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#### **Contributors**

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1966

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1. Dr. Didsbury

2. Mr. Morley Parry

3. Mr. Perry

8.415 C.407 A.405 A.405

NOTTINGHAMSHIRE COUNTY COUNCIL

# 1966 annual report

OF THE COUNTY MEDICAL OFFICER

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

HEALTH DEPARTMENT, COUNTY HALL,

WEST BRIDGFORD, NOTTINGHAM

TELEPHONE: NOTTINGHAM 83366





NOTTINGHAMSHIRE COUNTY COUNCIL

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# CONTENTS

Section I

		Sec	tion i						
Co	unty Health Committee								Page 5
Sta									7
Me	dical Officers of Health of			ricts					11
	roduction	Country	, 2.50					***	12
****		***		***	***				12
		Sect	ion II						
	nmary of Statistics, 1966			***		***	***	•••	16
Sta	ff Examinations								22
		Sect	ion III						
Infe	ectious Diseases	***				***			23
		Secti	ion IV	,					
Sar	nitary Circumstances of the	Area							24
	Sewerage and Sewage Disposal								24
	Ministry Investigation							***	26
	Work of the County Health Ins	spector							26
	Water Supply—Fluoridation				****		***		26
	—Extensions and	Sampli	ng Stat	tistics					27
	Food Hygiene								27
	Air Pollution	***							27
	Refuse Collection								30
	The Offices, Shops & Railway P	remises	Act, I	963	***				32
	Housing—Improvements by Aid	d of Gra	ant						32
	—New House Constru								33
	-Slum Clearance								33
	Milk Sampling by County Office	ers							33
		Sect	ion V						
(a)	Clinics and Treatment Cen	tres				***		***	35
	Nursing Homes		***	***			***	***	39
***	Nurses Agencies								39

## Section VI

# SERVICES PROVIDED UNDER THE

NATIONALI	ILALI	II JL	KTICI	- ACI	3		P	age
Co-ordination and Co-operation							,	uge
(a) With the Hospital Services								39
(b) With the Family Doctor Service	vice							40
**								
Health Centres (Section 21)								40
Care of Mothers and Young Chi	ldren	(Section	22)		***			40
Ante-Natal and Post-Natal Sessio								40
Consultant Services								41
Routine Chest X-Ray Examinatio		pectant	Moth					41
Relaxation Instruction for Expect						***		42
Provision of Maternity Outfits an								42
Local Maternity Liaison Committ								42
Maternity Hospital Accommodati								42
Maternal Deaths								43
D Bib-					***		***	43
Stillbirths and Infant Deaths				***				43
E :1 DI :		***		***	***			46
Child Wolfers Control								47
MAILER Frank Commiss			***					47
Congenital Malformations		***		***		***		48
Children !! At Diel:"					***			
The Dee Cahard Child		***		***			***	50
Desdisante Camiles				***				
Defective Vision and Squint					***		***	50
	chaol (	 Thildro		***	***			50
Routine Hearing Testing of Pre-S							***	51
Day Nurseries								51
Daily Minder Service				***				52
Group Minding Schemes	ndiana				***			52
Scheme for Registered Daily Gua		A 1	040	***		***	•••	53
Nurseries and Child Minders Reg					***			54
Boarded-out Children and Children					***	***	***	54
Health of Children—Break-up of							***	55
Dental Care of Expectant and N School Age								55
School Age								33
Midwifery (Section 23)								57
Administration of Service		***			***			57
Supervision of Midwives	***							57
Eye Discharge in the Newborn								58
Puerperal Pyrexia								58
Deliveries attended by Midwives								58
Administration of Analgesics								58
Infant Oxygen Resuscitators								59
Visits by County Midwives and D	istrict	Nurse/	Midwi					59
Refresher Courses for Midwives								60
Rota System for Midwives								60

									P	age
He	alth Visiting (Section 24)				***			***		60
	Statistics			111	***			***		61
	Refresher Courses		***							61
Ho	me Nursing (Section 25)			***						61
	Administration			***	***					61
	Day and Night Nursing Serv	vice		***			***			62
	Statistics									62
										-
Vac	cination and Immunisati	on (S	ection	26)						62
	A 1 1 1 1 1 1 1	(-								62
	Complications of Vaccinatio									63
	Poliomyelitis Vaccination .		***		***	***		***	***	64
	Vaccination against Smallpor		***	***	***	***		***		65
	Immunisation against Diphtl		***	***		***	***	***	***	66
	Whooping Cough Immunisa			***	***	***	***	***	***	
	Tetanus Immunisation .	tion				***		***	***	67
	retanus immunisation .		***	***	***	***	***	***	***	68
Am	bulance Service (Section 2	27)				***	***			69
			***		***	***		***		69
					***				***	71
			***	***	***	***		***		72
					***					73
	Staff							***	***	74
Pre	vention of Illness, Care a	and A	After-0	Care (	Section	28)		***		75
	Tuberculosis				***		***		***	75
	Deaths				***	***	***		***	75
	Clinic Registers .			***					***	75
	New Cases and Mortali	ty					***			76
	Incidence									76
	Cases not notified before	re De	ath				***			77
	Examination and B.C.G	. Vacc	ination	of Co	ntacts			***		77
	Work of the Tuberculo	sis/H	ealth V	isitors		***		***	***	78
	Protection of Children	agains	st Tube	erculos	is			***		78
	B.C.G. Vaccination of S					nts				78
	Case finding Surveys .									78
	Nottingham and Nott	ingha	mshire	Assoc	iation	for the	Prev	ention	of	12270
	Tuberculosis .		***							79
	Long Stay Immigrants					***		****	***	80
	Sherwood Village Settle	ement		***	***			· · ·		80

										Page
	Other Services									84
	Loan of Nursing Equipr	ment a	and A	Applian	ces					84
	Convalescence									87
	Exfoliative Cervical Cyt	tology				144				89
	Cli I Coming									89
	Harrisol Mary Cons							***	***	89
	Carlanda Visinia					***				90
	D. I W. I.								***	90
	Medical Social Worker Serv			***			****			91
	Survey of Childhood Cancer				***			***		122
										91
			***							91
	Treatment of County C	ases				***		***		91
	Health Education		****		***	***	***		***	91
		20								0/
Do	mestic Help Service (Section	On 27	,			***	****	***	***	96
	Administration		***	***		***		***	***	96
	Establishment of Home Help	os	•••		***	•••	***	***		96
					***					97
	Home Helps working with F	roble	m Fa	amilies			***			97
										98
	Night Attendant Service .									98
	Good Neighbour Service									98
Me	ntal Health Service (Secti	ons 2	Band	151)						99
	Administration									99
	Co-ordination with Regiona	al Ho	spita	i Board	s and	Hospit	tal Ma	nageme	ent	
	Committees									99
	Training of Staff									101
	Voluntary Associations									101
	Work undertaken in the Co	mmur	nity							101
	Prevention of Illness, Ca	are an	d Af	ter-Care	e					101
	Psychiatric Day Centre									103
	Psychiatric Social Clubs									104
	Training Centres									105
	Hostels		•••							106
	Home and Group Teach	ing					***			107
		-			***		***		•••	
	Hospital Care Short-term Care									108
	Short-term Care						•••		***	109
		S	ecti	on VII						
Na	tional Assistance Acts, 19	48 an	d 19	951			***			110
	Incidence of Blindness									110
	Epileptics and Spastics			***	***	***				111
		c	ectio	on VIII						
	Medical Tables	3	ecció	VIII VIII						112
ota	tistical Tables		**			***	***			113
	Vital Statistics			***	***	***	***	1,	II, III,	
	Causes of Death			***			***		***	Vi

#### SECTION I

## HEALTH COMMITTEE

#### Constitution

Members of County Council	 	 40
Municipal Borough Councils (I for each)	 	 4
Urban District Councils (I for each)	 	 10
Rural District Councils (I for each)	 	 6

#### Sub-Committees

Ambulance
Finance and General Purposes
Maternity and Child Welfare
Mental Health
Preventive Health Service
Sherwood Village Settlement Management

## Members of the Committee†

Chairman:

ALDERMAN MRS. B. SHARRARD

Vice-Chairman:

COUNCILLOR R. A. BARTLAM

Ex-officio:

ALDERMAN F. A. SMALL, C.B.E., D.L. ALDERMAN S. FARR, M.C., D.L.

#### Aldermen:

AINLEY, J. HILL, MRS. L.
ELEY, J. W. QUIBELL, MRS. K. A.
GASH, W. W. SHARRARD, MRS. B.

TAYLOR, MRS. C. A. † December, 1966.

#### Councillors:

BARTLAM, R. A. MORRIS, W. J. BEARDSLEY, MRS. M. O'HARA, H. F. PEATFIELD, J. W. BICKERSTAFFE, W. K. BODDY, P. PEEL, G. H. BROOKS, D. A. POUNDER, A. J. BROWN, S. QUIRK, MRS. G. BUXTON, J. RICHARDSON, J. W. SKILLEN, S. J. CORNES, G. FOSTER, W. H. THRAVES, MRS. E. GASCOYNE, W. WALKER, G. R. GREEN, A. WATSON, MRS. P. R. HARRISON, C. WHELDON, F. E. HAYNES, D. F. WHITE, E. WIDDOWSON, J. H. LINCOLN, E. E. YATES, MRS. E. A. MEAD, A. MILLS, R. E.

(Two vacancies)

# Representative Members:

## MUNICIPAL BOROUGH COUNCILS-

East Retford ... ... PATTISON, B. R. Mansfield ... ... MILFORD, MRS. A.

Newark ... ... WHOMSLEY, A. E., B.E.M.

Worksop ... ... SMY, J. H.

## URBAN DISTRICT COUNCILS-

Arnold ... ... ... LEIVERS, T. H.
Beeston & Stapleford ... SCOTHERN, F.
Carlton ... ... CHALLANDS, H. E.

Eastwood ... ... LIMB, C.

Hucknall ... WHITEHOUSE, W. E.

Kirkby-in-Ashfield ... ARNOLD, W.

Mansfield Woodhouse ... STIRLAND, MRS. A. H.

Sutton-in-Ashfield ... HOLLAND, C. E. Warsop ... ... DESFORGES, A.

West Bridgford ... WOODWARD, W. C.

## RURAL DISTRICT COUNCILS—

Basford ... HILL, MRS. J.

Bingham ... GREGORY, MRS. E. M.

East Retford ... ... HORTON, H. E.

Newark ... ... BROWN, DR. R. W. W.

Southwell ... DARRICOTT, D.

Worksop ... SLACK, S.

#### STAFF

The following is a list of personnel employed on the 31st December, 1966:-

County Medical Officer and Principal School Medical Officer—

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

Deputy County Medical Officer-

H. I. LOCKETT, M.B., B.S., D.Obst. R.C.O.G., D.P.H.

Principal Medical Officer—

Vacancy.

Senior Medical Officer for Maternity and Child Welfare—

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

Medical Officer for Mental Health—

E. ROITH, M.B., B.Ch., B.A.O., D.P.M., D.P.H.

#### Clinical Medical Staff

Senior Clinical Medical Officers (for Maternity and Child Welfare and School Health Services)-

D. R. BROOK, M.B., Ch.B.

A. J. JOHNSON, M.B., B.Ch., D.T.M. & H.

Assistant County Medical Officers (for Maternity and Child Welfare and School Health Services)—

Whole-time-

H. M. BIRKS, M.R.C.S., L.R.C.P.

D. S. CRAWFORD, M.B., Ch.B.

J. GOLDSBROUGH, M.B., B.S.

G. V. LEWIS, L.M.S.S.A., L.R.C.P., M.R.C.S.

M. M. REGAN, M.B., B.Ch., B.A.O.

#### Part-time-

S. E. ANNESLEY, M.B., B.Ch.

H. L. BARKER, M.D., B.S., D.P.H.

J. BROCK, M.B., B.S.

G. S. BUCHANAN, M.B., Ch.B.

J. D. CARROLL, M.B., B.Ch., B.A.O., L.M., D.C.H., D.P.H.

D. G. CLITHERO, M.B., Ch.B.

L. M. CRAM, M.B., B.S.

E. B. DRYSDALE, M.B., Ch.B.

J. S. FRASER, M.B., Ch.B.

M. I. GIBSON, M.R.C.S., L.R.C.P.

P. M. GRAY, M.B., B.S., M.R.C.S., L.R.C.P. M. J. GRICE, M.B., Ch.B.

E. J. HALL, M.B., Ch.B.

M. HELMER, M.B., B.S., M.R.C.S., L.R.C.P., D.Obst.R.C.O.G. P. A. HOGARTH, M.B., B.Ch.

P. J. E. HUBBARD, M.R.C.S., L.R.C.P., M.B., B.Ch., D.Obst.R.C.O.G.

M. C. JEFFRIES, M.B., B.S.

S. A. LEWIS, M.B., Ch.B., D.P.H.
J. S. McCRACKEN, M.B., Ch.B., D.Obst.R.C.O.G.

I. S. McROBBIE, M.B., Ch.B., D.Obst.R.C.O.G.

K. M. MORTON, M.B., Ch.B.

D. NIXON, M.B., B.S., M.R.C.S., L.R.C.P., D.Obst.R.C.O.G.

T. M. PHELPS, M.R.C.S., L.R.C.P., M.B., B.S.

H. REEVES, M.B., B.S.

J. WAUGH, M.B., B.S.

M. C. WAY, B.M., B.Ch., D.C.H., D.T.M. & H. S. M. WORRALL, M.B., B.Ch., M.R.C.S., L.R.C.P., D.Obst.R.C.O.G.

J. J. F. WRIGHT, M.B., Ch.B.

- Assistant County Medical Officers and Medical Officers of Health of County Districts—
  - E. BEBBINGTON, M.B., Ch.B., D.P.H.

    Beeston and Stapleford Urban District
  - J. S. DRUMMOND, M.B., B.Ch., D.P.H. Mansfield Borough
  - H. D. B. NORTH, M.Sc., M.B., Ch.B., D.P.H. Newark Borough, Newark Rural and Southwell Rural Districts
  - W. R. PERRY, M.B., B.S., D.P.H.
    Eastwood Urban and Basford Rural Districts
  - H. D. H. ROBINSON, M.R.C.S., L.R.C.P., D.P.H.
    Arnold and Carlton Urban Districts
  - G. TATTERSALL, M.A., M.B., B.Ch., B.A.O., D.P.H.

    East Retford and Worksop Boroughs and East Retford and Worksop Rural Districts
  - S. M. YOUNG, L.R.C.P., L.R.C.S., L.R.F.P. & S., D.P.H. Hucknall, Kirkby-in-Ashfield and Sutton-in-Ashfield Urban Districts
  - VACANCY Mansfield Woodhouse and Warsop Urban Districts
    VACANCY West Bridgford Urban and Bingham Rural Districts
- Assistant County Medical Officers and Deputy Medical Officers of Health of County Districts—
  - M. GIBBS, M.R.C.S., L.R.C.P., D.P.H. Mansfield Borough
  - T. F. HAYNES, M.B., Ch.B., D.P.H., D.C.H.
    Hucknall, Kirkby-in-Ashfield and Sutton-in-Ashfield Urban
    Districts
  - VACANCY East Retford and Worksop Boroughs and East Retford and Worksop Rural Districts
- Medical Superintendent, Sherwood Village Settlement-

D. DAVIES, M.D., M.R.C.P.

Employed by the Regional Hospital Board as Physician Superintendent, Ransom Hospital

### Children's Psychiatrists—

T. A. RATCLIFFE, M.A., M.B., B.Ch., M.R.C.S., L.R.C.P., D.P.M., D.C.H. E. ARKLE, M.D., D.P.M.

Drs. Ratcliffe and Arkle are employed by the Regional Hospital Board

#### **Dental Staff**

County Dental Officer and Principal School Dental Officer—
D. E. MASON, O.B.E., L.D.S.

#### Orthodontist-

J. I. McCRACKEN, L.D.S.

```
Senior Dental Officers—
       M. ARMITAGE, L.D.S.
                                                E. McLAREN-HOPE, L.D.S.
      S. MAKIN, L.D.S.
Dental Officers-
     Whole-time-
      D. A. ALDERSON, B.D.S.
                                               S. MELLOR, L.D.S.
J. PRESTON, B.D.S.
      J. H. GODDARD, L.D.S.
J. A. MARRIOTT, B.D.S.
                                               D. TINKLER, B.D.S.
     Part-time-
                                             M. J. McKENNY, B.D.S.
F. G. O'REILLY, B.D.S.
G. PEARSON, L.D.S.
       S. I. ANDREWS, L.D.S., B.D.S.
       M. CHADWIN, B.D.S.
D. H. FRANCIS, L.D.S.
                                           ... J. E. PRESTON, L.D.S.
       M. J. S. HUNTER, L.D.S. ...
       D. P. JAMES, L.D.S.
                                                J. M. SOMERVILLE, L.D.S.
       Vacancies equal to the time of approximately four Dental Officers.
       All Dental Officers are employed by the Education Committee but undertake
       Maternity and Child Welfare as well as School Health Service work.
                           Nursing and Allied Staff
                         Superintendent Health Visitors—
             A. COLLISHAW, S.R.N., S.C.M., H.V.Cert.
C. J. McHENRY, S.R.N., S.C.M., H.V.Cert. with I Vacancy.
       Health Visitors ... ... 79—including 9 part-time (Vacancies 12)
Tuberculosis Visitors ... 5—including 1 part-time.
School Nurses ... ... 15—including 2 part-time.
Geriatric Nurses ... 2
       Assistant Clinic Nurses ... 17—including 16 part-time (3 Vacancies)
                                            ... 3-with I Vacancy.
       Dental Auxiliaries ...
                                   ... 17—including 2 part-time (Vacancies 8)
       Dental Surgery Assistants
                                       Midwifery
                   Senior Non-Medical Supervisor of Midwives—
                              M. ALLCOCK, S.R.N., S.C.M.
                 Assistant Non-Medical Supervisor of Midwives-
                             M. H. BENSON, S.R.N., S.C.M.
                                            ... 82-including 13 part-time (Vacancies 4)
       County Midwives
                                    District Nursing
                               County Superintendent-
                         E. E. JAMIESON, S.R.N., S.C.M., Q.N.
                          Assistant County Superintendent—
                         M. M. COTTAM, S.R.N., S.C.M., Q.N.
       District Nurses/District Nurse Midwives ... ... 138
              (including 4 part-time) (Vacancies 9)
                                     Day Nurseries
                                        Matrons
                                      ... M. D. ASHER, S.R.N.
... A. BRAWN, N.N.E.B.
... M. BREWSTER, S.R.C.N.
       Beeston
       Carlton
       Mansfield (Bull Farm)
                                 ... M. BECKETT, N.S.D.N.D.
       West Bridgford ...
                                  Home Help Service
                                      Organiser-
                                      M. W. COTTEE
```

... ... 10

District Organisers

#### Mental Health Staff

Senior Mental Health Officer— W. A. FROST

District Mental Health Officers ... 8

Welfare Assistants ... ... 3—with 3 Vacancies
Case Workers ... ... I—with 2 Vacancies
Supervisors, Training Centres ... 5

Wardens, Hostels ... ... 2

Warden, Day Centre ... ... I
Female Home Teachers for Mentally
Subnormal Persons ... ... I—with 1 Vacancy.

# Staff for Other Special Services

County Ambulance Officer— F. E. JOLLEY

County Health Inspector— G. H. EARNSHAW

Medical Social Workers— Four Vacancies

Health Education Officer— N. S. WASS

Assistant Health Education Officers— Two

Sherwood Industries (Village Settlement) General Manager—
W. H. TIPPING
Milk Samplers—
Two

#### Central Office Staff

Lay Administrative Assistant and Chief Clerk— E. GILLOTT

> Senior Administrative Assistant— R. J. MARLOWE

> > Senior Clerks of Sections—

Accounts— H. R. ADAMS

Staff-

J. M. ANSON

School Health Service— E. LEWIS

Preventive Health Services— R. GOSPEL

Maternity and Child Welfare Services—
A. LEIVERS

Ambulance Service— Vacancy

Mental Health Service— T. HOBBS

# Names and Addresses of the Medical Officers of Health of the Twenty County Districts As at 31st December, 1966

	MS at 31St	December, 1900	
District	Medical Officer of Health	Address	Telephone No.
District		ROUGHS	rerephone ivo.
EAST DETECADO			
EAST RETFORD	G. Tattersall	Municipal Offices, Chancery Lane, Retford.	Retford 2561
MANSFIELD	J. S. Drummond	Public Health Department, Gilcroft Street, Mansfield.	Mansfield 24696
NEWARK	H. D. B. North	Public Health Department, The Friary, Appleton Gate,	
WORKSOP	G. Tattersall	Newark. Health Department, Park House	
		Park Street, Worksop.	Worksop 2405
	URBAN	N DISTRICTS	
ARNOLD	H. D. H. Robinson	Health Department, Arnot Hill House, Arnold.	Nottingham 26-4114
BEESTON & STAPLEFORD	E. Bebbington	Public Health Department,	
	11 5 11 5 1:	The Willows, Dovecote Lane, Beeston.	Nottingham 25-4891
CARLTON	H. D. H. Robinson	Public Health Department, Council House, Burton Road, Carlton.	Nottingham 24-8231
EASTWOOD	W. R. Perry	Council Offices, Church Street,	Langley Mill 3022
HUCKNALL	S. M. Young	Council Offices, Hucknall.	Hucknall 2242
ASHFIELD	S. M. Young	Council Offices, Urban Road, East Kirkby.	Kirkby-in- Ashfield 2371
MANSFIELD WOODHOUSE	Vacancy	Public Health Department, Manor House, Mansfield	M 6 11 7751
SUTTON-IN-	S. M. Young	Woodhouse. Public Health Department,	Mansfield 7751
ASHFIELD		Forest Street, Sutton-in-Ashfield.	Ashfield 2181
WARSOP	Vacancy	Health Department,	144 2427
WEST BRIDGFORD	Vacancy	Town Hall, Warsop. Health Department,	Warsop 2637 Nottingham
		70 Bridgford Road, West Bridgfo	ord. 89651
	RURAL	DISTRICTS	
BASFORD	W. R. Perry	Health Department,	
		Rock House, Stockhill Lane, Basford, Nottingham.	lottingham 76677
BINGHAM EAST RETFORD	Vacancy G. Tattersall	Council Offices, Bingham. Municipal Offices,	Bingham 391
NEWARK	H. D. B. North	Chancery Lane, Retford. Public Health Department,	Retford 2561
		The Friary, Appleton Gate, Newark.	Newark 3255
SOUTHWELL	H. D. B. North	Public Health Department, The Friary, Appleton Gate,	
WORKSOP	G. Tattersall	Newark. Council Offices, Highfield House	
		Carlton Road, Worksop.	Worksop 2123

# NOTTINGHAMSHIRE COUNTY COUNCIL

HEALTH DEPARTMENT,

COUNTY HALL,

WEST BRIDGFORD,

NOTTINGHAM.

August, 1967.

TO THE CHAIRMAN AND MEMBERS OF THE NOTTINGHAMSHIRE COUNTY COUNCIL.

LADIES AND GENTLEMEN,

I have the honour to present my Annual Report for the year 1966.

The vital statistics are included as usual in the forefront of the Report. They are an eloquent expression of the work undertaken during the year and the gradual changes in emphasis that are being seen in the Services provided by the Health Department.

The birthrate decreased again as compared with last year, from 18·12 to 17·42, the actual number of births being a reduction of 167 from the previous year. The increase in the population during the year in Nottinghamshire is therefore 9,680. The County rates are favourable as compared with the National rates for England and Wales.

The only trend I would again mention is the increase in the numbers of deaths from cancer and from heart disease in the County figures.

I refer with sadness to the sudden death on 24th March, 1966, of Dr. M. B. McCann, L.R.C.P., L.R.C.S., D.P.H., Medical Officer of Health, Worksop Borough and Worksop Rural District, and Assistant County Medical Officer.

I would, on behalf of my colleagues, record the great debt we owed to him for his zealous care of the environmental health of his District.

One of the effects of the resignation of the senior members of the medical staff, Dr. J. D. Carroll, Dr. C. Cross and Dr. T. S. McKean, coupled with such other factors as the increased population of the County, led to a review with the District Councils of medical arrangements within the County. As a result of this it has been possible to join some of the areas, as far as Medical Officer of Health cover is concerned, giving a reasonably large population of approximately 100,000 people under the care of one Medical Officer of Health with his Deputy.

The Local Authorities involved and the County Council agreed that if the Deputy appointed did not possess the Diploma of Public Health he would be seconded to a course in order to enable this qualification to be secured.

This policy permits the development of a possible career structure in the area. It must be admitted that the two officers appointed as Deputy Medical Officers were already on the County staff and therefore we are gaining nothing in staff recruitment.

All advertisements for these posts have failed to obtain outside applications by satisfactory candidates who have the requisite amount of potential ability. I have managed to run the Health Department Services fairly adequately by the employment of part-timers, e.g. those who are otherwise engaged in general practice. These part-time Medical Officers are invaluable but, whilst useful supplements, they do not provide our need for whole-time Medical Officers dedicated to the practice of Public Health.

In 1953 Dr. Jeremiah, my predecessor, introduced a grade of Senior Clinical Medical Officer. This grade brought a number of applicants who were qualified by experience and training to augment our existing Service at that time. However, the position is now such that our medical needs are again not met. The Department's need is to recruit doctors whose leaning is to the clinical side of preventive medicine and who see an opportunity of obtaining remuneration and conditions of service comparable with those in the hospital field.

True, some will find their future in medical administration but it seems wrong that the only method of advancement in Local Authority Public Health is in this administrative field. There is need for officers whose direct interest is in the equally important work of applying new medical knowledge to the day-to-day activities which affect medicosocial health.

During the year much of the preparatory work in connection with the use of the County Council's computer for the Ambulance Service statistics was carried out, and eventually this became possible as from 1st April, 1967.

I am grateful to Mr. W. H. Lake, County Treasurer, and his staff for their ready help and co-operation which made this possible. As more computer time becomes available it is hoped to extend its use to other Health Department Services.

One of our chief concerns is, of course, the welfare of young children and over the past year the Department has been greatly exercised in the facilities available for the care of children under five.

It is agreed that children under two are most suitably brought up living in their own homes closely associated with their mothers. Children between three and five however need to extend their environment beyond their homes and their mothers and to obtain the stimulus of

meeting other children and other adults. I consider it most unfortunate that the development of the County's Day Nurseries, which of course were established for an entirely different reason, namely the war-time employment of women, was largely allowed to lapse.

One asset of the Day Nursery is the opportunity it gives for those children who are mentally or physically handicapped at an early age to gain the benefit and advantage of association with normal children. Very often children of problem families are also admitted to a Day Nursery at the suggestion of the Children's Officer. I am indebted to her for her interest and also to the County Treasurer for his sympathetic help with the difficult financial circumstances often involved.

Our existing Day Nurseries are admirable examples of co-ordinated and friendly care for young children. One effect of the loss of a number of County Day Nurseries has led to the registration of an increasing number of establishments under the Nurseries and Child Minders (Regulation) Act of 1948 which, in a period of five years, has increased ten-fold in extent.

These are visited as regularly as possible and there is some supervision, but whilst I am sure that most of these "Play Groups" are adequately administered I cannot say that the health and welfare of children is always maintained as well as it might be. Over the last two years the County have found it necessary to withdraw some registrations, and have now authorised the employment of a whole-time Supervisor.

An important development was established under the aegis of the Chairman of the Health Committee in Selston which is fully described in my Report. This is basically the provision of "accommodation with supervisory staff provided in a Local Authority Maternity and Child Welfare Centre for minding children under the age of five while mothers take part in activities on the premises in which the creche is held or are attending to other duties". If it had not been for the financial restrictions I imagine that this scheme would have developed more rapidly throughout the County. Indeed, they are already envisaged for a number of the Health Centres which are to be built in the coming few years.

During the year a Psychiatric Day Centre at Sutton-in-Ashfield was opened by C. W. Loughlin, Esq., M.P., Parliamentary Secretary to the Ministry of Health, and a full account of this is included in the Report. It is hoped that this very useful system of practical co-operation with the Hospital Service will bring great benefit to the neighbourhood, especially when it is available in association with the Hostel which is to be completed at Mansfield at the beginning of 1968. It may also be that some of the men attending the Day Centre may find that there is a suitable opportunity for sheltered employment at the Sherwood Village Settlement.

This Day Centre is a useful development of co-operation with the Hospital Consultants for prevention and rehabilitation of mental illness.

At the invitation of County Alderman F. A. Small, D. L., Chairman of the County Council, the Nottinghamshire Nursing Federation was invited to come for a meeting at County Hall in recognition of the great work they have done over the years.

Mr. Lloyd Hockin, Senior Clerk of the Maternity and Child Welfare Section, retired on 16th May, 1966, after completing fifty years in the Local Government Service, thirty-six of which were spent in this Department.

I would like to place on record my appreciation of Mr. Hockin's valuable service and to wish him a long and happy retirement.

My Report has been drafted by Dr. Lockett, Deputy County Medical Officer, after discussion with all members of the staff, medical and lay, involved with the compilation of our Health Service Report.

I thank Dr. Lockett and all the members of the Health Department who have done so much over the year to achieve development of the Health Department Services. I think tribute should be paid to them, including particularly Mr. E. Gillott, Lay Administrative Officer, for their tolerance and loyalty during the difficult year in which their future well-being as a result of the pay freeze was under some doubt.

Lastly, I personally thank the other Chief Officers of the Council from whom I have had considerable help over the year.

I respectfully give my thanks to the members of the Council, and in particular to those on the Health Committee for their tolerant and friendly support throughout the year.

I am.

Ladies and Gentlemen,
Your obedient Servant,
A. R. MARGETTS.

# SECTION II

# SUMMARY OF STATISTICS, 1966

Area in acres (land and inland water, Census 1961)	521,646
Population Census, 1961	591,089
Number of Households, Census 1961	189,679
Average number of persons per household, Census 1961	3.1
Population estimated, June 1966	644,000
Rateable Value	£22,223,759
Estimated product of a penny rate	£91,260

# VITAL STATISTICS, 1966

	County	England & Wales
lothers and Infants		
Live Births	11,565	849,000
Live Births per 1,000 population: Crude Corrected	17.96	17.7
Illegitimate Live Births per cent of total Live Births	6.07	7.9
Still Births	184	13,200
Still Births rate per 1,000 Live and Still Births	15.66	15.3
Total Live and Still Births	11,749	862,200
Infant Deaths	210	16,069
Infant Mortality Rate per 1,000 Live Births	18-16	18.9
Infant Mortality Rate per 1,000 Live Births— Legitimate	17.95	Not available
Infant Mortality Rate per 1,000 Live Births-		Not
Illegitimate	21.37	available
Neo-Natal Mortality Rate per 1,000 Live Births	11.67	12.9
Early Neo-Natal Mortality Rate per 1,000 Live Births	10-20	11-1
Peri-Natal Mortality Rate (Still Births and Deaths under one week combined per 1,000		
total Live and Still Births)	25.70	26.3
Maternal Deaths—including abortion	2	223
Maternal Mortality Rate per 1,000 Live and Still Births	0.17	0.26

					County	England & Wales
Deaths (all ages	s)				County	X YVales
Number—al	causes			 	6,513	563,612
Death Rate:	Crude			 	10.117	
	Correc	ted	***	 	11.53	11.7
Tuberculosis						
Number of	Deaths-	_				
All Forms			***	 	20	2,353
Pulmonary				 	14	2,090
Non-Pulmon	ary			 	6	263
Death Rate-	_					
All Forms				 	0.03	0.05
Pulmonary				 	0.02	0.04
Non-Pulm	onary			 	0.01	0.01
Cancer						
Number of D	Deaths			 	1,185	108,142
Death Rate				 	1.84	2.25

# Population

The estimated population of 644,000 shows an increase of 9,680 on the previous year. The biggest increase was in Bingham R.D.—1,920. The natural increase (excess of births over deaths) was 5,052.

# **County District Statistics**

These are given in Tables I, II, III, and IV at the end of the Report.

#### Live Births

The following Table gives details for the year:-

	Number of Regis	tered Live Births	
	Legitimate	Illegitimate	Total
Male	 5,611	383	5,994
Female	 5,252	319	5,571
Total	 10,863	702	11,565

# Illegitimate Births

Year	No. of Illegitimate Births registered	Rate per 1,000 of the population	Rate per 1,000 Live Births
1956	329	0.60	36.9
957	346	0.61	36.9
1958	372	0.65	38.5
1959	421	0.73	42.3
1960	373	0.64	36.2
1961	469	0.79	44.2
1962	488	0.81	43.2
1963	549	0.90	47.7
1964	603	0.97	50.8
1965	658	1.04	56-1
966	702	1.09	60.7

# Principal Causes of Death

Heart Disease					 2,072
Cancer, Malignant Disease					 1,185
Vascular Lesions of Nervous	System				 910
Diseases of Respiratory Syste	m (exc	luding	Tuber	culosis)	 926
Accidents					 231

# Infant Deaths

	Deaths of Infants	under one year of age	
	Legitimate	Illegitimate	Total
Male	 110	9	119
Female	 85	6	91
Total	 195	15	210

# Distribution of Still Births and of Infant Deaths

	Still Births	Under One Month	Between 1-12 Months	Total
URBAN DISTRICTS				
Mansfield (Borough) Worksop (Borough) Newark (Borough) East Retford (Borough) Arnold Beeston & Stapleford Carlton Eastwood Hucknall Kirkby-in-Ashfield Mansfield Woodhouse Sutton-in-Ashfield Warsop West Bridgford	23 15 6 5 7 18 8 5 8 8 14	11 12 6 1 5 13 9 - 5 7 12 3	8 7 3 1 1 9 5 4 2 4 3 4	42 34 15 7 13 40 22 5 17 15 19 29 8
Totals for Urban Districts	130	92	52	274
RURAL DISTRICTS				
Basford Bingham Worksop East Retford Newark Southwell	14 14 6 3 5 12	9 9 3 3 4 15	4 4 4 - 2 9	27 27 13 6 11 36
Totals for Rural Districts	54	43	23	120
Whole County	184	135	75	394

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

	Nu	D 1 000			
Cause of Death	Urban Districts	Rural Districts	Whole County	- Rate per 1,000 Live Births	
Meningococcal Infections	1	_	1	0.09	
Circulatory Disease	2	_	2	0.18	
Pneumonia	28	16	44	3.80	
Bronchitis	4	16	7	0.61	
Gastritis, Enteritis and					
Diarrhoea	1	3 9	4	0.34	
Congenital Malformations	39	9	48	4-15	
Other Defined and III-defined				100,000	
Diseases	63	33	96	8-30	
Accidents (not Vehicles)	6	2	8	0.69	
Totals	144	66	210	18-16	

# 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 factors which compensate 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, for the aggregates of Urban Districts and Rural Districts, and for the County as a whole.

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			
DISTRICT	Crude Rate per 1,000 of the Population	Area Compara- bility Factor	Corrected Rate per 1,000 of the Population	Crude Rate per I,000 of the Population	Area Compara- bility Factor	Corrected Rate per 1,000 of the Population	
URBAN DISTRICTS— Mansfield (Borough) Worksop (Borough) Newark (Borough) East Retford (Borough) Beeston & Stapleford Carlton Eastwood Hucknall Kirkby-in-Ashfield Mansfield Woodhouse Sutton-in-Ashfield Warsop West Bridgford	16·7 18·5 16·3 16·0 17·7 18·2 18·9 21·1 17·9 18·6 20·3 16·8 21·4 14·9	1·02 0·98 1·01 0·99 0·94 0·94 1·00 0·97 1·01 0·96 0·91 1·02 1·00 0·97	17·1 18·1 16·5 15·8 16·7 17·1 18·9 20·5 18·1 17·8 18·5 17·1 21·4 14·5	11-7 10-6 12-4 13-1 8-0 8-4 9-4 10-9 10-0 10-6 9-0 12-1 8-3 13-3	0.99 1.19 0.98 0.95 1.21 1.28 1.17 1.29 1.25 1.23 1.41 1.19 1.36 0.81	11.6 12.6 12.1 12.4 9.6 10.8 11.0 14.1 12.5 13.0 12.6 14.4 11.3 10.8	
Aggregate of Urban Districts	17-8	0-98	17-5	10-5	1-13	11-8	
RURAL DISTRICTS— Basford Bingham Worksop East Retford Newark Southwell	17·0 21·2 18·8 16·7 18·4 18·3	0.97 0.87 0.95 1.02 0.96 0.99	16·5 18·4 17·9 17·1 17·7	9·6 9·3 8·9 8·4 10·1 9·6	1·24 1·00 1·22 1·08 1·18	9-3 10-9 9-1 11-9 11-3	
Aggregate of Rural Districts	18-3	0-96	17-5	9-4	1.16	10-9	
Whole County	18-0	0.97	17-4	10-1	1.14	11-5	
England and Wales	17-7	_	-	11.7	_	_	

#### STAFF EXAMINATIONS

During the course of the year, 3,659 individual cases were dealt with. Of this number, 35 withdrew their applications and 35 were in respect of requests from other Authorities.

A summary of the remaining 3,589  Dealt with by submission of a State				l Histo	ry
Requiring Medical Examination of Requiring Medical and Chest X-ra Requiring Chest X-ray Examination No Medical or Chest X-ray Exam	nly ay Exan on only	ninatio	n	846 139 950 759	2,694
Entrants to the Teaching Profession Teachers	n and T	Frainir	ng of		
Entrants to Teaching Profession Entrants to Training Colleges				57 440	497
Re-examination of Existing Staff					
Fire Service Ambulance Service School Crossing Patrols Requests from Employing Depart	  ments			121 124 95 48	388
Medical Examination of Printing T	rade /	Appren	ntices		10
					3,589

Of the 2,694 Statements of Medical History submitted, from the information given it was decided that a medical examination was unnecessary in respect of 1,709 candidates (759—no examination, 950—Chest X-ray examination only).

To dispense with the possibility of having to undergo a physical medical examination, candidates for employment in the County Council's Service are required to complete a comprehensive medical history form. However, in view of the nature of the employment it is necessary, in some cases, for a medical examination to be a part of the Conditions of Service (e.g. firemen, ambulance personnel, school crossing patrols, etc.). During the course of the year, 120 medical examinations of this type were carried out.

Of the 2,574 remaining medical history forms received it was possible to dispense with the medical examination for 1,709 candidates (approximately two-thirds) and only in 865 instances were medical examinations considered to be necessary.

Dispensing with medical examinations in respect of 1,709 candidates meant a considerable saving of Medical Officer time.

#### SECTION III

#### INFECTIOUS DISEASES

The total numbers of cases of infectious diseases, other than tuberculosis, notified amongst County residents during 1966 were as follows:—

Disease							
Scarlet Fever							342
Whooping Cough							220
Measles							5,451
Acute Poliomyelitis							1
Acute Encephalitis	(post-i	nfectio	ous)				5
Meningococcal infe	ction						6
Dysentery							540
Puerperal Pyrexia							2
Ophthalmia Neona	torum		***				4
Acute Pneumonia							94
Food Poisoning							78
Erysipelas							13
Paratyphoid Fever							
Malaria (believed co		ted ab	road)				
Salmonella infection							!
Gastro-enteritis							

In cases where a copy of an infectious disease notification submitted in accordance with statutory requirements was passed to the County Council within 12-48 hours of receipt by a County District Council, the fee paid to the doctor concerned by the County District Council was reimbursed by the County Council.

Health Visitors were provided with details to facilitate preventive action.

#### SECTION IV

## SANITARY CIRCUMSTANCES OF THE AREA

# Sewerage and Sewage Disposal

Reports received from County District Councils indicate understandably a somewhat lower rate of progress during this year of restriction on capital expenditure.

## New Works and Improvements

#### MANSFIELD M.B.

Following the completion of Stage I of the reconstruction of the Bath Lane disposal works during 1965, the second and final stage commenced in June and made good progress.

#### WORKSOP M.B.

Provision of stormwater overflow and storm relief sewers was made in the Kilton Hill area.

#### NEWARK M.B.

Work on Stage II of reconstruction scheme made progress comprising filters, sludge digestion and ancillary works.

#### RETFORD M.B.

The whole of the sewage from the Borough now flows to the new works at Hallcroft.

Work was in progress on a heated sludge digestion unit.

#### BEESTON & STAPLEFORD U.D.

The extension to the Beeston sewage disposal works was completed. Sewers were extended to serve new development.

#### CARLTON U.D.

Foul and surface water sewers were extended during the year.

#### EASTWOOD U.D.

The sewage disposal works at Newthorpe jointly operated with the Basford Rural District Council is to be replaced by a new disposal works. Further building development is restricted meanwhile. A Ministry investigation took place in September and the two authorities are now in process of tendering for the new works at an approximate cost of £1.6 million.

#### HUCKNALL U.D.

The whole of the sewage flows to the Nottingham Corporation sewers.

#### KIRKBY-IN-ASHFIELD U.D.

Surface water sewers to serve the areas of Nuncargate and Kingsway were completed.

The flood relief tank at Annesley referred to last year was completed. Sewers to deal with foul and surface water drainage were provided for new development.

#### MANSFIELD WOODHOUSE U.D.

Extensions to sewers were made where required. The Forest Town storm water relief scheme was completed.

#### SUTTON-IN-ASHFIELD U.D.

Foul and surface water sewers were extended as necessary. Work on the Unwin Road works continued and the works came into use for part of the flow during the autumn.

#### WARSOP U.D.

The scheme for the improvement and extension of the existing sewage disposal works, referred to last year, continued to make good progress. The new works commenced to operate during the autumn, producing a final effluent of a high standard.

#### BASFORD R.D.

Improvements to the Burton Joyce pumping station were completed and await the completion of the Southwell R.D.C. scheme for the drainage of the Lowdham area.

The scheme for the sewerage of Woodborough was almost complete at the end of the year.

Subsidence necessitated the relaying of sewers in the Underwood area and the work was completed and operating by the end of the year.

#### NEWSTEAD

Part of the parish is included in a joint scheme with the Southwell R.D.C. Approval has been given and work is expected to commence in mid 1967.

#### EAST LEAKE AREA DRAINAGE SCHEME

The scheme involving the extension of the existing sewage disposal works at East Leake is due to commence during 1967.

#### GOTHAM

Work was about to commence on the existing disposal works at Gotham to provide new storm water tanks and modifications to the plant.

#### BINGHAM R.D.

Extensions to the disposal works at Bingham and Keyworth were in process at the end of the year.

The R.A.F. Station at Newton was connected to the Bingham works.

#### WORKSOP R.D.

Considerable extensions of foul and surface water sewers were made during the year to serve new development in the parishes of Carlton-in-Lindrick, Harworth and Styrrup.

#### SOUTHWELL R.D.

Work on the Lowdham Area scheme continued.

Work commenced on Stage I of the Blidworth Area Joint Sewerage Scheme.

The sewerage scheme for the parish of Oxton was completed.

# Ministry of Housing and Local Government Investigations

One scheme was the subject of investigation at which the Department was represented, namely:—

Basford Rural District Council—29th September, 1966

Newthorpe/Eastwood and District Sewerage and Sewage Disposal Scheme

Engineering Inspector: Mr. T. W. G. Hucker

Chemical Inspector: Mr. T. Waldmeyer

# Work of the County Health Inspector

The following is a summary of the principal work undertaken by the County Health Inspector during the year.

Investigations concerning water supplies Investigation of complaints concerning housing circum-	12
stances and other matters received from Health Visitors, County residents and other sources	58
Investigations into environmental circumstances generally and including interviews and collaboration with Officers	
of the County District Councils	220

# Fluoridation of water supplies

There has been no progress under this heading during the year, as the Central Nottinghamshire Water Board which administers the water supply for a major portion of the County, which they have agreed to fluoridate, have not yet been able to prepare plans for this to be brought into effect.

Water Supply
Extensions and Sampling Statistics

		extensions		SAMPLING	
		Length involved yards	Bacterio- logical	Chemical	Total
Mansfield M.B		1,404	12	12	24
Newark M.B		924	20	_	20
Retford M.B		_	122	9	131
Worksop M.B		_	58	5	63
Arnold U.D		_	-	_	
Beeston & Stapleford U.D.		_	1	1	2
Carlton U.D		1,061	_	-	_
Eastwood U.D		_	-	_	_
Hucknall U.D		_	-	-	-
Kirkby-in-Ashfield U.D.		4,700	52	12	64
Mansfield Woodhouse U.D.		3,799	13	-	13
Sutton-in-Ashfield U.D.		3,862	49	1	50
Warsop U.D		628	47	1	48
West Bridgford U.D		_	5	_	5
Basford R.D		_	_	_	_
Bingham R.D		_	4	-	4
Newark R.D		1,458	28	_	28
Retford R.D	171	-	54	1	55
Southwell R.D		9,307	322	32	354
Worksop R.D		2,674	64	6	70
Totals		29,817	851	80	931

# Food Hygiene

Work under this heading continued on similar lines to previous years with the emphasis on regular routine visits to all food establishments, including mobile shops.

In this way contraventions were usually remedied by informal action though there were a few instances when legal proceedings were necessary resulting in fines being imposed in each case.

The policy of education and training proceeded in various forms, including lectures to new entrants to the food trade, and talks to women's organisations and other groups.

#### Air Pollution

EAST RETFORD R.D.

The survey conducted by the C.E.G.B. around their three Generating Stations in the Rural District continues to provide information to the authority on air conditions in the area.

#### MANSFIELD M.B.

The Borough of Mansfield No. 3 Smoke Control Order became fully operative again on 1st October after being suspended since 1964.

Application was also made during the year for confirmation of the No. 4 Smoke Control Order 1963 and following a Public Local Inquiry in October the Minister confirmed the Order.

Observations were made on chimneys of industrial plant—Notices relating to smoke nuisances were complied with.

The Local Survey into air pollution continued throughout the year.

#### WORKSOP M.B.

No programme for smoke control areas was put into operation during the year. A local survey into air pollution continued and revealed considerable pollution largely due to domestic smoke.

Nuisance from a burning colliery spoil bank was reduced considerably by covering the entire bank with non-combustible material.

Industrial smoke is reported to have been greatly reduced in recent years.

#### NEWARK M.B.

Observations were made of industrial chimneys on complaint. No programme of smoke control areas has been formulated.

#### EAST RETFORD M.B.

Routine observations of industrial chimneys were made during the year.

The local survey continued during the year.

No programme of smoke control areas has been adopted.

#### ARNOLD U.D.

The No. I Smoke Control Area was operative from July.

#### BEESTON AND STAPLEFORD U.D.

The local survey of air pollution continued throughout the year using six instruments for the measurement of solid matter, smoke and SO<sub>2</sub>.

The Urban District Council went further ahead with their fifteen year programme when the ninth smoke control area comprising 1478 premises received Ministerial approval to be operative from 1st October, 1967.

#### CARLTON U.D.

Four monitoring stations provided a continuous local survey of air pollution in the Urban District.

The Carlton No. 2(a) Smoke Control Order was confirmed in July to be operative from 1st July, 1967. Carlton No. 2 Smoke Control Order awaited confirmation.

#### EASTWOOD U.D.

The local survey has been discontinued. The Council have no smoke control area programme.

#### HUCKNALL U.D.

A survey has been made of an area comprising a total of 422 premises to form the first Smoke Control Area—the operative date for the Order to be December, 1967.

#### MANSFIELD WOODHOUSE U.D.

The Urban District Council adopted a progressive Smoke Control programme comprising ten smoke control areas covering the whole of the Urban District.

Three initial areas are programmed for completion by 1972.

The proposed No. I Smoke Control Area has already been surveyed.

#### SUTTON-IN-ASHFIELD U.D.

Air pollution is monitored by instruments installed at the Public Health Department.

A comprehensive programme of Smoke Control Areas was approved by the Urban District Council.

Four Smoke Control Areas are already in operation. A further Area confirmed during the year is due to operate from June, 1967 and two Areas await approval by the Minister.

#### WARSOP U.D.

No programme of Smoke Control Areas has been formulated. Regular observations of industrial chimneys are made.

#### WEST BRIDGFORD U.D.

The local survey into air pollution continued during the year. Statistics covering the past three years indicate a steady decrease in air pollution. The average figures for winter months show the effect of domestic smoke on the atmosphere.

The Urban District Council have not yet formulated a programme of Smoke Control Areas.

#### WORKSOP R.D.

A nuisance arising from the deposit of grit from the chimneys of Harworth Colliery was alleviated when the National Coal Board after representations by the Rural District Council ceased to generate electricity at the Colliery.

#### SOUTHWELL R.D.

The local survey into air pollution continued with instruments operating in eight parishes.

#### Refuse Collection

#### EAST RETFORD R.D.

Collection and disposal continued as before. Tip maintenance was simplified by the use of a tractor bulldozer.

Collection commenced of litter from all trunk and classified roads in the district.

#### MANSFIELD M.B.

Collection and disposal continued without change. A work study is now taking place.

#### WORKSOP M.B.

A new 35 cu. yd. diesel freighter replaced two old side loading vehicles. The bulk container system was extended to serve schools and blocks of flats.

#### NEWARK M.B.

No alterations were made during the year. A weekly service was maintained.

#### EAST RETFORD M.B.

Compression vehicles are now in use—disposal is to disused gravel workings.

#### ARNOLD U.D.

A weekly refuse collection throughout the district was maintained.

#### BEESTON AND STAPLEFORD U.D.

No material variations during the year.

#### CARLTON U.D.

No alterations were made during the year. Collection is by two 16/24 cu. yd. and five 10 cu. yd. vehicles.

### EASTWOOD U.D.

No important change was made. Collection is by two vehicles. A trial scheme using paper sacks continued. A mechanical baling press proved to be an asset. Controlled tipping continued at the new tipping site without complaint.

#### HUCKNALL U.D.

Controlled tipping continued on the present site. Three vehicles were in service. The use of bulk containers for markets and schools is under consideration.

#### MANSFIELD WOODHOUSE U.D.

A weekly collection service was maintained. Three vehicles were in operation—two fitted with compression mechanism.

Disposal was by controlled tipping on Council owned land which will be reinstated in time and put to use possibly as a recreation area.

#### SUTTON-IN-ASHFIELD U.D.

A regular weekly collection continued to operate. The replacement of older vehicles by 20 cu. yd. continuous loaders has been agreed to. Salvage of waste paper and similar waste amounted to approximately 500 tons in the year.

The Council met the demand for cesspool emptying by the purchase of a new tanker with a disposal point arranged at the sewage disposal works. Disposal on land is now no longer necessary.

A scheme for the joint use of incineration plant is under consideration.

## WARSOP U.D.

A weekly collection service was in operation. Three large capacity vehicles were in use.

Controlled tipping continued at Oakfield Lane where capacity is adequate for some years.

#### WEST BRIDGFORD U.D.

Disposal continued by controlled tipping. The use of bulk containers was extended.

#### BASFORD R.D.

Two automatic loading dustless type collectors were in use. All bins available from the Council and supplied to Council properties have rubber lids to counter nuisance from noise.

The problem of tipping space referred to last year still remains.

#### BINGHAM R.D.

The whole district is now served by a weekly collection. A new depot adjacent to the tipping area replaced the depot at the Council Offices.

#### WORKSOP R.D.

A weekly collection service was in operation. Four vehicles were in use.

#### SOUTHWELL R.D.

A new depot established at Ollerton providing facilities for personnel. Work on a new depot at Southwell was in progress. The depot at Sutton-on-Trent was improved by the provision of facilities for personnel.

Tipping space was extended but two further tipping areas are being sought.

#### NEWARK R.D.

The paper sack system operated throughout the whole district.

### The Offices, Shops and Railway Premises Act, 1963

No. of premises registere	d at 3	Blst D	ecembe	er,	
1966					 4,128
No. of premises found in al	II resp	ects sa	tisfacto	ry	 1,156
No. of premises failing to	comp	ly with	the A	ct	
in some respect					 537
No. of persons employed					 24,253
No. of inspections					 2,188
No. of accidents reported					 101

There was one report of legal proceedings being taken for non-compliance with the requirements of the Act resulting in fines and costs on eight charges.

Accidents do not appear to have been due to faults in the premises but rather to carelessness on the part of the persons concerned.

### Housing-Improvements by aid of Grant

The number of houses improved with the aid of grants by the District Councils during 1966 were as follows:—

District		By Standard Grants	By Discretionary Grants	Total Number Improved
Mansfield M.B		 110	_	110
Worksop M.B		 48	8	56
Newark M.B		 30	8	38
East Retford M.B.		 34	2	36
Arnold U.D		 23	_	23
Beeston and Stapleford		 109	8	117
Carlton U.D		 54	_	54
Eastwood U.D		 30	_	30
Hucknall U.D		 60	2	62
Kirkby-in-Ashfield U.D.		 48	_	48
Mansfield Woodhouse U	J.D.	 35	1	36
Sutton-in-Ashfield U.D.		 79	1	80
Warsop U.D		 78	_	78
144 6 . 1 6 . 1 1 1 6		 12	33	45
Basford R.D		 98	13	111
Bingham R.D		 33	20	53
East Retford R.D.		 60	24	84
Worksop R.D		 3	77-7	3
Newark R.D		 30	17	47
Southwell R.D		 173	33	206
Tot	als	 1,147	170	1,317

### Housing-New House Construction

			L.A. General	Old People's Housing	Private Enterprise	Total
Mansfield M.B.			87	_	240	327
Newark M.B.			331	_	40	371
East Retford M.B.			26	_	58	84
Worksop M.B.			303	_	85	388
Arnold U.D.			35	_	219	254
Beeston & Staplefo	ord U.D	).	52	_	413	465
Carlton U.D			32	_	282	314
Eastwood U.D.	***		_	_	28	28
Hucknall U.D.			149	_	160	309
Kirkby-in-Ashfield			53	_	128	181
Mansfield Woodho	use U.	D.	_	_	160	160
Sutton-in-Ashfield	U.D.		53	_	165	218
Warsop U.D.			26	_	7	33
West Bridgford U.	D.	***	_	12	94	106
Basford R.D.			136	_	626	762
Bingham R.D.			26	_	591	617
Newark R.D.			63	_	84	147
Retford R.D			70	_	104	174
Southwell R.D.			220	_	*470	690
Worksop R.D.			165	-	157	322
	Totals		1,827	12	4,111	5,950

<sup>\*</sup> Includes 28 erected by Housing Associations.

### Housing-Slum Clearance

664 houses were demolished during the year under the District Councils' slum clearance programmes.

### Slaughterhouses

There are 53 slaughterhouses in use throughout the County—Four of the local authorities have no slaughterhouses in their areas.

### Milk Sampling

All milk supplied to schools was pasteurised and supplied in individual 1/3 pint bottles and was sampled at regular intervals on delivery, or shortly after delivery, to the schools.

Of the 154 samples taken all were reported satisfactory under the phosphatase test. Four samples failed to satisfy the methylene blue test and were investigated. Immediate repeat samples in these cases were all satisfactory.

## Milk Sampling by County Officers

the supply of pasteurised milk to all Schools and the samples obtained from this source were subjected to the Phosphatase test, and Methylene Blue Test. The following is a summary of the work carried out under this heading during the year. It has been possible to continue

Z		Positive	80	a vacori	sted	
AMINATIO	Brucellosis				*Not tested	
SICAL EX		Negative	173	Slue Test	nform- ndard	
RESULT OF BIOLOGICAL EXAMINATION	Tuberculosis	Positive	-	Methylene Blue Test	**Not conform- ing to standard	4
RESULT	Tube	Negative	267		Conforming to standard	150
	not	lested	8		**Not conforming to standard	
1	Cows	Involved	15,173	Phosphatase Test	**Not of	
7	Farms	Involved	727	Phos	Conforming to standard	154
	Samples	Submitted	448			154
	Collected	by	Milk Samplers			- do
	Type of	sample	Mixed Herds			School Milks

\*Samples "not tested" are those which in accordance with the provisions of the Milk (Special Designations) (Pasteurised and Sterilised Milk) Regulations were not submitted to the Methylene Blue Test as the atmospheric shade temperature exceeded 65°F.

<sup>\*\*</sup>A sample which does not conform to the required standard is subjected to investigation.

### SECTION V

### (a) 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.

SITUATIO OF CLINIC OR		RE	Maternity and Child Welfare	Ante- and Post- Natal	School Clinic	Dental
East Retford M.B. Chancery Lane Ordsall			 8 4	2	8 —	20
Mansfield M.B. St John's Street Abbott Road Hermitage Avenue Pleasley Pleasley Hill Redcliffe House St. Lawrence			 8 8 8 4 —		 4 4  4 4	
Newark M.B. The Friary Hawtonville			 8 8	4	4 4	40
Worksop M.B. Carlton Road Manton Watson Road			 12 6	=	<u>-</u> 8	<u>-</u>
Arnold U.D. Arnot Hill Front Street Plains Road			 12 4 4	Ξ	8 _	40 —
Beeston & Stapleford Dovecote Lane Bramcote Inham Nook Stapleford Toton	U.D.		 8 4 8 8 4	4 * 2	8 - - 8 -	80 — 40 —

<sup>\*</sup> Facilities available for ante- and post-natal work to be undertaken at the sessions of the Child Welfare Centre attended by a Medical Officer.

SITUATI OF CLINIC OR		RE		Maternity and Child Welfare	Ante- and Post- Natal	School Clinic	Dental
Carlton U.D.							
Park House				12	4	4	52†
Parkdale				4		-	32
Porchester	***	***		0	2		
Standhill Road				4	_	-	_
Eastwood U.D.							
Nottingham Road				8	4	8	26
Hucknall U.D.							
Watnall Road		***		8	4	8	40
Ruffs Estate	***		***	4	-	-	-
Kirkby-in-Ashfield U	.D.						
Urban Road	•••			8	_	4	_
Mansfield Woodhous	e U.D						
Park Road		***		10	_	4	-
Forest Town	***		***	6	-	4	-
Sutton-in-Ashfield U	D.						
New Street				8	4	8	80
Huthwaite	***	***		4	_	8	_
Skegby				2	_	_	_
Stanton Hill	***			4	-	_	-
Warsop U.D.							
Town Hall	***	***		10	4	4	-
Warsop Vale		***		2	_	_	-
Welbeck C.V.	***		***	2	-		-
West Bridgford U.D							
Millicent Road	***	***		4	_	4	80
Alford Road					2	-	-
All Hallows	***		***		-	_	_
Boundary Road				4	_	_	-
Melton Road				4	4	-	-

<sup>†</sup> Includes 12 evening sessions.

SITUATIO OF CLINIC OR C		RE		Maternity and Child Welfare	Ante- and Post- Natal	School Clinic	Dental
Basford R.D.							
Awsworth				2	_	_	_
Bestwood				2	*		_
Brinsley				4	*	_	_
Bunny	***			2	_	_	_
Burton Joyce				4		_	_
Calverton				8	*	4	_
East Leake				4	2	_	
Gotham				2	*	_	_
Jacksdale				4	_	_	_
Kimberley				4	4	4	_
Lambley			***	2	*	-	-
Newstead				4	2	_	_
Nuthall				4	*	-	_
Papplewick				2	16	_	_
Ruddington			***	4	*	-	_
Selston				4	2	_	_
Sutton Bonington				2	*	-	_
Trowell	***			4	*		_
Willoughby			***	2	*	_	_
Woodborough		***		2	*	-	-
Bingham R.D.						-	
Bingham		***		4	2 *	2	_
Cotgrave		***		2	*	-	_
Cropwell Bishop			***	2	1	_	_
East Bridgford				2			-
Hickling	***			2			_
Keyworth				8	_	-	-
Langar		***	***	2	-	-	_
Newton		***		2	_	-	_
Radcliffe-on-Trent		***		4	-		_
Tollerton		4.00		2	_		_

<sup>\*</sup> Facilities available for ante- and post-natal work to be undertaken at the sessions of the Child Welfare Centre attended by a Medical Officer.

SITUATIO OF CLINIC OR C		RE		Maternity and Child Welfare	Ante- and Post- Natal	School Clinic	Dental
East Retford R.D.							
Dunham-on-Trent				2	*		
Elkesley				2			
Gringley-on-the-Hi				2	*	_	_
Mattersey				2	*	_	_
Misterton				4	*	_	_
Ranskill				2	*	_	_
South Leverton				2	*	_	_
Tuxford				4	*	-	_
Newark R.D.							
Balderton				8	*		
Coddington				2	_	_	_
Collingham				2	*	_	_
Farndon				2	*	_	_
Kilvington				Ĩ	*	_	_
Syerston				2	*	_	_
Southwell R.D.							
Diff. I				4		4	
BULL	***	***	***	4	*	7	
Cli	***	***		4			
F 1 1		***		4	*		_
Larch Farm	***	***	***	2			
L II			***	4			
North Muskham	***			2	*		
Ollerton				6	*	4	20
D 1		***		8	*	7	
0 1 11		***		4	*		
Sutton-on-Trent		***		2	*		=
Worksop R.D.							
Blyth				2	*	_	
Carlton-in-Lindrick		***		6	-	-	_
Harworth				8	4	8	4
Langold				2	*	4	_
Welbeck				2	*	-	-
The County Clinic Clarendon Street, N	Nottir	ngham		-	_	_	44†

<sup>\*</sup> Facilities available for ante- and post-natal work to be undertaken at the sessions of the Child Welfare Centre attended by a Medical Officer. † Includes Evening Sessions.

### (b) NURSING HOMES

During the year the registrations of the Hillside Nursing Home, Newark, and the Cheshire Home, West Bridgford, were cancelled as it was considered that, having regard to the type of patients admitted, these Homes might more appropriately be registered by the County Welfare Committee under the provisions of the National Assistance Act 1948.

One new Nursing Home (2 Holme Road, West Bridgford) was registered for five medical or chronic cases, and increased accommodation was approved at the Ebor and Newstead Nursing Homes.

At the end of the year the six registered Nursing Homes provided a total of 102 beds, i.e. 43 surgical or medical and 59 medical or chronic.

### (c) NURSING AGENCIES

An application was received from the Castle Private Nursing Agency, Newark, for a Licence to operate in accordance with Section 8 of the Nurses' Agency Act 1957. Following investigation a Licence was issued on 4th May.

The Trent Nursing Agency ceased to operate in September 1966.

### SECTION VI

## SERVICES PROVIDED UNDER THE NATIONAL HEALTH SERVICE ACT 1946

## CO-ORDINATION AND CO-OPERATION OF THE HEALTH DEPARTMENT SERVICES WITH THE HOSPITAL AND FAMILY DOCTOR SERVICES

### (a) With the Hospital Services

There is extremely close co-operation with the Hospital Services, particularly in the Mental Health Service, where the principles of joint use of Social Worker staffs are well established. The success of the King's Mill Psychiatric Day Centre, opened during the year, has been due in no small measure to the arrangements made with the Regional Hospital Board whereby Dr. Parkin and Dr. Moss, Consultant Psychiatrists at the nearby Ashfield Psychiatric Unit act as Psychiatric Advisers.

In after care arrangements for persons discharged from Hospital, continuity has been developed with the Hospital Social Workers particularly in the Nottingham area and with the Sheffield National Centre for Radiotherapy in relation to patients resident in the north of the County.

Geriatric Nurses one of whom is a trained Health Visitor have been working for several years with the Consultant Geriatricians at the Mansfield Victoria Hospital and Worksop Kilton Hospital and the Nottingham City Hospital, providing care and after care services for the aged either referred for admission to or due to be discharged from these Hospitals.

Health Visitors have also been attached part-time to the Diabetic Units at Mansfield General Hospital and Worksop Victoria Hospital to undertake visits to diabetic patients in their own homes.

### (b) With the Family Doctor Services

Rather than formally establishing attachments of Domiciliary Nursing staffs to individual practices or Doctors, the policy has been followed of encouraging a close but quite informal association of Health Visitors, Midwives and District Nurses wherever the desire for this has been expressed by the Doctors and Health Visitors and where staffing has permitted.

### **HEALTH CENTRES (Section 21)**

General Practitioners in many parts of the County have expressed their interest in participating in a Health Centre project in conjunction with the Local Health Authority, and it is indicative of the general outlook on such liaison that in a number of instances this is not necessarily precipitated by inadequate surgery premises.

The first Health Centre, at Mansfield, is in course of construction and likely to be brought into operation early in 1968, followed closely by smaller Centres in the southern rural part of the County at Cotgrave and East Leake.

Two further schemes are included in the 1967/68 Building Programme at Keyworth and Southwell, and a further seven projects are envisaged in the following three years.

### CARE OF MOTHERS AND YOUNG CHILDREN

(Section 22)

### Ante-Natal and Post-Natal Sessions

Facilities for the medical examination of expectant mothers and post-natal cases are available at sixty-one Clinics throughout the County. The tendency of expectant mothers to seek ante-natal care from the general medical practitioners continued to increase but at eighteen Clinics the attendances were sufficiently large to warrant separate sessions, although the attendances at Kirkby-in-Ashfield and Ruddington fell to such an extent as to render the continuance of separate ante-natal sessions at these Clinics unnecessary. At the end of the year this work was being undertaken at forty-three Child Welfare Sessions attended by a Medical Officer. In addition to the weekly ante-natal sessions held by midwives at the Newark and Warsop Clinics, midwives in the Carlton area commenced weekly ante-natal sessions at that Clinic on 5th October, 1966.

					Ante-Natal	Post-Natal
Percentage of cases atten pared with the total nu	ding C mber c	linic se of birth:	ssions of the	com- area	19-89	2.60
Attendances—						
First attendances du	ring 19	66			2,319	303
Total attendances		***			8,819	396
Medical Consultations					7,218	389
Consultant Services						
Number of expectant in consultation with the Obstetricians at Hospi	e Gen	eral Pi	ractitio	ners	to Consu	rs in ltant 105
Number of cases referred of abnormalities of pre-						nosis 3

### Chest X-ray Examinations of Expectant Mothers

The number of expectant mothers referred from Ante-Natal Clinics for chest X-ray examinations continued to decline following the acceptance by the Sheffield Regional Hospital Board of the Professional Advisory Committees' recommendations as follows:—

- (i) No chest X-ray examination should be undertaken where the mother is known to have had BCG vaccination or a chest X-ray within the previous two years
- (ii) All recent immigrants should be X-rayed routinely in pregnancy between the fourth and sixth months of pregnancy
- (iii) The practice of routine chest X-rays should be continued in certain areas where the incidence of positive findings are known to be high.

Dr. A. E. Beynon, Medical Director of the Radiography Unit, Postern Street, Nottingham, has kindly supplied me with the following statistics in respect of patients referred from Ante-Natal Clinics during 1966:—

Age	Number X-rayed
under 15	1
15/19	38
20/24	104
25/34	113
35/44	20
Total	276

Fifteen abnormalities were revealed, three of which were healed tuberculosis lesions.

### Relaxation Instruction for Expectant Mothers

Number of Centres at which Courses are provided	 31
Number of expectant mothers who attended	 2,808
Total attendances made	 16,363

This instruction is available to all expectant mothers irrespective of whether or not they are in attendance at a County Ante-Natal Clinic, provided that in the latter case they are referred by their own doctor.

### Provision of Sterilised Maternity Outfits and Pads

Number of outfits issued on certi					F F1.4
Midwife					5,514
Number of packets of pads issued	for cases	discha	arged	from	
hospital shortly after delivery					224

### Local Maternity Liaison Committees

Local Maternity Liaison Committees, established on the recommendation of the Cranbrook Committee, continued to operate in conjunction with the Nottingham No. 1, Nottingham No. 2, Worksop & Retford, Mansfield and Newark Hospital Management Committees.

Meetings between representatives of the Local Authority Hospital staffs and General Practitioners take place at varying intervals and all matters relating to the Maternity Services are discussed with a view to improving obstetric care and neo-natal paediatric care by closer liaison between the three bodies concerned. I am represented by Dr. Jean Forbes, Medical officer for Maternity and Child Welfare and Miss M. Allcock, Senior Non-Medical Supervisor of Midwives.

### Maternity Hospital Accommodation

Applications received for adm	ission	on soci	ological	gro	ounds:-	_
From general medical practition	oners				1,435	
From ante-natal clinics					154	
						1,589
Cases referred to hospital					1,341	
Applications withdrawn					146	
Applications which could not	be sup	ported			102	
						1,589
Cases referred to hospitals on ascertained at ante-natal cli	accou nics	nt of abn	ormalit	ies		107

### Maternal Deaths

Number of maternal deaths which occurred during the year ... 2

Location — Hucknall Urban District

Bingham Rural District

### Premature Births

The table on page 44 gives details of the premature births which occurred during the year, classified under birthweights in accordance with the international standard used by the World Health Organisation.

The services of a paediatrician are available if required for babies born at home, as is also any additional nursing attention which may be necessary, together with the loan of equipment, including special cots.

### Stillbirths and Infant Deaths

During the year 1966 there were 135 deaths during the first twenty-eight days of life and 184 stillbirths. There were 118 deaths within seven days of birth, the perinatal death rate for the administrative County being 25.70.

Nursed entirely at birth at birth days days births birth days and including 4 lb. 6 oz. up to and including 5 lb. 8 oz. (2.25) to 2.500 gms.)   Over 4 lb. 15 oz. up to and including 5 lb. 8 oz. (2.25) to 2.500 gms.)   Over 4 lb. 15 oz. up to and including 5 lb. 8 oz. (2.25) to 2.500 gms.)   Over 4 lb. 15 oz. up to and including 5 lb. 8 oz. (2.25) to 2.500 gms.)   Over 4 lb. 15 oz. up to and including 5 lb. 8 oz. (2.25) to 2.500 gms.)   Over 4 lb. 15 oz. up to and including 5 lb. 8 oz. (2.25) to 2.500 gms.)   Over 4 lb. 15 oz. up to and including 5 lb. 8 oz. (2.25) to 2.500 gms.)   Over 4 lb. 15 oz. up to and including 5 lb. 8 oz. (2.25) to 2.500 gms.)   Over 4 lb. 15 oz. up to and including 5 lb. 8 oz. (2.25) to 2.500 gms.)   Over 4 lb. 15 oz. up to and including 5 lb. 8 oz. (2.25) to 2.500 gms.)   Over 4 lb. 15 oz. up to and including 5 lb. 8 oz. (2.25) to 2.500 gms.)   Over 4 lb. 15 oz. up to and including 5 lb. 8 oz. (2.25) to 2.500 gms.)   Over 4 lb. 15 oz. up to and including 5 lb. 8 oz. (2.25) to 2.500 gms.)   Over 4 lb. 15 oz. up to and including 5 lb. 8 oz. (2.25) to 2.500 gms.)   Over 4 lb. 15 oz. up to and including 5 lb. 8 oz. (2.25) to 2.500 gms.)   Over 4 lb. 15 oz. up to and including 5 lb. 8 oz. (2.25) to 2.500 gms.)   Over 4 lb. 15 oz. up to and including 5 lb. 8 oz. (2.25) to 2.500 gms.)   Over 4 lb. 15 oz. up to and including 5 lb. 8 oz. (2.25) to 2.500 gms.)   Over 4 lb. 15 oz. up to and including 5 lb. 8 oz. (2.25) to 2.500 gms.)   Over 4 lb. 15 oz. up to and including 5 lb. 8 oz. (2.25) to 2.500 gms.)   Over 4 lb. 15 oz. up to and including 5 lb. 8 oz. (2.25) to 2.500 gms.)   Over 4 lb. 15 oz. up to and including 5 lb. 8 oz. (2.25) to 2.500 gms.)   Over 4 lb. 15 oz. up to and including 5 lb. 8 oz. (2.25) to 2.500 gms.)   Over 4 lb. 15 oz. up to and including 5 lb. 8 oz. (2.25) to 2.500 gms.)   Over 4 lb. 15 oz. up to and including 5 lb. 8 oz. (2.25) to 2.500 gms.)   Over 4 lb. 15 oz. up to and including 1 lb. 8 oz. (2.25) to 2.500 gms.)   Over 4 lb. 15 oz. up to and including 1 lb. 8 oz.						PREMA	PREMATURE LIVE BIRTHS	LIVE BIR	(THS	No.					
Died				1			B	orn at h	ome or	in Nursi	ng Hom	63		рвем	ATIIRE
Within   In   In	W. C. L. C.		Born	ноѕріта		Home	lursed er	ursing a	Home	Trar	or befor	to Hosp e 28th d	oital lay	STILL-	STILL-BIRTHS
Total of T	Weight at birth			Died				Died				Died		Bo	Born
24 2 6 - 8 1 1 1 - 2 - 1 2 1 - 1 - 1 1		Total births (1)	Within 24 hours of birth (2)	In 1 and under 7 days (3)	In 7 and under 28 days (4)	Total births (5)	Within 24 hours of birth (6)	In I and under 7 days	In 7 and under 28 days (8)	Total births (9)	Within 24 hours of birth (10)	In I and under 7 days (11)	In 7 and under 28 days (12)	In hos- pital (13)	At home or in a nursing home (14)
24 2 6 - 8 1 1 1 - 2 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	2 lb. 3 oz. or less (1,000 gms. or less)	61	01	7	-	ı	1	1	1	4	2	-	1	25	1
108   18   1   1   8   1     10   2   2     149   6     1   10   1     94     9   -   1   1   1   1   1   1   1   1   1			2	9	1	ω	-	-	1	2		-	1	28	7
H49 6 - 1 10 1 - 9 - 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			8	-	-	ω	-	1	1	01	2	2	T	31	8
287 6 2 - 94 9 2 ALS 587 42 16 3 120 3 1 - 34 6 5 1	Over 4 lb. 6 oz. up to and including 4 lb. 15 oz. (2,001 to 2,250 gms.)	149	9	1	-	01	-	21	L	6	1	-	-	16	-
587 42 16 3 120 3 1 — 34 6 5 1			9	7	L	94	-1	1	1	6	2	-1	1	4	2
	TOTALS	587	42	91	8	120	3	-	1	34	9	5	-	4-	80

## CAUSES OF NEO-NATAL DEATHS

Home Hospital
1 12
2 8
e
E
-
-
2
4 33

Four deaths accompanied twin deliveries.

One death accompanied triplets.

### Family Planning Service

Following the issue of Circular 5/66, this Service has been considerably developed in conjunction with two voluntary organisations functioning in the County and the following report was submitted to the Ministry of Health in December 1966 on the steps taken to extend the arrangements:—

"Apart from the Council's own Service which had been in operation on a limited scale since 1934, the County has been served for many years by two voluntary organisations — The Family Planning Association and the Nottingham Women's Welfare Centre which is affiliated to the Association. The Family Planning Association has been concerned with the north of the County and, with the cooperation of the County Council, has established Clinic sessions at Mansfield, Newark and Worksop in the Council's Clinic premises. The Nottingham Women's Welfare Centre had functioned from premises in Nottingham although providing services for County residents also, but in 1965 their services were extended to the surrounding urban districts by the provision of accommodation in the Council's Clinic premises. This involved five districts—Arnold, Beeston, Carlton, Hucknall and West Bridgford.

Before the issue of the Ministry's Circular a nominal charge of 5/per session was being made by the County Council, but this was
immediately rescinded in the light of the Circular.

As a result of discussions with the District Organisers of the two Organisations, agreement has been reached that the Nottingham Women's Welfare Centre should be concerned with development in the urban areas around Nottingham together with Basford Rural district south of the river Trent, and Bingham Rural district; the Family Planning Association to be concerned with development in the remainder of the County.

A further Clinic has been established by the Family Planning Association at Sutton-in-Ashfield, and they have the extension of the service to Retford Borough and other areas currently under consideration. The Nottingham Women's Welfare Centre have established a Clinic at Eastwood. In each case County Council Clinic premises are being, or will be, used.

There has been consultation with the Local Medical Committee in the development of the Service, and details of the Clinics have been circulated to all General Practitioners as well as to the Council's Health Visiting, Midwifery and Mental Health staffs and Child Care and Probation Service Officers.

Arrangements have been made with both Organisations for payment by the Council of the cost of advice and treatment provided for women likely to suffer detriment to their health as a result of further pregnancy. A Domiciliary Family Planning scheme has been established in the Mansfield area, in which visits are paid by a Medical Officer to women who either do not attend or do not maintain their attendances at Clinics, many of whom already have large families and whose problems constantly involve many branches of the Social Services. This domiciliary service will be extended to other parts of the County as appropriate.

Apart from the circulation of details of Clinic arrangements etc., the question of publicity for the Family Planning Service is currently under consideration and it is anticipated that the Council's Health Education Service will co-operate closely with both voluntary organisations in arranging talks and discussions with groups and by other means."

### Child Welfare Centres

Whereas each of the last few years has seen the opening of new purpose-built Clinics, no such Clinics were opened or were in the process of erection during 1966, this "blank" period foreshadowing the erection of all-purpose built Health Centres the first of which is due to be opened at Mansfield in 1968.

Due to extensive structural adaptations or to the premises not being suitable for the purpose in three areas of the County (Brinsley, Hucknall and Pleasley Hill) the subsidiary Child Welfare Centres were transferred to other hired premises. A new subsidiary Centre was opened at Carlton (Valley Road) on 14th April, 1966, and, owing to the impending demolition of the premises, the Centre at Arnold (Front Street) was discontinued on 19th December, 1966.

At the end of the year 101 Centres were in operation, at which 455 sessions per month were held. Details of the attendances and medical consultations at these sessions were as follows:—

	endances du hildren borr		Total attendances	Medical
1966	1965	1961-64	during year	Consultations
8.874	8,605	11,444	177,799	31,871

### Welfare Foods Service

The following Table shows the extent of issues of all products during the twelve months ended 31st December, 1966, and for the three previous years.

Year	National Dried Milk Tins	Cod Liver Oil Bottles	A. & D. Tablets Packets	Orange Juice Bottles
1966	39,498	11,227	13,367	162,123
1965	45,099	11,900	14,703	150,107
1964	54,075	11,946	16,102	133,665
1963	62,892	12,225	15,297	124,027

Division of the 1966 figures into Quarterly issues gives some indication of the seasonal consumption:—

Quarter ended	National Dried Milk Tins		A. & D. Tablets Packets	Orange Juice Bottles
26th March, 1966	10,232	3,187	3,694	36,500
25th June, 1966	10,063	2,511	3,125	42,473
24th September, 1966	9,524	2,188	3,007	42,237
31st December, 1966	9,679	3,341	3,541	40,913

The number of Distribution Centres at the end of the year was 132, of which 102 were County Council Centres and 30 Voluntary Centres. Distribution arrangements continued throughout the year under review upon the same lines as previously—with an additional Centre being opened at Carlton (Valley Road).

Voluntary workers have continued to participate in the Service, both in the running of the purely Voluntary distribution Centres and also assisting with the work at other Centres. I am indebted to them for their extremely valuable help.

### Congenital Malformations

The arrangements for information regarding congenital malformations apparent at birth to be included on the notifications of birth was continued and during the year 223 returns were submitted to the Ministry of Health in respect of Nottinghamshire children. The conditions found were classified as follows:—

Central Nervous	Syste	m			Syndactyly	5
Anencephalus		***		27	Dislocation of hip	ī
Encephalocele		***	***	2	Talipes	39
Hydrocephalus				14	Other defects of shoulder girdle,	-
Microcephalus				1	upper arm and forearm	2
Spina bifida				31	Other defects of hand	1
Other defects of	spinal	cord		1	Other defects of pelvic girdle and	
					lower limb	3
Eye, Ear						
Anophthalmos	1800			- 1		
Defects of ear ca					Other Skeletal	
of hearing				1	Defects of skull and face	3
Other defects of	ear	***	***	1	Chondrodystrophy	1
o the delects of	Car				Other generalised defects of skele-	
					ton (including arachnodactyly)	4
Alimentary Syst					( 6	
Cleft lip				12		
Cleft palate			***	9	Other Systems	
Tracheo-oesopha					Branchial Cleft Cyst	1
oesophageal at			nosis	1	Defects of face and neck	- 1
Rectal and anal a				5	Defects of muscles	1
Other defects of	alimen	tary sy	stem	1	Vascular defects of skin, subcutan-	
					eous tissues, and mucuous mem-	
Heart and great	vesse	ls			branes (including lymphatic	
Congenital Heart				4	defects)	9
Uro-genital syste					Other defects of skin (including	
Renal Agenesis				1	ichthyosis congenita)	1
				7	Defects of hair, nails, teeth	1
Hypospadias, epis				3	Exomphalos, omphalocele	2
Other defects of				3		
Defects of female				2		
female pseudo-	nermap	onrodi	tism)	3	Other malformations	
					Multiple malformations	
Limbs					Mongolism	2
Reduction deform					Other Chromosomal Syndromes	- 1
hemimelia, pho				1	Other Specific syndromes	1
Polydactyly	***			13	Congenital Malformation N.O.S.	1

### Children "At Risk"

In addition to the register of congenital abnormalities, since 1962 a register has been maintained of children considered to be "At Risk" owing to illness of the mother during pregnancy, difficulties arising during delivery, asphyxia of the infant, prematurity, etc. The Health Visitor records on a special record card the child's progress so far as the condition placing the child "At Risk" is concerned, and each case is reviewed at the age of 18–24 months in order to eliminate from the register any child who is regarded as no longer "At Risk".

The names of 2,033 children were on the "At Risk" register at the end of 1966.

### The Pre-School Child

The scheme for the ascertainment and follow-up of defects in children under school age was continued, children requiring treatment being referred to the National Health Services with the knowledge of the general practitioner in those cases where the arrangements could not be made directly by this Department under the Authority's established schemes. Included in the latter category were the following:—

Enlarged Tonsils and/or Adenoids Operations performed	112
Orthopaedic Conditions Pre-School children referred to Ortho-	
paedic Clinics	33

### Paediatric Service

Paediatric Clinics are held at the County Clinic, Clarendon Street, Nottingham, and at the Mansfield and Worksop School Clinics. The Clinics are attended by Dr. A. C. Blandy, Dr. M. Eastwood and Dr. J. S. Fitzsimmons, Consultant Paediatricians, by arrangement with the Sheffield Regional Hospital Board. Dr. Blandy also deals with cases by special arrangement at the Newark Hospital.

Pre-School children referred by Assistant County Medical Officers to these Clinics during 1966 were as follows:—

	Mansfield	Nottingham	Worksop	Total
New Cases	 7	23	9	39
Total Attendances	 31	101	21	153

### Defective Vision and Squint

Children found by Medical Officers at Child Welfare Sessions to have visual defects are referred to Ophthalmic Consultants who undertake sessions at fifteen Clinics throughout the County under arrangements made with the Regional Hospital Board. During the year 975 pre-school children were examined by the Consultants. In 254 cases spectacles were prescribed and were obtained through the normal channels of the National Health Service.

### Routine Hearing Testing of Pre-School Children

This work is based at the Hearing Clinic, Clarendon Street, Nottingham, where Mr. A. G. Attewell and Mr. P. B. Johnstone, Teachers of the Deaf, investigate the hearing of children referred by Health Visitors, Medical Officers, General Practitioners and Consultant Otologists. The work undertaken during the year so far as pre-school children were concerned may be summarised as follows:—

Old cases retested						35
New cases referred					***	94
Cases discharged						88
Cases under observa	ation at	the er	nd of th	e year		41

Five mothers and their five young children attended a residential course at the Ollerton Residential Training Centre from 4th to 9th April, 1966. Talks were given by Medical Officers, Welfare Officers, representatives of the National Deaf Children's Society and the Teachers of the Deaf, and the course was considered most successful, especially enabling the mothers to understand and cope more adequately with their children's handicap.

### Day Nurseries

The average daily attendances at the four Day Nurseries again showed a slight, but welcome, increase, i.e.:—

Nursery		1	Number of	Under	Daily Atten 2-5	
			Places	2 years	years	Total
Beeston			50	8	24	32
Bull Farm			40	8	13	21
Carlton			26	6	18	24
West Bridgfo	rd		25	5	13	18

Steps have been taken to ensure that, except when affected by minor epidemics of measles, etc. the average daily attendance at each Nursery is maintained as near as possible to the approved number of places.

### Nursery Nurses Training

The arrangements with the Chesterfield Authority for Nursery Students at the Violet Markham School, Chesterfield, to undertake their practical training at the Bull Farm Day Nursery, Mansfield, were discontinued in August, 1966, in order that additional training places could be made available for Nottinghamshire students. However, in view of financial restrictions it was decided not to increase the number of Nursery Students during 1966/67, and the normal establishment of six Nursery Students was recruited for training in accordance with the arrangements with the Nottingham Education Committee. Under these arrangements the girls receive their theoretical instruction at the Nursery Nurse Training Centre, Forest Road, Nottingham, and their practical training at the Beeston, Bull Farm or Carlton Day Nurseries.

### Daily Minder Service

This scheme is for the purpose of ensuring the proper care of children in cases coming within certain categories, i.e.,

- (a) Mother obliged to work—widowed, unmarried, separated or prolonged illness of husband.
- (b) Father caring for children—Mother dead, not living at home or not able to look after child by reason of prolonged illness.
- (c) Any other special case approved by the County Medical Officer, subject to report to Committee.

Suitable women who are approved to undertake the duties of a Daily Minder are paid at the rate of 8s. 0d. per day (4s. 0d. per half day); the parent being required to contribute a minimum of 3s. 0d. per day (1s. 6d. per half day), or such greater sum as may be assessed, and the County Council paying the balance at monthly intervals.

The following table shows the cases dealt with during the year:-

	٢	linders	Max. No. of children to be received	No. of children for whom financial assistance is given
Cases on register 1.1.66		12	19	_
New Cases authorised		4	5	3
Cases discontinued		_	_	_
Cases on Register 31.12.66		16	24	3

### **Group Minding Schemes**

As an extension of the above Scheme and having regard to the general demand for child-caring facilities, consideration was given to the possibility of developing Group Minding Schemes in parts of the County where there are no Day Nurseries. It was suggested that the County Council might provide premises and the minimum of trained staff (one trained Nursery Nurse per Group) who would be assisted by volunteers and/or the mothers of the children.

It was envisaged that a Group Minding Scheme provided by the Authority might be of particular benefit not only to the children coming within the categories for which the Daily Minder Scheme was established but also for the following type of cases:—

- (I) Handicapped or deprived children who would not otherwise mix with many children of their own age.
- (2) Children of problem families.
- (3) Mothers who found difficulty in having children cared for during their enforced absence for any reason.

An enquiry to all the Health Visitors indicated some need for a service of this nature, and after full consideration it was agreed to conduct a trial scheme at one of the places where there was an apparent social need and where suitable premises could be made available.

Selston was selected for this purpose where, after slight adjustment of the programme, free use of the Clinic, an old schoolroom substantially adapted some years ago, was made available each morning. A qualified Nursery Nurse was appointed to take charge of the Group with the assistance of the mothers as Minders on a rota basis. Furniture and equipment was provided and a Committee comprising mothers, the appointed Nursery Nurse, the Health Visitor under the Chairmanship of the Chairman of the County Health Committee was formed to deal with associated voluntary activities. To comply with Ministry standards accommodation was provided for a maximum of 17 children at any one time but in order to cater for approximately 60 children staggered attendances were arranged. A charge of 2s. 0d. per session for each child was agreed, this charge being waived for the mothers on the days they undertook rota duty and also in necessitous cases. The Selston Play Group commenced activities on 19th September, 1966, and after the first few weeks it was reported that mothers welcomed the project with terrific enthusiasm.

Unfortunately, financial restrictions and lack of suitable accommodation have so far prevented the establishment of similar directly-run Groups in other areas of the County, but facilities for Group Minding Schemes are being provided in the proposed new Health Centres at Cotgrave and East Leake.

### Scheme for Registered Daily Guardians

Whilst the Daily Minder Scheme and the Group Minding Scheme referred to above were brought into operation for the express purpose of ensuring adequate care of children where a "social" need exists, the Scheme for Registered Daily Guardians has continued since the war when it was introduced with a view to encouraging mothers to take up employment.

Under this Scheme, women who receive not more than two children into their homes whilst the mother is at work may apply for registration as a Daily Guardian. If approved following inspection by the Health Visitor, who continues to maintain regular supervision, a Daily Guardian receives an allowance of 4s. 0d. per week from the County Council as a supplement to the payment made by the mother.

During 1966 the cases dealt w	ith were	as follo	ows:—	
Cases on Register at 1st Januar				4
				3
Cases discontinued			***	4
Cases on Register at 31st Dec	ember, I	966		3

### Nurseries and Child Minders Regulation Act, 1948

Any person who undertakes for reward the care of three or more children, to whom they are not related, for a day or a substantial part of a day is required to apply for registration in accordance with the terms of the above Act. Registration is thus required not only for the full-time private Minder or Day Nursery, but also for the pre-school play group where children may attend for a few hours only on one day or more each week. With the existing lack of Nursery Schools such play-groups are 'mushrooming' in all parts of the County, as indeed they are throughout the Country. Accordingly the numbers of persons and premises registered under this Act have greatly increased in recent years, and the trend does not show any signs of decreasing.

The following table shows the increases over the last few years and the position at the end of 1966:—

C	н	LD	MI	N	D	ER	5
			1.11	II N	-		

		G1111111		
Year	New Registrations	Registrations Relinquished	No. of Persons on Register at end of year	Maximum No. of children to be received
1962	6	3	13	118
1963	16	3	26	241
1964	11	3	34	308
1965	16	7	43	406
1966	11	9	45	468

### PREMISES

Year	New Registrations	Registrations Relinquished	No. of Premises on Register at end of year	Maximum No. of children to be received
1962	1	_	2	50
1963	5	_	7	196
1964	5	1	11	322
1965	13	2	22	620
1966	18	4	36	963

At present each new application for registration entails a comprehensive inspection of the accommodation and facilities and an interview of each applicant. This work is at present undertaken by Dr. J. Forbes, Senior Medical Officer for Maternity and Child Welfare, frequently accompanied by a Health Visitor and, when necessary, by the County Health Inspector. Following registration, all establishments are visited as frequently as possible, but In view of the rapid growth in numbers consideration is now being given to the appointment of a specialist full-time officer to carry out the initial and regular inspection visits.

### Boarded-out Children and Children Placed for Adoption

At the request of the Children's Officers (City and County), the Health Visitors submitted special reports in respect of 231 proposed adoptors or foster-parents.

### Health of Children

### Break-up of Families

The Children's Officer is the appointed co-ordinating officer for the purpose of arranging case conferences on difficult families. At her request, the County Health Department was represented at these conferences by the appropriate officer concerned, e.g. Medical Officer, Health Visitor, Medical Social Worker, District Home Help Organiser, etc.

The Health Visitors also assisted in the rehabilitation of families afforded temporary accommodation in the Welfare Committee's Residential Establishments.

## DENTAL CARE OF EXPECTANT AND NURSING MOTHERS AND CHILDREN UNDER SCHOOL AGE

The scope of the service offered throughout the year was limited by the availability of staff and in most parts of the County was provided on a 'demand' basis. Ideally routine examination should begin at the age of three years but it is not practicable, with the persistent shortage of staff, to implement the ideal but with the increasing use of Dental Auxiliaries it may be possible to make some progress towards its achievement.

The trend, evident in recent years, of expectant and nursing mothers increasingly seeking treatment through the general Dental Service is shown by the statistics. This year 334 nursing and expectant mothers attended the clinic for examination of which 316 required treatment. A certain amount of 'carry forward' from the previous year accounts for the fact that 330 courses of treatment were completed during the year.

The total of pre-school children examined during the year is again disappointing, 747 of these children were examined. The most encouraging feature is that the number of deciduous teeth conserved doubled during the year. 1,146 attendances were made by children of this age group and 508 courses of treatment were completed. Each child on average therefore made two visits for their treatment to be completed, during which time every attempt was made to advise the parents on dental health matters and to secure their co-operation in this important field.

The full statistics relating to this service are given on page 56.

DENTAL TREATMENT

Treatment carried out on behalf of Expectant and Nursing Mothers and Children under school age.

							Dentures provided	provided	
	Scaling and gum treatment (1)	Fillings (2)	Silver nitrate treatment (3)	Crowns and inlays (4)	Extractions (5)	Extractions anaesthetics (5)	Full upper or lower (7)	Partial upper or lower (8)	Radio- graphs (9)
l. Expectant and nursing mothers	156	019	Ž	7	1,244	84	981	9	24
2. Children aged under 5 years and not eligible for school dental service	48	675	370	Ē	1,029	297	ž	Z	7

### MIDWIFERY (Section 23)

Following the termination of the agency arrangements with the Nottinghamshire Nursing Federation, since 1st April 1966 all the domiciliary midwives have been in the direct employment of the County Council. There has, however, been no change in the general operational pattern and, as previously, the County is divided into areas of three types, i.e.:—

- (1) Areas covered by County Midwives only.
- (2) Areas covered by District Nurse/Midwives only.
- (3) Areas covered partly by County Midwives and partly by District Nurse/Midwives.

Number of midwives practising at the end of the year-

County Midwives Full Tir	me— 69
	me—* 13
	—— 82
District Nurse-Midwives	* 59
Hospital Midwives	52
Midwives in Private Prac	tice I
	—— 194

\* The amount of midwifery services afforded by Part-time County Midwives and the District Nurse-Midwives was equivalent to 27 whole-time midwives.

### Supervision of Midwives

Number of midwives who notified their intention to practice—225. Visits by Supervisors of Midwives—

Routi		ons to abno	rmal	cases	464 730		
Other					158	1,352	
Lectures	 					37	1.389

Number of cases in which medical aid was summoned by a midwife-

Where the me	edical pr	actiti	oner h	ad arran	ged ical		
services under	the Nat	ional	Health	Service		638	
Other cases						63	701
					-		/01

Number of claims received from medical practitioners—23 Total amount of claims received—£57 19s. 0d.

Other statutory notices received from midwives were as follows:-

Notification o	f Liability	/ to	be a	Source	01	2.7
Infecti	ion					54
Notification of	Death					2
do.	Stillbirth					18
					_	

74

### Eye Discharge in the Newborn

Number of cases reported of inflammation of, or discharge from, the eyes of newborn infants

Number of these cases notified as Ophthalmia
Neonatorum ... 4

Every case was immediately investigated by a Supervisor of Midwives and subsequently followed-up by a Health Visitor. No case of resultant impaired vision was noted.

### Puerperal Pyrexia

Number of cases no	tified	during	the ye	ear-		
Domiciliary					 2	
Hospital					 _	
						2

## Deliveries attended by Midwives Domiciliary Cases

- omena, cases	Doctor n	ot booked	Doctor	Booked
	Doctor present at delivery	Doctor not present at delivery	Doctor present at delivery	Doctor not present at delivery
County Midwives	3	87	606	2,783
District Nurse-Midwives	4	64	221	888
Privately Practising Midwives	-	_	_	1
	7	151	827	3,672

### Cases in Nottinghamshire Institutions

Hospital			 		3,784
Private Nu	rsing Hom	es	 		_
				-	
					3.784

Number of cases delivered in hospital and attended by	
domiciliary midwives on discharge from hospital	
before the end of the lying-in period	4,103

### Administration of Analgesics

A further 30 Entonox apparatus were purchased during the year and it was proposed that the replacement of the remaining Gas/Air machines should be phased over a period of four years. However, in view of the report of the World Health Organisation that analgesic apparatus should deliver not less than 21% oxygen to the mother whereas the Minnitt Gas/Air machines delivered only 10%, it has now been agreed that all the Minnitt machines be replaced by Entonox apparatus in the immediate future.

Number of midwives practising at the end of the year who were qualified to administer inhalational anal-gesics in accordance with the requirements of the Central Midwives Board—

Central Fild Wives Doard				
Domiciliary Midwives			82	
District Nurse-Midwives			59	
Privately Practising Midwives			_	
		_		141
Hospital Midwives				51
				192
Number of sets of Gas-Air apparatus in use on the dis				100
of the year			***	128
Number of cases in which analgesia	was a	dminis	tered	

on the district during the year-

		ational		
	Ana	Igesia	Pet	hidine
	Doctor present at delivery	Doctor not present at delivery	Doctor present at delivery	Doctor not present at delivery
Administered by:	,	,	,	
County Midwives	543	2,300	442	1,386
District Nurse-Midwives Privately Practising	191	754	124	466
Midwives	_	_	_	1
	734	3,054	566	1,853

### Infant Oxygen Resuscitators

Each County Midwife and District Nurse-Midwife is equipped with this apparatus.

The number of occasions it was used during the year was—80.

### Visits by County Midwives and District Nurse-Midwives

			County Midwives	District Nurse- Midwives
Ante-Natal				
Home	 	 	43,263	10,320
Clinic	 	 	1,995	1,093
Delivery .	 	 	3,479	1,177
Lying-in	 	 	72,944	29,200
, 0				
			121,681	41,790

### Refresher Courses for Midwives

Number of Midwives who attended a course of instruction during the year in accordance with Section G of the Rules of the Central Midwives Board—

### Rota System for Midwives

With the agreement of the midwives concerned, a rota system for midwives in the Arnold/Carlton areas was introduced on 1st October, 1966.

Under this system one midwife in each of these areas is on duty each night for one week between the hours of 7.0 p.m. and 7.0 a.m. to visit any patient in the area. All expectant mothers living in these two districts who arrange a domiciliary confinement are advised that should the services of a midwife be required during the above times they should contact the County Ambulance Control. Close liaison is maintained between the Control Assistant and the night-duty midwives who are called out as necessary. Thus, unless the services of a midwife are required simultaneously by more than two patients the other midwives are not disturbed unnecessarily during the night and off-duty periods.

The rota system provides for each midwife to be allocated a long week-end (Friday to Tuesday) following their night-duty period together with a free day on either Wednesday or Thursday in the remaining weeks of the rota cycle, thereby giving the staff greater opportunity to plan their leisure time.

Since its inception the rota system has operated most successfully and it is proposed to introduce similar schemes in other composite areas of the County. Contact in each case will be either the County Ambulance Control or one of the four Main Station Controls, and it is hoped that these arrangements will be followed in the not too distant future by the closer link of radio communication between the Midwifery and Ambulance Services. Experiments to find the most suitable type of portable radio equipment, i.e., which could be used at the bedside and also in a midwife's car, are now taking place.

### **HEALTH VISITING (Section 24)**

Of the seventy-nine Health Visitors in post at the end of the year, seventy-five undertook combined duties, i.e. work in the School Health Service in addition to Maternity and Child Welfare and general Health Visiting. Appointments at Child Welfare and Ante-Natal sessions, relaxation classes, School Clinics, school medical inspections, cervical cytology clinics, etc. necessarily involve a considerable proportion of the Health Visitors' time, and a total of 15,021 sessions were devoted to these "fixed" duties during 1966. The home visiting carried out during the year under the various headings was as follows:

First visits to children born	1966	 	11,909
Revisits to children born 196	66	 	27,542
Visits to children born 1965		 	38,447
Visits to children born 1961-	64	 	71,228
Visits to Expectant mothers		 	6,939
Visits to post-natal mothers		 	10,608
General Health Visiting		 	17,196
			183,869

In addition to the successful visits listed above, 25,112 fruitless visits were made to houses where the mother or a responsible relative was not available. The above figures do not include visits by Health Visitors to tuberculous households which are shown on page 78 of this report.

### Recruitment and Training of Staff

The joint arrangements with the Nottingham City Authority for the training of Health Visitors resulted in the services of five Health Visitors becoming available for work in the County during the year. These, and other appointments made through normal recruitment, offset the vacancies which arose from resignations or retirement, and the figure of seventy-nine Health Visitors employed at 31st December, 1966 was an increase of one from the number in post at the end of 1965. The equivalent of whole-time officers was 54·5 as against 53·7 for the previous year.

These figures do not include the two Superintendent Health Visitors who were in post at the end of the year.

### Refresher Courses

In accordance with the policy recommended by the Nurses Committee of the Whitley Council, twelve Health Visitors attended refresher courses organised by the Women Public Health Officers Association or the Royal College of Nursing.

### HOME NURSING (Section 25)

### Administration

Following discussions with representatives of the Nottinghamshire Nursing Federation, the agency arrangements, whereby the Federation and its affiliated District Nursing Associations had provided the whole of the Home Nursing Service, together with the Midwifery Service in many parts of the County, since 5th July 1948, were terminated by mutual agreement as from 1st April, 1966. From that date the County Council assumed direct responsibility for these Services and the District Nurses and District Nurse/Midwives came under the direct employment of the Authority.

The staff concerned have accepted the administrative changes which became necessary as a result and I am grateful to them for fitting so smoothly into what for them must have appeared to be an unwieldy set-up.

The following table summarises the work and staffing position during the past five years.

### General Statistics (Whole County)

	1962	1963	1964	1965	1966
Total No. of Cases attended	7,261	9,259	9,557	9,466	9,195
*Average No. of Cases attended per equivalent of Whole-time Nurse	69	86	87	91	84
Total No. of Visits paid	252,766	253,750	256,763	252,629	245,036
*Average No. of Visits paid per equivalent of Whole-time Nurse	2,407	2,349	2,351	2,429	2,228
Average No. of Visits paid per Case	35	27	27	27	27
*Equivalent of Whole-time Staff employed at 31st December	105	108	109	104	110
**Equivalent of Whole-time Staff required at 31st December	150	153	156	158	161
†Extent to which Staff falls short of requirements at 31st December	45	45	47	54	51
†Ratio of Staff to Population at 31st December	1 per 5,735	1 per 5,657	1 per 5,717	1 per 6,099	1-per 5,855

<sup>\*</sup>Some Nurses devote part of their time to Domiciliary Midwifery.

### Day and Night Nursing Service

A total of 20 patients were assisted during the year through this service which is financed by the Marie Curie Memorial Foundation and administered through my Department.

### VACCINATION AND IMMUNISATION (Section 26)

Vaccination against smallpox and poliomyelitis, and immunisation against diptheria, whooping cough and tetanus continued to be offered throughout the year to all newly-born infants and to unprotected children moving into the county from other areas.

<sup>\*\*</sup>On basis of 1 per 4,000 of population.

<sup>†</sup>Expressed as equivalent of Whole-time Nurses.

In addition, in accordance with Ministry of Health Circular 6/66, arrangements were made in the year in consultation with the Local Medical Committee to proceed with routine measles vaccination whenever the Ministry are able to advocate this, and in the meantime to undertake individual vaccinations where these may be specially desirable, e.g. in the case of a child at risk from an attack of measles.

District Medical Officers of Health, acting on agreed terms as the County Council's agents, continued to be responsible for the organisation and conduct of this work within their districts and the County Council's Health Visitors and School and Clinic Nurses worked in close collaboration with them. Where requested, clinical assistance was also given by the County Council's own Medical Staff.

Medical practitioners taking up medical practice in the Council's area were also invited to take part in these arrangements by submitting standard records of the vaccination or immunisation by them of eligible persons on their medical lists, and at 31st December 1966 a total of 419 general practitioners were enrolled for this purpose.

The tables on pages 64 to 68 show the work completed in the several County districts, and in the County as a whole, during the year and at 31st December the percentages protected by vaccination against the diseases and in the age groups indicated were as follows:—

Percentage vaccinated

- (1) Smallpox (children under 2 years) ... ... 52%
- (2) Poliomyelitis (children born in 1965) ... 73%
- (3) Whooping Cough (children born in 1965) ... 76%
- (4) Diphtheria (children born in 1965) ... ... 76%

For the tenth successive year no case was notified and no child died from diphtheria in the County Council's Area.

### Complications of Vaccination

Special reports were submitted to the Ministry of Health in the year on two reported complications of smallpox vaccination. Both cases responded well to treatment.

The first case reported related to typical vaccinia in a 55 year old female who was primarily vaccinated by her general practitioner as she was going on holiday to Austria, and the second to a case of eczema vaccinatum in a two year old child which developed through contact with vaccinated twin sisters despite repeated warnings to the mother by the Health Visitor that the vaccinated twins should be kept well apart from the older sister in view of her previous history of infantile eczema. In the latter case the Medical Officer of Health concerned declared his conviction that in any home where there is a child suffering from infantile eczema, quiescent or otherwise, vaccination of any other member of the family, and especially of children, except for the most cogent of reasons, is decidedly contra-indicated.

# POLIOMYELITIS VACCINATION, 1966

		NUMBER		PLETED PRIN	WHO COMPLETED PRIMARY VACCINATION	NATION		No. (all
DISTRICT	Born in 1966	Born in 1965	Born in 1964	Born in 1963	Born in 1959-62	Others under 16 years	TOTAL	egroups) given reinforcing doses in the year
Urban Districts— Mansfield (Borough) Worksop (Borough) Newark (Borough) East Retford (Borough) Arnold Beeston & Stapleford Carlton Eastwood Hucknall Kirkby-in-Ashfield Mansfield Woodhouse Suttoon Warsop Warsop	257 107 55 102 127 127 125 69 76 89 48 48	502 315 315 217 196 405 593 472 225 294 146 253 457 129	111 36 36 27 27 89 109 109 24 42 70 70 71 51 51	36 27 27 28 38 38 47 19 19 19 19 19 19 19 19 19 19 19 19 19	84 433 443 433 433 433 433 433 433 433 4	72751 s   227-2	1,007 548 351 349 681 930 799 340 407 407 467	713 445 295 280 280 518 980 601 239 324 438 438 438
TOTAL	1,444	4,477	795	236	528	107	7,587	5,954
Rural Districts— Basford Bingham East Retford Newark Southwell Worksop	225 200 107 27 27 85 95	737 472 228 185 512 250	134 67 39 27 107 41	23 -1 18 18 18	60 24 23 37 37	NN 4004	1,184 856 415 279 835 445	812 548 278 191 686 291
TOTAL	739	2,384	415	132	306	38	4,014	2,806
Whole County— GRAND TOTAL	2,183	198'9	1,210	368	834	145	11,601	8,760

# VACCINATION AGAINST SMALLPOX, 1966

		NUMBE	NUMBER VACCINATED*	IATED*			NUMBER	NUMBER RE-VACCINATED*	INATED*	
DISTRICT	Under I year	l year	2—4 years	5—15 years	TOTAL	Under I year	l year	2—4 years	5—15 years	TOTAL
Urban Districts—	06	474	48	34	965			~	70	7.2
Worksop (Borough)	0	124	77	3 2	224	1	-	. –	112	- 4
Newark (Borough)	158	72	20	21	271	1	1	-	132	133
East Retford (Borough)	18	126	20	42	218	1	1	1.	23	23
Resecton & Stanleford	100	321	947	2.5	828	1.1		- 1	34/	348
Carlton	17	381	5.5	911	565	1	1	13	469	482
ро	-	128	36	2	170	1	10	-	e	6
	28	215	3	26	300	ı	1	-	24	25
Kirkby-in-Ashfield	m	103	28	53	187	1	1	1	135	135
Mansfield Woodhouse	m	192	37	23	255	1	1	2	54	26
Sutton-in-Ashfield	-	357	34	28	420	1	1	1	148	148
Warsop	m	140	21	29	193	1	1	1	28	28
West Bridgford	61	286	21	8	344	ı	1	2	124	126
TOTAL	607	3,385	581	512	5,085		9	25	1,789	1,820
ts-	36	103	011	3.4	7.73			-	72	37
: .	32	430	120	38	620			- 00	0 00	88
ford	6	150	52	22	233	I	1	1	121	121
***	88	98	23	4	213	1	1	-	691	170
:	161	304	84	70	649	1	_	89	403	412
Worksop	47	691	39	44	299	1	1	-	128	129
TOTAL	395	1,652	428	212	2,687	1	-	14	942	957
Whole County— GRAND TOTAL	1,002	5,037	600'1	724	7,772	1	7	39	2,731	2,777
						-				

\*Classified according to age at date of vaccination.

# DIPHTHERIA IMMUNISATION, 1966

		NUMBER	100	LDREN PR	IIMARILY I	MMUNISED	OF CHILDREN PRIMARILY IMMUNISED AGAINST DIPHTHERIA	NPHTHERIA	A REINFORCING INJECTION
		Born in 1966	Born in 1965	Born in 1964	Born in 1963	Born in 1959-62	Others (under 16 years)	TOTAL	TOTAL (under 16 years)
Urban Districts— Mansfield (Borough)	- 1	264	373	79	27	44	ın	792	1,162
Worksop (Borough) Newark (Borough)	: :	123	258	23	3 8	23	w —	498 336	671
East Retford (Borough)	:	000	167	8 -	233	7,	11	295	337
Beeston & Stapleford	: :	312	218	. 4.	12:	32	-	922	1,423
Carlton Eastwood	: :	23	174	89	<u>4</u> ω	40	11	273	439
Hucknall	:	16	222	35	21	33		403	575
Mansfield Woodhouse	: :	8 4	209	98	0 80	c <del>4</del>	- 5 -	472	579
Sutton-in-Ashfield	:	243	319	17	13	12	15	619	1,064
West Bridgford	: :	129	247	46	°=	-=	۱ ۳	447	628
TOTAL	1 :	2,071	3,756	629	185	318	34	6,993	9,695
Rural Districts-	:	314	550	19	61	38	4	986	1,526
	:	201	328	24	26	4:	4	624	1,152
	:	112	192	35	9 9	17	4 -	361	381
:		170	429	- 6	30	99	- 52	801	1.216
Worksop	: :	8	189	15	9	21	<u>:</u> –	350	469
TOTAL		966	1,831	241	93	195	29	3,385	5,180
Whole County— GRAND TOTAL	:	3,067	5,587	870	278	513	63	10,378	14,875

# WHOOPING COUGH IMMUNISATION, 1966

	NUMBER OF		REN PRIMAI	RILY IMMUN	NISED AGA	INST WHOO	CHILDREN PRIMARILY IMMUNISED AGAINST WHOOPING COUGH	NUMBER GIVEN A REINFORCING INJECTION
DISTRICT	Born in 1966	Born in 1965	Born in 1964	Born in 1963	Born in 1959-62	Others (under 16 years)	TOTAL (under 16 years)	TOTAL (under 16 years)
Urban Districts—  Mansfield (Borough)  Worksop (Borough)  Newark (Borough)  East Retford (Borough	264 158 122 100	372 258 162 166	79 27 22 18	27	4 Z m Z	-4	757 473 312 288	671 504 330 132
Stapleford		408 516 469	8 43	22 - 14	864	1-1	647 895 709	314 864 463
Eastwood Hucknall Kirkby-in-Ashfield Mansfield Woodhouse Sutton-in-Ashfield Warsop Warsop	70 91 68 141 243 117	222 134 203 319 95 246	35 86 17 8 8 8	2 16 16 18 18 18 18 18 18 18 18 18 18 18 18 18	28 12 12 9		397 320 432 589 442 442 442 442 442	402 293 327 299 163 417
TOTAL	2,069	3,744	626	172	139	8	6,758	5,775
Basford	31. 200 170 170 181	546 324 192 143 428 189	61 35 15 15	24 24 6 30 6	31 32 9 5 7	4  0	966 608 354 250 747 335	1,046 697 211 252 661 282
TOTAL	992	1,822	241	89	107	6	3,260	3,149
Whole County— GRAND TOTAL	3,061	5,566	867	261	246	17	10,018	8,924

# **TETANUS IMMUNISATION, 1966**

NUMBER GIVEN REINFORCING INJECTION	(under TOTAL TOTAL (under 16 years)	773 529 529 336 647 647 647 709 709 709 709 709 709 709 709 709 879 879 879 879 879 879 879 879 879 87	7,053 7,867 1,022 1,359 631 378 263 263 800 823 360 3,454 4,305
OF CHILDREN PRIMARILY IMMUNISED AGAINST TETANUS	Others (under 16 years)	-0   50   -0-5   E	65 7 7 9 9 6 6 6 6 6 6 130
IMMUNIS	Born in 1959-62	25 23 23 24 23 24 23 24 24 23 24 25 25 26 27 27 28 27 28 28 29 29 20 20 20 20 20 20 20 20 20 20 20 20 20	364 50 48 24 17 66 26 26 231 595
PRIMARILY	Born in 1963	23 23 33 25 24 25 24 25 24 25 25 25 25 25 25 25 25 25 25 25 25 25	20 25 6 30 6 93 93
CHILDREN	Born in 1964	79 27 23 23 18 89 86 86 86 17	624 61 24 35 15 91 15 241 241
3ER	Born in 1965	373 258 163 167 408 517 469 174 222 134 203 319 95	3,749 550 326 192 143 428 189 1,828
NUM.	Born in 1966	264 158 123 100 123 314 70 70 70 115 115	3,067 314 201 112 81 170 118 996 3,063
FOIRTSIG		Urban Districts—  Mansfield (Borough) Worksop (Borough) Newark (Borough) East Retford (Borough) Arnold Beeston & Stapleford Carlton Eastwood Hucknall Kirkby-in-Ashfield Mansfield Woodhouse Sutton-in-Ashfield Warsop	Rural Districts— Basford Bingham East Retford Newark Southwell Worksop TOTAL  Whole County— GRAND TOTAL

### AMBULANCE SERVICE (Section 27)

### **Statistics**

	Sta	tion			Journeys Undertaken	Patients Carried	Total Mileage
Nottingham	Groun	0:					
Arnold*					2,904	15,112	60,889
Beeston		***			4,965	22,771	121,874
Carlton					4,836	24,040	107,429
Eastwood'	****	***	***		2,448	11,714	78,887
Hucknall					4,251	19,387	107,617
West Bridg	gford	***	***		5,184	20,458	151,935
Mansfield				411	8,457	41,040	243,499
Sutton-i	n-Ash	field*			2,943	17,979	78,185
Newark					4,733	17,149	144,670
Retford		***	***		4,527	16,405	147,085
Worksop				***	5,431	24,935	137,842
	Totals				50,679	230,990	1,379,912
	Totals for 1965				49,796	224,382	1,361,577

The three Stations indicated by an asterisk operate on a 16-hour basis and all other Stations on a 24-hour basis.

### Categories of Patients carried

Year	Accident	Emergency	Treatment	Infectious	Maternity	Other	Total
1961	4,793	7,491	150,196	495	608	1,076	164,659
1962	5,021	7,691	160,709	431	509	1,499	175,860
1963	5,605	8,171	189,298	362	419	1,503	205,358
1964	6,501	8,952	194,401	379	264	1,851	212,348
1965	6,592	9,220	205,603	258	273	2,436	224,382
1966	6,660	9,381	212,171	240	363	2,175	230,990

### Mileage

Year —	AMBU	JLANCES	DUAL	TOTAL MILEAGE	
	No.	Mileage	No.	Mileage	MILEAGE
1961	30	447,834	31	671,956	1,119,790
1962	34	502,494	30	694,499	1,196,993
1963	34	586,996	30	724,527	1,311,523
1964	34	607,354	31	746,705	1,354,059
1965	34	627,935	32	733,642	1,361,577
1966	34	611,686	32	768,226	1,379,912

### Allocation of Patients to Vehicles

С	ategory			Ambulances	Dual-purpose Vehicles	Totals	
Stretcher Cases				25,102	2,437	27,539	
*Assisted				17,223	9,725	26,948	
*Walking				61,109	115,394	176,503	
	Totals			103,434	127,556	230,990	

<sup>\*</sup>Previously referred to as Sitting cases.

Statistically, the general picture so far as the Ambulance Service was concerned was one of slow expansion with an increase of 6,608 patients carried over the previous year and, similarly, an increase in the total mileage of 18,335 miles. The rate of expansion would have been much greater had it not been for the existence of the Hospital Car Service which, since its inception in April, 1964, has expanded considerably. It will be seen from a comparison of the figures below that the total number of patients carried and the total mileage involved has more than doubled since 1965 alone. Hospital Cars have been usefully deployed over long distance journeys and selected "awkward" journeys where unusual appointment times and geographical location have been the prime determinants. From an appraisal of statistical trends in particular Station operational areas it is noticeable that where the fullest use of the Hospital Car Service has been made because of the availability of volunteer drivers the increase in the total number of patients and the total mileage

travelled in these areas which would have fallen on the Ambulance Service, has largely been contained. At the moment there is imbalance in the distribution of available volunteer drivers over the County area but if more even distribution were possible then greater use could be made of volunteer drivers along the western fringe of the County and similar advantages of containment would accrue. Even so, with existing resources, the effect on the Ambulance Service has been such that the average number of miles travelled by each patient in ambulance vehicles has shown a steady decline from 6.5 in 1964, 6.1 in 1965 to 6 miles per patient for the current year. The rise in the number of patients being dealt with by the Hospital Car Service illustrates the need for continuous go-ordination of the Service with the Ambulance Service, a problem which will intensify as aggregate demand increases.

The number of patients for whom arrangements were made for their conveyance by train to out-County destinations rose by 8 to 128 involving approximately 12,127 miles, i.e. an average of 94-7 train miles per patient.

### Hospital Car Service

Number of Drivers en	rolled		 87	(70)
Number of Patients ca			 3,677	(1,678)
Number of Miles			 89,182	(37,876)
Average number of m		ient	 24-3	(22-6)
Cost of mileage	, ,			6 15s. 9d.)
Cost per patient				
The figures in bracket				

### General Administration

Because of the high incidence of reversing accidents in Ambulance Service vehicles, arrangements are being made for one operational ambulance at each of the eleven Ambulance Stations to be fitted, on an experimental basis, with a warning buzzer in the driver's compartment to be operated by a push button fixed at the nearside rear of the vehicle. The usefulness of this experimental device has yet to be evaluated.

The replacement of all the mobile radio equipment was completed on the 27th May, 1966.

The County Final of the National Ambulance Competition, arranged by the National Association of Ambulance Officers, was held at Rufford Abbey on the 21st May, 1966, and the Team representing Retford Ambulance Station (Shift Leader K. Hoddy and Driver/Attendant J. R. Shaw) were successful in winning the "Baylis Cup" with the Mansfield Team (Shift Leader P. D. Laitt and Driver/Attendant R. Orridge) being runners-up. The Individual Competition was arranged for the first time and there was a tie between Driver/Attendant R. Chivers and Driver/Attendant R. Parsons of the Mansfield Ambulance Station. In the circumstances, it was determined that the "Ainley Cup" should he held jointly.

At the Regional Final of the National Ambulance Competition held at Grimsby on the 24th July, the Retford Team, who represented the County Ambulance Service by virtue of their winning the County Competition were placed fifth of fourteen competing teams. The "20 Questions" Competition held simultaneously, which was open to individual full-time members of Local Authority Ambulance Services below the rank of Station Officer was won by Driver/Attendant B. L. Collins of the Arnold Ambulance Station.

A further six-mile extension of the Motorway from Sandiacre to Nuthall was opened to traffic on Thursday, 25th August, 1966, increasing the total distance of motorway covered by the Ambulance Service to II miles. Emergency ambulance cover for the Lockington to Sandiacre section of the motorway, which opened on the 19th May, 1966, is provided jointly with the Derbyshire Ambulance Service under a reciprocal mutual aid arrangement and this arrangement was extended to cover emergencies on the north-bound carriageway of the Sandiacre-Nuthall section. Emergency calls arising on the south-bound carriageway are dealt with by either the Eastwood or Hucknall Ambulance Stations with the Nottingham City Ambulance Service being available to provide support if necessary.

Lectures on the operational aspects of motorway procedure were given to all ambulance staff including County Ambulance Control Assistants and exercises involving simulated traffic accidents were held on the motorway and were attended by staff of the Eastwood, Hucknall, Arnold and Carlton Ambulance Stations.

It has been the practice for oxygen cylinders to be recharged by the County Fire Service at a fixed annual nominal charge. As oxygen is no longer used in the Fire Service, and at the suggestion of the Chief Fire Officer, the electric oxygen compressor at the Mansfield Fire Station, used for this purpose, was transferred and installed at the Carlton Ambulance Station.

### Hospital Car Service

On the 2nd November, 1966, a meeting of volunteer car drivers was arranged at County Hall at the invitation of the Chairman of the County Council. Sixty-six volunteers attended this meeting, the first of its kind since the inception of the Hospital Car Service in April, 1964. The chair was taken by Mrs. J. S. F. Hill, County Organiser of the Women's Royal Voluntary Service, who invited County Alderman F. A. Small (now County Alderman Sir Frank Small) to address the volunteers. After the address, my Deputy, Dr. H. I. Lockett, gave details of the origins and organisation of the Service and presented statistics of the work done since 1964. Mrs. Hill then invited comments and questions from the members.

Because of the general expansion of the Service, approval was given for the payment to the Women's Royal Voluntary Service of a contribution of £3 per week with effect from the 16th May, 1966, towards the cost of obtaining additional general clerical help. Continuous liaison between the Ambulance Section and the County Office of the Women's Royal Voluntary Service is absolutely vital if patient journeys are to be properly co-ordinated and to facilitate ease of communication a direct telephone link between the two offices was installed for this purpose.

Whilst every effort is made to give at least twenty-four hours' notice of impending journeys to the Hospital Car Service there have been frequent occasions where requests have been made at very short notice, in some cases even an hour before the time of appointment, and I must record sincere appreciation of the endeavours of the Hospital Car Service Organiser, her assistants and the volunteer car drivers who, if they were in a position to be able to do so, responded with alacrity.

### Vehicles

				AMBULANCES	DUAL-PURPOSE VEHICLE				
Year		Bedford 28 h.p.	Bedford 16 h.p.	Bedford 28 h.p.					
957			 	1	-	_			
958			 	_	-	1			
959			 	4	1	2			
960			 	4	4	-			
961			 	-	-				
962			 	10	4	1			
963			 	-	9	-			
964			 	5	1	1			
965			 	2	8	-			
966		***	 	-	-	-			
			-	26	27	5			

The preceding Table shows the establishment of the main fleet at the end of 1966, when the average age of the ambulances was 4 years 8 months and the dual-purpose vehicles 3 years 10 months. Owing to the financial stringency which obtained at the end of 1965 it was determined that the vehicles which were due for replacement during 1966/67 should be retained in service for a further year and this factor accounts for the rise in the age of both types of vehicle compared with 1965. Eight other Bedford ambulances, all purchased in 1957, comprise the reserve fleet, which is used to replace main fleet vehicles when off the road for maintenance or repair or to supplement operational resources when necessary.

### Staff

The introduction of the 40-hour week involved a loss of 372 working hours per week equivalent to a reduction of 9.3 men. Following meetings and discussions with representatives of all Stations on the introduction of revised rotas the principle of eight-hour shifts was accepted at ten Ambulance Stations and was implemented. At the end of the year discussions were still taking place with the personnel at the one other Station with a view to agreeing a suitable rota.

In accordance with the Ten-year Development Plan four additional Driver/Attendant posts were added to the establishment as from the 1st April 1966, two of these posts being at the Mansfield Ambulance Station and one post each being at the Beeston and West Bridgford Ambulance Stations. The table below shows the establishment and the staff in post on the 31st December, 1966.

Designation		Establishment	Number Employed at 31/12/66
County Ambulance Office	r	 1	1
Station Superintendents		 4	4
Station Officers		 7	7
Shift Leaders		 38	37
Driver/Attendants		 157	147
Clerical		 3	3
Control Assistants		 14	14
		224	213

Although the full employment situation throughout the area was again evident in the number of staff changes there was a net gain of 12 with 17 men leaving the service and 29 being appointed.

Of the 17 men who left the Service two died and one retired on superannuation and the appointments of two men were terminated on medical grounds. Termination of employment on medical grounds within the Ambulance Service is not an unusual occurrence and emphasises the arduous nature of the duties of ambulance personnel and the need for stringent routine medical examinations and re-examinations.

Part I of the Report of the Working Party on Ambulance Training and Equipment was received but no action was taken to implement the scheme for In-Service Training or the establishment of a Cadet Training Scheme pending further guidance from the Ministry of Health when consultations with the Local Authority Associations and other interested bodies have taken place.

187 members of the Service were entered in the National Safe Driving Competition for 1965 and the following 132 awards were made:—

Special Bar to 15	year Bro	ooch		 11
15-year Brooch				 5
11-14 year Oak Le	eaf Bar			 16
10-year Medal				 6
6-9 year Bar				 38
5-year Medal				 7
Diploma				 46
Exemption Certifi	cate			 3
			Total	 132

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

(Section 28)

### **Tuberculosis**

### Deaths

During 1966, the number of deaths attributable to tuberculosis was twenty, fourteen from pulmonary tuberculosis and six from other forms of the disease. The pulmonary death rate per thousand of the population was 0.022 for the County compared with 0.043 for England and Wales, whilst the rate for all forms of the disease was 0.031 for the County compared with 0.048 for England and Wales.

### Clinic Registers

According to information provided by the several Chest Clinics in the Council's area, the numbers of County cases (whether notified or not) under treatment or supervision at 31st December, 1966, were as follows:—

Chest Clini	С		CASES ON Non-	
		Pulmonary	pulmonary	Total
East Retford		 58	11	69
Worksop		 240	15	255*
MC-11		 464	60	524
Newark		 210	13	223
Nottingham		 1,031	71	1,102
Totals		 2,003	170	2,173

<sup>\*</sup> Increase compared with 1965 due to cases remaining under observation from mass radiography session in the Area late in 1966.

These figures do not include County cases attending Out-County Chest Clinics.

### New Cases and Mortality

The number of new cases notified during 1966 according to returns submitted by the Medical Officers of Health of the County Districts, and the number of deaths attributable to tuberculosis during the year, according to the Registrar-General's statistics, were as set out in the following table:—

	NEW CASES					DEATHS				
ACE	Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonar			
AGE PERIODS	M.	F.	M.	F.	M.	F.	M.	F.		
Under I year 1—4 yrs 5—14 yrs 15—44 yrs 45—64 yrs 65 yrs. and over	- 1 1 21 29 10	1 -2 17 7	- - 4 5 1	- 10 2 2		_ _ _ _ _ 3	_ _ _ _ 3	- 1 - 2 -		
Totals	62	28	10	14	11	3	3	3		

### Incidence-Pulmonary Tuberculosis

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

VE	AD	NUM	D-+		
YEAR -		Formally notified	Not notified before death	Total	Rate per 1,000 of population
1962	***	 193	3	196	0-32
1963		 167	7	174	0.28
1964		 135	6	141	0.23
1965	***	 122	4	126	0.20
1966	***	 88	2	90	0-14

### Cases not notified before Death

The number of cases not notified before death in each of the past five years, and the sources from which the information was obtained were as follows:—

		SOUR	CE OF	INFORMA"	TION			
Year	from	Returns Local istrars	from R	Returns egistrar- neral		umous cations	То	tals
	Pul.	Other	Pul.	Other	Pul.	Other	Pul.	Other
1962	2	1	1	-	_	1	3	2
1963	. 3	1	2	-	2	_	7	1
1964	2	-	1	-	3	-	6	-
1965	2	2	1	-	1	-	4	2
1966	. 1		_	2	1	_	2	2

In each case the facts were at once communicated to the District Medical Officer of Health who was asked to confirm that the case had not been notified to him during life as suffering from tuberculosis. The County Council's Tuberculosis Health Visitors were also notified and visited the homes for the purpose of taking environmental reports and urging contacts to attend for examination at the nearest Chest Clinic.

Details of each case, with a copy of the environmental report, were

also forwarded to the appropriate Chest Physician.

### Examination and B.C.G. Vaccination of Contacts

According to information provided from the Nottingham, Mansfield, Newark, Worksop and Retford Chest Clinics, the numbers of family contacts of new County cases examined and given B.C.G. vaccination by the Chest Physicians during 1966 were as follows:—

1966	Men	Women	Children	Tota
No. of new cases notified	70	39	5	114
No. of new contacts examined (including those examined by X-ray only)	252	280	734	1,266
No. found tuberculous	5	2	2	9
No. tuberculin tested	45	79	621	745
No. found negative	3	16	499	518
No. vaccinated with B.C.G	6	15	628	649
Total attendances by contacts at Chest Clinics during the year	496	599	2,283	3,378

### Work of the Tuberculosis/Health Visitors

The number of successful domiciliary visits by the Council's Tuberculosis/Health Visitors during 1966 was 5,353 compared with 7,162 during 1965, and their attendances at Chest Clinic sessions totalled 623 in 1966 compared with 636 in the previous year.

### Protection of Children against Tuberculosis

Under the arrangements for the X-ray examination of the staff of County Council establishments who are working in close contact with groups of children, 116 persons in employment at Children's Homes and similar establishments were examined by mass radiography during 1966.

In addition 880 persons taking up employment of this nature with the County Council had a chest X-ray examination during the year; 582 by miniature radiography and 298 by large films for which the County Council paid the agreed fee to the Radiologists.

### B.C.G. Vaccination of School Children and Students

The organisation and conduct of the County Council's arrangements for the vaccination against tuberculosis of school children over the age of eleven years and of students attending establishments of Further Education continued in 1966 to be undertaken by District Medical Officers of Health acting, on agreed terms, as agents for the County Council in the same way as for other forms of vaccination and immunisation.

Where necessary, assistance was given by the County Council's own medical and nursing staff and the following figures indicate the work undertaken in the year:—

	School Children	Students	Total
Number skin tested	 6,634	_	6,634
Number found positive	 875	_	875
Number found negative	 5,350	_	5,350
Number vaccinated	 5,347	_	5,347

In addition, 566 previously vaccinated school children were re-tested and 5 of these were re-vaccinated.

### Case Finding Surveys

According to information kindly provided by the Nottingham No. 2, Lincolnshire and South Yorkshire Mass Radiography Units, surveys were carried out at twenty-three centres in the County Council's area in 1966 at which 25,843 persons were examined by mass radiography.

Altogether 143 persons were referred to Chest Physicians for further investigation and one case of active pulmonary tuberculosis was discovered.

In addition, a large number of County residents attended the Nottingham No. I Mass Radiography Unit in the City of Nottingham but precise figures are not available as separate records of County and City cases are not kept at this Centre.

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

The following figures indicate the work ation during 1966 under agency arrangements. No. of new cases referred	with th			
No. of cases considered for assistance				251
No. of cases considered for assistance			***	231
NOTTINGHAM AREA				
No. of new cases				27
No. of cases considered for assistance				96
				107.07.0
Analysis of Assistance				
Referred to National Assistance Boar	rd for 1	moneta	ry	
grants				6
Financial assistance per British Legio	n			1
Clothing provided				1
Clothing provided per W.V.S.				5
Clothing provided per National Assi		Board		2
Nursing requisites loaned				9
Milk permits issued				72
Applications for work and training f		·k		11
Applications for assistance re housin				8
Applications for assistance re care of	fchildr	en		1
Applications for assistance re Home	Help			2
Convalescence				1
				11
4				64
t the second second				3
				48
No. of interviews				56
140. Of filed views				
MANSFIELD AREA				
No. of new cases				4
No. of cases considered for assistance				49
A L CA-istana				
Analysis of Assistance				1
Convalescence				1
Clothing provided per W.V.S.				45
Milk permits issued				45
Nursing requisites loaned				1
Investigated but no help necessary				1
WORKSOP AND RETFORD AREA				
				8
No. of new cases		***		106
No. of cases considered for assistance				

Analysis of Assistance		
Milk permits issued	 	 95
Assistance from Voluntary Funds	 	 2
Investigated but no help necessary	 	 2

During the year the County Council agreed to an extension of the Association's activities under their agency arrangements with the Council to chest cases other than those suffering from tuberculosis. This extended arrangement awaited implementation however at the end of the year pending completion of a scheme for the administration of the revised charity by the Charity Commissioners.

### Long Stay Immigrants

In accordance with arrangements made under Ministry of Health circular 3/65 as outlined in my last report, Health Visitors continued in 1966 to follow up newly arrived long stay immigrants notified by the Medical Inspectors at ports of arrival in this country to (1) ensure that they had registered with a general medical practitioner, and (2) offer appointments for them to attend with their families, if any, at local Chest Clinics for skin tests or chest x-rays, or B.C.G. vaccination as necessary.

District Medical Officers of Health were advised of the results of such investigations and the following is a summary of the quarterly returns made to the Ministry of Health in the year to keep them informed on the size of this problem:—

	From Commonwealth Countries	From Europe	Total
Number of arrivals of immigrants advised in the year	40	18	66
Number of successful follow up visits made by Health Visitors in			
the year	22	16	49
Number notified tuberculous	Nil	Nil	Nil

### Sherwood Village Settlement

The County Council continued to maintain the Sherwood Village Settlement and the associated Sherwood Industries at Rainworth, Nr. Mansfield, for the benefit of tuberculous persons and certain categories of the mentally ill, and to admit cases of the former type on agreed terms from the areas of Local Health Authorities throughout the country.

In March 1966 the Ministry of Labour, who, in the previous year, had authorised the admission of up to six psychiatric cases, agreed that this number might be increased to twelve cases of this type and that

residential accommodation might be provided for those not living within daily travelling distance of the Settlement Workshops. It was then decided, in the light of experience, that the best way of developing these extended facilities would be by arranging pre-admission assessment attendances of prospective psychiatric trainees for a period up to three months, during which time they would be paid at the rate of £1 19s. 6d. per week. By this means it was intended to eliminate unsuitable cases before nomination as Ministry of Labour Trainees and following discussion of this proposal with the specialist Medical Staff of Saxondale Hospital the first eight patients, consisting of six from the hospital and two from the community, began assessment attendances on 20th June. Another three patients also started such attendances in the remainder of the year and with five being discharged as unsuitable six cases remained on assessment at 31st December 1966.

Towards the end of the year the extended scheme was also explained to the specialist Medical Staff of Mapperley Hospital, who expressed interest in the arrangements and visited the Settlement to see the facilities offered.

Particulars of admission to and discharges from the Sherwood Village Settlement during 1966 are set out in the following table:—

1966	Т	RAINE	ES		SETTLE	ERS		TOTAL	-
1700	N.	OA.	Total	N.	OA.	Total	N.	OA.	Total
Strength 1/1/66	6	7	13	16	8	24	22	15	37 (6
Admissions during the year	2	2	4	_	-	_	2	2	4 (1
Trainees accepted	8	9	17	16	8	24	24	17	41 (7
as settlers during the year	2	5	7	2	5	7	_	_	— (2
	6	4	10	18	13	31	24	17	41 (7
Discharges during the year:— (a) on recovery	-	_	_	1	1	2	1	1	2
(b) for domestic reasons	3	-	3	_	1	1	3	- 1	4 (3
(c) unsuitable for training (d) died	1	=	1	-	=	-	1	=	1 (1
	4	-	4	2	2	4	6	2	8 (4
Strength 31/12/66	2	4	6	16	11	27	18	15	33 (3

N—Nottinghamshire cases. OA—Other Authorities' cases. Figures in ( ) relate to mentally ill cases

One of the two Nottinghamshire cases admitted in the year suffered from mental illness and the others who were admitted (including two from the Glasgow County Borough) suffered from tuberculosis.

The following statement shows the number of Trainees and Settlers from outside Authorities remaining in the Village Settlement at the end of the year:—

Local Health Authority	Ministry of Labour Trainees	Settlers	Total
Berkshire, Royal County of	. –	1	1
Chester County Borough Council	. –	1	- 1
Glasgow County Borough Council	. 2	_	2
Herefordshire County Council	. –	1	- 1
Leicestershire County Council	. —	1	- 1
Lincolnshire (Holland) County Counci	I —	1	1
Lincolnshire (Kesteven) County Counci	I —	1	- 1
Lincolnshire (Lindsey) County Council	. 1	_	- 1
Liverpool County Borough Council	. –	1	1
London Borough of Lambeth	. 1	_	1
Nottingham County Borough Council	. –	1	1
West Riding Yorkshire County Council	I —	3	3
Total	. 4	11	15

Dr. D. Davies, Consultant Chest Physician, and Dr. D. Parkin, Consultant Psychiatrist, who, by arrangement with the Sheffield Regional Hospital Board, both act in a specialist advisory capacity for the tuber-culous and the mentally ill respectively at the Sherwood Village Settlement, comment upon the year's work as follows:—

"During the year, changes in the tuberculosis side of the Village Settlement were few. Application for admission remained at a low level and three new men were admitted. Four were discharged. Of these, two returned to open industry, one became unfit for work and one died.

Of the eighty-three people with tuberculosis discharged from 1958, thirty two (39%) have returned to open industry. I consider this to be very satisfactory, bearing in mind the severity of the disability in most of our admissions. As I have commented before, it is very unlikely that this level of return to open industry can now be maintained.

"During the year, psychiatric cases have continued to be admitted to the settlement as trainees. During the year, one psychiatric case was admitted as a non-resident Ministry of Labour Trainee. Three resigned voluntarily and one was discharged as unsuitable.

In addition to the non-resident trainees, trial pre-admission cases were admitted while still in-patients in the hospital. Of the eleven accepted, five were discharged in the year as being unsuitable. However, during the year, two men completed training and were accepted as settlers, paid by the County Council at 80% of the current craftsman's rate, and both have made good progress. So far, one patient has progressed very well among the in-patient trainees.

The Sherwood Village Settlement Management Sub-Committee has recommended that a mental nurse be appointed in a joint post with the proposed Hostel for psychiatric patients and that one of the functions of the proposed Hostel will be to provide accommodation for the extension of training facilities to the psychiatric disabled throughout the County.

(signed)

DAVID PARKIN. "

Visitors to the Village Settlement in 1966 included a party of 25 doctors from 17 different countries attending an International Rehabilitation Course, a party of 12 Health Visitors from the Health Visitors Association attending an Autumn School in Nottingham, a party of 10 Social Work students from the Nottingham Regional College of Technology, students from Brazil, India, Jordan and Thailand, and members of the Mansfield Disablement Advisory Committee.

During the year extra power points were installed in some of the Settlement houses and approximately one acre of land was transferred to the Mental Health Sub-Committee to be developed as an outdoor recreational area for mentally subnormal residents in an adjacent Hostel. Arrangements were also made with a local transport undertaking to provide a bus each working morning to convey the tuberculous Trainees and Settlers from the Village to the Workshops.

Sherwood Industries continued the manufacture of school furniture for the Nottinghamshire Education Committee, including development of the new type of school desk mentioned in my previous report, and in consequence, discontinued the production of sectional wooden buildings. Due to the change-over to this new product discussions were also held with the Ministry of Labour towards the end of 1966 on proposals to extend the Workshops to provide extra covered storage accommodation and extra spraying facilities.

The wages of all of the Workshop's staff and of the Settlers were adjusted as from 3rd January 1966 to accord with the nationally agreed Local Authorities' rates for Furniture Trade operatives and, in addition, two Settlers had increases in their hourly rates in the year following individual reports on their progress and efficiency.

### Other Services

### Loan of nursing equipment and appliances

The County Council continued during the year to lend the larger items of home nursing equipment, free of charge, direct from the Health Department on certification of need in each case by a medical or nursing attendant.

Under these arrangements, 1,557 cases were assisted in 1966 (1,371 cases in 1965) of whom 851 were referred by General Medical Practitioners, 415 by District Nurses, 135 by hospital officers and 156 from other sources.

The following Table indicates the work undertaken under this Scheme during the year:—

On   In   during   during   during   during   year   yea	Article	1/1	/66	Pur-	Written			31/13	2/66
Point Pads   Poi	Article		4.00						In
Point Pads   Poi	Alexandria December								
Baby State		1	4	_	_	- 1	1	1	4
Baby Bouncer Back Rests	Baby "Sitta"	i	4	-	1	_	i		4
Back Rets	Baby Bouncer	-	-	1	_	1	-	1	-
Bad Blocks (prs.)         12         17         2         23         14         21         18         21         18         21         18         21         18         22         18         22         18         22         18         22         18         22         18         22         18         22         18         23         32         33         25         22         23         23         23         22         22         22         23         23         24         24         24         24         25         26         19         24         24         24         24         24         24         24         24         24         24         24	B - 1 B	100		1	-	214	214	100	
Bad Cradles				25	2				6
Bad Pads "North"	Red Cradles			6	_				14
Bedpans	Bed Pads "North"			-	-			7.00	8
Bedsteads— Campbell Toilet	Bedpans-								
Campbell Toilet     1		26	6	18	3	32	33	25	22
Single		_	1	_	_	- 1	1	_	1
Postural Drainage		137	5	12	1			144	9
Egerton,   electrically operated   1		-	1	_	-	-	_	-	1
Sed Tables		2	1	_	-	-	-	2	1
Departed Bed Tables									
Bad Tables		1	_ =	_		_	_	1	_
Adjustable				The state of the s		1000		1	
Overber	Adjustable			-	-	-	-	10	-
Breathing Frame				-	-				
Chair, Relaxation 18		4		1	_	3			_
Chair, Geriatric Commodes— Chair type		18			1	4			2
Commodes— Chair type Stool type Chair type Stool type  46 9			-	i	_	1	_	- 1	-
Skool type 46 9 — 2 34 34 34 46 Cots, adult 9 — — 4 5 3 3 3 Cots, children's 4 — — 2 2 3 3 3 2 20 22 16 Cots, children's 10 10 18 — 32 20 22 16 Cots ide pads 2 2 — — — 2 2 3 3 3 2 20 Cot side pads 2 2 — — — 2 2 3 3 3 2 20 Cot side pads 2 2 — — — 2 2 2 3 3 3 2 20 Cot side pads 2 2 — — — 2 2 1 2 5 3 3 3 2 2 20 Cotshion, inflatable coilet	Commodes—					***	420	5/0	10
Scot Gype				36					
Cots, children's 4			7						i
Cot side pads			_		_				1
Cot side rails			-		-				.2
Cushion, inflatable toilet	Cot side rails								
toilet		31	31	5	_	17	19	29	30
Enuresis sets			4		2	1	2	5	3
Latex foam cushions do. mattresses 199 10 12 4 137 131 205 12 do. Infant's cots 1				3		3		3	1
do. mattresses   199   10   12   4   137   131   205   14     do. pads		110	34						41
do. pillows	do. mattresses	199					100000	205	
do. pallows         78         19         —         3         39         41         76         18           Fracture boards         214         67         —         —         204         154         264         17           Mattresses—         <		-		_	_			1	
Fracture boards 214 67 - 204 154 264 17  Mattresses-  Campbell Toilet 1			19	_	3				18
Mattresses—Campbell Toilet       —					_			264	17
Campbell Toilet			0.77	000	1				
Egerton bed   1	Campbell Toilet	-	1	-	-	1	1		1
Sectional		4	-	-			3		
Spring interior   1			_	1	_	1			-
Fowler	Acres to a contract		_	-	_	_	-	1	-
Mattress, Home       Nursing       —        —       —       —       —       —       —       —       —       —       —       —       —       —       —       —        — <td></td> <td>2</td> <td>1</td> <td></td> <td></td> <td>-</td> <td>_</td> <td>2</td> <td> </td>		2	1			-	_	2	
Nursing	Mattress, Home					1	1		1
Self-lifting poles—Bed fitting type       77       16       —       —       31       29       79       14         Portable        23       4       —       —       17       18       22       9         Attachments for (sets)        —       <		_	-						i
Bed fitting type     77     16     —     —     31     27     19       Portable      23     4     —     —     —     —     —       Attachments for (sets)      —     —     —     —     —     —     —       Spinal Carriages     —     —     —     —     —     —     —     —     —       Adult models      1     —     —     —     —     —     —     —     —       Juvenile models      1     2     —     <		-					1		
Portable 23 4 — 17 18 22 3 4 — 4 Attachments for (sets) — 1 — — — — — — — — — — — — — — — —		77	16	_	-				14
Attachments for (sets)					-	17	18	22	5
(sets) — — — — — — — — — — — — — — — — — — —	Attachments for			10 1000				-	1
Adult models   2		170		_					
Juvenile models     1     2     —     59     26     53     12       Walking aids     20     7     38     —     59     26     53     12       Walking sticks     263     18     69     1     200     151     312     37       Wheel Chairs—     14     4     1     —     14     21     7     12       Stairway     123     47     1     3     122     146     99     65       Folding—adults     14     7     3     1     19     15     18     18       do. Juveniles     14     7     3     1     19     15     18     18       Transit     128     18     24     —     128     103     153     17       Urinals, female     114     38     30     —     190     130     174     1		1	_			-	-		-
Walking aids     20     7     38     —     59     25     312     32       Walking sticks     263     18     69     1     200     151     312     32       Wheel Chairs—Stairway     14     4     1     —     14     21     7     12       Folding—adults     123     47     1     3     122     146     99     69       do. Juveniles     14     7     3     1     19     15     18     18       Transit     128     18     24     —     128     103     153     17       Tuplex     114     38     30     —     190     130     174     18       Urinals, female     —     1     —     —     —     —     —     —		i		-	-				
Walking sticks     263     18     69     1     200     131     312       Wheel Chairs—     14     4     1     —     14     21     7     12       Stairway     123     47     1     3     122     146     99     65       Folding—adults     14     7     3     1     19     15     18     18       do. Juveniles     14     7     3     1     19     15     18     18       Transit     128     18     24     —     128     103     153     17       Touplex     114     38     30     —     190     130     174     10       Urinals, female     —     1     —     —     —     —     —     —					_				
Stairway      14     4     1     3     122     146     99     69       Folding—adults      123     47     1     3     122     146     99     69       do. Juveniles      14     7     3     1     19     15     18       Transit      128     18     24     —     128     103     153     17       Duplex       114     38     30     —     190     130     174     1       Urinals, female	Walking sticks	263	18	69	1	200	131	312	
Stairway       123       47       1       3       122       146       99       65         Folding—adults       123       47       1       3       1       19       15       18       18       18       18       18       18       19       15       18       18       18       18       18       19       15       18 <td< td=""><td></td><td>14</td><td>4</td><td>1</td><td>12010</td><td>14</td><td>21</td><td></td><td>12</td></td<>		14	4	1	12010	14	21		12
14   7   3   1   19   15   18   17   17   18   18   19   19   15   18   19   19   19   19   19   19   19					3	122	146		65
Transit 128 18 24 — 128 103 133 174 190 130 174 190 130 174 190 130 174 190 130 174 190 130 174 190 190 190 190 190 190 190 190 190 190			7	3	1				
Duplex 114 38 30 — 170 130 — 170		128			_				1 8
Urinals, female 2000 2796 500	Duplex			30	_			100000	1
T1 2.523 504 330 53 2.342 2.069 2.796 500	Urinals, female		1	-					
71- 2.523 504 330 53 2.342 2.069 2.796 500									
	Totals	2 522	504	330	53	2,342	2,069	2,796	508

The Council's Health Visitors were notified and provided reports at quarterly intervals on each case assisted under this Scheme.

The smaller and more frequently needed items of home nursing equipment continued to be lent direct to patients, free of charge, by District Nurses and District Nurse/Midwives from stocks held by them to an approved standard scale.

Stocks of these articles are also maintained in the Health Department for the purpose of replacing broken or worn-out equipment or for issue direct to patients having a long-term need.

The following Table indicates the provision made under these arrangements during 1966:—

		Scale	1/1/66	Pur- chases	Written	Issues	Returns	31/12/66
Article		per Nurse	In store	during	during year	during	during	In store
Air rings .		4	53	_	5	42	7	13
Bedpans		3	53	3	1	42	7	20
Douche outfits .		-	7	_	-	-	-	7
Feeding cups .		2	39	_	-	5	-	34
Sputum mugs .		†	-	-	-	_	-	_
Steam kettles .		*	8	_	-	_	_	8
Waterproof sheets— 6-ft. x 3-ft.		÷	4	6	2	6	4	6
4-ft. × 3-ft.		4	28	40	6	63	14	13
Urinals		3	27	24	4	23	5	29
Totals .		16	219	73	18	181	37	130

<sup>†</sup> Available on special request.

<sup>\*</sup> One per District.

### Convalescence

Under the County Council's arrangements for providing convalescence of the "holiday home" type for suitable cases referred by General Medical Practitioners, 63 cases were assisted in 1966 compared with 68 cases in 1965.

Of these, four undertook to pay the full cost involved. After an assessment of their financial circumstances twelve others were required to make varying contributions, and the remaining 47 cases were granted free convalescence in accordance with the County Council's approved scale.

61 cases were accommodated at seaside convalescent homes (58 at homes on the Lincolnshire coast, I in North Wales, I in Somerset and I at a home on the Suffolk coast), and 2 cases proceeded on convalescence to a home in Leicestershire.

The following table summarizes the cases dealt with under these arrangements during the year classified according to medical need, age, sex and duration of convalescence authorised:—

								AG	AN	AGE AND SEX	X	DISTRIBUTION	IBUT	NO									AUTHORISED STAY	HOR	NISED Y	0
MEDICAL NEED	0	0—5 yrs.	Yrs.	- 5	-24	15-24 yrs.		25—34 yrs.	yrs.	35-	35—44 yrs.	yrs.	45	-64 yrs.	/rs.	65	65 yrs. and over	pu	T	TOTAL		7	m	4	9	F
	Σ	m.	⊢:	Σ	т.	Η.	Σ	п.	H.	Σ	Œ.	Η.	Σ	T.	F	Σ	т.	⊢:	Σ	т.	F.	, KS.	v.Ks.	w Ks.	WKS.	WKS, WKS, WKS, I Otal
Arthritis and Fibrositis		1	1		1	1	1	1	1	1		1	1	1	1	1	4	4	1	4	4	4	1	-	-	4
Bronchitis, Pneumonia and other respiratory conditions	1	- 1	-	- 1	- 1	- 1	-	- 1	- 1	1	-	-	m	m	9	4	9	0	7	0	17	52	1	2	1	17
Circulatory conditions	1	-	1	-	-	1	1	-	1	1	I	1	1	-	-	2	2	7	2	9	00	00	1	1	1	00
General debility and anaemia	-	_	2	-	1	1	-	-	-	-	1	1	1	2	2	1	2	2	-	9	7	4	-	7	1	7
Nervous disorders	1	1	-	-	1	1	1	m	m	1	m	m	1	-	-	1	9	9	1	2	2	12	-	1	1	13
Post operative conditions	1	1	1	1	-	1	1	1	1	-	1	1	1	1	1	-	1	-	-	-	-	-	1	1	1	-
Other conditions	1	-	1	1	-	1	1	-	-	1	1	1	4	7	9	-	5	9	r.	00	2	12	-	1	1	5
TOTALS		-	2				1	20	20	1	4	4	7	6	91	80	28	36	9	47	63	26	m	4	1	63
				1	M-Males.	ales.			L	F—Females.	nales.			-	T-Total	tal.				1		1				

### Exfoliative Cervical Cytology

This service has been further extended during 1966 with the opening of two new clinics at Eastwood and Hucknall, in addition to the nine clinics previously established at Kirkby-in-Ashfield, West Bridgford, Beeston, Carlton, Sutton-in-Ashfield, Mansfield, Retford, Worksop and Newark.

Women of all ages are encouraged to attend, and during the year a total of 15,869 smears were taken at the 529 sessions held. 122 patients were found to need further investigation and treatment.

Although the response has been encouraging it is felt that more women should be taking advantage of this service to prevent invasive cervical carcinoma.

### Chiropody Services

Chiropody services for the elderly and the physically handicapped continued to be provided in 1966 as described in my previous report—the former by Voluntary Old People's Welfare Committees and the Nottingham General Dispensary with financial help from the County Council, and the latter by a full-time Chiropodist employed by the County Council.

The following figures indicate the general development of Chiropody Services in the County in 1966:—

Number of Treatments Provided	For the Elderly	For the Physically Handicapped	For Expectant Mothers
At Clinic Sessions or Chiropo- dists' Surgeries	50,556	183	Nil
By Home Visits	18,497	237	Nil
	69,053	420	Nil

At the end of the year a total of 12,081 elderly persons and 109 handicapped persons under pensionable age were being assisted under this scheme compared with 11,891 and 50 respectively at the end of 1965.

### Hospital After Care

Health Visitors followed up 39 discharged hospital cases in 1966 by special request of the Medical and other Social Workers at the City, Highbury and Sherwood Hospitals in Nottingham, Newstead Hospital near Mansfield, The Sheffield National Centre for Radiotherapy, the Royal National Throat, Nose and Ear Hospital in London, and Churchill Hospital, Headington, Oxon.

### Geriatric Visiting

Full-time Geriatric Nurses continued throughout 1966 to work with the Consultant Geriatrician at the Mansfield Victoria Hospital and at the Worksop Kilton Hospital and in collaboration with the District Nurses, District Medical Officers of Health, Health Visitors, and all other appropriate Officers and Organisations in their areas in the development of care and after-care services for the aged either referred for admission to or due to be discharged from these hospitals. A Nurse with Health Visitors qualifications was also employed part-time on similar duties with the Consultant Geriatrician at Sherwood Hospital, Nottingham.

The following figures indicate the work undertaken by these three Nurses in 1966:—

1363 111 1700.—	Cases Referred	Home Visits Undertaken
Mansfield area	 417	1,141
Worksop area	 390	899
Nottingham area	 355	454
	1.140	2.424
	1,162	2,494

### Geriatric Clinics

During 1966 Geriatric Clinic Sessions were arranged at Calverton (in a local general practitioners surgery) and at the Eastwood County Health Clinic, both operating on similar lines to the Geriatric Sessions at the Beeston County Health Clinic as described in my 1965 report.

The following figures indicate the work undertaken at these sessions in the year:—

Clinic	lumber of ssions held	Total Attendances	Cases referred to family doctors
Beeston	 44	135	14
Calverton	 9	61	10
Eastwood	 3	14	_
	56	210	24

### Diabetic Visitors

The following figures indicate the work which was undertaken in 1966 by the two Nurses employed by the Department and attached part-time to the Consultant Physicians in charge of Diabetic Clinics at Langwith Lodge near Mansfield and at Worksop:—

	Cases Referred	Home Visits Undertaken
Mansfield Area Worksop Area	 169 150	384 307
	319	691

### Medical Social Worker Service

The activities of the one Medical Social Worker who remained in employment by the Department at 1st January 1966 were already restricted following her absences through illness, and following termination of her appointment on 31st March there remained four vacancies on the Department's approved establishment of Medical Social Workers throughout the remainder of the year.

### Survey of Childhood Cancer

Co-operation continued with the Department of Social Medicine of Oxford University in investigating the deaths of children who had died from cancers and the parents of eleven such children who had died in 1965 were interviewed by Health Visitors and then by Medical Officers of the Department in 1966, together with the parents of a similar number of surviving children of comparable age and of the same sex who agreed to act as matched controls.

### Venereal Diseases

### Treatment of County Cases at all Centres

The number of cases resident in the County dealt with for the first time during each of the past five years according to returns from the Nottingham, Mansfield, Worksop, and Out-County Treatment Centres were as follows:—

		No	of cases dealt w	ith for the first ti	me
Ye	ear	Syphilis	Gonorrhoea	Other Conditions	Total
1962		 15	75	485	575
1963		 33	86	578	697
1964		 32	84	726	842
1965		 12	169	799	980
1966		 26	160	747	933

### Health Education

As against the two vacancies of Health Education staff reported in 1965, two appointments were made and the officers concerned will ultimately be undertaking a course leading to a Diploma in Health Education.

The Chief Chiropodist has been of great assistance to the Health Education team during the year by his valuable contributions on foot health and the future development of this work in programmes of Health Education for schools is assured.

Meetings of the various Home Safety Committees in the County have been covered by Departmental officers and a full-scale Exhibition was

organised by the West Bridgford Group, including a section mounted by the Health Education team. Both Committee and Press reported the Exhibition as a success, although the Health Education Officer feels that the general public is still somewhat apathetic towards the problem of Home Safety compared with Road Safety.

The 1966 County Hall Exhibition was on this occasion mounted in three parts dealing with the subjects of Cervical Cytology, Smoking, and Mental Health. As usual this Exhibition was left for a full month during which time there were opportunities for organised parties from schools to take advantage. This occasion was also very useful in enabling the distribution of Health Education literature to a varied cross-section of the public visiting County Hall on business.

In January the Health Education Officer attended the Central Council for Health Education's Annual Conference at Westminster on the subject of Food Hygiene.

The Bristol Seminar held in July was also attended. The course dealt with "Four Hazards of Prosperity—Drugs, Obesity, Smoking, and Alcohol". It was suggested that although drugs have most certainly become a problem, alcoholism remains one of the greatest medicosocial problems of the age. Those engaged in the promotion of child health are becoming more and more concerned with the problem of obesity in the age range 10-15 years, while those still working hard on the subject of "Smoking and Health" are, as always, faced with the problem of convincing an apathetic and apparently disinterested public of its great importance.

The Health Education Officer also attended the Annual School in Health Education held at Bangor and he reported once more that this Conference is invaluable in that it allows delegates from all over the world to exchange views and discuss problems peculiar to their own countries and environmental conditions.

The following tables give some indication of Health Education work undertaken in the County during the year:—

TABLE I

Meeting	s Addressed	Ordinary Meetings	Relaxation Class Talks	Training of Staff and Others	Total
(a) by Health	Education Officers	121	350	22	493
(b) by Part-tir	ne Lecturers	6	-		6
	nembers of the partment Staff	37	1	25	63
	Totals	164	351	47	562

TABLE II

Talk Subjects		By Health Education Officers	By Other Lecturers	Total
Health Education		79	7	86
Maternity and Child Welfare		261	4	265
Health of the Child and Adolescent		_	6	6
Sex Education		18	3	21
Mental Health		_	-	_
General Health Topics	***	47	32	79
Anti-Smoking		_	_	_
Accident Prevention		64	7	71
Prevention of Illness		22	1	23
Health Services Instruction		1	9	10
Totals		492	69	561

TABLE III

Audiences at Meetings Addressed	Men	Women	Boys	Girls	Total
(a) by Health Education Officers	619	4,990	585	1,103	7,297
(b) by Part-time Lecturers	166	40	20	20	246
(c) by other members of the Health Dept. Staff	254	780	95	496	1,625
Totals	1,039	5,810	700	1,619	9,168

TABLE IV

LEAFLETS AND POSTERS ISSUED IN THE YEAR

LEAFLETS	AND	PC	STER	s IS	SUED	IN	THE YEAR	
Subject (	Group						No. of Leaflets Issued	No. of Posters Issued
							42	11
Maternity and Child We				***	***		19,678	2
Health of the Child and	Adoles	cent					-	-
Sex Education							4,023	_
Mental Health	***	***		***	***		328	_
General Health Topics							11,122	244
Anti-Smoking			***				8,127	95
Accident Prevention							12,406	52
Prevention of Illness				***	***		3,682	72
Health Services Instructi	ion						-	-
					Totals	***	59,408	476
			TAB	LE \	V			
		-	FILMS	US	FD			
	Titl		12113	-			Times	Shown
HEALTH EDUCATION							Times .	211011111

	F	ILMS	US	ED			
Tit	tle						Times Shown
HEALTH EDUCATION							
"Pulse of Life"							54
"Ears and Hearing"							2
"Let them speak"							ī
"Tissues of the Human	Body"						i
"Thursdays Children"							i
"Body Defences agains							i
Dody Deletices agains	C D 13Ca						
MATERNITY AND CHIL	D WE	LFAR	E				
"To Janet, a Son"							127
"Your Children's Sleep							18
"The Mixture as Never	r Before	e''					3
"Jenny comes Home"					***		9
"Phenylketonuria"							4
"Breast Feeding"							1
"Your Children's Meal	s"			***			2
"Your Children Walki	ng"						1
SEX EDUCATION							
"Boy to Man"	***	***	***	***			6
"Growing Girls"							3
"Stage Nought"		***	***	***	***	***	4
"A Quarter of a Millio	n Teena	igers"		***		***	2
"Girl to Woman"		***				***	2
GENERAL HEALTH TO	DICE						
"Care of the Feet"	rics						2
		***		***	***		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
"A Tooth in Time"	to in!!			***	***	***	10
"Health Services in Bri	tain			***	***	***	4
"Teeth"		***	***		***	***	
"Another Case of Poise	oning						5
"Your Feet"	100	***		***	***	***	2
"Nothing to eat but Fo	DOG			***			14
"Your Digestion"	***	***		***	***		4
"Lifting Patients at Ho	me					***	2
"Lifting Patients in Ho	spital"		***	***		***	2
"What to Eat"	***	***	***			***	3
"Your Skin"		***				***	2

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TABLE VI

Subject	Centre	From To
Feet	Plains Road Harworth Huthwaite	3/1/66 1/2/66 2/2/66 4/3/66 8/3/66 31/3/66
Care of Children	Newark Agricultural Show	5th & 6th May, 1966
Health Education	County Hall	18/7/66 13/8/66
Careers	County Hall Mapperley Plains Road Carlton	11/7/66 only 20/9/66 22/11/66 22/11/66 31/12/66
Accident Prevention	West Bridgford, Millicent Road GEM Supermarket, West Bridgford	15/7/66 21/9/66 24/8/66 27/8/66
Home Accidents	Harworth Sutton	2/12/66 31/12/66 5/12/66 31/12/66
Smoking	West Bridgford, Millicent Road. Mansfield, Abbot Road	15/7/66 21/9/66 8/9/66 31/12/66
Cytology	Carlton	19/9/66 11/11/66
Vaccination and	Retford	22/12/66 31/12/66

### DOMESTIC HELP SERVICE

(Section 29)

### General Administration

The County is divided into ten districts on which the Home Helps are based. The teams vary in size from 60 to 110, according to case loads, which are related to populations. Ten District Organisers are employed, thirteen Assistant Organisers, and nine Clerks, five of whom are part-time. The County Organiser is based on County Hall and for administrative purposes the work forms part of the Preventive Health Service.

Staff changes during the year included the replacement of three Assistant District Organisers who left Retford, Mansfield and Sutton-in-Ashfield.

### Establishment and Recruitment of Home Helps

A recruitment campaign was conducted in the Spring in an effort to attract workers in the districts of Arnold and Carlton, Beeston and Stapleford, and West Bridgford and the surrounding rural areas. Miss Cottee, the County Organiser, toured the areas with a loud speaker recruiting van and this was supported by a special distribution of posters and press advertisements.

The establishment figure (based on the availability of labour rather than on the demand as shown by the ever increasing case load) remained unaltered from the previous year at a weekly average of 475 Home Helps (equivalent whole time) with a ceiling figure of 510 Home Helps (equivalent whole time). Although the ceiling figure was never quite reached (though by mid-March we were employing the equivalent of 502 whole time Helps) the overall improvement in recruitment compared with the previous year was substantial and is shown in the tabulated figures given below. The downward trend during the summer months was inevitable and was accounted for by the inability during the holiday months to replace those leaving the Service.

196		1965				
No. of Home Helps employed in last week of Qtr. ended	Actual	Whole time equivalent	No. of Home Helps employed in last week of Qtr. ended	Actual	Whole time equivalent	
March	759	491	March	. 729	465	
June	748	470	June	. 722	459	
September	741	464	September	. 717	453	
December	766	480	December .	. 748	462	

### The Cases Served

The total cases served continue to grow year by year and in 1966, 154 more cases were served than in the previous year. The breakdown of the figures is shown in the following table:—

Those over 65 years Those under 65 years	1966 4,903	1965 4,715
(a) Maternity (b) Chronic Sick & Tuberculous (c) Mentally III (d) Others	461 380 31 377 1,249 —	571 353 33 326 ——— 1,283
	6,152	5,998

Many of the Home Helps undertake three cases a day and but for their willingness to co-operate in this way we would be unable to cover the needs of many of the elderly sick and housebound people who have no relatives and who rely on the service not only for their domestic work but for their daily personal attention.

### Rate of Pay to Home Helps

The rate of pay was increased to 4/6d. per hour from 4/3\frac{3}{8}d. per hour on 3rd January as a result of reducing the working week from 42 to 40 hours but the increase scheduled for September by the recommendation of the National Joint Council for Local Authority Manual Workers was caught in the pay freeze and deferred for six months. The additional payment of 2d. per hour continues to be paid to those workers in tubercular households and households where there are other specified infectious diseases and also to the Home Helps who have undergone special training when working with problem families or in exceptionally neglected and dirty homes.

### The Charge for the Service

The Charge for the service remained at 4/6d. per hour. Provision is made for those who cannot afford to pay the standard charge by applying the County Council's scale of assistance. In February, free service was extended to all those in receipt of National Assistance irrespective of other income to the household, such as an assumed contribution from an earning member of the household, and also to those whose means were so limited that to pay a charge for the service would have rendered the applicant eligible for National Assistance.

### Home Helps Working with Problem Families

Sixteen cases were assisted during the year, no charge being made for the service. Although the degree of success varied with the type of family concerned, in all cases it would be fair to say that but for the untiring efforts of our trained Home Helps, many of the children concerned would have been taken into care because of the home conditions. One of the most common shortcomings in problem families is their failure to spend whatever income they have wisely. Gross arrears of rent are common but it is the shortage of housekeeping money resulting in near starvation by the end of the week that the Home Helps find so difficult to cope with.

### The Ancillary Services Family Help Service

This was introduced in 1956 and provides for resident or non-resident help for a family deprived temporarily of the mother. It has proved impracticable to administer because of lack of sleeping accommodation where it is desirable that the Home Help should be resident. In cases where the father has worked the normal daytime hours, all cases reported have been adequately covered by the provision of Home Help.

### Night Attendance Service

This is an emergency service to cover the needs of those who are too ill to be left at night and is mostly supplied to those living alone, though there are a few exceptions where relief is given to those who are unable to get sufficient rest because they are nursing chronic invalids. There are surprisingly few calls on this service and during the year five cases were served with a total of 238 hours.

Payment to Night Attendants was increased from 1/6d. to 3/6d. per hour with a minimum payment of £1 15s. 0d. per night in January 1966 and the standard charge for the service was increased from £1 0s. 0d. to £1 17s. 6d. per night, except in cases where the patient is unable to afford this when the scale of assistance is applied. Where a patient is already being afforded Home Help Service either free or on an assessed basis, no additional charge is made for night attendance.

### The Good Neighbour Service

This service provides for supportive help for invalids to be given by a willing neighbour for such tasks as the preparation of meals, feeding the patient, attention to fires, and personal attendance, and is intended to supplement the help provided through the Home Help service, thus enabling the services of the Home Help to be stretched over a greater number of cases. The "Good Neighbour" may be male or female and must be acceptable to the householder but close relatives are excluded. Enrolment is on a case basis.

This scheme was introduced as a pilot scheme in West Bridgford in 1965 and later was extended to cover the remainder of the County. Experience has proved that in many cases which seemed appropriate to such a scheme, it was usually found that neighbours were already helping considerably with the daily tasks described in the homes of invalids living near, but they refused to be paid for their services. During 1966, three cases were served under this scheme.

### MENTAL HEALTH SERVICE

(Sections 28 and 51)

### Administration

The year's highlight in the Mental Health Service was undoubtedly the opening of the first Psychiatric Day Centre at Sutton-in-Ashfield to which detailed reference is made later in the Report. The official opening was performed by the Parliamentary Secretary to the Minister of Health on the 11th October, 1966, although the first patients had been admitted in June.

Due to the conditions of financial stringency which obtained during the year, there was delay in starting work on the proposed Psychiatric Hostel at Mansfield and it now seems that this is unlikely to be ready for occupation before the Spring of 1968. Another scheme affected was that for the erection of a 200 place Adult Training Centre in the Nottingham area, now scheduled to commence building in 1967/68, and this in turn delays the proposals for the adaptation of the existing adult/junior Centre at Mapperley so as to provide additional junior and special care unit facilities.

The last three-year list issued by the Ministry did not include any of the Authority's Mental Health Schemes for 1968/9 and only included a further Psychiatric Hostel in the 1969/70 programme. However, further representations are being made in the hope that there may be some modification of these decisions so as to allow some of the more urgently needed schemes to proceed at an earlier date. In this connection, enquiries are in hand for sites for a number of projects on which it is hoped that work may be commenced not later than 1970/71.

The Command Paper published during the year on Development of Community Care in Health and Welfare provided an opportunity of comparing the trends of development in this Authority's plans with those revealed by aggregating figures on a national basis.

In terms of places per 1,000 population, the planned development up to 1976 of Training Centres, Hostels and Psychiatric Day Centres in this area compares reasonably with the average for the Country as a whole. However, it is clear that the intended social work staffing provision is likely to be less than adequate and will need to be reviewed if the ratios suggested in the Command Paper are to be achieved.

# Co-ordination with Regional Hospital Boards and Hospital Management Committees

Ministry of Health Circular 24/65 enclosed a Paper on improving the effectiveness of the hospital services for the mentally subnormal in which a number of suggestions were made on ways and means of securing closer co-operation between the three branches of the Health Service. One suggestion was that regional or local mental health liaison committees

should be established and, following discussions at Regional Hospital Board level, it was decided to set up local liaison committees for each of the subnormality hospital catchment areas. Accordingly, the Board established such a Committee for the catchment area of the Balderton Hospital, with which the County Council are mainly concerned, its membership being as follows:—

Area Medical Officer, Regional Hospital Board.
Medical Superintendent and Deputy, Balderton Hospital.
Physician-Superintendent, Aston Hall Hospital.
County Medical Officer and appropriate staff.
Medical Officer of Health, Nottingham, and appropriate staff.
Representative, Local Medical Committee.

The early meetings of the Committee were concerned with the examination and adjustment, where appropriate, of existing arrangements in the light of various recommendations made in the Ministry Paper and it was proposed to hold future meetings at approximately three-monthly intervals.

Reference was made in the last Report to the agreement with the Mansfield Hospital Management Committee for the joint use of social work staff in the Mansfield area, thus following the principle already established in connection with the Saxondale Hospital. In consequence, a female Social Worker was appointed during the year and her services are used jointly by the Mansfield Hospital Management Committee and the County Council with appropriate allocation of the cost involved. The services of the County Council's other Social Work staff in the area were also made available for hospital duties as required but, as at Saxondale, the continuing discrepancy between rates of pay for Hospital and Local Authority Psychiatric Social Workers proved to be an insurmountable obstacle both in regard to the allocation of costs and the joint appointment of additional Psychiatric Social Workers. However, recent indications are that a satisfactory compromise can be reached and it is hoped that this will pave the way for an effective strengthening of the existing Social Worker establishment.

As mentioned later in this Report, we have been grateful for the advice and support of Drs. Parkin and Moss, the local Consultant Psychiatrists, in the successful launching and operation of the Psychiatric Day Centre at Sutton-in-Ashfield. Dr. Parkin has also continued to act as the Authority's Psychiatric Adviser in relation to the Sherwood Industries Scheme and his personal knowledge of the patients at the Day Centre as well as of the requirements of the Industries has made selection of trainees for the latter a much less empirical procedure.

My personal membership of the Nottingham No. 3 and 4 Hospital Management Committees forms a valuable means of keeping both sides in touch with current and proposed developments in the Hospital and Local Health Authority fields and of fostering and maintaining essential personal contacts at executive level, without which the best laid schemes may fail.

Informally, the Authority's officers are in constant touch with the medical staff of the local Hospitals by personal day-to-day contact over matters of mutual interest, attendance at out-patient clinics, case conferences etc., and I am satisfied that this is the best way of developing the mutual respect and understanding which is essential in the best interests of all those who are our common concern.

### Training of Staff

In 1966, one Mental Welfare Officer returned on successful completion of a two-year Course for the Certificate in Social Work, another started his training and a third commenced his second year. Two female Training Centre Assistants completed a Diploma Course for Teachers of the Mentally Handicapped whilst a third embarked upon a similar course.

Plans to second another officer for social work training during the year had to be deferred until 1967 owing to staff shortages.

### Voluntary Associations

In the County area voluntary activity in the community has hitherto been largely concerned with the welfare of the subnormal and it is therefore pleasing to mention an item in this Report which refers to the voluntary help given in the formation of two Psychiatric Social Clubs. Experience there has already shown that such ventures are welcomed by those whom they are intended to help, and it is to be hoped that other similar Clubs will be launched elsewhere in the County in due course.

The main voluntary activity in the area continues to be undertaken by the several local Branches of the National Society for Mentally Handicapped Children with all of whom the most cordial relations exist. The Authority readily permits the use of its premises for various Society meetings and functions, and co-operates in every possible way in furtherance of the mutual aim to secure the well-being of the mentally handicapped.

The established practice of providing practical placements at Training Centres for Students from the Diploma Courses for Teachers of the Mentally Handicapped continued during the year.

### Work Undertaken in the Community Prevention of Illness, Care and After-care

The following tables show the number of patients referred during the year and the number under care on 31st December, 1966:—

# Referred during the year:

			Mentally III	=			Sever	Subnormal and Severely Subnormal	land			
Referred by	Under Age 16	der 16	16 2	16 and over	Total	Age	Under Age 16	16 and	16 and over	Total	Totals 1966	Totals 1965
	Σ	н	Σ	н		Σ	ш	Σ	ш			
General Practitioners	1	1	191	307	468	3	-	3	1	7	475	518
Hospitals—on discharge from in-patient treat-	1	2	75	8	195	-	1	7	1	м	198	135
treatment	1	-	87	122	210	-	1	1	-	2	212	82
Local Education Authorities	1	1	1	1	1	3	24	9	2	63	63	82
Police and Courts	-	1	3	26	28	1	1	1	1	1	58	19
Other Sources	-	1	93	177	271	4	3	9	7	20	291	403
TOTALS	2	3	*447	750	1,202	40	28	11	01	95	1,297	1,281

\* Includes three patients classified as Psychopaths.

# Under care at 31/12/66:

n.cooper		Under	Under age 16	16 and	16 and over	Totale	Totals
Caregory		Males	Females	Males	Females	Ocais	31/12/65
Mentally III		3	-	256	269	529	363
Psychopaths	:	-	1	4	1	4	9
Subnormal	:	5	3	341	226	575	635
Severely Subnormal	:	178	144	372	352	1,046	1,002
TOT	TOTALS	186	148	973	847	2,154	2,006

It will be noted from the figures given that the number of hospital referrals during the year was nearly double that for 1965, and this trend is also reflected in the increase from 363 to 529 in the number of mentally ill patients under community care at the end of the year and in the overall increase from 13,947 in 1965 to 15,380 in 1966 in the number of visits and interviews undertaken. The increasing demand on the time of the Social Workers thus affected underlines the urgent need for further increases in the staffing establishment if "community care" is to have any real meaning. In present circumstances, it is scarcely possible to offer other than a breakdown service which is inadequate from the client's point of view and unsatisfying and frustrating to the Worker.

### Psychiatric Day Centre, Sutton-in-Ashfield

As mentioned earlier in this Report, this sixty-place Centre was opened during the year. The first patients were admitted on 20th June, 1966 and the official opening took place in October.

As one of the first purpose-built Centres of its type, it has evoked widespread interest and it is already clear that its establishment has made a valuable contribution to the overall effectiveness of the psychiatric services in the Mansfield area. In this connection, the Authority was most fortunate in securing, by arrangement with the Sheffield Regional Hospital Board, the advisory services of the two Consultant Psychiatrists attached to the Psychiatric Unit of the adjoining King's Mill Hospital. Thus, not only has a more comprehensive and coordinated service become available to patients from the surrounding area, but the arrangement allows for a much greater degree of flexibility in disposal and of an informal interchange of facilities and services.

The purpose of the Centre, broadly speaking, is the rehabilitation of the psychiatrically ill patient after hospital treatment or, ideally, before his condition deteriorates to the point where hospital admission is unavoidable. It also serves to provide a sheltered supportive environment for the more chronically ill patient and a proportion of the places available is also reserved for a group of geriatric patients. The accommodation provided comprises rooms for general Occupational Therapy, carpentry, art and pottery; a rehabilitation kitchen; a beauty parlour; two day rooms and a children's room for the use of small children whose mothers would not otherwise be able to attend. There is also a kitchen, dining room, general purpose room, and offices for medical, social work, and other staff.

The staffing establishment comprises a Warden with mental nursing experience, two Occupational Therapists, three Craft Instructors, a female clerk, and the usual kitchen and domestic staff. Social work help is provided by the staff of the Mental Health District in which the Centre is situated. The day-to-day problems of Centre management are referred to a Committee which includes the two Consultant Psychiatrists, the Warden and Senior Occupational Therapist, together with the Authority's Medical Officer for Mental Health, Senior Mental Health Officer, and the Senior Social Worker from the area.

Patients are encouraged to travel to and from the Centre by public transport whenever possible, when fares are refunded, although use is made of the Authority's Ambulance Service in the case of some elderly, physically handicapped, or exceptionally, phobic patients. A mid-day meal is provided at the Centre at a charge of I/- per meal and a scheme of monetary rewards is now in operation.

The following table gives a summary of admissions and discharges in the period 20th June to 31st December, 1966:—

Diagnost			Ad	missi	ons (	Age	Gro	ups)			s-		Reg- er at	
Categor	У	15-	24	25-	44	45-	64	65 &	over	cna	rges		2.66	
		М.	F.	М.	F.	М.	F.	M.	F.	М.	F.	M.	F.	
Schizophrenia		 _	4	10	7	1	3	_	-	_	6	11	8	
Depression		 -	4	1	3	_	7	1	3	-	8	2	9	
Anxiety Neurosis		 2	_	_	3	5	1	_	_	6	-	1	4	
Personality Disorder		 1	3	-	_	_	_	_	_	-	_	1	3	
Epilepsy		 -	1	1	1	-	2	-	-	-	1	1	3	
Dementia	.,,	 -	-	-	L	-	1	4	4	-	2	4	4	
Totals		 3	12	12	15	6	14	5	7	6	17	20	31	

### Psychiatric Social Clubs

It is pleasing to be able to report the formation during the year of the first two Psychiatric Social Clubs in the County—at Worksop in May, and at Sutton-in-Ashfield in August. Both are run by Voluntary Committees, with the active support and participation of the Authority's Social Workers and other staff.

At Worksop, where hired premises are used, thanks are due particularly to the members of the local Lions Club who have given their enthusiastic support to the venture and to the consultant medical staff at Saxondale Hospital for their interest and encouragement. Financial help has been received from local businessmen and the League of Friends of Saxondale Hospital, whilst the County Council have also made a grant to facilitate the purchase of larger items of equipment.

The Sutton-in-Ashfield Club meetings are held in the Authority's Day Centre there and, although the Authority's officers had necessarily to play the leading part in the initial organisation and development, it is hoped gradually to increase the patients' representation on the Organising Committee.

Both Clubs have as their basic aim the provision of informal and interesting activities for patients, relatives and friends and attendances continue at a very satisfactory level.

### Training Centres for the Subnormal

The following table shows the numbers in attendance at Training Centres on 31st December, 1966:—

				N	umbers o	n Registe	rs		
				Ma	ales	Fem	ales		
Centr	e		Places	Under 16	16 and over	Under 16	16 and over	Total 1966	Total 1965
Mansfield			60	28	1	25	1	55	60
Mapperley			150	44	25	26	32	127	48
Newark			70	33	_	24	-	57	56
Rainworth	***	***	150	-	80	_	36	116	62
Retford	***		120	27	16	22	23	88	89
Out-County	Cent	res	-	-	_	2	1	3	2
Totals	s		550	132	122	99	93	446	417

\*By arrangement with the responsible Local Health Authorities

No additional Training Centre places were provided during the period although work on the adaptation to Kindergarten and Special Care Unit use of the accommodation previously used for adults at Mansfield was nearing completion by the end of the year. The staff at this Centre are to be congratulated on continuing to undertake their normally demanding duties under conditions of added discomfort due to the structural alterations which were in progress for a lengthy period of the year.

There continued to be an urgent need for more adult accommodation and the position at the Mapperley Centre in particular was very difficult by the end of the year in spite of the temporary transfer to Rainworth of forty adults who, until the Nottingham area is more adequately served, will thus block places intended for trainees from the Mansfield area where the waiting list continues to grow. Meanwhile, the remaining vacant places at the Rainworth Adult Centre must be retained so as to meet both the needs of the adjoining Hostel as additional residents are admitted and of those children attaining sixteen years of age in the Mansfield Junior Centre.

Necessary Kindergarten and Special Care Unit provision in the Nottingham area is also being delayed by the inability to transfer all the adults from Mapperley to other premises as the proposed adaptations at Mapperley cannot, of course, be undertaken whilst the accommodation is in use for adults. Hence, there will be a waiting list of children long before the adaptations can be completed.

### Hostels

The following table shows the number of subnormal and severely subnormal patients under hostel care during the year:--

Hostel		ces	In Residence at 1.1.66		Admi	ssions	Disch	arges	In Res	idence 12.66
	M.	F.	M.	F.	М.	F.	М.	F.	M.	F.
Rainworth (Adult)	20	10	6	-	6	_	_	_	12	_
Newark (Junior)	1	2	7	4	-	1	-	1	7	4
Totals	4	2	1	7		7		1	2	3

Staffing difficulties at the Rainworth Hostel persisted and the posts of Assistant Warden and Assistant Housemother were vacant for almost six months of the year. Not only did this severely curtail the off-duty time of the Warden and Housemother, it also restricted the number of new patients who could be admitted. In particular, the intention to admit patients of both sexes had to be temporarily shelved although it was felt that this would have been a most desirable development in creating a normal family environment.

It is interesting now to recall the apprehension of local residents in the early planning stages of the Rainworth project and the opposition to the establishment of such a Hostel in a residential area in spite of all attempts at reassurance. Not only have the fears expressed proved to be groundless, but the Authority have since had every reason to be grateful for the kindliness, tolerance, and generosity of the surrounding community. This augurs well for the establishment of further Hostels in other areas of the County.

It will be seen from the table above that there was little movement at the Newark Junior Hostel which, with the exception of one admission and one discharge, continued to accommodate the same children who were admitted when it opened in 1964. The children, mainly from homes in outlying rural areas, continued to attend the adjoining Training Centre, returning home at week-ends and holidays.

As in previous years, the opportunity was taken during the long Summer holiday to use the Newark Hostel to provide short-term care for twelve children over a period of three weeks and, at other Centre holiday times, the periods spent at home by the children normally in residence were restricted if their parents so wished.

The Warden and Housemother, who had been in post since the opening of the Hostel and had played an important part in establishing it on a sound basis, left towards the end of the year on appointment to similar posts at a larger hostel in another area.

The Hostel children continued during the year to participate in the activities of the local weekly Social Club organised by the Newark Branch of the National Society for Mentally Handicapped Children and we are most grateful to the Society for their interest and help both here and at the Training Centre, as well as to all the other local people, children and adults, who have helped in any way.

Further Hostels of this kind will need to be established in future years and experience at Newark has shown that the five-day Hostel is the best way of ensuring regular and beneficial contact between the child and his family and of maintaining staff morale. Inevitably, of course, there will be the occasional child whose need is for full-time care and here some special arrangement will obviously be necessary.

### Home and Group Teaching

The following is a summary of the work-undertaken during the year by the Home Teacher:—

Group Classes					Total
Number of Classes at 31.1 Mentally III Subnormal and Severely		rmal		2	3
Number on Register at 3	1.12.66	:			
Mentally III	1ales	Femal 9	es )	Total 10	
Subnormal and Severely Subnormal	2	6	,	8	18
Number of Sessions Held	in 1966	:			
Mentally III Subnormal and Severely	,			19	
Subnormal				53	72
Number of Attendances :					
Mentally III				133	
Subnormal and Severely Subnormal				189	322

### Individual Home Visits

Number under instruction at 31.12.66:

	Males	Females	
Mentally III	_	_	
Subnormal and Severe Subnormal	. 3	19	22
Number of Visits in 1966			664
			-

By some re-arrangement of her programme, the Home Teacher was able in August to introduce a weekly group class for the mentally ill at Worksop which was enthusiastically received and supported.

The subnormal patients receiving home visits are mainly older women who enjoy the social contact and find welcome diversion in the occupational activities provided for them.

### Hospital Care

The Authority's officers were involved during the year in securing treatment for persons suffering from mental disorder as follows:—

Action Taken		Me	ental IIIne	ss	Menta	I Subnor	mality	Tarala	Tasala
Action Taken		Males	Females	Total	Males	Females	Total	Totals	Totals 1965
Referred to Psychiatric Out-patient Clinics		94	164	258	129	91	220	478	362
Informal admissions		79	135	214	2		2	216	292
Admissions under Mental Health Act, 1959:—	***								
Section 26		17	9	26	-	_	_	26	15
Section 25		56	94	150	1	- 1	2	152	112
Section 29		53	96	149	2	1	3	152	207
Section 60/72		1	_	- 1	_	_	_	1	7
Totals		300	498	798	134	93	227	1,025	995

On 31st December, twenty-one subnormal and severely subnormal patients were considered to be in urgent need of long-term hospital admission as compared with twenty-six at the end of 1965. Low-grade children again comprised the majority of those on the waiting list and there seems to be little hope of an early solution to this particular problem.

In the sphere of mental illness, the outstanding placement difficulty undoubtedly concerns the aged mentally infirm. This is a constantly recurring and increasing problem which affects all branches of the Health Services as well as Welfare Authorities—to say nothing of relatives who can find little or no relief, or even hope—and one which has yet to be tackled effectively. Until this happens, the pressure on Services such as Home Help and Home Nursing can confidently be predicted to increase, as can the distress of the aforementioned relatives.

Towards the end of the year, the Ministry of Health drew the attention of Local Authorities and Hospitals throughout the country to the apparently excessive and possibly improper use of Section 29 of the Mental Health Act in securing the admission of patients to Hospital for observation, and steps were taken locally to ensure, insofar as this concerned the Authority's Mental Welfare Officers, that this procedure was used strictly in accordance with the requirements of the Act.

### Short-term Care

Short-term care was arranged during the year in the following cases:—

Catagory	Ma	les	Fem	ales	Totals	Tatala
Category	Under 16	16 and over	Under 16	16 and over	Totals	Totals 1965
Subnormal	_	14	1	20	35	28
Severely subnormal	72	86	41	49	248	320
Totals	72	100	42	69	283	348

For the first time since the introduction of the short-term care scheme in 1952, there was a reduction in the number of periods of care provided as compared with the figures for the previous year. This was due to an outbreak of Dysentery at the Balderton Hospital (which nowadays provides most of the beds for temporary care), resulting in the closure of certain Wards for lengthy periods. Hence, a considerable number of bookings had to be cancelled and, though alternative accommodation was found for most of the more urgent cases, many families were denied the relief which these arrangements have customarily afforded them.

### SECTION VII

### NATIONAL ASSISTANCE ACTS, 1948 and 1951

### (I) Incidence of Blindness

### (a) Follow-up of Registered Blind and Partially Sighted Persons

(i) Number of sees registered	Cause of Disabili			ty		
(i) Number of cases registered during the year in respect of which para. 7 (c) of forms B.D.8 recommends:—	Cataract	Glaucoma	Retrolental Fibroplasia	Others		
(a) No treatment	23	9	_	59		
(b) Treatment (medical, surgical or optical)	74	13	_	52		
(c) Treatment (Hospital supervision)	13	11	1	15		
(ii) Number of cases at (i) (b) above which on follow-up action have received treatment	45	12	113.14	31		

### (b) Ophthalmia Neonatorum

(i)	lot	al number of cases	 	4					
(ii)	Nu	mber of cases in w	hich:-	-					
	(a)	Vision Lost						 	Nil
	(b)	Vision Impaired	***	***	***		***	 	Nil
	(c)	Treatment conti	nuing	at end	of year	·		 	Nil

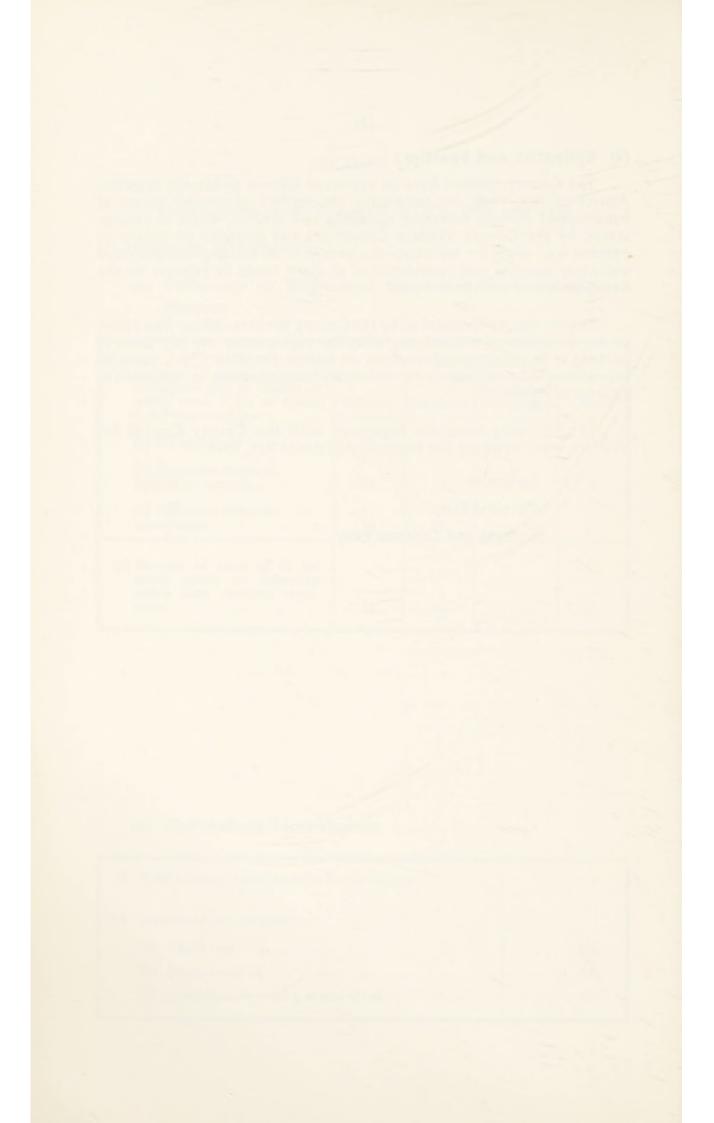
### (2) Epileptics and Spastics

The County Council have an approved scheme under the National Assistance Act, 1948, for promoting the welfare of general classes of handicapped persons including epileptics and spastics, which is administered by the County Welfare Committee and designed to ensure to persons who apply for assistance the benefit of all existing statutory and voluntary services and consideration of their needs in relation to the development of welfare services.

The service is administered by the County Welfare Officer who refers to me questions of medical eligibility for registration and any cases of persons suffering from tuberculosis or mental disability which come to his notice. The assistance of voluntary organisations is enlisted in appropriate cases.

The following cases are registered with the County Council for Welfare Services under the National Assistance Act, 1948:—

Epileptics			 	 79
Cerebral Palsy			 	 80
Epilepsy and Ce	rebra	l Palsy	 	 3



SECTION VIII

## STATISTICAL TABLES

TABLE I

Vital Statistics for the Year 1966 BOROUGHS AND URBAN DISTRICTS

			_		_	_			_		-	-				
sesses	Death Rate from Tuberculous per 1,000 of pop	0.02	0.03	0.08	1	90.0	0.03	0.05	1	0.12	0.05	0.04	0.02	1	1	0.04
sisoluo	Death Rate fr Pulmonary Tuber per 1,000 of popi	0.02	0.03	0.08	1	0.03	0.03	0.02	1	0.08	1	0.04	0.02	1	1	0.02
	Rate (Corrected)	11.6	12.6	12.1	12.4	9.6	10.8	0.11	1.4	12.5	13.0	12.6	4.4	= .3	10.8	8
Deaths	Rate (Crude)	11.7	9.01	12.4	13.1	8.0	8.4	4.6	6.01	0.01	9.01	9.0	12.1	8.3	13.3	10.5
	Number	646	375	308	245	241	513	389	123	254	236	210	164	901	370	4.507
under	Rate per 1,000 Live Births	20.6	29.0	22.2	6.7	1.2	6.61	17.9	1	8.61	6.91	23.1	22.1	25.5	9.6	18.8
Deaths I	Number	61	6	6	2	9	22	4	1	6	7	=	15	7	4	4
	Rate per 1,000 Live and Stillbirths	1	1	1	1	1	1	1	1	2.2	1	1	1	1	1	1.0
Maternal	No. of Maternal Deaths	1	1	1	1	1	1	1	1	-	1	1	1	1	1	-
irchs	Rate per 1,000 Live and Stillbirths	24.3	22.4	9.4	16.4	12.9	0.91	1.01	20.6	17.3	18.9	16.5	20.2	3.6	9.5	16.7
Stillbirths	Number	23	15	9	S	7	8	00	S	80	8	ω	4	-	4	130
59	Rate (Corrected)	17.1	-8	16.5	15.8	16.7	17.1	6.81	20.5	18.	17.8	18.5	17.1	21.4	14.5	17.5
e Births	Rate (Srude)	16.7	18.5	16.3	16.0	17.7	18.2	18.9	21.1	17.9	9.81	20.3	8.91	21.4	4.9	17.8
Live	Number	924	959	406	299	537	1,107	781	238	455	415	476	089	274	4 5	7 663
ayı	Population or basemissa el 10 albbim	55,260	35,480	24,870	18,700	30,260	092'09	41,260	11,270	25,460	22,370	23,420	40,580	12,790	27,840	430 320
1	Population Census 196	53,218	34,311	24,651	17,792	26,829	55,995	38,815	10,607	23,269	21,686	20,197	40,441	909'11	26,973	406.390
plodes	Persons per hou el susne el su	3.06	3.19	3.1	3.06	3.01	3.02	3.09	3.19	3.09	3.13	3.25	3.09	3.29	2.84	3.07
	Separate households et Census as	17,402	10,771	7,932	5,809	8,912	18,543	12,862	3,324	7,541	6,928	6,216	13,079	3,531	9,507	132 357
913	A 19q snos19q	7.9	2.0	7.4	4.0	6.7	4.6	10.2	9.6	6.3	3.8	8.4	3.9	8		-5
	Area in Acro (Land and Inla (1932W	7,009	17,936	3,364	4,657	4,506	6,468	4,017	1,178	4,032	5,830	4,831	10,507	7,171	3,046	84 552
	BOROUGHS AND URBAN DISTRICTS	MANSFIELD (Borough)	WORKSOP (Borough)	NEWARK (Borough)	EAST RETFORD (Borough)	ARNOLD	BEESTON & STAPLEFORD	CARLTON	EASTWOOD	HUCKNALL	KIRKBY-IN-ASHFIELD	MANSFIELD WOODHOUSE	SUTTON-IN-ASHFIELD	WARSOP	WEST BRIDGFORD	TOTALS

### TABLE II

## NOTTINGHAMSHIRE RURAL DISTRICTS

# Vital Statistics for the Year 1966

sastasio	Death Rate fro Tuberculous D per 1,000 ofpop	1	1	0.10	1	0.12	1	0.02
rculosis	Death Rate f PulmonaryTuber per 1,000 of pop	1	1	0.05	1	90.0	1	0.01
	(Corrected)	9.	9.3	10.9	9.	6.	= 3	10.9
Deaths	Rate (Crude)	9.6	9.3	8.9	8.4	1.0.1	9.6	9.4
	Number	149	332	7	200	164	498	2,006
under	Rate per 1,000 Live Births	55.	17.1	19.4	7.5	20.1	25.2	6.91
Deaths under I year of age	Митрег	<u>e</u>	3	7	m	9	24	99
	Rate per 1,000 Live and Stillbirths	1	<u>m</u>	- 1	1	1	ı	0.3
Maternal	Macernal Maternal Deaths	-	-	1	1	1	1	-
irchs	Rate per 1,000 Live and Stillbirths	12.2	1.8	16.4	7.5	16.5	12.4	13.7
Stillbirths	Number	4	4	9	m	5	12	54
27	(Corrected)	16.5	4.8	17.9	17.1	17.7	18.1	17.5
Live Births	Rate (Crude)	17.0	21.2	89.	16.7	4.8	8.3	18.3
Liv	Number	1,134	759	360	399	298	952	3,902
ehe.	oiselugoq os basemisea el lo albbim	66,520	35,880	19,150	23,840	16,190	52,100	213,680
	Population Census 19	60,225	25,170	17,861	22,013	13,580	45,850	184,699
196 plodes	Persons perhous st Census	3.12	3.29	3.39	3.37	3.17	3.20	3.22
sp	Separat househol at Census	19,278	7,636	5,270	6,536	4,286	14,316	57,322
913/	Persons per A	0.95	0.53	29.0	0.22	0.39	0.44	0.49
phelo	Area in All Indian Area In Variet V	69,825	67,583	28,515	111,034	41,550	118,587	437,094
		1	:			1		
	CTS	:	:	- 1	-	1	1	1
	DISTRI	1	:	-	ORD	1		TOTALS
	RURAL DISTRICTS	BASFORD	BINGHAM	WORKSOP	EAST RETFORD	NEWARK	SOUTHWELL	101

TABLE III

Vital Statistics for the Year 1966 WHOLE ADMINISTRATIVE COUNTY

_				
seases	Death Rate from Tuberculous por 1,000 of pop	0.04	0.02	0.03
sisoino.	Death Rate fr Pulmonary Tuber god lo 000,1 nad	0.02	10.0	0.02
	Rate (Corrected)	8.	10.9	5
Deaths	Race (Crude)	10.5	4.6	10.1
	Number	4,507	2,006	6,513
eaths under year of age	Rate per 1,000 Live Births	18.8	6.91	18.2
Deaths under I year of age	Number	<u> </u>	99	210
	Rate per 1,000 Live and Stillbirths	1.0	0.3	0.2
Maternal Mortality	No. of Maternal Deaths	-	-	2
irchs	Rate per 1,000 Live and Stillbirths	16.7	13.7	15.7
Stillbirchs	Number	130	54	184
5	Rate (Corrected)	17.5	17.5	17.4
Live Births	Rate (Crude)	17.8	18.3	18.0
5	Number	7,663	3,902	11,565
ph:	noiseluqoq os basemiseo ol 10 albbim	406,390 430,320 7,663	213,680	089 644,000 11,565
-	Population Census 196	406,390	184,699	591,089
	Persons per hou at Census 19	3.07	3.22	3.12
	Separate households at Census 19	5.1 132,357	57,322	1.23 189,679
910	A 19q snos19q	5.1	0.49	
	states in Acrestal bas bas bas (reseW	84,552	437,094	521,646
		URBAN DISTRICTS	RURAL DISTRICTS	ADMINISTRATIVE COUNTY
			-	

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1	_	Infan	Infancile Mortality	reality			Neo-Na	Neo-Natal Mortality	tality	-	Ш	Early No	Neo-Nata	_	-	-	erinata	Perinatal Mortality	llity	_		Stillbi	Stillbirth Rate		
		A Pun	(All Infants Under One Year)	Year)			(Infar	(Infants Under One Month Only)	nly)		Σ5	Mortality Under O	Mortality (Infants Under One Week Only)	s <del>X</del>		S)	Stillbirths & Under One	Dne We	Deaths Week)			Per 1,00 Stil	1,000 Live and Scillbirchs	pu.	
41	1967	1963	1964	1965	1966	1962	1963	1964	1965 19	19961	962 19	693 15	1964 19	965 19	19961	962	1963	964	1965	1 996	962	963	964	1965	996
England and Wales	21.6	21.1	20.0	0.61	18.9	15.1	14.2	13.8	13.0	2.9	3.0	2.3	2.1	4.	=	30.8	29.3 2	28.2 2	26.9 2	26.3	- 0	17.2	4.9	5.8	5.3
Whole County	22.0	20.1	19.8	18.2	18.2	15.5	12.7	13.7	13.1	1.7	12.7	1.1	5.	0.1	0.2	30.9	27.6 2	27.6 2	26.8 2	25.7	8.5	16.7	16.2	0.9	15.7
Aggregate of Urban Districts .	22.1	19.8	20.0	6.91	18.8	15.2	12.9	14.4	11.8	2.0	12.0	1.5	2.0 10	0.0	9.0	29.8 2	27.2 2	26.8 2	26.1 2	1 1.72	0.8	0.91	6.4	6.3	6.7
Aggregate of Rural Districts .	21.6	5 20.8	19.4	20.6	16.9	1.91	12.3	12.3	15.8	0.1	1.4	0.4	0.5	3.0	5.6	33.4 2	28.3 2	29.4 2	28.3 2	23.0	5.6	1.8.1	1.6	9.6	13.7
Mansfield M.B	26.0	20.1	28.5	4	20.6	6: =	17.2	18.3	7.6	6.1	8.01	5.1	3.5	4.7	7.6	30.8	33.6	31.2	8.7 3	33.8	20.2	8.8	1.9	4.0	24.3
Worksop M.B	25.4	13.3	23.1	13.1	29.0	13.5	8.8	15.9	9.9	8.3	7 2.01	7.4	3.0	1 6.6	6.8	29.4 2	23.2 2	21.5 2	27.4 3	38.7	1.61	0.9	9.6	7.7	22.4
Newark M.B.	18.8	8 18.3	21.9	22.8	22.2	12.5	6.9	15.3	12.7	4.8	10.4	1 6.9	3.1	5.1	2.3	1 22.7	8.1	25.9	2.6 2	26.7	2.4	E.3	3.0	7.6	4.6
East Retford M.B.	24.5	5 17.9	23.3	8:	6.7	21.0	6: 1	20.3	6.8	3.3	4.0	6.8	7.4	6.9	3.3	47.3	17.7	42.5	8.8	19.7	33.8	8.8	25.5	3.0	4.9
Arnold U.D	15.8	13.0	10.9	17.2	11.2	10.5	9.3	9.1	13.4	9.3	8.8	7.4	9.1	3.4	9.3	12.2	9.9	13.1	33.8 2	22.1	10	9.5	9.0 2	20.6	12.9
Beeston & Stapleford U.D.	11.7	7 19.4	14.0	13.5	6.61	11.7	13.8	12.1	9.0	1.7	9.0	2.9	1.3	6.3	1.7	9.5	24.6 2	21.2	20.3 2	27.6	9.0	8	1.0		0.9
Carlton U.D	31.7	7 14.6	22.4	6.61	17.9	23.1	10.2	14.5	14.6	5.	8.7	8.8	3.2	1.3	0.2	1.88	17.4 2	26.0 2	22.4 2	20.3	8.6	8.7	3.0	9.2	1.01
Eastwood U.D	17.3	3 33.6	4.5	12.6	1	17.3	21.0	4.5	12.6	1	3.0 16	8.9	4.5 12	2.6	1	25.6 3	37.0	7.9 2	28.8 2	20.6	2.8	1 9.02	3.4	6.5	20.6
Hucknall U.D	22.4	4 16.9	22.8	27.7	19.8	15.7	10.5	18.7	17.8	0.1	8.9	0.5	2.4	3.9	0.1	28.5	8.8	28.6 2	27.4 2	1 1.87	6.7	4.00	6.3	3.7	17.3
Kirkby-in-Ashfield U.D.	27.7	7 32.3	23.7	9.61	16.9	25.4	23.0	15.1	9.8	2.0 2	20.8 20	20.7	9.8	9.6	2.0	45.9 4	40.6 2	21.3 31	-	30.7 2	22.6 2	20.3	2.8 21	5	6.8
Mansfield Woodhouse U.D.	24.0	0 12.8	24.5	16.9	23.1	10.0	8.5	18.2	12.7	4.7	0.01	8.5	6.4	9.0	0.5	38.9 3	39.2 3	34.0 33	35.1 2	26.8 2	29.2	30.9	7.9 2	24.8	6.5
Sutton-in-Ashfield U.D.	24.4	4 29.6	4.3	20.2	22.1	4.4	Ξ.3	4.	13.0	7.6	1.01	8.5	0.0	3.0	3.2	35.0 3	31.6	28.0 39	39.3	33.1 2	25.2	23.4	8.2 26.	9	20.2
Warsop U.D	25.0	34.2	32.0	11.9	25.5	25.0	25.6	18.3	91.19	0.9	25.0 25	25.6	8.3	6.1	7.3	39.4 5	50.0	57.0 3	34.7	1 6.0	4.8	25.0 3	39.5 23.	3.2	3.6
West Bridgford U.D	20.3	3 17.7	9.6	22.3	9.6	18.0	0.11	7.9	17.9	7.2	= =	0.1	7.9 17	7.9	7.2 2	26.6 2	28.2 2	11.3	35.1	6.7	5.5	17.4	3.6	7.5	5.6
Basford R.D	16.7	7 17.9	1.6.1	25.8	1.5	6.7	9.4	8.5	16.4	6.7	7.0	7.7	7.6 13	3.8	6.2	32.6 2	25.2 2	23.3 28	60	8.3 2	25.8	17.6	5.8	5.3	2.2
Bingham R.D	20.0	0 17.3	10.3	12.5	17.1	18.0	8.7	7.3	=	8.	0.8	6.9	5.9	1 1.6	1.9	1 27.7	5.5	8.8 20	20.6 2	29.7	6.6	9.8	3.0	0.1	8.1
Worksop R.D	32.4	4 4 .3	37.6	34.3	19.4	18.9	22.0	26.9	31.7	8.3	16.2	6.5 2	24.2 29	29.0	8.3	37.0 4	45.5 4	42.2 54	0	24.6 2	21.2	29.4	8.5 2	5.7	6.4
East Retford R.D	25.1	7.5	22.6	14.9	7.5	19.5	5.0	19.8	12.4	7.5	5.6	5.0	6.9	6.6	2.5	27.6 2	26.8 3	33.3 24	10	0.0	8.3	22.0	6.7	4.7	7.5
Newark R.D	22.1	14.3	6.3	25.2	20.1	18.9	10.7	1	22.1	3.4	18.9	0.7	1	6.8	3.4	28.1 2	28.1 3	36.4 31.	7	29.7	4.6	17.5	36.4	12.5	6.5
Southwell R.D	22.6	6 26.0	26.7	15.9	25.2	19.4	17.7	16.7	11.7	5.8	16.1	5.6	13.3	7.4	3.7	39.9	33.7	35.9 24	0	25.1 2	24.2	8.4	22.8	6.7	12.4
	-						1	1	-	1	-	-	-	i	1	-	-	-	١	1			١	١	1

IABLE	VNOI	11110	IAII	SHIKE		Abstr	act of	VILA	ii Sta	LISTIC
Year	Estimated Population at the middle of the year	Excess of Births over Deaths	Persons per Acre	Separate Families	Persons per Household	Registered Births	Births per 1,000 of the population	Deaths under I year per 1,000 Births	Net Deaths	Net Death Rate per 1,000 of the population
1917 1918 1919 1920 1921 1922 1923 1924 1925 1926 1927 1928 1929 1930 1931 1932 1933 1934 1935 1936	344,822 339,456 366,331 380,928 381,969 386,130 388,019 391,700 393,400 408,100 422,700 429,300 439,400 447,900 447,900 451,600 444,970 448,500 453,500 459,000 470,900	3,372 1,725 2,948 5,667 4,774 4,177 3,763 3,715 3,373 3,310 2,984 3,549 2,242 3,261 2,617 2,821 2,036 2,395 2,382 2,005 2,218 2,796 2,511	·66 ·65 ·70 ·73 ·74 ·74 ·75 ·75 ·75 ·78 ·81 ·82 ·84 ·86 ·86 ·86 ·87 ·86 ·88 ·89 ·90 ·91	*109,674	3.9	7,589 7,742 7,507 9,836 9,187 8,316 8,023 8,085 7,921 7,739 7,613 7,941 7,517 7,746 7,695 7,534 6,945 7,042 7,083 7,033 7,318 7,549 7,847	19·7 20·3 19·6 25·8 24·1 21·5 20·6 20·6 20·1 19·4 18·6 17·5 17·6 17·2 16·7 15·5 15·7 15·6 15·3 15·7 16·0 16·4	95 100 95 85 86 69 77 73 69 64 76 62 72 66 68 54 56 58 59 46	4,217 6,017 4,559 4,169 4,413 4,139 4,260 4,370 4,548 4,429 4,629 4,392 5,095 4,485 5,078 4,713 4,909 4,647 4,701 5,028 5,100 4,753 5,336	12·2 17·7 12·4 10·9 11·5 10·7 11·0 11·2 11·6 11·1 11·3 10·4 11·8 10·2 11·3 10·4 10·9 10·4 10·9
1940 1941 1942 1943 1944 1945 1946 1947 1948 1949 1950 1951	479,900b 483,240 492,750 481,200 472,300 474,960 475,910 495,620 505,690 518,300 523,160 533,870 535,800	1,735 2,501 3,755 3,946 5,125 4,068 4,693 5,114 4,483 3,562 3,114 2,547 3,244	.92 .94 .92 .90 .91 .95 .97 .99 .99 I.01 I.02 I.02	156,581		7,610 7,954 8,659 9,255 10,343 9,096 10,001 10,673 9,486 9,098 8,683 8,551 8,515	15·7 16·1 18·0 20·2 21·8 19·1 20·2 21·2 18·3 17·4 16·3 15·9 15·9	58 62 48 47 47 44 41 41 42 32 34 29·4 29·3	5,875 5,453 4,904 5,309 5,218 5,028 5,308 5,559 5,003 5,536 5,571 6,004 5,271	12·2 11·1 10·2 11·2 11·0 10·5 10·7 11·0 9·6 10·6 10·4 11·2 9·8
1953 1954 1955 1956 1957 1958 1959 1960 1961 1962 1963 1964 1965 <b>1966</b>	534,400 541,400 545,900 550,600 554,800 563,300 569,800 575,400 583,730 593,270 602,160 610,970 623,190 634,320 644,000	3,168 3,115 3,140 3,171 3,878 3,703 4,082 4,362 4,362 4,328 4,770 5,116 5,532 5,419 5,052	1.04 1.05 1.05 1.06 1.08 1.09 1.10 1.12 1.14 1.15 1.17 1.19 1.22 1.23	    189,679 	3-1 	8,625 8,601 8,718 8,906 9,372 9,685 9,964 10,295 10,600 11,296 11,515 11,866 11,732 11,565	15·9 15·7 15·8 16·0 16·6 17·0 17·3 17·6 17·9 18·8 18·8 19·0 18·5 <b>18·0</b>	29·3 28·1 27·2 24·6 23·8 20·8 21·0 23·0 17·7 22·0 20·1 19·8 18·2 18.2	5,457 5,486 5,578 5,735 5,494 5,982 5,882 5,933 6,272 6,526 6,399 6,334 6,513	10·1 10·0 10·1 10·3 9·8 10·5 10·2 10·6 10·8 10·5 10·2 10·0 10·1

<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.
† Special constructed figure supplied by Registrar-General in consequence of change of boundaries.
† Actual mid-year population.

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	Total	County	3,437	6,513	- 4 2 3 2 5 5 4 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5
		75	355	830	-
		-65	325	537	-   4
		-55	190	315	- -  -            -048  24000000000000000000000000000000000
icts	RS	45	72 59	131	
Districts	YEARS	35	35	53	-
Rural	Z	25_	17	23	
o	AGE	-15	40	24	111111111111111111111111111111111111111
Aggregate		5	90	13	1111111111111-1-11111111111111111111111
Aggr		-	9 80	4	
	4 wk8	l year	0.4	23	111111111111111111111111111111111111111
	under	4 %	26	43	111111111111111111111111111111111111111
	A	Ages	1,059	2,006	
		75-	795	1857	0-     04
	Ì	65-	664	1187	1 4 2 3 4 2 5 4 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5
	S	55-	489	740	-                       0.4 2 0 - 0.88 44 w w u w w w w w w w w w w w w w w w
icts	YEARS	45-	202	340	w   u   -                   - 8 - 20 - 50 852 -   442 84 85 80 -   242 40 - 1     442 - 2
Distr	Z	35-	54	Ξ	-
of Urban Districts	W I	25-	29	43	
of Ur		15	29	38	111111111111111111111111111111111111111
		7	-8	25	
Aggregate		-	100	22	-
4	4 wk&	I year	27 25	52	
I	under	4 WK.	35	92	
	A	Ages	2,378	4,507	- + + 25 = 25 = 25 = 25 = 25 = 25 = 25 =
	Sex		Σц		<b>Σα Σα Σ</b>
			-		A444444444 : 14444444444444 : 16444444
			:	:	Tuberculosis Respiratory  Do. Other  Syphilitic Disease  Diphtheria  Whooping Cough  Acute Poliomyelitis  Measles  Other Infective and Parasitic Diseases  Malignant Neoplasm  Do. Lung. Bronchus  Do. Lung. Bronchus  Do. Lung. Bronchus  Do. Lung. Bronchus  Other Mailgnant and Lymphatic Neoplasm  Leukaemia, Aleukaemia  Diabetes  Vascular Lesions of  Nervous System  Coronary Disease, Angina  Hypertension with  heart disease  Other Circulatory Disease  Other Circulatory Disease  Other Circulatory System  Other Circulatory System  Hyperplasia of Prostate  The Spiratory System  Other Ostomach  and Diarrhoea  Nephritis and Nephrosis  Hyperplasia of Prostate  Pregnancy, Childbirth, Abortion  Congenital Malformations  Other Defined and Ill-Defined  Diseases  Motor Vehicle Accidents  Suicide  Homicide and  Operations of War
sath				:	ions stars sease sease nother nother not
	Cause of Death				Ocher rease  ough al Infect nyelitis we and liseases liseases liseases liseases liseases and lisease atory Disease
	ise o		SES	:	October Sisses of the control of the
	Cai		CAU	ILS	uberculosis Respira  Do. Other  yphilitic Disease  liphtheria  Whooping Cough  deningococcal Infect  Yhooping Cough  Parasitic Diseases  Alignatic Diseases  Alignatic Diseases  Alignatic Diseases  Do. Lung. Bro  Do. Lung. Bro  Breast  Do. Lung. Bro  Breast  Do. Lung. Bro  Breast  Do. Uterus  Stomach  Lymphatic Noeplas  Nervous System  Oronary Disease, A  System  Oronary Disease, A  System  Oronary Disease, A  System  Oronary Disease of  Respiratory System  Oronitis  Torchitis  To
			ALL CAUSES	TOTALS	Tuberculosis Respiratory  Do. Other  Syphilitic Disease  Diphtheria  Whooping Cough  Meningococcal Infections Acute Poliomyelitis  Parastic Disease  Do. Breast  Do. Breast  Do. Breast  Do. Breast  Tomach  Do. Uterus  Vascular Lesions of Nerrous System  Vascular Lesions of Nerrous System  Phent of Stomach  Coronary Disease of Respiratory System  Hypertension with  Phent Circulatory Disease Influenza  Other Diseases of Respiratory System  Pregnardy System  Other Diseases of Prostate  Pregnardy System  And Diarrhoea  And Diarrhoea  Mother Defined and Ill-Def Diseases.  Diseases  Motor Vehicle Accidents  Suicide  Homicide and Operations of War
	óŽ				- 0 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5
	_			-	36 33 33 33 33 33 33 33 33 33 33 33 33 3

