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### **Contributors**

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1955

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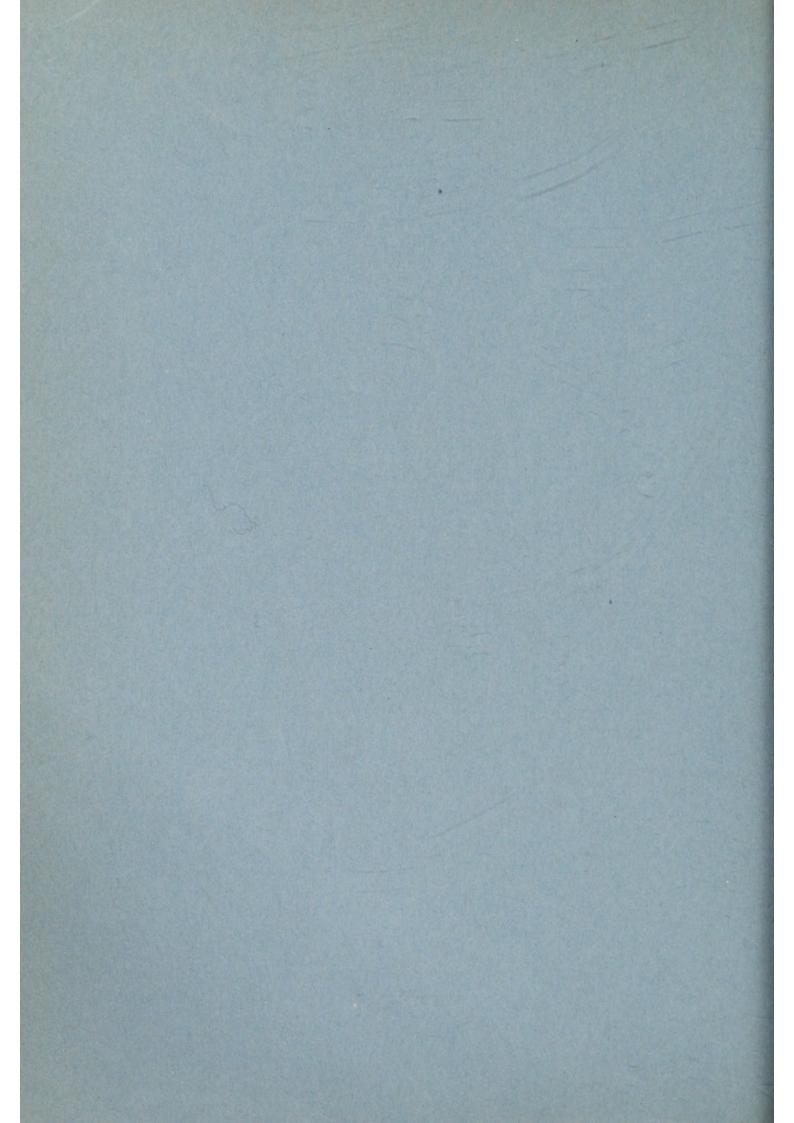


# THE HEALTH OF ROTHERHAM 1955

ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH

AND

ANNUAL REPORT OF THE PRINCIPAL SCHOOL MEDICAL OFFICER





COUNTY BOROUGH OF ROTHERHAM

# REPORT

BY THE

MEDICAL OFFICER OF HEALTH

FOR THE YEAR

1955

ROTHERHAM:
HENRY GARNETT & CO. LTD., "ADVERTISER" OFFICE
1956

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### HEALTH COMMITTEE

NATIONAL HEALTH SERVICE ACTS, 1946-1952

The Health Committee of the Council is concerned with all matters of public health and the operation of all services under the above Acts.

### MEMBERSHIP

(as at 31st December, 1955)

HIS WORSHIP THE MAYOR (COUNCILLOR L. KIRK)

Chairman: ALDERMAN A. BUXTON, J.P.

Vice-Chairman: COUNCILLOR A. WILDE

COUNCILLOR R. HAGUE ALDERMAN MRS. F. L. GREEN, J.P.

ALDERMAN MRS. M. H. MOORHOUSE, J.P. COUNCILLOR MRS. E. McNicholas

ALDERMAN F. C. WOFINDEN COUNCILLOR J. E. MICKLETHWAIT

COUNCILLOR W. BEEVERS COUNCILLOR H. PAYNE COUNCILLOR P. C. WRIGHT

COUNCILLOR C. DUFFIELD

COUNCILLOR J. FORD One vacancy

### GENERAL PURPOSES SUB-COMMITTEE

ALDERMAN MRS. M. H. MOORHOUSE, J.P. ALDERMAN A. BUXTON, J.P. (Chairman)

COUNCILLOR A. WILDE (Vice-Chairman) ALDERMAN F. C. WOFINDEN

HIS WORSHIP THE MAYOR COUNCILLOR C. DUFFIELD COUNCILLOR H. PAYNE

(COUNCILLOR L. KIRK)

ALDERMAN MRS. F. L. GREEN, J.P. One vacancy

### MENTAL HEALTH SUB-COMMITTEE

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COUNCILLOR A. WILDE (Vice-Chairman) COUNCILLOR I. FORD

HIS WORSHIP THE MAYOR COUNCILLOR MRS. E. McNicholas (COUNCILLOR L. KIRK) COUNCILLOR J. E. MICKLETHWAIT

COUNCILLOR P. C. WRIGHT ALDERMAN MRS. F. L. GREEN, J.P.

### SANITARY SUB-COMMITTEE

ALDERMAN A. BUXTON, J.P. (Chairman) COUNCILLOR W. BEEVERS

COUNCILLOR C. DUFFIELD COUNCILLOR A. WILDE (Vice-Chairman)

HIS WORSHIP THE MAYOR COUNCILLOR I. FORD

COUNCILLOR H. PAYNE (COUNCILLOR L. KIRK)

ALDERMAN F. C. WOFINDEN COUNCILLOR P. C. WRIGHT

### NURSING SUB-COMMITTEE

ALDERMAN A. BUXTON, J.P. (Chairman)

COUNCILLOR A. WILDE (Vice-Chairman)

HIS WORSHIP THE MAYOR

(COUNCILLOR L. KIRK)

ALDERMAN MRS. M. H. MOORHOUSE, J.P. MISS E. M. RUSHFORTH

COUNCILLOR W. BEEVERS

COUNCILLOR J. FORD

COUNCILLOR MRS. E. McNicholas

COUNCILLOR J. E. MICKLETHWAIT

COUNCILLOR P. C. WRIGHT

Non-corporate members: -

MR. H. DUCKER

MR. F. IRELAND

MR. W. A. MILES

MRS. K. SIDES

MISS E. A. TIMMS

### DOMICILIARY SERVICES SUB-COMMITTEE

ALDERMAN A. BUXTON, J.P. (Chairman)

COUNCILLOR A. WILDE (Vice-Chairman)

HIS WORSHIP THE MAYOR

(COUNCILLOR L. KIRK)

COUNCILLOR W. BEEVERS

COUNCILLOR J. FORD

COUNCILLOR R. HAGUE

COUNCILLOR MRS. E. McNicholas

ALDERMAN MRS. M. H. MOORHOUSE, J.P. COUNCILLOR J. E. MICKLETHWAIT

### REPRESENTATIVES ON THE AMBULANCE JOINT SUB-COMMITTEE

ALDERMAN A. BUXTON, J.P.

COUNCILLOR C. DUFFIELD

COUNCILLOR A. WILDE

### REPRESENTATIVES ON THE CARE OF THE AGED JOINT SUB-COMMITTEE

ALDERMAN A. BUXTON, J.P.

COUNCILLOR MRS. E. McNicholas

COUNCILLOR A. WILDE

REPRESENTATIVES ON THE SHEFFIELD, ROTHERHAM AND DISTRICT SMOKE ABATEMENT COMMITTEE

ALDERMAN A. BUXTON, J.P.

COUNCILLOR F. DAVIES

### STAFF

(as at 31st December, 1955)

MEDICAL OFFICER OF HEALTH AND PRINCIPAL SCHOOL MEDICAL OFFICER: R. J. Donaldson, M.B., Ch.B., B.A.O., D.P.H.

DEPUTY MEDICAL OFFICER OF HEALTH AND DEPUTY PRINCIPAL SCHOOL MEDICAL OFFICER:

> W. J. Connelly, L.R.C.P., L.R.C.S., L.R.F.P.S., D.P.H.

ASSISTANT MEDICAL OFFICERS OF HEALTH AND SCHOOL MEDICAL OFFICERS:

Mary D. A. Boyd, M.B., Ch.B.

Evelyn Bostock, M.B., B.S., D.Obst. R.C.O.G.

T. M. B. Rohan, M.B., B.Ch., B.A.O.

PRINCIPAL DENTAL OFFICER:

H. R. Heald, L.D.S.

DENTAL OFFICERS:

Joan H. Egan, B.D.S.

G. W. Lowe, L.D.S.

L. F. T. Liang, L.D.S. (part time)

H. P. Redfearn, L.D.S. (part time)

EDUCATIONAL PSYCHOLOGIST:

B. R. Lewis, M.A.

CHIROPODIST (part time):

L. Aldam, M.I.S.Ch.

CONSULTING STAFF (part time):

OPHTHALMOLOGY:

T. Stafford Maw, M.B., Ch.B., D.O.M.S.

Franziska Fischer, M.D.

EAR, NOSE AND THROAT:

H. M. Petty, M.B., Ch.B., D.L.O.

PSYCHIATRY:

R. Warnecke, M.R.C.S., L.R.C.P., D.P.M.

OBSTETRICS AND GYNAECOLOGY:

D. Ballantine, M.B., Ch.B., F.R.C.S., M.R.C.O.G., L.M.

TUBERCULOSIS:

A. C. Morrison, M.D., D.P.H.

ORTHODONTICS:

J. H. Gardiner, B.D.S., L.D.S. (Manch.)

ORTHOPAEDICS:

H. L. McMullen, B.A., M.B., B.Chir., F.R.C.S.

PUBLIC ANALYST (part time):

H. Childs, B.Sc., F.R.I.C.

LAY ADMINISTRATIVE OFFICER:

G. E. Westby (1), (5)

SENIOR CLERK:

G. H. Biggin

MEDICAL OFFICER OF HEALTH'S

SECRETARY:

Miss J. Caseldine

GENERAL OFFICE: CLERICAL STAFF:

5 Clerks

CHIEF SANITARY INSPECTOR:

L. Eastwood, M.S.I.A., A.M.Inst.P.C., (1), (2), (3), (4), (5)

DEPUTY CHIEF SANITARY INSPECTOR:

T. W. Pearce, M.S.I.A. (1), (2), (5)

### SANITARY INSPECTORS:

A. Foster, M.S.I.A. (1), (5).

G. C. Harrison, M.S.I.A. (1)

L. W. Lodge, M.S.I.A. (1), (2)

T. E. Snape, M.S.I.A. (1), (2)

M. A. Standish, M.S.I.A. (1) (5).

1 vacancy

### SANITARY INSPECTOR'S SECTION:

2 Clerks

2 Disinfectors

1 Ratcatcher

### SUPERINTENDENT HEALTH VISITOR:

Miss E. G. Taylor (6), S.R.N., S.C.M.

# DEPUTY SUPERINTENDENT HEALTH VISITOR:

Miss C. M. Wilkinson (6), S.R.N., S.C.M.

### HEALTH VISITOR/SOCIAL WORKER:

Miss M. J. Casey (6), S.R.N., S.C.M.

### HEALTH VISITOR/SCHOOL NURSES:

Miss E. Bates (6), S.R.N., S.C.M., S.R.F.N.

Miss S. E. Brewer (6), S.R.N.

Miss N. B. Griffiths (6), S.R.N., S.C.M.

Miss E. M. Jeffs (6), S.R.N., S.C.M.

Mrs. R. McHugh (6), S.R.N., S.C.M.

Mrs. A. B. Payling (6), S.R.N., S.C.M.

Miss A. W. Ritchie (6), S.R.N., S.C.M.

Miss T. Shanley (6), S.R.N., S.C.M.

Miss N. Y. Wilson (6), S.R.N., S.C.M.

### STUDENT HEALTH VISITORS:

Miss M. Fleming, S.R.N., S.R.F.N., S.C.M.

Miss M. Myers, S.R.N., S.C.M.

Miss M. Willis, S.R.N., S.C.M.

3 vacancies

### SCHOOL NURSES:

Mrs. E. M. Catley, S.R.N.

Miss C. J. Crofton, S.R.N., S.C.M.

Miss G. K. Cave, S.R.N., S.C.M.

Mrs. N. Lloyd, S.R.N.

Mrs. E. Ward, S.R.N.

### CLINIC NURSES:

Mrs. E. A. S. Hoyle, S.R.N., S.C.M.

Mrs. M. Mossman, R.S.C.N.

Mrs. M. P. Phinn, S.R.N., S.C.M.

Mrs. R. Jackson, S.R.N., S.C.M. (part time).

### CLINIC ASSISTANTS:

Miss E. M. Nicklin

Mrs. M. Glover.

### PHYSIOTHERAPIST:

Vacant

### SPEECH THERAPIST:

Miss J. H. Buchanan, L.C.S.T.

### MATERNITY AND CHILD WELFARE SECTION:

SENIOR CLERK:

Miss N. H. Platts

5 Clerks (1 vacancy)

### SCHOOL HEALTH SECTION:

### SENIOR CLERK:

Miss W. M. Cooper

5 Clerks

1 Dental Clerk.

4 Dental Attendants

1 Dental Mechanic

HOME NURSING SERVICE:

SUPERINTENDENT:

Miss V. M. McCarthy (6), S.R.N., S.C.M.

SENIOR DISTRICT NURSE:

Miss M. Walker, S.R.N. 15 full-time nurses

11 part-time nurses

HOME HELP SERVICE:

ORGANISER AND SOCIAL WORKER FOR THE AGED

Mrs. R. E. Wales

SENIOR CLERK:

Miss M. A. Wadsworth

4 clerks

2 visitors (part time)

DISTRICT MIDWIVES SERVICE:

SUPERINTENDENT MIDWIFE AND NON-MEDICAL SUPERVISOR OF MIDWIVES:

Mrs. M. J. Walsh, S.R.N., S.C.M.

DEPUTY SUPERINTENDENT MIDWIFE:

Mrs. I. McGann, S.R.N., S.C.M.

DISTRICT MIDWIVES:

Miss E. Atkinson, S.R.N., S.C.M.

Mrs. H. M. Clarke, S.R.N., S.C.M.

Mrs. M. Cobley, S.R.N., S.C.M.

Mrs. W. A. G. Herrington, S.R.N., S.C.M.

Mrs. E. Houghton, S.C.M.

Miss E. D. Jeyes, S.C.M.

Miss K. Ray, S.R.N., S.C.M.

Miss S. M. Thorpe, S.R.N., S.C.M.

Mrs. G. Walsh, S.R.N., S.C.M.

RELIEF MIDWIVES:

Mrs. M. Hughes, S.C.M.

Mrs. W. Jones, S.R.N., S.C.M.

2 vacancies

MENTAL HEALTH OFFICER:

W. R. Sidaway

ASSISTANT MENTAL HEALTH OFFICER:

W. P. Thomas

1 Mental Health Trainee

OCCUPATION CENTRE AND

INDUSTRIAL CENTRE:

HEAD TEACHER:

Miss E. Kelford

DEPUTY HEAD TEACHER:

Miss G. Calam

OCCUPATION CENTRE

3 Assistant teachers (female)

INDUSTRIAL CENTRE:

2 Assistant teachers (male)

1 Assistant teacher (female)

HEALTH SERVICES BUREAU:

2 Clerks

WELFARE FOODS SHOP:

1 Sales clerk

2 Sales assistants

### QUALIFICATIONS:

- (1) Certificate, Royal Sanitary Institute (Sanitary Inspector)
- (2) Certificate, Royal Sanitary Institute (Meat and other Foods)
- (3) Certificate, Royal Sanitary Institute (Smoke Inspector)
- (4) Testamur, Institute of Public Cleansing (Honours)
- (5) Building Construction Certificate
- (6) Certificate, Royal Sanitary Institute (Health Visitor)
- (7) Housekeeping Certificate

Health Department,
Municipal Offices,
ROTHERHAM.

To the Chairman and Members of the Health Committee of the County Borough of Rotherham

I have pleasure in submitting the report on the health of Rotherham for the year 1955. My predecessor, Dr. Jos. A. Gillet, now Medical Officer of Health for Dagenham, was responsible for the work during the first eight months of the year.

The estimated mid-year population of the County Borough was 82,530. The birth rate per thousand for the year was 16.02 as compared with 16.50 in 1954 and the death rate was 11.00 per 1,000 as compared with 10.68 in 1954. The infant mortality rate was 26 per 1,000 live births which was slightly higher than the previous year's figure of 22. Once again prematurity was one of the chief causes of death in this group.

During the past five years, the Chief Sanitary Inspector and his staff have been accumulating data concerning housing. The work of compiling a central index was originally started following the 1936 Overcrowding Survey, and now there is a card containing details of each house in the County Borough. This is a solid foundation for all future work and is a very commendable effort, considering the difficulties from time to time in obtaining staff.

Notifications of infectious diseases show a large increase in the number of cases of measles, which was part of a national epidemic. There were only eight cases of paralytic acute anterior poliomyelitis notified. Once again a year has passed without a case of diphtheria occurring in the County Borough. The last case of this disease was notified in March, 1952. This may be part of the reason for the unsatisfactory response to the hard work put into the diphtheria immunisation campaign. The figures for the year show a decrease of 650 children immunised as compared with 1954. It should be remembered, however, that during 1954 a team of doctor and nurses in a specially equipped ambulance visited the homes of non-immunised children in order to immunise the defaulters so that the numbers for that year were above the normal. One wonders if the stage may soon be reached when the numbers of non-immunised children will increase to such an extent as to allow this disease to become a common occurrence once again. Certainly, little comfort can be taken from the fact that in 1955, for the first time since immunisation became general practice, the number of cases of diphtheria in England and Wales did not show a fall.

The Day Nursery at Ferham Villa was closed on the 30th July, 1955, and suitable arrangements were made for the few children remaining on the register. The problem of child minding is one which is being kept under constant supervision.

Trilene anaesthesia was introduced for domiciliary midwives towards the end of the year, in addition to the analgesia administered by means of gas, air and pethidine. The nursing by the domiciliary midwives of patients discharged from hospital before the "fourteenth day" resulted in a saving of 1,474 patient days in hospital.

During the year a system of "block visiting" by health visitors has been introduced. This system works by taking groups of streets at a time and each child under one year is visited at least eight times during the first year of life; children 1-2 years, every three months and those 2-5 years, at least three times a year. This routine ensures that all in this age group will be adequately visited.

A Fathers' Club was opened at Ferham Clinic in August, 1955, in order that they may be given the opportunity of discussing problems in connection with family life. At Infant Welfare Clinics it is the mother and her children who are dealt with, and too often the very important position of the father in the family is overlooked. It was to rectify this that the club was started, and so far it has proved itself to be worth while.

On the new Kimberworth Park Housing Estate a branch clinic was opened at Redscope Primary School in September, 1955. In the following month the Toddlers Clinic at Broom Valley School was supplemented by a child welfare session on the alternate week.

The work in the Home Nursing Section has increased considerably; not so much by the number of new patients but by the number of visits paid (an increase of 11,884, making a total of 88,820). The sick children's nursing unit which had already aroused interest in many parts of the country, in some continental cities, South Africa and the U.S.A., brought Rotherham proudly to the fore when featured in the "Round the World" programme preceding Her Majesty the Queen's broadcast on Christmas Day. Voluntary organisations have continued to send gifts for distribution by the Queen's Nurses and the Rotary Club provided Sunday transport, but the latter help will not be available in the coming year. The Rotary Club's help in the past has been most valuable and deeply appreciated.

The work of the Home Help Service continues to expand, and the volume of calls has increased. The method of dealing with requests for help is in the first place to assess the need, and as far as possible, mobilise assistance from relatives and use the Home Help Service as a supplement. The visiting of all the aged is now undertaken by this section and the work connected with the compilation of the register is quite a task. This register provides information for all sections of the Department. The number of names and addresses on the register at 31st December, 1955, was 5,032 and of these 2,220 had been visited. In September, a Domiciliary Meals Service for old people commenced to operate. This is administered by the Home Help Organiser

and Social Worker for the Aged, working in close collaboration with the Old People's Voluntary Welfare Committee. The fact that the recipients have a choice of menu and are given meals each day which have been prepared and cooked in their cwn homes is a considerable advance.

An outstanding and beneficial step forward in the Mental Health Service was the completion of the Industrial Centre for the training of mentally handicapped adults. The Centre, designed to accommodate 50 adults, was opened on the 28th September, by Dame Enid Russell-Smith, D.B.E. (Under Secretary of the Ministry of Health).

The closing of Moorgate General Hospital for the reception of patients under Section 20 of the Lunacy Act of 1890 has resulted in less delay in the transfer of patients to Middlewood Hospital. This change is advantageous in that immediate treatment is now available. Further progress was made by the opening of a Psychiatric Out-patient Clinic at the Rotherham Hospital in July, and this, with the clinic already in operation at Moorgate General Hospital, resulted in less difficulty being experienced in the making of clinical appointments.

On 2nd December, 1955, Dr. William Barr, who was Medical Officer of Health from March, 1925, to January, 1952, passed away. He made an outstanding contribution to the health of Rotherham and it may be many years before the value of his work can be fully assessed.

The Health Department depends for its smooth running on the co-operation and liaison with other branches of the Medical Services and the other Council Services. I would like to thank my medical colleagues and other officers of the Corporation, the Executive Council, and the Hospital Management Committee, for their kindly reception to my arrival in the town and the way they have met my requests. I hope that in return our services to them have been of benefit. My best thanks are also due to the Chairman, Vice-Chairman and Members of the Health Committee, for their help and guidance, which proved to be of particular value to me in taking over a new department. I am also indebted to all members of the staff of the department for their assistance in the preparation of this report and for their willing and loyal co-operation in all matters throughout the year.

My report as Principal School Medical Officer follows the report on the Health Services.

R. J. DONALDSON,

Medical Officer of Health.

# STATISTICS OF THE AREA

## GENERAL STATISTICS

Area (in acres)	 	 	 9,255
Population (census) 1951	 	 	 82,334
Population (estimated civilian) 1955	 	 	 82,530
Number of inhabited houses (1/4/1956)	 	 	 25,319
Rateable value (1/4/1956)	 	 	 £890,000
Sum represented by a penny rate (1/4/1956)	 	 	 £3,575

### VITAL STATISTICS

In the following summary extracts from the vital statistics for the year are given:

		Total	Male	Female							
Live Births											
Legitimate		1275	652	623 —	Birth 1	ate pe	er 1,000	of the	ne estin	nated	
Illegitimate		47	22	25 —	resid	ent po	pulatio	n		1	6.02
Stillbirths		35	23	12 —	Rate p	er 1,0	00 (liv	e and	still) b	irths 2	5.79
Deaths		908	504	404 —	Crude	death	rate p	per 1,	000 of	the	
					estima	ted re	esident	popula	tion	1	1.00
					Adjuste	d dea	th rate	per 1	,000 of	the	
					estim	nated	resid	dent	popul	lation	
					(com	parabi	lity figu	ure —	1.14)	1	2.54
									Rat	te per 1,0	000
										tal (live a	
Deaths from pue	rpera	al cause	s:					Dea	ths s	till) birtl	hs
Puerperal se	psis								-	-	
Other puerp	eral	causes							4	2.95	
							Tota	al	4	2.95	
Death rate of infa	nts	under or	ne vear o	f age:							
All infants											26
Legitimate in											25
Illegitimate i											43
Deaths from mea											_
Deaths from who											_
Deaths from diar											2
Deaths Hom dian	Hoc	a (dilde	2 years	, or age,	***						-

In the following table the causes of death at different periods of life, as supplied by the Registrar General, are given for the year 1955. The inclusion of this is considered desirable by the Ministry of Health for the purpose of comparison with the figures for other areas and relates to deaths *registered* in the calendar year, which totalled 915.

					M	ALES								FE	MAL	ES			
Cause of death	0-	1_	5_	15_	25_	45-	65-	75_	Total	0-	1_	5_	15_	25_	45_	65_	75_	Total	Total
	-	1	_			-			Total	-		_			-	05	-	Total	
Tuberculosis, respiratory					2	10	2		14										14
Tuberculosis, respiratory Tuberculosis, other	_	_	Ξ		2				14				_	_				_	14
Syphilitic disease		_	_		_				_			_	_		_			_	_
Diphtheria					_		_											_	_
Whooping cough	_	_	_		_	_	_	_	_	_		_	_	_	_	_		_	_
Meningococcal infections.	_	_		_	_	_	0.000	_	_	-	_	-	_					_	_
Acute poliomyelitis	-	1	_	_	-	_	-	-	1	-	_	-	_	_	-	-	_	-	1
Measles	-	_	-	_	-	-	-	_	-	-		_	_	_	-	-	_		_
Other infective and parasitic														- 3					
diseases	-	-	-	-	-	2	-	-	2	-	-	-	-	-	1	-	-	1	3
Malignant neoplasm,																			
stomach	-	-	-	-	-	4	4	4	12	-	-	-	-	-	3	1	2	6	18
Malignant neoplasm, lung,																			
bronchus	-	-		-	1	17	6	4	28	-	-	-	-	-	3 3	1	2	1	29
Malignant neoplasm, breast	-	-	-	-	-	-	-	-	-	-	-	-	-	4	3	1	2	10	10
Malignant neoplasm, uterus	-	-	-	-	-	-	-	-	-	-	-	-	-	-	3	1	-	4	4
Other malignant and lym-							10	22	41					,		10	9	21	70
phatic neoplasms	=	_	_	-	1	9	10	14543.00	41	_	_	-	-	1	10000			200	72
Diabetes		_		-	1	1	1	-	3	-	-	-	-	-	1	2	1	4	5
Diabetes	-	-		_	-		1		1	-	_	-	-		1	-	1	**	,
system	-		_	_	_	11	12	15	38	-					7	17	35	59	97
Coronary disease, angina		_				29	24		68	_			_	_	7	15	17	39	107
Hypertension with heart		1118				-	2.8	12	00							13	1.	33	101
disease	-	-	-	_	1	1	7	3	12	_	_	_	_	_	_	3	4	7	19
Other heart disease	-	_		_					48	_	_	-	_	2	15	3 5 9	30		100
Other circulatory disease	-	-	-	_	1	5	16			-	_	_	-	-	2	9	42	53	119
Influenza			-	-	1	1	-	-	1	1	-	-1	_	-	_	1	1	2	3
Pneumonia	2	-	1	-		5	7	8	24	1	-	1	_			3			43
Bronchitis	1	-	-	-	-	8	15	19	43	-	-	-	-	1	2	6	15	24	67
Other diseases of the res-	1																		
piratory system	-	-	-	-	1	4	-	1	6	-	-	-	-	-	1	1	-	2	8
Ulcer of stomach and																			
duodenum	-	-	-	-	-	-	3	5	8	-	-	-	-	=	-	-	-	-	8
Gastritis, enteritis and diarrhoea	1				100		1000										1	0	2
Nephritis and nephrosis	1	=	=		- 7	1	3	2	6	1		_	=		1	=	2	2	3
Hyperplasia of prostate		_				1	1	1	3						1		-	3	3
Pregnancy, childbirth,	187		2.0	1		*			,				-			-		-	3
abortion	_	_	_	_	_	_	_	_	_	_	_	_	2	1	1	_		4	4
Congenital malformations.	4	_		_	_	_	_	_	4	4	_		_	_	-			4	8
Other defined and ill-																			0
defined diseases	11	1	3	1	_	8	9	10	43	8	2	2	-	3	6	10	22	53	96
Motor vehicle accidents	-	1	_	2	1	2		4	10	-	1	_	-	1	1	1		4	14
All other accidents	1	-	-	_	2	2 2 5	2	6	13	-	1	-	-	_	1	5	7	14	27
Suicide	-	-	-	-	2	5	1	-	8	-	-	-	-	1	2	3	-	6	14
Homicide and operations of															-				
war	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
Total—all causes	20	3	4	3	16	141	135	182	504	14	4	3	2	15	73	94	199	404	908
							-	202	301		-		-	-	,,	-		101	200

### SANITARY CIRCUMSTANCES

In common with many other local authorities in industrial areas a shortage of staff was experienced which, together with the additional work absorbed during the year, seriously interrupted the smooth working of the office. One district was without a sanitary inspector for eight months, the day to day work of that district being undertaken by whoever could best fit it in.

Food inspection and sampling, nuisances and disrepair, drainage work, food poisoning and infectious disease investigations and housing inspections must be done, and were done at the expense of other duties. Routine inspections of premises normally visited twice yearly were made only once, some premises normally inspected once yearly were not inspected at all.

The wisdom of the Council in deciding to make the additional payment allowed to sanitary inspectors in certain industrial areas ensured that this report could be written with the comforting knowledge that a fully staffed section is busy making up arrears of routine inspections.

Meat inspection at the private slaughterhouse, which amounted to approximately one and a half days' inspection per week or 3 months per year for one inspector, presented some difficulties at one stage due to the shortage of qualified staff and the need for training unqualified staff. Fortunately two inspectors obtained the Meat and Food Certificate during the period and are now making a useful contribution to food inspection.

The inspection of unfit houses for slum clearance was priority work during the latter part of the year once the initial area had been selected. It will now be possible to spread out inspections over a full year to lessen the interference with routine duties.

Talks on the duties of sanitary inspectors were given to five interested organisations. There is evidence of a wider interest in public health matters generally on the part of the public, and of a growing awareness of the need for improved standards of hygiene.

In summing up the year's work, an impression is obtained of a not too easy year which worked out much better than it might have done thanks largely to a willing and adaptable staff.

### WATER

Thirty samples of drinking water and 12 samples of swimming bath water were taken for examination. One sample of drinking water was unsatisfactory and was reported to the Water Engineer. A further sample from this source after treatment of the supply pipe proved satisfactory. Two samples of swimming bath water from the Main Street Baths were unsatisfactory. The results of all examinations of swimming bath water are sent to the Baths Superintendent and give a check on his own frequent tests of the quality of the bath water.

### SANITARY ACCOMMODATION

### (a) HOUSE DRAINAGE

2,001 visits were made in connection with drain tests, defective drains and drainage appliances. Far too many blockages of drains still occur as a result of misuse, and it would be safe to say that most stoppages arise as a result of the use of newspaper as toilet paper. This is particularly true when there is an interceptor trap in the main drain, a piece of newspaper being fairly tough and providing an admirable obstruction on which solids may build up at the trap and cause a drain blockage.

Many complaints of nuisance from the smell of petroleum products in cellars during the months of November and December were believed to arise from gases originating from trade wastes discharged into the sewers escaping from cracks in the drains and sewers. Investigations were made by the Borough Engineer's Department to trace the source or sources of the nuisance.

Additional W.C.'s provided		 	24
Privy middens converted to	W.C.'s	 	1
Ashpits abolished		 	. 1

### (b) LICENCED PREMISES, CINEMAS, THEATRES

The conveniences of three licensed premises were repaired or improved. As indicated in previous reports, a high standard has now been reached in the provision of sanitary accommodation in this type of premises. A few sub-standard conveniences still remain in licensed premises the future development of which is in doubt, but it is hoped that these will be dealt with in the near future.

### (c) PUBLIC CONVENIENCES

The public convenience at Canklow was refitted by the Borough Engineer's Department during the year. Further conveniences are to be altered during 1956 to add to the progress already made in modernising the conveniences in the town.

### **FACTORIES**

### 150 factory inspections were made as follows: -

Type of factory			Nu	mber re	gistered	Ins	pections	Notices
Non mechanical				43			22	-
Mechanical				306			128	8
FACTORIES IN WI	нісн Г	EFECT	S WERE	FOUND				
Type of defect							Found	Remedied
Inadequate venti	lation						1	-
Unreasonable ter	mperat	ure					1	1
Sanitary conveni	ences	insuffic	ient				-	-
Sanitary conveni	ences i	unsuita	ble or	defective	e		7	12
Sanitary conveni	ences i	not sep	arate fo	or sexes			-	-

### OFFENSIVE TRADES

Five visits were paid to the six offensive trades now registered. No complaints of nuisance were received in connection with these trades.

### CANAL BOATS

Number of canal boats inspected		 	10
Number of persons on board:—			
Male adults		 	13
Female adults	***	 	2
Number of cases of infectious disease		 	Nil
Number of infringements observed		 	Nil
Number of notices served		 	Nil
Number of notices complied with		 	Nil
Number of notices outstanding		 	Nil
Legal proceedings taken		 	Nil

### HOUSING

Houses demolished as a result of formal or informal procedure	
(Section 11, Housing Act, 1936)	36
Houses repaired as a result of informal action under the Public	
Health Act, 1936	625
Houses repaired as a result of formal notice under the Public Health	
Act, 1936	381

### (a) DEMOLITION AND CLOSURE

In July the Special Joint Committee on Unfit Houses considered a report on housing conditions in the area, and resolved that a return of an estimated number of 750 unfit houses to be dealt with in five years be made to the Minister of Housing and Local Government, in accordance with the requirements of the Housing, Rent and Repairs Act, 1954.

It was further resolved that the 29 unfit houses owned by the Corporation be cleared first, and that the next clearance areas to be dealt with should be in the Thornhill district. Over 220 houses in the proposed clearance areas were inspected before the end of the year.

As a result of the Council's decision to give publicity to the need for care in purchasing old property in view of the slum clearance programme, information was given through the Town Clerk to 25 applicants wishing to purchase old houses.

### (b) Nuisances and Disrepair

1,482 complaints of nuisance and disrepair were received during the year. 3,002 houses were involved in the total nuisances found as a result of complaints or during inspection of the district.

The opinion formed at the end of the year 1954 that the rent increase provisions of the Rent and Repairs Act, 1954 were unlikely to make any major contribution to the repair of old property has been fully justified. In the last quarter of 1954, 16 applications for certificates of disrepair were received and there were only 25 similar applications during the whole of 1955. From these figures it is safe to assume that relatively few owners have been prepared or able to take advantage of the opportunity afforded by the Act to increase rents. Of the 41 certificates issued only 24 have been withdrawn, and it seems likely that many owners, faced with substantial estimates of costs of repairs including such items as external painting, are prepared to forego any possible increase.

The whole of the net income from the average nineteenth century small dwelling, of which there are still several millions in this country, is insufficient and has been insufficient for some years to keep the property in good repair. Buildings of all descriptions form a great part of the national assets and it is in the best interests of everyone that they should not be allowed to deteriorate unnecessarily. It is a regrettable fact that the price of a weekly packet of cigarettes per house has been allowed to grow into a burden of disrepair which would take a decade to rectify if the necessary remedial measures were put into effect at once.

No work was done in default during the year. The Corporation is dependent on local contractors to do such work, and, as owners normally have several months in which to place an order with one of the contractors before legal proceedings are instituted, it was considered more practicable to require owners to carry out their obligations in this respect than to risk further delay.

# DETAILS OF LEGAL PROCEEDINGS UNDER THE PUBLIC HEALTH ACT, 1936

Case		D. ( )	~				
No.	Date		or offence		Resul	t	Penalty
1	20.1.55	Non-compliance	with Nuisan	ce Order	Conviction		£2 fine
2	17.2.55	Non-compliance	with Abatemer	nt Notice	Withdrawn, v	work done	-
3	>>	>>	23	"	23	>>	-
4	23	Non-compliance Section 56, conce			>>	23	-
5	33	Non-compliance	with Nuisance	e Order	33	23	-
6	14.4.55	Non-compliance concerning 12 ho		e Order	23	25	-
7	5.5.55	Non-compliance	with Abatemer	nt Notice	22	23	- "
8	33	,,	"	9	>>	33	-
9	33	Non-compliance Section 39 conc		e under nouses	33	22	-
10	23	Non-compliance	with Abatemer	nt Notice	23	23	-
11	>>	23	22 2	,	>>	23	-
12	23	22	,,	,	>>	23	-
13	>>	Non-compliance Section 39 concer			>>	39	-
14	12.5.55	Non-compliance	with Abatemer	nt Notice	33	23	-
15	>>	23	29 2	,	>>	23	-
16	>>	33	39	9	23	33	-
17	29	Non-compliance Section 39 conce			>>	39	-
18	2.6.55	Non-compliance	with Abatemer	nt Notice	>>	23	-
19	8.9.55	23	,,,	9	33	33	-
20	>>	**	20	99	>>	23	-
21	33	Non-compliance Section 39 conce			"	39	-
22	33	Non-compliance Section 39	with Notic	e under	>>	33	-
23	>>	Non-compliance	with Abatemer	nt Notice	>>	33	-
24	22.9.55	23	,,	19	>>	23	-
25	,,	"	20 3		23	23	-

Case No.	Date	Default or offence		Resul	t	Penalty
26	22.9.55	Non-compliance with N Section 39		Withdrawn,		-
27	20.10.55	Non-compliance with Abate	ement Notice	"	,,	-
28	10.11.55	23 23	2)	>>	23	-
29	33	>> >>	23	>>	33	-
30	33	Non-compliance with N Section 45	otice under	>>	29	-
31	**	Non-compliance with N Section 56 concerning 4		23	33	-
32	**	Non-compliance with Abate	ement Notice	23	23	-
33	17.11.55	>> >>	33	Nuisance Or	der made	
34	**	33 33	"	22	39	-
35	**	Non-compliance with N Section 39	otice under	Conviction		£1 fine
36	"	Non-compliance with N Section 45	otice under	Conviction		£1 fine
37	***	Non-compliance with Abate	ement Notice	Withdrawn,	work done	-
38	,,,	29 29	23	33	23	-
39	**	Non-compliance with No Section 39	tice under	>>	23	-
40	"	33 23	"	22	22	-
41	**	Non-compliance with Abate	ement Notice	23	22	-
42	**	23	>>	22	22	-
43	23	Non-compliance with N Section 56 concerning two		>>	23	-
44	24.11.55	Non-compliance with Abat	ement Notice	>>	33	-
45	"	Non-compliance with N Section 39	lotice under	>>	33	-
46	15.12.55	Non-compliance with Abat	ement Notice	>>	23	-
47	22	33 23	33	,,	>>	-

# HOUSES-LET-IN-LODGINGS

Four inspections were made of the thirteen houses-let-in-lodgings.

### COMMON LODGING HOUSES

Five inspections were made of the Westgate lodging house which was well maintained and conducted.

### TENTS, VANS AND SHEDS

Moveable dwellings were licensed as follows: -

New licences		 	 	22
Licences renewed	d	 	 	41
Licences refused		 	 	1
Licences surrend	lered	 	 	21

The movement of contract workers engaged on opencast mining and construction work at the new gas works was responsible for the high figures of licences granted and surrendered. The number of "residential" caravans is unlikely to increase as all the suitable available sites on farms have been taken up.

There are few people to whom caravan dwelling represents a satisfactory permanent way of life. As time passes many of the present licence holders will move into houses and wish to sell their caravans. In these circumstances it will be essential to continue the policy of licensing only those caravans which are in really good condition if a gradual deterioration in quality is to be avoided.

### VERMINOUS PREMISES

921 inspections of Corporation houses and the houses of prospective tenants were made. Evidence of vermin was found on 18 occasions. Similar inspections were made of the effects of 12 families offered tenancies of houses by other Authorities.

The incidence of infestation in all premises treated was as follows: -

		Bugs	Cockroaches	Other pests	Total
Corporation houses		23	29	12	64
Private premises		60	35	17	112
		_	_	_	_
		83	64	29	176
		_	_	-	_
Percentage infestation i	n all				
premises		47	36	17	

### PHARMACY AND POISONS

180 licences were issued authorising the sale of poisons included in Part 2 of the Poisons List.

### RATS AND MICE DESTRUCTION

### (a) SEWER TREATMENT

Two maintenance treatments of the sewers were carried out to the satisfaction of the Ministry of Agriculture, Fisheries and Food.

During the maintenance treatments one part of the town was given special treatment, under the supervision of a technical officer of the Ministry, in order that a study could be made of the results of this type of baiting for research purposes.

### (b) INSPECTION AND TREATMENT OF PREMISES

The free service given to occupiers of dwelling and business premises for the destruction of rats and mice continues to operate satisfactorily. The new poisons and methods of baiting are most effective in dealing with the majority of infestations. In a few instances wary rodents refuse to be disposed of by the more general methods, and in these cases the skill and experience of our Ratcatcher is invaluable.

The following details have been extracted from the annual report required by the Ministry of Agriculture, Fisheries and Food:—

	Type of Property						
	Local Authority	Dwelling houses	Agricultural	Business etc.	Total		
Complaints received	13 40	320 34	5 14	144 86	482 174		
Properties found to be infested by rats	40	199	17	129	385		
Properties found to be infested by mice Notices served for structural work	5 -	72 10	-	70	147 16		

### SHOPS

200 visits were made for the purpose of section 38 of the Shops Act, 1950. This section deals with the provision of adequate facilities in shops employing assistants, including heating, lighting, ventilation, facilities for washing and the taking of meals, and sanitary accommodation. A good standard has been reached and is being maintained in all shops to which this section applies.

### FOOD PREMISES

The following list of premises and record of visits gives a picture of the types of food trades in the district and the time given to inspection:—

### UNREGISTERED PREMISES

					Number	Inspections
					39	35
					1	2
					24	22
d prem	ises				127	14
					135	148
					26	8
					67	65
					18	42
engroce	ers				69	74
					315	295
tories					5	6
	***				15	8
					1	-
					2	2
					3	6
	or prem	d premises	d premises engrocers tories	d premises	d premises	

### REGISTERED PREMISES

Type					Number	Inspections
Butchers					94	118
Food preparing premises					60	59
Hawkers					16	2
Ice cream factories					5	17
Ice cream shops or stores					263	605
Pickle factories					1	-
Tripe boilers					1	1
Improvements made in fo	bod	premises	1948	to pres	ent date:	

	Premises affected					
	1948 to 1954	1955	Total			
Additional sinks provided	61	-	61			
Additional W.C.s provided	28	2	30			
Additional wash basins provided	29	-	29			
Animals removed from premises	19	-	19			
Display covers provided for food	85	1	86			
Handwashing notices displayed	86	-	86			
Head coverings provided for staff	78	-	78			
Hot water supplies provided	242	3	245			
Premises cleansed or repaired	316	21	337			

The Food Hygiene Regulations, 1955, which came into operation on the 1st January, 1956, extend the existing law by specific requirements designed to prevent contamination of food, requiring washing facilities for food and equipment, requiring washing facilities in food premises and a supply of hot water on certain stalls and vehicles, restricting the preparation and packing of food on domestic premises, prescribing conditions under which certain foods shall be kept in food premises, requiring certain conditions to be observed in the transport and handling of meat.

A great deal of work has already been done in the improvement of food premises, but the new Regulations, which now apply to all canteens, schools, clubs, institutions and any activity carried on by a public or local authority will, without question, create a great deal of work for the District Sanitary Inspectors. Fortunately, some of the provisions do not apply until 1st July, 1956, which will allow time for a comprehensive survey of the establishments affected and give the persons responsible an opportunity of making preparations to comply with the Regulations.

### MILK

### (a) SPECIAL DESIGNATIONS

All milk sold in Rotherham is now either "Pasteurised," "Sterilised" or "Tuberculin Tested." Processing is done in plants situated in other districts and the bulk of the milk consumed is produced in other areas. Few complaints of lack of cleanliness or keeping quality were received and these were, where possible, with the co-operation of inspectors of other areas, referred directly to the dairies concerned. The following licences were issued in connection with the Milk (Special Designations) Regulations:—

Dealer's "Tuberculin Tested	"		 	 	22
Dealer's "Pasteurised"			 	 	21
Dealer's "Sterilised"			 	 	176
Supplementary "Tuberculin	Tested	"	 	 	21
Supplementary "Pasteurised"	,		 	 	22
Supplementary "Sterilised"			 	 	16

### (b) BACTERIOLOGICAL EXAMINATION

152 samples of milk were taken for examination as to cleanliness and efficacy of heat treatment with the following results:—

Class of milk			Sam	ples tested	Passed	Failed	
Tuberculin	Tested				28	22	6
Tuberculin	Tested	(Paste	eurised)		33	33	-
Pasteurised					47	47	-
Sterilised					44	44	-

### (c) BIOLOGICAL EXAMINATION

48 samples of milk were taken to be examined for the presence of tubercle bacilli. Three of the samples were tuberculous, and the Divisional Veterinary Officer was notified in order that the herds could be examined and the diseased cows removed for slaughter.

### ICE CREAM

44 samples of ice cream were submitted for bacteriological examination with the following results:—

Satist	factory	Unsatisfactory			
Grade 1	Grade 2	Grade 3	Grade 4		
35	5	4	-		

Only one unsatisfactory sample was produced by local manufacturers who are now reduced to five in number. Only three of these are in regular production. As a result of the Ice Cream (Heat Treatment) Regulations 1947 to 1952 the smaller manufacturers decided to use cold mixes for ice cream production. The three largest manufacturers have the necessary plant and recording thermometers to comply with the Regulations, two use the hot mix process and one uses a cold mix.

Twenty-six samples of ice-cream examined by the Public Analyst complied with the provisions of the Food Standards (Ice Cream) Order, 1953.

### SHELLFISH

All consignments of mussels inspected during the year had been submitted to an approved cleansing process.

### MEAT

The following details of animals slaughtered at the public abattoir have been supplied by the Markets Superintendent:—

Cattle	Calves	Sheep	Pigs	Total
7,076	125	15,447	16,919	39,567

The slaughter of pigs on private premises has almost ceased, only one such notification was received for the second successive year.

The estimated weight of fresh killed meat and offals condemned during the year was: —

All causes		 	 	68 tons	5	cwts.
Tuberculosis	only	 	 	36 tons	14	cwts.

All condemned meat is treated in the municipal waste elimination plant at the public abattoir, from which fertilisers and animal feeding stuffs are produced.

The percentages of animals found to be diseased are given in the following table: —

		Cattle				
	e	xcluding cows	Cows	Calves	Sheep	Pigs
Number killed Number inspected		3594 3594	3482 3482	125 125	15447 15447	16919 16919
All diseases except tuberculosis and cysticerci:						
Whole carcase condemned Carcases of which some part	 or	7	14	18	26	35
organ was affected		390	768	-	541	1124
Percentage affected		11.0	22.4	14.4	3.7	6.8
Tuberculosis only:						
Whole carcases condemned		3	28	1	-	2
Carcases of which some part	or					
organ was affected		338	1433	-	-	141
Percentage affected		9.4	41.9	.8	-	.8
Cysticercosis:						
Carcases of which some part	or					
organ was condemned		17	6	-	-	-
Carcases submitted to treatment	by					
refrigeration		17	6	-	-	-
Generalised and totally condemi	ned	-	-	-	-	-

All animals slaughtered at the private slaughterhouse were examined as follows: -

			Cattle				
		ex	cluding cows	Cows	Calves	Sheep	Pigs
Number killed	 		1013	89	-	3383	2187
Number inspected	 		1013	89	-	3383	2187

		Cattle				
	excl	uding cows	Cows	Calves	Sheep	Pigs
All diseases except tuberculosis and cysticerci:						
Whole carcases condemned		_	-	-	-	-
Carcases of which some part	or					
organ was condemned		272	33	_	171	39
Percentage affected		26.8	37.0	-	5.0	4.0
Tuberculosis only:						
Whole carcases condemned		1	-	-	-	1
Carcases of which some part	or					
organ was condemned		49	28	-	-	81
Percentage affected		4.9	31.4	-		3.7
Cysticercosis:						
Carcases of which some part	or					
organ was condemned		4	-	-	-	-
Carcases submitted to treatment	by					
refrigeration		4	-	-		-
Generalised and totally condemi	ned	_	_	_	_	-

### The estimated weight of meat condemned was: -

All causes		 	 	4	tons	2	cwts.
Tuberculosis	only	 	 	1	ton	8	cwts.

### MERCHANDISE MARKS ACT, 1926

660 visits were made in connection with the marking of food. The Marking Orders refer to the correct labelling of such food as apples, tomatoes, currants, ham, meat, dead poultry, margarine, malt products, frozen and chilled salmon and sea trout and honey. In 43 instances the attention of vendors was drawn to incorrect marking.

### SAMPLING OF FOOD AND DRUGS

251 samples of food and drugs were submitted to the Public Analyst for examination. 11 samples were reported to be not genuine. Details of all samples taken are given in the following table:—

			Gen	uine	Not reporte	d as genuine
No.	Nature of sample		Formal	Informal	Formal	Informal
2	Almond flavouring		 -	2	-	-
3	Baking powder		 -	3	-	-
23	Beef sausage		 -	22	-	1
1	Borax and honey		 -	1	-	-
8	Butter		 -	8	-	-
13	Butter sweets		 -	11	-	2
1	Calamine lotion		 -	1	-	-
3	Christmas puddings		 -	3	-	-
2	Coffee and chicory essen	ice	 -	2	-	-

				Gen	uine N	lot reporte	ed as genuine
No.	Nature of s	ample		Formal	Informal	Formal	Informal
2	Curry powder .			-	2	-	-
2	Grapefruit crush			-	2	_	_
1	Glucose powder .				1	-	-
1	Glycerine .			-	1	-	-
2	Ground rice .			-	2	-	-
1	Halibut liver oil	capsules		-	1	-	_
26	Ice cream .			-	26	-	-
5	Lard			-	5		-
3	Lemonade .			-	3	-	-
6				-	5	-	1
3	A CONTRACT OF THE PARTY OF THE			-	3	-	-
1	Marshmallow an	d slippery	elm				
				-	1	-	-
98				97	-	1	-
3	Minced steak .			-	3	-	-
6				-	6	-	-
1	Oil of peppermin	nt tablets		-	1	-	-
4				-	4	-	-
1	Pineapple crush .			-	1	-	-
6	Pork sausage .		***	-	5	-	1
2	Potted beef paste			-	1	-	1
5				-	3	-	2
1	Quinine tonic wa	ter		-	-	-	1
1				-	1	-	-
1	Sal volatile .			-	-	-	1
3	Self raising flour			-	3	-	-
3	Sponge mixture			_	3	-	-
1	Tea			-	1	-	-
1				-	1	-	-
2	Tomato ketchup .			-	2	-	-
2	White pepper .			-	2	-	-
1	Zinc and castor	oil cream		-	1	-	-
_				-	-	-	_
251				97	143	1	10
				-		-	_

# SAMPLES REPORTED AS "NOT GENUINE"

### Formal samples:

No.	Article	Results of Analysis	Remarks and action taken
4347	Milk	Contained 2.75 per cent. milk fat and 8.50 per cent. solids not fat.	Deficient in milk fat 8.3 per cent. On investigation it appeared that the deficiency was due to unequal periods of milking. Warning

letter sent to producer.

### Informal Samples:

No.	Article	Results of Analysis	Remarks and action taken
5246	Devonshire butters	Contained 2.94 per cent. of fat including 1.65 per cent of butter fat.	Deficient in butter fat 58.7 per cent. Subsequent formal sample proved genuine.
5251	Sal volatile	Contained 0.77 per cent of free ammonia and 2.64 per cent. of ammonium carbonate.	Deficient in ammonia 31 per cent. and slightly deficient in ammonium carbonate. Cork liner of bottle found to be defective. Retailer's remaining stock of bottles withdrawn from sale and returned to manufacturing chemists.
5368	Butter toffee	Contained 9 per cent of fat including 3.40 per cent of butter fat.	Slightly deficient in butter fat. Letter to manufacturer.
5387	Potted beef	Contained 81.7 per cent. of meat and 18.3 per cent excess water.	Should not have been described as potted beef. Attention of vendor drawn to the need for correct description.
5388	Pork sausage	Contained 50 per cent. of meat.	Deficient in meat 23 per cent. No action taken. Vendor displayed notice stating sausages contained not less than 50 per cent. meat.
5391	Potted meat	Contained 84.65 per cent. of meat and 15.35 per cent. excess water.	Should not have been described as potted meat. Attention of vendor drawn to the need for correct description.
5392	Beef sausage	Contained 47.1 per cent. of meat.	Deficient in meat 5.8 per cent. Vendor cautioned.
5393	Potted meat	Contained 59.94 per cent. of meat and 40.06 per cent excess water and cereal filler.	Should have been described as meat paste. Attention of vendor drawn to the need for correct description.
5453	Lemon curd	Contained 3.56 per cent. of fat instead of 4.0 per cent.	The attention of the manufacturers was drawn to the deficiency.
5464	Quinine tonic water	Contained 0.43 grain per pint of quinine sulphate instead of 0.5 grain per pint.	Discussions with the manufac- turers revealed an error in the manufacturing formula. This has now been rectified.

A prosecution against a butcher selling pork sausage with a low meat content was dismissed. Many similar prosecutions throughout the country were also unsuccessful and, until some legal standard is fixed, the further sampling of sausages would appear to be without purpose. Producing order out of the present topsy-turvy situation

will be well worth doing. The meat content of beef sausage varied between 50 per cent. to 80 per cent. and the meat content of pork sausage varied between 50 per cent. to 78 per cent. The meat content of pork sausage bore a relationship to price, the cost of 10 per cent. meat content per pound being about 4.9 pence on all samples taken. The meat content of beef sausage bore no uniform relationship to price, the cost of 10 per cent. meat content per pound varying between 2.2 pence to 5.4 pence.

### FERTILISERS AND FEEDING STUFFS ACT, 1926

Seven samples of feeding stuffs and five samples of fertilisers were taken for analysis. Nine of the 12 samples taken varied from the statutory statements by amounts slightly in excess of the limits of variation. The attention of the suppliers was drawn in each case to the need for accuracy in the statement of ingredients.

### OTHER FOOD

In the following table details are given of food surrendered or returned for salvage during the year: —

			Number	lbs.
Bacon and ham		 	 -	962
Boiling fowls		 	 -	16
Bottled and tinned	d goods	 	 3628	-
Butter		 	 -	6
Cake and biscuits		 	 -	269
Cereals		 	 -	30
Cheese		 	 -	331
Cooked meats		 	 _	319
Dried fruit		 	 -	10
Fish		 	 -	47
Fish cakes		 	 284	
Fresh meat		 ***	 y -	172
Fruit		 	 _	9
Margarine		 	 _	36
Meat pies		 	 21	_
Packet goods		 	 18	-
Potatoes		 	 -	140
Sausage		 	 -	520
Shellfish		 	 -	28

Condemned or surrendered food other than meat is disposed of in three ways. Certain rationed foods are returned through trade channels for processing in accordance with arrangements made by the Ministry of Agriculture, Fisheries and Food. Other food suitable for pig feeding is taken, if in sufficient quantity, by the Salvage Department to be processed in a waste elimination plant. The remaining materials including canned foods are buried by the Cleansing Department in the controlled tip.

### CLERICAL WORK

To complete the picture of work done by the section during the year, details of office interviews and outgoing correspondence are of interest. 1,482 complaints from residents were dealt with. 1,766 informal notices and 526 statutory notices were served, and 488 licences were issued. Including reminder notices and other letters, 3,187 postal packages were sent out during the year.

# SUMMARY OF SANITARY INSPECTORS' VISITS AND NOTICES SERVED

### DURING 1955

School canteens	•••	8	Revisits to above premises 1
Merchandise Marks Act		43	Miscellaneous housing visits 59
Water supply	***	227	Infectious disease enquiries 249
Drainage		1901	Visits re disinfection 123
Stables and piggeries		6	Miscellaneous infectious disease visits 352
Offensive trades		. 5	Lead poisoning 25
Fried fish shops		65	Visits to slaughterhouses 313
Common lodging houses		5	Visits to shops and stalls 2
Houses-let-in-lodgings		4	Butchers 118
Tents, vans, and sheds		140	Canteens 8
Canal boats		10	Dairies and milk distributors 386
Factories		128	Fishmongers and poulterers 42
Workshops		22	Food preparing premises 59
Workplaces		6	Grocers 295
Bakehouses		35	Greengrocers and fruiterers 74
Pharmacy and poisons		71	Ice cream premises 605
Public conveniences		6	Market stalls 660
Theatres and places of			Restaurants 22
entertainment		7	Street vendors and hawkers carts 2
Licensed premises		14	Course shares 100
Interviews		678	Milk—bacteriological 200
Pet Animals Act		27	Mills tuborale houill!
Rats and mice		154	Ica croom bostoriological 44
Desire tests		100	Food and days samples 250
Schools		13	Fartilizare and faeding stuffs 15
CL		200	Woter comples
Miscellaneous sanitary visits		3808	Missellaneous food wishs (25
Hairdressers		23	N
Matters referred to other Depts	•••	194	
Houses inspected under Public H	anlth	194	Weekel and and and
		1222	Verbal notices served 396
		1233	Verbal notices complied with 389
Re-inspections of above houses		4043	Informal notices served 1370
Houses inspected under Housing		228	Informal notices complied with 1493
Overcrowding inspections		11	Statutory notices served 526
Verminous premises	***	191	Statutory notices complied with 628

### PUBLIC MORTUARY

The arrangements whereby the mortuary at the Moorgate General Hospital was used as a public mortuary was continued throughout the year and 91 bodies were received there and detained for 317 days. The post-mortem room was used on 88 occasions. Payment is made to the local Hospital Management Committee on a basis of 5s. per day per body and £1 1s. for each occasion the post-mortem room is used.

### AGED AND INFIRM PERSONS

No application was made under Section 1 (3) of the National Assistance (Amendment) Act, 1951, for a removal order during the year.

### SMOKE ABATEMENT

There were 11 meetings of the Sheffield, Rotherham and District Smoke Abatement Committee during the year, which were attended by the Rotherham representatives; Alderman F. Harper, J.P., being Deputy Chairman of the Committee.

The Clean Air Bill was introduced during the year and created much discussion, particular points of interest included the control of the scheduled processes and the future part of the Alkali Inspectorate and the local authority in smoke abatement work.

The Council decided to withdraw from the Sheffield, Rotherham and District Smoke Abatement Committee and to delegate the powers of the Council concerning atmospheric pollution to the Sanitary Sub-Committee. Formal Notice of withdrawal was accordingly given to the other constituent authorities of the Joint Committee which would result in the dissolution of the Committee on the 31st March, 1956.

The following is a summary of the work done in the Borough during the year: -

Number of observations on chimneys	***		 1879
Number of minutes smoke observed			 1532
Average minutes smoke per 30 minute	observ	ation	 0.81
Number of Intimation Notices served			 67
Number of Statutory Notices served			 54
Number of complaints investigated			 21
Number of advisory visits			 137

### Atmospheric Pollution Recording

This was continued through the year, the average amount of solid matter deposited at the four stations is shown in tons per square mile per month.

		Erskine	Oakwood	College of
Year	Blackburn	Road	Hall Hosp.	Technology
1951	 30.63	27.88	13.80	21.80
1952	 38.80	27.00	15.87	19.34
1953	 27.25	25.09	14.54	20.88
1954	 25.60	29.32	17.55	24.63
1955	 29.17	19.86	15.99	32.55

A detailed monthly record for the year with regard to solid matter deposited in the soot gauges situated in the area of the County Borough of Rotherham expressed in tons per square mile is given in the following table:—

Month	Oakwood Hall Hospital	Technical College	Erskine Road	Blackburn
January	 13.17	24.38	31.67	26.59
February	 _	_	18.87	18.79
March	 15.85	46.99	33.11	39.01
April	 13.17	29.60	14.28	30.11
May	 20.01	26.90	20.48	31.17
June	 19.84	27.54	14.42	26.86
July	 18.74	33.57	11.92	16.90
August	 17.71	32.43	10.01	18.99
September	13.41	27.71	16.30	39.76
October	 14.05	33.82	21.60	41.19
November	15.06	40.67	17.76	25.43
December	 14.95	34.53	28.00	35.24
Totals	 175.96	358.14	238.42	350.04
Averages	 15.99	32.55	19.86	29.17

The following table gives the daily average of the amount of sulphur absorbed as ascertained by the lead peroxide method of sulphur determination and expressed in milligrammes per 100 square centimetres:—

Month	Oakwood Hall Hospital	Technical College	Erskine Road	Blackburn
January	 2.53	4.88	4.19	3.93
February	 2.51	4.37	3.56	3.03
March	 2.36	4.37	3.17	2.14
April	 1.65	2.48	2.80	2.15
May	 1.42	3.08	3.55	1.90
June	 0.99	1.93	1.94	1.58
July	 1.03	1.63	1.58	1.20
August	 0.95	1.71	1.52	1.34
September	 1.63	2.66	3.31	2.35
October	 2.10	3.52	3.23	2.62
November	2.46	4.04	3.47	3.31
December	 2.51	3.93	4.47	3.31
Totals	 22.14	38.60	36.79	2 <b>8</b> .86
Averages	 1.84	3.22	3.06	2.40

# INFECTIOUS DISEASES AND TUBERCULOSIS

The prevalence of the infectious diseases notifiable in the county borough is shown in the following table:—

Disease		1951	1952	1953	1954	1955
Acute encephalitis—Infective	 	1	-	1	-	1
Post-infectious	 	-	-	1	-	-
Acute poliomyelitis-Paralytic	 	13	. 3	2	1	8
Non-paralytic	 	4	1	1	-	3
Diphtheria	 	1	3	-	-	-
Dysentery	 	5	-	5	26	72
Encephalitis lethargica	 	-	-	_	-	-
Erysipelas	 	19	17	16	13	7
Malaria	 	-	1	-	-	-
Measles	 	1307	1120	847	130	2072
Meningococcal infection	 	1	5	2	2	3
Ophthalmia neonatorum	 	1	2	1	1	-
Pemphigus neonatorum	 	-	2	1		-
Pneumonia	 	107	120	50	53	29
Puerperal pyrexia	 	9	23	27	25	10
Relapsing fever	 	_	_	-	-	-
Scarlet fever	 	46	41	51	109	90
Smallpox	 	-	-	_	-	_
Typhoid and paratyphoid fevers	 	-	1	-	1	-
Typhus fever	 	-	-	-	-	-
Whooping cough	 	70	141	220	45	45
Tuberculosis—respiratory	 	50	55	54	42	56
other forms	 	16	10	9	5	6
Food poisoning	 	12	5	14	3	12
		-		100		
Totals	 	1662	1550	1302	456	2414

In the following table details are given of the age and ward distribution of the notifications received, together with the numbers of cases removed to hospital and the deaths occurring:—

		Total deaths	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	58
	ı	Total cases removed to hospital	11. 12. 12. 12. 12. 12. 12. 13. 14. 14. 14. 14. 14. 14. 14. 14. 14. 14	100
	the borough	West	110116	253
P		ПідплодТ	1111121111831111118111	76
h war		South	257 251 251 251 251 251 251 251 251 251 251	294
r eac		St. Ann's	100 10 10 10 10 10 10 10 10 10 10 10 10	219
ed ir	orou	North	111111111111111111111111111111111111111	132
notifi	the	Masbro,	111112111111111111111111111111111111111	134
ases	jo	Kimberworth	1 20 20 20 20 44 4 4 4 4 4 4 4 4 4 4 4 4	565
otal	jo	Greasbrough	111116111611111111111111111111111111111	28
T		East	111 121 1396 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	450
		Clifton	112112112112112	212
	At ages—years	65 years and over	111111101111101111111111111111111111111	16
		45 to 65 years	111114141111101111110	35
		35 to 45 years	1111141414111111	27
		20 to 35 years	111111111111111111111111111111111111111	45
peg		IS to 20 years		12
cases notified		10 to 15 years	111111111111111111111111111111111111111	27
cases		5 to 10 years	118 118 118 118 119 119 119 119 119 119	116
No. of		4 to 5 years	111 11 11	343
Ž		3 to 4 years	119116111111111111111111111111111111111	294
		Z to 3 years	112110111211110111411111	295
		I to 2 years	11211211136111114111211111	258
		Under 1 year	1111141118111-11111-1111	91
		At all ages	2072 2072 2072 2072 2072 2072 2072 2072	2414
		Notifiable disease	Acute encephalitis-infective Post infectious Acute poliomyelitis-paralytic Diphtheria Dysentery Encephalitis lethargica Erysipelas Malaria Measles Meningococcal infection Ophthalmia neonatorum Pemphigus neonatorum Pemphigus neonatorum Relapsing fever Scarlet fever Smallpox Typhoid and paratyphoid fevers Typhoid and paratyphoid fewers Typhus fever Smallpox Typhosis: respiratory, males Tyberculosis: respiratory, males females other forms, males females Food poisoning	Totals

HOME HELP SERVICE, WASHING CENTRE.
WASHING BEING CHECKED IN.

Photograph by Eastwood & Wrigley, Rotherham.



THE CHILDREN'S NURSING UNIT.

The Home Nurse carries out treatment and advises the mother,

The following table gives details of the notifications received monthly throughout the year: —

Notifiable disease	January	February	March	April	May .	June	July	August	September	October	November	December	Total
Acute encephalitis-infective	_	-	-	-	-	-	-	_	_	1	_	_	1
Post infectious	-	-	-	-	-	-	-	-	-	-	-	-	-
Acute poliomyelitis-paralytic	-	-	-	-	1	-	-	-	3	3	1	-	8
Non-paralytic	-	-	-	-	-	-	-	-	2	1	-	-	3
Diphtheria	-	-	-	-	-	1.7		-	-	=	-	-	-
Dysentery	6	1 3	2	2	7	14	14	9	6	5	4	2	72
Encephalitis lethargica	-	100	-	-	1	1	-	1	-	1	1	_	'
Erysipelas Malaria	_	-	1 =	-	1 -	1				=		_	
Manalan	5	9	32	209	537	800	396	72	9	3	_		2072
Maningapageal infaction	_	-	1	209	-	000	390	12	-	1	_	1	3
Opthalmia neonatorum	_	_	-		-	-	1 -	_	_	1	_	_	_
Pemphigus neonatorum	_	_	-		-		-	_	_	_	_	_	-
Pneumonia	4	6	3	2	4	2	1	-	1	3	1	2	29
Puerperal pyrexia	i	1	-	_	-	1	1 2	1	-	1	3	2	10
Relapsing fever	-	_	-	-	-	-	-	-	-	-	-	_	-
Scarlet fever	4	8	20	6	8	6	3	3	2	13	8	9	90
Smallpox	-	-	-	-	-	-	-	-	-	-	-	-	-
Typhoid and paratyphoid fevers	-	-	-	-	-	-	-	-	-	-	-	-	-
Typhus fever	-	-	-	-	-	-	-	-	-	-	-	-	-
Whooping cough	-	2	6	5	2	1	8	3	4	3	3	8	45
Tuberculosis: respiratory, males	5	2	1	3	4	4	9	1	2	3	2	-	36
females	3	-	-	1 -	1	5	-	2	2	2	2	3	20
other forms, males	-	-	-	1	-	-	-	-	-	-	-	-	1
females	2	-	-	-	-	-	1	-	-	1	1	-	5
Food poisoning	-	1	-	-	-	2	1	-	-	5	2	1	12
Totals	30	33	65	228	565	835	433	92	31	46	28	28	2414

During the year 100 cases of infectious disease were notified from or removed to hospitals in the district, and the following table gives the distribution:—

	Disc	Infectio		Othe	Other Hospitals			
Disease	Lodge Moor Sheffield	Swallownest, Nr. Rotherham	Kendray Hospital, Barnsley	Moorgate General Hospital	Rotherham Hospital	Other Hospitals	Total	
Acute poliomyelitis: Paralytic Non-paralytic Acute encephalitis: Infective Dysentery Erysipelas Measles Meningococcal infection Pneumonia Puerperal Pyrexia Scarlet fever Whooping cough	7 3 - 1 22 - - 10 1	- - 2 - - - - 21	- - - - - 1	- 1 10 - 2 2 8 -	3 1 1	1	7 3 1 15 1 25 3 5 8 31 1	
Totals	44	23	1	23	8	1	100	

In addition to these cases 17 patients were admitted for observation and were ultimately diagnosed as follows:—

		os- tal	Final diagnosis									
Admitted for observation for	Lodge Moor	Grimsby	Brain abscess	Enteritis	Neurosis	Pityriasis rosea	Pneumonia	Tonsillitis	Torticollis	Upper respiratory infection	Nil	Total
Acute poliomyelitis : Paralytic Non-Paralytic Meningococcal infection	12 2	1 -	- 1	1 -	1 -	- - 1	2 -	2 1	1 -	1 -	5 -	13 2
Scarlet fever	16	1	1	1	1	1	2	4	1	1	5	17

In amplification of the foregoing tables the following observations are made on the number of notifiable diseases. Of the 11 cases of acute poliomyelitis notified, 10 were treated in hospital and the remaining case of paralytic disease was treated at home. Fifteen other patients were admitted to hospital for observation for this disease but the diagnosis was not confirmed. The case of acute infective encephalitis notified during 1955, subsequently died in hospital.

No case of diphtheria was notified during the year. The last notified case occurred in March, 1952.

Of the 72 cases of dysentery notified, 15 were treated in hospital.

Seven cases of erysipelas were reported, all of whom except one, were treated at home.

Twenty-five of the 2,072 cases of measles reported during the year were treated in hospital. No deaths occurred from this disease.

Three notifications of meningococcal infection were received and removed to hospital for treatment. One other patient was admitted for observation but was diagnosed as not suffering from this infection.

Forty-five cases of whooping cough were notified, one of which was removed to hospital for treatment. No deaths occurred.

Ten notifications of puerperal pyrexia were received, of which 9 occurred in institutional and one in domiciliary confinements. The domiciliary case was treated at home, as was one of the hospital confinement cases who took her own discharge from hospital on the tenth day. Three days afterwards she was notified. No deaths occurred in these cases.

No case of ophthalmia neonatorum was notified during the year.

Of the 90 notifications of scarlet fever received, 31 cases were treated in hospital and 59 remained at home. No deaths occurred. One other patient was admitted to hospital for observation for this disease but the diagnosis was not confirmed.

Twelve notifications of food poisoning were received during the year. All were treated at home. All were single cases and in 4 of these the cause was identified.

#### TUBERCULOSIS

#### NEW CASES AND MORTALITY DURING 1955

NOTIFICATION AND DEATHS.—The following table gives details of the number of primary notifications received during the year:—

Pulm	onary	Non-pu		
Males	Females	Males	Females	Total
36	20	1	5	62

In addition, the following cases were brought to notice other than by formal notification: —

	Pulmonary	Non-pulmonary
Death returns from local registrars	1	-
Transferable deaths from Registrar Genera	1 -	-
Posthumous notifications	. 1	_

Particulars of new cases of tuberculosis and of deaths from the disease are given in the following table:—

	Age			Ne	w cases*		Deaths					
-	periods Pulmonary Years		Non-pu	lmonary	Pulm	onary	Non-pulmonary					
	rears		М.	F.	M.	F.	M.	F.	M.	F.		
Under	1		-	_	-	_	_	-	-	-		
1-2			-	1	-	-	-	-	-	-		
2-5			-	1	-	1	-	-	-	-		
5-10			-	-	-	1	-	-	-	-		
10-15			-	1	-	-	-	-	-	-		
15-20			1	4	-	-	-	-	-	-		
20-25			6	2	-	1	-	-	-	-		
25-35			4	6	-	-	-	-	-	-		
35-45			6	3	1	1	2	-	-	-		
45-55			6	-	-	1	2	-	-	-		
55-65			13	1	-	-	8	-	-	-		
55-75			2	1	-	-	2	_	-	_		
75 and	upward	ls	-	-	-	-	-	-	-	-		
To	tals		38	20	1	5	14	-	-	_		

<sup>\*</sup> Primary notifications, including other new cases which have come to the knowledge of the Medical Officer of Health during the year.

A review of the deaths which occurred during 1955 amongst notified cases of tuberculosis shows the following periods elapsed between notification and death:—

1	Notifi	cation			Pulmonary	Non-pulmonary
After death					 1	-
Within one month					 4	-
1—3 months					 -	_
4—6 months					 1	-
7—12 months					 2	-
1—2 years					 2	-
2—3 years					 1	_
3—4 years					 -	-
4—5 years					 -	-
Over 5 years					 2	-
From death returns					 1	-
Total number of dea	ths fr	om tub	erculos	sis	 14	-
Causes other than tu	bercu	losis			 3	_

The ratio of non-notified tuberculous deaths to the total tuberculous deaths was 1 in 14. No action was required for cases of wilful neglect or refusal to notify.

Public Health (Prevention of Tuberculosis) Regulations, 1925.—There was no occasion to take action under the above Regulations relating to tuberculous employees in the milk trade.

PUBLIC HEALTH ACT, 1936: SECTION 172.—No action was taken under this Section dealing with the compulsory removal of cases of tuberculosis to hospital.

#### MASS RADIOGRAPHY SURVEY

The Sheffield Mass Radiography Unit conducted its third survey in Rotherham from the 28th April to 2nd June, 1955. By courtesy of the Yorkshire Electricity Board the Unit was housed in the Rotherham Power Station Canteen, Rawmarsh Road, and considering the comparatively short period covered by the survey, the response from the general public and organised groups from shops, factories, schools and Corporation staffs was again extremely good.

The following table summarises the attendances at the public sessions and organised groups of school children and workers in offices, shops and factories:—

					Male	Female	Total
Public sessions					2573	2621	5194
School children					820	703	1523
Organised groups					477	984	1461
	To	tal mir	niature	films	3870	4308	8178

Of the 8,178 persons attending, 530 were recalled for re-examination by large film. This did not necessarily mean that an abnormal condition had been revealed by the x-ray. These persons came from the following groups:—

				Male	Female	Total
Public sessions	 			247	164	411
School children	 			12	12	24
Organised groups	 			65	30	95
				_	-	_
	Total	large	films	324	206	530

Thirty-six persons were recalled for a clinical interview with the Medical Director:—

				Male	Female	Total
Public sessions	***	***	 	14	14	28
School children		***	 	5	3	8
Organised groups			 	-	-	-
				_	_	-
				19	17	36
				_		_

The following persons were referred to the Chest Clinic: -

			Male	Female	Total
Provisional diagnosis: -					
Active tuberculosis	***		10	8	18
Inactive tuberculosis		***	8	11	19
Known cases of tuberculosis			1	4	5
Non-tuberculous conditions		***	12	7	19
Pneumoconiosis? superadded	tuberc	ulosis	6	-	6
			_	_	_
			37	30	67
			_	_	_

In addition, 8 patients were referred to the general hospital for further investigation and 182 were referred to their own doctor, details of which are given below:—

				Male	Female	Total
Patients referred to gen-	eral ho	ospital:				
Public sessions				 2	5	7
School children				 -	-	-
Organised groups				 -	1	1
				_	-	-
				2	6	8
				_	_	_
Patients referred to their	r own	doctor	_			
Public sessions				 80	68	148
School children				 - 3	2	2
Organised groups				 27	5	32
				-	_	
				107	75	182
					_	_

Details of other conditions discovered during the survey are given in the following table:—

	Male	Female	Total
Bronchiectasis	1	4	5
Bronchitis and emphysema	46	13	59
Cardiac abnormalities	42	52	76
Diaphragm abnormalities	-	2	2
Enlarged mediastinum and bronchial glands	-	3	3
Enlarged sub-sternal thyroid	-	2	2
Neoplasm	1	-	1
Old inactive pulmonary tuberculosis (not			
referred to Chest clinics), known			
cases, etc	15	11	26
Pleural effusion	1	-	1
Pneumoconiosis	56	-	56
Pneumonitis	12	4	16
Spontaneous pneumothorax	1	-	1

The following table summarises the attendances at the surveys held during the years 1952, 1953 and 1955, and shows the marked increase in attendances at public sessions during the 1955 survey:—

ttendances for:—			
	1952	1953	1955
Miniature films - Public sessions	3481	2392	5194
School children	1447	1429	1523
Organised groups	2007	1240	1461
Total attendances for miniature films	6935	5061	8178

	1952	1953	1955
Large film recalls - Public sessions	267	191	411
School children	70	54	24
Organised groups	80	60	95
	_	_	
Total attendances for large film	417	305	530
	_	_	_
Patients referred to:-			
Chest clinics — Public sessions	_	-	57
School children	28	34	2
Organised groups	_	_	8
	_		_
Totals referred to Chest Clinic	28	34	67
	_	-	_
General hospital Public sessions			7
General hospital — Public sessions	_	-	- /
School children	2	3	
Organised groups	-	-	1
	_	_	_
	2	3	8
	_	_	_

The increased attendances of the general public during the 1955 survey are due to changing the time of the year for the visit of the Unit. The 1952 and 1953 visits were held during November and December when there was a definite fall in the attendances at the evening sessions, due to the wintry weather, and the decision to delay the next survey until the Spring of 1955 was fully justified by the increased attendances. It is hoped to arrange subsequent visits of the unit during the same period of the year.

# CARE OF MOTHERS AND YOUNG CHILDREN

#### CHILD WELFARE CENTRES

Redscope Maternity and Child Welfare Centre was opened in September, 1955. A morning session is held there every Wednesday and a doctor is in attendance twice each month. An ante natal clinic is held every Thursday afternoon and there is a doctor in attendance the first Thursday in the month.

Following a number of requests from parents an infant welfare session was commenced at Broom Valley Clinic in October. This is held alternately with the Toddlers session. A doctor is in attendance every week.

In addition to the two main clinics there are seven branch clinics. All areas throughout the borough have clinic facilities within easy access.

The following table gives the attendances at Centres during the year: -

		Sessions	Sessions registrations					iren g	Total attendances			Medical consultations		
		neid	Un. 1 yr.	1-2 yrs.	2-5 yrs.	Un. 1 yr.	1-2 yrs.	2-5 yrs.	Un. 1 yr.	1-2 yrs.		Un. 1 yr.	1-2 yrs.	2-5 yrs.
Ferham House		101	263	16	30	386	108	242	2170	480	422	857	240	331
Cranworth Road		101	281	12	26	424	135	190	2106	556	323	622	207	204
Thorpe		49	32	3	1	54	25	28	329	106	44	106	24	26
Greasbrough		41	52	3	3	77	31	38	459	127	72	134	26	22
Canklow		49	124	8	6	176	43	62	752	189	123	347	61	73
Blackburn		53	30	5	5	50	23	38	337	83	80	104	27	52
High Greave		53	93	2	2	138	35	55	704	200	92	316	95	52
Broom Valley		29	36	35	11	42	67	109	118	112	165	88	108	162
Redscope		14	37	1	3	39	3	9	185	19	18	65	8	15
Totals		490	948	85	87	1386	470	771	7160	1872	1339	2639	796	937

2,627 children making 10,371 attendances.

In addition to the child welfare clinics the following pre-school children were referred during 1955 to the specialist and other treatment clinics held on centre premises:

Total

Orthopaedic		 	 Cases 34	Total Inspections 62
Orthopaedic tre	atment	 	 -	-
Aural		 	 39	94
Aural treatmen	t	 	 27	120
Ophthalmic		 	 27	259
Chiropody		 	 6	7
Dental		 	 289	371
	treatmen		 49	187

At the ophthalmic clinic 27 children under 5 years of age were submitted for refraction. In 26 cases glasses were prescribed. 232 re-inspections of children in this age group were also made during the year.

#### DENTAL TREATMENT

Expectant mothers are referred for routine dental inspection when they first attend at the ante natal clinics. Should the mother be attending at one of the two main centres, she is referred to the dental clinic held in the same building in order to save her a journey specially for that purpose. Urgent treatment may also be done, but generally if treatment is desired, a further appointment is given. Patients from the branch clinics are referred to the main dental clinics at Ferham House and Cranworth Road. The patient may, of course, desire to obtain treatment from her own dentist, although she will have to contribute towards the cost of any dentures required, whereas these are supplied free to patients attending the clinics of the local health authority.

Should any extractions be required, these are done at an extraction session, when another dentist or doctor acts as anaesthetist, unless the patient expressly desires a local anaesthetic, when, provided this is not contra-indicated, it will be given. When the patient's first attendance is late on in the pregnancy or complete extractions are indicated, only the septic teeth are removed before the confinement and the remainder are extracted some little time afterwards so that she is not rendered dentulous for the last three months of pregnancy. The extraction of a large number of teeth is done at two or three visits, as it has been found that, especially with nursing mothers, this is not advisable at one sitting. After the initial removal of septic teeth appointments are given for a complete overhaul of the mouth, including scaling, gum treatments and polishing, fillings, etc., and provision of any dentures then needed. X-ray films are taken where required, and when possible "immediate" dentures are supplied to replace extracted front teeth.

Dental treatment as outlined above is carried out at Ferham House and Cranworth Road Clinics on any of the eleven sessions per week.

Children under school age are referred to the dental clinics from the child welfare centres. They may be sent by their own doctor or brought by their parents direct to the dental clinics, but these patients are always examined, at least for their first dental visit, by a doctor on the staff of the welfare centre.

Treatment of these young patients, generally by extraction of aching teeth under nitrous oxide anaesthesia, is carried out at the two clinics on most of the eleven sessions per week.

The dental clinic at Ferham House was equipped with facilities for X-ray examination in 1949.

The dental technician has been employed by the Local Authority since May, 1948, and he deserves the greatest praise for his work and enthusiastic interest during the past eight years. He makes all the dentures for the patients referred from the maternity clinics; dentures for the school children unfortunate enough to require them; the orthodontic appliances required in correcting irregular teeth and any crowns or inlays which may be needed by any patient.

The actual totals of his work for the maternity patients and school patients are given in this report and in that of the Principal School Medical Officer respectively, and in this division that great amount of work which he gets done is apt to be underestimated.

#### These totals together give: -

Total full dentures made	104	Total orthodontic appliances
Total part dentures made	179	made 287
Total repairs to dentures	26	
Total crowns made	17	Total orthodontic appliances
Total inlays cast	10	repaired 16

When it is remembered that duplicate sets of study models are cast for all orthodontic cases, so that progress can be noted at later stages of treatment, it will be appreciated that the technician is a very busy man. Fortunately he is a quick and methodical worker and so far managed to keep pace with the work asked for from him by three full time and two part-time dentists. Some of his work could be satisfactorily done by an apprentice technician and the time is fast approaching when a trainee-assistant should be appointed. Only when he has assistance will it be possible to prepare duplicate models, in acrylic, of the various stages in making orthodontic appliances and of individual cases of outstanding interest. Such a series of "show-cases" would be very useful, to indicate to parents what could be done if their children's teeth happen to be irregular; for use in talks by the dentists or medical officers to parent-teachers associations, student nurses, etc., or for exhibition on special occasions.

The following table gives details of the treatment given at dental clinics to expectent and nursing mothers and young children during 1955:—

			Children under five	Expectant and nursing mothers	Total 1955	Total 1954
Total attendances			371	1057	1428	1411
Number of individuals treated			289	309	598	640
Extraction -permanent teeth			-	1165	1165	885
-temporary teeth			732	-	732	695
Fillings —permanent teeth			-	127	127	105
-temporary teeth			6	-	6	97
Anaesthetics—local			2	57	59	41
—general			325	234	559	560
Other operations			49	708	757	925
Number of patients supplied wi	th den	tures	-	122	122	127

Details of the denture work done for maternity patients was made up as follows: -

Full upper and full lower dentures	Dentures . 84	Patients 42
Full upper or full lower dentures	. 6	4
Full upper or full lower denture along with par	t	
lower or part upper denture	. 28	- 14
Partial upper and partial lower dentures	. 32	16
Partial upper or partial lower dentures carrying		
4 teeth or less	. 22	22
5—8 teeth	. 19	19
over 8 teeth	. 3	3
Tota	1 194	122
	_	

In addition to the above 2 dentures were relined and 10 dentures repaired.

#### CARE OF THE PREMATURE INFANT

All infants weighing  $5\frac{1}{2}$  lbs. or less at birth are regarded as premature babies irrespective of the period of gestation.

The following table gives details of the premature births during the year: -

			Total births	Premature births	Percentage
Live births	 		1320	113	8.56
Still births	 		35	15	42.86
				· -	
		Total	1355	128	9.45

Of the 128 premature births, 59 live births and 9 still births occurred in hospital; 53 live births occurred at home of which 5 were transferred to hospital, and 5 still births also occurred in cases delivered at home; whilst 1 live birth and 1 still birth occurred in cases delivered in nursing homes.

Details of the birth weights of these babies are given in the following table which also gives the numbers who died within 24 hours of birth and those surviving at the end of 28 days:—

					P	REMA	TUR	E LIV	Е ВІ	RTHS	3					PREMATURE STILL- BIRTHS				
Weight	Born in hospital			Born at home and nursed entirely at home			Born at home and transferred to hospital on or before 28th day			Born in nursing home and nursed entirely there			Born in nursing home and trans- ferred to hospital on or before the 28th day			pital	hospital	ng home		
birth	Total	Died within 24 hrs. of birth	Survived 28 days	Total	Died within 24 hrs. of birth	Survived 28 days	Total	Died within 24 hrs. of birth	Survived 28 days	Total	Died within 24 hrs. of birth	Survived 28 days	Total	Died within 24 hrs. of birth	Survived 28 days	Born in hospii Born at home	Born in nursing home			
3 lb. 4 oz. or less (1,500 gms. or less)	11	5	2	-	-	-	1	1	-	-	-	-	-	-	-	5	-	-		
Over 3lb. 4oz. up to and including 4lb. 6oz. (1,500—2,000 gms.)	12	-	10	7	-	6	2	-	2	-	-	-	-	-	-	1	4	-		
Over 4lb. 6oz. up to and including 4lb. 15oz. (2,000—2,250 gms.)	7	-	6	5	-	5	1	-	1	1	-	-	-	-	-	2	1	-		
Over 4lb. 15oz. up to and including 5lb. 8oz. (2,250—2,500 gms.)	29	1	27	36	1	35	1	-	1	-	-	-	-	-	-	1	-	1		
Totals	59	6	45	48	1	46	5	1	4	1	-	-	-	-	-	9	5	1		

The premature baby nurse attended 90 of the 113 premature babies born during 1955, these included 8 sets of twins; 41 at the age of one month were either partially or totally breast fed.

One child was admitted to hospital after medical aid had been called, and was subsequently diagnosed as suffering from Pyloric stenosis, Ramsted's operation was performed, the baby was discharged home and thrived.

Another baby made very poor progress, and during the first weeks of life was given penicillin therapy. This child was visited over a period of 3 months. The family doctor also made frequent visits; when discharged the baby was gaining weight steadily.

A premature baby of a problem family was visited regularly for three months because of poor living standards when not supervised, the baby thrived and was totally breast fed.

Premature babies from the age of 6 months to 2 years attended the Paediatric clinic by appointment; 88 children were seen by the Paediatrician in this age group and each child had a blood test.

Forty-two weakly babies who were not premature but required special care were also visited and satisfactorily adjusted.

# Details of the babies cared for during 1955 were as follows:-

		Weakly babies	
	Premature babies	other than premature	Total
In care at the beginning of the year	11	2	13
New cases, 1955	96	40	136
		_	_
Total infants	107	42	149
	_	-	_
Infants discharged from care as:—			
adjusted	97	38	135
died	-	-	-
admitted to hospital	-		-
Infants remaining in care at end of the			
year	10	4	14
	_	_	_
Total infants	107	42	149
	_	_	-
Visits paid	1566	292	1858

## INFANTILE MORTALITY

The following table gives the details concerning infantile mortality: -

Cause of Death	Under 1 week	1-2 weeks	2-3 weeks	3-4 weeks	Total under 4 weeks	4 weeks and under 3 months	3 months and under 6 months	6 months and under 9 months	9 months and under 12 months	Total deaths under one year
All causes : certified	20 1	2 -	-	-	22 1	5 2	- 2	-	2 -	29 5
Small-pox	-	-	-	-	-	-	-	-	-	-
Chicken-pox	-	7	-	-	-	-	-	-	-	-
Measles	-	-	-	-	-	-	-	-	-	-
Scarlet-fever	-	-	-	-	-	-	-	-	-	-
Whooping cough	-	-	-	-		-	-	-	-	-
Diphtheria and croup	-	-	-	-	-	-	-	-	-	-
Erysipelas	-	-	-	-	-	-	-	-	-	-
Tuberculous meningitis	-	-	-	-	-	-	-	-	-	-
Pulmonary tuberculosis	-	-	-	-	-	-	-	-	-	-
Other tuberculous diseases	-	-	-	-	-	-	-	-	-	-
Meningitis (not tuberculous)	-	-	-	-	-	-	-	-	-	-
Convulsions	-	-	-	-	-	-	-	-	-	-
Laryngitis	-	-	-	-	-	-	-	-	-	-
Bronchitis	-	-	-	-	-	1	-	-	-	1
Pneumonia (all forms)	-	-	-	-	-	-	2	-	1	3
Diarrhoea	-	-	-	-	-	-	-	-	-	-
Enteritis	-	-	-	-	-	2	-	-	-	2
Gastritis	-	-	-	-	-	-	-	-	-	-
Syphilis	-	-	-	-	-	-	-	-	-	-
Rickets	-	-	-	-	-	-	-	-	-	-
Suffocation, accidental	-	-	-	-	-	1	-	-	-	1
Injury at birth	1	-	-	-	1	-	-	-	-	1
Atelectasis	1	-	-	-	1	-	-	-	-	1
Congenital malformations	3	1	-	-	4	3	-	-	1	8
Premature birth	14	1	-	-	15	-	-	-	-	15
Atrophy, debility & marasmus	-	-	-	-	-	-	-	-	-	-
Other causes	2	=	-	-	2	-	-	-	-	2
Totals	21	2	_	_	23	7	2	-	2	34

Nett births in the year :	legitimate infan	ts		 	1275
	illegitimate infa	nts		 	47
Nett deaths in the year :	legitimate			 	32
	illegitimate			 	2
Infantile mortality rate per	1,000 births :	legitim	ate	 	25
	and the second	illegitin	mate	 	43

#### FERHAM VILLA NURSERY

Owing to the establishment of more stable family life there became a steady decline for places in the nursery. In view of this it was decided to close the nursery on 31st July, 1955. There were no further admissions after April and the parents were informed of the Council's decision. Between April and July arrangements were made for eligible children to be admitted to school nursery classes; several children reached compulsory school age and one child was admitted to a residential special school for handicapped children. At the end of the period there were 4 children remaining on the register, suitable daily minding was arranged for them.

The premises are now being used for speech therapy and child guidance clinics.

Монтн		Number of		Number of Children Attending			Number of Attendances		
		NUMBER OF DAYS OPEN			Total	0-2 yrs.	2-5 yrs.	Total	
January		25	6	9	15	93	136	229	
February		23	2	14	15	36	222	258	
March		23	2	14	16	45	270	315	
April		21	2	14	16	42	236	278	
May		20	1	11	12	20	210	230	
June		22	2	11	13	31	207	238	
July		21	3	9	12	38	137	175	
Total		155	_	_	_	305	1,418	1,723	

Five day week from week commencing 21st February, 1955. Ferham Villa Nursery closed 29th July, 1955.

		Av	ERAGE ATTEND	ANCE	MAXIMUM ATTENDANCE	Minimum attendance at any one session		
Month	1	0-2 yrs.	2-5 yrs.	Total	AT ONE Session	MONDAY TO FRIDAY	SATURDAY	
January		3.7	5.4	9.1	14	7		
February		1.6	9.6	11.2	14	7	-	
March		2	11.7	13.7	15	12	-	
April		2	11.2	13.2	16	11	-	
May		1	10.5	11.5	12	10	-	
June		1.4	9.4	10.8	12	9	-	
July		1.8	6.5	8.3	11	2	-	
		2.0	9.1	11.1	_	-	_	

Number of children attending during the year: -

0 — 2 years at commencement of attendance during 1955 ... ... 4
2 — 5 years at commencement of attendance during 1955 ... ... 17

Total 21



MENTAL HEALTH SERVICE.
HANDICRAFT CLASSROOM, INDUSTRIAL CENTRE.



MENTAL HEALTH SERVICE.
INDUSTRIAL CENTRE FOR ADULTS.

# CHILDREN'S COMMITTEE — RESIDENTIAL NURSERY AND CHILDREN'S HOMES

Medical inspections have been held monthly at the Nursery and all children were examined on admission and discharge.

Number of children immunised	 	***	 12
Number of children vaccinated	 		 14
Number of medical examinations	 		 530
Number of visits made by medical officers	 		 71
Number of visits made by health visitors	 		 11

#### WELFARE COMMITTEE - TEMPORARY ACCOMMODATION

Seven families were rehoused from temporary accommodation during the year. The standard of living is low and frequent supervision is necessary to the majority of families. Mothers are encouraged to attend the child welfare centre with their babies. The number of visits made by the health visitor in 1955 was 113.

# MATERNITY SERVICES AND THE DOMICILIARY MIDWIVES SERVICE

#### MATERNITY SERVICES

The shortage of hospital beds for ante-natal patients does not appear to present such a difficulty as in previous years. One hundred and sixty-four special visits to ante-natal mothers for home background reports were completed. Of these 154 were recommended for admission for their confinements. All were accepted.

#### Confinements among normal residents in the Borough: -

A.	SERVICES PROVIDED WITHIN	19	951	1952	1953	1954	1955
	THE BOROUGH:-						
	Moorgate General Hospital	4	82	412	380	332	366
	Rotherham General Hospital		-	1	-	1	-
	Private nursing homes		43	34	42	54	62
	Domiciliary confinements	70	04	705	662	741	656
B.	SERVICES PROVIDED OUTSIDE						
	THE BOROUGH:-						
	The Jessop Hospital, Sheffield .		15	14	20	12	18
	Listerdale Maternity Home	1	72	188	216	209	220
	Hallamshire Maternity Home		11	13	11	9	9
	Private nursing homes and oth	ier					
	Institutions		6	1	9	2	1
	Domiciliary confinements		8	4	2	3	5
		_	_				
	Total confinemen	nts 14	41	1372	1342	1363	1337
		_	_				

#### EXPECTANT AND NURSING MOTHERS

Relaxation and mothercraft classes continued to be popular; 141 mothers attended making 749 attendances in the year. Films, demonstrations and talks on child care, family life and preventive medicine were given. Following a request from the mothers a Mothers' Club was formed in April, 1955. The club is held each week when mothers attend with their babies and a friendly discussion takes place.

#### DISTRICT ANTE-NATAL AND POST-NATAL CLINICS

The following table gives details of the attendances at the consultant ante-natal clinics during 1955:—

	Sessions	N	ew cases	T	otal wo	men att	ending	Total	attenda	nces
Clinics	held	A.N.	P.N.	B.C.	A.N.	P.N.	B.C.	A.N.	P,N,	B.C.
Ferham House	24	133	38	-	149	43	1	235	44	1
Cranworth Road	d 48	150	54	-	179	58	-	325	66	-
Thorpe	. 7	26	5	-	26	5	_	48	6	-
Greasbrough	. 11	9	1	-	9	3	-	24	8	-
Redscope .	. 4	16	3	-	16	3	-	27	3	-
	-	_		_	_	_	_	_	_	-
Total	s 94	334	101	-	379	112	1	659	127	1
			-	_			_			_

#### DOMICILIARY MIDWIVES SERVICE

Several changes occurred in the personnel during the year. Consequent upon the resignation of Mrs. O. D. Edwards, 92, Lister Street, on 13th June, 1955, her district was taken over by Mrs. G. Walsh, who was the relief midwife, living at 47, Bents Road, Kimberworth Park, and Mrs. G. Hewitt, 133, Broom Valley Road, who left the town 30th June, 1955.

Miss S. M. Thorpe was transferred from 66 Richmond Park Avenue as Holiday Relief Midwife to take over the Broom and Wellgate area.

Mrs. M. Hughes, living at 102, Lathe Road, Whiston, commenced duties on 1st June, 1955, as relief midwife. She purchased a house on the Sitwell Park Estate (just outside the County Borough boundary), and it was agreed that, as a relief midwife, she could reside there.

The second vacancy for a relief midwife was filled by the appointment of Mrs. W. Jones, 210, Badsley Moor Lane, as a temporary relief midwife working from her home as from 15th August, 1955. She later was accepted on the permanent staff.

Two of the pupil midwives in training made application to become district midwives, on passing their final examination of the Central Midwives Board in December, and were accepted provisionally. Mrs. H. Clarke, the Thorpe Hesley midwife was removed on 15th August, 1955, to 11, Wheatley Road, Kimberworth Park Estate, because the larger number of bookings were on this estate, and the tenancy of the house 1, Thorntree Close, Thorpe Hesley, was given up.

The case load of the domiciliary midwives was maintained during the year as indicated below: —

Domiciliary Midwives	1951 712	1952 710	1953 665	1954 754	1955 668
Private Midwives	_	_	-	-	-
	_	_	_	_	_
Total cases	712	710	665	754	668
		_		_	_
Number of cases delivered in Institutions but attended by domiciliary mid- wives on discharge from Institu-					
tions and before the 14th day Number of days service to such cases	459	207	365	319	316
representing a similar saving of patient days in hospital	1881	802	1506	1280	1474

There have been no private midwives practising in the Borough since 1948.

Of the 668 cases attended by midwives, 653 had booked their confinement with the Service, 10 cases were delivered in emergency and 5 were miscarriages.

At the delivery of the 245 midwives cases a doctor was present at the birth of the baby on 14 occasions, having previously been summoned by the midwife on medical aid. Of the 423 cases in which a doctor had been booked the midwife delivered 273 of these patients, making a total of 504 cases delivered by midwives and 164 were attended by the midwives in the capacity of maternity nurses.

Thirty-six cases were handed over to the Home Nuring Service on account of infection or suspected infection in the mother or baby and 448 visits were paid by them.

Analgesia was administered throughout the year by means of gas, air, pethidine and, during the latter part of the year, trilene. Fourteen sets of Minnetts apparatus are possessed by the service, for the administration of gas and air analgesia.

Two sets trilene apparatus were put into service in December, 1955. These will be increased to the full amount in due course. All the sets are overhauled at regular intervals during the year, Minnetts apparatus quarterly, and the trilene apparatus every six months.

The following table gives details of the cases delivered during the year: -

			Doctor no (Midwifer		Doctor (Maternit	booked y cases)	
			Doctor present at	Doctor not	Doctor present at	Doctor not	
			delivery	present	delivery	present	Totals
Midwives booke	d cases		13	224	149	267	653
Emergencies			1	3	1	5	10
Miscarriages				4	-	1	5
			_				-
	To	tals	14	231	150	273	668
			-				_

Analgesia - Number of cases who were delivered with: -

	Doctor no	t booked	Doctor	booked	
	(Midwifer	y cases)	(Maternit	y cases)	
	Doctor	Doctor	Doctor	Doctor	
	present at delivery	not present	present at delivery	not present	Totals
Gas and air only	3	40	29	61	133
Pethidine only	3	22	7	21	53
Trilene only	-	-	2	-	2
Gas/Air & Pethidine	5	121	93	149	368
Gas/Air & Trilene	-	_	2	1	3
Pethidine & Trilene Cases delivered with-		-	8	1	9
out analgesia	3	48	9	40	100
	_		_	_	_
Totals	14	231	150	273	668
		-			

District midwives continue to give service to mothers discharged from local hospitals and maternity homes before the fourteenth day, of whom there were 316 cases taken over for nursing. A number of these were cases booked with the domiciliary service, but for medical reasons or in emergency, had been admitted and returned home to the care of the midwife concerned, as soon as the emergency was over.

The Flying Squad was called out once during the year. The patient had post partum haemorrhage, and was too ill to be removed into hospital.

The premature cots were sent out to 20 cases during the year.

The annual inspection of midwives and nursing home, was carried out by Mr. D. Ballantine, Consultant Obstetrician, and Medical Supervisor of Midwives. Mr. Ballantine was satisfied with the service in all respects.

#### MIDWIVES CLINICS

The number of attendances at the midwives ante-natal clinics held at centres during the year is as follows:—

	Ferham House	Cranworth Road	Greas- brough	Thorpe	Redscope	Totals
No. of sessions held	195	204	49	27	14	489
No. of new cases attending First attendance this year of	315	320	18	60	56	769
women who attended last year but during this pregnancy	71	48	6	11	-	136
Re-attendances	770	621	108	100	54	1653
		_		-		
Totals	1156	989	132	171	110	2258
			-			

At all these sessions the educational facilities included advice on the preparation for the forthcoming confinement, and instruction on the gas and air machine, Trilene apparatus and on general health topics in liaison with the health visitors at Relaxation and Mothercraft Classes.

#### PUPIL MIDWIVES

There have been 8 pupil midwives taking their Part II training on the district, and 7 satisfied the examiners of the Central Midwives Board. The remaining one is completing her training on the district and will take her examination in March, 1956.

#### POST-CERTIFICATE COURSES

Two midwives attended refresher courses during the year, Miss E. D. Jeyes at the Jessop's Hospital, Sheffield, and Mrs. I. McGann at Newcastle, Teachers Course.

# HEALTH VISITING

#### HEALTH VISITORS AND SCHOOL NURSES

Staff changes during the year were as follows: --

Miss Wilkinson, Deputy Superintendent, took up her appointment on 14th February. Mrs. McHugh, Health Visitor, was appointed and commenced duties in April, 1955. Three students who were training at Leeds University were successful in their examination and returned to the department in July. Three new students were accepted for training, two commenced training at Leeds University and one at Battersea Polytechnic in October, 1955. Mrs. Knowles and Miss Stower left the department in March and May respectively.

#### INFANTS AND YOUNG CHILDREN

Owing to pressure of work and shortage of staff during the past 5 years it has been the policy to visit children between 2 and 5 years approximately twice each year. Many of the children have been visited more frequently than as stated. Since the return of the three health visitors from their training, block visiting has been resumed; that is, children 0-1 year are visited at least eight times in their first year of life, children 1-2 years every three months and children 2-5 years at least three times each year.

Visits were made to all children admitted to hospital and reports on home conditions were submitted as and when required. During 1955 there were no cases of Ophthalmia Neonatorum.

The case load for 1955 was: -

Infants under 1 ye	ar on visitin	g list		 	1258
Infants 1—2 years	on visiting	list		 	1148
Infants 2—5 years	on visiting	list		 	3049
Tuberculous patien	its		***	 	419
Mental defectives				 	45
Aged persons				 	1618
Chronic sick				 	47
Diabetics				 	26
Gastrics				 	22

One health visitor and two school nurses attended refresher courses during the year.

#### SCHOOL NURSING

The school nurses have carried out the duties in connection with school work generally, with the help of clinic assistants and clinic nurses.

The case load for 1955 was as follows: -

Number of school population				15331
Number of nursery schools				1
Number of schools with nursery classes				5
Number of voluntary schools				2
Number of primary schools				19
Number of secondary modern schools				4
Number of secondary technical schools				1
Number of County grammar schools				2
Number of special schools:				
Open air school			1	
Educationally subnormal school		and		
senior	,		1	
7444			_	2
Oakwood Hall Sanatorium school				9 children

#### HEALTH EDUCATION

Talks and film shows were given to church organisations on immunisation and vaccination, child care, home accidents, etc. Publicity at child welfare centres is effected by means of show cases, demonstrations and film shows.

During Home Safety Week windows at the Gas and Electricity Showrooms were used for exhibition purposes to depict safety in the home. The windows were dressed by Health Visitors.

In August, 1955, the Health Visiting staff inaugurated the Rotherham Fathers' Club. The aim and policy is to offer opportunities to potential and young fathers to gain some knowledge and understanding about the joys of expectation and family life.

During the first session the talks and lectures included topics dealing with the ante-natal and post-natal period, positive health and preventative medicine. All these lectures were conducted by members of the Health Department except for one outside lecturer.

The Club is held alternate Thursday evenings at Ferham House and on each occasion there has been a very enthusiastic audience.

The First session concluded with a successful Xmas Party to members and their partners.

#### HANDICAPPED CHILDREN'S CLUB

Another enjoyable year has just been completed with much appreciation to the generous support given by the Rotherham Rotary Club in arranging all the transport of the children to and from Ferham House each Wednesday afternoon.

The programmes have been designed to help these physically handicapped children not attending ordinary school, to create confidence in themselves, sociability and preparation for fuller co-operation with others later on.

All children have been encouraged to take some part in the games arranged, of which some of the outstanding successes have been in picnics, play in the Wendy House, dolls and singing games.

The highlight of this year was the Dolls Tea Party complete with real invitations and party fare.

#### SOCIAL CASE WORK

CARE OF THE UNMARRIED MOTHER

During the past year thirty-seven mothers in this category were cared for. Of these:—

Eight were admitted to Mother and Baby Homes: -

Five were cared for in St. Agatha's Mother and Baby Home, Sheffield. Of these:—

- (a) One mother kept her baby.
- (b) One was still awaiting her confinement at the end of 1955.
- (c) One mother whose baby was born in December intends to bring it home.
- (d) Two had their babies adopted.
- One mother was cared for in St. Margaret's Mother and Baby Home, Leeds subsequently keeping her baby.
- One mother was cared for in the Baptist Mother and Baby Home, Camberley subsequently keeping her baby.
- One mother was cared for in St. Katherine's Mother and Baby Home, Huddersfield—subsequently having her baby adopted.

All the above girls returned to work.

Seven were able, with the assistance of relatives or friends, to remain at home—four arranging for a hospital booking, whilst three arranged for home confinements. Four of these girls kept their babies, two subsequently sought adoption and one was stillborn. All these mothers, with the exception of one who remained at home to care for her baby, have returned to work.

A further three girls had their babies without booking, two being attended subsequently by the District Midwife, whilst one was dispatched to hospital in labour. One of these girls subsequently married, one kept her baby, and the other baby, born congenitally delicate, subsequently died.

Two girls married before their babies were born.

Eight further mothers were of the married—separated wives category, or cohabitees. All had established homes. Six kept their babies, whilst two babies were stillborn.

Nine further mothers, also of the same category, were subsequent to their confinements transferred to the Social Worker for special care. All kept their babies, with the exception of one whose baby died soon after delivery.

#### ILLEGITIMATE CHILDREN

A further forty-one illegitimate children came under the care of the Social Worker, making a total of a hundred and fifty-one in all.

The larger National Insurance Maternity Grant and the increased and extended Benefit period which came into operation this year, has still further eased the lot of the mothers of these children. The initial financial strain being removed has greatly lessened the burden on relatives generally, has made the mother more independent and much less worried, and has made the acceptance of both mother and child, in the home of relatives, a much lighter undertaking.

This year, amongst this group, it was not necessary to make a single application for financial help in the provision of baby clothes or necessary maternity equipment to the Stoddart Fund (which is available for assistance in this way in necessitous cases), although subsequent to a mother's marriage one grant of 30s. was obtained for reregistration fees to ensure that the children should have the same surname as their parents.

The Corporation Day Nursery closed in August of this year. Although there had been no applications from the 1954 group of these mothers for the use of its facilities, just as it was due to close, three of the 1955 group were in need of such care. It was possible, however, in the case of two of the 1955 babies to arrange for daily minders whilst in the case of the third a relative stepped forward with the offer of nursing help. On behalf of the mothers of three further children who had attended the Day Nursery it was possible to make successful daily minding arrangements, whilst the mothers of four older children found that they themselves were able to cope without appealing for further help.

Two children whose mothers are still mentally unfit to care for them and with no relatives to do so either, remain in the Corporation Residential Nursery, whilst another, for the same reason, is boarded out.

On achieving the age of five years most children have been absorbed into normal family life. At the end of 1955 only one child of school age was still in need of special care.

#### PROBLEM FAMILIES

There were 51 families requiring special supervision at the commencement of the year. Seven new families were referred during the year and seven families were taken off the books, total remaining 51.

Working intensively with this type of family during the past seven years has enabled the Social Worker to shape the work and she has been able to divide the progress of each family into three definite stages for classification purposes.

1955 has been a rewarding year in this type of work also. Three fathers of families, men who had been idle for years, obtained work, thereby improving their home standards enormously, the family consequently pushing up a "stage." Another, idle for years also, has been promised a job. Two families, well up on the housing list, are struggling to keep their rent books clear for the required number of months in order to render themselves completely eligible for re-housing. Three further families, in housing conditions inadequate for their needs, are, meanwhile, receiving the Housing Department's sympathetic consideration.

#### MATERIAL HELP

Financial assistance was obtained for the supply of wallpaper and paint for 15 households from voluntary sources. Once again, this has proved a strong ally in furthering the work, the results of new interior decorations in a previously dingy house spontaneously building up the self-respect of the entire family.

The expanded free Home Help Service was availed of in three cases, all embracing the "tired mother" category of assistance, with the usual invigorating results due to the fine quality of the women who volunteer for these particular types of jobs.

The larger maternity grants were reflected here also, and this year no applications to the Stoddart Fund for baby clothes or maternity equipment were necessary.

The Social Worker received a large supply of clothing and footwear of all types and this proved a great boon to the work. Furniture and bedding also was collected in response to enquiries regarding the disposal of a surplus of such things by householders who were refurnishing, and distributed to needy cases; these gifts were particularly helpful.

All children received a toy, fruit and sweets at the annual Christmas Treat organised by the Health Visitor-Social Worker on their behalf, once again generous donations being received from Rotherham Soroptomist Club, the Corporation Home Help Social Club, a particularly large anonymous donation of two crates of fruit, another gift of a large Christmas cake, whilst again, many very generous donations were received from interested friends of the work.

#### SPECIAL CLINIC

Follow up work has been carried out, as usual, on request from this clinic on 21 occasions.

# GENERAL STATISTICS

The following statistical summary details the work performed by health visitors, clinic nurses, and clinic assistants (excluding duties undertaken in the School Health Service).

Sections 22, 24, 26, 28, and 51, National Health Service Act.

EXPECTANT MOTHERS		CHILDREN UNDER 1 YEAR
Home enquiries regarding hospital		Premature babies — nurse's
bookings	162	supervisory visits 1588
Re-visits	22	General routine visits 4659
First visits expectant mothers other		Illegitimate 345
than above	122	Ill-cared for 125
Revisits	91	Death enquiries 31
Contacts with social agencies on		
behalf of mothers	113	CHILDREN 1-5 YEARS
Arranging convalescence	59	General routine visits, 1-2 years 2165
Visits to maternity wards	21	2-5 years 3163
Post Natal visits	-	Illegitimate, 1-2 years 228
		2-5 years 740
Young Children (visits paid after		Ill-cared for, 1-2 years 111
the birth of the child)		2-5 years 170
Still births:—		Found on area (and not known to
Hospital and nursing home		have been visited before) 132
confinements	23	Investigations for places in day
Domiciliary confinements	11	nursery 3
Live births:—		Contacts with social agencies 239
Hospital and nursing home		Visits 5-18 years—illegitimate 683
confinements	619	risks 5 to years megitimate 005
Domiciliary confinements	641	SOCIAL ENQUIRIES FOR ALMONERS,
		SHEFFIELD HOSPITAL
CHILDREN 0-15 YEARS-HOSPITAL		
FOLLOW-UP		First visits 15
1st visits	320	Re-visits 3
Re-visits	285	
Visits to children's wards	7	Tuberculosis
Attendances at paediatric clinics	74	First visits 76
		Re-visits 451
SOCIAL CASE WORK		Attendance at Chest Clinic 33
Number of cases referred	11	Contacts 113
Visits paid to homes	489	
Cases referred to N.S.P.C.C	14	FOLLOW-UP VISITS, HOSPITAL
Other social contacts	420	PATIENTS OTHER THAN
Interviews, etc	465	CHILDREN
Attendances, V.D. clinic	6	First visits 440
W. S. U.D. C.H.	21	Do white
Visits, V.D. follow-up	21	Re-visits 332

OTHER INFECTIONS AND	Enquiries by prospective foster
Infestations	mothers 36
Total visits 531	
Referred to other agencies 6	Escorting duties 21
Contact swabbing 31	
	GENERAL CARE AND AFTER CARE
MENTAL DEFICIENCY	First visits 85
1st visits 7	Re-visits 16
Re-visits 88	
Escorting duties 30	
AGED PERSONS	Miscellaneous
1st visits 219	
Re-visits 646	National surveys 9
Ward visits 78	Nursing Home inspection
Hospital survey visits 171	Nursery classes 84
Referred from bed bureau for	Child Guidance clinics 41
investigation 68	Psychiatric visits 15
	Home visits—school children 72
ADOPTION AND FOSTERING OF CHILDREN	Frome visits—school emidren /2
Enquiries on behalf of adoption	DUTIES DELEGATED BY THE
societies 4	CHILDREN'S COMMITTEE
Visits paid after placing and until	
order obtained 16	Visits to Oakwood Grange Nursery 11
Adoptions by direct placing 7	Visits to residential homes
Visits paid after placing and until	
order obtained 13	DUTIES DELEGATED BY THE
Social contacts re adoption	Welfare Committee
	Hygiene surveys — temporary
VIGILANCE—FOSTERING AND	accommodation at the Mount 35
ADOPTION	Visits paid to separate families in
Cases referred to Children's Officer 3	accommodation 80
Visits to homes of fostermothers	
where arrangements for placing	HEALTH EDUCATION
pending 8	Mothercraft and Health Education
Visits to illegitimate children	talks, clubs, clinics and schools 275
placed in foster homes 12	Talks to outside organisations 6

## HOME NURSING

The arrangements for the administration of the service remain as in the previous year.

During the year two Queen's nursing sisters left to get married and one male nurse left to take a post in Lincoln. To replace these two new student nurses commenced training in August; they will take the examination in February. It is hoped to replace the male nurse during the coming year. Two part-time nurses were taken on to the staff—one for holiday relief and one to help with the heavy winter work. One West Riding midwife came on the district for a refresher course in general nursing to enable her to do combined duties in the West Riding. Three members of the staff went to London for a post-graduate course organised by the Queen's Institute of District Nursing.

During the year three parties of third year student nurses from the local hospital spent three days on the district with members of the staff—on each occasion the Home Nursing Superintendent gave these nurses a talk on the history and development of District Nursing to round off their visit to us, and letters of appreciation were subsequently received both from the student nurses and their tutor.

The following table gives details of the nursing staff employed in the Home Nursing Service during the past 5 years:—

	31st Dec.,	31st Dec.,	31st Dec.,	31st Dec.,	31st Dec.,
FULL-TIME STAFF	1951	1952	1953	1954	1955
Superintendent	1	1	1	1	1
Assistant Superintendent	. 1	-	-	-	-
Senior District Nurse	-	1	1	1	1
Queen's Nursing Sisters-females	5	9	9	12	10
—male	2	2	2	3	2
Queen's candidates —females	4	-	2	_	2
—male	-	-	1	-	-
State registered nurses —females	3	2	1	1	1
	-	_	_	_	
Sub-totals	16	15	17	18	17
	_	_	_	-	_
PART-TIME STAFF					
Queen's Nursing Sisters-females	3	6	6	6	6
State registered nurses —females	6	6	4	4	4
State enrolled assistant					
nurses —females	2	1	1	2	1
	-	_	_		_
Sub-totals	11	13	11	12	11
Total Staff	27	28	28	30	28
Equivalent to full-time staff	22.3	23.3	24.6	25.0	24.6

Once again the work of the service has increased considerably during the year—not so much by the number of new patients but by the number of visits paid to all patients. There were 3,392 new patients, an increase of 40 more than in the previous year, visits paid 88,820, an increase of 11,844 visits. The largest proportion of cases were medical and were sent in by general practitioners, the next largest numbers were by individual application.

At the commencement of the year 382 cases were brought forward with 3,392 new cases, this makes a total of 3,774 patients nursed. The types of cases nursed were medical 2120, surgical 1058, infectious diseases 44, tuberculosis 32, maternal complications 34, and the remaining 104 cases were other forms of illness. These cases were referred by:—

General practitioners	 2980	Health Dept. Services	18
Hospitals	 182	Individual applications	212

At the end of the year 408 patients were carried forward and 3,366 patients had come off the books for the following reasons:—

Convalescent			2713	Hospital				320
Died			239	Referred	for	other	causes	60
Transferred	to	other						
districts			34					

The following summary shows the increase which has occurred since the service was taken over in July, 1948:—

			Total cases nursed	Visits	Average daily visits paid
1948	(July Dec	ember)	 963	23442	130.2
1949			 2177	55442	151.9
1950			 2613	62241	170.5
1951			 2720	60838	166.7
1952			 3071	61850	169.0
1953			 3088	64728	177.3
1954			 3667	79976	210.9
1955			 3774	88820	243.3

There are 17 full-time and 11 part-time staff; this is equivalent of 24.6 full-time staff at the year end. As always towards the year end when the pressure of work increases, the part-time staff were working to the capacity of the time they could give.

It may still be necessary to take on some extra staff for the winter months, as we are finding it increasingly difficult to fit in routine weekly bathing of patients during the busy period.

The area distribution of the cases nursed and visits paid was as follows: -

Area				Cases	Visits
Blackburn and H	olmes		 	188	3864
Kimberworth			 	199	3331
Masborough			 	234	4041
Lower Masborous	gh		 	170	2995
Broom			 	97	2823
Broom Valley			 	184	3637
Clifton			 	290	6213
East Dene			 	180	4176
Wellgate			 	216	5379
Canklow			 	231	4324
Town No. 1			 	170	5120
Town No. 2			 	244	4414
Greasbrough			 	87	3301
Thorpe Hesley			 	197	3277
East Herringthor	pe		 	260	4743
Thornhill			 	193	2944
Cases attended by	male	nurses	 	634	14508
Supervisory visits			 	-	9730
			Total	3774	88820

The classification and age groups of all cases nursed and the visits paid during the year were as follows:—

		Age groups					
		Under l year	1-5 years	5-15 years	15-65 years	Over 65 yrs.	Total cases
CASES:							
Medical		128	154	86	1065	997	2430
Surgical		39	88	158	668	162	1115
Infectious diseases		2	34	6	1	1	44
Tuberculosis		-	-	1	33	2	36
Maternal complications		-	-	-	36	-	36
Others		1	3	4	54	51	113
TOTAL CASES NURSED		170	279	255	1,857	1,213	3,774
VISITS PAID:							
Medical		1493	1777	881	23021	37094	64266
Surgical		433	904	1424	10598	6787	20146
Infectious disease		18	411	52	22	23	526
Tuberculosis		-	-	52	1410	36	1498
Maternal complications		-	-	-	699	-	699
Others		44	86	32	577	946	- 1685
TOTAL VISITS	1	1,988	3,178	2,441	36,327	44,886	88,820

At the beginning of 1955 there were 25 children still being nursed and there were 679 new children during the year; making a total of 704. This shows only a slight increase as against last year — 14 more cases. Total visits paid were 5896 as against 6373 last year—a decrease of 477 visits.

The majority of children were sent in by general practitioners, and at the end of the year there were 8 children remaining on the books (665 convalescent, 26 to hospital, 3 removed, 2 died). The two children who died were incurable and both were under 1 year and suffering from congenital malformations.

The nursing staff felt very proud that Rotherham was chosen to represent a small part of the "Round the World" programme on Christmas Day. The value of children being nursed at home must have been realised by many people all over the world. Proof of this came by a letter from our New Zealand friends who heard the Broadcast clearly on Christmas Day.

The number of aged sick people continues much as in the previous year. There were 1,005 new patients and 208 remaining from last year, making a total of 1213 patients nursed, and 40,474 visits paid; an increase of 1803 more visits than last year. The following figures show the result of treatment—at the end of the year 574 were convalescent, 152 were in hospital, 182 died and 63 were removed or transferred and 242 patients remained on the books.

Once again thanks are given to the Home Help Service for all the help they give to the nurses in helping to care for many of our old people during the day and for the invaluable help given at night when need arises.

Thanks are expressed to all kind friends for continued voluntary help and support, which has again enabled the service to bring a little help and comfort into the homes where it is most needed. These include the Rotherham District Nursing Commemoration Fund for their cheque for £25, the Rotherham Distaff Staff, the Inner Wheel and the Church of our Father, for cash grants. During the year several large parcels of warm clothing for the children and adult patients have been received from friends in New Zealand and Napier who take interest in our work. As in the previous year most of the donations received were spent on the patients in providing gifts of food, such as tea, sugar, butter, biscuits, fruit, Ovaltine, Horlicks, Lucozade and orange squash. Tobacco and cigarettes were supplied to male patients, and talcum powder, soap and flannels to those who were bed ridden.

## VACCINATION AND IMMUNISATION

Immunisation and vaccination propaganda played an important part in the daily contact with parents in their own homes and at child welfare clinics. Films have been shown at clinics and to members of church organisations. The response to immunisation has again proved successful, but the number of vaccinations has been disappointing.

#### VACCINATION

During the year records were received of 551 persons who were vaccinated or re-vaccinated. Details of these are given in the following table:—

	Under	1 to 2	2 to 4	5 to 14	15 years	
	1 year	years	years	years	or over	Total
Vaccinations	 347	16	16	10	56	445
Re-vaccinations	 -	-	1	11	94	106

Of these the records of 319 persons were received from 35 private medical practitioners and the remainder from the Corporation's medical officers at the various clinics in the borough.

No cases were reported during the year of generalised vaccinia or post-vaccinal encephalomyelitis, nor were there any deaths from complications of vaccination.

#### IMMUNISATION - DIPHTHERIA

No change was made during 1955 in the arrangements for immunisation. Fixed clinic sessions were held at Ferham House and Cranworth Road Centres, and facilities were also available at any child welfare or school clinic session.

1,088 children completed a full course of primary immunisation during 1955 as compared with 1,738 in 1954. Re-inforcing doses were also given to 701 children as against 982 the previous year. 367 records of immunisation and re-inforcing doses were received from 38 medical practitioners, the remainder being carried out by the Corporation's medical staff at clinics and schools. The age groups of the children at the time of immunisation were as follows:—

	Under 1 yr.	1-4 yrs.	5-14 yrs.	Total
Number of children who— completed a full course of primary immunisation	596	318	174	1088
received a secondary (re- inforcing) injection	_	89	612	701

The position at the end of the year in Rotherham regarding immunisation in relation to the child population is given in the following table which gives details of all children who had completed a course of immunisation at any time before that date:—

Age at 31.12.55 i.e. born in year	Under 1 yr. 1955	1-4 yrs. 1954-1951	5-9 yrs. 1950-1946	10-14 yrs. 1945-1941	Under 15 yrs total
Last complete course of in- jections whether primary or booster.					
1951-1955	149	3,509	4,875	673	9,206
1950 or earlier	-	-	625	4,484	5,109
Estimated mid-year child popu-					
lation	1,320	5,080	13,7	000	20,100
Immunity Index	11.3	69.1	40	).5	45.8

#### WHOOPING COUGH

During the year 881 children received injections of diphtheria-pertussis vaccine and 25 received injections of whooping cough vaccine, making a total of 906 children immunised.

At the end of the year there were 6,352 children under the age of 15 years who had been immunised against whooping cough. The following table gives details of the age groups of these children:—

194	11 — 15	1946 — 275	1951 — 566
194	2 — 28	1947 — 750	1952 — 700
194	3 — 52	1948 — 847	1953 790
194	4 — 79	1949 — 649	1954 — 713
194	15 — 117	1950 — 628	1955 — 143
	_		
Totals - 10-14 year	rs 291	3149	2912

#### B.C.G. VACCINATION

36 contacts of tuberculosis cases were vaccinated during the year.

A second Mantoux skin test to determine the effectiveness of the vaccination was given to the 87 boys who had received B.C.G. vaccination at Spurley Hey Secondary Modern School in 1954. With the exception of six, all gave a positive Mantoux reaction and therefore did not require further B.C.G. vaccination. The six boys giving negative results were re-vaccinated. Two other boys, absent from the vaccination in 1954, were vaccinated during 1955.

## AMBULANCE SERVICE

The Ambulance Service continued to function as a joint service with the Fire Brigade as in previous years and was operated from the Fire Station, Erskine Road, Rotherham, under the direction of the Chief Fire Officer who is also the Director of the Ambulance Service.

No alterations have been made in the arrangements made with neighbouring authorities of the West Riding County Council and the City of Sheffield. The Council also operate the 'knock for knock' arrangements with other authorities who operate the scheme.

The installation of Radio-Telephones continues to be a great success, particularly in the economical use of vehicles. Originally it was estimated that from 6-8 ambulances and 4-6 cars would be required, whilst in actual fact the Service is operating quite well on 5 ambulances, 3 transit ambulances and 1 car. This is made possible to a great extent by the installation of the radiophone system. On many occasions it has proved invaluable, in being able to divert vehicles to urgent cases, whilst operating in the vicinity, rather than turn out another vehicle.

The details of cases dealt with and the mileage involved in the year 1955 were as follows:—

	Ambulances	Cars	Totals
Cases removed—			
within the Borough	5485	21086	26571
other authorities	760	462	1222
Total	6245	21548	27793
Mileage—			
within the Borough	52420	49510	101930
other authorities	7030	4173	11203
Total	59450	53683	113133
Number of accident and other emergency journeys included			
in the above	1451	283	1734

# PREVENTION OF ILLNESS, CARE AND AFTER CARE.

#### HOSPITAL LIAISON

INVESTIGATIONS OF HOME CONDITIONS

The following statement gives details of the Health Visitor reports supplied to hospitals by the Department under the arrangements made with the Rotherham and Mexborough Hospital Management Committee for the furnishing of home reports where necessary for inclusion in the patient's hospital record. Similarly, all discharges from hospital are notified and follow-up visits are paid to the homes of children, old people and other cases where a request for this has been made:—

Number of investigations on home conditions:

'A' forms for children admitted to hospital and including special reports requested by Paediatrician or Chest Physician from health visitor attending clinic	Moorgate General Hospital Doncaster Gate Hospital Oakwood Hall Hospital
"A' forms for aged sick admitted plus any special reports asked for by Physician	Moorgate General Hospital 304 Doncaster Gate Hospital
'A' forms, others	Oakwood Hall Hospital  78 Moorgate General Hospital  Doncaster Gate Hospital
Tuberculosis Survey visits	76 Oakwood Hall Hospital
Aged persons surveys of home conditions for future care	
Enquiries from almoners of Sheffield hospitals re home conditions	18
Reports on social conditions re applications for hospital confinements	Moorgate General Hospital Listerdale Maternity Home Hallamshire Maternity Home

#### Supervisory visits to patients on discharge from hospital:

d special requests	Doncaster Gate Hospital Oakwood Hall Hospital
d special requests	Moorgate General Hospital Doncaster Gate Hospital Badsley Moor Lane Hospital
d special requests g tuberculosis	Oakwood Hall Hospital Moorgate General Hospital Doncaster Gate Hospital

Moorgate General Hospital

#### PAEDIATRIC CLINIC

Weekly visits were paid to the Paediatric Clinic at Moorgate General Hospital and Doncaster Gate Hospital. The liaison is excellent and valuable information in the interests of the patients is available. Visits made by health visitors and attendances by children at these clinics were as follows:—

	Moorgate General	Doncaster Gate
Clinics visited	Hospital	Hospital
Children attending under 5 years	130	93
Children attending over 5 years	94	109

#### MATERNITY DEPARTMENT, MOORGATE GENERAL HOSPITAL

Weekly visits have been made to this department by the Health Visitors. This is a very satisfactory liaison in the interests of the patient and her family. Several days notice is given of the proposed discharge of premature babies, so that suitable provision can be made to accommodate them in their own homes by the premature baby nurse.

Number	of	visits paid		 ***	 	40
Number	of	mothers int	erviewed	 	 	422

## THE CHRONIC SICK WARDS, MOORGATE GENERAL HOSPITAL AND BADSLEY MOOR LANE

Seventy-four visits were paid to hospital by the Health Visitors. Two hundred and forty-five special reports were submitted concerning the patients home environment. This service is of great value in assisting the care available on the patients discharge from hospital.

#### THE CHEST CLINIC

Weekly visits have been made to the Chest Clinic. One hundred and fourteen adults and 109 children were referred for examination as contacts during the year. Due to propaganda and education of preventive medicine there has been an increase in all types of home visits under the care of the chest clinic; there is a better understanding and co-operation by the public in this work.

#### HOME ACCIDENTS

Continued publicity has been given to the prevention of accidents in the home. The following table gives the number of persons who were treated for home accidents during the year at Doncaster Gate Hospital:—

	Mont	н	Under 5 years	5 years and under 65 yrs.	Over 65 years	Total
January			 56	300	28	384
February			 58	308	29	395
March			 77	436	24	537
April			 102	448	23	573
May			 84	385	26	495
June			 100	444	21	565
July			 80	525	17	622
August			 132	542	15	689
September			 118	512	33	663
October			 85	591	28	704
November			 55	627	22	704
December			 48	372	36	456
Total	ls	1955	 995	5,490	302	6,787
		(1954)	 (902)	(4,183)	(262)	(5,347)
Estimated p	opulat	ion	 6,400	68,130	8,000	82,530

Included in these figures were the following cases of burns and scalds occurring in the home:—

			AGE P	ERIODS					
	Under 5 years		5 years and under 65 yrs.		Over 65 years		Totals		
Month	Burns	Scalds	Burns	Scalds	Burns	Scalds	Burns	Scalds	
January	6	8	4	2	-	-	10	10	
February	7	4	5	6	-	1	12	11	
March	2	5	3	9	2	-	7	14	
April	3	3	5	4	-	-	8	7	
May	3	3	5	5	1	-	9	8	
June	13	1	2	7	-	-	15	8	
July	8	3	8	7	-	-	16	10	
August	1	6	8	7	1	-	10	13	
September	4	4	7	5	-	-	11	9	
October	1	3	8	5	-	1	9	9	
November	2	5	17	8	1	1	20	14	
December	2	9	7	5	1	2	10	16	
Totals 1955	52	54	79	70	6	5	137	129	
(1954)	(37)	(42)	(89)	(61)	(6)	(3)	(132)	(106)	
1955	10	06	14	19	1	1	20	56	
(1954)	(7	9)	(15	50)	(9)		(2:	38)	

The health visitors made enquiries into all the cases of burns and scalds occurring amongst children and of the aged. As a result of such enquiries it is interesting to note that many of these occurred in homes of good standard and that it was not necessarily due to negligence but the unforeseen happening which caused the accident.

#### TUBERCULOSIS

During the year 62 new cases of tuberculosis were notified or came to the notice of the Medical Officer of Health. Of these 1 was notified posthumously and 1 was included on the death returns from the local registrars. As a result of the combined efforts of the Chest Physician and the Health Visitors, 213 persons were examined as contacts at the contact clinic. Persons who failed to keep their appointments were revisited and urged to attend.

In every household where there was a known case of tuberculosis, parents of young children were informed of the benefits of B.C.G. vaccination and 36 children were vaccinated during 1955.

The action taken regarding unnotified cases of tuberculosis includes the visiting of the relatives of the deceased person by the health visitor and advice is given on the prevention of the spread of the disease, and wherever they are willing appointments are made for contacts to attend the chest clinic. This is not a frequent occurrence as the majority of cases have been notified prior to death.

The health visitors paid 527 visits and re-visits to patients during 1955 and made 33 attendances at the Chest Clinic for the purposes of exchanging information regarding cases or contacts of the disease. 36 cases were nursed at home by the Home Nurses who made 1,498 nursing visits. Details of these cases will be found in the Home Nursing Section of this report. The Home Help Service also contributed their part and six cases received 1,345 hours of service under the scheme of home helps.

#### TUBERCULOSIS CARE COMMITTEE

The work of the Tuberculosis Care Committee during the year ended 31st March, 1956, has continued on the lines indicated by previous reports. The area covered by the Committee is that of the Rotherham Chest Clinic and includes the County Borough of Rotherham and the surrounding West Riding districts of Maltby and the Rawmarsh Urban District Councils and the Rotherham and the Kiveton Park Rural District Councils.

At the annual meeting of the Committee, His Worship the Mayor of Rotherham (Mr. Alderman L. Kirk) accepted the office of President of the Committee for the ensuing year and Mr. Alderman F. Harper, J.P., and Mr. Councillor A. Wilde, were re-appointed Chairman and Vice-Chairman of the Committee. Mr. Councillor H. Payne was appointed by the Health Committee to fill the vacancy existing at the

beginning of the year and later on in the year, Mr. Councillor E. A. Davis was appointed to fill the vacancy created by the resignation of Alderman Harper from the Council in December, 1955. The resignation included his membership of this Committee, and Mr. Alderman A. Buxton, J.P., was elected Chairman in his stead at the January meeting of the Committee. At a subsequent meeting a resolution of appreciation of Ex-Alderman Harper's services was unanimously adopted.

The retirement of Alderman Harper, which followed so closely on the death of Dr. William Barr, formerly Medical Officer of Health of Rotherham, who had collaborated with him in the formation of this Committee in 1929, was a double blow to the few remaining original members of the Care Committee. Alderman Harper, at the outset made it clear that the ultimate success of the Committee would be dependent upon the strength of its finances. In the ensuing early years, his energies were concentrated on the raising of sufficient funds to this end—whist drives, concerts, garden parties, etc.—all were means by which our activities could be maintained during the lean years of the 1930's. When the National Association in 1934 decided to inaugurate the Christmas Seal Sale in this country, Alderman Harper had no difficulty in persuading the Care Committee to join this effort as he foresaw its possibilities.

During the succeeding 22 years, each Christmastide, he made an annual appeal on behalf of the local seal sales and the income for these years totals over £4,400. Having secured the financial side, Alderman Harper was always sympathetic to the needs of patients. In these days of the National Health Service Act, one is apt to overlook or to accept the current benefits, but in the days before its operation, the Care Committee provided dental assistance—extraction and dentures, home helps whenever available, in addition to its employment scheme. It can truly be said that Alderman Harper's efforts on behalf of this Committee have been of incalculable value and its continuance is ensured by the strong financial position of the Committee.

The sudden death in December of Dr. William Barr, who retired from the post of Medical Officer of Health of Rotherham in January, 1952, removed from our local sphere of contact, one of the officers of this Committee who played a large part in its foundation. He was a kindly man, who always had great sympathy with the tuberculous and his passing leaves a gap in our ranks.

The scheme of care and after-care is operated through the local Chest Clinic and all recommendations for assistance are made by the Chest Physician. Secretarial assistance and other sundry expenses were provided by the Rotherham Corporation and are given a token value of £40. A grant of £150 was made by the West Riding County Council as their donation towards the year's expenses.

Grants of clothing, bedding and extra nourishment made to patients amounted to £76 9s. 6d. during the year. The Committee also continued their grant of £3 0s. 0d. a month to the Medical Superintendent of the Oakwood Hall Hospital for the provi-

sion of concerts and prizes for whist drives, etc., held at the hospital for the patients, together with a grant of £20 for the provision of extras at Christmas. The scheme of Christmas grants to patients granted leave from hospital was again continued, together with grants to those necessitous patients receiving treatment at the Chest Clinic or in receipt of assistance from the Committee; cash grants up to a maximum of £2 0s. 0d. each were made. In all 65 grants were made to Rotherham patients at a cost of £88 0s. 3d. and 70 grants were made to W.R.C.C. patients totalling £94 8s. 0d., a grand total of £182 8s. 3d.

Six men were employed by the Car Parks Scheme during the year, five of whom live in Rotherham and one lives in the West Riding area. All men employed are under the care of the Chest Physician at the Chest Clinic and full co-operation is maintained with the local Rehabilitation Officer of the Ministry of Labour and National Service.

On the 19th January, 1956, a piece of land in Percy Street was opened as a Car Park. This is part of the land purchased by the Education Committee for extensions to the Technical College and its estimated life as a Car Park is approximately two years. In order to clear the portion of Howard Street in front of the Technical College from the parking of cars, parking facilities were granted to their staff at the Car Park. The Car Park is covered by an attendant in the afternoons and evenings only at the present time. This makes it possible to employ an ex-patient residing in the West Riding Area at this Car Park as no split shift duty is involved. He is able to have his dinner at home before coming on duty and only requires to bring his tea with him. On his day off, his duty is undertaken by one of the other attendants on the rota.

Whilst this Car Park is just outside the main streets of the town, it is not receiving the full support of motorists, who still prefer to use the easily accessible nearby streets in the centre of the town. This Park has accommodation for at least 80 cars and its full use by motorists would greatly reduce our losses on our employment scheme.

The expenditure of the scheme for wages and N.I. contributions was £1,578 3s. 6d.; rent and rates £52 10s. 0d.; electricity and repairs £67 0s. 6d.; printing £41 16s. 6d., and miscellaneous expenses, £15 3s. 2d., making a total of £1,754 13s. 8d. The receipts from Car Parks amounted to £1,464 11s. 3d., leaving a deficit on the year's working of £290 2s. 5d.

In the rehousing of tuberculous families the Corporation's Housing Department rehoused nine families outside the "points" scheme during the year under the arrangement whereby batches of 12 houses are placed from time to time for the priority recommendations of the Chest Physician. In addition four other families were rehoused under the "points" scheme and in the calculation of need they had been given an extra point on account of tuberculosis. Six patients were rehoused by the Rawmarsh U.D.C. on the reports of the West Riding Divisional Medical Officer (Area No. 26) following the Chest Physician's recommendations. In the other West Riding area (No. 31), which includes the Rotherham Rural District, the Maltby Urban District and

the Kiveton Park Rural District, eight patients were rehoused. It will be seen that altogether 26 tuberculous patients were rehoused under the several schemes operated by Councils in the Committee's area during the year.

The Care Committee continued its affiliation to the National Association for the Prevention of Tuberculosis, and in accordance with the previous practice this report and its accompanying financial statement are in respect of the year ended 31st March, 1956.

The Committee again participated in the Christmas Seal Sale organised by the National Association, and this effort again provided the main source of income for the year. The number of seals purchased was 200,000, and it is pleasing to report a sale of seals and donations amounting to £378 9s. 10d. The expenditure in respect of the seals, postages, printing and stationery, amounted to £20 15s. 0d. and in accordance with the seal sale arrangements a donation equal to approximately five per cent. of the receipts was rounded off to £19 0s. 0d. and remitted to the National Association. This left a net balance in hand which was paid into the local fund amounting to £338 14s. 10d. The thanks of the Committee are expressed to all who purchased seals and made donations, and to the members of the staff of the Health Department who gave their services in this successful effort.

## HEALTH SERVICES BUREAU

The Health Service Bureau has continued its task of presenting to the public the principles of healthy living and of keeping the public interest alive to their importance. Three thousand, six hundred and sixty-eight persons within the County Borough availed themselves of information at the Bureau in the past year; an increase of 280 on the previous year.

#### GENERAL INFORMATION AND ADVICE

As will be seen from an analysis of the enquiries given below, the scope of information and advice given is extremely wide and varied. Of particular interest is the relatively large increase in the number of enquiries in relation to chest radiography, which increased from 6 enquiries in 1954 to 243 in 1955 and the enquiries in relation to blind welfare which increased from 131 to 202. Those also in relation to the window displays increased from 28 to 88; however, enquiries in relation to blood donors dropped from 98 to 39, which will require re-intensification of effort in this field in the coming year.

#### HEALTH EDUCATION AND PUBLICITY

The two main window displays of the year were centred on Mass Radiography and on Nursing Recruitment, and three displays were given on each subject. The public use of the Mass Radiography Service during the year was extremely gratifying and it is pleasing to think that the Health Services Bureau contributed in some measure towards its success. Much use was made of personal contact with various firms, offices and shops within the County Borough in bringing the Mass Radiography Service to the public's notice when the Unit visited the County Borough in April, 1955.

Leaflets and pamphlets are still distributed on demand and posters are made available from the Bureau to health clinics and schools. A small innovation was the use of book markers on different health topics made available to the public through the kindness of the Borough Librarian and also a local private library. The other health services have continued their co-operation in regard to our window displays. Local tradespeople have always been most willing to loan material for display purposes.

#### VISUAL AID INSTRUCTION

Full use is made of the cinema projector and the slide projector at Ante-Natal and Mothercraft Classes, Group Meetings, and Child Welfare Centres and various voluntary organisations. It is also on use at the Rotherham Father's Club. At most of these group meetings films have been used in conjunction with lectures given by various members of the Health Department team. Special stress was laid on health propaganda in relation to the family unit, ante natal care, the care of children under five, vaccination, immunisation and smoke abatement. It is hoped that in time to come the Health Department will be able to produce its own films on our own Health Services.

#### NURSING EQUIPMENT

There has been a slight increase in the number of applications for nursing equipment which is loaned at the request of the general practitioners and home nurses. During the year the following appliances were issued:—

Air rings	 	244	Drawsheets	 235
Bed blocks	 	2	Dunlopillo mattresses	 10
Bed cages	 	32	Dunlopillo rings	 20
Bed pans	 	319	Feeding cups	 13
Bed tables	 	4	Rubber sheets	 280
Bed rests	 	185	Sputum mugs	 3
Bottles	 	183	Walking sticks	 22
Commodes	 	13	Water bed	 1
Crutches	 	36	Wheel chairs	 59

#### VOLUNTARY ORGANISATIONS

The Bureau has continued to enlist the services of voluntary organisations in order to assist in cases which are beyond the scope of the Local Authority or other statutory bodies. In this way bedding, nourishing foods and clothing have often been obtained or arrangements made for convalescence following illness.

In this connection acknowledgement is made of the excellent help provided by the Rotherham District Nursing Benevolent Association, the W.V.S., the Stoddart Samaritan Fund, the S.S.A.F.A., the Sheffield Marriage Guidance Council and the Council of Social Service, which they have given in cases which are helped out—with the scope of Local Authority Health Services. In some cases there is naturally a limit to the field of Local Authority help but thanks to the numerous voluntary organisations, the full balance can usually be attained by application to the appropriate voluntary organisations and help is always willingly given.

## SUMMARY OF ENQUIRIES, 1955

## An analysis of these is given in the following tables: -

LOCAL AUTHORITY HEALTH SE	ERVICES		NATIONAL INSURANCE ACT	
Home Helps		49	Benefit enquiries:—	5
Convalescence		68		2
School and child welfare		19	Maternity 2	7
Sanitary matters		43	D .	_
Nursing appliances		2267	Widows	4
Tubanulasia		1	Commencetion	
Ambulanas		37	Datingment	1
		66	Retirement	
Midwifery				
Nursing		13		
Immunisation		5	Special insured classes:—	
General health matters		21	Married women	-
Blind welfare		202	Students	-
Social worker		26	Self employed	-
Housing	,	12	Juvenile employment	6
Posters and pamphlets		66	Forms completed	-
Window displays		88	Family allowance	1
Mental health		1		1
			_	
		2980	4	7
EXECUTIVE COUNCIL SERVICES	3		GENERAL	
Dental lists, benefits, etc		12	Assistance Board 2	0
Optical lists, benefits, etc.		2	Location of offices 12	3
Medical lists, benefits, etc.		2	Advice re-employment	3
Medical cards		3	Power completed	_
Forms E.C.1 and completion		_	General assistance and sundries 14	1
Change of doctor		3	Company visit	
Chamilto anan	***	3	Dent Act	3
Tituration and		2	T 1 A14	3
Forms F C 10		6	Civil Defense	1
Forms E.C.10		0	Civil Defence	1
			22	-
		33	32	0
		_		-
HOSPITAL AND SPECIALIST SE	RVICES		Per	
Appliances:—			SUMMARY Total Cent	
Cumical		10	Local Authority Health	
Doof olds				
Deaf aids		12	Services 2980 80.5	
Appointments		16	Hospitals 321 8.6	
Sundry enquiries		1	Executive Council 33 .8	
Chiropody		-	National Insurance 47 1.2	
Chest radiography		243	General 320 8.6	5
Blood donors		39		-
		_	Total 3701 100.0	0
		321		
		_	Number of people making enquiries 366	8

## DOMESTIC HELP

During 1955 the number of cases requiring help continued to rise, although the number of hours per case was reduced. The following table gives details of 760 homes served by the Home Help Service during 1955 as compared with the previous year:—

Type of Case		forward 1954	New	Cases	Total 1955	Total
Type of Case	Days	Nights	Days	Nights	1933	1954
Maternity	 16	_	145	-	161	175
Sick children	 -	-	2	-	2	3
Tuberculosis	 1	-	3	2	6	4
Other sickness	 29	-	85	3	117	101
Aged persons	 222	5	188	35	450	388
Evening Service	 1	-	11	-	12	6
Rehabilitation	 -	-	1	-	1	1
Tired mothers	 3	-	. 8	-	11	5
Total	 272	5	443	40	760	683

An analysis of the hours of service rendered by Home Helps during 1955 is given in the following table and for the purposes of comparison, the corresponding figures for the previous year are given in brackets:

	Day (Hours)	Evening (Hours)	Night (Hours)	Total (Hours)	Decrease (Hours)	Increase (Hours)
Maternity	 14,891	-	-	14,891	1,197	-
	(16,088)	-	-	(16,088)	-	-
Sick children	 404	-	-	404	-	309
	(79)	-	(16)	(95)	-	-
Tuberculosis	 1,321	-	24	1,345	371	-
	(1,716)	-	(-)	(1,716)	-	-
Other sickness	 18,181	_	136	18,317	-	647
	(17,518)	-	(152)	(17,670)	-	-
Aged persons	 119,091	1,240	3,543	123,874	-	18,268
	(102,672)	(456)	(2,478)	(105,606)	-	-
Domestic crises	 700		_	700	-	700
		-	-		-	-
Rehabilitation	 453	_	-	453	-	277
	(176)	-	-	(176)	-	-
Tired mothers	 1,480	-	32	1,512	-	903
	(609)	-	(-)	(609)	-	-
Washing centre	 2,119	-	-	2,119	-	664
	(1,455)	-	-	(1,455)	-	-
Totals—1955	 158,640	1,240	3,735	163,615	1,568	21,768
1954	 (140,313)	(456)	(2,646)	(143,415)	-	-

The following table gives details of the 760 cases assisted by the Home Help during 1955 as compared with the two previous years:—

	Total No.	Total No.	Average No. of hours per case	Average No. of hours per case	Home Help sickness rate (over
	of cases	of hours	per annum	per week	12 months
1953	 554	126233	227.9	4.38	2.85 per cent.
1954	 683	143414	209.9	4.03	2.63 per cent.
1955	 760	163615	212.5	4.06	2.68 per cent.

It is pleasing to note that the reduction of hours per case and the sickness rate for Home Helps in 1954 has been maintained in 1955.

#### NIGHT AND EVENING SERVICE

The night service continued to function between 10.0 p.m. and 6.0 a.m., and the evening service between 4.30 p.m. and 10.0 p.m. was used in cases of special emergency.

An increase is shown in the demand for these services and the home help given has been greatly appreciated.

It is recognised that whilst the demand for this particular part of the service has not been as great as was at first anticipated, it gives valuable assistance and is necessary to enble successful domiciliary care to be given.

#### RECRUITMENT

To maintain the present standards required for this service it is becoming very difficult to recruit the right type of woman for full or part-time work. Whilst rates of pay and conditions of service are good, the work is very exacting and demands the maximum amount of energy. Caring for the aged sick, and all other categories where home helps are needed each and every day, calls for more than the usual amount of patience, tact and human understanding.

#### Analysis of Recruitment:

Brought forward from 1954	***	 	128
Home Helps employed each week		 	144
An increase of		 	16

#### DOMICILIARY CARE OF THE AGED

The fact that the Home Help Organiser is also Social Worker for the Domiciliary Care of the Aged has greatly improved the co-ordination of the Service given to old people. During 1955, an additional 18,268 hours service was provided for this group. It is evident, therefore, that in order to meet the changing pattern and the essential social requirements of the growing demands for this service, further expansion is necessary.

It must be remembered, however, that whilst there is a general agreement regarding the essential need of the Home Help Service to assist old people to remain in their own homes, it is important that hospital accommodation should be available when old people require active medical or nursing care. Even if there were unlimited institutional beds, there are many who would not of their own volition leave their home. The spirit and the display of physical and mental effort made by these old people to prove the point of being able to manage at home with the assistance of a home help, is something that can only give rise to admiration. It is for all of us to encourage the independent spirit of old people and to create conditions that will allow them to stay at home.

Examples of this state of mind are the little old lady, aged 83, who locks the door each time she hears a car because she fears being compelled to leave her home; and Granny, who prefers to stay at home with her gill of beer each night, and her pipe of 'baccy'; and others, who refuse to live with relatives because it would often mean leaving the house where they were born and where they are determined to die. There is a touch of pathos in the genuine fear old people have of losing the security which has taken a lifetime to build. Even though it may be only one room very poorly furnished, their fundamental requirement is to be helped to retain their independence and be allowed to remain in their own home.

It is abundantly clear that the practical assistance given by the Home Help Service is of considerable importance in the home care of the elderly and tremendous efforts are made by all home helps to bring happiness into the homes of the people whom they are called upon to serve.

The co-operation of the general practitioner is essential to the effective use of this service, and the fullest co-operation has been fostered and maintained, to the benefit of all persons requiring help.

To increase the efficiency of the Service it is suggested that consideration should be given to the provision of Mobile Home Help Units, where a team of home helps could visit old people, light a fire, prepare a meal, make the bed, get the old person dressed, etc., and move on quickly to the next elderly person's home.

At the request of the police the Home Help Organiser attended at five inquests held on the deaths of old people during 1955.

There is an ever-increasing consciousness of the community regarding home safety. Fireguards, which are loaned out to old people, have been extensively used and home helps have again played a big part in preventing accidents in the home. The family is taught the need for home safety within the home by practical demonstration.

After discussion with members of the Gas Board it was appreciated that home helps "who visit the homes of the older age group," along with other social workers, would be of great assistance in advising how to eliminate accidents in the home. Copies of leaflets issued by the Gas Council have been given to all the home helps and visitors in this Section.

#### CENTRAL REGISTER OF AGED PERSONS

A central register of aged persons is being compiled for the general use of all responsible officers. Its functions include: —

- (a) The collation of all relevant information regarding aged persons.
- (b) To establish priorities (particularly aged persons living alone).
- (c) To determine the course of action, taking into consideration medical and social conditions.

It is evident from experience gained during the past year that the compilation of the central register will be a slow process. There are many difficulties to overcome. In the first place there are difficulties of access. For example, an old person may be deaf, or may mistake the visitor for an unwanted salesman. Great tact is also required in obtaining information to avoid giving the impression of prying into the private affairs of the old person. In some cases, information is volunteered by neighbours; in others, a series of ineffective visits may be made before an interview takes place.

It is of importance to note that in October, 1955, at a Visitors' meeting of the Old People's Voluntary Welfare Committee, Alderman A. Buxton, J.P., Chairman of the County Borough Health Committee, asked for volunteers to assist with this very necessary work. Fourteen volunteers came forward and are making a valuable contribution by follow-up visits. Thanks must be given to the Chairman and Secretary of the Old People's Voluntary Welfare Committee for their willing support and co-operation.

Close co-operation has been maintained with all voluntary organisations. Information regarding aged persons, known to the different voluntary bodies, is reported to the Home Help Section for inclusion in the central register.

#### HOME HELP WASHING CENTRE

There has been no loss or damage of 33,747 articles received at the Centre. It should, however, be remembered that the present accommodation is inadequate and unsuitable, and the provision of a new Centre in the not too far distant future must not be lost sight of.

The Centre undertakes the washing from households of the chronic sick and the elderly, and it has played a very responsible part in the smooth running of the Home Help Service. Some of its main features being:—

- (a) It has enabled a more economical use of the home help.
- (b) It has provided a higher standard within the home, and has had a good effect upon the general hygiene of these groups.
- (c) It is possible to receive and return washing from incontinent patients in 45 minutes. This procedure has helped old people whose resources are very limited.
- (d) It has conserved the energy of the home help for more important duties in the home.

Great interest has been shown in the Home Help Washing Centre. Numerous local authorities have written asking for information; others have sent representatives to see the Centre, including London, Cambridge, Leicester, Lincoln and Leeds.

#### DOMICILIARY MEALS SERVICE

This is another experimental aspect of the Home Help Service in conjunction with the Old People's Voluntary Welfare Committee. It is a new approach to the old problem of providing meals for elderly homebound people.

The service commenced on 5th September, 1955, and is administered by the Home Help Organiser Social Worker in close collaboration with the Chairman and Secretary of the Old People's Voluntary Welfare Committee. The administration of the scheme is as follows:—

#### Method of Ascertainment.

- 1. Homebound.
- 2. Living alone.
- 3. Aged 80 years and over.
- 4. Income under £2 (after dis-regards).

#### Method of application.

- The 6/3d, allowed each week for the meals is collected weekly by the home help from the Home Help Organiser.
- The meals are bought and cooked in the old person's own home by the home help.
- 3. The meals are free to the old people.
- 4. The cost of each meal is 1/3d.
- As an experiment 18 old people will receive 5 meals a week for nine months.

#### Cost.

- The cost of the meals is met by the Old People's Voluntary Welfare Committee.
- There are no additional expenses to the Local Authority as there are already home helps in attendance on these cases.

It must be remembered that the 6/3d, allocated for meals is a supplement to the income already received by the pensioners.

Co-operation has been sought and given by the general practitioners who have agreed to fill in a questionnaire regarding the benefits received by their patients from this scheme.

This service is a fine example of the Local Authority and a voluntary organisation working together for the benefit of the elderly.

#### MATERNITY

Home Help has again been given in ante-natal and post-natal periods, thus relieving the mother of the full responsibility of running the home during a very difficult period. Whilst there has been a decrease in the demand for help in maternity cases, it would be reasonable to assume that for the short period of 14 days a relative will often offer to give assistance.

#### SICK CHILDREN

Although there has been an increase in help given, the demand for assistance in the home where there is a sick child being nursed by its mother and a home nurse is not great. It would appear that the sickness being of a temporary nature, aunties or grandmas are quite able and willing to give the mother a helping hand.

#### TIRED MOTHERS

As will be seen from the table, there is an increase in the demand made for this service during 1955. The mothers helped in this way received free Home Help Service in the first instance for two weeks, and the period is subject to review. The Chairman of the Health Committee may authorise, in certain circumstances, the extension of the free service.

These families are not problem families, but families in which the mother has reached almost "breaking point" due to the continual burden of domestic responsibilities. The number of cases which are dealt with during the year are relatively small but a review of these cases has shown the lasting benefits which have resulted from the help given.

#### REHABILITATION OF PROBLEM FAMILIES

The rehabilitation of problem families is of necessity a slow process. If one considers the picture that is so well known, of the family which has found modern life so complicated that it prevents it from fitting successfully into the accepted social standards of modern society, it will be realised that, irrespective of length of time needed, society must accept this responsibility and endeavour to eradicate it. To this end, there is great scope for the Home Help Service to assist in the rehabilitation of these families.

In every family assisted, the home help influences the standard of the home by her technique, method and organisation. Her whole attitude helps to create a harmonious family life which is so essential to build a happy society.

There is often terrific apathy and misunderstanding to overcome. These families strongly resent change, and often the home help is looked upon with varying degrees of suspicion; but gradually she becomes accepted as a friend who helps and advises, and by example, stimulates effort and creates the interest of the parents in their home. She is looked upon by the children with wonder because she can bake bread and pies; who knits and sews on buttons, instead of using safety pins. She cleans, and scrubs and washes, and even makes them wash before having a meal. All these things, which

are the fundamentals of home-making are taught to the parents. They are encouraged to help themselves, to create within them, the will to maintain the standards set by the home help, thus preventing the disintegration of the family unit. There is no doubt that when a home help has been called upon to assist in this field of social work, excellent results have been achieved.

#### FAMILY CRISES

It is of particular interest to note that the service of a home help at the time of a family crisis is of immense value. For example, in the case of the death of the mother of young children, or desertion of a young family by the mother, a home help is provided. This helps to tide the father over a very difficult period, thus preventing the disintegration of the family. It gives him an interim period of 6 weeks to provide a more permanent solution to his problem.

#### BUSINESS MEETINGS

Meetings of the home helps are indispensible to the smooth running of the service. They are held for the specific reason of encouraging them to air their grievances by general discussion. This procedure has a good effect; it makes a helper realise that hers is not the only case where difficulties arise.

#### HOME HELPS' WELFARE - SOCIAL CLUB ACTIVITIES

The members of the Social Club have again been very active throughout the year. The following social functions have been organised:—

Children's outing to Skegness Christmas Fayre

Social evenings, bring-and-buys, etc. Children's Christmas party

Dances Dinner and Dance

Some of these functions were attended by the Chairman and the Vice-Chairman of the Health Committee and the Medical Officer of Health. The children's Christmas party was a huge success and the Chairman of the Health Committee acted as Father Christmas.

## MENTAL HEALTH

The year under review has on the whole been one of progress, occasionally clouded with the difficulties experienced in securing hospital accommodation for both the psychotic patient and the mentally defective.

The transference of certified mental patients from designated premises at Moorgate General Hospital to Middlewood Hospital, Sheffield, was far from satisfactory. The lack of accommodation was primarily responsible for having practically all Summary Reception Orders suspended in an effort to avoid orders expiring.

Even this did not prevent some cases having to be re-certified. In the main, the necessity to recertify applied to cases suffering from senile dementia. It is and it will continue to be the practice of officers of this authority to explore every avenue in an attempt to find suitable care for this type of patient before initiating action under the Lunacy Acts. In the majority of cases custodial and general nursing care seems to be all that is indicated. This poses the question so often raised of the need for a half-way house between mental hospital and general hospital, where these old people, many of whom are in the twilight of their years, could be adequately cared for without the stigma of certification. The introduction of some alternative to certification of the old people seems now long overdue, and it is to be hoped that the Royal Commission on Mental Health at present sitting will give careful consideration to this question. Earlier in the year the Sheffield Regional Hospital Board considered the question of the serious lack of accommodation following expressions of dissatisfaction at the delays in obtaining admission of patients requiring in-patient psychiatric treatment made by the Local Health Authorities in the area. Recommendations made which affect this authority were as follows: -

- (a) That the designation of Moorgate General Hospital, Rotherham, as a mental hospital and for the purpose of Section 20 of the Lunacy Act, be cancelled and the wards be released as soon as the alternative accommodation becomes available.
- (b) Admission of all patients requiring mental treatment to be direct to Middlewood Hospital.
- (c) Two existing wards at Middlewood Hospital, one male and one female, to be adapted for the reception of cases admitted under the provisions of Section 20, Lunacy Act, 1890.

On the 1st December, these recommendations were partly brought into effect. As from this date all male patients were to be admitted into the new Section 20 Wards at Middlewood Hospital. The female ward was still in the process of structural alteration but it was hoped that the reception of cases into the ward would take place early in 1956

The great advantage of the new arrangement will be in the admission of patients to a ward where immediate treatment can be given and it is hoped that early treatment will result in a reduction of the average length of stay in hospital thus allowing a quicker turnover of patients.

The lack of accommodation in Mental Deficiency Institutions continues to prevail and the position is probably worse now than at any time since the introduction of the National Health Service Act in 1948. The number of places available for mental defectives in institutions falls very short of the estimated need. In many cases the presence of a mentally defective child in the home does much to impair the health and balance of family life, particularly if the defective is in the home all day and every day. The strain of looking after and supervising a child of this nature falls heavily on the parents and in particular the mother. The situation has been eased a little by taking advantage of the short term care provision and the training centres provided by the local health authorities.

It would not be right to say that Occupation and Industrial Centres are stop gaps for overcrowded institutions but they do play an important part in helping to alleviate the worries and anxieties of many parents.

During the year the new Industrial Centre was completed in June when it commenced to admit pupils. It was officially opened by Dame Enid Russell-Smith, D.B.E. (Under Secretary of the Ministry of Health), on 28th September, 1955, and is designed to accommodate 50 adult pupils.

One of the most pleasing features brought about by the provision of the Industrial Centre is that the waiting list for admission to the Occupation Centre is now nonexistent.

All pupils who are able and willing to attend are being accommodated and it is to be regretted that there are still a few not attending. Efforts to persuade parents of these cases to agree to their attendance will continue to be pursued.

#### MENTAL DEFICIENCY ACTS, 1913-38

Whilst responsibility for the provision of institutional accommodation for defectives is the concern of the Regional Hospital Boards, the selection of suitable cases and the taking of all initial steps for securing admission, together with subsequent domiciliary supervision (including leave of absence on licence) are still carried out by officers of the local health authority.

The placing under Order in institutions of defectives who are normally domiciled in Rotherham, and of cases on leave of absence on licence from such institutions at the end of 1955 was as follows:—

	Resident		On lice	nce leave
	Male	Female	Male	Female
St. Catherine's Institution, Doncaster	 30	35	5	3
Stoke Park Colony, Bristol	 2	1	-	-
Whittington Hall, near Chesterfield	 -	6	-	-
Grenoside Hospital, near Sheffield	 7	1	-	-
Aston Hall Institute, Nr. Sheffield	 -	2	-	-
Victoria Hospital, Mansfield	 1	-	-	-
Fir Vale, Sheffield	 -	1	-	-
Thundercliffe Grange, Rotherham	 1	-	-	-
Rampton Hospital, near Retford	 3	1	-	-
Moss Side, Liverpool	 2	-	-	-
The Manor, Epsom	 1	1	-	-
Glenfrith Hospital, Leicester	 1	-	-	-
Ridgeway Hospital	 1	-	-	-
Farmfield Hospital	 1	-	-	-
Sheffield Girls' Hostel	 -	1	-	-
	_	_	_	_
	50	49	5	3
		_	_	_

The total number of cases under order in institutions is 99. This figure shows no change from last year.

#### ADMISSIONS INTO MENTAL DEFECTIVE INSTITUTIONS

Admissions into Mental Deficiency Institutions during the year 1955 numbered 3 females. Two cases were admitted under the provisions of Section 5, Mental Deficiency Acts, 1913-38 (Petition presented by an authorised officer of the Local Health Authority) and one on the petition of a relative (Section 3, Mental Deficiency Acts, 1913-38).

#### DISCHARGED (OR DIED) FROM MENTAL DEFICIENCY INSTITUTIONS

During the year 1 male and 1 female were discharged from order and 1 male died.

#### LICENCE LEAVE GRANTED

During the year licence leave was granted to 2 cases making the total number of cases now on licence 8 (5 male, 3 female). Earlier in the year 11 were on licence but 2 had to be returned for breaking the condition of licence and one was given a full discharge from order.

#### GUARDIANSHIP

No change occurred during 1955 in the number of guardianship cases. Three adult defectives remain with private guardians under the general supervision of the Brighton Guardianship Society.

It continues to be extremely difficult to find persons who are willing to accept a defective into their homes and in doing so perform the statutory duties which guardianship involves.

#### ASCERTAINMENT OF DEFECTIVES

The following new cases were ascertained during 1955: -

	14 Basel of it as too less long to be a	Male	Female
(1)	Cases reported by local education authorities under the Education Act 1944		
	(a) Under Section 57 (3) of the Act	3	5
	(b) Under Section 57 (5) of the Act	4	6
(2)	Other cases reported and ascertained to be "subject to		
	be dealt with "	-	-
(3)	Ascertained cases who are not at present "subject to		
	be dealt with "	1	1
		_	_
		8	12

It will be observed that 18 of the above cases were notified by the Local Education Authority, which is the main source of ascertainment.

#### SUPERVISION OF DEFECTIVES IN THE COMMUNITY

The following statistics relate to the number of defectives in the various classes who are subject to supervision as at 31st December, 1955:—

	Male	Female
Mental defectives on licence from institutions	5	3
Mental defectives under guardianship	-	3
Mental defectives "subject to be dealt with"		
(a) under statutory supervision	58	66
(b) others	10	22
Mental defectives not at present "subject to be dealt		
with " (voluntary supervision)	24	20
Cases supervised for other authorities	-	2
	-	_
	97	116
	_	

With the exception of the three cases under guardianship in the South of England, supervision was carried out by officers of the Local Health Authority. During the year, 689 visits were made to the homes of defectives plus numerous visits made in connection with licence leave, holidays and renewal of detention orders. 27 cases were escorted from and to institutions for holiday leave. Of the cases supervised during the year 6 left the area, 2 died, 3 were admitted into institutions and after careful and thorough investigation 17 cases who, having proved themselves to be of stable character, were removed from the register leaving a total of 213 under some form of supervision.

SHORT-TERM CARE OF MENTAL DEFECTIVES (CIRCULAR No. 5/52).

Despite the shortage of accommodation in mental deficiency institutions, beds are occasionally available for short periods through the absence of patients on holiday leave or short term licence. During the year six cases were admitted into St. Catherine's Institution for short term care. Defectives admitted under these provisions are admitted without legal formality, but it is explained to relations that the period of care should not exceed the period of special need and one or two months is considered the normal maximum. If a longer period were necessary then the question of a permanent form of care may have to be considered. Much of the success of this scheme depends upon the degree of co-operation between the local authority and the hospital concerned, and our thanks are due to the Medical Superintendent of St. Catherine's Institution, Doncaster, for his willing co-operation.

#### OCCUPATION CENTRE

Up to June of this year 38 pupils were in attendance at the Centre. With the opening of the Industrial Centre on the 13th June, this number was reduced to 22 by the transfer of all pupils over the age of 16 years to the Industrial Centre. This number was increased to 29 by taking in all cases on the waiting list, which is now non-existent.

Attendances at the Centre during 1955 totalled 7,034 half days out of a possible 7,871. This represents an average attendance of 89.4 per cent.

The Centre was visited on the 11th February by an Inspector of the Board of Control who reported as follows:—

- "Work on the building of the new Industrial Centre is now well advanced, and it will eventually accommodate twenty-five older boys and twenty-five older girls. Sixteen older patients will be transferred from the junior centre. Nine patients now on the waiting list will be admitted.
- "Meanwhile the centre continues to cater most ably for the needs of the very mixed grades of patients. Each group uses the hall in turn for physical activity. There are three groups for instructional purposes and work is well planned and graded to suit individual needs. Handwork is taught and a wide variety of articles are made. Particularly interesting is the good work that even the smallest nursery child achieves.
- "Older girls receive special instruction in domestic work and the Centre laundry is done on the premises. The older boys are taught simple woodwork and gardening.
  - "Discipline is good and the children are friendly and responsive."

#### INDUSTRIAL CENTRE

This Centre opened for the admission of pupils on 13th June, 1955, when 17 males and 18 females were placed on the register. During the remainder of the year, 3 new pupils were admitted and 5 left for varying reasons. At the end of the year 33 pupils were on the register.

Attendance at the Centre, since the opening, totalled 3,202 half days out of a possible 3,555. This represents an average attendance of 90.1 per cent.

At present there is no waiting list for admission, but 4 cases attending the Occupation Centre will attain the age of 16 years during 1956 and will be automatically transferred. The Centre was visited by an Inspector of the Board of Control on the 12th July, and her report reads as follows:—

"This new Centre is a permanent structure, brick built and on one floor only.

"The accommodation consists of:-

Large hall-(sliding partition) used also as dining room.

Two smaller halls each divided into two classrooms by sliding partitions.

Boys' Cloakroom-2 W.C.s, 3 urinals, 3 wash hand basins-shower.

Girls' Cloakroom-2 W.C.s, 3 wash hand basins, bathroom.

Staff Office and cloakroom.

Kitchen, electric cooker and water heater. Washing machine—large hatch (sliding shutter) to dining room.

Storage and cleaner's cupboards.

Large asphalted playground.

Small areas of flower garden.

Floors are of composition tiles and the building is heated electrically from beneath the floor.

As yet the walls are awaiting decoration. This is to be done during the summer vacation.

"The new building is connected to the Junior Centre by a covered way.

"The furniture is of the modern stackable type and the tables have formica tops.

"One woodwork bench and a good selection of tools have been provided. The remaining equipment is to be made by the boys.

"The boys' and girls' section are separated by the assembly hall which is used by each group in turn for activity periods. Physical training and organised games are taken on the playground whenever possible.

"This Centre has been opened just a month and is of course not yet running to a regular time-table, but it is surprising how much progress has been made in a short time. The girls have already completed a good display of needlework, particularly praiseworthy when it is known that until a month ago many had never held a needle.

"Good progress has been made by the boys also and to-day they were all able to name the various tools and showed competence in handling them. Again it must be remembered that many of these boys have never before attended any school or Occupation Centre and the first problem they presented was one of socialization, and a spirit of comradeship has had to be initiated.

"The cleaning of the premises is being done by the boys and girls. Correct' methods of cleaning in all forms are used. The girls do the laundry for this and the junior centre.

"Future policy of this new unit was discussed at some length. The plans are utterly practical and realistic. The training is to be comprehensive and planned according to individual need and aptitude.

"Whilst every effort will be made to train boys and girls to become wage earning, it is appreciated that only a comparatively few will ever be capable of becoming self supporting. The primary aim of this Centre is to equip the boys and girls with sufficient knowledge to care for themselves and their belongings and to enable them to fit into modern society as far as is reasonably possible. If the future plans are tackled with the same energy and determination as has already been shown in the first month's working the result will be more than gratifying.

"The Committee are to be congratulated on having provided such an excellent building and those responsible for the furnishing and equipment deserve praise for their careful planning and wisdom of choice."

With the opening of the Industrial Centre extra staff were engaged. Both Centres now come under the control of one head teacher, Miss E. Kelford, and the full staff is now as follows:—

Occupation Centre — (Number on register—13 males, 16 females)

Three female assistant teachers.

Industrial Centre — (Number on register—16 males, 17 females)

One male teacher (craftsman), one male assistant teacher and two female assistant teachers. One of the female teachers, Miss G. Calam, is also deputy head teacher.

Two members of the staff attended a refresher course during the year and from reports received great benefit was derived.

With the increase in the number of pupils now receiving training the existing transport was totally inadequate and alternative transport had to be arranged. This now takes the form of two public service vehicles supplied by the Corporation Transport Department, each covering a different area of the town picking up and setting down at fixed points. The total number using transport is now 53. All pupils are escorted to and from the Centres by members of the teaching staff working on a rota system.

The quality and quantity of the mid-day meal continues to be good. Two pupils at the Occupation Centre and three at the Industrial Centre receive free meals.

The Open Days for parents and friends were held on the 24th November and 1st December. Both functions were very well attended indeed. The sale of articles for the year for both Centres amounted to £98 0s. 11d.

#### LUNACY ACT 1890 AND MENTAL TREATMENT ACT 1930

The co-operation and liaison between the various agencies and services continues to be good and such good understanding can only tend to simplify the many delicate situations which often arise in and around the care and treatment of those suffering from mental illness. Interviews at the Mental Health Offices continue to increase and this can surely be taken as a sign of progress. The willingness of both patients and relatives to visit and discuss their problems is an indication that efforts to abolish the aged stigma attached to mental ill health is slowly bearing fruit. In spite of the progress of recent years the severity of the stigma is still great and efforts to reduce it must continue to be vigorously pursued for some years yet.

During the year 1955, 76 cases were admitted into hospital wards designated for the purposes of Section 20, Lunacy Act 1890, and were dealt with as follows:—

(a)	Certified u	nder	the pro	visions	of Section	n 16,	Lunacy	Act	, 1890	30
(b)	Admitted	to ho	spital u	nder th	e provisi	ons of	Section	5,	Mental	
	Treatment	Act,	1930							1
(c)	Admitted t	to ho	spital ur	nder the	e provisi	ons of	Section	1,	Mental	
	Treatment	Act,	1930							7
(d)	Discharged	-no	further	action	necessary	· · · ·				35
(e)	Died									3
										-
									Total	76
										-

The following table analyses the types of patients admitted into mental hospitals during 1955:—

			Bor	ough cases	Other cases	Total
1.	Certified patients	 		39	14	53
2.	Temporary patients	 		1	5	6
3.	Voluntary patients	 		36	5	41
						100

The final analysis of cases dealt with by officers of this authority reads as follows:—

Under the provision of Section 20, Lunacy Act, 1890		 76
Under the provision of Section 16, Lunacy Act, 1890		 53
Under the provisions of Section 5, Mental Treatment Ac	t, 1930	 6
Under the provision of Section 1, Mental Treatment Act		 41
		-
		176

In addition, 37 other cases were investigated resulting in no action being taken or alternatively, with the close co-operation of the family doctor arrangements were made for the patients admission into a chronic sick ward or an appointment made with the visiting Consultant Psychiatrist.

#### OUT-PATIENT CLINIC

It cannot be overlooked that mental health treatment and the policy directing it take in a much wider field than hospitals alone and I feel it is once again worth recording the important part played by Psychiatric Out-Patient Clinics.

Its usefulness to the community in the provision of early treatment cannot be doubted by those who work in the mental health field.

With the opening of a second clinic at the Rotherham Hospital in July of this year little difficulty is now experienced in making clinical appointments.

Close co-operation is maintained with the visiting Psychiatrists and the clinics are frequently visited where much useful information is exchanged to the benefit of all concerned. In many cases, patients can be treated effectively at the clinic, thus obviating hospitalisation and the saving of hospital beds for more urgent cases.

#### AFTER-CARE OF PATIENTS DISCHARGED FROM MENTAL HOSPITAL

A large proportion of this work is still being carried out by the hospital Psychiatric Social Workers. There has, however, been a steady increase in the number of cases referred to the Local Health Authority from an occasional case in 1953 to 45 at present. Patients discharged from hospital must receive adequate care to rehabilitate them and to also minimise the risk of a relapse. Close contact is maintained with various agencies both public and private which may ultimately be of assistance to the patient. This is the time when friendly advice and guidance can do so much to help patients regain their confidence, and take their rightful place in the community.

Whilst emphasising the social and domiciliary side it must not be overlooked that hospital facilities are still very necessary for early and effective hospital treatment. This in itself is one of the important measures of prevention.

## WELFARE

In accordance with Circular 1/54 of the Ministry of Health dealing with the subjects for inclusion in the Annual Reports of Medical Officers of Health the following items are included:—

#### NATIONAL ASSISTANCE ACTS 1948 AND 1951

The Welfare Committee is responsible for the carrying out of the Council's Schemes under the above Act.

A joint sub-committee dealing with the Care of the Aged was formed in March, 1951, with three members each from the Health and the Welfare Committees of the Council. These are the Committee's Chairmen and Vice-Chairmen and one other member from each committee.

#### BLIND PERSONS

The number of blind persons registered in the Borough at 31st December, 1955, was 242. This was an increase of 2 from the previous year, and the following table gives details of the age and sex of the cases remaining on the register:—

Age groups		Males	Females	Total
Under 5 years	 		2	2
Over 5 years and under 16 years	 	2	3	5
Over 16 years and under 20 years	 	1	1	2
Over 20 years and under 30 years	 	1	1	2
Over 30 years and under 40 years	 	4	9	13
Over 40 years and under 50 years	 	13	6	19
Over 50 years and under 60 years	 	13	16	29
Over 60 years and under 70 years	 	22	16	38
Over 70 years	 	53	79	132
Totals	 	109	133	242

Details of the employability of the cases aged over 16 years are as follows: -

		Males	Females	Total
Employed	 	16	5	21
Trained, but unemployed		1	-	1
Training	 	-	-	-
Trainable	 	2	1	3
Unemployable	 	88	122	210
Totals	 	107	128	235

The following table gives details of the occupation of the persons employed or

trained but unemployed:

Occupation				Emp	oloyed	Trained, but unemployed		
				Males	Females	Males	Females	
Basket maker				2	_	-	_	
Braille copyist				1	-	-	-	
Brush maker				4	-	-	-	
Cleaner				-	2	-	-	
Foster mother				-	1	-	-	
Gardener				1	-	-	-	
Knitter				-	2	-	-	
Labourer				1	-	-	-	
Mat maker				1	-	-	-	
Mattress maker				1	-	-	-	
Musician				1	-	-	-	
Packer				1	-	-	-	
Physiotherapist				1	-	-	-	
Piano tuner				2	-	-	-	
Porter				-	-	-	-	
Poultry keeper				-	-	1	-	
	Totals			16	5	1	-	

As in past years, each new case is examined by the Consultant Ophthalmologists Miss E. Hatherley or Mr. T. Stafford Maw and Form B.D.8 completed. Seventy-seven reports on this form were received during 1955, 19 were received in respect of persons certified blind, 20 were partially sighted, 26 were re-examined and 12 were found not to be blind.

A study of these reports shows the following conditions obtained: -

Condi	tion		mesanene ju		Blind	Partial blindness	Re- examined	Not blind
Glaucoma					1	_	1	1
Cataracts					5	7	14	6
Diabetes						1	1	-
Myopia					3	3	2	1
Vascular Diseases					1	1	-	-
Congenital Diseases as	nd defe	ects	:	100				
Nystagmus					-	1	-	-
Syphilis					-	-	-	-
Retinitis Pigmentosa	1				-	-	-	-
Hereditary and dev	elopme	ntal	defects		-	-	2	-
Optic atrophy					1		1	-
Retinopathy					1	-	1	-
Macular Degeneration					3	3	1	-
Retinal Arterio Scleros	sis				-	1	_	-
Arterio Sclerosis					2	-	-	1
Septicaemia					-	-	1	-
Traumatic					1	-	-	-
Choroidal Degeneratio	n				-	-	1	-
Acne Roscea					1	-	-	-
Urietis and Buerger's	Disease	e			-	1		-
Senility					-	1	-	-
Choroid Retinitis					-	1	-	_
Compound Hypermatr	ophic				-	-	-	1
Corneal Ulceration					-	-	-	1
Choroidal Sclerosis					-	-	-	1
Meningitis					-	-	1	-
	Tota	ıls			19	20	26	12

The following observations are made in amplification of the above table: -

#### GLAUCOMA

One certified blind, operation would probably remove from blind register. One re-examination. One certified not blind.

#### CATARACTS

Five reports in respect of person certified blind resulting from cataract, owing to age and conditions of persons no surgical treatment recommended.

Seven reports in respect of persons certified partially sighted. Medical treatment recommended in one case only.

Fourteen cases of cataract re-examined, one to have surgical treatment later, one decertified, one refused operation and one receiving treatment.

Six cases examined and reported not blind, one receiving treatment.

#### DIABETES

One person reported partially sighted receiving medical treatment.

One re-examination and no treatment recommended.

#### MYOPIA

Three cases of blindness reported. No treatment.

Three cases of partial sight, one receiving hospital supervision, other two no treatment.

Two re-examination - no treatment.

One not blind - no treatment.

#### VASCULAR DISEASES

One blind - no treatment.

One partially sighted — no treatment.

#### CONGENITAL DISEASES AND DEFECTS

Hereditary and Development Defects. No blind and two re-examination.

Congenital Nystagmus. One partially sighted - no treatment.

#### OPTIC ATROPHY

One blind - no treatment.

One partially sighted - no treatment.

#### SEPTICAEMIA.

One re-examined receiving hospital treatment.

#### MACULAR DEGENERATION

Three blind - no treatment.

Three partially sighted — no treatment.

One re-examination - no treatment.

#### RETINAL ARTERIO SCLEROSIS

One partially sighted - no treatment.

#### ARTERIO SCLEROSIS

Two blind - no treatment.

One not blind - no treatment.

#### TRAUMA

One blind, eye extracted, receiving treatment.

#### RETINOPATHY

One blind receiving medical treatment.

One re-examination - no treatment.

#### CHOROIDAL DEGENERATION

One re-examination - no treatment.

#### ACNE ROSCEA

One blind - no treatment.

#### URIETIS AND BUERGER'S DISEASE

One partially sighted — hospital supervision.

#### SENILITY

One partially sighted - no treatment.

#### CHOROLD RETINITIS

One partially sighted — no treatment.

#### COMPOUND HYPERMATROPHIC

One not blind - no treatment.

#### CORNEAL ULCERATION

One not blind receiving medical treatment.

#### CHOROIDAL SCLEROSIS

One not blind - no treatment.

#### MENINGITIS

One blind re-examination.

#### HANDICRAFTS AND HOME TRAINING

#### HANDICRAFTS

A weekly class is held for instruction in the following handicrafts: -

Pulp cane work Chair-caning

String-bag making Rug making

Seagrass weaving Knitting Leather work and lampshade making

The number of blind and partially sighted persons attending the classes varies from 10 to 24.

Individual instruction has been given in braille and moon type to all blind persons wishing for such instruction.

#### HOME WORKERS' SCHEME

No more blind persons have been incorporated in this Scheme.

One man certified partially sighted is undergoing training at the Sheffield Workshops for the Blind.

### EPILEPTICS AND SPASTICS

The following cases of epilepsy are known to the Welfare Department: -

Institutional:	Males	Females	Total
"The Mount," Rotherham (Part III accommodation)			
Rotherham cases	2	1	3
West Riding cases	1	1	2
David Lewis Colony, Manchester	-	3	3
Maghill Homes, nr. Liverpool	1	-	1
Ат Номе:			
On Handicapped Persons Register	8	5	13
	_	_	_
	12	10	22
	_	_	_

Five cases of cerebral palsy are also known to that department, and details of these are as follows:—

INSTITUTIONAL:	Males	Females	Total
"The Mount," Rotherham (Part III accommodation)			
Rotherham cases	 1	-	1
West Riding cases	 -	1	1
Ат Номе:			
On Handicapped Persons Register	 1	2	3
		-	_
	2	3	5
	-	_	_

All the cases resident in "The Mount" and at home are under medical care of their own doctors.





# COUNTY BOROUGH OF ROTHERHAM (EDUCATION COMMITTEE)



# REPORT

OF THE

# PRINCIPAL SCHOOL MEDICAL OFFICER

FOR THE YEAR

1955

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Attendances				27	Medical inspection				12
Audiometric testing				16	Medical treatment				14
B.C.G. vaccination				38	Nursery schools and	l classes	,		29
Boarded-out children				37	Open air school				34
Child guidance service				19	Ophthalmic clinic				14
Children and Young Per	rsons Ac	et		37	Orthopaedic clinic				15
Children's homes				37	Paediatric clinic				14
Chiropody clinic				26	Physical education				40
Clinics and treatment ce	ntres			8	Respiratory diseases				13
Clothing				13	Rheumatism				13
College entrants				38	School meals				38
Dental clinic				20	School nurses				13
Ear, nose, and throat cli	nic			15	School premises				36
Employment				37	Speech defects				32
Eye diseases				12	Staff				5
Footwear				13	Statistical tables				44
General condition				12	Summary of work				11
Handicapped pupils				29	Tuberculosis .				13
Heart disease				13	Uncleanliness .				12
Home tuition				36	Vision				12
Immunisation				28					

# ROTHERHAM EDUCATION COMMITTEE as at 31st December, 1955.

His Worship the Mayor (Councillor L. KIRK).

Chairman: Vacant.

Vice-Chairman: Councillor M. W. YOUNG.

Alderman G. A. BARKER.

Alderman E. CRUIKSHANKS, J.P.

Alderman F. DUKE.

Alderman D. J. S. MEADOWS.

Alderman Mrs. F. L. GREEN, J.P.

Alderman Mrs. M. H. MOORHOUSE, J.P.

Alderman F. C. WOFINDEN.

Councillor W. BEEVERS.

Councillor A. E. BRADLEY.

Councillor T. A. COLLEY.

Councillor C. DUFFIELD.

Councillor Mrs. E. McNICHOLAS.

Councillor J. R. MORAN.

Councillor W. J. OWEN.

Councillor L. J. TARBIT.

Councillor A. WILDE.

Rev. C. E. B. COWBURN.

Miss D. G. DEWAR.

Mr. T. W. EDWARDS, J.P.

Rt. Rev. G. V. GERARD, C.B.E., M.C., M.A.

Mrs. I. L. HABERSHON, J.P.

Very Rev. H. HAMMOND, V.F.

Director of Education: R. BLOOMER, B.Com.

# COUNTY BOROUGH OF ROTHERHAM.

# GENERAL STATISTICS.

Population									82,530
Area (acres)									9,255
N 0.1 1									
Nursery Schools:	,								,
Number of scho		•••		•••				•••	1
Number of dep		• • • •	•••		•••				1
Average number	r on roll	•••	•••				•••	•••	90
Primary Schools:									
Number of scho	ools								19
Number of de									38
Average number									8,970
Tiverage number	on ron								0,270
Secondary Schools:									
Number of scho	ools								4
Number of depa	artments								7
Average number									3,447
Voluntary Schools:									
Number of scho	ools								2
Number of de	partments								4
Average numbe	r on roll								700
Secondary Grammar	Schoole :								
		Tumbar	of pur	oile					514
High School fo									
Grammar School	or (Boys)—	-INUIIID	er or p	upiis					533
Secondary Technical	Schools:								
Oakwood Techr		School-	-Num	ber of r	oupils—	Bovs			395
						Girls			356
						01110			220
Special Schools:									
Newman Open									187
Grange Special	School (H	Education	onally	sub-nor	mal ch	ildren)-	-numb	er of	
pupils :									
Junior depart	tment								50
Senior depart	tment								80
Oakwood Hall	Hospital 3	School							9

#### STAFF

(as at 31st December, 1955).

Medical Officer of Health and Principal School Medical Officer: R. J. DONALDSON, M.B., Ch.B., B.A.O., D.P.H.

Deputy Medical Officer of Health and Deputy Principal School Medical Officer: W. J. CONNELLY, L.R.C.P., L.R.C.S., L.R.F.P.S., D.P.H.

Assistant Medical Officers of Health and School Medical Officers:
MARY D. BOYD, M.B., Ch.B.

EVELYN BOSTOCK (nee Swangren) M.B.B.S., D.Obst., R.C.O.G. T.M.B. ROHAN, M.B., B.Ch., B.A.O.

Principal Dental Officer: H. R. HEALD, L.D.S.

Dental Officers:

JOAN H. EGAN, B.D.S.

G. W. LOWE, L.D.S.

L. F. T. LIANG, L.D.S. (part-time).

H. P. REDFEARN, L.D.S. (part-time).

Speech Therapist: Miss J. H. BUCHANAN, L.C.S.T.

> Physiotherapist: One Vacancy.

Educational Psychologist: B. R. LEWIS, M.A.

Chiropodist (part-time): L. ALDAM, M.I.S.Ch.

## CONSULTING STAFF (part-time):

Ophthalmology:

T. STAFFORD MAW, M.B., Ch.B., D.O.M.S FRANZISKA FISCHER, M.D.

> Ear, Nose and Throat: H. M. PETTY, M.B., Ch.B., D.L.O.

> > Psychiatry:

R. WARNECKE, M.R.C.S., L.R.C.P., D.P.M.

Orthodontics:

J. H. GARDINER, B.D.S.

Orthopaedics:

H. L. McMULLEN, B.A., M.B., B.Chir., F.R.C.S.

# Superintendent Health Visitor: Miss E. G. TAYLOR.

## Deputy Superintendent Health Visitor: Miss C. M. WILKINSON

Health Visitor/Social Worker: Miss M. J. CASEY.

#### Health Visitors/School Nurses:

Miss E. BATES Mrs. R. McHUGH.
Miss S. E. BREWER. Mrs. A. B. PAYLING.
Miss E. M. JEFFS. Miss A. W. RITCHIE.
Miss N. B. GRIFFITHS. Miss T. SHANLEY.

Miss N. Y. WILSON.

Student Health Visitors:

Miss M. FLEMING. Miss M. MYERS.

Miss M. WILLIS

School Nurses:

Miss C. H. CROFTON. Miss G. K. CAVE. Mrs. E. M. CATLEY. Mrs. N. LLOYD. Mrs. E. WARD.

Clinic Nurses:

Mrs. E. A. S. HOYLE. Mrs. M. P. PHINN. Mrs. R. JACKSON (part-time):

Clinic Assistants:

Miss E. M. NICKLIN. Mrs. M. GLOVER.

Dental Attendants:

Miss W. HARTE. Miss M. JONES.
Miss J. BURTOFT. Miss J. STEVENSON.

Dental Technician:

D. LEE.

Lay Administrative Officer (Health Department):

G. E. WESTBY.

Clerical Staff:

Miss W. M. COOPER (Senior Clerk).

Miss D. HIBBERD. Miss B. MEASURES. Miss P. E. WOOD. Miss N. YOUNG.

Miss M. WATERHOUSE. Miss N. MALLEN (Dental Clerk).

# TO THE CHAIRMAN AND MEMBERS OF THE EDUCATION COMMITTEE OF THE COUNTY BOROUGH OF ROTHERHAM

I have pleasure in submitting the report of the work done by the School Health Service for the year 1955. In doing so I must point out that the work carried out during the first eight months of the year was the responsibility of my predecessor, Dr. J. A. Gillet, who is now Medical Officer of Health for Dagenham.

The year has seen a number of other changes in the medical staff. Dr. E. H. Annels left in June to take up the appointment of Deputy Medical Officer of Health of Flintshire. He was succeeded by Dr. W. J. Connelly in September 1955. Dr. A. R. Robertson left in November to take up the appointment of District Medical Officer of Health in Derbyshire. He was succeeded by Dr. T. M. B. Rohan in December.

With the closing of the Day Nursery at Ferham Villa in July, 1955, the Speech Therapy and Child Guidance Clinics were transferred from Ferham House to the more suitable premises, and Ferham Villa is now regarded as an annexe to the main Ferham House Clinic.

Arrangements have been made with the Local Medical Committee to pass information from the school medical records to the family doctor on all school leavers. This will be sent on cards of a size suitable for inclusion with the general practitioners folder.

I feel that I should comment on the range of equipment used in the School Health Service. There must be few authorities in the country that have provided such a variety of up to date apparatus such as audiometers, speech recorder and a full scale dental laboratory to facilitate the working of the School Health Service, and it is particularly gratifying to me to know that the school children in Rotherham are benefitting as a result.

In reading of the work done during the year, I would ask you to realise that due credit must be given to all members of the staff without whose hard work and diligence this report could not have been written.

It was with great pleasure that I learned of the excellent relationship which exists with the Director of Education, his staff, and the teaching staff in the schools, for it is only with their co-operation that an efficient school health service can function.

On behalf of myself and members of the staff of the School Health Service I would like to express thanks to the Chairman and members of the Education Committee.

R. J. DONALDSON,

Principal School Medical Officer.

#### CLINICS AND TREATMENT CENTRES

The following is a list of the school clinics and treatment centres provided, together with the sessional times:—

Address	of	clinic
and sessi	ons	held

#### Times of sessions

FERHAM HOUSE CLINIC, Kimberworth Road, Rotherham.

Minor ailment, Mondays to Fridays, 9.0 a.m. to 12.30 p.m.; general inspection Saturdays, 9.0 a.m. to 12.0 noon.

and treatment. Medical sessions—Mondays and Fridays.

Ophthalmic. Specialist's session — Tuesdays, 9.0 a.m. to 12.30

p.m. Nurses re-inspections—as required, Tuesdays,

2.0 to 5.0 p.m.

Ear, nose and throat. Specialist's session—Tuesdays, 11.30 a.m. to 1.0 p.m.

Nurses treatment sessions — Mondays to Fridays,

2.0 to 5.30 p.m.

Dental. Mondays to Fridays, 9.0 a.m. to 12.30 p.m. and

2.0 to 5.30 p.m.; Saturdays, 9.0 a.m. to 12.0 noon.

Child guidance. Psychiatrist—Mondays 9.0 a.m. to 1.0 p.m.

Educational Psychologist — Mondays and Wednesdays, 9.0 a.m. to 12.30 p.m. and 2.0 to 5.30 p.m.;

Fridays, 9.0 a.m. to 1.0 p.m.

Chiropody. Alternate Fridays, 9.0 a.m. to 12.30 p.m.

Speech therapy. Mondays to Wednesdays and Fridays, 9.0 a.m. to

12.15 p.m. and 1.45 to 5.0 p.m. Thursdays, 9.0 a.m.

to 12.15 p.m.

Immunisation. Tuesdays, 2.0 to 4.15 p.m.

CRANWORTH ROAD CLINIC, Cranworth Road, Rotherham.

Minor ailment, Mondays to Fridays, 9.0 a.m. to 12.30 p.m.;

general inspection Saturdays, 9.0 a.m. to 12.0 noon.

and treatment. Medical sessions—Mondays and Fridays.

Orthopaedic. Specialist's session—alternate Wednesdays, 2.30 to

4.30 p.m.

Ophthalmic. Specialist's session — Saturdays, 9.0 a.m. to 12.0

noon. Nurses re-inspections-as required, Thurs-

days, 2.0 to 4.0 p.m.

Address of clinic and sessions held	Times of sessions
Ear, nose and throat.	Specialist's session—Fridays, 10.45 a.m. to 12.30 p.m. Nurses treatment sessions — Mondays to Fridays, 9.0 a.m. to 12.30 p.m.; Saturdays, 9.0 a.m. to 12.0 noon.
Dental.	Mondays to Fridays, 9.0 a.m. to 12.30 p.m. and 2.0 to 5.30 p.m.; Saturdays, 9.0 a.m. to 12.0 noon.
Chiropody.	Alternate Fridays, 9.0 a.m. to 12.30 p.m.
Speech therapy.	Thursdays, 1.45 to 5.0 p.m.
Immunisation.	Wednesdays, 2.0 to 4.15 p.m.

THORPE HESLEY CLINIC,
Thorpe Hesley Primary School,
Upper Wortley Road, Rotherham.

Minor ailment, general inspection	Medical sessions — 2nd and 4th Tuesdays in the month, 2.0 to 5.0 p.m. Nurses treatment sessions
and treatment.  Immunisation.	—Fridays, 2.0 to 4.0 p.m.  2nd and 4th Tuesdays in the month, 2.0 to 5.0 p.m.

GREASBROUGH CLINIC, Public Hall, Greasbrough, Rotherham.

Minor ailment, general inspection and treatment.	Medical sessions—1st and 3rd Wednesdays in the month, 2.0 to 5.0 p.m. Nurses treatment sessions—Wednesdays, 2.0 to 4.0 p.m.
Immunisation.	1st and 3rd Wednesdays in the month, 2.0 to 5.0 p.m.

BLACKBURN CLINIC, Blackburn Primary School, Baring Road, Blackburn, Rotherham.

Minor ailment,	Medical Sessions—2nd and 4th Wednesday in the
general inspection and treatment.	month, 2.0 to 5.0 p.m. Nurses treatment sessions—Wednesdays, 2.0 to 5.0 p.m.
Immunisation.	2nd and 4th Wednesday in the month, 2.0 to 5.0 p.m.

Addr	ess	of	clinic
and :	sess	ions	held

#### Times of sessions

HIGH GREAVE CLINIC, High Greave Primary School, High Greave Road, East Herringthorpe, Rotherham.

> Minor ailment, general inspection and treatment.

Nurses treatment sessions—Monday and Fridays, 9.0 a.m. to 12.0 noon.

NEWMAN OPEN AIR SCHOOL, Whiston, Rotherham.

Minor ailment, general inspection and treatment. Immunisation. Medical sessions—Thursdays, 2.0 to 4.0 p.m. Nurses treatment sessions—Mondays to Fridays, 9.0 a.m. to 12.0 noon and 1.30 to 4.0 p.m. As required—at medical sessions.

ABBEY SPECIAL SCHOOL, Junior Department, Scholes, Rotherham.

> Minor ailment, general inspection and treatment.

Medical sessions—alternate Thursdays 2.0 to 4.0 p.m. Nurses treatment sessions—Mondays, 9.30 a.m. to 12.0 noon.

Senior Department, Kimberworth, Rotherham.

> Minor ailment, general inspection and treatment.

Medical sessions—alternate Thursdays, 2.0 to 4.0 p.m. Nurses treatment sessions—Tuesdays, 2.0 to 4.0 p.m.

Redscope Clinic, Redscope Primary School, Kimberworth Park Road, Rotherham.

> Minor ailment, general inspection and treatment. Immunisation.

Medical sessions—alternate Wednesdays, 9.0 a.m. to 12.30 p.m. Nurses treatment sessions—Mondays and Wednesdays, 9.0 a.m. to 12.30 p.m. As required—at medical sessions.

## SUMMARY OF WORK

A.	Medical Officers at schools:						
	Routine inspections in schools						5,350
	Special inspections in schools						136
	Re-inspections in schools						6,089
В.	Medical Officers at clinics :						
	Routine inspections of scattered homes	and boa	rded-or	nt child	lren		180
	Inspections at clinics						8,537
	Re-inspection at clinics						4,478
	Inspections under employment of children						155
	Missellanson						266
	Wiscellaneous	•••	•••			•••	200
C.	Specialists at clinics:						
	Special inspections at clinics						2,078
	Re-inspection at clinics						4,773
-							
D.	Dental Officers :						
	Routine inspections at schools	•••					8,073
	Special inspections (school children)		• • •	•••	• • • •		1,592
	Special inspections (non-school cases)						598
	Attendances for treatment (school child	dren)					11,360
	Attendances for treatment (non-school	cases)					1,428
E.	School Nurses :						
2.	Visits to schools						1,286
	Examinations for cleanliness in schools						56,895
	Visits to homes						784
	Treatment of minor ailments in clinics						23,275
	Treatment of inmor annients in crimes	(pre-sch					187
	Treatment of aural defects in clinics	(school					3,065
	reaction of adial defects in clinics	(pre-sch		*			120
		(1		,			
F.	Speech Therapist:						
	Treatments for speech training	(school	childre	n)			1,280
G.	Chiropodist :						
G.	Attendances for treatment	(school	childre	n)			902
	Attenuances for treatment	(pre-scl					7
		(bic ger	ioor cill				

#### MEDICAL INSPECTION

Periodic and special inspections were carried out as in former years. 5,530 children were medically examined compared with 5,058 in 1954.

Special and re-inspections totalled 26,506 against 24,654 in 1954.

These figures included children in the children's homes and boarded-out children.

# FINDINGS AT MEDICAL INSPECTION GENERAL CONDITION

The following table shows the classifications of children at the routine examinations:

	children nined	A (Good) per cent.	B (Fair) per cent.	(Poor) per cent.	
1955	5,530	86.31	13.44	0.25	
1954	5,058	83 · 79	15.58	0.63	

#### HEIGHTS AND WEIGHTS

Random test samples of 50 children inspected at the larger schools and the actual number (if under 50 children inspected) at the other schools, revealed the following average heights and weights:

			Entr	rants	Interm	ediates	Leavers	
	Gro	up	Height ins.	Weight lbs.	Height ins.	Weight lbs.	Height ins.	Weight lbs.
Boys			 42.95	43.52	56-19	80.35	63 · 22	110.60
Girls			 42.79	42.13	56.54	81 · 87	62.43	113 - 21

#### UNCLEANLINESS

The number of children found with vermin and/or nits during the year was 514 compared with 353 in 1954.

63 children were cleansed at the clinics compared with 76 in 1954.

#### VISUAL DEFECTS AND EXTERNAL EYE DISEASES

The ophthalmic and minor ailment clinics cater for the above conditions. Figures are given on page 14. Vision tests were carried out on 1,511 eight-year-old children, 68 of whom were referred for treatment and 98 kept under observation.

#### EAR, NOSE AND THROAT DEFECTS

Details are given on pages 15-18. Special and minor ailments clinics deal with these conditions.

#### ORTHOPAEDIC AND POSTURAL DEFECTS

Twenty-three sessions were held in Rotherham by the Orthopaedic Consultant. Further particulars are given on page 15.

#### HEART DISEASE AND RHEUMATISM

123 children suspected of suffering from heart disease were examined, 45 children were found to have rheumatism. In 1954 the figures were 120 and 35 respectively. One case suspected of having chorea was kept under observation.

#### TUBERCULOSIS

The Chest Physician examined 87 school children during the year, five of whom were referred by school medical officers. One case of pulmonary tuberculosis and one non pulmonary case were notified during the year.

#### CLOTHING AND FOOTWEAR

No cases of poor or bad clothing were reported at the routine medical inspection, one child had poor footwear. In 1954 the figures were one and one respectively.

#### DUTIES OF SCHOOL NURSES

A summary of the work of the school nurses is given below:

Number of visits paid to schools:

Cleanliness inspections ·		535
Other purposes		751
Number of examinations of children for cleanliness		56,895
Number of children found with nits and/or verminous h	nead	514
Number of examinations of such children		5,011
Numbers of verminous children cleansed at the clinic		63
Number of visits paid to homes		784
Number of treatments of minor ailments at clinics		
(school children)		23,275
(pre-school children)		187
Number of treatments of aural cases at clinics		
(school children)		3,065
(pre-school children)		120

#### MEDICAL TREATMENT

#### MINOR AILMENTS

A total of 5,792 minor ailments were dealt with during 1955, the figure for 1954 being 6,414.

#### SCABIES

13 cases of scabies were found in 1955 compared with 11 cases in 1954.

#### RINGWORM

No case of ringworm of the scalp was reported during the year, two cases of ringworm of the body were treated. The figures for 1954 being two and five respectively.

#### PAEDIATRIC CLINIC

As stated in previous reports, children are now referred direct to hospital for examination. This arrangement continues to work satisfactorily.

#### OPHTHALMIC CLINIC

Eighty-seven sessions were held during the year by the Ophthalmic Surgeon. The appended tables give an analysis of the work :

		Refr		
		Cases	Spectacles prescribed	Re- inspections
School children	 	 879	802	1667
Pre-school children	 	 27	26	232
Totals	 	 906	* 828	1899

The conditions found at the examinations were as follows:

		School children	Pre-school children
			children
Emmetropia	 	77	-
Hypermetropia	 	270	2
Hypermetropic astigmatism	 	380	12
Myopia	 	350	3
Myopic astigmatism	 	59	1
Mixed astigmatism	 	140	6
Concomitant strabismus	 	79	32
Nebulae	 	2	-
Cataract	 	4	-
Nystagmus	 	7	2
Referred for squint operation	 	18	7
Choroidal defects	 	. 4	-
Albinoism with nystagmus	 	1	-
Coloboma	 	1	-

#### ORTHOPAEDIC CLINIC

INSPECTIONS BY THE ORTHOPAEDIC CONSULTANT.

Twenty-three sessions were held by the Orthopaedic Consultant during the year. Details are given below:—

		ins	First spections	Total inspections
School children	 		111	272
Pre-school children	 		34	62
		Total	145	334

Four splints were supplied during the year. Adjustments were made to 25 pairs of shoes or boots.

## EAR, NOSE AND THROAT CLINIC

The work of the clinic is summarised in the following tables:

							Ferham House	Cranworth Road	Total
1—Nu	mber of ne	w cases exa	mined	by Au	ıral Su	rgeon	160	175	335
2—Nu	mber of cas	ses receivin	g trea	tment o	n 31/1	2/54			
who	continued	treatment	in 195	5			66	83	149
3—Nu	nber of atte	ndances ma	de by	cases in	:				
(a)	Head 1						1631	1539	3170
(b)	Head 2						329	463	792
4—Nur	nber of Au	ral Surgeon'	s subse	equent in	nspectio	ons :			
(a)	Head 1						440	425	865
(b)	Head 2						122	346	468

Particulars of the conditions found and treated at the clinics are given in the following table:

Tonoring tuoto			Ferham House	Cranworth Road	Total
Number of children who attended			 226	258	484
Ear conditions—Suppurative			 105	76	181
(a) Cured			 72	41	113
(b) Improved			 33	35	68
(c) Continuing	treat	ment	 33	35	68
Non-suppurative			 21	51	72
(a) Cured			 17	36	53
(b) Improved			 4	15	19
(c) Continuing	treat	ment	 4	15	19
Nose conditions			 49	61	110
Throat conditions:					
(a) Tonsils and adenoids advise	ed op	eration	 42	58	100
(b) Tonsils only advised operation	tion		 4	7	11
(c) Adenoids only advised open	ration		 5	5	10

#### AUDIOMETRIC TESTING

The aural nurse examines the hearing of all children in school at the ages of 8 and 11 years with 2121 electric audiometer.

Eight-year-old children found to be deaf at the first test are re-tested to eliminate such factors as novelty, lack of concentration and nervousness.

Number	Deaf	Number	Total
tested	1st test	re-tested	number deaf
2,563	152	16	143

Of the children tested the following analysis is made:

Group A (-3 to 6 decibels) ... 4953 Normal ears. Group B (9 to 18 decibels) ... 112 Slightly deaf ears. Group C (21 to 30 decibels) ... 61 Partially deaf ears.

\_\_\_\_

#### Total 5126

A further analysis is made of children with defective hearing in both ears :

Group B ... ... ... 19 children Group C ... ... 10 children

#### TREATMENT

Children found to have defective hearing by the electric audiometer are examined by the Aural Surgeon.

The results of such examinations are shown as follows:

	Ferham House	Cranworth Road	Total
Children examined by Aural Surgeon	 275	296	571
Defects:			
Chronic rhinitis	 63 ·	35	98
Chronic suppurative otitis media	 6	8	14
Acute suppurative otitis media	 14	10	24
Mild eustachian catarrh	 36	89	125
Catarrhal otitis media	 24	20	44
Wax	 39	42	81
Foreign bodies	 2	3	5
Referred for removal of tonsils and adenoids	 29	19	48
Referred for removal of adenoids only	 1	1	2
Nerve deafness	 4	3	7
Referred for submucous resection	 4	3	7
Referred for intranasal antrostomy	 18	15	33
Referred for removal of tonsils only	 2	1	3
No diagnosis	 13	15	28
Aural polypus	 -	1	1
Referred for caldwell luc operation	 -	1	1

These defects were treated and the children who were found to be deaf were re-examined for hearing loss.

The following table shows the result of treatment of children found to be deaf:

Number	of	children	re-tested	with	electric	audion	neter	after	trea	tment	396
Number	of	children	cured of	deafn	ess by t	reatme	nt .				351
Number	of	children	with imp	roved	hearing	after t	treatm	ent			43
Number	of	children	showing n	o imp	rovemen	it and i	recom	mende	ed h	earing	
aids											2

## OPERATIVE WORK OF THE SURGEON

Number op	perated upon			 	236
Operations	performed :				
(a) T	onsils and adenoids removed			 	163
(b) A	Adenoids only removed			 	8
(c) S	ubmucous resection			 	1
(d) B	Bilateral intranasal antrostomy			 	10
(e) R	light or left intranasal antrostomy			 	2
(f) I	ntranasal antrostomy and tonsils and	adenoi	ds	 	10
(g) In	ntranasal antrostomy and adenoids	10		 	6
(h) I	ntranasal antrostomy and tonsils			 	1
(i) Γ	Dissection of tonsils			 	21
(j) Γ	Dissection of tonsil remains			 	1
(k) D	Dissection of tonsils and adenoids			 	4
(l) R	Radical mastoidectomy			 	2
(m) R	Removal of nasal polypus and right ca	ldwell	luc	 	1
(n) A	Aural granulations			 	1
(o) S	Submucous resection and intranasal ant	rostomy	7	 	1
(p) I	Laryngoscopy			 	1
(q) S	Simple antrotomy			 	1
(r) A	Adenoids and puncture left antrum			 	1
(s) I	Bilateral inferior hyperturbinectomy			 	1

#### CHILD GUIDANCE CLINIC

REPORT OF THE CONSULTANT PSYCHIATRIST.

Twenty-seven new cases were referred in 1955 and of these fifteen had already been taken on for treatment before the end of the year. During the same period, twenty-nine cases were closed for one reason or another. In seventeen of these cases there had been very much improvement, accompanied in several cases by a pleasing general development in character and good progress in school attainments. With five cases there had been some improvement but progress was not really satisfactory; while with seven, the outlook appeared to be no brighter than when these children were referred. In nearly all of these seven cases the parents had not been co-operative.

One of the problems arising is the non-attendance of the mothers and on analysis we find there is one group where they cannot accept responsibility of doing anything for their child. There may be lack of intelligence, a lack of feeling or apathy.

Another group are the mothers who are excessively responsible and have extremely high standards. They find it difficult to accept a problem in their child in the first place, which creates a resistance to accepting help. If these parents gain insight into this situation they become co-operative and the prognosis then becomes favourable.

A third group are those mothers who for domestic reasons, i.e., hardship for instance where she is self-supporting, are unable to attend.

Of seventeen cases which were much improved fourteen mothers were cooperative, which confirms the general experience of child guidance.

Number of individual children seen	 	69
Number of interviews with:		
(a) Psychiatrist	 	59
(b) Educational Psychologist	 	960
(c) Health Visitor/School Nurse	 	209
Number of individual parents seen	 • • • •	61
Number of interviews with:		
(a) Psychiatrist	 	191
(b) Educational Psychologist	 	128
(c) Health Visitor/School Nurse	 	9

#### Cases referred in 1955-

#### Main presenting symptoms:

Pilfering	 			7
Difficulties with discipline	 			7
Bedwetting	 			3
Anti-social behaviour	 			1
Nervous complaints	 			7
Educational problems	 			1
Truancy	 			1
Speech difficulties	 			1
			-	_
		Total		27

#### DENTAL SERVICE

#### REPORT OF THE PRINCIPAL DENTAL OFFICER

During the year there have been various staff changes—Mr. Ditchfield attended from January to September on four sessions per week but then decided to study medicine; Mr. Redfearn commenced in March, also on four sessions per week, while Mr. Stonehouse was a full-time dental officer for one month only, in October, before being called up to do his national service. The strength at 31st December, 1955, was thus three full-time and two part-time or the equivalent of 3 and 9/11ths full-time dental surgeons, an increase of 4/11ths from December, 1954.

There are obviously pros and cons in the employment of part-time dentists, although it would seem that the disadvantages, chief of which is the relatively less economical work compared with a full-time dentist, are greatly outweighed by the advantages, among which can be mentioned: (1) A part-time officer only doing one session per week is better than none at all and two part-time men doing five sessions per week are practically the equivalent of one full-time dentist. (2) It is more easy to stagger staff holidays and still maintain clinical service than with their equivalent in full-time officers. (3) The part-time dental officer gains an insight into the ideals and working of the school dental service and the exchange of views of men working in private practice and the school service is beneficial to both.

The amount of work done is nearly the same as in 1954—there being 70 fewer attendances and 11 less sessions in 1955 while there were 4,297 administrations of nitrous oxide anaesthesia compared with 4,296 in the previous year. The number of routine dental inspections at 8,073 was the highest since 1935.

To inspect the children in every school once a year is a simple enough job, requiring about 75 half day sessions, but these have to be corelated as smoothly as possible with the treatment sessions for the work suggested as being necessary. Last

year we had 25 sessions for treatment to each one for inspection and obviously the higher the acceptance of treatment the greater this proportion will be. It was pointed out last year that the effective time of the school year for the purpose of a dental inspection is about eight months since apart from holidays, at such times as the beginning and end of term, examination times, open days, school journeys, Christmas parties, etc., a visit even for only one session by the school dentist is not welcomed. By a considerable amount of clinical work a steady flow of patients is maintained at the clinics, which are open every day in the year apart from Bank Holidays, Sundays and Saturday afternoons. During August in 104 sessions, 733 attendances were made for treatment.

Every effort is made to make each appointment convenient to both the patient and parent; children who have to attend quite often, say for orthodontic treatment or many fillings, are seen after school hours; children taking higher or general certificate examinations are, whenever possible, treated then or on Saturday mornings. Unfortunately there is a limit to this out of school time on which the clinics are open, but I would like to assure Head Teachers that our appointments are made with considerably more thought than might be apparent at first glance. Anyhow a visit to the dental clinic is seldom made unnecessarily and may well mean that a much longer absence from school is avoided at a later date by the prevention of toothache or the many illnesses which are pre-disposed by a septic mouth and teeth.

It cannot be repeated too often that the dental care required by children is exactly the same whether they attend a private dentist or the local authority clinics. During 1955, 4644 children received treatment at the clinics out of 7,061 who were advised to get dental attention at the routine inspections. This is 65.8 per cent. and the remaining 34.2 per cent, will be composed of those children who attend the local private dentists and those who do not obtain any treatment anywhere. children inspected during the year 7,061 were advised to get dental attention, i.e., 73.6 per cent. and though this figure is higher than one would like, it by no means infers that the children's teeth generally are in a bad condition. A child referred for small fissure fillings in permanent molars cannot be compared to a child with half a dozen carious and abscessed teeth and yet they would each be counted as one unit in the above statistics. It may well be the condition of the children's teeth in Rotherham is somewhat above the average, for the catastrophic depression which fell on local authority dental clinics as a result of the National Health Service Act, 1948, and from which recovery is only now being made, did not affect Rotherham so badly as most areas. Only by doing detailed charting of each mouth at routine inspections can one produce figures to compare one area with another; admirable as this may be, I think that the time can always be better spent on treatment than on routine inspections. Detailed charting is only justified while under staffing of the dental profession exists, on those who attend for a complete course of treatment.

Although, as has been mentioned, the dental treatment remains the same whether it is done in the local authority clinic or the surgery of a private practitioner, there are differences of administration and indeed the child of school age becomes the responsibility of different Ministries-The Ministry of Education-if he attends the local authority clinic, the Ministry of Health if treated under the National Health Service (General Dental Service) Regulations by the private practitioner. All children under school age can come under the charge of the Ministry of Health although there are different methods of payment to the local authority or private dentist for similar treatment! The dental treatment of expectant and nursing mothers similarly is the concern of the Ministry of Health and while it may be undertaken either by a local authority or a private practitioner, the administrative details are increased in that, in part of the treatment (i.e. provision of dentures) the patient is required to contribute towards the cost if treated by a private dentist and no payment is made if by the local authority. All these regulations are probably only fully understood by those whose immediate concern is with their implementation and administration. Attention is only drawn to this complex state of affairs because under it the Public Dental Surgeon does 5/6ths of his work for the Ministry of Education, whose chief interests are mainly concerned, it is reasonable to assume, in other directions. For the remaining 1/6th of his work (the treatment of M. and C.W. patients) the public dentist is ultimately responsible to the Ministry of Health, and one can hardly expect that Department to be greatly concerned over somebody who is devoting 5/6ths of his professional time elsewhere! Perhaps it may be noted here that during 1955, 289 children under school age and 309 expectant and nursing mothers were treated at the clinic, this treatment including the provision of 194 dentures.

An individual case history of a patient treated by Miss Egan is described by her as follows:—

"A boy R.C., then aged four years, had attended on several occasions in the past complaining of toothache and many of his deciduous teeth had been extracted. In view of the carious nature of the remaining teeth, the fact that it would be two years before the permanent dentition commenced to erupt, and the impaired masticatory function, it was decided to extract those remaining teeth and to fit full upper and lower dentures.

After the remaining extractions had healed, rough impressions were taken and from these special trays were made for the final impressions. The usual procedure of bite and try-in followed: the small teeth required for the dentures being specially prepared by the mechanic. Eventually the dentures were fitted, the patient who througout had been most co-operative, was very pleased with them and the mother reported later that he was able to wear them all the time. We also hear that he created some envy amongst his small contemporaries as his were teeth that could be taken out—and replaced.

This is an example of what can be done, with co-operation of patient and parent, in cases where it is impossible to conserve the deciduous dentition. On the eruption of the permanent dentition which begins at approximately 6 years the dentures will require a series of adjustments until they can be finally dispensed with."

Another aspect of this duplication of ministerial control is concerned with orthodontic treatment of children. This specialised branch of dentistry, relating solely to children, concerns the diagnosis and correction of irregularities of the teeth and, apart from the professional knowledge involved, the making of the appliances required demands extra technical skill from the dental technician. During the year 287 removable and fixed appliances were made in the local authority dental laboratory. Such treatment may be obtained either from a private dentist or at the local authority clinics-again, the one administered by the Ministry of Health (unless of course the treatment is entirely privately obtained), the other by the Ministry of Education. Here again there are wide differences in administration although the clinical treatment remains the same under each, or any, system. Probably the chief consideration, as it should always be, is the patient; he or she should have freedom of choice, so far as is humanly possible, as to who carries out the treatment. One way in which this could be achieved would be for an orthodontic consultant to visit as many centres as possible in a certain area and there examine the patients, along with their own dentist. He would advise a course of treatment and it might be have the appliances made in a control laboratory by specialist technicians, if the dentist concerned has not a man conversant with such work. The question immediately arises as to how many consultant orthodontists there are available and as to how many cases they could advise upon per session and so what sized area they could serve, but it must be remembered that at present under the National Health Service (General Dental Service) Regulations, all cases done by private practitioners are scrutinised, by means of models only, at one centre at Eastbourne. We have had in Rotherham for the past seven years the help of a consultant from the Charles Clifford Dental Hospital, Sheffield, who visits on one session per month and a technician able to turn out any required appliance. It should be possible, with very little expansion and the overcoming of not unsurmountable administrative details, to allow any private dentist in the town and surrounding area to avail themselves of this scheme for the provision of orthodontic treatment to their patients.

Probably of more immediate concern to school dental officers is the question of the ancillary workers. In justification of the introduction of such partly trained personnel it may be pleaded (1) that midwives, chiropodists, opticians, etc., function alongside doctors in the medical profession and (2) that any dental care is better than none at all. On the other hand it must be remembered that it has been impossible, despite every inducement, to recruit dentists and that the working conditions for these ancillary or partly-trained personnel remain exactly the same. The actual length of training doesn't make any difference to the smell of pyorrhoea or a developing permanent tooth any more secure when extracting the milk tooth over it.

Apparently quite a proportion of the dental profession are to devote their time to training and supervising these ancillaries and it would seem doubtful whether these will be forthcoming in sufficient number and give, on completion of training, a sufficiently long period of service to justify their introduction. That the use of such people is at present only envisaged in public dental clinics is not exactly guaranteed to raise the esteem in which the school dental service may be held by the general public.

The following table gives the details of the work done in the dental laboratory:

only more Brief the details of the north doil	c mi circ cicire		
Technician's half-day sessions			496
Full upper and lower dentures	Maternity		84
Full upper and part lower dentures	Maternity		28
Full upper or full lower dentures	Maternity		6
Part upper and part lower dentures	Maternity		32
Part dentures	Maternity		44
	Schools		94
Relines and repairs to dentures	Maternity		12
	Schools		14
Jacket crowns	Maternity		1
	Schools		16
Number of orthodontic patients	Schools		312
Number of orthodontic appliances made	Schools		287
Number of orthodontic appliances repaired	Schools		16
Number of study models made			250
Fixed appliances — Johnson twin arch		4	
Lower lingual bow		8	
Upper lingual bow		2	
Upper pin and tub	e	1	
Local pin and tube		6	
Edgewise arch		1-	- 22
Removal appliances — Oral screen		3	
Schwartz plate		106	
Propulsor		46	
Norweigian plate		12	
Lateral arms		5	
Tongue barrier pla	te	5	
Badock expansion	plate with		
flange		3	
Badock expansion	plate	15	
Peg plate		2	
Finger spring plate		6	
Retention plate		2	
Rat trap plate		25	
Canine spring retra	ction plate	22	

Inclined planes ... ... 8
Lower bite planes ... 5—265
Fixed appliance repairs ... 4
Removal appliance repairs ... 12— 16

During 1955, 332 school children were X-rayed and a total of 558 X-rays were taken. Ten maternity patients had a total of 14 X-rays taken.

The following table shows the details of the treatment given at the different clinics:

			Extra	otione		Fil	lings					sup-
	Alma Wallet	No. of	DATIBO	ctions	Perm.	teeth	Temp.	teeth	Anaes	thetics	Orbon	
Clinic	Total atten- dances	indiv- iduals treat- ed	Perm. teeth	Temp.		No. of teeth filled	No. of fill- ings	No. of teeth filled	Local	Gen- eral	Other opera- tions	No. of patients plied with dent
Cranworth Road Ferham House	5858 6930	2594 2648	1590 2219	4077 3679	1616 1883	1406 1642	45 31	44 31	411 521	2414 2442	2476 3688	75 142
Total 1955	12788	5242	3809	7756	3499	3048	76	75	932	4856	6164	217
Total 1954	12841	5704	3261	7902	3538	2965	52	48	743	4856	5174	231

The following table gives the details of dental treatment:

19	-		Evtra	ctions		Filli	ngs		Anaest	thetics	1	sup- ures
	Total	No. of	DAUG		Perm.	teeth	Temp.	teeth	Anaco	incues	Other	ents
Group	attend- ances	indiv- iduals treated	Perm. teeth	Temp.	No. of fill- ings	No. of teeth filled	No. of fill- ings	No. of teeth filled	Local	Gen- eral	opera- tions	No. of patients sup- plied with dentures
School children	11360	4644	2644	7024	3372	2936	70	69	873	4297	5407	95
Pre-school children	371	289	-	732	-	-	6	6	2	325	49	-
Maternity	1057	309	1165	-	127	112	-	-	57	234	708	122
Total 1955	12788	5242	3809	7756	3499	3048	76	75	932	4856	6164	217
Total 1954	12841	5704	3261	7902	3538	2965	52	48	743	4856	5174	231

#### CHIROPODY CLINIC

REPORT OF THE CHIROPODIST.

The Chiropody Clinic held fifty-two weekly sessions during the year, 909 treatments were given to 415 patients.

Cases of verrucae predominated and 327 cases accounted for 798 treatments, all these cases were discharged cured. The technique used in this clinic shows an average of 2.4 per cent. treatments per cure for verrucae. It would be helpful if parents inspected their children's feet at frequent intervals and reported any abnormalities. Forty-two children visited with corns and 49 treatments were given. Corns on young people—so often caused by badly fitting socks—are cured by one treatment. The 14 cases of nail conditions included onychocryptosis and onychgryphosis, the former were all cured but some of the latter condition will need further treatments. Five cases were referred to the Orthopaedic Surgeon.

In only two cases were shoes ill-fitting. A most unfortunate increase in the type of shoe known as the 'Casual' is being worn, these shoes, like a 'Court' shoe are held on the feet by tightness and by gripping with the toes. This is very bad for young feet and it is felt that guidance in the choice of correct footwear could advantageously be given to our teenage schoolgirls. Parents who visit the clinic in search of advice and guidance on any matter appertaining to their children's feet are very welcome. Many parents little realize that good feet are started in the cradle or how very much can be done by parents to ensure that our future generations are free from foot troubles and deformities.

The appended table gives an analysis of the work:

De	fects		Sch	ool children	Infa	nt Welfare
De	iects		Cases	Attendances	Cases	Attendances
Verrucae		 	327	798	_	_
Helomata		 	42	49	2	3
Nail conditions		 	14	16	2	2
Callosities		 	8	9	-	-
Hallux valgus		 	3	6	-	-
Flexed digits		 	2	4	2	2
Bursitis		 	2	4	-	-
Pronation		 	5	6	-	
Miscellaneous		 	6	10	-	-
То	tal	 	409	902	6	7

CLINIC SUMMARY

The following table summarises the work done at the several school clinics during the year :-

		PER																		I	Totals		
	Ferham	am	Cranworth	orth	Thorpe	y e	Greas- brough		Newman Open Air School	an Liri	Black- burn		Abbey Special School	NE Z	High Greave Road		Redscope School		School		Non- School cases	1	All
Work	Cases	Attendances	Cases	Attendances	Cases	Attendances	Cases	Attendances	Cases	Attendances	Cases	Attendances	Cases	Attendances	Cases	Attendances	Cases	Attendances	Attendances	Cases	Attendances	Cases	Attendances
Minor ailment and general	2835	8721	3797	6006	120	519	34	64	918	3790	66	44	148	477	336	1842	29	38 82	8267 24707	07	49	187 83	8316 24894
Orthopaedic	1	1	145	334	1	1	1	1	1	1	-	1	1	1	1	1	1	-	111 2	272	34	62 1	145 334
Ophthalmic	200	1511	406	1294	1	1	1	1	1	T	T	1	1	1	1	1	1	- 00	879 2546	940	27 2	259 9	906 2805
Ear, nose and throat	273	2666	277	2843	1	1	- 1	1	1	1	1	1	T	1	1	1	- 1	4	484 5295		99	214 5	550 5509
Dental	2648	6930	2594	5858	1	1	1	1	1	1	1	1	1	1,	1	1	-	- 46	4644 11360		598 14	1428 52	5242 12788
Child guidance	130	1556	1	1	1	1	1	1	1	1	1	-1	1	1	1	1	1	1	69 1228		61 3	328 1	130 1556
Chiropody	224	507	191	402	1	1	1	1	1	1	T	1	1	1	T	1	1	4	409	905	9	7	415 909
Speech therapy	117	1007	17	273	1	1	1	1	1	T	T	1	1	1	T	1	-1	-	134 1280	80	1	-	134 1280
Employment	97	97	52	52	1	1	1	1	2	2	1	1	1	1	1	1	1	-	151	151	1	-	151 151
Total	6824	6824 22995	7479 20065	20005	120	519	34	49	920	3792	66	449	148	477	336	1842	29	38 151	38 15148 47741		841 24	2485 15989 50226	89,200

#### INFECTIOUS DISEASES AND IMMUNISATION

The appended table gives the numbers of the common infectious diseases in children between the age of 5 and under 15 years and shows the quarterly distribution of the cases. The totals for all ages are also given.

Disease		Ca	ses occur	ring in 19	55	Total	Total
Disease		1st quarter	2nd quarter	3rd quarter	4th quarter	1955	all age 1955
Acute encephalitis:							
Infective		-	-	-	-	-	1
Post infectious		-	-	-	-	-	-
Acute poliomyelitis:							
Paralytic		-	-	-	-	-	8
Non-paralytic		-	-	1	-	1	3
Diphtheria		-	-	-	-	-	-
Dysentry		. 3	7	13	6	29	72
Encephalitis lethargica		-	-	-	-	-	-
Erysipelas		-	-	-	-	-	7
Food poisoning		-	-	-	2	2	12
Measles		22	725	138	- {	885	2072
Meningococcal infection		-	-	-	-	-	3
Pneumonia		-	1	-	-	1	29
Scarlet fever		20	10	6	22	58	90
Typhoid and paratyphoid fev	rers	-	-	-	-	-	-
Whooping cough		5	5	3	7	20	45
Tuberculosis:							
Respiratory		-	1	-	-	1	56
Other forms		1	-	-	-	1	6

#### DIPHTHERIA IMMUNISATION.

During the year, 174 school children received primary immunisation and 612 received booster injections.

At the end of the year 10,657 children between the ages of 5-14 years had been immunised. Of these, 5,548 had been immunised or received booster doses during the past five years.

No case of diptheria has been reported in the County Borough since March, 1952.

#### NURSERY SCHOOLS AND CLASSES

No new nursery school or class was opened during the year.

Number of visits paid to nursery school and classes		76
	Boys	Girls
Number of examinations of children for cleanliness	 1549	1401
Number of new children found with verminous head	 2	2
Number of examinations of children with verminous head	 2	4
Number of new children found with nits	 15	28
Number of examinations of children with nits	 33	64
Number of children referred to minor ailment clinics	 14	9

#### HANDICAPPED PUPILS

The ascertainment and care of the handicapped children residing within the County Borough continues within the frame work of the Education Act, 1944, and the School Health Service and Handicapped Pupils Regulations, 1953.

The following table shows the number of handicapped pupils of the various categories on the register at 31st December, 1955 :

	In Residential Special Schools	In Day Special Schools	In Ordinary Day Schools	Not at school	Total
Blind	2 (-)	- (-)	- (-)	- (2)	2 (2)
Partially sighted		10 (9)	- (1)	- (-)	10 (10)
Deaf	- (-) 9 (9) 2 (2) 3 (4)	- (-)	- (-)	- (-)	
Partially deaf	. 2 (2)	- (-)	4 (2)	- (1)	9 (9) 7 (5)
Educationally sub-normal	3 (4)	125 (124)	84 (82)	- (1)	212 (211)
Epileptic	(1)	2 (1)	1 (1)	- (-)	3 (3)
Maladjusted		- (-)	5 (6)	- (-)	6 (6)
Physically handicapped .	. 6 (-)	25 (20)	5 (4)	5 (6)	41 (30)
Speech defects	(-)	- (-)	71 (-)	- (-)	71 (-)
Delicate		135 (146)	11 (10)	- (-)	147 (157)
Multiple defects	. 2 (2)	5 (6)	1 (1)	- (-)	8 (9)

The figures in brackets indicate the number on the register at 31st December, 1954.

#### BLIND PUPILS.

During the year 2 six year old boys were admitted to the Sheffield School for Blind Children. A girl of fourteen years remains at Condover Hall School for Blind Children, Shrewsbury. This child has a double handicap being also educationally subnormal.

#### PARTIALLY SIGHTED PUPILS.

Three partially sighted pupils were admitted to the Newman Open Air School, the total number of partially sighted pupils attending there is now ten.

DEAF PUPILS.

Deaf pupils are easily the most difficult to assess at an early age. These children are often referred for special examination at "Toddlers Clinics," as they are generally backward in reaching the usual milestones and may therefore be considered to be mentally retarded. Hearing tests are also rather difficult at this age. These children are referred for the advice of the Consultant Aural Surgeon.

Children at the age of eight years being conversant with the use of numbers and having the ability to write them down are tested by a gramophone audiometer. Any child failing the test will be seen by the specialist and have a special test with the pure-tone audiometer. They are again tested at the age of eleven years.

No deaf pupils were admitted to special residential schools during the year; however, seven deaf pupils remain at the Yorkshire Residential School for the Deaf, Doncaster. One child left this school in December at the age of sixteen years and is now in employment in a factory in the County Borough. Two children continue as deaf pupils at the Maud Maxfield School for the Deaf, Sheffield, and another child went into the care of the Sheffield Local Education Authority during the year.

#### PARTIALLY DEAF PUPILS.

Two pupils remain in the Yorkshire Residential School for the Deaf, Doncaster. EDUCATIONALLY SUB-NORMAL PUPILS.

A large number of educationally subnormal pupils continue to be educated in the ordinary day schools. Selection for the Abbey School requires careful discrimination to use the school to the best advantage. It remains important that there should continue to be provision of the special class for the retarded pupil in the ordinary day school.

During the year 121 children were examined in respect of educational subnormality. The following recommendations were made: 1955 1954 29 Special day school 30 Special class for retarded pupils in ordinary day school 25 21 Special residential school—special day school meantime 1 2 Under observation-excluded from school meantime 1 Further observation in ordinary day school ... 34 66 Remain at special day school ... ... 18 20 Residential school for spastics-special day school meantime ... 2 Residential school for spastics-ordinary day school meantime 1

... Recommended for the Open Air School-not educationally subnormal Referred to Speech Therapist 2 Referred to Child Guidance Clinic as maladjusted ... 1 Admission to Newman Open Air School 2

5

8

7

Reported to Local Authority as ineducable ...

after leaving school

Reported to Local Authority as requiring statutory supervision

...

Two boys continue to remain as boarders at Rossington Hall Special School for Educationally Subnormal Pupils, Rossington, near Doncaster. One boy being withdrawn in April, now attends the Abbey Special Day School. Another boy, aged 10 years, continues to remain at the Howard Home Special School, Bedford. A girl, aged 16 years, left the Mony Hull Special School, Birmingham, in March, 1955, she is now employed in a Wire Works.

#### ABBEY SPECIAL SCHOOL

One hundred and thirty children continue to attend at the Abbey Special Day School for Educationally Subnormal Pupils, 80 in the senior department and 50 in the junior department. During the year there were 7 new admissions to the senior department at Kimberworth and 17 to the junior department at Scholes.

The following children left the school during the year:

Boys: 6 on reaching the age limit of 16 years.

3 on reaching the age of 15 years as it was felt they had reached their educational limit.

1 left the district.

Of the age leavers 4 were notified to the Local Health Authority under Section 57(5) of the Education Act, 1944, as requiring care and supervision.

Two of the boys attended the Rehabilitation Centre at Handsworth. All the boys are now working.

Girls: 6 on reaching the age limit of 16 years.

2 on reaching the age of 15 years as it was felt they had reached their educational limit.

1 transferred to the Newman Open Air School.

1 left the district.

Two of the age leavers were notified to the Local Health Authority under Section 57(5) of the Education Act, 1944, as requiring care and supervision.

Five of the girls are now working.

During the past year there have been fewer requests from parents for their children to leave the school at 15 years. The parents are beginning to realise that at 15 years most of these children are not mature enough to compete in the labour market. Even in the case of the girls, whose services can be utilised at home, the parents are appreciative of the excellent domestic science training given at the school and the mothers are particularly grateful that they should have the extra year's tuition.

#### EPILEPTIC PUPILS.

No admissions to special residential schools were made during the year. One 16 year old girl left the Chalfont St. Peter Colony for Epileptics, Bucks., in July, 1955. This girl is now at the Occupation Centre.

#### MALADJUSTED PUPILS.

Any pupil showing evidence of emotional instability or psychological disturbance is usually referred by a school medical officer to the Child Guidance Clinic for observation and treatment. Residential accommodation for these children is still difficult to obtain.

One boy aged 14 years, was admitted to Wennington Hall Special School (Residential) for Maladjusted Boys, Hornby, Lancs., in January, 1955.

#### PHYSICALLY HANDICAPPED PUPILS.

The degree of disability determines what the optimum special treatment may be for these pupils. Eight children were admitted to special residential schools during the year. One of these admitted for a trial period was withdrawn after three months. This boy had a double handicap, being also educationally subnormal and was subsequently admitted to the Abbey Special Day School.

#### Admissions to Residential Schools during 1955:

Spastics	 	 	 5
Congenital heart disease	 	 	 1
Hydrocephalus	 	 	 1
Spina bifida	 	 	 1

#### Pupils Suffering from Speech Defect.

Speech training is given daily at the Speech Clinic, Ferham House, except Thursday, when treatment is carried out at Cranworth Road Clinic.

Last Autumn the Speech Clinic moved to new premises in Ferham Villa, which are very much better in every way.

Attendance has been particularly good. As there is no speech therapist in Doncaster an average of twelve children travel each week to the clinic here, and this scheme has worked well throughout the year even in the very bad weather.

It has become increasingly aware through several experimental cases, of the benefits to be derived from commencing treatment at an early age, and it would be helpful if children whose speech does not appear to be developing normally could be referred to the Speech Clinic before starting school. Even if the child has not reached the stage where direct treatment can be attempted, advice on helping him at home can

be given. It is a fallacy to suppose that all children will "grow out of it." Some may even "grow into it" and when they eventually come for treatment it may take longer to eradicate the defect.

### CASES AND ATTENDANCES.

	Toal number of cases trea	ated					134
	Total number of cases disc	harged					63
	Total number of interviews	with pa	arents				81
	Total number of cases refe	erred					75
	Total number of attendance	es made		3			1280
D	P						
DETAILS	of Discharges.						-
	Number refusing treatment		• • • •	• • • •	• • • •		3
	Number treatment unneces	sary	•••	• • •	• • •	•••	6
	Number cured						53
	Number left district						1
							_
						Total	63
							-
Types o	F DEFECTS TREATED.						
	Stammer						35
	Stammer and dyslalia						3
	Dyslalia						83
	Interdental sigmatism						2
	Gutteral sigmatism						2
	Lateral sigmatism						1
	Nasal sigmatism						1
	Cleft palate	***					2
	Cleft palate and cerebral p	alsy					1
	Spastic dysarthria						3
	Delayed speech developmen	nt					1
						Total	134
CASES R	EFERRED FOR OTHER TREA	TMENT.					
	Child guidance clinic						2
	Orthodontics						1
	Ear, nose and throat clinic		20.20		200		2
	Dental department						2
	Dental department						2

#### DELICATE PUPILS.

One diabetic girl of 13 years, continues at Firbank Home, Frodsham, Cheshire. Another child, aged 14 years, who was admitted to the Children's Convalescent Home, West Kirby, Cheshire, in April was discharged in October, 1955, and is now attending an ordinary school.

#### NEWMAN OPEN AIR SCHOOL

The following table records details of admissions and discharges during 1955:

	Epile	eptic	Deli	cate	Physi	ically apped	Part sigh		
	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Total
On register 1st January, 1955	-	1	79	67	12	8	4	5	176
Admitted 1955	-	1	27	27	5	5	3	-	68
Discharged 1955	-	-	33	32	4	1	1	1	72
Remaining on register at year end	-	2	73	62	13	12	6	4	172
On waiting list at year end	-	-	8	3	2	2	-	-	15
Ascertained in 1955	-	1	26	21	4	2	- /	-	54

The following classes of children are specially likely to benefit from attendance at such a school:

- 1. Children suffering from malnutrition, anaemia, general debility.
- Children living in the same house as an open case of pulmonary tuberculosis, if it is not practicable to remove the contacts to a residential home.
- 3. Children with tuberculous glands in the neck.
- Children convalescent after debilitating diseases, such as pneumonia, measles or whooping cough.
- 5. Children convalescent after operations for adenoids, glands in neck, etc.
- Children suffering from blepharitis and other chronic non-infectious eye diseases in association with malnutrition.
- 7. Children with speech stammer.
- Children with recurring bronchitis, bronchiectasis and asthma are sometimes improved.

(Rheumatic children, including those suffering from chorea, are not as a rule suitable subjects).

The object of the Newman Open Air School is to provide for the above classes of children fresh air, sunshine, space, freedom for recreation, good food, adequate

rest and medical care. A school medical officer visits the school once weekly and a trained nurse continues in daily attendance at the school. Medical treatment carried on at the school is supervised by the school medical officer in co-operation with the family doctor and the area paediatric, orthopaedic and other consultants. The degree of co-operation between parents, hospitals, medical practitioners, educational welfare officers and others, gives cause for the highest satisfaction.

TREATMENTS GIVEN	1		TOTA	L TREATMEN	TS
Postural drainage			 	1,187	
Breathing exercises			 	14,070	
Ultra violet light and	irradi	ation	 	11,920	
Aerosol inhalations			 	1,187	

Some special medicines are given by means of an inhalation apparatus to facilitate drainage of mucus and pus from the child's chest in severe chest infections. This type of treatment, commended by consultants, is carried on daily while the child is at school and it is regretted that it cannot be maintained while the child is on holiday or leaves school.

The following is a specimen menu from the school for the week commencing 30th April, 1956:

MONDAY	Breakfast — Bread and dripping, cocoa, (Marmite).  Dinner — Roast meat, cabbage, potatoes, steamed sultana roll and custard.
	Tea — Lemon curd sandwiches and milk.
TUESDAY	Breakfast — Porridge, honey sandwiches, milk.
	Dinner — Stewmeat, pastry, carrots, potatoes, rice pudding.
	Tea — Cheese sandwiches, milk, scones.
WEDNESDAY	Breakfast — Bread and dripping, cocoa, (Marmite).
	Dinner — Fish, peas, potatoes, mincemeat tart and custard.
	Tea — Jam sandwiches, milk.
THURSDAY	Breakfast — Soup and bread.
	Dinner — Cold roast, salad, bread and butter, steamed currant duff and white sauce.
	Tea — Tomato sandwiches, milk.
FRIDAY	Breakfast — Cornflakes, syrup sandwiches, milk.
	Dinner — Irish stew, cabbage and potatoes, ground rice pudding and figs.
	Tea — Bread and dripping, milk.

#### DIETARY SUPPLEMENTS.

Each child is given specific medicines prescribed by the doctor and a dessertspoonful of malt daily.

#### HOME TUITION.

There will always remain in the community a section of pupils who on account of severe handicap will require home tuition and for these, the services of a home teacher are a great blessing. These children are generally aided psychologically by this type of treatment.

The following are the handicaps of the four children who were receiving home tuition at the end of the year:—severe crippling following poliomyelitis, severe cerebral palsy, chronic nephritis (this child had a trial period at the Open Air School but this was not found to be satisfactory to meet his needs) and congenital heart disease. Three children who had received home tuition were admitted to special residential schools during 1955.

#### CARE AND AFTER-CARE OF HANDICAPPED PUPILS.

It is most gratifying to report the continued fine support and co-operation given by parents and the Youth Employment Service when the child's employment on leaving school has to be considered.

The following table indicates the employment taken up by school leavers during 1955:

Boys	Shop assi	stants			2	Girls	Shop assistants	 	5
	Gardener	s' assis	tants		2		Junior clerk	 	2
	Clerk				1		Usherette	 	1
	Van boy			****	1		Factory worker	 	1
	Welder				1		At home	 	1
	Assistant	cook			1				
					_				_
				Total	8			Total	10

#### SCHOOL PREMISES

Redscope Primary School was opened during the year, the Infants' Department on the 18th April and the Junior Department on the 5th September, 1955.

Templeborough Primary School was closed in December, 1955.

## CHILDREN'S HOMES AND BOARDED OUT CHILDREN

#### MEDICAL RESPONSIBILITY.

On admission to one of the Corporation's Homes all children are examined by a school medical officer and they are also examined on discharge from the Home. Children who are to be boarded-out are also medically examined and a certificate of fitness is issued to the Children's Officer.

The general medical services were carried out, as in previous years, by a private medical practitioner.

#### CHILDREN'S HOMES.

125 children were seen during the year for periodic medical inspection and 130 examinations made. Treatment and tonics were prescribed where necessary.

Eleven admissions to hospitals for various complaints were made during 1955, three to the Moorgate General Hospital, three to Rotherham Hospital, one to the Children's Hospital, Sheffield, two to the Sheffield Royal Infirmary, one to the City General Hospital, Sheffield, and one to King Edward VII Orthopaedic Hospital, Sheffield.

The general health of the children continues to be satisfactory.

#### BOARDED-OUT CHILDREN.

Fifty-five boarded-out children were examined during 1955 and 55 examinations made. Tonics were prescribed where necessary and defects found were accorded appropriate treatment.

#### MISCELLANEOUS MEDICAL EXAMINATIONS

#### CHILDREN AND YOUNG PERSONS ACT

Six boys and two girls were examined during the year prior to their admission to a remand home or approved school.

#### EMPLOYMENT OF CHILDREN

During the year 140 boys and 9 girls were granted certificates of fitness for employment. The figures for 1954 were 135 and 8 respectively. Two boys were examined and found to be unsuitable for employment.

Four girls were granted certificates of fitness to take part in stage entertainments compared with six girls in 1954.

#### COLLEGE ENTRANTS /

Forty-five candidates for admission to various training colleges were examined by school medical officers during the year. All the candidates were found to be medically fit for admission.

#### B.C.G. VACCINATION

During 1955, the 87 boys who had received B.C.G. vaccination at Spurley Hey Secondary Modern School in 1954, were given a second Mantoux skin test to determine the effectiveness of the vaccination. With the exception of six, all gave a positive Mantoux reaction and therefore did not require further B.C.G. vaccination. The six boys giving negative results were re-vaccinated.

Two other boys, absent from the vaccinations in 1954, were vaccinated during 1955.

#### SCHOOL MEALS SERVICE

ORGANISER OF SCHOOL MEALS: MISS N. TAYLOR

During the year three new kitchen dining rooms have been completed. The Grammar School for Boys were able to eat their Christmas dinner in more pleasing conditions. A dining room fitted with furniture in keeping with a school of its years has gradually come into being. The kitchen, fitted with new modern equipment to facilitate easier working, is beyond all expectation. One wonders how in the past a meal was ever prepared under the old conditions. The beginning of the September term saw the opening of Redscope School Kitchen, a small well-planned kitchen which is a joy for the kitchen staff to work in. By December the number of school dinners was 245 daily, served in family service conditions. During May the High School for Girls were able to transfer into their own kitchen dining hall, a brick building in keeping with the school. It is a delightful dining hall, decorated in very pleasing colours and fitted with modern dining room furniture. The kitchen is also of modern design to facilitate easier working. This kitchen produces an average of 420 dinners per day, served in two sittings.

We have in Rotherham now fourteen kitchens serving from 120-600 meals per day and one central kitchen sending out 2,400 dinners in containers. We look forward to the day when this kitchen is redundant and all meals are prepared and served at a school. However much one tries, a container meal is not as satisfactory to the diners as a meal prepared on the premises. Canklow staff do an excellent job but the fact that the meal has to be packed does limit the type of meal sent out.

Taking the year as a whole it has been a bad year for caterers. The quality of vegetables has been of poorer quality, potatoes especially have been difficult. Fresh fruit during the summer was late coming along and when the price came within the School Meals Organiser's range the long summer holiday was upon us.

The food habits of the children are conservative. They eat well the foods that are easily eaten and do not require a lot of effort. Salads, however attractively prepared, are not popular with junior and infant children, or with senior boys. Roast meat, either hot or cold, is not accepted as well as a stew or minced meat.

#### KITCHEN STAFF.

During the year most of the staff dealing with school meals have been medically examined and all were suitable for this type of work.

The following tables give details of the number of meals, paid and free, served during the year and the percentage of school children having dinners daily for one term:

Quarter	Children paid	Children free	Teachers paid	Teachers free	School helpers	Kitchen staff
Jan. — March	292,019	38,585	12,893	6,989	8,215	6,311
April — June	230,712	30,378	8,979	6,254	7,165	5,089
July — Sept.	189,234	23,086	7,023	4,920	5,797	4,347
Oct. — Dec.	268,131	29,880	9,985	6,480	7,205	5,940
	980,096	121,929	38,880	24,643	28,382	21,687

Total number of dinners supplied-1,215,617

1955	Average school attendance per day	Average number of meals per day	Percentage
September	13,984	6,369	45.5
October	14,213	6,384	44.9
November	13,987	6,414	45.9
December	13,894	6,428	46.2
	14,019	6,399	45.6

#### PHYSICAL EDUCATION

ORGANISERS: MR. J. LONGSTAFF, M.A., MISS G. ELSWORTH.

# (A) PHYSICAL TRAINING IN SCHOOLS.

Children in all schools receive instruction in physical exercises, playground games and activities. Where facilities permit, movement training, dancing, field games and athletics are included.

Climbing apparatus is an essential feature of modern methods, as detailed in "Planning the Programme," Part II of the Ministry of Education's latest scheme of Physical Education for Primary Schools. The provision of fixed outdoor apparatus has been continued during the year and most of the old schools have at least one piece; provision was made in the capital cost of some new schools, such as Herringthorpe Infants, Redscope Juniors and Infants; other schools unfortunately lack this type of apparatus. To compensate somewhat for this, provision for portable apparatus was made for some schools with suitable halls. We wish to report, in short, that there is still leeway to make up before the complement of both indoor and outdoor climbing apparatus is available in all schools.

The provision of locker accommodation for physical education kit at Spurley Hey School during 1954 was encouraging; the addition during 1955 at South Grove was helpful, but much remains to be done.

It is suggested that possibly the best method of completing the provision of both climbing apparatus and locker accommodation would be by means of an annual grant to be included in the estimates during the next year or two.

# (B) ORGANISED GAMES AND ATHLETICS.

Good use has been made of all playing areas in the Borough suitable for the purpose and to which schools have access. Facilities fall far short of requirements and the majority of schools are limited to the use of playgrounds.

Use is made of Herringthorpe Playing Fields particularly out of school hours for inter-school matches. South Street field has been available for Kimberworth (Boys).

The fields at Kimberworth (Boys and Girls), Spurley Hey (Girls) and Park Street have been well used; in connection with the latter Red House ground is still to be sown down. Spurley Hey (Boys) area is used almost continuously and, being over-played, is not only threadbare but has a dangerous surface.

Broom Valley field is now available, as is also the additional area prepared for Oakwood (Boys).

### (C) SWIMMING.

Main Street Baths were used to capacity and some use was made of Sheffield Road Baths during the summer months. Primary schools receive first consideration in the allocation of time for instruction and the secondary schools make good use of the remainder; unfortunately the total time is quite insufficient to meet their needs. It will doubtless be agreed that the main function of the Local Education Authority with regard to swimming instruction is to see that as many scholars as possible learn to swim adequately, and, for this reason, life saving is specially stressed in Rotherham; there is a tendency, however, to overlook the value of swimming as an exercise, which not only improves the general physique, but has a carry-over value into adult life far beyond the normal school games.

Awards (1.9.54 to 31.7.55)		Boys	Girls	Total
Swimming certificates	 	912	783	1695
Royal Life Saving Society	 	482	257	739
Free passes	 	163	142	305
R.S.A.A. Award of Merit	 	-	3	3
Y.S.A.A. Award of Merit	 	_	2	2

### (D) BRINSWORTH STREET GYMNASIUM AND WESTGATE HALL.

Brinsworth Street Gymnasium has been used regularly by the College of Technology (Mining and Commerce Departments) and St. Bede's School during the day and for physical training in the evenings.

Westgate Hall has been used by Alma Road (Girls) School during the day and for badminton during the evenings. The badminton coaching scheme in connection with the Youth Service has been particularly effective.

#### (E) Courses.

South Yorkshire Physical Education Association.

5th February. Day Course. National Dance 6, Basketball 2.

Athletics - January/February. 3 Sessions. 10 attended.

Basic Movement — April/May Miss D. Jordan conducted four sessions for Infant Teachers at Broom Valley. This was followed by a meeting with Head Teachers, 7 present, to discuss implementation and a visit to Bolton-on-Dearne Infant School, 10.11.55, by 20 Head Teachers.

Cricket — Indoor Coaching Scheme inaugurated at Thornhill School. Two County Coaches in charge of instruction Mr. C. Turner (Yorkshire) and Mr. C. Lee (Derbyshire). Four separate classes, each of 12 students.

Tennis — A Coaching Scheme, arranged in co-operation with the Central Council of Physical Recreation and the Lawn Tennis Association had to be cancelled owing to lack of support.

# (F) CAMPS AND SCHOOL JOURNEYS.

Kimberworth Girls. Liverpool and Stratford.

South Grove Boys. Switzerland, Staithes (Camp), York, Dun-

ford Bridge, etc.

South Grove Girls. Lincoln, etc.

Park Street. Liverpool, Dunford Bridge, etc.

High School. Summer Camp, Bath, Manchester, Sea-

houses, Austria.

Grammar School. Lake District.

Oakwood Technical High Boys. Belgium, B.I.F. (Birmingham), etc.

Oakwood Technical High Girls. Paris, Potteries, Chester.

St. Bede's. Liverpool, Southwark, Newark, Lichfield,

etc.

A full and varied programme of school journeys was carried out by the above and most of the Primary Schools. Amongst places visited, in addition to above, were Bridlington, York, Derby, Hathersage, Castleton, Roche Abbey, Conisborough, Sprotborough, Haddon Hall, Chatsworth House.

# (G) YOUTH COMMITTEE.

A programme of activities, similar to that of other years has been carried out.

Badminton — A successful programme of league fixtures and friendly matches was carried out. As an experiment, nominated players from various clubs have been given advanced coaching as a combined group in this wanture, has proved most valuable.

group; this venture has proved most valuable.

Table tennis — Individual championship competitions and league fixtures for boys' and girls' teams have been successfully completed.

Netball — Training sessions for players from all clubs were held at Park Street School. Two teams, senior and junior, were entered for the Y.Y.O.S.A. Rally, held in Wakefield. An effort to form a combined club to meet regularly did not meet with success.

 Rounders — Rallies for mixed or girls' teams were held on four evenings during the summer.

Athletics — The Y.Y.O.S.A. meeting was held at Hemsworth. A boys' team was entered and gained two first, two second, one third and one fourth place.

Tennis

— The Oakwood Tennis Courts were again used to capacity, 15 clubs taking advantage of the facilities. The Doncaster team which this year visited Rotherham again proved too strong and gained an easy victory.

Cricket

 Doncaster were also successful in the annual match, held in Rotherham, though trial and practice games were arranged for the team.

Swimming

— Use of the training session at Main Street Baths has fluctuated somewhat, though in general, it has been well supported. A small group of members again gained awards of the Royal Life Saving Society. The Y.Y.O.S.A. gala was held in Bradford. The mixed team gained one first, one second and three third places.

# (H) ROTHERHAM SCHOOLS' ATHLETIC ASSOCIATION.

Excellent work is again reported. The association continues to urge the extension of facilities for all games and sports in the several districts of the Borough. The expenses of running the association are quite considerable, and their greatest need is an enclosed ground, where a charge may be made. The association express appreciation of all help, financial and otherwise, given by the Education Committee.

The usual competitions in athletics, football, cricket, swimming and rallies for netball and rounders were successfully carried through. Rugby is played at three schools only and has proved worthy of more general support.

Outstanding awards were as follows:

Football . K. Parkinson, County Cap and England v. The Rest Trial. R. Collinson—reserve in Junior International Trial.

Athletics. County honours-G. S. Wood, K. Wain, A. Fothergill, J. R. Hutchinson.

Cricket. Rotherham XI won the County Championship for the first time.

County Caps—D. Torr and J. Hampshire, who also represented North of England XI.

# MINISTRY OF EDUCATION MEDICAL INSPECTION RETURNS Year ended 31st December, 1955.

# TABLE I MEDICAL INSPECTION OF PUPILS ATTENDING MAINTAINED PRIMARY AND SECONDARY SCHOOLS

# (A) PERIODIC MEDICAL INSPECTIONS.

	Number of re-inspection	ons		 		 Fotal	15340 26506
	Number of special insp			 			11166
(B)	OTHER INSPECTIONS :						
					Grand	Total	5530
	Number of other period	dic insp	ections	 			1638
						Total	3892
	Third age group			 			984
	Second age group			 			1383
	Entrants			 			1525

# (C) Pupils Found to Require Treatment:

NUMBER OF INDIVIDUAL PUPILS FOUND AT PERIODIC MEDICAL INSPECTION TO REQUIRE TREATMENT (excluding dental diseases and infestation with vermin):

Group	For defective vision (excluding squint)	For any of the other conditions recorded in Table IIA	Total individual pupils	
Entrants	9	103	112	
Second age group	69	57	119	
Third age group	37	28	63	
Total (prescribed groups)	115	188	294	
Other periodic inspections	87	109	192	
Grand Total	202	297	486	

TABLE II

A—RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION IN THE YEAR ENDED

31ST DECEMBER, 1955.

	PERIODIC I	NSPECTIONS	SPECIAL I	NSPECTIONS
	No. of	defects	No. o	f defects
Defect or disease	Requiring treatment	Requiring to be kept under observation, but not requiring treatment	Requiring treatment	Requiring to be kept under observation, but not requiring treatment
Skin	 44	97	2331	80
Eyes—Vision	 202	729	672	650
Squint	 21	68	22	106
Other	 7	18	450	27
Ears—Hearing	 11	31	95	54
Otitis media	 9	66	31	12
Other	 2	5	333	39
Nose or throat	 106	491	738	698
Speech	 7	60	129	64
Cervical glands	 16	177	30	215
Heart and circulation	 1	61	3	58
Lungs Developmental—	 4	217	9	139
Hernia	 2	14	-	19
Other	 4	153	1	5
Orthopaedic—				
Posture	 8	54	-	12
Flat foot	 28	115	9	41
Other	 30	149	43	106
Nervous system-				
Epilepsy	 6	28	-	27
Other	 3	55	9	168
Psychological—				
Development	 -	26	8	25
Stability	 -	15	7	10
Other	 29	228	2706	922

B—Classification of the General Conditions of Pupils Inspected During the Year in the Age Groups

A con procure	Number of		A. ood)	To the Late	3. air)	C. (Poor)	
Age groups	pupils inspected	No.	Per cent.	No.	Per cent.	No.	Per cent.
Entrants	1525	1292	84.72	227	14.89	6	0.39
Second age group	1383	1207	87 · 28	175	12.65	1	0.07
Third age group	984	933	94.82	51	5.18	-	-
Other periodic inspections	1638	1341	81 · 87	290	17.70	7	0.43
Total	5530	4773	86-31	743	13.44	14	0.25

# TABLE III

# INFESTATION WITH VERMIN

Total number of examinations in the school by the school			
authorised persons	 		56,895
Total number of individual pupils found to be infested	 	•	514
Number of individual pupils in respect of whom cleansing (Section 54 (2), Education Act, 1944)			465
Number of individual pupils in respect of whom cleansing (Section 54 (3), Education Act, 1944)			49

# TABLE IV .

TREATMENT OF PUPILS ATTENDING MAINTAINED PRIMARY AND SECONDARY SCHOOLS (including Special Schools).

GROUP 1.—DISEASES OF THE SKIN (excluding uncleanliness, for which see Table III)

						Number of cases under treatment de	
						by the Authority	otherwise
Ringworm	: (1)	Scalp		 	 	 -	-
	(2)	Body		 	 	 2	-
Scabies				 	 	 13	-
Impetigo				 	 	 72	-
Other skin	dise	ases		 	 	 2190	41
			Total	 	 	 2287	41

# GROUP 2.—EYE DISEASES, DEFECTIVE VISION AND SQUINT

					Number of cases	dealt with
					by the Authority	otherwise
External and other, excluding Errors of refraction (includin			ction an	 t	322	6 879
Total				 	322	885
Number of pupils for whom	spectacl	les we	re:			
(a) Prescribed				 	-	802
(b) Obtained				 	_	735

# GROUP 3.—DISEASES AND DEFECTS OF EAR, NOSE AND THROAT

6174		Number of ca	ses treated
		by the Authority	otherwise
Received operative treatment :			
(a) for diseases of the ear	 	 -	2
(b) for adenoids and chronic tonsilitis	 	 -	215
(c) for other nose and throat conditions		 -	37
Received other forms of treatment	 	 667	159
Total	 	 667	413

# GROUP 4.—ORTHOPAEDIC AND POSTURAL DEFECTS

a) Number	treated as in-paties	nts in h	ospital				6	
(h) Number	treated otherwise,	eg in	clinics	OF	out-patie	nte	by the Authority	otherwise
(b) Ivalliber	departments				··		-	111

# GROUP 5.—CHILD GUIDANCE TREATMENT

	Number of case	s treated
	In the Authority's Child Guidance Clinics	elsewhere
Number of pupils treated at child guidance clinics	 -	69

# GROUP 6.—SPEECH THERAPY

	Number of case	es treated
	by the Authority	otherwise
Number of pupils treated by speech therapists	 134	_

# GROUP 7.—OTHER TREATMENT GIVEN

					Number of case	es treated
					by the Authority	otherwise
(a)	Miscellaneous minor ailme	nts		 	 2516	193
(b)	Others:					
	Rheumatism			 	 20	-
	Appendicectomy			 	 -	58
	Lung conditions			 	 _	43
	Enlarged glands			 	 25	20
	Hernia			 	 -	8
			Total	 	 2561	322

# TABLE V

# DENTAL INSPECTION AND TREATMENT CARRIED OUT BY THE AUTHORITY

Number of pupils inspected by the Authority's dental officers:

						8073
		•••		• • • •		1592
					Total	9665
			,		2000	
atment						7870
						7061
						4644
for tre	atment		•••			11360
ion						64
ent						1611
					Total	1675
						3372
						70
					Total	3442
rmanen	t teeth					2936
emporar	y teeth					69
					Total	3005
th				-		2644
eth						7024
					Total	9668
esthetic	s for e	xtract	ion			4297
						1864
						157
						-
	atment it for treation ent   rmanen emporar  th eth	atment for treatment ion ent  rmanent teeth emporary teeth	atment  for treatment  ion  ent  rmanent teeth  emporary teeth  eth  eth	atment	atment	Total  atment

.