# [Report 1950] / Medical Officer of Health, Nottinghamshire County Council.

#### **Contributors**

Nottinghamshire (England). County Council.

#### **Publication/Creation**

1950

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# COUNTY COUNCIL OF NOTTINGHAMSHIRE

INSTITUTE OF TOBIAL MEDICINE

10. PARKS ROAD, OXFORD

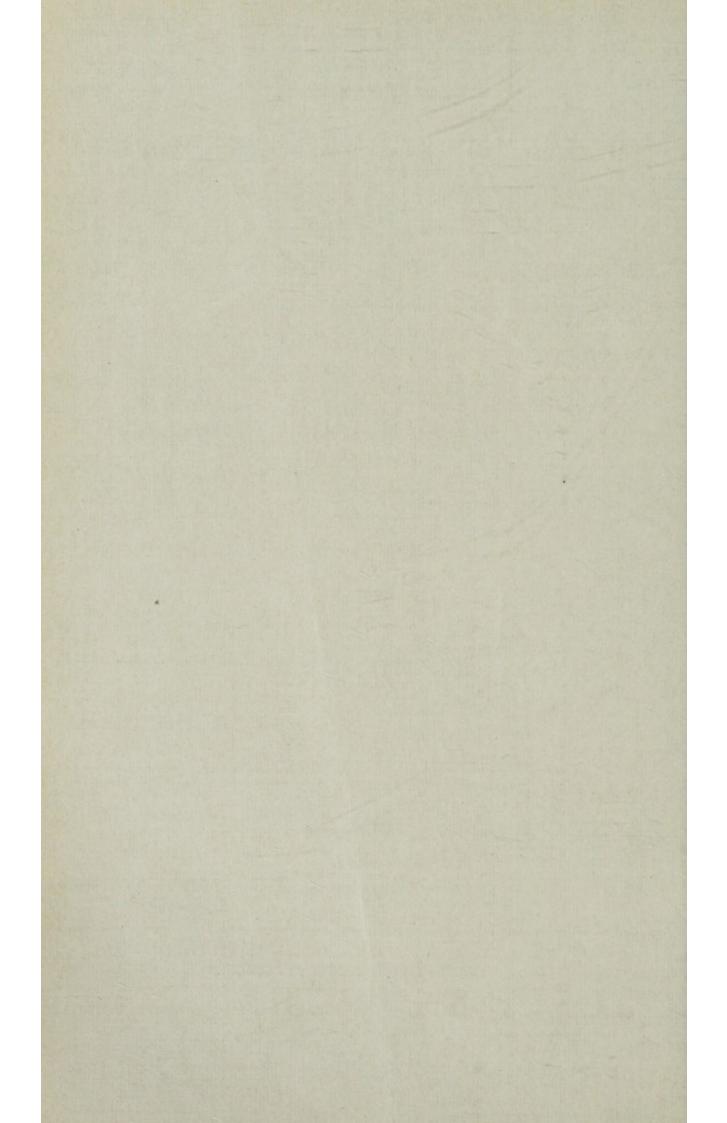
# ANNUAL REPORT

ON THE

OF THE COUNTY.

FOR THE YEAR 1950.

CHRISTOPHER TIBBITS, C.B.E., M.R.C.S. (Eng.), L.R.C.P. (Lond.), D.P.H. (Oxon.), COUNTY MEDICAL OFFICER.



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CHRISTOPHER TIBBITS, C.B.E., M.R.C.S. (Eng.), L.R.C.P. (Lond.), D.P.H. Oxon.), COUNTY MEDICAL OFFICER.

# CONTENTS.

MEMBERS OF COUNTY HEALTH COMM	HTTEE			
STAFF				 (
MEDICAL OFFICERS OF HEALTH OF C	OUNTY DISTR	ICTS		 10
Introduction				 11
STATISTICS AND NATURAL AND SOCIA	L Conditions	OF TH	E AREA	 18
VITAL STATISTICS				 18
Births				 20
Deaths				 21
Principal Causes of Death				 21
Deaths of Infants under one				 21
Birth and Death Rates-Correcte	d			22
Infectious Diseases				 24
Acute Poliomyelitis and Acute I	olioencephalit	tis		 24
SANITARY CIRCUMSTANCES OF THE A	REA			 26
Prevention of Pollution of River	and Stream	s-		
Industrial Pollution				 26
Sewerage and Sewage Dispo				 28
Work undertaken by County He				30
Rural Housing				 30
Dallie Classic				
W-4 CV				 31
water Supplies				 32
INSPECTION AND SUPERVISION OF FO	DD			 35
Milk Supply				 35
Food and Drugs Act, 1938				 38
Inspection of Meat and other Fe				38
Food Poisoning Outbreaks				 40
Clean Feed Commissions				
Clean Food Campaigns				 40
Nursing Homes				 40
CLINICS AND TREATMENT CENTRES				 41
NATIONAL HEAL	TH SERVICE	E ACT	, 1946	
HEALTH CENTRES (Section 21)	.,			 42
CARE OF MOTHERS AND YOUNG CHIL	DREN (Section	22)		43
Child-Welfare Centres	,			
				 43
Ante-Natal and Post-Natal Clinic	1000			 43
Consultant Services				 44
Maternity Hospital Treatment				 44
Provision of Maternity Outfite a	nd Pade			4.4

Loan of Elastic Bandages						44
Birth Control			* *			44
Maternal Deaths Premature Infants						45
The Pre-School Child			* * *			45
Services of Pædiatrician						45 45
Chronic Tonsils and/or A						46
Orthopaedic Treatment						46
Boarded-out Children						46
	5.50	2.4				46
Day Nurseries	· ·					46
Nurseries and Child Minders' Dental Care of Expectant as	Regula	ation .	Act, 1948	1 .6 (0)	1.1	46
under School age		rsing	mothers a	nd of Chi		47
						11
MIDWIFERY (Section 23)						40
						48
Eye Discharge in the New-bo	rn					49
Puerperal Pyrexia County Midwives						49
Transport	9					49 50
Gas and Air Analgesia						50
Agency arrangements						50
HEALTH VISITING (Section 24)						51
						01
Home Nursing (Section 25)						=0
Charlettan						52
Statistics,			7.4			53
V	10	00)				
VACCINATION AND IMMUNISATION	(Sectio)	n 26)				54
						54
,, Notifications and		1.1				56
Vaccination against Smallpox Whooping Cough Inoculation						56
whooping cough inoculation			4.4	* *		58
A						
Ambulance Service (Section 27)						58
Statistics						59
Vehicles Stations and Premises						59
Staff			* * *			60 61
First Aid Equipment						61
The the Liquipment						01
PREVENTION OF ILLNESS, CARE A	NID A pr	PER C	DE (Sacti	on 98)		61
	ND ZEE	LEIV C	ann (1966en	011 20)		01
Tuberculosis—						
Deaths						61
New Cases and Mortality						62 62
Incidence Examination of Contacts						62
Home Visits						63
Shelters						63
Co-operation with other Protection of Children B.C.G. Vaccination	Author	rities				63
Protection of Children						63
Nottingham and Notts.	Acac	oietion	for the	Proventi	on of	64
Tuberculosis	A880	ciación	t for the	rreventi	on or	64
Sherwood Village Settlen	nent					66
Other Types of Illness—						120
Loan of Nursing Equipm	nent an	d App	liances			68
General Care and After Chronic Sick and Senile I	Care					69 69
Convalescence	acient					70

				70
				71
				71
				79
and 51)	1.4			80
				80
				80
				81
				81
				82
				83
neus				85
				85
				86
				87
				89
				89
Teaching	* *			90
	4.4			91
				92
			**	94
				94
		i., ii	., iii., i	v., v.
				vii.
	199			viii.
	and 51)  and 51)  al Boards  y—  After-Care  Acts   Teaching	and 51)  al Boards  y— After-Care Acts  Teaching	and 51)  and 51)  After Care  Acts  Teaching  i., ii	and 51)  al Boards  y— After-Care Acts  Teaching  i., ii., iii., i

# County Health Committee.;

#### Chairman:

# ALDERMAN W. BAYLISS, C.B.E.

#### Vice-Chairman:

COUNCILLOR J. T. PEPPER.

Ex-officio: Alderman W. Bayliss, c.b.e. Alderman L. W. A. White.

#### Aldermen:

COOPER, G. C. FARR, S. HARTLAND, H. IZZETT, P. A. KIRK, C. C. MARSHALL, J. A. PERCIVAL, J. A.
SCHOFIELD, A. W.
SEVERN, J. T.
STUART, MRS. F. G.
TAYLOR, MRS. C. A.

## Councillors:

AINLEY, J.
ASHWORTH, R. W. B.
BEARDSLEY, MRS. M.
BETTERIDGE, MRS. A. E.
BOWEN, MRS. D. M.
CARLTON, H. C. C.
CLARK, J. J. K.
CREWE, W.
CROCKER, H. J.
DODDS, L.
ELEY, J. W.
FOSTER, W. H.
HARRISON, C.
HAYES, F.
HILL, MRS. L.

ILETT, G.
IRELAND, W.
LIMB, MRS. A. M.
MARTIN, W.
MEAD, A.
MITCHELL, L. J.
PEPPER, J. T.
QUIBELL, MRS. K.
ROBERTS, J.
SHARRARD, MRS. B.
SMALL, F. A.
STRETTON, J. H.
TURNER, O.
WARNER, E. L.

# Representative Members:

Borough Councils:

East Retford Mansfield Newark Worksop PEATFIELD, J. W. BOSWORTH, A. H. CLUTTERBUCK, C.

. Vacancy.

Urban District Councils:

Four vacancies.

Rural District Councils:

BOOTHBY, MRS. F. K. MILLS, H.

STEVENS, W. H. WALTERS, J. T.

1 1st May, 1951:

#### STAFF.

(Particulars of Staff as at 1st April, 1951.)

County Medical Officer-

A. C. Tibbits, C.B.E., M.R.C.S., L.R.C.P., D.P.H.

Deputy County Medical Officer-

C. W. W. JEREMIAH, M.R.C.S., L.R.C.P., D.P.H.

First Assistant County Medical Officer-

A. R. C. MARGETTS, M.R.C.S., L.R.C.P., D.P.H., D.C.H.

Second Assistant County Medical Officer -

MRS. M. B. BLACK, M.B., Ch.B., D.P.H.

Chest Physicians (employed jointly with Regional Hospital Board) -

L. W. HEARN, M.B., B.S., D.P.H.

N. W. ROBERTS, M.D., Ch.B., D.P.H.

Medical Officer for Mental Health—

Vacancy.

Assistant Medical Officers for Maternity and Child Welfare-

MISS J. A. FORBES, M.B., Ch.B., D.R.C.O.G., D.P.H.

(One Vacancy).

Fourteen Medical Practitioners also employed for Sessional duties on a Fee basis.

Assistant County Medical Officers-

MISS J. M. CUMMINS, B.A., M.B., B. Ch., B.A.O., L.M., D.P.H.

MISS E. DOUGLAS, M.B., Ch.B., D.P.H.

MISS J. KEAN, M.B., Ch.B., D.P.H.

Mrs. A. Tobert, M.B., B.S., D.C.H. (employed approx. half-time).

MRS. M. C. WOOD, M.B., B.S., M.R.C.S., L.R.C.P. (employed half-time).

J. R. LAHIFF, M.B., B.Ch., B.A.O.

(Four Vacancies).

Assistant County Medical Officers and Medical Officers of Health of County Districts—

J. S. DRUMMOND, M.B., Ch.B., D.P.H. (Mansfield Borough).

G. G. Buchanan, M.B., Ch.B., D.P.H. (Newark Borough, Newark Rural and Southwell Rural Districts).

J. Tolland, L.R.C.S., L.R.C.P., L.R.F.P.S., D.P.H. (East Retford Borough and East Retford Rural Districts).

M. B. McCann, L.R.C.S., L.R.C.P., D.P.H. (Worksop Borough and Worksop Rural Districts).

H. D. B. NORTH, M.Sc., M.B., Ch.B., D.P.H. (Arnold and Carlton

E. Bebbington, M.B., Ch.B., D.P.H. (Beeston and Stapleford

W. R. Perry, M.B., B.S., D.P.H. (Eastwood Urban and Basford

Rural Districts).

M. J. Collins, M.B., B.Ch., B.A.O., D.P.H. (Hucknall Urban District).

A. B. CLARK, M.B., Ch.B., B.S., D.P.H. (Kirkby-in-Ashfield Urban District).

B. N. Eedy, M.B., B.Ch., B.A.O., D.P.H. (Mansfield Woodhouse and Warsop Urban Districts).

T. S. McKean, M.B., Ch.B., D.P.H. (Sutton-in-Ashfield Urban District).

W. B. Watson, L.R.C.S., L.R.C.P., L.R.F.P.S., L.D.S., D.P.H. (West Bridgford Urban and Bingham Rural Districts).

Assistant County Medical Officer and Deputy Medical Officer of Health of the Borough of Mansfield— MISS I. CALEY, M.A., M.B., B.Ch., D.P.H.

Child Psychiatrist (provided by the Regional Hospital Board and services utilised jointly with Nottingham City Council)—Vacancy.

Senior Dental Officer— D. E. MASON, L.D.S.

MISS M. ARMITAGE, L.D.S.

MISS A. KAVANAGH, L.D.S.

MRS. I. M. KEATES, L.D.S. (Part-time)
D. F. G. CAME, L.D.S.

(Vacancies equivalent to 16½ School Dental Officers).

Sherwood Village Settlement— Medical Superintendent—

E. Firth, M.B., Ch.B. (part-time)
(also employed by Regional Hospital Board as Medical
Superintendent, Ransom Sanatorium).

Lay Administrative Assistant— W. L. RICHARDSON.

Chief Clerk— J. Renshaw.

Deputy Chief Clerk— E. GILLOTT.

G. H. EARNSHAW.
(One vacancy).

Assistant Health Education Officer— A. H. Marrow. Second Assistant Health Education Officer— N. S. Wass.

Senior County Almoner— MISS B. B. STEWART.

Assistant County Almoners— MISS S. M. CUTTS.

(One vacancy).

Superintendent Health Visitors—
MISS E. BOWLER. MISS A. COLLISHAW. MRS. C. J. MCHENRY

Other Nursing Staff—

Sixty-six Health Visitors—(12 vacancies).

Two Tuberculosis Visitors—

Duties wholly connected with Tuberculosis.

Eight School Nurses-(3 vacancies).

Two Dental Nurses.

Five Dental Attendants—(17 vacancies).

Midwifery-

Senior Assistant Non-Medical Supervisor of Midwives— MISS M. K. COLLINS.

Junior Assistant Non-Medical Supervisor of Midwives and Health Visitor— MISS R. E. HERMES.

Sixty-five County Midwives (6 vacancies).

Mental Health Service-

Mental Health Officer— W. A. Frost.

Female Superintendent Mental Health Worker—Mrs. E. L. Andrews.

Mental Health Workers—

Ten Males (employed jointly as Mental Health Workers and District Welfare Officers).

One Male (employed jointly as Assistant Mental Health Worker and District Welfare Officer).

One Female (2 vacancies).

Instructress, Mansfield Occupation Centre— MISS R. BARFOOT.

Home Teachers for Mentally defective persons—Mrs. H. Morrell.

MRS. N. M. STOKES.

## Day Nurseries-

#### Matrons-

Beeston—Mrs. E. W. Gerring.
Carlton—Miss E. M. Pimlott.
Eastwood—Miss J. D. Kaye.
Harworth—Miss E. Wray.
Mansfield (Bull Farm)—Mrs. G. Nepora.
Mansfield (Ravensdale)—Mrs. C. E. Pargeter.
Newark—(Vacancy).
Stapleford—Mrs. S. Fletcher.
West Bridgford—Miss F. M. Scott.

# Home Help Service-

Organiser— MISS M. W. COTTEE,

Deputy Organiser— Mrs. K. Keays.

Sub-Organisers— Seven—(2 vacancies).

Case-Workers— Nine (One vacancy).

F. E. JOLLEY.

Milk Sampling— Two Milk Samplers.

# Speech Therapy-

Chief Speech Therapist— Miss M. Dolman.

Speech Therapists—
MISS S. J. EDWARDS:
MISS P. A. E. GRADY.

MISS C. H. M. LOGAN. MISS S. J. SWIFT.

# Child Guidance-

Educational Psychologists— One whole-time. One part-time.

Psychiatric Social Workers— Three whole-time.

Play Therapist (part-time)—Vacancy.

#### Audiometrician-

MISS M. TORRANCE.

# NAMES AND ADDRESSES OF THE MEDICAL OFFICERS OF HEALTH OF THE TWENTY COUNTY DISTRICTS.

As AT THE 1ST APRIL, 1951.

## BOROUGHS AND URBAN DISTRICTS.

Dono	COMB AND CREAM	DISTRICTS.
	NAME OF THE	
DISTRICT.	MEDICAL OFFICER OF HEALT	H. ADDRESS.
Mansfield (Borough)	J. S. Drummond, M.B., Ch.B., D.P.H.	Public Health Department, Gilcroft Street, Mansfield.
Worksop (Borough)	M. B. McCann, L.R.C.S., L.R.C.P., D.P.H.,	Park House, Park Street, Worksop.
Newark (Borough)	G. G. Buchanan, M.B., Ch. B., D.P.H.	Public Health Department, The Friary, Appleton Gate, Newark.
(Borough)	J. Tolland, L.R.C.S., L.R.C.P., L.R.F.P.S., D.P.H.	Municipal Offices, The Square, Retford.
ARNOLD	H. D. B. North, M.Sc., M.B., Ch.B., D.P.H.	Council Offices, Arnot Hill House, Daybrook, Arnold.
BEESTON AND STAPLEFORD	E. Bebbington. M.B., Ch.B. D.P.H.	Public Health Department, The Willows, Dovecote Lane, Beeston.
Carlton	H. D. B. North, M.Sc., M.B., Ch.B., D.P.H.	Public Health Department, Council House, Burton Rd., Carlton.
EASTWOOD	W. R. Perry, M.B., B.S., D.P.H.	Public Offices, Church Street, Eastwood.
HUCKNALL	M. J. Collins, M.B., B.Ch., B.A.O., D.P.H.	Council Offices, Hucknall.
KIRKBY-IN-ASHFIELD	A. B. Clark, M.B., Ch.B., B.S., D.P.H.	Council Offices, Urban Road, East Kirkby.
Mansfield Woodhouse	B. N. Eedy, M.B., B.Ch., B.A.O., D.P.H.	Public Health Department, Manor House, Mansfield Woodhouse.
SUTTON-IN-ASHFIELD	T. S. McKean, M.B., Ch.B., D.P.H.	Public Health Department, Forest Street, Sutton-in-Ashfield.
WARSOP	B. N. Eedy, M.B., B.Ch., B.A.O., D.P.H.	Health Department, Town Hall, Warsop.
WEST BRIDGEORD	W. B. Watson, L.R.C.S., L.R.C.P., L.R.F.P.S., L.D.S., D.P.H.	Health Department, The Hall, Bridgford Road, West Bridgford.

# RURAL DISTRICTS.

		- 0.
Basford	W. R. Perry, M.B., B.S., D.P.H.	Health Department, Rock House, Stockhill Lane, Basford, Nottingham.
BINGHAM	<ul> <li>W. B. Watson, L.R.C.S.,</li> <li>L.R.C.P., L.R.F.P.S.,</li> <li>L.D.S., D.P.H.</li> </ul>	Council Offices, Bingham.
Worksop	M. B. McCann, L.R.C.S., L.R.C.P., D.P.H.	Council Offices, Highfield House, Carlton Road, Worksop.
East Retford	J. Tolland, L.R.C.S., L.R.C.P., L.R.F.P.S., D.P.H.	Municipal Offices.
NEWARK	G. G. Buchanan, M.B., Ch.B., D.P.H.	Public Health Department, The Friary, Appleton Gate, Newark.
SOUTHWELL	Ch.B., D.P.H.	

# NOTTINGHAMSHIRE COUNTY COUNCIL.

Public Health Department,
County Hall,
Trent Bridge,
Nottingham.

NOVEMBER, 1951.

TO THE CHAIRMAN AND MEMBERS OF THE NOTTINGHAMSHIRE COUNTY COUNCIL.

LADIES AND GENTLEMEN,

I present my Annual Report of the year 1950, the 23rd of the series of Reports which I have been privileged to submit.

Once again I have to report a continuance of the steady growth in population which has been a feature in Nottinghamshire for so many years. The estimated increase at mid-year 1950 was 10,710, giving a total population of 533,870. The population has approximately doubled since the turn of the century, and Nottinghamshire has become one of the Large Counties.

Reference to "Table IV, Abstract of Vital Statistics" in the appendix to this Report which records certain statistics over the past fifty years reveals interesting and important changes such as the reduction of the net death roll from 14.9 in 1901 to 10.4 in 1950; the reduction of the Infantile Mortality rate from the disturbing figure of 145 in 1901 to 34.5 in 1950, and the steadily falling birth rate from 31.3 in 1901 to 16.3 in 1950.

The first two reductions are reflexes of improved conditions of environment (Housing, Sanitation and mode of living); increased medical and scientific knowledge and the application thereof to the prevention, cure and eradication of disease; the steady extension of what are now called "Social Services" and the gradually improving understanding at every level of the means to a healthy life.

This fifty years includes doubtless many "bad old days" but the record is pregnant with the story of their planned and progressive elimination. The story goes on and there is still much to do but this

past gives great encouragement for the future and, surely, stands as a lasting tribute to an era of humane and ever awakening government both local and central.

Dare we hope for a further fifty years of progress at the same rate ?

Dare we hope for medico-scientific progress at the vastly accelerated rate of the past ten years? Why not? New fields have been opened but their exploration is barely begun.

Diphtheria has been conquered in recent times as Cholera and Plague were conquered in earlier times, by different methods. The possibility of reliable immunisation against that scourge of the very young, Whooping Cough, is drawing steadily nearer.

The sulpha drugs and anti-biotics have reduced the gravity of many diseases and enhanced their cure; by insulin we can deal with Diabetes; by Liver extract we have robbed Pernicious Anaemia of its dire menace. Even Tuberculosis may before long have to yield to the onslaught of modern therapy and preventive immunisation. But the picture has a "reverse" which calls for scrutiny.

Turning to page 21 we find a schedule of the principal causes of death.

Facile princeps were diseases of the Heart and Circulation; next came Cancer and malignant diseases, third, diseases of the Nervous System of Vascular origin, and fourth, diseases of the Respiratory System (excluding Tuberculosis). Tuberculosis "also ran" as a bad fifth. Cancer mortality figures have shown small but steady increases over many years, some fraction being undoubtedly due to more accurate diagnosis.

Diseases of the Heart and Circulation, and Vascular diseases of the Nervous System though too often affecting people in middle-age, are principally the terminal diseases of old age.

Old age, however, has become much older in the past fifty years.

Grave diseases still afflict us, without much check, in sporadic or in large scale epidemic proportions, such as Acute Poliomyelitis and Virus Influenza, and there remains much to learn.

It often occurs to me to wonder whether the translation of modern modes of living, if it were possible, with their stresses, strains, rackets, speeds and intensities, back to the conditions of environment and disease-liability of fifty years ago might not have resulted in the decimation of our race.

From this thought follows the corollary that To-day has been made possible by the advances in Preventive and Applied Medicine of the Yesterdays.

In the modern idiom—That is progress—or is it?

However that be, I am able to record a good health year for Nottinghamshire in 1950 as compared with that past and with the Country as a whole.

There was no major epidemic, the County escaping serious Virus Influenza attack.

Acute Poliomyelitis was troublesome, but the fatality was relatively low.

Infantile mortality showed a small increase from 32 to 34.5 deaths per 1,000 live births, and Maternal mortality rose from 0.55 to 1.38 deaths per 1,000 live births. There were twelve maternal deaths in the whole County, an increase of seven.

The causes of death were: 4 Pulmonary Embolism, 1 Cerebral Embolism, 2 Toxaemia, 1 Placenta Praevia, 1 Ruptured Uterus, 1 Obstetric Shock, 1 Hydronephrosis and uraemia, 1 shock from attempted abortion.

The death rate from Pulmonary Tuberculosis was the lowest ever experienced, 0.31 per 1,000 of population.

There was no case of Diphtheria during the year.

# Comments on particular Health Services.

## 1. Environmental Services.

Water Supplies.

Some progress was made during the year towards eliminating those few remaining patches in the County lacking a mains water supply.

Schemes were approved for:

- (a) A part of the East Retford Rural District.
- (b) A part of the Newark Rural District.(c) A part of the Basford Rural District.
- (d) A part of the Bingham Rural District.

Sewerage and Sewage Disposal.

Schemes were approved for:

- (a) the Bestwood area of the Basford Rural District.
- (b) the Cuckney area of the Worksop Rural District.
- (c) the Trowell area of the Basford Rural District.

The tabular statement in the body of the Report records the water-supply position throughout the County and details of local extensions.

#### 2. Preventive Health Services.

- (i) The Village Settlement.
  - (a) The Industries.

At the beginning of the year a whole-time skilled Cabinet-Maker-Instructor was appointed to the staff of the Industries. This resulted in a rapid and most welcome improvement in the quality and finish of the products. A new pride and incentive was given to the workers as well as greatly improved training. However, the difficulties experienced in 1949 and the later post-war years owing to market changes and the difficult supply position as affecting the "Industries" brought to a head the long-discussed question of employing an expert whole-time General Manager of the Industries.

Provision was made in the estimates for such a post but it was decided to take the advice of a Business Consultant before making an appointment.

In due course a Business Consultant surveyed the position of the Industries in detail, and towards the end of the year submitted an important report to the Management Committee.

This report took into consideration all the special factors affecting an industry of this character—the disability of the men, their lack of special skill, the reduced (and variable) working hours available, and the need to avoid stress and strain by the use of machinery and the fabrication of products appropriate to the men's handicap.

The Consultant showed an understanding appreciation of these fundamental considerations and tempered his report accordingly.

Nevertheless he demonstrated that the difficulties native to such a scheme did not account sufficiently for increasing costliness of "Sherwood Industries."

He showed conclusively that constructive remedies in management and supervision should yield gradually improved results, and he accordingly recommended the appointment of a General Manager experienced in production and salesmanship on a Commercial scale as soon as possible. He also gave clear indications of the points of fault and of the manner of remedy.

On consideration of this report the decision to appoint a General Manager was reached towards the end of the year, and other recommendations by the Consultant were implemented.

As I write in 1951 it is possible to record that the appointment has been made and great advances in production both in quality and quantity have already followed. Further comment must be reserved for my Report for the year 1951.

# (b) The proposed Joint Board.

The proposal to extend the range of service of the Village Settlement by the establishment of a Joint Board constituted of representatives of 15 of the 17 Local Health Authorities in the Sheffield Hospital Region proceeded to the point of the preparation of a detailed Instrument in draft, by a "Drafting Sub-Committee" for submission to the proposed constituent Authorities.

# (c) The price to be paid.

It has been shown above that, though no figures are given, the cost of conducting a Village Settlement on a small scale is high and a matter for anxious consideration. How high can this cost be allowed to ascend? What is the price to be paid?

In 1950 there died one of our first Settlers. Suffering from severe chronic pulmonary Tuberculosis he was appointed in 1937, a near hopeless case.

He became a first occupant of one of our first six houses.

He gave unstinted and skilled service, and returned tenfold in gratitude and loyalty for the sheltered chance of life which the Council gave him. He lived thirteen years of useful contented life. There are others which afford near parallel.

What is the price to be paid?

# (ii) Protection of Children from Tuberculosis.

On the recommendation of the Ministry of Health, steps were taken during the year to safeguard organised groups of children from the risks of Tuberculous infection by transmission by members of the Staff. Such groups included Residential Nurseries and Homes, Day Nurseries and special Schools, and several Committees and Departments of the Council were involved. In due course a willing co-operation by all concerned, including the several Mass Radiography Units of the Regional Hospital Board, established arrangements for the examination by X-Ray of all new candidates for appointment to the Staffs concerned, and for the systematic examination and re-examination of all Staff periodically.

# (iii) B.C.G. Vaccination.

An amendment to the Council's Proposals under Section 28 with the object of providing for a service of B.C.G. Vaccination was approved by the Minister. Preliminary administrative steps were taken and discussions held with the appropriate Chest Physicians who would in their Preventive capacity be responsible for the clinical application of the procedure. It is already apparent that no systematic progress will be made unless additional Specialist Staff can be made available, and there is reason for hope that this provision will in due course be made.

# (iv) Vaccination against Small Pox and Immunisation against Diphtheria

Vaccination, now completely voluntary, is steadily becoming less acceptable. Under the Vaccination Acts about one-third of the population received primary Vaccination, whereas now the proportion is about one-quarter.

During the year a novel incentive to bulk Vaccination arose which materially increased the primary Vaccinations. This was the Small Pox outbreak at Glasgow.

The connecting link was the International Football Match held at that City during the outbreak to which many hundreds of enthusiasts from Nottinghamshire decided to go. Even the scare could not stop them BUT they were Vaccinated first! Sweet are the uses of adversity.

By contrast the position of Diphtheria Immunisation is very satisfactory. 76% of the children at risk were maintained in a protected state, and not a single case of Diphtheria was notified during the year.

Constant Health Education by poster, pamphlet and by word of mouth, and sound following up by Health Visitors with co-operation by School Teachers and other staff have secured this result. Sweet are the uses of advertisement.

# 3. The County Ambulance Service.

Good progress was made in replacing the old fleet by new vehicles—2 Austin, 5 Bedford and 1 Morris Ambulances being delivered. In addition two Spurmobus sitting case vehicles were obtained. Three Austin heavy Army type Ambulances were fitted very successfully with modern Ambulance bodies locally.

The County colour was changed from ivory to a handsome Cambridge blue, with grey mudguards and radiator shell. Experience has already shown that this colour is much "hardier" and easier to keep smart. The fleet will be adapted to the new colours by easy stages.

New garage buildings were acquired at Mansfield and Southwell and plans approved for the erection of new buildings at Beeston, Carlton, Bingham, Tuxford, Misterton, Retford, Ruddington, Eastwood and Kirkby-in-Ashfield. A scheme for the provision of Radio-Control was approved early in the year, and application for the allocation of a Frequency was made to the Postmaster General.

Intimation of such an allocation was received in October, but by the end of the year negotiations with the G.P.O. as to the type of plant to be installed had not been completed.

Reference to the appropriate chapter in the body of the Report will show how important an organisation the Ambulance Service has now become, and how great is the service it is rendering to the Public.

#### 4. Personal Health Services.

I would call attention to the extensive reports on the Maternity and Child Welfare, Health Education and Mental Health Services.

These are services very directly affecting the individual and the reports show what a variety of aids the Council has provided for the public in the maintenance of Health, the rearing of healthy children and in alleviation of thousands of personal problems and difficulties.

A new service provided with the good co-operation of the Regional Hospital Board was the Consultant Paediatric Service, now available at weekly sessions at Nottingham, Mansfield and Worksop. This secures readily accessible specialist advice available through the Assistant Medical Staff to the Child population.

# 5. Housing.

This basic requirement of Health is not the direct responsibility of the County Council. Nevertheless the urgency of yet more progress in new housing comes forcibly before my Department through constant representations from Health Visitors and other Staff, and from an endless chain of letters from individual members of the public.

Reading these letters dispassionately I am left with a deep impression of hardship, over-crowding and inadequate housing. Very great progress has indeed been made by the County District Housing Authorities. Some are right in the van of progress for the whole country. Clearly there remains a vast problem, the basic problem of healthy living.

#### 6. National Health Service.

In submitting my Annual Report for the year 1949 I included in my introductory comments, written in November 1950, a detailed review of the operation of this service as assessed on local experience.

Any further review will therefore fall to be dealt with, if necessary, in my Report on the year 1951.

\* \*

During the year the Council have lost the service of two valued officers who have given long service in the Department.

Doctor A. M. Ogilvie retired on superannuation on 31st December, 1950, having served since February, 1929, and Miss E. R. Bennett, Superintendent Health Visitor, retired on 2nd September, 1950, after 28 years' service. Both these officers gave skilled and devoted service to the people of Nottinghamshire and were loyal and faithful colleagues who earned the respect and affection of all who worked with them and all for whom they worked.

# STATISTICS AND NATURAL AND SOCIAL CONDITIONS OF THE AREA.

Area (in acres) land and inland water	r				523,843
Population (Census 1921)—(actual 37	78,525)				
Population (Census 1931)—(actual 44	(13,930)				*436,542
Number of Inhabited Houses (Census	1931)-	-(actu	al 10	(8,758)	*106,634
Number of Families or separate Occ	upiers	(Cens	us 19	931)-	
(actual 111,804)					*109,674
Average number of persons per	house	(Cen	sus	1931)	
(actual 4.1)					*4.1
Population (estimated to the middle	of the	year)			533,870
Estimated increase during the year					
Rateable Value (1st April, 1950)					£2,836,895
Estimated product of a penny rate (1	949-50	)			£11,154

<sup>\*</sup> These figures relate to the area of the County as constituted at the 30th September 1935, and exclude the population enumerated in the areas transferred to the City of Nottingham under the Nottingham Corporation Act, 1932, which came into effect on 1st April, 1933.

#### VITAL STATISTICS.

The Vital Statistics for the year 1950, together with those for the previous year for comparison, are shown in tabular form on the opposite page.

The population of the County at mid-year 1950, as estimated by the Registrar General was 533,870, an increase of 10,710 on that for the previous year. It should be noted, however, that both civilians and members of the armed forces stationed in the area are included in the 1950 estimate, whereas civilians only were taken into account the previous year.

The number of deaths occurring from all causes was 5,571, compared with 5,536 in 1949. The death rate was 10.4 per thousand of the population compared with 10.6 the previous year. The rate for England and Wales was 11.6, as compared with 11.7 in 1949.

The number of live births in the County was 8,683, as compared with 9,098 in 1949. The birth rate for the County was 16.3 per thousand of the population, this being the lowest since 1941 when the figure was 16.1. The birth rate for England and Wales was 15.8 compared with 16.7 in 1949.

The infantile mortality for the County showed an increase from 32 to 34.5 per thousand live births, the rate for England and Wales as a whole declining from 32 in 1949, to 29.8 in 1950.

The number of maternal deaths in the County during 1950 was 12, as compared with 5 the previous year.

The deaths from Tuberculosis in the County during 1950 totalled 185 (164 Pulmonary and 21 Non-Pulmonary), and the death rate of 0.35 for all forms of Tuberculosis is the lowest ever recorded. The death rate of 0.31 for Pulmonary Tuberculosis is also the lowest ever recorded, the previous lowest being 0.32 in 1948. The rates for England and Wales were: Pulmonary—0.32 (0.40—1949); Non-Pulmonary—0.04 (0.05 in 1949); and all forms—0.36 (0.45—1949).

The number of deaths from Cancer increased from 847 in 1949 to 916 in 1950, the rate increasing from 1.62 in 1949 to 1.71 in 1950. The Cancer death rate for England and Wales was 1.87 in 1949 and 2.0 in 1950.

1.	Infa	ntile Mortality.					1949.	1950.
	Rat	e per thousand live birth	hs—					
		<ul><li>a. Whole County</li><li>b. England and Wales</li></ul>				::	0.0	$\frac{34.5}{29.8}$
2.	Mat	ernal Mortality.						
	(i)	Rate per thousand live	birth	s				
	1-7	a. Whole County						1.38
		b. England and Wales					Not a	vailable
	(ii)	Rate per thousand total	(live	and stil	l) birth	18		
	(11)	a. Whole County					0.54	1.34
		b. England and Wales					0.98	0.86
3.	Pue	rperal Sepsis.						
	(i)	Rate per thousand live	birth	18			2 12	
		a. Whole County					0.11	
		b. England and Wales					Not a	vailable
	(ii)	Rate per thousand total	l (live	and sti	ll) birt	hs—		
	()	a. Whole County					0.11	-
		b. England and Wales					0.11	0.03
4.	Gen	eral Death Rate.						
		a. Whole County					10.6	10.4
		b. England and Wales					11.7	11.6

5.	Birth Rate.					
	<ul><li>a. Whole County</li><li>b. England and Wales</li></ul>				17.4 16.7	16.3 15.8
6.	Tuberculosis Mortality.					
	Pulmonary—					
	<ul><li>a. Whole County</li><li>b. England and Wales</li></ul>					$0.31 \\ 0.32$
	All Forms—					
	<ul><li>a. Whole County</li><li>b. England and Wales</li></ul>				$0.40 \\ 0.45$	$0.35 \\ 0.36$
7.	Deaths from Cancer, Malign	nant	Disease.			
	<ul><li>a. Whole County</li><li>b. England and Wales</li></ul>			 	1.62 1.87	$\frac{1.71}{2.0}$

The general death rate, birth rate, tuberculosis mortality rates and cancer death rate given above are per thousand of the estimated population.

The following table\* gives the chief vital statistics for the years 1949 and 1950 for England and Wales (as supplied by the Registrar-General) and for the County of Nottingham for comparison.

	Birth rate per 1,000 of population.		Death Rate per 1,000 of population.		Deaths under one year per 1,000 births.	
_	1949	1950	1949	1950	1949	1950
England and Wales	 16.7	15.8	11.7	11.6	32	29.8
126 County Boroughs, etc.	 18.7	17.6	12.5	12.3	37	33.8
148 Smaller Towns	 18.0	16.7	11.6	11.6	30	29.4
London, Admin. County	 18.5	17.8	12.2	11.8	29	26.3
County of Nottingham	 17.4	16.3	10.6	10.4	32	34.5
Aggregate Urban Districts	 17.6	16.1	10.6	10.5	34	36.4
Aggregate Rural Districts	 16.8	16.3	10.5	10.2	29	31.2

These rates are calculated on the estimated populations supplied by the Registrar-General.

#### Births.

The number of live births registered in the County during 1950 was 8,683 as compared with 9,098 the previous year. The rate was 16.3 compared with 17.4 in 1949.

Males exceeded females by 307.

The number of illegitimate births registered during 1950 was 394 as compared with 450 the previous year.

<sup>\*</sup>The rates supplied by the Registrar-General for England and Wales, County Boroughs, Smaller Towns and London, are provisional figures based on Weekly and Quarterly Returns.

Particulars of the number of illegitimate births registered, the rate per thousand of the population and the rate per thousand live births each year since 1942 are given in the following table.

#### ILLEGITIMATE BIRTHS.

Year	No. of Illegitimate Births registered	Rate per 1,000 of the population	Rate per 1,000 live Births
1942	442	0.92	51.1
1943	541	1.15	58.5
1944	629	1.32	60.8
1945	699	1.47	76.8
1946	610	1.23	61.0
1947	489	0.97	45.8
1948	480	0.92	50.6
1949	450	0.86	49.4
1950	394	0.73	45.4

#### Deaths.

The number of deaths registered during 1950 was 5,571 (2,956 males and 2,615 females) giving a rate of 10.4 per thousand of the estimated population compared with 10.6 for the previous year.

The corresponding rate for England and Wales for 1950 was 11.6 (1949—11.7).

# Principal Causes of Death.

The chief causes of death for the whole County in order were as follows:—

Heart Disease						1,684
O M.1'						
Vascular Lesions of Nervous	System	m				702
Diseases of Respiratory Syst	em (ex	celuding	Tube	rculosis	)	646
Tuberculosis, all forms						185

# Deaths of Infants under One Year of Age.

The number of registered live births and of infants, legitimate and illegitimate, who died during 1950 before reaching the age of one year, was as follows:—

	No. of Re	gistered Live	Births		Deaths of Infe one year of a	
	Legitimate	Illegitimate	Total	Legitimate	Illegitimate	Total
Male	 4,344	201	4,545	166	9	175
Female	 3,945	193	4,138	116	9	125
Totals	8,289	394	8,683	282	18	300

The deaths of eighteen illegitimate infants under one year of age out of a total of 394 registered illegitimate live births gives an illegitimate infantile mortality rate of 45.7 per thousand compared with a legitimate infantile mortality rate of 34.0 per thousand arising from the death under one year of age of 282 infants out of a total of 8,289 registered legitimate live births.

The total infantile mortality rate for 1950 was 34.5 per thousand registered live births. Approximately 60% of the infant deaths occurred during the first four weeks of life.

Table of Causes of Death of Children Under One Year of Age.

	Num			
	Urban Districts	Rural Districts	County	Rate per 1,000 live Births
Whooping Cough	6	1	7	0.8
Meningococcal Infection	1	1	2	0.2
Other Infective and Parasitic			-	0.2
Diseases	2	1	3	0.3
Influenza	0	1	1	0.1
Pneumonia	28	11	39	4.5
Bronchitis	7	5	12	1.4
Other Diseases of Respi-			1.2	1.1
ratory System	1		1	0.1
Gastritis, Enteritis and			1	0.1
Diarrhoea	13	2	15	1.7
Congenital Malformations	35	9	44	
Other Defined and Ill-defined	00	9	44	5.1
Diseases	120	44	164	10.0
Accidents	7			19.0
Accidents	1	5	12	1.4
Totals	220	80	300	34.5

# Birth and Death Rates (Corrected).

To render the local crude birth and death rates comparable with the country as a whole it is necessary to correct them by the application of a factor which compensates for differences in age and sex distribution in the local population, compared with the distribution in the country as a whole. Such factors have been furnished by the Registrar-General in respect of each of the County Districts and for the aggregates of Urban Districts, and of Rural Districts.

The following table gives the crude rates for each district, the correcting factors by which the crude rates are to be multiplied, and the resultant corrected rates.

		BIRTHS	,		DEATHS	
JRBAN DISTRICTS	Crude Rate per 1,000 of the Population	Area Compar- ability Factor	Corrected Rate per 1,000 of the Population	Crude Rate per 1,000 of the Population	Area Compar- ability Factor	Corrected Rate per 1,000 of the Population
Jansfield M.B	16.3	.97	15.8	11.2	1.10	12.3
Vorksop M.B	17.7	1.07	18.9	9.0	1.20	10.8
lewark M.B.	17.6	1.01	17.8	11.9	.99	11.8
last Retford M.B.	16.6	.99	16.4	12.9	.95	12.2
rnold	14.9	.96	14.3	10.3	1.09	11.2
Beeston & St'ford	15.9	.97	15.4	10.3	1.17	12.0
Carlton	14.8	.97	14.3	10.9	1.05	11.4
Castwood	18.1	1.04	18.8	10.2	1.20	12.2
Hucknall	16.0	.99	15.8	8.3	1.23	10.2
Kirkby·in·Ashfield	18.1	1.04	18.8	9.2	1.14	10.5
Insfield W'house	17.5	1.04	18.2	9.6	1.24	11.9
Sutton·in·Ashfield	16.5	1.01	16.7	11.1	1.17	13.0
Warsop	18.1	1.01	18.3	9.1	1.26	11.5
West Bridgford	12.9	1.0	12.9	12.0	.82	9.8
Aggregate of Urban Districts	16.3	1.0	16.3	10.5	1.10	11.5
RURAL DISTRICTS	16.7	1.02	17.0	10.1	1.03	10.4
Basford	14.0	1.02	15.1	11.5	.88	10.1
Bingham	17.9	1.03	18.1	8.9	1.27	11.3
Worksop	14.1	1.09	15.4	9.7	.94	9.1
Sast Retford	16.4	.96	15.7	10.3	.98	10.1
Southwell	16.8	1.06	17.8	10.1	1.13	11.4
Aggregate of Rural Districts	16.1	1.04	16.7	10.1	1.03	10.4

#### INFECTIOUS DISEASES.

The total number of cases of infectious diseases notified, other than Tuberculosis, and the deaths resulting amongst the County civilian population during the year were as follows:—

DISEAS	Cases Notified	Deaths		
Diphtheria	1		Nil	Nil
Scarlet Fever			880	*
Whooping Cough			1,885	8
Measles			4,401	1
Acute Pneumonia			227	*
Meningococcal Infection			7	2
Acute Poliomyelitis—Para	alytic	40	)	
Non	-paralytic	19	59	
Acute Polioencephalitis—	Infective	3	}	5
	Post-infecti	ious 4	7	
Dysentery			78	*
Ophthalmia Neonatorum			8	_
Puerperal Pyrexia			22	zijk
Paratyphoid Fevers			3)	
Enteric or Typhoid Fever	1		25	
Food Poisoning			40	*
Erysipelas			71	*
Malaria	1		i	*
Infective Hepatitis			i	*

<sup>\*</sup> Deaths from these diseases are not shown separately in the return received from the Registrar-General.

Wherever a copy of an infectious disease notification submitted in accordance with statutory requirements (i.e., as soon as the Medical Practitioner became aware of the condition) was passed to the County Council within 12-48 hours of receipt by a County District Council the fee paid to the general medical practitioner was reimbursed to the Local Authority.

In all such cases the Council's Health Visitors were provided with full particulars in order to facilitate preventive action.

# Acute Poliomyelitis.

# Acute Polioencephalitis.

During 1950 there occurred a further serious country-wide outbreak of these diseases—popularly known as Infantile Paralysis—the distribution of cases and deaths within the Council's area and the comparison with the previous outbreaks in 1947 and 1949 being as set out in the following table:—

Communication December	No	o. of Ca	ses	No. of Deaths		
COUNTY DISTRICT	1947	1949	1950	1947	1949	1950
Urban Districts—						
Mansfield (Borough)	7	3	3	1	1	_
Worksop (Borough)	9	23	5	-	3	
Newark (Borough)	7	2	2	-	1	_
East Retford (Borough)	1		-	1	_	_
Arnold	1		3	-	-	
Beeston and Stapleford	5	18	3	1	2	
Carlton	1	1	3		-	
Eastwood	4		1			
Hucknall	4	-	5	1	-	-
Kirkby-in-Ashfield	1		1	-	_	-
Mansfield Woodhouse	-	2	-	-	-	_
Sutton-in-Ashfield	3	-	7		-	-
Warsop			_	-		_
West Bridgford	4	5	7	1	2	1
Rural Districts—						
Basford	7	12	8	2	-	1
Bingham	5	3	4	-	-	1
East Retford	1	1	2		-	-
Newark	5	3	6	-	1	1
Southwell	2	6	5	1	2	1
Worksop	6	2	1	2		-
WHOLE COUNTY	73	81*	66	10	12	5

<sup>\*</sup>Including 1 non-civilian.

The onset was in mid-June (some six weeks earlier than in the two previous outbreaks) and notifications again reached their peak about mid-September. As in 1949, the decline in notifications was gradual and it was not until the end of the year that the County was generally regarded as free from cases.

The age incidence of the cases notified during 1950 was as follows:

Age range	Under 1 yr.	1-4 years	5-14 years	15-24 years	25–34 years	35-49 years	50–59 years	60 yrs. and over	Total
No. of Cases	3	13	26	12	7	3	1	1	66
Incidence	4.5%	20%	39.5%	18%	10.5%	4.5%	1.5%	1.5%	100%

As in previous outbreaks, full co-operation was maintained by the County Health Department with the Medical Officers of Health of the County Districts, and where necessary with the appropriate Officers of the Regional Hospital Board, in ensuring that sufferers received prompt treatment, and in such action as was requisite and possible to prevent the spread of infection. In this connection it was arranged that operations on children for the removal of tonsils and adenoids were postponed from July to October at one hospital in the eastern half of the County and immunisation against diphtheria was discontinued for a short period in two County Districts.

#### SANITARY CIRCUMSTANCES OF THE AREA.

## Prevention of Pollution of Rivers and Streams.

#### Industrial Pollution.

At Rufford Colliery there was, during the early part of the year, pollution to the stream by slurry waste caused by the disintegration of the banks of the old lagoons. Two new settling areas had been brought into use for the treatment of the waste and by the end of the year good work had been done on cleaning up the unsatisfactory conditions which existed between the old lagoons and the stream. An excavator had lowered the pitch of the banks and, to some extent, they had been covered with earth. A new collecting channel had been made along the foot of the lagoons as a safeguard against the movement of slurry deposit which might result from disintegration. The field below, on to which slurry had overflowed, had been cleaned up and some of the deposit had been taken out of the stream.

At Thoresby Colliery, in addition to the use of settling tanks for part of the slurry waste, there are lagoons formed below the tip into which some waste is discharged for settlement. The banks of the lagoons are made of slurry deposit and are near the open dyke which connects with the River Maun. Experience has shown that banks so formed are very liable to disintegration by variable weather conditions and there is a danger of pollution should any serious break-away of the banks occur. A request was made for the piping-in of the length of open effluent dyke alongside the bank of the lagoons and this work has now been completed.

The Trent Fishery Board complained of pollution to the River Leen by slurry waste from Cinderhill Colliery. Upon investigation it was suggested that a substantial barrier at the outlet end of the pond would provide adequate room for settlement especially as it was intended that no further slurry waste would pass to this area. The barrier has been built and the results, so far, are satisfactory.

Below Moorgreen Colliery tipping area slurry waste deposit was found in the Beggarlee Brook and was the result of an obstruction in a section of the rising main. To prevent further pollution a temporary lagoon was constructed by the side of the tip. This proved effective and no further evidence of pollution was observed. The rising main was cleared and conditions became normal.

At Warsop Main Colliery slurry waste deposit was seen in the dyke below the final ponds which were found to be full of solid matter. Representations resulted in mechanical means being employed and conditions were soon satisfactory.

During the year complaints were received from the Doncaster Branch of the National Farmers' Union, through the Trent Fishery Board, and from the County Surveyor, of pollution from Harworth Colliery. The dewatering of the lagoons, dealing with waste from the water tower, was one source of pollution. An endeavour has been made to reduce the amount of waste passing to the lagoons and greater care is being exercised in the discharge of top water. A second source of pollution was from waste intermittently discharged from the rotary filter. Three substantial barriers have been constructed to form lagoons and this point should now be under adequate control. Generally the plant at this pit is a good one but, as at other collieries, production has been so increased that the clarification units are overburdened. The need for an extension has, it is understood, been reported to Area Headquarters.

The conditions at Pye Hill Colliery have been unsatisfactory for some time and representations have been made to the Area General Manager asking for his immediate co-operation to bring about an improved state of affairs and an assurance has been received that the matter will be fully investigated.

At New Ollerton Colliery part of the high bank of a lagoon is made out of slurry waste deposit and there is a possibility of disintegration resulting in pollution. A request has been made for the piping-in of the stream alongside this bank and, it is understood, the matter is under consideration.

At Bentinck Colliery the slurry waste is pumped from a collecting tank to the tip where hollows have been formed. Towards the end of the year there were overflows to the river owing to a substantial increase in the amount of waste matter to be dealt with. The suggestion to keep the pump working a twenty-four hour day until a duplicate, or larger, pump could be installed was agreed to with satisfactory results.

With respect to the two Beet Sugar Works in the County, the final effluents taken from the Colwick Factory showed the desirability of some further degree of purification. It is understood that, owing to difficulties in the process, it was not possible to return the pulp press water for retreatment and as this is discharged to the general settling ponds it is reflected in the quality of the final effluents. Special piping is gradually being fitted in the Factory and it is hoped that, in due course it will be possible to re-use the pulp press waters.

At the Kelham Factory substantial quantities of deposited material were excavated from the settling ponds and used to increase the height of the banks around the ponds. Dividing walls, with penstock outlet controls, were also constructed.

# Sewerage and Sewage Disposal.

# Ministry of Health Inquiries.

During the year three Ministry of Health Inquiries have been held into applications by local authorities for sanction to raise loans for the construction of sewerage and sewage disposal works at a total estimated expenditure of £486,311.

The following are the details in brief :-

AUTHORITY.	Amount	Purpose of Loan
	£	
Sutton-in-Ashfield Urban District		Sewerage and
Council. Parish of Skegby	108,500	Sewage Disposa
Worksop Rural District Council.		0 1
Parish of Blyth	28,050	do.
East Retford Rural District Council.		
Parishes of Misterton, West		
Stockwith, Walkeringham and		
Beckingham	135,210	do.
Parishes of Everton and Mattersey	52,750	do.
Parishes of Hayton and Clar-		
borough	32,386	do.
Parishes of North and South	0-,000	a.
Leverton	32,525	do.
Parishes of East Markham and	02,020	ao.
Tuxford	62,800	do.
Parishes of Ranskill and Tor-	02,000	ao.
worth	34,090	do.

# New Sewage Works.

The construction of a new sewage works for the sewage and trades waste from the Pleasley Vale Mills has been completed. The plant consists of upward flow tanks, percolating filters, humus tanks and sludge drying beds. The trades waste is neutralised before discharge to the pumping sump at the sewage works.

At the Staythorpe Generating Station a sewage works, consisting of sedimentation tanks, percolating filters and humus tanks has been installed. The sewage is pumped from two points on the site to the tanks and the capacity of the plant has been designed to cope with the whole of the flow to be received when the building of the Station is completed. Also, in connection with the erection of thirteen houses in the village of Staythorpe built by the Electricity Board to house staff personnel, a small sewage works has been put down consisting of a settling tank, percolating filter, humus tank and sludge drying bed.

Thurgarton Priory, in the Southwell Rural District, is now owned by a firm of manufacturing chemists and is being run as an agricultural research station. The alterations necessitated the provision of a new purification plant and a settling tank, percolating filter, humus tank and sludge drying bed to deal with the sewage and other waste waters. In the Southwell Rural District separate sewage purification plants have been installed for housing schemes at Sutton-on-Trent, Walesby and Gunthorpe.

In connection with the erection of pit-head baths at Cossall Colliery a tank and filter have been put down for the treatment of the waste waters.

#### Alterations and Maintenance.

Provision has been made at the existing sewage works of the Harlow Wood Hospital for the sewage to be received from the Portland Training College. An additional unit has been added to each section of the plant and the extensions have been completed.

In the Basford Rural District, the main sewer from Westwood to Jacksdale sewage pumping station was so affected by colliery subsidence in 1947 that it was no longer possible for the sewage to gravitate to the pumping station and it was discharging to the stream where gross pollution took place. The District Council have now constructed a pumping station to lift the sewage to Jacksdale pumping station for treatment at the Bagthorpe Sewage Works. One pump is at work and a duplicate is being fitted.

# Sewerage Schemes.

In the Basford Rural District the construction of the main sewers and sewage pumping station in connection with the sewerage scheme for the Parish of Trowell has been completed and the sewage is now lifted to the Ilkeston Sewage Works for treatment. Also, in connection with the sewerage scheme for the Parish of Bestwood the construction of the main sewers has been completed. The sewage works previously dealing with the sewage from the Colliery property and pit head baths has been abandoned, the sewage being connected to the new sewer which delivers into the Nottingham City's drainage system.

In the Southwell Rural District the sewage and waste waters from the pit head baths at Thoresby Colliery have been connected to the Edwinstowe Sewage Works.

# Sampling of Effluents.

Periodical sampling of final effluents from the various sewage works in the County was undertaken as regularly as possible and, of the 151 tested, 103 were classified as 'good' or 'fair' and 48 as 'unsatisfactory' or 'bad.'

In addition to the sampling of final effluents taken and reported upon officially, 28 observation samples have been tested. These were taken mainly from the various units of sewage purification plants, and examined for the information and guidance of Engineers and Surveyors with a view to assisting them in the control of their works.

#### Statistics.

Analysis of Samples.

Summary of analyses of st Laboratory during 1950:—	amples	examined	in	the	County
Sewage Disposal Works:—					
Good effluents				63	
Fair effluents				40	
Unsatisfactory effluents				12	
Bad effluents				36	
					151
Others:—					
Manufactory effluents				6	
Untreated sewage discharge				i	
Observation samples				28	
					35
					186
Visits of Inspection.					
The number of visits paid during	ng the	year was as	follo	ws :-	
Sewage Disposal Works					366
Untreated Sewage Discharges					16
Industrial Works					496
					878

## Work undertaken by the County Health Inspector. Summary of Inspections.

No. of Visits paid

Investigations in connection with public water supplies Investigation of complaints of sanitary defects received	44
from Health Visitors, County Residents, etc	117
Investigation of Sanitary Circumstances generally (including interviews with Officers of County Districts)	483

# Dairies and Cowsheds.

No.		Fairly	
Inspected	Satisfactory	Satisfactory	Unsatisfactory
94	31	33	30

# Rural Housing Survey.

Three of the six Rural District Councils have completed the survey of working-class houses within their areas. (Term "working-class" abandoned by Housing Act 1949).

In other cases progress has been rather slow. Whilst realising to the full the many calls made upon those responsible for bringing the survey to a state of completion it is suspected that some feeling of frustration may be in part responsible for the whole county survey remaining incomplete. The value of the survey is undeniable as any scheme of reconditioning would require to be preceded by an assessment of conditions as they exist. It would be regrettable if the survey were "written off" at an interim stage.

## Public Cleansing.

Newark Rural

District ...

Southwell Rural

District ...

Great interest appears to have been shown during recent years in this subject.

The refuse dump as such has almost completely given way to the properly planned and organised area of controlled tipping with men employed full-time at the tip face.

In many cases too the collection vehicles are being replaced by new ones that may properly be described as the very last word in collection vehicles.

The following improvements were effected during the year :-

Worksop Borough . . Service extended to 170 new premises. One new 13 cubic yard side loading vehicle put into operation.

Arnold Urban District New 10 cubic yard vehicle put into service.

Beeston & Stapleford One movable floor rear loading vehicle put into Urban District . . service.

Carlton Urban New tip with anticipated life of 15-20 years brought into use.

Kirkby-in-Ashfield
Urban District
Department took place during the year. Four old side loading vehicles were replaced by two rear loading vehicles. A new tipping site was acquired.

Sutton-in-Ashfield Two hundred and eighty-seven pail closets were converted to the water-carriage system.

Collection by contract discontinued. Council . . now provide a regular collection by direct labour.

In six Parishes the work of collecting refuse was taken over by direct labour from 1st April, having previously been carried out by contract.

# WATER SUPPLIES.

	Particulars of	extensions of water mains.			None	None	715 yards of 4" and 6" pipe to new housing schemes	168 yards of 10° pipe 787 yards of 4° pipe 122 yards of 3° pipe	Branch mains on new housing estates	To new properties only.	3" main 113yds. 4" " 267 "	To Church View Housing Estate
		population connected to public mains.			Houses - 99.5% Population - 99.5%	Houses and Population-100%	Houses $-99.9\%$ Population $-99.9\%$	Houses — 96% Population — 96%	Houses and Population-99.9."	100% with the exception of a few isolated properties	Houses and Population—99,9%	Houses and Population—nearly 100%
	Action taken in	respect of any form of contamination.			None required	1	1	Chlorination as a precautionary measure	Well serving two cottages closed	1	Advice re treatment of water from shallow well	1
		Flumbo- solvency			Satis- factory	Do.	Do.	Do.	Do.	Do.	Do.	Do.
	Results of	Analyses :	Unsatis- factory		1	Nii	E.N.	-1	-	1	1	1
RKS.	Resul	Analyses	Satis-		21	NB	E N	01	10	60	1	-
ATERWO	ATIONS.	Water after treatment:	Unsatis- factory		1	Nil	-	1	1	1	1	1
ROM W.	RESULTS OF	Water	Satis- factory		10	•	19	4	-	1	1	1
SUPPLIES FROM WATERWORKS.	BACTERIOLOGICAL EXAMINATIONS.	Raw Water:	Unsatis- factory		1	NII	N	1	-	1	1	1
OF SUP	BACTER	Raw V	Satis- factory		i	1	22	*	-	01	1	1
PARTICULARS		Quantity.			Satisfactory	Do.	Do.	Do.	Do.	Do.	Do.	Do.
PA		Quality.			Satisfactory	Do.	Do.	Do.	Do.	Do.	Do	Do.
	DISTRICT.		URBAN DISTRICTS:	MANSPIRED (Borough)	NEWARK (Borough)	EAST RETFORD (Borough)	Workfor (Borough)	ARKOLD	BRESTON & STATLEFORD	CARLTON	EASTWOOD	

(part) Sandy Lane Estate	Total of 325 yds. to Holly Grove, Cedar Avenue, Thorney wood Rd., Northrowe, and Langton Colliery Baths	Extensions to Cox's Lane Housingscheme 620 yds. 3" main 250 yds. 4" main	Extensions to new housing schemes	400 yds. of 3" mains at Leeming Lane	To new houses	Mains laid to Kingston on - Soar, Ratcliffe- on-Soar, Thorpe in the Glebe, West Leake and	Extension to Flawborough started during year
	Houses—99.9% Population—99.9%	Houses—99.9% Population—99.7%	Houses and Population—99.1%	Houses—98.8% Population—99.5%	Houses and Population—99.9%	Houses—96.5% Population—94%	Houses—59% Population—55%
	N опе	Advice to users of the unsatisfactory water	None required	Use of one deep well discontinued	None	Notices served to eliminate causes of pollution or to con- nect to public mains	Satisfactory Satisfactory   112   134   14     Do. Wells relined, cleaned and repaired. Users advised to chlorinate water before use   The comply from mains has been satisfactory, the wells have been unsatisfactory in quality and quantity.
	Do.	Do.	Do	Do.	Do.	Do.	Do.
	1	1	N	N	1	-	n msatis
	69	-	00	Gi .	1	c)	have bee
	1	1-	N	NII	1	-	- the wells
	es	4	34	00	1	56	+4
	1	-	1	1	1	ıı	+34 +34 s bren sa
	eo	1	1	10	Î	10	+12 mains ha
	Unsatis- factory	Satisfactory	Insufficient for present population industries.	Satisfactory	Do.	Do. Do. Do. Iloughby-o n-the-Wold+)	*Satisfactory
	Do.	Do.	Do.	Do.	Do.	Do. (excepting Parish of Willoughby-on-the-Wolds	* Satisfactory * Satisfactory
	KIRKHT-IN-ASHFIRLD	Манетель Woodhouse	SUTTON-IN-ASHFIELD	WAREOP	WEST BRIDGEORD	RURAL DISTRICTS: BASTORD	BINGHAM

The supply from public water mains has been satisfactory, the † Supplies taken from wells.

# WATER SUPPLIES—continued.

	Particulars of	extensions of water mains.		Northern parishes mains extension was completed by laying of water main in Barnby-	4.680 yards of 3" m a in f 10 m Misson village to M 18 8 0 n	Springs Springs 840 yards of 3* main, Welham C o r n e r t o Leverton Road New 750,000 gallonreinforced concrete reser- voir completed New vacuum solution feed chlorinator put into operation	Mains supply provided at Rice Hill, Kirton. Extensions to new housing schemes	727 yards of 3" main to new houses 256 yards of 4" main to new factory
	Proportion of houses and			Not known	Houses and Population - 87%		Houses and Population - 94%	Houses—94% Population—96.3%
	Action taken in	of contamination.		None	None		None	None
	1	solveney		Satis- factory	Do		Do.	Do.
KS.	Results of	Chemical Analyses:	Unsatis- factory		NII		1	
ATERWORKS	Resu	Ana	Satis- factory	1	1		1	9
	INATIONS.	Water after treatment:	Unsatis-	1	N		NII	i
SUPPLIES FROM	RESULTS OF BACTERIOLOGICAL EXAMINATIONS.	Wate	Satis- factory	1	51		15	65
OF SUPP	RESTOROGIC	Raw Water:	Unsatis	1 .	NII		1	1
LARS 0	BACTI	Raw	Satis- factory	61	1-		1	io.
PARTICULARS		Quantity.		Periodical deficiency in peressure in parts of North and South Collingham and Langford	Satisfactory		Do.	Do.
		Quality.		Satisfactory	Do.		Do.	Do.
		DISTRICT.		:			:	;
		DIS		NEWARK	EAST RETFORD		SOUTHWELL	WORESOP

# INSPECTION AND SUPERVISION OF FOOD. The Milk Supply.

# Supervision by District Authorities.

The records of the inspections carried out during 1950, which have been furnished by District Medical Officers of Health, are as follows:—

Division		Register of year.		of ctions.		of found.		Defects edied.
District.	Distri- butors	Dairies	Distri- butors	Dairies	Distri- butors	Dairies	Distri- butors	Dairie
Boroughs— Mansfield	19	7	_	93		1	_	3
Worksop	26	14	119	37	-	-	-	-
Newark	10	3	41	41	-	-	-	-
East Retford Urban	3	1	-	18	-	-	-	-
Districts— Arnold	34	10	1	11	5	6	5	6
Beeston and Stapleford	23	11	27	39	_	-		_
Carlton	57	16	1	7		2	-	2
Eastwood	3	3	6	9	-	-	-	-
Hucknall	27	5	58	48	-	_	_	-
Kirkby-in- Ashfield .	. 21	4		29		3	-	3
Mansfield Woodhouse	42	3	67	15	-	1	-	1
Sutton-in- Ashfield .	. 67	15	184	52	12	8	12	8
Warsop .	. 5	4	61	12	-	-	-	-
W. Bridgford .	. 27	9	-	86	-	-	-	-
Rural Districts— Basford .	. 161	368	-	64	_	2	_	2
Bingham .	. 60	3		41		8		8
Worksop .	. 11	2	31	9		-	-	-
East Retford .	. 9	1	2	3		-	-	1 -
Newark .	. 6	_	4	-	-	-		-
Southwell .	. 102	80	14	5	3	3	2	2

ROUTINE MILK SAMPLING.

Type of Sample.	By whom collected.	No. of	No. of	No. of Samples submitted	RESULT OF	RESULT OF BIOLOGICAL EXAMINATION. No. OF SAMPLES.	XAMINATION.
		involved.	involved.	biological examination.	Positive.	Negative.	Not Tested.
Mixed herd (non-graded herd) County Milk Samplers	County Milk Samplers	2,347	21,594	750	4	699	37
School Milks	County Health Inspector	1	1	83	-	11	10
	Totals	2,347	21,594	833	45	746	42

Milk (Special Designations) (Pasteurised and Sterilised Milk) Regulations, 1949.

# Milk (Special Designations) (Raw Milk) Regulations, 1949.

The Chief Inspector of the County Food and Drugs Department has kindly provided the following information relating to Dealers' Licences in operation at 31st December, 1950, under the above Regulations:—

Pasteurised Milk—Licensed	Processors	 13
Sterilised Milk	do.	 1

According to information provided by County District Councils, the number of Licences in operation at the end of the year for the sale of graded milks was as follows:—

Pasteurised Milk	 	 290
Sterilised Milk	 	 343
Tuberculin Tested Milk	 	 171
Accredited Milk	 	 3

#### School Milk.

The number of School Milk samples taken on School premises during the year by the County Health Inspector and submitted for biological examination for the presence of tubercle bacillus was as follows:—

		RESULT OF B	orogic	CAL EXAMINAT	ION.
No. of Samples.	]	Positive.	N	Not	
Sumpres.	No.	Percentage.	No.	Percentage.	Not Tested
83	1	1.2	77	92.4	5

With the exception of one village school in a somewhat isolated position, all schools are supplied with pasteurised milk. The use of one-third pint bottles is now general practice.

In the one instance the milk is supplied by a local producer and is heated to boiling point by the school mistress before consumption.

As a check on the efficiency of pasteurisation and upon the hygiene of the dairy, e.g., cleanliness of bottles, etc., at least two samples from each supplier are taken during the year.

Of the 25 dairies supplying milk under the scheme only 8 employ the Holder system of pasteurisation. The remaining 17 dairies have installed H.T.S.T. plants indicating a progressive outlook by the dairy industry in and around the County.

# Food and Drugs Act, 1938.

The adulteration of food is dealt with by the County Food and Drugs Department and, by the courtesy of the Chief Inspector (Mr. Gregory) a summary of the work carried out during the year is given below.

ARTICLE	Obtained	Tested by Inspectors	Analysed by Public Analyst	Genuine	Adulter- ated or Sub- standard
Beverages	37		37	37	
Butter and Margarine	14		14	14	
Cakes and Pastries	42		42	42	
Cake Flour and Mixtures	19		19	17	2
Condiments, Pickles and					_
Sauces	99		99	95	4
Cooking Oils and Fats	16		16	15	i
Cordials and Minerals	18		18	17	î
Dried Fruit	16		16	16	
Drugsvarious	41		41	41	
Fish Products	37		37	35	2
Fruit and Vegetables	7		0.	00	-
(Canned)	26		26	24	2
Herbs and Stuffings	14		14	14	-
Ice Cream	149	81	68	64	4
Jams and Preserves	36		36	36	
Meat Products	78		78	73	5
Milk Formal	984	942	42	10	32
Milk, Informal	2,370	2,370	12	10	02
Milk (Supervised Milking)	23	1	22	18	4
Milk, Condensed	14		14	14	
Miscellaneous Foods	22		22	22	
Puddings and Pudding					
Mixtures	23		23	23	
Sweets	24		24	22	2
Table Jellies & Powders			47	44	3
Wines and Spirits	41		41	40	1
Totals	4,190	3,394	796	733	63

# Inspection of Meat and Other Foods.

In accordance with the Livestock (Restriction on Slaughtering) Order, 1940, the slaughtering of animals for human consumption continued during 1950 to be centralised under the control of the Ministry of Food at requisitioned Slaughter Houses at Nottingham, Mansfield, Newark and East Retford so that the only inspection of Slaughter Houses and of carcases carried out in other Sanitary Districts was in connection with the slaughtering of privately owned pigs. All Sanitary Inspectors employed by the appropriate District Councils assisted, however, in the inspection of carcases at the Slaughter Houses used by the Ministry of Food and particulars of carcases inspected and condemned by these Officers as reported by Medical Officers of Health of the County Districts are as follows:—

	Cattle (excluding Cows)	Cows	Calves	Sheep and Lambs	Pigs
Number killed	*13,5	92	9,207	36,928	10,759
Number inspected	*13,5	92	9,207	36,928	10,759
All diseases except Tuberculosis Whole carcases condemned	*!	33	165	194	76
Carcases of which some part or organ was condemned	*3,69	)5	43	942	408
Percentage of the number inspected affected with disease other than Tuberculosis	27.8	%	2.2%	3.07%	4.5%
Tuberculosis only Whole carcases condemned	*3]	1	54	_	37
Carcases of which some part or organ was condemned	*2,97	79	58	_	495
Percentage of the number inspected affected with Tuberculosis	24.29	%	1.2%	<del></del>	4.9%

<sup>\*</sup>Separate figures not available in all County Districts,

The above inspections necessitated 3,864 visits to slaughterhouses. Three thousand and forty-five visits were also paid to premises where meat was on retail sale.

The total weight of meat condemned as a result of these inspections and visits was 35,868 stones.

Unsatisfactory conditions were recorded in 119 instances, and in 103 cases the necessary remedial work had been carried out by the end of the year.

## Food Poisoning Outbreaks.

Twenty-one outbreaks were reported during the year, the details being as follows:—

No. of Outbreaks	No. of Cases	No. of Deaths	Organism of Agent respo		Food inv	olved
Outoreaks	Cases	Deaths	Organism	No. of Outbreaks	Food	No. of Outbreaks
21	40	None	Salmonella Typhimurium Staphylococci Unknown	7 1 13	?Artificial Cream Crab ?Tripe Pork Sausage ?Sweets Hazlets Corned Beef Duck Eggs Trifle Brawn Meat Choc. Cream Unknown	1 1 1 1 2 1 2 1 1 1 1 1

## Clean Food Campaigns.

Byelaws made under Section 15 of the Food and Drugs Act, 1938, became operative in seven County Districts during the year.

Clean Food Guilds have been formed in several districts, and there have been lectures and film shows for food traders and the general public.

There have been many special visits to food preparing premises, and the food manufacturers and traders have acted upon suggestions for improving the sanitary condition of their premises.

#### NURSING HOMES.

No applications in respect of the registration of additional premises were received during 1950. The Keeper of one of the existing Nursing Homes intimated that she wished to vary her approved accommodation from five maternity cases to three maternity and two other cases and this was authorised; the approved accommodation of another Home was varied from twelve maternity cases to five maternity and three other cases. The accommodation of another Home was increased from eight maternity cases to three maternity and seven other cases.

The Nursing Home at 24 Caledonian Road, Retford, registered for two chronic cases, was sold in March, 1950, and the registration cancelled.

There were nine Nursing Homes registered at the end of 1950, and these provided accommodation for thirty-five maternity cases and fifty-six other cases. The Inspectors made forty-three visits of inspection during the year.

### CLINICS AND TREATMENT CENTRES.

The table which follows shows the various Clinics and Centres in operation in the County, and the figures shown opposite each place indicate the number of sessions held under each heading per month of four weeks.

SITUATION OF CLINIC OR CENTRE	Maternity and Child Welfare	Ante- Natal	Post- Natal	School Clinic	Dental
Arnold (3 M. C. W. Centres)	16	6	2	- 8	
Awsworth	2	2	_		
Balderton	4	1	_	4 -	_
Barnby Moor	2	î			_
Beauvale	4	2	_	_	-
(a) Beeston (and Stapleford)	12	8		8	8
Bestwood	2	1		_	
Bilsthorpe	4	2	_	8	4
Bingham	4	1		_	
Blidworth	4	2		_	_
DL-41		1			_
	2 2 2	î		_	-
	9	î			-
~ *	2	2			-
0 1:	16	12	1	12	8
	2	2	1	12	
Chilwell (Beeston)	4	2		8	7
Clipstone	2	1		_	
Collingham	2	1			_
Cotgrave	2 ,	1			
Cropwell Bishop	2 2 2 2 2	1		100	
Cuckney	2				
Dunham-on-Trent	2	1			1000
East Bridgford	2 2	2		4	_
East Leake		4		8	8
East Retford	12		-	8	8
Eastwood	4	4	_	0	0
Edwinstowe	4	2	75		
Farndon	2	1	-	_	
Flintham	2 2	1	-	-	
Gotham	2	1			
Gringley-on-the-Hill	2	1		_	_
Harworth	8	4	_	8	8
Hickling		1	-	10	_
Hucknall		6	1	12	8
Huthwaite (Sutton-in-Ashfield)	4	2		-	2
Kilvington		1		-	-
Kimberley		4	-	8	_
Kirkby-in-Ashfield		4	_	8	8
Lambley	2 2	1	_	-	-
Langar	2	2	-	-	-
Langold	4	2	-	8	-
Lowdham	4	1	-		
(b) Mansfield (4 M. C. W. and				1	
Ante-Natal Centres,			La de la contraction de la con		
2 School Clinics)	28	16	_	20	42
Mansfield Woodhouse (2 M. C. W.					
and Ante-Natal Clinics)	12	4		8	

<sup>(</sup>a) Ultra-Violet Light Treatment-16 Sessions per month.

<sup>(</sup>b) Ultra-Violet Light Treatment— 8 Sessions per month.

# CLINICS AND TREATMENT CENTRES—continued.

SITUATION OF CLIN OR CENTRE	ric .	Maternity and Child Welfare	Ante- Natal	Post- Natal	School Clinic	Dental
Mattersey		 2	1	_	_	
		 2	1	_	-	_
		 4	2	_	_	
Newark		 8	2	_	12	8
Newstead		 6	2	-	-	
North Muskham		 2	1	_	_	
Nuthall		 2	1	-	_	
Ollerton		 8	4	-	8	8
Papplewick		 2	1	_	-	
Plumtree		 2	1	_	_	
Porchester		 8	3		_	
Radcliffe-on-Trent .			1	-	4	-
Rainworth		 2 2	1	_		
D., J.J.,		 2	2		_	
0-1-4		 2	2	_	8	
Skegby and Stanton Hill (8			_			
in-Ashfield)		 4	4	1		
South Clifton		 2	Î.	_		
South Leverton		2	î	_		
Southwell		4	î		4	4
Standhill Road (Carlton)		4	9		*	4
Stapleford (and Beeston)		8	2		8	8
Sutton Bonnington .		2	2		0	0
Sutton-in-Ashfield .		8	8	1	12	16
Sutton-on-Trent		 2	1		12	10
Syerston		2	1			
Trowell		2	i			
Tuxford		4	9			-
Underwood		2	1			
Upper Broughton		 2	1			
Warsop (3 M. C. W. Centr		 12	Å	-	8	-
West Bridgford		12	4	1	8	0
Westwood		 2	2	1	8	8
W:11 1.1		 2	1			-
Worksop (4 M. C. W. Cen		 14	6	2	0	-
TOTASOP (4 M. C. W. Cell	tres)	 14	0	2	8	8

All Centres and Clinics are equipped for vaccination or immunisation and this is carried out at special sessions arranged according to need or at the request of a parent at a routine session.

# SERVICES PROVIDED UNDER THE NATIONAL HEALTH SERVICE ACT, 1946.

# HEALTH CENTRES. (Section 21.

There is still no sign of any alleviation of the conditions of stringency which have hitherto hampered the development of Health Centres, and in consequence there is little progress to report in this connection during the year 1950.

Further discussions have been held with the staff of the County Director of Planning as regards reservation of sites in the localities tentatively approved by the County Health Committee for the erection of Health Centres, and site plans have been prepared and submitted to the County Director of Planning with a view to the provisional designation of sites in certain areas. The County Director of Planning has also been asked to reserve sites in connection with projected developments at (i) Sutton-in-Ashfield, and (ii) Newstead and Fishpool.

# CARE OF MOTHERS AND YOUNG CHILDREN (Section 22).

### Child Welfare Centres.

One additional Centre was established during the year bringing the total number of Centres to eighty-nine. The new Centre was opened at Upper Broughton on the 16th August. Minor variations in the existing Centres included the transfer of the Centre previously held at Rhodesia (Worksop) to more suitable premises at the Parish Hall, Shireoaks, the provision of an additional fortnightly session for "toddlers" at the Newark Centre and the reduction, owing to reduced attendances, of the sessions of the Lowdham Centre from two to one session per week.

A list of the Centres now operating in the County, with details of sessions, is set out on pages 41 to 42. The attendances made and medical consultations undertaken at the Centres during 1950 were as follows:—

	ATTENDANCES	MEDICAL CONSULTATIONS
Infants	 100,406	24,567
Children	 60,529	17,619
Expectant Mothers	 737	639
Post-Natal Mothers	 120	106
	161,792	42,931
		-

#### Ante-Natal and Post-Natal Clinics.

The medical examination of expectant mothers and post-natal cases is undertaken in the scattered rural areas at those sessions of the Child Welfare Centres which are attended by the Medical Officers. In the urban districts and the more populous rural areas, special sessions for ante-natal and post-natal cases are provided and separate sessions for each category are held where the attendances are sufficiently large.

At the end of the year there were seventy-six Centres at which Ante-Natal and Post-Natal examinations were undertaken; twenty-eight of these were at combined centres, separate sessions for ante-natal and post-natal cases were provided at forty-eight centres, and there were seven centres at which special sessions for post-natal work were held. The table given on pages 41 to 42 shows the frequency of the sessions, and particulars of the work undertaken during the year are as follows:—

	ANTE-NATAL	POST-NATAL
Attendances: Primary Total Medical Consultations	 4,376 27,688 27,141	752 1,125 1,083

#### Consultant Services.

Three hundred and sixty-nine cases were referred from the Ante-Natal and Post-Natal Clinics for specialist advice to the Consultant Clinics of the Basford Highbury Hospital, Mansfield Victoria Hospital, Nottingham Hospital for Women and the Worksop Victoria Hospital. Reports on X-ray examinations were obtained in eighty cases from the Mansfield and District General Hospital, Newark Town and District Hospital, Nottingham General Hospital and Worksop Victoria and Kilton Hospitals.

# Maternity Hospital Treatment.

The ever present and ever pressing task of finding maternity hospital beds was lightened considerably by the active co-operation of the Medical Officers of the hospitals concerned. The uniform method established over the whole County last year for investigating the circumstances of each applicant desiring admission on account of unsuitable home conditions continued to work smoothly and the resultant standardisation of assessment ensured that each case was dealt with on its merits.

The total number of cases admitted during the year was 1,740; of these 248 were admitted on account of anticipated complications of maternity and 1,492 owing to the home conditions being unsuitable for confinement.

# Provision of Maternity Outfits and Pads.

Four thousand three hundred and thirty-six sterilised maternity outfits and four hundred and forty-six packets of maternity pads were issued for domiciliary confinements on the certificate of the Health Visitor or Midwife engaged for the confinement.

# Loan of Elastic Bandages.

No applications were received under the scheme for loaning elastic bandages to expectant mothers on the recommendation of the Ante-Natal Medical Officers.

### Birth Control.

Selected cases requiring contraceptive advice are either dealt with at the special session held at the Gilcroft Street Centre, Mansfield, or are referred to the Nottingham Women's Welfare Centre or the Clinics at Orchard Place, Sheffield and Wood Street, Doncaster.

Assistance towards the cost of obtaining such advice and the necessary appliance was afforded in one case.

#### Maternal Deaths.

Sani

Twelve maternal deaths occurred during the year and were located as follows:--

itary District—			
Newark Borough		 	2
Worksop Borough		 	1
Beeston and Staplefor	d Urban	 	1
Carlton Urban		 	1
Eastwood Urban		 	1
Sutton in-Ashfield Url	oan	 	1
Basford Rural		 :	1
Bingham Rural		 	1
Retford Rural		 	2
Southwell Rural		 	1
	TOTAL	 	12

In no case was the cause of death attributable to septic conditions.

### Premature Infants.

Arrangements for the care of premature infants provide for the services of a paediatrician, if required by the medical practitioner in attendance, and the loan of special cots and equipment where necessary in cases where the child can be nursed adequately at home. Heated ambulances are available for the transport of children requiring hospital treatment.

During 1950, two hundred and ten premature babies were born at home and three hundred and eight in hospitals or Nursing Homes. Of those born at home, twenty-five were subsequently admitted for hospital treatment.

#### The Pre-School Child.

The scheme for the ascertainment and follow-up of defects in children under school age was continued, cases requiring treatment being referred to the National Health Service in those cases where the arrangements could not be made directly by this Department.

# Services of Paediatricians.

The Regional Hospital Board have placed the part-time services of Consultant Paediatricians at the disposal of the County Council and weekly sessions were established towards the end of the year at the Child Guidance Clinic, Fletcher Gate, Nottingham, and at the Mansfield and Worksop School Clinics. Selected pre-school and school children referred by the Assistant County Medical Officers attend these sessions by appointment and, with the co-operation of the local Hospitals, the Paediatricians are able to arrange for any necessary treatment to be undertaken by the appropriate hospital departments.

## Chronic Tonsils and/or Adenoids.

Ninety-four pre-school children requiring operative treatment were referred to the Nottingham Children's Hospital, the Mansfield, Newark, Retford and Worksop General Hospitals or to the Worksop Kilton Hospital.

# Orthopaedic Treatment.

During the year 336 children were referred by the Medical Officers of the Child Welfare Centres to the various Orthopaedic Clinics now administered by the Regional Hospital Board.

#### Boarded-Out Children.

Investigations into the home conditions of one hundred and sixtyfour applicants who wished to undertake the duties of foster parents were undertaken by the Health Visitors on behalf of the Children's Department.

# Daily Guardians Scheme.

The arrangements for the registration and payment of women suitable and willing to undertake the care of children while their mothers are at work were continued during the year.

Cases on Register at 1st	Janua	ry, 1950	 56
New cases approved			 64
Cases discontinued			 63
Cases on Register at 31s	st Dece	mber, 1950	 57

# Day Nurseries.

The average attendances at the Nurseries were as follows:-

		Under 2 years	2-5 years
Beeston	 	8	28
Carlton	 	5	13
Eastwood	 	10	26
Harworth	 	9	24
Mansfield (Bull Farm)	 	10	25
,, (Ravensdale)	 	8	24
Newark	 	6	19
Stapleford	 	11	34
West Bridgford	 	5	13

# Nurseries and Child Minders Regulation Act, 1948.

There are two Child Minders registered under this Act, approval being given for the care of four children in one case and fifteen children in the other.

# Dental Care of Expectant and Nursing Mothers and of Children Under School Age.

The very serious shortage of Dental staff mentioned in the Reports for previous years continued during the whole of 1950, and so, once again, it is necessary to have to report that the approved dental scheme under Section 22 of the National Health Service Act could be implemented only to a very limited extent.

The limited available services were, as far as possible, spread evenly throughout the whole of the administrative County, but, as in the previous year, there were numerous occasions on which the planned work of a session was seriously interfered with by the unexpected attendance of schoolchildren suffering from toothache.

The general position was such that the dental staff had no alternative but to advise many of the expectant and nursing mothers who sought their services to endeavour to seek their necessary dental treatment through the agency of private practitioners working under the National Health Service Scheme. The most serious difficulties arose in regard to the provision of adequate dental treatment for children under school age, because only a limited proportion of the private practitioners within the administrative County are willing to accept these young children as patients. It will be noted from the following statistical table that 525 such children received dental treatment from the County Council's Dental Officers, but this is only a very small proportion of the total number of these "toddlers" who did, in actual fact, require dental treatment. No information can be obtained as to the number of young children who received treatment through other agencies.

The procedure by means of which artificial dentures are constructed by a firm of independent dental technicians working under contract with the County Council was continued during the year, and under this scheme 290 individual women were provided with either complete or partial dentures.

In regard to the facilities for the taking of X-ray photographs, there are seven dental clinics within the County which are equipped with dental X-ray units, with the result that any expectant or nursing mother and pre-schoolchild requiring dental X-ray photographs may have these taken at short notice and at the clinic at which they attend for treatment.

The following statistical table indicates that in spite of the serious shortage of staff, a fair amount of treatment was accomplished but, unfortunately, the table can give no indication of the amount of treatment which had to be left undone.

#### (a) Numbers provided with dental care.

	Examined	Needing Treatment	Treated	Made Dentally Fit
Expectant and Nursing Mothers	491	487	404	338
Children under five	525	525	525	525

## (b) Forms of dental treatment provided.

		Anaes	thetics							tures
	Extractions	Local	General	Fillings	Scalings or Scalings and gum treatment	Silver Nitrate treatment	Dressings	Radiographs	Complete	Partial
Expectant and Nursing Mothers	1817	606		821	134	5	198	*	150	140
Children under five	749	382	1	184	_	265	105	*	-	-

<sup>\*</sup> Numbers not recorded.

# MIDWIFERY (Section 23).

The Nottinghamshire County Council are the Local Supervising Authority for the whole administrative County.

During the year 224 Midwives notified their intention to practise in the County area, three of these restricting their activities to maternity nursing only.

Supervision is normally carried out by the whole-time non-Medical Supervisor of Midwives, Miss M. K. Collins, the part-time non-Medical Supervisor of Midwives, Miss R. E. Hermes, and by Dr. Black in special cases. Four hundred and eighty-two visits and 2,102 investigations into abnormal cases were made during the year.

Suspension from practice in order to prevent the spread of infection was necessary in the case of twenty-two Midwives, i.e., County Midwives—ten, District Nurse-Midwives—twelve.

In 1950 medical aid was sent for in 1,232 cases, 1,204 by Domiciliary Midwives and 28 by Midwives practising in Hospitals or Institutions.

The number of claim forms submitted by Medical Practitioners was 642, claiming fees amounting to £1,931 0s. 8d.

Other statutory notices were received from Midwives as follows:-

Notifications	of Stillbirth			86
Do.	Death of Child			40
Do.	Death of Mother			3
Do.	Laying out the Dead			8
Do.	Liability to be a Source	of Infe	ction	106
Do.	Artificial Feeding			419
				662

# Eye Discharge in the Newborn.

Seventy-four cases of inflammation of, or discharge from, the eyes of new-born infants were notified, eight being also notified as Ophthalmia Neonatorum.

Every case attended by a Midwife was inquired into immediately by a Supervisor (Non-Medical) of Midwives, and was subsequently followed-up by a Health Visitor.

Six cases received hospital treatment and unimpaired vision resulted in all cases.

# Puerperal Pyrexia.

Twenty-two cases of Puerperal Pyrexia were notified during the year, as follows:—

Domiciliary Confinements 17 Institutional Confinements 5

Of the seventeen confined at home, nine were subsequently admitted to hospital for treatment. All made good recoveries.

# County Midwives.

The number of whole-time Midwives employed directly by the County Council at the end of 1950 was sixty-five. Three Midwives resigned during the year and four new appointments were made.

The following is a summary of the work done by the County Midwives during the year:—

	1	Visits.		
Ante-Natal—Home				29,431
Clinie				8,296
Deliveries—Midwifery			2,488	
Maternity			958	
				3,446
Lying-in				62,637
				103,810

# Transport.

Fifty-five of the County Midwives use motor-cars for the purpose of carrying out their duties; the remainder normally use bicycles but hire cars when necessary for emergency or long distance cases. Travelling allowances are paid in accordance with the County Council's scales. Assistance in purchasing cars under the Council's Car Purchase Scheme was afforded in eight cases and the arrangements made by the Ministry of Health with the motor industry again proved most helpful in accelerating the delivery of cars.

# Gas and Air Analgesia.

Three District Nurse-Midwives received training in the administration of gas and air analgesia at the Basford Highbury Hospital during 1950 and were successful in passing the examination.

At the end of 1950 there were one hundred and eighteen Midwives qualified to administer gas and air analgesia; of these sixty-three were County Midwives and fifty-five District Nurse-Midwives.

Sixty-three County Midwives and fifty-one District Nurse-Midwives were in possession of a Minnitt Gas-Air Apparatus at the end of 1950.

Two thousand one hundred and fifty-five cases received gas and air analgesia during their deliveries, 1,443 of these administrations being given by County Midwives and 712 by District Nurse-Midwives.

The routine inspection and maintenance of the apparatus is undertaken by skilled engineers under an arrangement made with the manufacturers.

# Agency Arrangements with the Nottinghamshire Nursing Federation and District Nursing Associations.

The arrangements described in the Annual Reports for 1948 and 1949 for the utilisation of the Nottinghamshire Nursing Federation and the affiliated and associated District Nursing Associations in connection with the provision of the Domiciliary Midwifery Service continued to operate throughout the year 1950.

Certain re-organisation has been effected, and the number of District Nursing Associations participating in this Service at the end of the year was fifty-one, as compared with fifty-three at the end of 1949.

The sixty-one Nurse-Midwives employed by these Associations attended 1,565 confinements during the year, and their services represented the equivalent of twenty-four full-time Midwives. In 1949 sixty-three Nurse-Midwives attended 1,760 confinements, and their services represented the equivalent of twenty-seven full-time Midwives.

Further comment on the work undertaken by the District Nurse-Midwives employed by District Nursing Associations will be found under the heading of "Home Nursing."

# HEALTH VISITING (Section 24).

The Pupil Health Visitor Training Scheme established by the Nottingham University in conjunction with the Nottingham Corporation and the County Council resulted in six Health Visitors being available for appointment to the County Staff; in addition, one Health Visitor was secured through normal recruitment.

There was a loss by resignation or retirement of one Superintendent, four Health Visitors and one Clinic Nurse. Two Health Visitors were promoted to Superintendents and the Health Visiting staff at the end of 1950 was comprised of three Superintendents and sixty-seven Health Visitors, there being eleven vacancies.

The home visiting figures show an increase of 13,724 on those for 1949, the details being as follows:—

First Visits to Infants	 	 9,423
First Visits to Children	 	 1,868
Re-visits to Infants	 	 41,306
Re-visits to Children	 	 99,572
Visits to Expectant Mothers	 	 8,795
Visits to Post-Natal Mothers	 	 514
General Health Visiting	 	 2,038
		163,516

The cases in which the Health Visitors were consulted on General Health Visiting matters covered a large field as is indicated in the following table:—

Age and Infirmity			31	Mental Defectiveness	s	 6
Bronchitis			14	Miscellaneous Troub	les	 18
Congenital Deformit	y		2	Muscular Trouble		 6
Deafness			2	Nervous Conditions		 12
Defective Vision			9	Paralysis		 13
Dental Conditions			2	Pneumonia		17
Diabetes			4	Post-Operative Care		 20
Epilepsy			1	Prolapse		 5
Gastric Trouble			3	Rheumatism		 13
General Debility			15	Skin Diseases		 15
Glandular Conditions	S		6	Spinal Conditions		 5
Heart Complaints			11	Stroke		 3
Other Circulatory Co	onditio	ns	20	Tonsillitis		 9
Infectious Diseases			26	Tuberculosis		12
Influenza			9	Wounds and Accider		

# HOME NURSING (Section 25).

The arrangements for the provision of a Home Nursing Service remained substantially the same during 1950 as in 1949.

At the end of the year, due to the re-organisation referred to under the heading of "Midwifery," the number of District Nursing Associations participating in the Service was seventy-one, as compared with seventy-two in the previous year. There were, however, two Associations without Executive Committees or Honorary Officers, and although continuity of service was ensured by the administration of these Associations' affairs by the Nottinghamshire Nursing Federation this arrangement could not be regarded as altogether satisfactory.

As regards staffing there is very little to add to what was said in the last Annual Report, and the staff is still numerically very considerably short of the standard of one per four thousand of the population laid down in the County Council's Proposals.

The ready co-operation of the Housing Authorities in providing housing accommodation for District Nurses is again gratefully acknowledged. During the year four further District Nurses were allotted Council houses, and the County Council themselves purchased and renovated a property at Kinoulton for the use of the District Nurse serving the Hickling and District Nursing Association's area.

The anomaly referred to in the last Report, which results when a Housing Authority allocate a house to a Nurse and not to her employing body, is still giving rise to considerable difficulty. It is manifestly unfair that where two Nurses are occupying exactly similar accommodation one should be required to pay the full rent, while the other is required to pay ten shillings a week only, because the house is let to her employing body and not to the Nurse herself.

Moreover, the allocation of the house to the employing body ensures that it is always available for whichever District Nurse is serving the area for the time being.

The purchase of motor cars was approved for five District Nursing Associations during the year, and the provision of garages was authorised in nine instances, in each case through Sherwood Industries.

The more generous scale of nursing equipment which has been provided for District Nurses since the County Council assumed responsibility for the Home Nursing Service has created problems of storage which have been solved by the provision of cupboards specially made for the purpose by Sherwood Industries. These cupboards have been very highly commended by the County Superintendent of the Nottinghamshire Nursing Federation and by the District Nurses. Their provision involved during the year a total expenditure of approximately £450.

The long-awaited decision of the Nurses Whitley Council with regard to the salaries of District Nurses and Midwives was received during the year. The general effect of this decision—which operated as from the 1st February, 1949—was to increase the minimum of the scale of salaries applicable to each category by £40 per annum and the maximum by £60 per annum. For the period from the 1st February, 1949, to the 31st March, 1950, the total additional cost resulting from the decision amounted to approximately £16,000, of which £4,000 was attributable to Midwifery and £12,000 to Home Nursing.

In recent years much has been done to improve the conditions of service of the nursing profession generally, but still the number of nurses available is inadequate for the country's needs, whether hospital or domiciliary—this despite the fact that it is stated that the number of women employed in the nursing profession is greater than ever before. One cannot, therefore, escape the conclusion that the problem of the shortage of nurses will not be solved merely by improving conditions of service.

The County Council agreed to send six District Nurses to a Refresher Course held at Bangor from the 14th to the 21st April, and the Nurses who attended the Course have expressed their appreciation of the County Council's action.

It is pleasing to record the public spirit shown by the Hucknall District Nursing Association in offering a Hall in their possession for conversion into flats for District Nurses and themselves undertaking to pay £700 of their own money towards the cost.

During the year the County Council agreed to refurnish the District Nurses' Home at Retford at a cost of £225.

Three Associations during the year handed over to the County Council's Superannuation Fund the proceeds of the sale of motor cars no longer fit for the exacting requirements of District Nurse-Midwives. Two second-hand cars which had been purchased by the County Council for use by a District Nursing Association and the Nottinghamshire Nursing Federation were also sold.

A statistical table is appended, showing the work undertaken by the District Nurses during the year in connection with the Home Nursing Service, with figures for 1949 for comparison.

# Home Nursing Statistics, 1950.

(Figures in brackets relate to the year	r 1949)		
Total No. of Cases attended			(8,387)
Average No. of Cases attended per			
lent of whole-time Nurse		100	(106)
Total No. of Visits paid		225,575	(208,000)
Average No. of Visits paid per equiv	alent of	2,536	(2,633)
whole-time Nurse		0.00	or
		49 per week	(51 per week)

Average No. of Visits paid per Case	25	(25)
Equivalent of Whole-time Staff employed		
in Home Nursing	85†	(79)
Equivalent of Whole-time Staff required on		
basis laid down in County Council's		
Proposals (1 per 4,000 population—County		
population mid-1949—523,160*)	131	(130)
Extent to which Existing Staff falls short of		
requirements (expressed as equivalent of		
Whole-time Nurses)	46	(51)
Ratio of Existing Staff to Population (ex-		, , ,
pressed as equivalent of Whole-time		
Nurses)	1 per 6,154	(1 per 6,651)
	1	, , , , , , ,

<sup>\*</sup> Estimated increase of population 1948-9 was 4,860.

# VACCINATION AND IMMUNISATION (Section 26).

# Diphtheria Immunisation.

During 1950 the Council continued to use the services of District Medical Officers of Health, acting as their agents on agreed terms, for the organisation and conduct of approved sessional arrangements, and reimbursed to the several County District Councils the whole of the approved cost involved. The Council's medical and nursing staffs also assisted in the work where necessary, individual immunisations being carried out at Child Welfare or School Clinic sessions, all such Centres being equipped for the purpose.

In addition, the opportunity to serve under the Council's arrangements continued to be extended to all general medical practitioners in the County area and at 31st December, 1950, two hundred and nineteen practitioners were participating in this Scheme, an increase of thirty-one during the year.

The following table shows the estimated population of children under five and aged five to fourteen years and the number of children in these two age groups who had completed a full course of immunisation at any time up to 31st December, 1950, in each of the County Districts and in the whole County area:—

<sup>†</sup> The total number of individual Nurses (excluding administrative and supervisory staff) employed in the Service at 31-12-50 was 110. Of these 47 were engaged full-time in Home Nursing and 63 gave part of their time to Midwifery. The time devoted to Home Nursing by these 63 Nurse-Midwives was equivalent to the services of 38 full-time Home Nurses.

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TYGENDIAM		ESTIMA	ESTIMATED POPULATION.	ION.	No. OF AT ANY	No. of Children Immunised at any time up to 31/12/50	MUNISED 31/12/50.
DISTAICT.		0.4 yrs.	5-14 yrs.	Total (under 15)	0.4 yrs.	5-14 yrs.	Total (under 15)
Mansfield (Borough)		4,366	7,169	11,535	2,099	7,001	9,100
Worksop (Borough)		2,993	4,960	7,953	1,333	882*	2,218
Newark (Borough)	:	1,911	3,060	4,971	1,201	2,720	3,921
East Retford (Borough)		1.404	2,198	3,602	652	2,430	3,082
Arnold		1,949	2,909	4,858	1,390	2,915	4,305
Beeston and Stapleford	:	4,597	7,271	11.868	2,607	6,362	8,969
Carlton		3,092	4,530	7,622	1,753	3,566	5,319
Eastwood		946	1,416	2,362	530	1,079	1,609
Hucknall		2,138	3,559	5.697	1.186	2,274	3,460
Kirkbv-in-Ashfield		1.844	3,055	4.899	1,065	2,752	3.817
Mansfield Woodhouse		1,778	2.863	4.641	829	2,408	3,237
Sutton-in-Ashfield		3,548	6,016	9,564	2,475	5,890	8,365
Warsop		1.048	1,758	2.806	754	1.432	2,186
West Bridgford		1,746	2,786	4,532	1,088	1,838	2,926
TOTAL (Urban Districts)		33,360	53,550	86,910	18,962	43,552	62.514
Rural Districts.							
Basford		4,310	7,030	11,340	2,477	5,640	8,117
Bingham		1,481	2,399	3,880	794	1,698	2,492
Worksop		1,554	2,614	4,168	896	2,450	3,418
East Retford		1,683	2,775	4,458	949	3,000	3,949
Newark		897	1,623	2,520	511	1,523	2,034
Southwell	+	3,405	5,759	9,164	2,008	5,742	7,750
TOTAL (Rural Districts	(	13,330	22,200	35,530	7,707	20,053	27,760
Whole County—GRAND TOTAL		46,690	75,750	122,440	26,669	63,605	90,274
		Better the modifieds	SAMPLE OF THE PARTY AND PARTY.	the sales and the sales of the sales of	THE REAL PROPERTY AND ADDRESS OF THE PERSON NAMED AND ADDRESS	Bearing or September 1	A AND PERSONS AND PROPERTY OF PERSONS ASSESSED.

\*Complete figures not available.

The figures for the Urban Districts, Rural Districts, and the whole County expressed as percentages are as follows:—

		PERCENTAGE IMMUNISED	OF CHILDREN UP TO 31ST	UNDER 15 YEARS DECEMBER, 1950.
		0-4 years.	5-14 years.	Total (under 15 years).
Urban Districts	 	 56.8	87-8*	75.2
Rural Districts	 	 57.8	90.3	78.1
Whole County	 	 57.1	88-6*	76.0

<sup>\*</sup> Excluding one District for which complete figures not available.

# Diphtheria-Notifications and Deaths.

It is most pleasing to report for the first time that in no case was a diagnosis of diphtheria confirmed during the year and that 1950 was the second year in succession during which no deaths occurred from this disease.

# Vaccination against Smallpox.

The same methods and procedure as outlined under the heading "Diphtheria Immunisation" have applied to Smallpox vaccination and particulars of the work carried out in the several County Districts during 1950 are as set out in the following table:—

VACCINATION AGAINST SMALLPOX, 1950.

-		NUMBE	TR VACCINATED.	TED.			NUMBER	NUMBER RE-VACCINATED.	NATED.	
DISTRICT	Under 1 year	1—4 years	5—14 years	15 years and over	TOTAL	Under 1 year	1—4 years	5—14 years	15 years and over	TOTAL
Urban Districts.										
Mansfield (Borough)	107	26	18	35	186	1	1	10	58	69
	43	82	10	91	151	1	1	00	13	16
Newark (Borough)	1111	16	13	40	180	1	1	00	9	89
East Retford (Borough)	55	4	1	00	30	1	01	1	67	4
Arnold	178	16	60	255	248	-	-	61	40	42
Beeston and Stapleford	231	42	25	42	340	11	61	16	115	144
Carlton	155	16	12	13	196	1	-	3	29	33
pc	14	18	00	1	40	1	1	1	60	3
	93	00	65	26	130	1	1	3	25	53
shfield	33	12	10	5	09	I	1	1	I	1
use	64	18	12	17	1111	1	1	1	35	35
	152	13	11	14	190	1	1	-	35	36
	55	16	15	- 26	112	-	-	_	29	30
idgford	173	18	က	13	207	1	93	-	20	54
Toral (Urban Districts)	1,431	305	173	272	2,181	111	11	43	469	534
Rural Districts.										
Basford	160	100	191	13	164	1	5	6	38	53
	1111	13	11	9	141	1	1	1	11	13
	. 31	52	7	1-	76	1	1	1	13	13
10	111	7	00	6	130	1	G1	10	19	27
	47	7	55	10	86	I	_	49	67	12
1	222	55	20	12	309	1	-	60	21	24
TOTAL (Rural Districts)	682	234	251	57	1,224	01	6	67	124	202
Whole County—GRAND TOTAL	2,113	539	424	329	3,405	13	20	110	593	736

It is interesting to note that the increase in the numbers vaccinated or re-vaccinated in this County during 1950 (i.e., a total of 4,141 compared with 2,661 in 1949) was largely attributable to the coincidence of the Scotland v. England Football International Match at Glasgow with the outbreak of Smallpox in that City.

Arrangements are made for issuing advice and information and for securing the necessary vaccination or re-vaccination of those involved or likely to be involved in the event of an outbreak of Smallpox in the County area.

# Whooping Cough Inoculation.

The arrangements for Whooping Cough inoculation which existed in three County Districts prior to 5th July, 1948, were continued during 1950 to the extent indicated below:—

		who completed a ful uring the year ended	
District	0-4 years	5-14 years	TOTAL
Mansfield (Borough)	204 '	3	207
Kirkby-in-Ashfield (Urban District)	156	4	160
Sutton-in-Ashfield (Urban District)	208	4	212
Totals	568	11	579

In the absence, however, of evidence that the procedure is as effective as one would wish it has still not been considered advisable to introduce this measure throughout the whole County area.

# AMBULANCE SERVICE (Section 27).

During 1950, 77,833 calls were made involving 97,204 patients and the travelling of 968,651 miles by ambulances and cars of the Service. Of the 77,833 calls made, 7,036 (9%) were in respect of accidents and other emergencies, a considerably fewer number than in 1949, when a total of 9,224 (13.8%) accident and other emergency calls were attended.

It is interesting to note that, compared with the work done in 1949, the calls received increased by 18.6%, the patients carried increased by 20.1%, but the mileage involved increased by only 10.3%; this indicates that the co-ordination of the service by County Control and the Main Ambulance Stations, the close collaboration between Hospital staffs, general practitioners, and the Ambulance Service, and the reducing to a minimum of "empty" journeys is resulting in a comparative saving in mileage.

The demand for ambulance transport reached its highest point during the first six months, and eased somewhat during the second six months of the year, and unless new categories of patients needing transport arise it would appear that the peak has been passed, and that a steady demand may be anticipated.

The following table shows the work undertaken by each of the Main Stations, Sub-Stations and Depots during the year:—

STATION, SUB-STATION OR DEPOT		CALLS	PATIENTS CARRIED	TOTAL MILEAGE
NOTTINGHAM GROUP STATION:	-			
A11 D4		3,178	3,806	24,957
Pagaton Danet		6,668	7,544	77,640
Caulton Donat		5,243	7,062	58,353
Hughmall Donot		5,814	7,785	76,819
W-4 D-1 C 1 D		5,425	6,365	80,112
Dankson J C. 1 Ct. 1		2,778	3,381	27,362
Kirkby-in-Ashfield Sub-Station		3,543	4,167	30,540
D-11: C-1 C-1:		1,701	2,618	24,516
Court Is and II Co. L. Ch. at		1,005	1,304	17,032
MANSFIELD MAIN STATION :		18,240	24,132	203,053
Dilathanna C. L Ctation		1,354	1,534	19,155
Oll - t 0-1 01-11		1,472	1,857	22,193
W C. 1. Ct. t'		1,617	2,017	16,211
NEWARK MAIN STATION		7,045	7,857	76,159
RETFORD MAIN STATION		5,479	5,891	104,957
Worksop Main Station		6,628	8,419	91,122
Harworth Sub-Station		643	1,465	18,470
Totals		77,833	97,204	968,651

# Vehicles.

The approved establishment of vehicles remained at forty-two ambulances and thirteen cars. At the beginning of the year the vehicle strength was forty-one ambulances and eleven cars. During the year ten obsolete ambulances (seven of which were taken off the vehicle strength in 1949) were sold and one new and one second-hand (1949) Bedford 28 h.p. ambulances, one new Morris 25 h.p. ambulance, and two Bedford 28 h.p. transit ambulances (used mainly for sitting patients) were purchased; the vehicle strength at the end of 1950 being forty-one ambulances and thirteen sitting-case vehicles. The average age of all vehicles was approximately three years.

Three 1944 army type 25 h.p. Austin ambulances were converted to civilian type ambulances by a local coach building firm during the year.

It was decided that new ambulances should be painted Cambridge Blue and Grey instead of Cream and Black, and that existing ambulances should be repainted in the new colours as repainting becomes necessary.

The use of tyres which had been remoulded by the appropriate manufacturer was adopted.

#### Stations and Premises.

The existing ambulance accommodation was still in many instances far from adequate with vehicles standing outside in all types of weather, and staff facilities being unsatisfactory and in some cases non-existent. The search for better premises and sites on which to erect new buildings has been continued during the year but with limited results.

## 1. Southwell.

A garage at 7 King Street, Southwell, was purchased on the 14th March, 1950, and on the 29th April, the Southwell Ambulance Sub-Station was transferred to the new premises.

#### 2. Mansfield.

The Rufford Garage, Ratcliffe Gate, Mansfield, was purchased on the 3rd October, 1950, the Mansfield Ambulance Station having been transferred to the new premises on 22nd September, 1950. Extensions to the new garage are planned and when these are completed the whole premises will provide a first-class ambulance station.

#### Ollerton.

The Ollerton ambulance was garaged free of rent on National Coal Board premises but these premises were required, and arrangements are to be made to transfer the ambulance to premises at Edwinstowe as originally envisaged in the County Council's approved Proposals. In the meantime the Ollerton ambulance and personnel are based at the Main Station at Mansfield.

#### 4. Retford.

On the termination of the Agency agreement with the Retford Hospital Fund Committee the tenancy of the garage at Exchange Street, Retford, was transferred to the County Council. These premises are, however, far from satisfactory and the provision of new station premises has been approved.

Accommodation was not obtained at Bingham, Kimberley, Misterton and Tuxford and the Sub-Stations at these places were accordingly not opened, but it is anticipated that premises at Kimberley will soon be made available.

#### Staff.

The total establishment of ambulance personnel at the end of the year was 196 including fifteen Clerk-Telephonists and three clerical staff.

The total staff employed on the 31st December, 1950, was 180, an increase of thirteen on the total employed on the previous 31st December.

During the year most of the new uniform ordered in November 1949 was received and the majority of the uniformed staff were issued with uniform consisting of a reefer type jacket and trousers and new caps; a number of navy blue gabardine raincoats were also issued.

Authority was given for ambulance personnel to receive Civil Defence training, but no members of the staff commenced training in 1950.

New entrants to the Ambulance Service will be required to undergo periodic medical examination, and the majority of existing personnel agreed to be included in the scheme.

# First Aid Equipment.

Following the receipt of Circular 51/50 from the Ministry of Health the standard scale of first aid equipment was increased to include:—

Bedpans—one per ambulance.

Feeding cups—one per ambulance.

Hot water bottles—one per stretcher.

Rubber mattresses—one spare mattress for each Station, Sub-Station or Depot.

Maternity packs—one pack per ambulance.

In addition the scale of resuscitators was increased from one per station (seventeen in all) to one per ambulance (forty-two in all).

# PREVENTION OF ILLNESS, CARE AND AFTER-CARE (Section 28).

#### Tuberculosis.

#### Deaths.

During 1950 the number of deaths attributable to Tuberculosis was 185; 164 from Pulmonary Tuberculosis and twenty-one from other forms. The Pulmonary death rate per thousand of the population was 0.31 for the County compared with 0.32 for England and Wales, whilst the rate for all forms was 0.35 for the County and 0.36 for England and Wales.

# New Cases and Mortality.

The number of new cases recorded during 1950 in the Registers of the Medical Officers of Health of County Districts and the number of deaths in the County due to Tuberculosis according to the Registrar General's statistics for the year were as set out in the following table:

		(includi		Cases ward Tran	nsfers'')		DE	ATHS	
AGE PERIOD	s	Pulm	onary	Non-Pu	lmonary	Pulm	onary	Non-Pu	lmonary
		M.	F.	M.	F.	М.	F.	M.	F.
0-1		1	_	1			_	-	_
1 4		5	8	2	5	_	-	1	5
5-14		19	19	10	7	-	-	_	1
15-44		156	190	10	13	45	61	8	4
45-64		45	13	- 1	1	31	9	1	1
65 and over		11	4		-	13	5	-	-
TOTALS		237	234	23	26	89	75	10	11

# Incidence-Pulmonary Tuberculosis.

The following table shows the incidence of Pulmonary Tuberculosis in the County over the past eight years:—

		NEW CASES INCLUI		Data non
YEAR	Formal notification	Not notified before death	Total	Rate per 1,000 of population
1943	369	28	397	0.84
1944	388	16	404	0.85
1945	332	20	352	0.74
1946	352	22	374	0.75
1947	431	27	458	0.91
1948	425	15	440	0.85
1949	369	18	387	0.74
1950	401	18	419	0.78

<sup>\*</sup> Excluding "Inward Transfers,"

### Examination of "Contacts."

The following figures provided by the Chest Physicians jointly employed by the Sheffield Regional Hospital Board and by the County Council give some indication of preventive work undertaken at the Chest Centres during 1950:—

" Contacts "	Adu	llts	C9-313	70
CONTACTS	M.	F.	Children	TOTAL
No. examined during 1950 No. diagnosed as—	 165	291	878	1,334
(a) Tuberculous	 15	21	41	77
(b) Non-tuberculous	 138	242	796	1,176
No. under observation 31.12.50	 12	28	41	- 81

#### Home Visits.

The number of domiciliary visits made by Health Visitors during the year was 4,714 compared with 4,528 similar visits during 1949.

### Shelters.

The number of shelters owned by the Council is twelve and their use during 1950 was as follows:—

No. on loan to patients 1-1-1950			12	
No. returned during the year		=	6	
			6	
No. loaned during the year			2	
No. on loan to patients 31-12-1950	)		8	
No. in store on 31-12-1950			4	
			-	12
				2000

# Co-operation with Other Authorities.

The Council's former Senior Tuberculosis Officer who, with his clerical staff, had continued working from the County Health Department following the transfer of the major part of his time to the service of the Sheffield Regional Hospital Board on 5th July, 1948, moved to the Nottingham and District Chest Centre at "Forest Dene," Gregory Boulevard, Nottingham, in April, 1950. This final separation under the provisions of the National Health Service Act occasioned some considerable re-organisation of procedure during the remainder of the year in an endeavour to preserve the essential unity of this service.

Co-operation with the Regional Hospital Board by sharing the services of medical specialists and by the attendances at the Chest Centres of the Council's Health Visitors and Almoners continued during 1950 and the Council were pleased to assure the Board of their willingness to co-operate fully in the implementation of recommendations of the Tuberculosis Standing Advisory Committee as set out in Ministry of Health Circular RHB.50(64).

County District Medical Officers of Health were systematically provided with brief clinical particulars of each diagnosed case of tuberculosis and informed as to any housing or environmental defects ascertained by the Tuberculosis staff. They were also kept informed of all changes in circumstances as, for example, admissions to and discharges from hospitals and sanatoria, deaths, removals, marriages of female patients, etc.

#### Protection of Children from Tuberculosis.

During the year consideration was given to recommendations made to the Minister of Health by the Joint Tuberculosis Council regarding the protection of organised groups of children against the risk of infection by adults suffering from tuberculosis. Having regard for the services of the Council's Officers which are shared with the Regional Hospital Board without charge, particularly in the Tuberculosis Service, the Council made representations against the Minister's decision that fees would be payable to the Regional Hospital Board by the Authority for individual chest X-ray examinations of candidates for employment involving close contact with groups of children. The Council proceeded, however, with arrangements for the periodic X-ray examination by Mass Radiography Units of the chests of persons already in such employment which the Minister advised might be undertaken without charge.

#### B.C.G. Vaccination.

Consultation with the Chest Physicians concerned continued throughout 1950, but owing to the pressure of their work in connection with the treatment of notified cases and the peculiar difficulties involved in a County area in following the prescribed clinical procedure arrangements for the employment of B.C.G. vaccination were unfortunately not completed by the end of the year. It is expected that additional staff will be made available in due course.

# Nottingham and Notts. Association for the Prevention of Tuberculosis.

The arrangements whereby the Council's preventive and care functions in relation to persons suffering from tuberculosis are carried out under agency arrangements by the Nottingham and Notts. Association for the Prevention of Tuberculosis as described in my 1948 Annual Report were continued during 1950, but in view of the comparatively small number of cases being dealt with the subsidy paid to the Association by the Council was reduced from £950 to £750 per annum as from 1st January, 1950.

The following is the Association's report on their activities during the year:—

"The Nottingham and Nottinghamshire Association for the Prevention of Tuberculosis has continued to carry out care and aftercare work on behalf of the County Council on similar lines to those outlined in previous Reports, and the grant payable to the General Committee and its three Sub-Committees has been at the rate of £750 per annum for the period under review.

During the year 257 new cases were referred to the Association but altogether 362 cases were considered and assistance given where necessary. Each case received individual consideration and the types of help which were given are shown in the following statistics.

General Committee.				
No. of new cases				187
No. of cases considered for assistance	e			275
Analysis of Assistance.				
Referred to National Assistance Boa	rd for m	onetary g	rants	110
Bed and bedding loaned				15
Bedding only loaned				7
Dunlopillo beds loaned				2
				6
Nursing requisites loaned				23
Milk permits issued				29
*Admission to Convalescent Home, in	neluding	payment	of fees	2
Clothing provided				17
*Grants towards clothing				2
*Assistance re hire purchase payment	ts			4
*Occupational therapy provided				3
*Travelling expenses for parents to v	isit			5
Assistance re National Insurance				12
Assistance re housing				5
Assistance re work				13
Assistance re Home Help				6
Assistance re pension				4
Requests from patients for advice, a	ssistance	or inform		19
Other forms of help				24
*Christmas parcels distributed				40
Investigated but no help considered	necessar	у		21
Mansfield Sub-Committee.				
Mansfield Sub-Committee.				
No. of new cases				43
No. of cases considered for assistance	e			47
Analysis of Assistance.				
Bed and bedding loaned				11
Bedding only loaned				6
Nursing requisites loaned				10
Milk permits issued				27
Clothing provided				6
*Assistance re hire purchase paymen	ts			1
*Travelling expenses for parents to v	risit			2
Requests for advice, assistance or in	nformatio	on		1
Assistance in conjunction with Wor	nen's Vol	luntary Se	rvices	4
*Christmas parcels distributed				15
Other form of help				1
Other form of morp				
Newark and Southwell Sub-Comm	nittee.			
THOWark and Countries out of				10
No. of new cases				13
No. of cases considered for assistan	ce			21

Analysis of Assistance.					
Bed and bedding loaned					2
Nursing requisites loaned					4
Milk permits issued					18
Assistance re housing					1
*Christmas parcels distributed					15
W 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	~				
Worksop and Retford Sub-	Committe	e.			
No. of new cases					14
No. of cases considered for as	sistance				19
Analysis of Assistance.					
Bed and bedding loaned					2
Bedding only loaned					2
Nursing requisites loaned					5
Milk permits issued					8
Clothing provided					4
*Assistance re hire purchase p					1
*Travelling expenses for parer					1
Referred to Harefield Fund f		for specia	al grant		1
*Christmas parcels distributed					17
Other forms of help					4
*Denotes help from vo	luntary fu	inds of th	e Associa	ation."	

In addition, the Council's Almoners, acting for the appropriate After-Care Committees at the Mansfield, Retford, Worksop and Newark Chest Centres, assisted a further 202 tuberculous persons as follows:—

# Analysis of Assistance.

Referred to National Assistan	ce Board	for	monetary	grants	*165
4					8
Assistance re Rehabilitation					6
Assistance re housing					7
Assistance re general domestic	problem	s			13
Other general advice					16
No. of home visits involved					104

<sup>\*</sup>Including 13 cases also assisted with other social problems.

# Sherwood Village Settlement.

The County Council continued during 1950 to maintain the Sherwood Village Settlement and the associated Sherwood Industries for the rehabilitation of tuberculous persons and, during the year, engaged Mr. R. C. Cullen, M.I.Ec.E., A.M.I.I.A., A.M.I.P.E., Industrial Consultant, to investigate and advise on the Settlement's trading activities which, by this time, were feeling the accumulated effects of the increasingly keener post-war competition. With a remarkable appreciation of all the peculiar problems of a Rehabilitation Unit's

trading activities, Mr. Cullen prepared and submitted an exhaustive and most valuable report and at the end of the year the Council were considering his recommendations and, in accordance therewith, seeking to appoint a General Manager for Sherwood Industries.

The following report has been submitted by the Medical Superintendent, Dr. E. Firth, on the work carried out during the year:—

"It is always pleasing to be able to report the beginning of a new department, and particularly so when it shows good signs of healthy development.

Such is the Cabinet Section which commenced in January, 1950, and in it many articles of excellent quality have now been made for other departments of the County Council, and an expanding trade should be possible with them.

The Sectional Building Department has been fully employed during the year, and only rising prices and restricted timber supplies will curtail its work.

As foreshadowed in my last report the Painting Department has been discontinued; much of the work involved appears to be unsuitable for men with active and moderately advanced disease. The use of spray painting equipment, although reducing, very considerably, physical effort, brings other disadvantages which cancel out the reduced toil.

The health of the Settlers has not been quite so good as in 1949, six men having to be admitted to Ransom Sanatorium for further treatment; each of these men had severe bilateral disease and it was only the special Village Settlement conditions which enabled them to work at all.

The following table shows the length of time in the Village Settlement before their present breakdown:—

Settler	Age	Date of Entry	Date of Breakdown
1	49	12-12-49	21 -1-50
2	29	18-10-43	22- 2-50
3	30	8- 9-47	23- 9-50
4	17	25- 4-49	5-10-50
5	50	12-11-45	20-11-50
6	25	8- 1-45	18-10-50

One Settler, the foreman painter, died during the year and by his death, the Settlement lost its first Settler. He commenced work in 1937 and his frequently expressed faith in the Settlement ideal was a source of strength and encouragement to others.

During the year two settlers were admitted from other Local Authorities, and it is satisfactory to note their continued interest in the scheme.

The new houses are nearing completion, and I hope it will not be long before we are able to commence building a further half-dozen and to make a start on the Printing Department. The families continue to be healthy, and it is gratifying to see the children gain in health and vigour as the years pass by.

The Hostel has been greatly improved by the construction of lawns and flower beds, the work being carried out by one of the settlers aided by two temporary labourers to cope with the very heavy digging and barrow work. The comfort of the Hostel remains at a high level.

#### Statistics.

Sectional Building	 	 22
Cabinet Department	 	 5
Sanatorium Porters	 	 2

These figures show a decrease of 2 as compared with 1949."

As mentioned in my last Report, a small Drafting Committee representative of both the County and County Borough interests of fifteen Local Health Authorities in the Sheffield Region was busy at the end of 1949 with the preparation of a draft scheme for the setting up of a Joint Board for the future management of the Village Settlement.

By the time this draft scheme was almost ready for submission for the approval of a further Conference of representatives of the interested Authorities, however, information was received regarding a draft circular which the Minister of Health proposed to issue to all Local Health Authorities on the subject of Occupational Re-settlement for Tuberculous Persons. It was not possible on this account to make any progress during 1950.

# Other types of Illness.

# Loan of Nursing Equipment and Appliances.

The loan of nursing equipment and appliances to patients being nursed at home, either by the issue of the larger items direct from the Public Health Department or the loan, free of charge, of the smaller and more frequently needed items from the homes of District Nurses/Midwives, was also continued during 1950.

During the year one hundred and forty-five cases were assisted by loans direct from the Public Health Department (100 in 1949), appropriate loan charges being made in all but twelve cases where applicants' financial circumstances were such as to warrant free loans under the Council's scheme.

The items loaned in these cases were as follows :-

Air beds 29	Mattress, sectional	1
Back rests 11	Self-lifting pole fittings	2
Bed tables 2	Spinal carriages	6
Bedsteads, single size 5	Stool commodes	12
Crutches 5 prs.	Walking machine	1
Dunlopillo mattresses 17	Wheel chairs—"Stairway"	7
Do. pillow 1	Do. "Merlin"	9
Fracture boards 1 set	Do. Folding	43

#### General Care and After-Care.

Arrangements for the care and after-care of persons on discharge from hospital or convalescent home whereby such cases are followed up by the Council's Health Visiting or Almoner service to ascertain their precise need and to take appropriate action were continued, two hundred and thirty-one cases of this type being dealt with by the County Almoners during the year as follows:—

In connection with hospital d	lischarge		 5
Do. rehabilita	tion		 24
Do. bedding a	nd clothin	ng	 9
Do. domestic	problems		 49
Follow-up visits on discharge	from hos	pital	 56
Other general advice			 88
			231
No. of home visits involved			 345

#### Chronic Sick and Senile Patients.

Co-operation with the Sheffield Regional Hospital Board by investigating and reporting at the request of a hospital authority or bed bureaux on the home circumstances of chronic sick and senile patients either awaiting admission to or discharge from hospital also continued during 1950, three hundred and forty-six cases of this type being dealt with by the County Almoners during the year as follows:—

Investigations with a view to hospital admission-

(i)	Hospital admission	recommended		 173
(ii)	Do.	not recommen	ded	 125
Invest	igations with a view	to hospital dis	charge-	
(i)	Hospital discharge	recommended		 26
(ii)		not recommend		 22
				346
No. of	f home visits involve	d		 288

### Convalescence.

By arrangement with the Sheffield Regional Hospital Board the Council's Almoners include amongst their duties the regular visitation of certain hospitals in the County which are without hospital almoners and, in the continuing absence of any decision as to the respective responsibilities of Regional Hospital Boards and Local Health Authorities for the provision of Convalescence, the County Almoners advised and assisted patients in obtaining suitable convalescence during 1950 as indicated:—

No. of Cases Referred During the Year.			No. of Cases fo Convalescent Ac Tion was Obta	No. of Cases who either made other	
By Hospitals	By General Practitioners	Total	At Regional Hospital Board Homes	At other Con'nt *Homes	arrangements or declined accom- modation offered
46	56	102	64	8	30

\* At the cost of Voluntary Organisations.

Sixteen of these cases were also advised or assisted with other social problems, and sixty-six home visits were made by the County Almoners during the year in connection with this aspect of their work.

### Venereal Diseases.

### Treatment of County Cases at all Centres.

The number of cases resident in the County who were dealt with for the first time during each of the years 1944-1950, together with the attendances made by all County cases at approved Treatment Centres up to 1948, according to returns received from the Mansfield, Worksop, Nottingham and Out-County Centres, were as follows:—

	N	o. of Cases	DEALT WI	TH FOR THI	FIRST TIME.		
Year	Syphilis	Gonorrhoea	Soft Chancre	Total Venereal Infections	Non- Venereal and Undiagnosed Conditions	Grand Total	Total Attendances (All Cases)
1944	121	300	6	427	665	1,092	23,025
1945	159	340+	6	505	722	1,227	24,433
1946	227	445	7	679	856	1,535	24,791
1947	148	237	12	397	677	1,074	17,449
1948	162	243	10	415	844	1,259	17,194
			0	Other Condit	ions *		
1949	158	221		779		1,158	*
1950	95	148	Lance Control	814		1,057	*

<sup>\*</sup> Amended form of Ministry of Health Return. †Correction of mis-print "349" in previous Reports.

### Source and Contact Tracing.

By arrangement with the Sheffield Regional Hospital Board the follow-up work which was undertaken under Regulation 33B until 31st December, 1947, was continued during 1950 by the Council's Almoners working in close collaboration with the Specialist Medical Officers at the Treatment Centres.

Miss K. M. Daly, who joined the Council's Almoner staff in October, 1949, resigned and left to take up a hospital appointment on 28th February, 1950. Efforts to obtain a successor to complete the Council's establishment of three Almoners were unsuccessful so that for the remainder of the year this service was one-third below strength. Eighty-seven visits were paid in connection with the follow-up of contacts and defaulters during 1950 and the following table gives particulars of the work undertaken in respect of cases referred to the Almoners for the first time during the year:—

	No. referred for the first time during the year	Number of visits paid	Number persuaded to attend	Number untraced	Number failed to attend
Contacts	4	10	3		1
Defaulters	27	47	21	-	6

### Health Education.

Progress throughout the year has continued steadily. Unfortunately, owing to pre-Election activity at the beginning of the year, some eighteen meetings had to be cancelled and some film shows depending on the Central Office of Information films had to be abandoned. Similarly, sixteen meetings were cancelled owing to bad weather conditions mainly fog, at the end of the year. But for these losses the total numbers of talks and film shows would have shown a greater increase on the previous year.

A more satisfactory state is shown in the increased figure for the number of persons addressed, which shows that over two hundred more people attended the talks and film shows during the year.

These statistics are shown in the tables following and are some rough guide to the quantity of work being carried out. It is well to remember, however, that it is very much more difficult to assess the quality of the work. Frequent letters of appreciation for talks and other advice are received, as well as requests for repeated visits by lecturers, but these indicate the satisfaction of the hearers and are not evidence of the real value of Health Education. Plato said that "Wise men talk because they have something to say; fools, because they have to say something," and this should be borne in mind when Health Education is the theme. It has also been said by Mark Twain, with

considerable wisdom, that "Soap and education are not as sudden as a massacre, but they are more deadly in the long run."

These two quotations apply admirably to much Health Education, for are we always sure of the quality of the advice so freely given? Surely here lies the distinction between mere propaganda and health teaching—for teaching it must be. How right Twain was when the effect of cheap slogans is considered, how damaging they may be! Let us be critical of the advice we give audiences, let us progress slowly and firmly on a basis of truth and not of expediency; then Health Education may be said to be a force for good.

It is so often argued that the main object of Health Teaching should be the child, that there is a tendency in some places to regard the school as the only vehicle for Health Education. Perhaps the words of Joubert, the eighteenth-century French moralist, may apply, when he says "Children have more need of models than of critics." If we alter the word "critics" for "words" the quotation is even more apt. Endeavour must be made to provide every possible opportunity for the parent to learn in order that Health Education may be taught in its best possible environment, the happy family.

Some analysis of the extensive range of work carried out through the year is shown in the tables which follow in this Report.

Approximate percentages of different talks subjects are as follows:—

Health Education (Air	and M	Methods)	 	5.9%
Growth in Child and A	dolescer	it	 	8.8%
Maternity and Child W	elfare		 	6.3%
Mental Health			 	8.5%
Sex Education			 	9.8%
General Health			 	27.0%
Prevention of Disease			 	24.4%
Environmental Health			 	1.7%
Publicity			 	7.6%

From the above table of percentages it will be seen that roughly sixty-six per cent. of the talks have been concerned with the positive aspects of Health, some twenty-six per cent. with the Prevention of Disease, and about eight per cent. with Publicity of the Health Services.

The tables appended show some analysis of the year's work.

### TABLE 1.

### Meetings.

Total number of	Meetings			 257
Do.	Talks			 237
Do.	Exhibitions	,		 4
Do.	Film Shows	;		 16
Do.	Talks illust	rated by	Films	 43

TABLE 2.

Aud	IENCE	Persons Addressed	ATTENDANCES
Women		 4,282	7,166
Men		 783	1,135
		5,065	8,301
Girls		 166	189
Boys		 97	110
		263	299
Females		 4,448	7,355
Males		 880	1,245
		5,328	8,600
		-	-

Table 3.

Distribution of Meetings.

AREA	Number of Meetings	Persons Addressed	ATTENDANCES
Boroughs			
Mansfield	6	107	122
Newark	4	139	139
East Retford	1	60	60
Worksop	1	29	29
URBAN DISTRICTS			
Arnold	1	47	47
Beeston and Stapleford	37	756	1,746
Carlton	6	115	215
Eastwood	14	269	451
Hucknall	22	347	500
Kirkby-in-Ashfield		211	539
Mansfield Woodhouse		28	76
Sutton-in-Ashfield	19	222	457
Warsop	_	_	_
West Bridgford	7	380	380
RURAL DISTRICTS			
Basford		529	673
Bingham		331	388
Newark		262	314
East Retford		388	388
Southwell		285	380
Worksop	18	167	468
WHOLE-COUNTY			
ORGANISATIONS	57	656	1,228
Totals	257	5,328	8,600

### TABLE 4.

				LABI	.E. 4.				
				Tal	lks.				
Total	Talks to	Women	n						144
	Do.	Men							9
	Do.	Mixed	Adults						75
	Do.	Girls							1
	Do.	Boys							1
	Do.	Mixed	Youth						7
	Do.	Mixed	Adults	and	Yout	h			-
							Тота	L .	237

### Table 5.

### Film Shows.

Total Film	Shows to	Women	n				12
Do.		Men					_
Do.		Mixed	Adults				4
Do.		Girls					
Do.		Boys					
Do.			Youth				
Do.		Mixed	Adults	and Youth			_
					Tor	FAL	16
							-
Films w	vere show	n to ill	ustrate	talks as fol	lows :-	-	
Films w		n to ill	ustrate	talks as fol	lows :-	-	18
			ustrate				18
At Talks to	Women						
At Talks to Do.	Women Men						1
At Talks to Do. Do.	Women Men Mixed A	dults					1
At Talks to Do. Do. Do.	Women Men Mixed A Girls	dults					1
At Talks to Do. Do. Do. Do. Do.	Women Men Mixed A Girls Boys	dults					1 22 —

Table 6.
Lecturers' Summary.

LECTURER.	Number of Meetings	Persons Addressed	ATTENDANCES
Mr. A. H. Marrow .	. 111	2,617	3,671
Mr. N. S. Wass	. 33	668	709
Dr. I. Powell Heath .	. 35	1,170	1,285
Mr. D. L. Hughes .	. 1	132	132
Dr. C. W. W. Jeremiah .	. 2	132	132
Dr. M. B. Black	. 1	58	58
Dr. A. R. Margetts .	. 11	185	222
Mr. D. E. Mason	. 5	138	163
Dr. L. F. McWilliams .	. 3	81	81
Mr. W. L. Richardson .	. 2	17	17
Mr. F. Wrigley	. 4	80	80
Mr. G. H. Earnshaw .	. 1	132	132
Miss M. K. Collins .	. 2	15	30
Miss A. Collishaw .	. 13	49	324
Mr. G. S. Culley	1	24	24
Film Shows	10	407	515
Exhibitions	. 4	_	332
Home Help Service Talks	12	592	592

### Internal Lecturers.

I am grateful to the following members of my Staff for the generosity with which they have placed their expert services at the disposal of the Health Education Service by giving talks in their free time during this year:—

Dr. C. W. W. Jeremiah, Dr. M. B. Black, Dr. A. R. Margetts, Mr. D. E. Mason, Dr. L. F. McWilliams, Mr. W. L. Richardson, Mr. F. Wrigley, Mr. G. H. Earnshaw, Miss M. K. Collins, Miss A. Collishaw, and Mr. G. S. Culley.

This work has been carried out in an honorary capacity.

### TABLE 7.

Talks Subjects.		No. of Talks
Health Education		
Health Education, its Importance .		2 7
Health Education in the Home .		
Health Education and the Nurse .		1
Health in Industry	loolth	1 3
ratents responsibility for the Child's I	teartin	9
		14
Growth in Child and Adolescent.		
Problems of Growth in the Child .		3
Growth in Adolescence		11
Physical Needs of the Child		7
		21
Maternity and Child Welfare.		-
Health of the Infant		11
Health during Pregnancy		
Recent Advances in Obstetrics .		2 2
		_
		15
Mental Health.		
Mental Needs of the Child		-
Keeping the Child's Mind Healthy .		7 4
The Difficult Child		5
Juvenile Delinquency		
Mental Health of the Adult		2
The Mental Health Worker		1
		_
		20

Sex Education.		N	O. OF TALE	ζS
Physiology of Sex and Reprod	uction	 	5	
Sex Education		 	10	
Sex Hygiene		 	3	
Health during the Menopause		 	5	
			23	
			*****	
General Health.				
General Fitness		 	19	
Rest and Relaxation		 	15	
Posture and Care of the Feet		 	14	
Care of the Skin		 	1	
Glands and Hormones		 	2	
Food and Health		 	4	
Health in Winter		 	2 4	
Dental Health		 		
Exercise in the Elderly		 	1	
		 	2	
			_	
			64	
Prevention of Disease.				
Food and Drink Infections		 	22	
Kitchen Hygiene		 .4	15	
First Aid in the Kitchen		 	4	
The Infectious Diseases		 	5	
Influenza and the Common Co	old	 	2	
Rheumatism		 	6	
Recent Advances in Medicine		 	4	
			58	
			-	
Environmental Health.				
Sewage Disposal		 	2	
Health and Water Supply		 	2	
11.0			_	
			4	
Health Services Publicity.				
The National Health Service		 	2	
The Local Health Services		 	3	
The Home Help Service		 	12	
The School Health Service		 	1	
			_	
			18	

TABLE 8. Films Used.

TITLE OF FILM			Т	IMES USED
Your Children's Sleep				10
Your Children's Eyes				5
Your Children's Ears				2
Your Children's Meals				1
Your Children's Teeth				4
Your Teeth				8
Your Children and You				1
Children Learning by Expe	rience			1
Children Growing Up				3
Children of the City				1
Sex in Life				6
Human Reproduction				7
Growing Girls				7
Old Wives' Tales				2
Modern Guide to Health				6
Your Very Good Health				2
One Man's Story				2
Birthday				1
The Centre				1
Northumberland County Co	ouncil De	ntal Serv	ices	2
Round Figures				6
The Louse				1
Unwelcome Guests				1
Another Case of Food Poise	oning			4
Fly about the House				3
Town Rats				2
Defeat Tuberculosis				
Defeat Diphtheria				2
Penicillin				2

### TABLE 9.

### Leaflets and Posters.

From a stock of approximately ninety carefully-selected leaflets and twenty-five posters the following have been distributed at talks and film shows and at Welfare Centres.

1	ea	a	-	10
	ca		CI	

			 	 4,820
Maternity and Chile	d Welfare		 	 4,459
General Health			 	 6,727
Food			 	 3,924
			 	 10,494
Tuberculosis			 	 1,764
Influenza and Cold			 	 2,600
Poliomyelitis			 	 4,599
Immunisation and	Vaccinatio	on	 	 759

40,146

### Posters.

Immun	isation a	and Vacci	nation	 	 34
Coughs	and Col	lds		 	 28
Disease	Vectors	s and Foo	d Infection	 	 77
Food				 	 39
					178
					-

### DOMESTIC HELP SERVICE (Section 29).

Further links in the chain of Sub-Offices comprising the County Home Help Service were completed with the opening of a Sub-Office at Newark on the 5th June, and one at Retford on the 1st August. In both these Boroughs, suitable accommodation has been rented in the respective Town Halls from the Borough Councils. As a result of this development, it is now possible to help more cases in the extensive Rural Areas in the North and East of the County and the Southwell Rural District. It is anticipated that there will always be difficulties in these districts owing to somewhat inadequate transport.

Much publicity has been undertaken during the year in order that the Service may be brought to the notice of those in need of domestic help. Talks have been given to Women's Institutes, Church Organisations and Old People's Clubs, articles have been published in the local press and in some districts particulars of the Service have been inserted, by permission of the local Food Officers, in the grey ration books issued to expectant mothers.

It has been found necessary to increase the standard charge for the Service and this was raised from 1s. 10d. to 2s. per hour from the 31st July. The rate of pay to Home Helps remains at 1s. 9d.

A popular innovation has been a talk to Home Helps arranged under the Health Education Scheme in each district on "How to Guard Against Infection," dealing with the clean handling of food in the home. Home Helps attended in their own time and have asked for further lectures to help them in their work.

At the end of the year, the establishment consisted of thirty-six full-time Home Helps, one hundred and ninety-one part-time Home Helps and an administrative staff of eight Sub-Organisers, nine Case-Workers and the County Organiser.

The general expansion of the Service is shown by an increase of 726 in the number of cases served during the previous year.

### Cases Served.

MATERNITY	GENERAL	Tuberculosis	TOTAL	Total Hours of Service
519	1,139	23	1,681	191,454

### MENTAL HEALTH SERVICE (Sections 28 and 51).

### Administration.

The Mental Health Service is administered by the Mental Health Sub-Committee of the County Health Committee which consists of twelve members of the County Council, three District Council representatives, and three co-opted members with special experience of mental health work, and meetings are held quarterly.

### Staff.

### (a) Medical.

The County Medical Officer is responsible for the organisation, control, and medical direction of the Service, and these duties are carried out through the Mental Health Section of the Public Health Department.

It has still not proved possible to secure the appointment of an Assistant Medical Officer for Mental Health and my Deputy, Dr. C. W. W. Jeremiah, continued during the year to act as general adviser on Mental Health matters and to undertake the clinical work involved. In addition to medical examinations in connection with ascertainment, furnishing of certificates in support of petitions, submission of medical evidence concerning defectives dealt with by the various Courts throughout the County, and various other examinations and reports, Dr. Jeremiah also undertook on behalf of the Institutions concerned the medical examination of patients on licence in the County and the preparation of reports in connection with re-consideration of Orders, applications for discharge from Order, and the review of cases required after two years on licence. Nevertheless, the absence of a full-time Assistant Medical Officer for Mental Health continues to be a handicap to the further development of the Service. The post has been advertised on several occasions and there is no doubt that the dearth of applications from suitably qualified and experienced applicants is due almost entirely to the disparity between the salary scales applicable to specialist posts in the Hospital Service and those fixed in relation to appointments made by Local Health Authorities.

### (b) Non-Medical.

The following non-medical staff of my Department are employed on administrative and statutory duties in the Mental Health Service:—

- (i) a male Mental Health Officer;
- (ii) a female Superintendent Mental Health Worker;
- (iii) a female Mental Health Worker;
- (iv) ten part-time male Mental Health Workers (also employed half-time as District Welfare Officers);
- (v) a male Assistant Mental Health Worker and District Welfare Officer for relief duties;

(vi) Mansfield Occupation Centre staff :-

One Instructress:

One Assistant Instructress;

One female Trainee;

Two part-time female Escorts;

- (vii) Two female Home Teachers;
- (viii) Two clerks and a shorthand typist.

There are vacancies on the approved establishment for two female Mental Health Workers.

### Co-ordination with Regional Hospital Boards.

Continued co-operation has been maintained during the year between my Department, the Sheffield Regional Hospital Board, and the Officers of the various Hospitals and Institutions to which patients from the County have been admitted. My Officers have continued to exercise regular supervision of mental defectives sent on licence to the County area and, in addition to the bi-monthly progress reports submitted in this connection, numerous other reports on home conditions have been prepared on behalf of Hospital Management Committees in respect of applications for licence, holiday leave and discharge from Order, and re-consideration of Orders by the Visitors. My Deputy has also undertaken medical examinations whenever requested to do so. No charge is made for these services.

In the sphere of mental illness, the Authority's Mental Health Workers make use of the established Psychiatric Out-patient Clinics whenever possible because it is at this level that co-operation and interchange of information are most effective. A report on the background of each case referred is prepared for the information of the Psychiatrist concerned who, in turn, advises the Mental Health Worker as to the most appropriate course of action. Liaison is also closely maintained when arranging the actual admission of patients to hospital and the Mental Health Workers have full regard to the existing shortages of accommodation and nursing staff.

### Voluntary Associations.

The Local Health Authority have not delegated any of their statutory duties to Voluntary Bodies although advantage is taken from time to time of the special services provided by the National Association for Mental Health, particularly in regard to the training of staff. An annual grant is made to this Association by the County Council.

### Training of Mental Health Workers.

A third residential course in Mental Health was held at the Sheffield University in July, 1950, and was attended by the two officers from this Authority who had not been present at either of the previous courses, course fees and expenses being paid by the Council. With the exception of the recently appointed female Mental Health Worker, all the Authority's Authorised Officers have now attended one of these courses and have derived considerable benefit both from the instruction given and the opportunity afforded them to discuss mutual problems with officers from other parts of the country.

The Superintendent Mental Health Worker attended the annual conference of the National Association for Mental Health held in London in March, 1950, and also the Annual Conference of the Association of Mental Health Workers at Scarborough. The Assistant Instructress at the Mansfield Occupation Centre attended a week's refresher course for Staffs of Occupation Centres which was held in London during April.

### Work undertaken in the Community.

Section 28, National Health Service Act, 1946. Prevention of Illness, Care and After-Care.

Although the prevention of mental illness is dependent upon factors over which the Mental Health Worker can ordinarily have little or no control, much can be done in the early stages of illness to prevent the more serious consequences, both by ensuring that the patients coming to notice are afforded the opportunity for early treatment and by helping them to deal adequately with problems which confront them in their everyday life. The fullest use is made of the Psychiatric Out-patient Clinics established in the County and the Mental Health Worker co-operates with the Psychiatrist, who advises upon the course of action which he considers to be most appropriate to the needs of each patient. There is also close consultation between the Authority's Mental Health Workers and general medical practitioners—who do not hesitate to make use of the Health Workers'. knowledge of the various social services which can be brought into play in the solution of the domestic and occupational difficulties encountered by the mentally ill.

In the sphere of after-care, a relatively small proportion of cases discharged from hospital are referred to the Local Health Authority, mainly because the Saxondale Hospital employs its own Psychiatric Social Workers who undertake the follow-up of patients discharged. Nevertheless, cases do come to notice from other Hospitals and it has proved possible to afford material assistance to patients by helping them to obtain the type of employment best suited to their condition; by advising them as to the financial benefits available to them and the alleviation of their domestic difficulties or, sometimes, by merely being available to listen to their troubles and lending them moral support in their re-adjustment to life in the community. During 1950, fifty-nine cases were referred to the Local Health Authority for after-care, all of whom were visited at least three times, and more often when it was considered necessary. In addition, the Mental Health Workers were instrumental in assisting a number of other patients during the year who approached them quite voluntarily on discharge from hospital.

As indicated elsewhere in this report, the supervision of mental defectives in the community is undertaken by the Authority's Mental Health Workers. Patients under statutory supervision are normally visited at two-monthly intervals, whilst quarterly visits are paid to those under voluntary supervision. Patients on licence from institutions are also visited periodically on behalf of the Hospital Management Committees concerned, whilst those remaining under guardianship are supervised by the Superintendent Mental Health Worker and the female Mental Health Worker. All possible assistance is given in dealing with problems affecting patients' welfare and there is close liaison with the Youth Employment Service, the Ministry of Labour, the National Assistance Board, and the various other statutory and voluntary Bodies who provide services which can affect the well-being of the mental defective. Worthy of mention is the arrangement whereby the Ministry of Labour and National Service is kept informed of those male defectives who would otherwise be required to register for national service, and the co-operation with local Food Offices to ensure that mentally defective children excluded from school attendance can be supplied with milk at the specially reduced price.

Reference was made last year to the arrangements for the provison through the Council's general scheme for the Prevention of Illness, Care and After-Care of nursing equipment and appliances to defectives having a physical deformity or ailment, and these arrangements were continued in 1950. As, however, it is implicit in the scheme that such articles are provided to meet a temporary need, it was decided that applications for the provision of wheel chairs, spinal carriages, or other major appliances for the use of defectives suffering some permanent physical handicap should properly be dealt with through the Specialist Services provided by the Ministry of Health, and arrangements were made accordingly. At the same time, the County Council continued to supply this type of equipment on loan pending permanent provision by the Ministry of Pensions acting as agents for the Ministry of Health, and were thus able to prevent any hardship which might have been caused by delay in delivery of the permanent appliance.

The Section of the report dealing with the Mental Deficiency Acts gives further information concerning the work undertaken on behalf of defectives in the community, including details of the training provided through the Home and Group Teaching Service and the Mansfield Occupation Centre.

### Lunacy and Mental Treatment Acts, 1890-1930.

The following figures summarise the work undertaken by the Local Health Authority's Duly Authorised Officers during the year in securing treatment for persons suffering from mental illness:—

Admissions to Hospital	Males	Females	Total
(a) Mental Treatment Act, 1930—			
As Voluntary Patients (Section 1)	25	29	54
As Temporary Patients (Section 5	_	3	3
(b) Lunacy Act, 1890—			
Under Summary Reception Orders	,		
(Section 16		120	191
Under 3-day Orders (Section 20) .	. 27	28	55
Under 14-day Orders (Section 21)	1		1
Referred to Psychiatric Out-Patien	t		
Clinic		26	57
	155	206	361

It will be seen that by far the largest number of admissions took place under Summary Reception Orders and it is worthy of special notice that only fifty-seven voluntary patients were admitted by the Authority's officers during the year as compared with ninety-five in This is due in part to the fact that, as the facilities available became more widely known, medical practitioners referred more patients direct to Psychiatric Out-Patient Clinics where arrangements were made for their direct admission to Hospital, thus avoiding the need for the assistance of the Duly Authorised Officers. There is no doubt, however, that an acute shortage of hospital accommodation also played its part in restricting the number of patients dealt with in this way and, when so much publicity has been given to the benefits of early treatment, it is to be regretted that the facilities available are not adequate to meet the need. Many of the difficulties now being experienced could be overcome if some alternative accommodation could be made available for senile patients who are blocking beds in mental hospitals which could otherwise be used for the treatment of younger patients with better prospects of recovery. Every effort is made, in consultation with general practitioners, patients' families, and mental hospital staffs, to restrict the number of old persons admitted, but the social urgency so frequently attaching to this type of case very often makes it imperative to employ certification as the means of securing the necessary hospital care. Some of the patients so dealt with are, of course, discharged eventually, but many who might otherwise be discharged continue to occupy mental hospital beds because their families are either unable or unwilling to have them home again.

The following age group summary shows the number of aged persons in the County who were dealt with under the Lunacy Act in 1950 :—

		Males	Females	Total
Aged 65-70 years	 	 10	10	20
,, 71-80 years	 	 6	14	20
,, 81 years or over	 	 3	2	5
		19	26	45

Contrary to the practice adopted by some other Authorities who make wide use of the 3-day Order, it is used in this County only when the circumstances of a case are such as to comply explicitly with the requirements of Section 20 of the Lunacy Act and, unless it is necessary for a patient to be placed under immediate care and control, one of the other methods of admission is adopted. It is true, of course, that the use of the 3-day Order and its subsequent extension for fourteen days can often obviate the need for certification and, where alternative 'designated' accommodation is available, the necessity for admission to a mental hospital, but the position in this County is such that although certain other hospitals have been designated for the reception of 3-day Order patients adequate facilities for dealing with such cases are available only at the Saxondale Hospital. Consequently, it is always necessary to have regard to the Hospital's accommodation problems and at the Medical Superintendent's request Duly Authorised Officers have been instructed to exercise the utmost discretion in their use of this method of admission. Of the fifty-five patients so admitted in 1950, fourteen were subsequently certified; thirty-three became voluntary patients; four were able to take their discharge and there were four deaths.

Owing to structural alterations at the Saxondale Hospital early in the year which necessitated a temporary ban on admissions, County patients had to be diverted to the Mapperley Hospital which normally serves the City of Nottingham and the ready co-operation of the Medical Superintendent of the latter Hospital at this time did much to prevent the development of a most serious situation.

### Mental Deficiency Acts, 1913-38.

### (i) General Administration.

The statistical summary which follows includes under the main headings given the figures of work accomplished during the year:—

Number of new cases reported during the year		96
Total number of old cases verified and new case	es reported	
since the re-organisation of the Service in 193		9 9 1 9
		3,312
Total number of all known defectives in the		
31st December, 1950		*3,654
Incidence of all known defectives per 1,000 of	the popu-	
lation		6.84
Number under statutory supervision on 31-12-1	950	600
Number under voluntary supervision on 31-12-		728
Number "subject to be dealt with "awaiting i		
an institution at 31-12-1950		168
Orders made during the year:		
Institution		39
Guardianship		3
Varying Orders—from Guardianship to Instit		3
from Institution to Guardia		1
		1
		1
Place of Safety Orders		11

Number discharged from Order during the year:			
Guardianship			79
Institution			24
Number under Guardianship on 31-12-1950			41
Number on books of Institutions on 31-12-1950			473
Number in Places of Safety on 31-12-1950			1
Mansfield Occupation Centre (26 cases on Regis 31-12-1950)—	ter on		
Attendances during 1950		4	,336
Home and Group Teaching—			
(a) Group Centres			
Sessions held during year			160
Total attendances			712
(b) Individual Home Visits:			
Number of visits paid during year			754
*Includes 1,467 still within the purview of the I Authority.	Local F	Educa	tion
(ii) Ascertainment.			
As indicated in the foregoing statistical summary, cases were reported during the year and, in addition fectives previously under voluntary supervision were for by the Local Education Authority, giving a total of follows:—	two rmally	male repo	de- rted
(a) Cases reported by Local Education Authority (Section 57, Education Act, 1944):		1.	1.
TI-1-0-1: 55(0)	14	13	27
TT 1 0 11 FF(F)	19	13	32
		10	32
(b) Other cases reported during 1950 and found to be 'subject to be dealt with '	5	4	9
Total cases ascertained to be 'subject to be dealt with 'during the year	38	30	68
(c) Other cases reported during 1950 who were not 'subject to be dealt with'	12	18	30
	50	48	98

These cases were dealt with in the following manner:-

(d)	Cases ascertained to be 'subject to be dealt	with '	:		
	Admitted to Institutions (by Order)		* 1	2	3
	Placed under Guardianship		1	1	2
	Taken to "Places of Safety"		1		1
	Placed under Statutory Supervision		13	9	22
	Died or removed from area		_	4	4
	Action not yet taken at 31-12-1950		21	13	34
(e)	Cases not at present 'subject to be dealt v	with ':			

(e)	Cases	not	at	present	'subject	to	be	dealt	with	:
-----	-------	-----	----	---------	----------	----	----	-------	------	---

Placed under Voluntary Superv	rision		10	12	22
Died or removed from area			_	2	2
Action unnecessary			2	4	6
		_			

50 48 98

Due to a shortage of Assistant Medical Staff in the School Health Service the number of cases statutorily reported by the Local Education Authority under Section 57 of the Education Act, 1944, was less than the figure for the previous year (fifty-nine as compared with sixty-seven in 1949). The number brought to notice from other sources also showed a decrease from fifty-five in 1949 to thirty-nine in 1950. The fact that the number of newly reported cases was more than offset by the numbers who died, removed to other areas, etc., coupled with the increase in the estimated mid-year population, resulted in a slight fall in the ratio of cases ascertained by the Local Health Authority per thousand of the population from 4.02 per thousand in 1949 to 3.89 per thousand at the end of 1950. Including cases still within the purview of the Local Education Authority, however, the ratio was increased from 6.75 in 1949 to 6.84 in 1950, and this compares favourably with the Wood Committee's estimate of eight per thousand.

The School Health and Mental Health Sections of the Public Health Department continued to maintain close co-operation during the year in matters affecting the two Services, whilst a number of new cases were again brought to notice by Clerks to Justices, Police and Probation Officers following Court appearances.

Other sources of ascertainment during 1950 included the County Welfare Service, the Southwell Diocesan Board of Moral Welfare, patients' relatives and medical attendants, and other Local Health Authorities, whilst several cases came to notice following their attendance at Psychiatric Out-patient Clinics.

### (iii) Guardianship.

Three Orders for Guardianship were made during the year, one by a Court of Summary Jurisdiction in respect of a male patient charged with an offence, and two in respect of female patients following the presentation of petitions.

<sup>\*</sup>This patient had previously been detained in a Place of Safety.

Varying Orders were obtained for the transfer of three defectives (one male and two females) from Guardianship to Institution care, for the transfer of a female patient from Institution care to Guardianship and, in the case of another female defective, for the appointment of a new Guardian.

Consequent upon the transfer to the National Assistance Board of responsibility for the payment of maintenance allowances to defectives under Guardianship, to which reference was made in the last Report, the Board of Control accepted the Local Health Authority's recommendations as to cases considered suitable for discharge from Order and seventy-three patients were discharged in this way during 1950. The Board also agreed to the withdrawal of the authority for detention in respect of a male patient who had been placed under Guardianship by his father. Orders were allowed to lapse in four other cases who were considered suitable for discharge and in another case (now admitted to Institution care) the Order was discharged 'by operation of law' for technical reasons. A male patient under Guardianship died in 1950 shortly after his transfer to a Mental Hospital under the provisions of the Lunacy Act, 1890.

The number of patients remaining under Guardianship at 31st December, 1950, was forty-one, made up as follows:—

(i)	Under parental guardianship			10
(ii)	Under guardianship of a relative other	than a	parent	28
(iii)	Under guardianship of a non-relative			3
				-
				41

In accordance with previously approved arrangements the Local Health Authority continued to make an allowance of 5/- weekly to the Guardian of each patient in category (ii) above and 7/6 weekly to the Guardians of those patients in category (iii) in recognition of their services. These allowances were, of course, in addition to the standard maintenance grants made by the National Assistance Board. The County Council continued to make maintenance and clothing allowances in respect of four patients who were in receipt of a higher allowance than was payable by the Assistance Board, and to one patient under the age of sixteen years.

Assistance with holiday travelling and maintenance expenses was afforded in appropriate cases during the year and, in one case, the County Council defrayed the cost of a patient's treatment by a Chiropodist as this treatment could not be obtained free of charge under the National Health Service Act.

During the year proceedings were taken against the father of a feebleminded female patient under her mother's statutory guardianship for alleged incest with the patient but the father committed suicide before the case could be brought to trial.

The patient was removed to institutional accommodation immediately after the incidents complained of, but she was permitted to return home on the father's death and she continued to reside there under Guardianship.

The periodic visitation of patients under Guardianship continued to be undertaken during the year by the Superintendent Mental Health Worker.

### (iv) Supervision.

The male Mental Health Workers continued during the year to carry out the routine visitation of defectives under Statutory or Voluntary Supervision in their own homes and the Superintendent Mental Health Worker exercised a general oversight in this respect and gave advice and help in any case presenting particular difficulties. During the year, the Mental Health Workers made approximately 5,000 domiciliary visits and, although the majority of these were of a routine nature where the behaviour and care of the defectives concerned was entirely satisfactory, it was possible in many instances to render assistance with problems causing concern in the home.

During the year, the names of two male and four female patients were removed from the list of cases under Statutory Supervision on the grounds that they had demonstrated by their stable conduct in the community over a period of years that continued supervision was unnecessary. Visitation was also discontinued during the year in respect of twenty-five defectives (fourteen males and eleven females) formerly under Voluntary Supervision.

The numbers of patients remaining under supervision on 31st December 1950, were as follows:—

	Males	Females	Total
 	82	63	145
 	282	173	455
 	2	1	3
 	358	367	725
	724	604	1,328
		$\begin{array}{cccccccccccccccccccccccccccccccccccc$	$\begin{array}{cccccccccccccccccccccccccccccccccccc$

### (v) Training.

### (a) Occupation Centre.

The existing arrangements for the provision of occupation and training through the Occupation Centre conducted at the Folk House, Westfield Lane, Mansfield, were continued during the year.

The number of patients attending at the end of the year was twenty-six (thirteen males and thirteen females) and attendances totalled 4,336 out of a possible 5,530; an average attendance of approximately 78%.

Defectives attending the Centre receive milk daily under the "Milk in Schools" scheme, and travelling expenses are paid by the County Council. Where it is impracticable for escorts to be provided by the Centre, the Council also pays the travelling expenses of relatives acting as escorts. Two parties were given at Christmas for the defectives and their relatives and a grant was made by the County Council towards the cost.

At the end of the year, the staff consisted of an Instructress, an Assistant Instructress, a Female Trainee and two part-time female Escorts. The Trainee was appointed with a view to her ultimate attendance at one of the appropriate Courses organised by the National Association for Mental Health so that another qualified Teacher may be available when it is possible to open the proposed new Centre at Mansfield. In this connection, it is pleasing to report that the Ministry of Health have now intimated (September, 1951) that the scheme for the building of the new Centre may proceed and it is to be hoped as a result that it will soon be possible to cater for the training needs of all the defectives in Mansfield and the surrounding Urban areas.

It is recognised, of course, that Occupation Centres are required in other parts of the County but present day economic and building restrictions and the difficulty of finding suitable premises for rent have so far prevented any rapid expansion in this direction. Proposals are at present under consideration for the provision of Occupation Centre facilities for defectives living in the Urban Districts surrounding Nottingham.

### (b) Home and Group Teaching.

The ten group teaching centres referred to in my last Report commenced to function during May, 1950, and the two Home Teachers also paid a number of fortnightly visits to other defectives in their own homes as shown in the following summary:—

Group Centres:				
Number on Register at 3	31-12-1950	)	 	50
Sessions held in 1950			 	160
Total attendances			 	712
Individual home visits:				
Numbers being visited at	t 31-12-19	950	 	50
Number of visits in 1950			 	754
Hours of instruction give	en		 	684

Parents have welcomed the group centres, not only for the temporary relief from "patient care" which they provide, but also because they see in them a positive effort to provide training. The family group idea is inherent in group centre work as a result of the variation in the ages of those attending, and the patients enjoy the sessions not only for their companionship but also for the added interest which is thus brought into their otherwise uneventful lives. Many of them have shown marked improvement as a result of the instruction given and, although it cannot be said that these fortnightly centres are an adequate substitute for full-time Occupation Centre training, the results so far achieved have justified their establishment.

### (vi) Licence.

According to information supplied by the various mental deficiency institutions throughout the country, the number of Nottinghamshire patients on licence on the 31st December, 1950, was sixty (twenty-four males and thirty-six females) of whom twenty-four (eight males and sixteen females) were residing within the County area.

The Authority's Mental Health Workers continued to undertake on behalf of Hospital Management Committees the routine supervision of patients on licence in the County and rendered assistance to patients newly sent out on licence in their re-adjustment to life in the community and, where appropriate, in finding suitable employment. During the year progress reports on individual cases were forwarded to Institutions at two-monthly intervals and a number of other reports have been supplied as shown in the following summary:—

Progress Reports			 156
Reports on applications	for holiday leave		 37
Do.	for licence		 12
Do.	for discharge from	Order	 4
Bi-ennial review special and recommendation			9

In addition to the foregoing, all necessary arrangements were made for the re-consideration by the Visitors during the year of the Orders in respect of six male defectives on licence in the County, thus obviating the need for the patients to be returned to the respective institutions for this purpose. At the request of the National Association for Mental Health, the County Council also agreed that the Deputy County Medical Officer might complete the Special Reports and Certificates required in connection with the re-consideration of the Orders of patients placed on licence at the Tuxford Agricultural Hostel, and this was done in six cases during the year. In a further case, a special report was completed following a patient's application for discharge from Order.

### (vii) Institution Care.

In addition to the three patients (one male and two females) admitted as a result of Varying Orders from Guardianship, and a female patient placed in an institution by her parent under Section 3 of the Mental Deficiency Act (with the assistance of the Authority's Officers), Orders were made for the admission of thirty-eight patients (eighteen males and twenty females) to Institutions during the year. Of that number one Order in respect of a male defective was made by H.M. Secretary of State, and thirty-seven by Judicial Authorities following the presentation of petitions. Ten of these last-mentioned cases (nine males and one female) had previously been detained in places of safety and in two other cases Orders were obtained to replace previous Orders which had lapsed 'by operation of law.'

One female and ten male defectives were admitted to 'places of safety' during the year—seven males under Court Orders and the remainder at the instance of the Local Health Authority's authorised officers. A male patient removed by the Authority's Officers returned to his home following improvement in the home conditions.

Twenty-four defectives (eight males and sixteen females) were discharged from Order during the year and there were seven deaths (five males and two females). The total number remaining on the books of institutions on 31st December, 1950, was 473, made up as follows:—

	Males	Females	Total
Thirteen institutions in the area of the Sheffield Regional Hospital Board	77	174	251
Twenty-eight institutions outside the Sheffield Region	120	79	199
Rampton and Moss Side Hospitals for Mental Defectives	14	9	23
	211	262	473

On the 31st December, 1950, the ratio of defectives in Institutions per thousand of the population of the County, excluding defectives on licence, was 0.78 as against 0.32 at the end of 1933.

Reports for the information of the Visitors were completed by the Authority's Mental Health Workers on behalf of Hospital Management Committees in respect of 165 cases whose Orders became due for re-consideration during the year.

On the 31st December, 1950, the number of defectives 'subject to be dealt with' for whom institution accommodation was required totalled 168 (85 males and 83 females), including 64 (36 males and 28 females) under the age of sixteen years. Of the total number, no less than fifty defectives were considered to be in real and urgent need

of removal and whilst the figures given may not appear impressive it has to be remembered that every case included in the 'real and urgent' category presents an almost overwhelming problem in its immediate family circle. One particularly serious problem associated with the shortage of accommodation concerns the delinquent defective. In their desire to ensure that their deliberations have full regard to the social limitations arising from a defective's mental condition, local Courts always co-operate closely with the Local Health Authority in cases where known or suspected defectives are concerned so that the fullest information may be available to them. Unfortunately, however, where it appears to a Court that it is necessary to prevent a defective's return to the community and that he should properly be dealt with under the Mental Deficiency Acts, the lack of immediately available accommodation in mental deficiency institutions impels the Court to make an Order for the defective's detention in a prison as a "Place of Safety" until such time as a petition can be presented, there being no other "Place of Safety" available.

The defective's relatives can be forgiven for regarding this procedure, entailing as it often does a prolonged stay in prison, as a purely punitive measure, and the obvious consequence is that detention in a prison might ultimately come to be regarded as a natural alternative to institution care, thereby bringing the Mental Deficiency Acts into disrepute and further hindering the efforts of those who attempt to administer the Acts with sympathy and understanding.

Since the inception of the National Health Service Act one of the most significant developments from the viewpoint of those concerned with the welfare of mental defectives has been the changed attitude of parents and other relatives. Whereas "mental deficiency" used to be regarded generally as something of a social stigma and a thing to be kept in the background, relatives are now only too anxious to take advantage of such facilities for supervision and training as are available. Moreover there seems to have been a general weakening of "family ties and responsibilities" and where families would once have accepted their misfortunes without complaint there is now-all too frequentlya clamour for the urgent removal of defective relatives. This is accounted for partly by an enlightened attitude towards mental deficiency and mental illness-a result of the publicity which the conditions have received—and partly by the removal of the obligation to make contributions towards the cost of a patient's institutional maintenance. Whatever the reason, the ever increasing demand has thrown an impossible burden on existing accommodation which cannot be eased until more is provided. It is encouraging to know, therefore, that the utmost stress is being placed on the need to give priority to the building of mental hospitals and mental deficiency institutions and it is to be hoped that the time is not far distant when it will be possible to meet all demands which arise. In the meantime, priority of admission has still to be afforded on the basis of home and environmental conditions rather than upon the clinical needs and potentialities of the defectives themselves. Even so, it is impossible to deal with more than a fraction of the cases of real urgency.

### Ambulance Facilities for Mental Health Services.

The duty of securing means of transport for mental defectives or persons suffering from mental illness continues to be met mainly through the medium of the County Ambulance Service. Occasional use is also made of Mental Health Worker's private motor cars.

Male and female escort assistance is obtained as required and is paid for in accordance with an approved scale of fees. Subsistence allowances are also paid to Escorts where it is necessary for them to take meals whilst on escort duty.

If the assistance of trained nursing staff is required, the necessary help is sought from the appropriate hospital.

### CONCLUSION.

I desire to express gratitude to the medical and senior lay staff who have contributed so greatly to the detailed preparation of this Report; to Dr. Jeremiah, my Deputy, for his continued loyal and efficient service; and to the staff generally, both indoor and outdoor, for their zeal and efficiency.

I also wish to thank the Medical Officers of Health of the County Districts for the information which they have so kindly supplied.

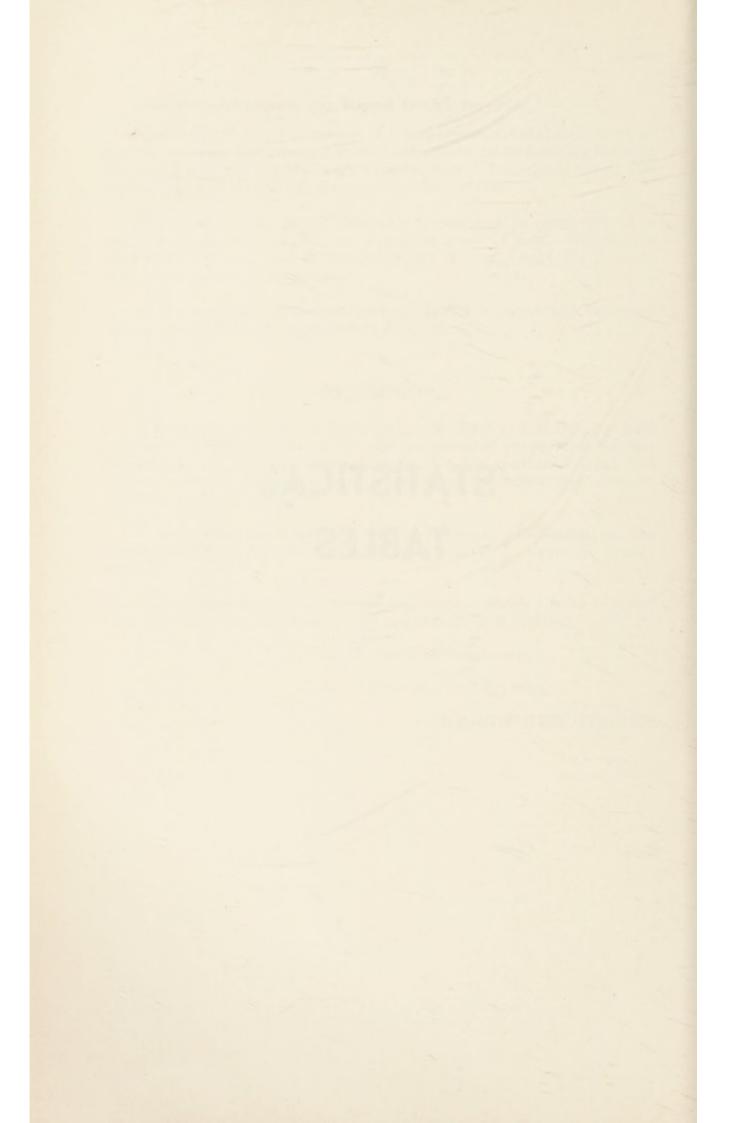
Again I gratefully acknowledge the support which I have received from the Chairmen and Members of my several Committees.

I am, Ladies and Gentlemen,

Your obedient Servant,

CHRISTOPHER TIBBITS.

### STATISTICAL TABLES



## BOROUGHS AND URBAN DISTRICTS.

		100														
iseases	Death Rate fro Tuberculous D Tuber 1,000 of por	0.43	0.25	0.64	0.30	0.28	0.50	0.29	0.50	0.17	0.29	0-55	0.37	0.36	0.12	0.35
renjosis	Death Rate PulmonaryTube To 1,000 of pop	0.39	0.21	09-0	0.30	0.28	0.40	0.29	0.50	0.17	0.29	0.49	0.29	0.27	0.12	0.32
	Hate (Corrected)	12.3	8.01	11.8	12.2	11.2	12.0	11.4	12.5	10.2	2.01	6-11	13.0	9.11	8.6	11.5
Deaths	Hate (Crude)	11.2	0.6	6-11	12.9	10.3	10.3	6.01	10.2	8.3	9.5	9.6	11.1	9.1	12.0	10.5
	Number	573	292	277	213	221	512	377	102	191	186	175	447	100	295	3,961
under of age	Eate per 1,000 Live Births	34.8	36.5	36.8	33.1	31.4	24.0	37-4	27.6	37.9	38.4	53.4	6.09	35.0	22.0	35.9
Deaths under 1 year of age	Number	59	21	15	6	10	19	19	10	14	14	17	34	1-	1-	220
	Rate (Corrected)	15.8	18.9	17.8	16.4	14.3	15.4	14.3	18.8	15.8	18.8	18.2	16.7	18.3	12.9	16.3
Births	Hate (Crude)	16.3	17-7	17.6	9-91	14.9	15.9	14.8	18.1	16.0	18:1	17.5	16.5	18:1	12.9	16.3
	Number	834	575	408	272	318	790	508	181	369	364	318	299	200	318	6,122
the	Population of betimates of to elibidia	50,960	32,410	23,120	16,410	21,340	49,470	34,330	9,980	23,030	20,110	18,120	40,300	11,020	24,600	375,200
IE,	•Populatio	46,068	26,285	19,535	14,229	14,325	27,812	26,425	8,830	17,839	17,866	13,721	37,725	10,959	19,209	300,828
mily at	Persons per Far Census 193	4.0	4.1	3.6	5.7	3.8	3.8	80	3.9	3.9	4.0	4.0	4.1	7.4	3.4	3.9
9	Families or sei Occupien at Census 1	11,082	6,320	5,152	3,677	3,766	7,250	6,883	2,201	4,523	4,406	3,363	9,151	2,478	5,515	75,767
9104	Persons per	7.5	1.8	8.9	3.5	4.7	7.6	.c.	8.4	5.1	3.4	3.7	8.50	1.5	7.0	4.4
bush	oh ni səth ni bas bası) (1932W	7,009	17,936	3,364	4,657	4,506	6,462	4,018	1,178	4,029	5,830	4,834	10,507	7,174	3,501	85,005
	_	:	-	:		:	:	:	:	:	-:	-:	-	:	:	· :
	BOROUGHS AND URBAN DISTRICTS			(orough)	ORD (Borough)	:	STAPLEFORD	:	:	:	ASHFIELD	MANSFIELD WOODHOUSE		:	BRIDGFORD	TOTALS
	BOROU	MANSFIELD (Borough)	WORKSOP (Borough)	NEWARE (Borough)	EAST RETFORD	ARNOLD	BEESTON &	CARLTON	EASTWOOD	HUCKNALL	KIRKBY-IN-ASHFIELD	MANSFIELD	SUTTON-IN-ASHFIELD	WARSOP	WEST BRID	

•The figures under this heading relate to the population enumerated on the 26th April, 1931, but the Districts for which they are now given are constituted at the 30th September. 1935, and include changes of area under the County of Nottingham Review Order, 1934, which came into effect on the 1st April, 1935, and the Nottingham Corporation Act, 1932, which came into effect on the 1st April, 1935, and the Nottingham Corporation Act, 1932, which came into effect on the 1st April, 1933.

TABLE II.

NOTTINGHAMSHIRE.

# MSHIRE. Vital Statistics for the Year 1950.

									1							
Spirite and a spirite	bus bus	610		ily at		the		Births		Deaths under 1 year of age	under of age		Deaths		reulosi	898898
RURAL DISTRICTS	oro A ni ser A fini bns bnsJ)	A 19q snos194	Families or separate Occupiers	Persons per Fan Census 193	•Population	Population ot betamitee to lobim	Дишреt.	Rate (Crude)	Rate (Corrected)	Number	Rate per 1,000 Live Births	Number	Rate (Crude)	Rate (Corrected)	Death Rate fi PulmonaryTube per 1,000 of pop	Death Rate fro Tuberculous Di qoq io 000,1 19q
	_	_	_													
BASFORD	11,571	71 0-69	9 10,434	3.9	41,303	49,800	830	16.7	17.0	26	31.3	909	10.1	10.4	0.28	0.30
BINGHAM	67,583	83 0.29	9 3,882	3.6	15,106	19,870	278	14.0	15.1	9	21.6	228	11.5	10.1	0.25	0.55
WORKSOP	28,515	15 0.57	7 3,348	4.3	14,555	16,470	295	17.9	18.1	5	16.9	147	8.9	111.3	0.54	09-0
EAST RETFORD	111,032	32 0.19	9 4,910	3.7	19,506	22,150	314	14.1	15.4	00	25.5	215	6.4	9.1	0.13	0.23
NEWARK	41,550	50 0.25	5 2,356	3.7	8,898	10,620	174	16.4	15.7	7	40.2	109	10.3	10.1	0.37	0.37
SOUTHWELL	118,586	86 0.33	3 8,976	3.9	36,342	39,758	670	16.8	17.8	28	41.8	405	10.1	11.4	0.50	0.27
SHIRE HALL		1	1	4.0	4	67	1	1	1	1	1	1	1	1	1	1
TOTALS	438,838	38 0-36	8 33,907	3.9	135,714	158,670	2,561	16-1	16.7	80	31.2	1,610	10-1	10.4	0.50	0.27

\*The figures under this heading relate to the population enumerated on the 26th April, 1931, but the Districts for which they are now given are constituted at the 30th September, 1935, and include changes of area under the County of Nottingham Review Order, 1934, which came into effect on the 1st April, 1935, and the Nottingham Corporation Act, 1932, which came into effect on the 1st April, 1935.

TABLE III.

NOTTINGHAMSHIRE.

## Vital Statistics for the Year 1950.

### WHOLE ADMINISTRATIVE COUNTY.

		10		
898898	Death Rate fro Tuberculous Di per 1,000 of pop	0.35	0.27	0.35
rculosi	Death Rate f PulmonaryTube per 1,000 of pop	0.32	0.50	0.31
	(Corrected)	11.5	10.4	11.3
Deaths	Rate (Crude)	10.5	10-1	10.4
	Number	3,961	1,610	5,571
under	Rate per 1,000	35.9	31.2	34.0
Deaths under	TedmuN	220	80	300
	Hate (Corrected)	16.3	16-7	16.5
Births	Hate (Crude)	16.3	16.1	16.3
	ZadmuN	6,122	2,561	8,683
offt	northingod of betrmitse 31 to elibtra	375,200	158,670	533,870
	Populatio	300,828	135,714	436,542
180 Alim	Persons per Fa	3.9	3.9	6.6
	Familles or Sep Occupiers at Census 19	75,767	33,907	1.01 109,674
9107	Persons per A	4.4	0.36	1.01
basi	Area in Actinity (1948) (1948 Water)	85,005	43,838	523,843
		URBAN DISTRICTS	RURAL DISTRICTS	WHOLE ADMINISTRATIVE COUNTY
		URB,	RUR.	AD.

.Adjusted figures which relate to the area of the County as constituted at the 30th September, 1935, and exclude the population enumerated in the area transferred to the City of Nottingham under the Nottingham Corporation Act, 1932, which came into effect on the 1st April, 1933.

TAB	LE IV.	NO	TTIME	HAMSHI	KE.	AD	tract	of Vita	1 Statis	stics.
	Population ddle of the ar			*	A	1		-		per
	######################################	of Births Deaths	2	Separate Familles	Persons per Family	8	ths per 1,000 of the population	es hs		Ā
	of	TE	70	Ē	E .	=	100	7.2	95	a per
-	do	a B	-	95	(24	Births	also.	二四	2	E t
Year	ed Pop middle year	Dog	Persons per Acre	-		77	o b	99	Net Deaths	200
>	4 3 6	S =	8	ate	90	1 2	20	50.	2	100
	mat	xcess	98	ar	00	ste	he	. L	N.	4-7
	Estimated at the mic	Excess	Je I	e de	81.8	Registered	Births	per		e t
	Esti		-	00	P	Re	m	Deaths under 1 year per 1,000 Births		Net Death Rate 1 1,000 of the Pornlation
1901	275,971	4497	.53	59,755	4.6	8636	31.3	145	4139	14.9
1902	282,563	4804	.54			8920	31.5	138	4116	14.5
1903	289,001	4926	.55			9072	31.3	134	4146	14.3
1904	295,586	5086	.56			9379	31.7	139	4293	14.5
1905	302,321	4389	.57			8880	29.3	126	4491	14.8
1906	309,209	4849	.59			9088	29.3	121	4239	13.7
1907	316,355	4412	.60			8962	28.3	127	4550	14.3
1908	323,461	5358	-62			9818	30.3	119	4460	13.7
1909	330,831	5316	-63			9740	29.4	106	4424	13.3
1910	338,937	5223	-64			9554	28.2	110	4331	12.7
1911			-66	76,236	4.5	9453	27.3	125	4550	13.1
	345,930	4903						93		
1912	355,046	5007	-68			9213	25.9		4206	11.8
1913	362,307	4934	.69			9369	25.8	101	4435	12.2
1914	367,617	4845	.70			9541	25.9	107	4696	12.7
1915	353,193	3775	.67		1.0	8843	25.0	112	5068	14.3
1916	344,501	4126	-66			8567	22.8	95	4441	12·8 12·2
1917	344,822	3372	-66			7589	19.7	95	4217	12.2
1918	339,456	1725	.65			7742	20.3	100	6017	17.7
1919	366,331	2948	.70			7507	19.6	95	4559	12.4
1920	380,928	5667	.73			9836	25.8	85	4169	10.9
1921	381,969	4774	.73	85,646	4.4	9187	24.1	86	4413	11.5
1922	386,130	4177	.74			8316	21.5	69	4139	10.7
1923			.74			8023	20.6	77	4260	11.0
	388,019	3763			* *					
1924	391,700	3715	.75			8085	20.6	79	4370	11.2
1925	393,400	3373	.75			7921	20.1	77	4548	11.6
1926	398,900	3310	.75			7739	19.4	73	4429	11.1
1927	408,100	2984	.78			7613	18.6	69	4629	11.3
1928	422,700	3549	.81			7941	18.8	64	4392	10.4
1929	429,300	2242	.82			7517	17.5	76	5095	11.8
1930	439,400	3261	.84			7746	17.6	62	4485	10.2
1931	447,900	2617	-86	*109,674	3.9	7695	17.2	72	5078	11.3
1932	451,600	2821	-86			7534	16.7	66	4713	10.4
1933	444,970	2036	-86			6945	15.5	68	4909	10.9
1934	448,500	2395	-87			7042	15.7	54	4647	10.4
1935	453,500	2382				7083	15.6	56	4701	10.4
1936			-86		* *					
	459,000	2005	.88			7033	15.3	58	5028	10.9
1937	465,800	2218	.89			7318	15.7	59	5100	10.9
1938	470,900 $a478,200$	2796	.90			7549	16.0	46	4753	10.1
1939	b479,900	2511	.91			7847	16.4	51	5336	11.1
1940	483,240	1735	.92			7610	15.7	58	5875	12.2
1941	492,750	2501	.94			7954	16.1	62	5453	11.1
1942	481,200	3755	.92			8659	18.0	48	4904	10.2
1943	472,300	3946	-90			9255	20.2	47	5309	11.2
1944	474,960	5125	.91			10,343	21.8	47	5218	11.0
1945	475,910	4068	.91			9096	19.1	44	5028	10.5
1946	495,620	4693	.95	::	- ::	10,001	20.2	41	5308	10.7
1947	505,690	5114	-97			10,673	21.2	41	5559	11.0
1948	518,300	4483	-99		* *	9486	18.3	42	5003	9.65
1949	523,160	3562	-99			9098	17.4	32	5536	10.6
1950	533,870	3114	1.17	1		8683	16.3	34	5571	10.4
								-		
	mparison-									
1950		and Wa					15.8	29.8		11.6
		nty Boro		nd Great						
		neluding					17.6	33-8		12.3
		ller Tow					16.7	29.4		11.6

<sup>\*</sup>Adjusted figures owing to alteration in area under the Nottingham Corporation Act, 1932, as from the 1st April, 1933.

a Population figures for calculation of Birth rates.

b Population figures for calculation of Death rates and incidence of notifiable diseases.

TABLE V. NOTTINGHAMSHIRE.

INFANTILE MORTALITY, 1950.

DISTRICT	No. of Live Births		YEAR OF AGE		ATHS UNDER NE MONTH
Distiller	m.n mini	Total No.	Rate per 1,000 Live Births	No.	Rate per 1,000 Live Births
Mansfield (Borough)	834	29	34.8	22	26.38
Worksop (Borough)	575	21	36.5	14	24.34
NEWARK (Borough)	408	15	36.8	12	29.41
EAST RETFORD (Borough)	272	9	33.1	6	22.05
ARNOLD	318	10	31.4	7	22.01
BEESTON & STAPLEFORD	790	19	24.0	9	11.39
CARLTON	508	19	37.4	14	27.55
EASTWOOD	181	5	27.6	2	11.04
HUCKNALL	369	14	37.9	9	24.38
KIRKBY-IN-ASHFIELD	364	14	38.4	4	10.98
Mansfield W'house	318	17	53.4	9	28.30
SUTTON-IN-ASHFIELD	667	34	50.9	22	32.98
WARSOP	200	7	35.0	1	5.0
West Bridgeord	318	7	22.0	5	15.72
Urban Districts	6,122	220	35.9	136	22.21
Basford	830	26	31.3	16	19-27
BINGHAM	278	6	21.6	2	7.19
Worksop	295	5	16.9	_	_
East Retford	314	8	25.5	6	19.10
NEWARK	174	7	40.2	5	28.73
SOUTHWELL	670	28	41.8	14	20.89
Rural Districts	2,561	80	31.2	43	16.74
WHOLE COUNTY	8,683	300	34.5	179	20.61

TABLE VI.

Causes of Death at Different Periods of Life in the Administrative

County of Nottingham, 1950.

			AGG	REGA	TE O	F URB	AN D	ISTRI	стѕ	AGG	REGA	TE OF	FRUI	RAL D	ISTRI	CTS	m-4-1
No.	CAUSES OF DEATH	SEX	All	0-	1-		15-			Ali Ages	0-	1-	5-	15-	45-	65-	for Co'ty
	ALL CAUSES {	M F	2109 1852	132 88	21 13	22 15			1218 1203	847 763	43 37	8	8 5	61 67	210 136		2956 2615
1	Tuberculosis Respiratory {	M F	71 50				33 41	26 6	12	18 25	::	::		12 20		1 2	89 75
2	Do. Other	M F	9 5	::	3	1	1	1	::	6	::	2	::	3	1		10
3	Syphilitic Disease {	M F	9		::			7	1				**				10
4	Diphtheria	M F	::				::		::	::	::						
5	Whooping Cough	M	4 3	4 0		**				1	1		::				5 3
6	Meningococcal Infections	M	1	ĩ					::	,		::				::	1
7	Acute Poliomyelitis	M	11.	::						2 2		1		1			2
8	Measles	F M		::					::	ĩ	::		ī				1
9	Other Infective and	F	6		1	1	1	1	2	3	1				::	2	9
10	Parasitic Diseases	F	69	2		**	6	29	34	5 32	::			3	13		101
	Stomach t	F	46 85		::	11	11	12 42	34	17 26	::			2		6	63
11	Do. Lung, Bronchus	F	15				3	7	5	6	::	::	**	::	5	1	21
12	Do. Breast	F	56				4	30	22	21				6	10	5	77
13	Do. Uterus	M F	41		**		3 9	23	15 120	12 71				3 5			53 264
14	Other Malignant and Lymphatic Neoplasm	M F	193 165	**			18	66	81	59				5		37	224
15	Leukaemia, Aleukaemia	M F	5			1	1		3	3				2	1		8
16	Diabetes	M F	23	::	::		3		15	12				- 1	3		35
17	Vascular Lesions of Nervous System	M F	230			::	8	43	183	92 107	::			1	14	92	322 380
18	Coronary Disease	M F	273 141					115 37	153 104	91 55	::	::		3	31		364 196
19	Hypertension	M	62	::			1	12	49	30 18	::				9		92 64
20	Other Heart Disease	M	290		1	1	15	48		131		**		2 5	15	114	421 547
21	Other Circulatory Disease	F M	365				19	37 18	53	38	::	11		1	7	30	113
		F	57 20	::	1		3 4	4	47 11	20 12	1	::		1	3		77 32
22	Influenza	F	75	17		2	5	13		23	5	2		2	3		16 98
23	Pneumonia	F	78 181	11			2 2	10			6	3	::	2	10		238
24	Bronchitis	F	106	4			2 3	16	84	40 12	2			1 3	2	37	146
25	Other Diseases of Respiratory System	F	19	1	::	2	4 3	5 2 8	10 14	4			1	1	2 2 6		27 23 36
26	Ulcer of Stomach and Duodenum	M F	-8			::	1	4	3	4 2	,	::			3		12
27	Gastritis, Enteritis and Diarrhoea	M F	12 11	6 7			1	1 6	3 5 2 16	3	1			11,	1		14
28	Nephritis and Nephrosis	M F	30 24			1 2	5	6	10	11	::	1		2	3	5	46 35
29	Hyperplasia of Prostate	M F	27		::	::		2	25	14		::	::			14	41
30	Pregnancy, Childbirth, Abortion	F	7							5			3.5	4	1		12
31	Congenital Malformations	M	25 19	19 16			7 2			9 7	4 5		1	1	3		34 26
32	Other Defined and ill-	MF	218 214	77		7	23 18	22 38	88 108	89	26 18	::	1 2	5	19	38	307 293
33	Motor Vehicle Accidents	M	24	43	2	4	7	7	4	15			9			2	39
34	All Other Accidents	F M	45	5	3	1	16	1 12 4	8 25		1	2		iı	7	10	77 48
		F	35 26	2		1	6	13	25 7	7			::	1	4	8 21 21	33
35 36	Suicide	F	15				4	7		2 2	::			::	2		17
	of War	F	1					.,,	1								1

Districts	received nuisances received no. of and defects or inspections dealt registered. (2) (3) (4) (4) (1) (2) (2) (3) (4) (4) (4) (2) (2) (3) (4) (4) (4) (2) (2) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4	Total No. of inspections	-						
(1) registered made death with formal Statutory informal Statutory (2) (3) (4) (5) (5) (6) (6) (7) (8) (8) (8) (1) (2) (3) (4) (4) (5) (6) (6) (6) (7) (7) (8) (8) (8) (9) (9) (9) (9) (9) (9) (9) (9) (9) (9	tricts—  (2) (3) (4)  (4) (5) (2) (3) (4)  (5) (2) (3) (4)  (6) (2) (3) (4)  (7) (2) (3) (4)  (8) (4) (4)  (9) (2) (3) (4)  (1,295	-	No. of nuisances and defects	No Notices	served.	No Notices con	of mplied with.	No. of Re-inspec- tions or re-visite	REMARKS.
stricts         1,295         6,136         2,943         1,326         229         1,632           B.         230         5,586         592         1,326         279         1,632           B.         736         5,586         5943         1,326         279         1,632           B.         736         5,694         399         170         26         147           Ford B.         652         5,094         314         661         64         591           Ind Stapleford         1,502         8,537         2,174         1,348         78         1,361           Ind Stapleford         1,502         8,537         2,174         1,348         78         1,361           Ind Stapleford         1,502         8,537         2,174         1,675         648         225         673           Ind Stapleford         1,502         8,537         1,417         1,348         385         547           Woodhouse         2,81         1,417         390         112         448           Woodhouse         1,437         2,81         1,715         631         124         74           Ashfield         1,437         2,81 <td< th=""><th>B. 1,295 6,136 2,943 B. 230 5,586 592 B. 736 814 186 Sord B 652 5,094 314 and Stapleford 1,502 8,537 2,174 I.173 8,298 1,675 I.Ashfield 983 2,747 1,302 Woodhouse 281 3,187 1,417 Ashfield 1,437 2,831 1,715 dgford 354 2,122 354 stricts—  497 6,570 1,394</th><th></th><th>with.</th><th>Informal. (5)</th><th>Statutory.</th><th>Informal.</th><th>Statutory.</th><th>Column (3).</th><th>(10)</th></td<>	B. 1,295 6,136 2,943 B. 230 5,586 592 B. 736 814 186 Sord B 652 5,094 314 and Stapleford 1,502 8,537 2,174 I.173 8,298 1,675 I.Ashfield 983 2,747 1,302 Woodhouse 281 3,187 1,417 Ashfield 1,437 2,831 1,715 dgford 354 2,122 354 stricts—  497 6,570 1,394		with.	Informal. (5)	Statutory.	Informal.	Statutory.	Column (3).	(10)
B. 1,295 6,136 2,943 1,326 229 1,632 B. 230 5,586 592 235 47 125 Ford B. 92 2,554 399 170 26 143 and Stapleford 1,502 8,537 2,174 1,348 78 1,361 and Stapleford 1,502 8,537 2,174 1,348 78 1,361 and Stapleford 1,502 8,537 2,174 1,348 78 1,361 b. Ashfield 983 2,747 1,079 888 385 547 c. Ashfield 983 2,747 1,417 390 112 326 dgford 1,437 2,831 1,715 631 124 748 dgford 354 2,122 354 219 30 197 stricts—  stricts—  Gord 91 3,524 116 100 16 98 a 257 47 - 47 - 47 a 38 257 87 87 87 87 87 87 87 87 87 87 87 87 87	B. 1,295 6,136 2,943 B. 230 5,586 592 B. 736 814 186 Sord B. 652 5,094 399 and Stapleford 1,502 8,537 2,174 1,173 8,298 1,675 1.189 231 1.189 231 1.189 231 1.437 2,831 1,715 dgford 1,437 2,831 1,715 stricts—  497 6,570 1,394								
B	B. 736 5,586 592 B. 736 814 186 B. 92 2,554 399 652 6,094 914 and Stapleford 1,502 8,537 2,174 and Stapleford 1,173 8,298 1,675 a. Ashfield 883 2,747 1,302 Woodhouse 281 3,187 1,417 Ashfield 1,437 2,831 1,715 dgford 354 2,122 354 stricts 497 6,570 1,394		2,943	1,326	229	1,632	345	4,810	
92     2,554     399     170     26     143       1,502     8,537     2,174     1,348     78     1,361       1,173     8,298     1,675     648     225     673       1,173     8,298     1,675     648     225     673       1,173     8,298     1,675     648     225     673       1,173     8,298     1,675     648     225     673       1,173     8,298     1,679     888     385     547       281     2,747     1,079     888     385     547       281     3,187     1,417     390     112     748       1,437     2,831     1,715     631     124     748       1,65     2,641     161     142     24     103       354     2,122     354     219     30     197       497     6,570     1,394     808     83     845       43     1,614     89     51     38       43     3,524     116     100     16     98       257     87     47      42       265     6,206     630     74     18     81	92 2,554 399 652 5,094 914 1,502 8,537 2,174 1,173 8,298 1,675 1,189 231 876 3,104 1,079 983 2,747 1,302 281 3,187 1,417 1,437 2,831 1,715 155 2,641 161 354 2,122 354	736	186	230	7.	125	3 26	368	
652         5,094         914         661         64         591           1,502         8,537         2,174         1,348         78         1,361           1,173         8,298         1,675         648         225         673           79         1,189         231         148         28         125           876         3,104         1,079         888         385         547           983         2,747         1,302         464         261         261           1,437         2,831         1,417         390         112         748           155         2,641         161         142         24         103           155         2,641         161         142         24         103           354         2,122         354         219         30         197           497         6,570         1,394         808         83         845           43         1,614         89         51         38         48           43         3,524         116         98         48           38         257         87         47         47           265 <td>1,502 1,502 8,537 1,173 8,298 1,675 1,189 231 876 983 2,747 1,079 983 2,747 1,437 2,831 1,417 1,437 2,831 1,715 1,55 2,641 1,715 1,71</td> <td>92</td> <td>399</td> <td>170</td> <td>26</td> <td>143</td> <td>30</td> <td>432</td> <td></td>	1,502 1,502 8,537 1,173 8,298 1,675 1,189 231 876 983 2,747 1,079 983 2,747 1,437 2,831 1,417 1,437 2,831 1,715 1,55 2,641 1,715 1,71	92	399	170	26	143	30	432	
1,502     8,537     2,174     1,348     78     1,361       1,173     8,298     1,675     648     225     673       79     1,189     231     148     28     125       876     3,104     1,079     888     385     547       983     2,747     1,302     464     261     423       281     3,187     1,417     390     112     326       1,437     2,831     1,715     631     124     748       155     2,641     161     142     24     103       354     2,122     354     219     30     197       497     6,570     1,394     808     83     845       43     1,614     89     51     38     48       91     3,524     116     100     16     98       38     257     87     47      42       265     6,206     630     74     18     81	1 1,502 8,537 2,174 1, 1,173 8,298 1,675 1,675 1,189 231 876 3,104 1,079 983 2,747 1,302 281 1,437 2,831 1,715 1,65 2,641 161 354 2,122 354 497 6,570 1,394 197 3,957	652	914	199	64	169	148	1,545	
1,173     8,298     1,675     648     225     673       79     1,189     231     148     28     125       876     3,104     1,079     888     385     547       983     2,747     1,302     464     261     423       281     3,187     1,417     390     112     326       155     2,641     1,715     631     124     748       155     2,641     161     142     24     103       354     2,122     354     219     30     197       497     6,570     1,394     808     83     845       43     1,614     89     51     38     48       43     1,614     89     51     38     48       91     3,524     116     100     16     98       38     257     87     47      42       265     6,206     630     74     18     81	1,173 8,298 1,675 1,79 1,189 231 876 3,104 1,079 883 2,747 1,302 281 3,187 1,417 1,437 2,831 1,715 1,65 2,641 354 2,122 354 497 6,570 1,394 197 3,957	1,502	2,174	1,348	78	1,361	16	2,306	
876     3,104     1,079     888     385     547       983     2,747     1,302     464     261     423       281     3,187     1,417     390     112     326       1,437     2,831     1,715     631     124     748       155     2,641     1,61     631     124     748       354     2,122     354     219     30     197       497     6,570     1,394     808     83     845       43     1,614     89     51     38     48       91     3,524     116     100     16     98       38     257     87     47      42       265     6,206     630     74     18     81	876 3,104 1,079 983 2,747 1,302 281 3,187 1,417 1,437 2,831 1,715 155 2,641 161 354 2,122 354 497 6,570 1,394	-	1,675	648	225	673	251	2,061	
983     2,747     1,302     464     261     423       281     3,187     1,417     390     112     326       1,437     2,831     1,715     631     124     748       155     2,641     1,715     631     124     748       354     2,122     354     219     30     197       497     6,570     1,394     808     83     845       43     1,614     89     51     38     48       91     3,524     116     100     16     98       38     257     87     47     87     47       265     6,206     630     74     18     81	983 2,747 1,302 281 3,187 1,417 1,437 2,831 1,715 155 2,641 161 354 2,122 354 497 6,570 1,394		1.079	888	20 20 00	547	457	2.025	
281     3,187     1,417     390     112     326       1,437     2,831     1,715     631     124     748       155     2,641     161     142     24     103       354     2,122     354     219     30     197       497     6,570     1,394     808     83     845       43     1,614     89     51     38     48       91     3,524     116     100     16     98       38     257     87     47     47     42       265     6,206     630     74     18     81	281 3,187 1,417 1,437 2,831 1,715 155 2,641 161 354 2,122 354 497 6,570 1,394	983	1,302	464	261			1,158	
dgford 1,437 2,831 1,715 631 124 748  dgford 354 2,122 354 219 30 197  stricts—  497 6,570 1,394 808 83 845  ford 1,31 3,524 116 100 16 98  1 265 6,206 630 74 18 81	1,437 2,831 1,715 155 2,641 161 161 354 2,122 354 354 497 6,570 1,394 197 3,957 3,40	281	1,417	390	112	326	116	1,654	
dgford 155 2,641 161 142 24 103  dgford 354 2,122 354 219 30 197  stricts—  497 6,570 1,394 808 83 845  ford 497 3,957 340 224 21 202  43 1,614 89 51 38 48  ford 91 3,524 116 100 16 98  1 265 6,206 630 74 18 81	ridgford 354 2,122 354  bistricts— 497 6,570 1,394	1,437	1,715	631	124	748	108	291	
dgford 354 2,122 354 219 30 197  stricts—  497 6,570 1,394 808 83 845  197 3,957 340 224 21 202  43 1,614 89 51 38 48  ford 91 3,524 116 100 16 98  1 265 6,206 630 74 18 81	ridgford 354 2,122 354  bistricts— 497 6,570 1,394	155	161	142	24	103	18	391	
ford 265 6,206 630 74 18	497 6,570 1,394	354	354	219	30	197	18	1,100	
ford 265 6,206 630 74 18 81	497 6,570 1,394								
ford 265 6,206 630 74 18	497 6,570 1,394 197 3,957 340								
ford 197 3,957 340 224 21 202 43 1,614 89 51 38 48 91 3,524 116 100 16 98 1 265 6,206 630 74 18 81	197 3 957 340		1.394	808	83	845	61	4,244	
ford 91 3,524 116 100 16 98 42 47 47 47 81 81	000 1000	197	340	224	21	202	50	1,233	
38 257 87 47 42 31 265 6,206 630 74 18 81	ford 3.594 116	C# 5	116	100	16	0 X	30	587	
31 265 6,206 630 74 18 81	28 987 87	30	67	47	2	49		103	
	31 265 6,206 630	265 6	630	4.	18	81	12	630	

TABLE VIII.

HOUSING STATISTICS, 1950.

117 878 92 81 1 1 1 1 Southwell R.D. 35 42 1 1 1.1 Newark R.D. 443 878 37 253 1473 161 1194 1 1 E. Retford R.D. 49 CA 53 1 1 Worksop R.D. 1.1 10 -207 522 9 4244 1560 1870 1272 12 Bingham R.D. 1 1 089 786 25 21 33 Basford R.D. 1 1 104 98 -178 104 West Bridgford U.D. 1 1 295 66 166 1 1 Warsop U.D. 1 1 1 1 1 748 962 643 1020 237 3029 16 14 1026 1669 28 U.D. 1.1 1 1 blefideA-ni-nottu2 16 363 331 13 U.D. Mansfield Woodhouse 286 01 455 G3 79 1004 460 10 U.D. 1 1 Kirkby-in-Ashfield 64 468 8 727 15 Hucknall U.D. 68 03 77 Eastwood U.D. 1.1 107 536 115 614 281 1299 1781 955 312 2958 3560 2016 ì Carlton U.D. 1.1 62 00 01 834 821 24 24 Stapleford U.D. Beeston and 591 661 .G.U blomA 1 1 146 172 41-4 1 1 E. Retford B. 147 174 757 9 1 1 Newark B. 1 1 392 183 427 810 35 1 1 1 Worksop B. 1090 1350 107 90 1090 4810 Mansfield B. Number of Inspections made for the purpose ... -Proceedings under Sections 9, 10 and 16 of the Number of dwelling-houses in respect of which (b) Number of Inspections made for the purpose.
Number of dwelling-houses found to be in a state in consequence of informal action by the Local Number of dwelling-houses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human Remedy of Defects during the year without Service Number of defective dwelling-houses rendered fit Total number of dwelling-houses inspected for Number of dwelling-houses (included under sub-head (1) above) which were inspected and so dangerous or injurious to health as to be unfit recorded under the Housing (Consolidated) (a) By owners
(b) By Local Authority in default of owners nousing defects (under P.H. or Housing Acts) Number of Inspections made for the purpose Action under Statutory Powers during the year :-Number of dwelling-houses which were Inspection of Dwelling-houses during the year :dered fit after service of formal notices : notices were served requiring repairs Authority or their Officers of formal Notices :-Regulations, 1925 for human habitation Housing Act, 1936 (2) (a) 3 (4) (3) 2 V

						1X.										1
18	12	1	1			1		1 1	1	1	1	1		1		238
1	1.1		1				4	*	*	*	*	*				82
16	14	00	6			1		51 6	143	-	1	1				97
1	: 1	6.0	C1			,	,	200	124	10	9	64		1		138
19	27.	77	100						*			o.				83
63	13	9	135				-	20 20	291	13	-	70		-		164
60	60 51	1				-									-	151
1	81	i	1													45
124	107	80	9			1		27 10	264	-	G	20				195
101	88 6		. 1					W 40								75
39	127	70	20			-			*		*					106
57.6	257	20	4		1			917	748	4	16	88		0.)		154
- 1		67						- 0	11	-	4	60				72
6.1	36		1		1	-		14	7 57	10	r	7.		t.		133
16 1	10	6	9			-			-							248 1
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-	69	10				-										300
7.4	56	91	1		1	-										171 3
81	175		-			-		* *		*	,			*		241 1
		1				9 50 :		* 1		*						
B.—Proceedings under Public Health Acts:— (1) Number of dwelling-houses in respect of which notices were served requiring defects to be remedied (9) Number of dwelling-houses in which defects	(a) By owners (b) By Local Authority in default of owners (c)—Proceedings under Sections 11 and 13 of the Housing	Act, 1936:—  (1) Number of dwelling-houses in respect of which Demolition Orders were made	rs he Housing A	(1) Number of separate tenements or underground rooms in respect of which Closing Orders	(2) Number of separate tenements or underground	s wer	4. Housing Act, 1936—Part IV.—Overcrowding:—		(ii) Number of families dwelling therein (iii) Number of persons dwelling therein		(c) (i) Number of cases of overcrowding relieved	during the year during the year (ii) Number of persons concerned in such cases .	(d) Particulars of any cases in which dwelling-houses have again become overcrowded after the Local Authority have taken steps for the abatement of	(e) Any other particulars with respect to over-	crowding conditions upon which the Medical Officer of Health may consider it desirable to	5. Number of new houses erected during the year

\*No statistics available. §Including 2 from notices served in 1949. †Includes 27 houses demolished in pursuance of Clearance Orders.

