patients was conveyed by rail, a decrease of 17 compared with 1960. On some journeys more than one patient was carried.

### Bus Journeys

Arrangements were made with the several omnibus undertakings for the carriage of 28 patients:—

Skegness	..	..	..	..	..	23
Mablethorpe	..	..	..	..	..	2
Buxton, Leicester and Matlock	..	..	..	..	..	1 each

A decrease of 8 compared with the 1960 total of 36 patients.

**Emergency Cases.** There has been no major disaster during the year.

Emergency cases for the year have totalled 6,111, compared with 5,759 during 1960. The highest number of emergency cases on any day was 34 on 23rd December, compared with 34 cases on the 25th November 1960.

It is interesting to note that the figure for emergencies (6,111) represents only 4.1% of the total number of patients carried.

The national average for emergency (including maternity) cases is between 6% and 7%. The addition of the estimated figure for maternity cases in Nottingham to the figure for other emergencies would bring Nottingham's percentage to 5% of the whole.

**Rechargeable Mileage.** During the year, 757 patients have been conveyed for 22 other authorities, giving rechargeable figures of 1,499 sitting-case vehicle miles and 2,352 ambulance miles.

**Conveyance of Analgesia Apparatus.** The service was relieved of this responsibility on 31st August. The duty was taken over by the midwives.

**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.

**Sale of Replaced Vehicles.** The following old vehicles were sold during the year:—

Type of Vehicle	Fleet No.	Reg. No.	Date of first Registration	Net Amount Received
Humber Ambulance 27 h.p.	921	MAU 214	1.11.49	£ 45
Morris Ambulance 25 h.p. ... Partially dismantled ...	905	HTV 228	7. 6.47	18
Humber Ambulance 27 h.p.	919	LTV 12	24. 6.49	15
Humber Ambulances 27 h.p. Dismantled ... ..	920 922 923	LTV 825 MAU 922 MAU 923	20. 9.49 6. 1.50 10. 2.50	15 each



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

Salaried staff in the grading scheme .. .. .	14
Leading drivers .. .. .	7
Male driver-attendants .. .. .	58
Female driver-attendants .. .. .	11
	<hr/>
Total personnel .. .. .	90
	<hr/>

**Permanent fleet**

Ambulances .. .. .	14
Sitting-case cars .. .. .	2
Dual-purpose vehicles .. .. .	13
	<hr/>
	29
	<hr/>
Ambulance stations .. .. .	3

**The Work of the Staff and Employees.** I wish to pay a special tribute to the work of the Chief Ambulance Officer (Mr. C. G. Dewen), of the remainder of the salaried staff, and of the whole of the employees: only the most devoted and loyal hard work, at high pressure, with ever-increasing efficiency and productivity, are enabling the Ambulance Service to continue to discharge its obligations with the vehicles and employees it possesses.

The figures in this report indicate how very greatly the obligations of the service have increased, and I fear that, at a time not far distant —perhaps during 1962—the service will not be able to perform all that is required of it unless its resources come to be increased.

## APPENDIX A.

Month	Emergencies		Admission		Discharges		Outpatients		Unclassified		Analgesia		Service	TOTAL	
	P.	M.	P.	M.	P.	M.	P.	M.	P.	M.	J.	M.	M.	P.	M.
JANUARY ..	483	2,445	1,012	7,519	886	3,733	9,570	27,442	79	407	83	346	1,879	12,030	43,771
FEBRUARY ..	453	2,320	955	7,321	768	3,705	8,738	24,475	63	647	80	314	1,742	10,977	40,524
MARCH ..	470	2,347	976	7,680	906	4,695	10,212	27,512	54	595	99	373	1,884	12,618	45,086
APRIL ..	490	2,514	902	7,222	774	3,380	9,222	25,439	59	461	88	344	1,589	11,447	40,949
MAY ..	523	2,534	893	6,839	866	4,074	10,228	28,045	43	526	111	461	1,786	12,553	44,265
JUNE ..	547	2,797	862	6,141	880	3,913	10,455	28,597	62	426	61	241	1,517	12,806	43,632
JULY ..	546	2,695	841	6,306	912	4,060	10,262	27,729	42	486	56	231	1,558	12,603	43,065
AUGUST ..	488	2,575	740	5,283	746	4,498	10,013	27,339	58	541	65	237	1,599	12,045	42,072
SEPTEMBER ..	540	2,711	796	6,122	711	3,297	10,379	26,595	43	324	—	—	1,573	12,469	40,622
OCTOBER ..	515	2,618	847	6,418	930	4,323	11,269	28,522	35	286	—	—	1,589	13,596	43,756
NOVEMBER ..	483	2,382	831	6,010	861	4,066	11,364	28,878	50	322	—	—	1,572	13,589	43,230
DECEMBER ..	573	2,891	914	6,539	879	4,799	8,708	23,095	36	235	—	—	1,487	11,110	39,046
TOTAL ..	6,111	30,829	10,569	79,400	10,119	48,543	120,420	323,668	624	5,256	643	2,547	19,775	147,843	510,018

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



## APPENDIX B.

## 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
Jan. ..	5,757	23,510	1,130	4,430	5,143	15,831	12,030	43,771
Feb. ..	5,125	21,406	1,195	4,904	4,657	14,214	10,977	40,524
Mar. ..	5,717	23,374	1,211	5,530	5,690	16,182	12,618	45,086
April ..	5,321	21,429	1,033	4,350	5,093	15,170	11,447	40,949
May ..	5,744	22,912	1,096	4,295	5,713	17,058	12,553	44,265
June ..	5,797	22,411	973	3,960	6,036	17,261	12,806	43,632
July ..	5,120	20,547	1,028	4,240	6,455	18,278	12,603	43,065
Aug. ..	4,982	20,660	629	3,439	6,434	17,973	12,045	42,072
Sept. ..	5,185	20,735	884	3,184	6,400	16,703	12,469	40,622
Oct. ..	5,744	22,308	1,157	4,520	6,695	16,928	13,596	43,756
Nov. ..	5,709	21,564	1,007	4,028	6,873	17,638	13,589	43,230
Dec. ..	4,660	20,259	773	3,098	5,677	15,689	11,110	39,046
TOTALS	64,861	261,115	12,116	49,978	70,866	198,925	147,843	510,018

Ambulances ..	..	64,861	261,115
Sitting-case cars ..	..	12,116	49,978
Dual-purpose vehicles ..	..	70,866	198,925
Totals ..	..	<u>147,843</u>	<u>510,018</u>

The total of 510,018 miles includes 2,547 *analgesia miles*: for details of those, please see appendices A and C.

## APPENDIX C. FINANCIAL SUMMARY AND STATISTICAL RECORD FROM 1948 to 1961

Year	Total miles	Analgesia miles	Patient and service miles	Total patients	Average miles per patient	Patients carried per thousand miles run	Cost per vehicle mile for year ended on preceding 31st March	Maximum mileage on any one day	Maximum no. of patients on any one day	Highest no. of emergency calls on any one day	Total expenditure for year ended on preceding 31st March
1948 (6 months)	147,317	—	147,317	23,301	6.32	158.17	d. —	—	—	—	£ —
49	301,426	—	301,426	54,297	5.55	180.13	22.66	1,498	246	27	28,154 (9 months)
50	321,673	—	321,673	62,858	5.12	195.41	27.92	1,445	287	25	37,440
51	343,150	—	343,150	68,896	4.98	200.78	27.80	1,544	296	34	39,513
52	328,078	—	328,078	71,737	4.57	218.66	30.16	1,395	325	35	49,788
53	309,115	—	309,115	75,104	4.12	242.96	31.40	1,445	324	29	46,785
54	345,912	675	345,237	87,355	3.95	253.03	34.06	1,663	350	29	49,664
55	389,311	7,069	382,242	93,405	4.09	244.36	34.17	1,865	429	34	58,578
56	397,636	6,688	390,948	95,551	4.09	244.41	33.45	1,658	425	30	60,947
57	369,790	5,424	364,366	92,798	3.93	254.68	40.49	1,477	402	33	68,588
58	396,834	4,954	391,880	100,079	3.92	255.38	42.73	1,798	468	33	70,521
59	453,686	4,754	448,932	111,011	4.04	247.28	40.80	1,957	528	31	85,730
60	470,140	4,275	465,865	125,597	3.71	269.60	37.47	1,980	568	34	85,605
61	510,018	2,547	507,471	147,843	3.43	291.33	39.68	2,227	633	34	92,247



## APPENDIX D.

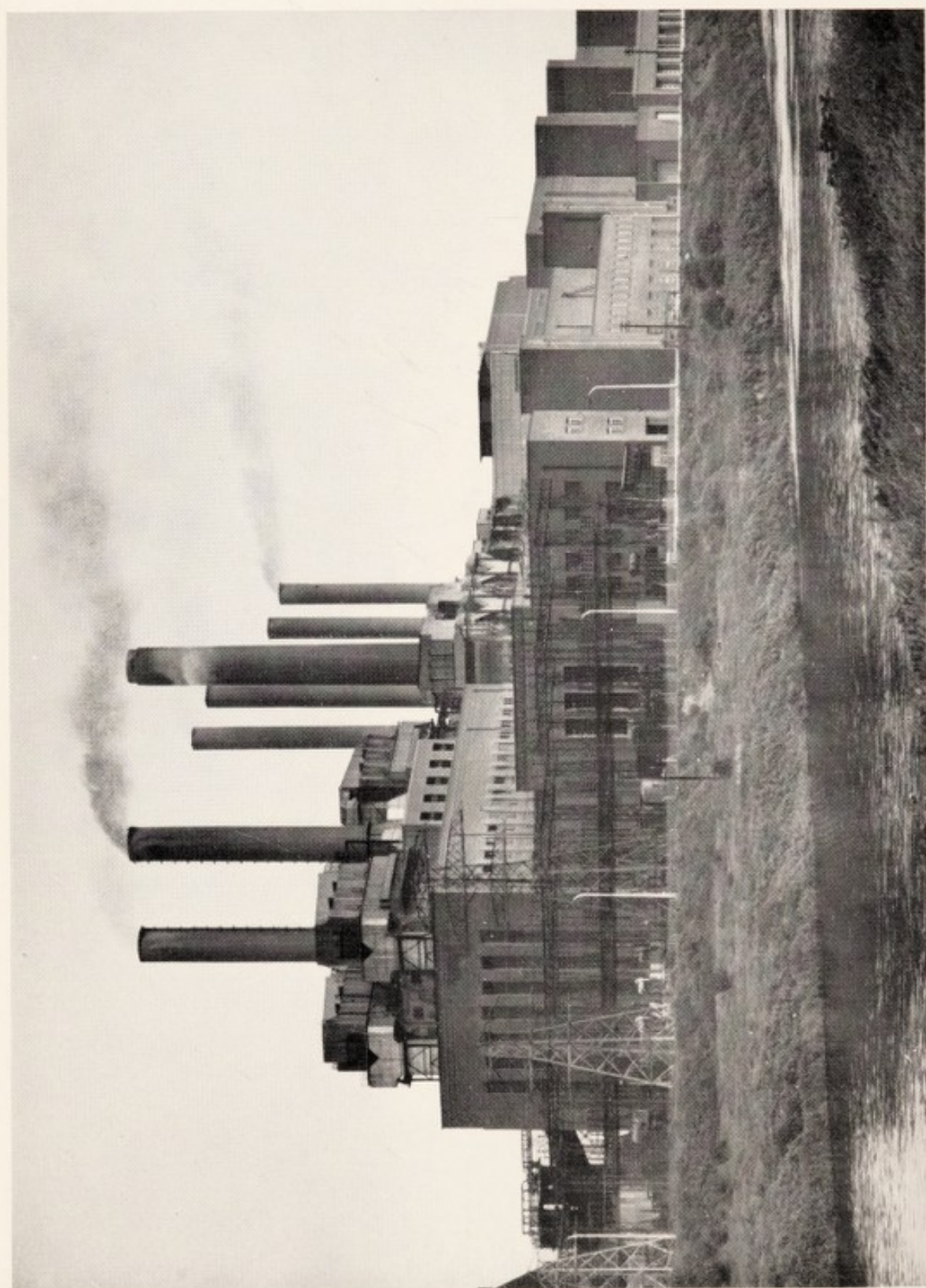
**ABSTRACT OF ACCOUNTS FOR THE YEAR ENDED**  
**31st MARCH, 1961**

	Amount £	Amount £	d. per mile
<b>INCOME</b>			
Sale of Ambulances and cars .. ..		45	·023
Recharges to other Authorities .. ..		522	·260
Recharges to other Departments of the Corporation .. ..		1,457	·726
Miscellaneous hire .. ..		105	·052
Transfer to Renewal and Repairs Fund ..		3,907	1·948
		<hr/> 6,036	<hr/> 3·009
		<hr/> <hr/>	<hr/> <hr/>
<b>EXPENDITURE</b>			
<b>Salaries and Wages</b>			
Salaries of Ambulance Officer and staff ..	8,448		
Wages of driver/attendants .. ..	42,052		
National Insurance and superannuation ..	3,794		
	<hr/> 54,294	27·067	
<b>Premises</b>			
Repair and maintenance of buildings and grounds .. ..	589		
Fuel, light, cleaning materials and water ..	1,756		
Furniture and fittings .. ..	97		
Rent and rates .. ..	2,038		
	<hr/> 4,480	2·234	
<b>Supplies, Equipment and Tools</b>			
First aid equipment and supplies .. ..	353		
Maintenance and operation of wireless equipment .. ..	672		
Uniforms .. ..	621		
Laundry .. ..	489		
Other equipment .. ..	118		
	<hr/> 2,253	1·123	
<b>Transport</b>			
Petrol, oil and licences .. ..	6,918		
Repair and maintenance of vehicles .. ..	5,935		
Railway fares of patients and escorts .. ..	212		
Car allowances etc. .. ..	118		
Contribution to Renewal and Repairs Fund	6,000		
	<hr/> 19,183	9·563	
	<hr/> <hr/>	<hr/> <hr/>	
<i>Carried forward</i>	80,210	39·987	

	<i>Amount</i> £	<i>Amount</i> £	<i>d. per mile</i>
<i>Brought forward</i>		80,210	39·987
<b>Establishment Expenses</b>			
Printing, stationery, advertising and postages	484		
Telephones .. .. .	504		
Insurance .. .. .	835		
Travelling, subsistence and conference expenses .. .. .	43		
Contribution to Central and Departmental administration .. .. .	3,298		
	<hr/>	5,164	2·575
<b>Agency and Voluntary Services</b>			
Ambulance hire .. .. .		122	·061
<b>Miscellaneous Expenses</b>			
Audit stamp duty and miscellaneous expenses .. .. .		139	·069
		<hr/>	<hr/>
		85,635	42·692
		<hr/>	<hr/>
<b>Debt Charges</b>			
Loan interest and management charges ..	2,621		
Loan redemption .. .. .	3,991	6,612	
<b>Revenue Contributions to Capital Outlay</b>			
Purchase of wireless equipment ..	254		
Purchase of ambulances and cars ..	3,653		
City Engineer's services—Wilford Station	135	4,042	
	<hr/>	<hr/>	
		96,289	
		<hr/>	
Mileage for year ended 31st March 1961—481,416	<hr/>		







A pile and a pall



## PART III

### ENVIRONMENTAL SERVICES

Clean Air Act 1956

Factories Acts 1937-1961

Food and Drugs Acts 1938-1955

Housing Act 1957

Nottingham Corporation Acts 1923-1952

Public Health Acts 1875-1961

Rent Act 1957

Shops Act 1950

INFECTIOUS DISEASES

FOOD SUPERVISION AND INSPECTION

HOUSING

SANITATION

ATMOSPHERIC POLLUTION

## INFECTIOUS DISEASES

The table below is compiled mainly from formal notifications by general practitioners and by the Physician Superintendent of the Infectious Diseases Hospital, as well as from reports from the Director of the Public Health Laboratory.

	1961	1960	1959	1958	1957	1956	1955
Food poisoning	63	33	151	50	51	22	56
Dysentery ..	133	261	285	514	485	1,222	110
Paratyphoid fever	—	1	2	—	—	1	5
Typhoid fever ..	1	—	1	1	—	—	—
Poliomyelitis:							
paralytic ..	4	3	9	4	17	13	26
non-paralytic ..	—	1	—	—	3	1	6
Pertussis ..	115	232	206	153	247	1,024	566
Measles ..	4,083	3,054	1,852	2,782	4,882	165	6,935
Pneumonia ..	206	152	189	222	274	144	184
Scarlet fever ..	124	198	510	481	332	241	147
Erysipelas ..	8	12	18	20	25	25	21
Puerp. pyrexia ..	33	15	31	17	35	20	28
Cero-spin. fever	5	4	4	9	5	8	11
Encephalitis:							
infectious ..	2	1	3	—	—	—	1
post infective ..	1	8	2	5	3	—	4
Ophth. Neonat...	6	7	11	9	6	3	24



**Dysentery.** A total of 210 cases were notified by 34 doctors, 133 cases being confirmed by bacteriological examination.

The real incidence of the condition was difficult to assess. Apart from the fact that it was known that many mild cases may not have sought medical attention, laboratory reports showed that 118 other persons, referred by 32 doctors, gave positive specimens. Of this number 56 were contacts of notified cases and may have been symptom-free; the remaining 62 were in no way associated with other cases.

**Food Poisoning.** There was a major outbreak in late August responsible for 52 cases and there were 11 sporadic incidents caused by a variety of *Salmonellae*. Isolations made were:

<i>S. typhimurium</i>	..	57	<i>S. abony</i>	..	1
<i>S. bredeney</i>	..	1	<i>S. lexington</i>	..	1
<i>S. thompson</i>	..	1	<i>S. stanley</i>	..	1
<i>S. wangata</i>	..	1			

The outbreak occurred in a hospital and was caused by *Salmonella typhimurium*. The source of the infection was not traced and bacteriological examination did not incriminate any of the bulked food supplies as all the samples taken proved negative.

The infection fell heavily on the nursing staff, 28 of whom had symptoms and had to be nursed as patients. As a result all admissions, except for acute cases, were postponed for a period of 2 weeks.

All staff and patients submitted at least two specimens for bacteriological examination, and there were positive findings from as many as 67 nurses, 55 patients, and 27 other staff—a total of 149 persons.

There were in addition 15 other members of staff who had symptoms but from whom at no time were positive specimens obtained.

Non-resident staff whose specimens were positive or who displayed symptoms were sent home and kept under supervision by family doctors and by the appropriate local authorities. Two members of the resident domestic staff and 9 patients were admitted to an infectious diseases hospital. Other patients in the hospital whose specimens were positive were discharged home in the normal way provided that they had no symptoms of food poisoning.

**Typhoid.** A Pakistani aged 22 years who had arrived in this country 2½ weeks previously was admitted as a patient to a hospital where he was found to be suffering from typhoid fever. He was transferred to an infectious diseases hospital where, following treatment, he made an uninterrupted recovery.

His illness had commenced before he boarded a plane at Karachi to fly to London Airport. On arrival, he travelled direct to Nottingham, where he stayed in three different houses in the short period prior to his admission to hospital. Two of the houses were let off in rooms with shared toilet facilities and there was, as a result, a comparatively large number of household contacts. However, specimens from these contacts were all bacteriologically negative, and no further cases occurred.

A West Indian who was examined as a contact of a case of dysentery was found to be a typhoid carrier. He agreed to enter an infectious diseases hospital for treatment of his condition. The original infection had probably occurred some 15 years previously in the West Indies but had not been diagnosed.



The fact that he had lived in this country for some years and that no contact had been infected by him indicates the small risk constituted by such carriers provided that satisfactory hygienic standards are maintained.

**Poliomyelitis.** There were 13 notifications of which 4 were confirmed, all as paralytic cases. These four occurred in January, May, August and November and so there could have been no close association between them. Two of them, aged  $2\frac{1}{2}$  and 6 years had each received 3 vaccinations against the disease, but the other two aged  $1\frac{1}{2}$  and 25 years were unvaccinated.

		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	—
61	..	4	—	4	—

Age Group		1961		1960		1959		1958		1957		1956		1955		1954	
		M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
0—4	..	2	—	1	1	3	2	—	1	7	4	3	2	1	4	1	3
5—9	..	1	—	—	—	—	—	—	—	2	2	3	4	7	1	3	2
10—14	..	—	—	1	—	—	—	—	—	1	1	—	—	6	—	—	—
15—24	..	—	—	—	—	1	—	—	1	2	—	1	1	5	2	—	—
25+	..	1	—	1	—	2	1	2	—	—	1	—	—	4	2	1	—
TOTALS	..	4	—	4	—	9	—	4	—	20	—	14	—	32	—	10	—

**Pertussis.** The downward trend in the incidence of this disease continued in 1961. There were 115 confirmed cases which was less than half the number, 232, which had occurred in 1960, and was the lowest number so far recorded. Only 14 of these children had been vaccinated.

	1961	1960	1959	1958	1957	1956	1955	1954	1953
Notifications ..	115	232	206	153	247	1,024	566	1,104	1,042
Deaths ..	—	—	—	—	—	—	2	—	3
No. immunised ..	5,118	4,183	3,677	3,565	3,438	3,063	3,584*	—	—

\* First year of vaccination on a large scale.

#### ANALYSIS BY AGES

	M.	F.	Total
Under 1 year .. ..	7	12	19
1— 4 years .. ..	32	29	61
5— 9 „ .. ..	10	17	27
10—14 „ .. ..	3	5	8
15+ „ .. ..	—	—	—
TOTALS .. ..	52	63	115

**Measles.** The countrywide epidemic which had started in the autumn of 1960 continued well into 1961 and the incidence in the City did not approach normal proportions until May. There were 4,083 confirmed cases and of these 49 were admitted to hospital. There were no deaths.

**Encephalitis.** There were 2 cases of acute infectious encephalitis notified following admission to hospital. One of these, a boy aged 4 years, died.

Post infective encephalitis following mumps was notified in a girl aged 4 years.



**Cerebro Spinal Fever.** Five cases were confirmed during the year. Two girls aged one month and 2 years died in hospital.

**Gastro-Enteritis.** There were 5 deaths all in infants aged 6 months or younger. Three of the deaths occurred in hospital.

**Venereal Disease.** New cases of syphilis diagnosed were 73 compared with 45 in 1960. This is an increase of over 60%, but there were 69 late cases and only 4 early ones. All four early and 42 late cases occurred in males.

There were 483 new cases of gonorrhoea, a small increase on the number in 1960.

**Contacts or Carriers of Infectious Disease.** Certificates for exclusion from work under Ministry of Health Circular 115/48 were issued on 19 occasions.

Scarlet Fever	..	5	Salmonella Infection	6
Dysentery	..	5	Poliomyelitis	.. 2
Enteritis	..	1		

## FOOD SUPERVISION AND INSPECTION

### FOOD HYGIENE

The supervision was continued of premises where food was prepared, stored or sold, resulting in many improvements to the structures, equipment and display of food, particularly in businesses occupying old premises.

Throughout the year there was close co-operation with the City Engineer's department so that plans submitted for bye-law approval were examined by a public health inspector who made appropriate recommendations in order that there would be full compliance with the Food Hygiene Regulations.

The Chief Public Health Inspector was also represented on the Licensing Justices' Plans Sub-Committee and many improvements in premises to be used for the sale of intoxicants were thereby achieved.

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

- |   |   |
|---|---|
| (a) Failure to provide and maintain suitable and sufficient wash-hand basins at two grocery and one greengrocery shops. | In two cases the owner was fined £5 and in one case the owner was fined £2. |
| (b) Failure to keep the rooms and equipment clean in premises used for the manufacture of sausages.                     | Owner fined a total of £34 plus £3. 3s. 0d. costs.                          |

**Foreign Matter in Food.** The number of complaints of the purchase of food that contained foreign matter or was otherwise unsuitable for human consumption, was 14. They concerned the presence of:—



mould on a Christmas pudding  
 „ „ sweets  
 „ „ a steak and kidney pie  
 a nail in a tin of salmon  
 tobacco in a sausage  
 metal in a packet of potato crisps  
 „ „ teacake  
 muslin in brawn  
 ants in a jam roll  
 fly in a pork pie  
 moth in a teacake  
 bullet in tinned beef-steak pudding  
 snail in a bottle of milk  
 piece of metal from a driving belt in a swiss roll

Legal proceedings were instituted in two instances and in both cases the manufacturers were fined £10.

In the course of 5,647 visits to various food premises it was necessary to draw attention to 175 defects and contraventions of the Regulations. Requirements, including those outstanding from 1960 were met in 190 cases.

FOOD PREMISES SUPERVISED					
Premises Visited	1961	1960	1959	1958	1957
Grocers and provision dealers including off-licence premises ..	1,247	1,251	1,229	1,248	1,252
Butchers and meat products manufacturers ..	395	403	435	451	456
Hotels, public houses and clubs ..	430	427	433	435	437
Sweet shops ..	401	408	391	400	399
Fruit and vegetable dealers ..	367	371	378	388	372
Factory canteens, etc. ..	284	255	232	231	227
Restaurants, snack bars, etc. ..	233	230	227	218	221
Bread, pastry, and confectionery dealers including bakehouses ..	145	141	148	159	166
Fried fish and chip shops ..	133	138	142	144	145
Wet fish, poultry, game, etc., dealers ..	59	59	58	65	68
Wholesale food dealers ..	48	46	48	47	47
School kitchens ..	59	59	56	56	55
Ice-cream manufacturers ..	13	13	14	18	18
Mobile food shops ..	30	24	27	31	27
Foodstalls in markets:					
Wholesale ..	42	42	43	43	43
Retail ..	108	108	99	99	97
Miscellaneous ..	67	71	89	91	95
Dairies ..	5	5	5	5	5
TOTAL ..	4,066	4,051	4,054	4,129	4,130

Premises registered under Sect. 16, Food and Drugs Act, 1955					
Premises used for the sale of ice-cream	..	..	..	..	1,259
„ „ „ „ manufacture of ice-cream	..	..	..	..	13
„ „ „ „ preparation or manufacture of sausages, or potted, pressed, pickled or preserved food	..	..	..	..	350
TOTAL	..	..	..	..	1,622

The number of inspections of registered premises was 1,973.

### FOOD SAMPLING

A total of sixty-three samples of food was sent for bacteriological examination comprising four samples of potted meat, seven of gelatine, fifty of coconut and coconut confectionery, one of caramels and one of duck eggs. Two samples of gelatine, ten of coconut and coconut confectionery and the sample of duck eggs were unsatisfactory.

Samples were also taken as follows:—

Formal	..	..	520	Analysed by City Analyst.
Informal	..	..	481	do.
„ Milk	..	..	534	Tested by Inspector
			<u>1,535</u>	

Of the samples taken formally four were found to be not genuine and included 'dairy' cream trifles which contained only imitation cream and plain flour deficient in iron. In no case were legal proceedings taken.

Informal samples were found to be in some respects unsatisfactory in thirty-three cases and the sellers or manufacturers were communicated with.

Examples were:—

- Potted beef contained only 59% of meat.
- Canned boneless chicken contained only 75% of meat.
- Pepper contained only 20% of pepper.
- Lemon flavouring contained colouring matter not declared on label.
- Several pre-packed foods were not satisfactorily labelled.

**Sampling of MILK and ICE-CREAM**—see pages 130 and 132.

**Sampling of "FOOD AND DRUGS"**—see page 136.



### MEAT SUPPLY

All slaughtering in the City was carried on in the public slaughterhouse owned by the Corporation where all the meat was inspected before leaving the premises. In addition regular visits were made to retail butchers' shops and warehouses to inspect meat brought into the City from elsewhere.

A Pakastini was found slaughtering sheep at the public slaughterhouse by the Mohamedan method of slaughter without being licensed to do so in accordance with the Slaughter of Animals Act 1958. Furthermore, he changed his clothes in the slaughter-hall and did not wear suitable protective clothing as required by the Slaughterhouses (Hygiene) Regulations 1958. Proceedings were taken and he was fined £5 on each of the three charges.

**Transport.** All the vehicles used for the transport of meat were inspected regularly both at the public slaughterhouse and at the time of delivery of meat and offals to the retail butchers' shops. Generally conditions were satisfactory.

**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. Other foodstuffs were disposed of by the Corporation's Cleansing Department in controlled refuse tips.

For details of unsound food surrendered see page 135.

**CARCASES OF MEAT INSPECTED  
and  
CARCASSES CONDEMNED**

	Cattle exclud- ing Cows	Cows	Calves	Sheep and Lambs	Pigs	Total
Number killed and inspect- ed .. .. .	15,208*	4,408	2,710	61,225	17,500	101,051
<b>All Diseases except tuberculosis and cysticerci :</b>						
Whole carcasses condemned ..	4	12	28	100	84	228
Carcases part (or organ) condemned ..	4,542	2,738	5	962	2,498	10,745
Percentage affected ..	29.89	62.39	1.22	1.73	14.75	—
<b>Tuberculosis only :</b>						
Whole carcasses condemned ..	2	—	—	—	3	5
Carcases part (or organ) condemned ..	55	17	—	—	250	322
Percentage affected ..	0.37	0.38	—	—	1.44	—
<b>Cysticercosis :</b>						
Carcases part (or organ) condemned ..	368	95	—	—	—	463
Carcases submitted to treatment by refrigeration ..	47	6	—	—	—	53
Generalised and totally condemned ..	—	—	—	—	—	—

\* Bulls 16 :    bullocks 8,224 :    heifers 6,968.



## 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	1961	1960	1959	1958	1957
Processing establishments .. ..	3	4	3	4	4
Distributors operating from wholesale dairies .. ..	4	8	8	7	8
Distributors operating from dairies outside the City .. ..	*	11	11	11	11
Distributors—shopkeepers .. ..	703	630	666	660	630

\* Registration not now required (see The Milk and Dairies (General) Regulations, 1959).

## LICENSING

## THE MILK (SPECIAL DESIGNATION) REGULATIONS, 1960

LICENCES GRANTED	1961	1960	1959	1958	1957
Dealers'—to pasteurise .. ..	3	4	4	4	4
„ „ sterilise .. ..	3	4	4	4	4
„ „ sell T.T. milk .. ..	214	64	157	81	64
„ „ „ pasteurised milk .. ..	537	441	615	514	441
„ „ „ sterilised milk .. ..	636	696	782	764	696
Supplementary—to sell T.T. milk .. ..	*	10	10	10	10
„ „ „ pasteurised milk .. ..	*	11	11	11	11
„ „ „ sterilised milk .. ..	*	10	10	10	10

\* Supplementary licences no longer required.

## SAMPLING

## BACTERIOLOGICAL EXAMINATION

**Examination for Tubercle Bacilli.** Of 42 samples taken—including 5 of farm bottled milk—all showed negative results to biological tests.

The percentage of positive results in previous years is given:

1961	..	..	..	..	..	Nil
60	..	..	..	..	..	"
59	..	..	..	..	..	0.917 per cent
58	..	..	..	..	..	Nil
57	..	..	..	..	..	"
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 64 samples procured all but 4 complied with the prescribed standards.

**Pasteurised Milk—including tuberculin tested milk (pasteurised).** Samples of pasteurised milk sold under licence numbering 594 were subjected to the half-hour Methylene Blue Test; only 6 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 142 samples processed under licence was obtained for examination; all satisfied the statutory turbidity test.



## CHEMICAL EXAMINATION

## Samples analysed by the Public Analyst

	No. of samples	Average per cent of fat	Average per cent of solids not fat
January .. .. .	46	3·810	8·876
February .. .. .	50	3·770	8·805
March .. .. .	39	3·517	8·761
April .. .. .	47	3·625	8·674
May .. .. .	48	3·485	8·710
June .. .. .	14	3·592	8·750
July .. .. .	44	3·679	8·693
August .. .. .	38	3·747	8·721
September .. .. .	45	3·660	8·780
October .. .. .	24	3·729	8·764
November .. .. .	67	3·935	8·945
December .. .. .	39	3·851	8·867
AVERAGES .. .. .	41·75	3·700	8·778

The standard for milk is 'fat' 3·0% and 'solids-not-fat' 8·50%.

Of the 534 informal samples subjected to the Gerber test by the inspector, 79 or 14·79% were unsatisfactory.

## ACTION TAKEN ON UNSATISFACTORY MILK SAMPLES

<i>Samples taken formally and found not genuine</i>	<i>Action Taken</i>
13 samples from 9 producers were deficient in milk-fat content.	Letters from Chief Public Health Inspector to producers.
31 samples from 23 producers were deficient in solids-not-fat content.	do.
3 samples from 3 producers were deficient in milk-fat and milk solids-not-fat content.	do.

## 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 1,387 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	..	..	1,013	
"Loose" ices	..	..	246	
			—	1,259
New registrations	..	..	50	
Transfers of registrations	..	..	31	

**Sampling: Ice Cream.** A total of 6 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 and all but 2 were found to be satisfactory.

**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	196
2	2½—4 ..	8
3	1—2 ..	7
4	0—½ ..	8



## FERTILISERS AND FEEDING STUFFS ACT 1926

## FERTILISERS AND FEEDING STUFFS REGULATIONS, 1960

Samples taken	Satisfactory	Unsatisfactory	Total
<b>FERTILISERS:</b>			
All-purpose fertiliser .. ..	—	1	1
Basic slag .. ..	—	1	1
Bone meal .. ..	1	—	1
Complete fertiliser .. ..	1	—	1
Liquid manure .. ..	—	1	1
Nitrate of soda .. ..	1	—	1
Plant food .. ..	1	—	1
Soluble blood .. ..	1	—	1
Sulphate of ammonia .. ..	—	1	1
Superphosphate of lime .. ..	1	—	1
Vegetable fertiliser .. ..	—	2	2
<b>FEEDING STUFFS:</b>			
Day-old chick food .. ..	—	1	1
Growers meal .. ..	1	1	2
Layers mash .. ..	3	—	3
Laying meal .. ..	1	—	1
Pig fattening .. ..	1	—	1
Pig food No. 1 (Sow and Weaners) .. ..	1	—	1
Poultry layers meal .. ..	1	—	1
Range layers mash .. ..	1	—	1
„ „ pellets .. ..	1	—	1
<b>TOTALS .. ..</b>	<b>16</b>	<b>8</b>	<b>24</b>

Action taken on unsatisfactory samples was as follows:—

Basic slag .. ..	Cautionary letter from Chief Public Health Inspector to sellers <i>re</i> labelling details.
Sulphate of ammonia .. ..	Small excess of nitrogen content: not to the prejudice of the purchaser. No action.
Vegetable fertiliser .. ..	Followed by formal sample, also unsatisfactory. Letter from Chief Public Health Inspector to the manufacturers.
All purpose fertiliser .. ..	Small excesses of soluble phosphoric acid and potash: not to the prejudice of the purchaser. Manufacturers advised by inspector.
Liquid manure .. ..	
Growers meal .. ..	Slight excess of protein. Letter from Chief Public Health Inspector to manufacturer.
Day-old chick food .. ..	Slightly deficient in oil. Letter from Chief Public Health Inspector to manufacturer.

**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 .. .. .	17
Transfer of licences .. .. .	Nil
Persons ceasing to operate under the Act .. .. .	21

A person operating as a herbalist was warned of irregularities in relation to the marking of medicines under the Pharmacy and Medicines Act 1941, and was referred to the Pharmaceutical Society for further advice.

**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 3 tons 10 cwt.

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

Origin of Layings	No. of samples					
	1961	1960	1959	1958	1957	1956
Bangor .. .. .	—	4	—	—	—	—
Boston, Lincolnshire .. .. .	6	12	20	20	14	7
Brancaster, Norfolk .. .. .	—	—	—	—	—	1
Conway .. .. .	—	4	2	—	—	—
Cromer .. .. .	1	—	—	—	—	—
Port Madoc, N. Wales .. .. .	6	1	2	8	8	2
Ireland .. .. .	3	1	—	14	3	3
Denmark .. .. .	1	—	7	5	1	3



## DETAILS OF UNSOUND FOOD SURRENDERED

Food other than meat	In stones					
	1961	1960	1959	1958	1957	1956
Bacon .. ..	133	156½	140	105¾	95¾	127
Butter .. ..	10	3	5½	4¾	1¾	1
Canned goods ..	4,902	5,099½	4,974	5,094¼	4,124	3,614½
Cakes and pastry ..	12	21	4	18	24½	4¾
Cheese .. ..	41½	57	68	196½	249	81
Chocolate and sweets	120¾	77½	8½	38	3½	2½
Coffee .. ..	2½	7	6	—	1½	—
Conserves .. ..	28	60	25	32¾	70¾	6¾
Cooked meat ..	1	—	—	2¼	—	—
Dried fruit ..	25½	57	34½	33¼	8¾	29
„ milk .. ..	—	11	8	—	—	49
Eggs—liquid ..	2	—	3	—	2	2
—shell .. ..	—	3	—	6	28	—
Fish .. ..	975½	873	572	358½	436¾	906
Fruit .. ..	300½	1,460	82	463¾	56	78
Flour .. ..	8½	7	114½	14	5¼	1½
Margarine .. ..	3½	29½	2	—	29	¾
Miscellaneous ..	4,291	175½	825	240	159½	32
Poultry .. ..	19½	43½	105	5	42½	81¾
Rabbits .. ..	20½	2	1½	13	—	4½
Sausage .. ..	42½	99	41½	41¼	29	47½
Shell fish ..	561½	1,200	1,098	376¾	1,077	1,498¾
Sugar .. ..	—	55½	1	—	¼	3
Synthetic cream ..	1	10	5	3	—	—
Vegetables ..	1,458	914½	2,973	935	315½	380½
<b>TOTAL ..</b>	<b>12,959¾</b>	<b>10,422</b>	<b>11,097</b>	<b>7,981¾</b>	<b>6,759¾</b>	<b>6,951¾</b>

Meat	Home-killed			Imported		
	in stones			in stones		
	1961	1960	1959	1961	1960	1959
Beef .. ..	3,277½	4,981	6,928	44½	25	81
Mutton and Lamb	595	442	425	66	5	45
Pork .. ..	1,359½	1,761	3,289½	5½	7	1½
Veal .. ..	110½	58½	51	—	—	—
Offals .. ..	13,017½	15,223	19,821½	273	132	152
<b>TOTAL ..</b>	<b>18,360</b>	<b>22,465½</b>	<b>30,515</b>	<b>389</b>	<b>169</b>	<b>279½</b>

GRAND TOTAL SURRENDERED 1959: 30,794½ stones = approx 192½ tons.

„ „ „ 1960: 22,634½ „ = „ 141½ „

„ „ „ 1961: 18,749 stones = approx. 117 tons.

## SAMPLING OF FOOD AND DRUGS

Item	Genuine			Unsatisfactory			Totals		
	Formal	In-formal	Total	Formal	In-formal	Total	Formal	In-formal	Total
Milk, raw .. .. .	366	—	366	47	—	47	413	—	413
Milk, processed .. .. .	88	—	88	—	—	—	88	—	88
Milk, canned, condensed .. .. .	—	15	15	—	—	—	—	15	15
Butter, cream, cheese and other dairy products .. .. .	—	24	24	1	3	4	1	27	28
Ice cream and frozen lollies .. .. .	—	6	6	—	—	—	—	6	6
Open meat products .. .. .	—	16	16	—	7	7	—	23	23
Canned or preserved meats and meat products .. .. .	—	18	18	—	2	2	—	20	20
Canned or pre-packed fish and fish products .. .. .	—	19	19	—	—	—	—	19	19
Soups .. .. .	—	11	11	—	—	—	—	11	11
Oils and fats .. .. .	10	11	21	—	1	1	10	12	22
Fresh fruits and vegetables .. .. .	—	17	17	—	—	—	—	17	17
Canned or preserved fruits and vegetables .. .. .	—	57	57	—	3	3	—	60	60
Sweets, sugar confectionery, etc. .. .. .	—	26	26	—	—	—	—	26	26
Jams, conserves, fruit curds, jellies, etc. .. .. .	—	27	27	—	—	—	—	27	27
Bread, biscuits, etc. .. .. .	—	14	14	—	—	—	—	14	14
Flours and flour mixtures .. .. .	1	19	20	1	3	4	2	22	24
Cakes and puddings .. .. .	—	1	1	—	—	—	—	1	1
Canned or pre-packed puddings .. .. .	—	18	18	—	—	—	—	18	18
Cereals .. .. .	—	15	15	—	1	1	—	16	16
Food flavouring and colourings .. .. .	—	6	6	—	3	3	—	9	9
Food drinks and non-alcoholic beverages .. .. .	—	43	43	—	2	2	—	45	45
Spices, sauces and condiments .. .. .	—	53	53	—	4	4	—	57	57
Wines, spirits and other alcoholic beverages .. .. .	3	9	12	1	2	3	4	11	15
Drugs (internal and external use) .. .. .	1	14	15	1	1	2	2	15	17
Baking powders and raising preparations .. .. .	—	3	3	—	1	1	—	4	4
Miscellaneous .. .. .	—	5	5	—	1	1	—	6	6
TOTALS .. .. .	469	447	916	51	34	85	520	481	1,001



## HOUSING

Steady progress in slum clearance continued during the year in the course of which 341 houses were demolished, mostly in the Carrington, Hyson Green and Commercial Street areas.

A preliminary survey of houses in the St. Ann's Well Road and Meadows districts likely to be suitable for representation during the next fifteen to twenty years was completed. This established that there were approximately 9,000 such houses in these two areas.

In January the Minister of Housing and Local Government was informed of the Council's proposed programme of slum clearance for the next five years after the completion of the present programme. The proposal covered the demolition of 4,000 houses, being 3,000 unfit houses in clearance areas and 1,000 houses required for the development of the cleared areas.

During July houses totalling 114 in the Bulwell district were represented, thus completing the major portion of the current slum clearance programme, and leaving only comparatively small areas to be inspected and represented during 1962.

A Public Inquiry in connection with the re-development was held in November in respect of the Council's Compulsory Purchase Order of the New Basford area which included the demolition of 281 unfit houses.

A table giving details relating to the demolition, closing and repair of houses under the Housing and Public Health Acts, appears on pages 139 and 140.

The following table confirms the view expressed last year that the procedure under the Rent Act 1957 relating to Certificates of Disrepair is now little used in the City. This should not be

taken as evidence that there is no need for such action. The initiative lies in the first place with the tenant of a house and it is known that there are a very large number of cases where appropriate action would be desirable but is not taken.

Certificates of Disrepair	1961	1960	1959	1958
Rent Act, 1957:				
Part I. Applications for Certificates of Disrepair:				
1. No. of applications for certificates ..	18	46	116	515
2. „ „ decisions not to issue certificates ..	3	3	4	14
3. „ „ „ to issue certificates: ..				
(a) in respect of some but not all defects ...	12	24	82	324
(b) „ „ „ all defects .. ..	3	19	29	177
4. No. of undertakings given by landlords	12	33	85	464
5. „ „ „ refused .. ..	—	1	1	6
6. „ „ certificates issued .. ..	7	11	29	132
Part II. Applications for Cancellation of Certificates:				
7. Applications by landlords for cancellation of certificates .. ..	7	18	41	128
8. Objections by tenants to cancellation of certificates .. ..	1	8	20	42
9. Decision to cancel in spite of tenant's objection .. ..	—	5	3	11
10. Certificates cancelled by local authority ..	5	15	36	81

### WOMEN HOUSING OFFICERS

A staff of four women housing officers made 13,903 visits to houses on Corporation estates and in the course of their inspections reported 1,013 defects to the Estates and Housing Department. In addition these officers visited 492 houses situated in areas the subject of Clearance Schemes prior to the rehousing of the tenants and, where necessary, took steps to prevent the reinfestation of the new houses by the transmission of vermin.

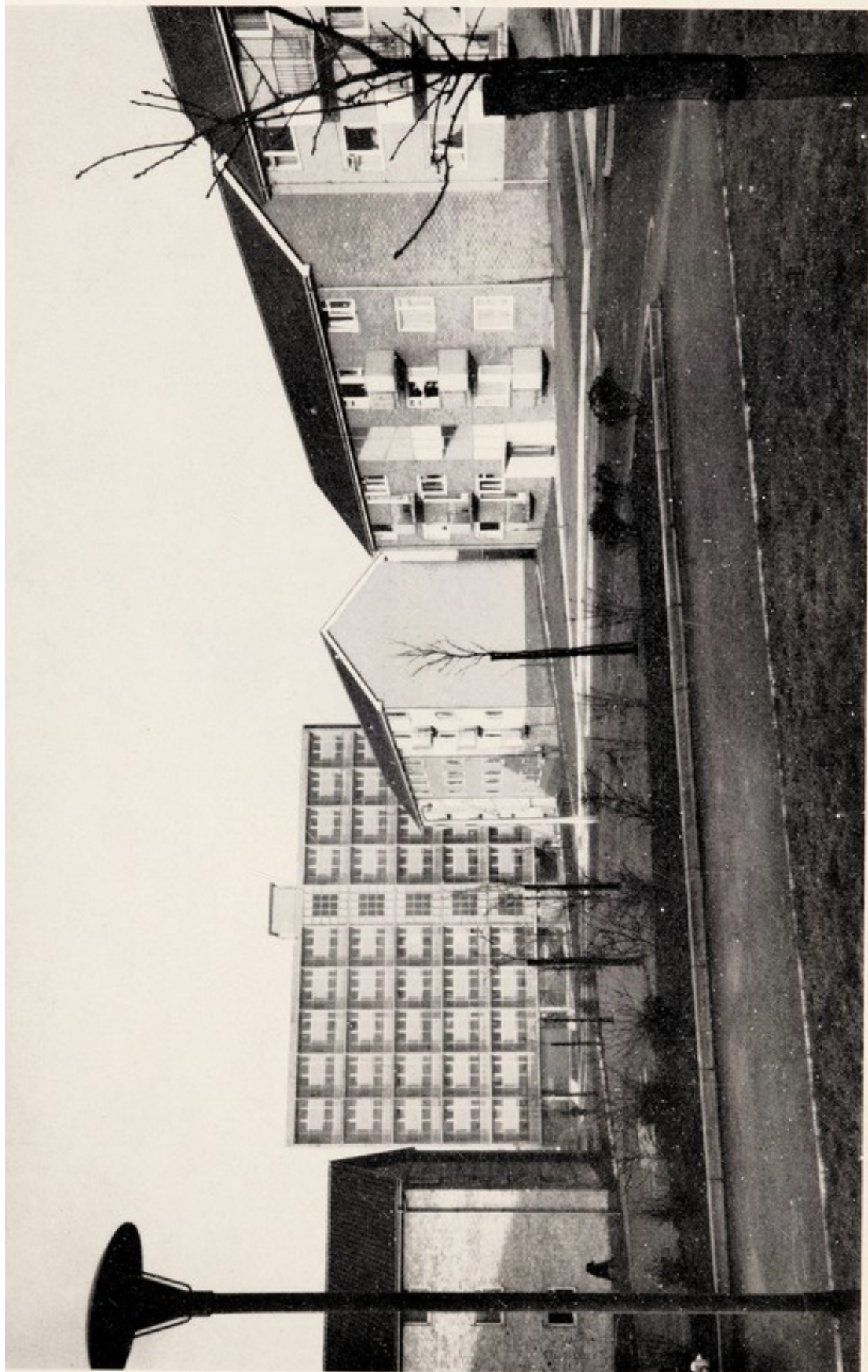


	1961	1960	1959	1958	1957
<b>INSPECTION OF DWELLING-HOUSES</b>					
Dwelling-houses inspected for housing defects under the Public Health or Housing Acts ..	5,263	6,135	6,201	7,696	8,225
Inspections made for the purpose ..	10,759	11,394	14,030	15,821	14,862
Dwelling-houses — included under sub-head above—which were inspected and recorded under the Housing Consolidated Regulations 1925 and 1938 ..	536	831	789	985	992
Inspections made for the purpose ..	2,990	3,925	4,326	5,229	5,891
Dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation ..	1,156	84	679	845	1,025
Dwelling-houses—exclusive of those referred to under the preceding sub-head—found not to be in all respects reasonably fit for human habitation ..	2,300	3,350	3,195	3,549	3,484
<b>INFORMAL ACTION</b>					
Defective dwelling-houses rendered fit in consequence of informal notices by the Local Authority or their officers ..	3,738	3,243	2,367	2,883	2,787
<b>ACTION UNDER STATUTORY POWERS</b>					
<b>1. Proceedings under Sect. 9, 10 and 12 of the Housing Act, 1957.</b>					
Dwelling-houses in respect of which notices were served requiring repairs ..	494	747	738	985	922
Dwelling-houses in which defects were remedied after service of formal notices:—					
1. By owners ..	450	598	666	725	684
2. By Local Authority in default of owners ..	111	103	122	164	161

	1961	1960	1959	1958	1957
<b>2. Proceedings under the Public Health Acts.</b>					
Dwelling-houses in respect of which notices were served requiring defects to be remedied .. .. .	715	1,132	939	780	428
Dwelling-houses in which defects were remedied after service of formal notices:—					
1. By owners .. .. .	524	769	643	185	302
2. By Local Authority in default of owners ..	337	524	283	359	119
<b>3. Proceedings under Sect. 17 of the Housing Act, 1957.</b>					
Dwelling-houses in respect of which demolition orders were made .. .. .	—	—	3	—	10
Dwelling-houses demolished in pursuance of demolition orders	5	—	6	5	12
Closing Orders made .. .. .	1	3	3	4	3







Redevelopment at Radford . . . .





. . . and at Sneinton





## SANITATION

The staffing position in the Chief Public Health Inspector's Department continued to be unsatisfactory with a staff deficiency of about one-third. This is a national problem and is likely to continue.

The Caravan Sites and Control of Development Act 1960 came into operation in August of that year and during 1961 five site licences were issued subject to conditions. In one case planning consent was refused after consultation with the Health Department and consequently, the granting of a site licence did not arise. There is no serious caravan problem in Nottingham as excellent control has been exercised for more than thirty years under a provision in a local Act.

The Public Health Act 1961, operated in part from October and brought into the general law provisions which have appeared in various private Acts of local authorities in recent years; several of those provisions were contained in local Acts of the City.

Further progress was made in smoke control, two further Orders being made by the City Council as follows:—

### **Nottingham No. 2 Smoke Control Order 1961.**

This involved the area of the City to the south of the River Trent and embraced Wilford, Clifton Village and the Clifton Estate—an acreage of 2,273.

### **Nottingham No. 3 Smoke Control Order 1961.**

This Order extended the No. 1 Area which has now satisfactorily operated for over twelve months. The extension is bounded by Lower Parliament Street, Canal Street, Castle Boulevard, Castle Road, Castle Gate, Albert Street, St. Peter's Gate, Bridlesmith Gate, High Street and Clumber Street, and covers 112 acres.

## 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 hose pipes for car washing and garden watering during the summer months.

Bacteriological analyses of supplies from each source were carried out monthly, and more frequently when considered necessary. Samples of water, both prior to and after treatment, were examined from those works where treatment was carried out. During the year 247 samples were taken and *B. Coli* was absent in 200 mls. of all treated water. Of these samples, 42 were of water which was not subsequently treated, and in no case was *B. Coli* present in less than 100 mls.

Consideration was given during 1961 to the advisability of increasing the frequency of sampling at each source for bacteriological purposes, and it is probable that a decision on this point will be made early in 1962.

During September, bacteriological examination of the water, as it left the consumer's tap, was commenced. For this purpose, ten samples were taken at random each week for the remainder of the year, and the results of the analyses of the 130 samples so obtained, which were carried out at the Public Health Laboratory, were uniformly satisfactory.

Chemical analyses were also made monthly from each source, and the extent and results of these examinations are indicated by the findings for the month of December 1961—see table.

The only water which had any plumbo-solvent tendency was the upland supply from The Derwent Valley Water Board, which provided about 25% of the needs of the water area. This tendency was 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, 1961, was 102,032, and the estimated population 313,280. All were supplied directly from the mains; four houses had no piped water supply.



Analyses from each source of supply													December, 1961	
	Basford Pumping Station	Bestwood Pumping Station	Boughton Pumping Station	Burton Joyce Pumping Station	Eastwood Filtration Works		Halam Pumping Station	Lambley Pumping Station	Markham Clinton 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 not treated	Water not treated	Water not treated	Water prior to treatment	Water after treatment	Water after treatment		
Total Solids dried at 180°C.	435.00	275.00	235.00	365.00	115.00	115.00	190.00	195.00	165.00	195.00	200.00	255.00		
Suspended Matter	Absent	Absent	Absent	Absent	Absent	Absent	Absent	Absent	Absent	Absent	Absent	Absent		
Chlorides as chlorine	42.60	28.40	35.50	14.20	14.20	14.20	14.20	14.20	14.20	21.30	24.85	21.30		
Oxidised Nitrogen as nitrate	11.53	6.59	5.59	0.21	0.41	0.41	0.82	1.44	0.41	3.10	2.44	3.71		
Oxidised Nitrogen as nitrite	0.002	Absent	0.004	Absent	0.002	0.001	Absent	0.002	Absent	Absent	Absent	Absent		
Free and saline Ammonia	0.004	0.012	0.004	0.008	0.028	0.004	0.004	0.004	0.004	0.004	0.008	0.004		
Albuminoid Ammonia	0.012	0.008	0.004	0.012	0.028	0.028	0.004	0.012	0.004	0.008	0.008	0.004		
Temporary Hardness	155.00	85.00	110.00	175.00	15.00	15.00	110.00	115.00	135.00	55.00	75.00	55.00		
Permanent Hardness	180.00	90.00	70.00	101.00	40.00	40.00	14.00	17.00	10.00	65.00	53.00	77.00		
Oxygen absorbed in 4 hrs. @ 80°F. from N/80 KmnO <sub>4</sub>	0.00	0.00	0.00	0.00	0.52	0.24	0.00	0.00	0.00	0.00	0.00	0.00		
pH value	7.50	7.80	7.90	7.50	6.90	7.10	8.00	7.90	8.10	8.20	8.10	8.00		
Appearance	*	*	*	*	*	*	*	*	*	*	*	*		
Odour	None	None	None	None	None	None	None	None	None	None	None	None		
Taste and Colour	Normal	Normal	Normal	Normal	Normal	Normal	Normal	Normal	Normal	Normal	Normal	Normal		
Heavy Metals	Absent	Absent	Absent	Absent	Absent	Absent	Absent	Absent	Absent	Absent	Absent	Absent		
Free Chlorine	Absent	Absent	Absent	Absent	Absent	Absent	Absent	Absent	Absent	Absent	0.10	0.10		
* Clear and bright														

\* Clear and bright

### SWIMMING BATHS

There were 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 36 samples of water was sent to the City Analyst for bacteriological test and all were satisfactory.

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

The water supply from the Tottle Brook to the children's paddling pool at Highfields Park proved to be unsatisfactory and the Public Parks Committee were advised to discontinue the use of the pool until such time as satisfactory samples could be obtained. The pool was therefore closed.

### 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 systems of main drainage.

The conversion of the majority will require large capital schemes and may have to await the general redevelopment of the areas in which they are located.

The main problems requiring attention are:—

- (a) The flooding of areas by watercourses of inadequate capacity—the first stage of the River Leen Improvement Scheme is scheduled to start in April 1962, the work to be carried out by the Trent River Board.
- (b) The inadequacy of certain of the main outfall sewers and the capacity of the main pumping station which deals with over one third of the sewage in the City.
- (c) The replacement of sewers which have become defective due either to mining subsidence and/or old age. A number of small schemes for the replacement of defective sewers are carried out each year.

Steady progress is being maintained on the improvement of the whole drainage system of the City, and with a start likely to be made this year on the improvement of the River Leen the major cause of flooding in the City should be alleviated.



### SEWAGE PURIFICATION

The purification of sewage from this City is carried out in a new aeration plant which also serves some 100,000 people of adjoining urban and rural districts. It has operated very successfully for four months of the year covered by this report.

Accumulated sludges are fermented in heated tanks before being irrigated on farm lands for drying and cultivation into the soil. Methane gas derived from fermentation processes is used in a power station which provides the electricity requirements of the works.

### 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 three workplaces to secure an improvement in the sanitary accommodation.

**Common Lodging Houses.** The two establishments in the City run by the Corporation and the Salvation Army respectively, were visited on occasions, and were satisfactorily conducted.

**Canal Boats.** The canals and other navigable waters within the City were visited on fourteen occasions and nineteen boats were inspected; there were no women or children aboard the 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 registration of one boat was cancelled during the year and the total number of boats now registered by the authority is 36.

**KNACKERY**

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

**THE RAG FLOCK AND OTHER FILLING MATERIALS ACT, 1951****THE RAG FLOCK AND OTHER FILLING MATERIALS  
REGULATIONS 1961**

Licences and registrations in force:—

Upholstery premises registered	..	..	29
Licences to store rag flock	..	..	2

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

	Action taken
Sample (No. 16) washed flock, alleged to be "woollen flock".	Description misquoted by upholsterer in error. Advised by inspector.
Sample (No. 20) rag flock, described as "black felt".	do.
Sample (No. 30) millpuff, described as "rag flock".	Letter from Chief Public Health Inspector to upholsterer.
Sample (No. 57) rag flock described as "layered felt".	Upholsterer advised by inspector.
Sample (No. 61) rag flock described as "woollen felt mixture".	Letter from Chief Public Health Inspector to manufacturers.



### MEASURES AGAINST RODENT AND INSECT PESTS

Refuse tips have been visited regularly during the year and treated as necessary. One tip was closed during the summer and no trace of rats could be found when the banks were finally sealed. Most infestations of rats and mice were controlled with little difficulty but one small colony was persistently troublesome. Reports that a colony of rats resistant to Warfarin poison had been found in Scotland led to the suspicion that this might be the cause of difficulty here. Several rats were trapped and submitted to the Ministry of Agriculture, Fisheries and Food for examination, and it was confirmed that a high degree of resistance existed. Alternative methods of control were then used in order to reduce the infestation.

There was a further decrease in the number of houses treated for the control of bed bugs and cockroaches but the invasion of domestic kitchens by garden ants showed yet another increase over previous years and requests for preventive treatment were particularly heavy during the spring and early summer.

Many insect specimens thought to be furniture beetles or bed bugs were submitted by householders for identification but in most instances they proved to be pests of foodstuffs or general scavengers, the location and treatment of which may be readily achieved. In several cases the invasion of bedrooms by beetles was associated with the presence of pigeons in roof spaces and control was achieved by the application of insecticide. In one instance large numbers of *tenebrio molitor* had penetrated to every room in the house.

Rodent and Insect Control	1961	1960	1959	1958	1957	1956
Properties surveyed ..	<b>6,241</b>	5,763	6,508	7,120	6,310	5,682
Infestations dealt with:						
rats .. ..	<b>1,288</b>	1,210	1,397	1,194	1,660	1,817
mice .. ..	<b>575</b>	543	487	466	536	678
insects .. ..	<b>1,230</b>	1,273	1,488	1,306	833	608
Total visits .. ..	<b>13,650</b>	14,195	15,453	17,694	17,426	14,839

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

Beetles			Miscellaneous		
Anobium punctatum ..	2		Bryobia praetiosa ..	1	
Attagenus pello ..	2		Chalcids ..	1	
Attagenus piceus ..	1		Ctenocephalides felis ..	1	
Calandra granaria ..	1		Ephestia lutella ..	1	
Cryptophagus spp ..	1		Leptopyslla segnis ..	1	
Enicmus minutus ..	1		Mining bees ..	9	
Gnathoceros cornutus ..	1		Springtails ..	1	
Lathridius nodifer ..	6				
Niptus hololeucus ..	2				
Cryzaepphilus mercator ..	3				
Cryzaepphilus surinamensis ..	1				
Ptinus tectus ..	4				
Rhyzopertha dominica ..	1				
Staphylinus olens ..	1				
Stegobium paniceum ..	9				
Tenebrio molitor ..	4				
Triboleum castaneum ..	1				
Triboleum confusum ..	2				
Flies			Larvae		
Drosophila spp ..	3		Calliphora erythrocephala ..	2	
Eristalis tenax ..	1		Ephestia elutella ..	1	
Pellenia rudis ..	1		Ephestia kuhniella ..	1	
Thaumatomyia notata ..	2		Fannia canicularis ..	1	
			Hofmannophila pseudopretella ..	1	
			Musca domestica ..	1	
			Fragments		
			Moth in bread		
			Moth in teacake		
			Moth larva in tinned plums		
			Moth webbing in bread		
			Honey bee in tinned peaches		
			Earwig in bread		



### HEATING APPLIANCES—FIREGUARDS ACT, 1952

During the course of visits to various shops eight heating appliances which did not comply with the requirements of the Act were found and were withdrawn from sale. These were electric heaters which were on display in second-hand shops.

All new equipment was found to be satisfactory.

### FACTORIES ACTS, 1937 TO 1961

#### 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 .. ..	173	11	1	—
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority .. ..	1,948	349	40	—
(iii) Other premises in which Section 7 is enforced by the Local Authority (excluding out-workers' premises) .. ..	—	5	—	—
TOTAL .. ..	2,121	365	41	—

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)	3	2	—	—	—
Sanitary conveniences .. (S.7):					
(a) Insufficient ..	—	1	—	—	—
(b) Unsuitable or defective ..	30	25	—	11	—
(c) Not separate for sexes ..	—	1	—	—	—
Other offences against the Act, (not including offences relating to outwork) ..	11	17	—	5	—
<b>TOTAL</b> ..	<b>44</b>	<b>46</b>	<b>—</b>	<b>16</b>	<b>—</b>

## PART VIII OF THE ACT

## OUTWORK

## SECTION 110.

Nature of work	No. of out-workers in August list required by Section 110 (1) (c)		
	1961	1960	1959
Wearing apparel, making, cleaning etc. ..	986	978	798
Household linen ..	40	48	34
Lace, lace curtains and nets ..	733	853	858
Curtains and furniture hangings ..	1	1	—
Nets other than wire nets ..	76	112	194
Paper bags ..	6	5	5
Carding, etc., of buttons, etc. ..	35	29	24
<b>TOTAL</b> ..	<b>1,877</b>	<b>2,026</b>	<b>1,913</b>

## SECTION 111.

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



## NOTICES

## INFORMAL

	1961	1960	1959	1958	1957
TOTAL NO. COMPLIED WITH ..	4,698	5,981	6,399	7,116	7,453

	Nuisances remedied				
	1961	1960	1959	1958	1957
Houses—filthy .. .. .	19	17	17	9	15
„ —verminous .. .. .	—	—	—	—	—
Drains—clearance of .. .. .	149	157	191	78	65
„ —repair of .. .. .	196	117	257	226	225
Panternpits—abolition of .. .. .	2	—	—	9	2
Additional water-closets—provision of .. .. .	33	24	4	9	4
Water-closets—clearance of .. .. .	34	43	11	59	19
„ —repair of .. .. .	716	853	1,425	1,086	1,030
Closets—cleansing of .. .. .	3	9	6	7	3
Courts, yards and passages—					
paving of .. .. .	—	1	1	10	2
cleansing of .. .. .	14	13	4	18	17
repair of .. .. .	232	262	343	299	168
Nuisance from pigs .. .. .	—	3	1	—	18
„ „ fowls .. .. .	2	2	5	5	5
„ „ other animals .. .. .	2	7	2	6	5
„ „ accumulation of refuse .. .. .	99	82	68	56	52
Dustbins—provision of .. .. .	768	876	1,027	1,406	1,933
Miscellaneous nuisances .. .. .	21	24	69	45	48
Tents, vans and sheds .. .. .	30	13	34	72	40
Houses-let-in-lodgings .. .. .	19	42	13	2	1
Factories with mechanical power .. .. .	36	54	34	5	3
„ without mechanical power .. .. .	—	2	2	6	2
Workplaces .. .. .	1	7	8	6	2
TOTAL .. .. .	2,376	2,608	3,520	3,419	3,659

	Defects in houses remedied				
	1961	1960	1959	1958	1957
Roofs .. .. .	1,292	1,753	1,492	1,847	1,652
Walls .. .. .	1,001	1,031	1,248	1,200	1,049
Floors and ceilings .. .. .	596	686	732	758	747
Windows .. .. .	994	1,262	1,331	1,187	1,025
Fireplaces .. .. .	225	268	295	256	275
Coppers .. .. .	5	4	11	21	36
Sinks provided .. .. .	75	59	28	30	19
„ —repair of .. .. .	110	149	191	189	155
Defective water pipes and fittings .. .. .	33	28	80	87	129
„ rainwater conductors .. .. .	972	964	653	1,303	879
Others .. .. .	1,279	1,815	1,967	1,420	843
TOTAL .. .. .	6,582	8,019	8,028	8,298	6,809
Number of defective houses dealt with .. .. .	2,500	3,371	3,144	3,719	3,632

## STATUTORY NOTICES

Enactment	Complied with				
	1961	1960	1959	1958	1957
<b>Public Health Act, 1936</b>					
Sect. 39 Drainage .. ..	285	419	364	315	239
„ 44 Inadequate closet accom- modation .. ..	8	8	7	5	2
„ 45 Closets .. ..	11	13	16	10	16
„ 56 Paving of courts, yards and passages, dwelling- houses .. ..	445	636	519	176	92
„ 75 Dustbins .. ..	199	323	342	316	610
„ 83 Dirty houses .. ..	—	—	2	6	—
„ 92 Houses .. ..	149	171	53	53	90
„ 287 Notice of entry ..	4	2	3	6	7
<b>Nottingham Corporation Act, 1923</b>					
Sect. 73. Repair of water-closets	89	164	272	210	194
<b>Nottingham Corporation Act, 1952</b>					
Sect. 72 Cleansing and repair of drains, water-closets, and soil pipes ..	138	148	130	92	60
„ 80 Repair of houses ..	3	4	—	—	—
<b>Housing Act, 1957</b>					
Sect. 9 .. ..	561	701	777	889	845
<b>TOTAL .. ..</b>	<b>1,892</b>	<b>2,589</b>	<b>2 85 .A</b>	<b>2,078</b>	<b>2,155</b>



Consequent upon the failure of owners to comply with statutory notices, the Corporation ordered work on private contractors and recovered expenses incurred in 558 cases as follows:—

ACT	1961	1960	1959	1958	1957
	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.
Nottingham Corporation Act, 1923, Section 73 ..	45 14 1	92 16 3	211 12 6	140 10 3	139 15 5
Nottingham Corporation Act, 1952, Section 72 ..	123 5 11	156 0 7	137 4 7	145 0 3	78 8 9
Nottingham Corporation Act, 1952, Section 80 ..	4 13 7	28 11 6	- - -	- - -	14 0 11
Housing Act, 1957, Sects. 9 and 10 ..	1,797 1 4	1,735 14 7	2,155 13 4	2,634 18 6	2,671 2 3
Public Health Act, 1936—Sect. 39 ..	173 11 9	211 19 11	159 14 8	281 16 8	255 12 2
" " " 44 ..	134 6 7	104 2 6	181 3 2	14 12 8	- - -
" " " 45 ..	15 15 10	4 3 0	4 16 0	6 0 3	18 19 1
" " " 56 ..	1,089 9 3	688 7 4	442 9 4	949 1 6	543 10 1
" " " 92 ..	- - -	- - -	2 9 1	- - -	- - -
	3,383 18 4	3,021 15 8	3,295 2 8	4,172 0 1	3,721 8 8

The cost of new dustbins supplied by the Corporation where owners or occupiers had not complied with notices served and where steps were taken to recover this amount was £154. 16s. 10d.

#### NUMBER OF INSPECTIONS OF HOUSES UNDER THE PUBLIC HEALTH AND HOUSING ACTS

	1961	1960	1959	1958	1957
First visits ..	10,759	11,394	14,030	13,963	12,593
Re-visits ..	11,519	13,771	14,862	16,945	17,526
TOTAL	<u>22,278</u>	<u>25,165</u>	<u>28,892</u>	<u>30,908</u>	<u>30,119</u>

## 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									
	1961	1960	1959	1958	1957	1956	1955	1954	1953
JAN. . .	0.70	0.66	0.47	0.38	0.82	1.04	1.82	1.64	1.63
FEB. . .	0.71	1.70	0.23	0.69	0.52	1.18	1.14	1.24	1.75
MAR. . .	0.70	0.42	0.82	0.62	0.56	—*	0.74	0.90	1.82
APRIL . .	0.45	0.33	0.73	1.41	1.17	0.97	1.23	1.25	1.07
MAY . . .	0.56	0.71	0.82	0.89	0.69	0.91	1.63	0.93	1.10
JUNE . . .	0.66	0.60	0.56	0.29	0.54	0.95	1.02	0.84	1.82
JULY . . .	0.83	0.38	0.38	0.49	0.75	0.96	1.05	1.05	0.94
AUG. . .	0.66	0.83	0.56	—*	0.43	0.72	1.06	1.09	0.56
SEPT. . .	0.57	0.60	0.52	0.61	1.38	1.25	0.86	0.91	0.89
OCT. . .	0.82	0.60	0.40½	0.56	1.06	0.79	0.85	1.23	1.13
NOV. . .	0.80	0.38	0.80	0.41	0.53	0.70	1.49	0.92	1.15
DEC. . .	0.82	0.43	0.70	0.53	0.77	0.84	0.87	1.23	1.18

\* No observations taken.

Observations and notices	1961	1960	1959	1958	1957	1956	1955	1954	1953
Half-hourly observations of chimneys . .	177	176	286	577	984	1,062	1,188	1,238	1,103
Total no. of minutes dense smoke emitted	123	120	158	424	786	995	1,337	1,347.5	1,382
Average no. of minutes of dense smoke per chimney . .	0.7	0.68	0.55	0.97	0.80	0.94	1.15	1.1	1.3
Intimation notices served	—	—	—	9	13	29	46	40	49
Advisory visits including verbal cautions . .	140	188	217	272	390	378	442	470	417
Statutory notices served	4	8	3	2	1	3	7	8	10
Complaints investigated . .	145	143	161	184	151	137	186	168	156
Cases where work was executed for smoke and/or grit nuisance abatement . .	20	27	27	25	39	34	41	37	33



## Nature and cost of work carried out by owners

	1961	1960	1959	1958	1957	1956	1955	1954	1953
Chimney stacks erected or extended ..	6	5	5	3	7	8	7	13	7
Chimney stacks dismantled ..	—	3	1	1	5	2	1	6	5
Boilers converted from hand to mechanical .. stoking ..	4	6	2	7	12	16	8	5	4
Mechanical stokers overhauled or renewed ..	14	11	15	11	7	7	4	9	5
New boilers installed ..	21	11	12	8	11	10	8	11	5
Grit arresting apparatus installed ..	1	3	3	2	4	—	2	3	2
Grit arresting apparatus repaired ..	—	—	—	—	—	—	—	2	12
Steam cranes replaced by diesel ..	—	—	—	—	—	—	—	2	—
Steam locomotives replaced by diesel ..	—	—	—	—	—	—	—	2	—
Conversion from coal to oil fuel or gas ..	7	6	10	13	6	10	—	3	—
Filters and scrubbers for nylon plant ..	—	—	—	—	—	—	—	1	—
Miscellaneous ..	6	7	2	6	8	9	20	5	—
Estimated cost to the owners ..	£113,350	£73,960	£66,715	£37,800	£131,090	£54,130	£42,035	£68,640	£38,050

## 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. All of the stations, with the exception of Bulwell, also have the volumetric apparatus for the daily determination of smoke or suspended matter and sulphur dioxide. The instrument in the City Centre was operated from the 1st September.

## 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. <sub>2</sub> per day per 100 sq.cm.
City Centre ..	202.21	24.97 : Jan.	16.85	5.25 : Dec.
Basford ..	301.12*	43.58 : Mar.	37.64	3.72 : Dec.
Bulwell ..	174.75	19.19 : Feb.	14.56	1.74 : Jan.
Clifton ..	112.56	12.43 : July	9.38	1.48 : Nov.
Meadows ..	251.18	34.72 : Feb.	20.93	5.82 : Dec.
Mapperley ..	120.62	16.24 : Feb.	10.05	2.20 : Feb.
Wollaton ..	92.96	11.84 : Jan.	7.74	3.05 : Dec.
Av. for City ..	179.34	—	16.74	—

\* 8 months results.

† For full details see pages 164 and 165.



### (b) Volumetric apparatus

MONTH	Concentration of smoke expressed as Microgrammes per cubic metre of air																	
	BASFORD			MEADOWS			MAPPERLEY			CLIFTON			WOLLATON			CITY CENTRE		
	High	Low	Av.	High	Low	Av.	High	Low	Av.	High	Low	Av.	High	Low	Av.	High	Low	Av.
JANUARY ..	730	190	390	670	80	300	590	70	240	380	10	130	540	40	170	—	—	—
FEBRUARY ..	520	130	280	590	40	170	400	50	170	360	10	6	570	20	110	—	—	—
MARCH ..	440	10	130	540	90	250	580	50	200	280	10	90	560	30	160	—	—	—
APRIL ..	530	50	120	390	20	120	300	30	90	200	—	40	350	10	70	—	—	—
MAY ..	220	20	102	320	20	112	210	30	79	150	10	49	170	10	62	—	—	—
JUNE ..	186	61	21	223	46	122	146	43	86	192	43	99	86	23	50	—	—	—
JULY ..	120	20	60	110	10	60	90	10	43	60	10	24	60	—	30	—	—	—
AUGUST ..	100	10	40	120	10	60	60	10	35	60	—	16	70	—	23	—	—	—
SEPTEMBER ..	230	10	65	240	10	72	330	20	75	90	10	31	200	—	45	201	30	73
OCTOBER ..	680	30	205	410	10	129	370	30	118	230	—	54	430	10	95	300	30	138
NOVEMBER ..	780	70	365	790	70	323	670	30	217	370	20	139	540	30	201	570	80	230
DECEMBER ..	1,576	212	561	1,080	48	371	832	96	344	652	20	182	724	36	286	844	120	347
AVERAGES ..	509	67	195	457	38	174	382	39	141	252	12	72	358	17	109	481	65	197

MONTH	Concentration of Sulphur Dioxide expressed as Microgrammes per cubic metre of air														
	BASFORD			MEADOWS			MAPPERLEY			CLIFTON			WOLLATON		
	High	Low	Av.	High	Low	Av.	High	Low	Av.	High	Low	Av.	High	Low	Av.
JANUARY ..	452	114	226	452	83	206	458	63	157	366	37	166	160	11	37
FEBRUARY ..	403	140	192	461	77	192	263	92	129	389	46	132	215	6	37
MARCH ..	738	129	226	283	83	189	686	92	189	269	83	154	172	6	66
APRIL ..	246	74	140	235	37	92	237	37	94	166	17	72	86	11	34
MAY ..	206	54	112	189	49	108	212	30	80	175	23	77	126	11	43
JUNE ..	200	20	74	270	10	70	140	20	54	110	—	25	140	10	48
JULY ..	160	60	96	140	52	88	146	37	76	203	23	96	103	11	42
AUGUST ..	163	52	99	266	66	108	143	23	65	215	14	68	74	26	41
SEPTEMBER ..	297	29	114	323	57	110	306	26	94	163	11	67	100	17	44
OCTOBER ..	358	72	169	272	37	141	317	20	117	200	11	91	126	11	48
NOVEMBER ..	523	83	231	658	43	241	558	63	193	555	6	166	246	29	91
DECEMBER ..	1,265	149	391	895	103	315	832	63	302	595	83	263	415	20	100
AVERAGES ..	418	81	173	354	58	155	358	47	130	284	30	115	164	14	53
													555	65	234



### **APPROVAL OF FURNACE INSTALLATIONS**

The provisions of Section 3 of the Clean Air Act, 1956 made 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 sixteen cases notices of proposals to install were received and eight plans and specifications were submitted and approved.

All 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.

### **Smoke Control Areas**

The Nottingham (No. 2) Smoke Control Order, 1961, was made by the City Council on the 12th June and the Nottingham (No. 3) Smoke Control Order, 1961 was made on the 4th December. Both Orders are awaiting confirmation by the Minister.

## HOLME PIERREPONT

### PROPOSAL TO ERECT A POWER STATION

Early in 1960 it became known that the Central Electricity Generating Board were planning to erect a new power station close to the small village of Holme Pierrepont on the south side of the Trent, about  $2\frac{1}{2}$  miles from the City of Nottingham.

In due course, a public enquiry was held and at the enquiry the following facts emerged.

The Board's application was for consent to erect a 2,000 megawatt power station which would burn five million tons of coal annually, from which there would be one million tons of ash. The Board considered that, in due course, the station could be duplicated on the same site.

**The Buildings.** Four unit type sets of 550 mega-watts, each having one boiler, one turbo-alternator and ancillary plant, were to be housed in one boiler house (900 ft. long x 190 ft. wide x 200 ft. high) and a turbine house (900 ft. x 200 ft. x 120 ft.).

Waste products from the furnaces would pass through mechanical arrestors and electrostatic precipitators and the resulting gases would be discharged into the atmosphere through two stacks, each 650 ft. high. At full load they would emit at an exit velocity of 35 miles an hour.

A total of 8 cooling towers would each be 370 ft. high with a basal diameter of 300 ft. and a top diameter of 200 ft. The amount of water to be extracted daily from the river Trent would, at full load, be twelve and a half million gallons.



**The Board's declared requirements.**

1. Large quantities of water for cooling purposes, to be available under all weather conditions;
2. Satisfactory foundation conditions, having in mind the great weight of large generators and boilers;
3. A flood-free level site of 500 acres;
4. Proximity to suitable coal supplies;
5. Good rail communications for the disposal of ash;
6. Minimal transmission lines to connect with the existing Grid system.
7. Absence of interference with aircraft.

It was considered that Holme Pierrepont therefore offered a good site as

- (a) it was strategically situated to take a large tonnage of coal from the Nottinghamshire coalfields;
- (b) it lay close to the river Trent;
- (c) the foundation conditions and levels were admirable;
- (d) only three comparatively short overhead transmission lines were necessary to connect with the Grid;
- (e) main water supply was available;
- (f) road access was easy;
- (g) an area for disposal of a limited amount of fly ash adjoined the site.

The Board claimed that the power station could be operated so that no material increase in atmospheric pollution would be caused at ground level, due to temperature inversion fog, because of the height of the chimneys and the exit velocity of the effluent gases.

**The City Council reply.** Endeavours had been made to reduce atmospheric pollution by the establishment of smoke control areas and by the proposal to make the greater part of the City, in due course, a smoke controlled area. Emissions of smoke from factory chimneys had been reduced and bye-laws had been enforced to require all new heating appliances to be capable of burning smokeless fuel.

In the case of the existing North Wilford Power Station, commenced in 1919, and now the property of the Central Electricity Generating Board, no improvement had, however, been effected, though repeated complaints of the emission of grit and dust had been received and deposits of grit had been found over two miles from the station.

It was claimed that though the prevailing wind was that coming from the south-west, winds from the south-east would, nevertheless, carry considerable smoke and grit over the City, the centre of which was only  $2\frac{1}{2}$  miles distant.

Emphasis was laid on the association between the incidence of respiratory disease, especially bronchitis.

The Council's witnesses would not accept the view that any increase to existing atmospheric pollution would be negligible.

The City's case from the medical viewpoint was supported by the President of the Nottinghamshire Branch of the British Medical Association, a consultant physician who stated,

..... "The Branch representative of 560 members of the medical profession of the City and County of Nottingham, has learned with grave concern of the proposal ..... to establish a mammoth power station in close proximity to the densely populated area of the City ....."

"....."

"Convinced that an increase in atmospheric pollution is inevitable, the Branch gives the fullest support to the official view that under no circumstances should a population of over half a million be exposed to a risk which is equally unjustified and unnecessary".

The Chairman of the Local Medical Committee, a general practitioner, averred similarly.



"I have followed with increasing dismay the press statements of the proceedings so far. I recently attended an extraordinary meeting of the Notts. Branch of the British Medical Association, called to consider the facts of this proposal and I have read the entire evidence given before the enquiry of the Medical Officer of Health of the City".

"The effect, and I am aware that I speak for a majority of the medical profession, will be to increase, in no small measure, the already intolerable amount of air pollution in the City and adjacent suburban areas".

". . . . . the claim that the new power station will create no nuisance . . . . . is untenable and . . . . . the only way of preventing added pollution over a large and densely populated area is to ensure that the station is never built."

Further, a general practitioner engaged in an area threatened by the potential pollution, and whose practice already included almost 50 people with advanced chronic bronchitis, gave detailed support.

The outcome of the enquiry was published in June 1961 and the appeal of the Central Electricity Generating Board was disallowed. The final decisions were:—

- (a) not to consent to the erection of the proposed station, and
- (b) not to confirm the Central Electricity Generating Board (Holme Pierrepont) Compulsory Purchase Orders Nos. 1 and 2, 1960, which relate to the land concerned with the application.

# 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 ..	16.80	8.17 24.97	31.01	8.40 39.41	11.96	5.34 17.30	22.94	9.10 32.04	8.50	3.97 12.47	8.34	3.50 11.84	5.71	3.51 9.22
February	17.22	7.41 24.63	33.18	7.50 40.68	14.55	4.64 19.19	25.38	9.34 34.72	11.34	4.90 16.24	7.30	3.73 11.03	5.24	3.55 8.79
March ..	10.14	3.69 13.83	38.68	4.90 43.58	8.55	2.55 11.10	10.07	3.50 13.57	5.90	2.13 8.03	5.47	2.00 7.47	6.89	1.96 8.85
April ..	16.67	6.91 23.58	29.77	7.90 37.67	11.83	5.34 17.17	19.90	8.37 28.27	7.30	4.20 11.50	5.83	4.44 10.27	5.47	4.74 10.21
May ..	10.47	3.46 13.93	35.22	4.92 40.14	11.17	2.75 13.92	10.97	4.20 15.17	4.53	2.57 7.10	2.53	1.90 4.43	6.11	2.84 8.95
June ..	10.04	3.47 13.51	20.21	5.60 25.81	12.00	3.08 15.08	10.00	3.73 13.73	8.80	1.73 10.53	4.67	2.40 7.07	8.17	2.16 10.33
July ..	11.13	5.07 16.20	31.11	10.74 41.85	11.66	4.18 15.84	13.10	4.90 18.00	6.90	3.37 10.27	2.80	3.20 6.00	8.88	3.55 12.43
August ..	8.53	5.53 14.06	22.48	9.50 31.98	9.31	4.84 14.15	11.14	6.07 17.21	5.71	3.63 9.34	4.00	2.33 6.33	5.54	3.31 8.85
September	9.91	3.69 13.60	APPARATUS		7.75	3.48 11.23	12.54	4.44 16.98	5.87	2.13 8.00	5.30	1.87 7.17	5.20	2.36 7.56
October	8.10	8.04 16.14	OUT OF		10.24	5.30 15.54	13.01	7.00 20.01	6.27	3.50 9.77	4.60	3.07 7.67	4.93	2.84 7.77
November	11.23	5.99 17.22	ORDER		7.62	5.37 12.99	13.10	7.94 21.04	5.64	4.20 9.84	4.04	3.03 7.07	6.69	4.12 10.81
December	6.62	3.92 10.54			4.74	6.50 11.24	12.04	8.40 20.44	3.80	3.73 7.53	2.17	4.44 6.61	3.82	4.97 8.79
Total ..	136.86	65.35 202.21	241.66	59.46 301.12	121.38	53.37 174.75	174.19	76.99 251.18	80.56	40.06 120.62	57.05	35.91 92.96	72.65	39.91 112.56



## 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 ..	3.90	2.66	1.74	4.17	1.79	0.92	1.22
February ..	3.32	2.40	1.63	3.70	2.20	0.82	1.09
March ..	3.86	2.25	1.44	3.73	1.79	0.79	1.34
April ..	2.13	1.35	0.83	2.14	0.80	0.50	0.58
May ..	2.12	1.18	0.96	2.08	0.67	0.75	0.80
June ..	1.88	0.83	0.77	2.35	0.74	0.46	0.65
July ..	1.73	0.56	0.54	1.91	0.55	0.36	0.55
August ..	1.78	0.61	0.56	2.35	0.58	0.36	0.48
September ..	1.82	0.69	0.76	2.01	0.73	0.28	0.37
October ..	3.05	0.95	1.00	2.93	0.84	0.42	0.80
November ..	2.12	1.03	1.50	4.21	1.29	0.96	1.48
December ..	5.25	3.72	1.18	5.82	1.86	3.05	1.14

Case No.	Age	Sex	Occupation	Onset	Duration	Course	Result	Remarks
1	25	M	Farmer	1915	10 years	Chronic	Recovered	
2	30	F	Housewife	1916	5 years	Chronic	Recovered	
3	35	M	Teacher	1917	3 years	Chronic	Recovered	
4	40	F	Shopkeeper	1918	2 years	Chronic	Recovered	
5	45	M	Engineer	1919	1 year	Chronic	Recovered	
6	50	F	Librarian	1920	6 months	Chronic	Recovered	
7	55	M	Lawyer	1921	4 months	Chronic	Recovered	
8	60	F	Retired	1922	3 months	Chronic	Recovered	
9	65	M	Physician	1923	2 months	Chronic	Recovered	
10	70	F	Widow	1924	1 month	Chronic	Recovered	
11	75	M	Retired	1925	1 month	Chronic	Recovered	
12	80	F	Widow	1926	1 month	Chronic	Recovered	
13	85	M	Retired	1927	1 month	Chronic	Recovered	
14	90	F	Widow	1928	1 month	Chronic	Recovered	
15	95	M	Retired	1929	1 month	Chronic	Recovered	
16	100	F	Widow	1930	1 month	Chronic	Recovered	
17	105	M	Retired	1931	1 month	Chronic	Recovered	
18	110	F	Widow	1932	1 month	Chronic	Recovered	
19	115	M	Retired	1933	1 month	Chronic	Recovered	
20	120	F	Widow	1934	1 month	Chronic	Recovered	

Case No. 10 is representative of the group of cases in which the disease is of long duration and the patient is of advanced age. The disease is of long duration and the patient is of advanced age.

### WATERBURY, MASS.

Received for publication June 1, 1917. Accepted for publication July 1, 1917.



**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**

**NURSES AGENCIES ACT 1957**

**NURSING HOMES**

**NOTTINGHAM CREMATORIUM**

**MORTUARY**

**SICKNESS RETURNS—MINISTRY OF NATIONAL  
INSURANCE**

**ULTRA VIOLET RAY CLINIC**

## ADMINISTRATION

**Staff.** The year saw little change in the high rate of turnover amongst the clerical staff. There were 14 resignations balanced by 14 appointments, which resulted in there being 3 vacancies remaining unfilled, one more than at the end of 1960, as the establishment was increased by one for work in connection with Smoke Control Areas.

Of those who resigned, 10 were female and 4 male. The female staff resignations included two due to pregnancy and two for other domestic reasons. The pattern of the other resignations was less well defined than last year. Three of the staff entered the service of Hospital Management Committees, two entered commercial life, two joined other Local Authorities, one took up banking as a career, one commenced training as a teacher, and one shorthand typist accepted an invitation to resign.

**Accommodation.** The room provided for the staff was welcomed as a first step in improving the amenities at Huntingdon House. It was completely redecorated by members of the staff in their own time and afforded relief to some of those who had packed lunches and who formerly had only their offices in which to relax at lunch time.

The recurrent unfavourable financial climate had its effect upon the proposals for the new Health Services Headquarters. No progress whatsoever was made and indeed the project was deferred for another year. There is no prospect of any active steps being taken before the end of the financial year 1962/63.

**Finance.** In accordance with the Financial Regulations of the City Council, the Health Committee's Capital Building programme for 1962/63 was submitted to the Finance Committee in



November. As well as the Headquarters mentioned in the preceding paragraph, three other projects were included for approval.

Although no capital expenditure had been authorised for Health Committee purposes, apart from Ambulance Stations, since 1956, the whole of the Committee's programme was deferred for yet another year with the exception of the proposal—to be reconsidered later—to build a Welfare Centre in the Radford area of the City.

In order to find out the relative position, a review was undertaken of capital and revenue expenditure on certain of the Committees of the City Council during the 10 year period from 1st April 1951 to 31st March 1961. The total expenditure involved for these Committees during this period was £8,880,184 in respect of capital, and £60,506,580 for revenue.

The percentages relate to the total expenditure on the services of the Committees mentioned in the table, not to the total expenditure of the Corporation as a whole.

<i>Revenue Expenditure %</i>	<i>Committee</i>	<i>Capital Expenditure %</i>
61.6	Education	78.6
10.4	Watch	.2
8.7	Health	1.6
3.6	Parks	3.0
3.4	Sewage Disposal	11.6
2.6	Welfare Services	1.3
2.1	Fire Brigade	.6
1.9	Children	.2
1.8	Public Libraries	1.4
1.8	Lighting	.5
1.6	Public Baths	.7
.5	Art Galleries and Museums	.3
<hr/> 100.0 <hr/>	TOTALS	<hr/> 100.0 <hr/>

## 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 concerned with his welfare.

	Local Education Authority	Mental Health Services	Welfare Services	Others	TOTAL
Cerebral Palsy ..	25	56	29	23	133
Epilepsy ..	101	110	31	14	256
Cerebral Palsy and Epilepsy..	4	19	—	—	23

## ESTABLISHMENTS FOR MASSAGE OR SPECIAL TREATMENT

The licences of twenty establishments were renewed during the year under the Nottingham Corporation Act, 1952, and one application for initial licensing of premises was approved. Certificates of exemption were received in respect of 7 registered members of either 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 ..	26	5	—	20
(b) Treatment (medical, surgical or optical)	22	3	—	9
(2) Cases at (1) (b) above which on follow up action have received treatment ..	13	3	—	8
<b>Partially-Sighted</b>				
(1) Cases registered during the year in respect of which para. 7(c) of Forms B.D.8 recommends :				
(a) No treatment ..	4	—	—	3
(b) Treatment (medical, surgical or optical)	10	3	—	7
(2) Cases which received follow up treatment ..	6	3	—	7
Number of blind persons on register at 31st December ..				710
Number of partially sighted persons on register at 31st December ..				123

**Ophthalmia Neonatorum**

There were no cases of impairment of sight.

### **NATIONAL ASSISTANCE ACTS 1948—1951**

Since the implementation of the Act, no person had ever been compulsorily removed.

The homes of four elderly people who had allowed themselves to deteriorate were visited by a Senior Medical Officer and the Organiser of the Home Help Service. They were found to be bad and subsequently a public health inspector made the necessary arrangements for disinfestation and cleansing.

Relatives, neighbours and the Home Help Service assisted with shopping, cooking and housework. Following recommendation by the Health or Welfare Department, the Women's Voluntary Service provided hot meals to those in need; through lack of cooking facilities the meals were only available twice weekly, but expansion of this service was anticipated in the near future.

In addition, gifts of clothing were received from private individuals and from voluntary bodies.

### **NURSING HOMES**

One licence was surrendered so that at the end of the year five homes were in existence, one of which had 10 maternity beds; the remainder provided between them forty beds for medical and surgical cases.

The homes were regularly inspected by a medical officer and the maternity home was also visited by the Supervisor of Midwives.

### **NURSING AGENCIES**

The licences of two nursing agencies, originally granted in 1945, were renewed in December. There were fifteen state registered nurses, one state certified midwife and three enrolled nurses on the registers.



## NOTTINGHAM CREMATORIUM

From the table it will be seen that the total number of cremations increased, despite the opening of a crematorium at Mansfield, indicating that an increasing number of City residents chose this means of disposal. The greatest number of cremations took place in January and February, and the fewest during the summer months with a subsequent increase in November and December. This followed the experience of the previous year.

The numbers for the past 10 years are given:—

Year	ALL CREMATIONS		CREMATIONS OF CITY RESIDENTS		
	No.	Alteration from previous year	No.	Alteration from previous year	Percentage of all City deaths
1952 ..	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%	49·2%
61 ..	3,796	+ 3·8%	1,944	+ 14·9%	52·7%

**Cremation and Residence**

PLACE OF RESIDENCE	NO. OF CREMATIONS				
	1961	1960	1959	1958	1957
City .. .. .	1,944	1,692	1,731	1,619	1,477
County excluding West Bridgford ..	1,279	1,388	1,694	1,686	1,378
West Bridgford .. .. .	236	222	179	206	179
Other areas .. .. .	337	356	368	456	447
<b>TOTAL .. .. .</b>	<b>3,796</b>	<b>3,658</b>	<b>3,972</b>	<b>3,967</b>	<b>3,481</b>

**MORTUARY**

The number of bodies received at the mortuary in Canal Street was 530, and autopsies to determine the cause of death were performed there on 500 of them. The corresponding figures for 1960 were 439 and 425.

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

As the area in which the mortuary is situated forms part of a valuable development site, consideration was given during the year to the location of alternative accommodation, and it was felt to be most desirable to establish joint mortuary facilities with a local general hospital. At a meeting between representatives of the Health Committee and the appropriate Hospital Management Committee, this suggestion was favourably received.



## 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					
	1961	1960	1959	1958	1957
JANUARY ..	3,241	1,512	1,708	2,209	1,315
FEBRUARY ..	2,130	1,563	2,541	1,669	1,332
MARCH ..	1,176	1,392	1,528	1,395	1,343
APRIL ..	1,045	1,192	1,117	1,066	1,004
MAY ..	995	1,161	940	903	1,069
JUNE ..	1,024	909	926	964	863
JULY ..	892	826	869	880	846
AUGUST ..	807	867	847	749	825
SEPTEMBER ..	1,031	1,074	1,047	1,009	2,438
OCTOBER ..	1,418	1,326	1,275	1,233	3,666
NOVEMBER ..	1,277	1,292	1,331	1,339	1,569
DECEMBER ..	1,363	1,195	935	1,120	1,511

## RESPIRATORY INFECTIONS

NOTIFICATIONS OF PNEUMONIA												
	Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.
1961 ..	54	73	15	15	8	4	2	2	3	2	9	8
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
1961* ..	76	302	196
1960 ..	9	242	209
1959 ..	57	298	193
1958 ..	32	322	173
1957 ..	56	248	181
1956 ..	17	269	192

\* Provisional

## ULTRA VIOLET RAY CLINIC

## SUMMARY OF THE WORK

	1961	1960	1959	1958	1957	1956	1955
Cases brought forward ..	518	542	551	299	281	237	201
New cases ..	225	277	328	353	355	380	432
Total treated	743	819	879	652	636	617	633
City patients ..	736	813	873	649	632	600	604
County patients	7	6	6	3	4	17	29
	743	819	879	652	636	617	633
Adult patients male ..	194	241	302	195	192	175	190
Adult patients female ..	404	417	468	325	313	312	300
Patients 5-15 yrs.	114	117	77	98	101	93	80
Patients 0-5 yrs.	31	44	32	34	30	37	63
	743	819	879	652	636	617	633
Cases discharged or ceased to attend ..	310	301	337	101	337	336	396
Cases carried forward ..	433	518	542	551	299	281	237
	743	819	879	652	636	617	633
No. of treatments:							
total given ..	9,804	11,445	12,897	13,270	12,395	11,313	13,238
average per patient ..	13.2	14.0	14.7	20.3	19.5	18.3	20.9



## PART V

### HEALTH COMMITTEE

” ” STAFF

” ” REPORT TO THE CITY  
COUNCIL

### FINANCIAL SUMMARY

**HEALTH COMMITTEE**  
**1961**

LORD MAYOR:

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

CHAIRMAN:

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

VICE-CHAIRMAN:

COUNCILLOR N. A. HEWARD

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

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

COUNCILLOR G. W. FISHER

COUNCILLOR MRS. S. F. M. HUNTER

COUNCILLOR D. R. JACKSON

COUNCILLOR B. A. MORLEY

COUNCILLOR MRS. O. MOSS

COUNCILLOR H. W. PECK

COUNCILLOR A. S. SHELTON, J.P.

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

COUNCILLOR MRS. M. WHITTAKER

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—

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

### Senior Medical Officers—

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

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

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

### Senior Assistant Medical Officers—

N. MERCY PLOWRIGHT, M.B., Ch.B., D.C.H., D.P.H. To 28.2.61.

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

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

DAVID J. HOSKING, M.B., B.S., D.P.H. From 1.5.61 to 30.9.61.

### 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.

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

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

### 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*—MRS. N. J. DEAKIN. To 2.12.61.

† 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 P. J. LAMBERT, S.R.N., R.F.N., S.C.M., M.T.D., H.V., Q.N.*Assistant Supervisor*—MISS N. ANTILL, S.R.N., S.C.M., M.T.D.

From 1.9.61.

*Midwives*—42 Full-time.

5 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 .. .. 29

,, Part-time .. .. 2

Tuberculosis .. .. 6

Students .. .. 4

**Day Nurseries***Supervisor*—MISS K. THOMPSONBULWELL .. .. *Matron*—MRS Y. CHAPMAN, C.N.N.*Nursery Nurses*—5*Warden* —1DOWSON .. .. *Matron*—MRS. P. BATES, C.N.N.*Nursery Nurses*—5*Warden* —1HEATHCOAT STREET .. *Matron*—MISS M. R. M. DALE, C.N.N.*Nursery Nurses*—5*Warden* —1PIERREPONT .. .. *Matron*—MISS E. I. WALKER, R.S.C.N.*Nursery Nurses*—5*Warden* —1QUEEN'S DRIVE .. .. *Matron*—MRS. E. MACKINTOSH, S.R.N., S.C.M.*Nursery Nurses*—5*Warden* —1RADFORD .. .. *Matron*—MRS. M. A. R. NAYLOR, S.R.N.*Nursery Nurses*—5*Warden* —1SYCAMORE 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.

MISS M. H. WILLIAMS.

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

**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 Superintendents*—

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

MISS J. K. GIBSON, S.R.N., S.C.M., Q.N. From 1.11.61.

*Home Nurses*—63 — Full-time.

4 — Part-time.

**Home Help Service—***Organiser*—MRS. L. E. GRAY.*Deputy Organiser*—MRS. M. E. JILLINGS. From 26.4.61.*District Organisers*—

MRS. S. M. KLYMKO, B.Sc. To 16.6.61.

MRS. E. COLE. To 31.7.61.

MRS. E. M. CRICH.

MISS M. PALMER. To 31.5.61.

MISS L. ELLIOTT. From 17.6.61.

MRS. R. SMITH. From 1.8.61.

MRS. N. D. YOUNG. From 1.6.61.

*Case Workers* — 8.*Home Helpers*—Full-time. —146.

—Part-time. —324.

**Mental Health Service—***Mental Health Officer*—J. E. WESTMORELAND, M.B.E.*Deputy Mental Health Officer*—G. E. HIBBARD.*Senior Social Worker*—MISS M. PIMLOTT.*Social Workers*—4\**Mental Welfare Officers*—6.

" " Assistant—1.

*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 47.

—Part-time 22.

**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*—21.,, ,, ,, *Trainees* — 5.*Smoke Inspector*—1.*Technical Assistants*—2.*Woman Housing Officers*—4.**Ambulance Service—***General Manager*—B. ENGLAND, M.I.Mech.E., M.Inst.T.*Chief Ambulance Officer*—C. G. DEWEN, A.I.A.O., 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>	..	..	..	16	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



HEALTH REPORT 1961

# REPORT

OF THE

HEALTH COMMITTEE

TO THE

CITY COUNCIL

## AS TO THE ESTABLISHMENT OF A SMOKE CONTROL AREA IN THE CITY OF NOTTINGHAM SOUTH OF THE RIVER TRENT.

### THE HEALTH COMMITTEE

Beg to report

That on the 22nd September 1959 the Council approved proposals for establishing smoke control in the City Centre and on the western side of the City. The Nottingham (No. 1) Smoke Control Order 1959 which the Council then made was confirmed by the Minister of Housing and Local Government on the 6th May 1960 and became operative on the 1st December 1960. This Order covers part of the City Centre and your Committee will shortly be submitting proposals for establishing a smoke control area in the remainder of the City Centre.

Meanwhile, a detailed survey has been carried out of an area which your Committee recommend should form the first part of a large smokeless area on the western side of the City. As the prevailing wind is from the south-west, a smoke control area here will benefit not only the area itself but, in some degree, the rest of the City.

The area surveyed consists of the whole of the City lying south of the River Trent. This is an area of 2,273·8 acres and contains the following premises:—

Industrial premises	..	..	..	..	6
Commercial premises	..	..	..	..	77
Dwellinghouses	..	..	..	..	7,550
Other premises	..	..	..	..	32
Total	..	..	..	..	<u>7,665</u>

This area includes the Clifton Estate, where all premises already burn only smokeless fuels.



In the case of dwellinghouses whose construction was commenced before the 5th July 1956 (the date of the passing of the Clean Air Act 1956) the Corporation will be liable to meet part of the expenditure (in most cases 70%) necessary to adapt the dwelling or its fireplaces to avoid contravention of the Smoke Control Order. Most of the houses built since this date are already fitted with smokeless appliances following an amendment to the building byelaws which came into force on the 1st December 1957.

For this work a government grant is payable to the Corporation, so that ultimately 30% of the cost will be borne by the owner or occupier, 30% by the Corporation and 40% by the Exchequer.

The estimated cost of adaptations to the 601 dwellinghouses in the area which will qualify for grant is £10,053. 13s. 0d., and allowing for Exchequer contribution, the nett cost to the Corporation (including an owner's share in respect of 35 Corporation-owned houses) will be £3,331. 1s. 0d. In addition, the Corporation may, at discretion, meet the whole or part of the owners' or occupiers' share of the cost, and your Committee will deal with applications for assistance on their merits.

In the case of premises other than dwellinghouses, the responsibility for adaptations will rest with the owner or occupier of the building, depending on the terms of the tenancy and the nature of the work required.

In proper cases the Corporation have power to meet the whole or part of the cost of the adaptations required in churches, chapels and certain buildings used by charities etc. Your Committee propose to exercise this power in cases where hardship would otherwise arise.

A smoke control order normally prohibits the emission of smoke except any small quantity that may be emitted by authorised fuels such as coke, anthracite and gas. Paper and sticks are not authorised fuels, and any smoke emitted by them when a fire is being lit would contravene the smoke control order. Accordingly, it is usual when installing a grate to burn smokeless fuel to provide gas ignition, and grant is payable on this expenditure. In addition to being smokeless, gas is, of course, a very convenient method of fire lighting, particularly when coke is burnt. There are in the area 158 dwellinghouses which have no gas supply. In 32 cases it would be uneconomic to provide a gas supply and in 64 other cases the occupier has stated that for personal reasons he does not wish to have a gas supply installed. Your Committee propose that special provision should be made to permit kindling sticks and paper to be used at these houses. These houses are listed in the schedule to the Smoke Control Order set out in the appendix to this report, but cannot be shown on the accompanying small scale plan. A smoke control order cannot come into operation less than six months after its confirmation by the Minister of Housing and Local Government; your Committee propose that the Order relating to this area should come into force on the 1st May 1962.

Accordingly, it is now recommended that a Smoke Control Order be made in the form set out in the appendix to this report, that the Common Seal be affixed to the necessary documents and that the Town Clerk be authorised to take all necessary steps in the matter.

Dated this 2nd day of May, 1961.

ERNEST PURSER,

CHAIRMAN.



THE CLEAN AIR ACT, 1956.

NOTTINGHAM (NO. 2) SMOKE CONTROL ORDER, 1961.

THE LORD MAYOR ALDERMEN AND CITIZENS OF THE CITY OF NOTTINGHAM (hereinafter called "the Corporation") in exercise of the powers conferred on them by section 11 of the Clean Air Act, 1956 HEREBY MAKE the following order:—

1. This order may be cited as the Nottingham (No. 2) Smoke Control Order, 1961.

2. The area which is coloured green on the map prepared in duplicate, sealed with the Common Seal of the Corporation and marked "Map referred to in the Nottingham (No. 2) Smoke Control Order 1961" is hereby declared to be a smoke control area. One copy of the said map is deposited at the Town Clerk's Office, Guildhall, Nottingham, and the other is deposited in the offices of the Minister of Housing and Local Government.

3. The fireplaces in the area which are specified in the schedule hereto shall be exempted from the operation of the said Section 11 upon the conditions specified in respect thereof in the said Schedule.

4. This Order shall come into operation on the first day of May, 1962.

SCHEDULE

FIREPLACES.

<i>Description</i>	<i>Conditions</i>
Fireplaces in the following buildings shown coloured red on the map:—	Only authorised fuels as declared by regulations under the Clean Air Act 1956 and kindling sticks and paper shall be used in the fireplaces.
63 Ruddington Lane	
85 Ruddington Lane	
109 Ruddington Lane	
125 Ruddington Lane	
133 Ruddington Lane	
88 Ruddington Lane	
214 Ruddington Lane	
224 Ruddington Lane	
238 Ruddington Lane	
10 Holly Avenue, Wilford.	
32 Clifton Lane.	
32a Clifton Lane.	
The Caravan Cafe, Clifton Lane.	
Brick Hill Spinney Bungalow, Clifton Lane.	

## FIREPLACES.

<i>Description</i>	<i>Conditions</i>
Brick Hill Spinney Cottage, Clifton Lane.	Only authorised fuels as declared by regulations under the Clean Air Act, 1956 and kindling sticks and paper shall be used in the fireplaces.
The Four Winds, Clifton Lane.	
The Forge, Glapton Lane.	
The Almshouses, Clifton Village.	
Blossom Cottage, Clifton Village.	
Nether Gate Farm, Clifton Village.	
Burrows Farm, Clifton Village.	
The Kennels, Clifton Village.	
Garden House (F. W. Farley), Clifton Village.	
Garden House (W. Hunt), Clifton Village.	
Garden House (M. Byrne), Clifton Village.	
Home Farm House, Clifton Village.	
Old Stables, Clifton Village.	
The Cottage (J. Murden), Clifton Village.	
Cottage (Mrs. Marshall), Clifton Village.	
The Grove Farm, Clifton Village.	
Glebe House, Clifton Village.	
Grove Bank, Clifton Village.	
Hallfield Farm, Clifton Village.	
Cottage (next to Hallfield Farm), Clifton Village.	
Cottage (Mrs. Corcoran), Clifton Village.	
The Old Rectory, Clifton Village.	
Gardener's Cottage (adjoining Rectory), Clifton Village.	
Rose Cottage, Clifton Village.	
Joiner's Cottage, Clifton Village.	
L.T.I. Cottage, Clifton Village.	
Cottage (J. Wheatley), Clifton Village.	
Cottage (R. Stubbins), Clifton Village.	
New Bungalow (Mr. May), Clifton Village.	



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 FIREPLACES.
 

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<i>Description</i>	<i>Conditions</i>
"Mon Repos" (J. Clayton), Clifton Village.	Only authorised fuels as declared by regulations under the Clean Air Act, 1956 and kindling sticks and paper shall be used in the fireplaces.
"Mentone" (R. Wakefield), Clifton Village.	
"Silverdale" (D. Summerville), Clifton Village.	
Semi-Bungalow (E. J. Moss), Clifton Village.	
Holly House (S. Woodhall), Clifton Village.	
Hazeldine Cottage (F. Reckless), Clifton Village.	
Community Reading Room, Clifton Village.	
No. 1 The Bungalow, Campden Green, Clifton Estate.	
51 St. Mawes Avenue.	
53 St. Mawes Avenue.	
57 St. Mawes Avenue.	
69 St. Mawes Avenue.	
8 St. Mawes Avenue.	
10 St. Mawes Avenue.	
38 St. Mawes Avenue.	
285 Wilford Lane.	
266 Wilford Lane.	
270 Wilford Lane.	
272 Wilford Lane.	
13 St. Austell Drive.	
25 St. Austell Drive.	
37 St. Austell Drive.	
41 St. Austell Drive.	
73 St. Austell Drive.	
83 St. Austell Drive.	
85 St. Austell Drive.	
10 St. Austell Drive.	
82 St. Austell Drive.	
118 St. Austell Drive.	
7 Vernon Avenue.	
1/3 Main Road, Wilford.	
17 Main Road, Wilford.	

## FIREPLACES.

<i>Description</i>	<i>Conditions</i>
105 Main Road, Wilford.	Only authorised fuels as declared by regulations under the Clean Air Act, 1956 and kindling sticks and paper shall be used in the fireplaces.
107 Main Road, Wilford.	
109 Main Road, Wilford.	
10 Main Road, Wilford.	
12 Main Road, Wilford.	
32 Main Road, Wilford.	
42 Main Road, Wilford.	
11 Roland Avenue.	
13 Roland Avenue,	
5 Whitfield Close.	
9 Whitfield Close.	
2 Whitfield Close.	
10 Whitfield Close.	
30 Launceston Crescent.	
17 Bradbourne Avenue.	
32 Bradbourne Avenue.	
23 Maplestead Avenue.	
25 Maplestead Avenue.	
35 Maplestead Avenue.	
10 Maplestead Avenue.	
24 Maplestead Avenue.	
5 Lamorna Grove.	

*This report was submitted to the City Council at their meeting on the 12th June, 1961, and was adopted.*



## COST OF HEALTH SERVICES

SERVICE	ACTUAL COST Year ended 31st March, 1961						ESTIMATED COST Year ending 31st March, 1962		
	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) ..	6,678	4,314	—	2,364	— 13	1 81	3,405	— 18	2 60
Public Health Inspection and other services ..	50,800	1,739	128	48,933	2 57	3 1 43	53,220	2 74	3 4 71
Health Centres ..	2,827	772	—	2,055	— 11	1 57	2,142	— 11	1 64
Maternal and Child Health ..	109,333	18,137	—	91,196	4 78	5 9 76	95,018	4 89	6 0 68
Midwifery ..	69,667	3,567	—	66,100	3 47	4 2 56	71,233	3 67	4 6 49
Health Visiting ..	41,303	1,894	270	39,139	2 01	2 5 94	46,143	2 37	2 11 30
Home Nursing ..	72,806	1,812	—	70,994	3 72	4 6 30	75,084	3 86	4 9 43
Vaccination and Immunisation ..	22,685	214	—	22,471	1 18	1 5 19	22,953	1 18	1 5 56
Ambulance ..	94,832	4,579	—	90,253	4 73	5 9 04	98,720	5 08	6 3 51
Prevention of Illness, Care and After-Care ..	35,826	2,214	—	33,612	1 76	2 1 71	36,343	1 87	2 3 80
Mental Health ..	38,655	1,041	—	37,614	1 97	2 4 77	41,420	2 13	2 7 68
Home Help ..	133,796	8,199	—	125,597	6 59	8 0 07	128,696	6 62	8 2 44
Other expenses ..	583	—	189	394	— 02	0 30	344	— 02	— 26
TOTAL ..	679,791	48,482	587	630,722	2 9 04	40 2 45	674,721	2 10 72	43 0 10

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## READER'S NOTES







