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STAFFORDSHIRE COUNTY COUNCIL

REPORT

of the

MEDICAL OFFICER OF HEALTH

G. RAMAGE, M.A. (Admin.), M.D.

For the Year 1954

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STAFFORDSHIRE COUNTY COUNCIL

Annual Report of the Medical Officer of Health

PRELIMINARY NOTE

The year 1954 did not provide any spectacular event as regards the health of the County, the most satisfactory feature, in fact, being the absence of deaths from diphtheria and the reduction of the number of cases of that disease as compared with the previous year. However, it was a period of quiet progress as demonstrated by most of the statistics.

It will be noted in the early pages of the report that the birth-rate shows a continuation of the fall which has been seen, except for the "War Bulge," since the turn of the century, the figure of 15.4 being the lowest so far recorded. The death-rate seems to have reached a plateau and the main causes of death are unaltered. It is a comment on the ways of the day that motor accidents have appeared as a regular item in the list of causes of death and form a substantial proportion of the causes after the "Big Three." The table on Page 14 which shows the proportion of deaths occurring under 45 years of age again reveals a reduction and indicates that the ailments which may be called, from the body's point of view, "accidents," are fairly well under control, whereas the "worn out" types of illnesses just referred to as the "Big Three," i.e., heart disease, cancer and diseases of the blood vessels are not so amenable to present methods of prevention and treatment. One supposes that there must come a time when each person's organs are too worn out to continue, but the age at which this occurs is clearly very variable. Why do some people continue with a vigorous and active life into the eighties while the majority die earlier, possibly after a long period of invalidism ? This difficult and important question is a matter for research which is being undertaken in a general way in a few centres in England, though it appears that the biochemical investigations are not sufficiently co-ordinated with them.

Last year, observations were made on the declarations of "Specified Areas" for milk sales and further parts of the County were included during the year under consideration, so that 73 per cent of the County population now live in these areas. This is very satisfactory progress and will eventually lead, one hopes, to the state when no non-designated milk is consumed. When this occurs it will be a big step forward, but there will still remain much careful routine work to ensure the maintenance of standards and improve the present condition of designated milks. During the year the "Tuberculin Tested" milk samples taken did not acquit themselves entirely satisfactorily, only 90 per cent of them having passed the Methylene Blue Test for cleanliness as compared with 83 per cent of the non-designated milk ; tubercle bacilli were found in 0.3 per cent as compared with 2.1 per cent in the non-designated. From this latter point it is satisfactory to note that co-operation between the Veterinary Service of the Ministry of Agriculture, Fisheries and Food and the County Sanitary Staff resulted in the slaughter of 74 cows which were excreting tubercle bacilli in their milk.

In the table on Page 31 it will be seen that all samples of sterilised milk were satisfactory.

During the year, the Councils of the Borough of Stafford and the Urban District of Cannock became independent Food and Drugs Authorities, each having attained a population of 40,000. These Authorities are, therefore, responsible for the taking of samples, etc., within their own areas and by arrangement they send them for analysis to the County Chemical Laboratory. It is to be hoped that there will be no undue duplication of sampling for the work of the County Chemical Laboratory is at a maximum. Indeed, until more space is available, there is great difficulty in continuing at the present rate although there is a prospect next year of some relief in this direction. Amongst the vast amount of interesting work performed by the Laboratory there are two points of significance and worthy of mention. One is that the number of samples relative to atmospheric pollution formed the largest group after those taken under the Food and Drugs Acts. This is a reflection of the increased activity of the District Authorities in relation to smoke abatement, which is a welcomed trend and has been commented on in previous reports. The second rather less obvious point is the increase in the number of hypochlorites in milk tests. These tests amount to 180 this year and it is hoped there will be an increase in the future. Following the Milk and Dairies Regulations, 1949, hypochlorites were permitted as a means of sterilisation of milk vessels used on the farm as an alternative to steam sterilisation. This was thought by many to be a retrograde step as it is so liable to error in unskilled hands, for if the hypochlorite solution is used too generously, and possibly some left in the churn its effect on the milk becomes significant. Besides being an offence under the Regulations it increases the keeping qualities of the milk by killing the germs thus masking contamination of the milk. So far no clear case of hypochlorites remaining in samples taken has been found.

In the field of environmental hygiene it is very satisfactory to note the progress made by many District Authorities in the provision of piped water supplies and sewage and sewerage schemes. Requests for grants in respect of 36 schemes were considered and after modifications had been agreed in some instances 33 schemes were approved for grants by the Health Committee.

A considerable space in the body of the report is devoted to describing the provisions of the Housing and Repair Act, 1954, for although the County Council is not a Housing Authority it has many direct interests and a very big indirect interest in housing. Much ill-health results from poor housing and the County Services are concerned both as regards prevention and the practical job of dealing with the consequences through the Home Nursing Service, Home Help Service, Social Workers, etc. The operation of this Act in the County will be watched with close interest.

Beyond the fact that the number of diphtheria cases this year is reduced, and that there were no deaths, there was little of note in the range of infectious diseases. The number of deaths from pulmonary tuberculosis again shows a reduction, but the notifications of pulmonary disease, although showing a considerable improvement, are still above those recorded for 1946. Comment on this point has been made in previous annual reports and some considerable time must elapse before the real significance of this slower decline in notification becomes clear. During the year 7 new Infant Welfare Clinics were opened and 2 others were closed, otherwise the Home Services of the Department continue their valuable work with little change from the previous year. A second Occupational Therapist was appointed to work in the south of the County and this extension in the provision of handicrafts and other useful pastimes for tuberculous patients has been much appreciated. There was also a considerable increase in the amount of help provided by the Social Workers in homes where illness occurred, and also in their visits to old people.

In June the County Council, in common with other Health Authorities in the country, was instructed to take over the distribution of National Dried Milk, Orange Juice, etc., formerly undertaken by the Ministry of Food. This necessitated rather hasty initial arrangements, but by the end of the year the appropriate staff and premises were agreed and in use. The distribution of other nutritional supplements from the Welfare Centres has continued as in previous years.

It is disappointing that during the year it was not possible to complete the installation of wireless control of the ambulance vehicles. Various factors prevented this, not the least being the recommendations as regards the organisation of the Service made by the Ministry of Health, following a survey which they carried out in the summer months. These considerations, together with the use of the wireless in practice, will necessitate considerable changes in the Ambulance Service which cannot be elaborated here, but which it is believed will result in greater efficiency and some economy.

Except for the continuation of the list of Mental Defectives awaiting admission to hospital the work of the Mental Section has continued very smoothly. Arrangements were concluded with the City of Stoke-on-Trent whereby they admitted 20 county adult defectives to their Industrial Centre and a similar number of their young defectives attended the Newcastle Occupation Centre. This has been a useful exchange and provides the older persons living in the north of the County with a suitable occupation. Plans have been approved for the opening of an Industrial Centre for the south of the County, which is likely to be occupied towards the end of 1955. Plans were also agreed for the construction of new occupation centres at Rowley Regis and Stafford to replace the present unsatisfactory premises.

The work of this large Department is necessarily that of a team and it is a pleasure to record the enthusiastic service of all members of the staff — Heads of Sections, Doctors, Nurses, Clerks and Ancillary Staff. The understanding and eagerness to improve the service wherever possible on the part of the Committee is not only appreciated, but is a source of encouragement to press on with what is necessarily a long term and not always spectacular service, but one which satisfies a great number of real needs in the life of the community.

G. RAMAGE,

County Medical Officer of Health.

August, 1955.

COMMITTEES

The Committee of the County Council concerned with public health is the Health Committee.

The County Medical Officer also acts as medical adviser to all Committees of the County Council including the Education Committee, Welfare Services Committee and Children's Committee.

HEALTH OFFICERS

(A) MEDICAL

County Medical Officer of Health G. RAMAGE, M.A. (Admin.), M.D., Ch.B., B.Sc., M.R.C.S., L.R.C.P., D.P.H.

Deputy County Medical Officer of Health

H. BINYSH, M.D., M.B., B.S., L.R.C.P. & S. (Ed.), L.R.F.P.S. (Glas.), D.P.H., D.T.M. & H., Barrister at Law. (Commenced 1.3.54)

> Senior Medical Officer for Maternity and Child Welfare KATHLEEN D. ARNSBY, M.B., B.S., D.P.H.

County Psychiatrist H. S. COULSTING, M.B., Ch.B., M.R.C.S., L.R.C.P., D.P.M.

Medical Officers to Area Health Committees

E. H. TOMLIN, M.D., Ch.B., D.P.H.

J. TOLLAND, L.R.C.P., L.R.C.S., L.R.F.P.S., D.P.H.

H. B. BINKS, M.B., Ch.B., D.P.H.

A. W. M. BATTERSBY, L.R.C.P., L.R.C.S., L.R.F.P.S., D.P.H.

C. E. JAMISON, M.B., B.Ch., B.A.O., D.P.H.

R. M. WEBSTER, M.B., Ch.B., D.T.M. & H., D.P.H.

J. H. DONNELLY, T.D., L.R.C.S., L.R.C.P., L.R.F.P. & S., D.P.H.

W. A. McLENNAN, M.B., Ch.B., D.P.H.

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

(B) OTHER PROFESSIONAL

County Dental Officer F. C. WINTER, L.D.S., (U.BRIST.)

County Analyst A. HOULBROOKE, M.Sc., F.R.I.C.

> County Sanitary Inspector H. PREST, M.I. San. E.

SUMMARY OF STATISTICS

1.—GENERAL STATISTICS

Area of Administrative County (acres)	685,239
Estimated Home Population of Area, 1954 (primarily for calculation of Death-rates or incidence of Notifiable	
Diseases)	876,010
Rateable Value at 1st April, 1954	
(General County Purposes)	084,055
Estimated net product of a penny rate, 1954-55	
(General County Purposes)	£16,418

2.—EXTRACTS FROM VITAL STATISTICS OF THE YEAR

			Total	M.	F.	
Live Births,	Legitimate		13,146	6,768	6,378	
	Illegitimate		383	192	191	
	Total	ailer.	13,529	6,960	6,569	Birth-rate 15.4
Still-births,	Legitimate		365	196	169	
	Illegitimate		13	11	2	
	Total		378	207	171	Rate per 1,000 total births 27.2
Deaths			9,186	4,849	4,337	Death-rate 10.5

In Canadian 19.53 In Watthanted Probablicion	Rate per 1,000	
De	eaths total births	
Deaths from pregnancy, childbirth, abortion	8 0.6	
010,020		
Death Rates of Infants under one year of		
age :		
All infants per 1,000 live births	29	
Legitimate infants per 1,000 legitimate		
live births	28	
Illegitimate infants per 1,000 illegitimate		
live births	42	
Deaths from Cancer (all ages)	1,568	3
Deaths from Measles (all ages)	2	2
Deaths from Whooping Cough (all ages)	4	ŧ
Deaths from Gastritis, Enteritis and Diarrhœ	ea	
(under one year of age)	11	

AREA AND POPULATION

In the Dudley Extension Act, which came into force on the 1st April, 1954, some 264 acres of the County Area were transferred to Dudley County Borough, i.e. Coseley 127 acres, Sedgley 25 acres, Brierley Hill 76 acres and Rowley Regis 36 acres, so that the acreage of the Administrative County is now 685,239 instead of 685,503 as formerly.

The estimated populations have been supplied by the Registrar-General and are primarily given for the calculation of death rates and the incidence of notifiable diseases. The figures are home populations (i.e. including members of the armed forces stationed in the area).

Until 1940 Area Comparability Factors supplied by the Registrar-General enabled local death-rates to be adjusted for comparison with the crude death-rate of the country as a whole or with the similarly adjusted rate of any other local area. From that year, however, and until 1948, the variety and magnitude of local population movements, and during the war years the uneven incidence of civilian war deaths, together combined to frustrate the attempt to secure such comparability. The factors to adjust local death rates were, however, reintroduced in the 1949 Report, and are again included to adjust both birth and death rates.

The estimated population and rates for each District are shown in the tables at the end of the Report.

In the following table the final census population of the Administrative County for 1951, and the estimated home population for mid-1954 are set forth:

		Census, 1951 (Final)	Estimated Population, Mid-1954
Urban	 	 640,648	653,710
Rural	 	 214,509	222,300
Totals	 	 855,157	876,010

BIRTHS

The live births registered in the Administrative County for birthrate purposes numbered 13,529, compared with 13,736 the previous year, the number in the Urban Districts being 10,164 and in the Rural Districts 3,365.

Stillbirths. There were 378 stillbirths registered during the year, of which 282 were in Urban and 96 in Rural Districts. The stillbirthrate per thousand of the population for the combined Urban and Rural Districts was 0.43. During the same period the rate for England and Wales was 0.36.

				-	LIVE DIKTH-MATE PER	KUH-INA	IE PER	1,000	OF FOR	LOPULATION	Z			
DISTRICTS	5 yrs. 1889– 1893	5 yrs. 1894- 1898	5 yrs. 1899– 1903	5 yrs. 1904– 1908	5 yrs. 1909– 1913	5 yrs. 1914- 1918	5 yrs. 1919- 1923	5 yrs. 1924- 1928	5 yrs. 1929– 1933	5 yrs. 1934- 1938	5 yrs. 1939- 1943	5 yrs. 1944- 1948	5 yrs. 1949– 1953	1954
Combined Urban	33.6	33-2	32.5	30.3	27.8	24.0	24.1	20.2	17-6	17.1	18.3	19-9	16.2	15.4
Urban	35.5	34.7	33-6	31.5	29-2	25.0	25.0	20.7	18.1	17.5	18.9	20.4	16.4	15.5
of Rural	30-2	30.5	30-2	27.0	24-4	21.6	22.0	19-0	16.6	15.7	16.7	18.5	15.6	15.1
England and Wales	30.8	29.7	28.7	26-9	24.5	20.4	21.3	17.8	15.6	14.9	15.2	18.2	15.8	15.2
Large Towns in England	31.5	30.7	29.7	27.8	25.2	*20.9	22.0	18.2	15.8	14.9	16.3	21.0	17.5	16.8
		1			* 4 3	* 4 years.								
					DEA	DEATHS								
The number of deaths in the Administrative Count the number in the Urban Districts being 6,895 and in the	he nun ber in	The number of nber in the Urb	f deatl ban D	ns in t istrict	he Ad s bein	deaths in the Administrative County amounted to oan Districts being 6,895 and in the Rural Districts	5 and	Count in the		y amounted to Rural Districts		9,186, 2,291.		
Districte		1010		101	DEATH	DEATH-RATE	PER	1,000 OF	POPULATION	ATION	190			-
	5 yrs. 1889- 1893	5 yrs. 1894- 1898	5 yrs. 1899- 1903	5 yrs. 1904- 1908	5 yrs. 1909- 1913	5 yrs. 1914- 1918	5 yrs. 1919– 1923	5 yrs. 1924- 1928	5 yrs. 1929– 1933	5 yrs. 1934- 1938	5 yrs. 1939– 1943	5 yrs. 1944– 1948	5 yrs. 1949– 1953	1954
Combined Urban	18.1	16.9	16.1	14.6	14.1	15-0	12.3	11.4	11.6	11.3	11.2	10-4	10.5	10.5
tfot Urban	18.9	17.5	16-6	15.1	14.7	15.5	12.6	11-5	11.8	11.3	11.2	10.4	10.7	10.5
of Rural	16.8	15.7	15.1	13-4	12.7	13.8	11.6	11.2	11.2	11.2	11.0	10.4	10.0	10.3
England and Wales	19.1	17-4	16.9	15-3	13-9	15.2	12.5	12.0	12.3	11.9	12.6	11.5	11.7	11.3
Large Towns	21-0	19-0	18-2	15.8	14.3	15.5	12.6	12-0	12.3	12.0	14.0	12.9	12.5	12.0
Smaller Towns	17-6	15.9	15.7	14.9	13-6	14.1	11.5	11.0	11.2	11.4	12.4	11.8	11.6	11.3

In the following table I have shown the *chief* causes of death for 1954. The numbers given are 80.9 per cent of the total deaths.

TABLE SHOWING CHIEF CAUSES OF DEATH

Heart Disease			 2,872
Cancer			 1,568
Vascular lesions of nervous	s syste	m	 1,219
Bronchitis			 542
Other Circulatory Disease			 335
Pneumonia			 270
All other accidents			 191
Tuberculosis, respiratory			 144
Nephritis and Nephrosis			 93
Congenital Malformations			 85
Motor Vehicle Accidents			 84
Tuberculosis, other forms			 32

(See Table on following page).

				Age	AT DE	ATH			
CAUSES OF DEATH	Under 1	1 and under 5	5 and under 15		25 and under 45	45 and under 65		75 and over	TOTAL
1. Tuberculosis, respir-		No.							
2. Tuberculosis, other	1	1	$\frac{1}{3}$	53	27 12	77 6	27 6	6	144 32
3. Syphilitic disease	-	-	_	-	-	6	3	2	11
4. Diphtheria	-		-	-	-	-	-	-	-
 Whooping Cough Meningococcal in- 	3	1	_	_	-		-	-	4
fections	4	1	-		-		-	-	5
7. Acute Poliomyelitis 8. Measles	-	$\frac{1}{2}$	=	-		_	_	_	$\frac{1}{2}$
9. Other infective and	1	-	- Steres		1220	1. 1. 1. 1.		DOM:	
parasitic diseases	1	1	2	3	2	7	1	1	18
10. Malignant neoplasm stomach		_	_	1	13	112	96	87	309
11. Malignant neoplasm	Cax								
lung bronchus	-			1	20	148	65	19	253
12. Malignant neoplasm breast	-		-		31	84	24	33	172
13. Malignant neoplasm			10000					1000	
uterus 14. Othermalignantand	-	-	-	1	9	22	15	5	51
Lymphatic neo-	121023	689.0	11.6	10 P. 1	REAM		17		
plasms	1	6	5	5	36	279	232	219	783
15. Leukæmia, aleukæ- mia	1	-	2	3	7	10	5	3	31
16. Diabetes	-		-	1	1	21	36	19	78
17. Vascular lesions of		_	-	4	14	250	. 378	573	1219
18. Coronary disease,			100.00		14	200	.010	010	1215
angina	-	-		-	14	297	340	270	921
19. Hypertension with heart disease	_	_	_		4	54	83	84	225
20. Other heart disease		-	-	7	59	237	419	1004	1726
21. Other circulatory	100	here h	158		12	65	99	158	335
disease 22. Influenza	_	1	1	1	6	7	11	8	34
23. Pneumonia	56	4	4	4	9	55	47	91	270
24. Bronchitis 25. Other diseases of	5	2	-	1	11	137	178	208	542
respiratory system	1	2	2	1	3	42	30	22	103
26. Ulcer of stomach	2 14	1.4	183		7	04	10	20	101
and duodenum 27. Gastritis, enteritis	-	-		-	'	34	40	20	101
and diarrhœa	11	-	-		3	13	5	17	49
28. Nephritis and		10-10-4	3	5	16	32	22	15	93
nephrosis 29. Hyperplasia of	and the second	1000	0	0	10				
prostate	-	-	-	-		4	19	40	63
30. Pregnancy, child- birth, abortion	244	_		1	7	_		_	8
31. Congenital mal-	See 31	J. Ball	See.	1 Alter	1 1 1 1		of the	887	
formations 32. Other defined and	64	5	1	3	2	9	1	-	85
ill-defined diseases	225	11	21	16	47	166	171	484	1141
33. Motor vehicle acci-									04
dents	16	8 6	10 7	10 4	19 21	19 30	14 34	4 73	84 191
35. Suicide	-	-	-	1	19	44	25	10	99
36. Homicide and oper-	and the	0012			2		1		3
ations of war	A Ton	-	57		2	-	1	Tibe	
Totals	390	52	62	80	433	2267	2427	3475	9186

The following table has been prepared covering the last 35 years, in which the percentage of deaths under 45 years of age is worked out in relation to the total deaths of all ages, and in the table the sexes are divided. Speaking generally, in 1954, 11.1 per cent of all deaths occurred under the age of 45.

YEAR	-	MALE		1. 5	FEMALE	
IEAR	Deaths all ages	Deaths under 45	% of Total	Deaths all ages	Deaths under 45	% of Total
1920	4,626	2,295	49.61	4,084	1 935	47.38
1921	4,545	2,120	46.64	3,985	1,759	44.14
1922	4,534	1,943	42.58	4,191	1,793	42.78
1923	4,197	1,816	43.27	3,788	1,556	41.08
1924	4,332	1,795	41.43	3,906	1,520	38.91
1925	4,556	1,919	42.12	4,161	1,724	41.43
1926	4,148	1,658	39.97	3,808	1,441	37.84
1927	4,458	1,766	39.61	4,082	1,564	38.31
1928	3,965	1,449	36.54	3,563	1,180	33.12
1929	4,813	1,827	37.96	4,293	1,453	33.84
1930	4,100	1,473	35.92	3,672	1,211	32.98
1931	4,376	1,472	33.64	3,933	1,272	32.34
1932	4,190	1,425	34.01	3,824	1,174	30.70
1933	4,213	1,415	33.59	3,900	1,207	30.95
1934	4,105	1,261	30.72	3,655	1,054	28.84
1935	4,284	1,354	31.61	3,802	1,159	30.48
1936	4,203	1,266	30.12	4,022	1,100	27.35
1937	4,793	1,484	30.96	4,075	1,041	25.55
1938	4,497	1,296	28.82	3,915	1,065	27.20
1939	4,498	1,223	27.19	4,038	973	24.10
1940	4,899	1,315	26.84	4,246	1,069	25.18
1941	4,882	1,436	29.41	4,110	1,086	26.42
1942	4,257	1,150	27.01	3,742	970	25.92
1943	4,403	1,090	24.76	4,112	1,004	24.42
1944	4,136	1,069	25.85	3,800	889	23.39
1945	4,356	1,002	23.00	4,133	921	22.28
1946	4,385	1,006	22.94	3,934	804	20.44
1947	4,657	988	21.22	4,090	786	19.22
1948	4,275	895	20.94	3,717	715	19.24
1949	4,651	861	18.51	4,162	671	16.12
1950	4,805	779	16.21	4,183	631	15.08
1951	5,139	793	15.43	4,185	576	12.86
1952	4,519	647	14.32	3,993	510	12.00
1953	4,705	657	13.96	4,154	506	12.18
1954	4,849	560	11.55	4,134	457	10.54

DEATHS UNDER 45 YEARS OF AGE — MALE AND FEMALE — SHEWING PERCENTAGE OF TOTAL DEATHS (ALL AGES)

CHEMICAL LABORATORY

The following relates to the work undertaken during 1954:

The County Chemical Laboratory has, throughout the year, continued to provide an analytical service relating to public health and other matters. Originally provided in order to deal with samples of food and drugs taken under the Food and Drugs Act and with samples of fertilisers and feeding stuffs taken under the Fertilisers and Feeding Stuffs Act, the laboratory has gradually extended the scope of the work it undertakes. As will be seen from the details in this report a considerable proportion of the work now undertaken consists of the analysis of drinking water, of effluents and river waters, and of measurements relating to atmospheric pollution while a wide variety of other samples is examined though in smaller amount.

The total number of samples analysed during the year was 9,279. This figure is 400 less than last year's total but does not indicate, as might be expected, that there has been a proportionate reduction in the amount of work done in the laboratory. While 500 fewer milk samples were examined 100 more samples of other foods and drugs were tested and the added work on this additional 100 compensates for the reduction in work on milk samples. The work has also been increased by the continuing demand for extra work on each sample.

The area served by the laboratory had a population of 1,150,110 and included, for most of the year, four other Food and Drugs Authorities in addition to the Staffordshire County Council. On publication of the last Census figures the Borough of Stafford and the Urban District Council of Cannock became independent Food and Drugs Authorities but appointed the County Analyst as their Public Analyst and are employing the services of the laboratory.

The Staffordshire County Council's administrative area, for the purposes of the Food and Drugs Act, had a population of 706,570. The number of food and drugs samples examined from this area was 5,494, which gives a sampling rate per 1,000 of population of 7.8 per annum. One hundred and forty-six of these samples were found to be adulterated or otherwise irregular giving an adulteration rate of 2.7%. The adulteration rate for milk samples only was 2.3%. Both these adulteration rates are very similar to those of last year and show that the improvement then recorded has been maintained.

During the year there was one outstanding piece of legislation which will, possibly, produce major changes in the control of food and drugs by Local Authorities. This was the Food and Drugs Amendment Act, 1954. Its main objects are (a) to revise the provisions for protecting the public against the sale of food containing injurious ingredients; (b) to guard against the misdescription of food and drugs in labels and advertisements and (c) to provide fuller powers to secure that food is not contaminated in the course of preparation, distribution and sale.

The main provisions of this Act are to come into force on a date still to be decided.

Lesser items of legislation include a new Milk Order and a Food Standards (Margarine) Order while there were minor amendments to the Food Standards (Soft Drinks) Order; the Labelling of Food Order and the Mineral Oil in Food Order.

During the year the Food Standards Committee of the Ministry of Food published Reports on the Vitaminisation of Margarine; the Lead Content of Foods; the Use of Antioxidants in Foods, and the Use of Colouring Matters in Foods. Their recommendations relating to the addition of vitamins to margarine were embodied in the Food Standards (Margarine) Order. Their other recommendations provide most useful guidance until they are given appropriate legislative effect.

In the fast-moving times in which we live the task of guarding the quality of our food and drugs, water and air, becomes more complicated every year. The nature of the apparatus required becomes more complex and much more expensive. Higher standards of skill and ability are required of the analysts who carry out this work.

TABLE I

The total number of samples analysed was as follows :---

For County Council :

1 or county counter.				
Food and Drugs Act, 1938.	(<i>a</i>)	Chief Inspector's Sam	-	4,294
	(b)	Chief Sanitary Inspec	tor's	1 000
	(0)	Samples "Appeal-to-Cow" Sam		1,200 170
and the party proceeding the	$\begin{pmatrix} c \end{pmatrix}$ $\begin{pmatrix} d \end{pmatrix}$	Private Samples	-	Nil
Milks for Hypochlorite Test	()			180
Fertilisers and Feeding Stuff				125
Drinking Waters				514
Swimming Bath and Pool W				37
River Waters				77
Sewage and Sewage Effluent	s, Ti	ade Wastes, etc		130
Atmospheric Pollution				784
Miscellaneous Samples				173
				7,684
For Stoke-on-Trent :				7,004
Food and Drugs Act, 1938.	Chie	ef Inspector's Samples		790
Fertilisers and Feeding Stuff		And the second se		10
Miscellaneous and Private Sa				24
				004
For Borough of Newcastle-under	-Lyn	ne :		824
Food and Drugs Act, 1938.	Chie	f Inspector's Samples		181
For Urban District of Brierley	Hill .	absaud (s) sugaranded:		
Food and Drugs Act, 1938.				145
For Borough of Rowley Regis :				
Food and Drugs Act, 1938.	Chie	of Inspector's Samples		320
Miscellaneous Samples				1
				321
For Borough of Stafford :				beog
Food and Drugs Act, 1938.	Chie	f Inspector's Samples		68
For Urban District Council of C	ann	ack ·		
Food and Drugs Act, 1938.				56
1 000 und Drugo 1100, 1000.	onic	. mopeeter o campies		
Total				9,279

COUNTY COUNCIL SAMPLES.

Table II shows the total number of Food and Drugs samples submitted and the number reported against.

SAMPLES		Number xamine			er Adul low star	
JAMPLES	For- mal	Infor- mal	Total	For- mal	Infor- mal	Total
Almonds	13	4	17	-	-	-
Baking Powder and Golden Raising Powder	3	3	6	1	1	1
Bread		1	1	-		_
Bun, Cake and Pudding Mixture	18	5	23	-	-	
Butter	42	1	43	-	1	1
Canned Fruit and Vegetables	37	25	62	1	1	2
Cereal Products	12 8	11	23	1	1	1
Cheese	7	4 3	12 10	-	1	1
Coconut	4	4	- 8	11000		I State -
Coffee (Ground)	3	4	7		_	
Coffee Extracts, Coffee and Chicory		Dari	10 100	all mail		10121
Extracts (Drv)	1	-	1	-	-	-
(Liquid)	4	2	6		-	-
Cream	-	13	13	-	-	-
Custard Powder and Prepared Starches	13	9	22		-	
Dried Fruit	3	82	11			-
Drinks, Alcoholic	24 55	15	26 70	1	10	1
Drinks, Soft (Liquid and Powder) Drugs	63	49	112	4	1	5
Fats, Cooking	56	12	68		-	_
Fish Pastes and Fish Products	12	33	45			_
Flavourings and Colourings	1	_	1	-	-	-
Flour, Confectionery	7	6	13		-	
" Self Raising	14		20	-		-
" Plain, various	12	3	15	-		-
Foods, Baby and Tonic Gravy Browning and Salt	2	3	5	-	-	-
Gravy Browning and Salt	5 44	4	9	1	-	1
Herbs, Spices and Condiments	2	18	62 5		-	1
Honey	38	-	38	1		1
Ice Lollies and Lollipops	1	_	1		_	10.00
Jellies	14	7	21		in-	-
Margarine	38	1	39	-	-	
Meat Products (a) Sausage and Sausage						1111
Meat	68	2	70	13	-	13
(b) Brawn, etc.	5	9	14	1	-	1
Meat Pastes and Meat Products, Canned	62	35	97	5 54	2	7 54
Milk	1,272	16 21	1,288	54	6	6
Channel Island (all grades)	95		95	4	0	4
Destaurised	547	1,060	1,607	1	5	6
" Sterilised	406	1	407	8	-	8
" Tuberculin Tested	283	70	353	12	5	17
" " " Pasteurised	356	31	387	1	1	2
" " " Certified	5	-	5	-	-	-
» " " Sterilised	-	1	1		-	-
" Condensed	1	6	7		1 1	1

TABLE II

Carry Do				Numbe			er Adul low star	
Samples			For- mal	Infor- mal	Total	For- mal	Infor- mal	Total
Oils, Refined and Salad			2	4	6	_	_	_
Pickles, Various			10	7	17			
Preserves, Various			28	25	53	-	-	
Potato Products				1	1		-	
Salad Cream and Dressing			4	4	8	-	-	
Sauces, Various			8	17	25	2	1	3
Soups			19	10	29		1	1
Sugar			10	19	29	1	1	2
Sweets, Confectionery			35	10	45	1	-	1
Sweet Spreads and Syrup			6	7	13			-
Tea			10	25	35	1	1	2
Vinegar			18	2	20			
Unclassified			13	14	27	2	1	3
Total			3,838	1,656	5,494	117	29	146

TABLE II - continued

FOOD AND DRUGS ACT, 1938.

Of the 5,494 samples submitted from the County Area, 5,348 were found to be genuine and 146 adulterated or below standard, the percentage of adulterated samples being 2.7%. As previously stated, the rate of adulteration for the County is very similar to that of last year (which was lower than any recorded since the establishment of the County Chemical Laboratory in 1930), the figures for 1947-1953 being 12.2, 7.7, 5.4, 5.1, 2.9, 4.4 and 2.5 respectively.

(1) MILK.—Four thousand, one hundred and eighty-three samples of milk, of all grades, were submitted for analysis. These comprised 353 samples of "Tuberculin Tested," 5 "Tuberculin Tested (Certified)," 387 "Tuberculin Tested (Pasteurised)," 1 "Tuberculin Tested (Sterilised)," 95 Channel Island, 40 "Accredited," 1,607 "Pasteurised," 407 Sterilised and 1,288 undesignated milk. Ninety-seven or 2·3 per cent were found to be adulterated of which 24 contained added water, two contained added water and were fat deficient, 60 were fat deficient and 11 were deficient in fat and solids-not-fat. These figures do NOT include "Appeal to Cow" samples.

Action Taken.—Of the 97 unsatisfactory samples taken, 54 were of undesignated milk and 43 were of designated milk.

Seventeen of these were informal samples taken by Sampling Officers of the County Sanitary Inspector's Department, viz: 1 "Tuberculin Tested (Pasteurised)," 5 "Pasteurised," 6 "Accredited " and 5 "Tuberculin Tested." They were included in the 1,200 samples collected from School Canteens, Day Nurseries, Hospitals, Institutions and milk supplied under the "Milk in Schools" scheme. Thirteen of the samples were deficient in fat and four were deficient in fat and solidsnot-fat. Formal repeat samples taken by Officers of the Chief Inspector's Department from the same sources proved to be genuine except in six instances where "Appeal to Cow" samples revealed that the cows were producing milk which was naturally poor.

The remaining 80 samples adversely reported upon were taken formally under the Food and Drugs Act, 1938, and comprised 54 samples of undesignated milk and 26 of designated milk. The samples of undesignated milk were dealt with as follows :

The deficiences in the case of 12 samples were small and the vendors were cautioned.

"Follow up" and/or "Appeal to Cow" samples were taken in the case of 25 samples all of which were found to be genuine. Eleven samples were noted down for further sampling.

Twenty-six samples of Designated milk were found to be adulterated, viz: 5 samples of Sterilised Milk, 3 samples of Tuberculin Tested Milk, 1 sample of Tuberculin Tested Pasteurised M;lk, 4 samples of Tuberculin Tested Channel Islands Milk, 1 sample of Pasteurised Milk were all deficient in fat. Three samples of Sterilised Milk and 9 samples of Tuberculin Tested Milk were found to contain added water.

With regard to 12 samples of Designated Milk, repeat samples taken from the same sources were found to be genuine.

Nine samples of Tuberculin Tested Milk were noted down for further sampling.

Two samples of Tuberculin Tested Channel Islands Milk deficient in fat were reported to the Leicestershire County Council for their investigations.

Two hundred and twenty-three samples of Milk were below the presumptive standard. Of these 154 were in respect of samples which were found by the Freezing Point (Hortvet) test not to be adulterated with added water although below standard in solids-not-fat. Fortyseven samples which were low in fat and 22 samples deficient in both fat and solids-not-fat were found to be due to natural causes.

PROCEEDINGS.

During the year proceedings have been instituted in respect of 6 samples of Milk and 3 samples of Sterilised Milk adulterated with added water. Fines amounting to $\pounds 64$ 0s. 0d. were imposed together with $\pounds 29$ 1s. 0d. special costs.

"Appeal to Cow" Samples.—Of the 170 "Appeal to Cow" samples taken, 28 were found to be naturally poor in solids-not-fat, 29 naturally poor in fat and 18 naturally poor in both fat and solids-not-fat.

The average composition of the milks of all grades, including "Appeal to Cow" samples, was:

Fat	 	3.62%	Total Solids - 12.34%
Solids-not-fat	 	$\left. \begin{array}{c} 3.62\% \\ 8.72\% \end{array} \right\}$	$101a1 30103 - 12.04 /_0$

Of the 4,086 samples of milk, of all grades, passed as genuine, 154 (3.8 per cent) were naturally poor in solids-not-fat, their Freezing Point (Hortvet) showing that they were genuine. Forty-seven samples (1.2%) were naturally poor in fat and 22 (0.5%) were naturally poor in both fat and solids-not-fat, the Freezing Point (Hortvet) and "Appeal to Cow" samples proving them to be genuine.

The proportion of milk samples reported as of naturally poor quality is 5.5 per cent this year, while over the previous seven years the proportion averaged 10.0 per cent. This year's figures show a marked

improvement but still call for comment. The average composition of all the milk samples examined is given above, and the minimum legal standard, below which a milk may be presumed adulterated until the contrary is proved, is :

Fat = 3.00% Non-Fatty Milk Solids = 8.50%

This means that for every thousand milk samples examined this year fifty-five failed to reach the low standard quoted above in either fat or solids-not-fat content.

The burden of proving that the poor quality of these milks is due to natural causes could, legally, be placed upon the vendor. As a matter of routine, however, the task is undertaken by the Chief Inspector, the Public Analyst and their staffs and involves a great deal of additional work of an exacting nature.

(2) GENERAL ARTICLES OF FOOD.—One thousand, three hundred and eleven samples were examined and 49 samples (37 formal and 12 informal) were found to be adulterated.

Informal samples of Tincture of Iodine, Spanish Oranges, Easy Icing, Cheese and Macaroni, Cream of Celery Soup, Tea, Corned Beef, Apricot Halves, Potted Meat, Cream Butter, Condensed Full Cream Milk, Tomato Ketchup were found to be adulterated. The fullest investigations were made and the manufacturers and packers contacted resulting in the necessary steps being taken to prevent a recurrence of such deficiencies.

FERTILISERS AND FEEDING STUFFS ACT, 1926.

The 125 samples submitted for analysis included 59 Fertilisers and 66 Feeding Stuffs.

Fertilisers.

Of the 59 fertilisers 38 were satisfactory. The results of analysis of the remaining samples are given in the following table :

TABLE III

Number of Number Offences Nature of Offence of samples per sample

1	Excess of nitrogen	5
	Deficiency of nitrogen	2
	Excess of potash	2
	Deficiency of potash	1
	Incorrect statement	i
0		
4	Excess of insoluble phosphoric acid and deficiency of soluble phosphoric acid	2
	Excess of nitrogen and deficiency of phosphoric	
	acid	2
	Excess of nitrogen and deficiency of potash	1
	Excess of nitrogen and excess of insoluble phos-	
	phoric acid	1
	Deficiency of potash, and excess of insoluble	1000 S200
	phosphoric acid	1
3	Excess of potash, excess of insoluble phosphoric	
	acid and deficiency of soluble phosphoric acid	2
4	Excess of potash, deficiency of nitrogen, and excess	
	of both soluble and insoluble phosphoric acid	1
	Total number of Unsatisfactory Samples	21

Feeding Stuffs.

Of the 66 feeding stuffs, 36 were satisfactory. The results of analysis of the remaining samples are given in the following table :

TABLE IV Number Number of Offences Nature of Offence of samples per sample 1 Excess of oil ... 2 Deficiency of oil 4 . . 2.2 Excess of albuminoids 3 Deficiency of albuminoids 2 . . 2 Excess of fibre Deficiency of fibre 10 Excess of sugar 1 Incorrect statement ... 1 Excess of oil and deficiency of fibre 2 1 ... Excess of fibre and deficiency of oil 1 Deficiency of oil and deficiency of fibre 1 Excess of fibre and deficiency of albuminoids 1 Incorrect statement and deficiency of albuminoids 1 Total number of Unsatisfactory Samples ... 30

It should be noted that nearly half the offences recorded above consist of the presence of an excess of a desirable ingredient or a deficiency of an undesirable ingredient.

DRINKING WATERS.

Five hundred and fourteen samples of drinking water were submitted in the course of the year; 109 for full analysis; 366 for partial analysis; 5 for mineral analysis; 3 for fluorine only; 14 for chlorine only; one for partial analysis and plumbo solvency and 16 for special analysis.

Of the 514 samples for analysis :

359 samples were of satisfactory quality.

18 samples contained sewage pollution.

66 samples contained organic pollution.

20 samples were of doubtful quality.

16 samples contained metallic contamination.

12 samples contained both organic and metallic contamination.

7 samples contained both sewage and metallic contamination.

6 samples contained both sewage and organic contamination.

3 samples contained sewage, organic and metallic contamination.

- 2 samples contained metallic contamination and were of doubtful quality.
- 3 samples contained organic pollution and were of doubtful quality.

2 samples were otherwise unsatisfactory.

SWIMMING BATH AND POOL WATERS.

15 samples were submitted for full analysis.22 samples were submitted for chlorine content only.

RIVER WATERS.

75 samples were submitted for ordinary analysis.

2 samples were submitted for special analysis.

SEWAGE, SEWAGE EFFLUENTS AND TRADE WASTES.

124 samples were submitted for full analysis.

6 samples were submitted for special analysis.

ATMOSPHERIC POLLUTION.

The Committee set up by the Government in July, 1953, to study and report on the subject of Air Pollution presented an Interim Report in November, 1953, and a final Report in November, 1954. If legislative effect is given to the recommendations made by the Committee, Local Authorities will be given increased powers and responsibilities in dealing with the problem of obtaining cleaner air. The actual measurement of air pollution is an essential step in the study of its occurrence and possible prevention. The County Chemical Laboratory has undertaken an annually increasing number of these measurements for several years and is now dealing with nearly five per cent of the 1,482 instruments set up by the 199 Authorities co-operating in this work.

During the year, 784 samples were submitted and examined for the nine Local Authorities in the County area served by this laboratory. By the end of the year the laboratory was receiving 70 samples each month for the measurement of atmospheric pollution including 8 soils, 38 lead peroxide cylinders and 24 deposit gauge contents.

The results of these measurements are given in the following Tables which also give the corresponding figures for 1953 :

...

LEAD PEROXIDE CYLINDERS.

District	Site		Average Sulphur Pollution (mgm. SO ₃ /100 sq. cm/day)			
Dielo a tela Marcel	e esta de la companya	d'array of	Charley	1953	1954	
1	1			1.01	1.11	
	$\begin{array}{ccc} & 1 \\ & 2 \\ & 3 \end{array}$			1.61	2.37	
	3		•••	1.40	2.03	
2	1			0.88	1.56	
	$\begin{array}{ccc} & 1 \\ & 2 \\ & 3 \end{array}$			0.81	1.62	
	3			0.90	1.50	
	4			0.97	1.55	
	5			1.11	2.05	
	6			1.45	2.71	
3	1		···	1.09	1.37	
	$\frac{2}{3}$			1.29	1.83	
	3			0.93	1.08	
4	$ \begin{array}{ccc} & 1 \\ & 2 \end{array} $			1.68	2.56	
1999 - 1 100 -	2			3.77	5.61	
5	1			1.04	1.70	
	$2 \\ 3$			1.45	1.83	
				1.66	1.90	
	4			1.26	2.34	
	5 6 7			1.19	2.02	
	6			1.34	2.93	
	7			1.81	2.62	
6	1			1.41	1.67	
	2			1.45	2.00	
7	A C D			0.90	1.01	
	С			1.09	1.48	
	D			0.96	1.56*	
	E F G I J K			0.80	1.21	
	F			1.01	1.40	
	G			0.69	0.99	
	Ι			0.86	1.03	
	J			0.65	0.98	
	K			0.85	1.19	
	L			1.30	2.07	
8	1			1.40	2.26	
	$\begin{array}{ccc} & 1 \\ & 2 \\ & 3 \end{array}$			1.11	1.18*	
	3			-	2.08**	
9	1			0.82	0.85	
	2			0.84	1.15	

N.B.—All the results are calculated for 12 months. * Actual determination for 11 months.

****** Actual determination for 5 months.

When this Table is examined it will be seen that there was an increase in the amount of sulphur pollution for all areas, the increase for each area ranging from 20.5% to 79.4% of the values for the previous year.

It may help, when studying these figures, to know that a clean, rural atmosphere would give an average sulphur pollution figure of approximately $0.25 \text{ mgm SO}_3/100 \text{ sq. cm/day}$ and a heavily polluted industrial area would give an average figure of about 5 mgm SO₃/100 sq. cm/day.

TABLE VI

RAINWATER DEPOSIT GAUGES.

Area	Gauge No. Annual Rainfall (inches)		Annual Solid De (tons/sq. mile		
84	1	1953	1954	1953	1954
1	D1445	22.48	34.11†	146.5	208.6†
	D1034	21.33**	29.85	141.0**	163.9
	D311	23.69	25.31*	134.8	125.7*
2	D150	23.26	31.22	189.4	177.0
	D312	23.49	32.07	206.2	218.4*
3	D131	29.54	44.88	169.6	196.2*
	D895	26.79	40.80	162.7	181.2
	D234	28.32	41.58	109.3*	144.0
4	D353	23.13	31.54	243.8	241.0
	D354	22.90	32.35	154.1	168.7
5	D243	23.92*	33.26	196.8**	216.8
	D244	23.35	31.21	353.6	374.2
	D245	25.30	33.73	203.8	221.5
	D246	$24 \cdot 40*$	25.88*	208.0*	264.6*
6	D374	20.21	28.57	149.7	149.9
	D376	14.81	30.97	133-1	176.8
8	D690	19.47	29.62	123.2	148.4
	D691	21.51	31.07	170.8*	206.4
9	D1387	25.69‡	32.15**	137.3‡	146.2**

N.B.—All the results above are calculated for 12 months.

* Actual determinations for 11 months.

** Actual determinations for 10 months.

[‡] Actual determinations for 9 months.

† Actual determination for 8 months.

In connection with this Table it should be noted that, during 1954, Gauge No. D304 (Area 1) was changed to No. 1445, at the same site, and Gauge No. D1017 (Area 9) was changed to No. 1387, at the same site.

The highest figure recorded for solid deposit in 1954 was 374.2 tons per square mile, which may be compared with last year's maximum figure of 353.6 tons per square mile, recorded at the same site. A heavily polluted industrial site might give a comparable figure of 1,400 tons per square mile.

The lowest amount, of 125.7 tons per square mile, was recorded at one of the few sites which show some slight improvement over the previous year's results. At most industrial sites there was an increase in solid deposit when compared with the previous year. In many cases the increase was insignificant, being less than 10% of the 1953 value, but for six sites the increase ranged from 20.5% to 42.4% of the 1953 result.

A clean atmosphere would give a deposit of about 50 tons per square mile in one year.

MISCELLANEOUS SAMPLES.

One hundred and seventy-three samples grouped under this heading may be sub-divided as follows :

(a) Samples from Local Authorities.

Eighty-two samples are included in this group. Forty-seven food stuffs were examined because they had caused sickness or were the subject of complaint.

Of four milks examined two were found to contain dirt or grease but the complaint of taints in the other two samples was not confirmed. Of 3 Milk Powders examined one was found to be excessively acid and so curdled when used in the preparation of food while the remaining two appeared to be of normal composition. The contents of a tin of Evaporated Milk were found to be curdled due, most probably, to faulty processing. Twenty-three samples of canned foods included one sample each of Pineapple, Cream, Stewed Steak, Ham and two samples of Spaghetti which were satisfactory, but a further 17 samples of Spaghetti were in various stages of decomposition. A sample of home-made Apricot Jam was found to be free from suspected metallic contamination and no fault could be detected in a sample of Brown Bread which was alleged to have a bitter taste, but a further 4 samples of Bread, alleged to contain foreign bodies, were found to contain respectively pieces of wood, string, food beetles and mouse droppings. Two samples of Soup Powder were musty and a sample of Currants, though having an unpleasant taste, contained no toxic substances. A sample of *Cheese* was submitted because, so it was alleged, it rapidly developed a pink colour on a freshly-exposed surface. This unusual phenomenon was confirmed and was most probably due to the presence of the red mould, sporendonema casei. Finally, six bottles, to be used as soft drink containers, were submitted for examination for the presence of detergents. No detergent was detected.

Three samples of *Rat Poison* were submitted under the Poisons and Pharmacy Act, 1933, and were found to be exempt from its rules. One sample contained red squill while the other two contained warfarin. It was found possible to extract the warfarin and to estimate it by use of the spectrophotometer.

The remaining 32 samples included a *Water* for hardness and six samples of *Anti-freeze* from the County Transport Officer for checking against specification. A sample of *Soap* used in a Nursery School gave rise to complaints of harshness in use and was found to contain about half a per cent of gritty matter. Twelve samples of *Grass and Leaves* were analysed for fluorine content as a means of testing the degree of local contamination by fluorine-containing fumes from nearby factories. Seven specimens of *Material* from a local tip were examined to ascertain the amount of combustible matter present. Two *Deposits* from drains were analysed in an effort to determine the nature of such accumulations and an *Earth Rod* and *Wire* were examined as a means of determining, from the type of corrosion present, what fumes were causing a local nuisance. A specimen of *Stomach Washings* was found to contain a barbiturate, as suspected.

(b) Private Samples.

Ninety-one samples were received from private individuals or firms.

Forty-eight samples of food included 25 Milks from producers who wished to check the quality of their product. Four samples of Boiled Sweets and a sample of Butter were submitted by a manufacturing firm wishing to check the butter-fat content of the sweets it sold. For the same reason two samples of *Pork Sausage* and one sample each of *Ice* Cream and Fresh Salmon Fish Cakes were submitted for analysis. Two samples of Sausage Seasoning were examined to confirm the presence of a sulphite preservative and to estimate the amount present. The practice seems to be increasing of selling a mixture of seasoning and a preservative for use in sausage making. Owing to carelessness or misunderstanding the use of such a mixture sometimes leads to the sale of preserved sausage without the necessary declaration that such preservative is present. Eleven Eggs were examined for the presence of barium owing to the fact that barium carbonate had been mistakenly used instead of grit for scattering in a hen-run. The Vitamin "A content of one sample of Halibut Liver Oil was determined on behalf of the Public Analyst for Anglesey County Council.

Twenty samples of *Water* were examined for potability and a *Pond Water* was tested for sewage pollution. A sample of *Turpentine* was checked against specification. Four specimens of *Calves Urine* were examined for fluorine content and seven *Specimens* from two hens, a dog and a cow were examined for the presence of toxic substances. The four specimens from the cow indicated that lead poisoning had occurred. Ten samples of animal *Feeding Stuffs* were examined either for the presence of toxic materials or for determination of composition. In one case a trace of castor seed was detected while in another case the sample consisted almost entirely of castor seed.

MILK SUPPLY

During the year under review the Department continued its efforts to ensure that milk reaches the consumer in a clean and wholesome condition and free from disease-bearing organisms. Tables are given showing the number of samples of the various grades of milk collected. Figures of samples taken at schools in the County, and at various hospitals, institutions, etc., are given in separate paragraphs. The total number of "street milk" samples collected is much the same as in 1953, but it will be noticed that the number of ungraded and "Accredited" samples collected has decreased, while the number of "Tuberculin tested," "Tuberculin tested (Pasteurised)," "Pasteurised" and "Sterilised" has increased. Thus the trend towards the elimination of the sale of ungraded milk has continued while a further factor is that as from 1st October, 1954, "Accredited" ceased to be a special designation of milk.

A further area of the County was scheduled as a "Specified Area" by the Milk (Special Designations) (Specified Areas) (No. 2) Order, 1954, which came into operation on 1st October, 1954. The areas of the County affected were the following :

The Borough of Stafford.

- The Urban Districts of Brownhills, Cannock, Rugeley and Tettenhall.
- The Rural Districts of Cannock and Seisdon, and the Parishes of Brindley Heath and Castle Church in the Rural Districts of Lichfield and Stafford respectively.

The grades of milk now allowed to be sold in the Specified Areas are Pasteurised, Sterilised and Tuberculin-tested, and an important provision is that a dairyman who retails milk both inside and outside a specified area must limit the whole of his sales to the specially designated milks.

Previous orders in 1952 and 1953 covered the "Black Country" area and the Newcastle, Biddulph and Kidsgrove areas, so that the position has now been reached where approximately 73% of the population of the Administrative County are receiving only the specially designated milks. The County Council as Food and Drugs Authority, are responsible for enforcing these provisions in the Administrative Area, apart from the Boroughs of Newcastle-under-Lyme, Rowley Regis and Stafford and the Urban Districts of Brierley Hill and Cannock, which are separate Food and Drugs Authorities.

The County Council is also responsible for the licensing and supervision of milk pasteurising and sterilising plants within its "Food and Drugs" area, and the plants and dairies are closely supervised and regular routine visits of inspection made for the purpose by the County Sanitary Officers.

A number of changes took place during the year. Two pasteurising dairies passed from the control of the County Council on 1st October, 1954, owing to the Borough of Stafford and the Urban District of Cannock taking over the duties of Food and Drugs Authorities on that date. Two dairies in the "Black Country" area, both of which pasteurised and sterilised milk, were taken over by larger concerns and one is not at present in use at all, while the other is being used as a depot for the pasteurising and bottling of orange juice. At the end of the year three pasteurising licences and two sterilising licences were in operation, while two dairies were being dealt with preparatory to the issue of new pasteurising and sterilising licences. New provisions relating to the sale of pasteurised milk came into operation on 1st October, 1954. From that date every container (whether churn, can or bottle) in which pasteurised milk is transported, or exposed or offered for sale, must be fitted with a cap or cover overlapping the lip of the container. Thus the use of bottles with cardboard " push-in " discs for pasteurised milk is now prohibited : also pasteurised milk must be put into the containers in which it is to be delivered to the consumer at the premises at which the milk is pasteurised, and as soon as possible after pasteurisation. This is an important step forward in the control of pasteurised milk as it means that retailers are no longer allowed to purchase pasteurised milk in bulk and bottle it upon their own premises for delivery to their customers as pasteurised milk. In other words, a possible and fruitful source of contamination of this specially designated milk has been eliminated.

Samples of retail milk (" street milks ") are taken by the Department throughout the administrative area except in the areas of authorities who themselves are Food and Drugs Authorities. The exception is the Municipal Borough of Rowley Regis, where the County Council staff, by arrangement, undertake street milk sampling on their behalf and report the results to the Rowley Regis Health Department. During 1954, 140 samples were taken under this arrangement, including samples collected from schools and school canteens in the area. These samples are not included in any tables elsewhere in this report.

The samples of retail milk are subjected to appropriate tests. "Raw" milks are examined for cleanliness (methylene blue test) and for the presence of the organisms of tuberculosis. Processed milks are also examined for cleanliness and in addition are tested for the efficiency of the pasteurising or sterilising process. As a check, a proportion of the samples of pasteurised milk is also submitted to the test for the presence of tubercle bacilli. During the year under review, 130 samples were so tested and all proved negative.

The work of milk sampling is carried out throughout the Administrative "Food and Drugs" Area by two sampling officers. Action taken upon the results of the samples is as follows :

The results of all the retail samples are notified to the Medical Officers of Health of the districts where the milk was sampled. In the case of "raw" milks the Milk Production Officer of the Ministry of Agriculture and Fisheries of the County where the milk was produced is notified of unsatisfactory samples, since the responsibility for clean milk production is upon these officers. No information is received in the Department as to any action which may be taken by them as a result of the notification of unsatisfactory samples. Unsatisfactory samples of heat-processed milks are dealt with by this Department if from pasteurising or sterilising plants licensed by the County Council. Otherwise, they are referred for action to the Medical Officer of Health of the Food and Drugs Authority concerned. All tubercular positive milk samples are reported to the Divisional Veterinary Officer of the Ministry of Agriculture and Fisheries, and to the Medical Officers of Health of the districts where the milk was produced and retailed. The Ministry take steps to find the cow or cows which are secreting tubercle bacilli in their milk, and to have them slaughtered, while the Medical Officer of Health has powers under the Milk and Dairies Regulations, 1949, to place restrictions on the sale of such milk for human consumption.

The tables which follow show details of the samples collected, together with the results of the various tests applied thereto. The first table is a summary of all street milk samples collected. Those taken from schools and various institutions are dealt with separately in later paragraphs. So far as the cleanliness (methylene blue) test is concerned there are no significant changes from the previous year, the overall picture showing a slight improvement. The results of the phosphatase test on pasteurised milk were also very similar to those of the previous year. The percentage of positives obtained from the biological testing showed a reduction in all the grades of milk examined. The total submitted was 2,160 as against 2,644 in 1953. The number found to be tubercular positive was 34 as against 65 in 1953. The number of samples which can be submitted for biological examination depends of course upon the supply of guinea pigs. Arising out of the 34 positive samples, 24 cows were found by the Ministry of Agriculture and Fisheries Veterinary Officer to be affected with tuberculosis and these were slaughtered under the Tuberculosis Order of 1938.

The second table shows the number of undesignated milk samples collected in each of the sanitary districts of the Administrative Area, together with the results of the examinations. This table also shows how the districts are affected by the Specified Areas Order. It may be mentioned here that isolated instances have occurred where dairymen have been found selling undesignated milk after the operative date of one of these Orders. The reason given has usually been delay in obtaining bottles and caps, or misunderstanding of the terms of the Order, but these cases have been given close attention and no difficulty has so far occurred in obtaining due compliance.

Apart from the routine "street milk" sampling summarised in the two tables, two series of special sampling were carried out during the year. Four hundred and sixty-nine samples were taken at the larger dairies in the County of farm milks coming in for pasteurisation. These samples were submitted to the biological test only, and 33 positive samples were obtained. The results were reported to the Veterinary Department of the Ministry of Agriculture and Fisheries and as a result of subsequent investigations 18 tubercular cows were found and slaughtered under the Tuberculosis Order. In the second series, the Department co-operated with the Divisional Veterinary Officer of the Ministry of Agriculture and Fisheries, by obtaining samples of the bulk milk from all the undesignated and Accredited producers in a certain area of the County. In all, 227 samples were obtained of which 10 proved positive. The Ministry subsequently found 7 tubercular cows on these farms and had them slaughtered.

During the year, 31 cases occurred where milk produced in Staffordshire had been sampled by outside authorities, usually at large dairies where the milk was about to be pasteurised, and had been reported as tubercular positive. These cases are handled by this Department and reported to the Divisional Veterinary Officer of the Ministry of Agriculture and Fisheries, and also to the Medical Officer of Health of the district where the milk is produced. As a result of the investigations 25 tubercular cows were found and slaughtered.

It will be seen that as a result of the various activities for the detection of Tuberculosis in milk, a total of 74 cows were found and slaughtered under the Tuberculosis Order. In other words these 74 animals which otherwise would probably not have been detected were eliminated as sources of tubercular milk and infectors of other animals.

Also not included in the tables was a total of 1,200 samples collected by the Sampling Officers while visiting Schools and School Canteens, for informal examination under the Food and Drugs Acts (i.e. for fat and non-fatty solids content). This work is carried out as an administrative convenience and the results are notified to the Chief Inspector of Weights and Measures. Seventeen of the samples were unsatisfactory.

It is interesting and worth noting that the total number of samples of milk collected by the Department during the year was 8,776 made up as follows :

Retail (" Street ") Milks	5,163
Schools	1,019
Institutions, School Canteens, etc.	558
Rowley Regis Samples	140
Special Dairy Sampling	469 (Biological test only
Special Farm Sampling	227 (Biological test only)
"Food and Drugs "Samples	1,200
Total	8,776

SUMMARY OF MILK SAMPLES COLLECTED (EXCLUDING SAMPLES FROM SCHOOLS AND INSTITUTIONS) 1st JANUARY TO 31st DECEMBER, 1954

sis) 1953	2.6	6.0	3.9	1		1	2.5
Test uberculo 1954	2.1	0-3	3.1	1	1	1	1.6
Biological Test (for presence of Tuberculosis) mitted Positive 1954 1	21	63	11	1	1	1	34
f (for pree Submitted	1,015	655	360	1	130	1	2,160
Turbidity Test (for Sterilised milk)Biological (for presence of 1 (for presence of 1 Submitted Result	1	-	+	-	-	594 Satisfactory	
Phosphatase Test (for correct pasteurisation) Submitted Result S	1	-	1	2233 Passed 2212 Failed 21	%Satis.1954 99·1 1953 99·3		
Pho 1953 Sub	76-6 -	88.2	83.3	97-9	98-7 5%	-	87-6
	82.7 7	8 6.68	83-9 8	97-2 9	96-1 9		8 8.06
Blue	Passed 916 8 Failed 191	Passed 763 8 Failed 94	Passed 308 8 Failed 59	Passed 960 9 Failed 28	Passed1195 9 Failed 49	1	Passed 4142 9 Failed 421
Methylene] (for Clear Submitted Result	1,107	857	367	988	1,244	1	4,563
Total samples taken	•1,110	*859	367	1 989	1,244	594	5,163
Grade of Milk	Undesignated	" Tuberculin- tested "	" Accredited "	" Tuberculin-tested (Pasteurised)"	" Pasteurised "	" Sterilised "	TOTALS

-Of the 1,015 samples of undesignated milk submitted to the biological test, 119 were from Urban Districts, of which 1, or 0.8%, was Positive and 896 were from Rural Districts, of which 20, or 2.2%, were Positive. This is perhaps now of decreasing significance as compared with a few years ago when undesignated milk was more commonly sold in all districts. NOTE.-

3 Samples of undesignated milk and 2 of "Tuberculin Tested" were submitted for the biological test only.

†1 Sample of "T.T. Pasteurised " milk was submitted for the phosphatase test only.

UNDESIGNATED MILK SAMPLES 1st January to 31st December, 1954

District Su URBAN: *Aldridge *Amblecote *Biddulph *Bilston †Brownhills †Cannock *Coseley *Coseley *Coseley *Kidsgrove Leek Lichfield †Rugeley *Sedgley *Stafford Stone	amples - bmitted	Satis- factory	Unsatis- factory	% Unsatis- factory	Sub- mitted	Posi- tive	%
*Amblecote *Biddulph *Bilston †Brownhills †Cannock *Coseley *Darlaston *Kidsgrove Leek Lichfield †Rugeley *Sedgley †Stafford Stone	5	-					Positive
	$ \begin{array}{c} 12\\ 28\\ -\\ -\\ 2\\ 35\\ 2\\ 15\\ -\\ -\\ 11\\ 4\\ 30\\ -\\ -\\ 50\\ 250\\ 200\\ 81\\ 77\\ 28\\ 70\\ 60\\ 54\\ 58\\ \end{array} $	$\begin{array}{c} - \\ 4 \\ - \\ 11 \\ 26 \\ - \\ 2 \\ 32 \\ 2 \\ 10 \\ - \\ 10 \\ 4 \\ 28 \\ 3 \\ - \\ 25 \\ - \\ - \\ 43 \\ 207 \\ 156 \\ 68 \\ 64 \\ 23 \\ 56 \\ 56 \\ 42 \\ 44 \\ \end{array}$	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$	$\begin{array}{c}\\\\ 20\cdot 0\\\\ 8\cdot 3\\ 7\cdot 1\\\\\\ 8\cdot 6\\\\ 33\cdot 3\\ 9\cdot 1\\\\\\ 33\cdot 3\\ 9\cdot 1\\\\ 9\cdot 7\\ 25\cdot 0\\\\ 16\cdot 7\\\\\\ 16\cdot 7\\\\\\\\ 16\cdot 7\\\\\\\\ 16\cdot 7\\\\\\\\ 16\cdot 7\\\\\\\\ 16\cdot 7\\\\\\\\\\ 16\cdot 7\\\\\\\\\\\\\\\\\\\\ $	$\begin{array}{c} \\ 5 \\ -9 \\ 25 \\ \\ 2 \\ 29 \\ 2 \\ 12 \\ \\ 10 \\ \\ 3 \\ 4 \\ \\ 18 \\ \\ 43 \\ 239 \\ 200 \\ 77 \\ 75 \\ 27 \\ 66 \\ 58 \\ 55 \\ 56 \\ \end{array}$		

* Speci fied Area during whole of year under review.

† Specified Area from 1st October, 1 954.

[‡] One parish in each of these districts included within a Specified Area from 1st October, 1954.

BRUCELLA ABORTUS INFECTION IN MILK.

During the year the procedure has continued where only the "Ring" test is carried out as a routine. The results of these tests are not notified, but are available if required as an indication of which herds in the County are likely to be excreting the organisms. In special cases the isolation of the brucella abortus organisms is attempted, and eight such positives were reported during the year and appropriately dealt with.

MILK IN SCHOOLS SCHEME.

At the end of the year under review the position regarding the supply of milk under the Milk in Schools Scheme to the various schools in the administrative area (excluding Newcastle Excepted District) was as follows :

Type of Milk	· No. of suppliers	No. of schools supplied	No. of children supplied (figures supplied by Education Department)
Pasteurised	 54	585	97,550
Tuberculin-tested	 15	17	901
Undesignated	 3	3	80
	72	605	98,531

Eight schools were without a supply of liquid milk at the end of the year.

All the supplies are subject to the approval of the County Medical Officer and normally a supply of pasteurised milk is insisted upon if it can be obtained. Failing this, a supply of Tuberculin-tested milk is obtained whenever possible.

A significant change can be seen in the figures given above, as compared with previous years. "Accredited" ceased to be a special designation of milk as from 1st October, 1954. Thus, unless a producer of "Accredited" milk had obtained a "Tuberculin-tested" licence before that date, his milk automatically became undesignated. This accounts for the fact that the designation "Accredited" has disappeared from the above summary, and the numbers of schools supplied with "Tuberculin-tested" and undesignated milks have both increased slightly.

Another point to be borne in mind is that although the figures given above relate to the whole of the Administrative County with the exception of the Newcastle Excepted District, to avoid duplication of sampling the County Health Department do not sample school milks in the area of Brierley Hill Urban District Council, which is a Food and Drugs Authority and carries out its own sampling. As from 1st October, 1954, the same position applied in the case of Stafford Borough and Cannock Urban District. Thus the Department was responsible for sampling the milk supplies to 572 schools up to 30th September, 1954, and 518 schools as from that date. School milk supplies are sampled as a routine twice a term after delivery to the schools. Raw milks (i.e. Tuberculin-tested and undesignated) are examined bacteriologically (for cleanliness) and biologically (for presence of disease organisms). Pasteurised milks are subjected to the phosphatase test (for efficient pasteurisation) and the methylene blue test (for cleanliness). The number of samples collected at schools during 1954 was 1,019. Of these, 38 failed to conform with the required standard of cleanliness. In the case of unsatisfactory samples of raw milks, the supplier and/or producer are notified, also the Milk Production Officer of the Ministry of Agriculture and Fisheries, and repeat samples are taken. If no improvement is effected it is recommended to the Director of Education that the supplier be changed.

During the year, 879 samples of pasteurised milk were submitted to the phosphatase test, 11 being unsatisfactory. Unsatisfactory samples of pasteurised milk processed in the Administrative County (excluding areas of Food and Drugs Authorities) are investigated by the County Sanitary Officers, whether the test failed is the phosphatase test or the methylene blue test. In other cases the sample failures are reported to the Medical Officer of Health of the licensing authority concerned for appropriate action.

As regards the biological examinations, where tubercle bacilli or brucella abortus organisms are found the school milk supply is stopped immediately and is not resumed from that particular source until the herd is free from infection. In the meantime, where possible, alternative arrangements are made so that the school continues to receive a supply of milk. During the year under review 110 samples were submitted to the biological test, but no positives were found. The gradual but progressive elimination of raw school milk supplies is reflected in the decrease in the number of samples found to contain pathogenic organisms, viz :

1950	1951	1952	1953	1954
5	3	4	2	Nil

GENERAL.

Apart from the foregoing, sampling was undertaken during the year at certain private schools, hospitals, sanatoria, institutions and school canteens. Of 558 samples obtained, 33 were unsatisfactory from a cleanliness standpoint. Four hundred and sixty-six samples were submitted to the phosphatase test for efficient pasteurisation and four were found to be unsatisfactory.

Four samples of sterilised milk were all satisfactory.

Of 43 samples submitted to the biological test, one was found to be tuberculous and a tubercular cow was found and slaughtered as the result of the investigations. All the unsatisfactory samples were appropriately dealt with.

SLAUGHTERING AND MEAT INSPECTION.

An important development took place during the year. Meat and bacon rationing were ended on July 3rd, 1954, and at the same time the Ministry of Food ceased to be responsible for price control and distribution. Private slaughtering was again permitted as from July 2nd, 1954. The Government announced as its policy the aim of a moderate concentration of slaughtering, but in the meantime local authorities were charged with the responsibility of securing the provision of adequate slaughtering facilities in their districts. Powers were also given to close surplus slaughter-houses. No national statutory standards relating to the structure and design of slaughter-houses or the facilities to be provided in them have been laid down. Consequently the local authorities have had the difficult task of determining, largely by discretion, which slaughter-houses should be licensed and which should be refused licences. Thus many private slaughter-houses which had not been used since slaughtering was centralised in the early days of the war have had to be re-opened, though in many cases they may be far from ideal in situation and construction.

No new slaughter-houses may be licensed without the approval of the Minister of Food. In these cases also Planning approval has to be obtained, and the County Medical Officer is now given an opportunity of commenting upon the desirability or otherwise of the proposals.

The result of these changes has meant that meat inspection has now to be carried out at a large number of slaughter-houses instead of at a few centralised slaughter-houses, and in many cases sanitary inspectors who for some years have had no slaughtering in their areas now have a number of slaughter-houses scattered throughout their areas at which meat inspections must be carried out several times a week. The inspectors are striving to maintain a full inspection and to a high standard, but there is no doubt that in many cases it has meant a heavy increase of work to officials already fully engaged and finding duties expanding in several other directions at the same time.

HOUSING.

The year 1954 was notable for a general re-opening of the campaign against slums and unfit houses. It has long been a statutory responsibility of local authorities to cause an inspection of their districts to be made from time to time for the purpose of ascertaining whether any house is unfit for human habitation. So far as the County Council is concerned, in addition to the County Medical Officer's duty to keep himself informed of all matters likely to affect the public health in the County, a specific statutory duty is laid upon every County Council to have constant regard to the housing conditions in every rural district in their area.

Prior to the war local authorities did much housing work in the fields of both slum clearance and re-conditioning. Then the war came and these functions had perforce to be put into cold storage. Thus bad slums became even worse, while many border-line cases became slums. Houses needing only minor repairs often now need extensive re-conditioning.

This progressive deterioration has continued for practically fifteen years, but with the easing in the general housing situation the Government decided to urge on a national scale what a few authorities had already started — a major resumption of action against slums and unfit houses. At the same time the Housing Repairs and Rents Act, 1954, received Royal Assent and came into operation on 30th August, 1954. This makes certain alterations in the provisions relating to housing.

The Act requires local authorities to submit to the Minister of Housing and Local Government by 30th August, 1955, proposals for dealing with the unfit houses in their district. Some authorities, of course, had already a clear picture of their slum problems, but they still have had to decide how they are to be dealt with and how quickly they can deal with them. Other authorities are having to carry out some form of survey in order to formulate their proposals. The information required by the Minister is an estimate of the total number of unfit houses in the local authority's area and of the period the authority think they will need to secure the demolition of all these houses, together with the proposed programme of action during the next five years. The Minister has made it clear that in districts where the size of the problem allows, the authority should aim to deal with the whole of the necessary clearance and replacement in the next five years. On the other hand there are many districts where the number of unfit houses which ought to be pulled down is so large that it will be physically impossible to demolish them all for many years. To provide for these authorities the principle of " deferred demolition " has been introduced by the new Act. In these cases the intention is that the authority should deal in the next five years, by clearance and replacement, with as large a number of houses as the authority's commitments and resources, and the supplies of building labour and materials, will permit. Beyond this point the Act's powers should be used to take proceedings up to the stage of making a demolition or clearance order, but to substitute for the actual order power compulsorily to acquire the affected houses with a view to retaining them in occupation for some indefinite time, carrying out meanwhile such repairs or improvements as may be desirable on a scale suitably related to the potential life of the houses. This process is often referred to as " patching." In the first place, of course, the authority must be satisfied that such houses are or can be rendered capable of providing accommodation of a standard which is adequate for the time being. Houses too bad for even this treatment would all be included in the five year programme for immediate clearance. The City of Birmingham have been pioneers in this process of " patching " and there repairs have had to be carried out on a frankly minimal scale, but vet sufficiently ample to abate all urgent nuisances, to render the houses wind and weather tight and to provide certain basic amenities, with an element of decoration to a "good landlord" standard.

Another important provision of the new Act is to lay down the standard to be applied in determining whether a house is unfit for human habitation. The Act states that "regard shall be had to its condition in respect of the following matters — (a) repair; (b) stability; (c) freedom from damp; (d) natural lighting; (e) ventilation; (f) water supply; (g) drainage and sanitary conveniences; and (h) facilities for storage, preparation and cooking of food and for the disposal of waste water; and the house shall be deemed to be unfit as aforesaid if and only if it is so far defective in one or more of the said matters that it is not reasonably suitable for occupation in that condition."

The Act also makes certain amendments of the Housing Act, 1949, which deals with Improvement Grants, with the aim of encouraging more owners to apply for grants. The 1949 Act was designed to secure the modernisation of privately-owned structurally sound houses which lack up-to-date amenities, but the work carried out has been disappointingly small, and various reasons have been advanced, not the least the administrative delays and difficulties met with. The minimum figure of expenditure ranking for grant has been decreased from $\pounds 150$ to $\pounds 100$, and local authorities have been freed from the necessity of submitting individual schemes to the Principal Regional Officer before approving them.

Again the requirement that in order to qualify for grant a dwelling must provide satisfactory housing accommodation for at least 30 years is amended to allow the Minister, or the local authority as the case may be, to approve proposals if satisfied that they are likely to provide satisfactory accommodation for more than 15 years and that in all the circumstances the proposals should be approved. An alteration has also been made in the expenditure limit. The 1949 Act excluded from grant any case involving a total expenditure of more than $\pounds 600$ per dwelling — later increased by the Minister by order to $\pounds 800$. This condition has proved unnecessarily restrictive. Accordingly the new Act removes the $\pounds 800$ limit and imposes instead a maximum to the grant itself of $\pounds 400$.

The Minister has further expressed the hope that local authorities will authorise their officers to tell applicants whether a grant is likely to be made and, if it is, what rent the authority is likely to fix, on receipt of outline proposals and before the applicants are put to the expense of providing the plans and specifications necessary to enable the authority to come to final decisions.

All these alterations are aimed at securing greater use of the facilities provided, but as the new Act did not come into operation until August, 1954, it is too early yet to say how far the changes in conditions will be effective.

Finally, mention must be made of a new provision of the 1954 Act which has thrown further work upon the local authorities' staffs. Part II of the Act provides for " repairs increases " in respect of the rent of controlled dwelling-houses in good repair. To be eligible for such increase the house must be in good repair and reasonably suitable for occupation having regard to the matters already quoted as the standard to be applied in determining whether a house is unfit for human habitation (see above), and further the landlord must produce satisfactory evidence that work of repair to the value of at least three times the amount of the statutory repairs deduction has been carried out during a period of twelve months. When a notice of increase of rent is served the tenant may apply to the local authority for a certificate that either or both of the conditions are not fulfilled, and if such a certificate is issued and the tenant serves a copy on his landlord, no "repairs increase" is recoverable. Power of appeal is given of course and the County Court has the power to over-rule the local authority's certificate. The form of certificate is prescribed and details must be given as to defects of repair and defects as to suitability for occupation. This, of course, involves complete inspection and the officer concerned (usually the Sanitary Inspector) must act with complete reasonableness and impartiality to both sides. Although it was expected that large numbers

of these certificates would be asked for, it has so far been the general experience in this County that the applications have been comparatively few. The explanation no doubt is that owners of the poorer classes of property consider that the permitted rent increase is an inadequate return for spending the considerable sums of money which would be necessary to render the houses outside the scope of "certificates of disrepair" based on the conditions quoted above.

WATER SUPPLIES, SEWERAGE AND SEWAGE DISPOSAL

For the financial year 1954/55 a sum of £33,511 was contributed by the County Council to District Councils towards the cost of water, sewerage and sewage disposal schemes. The following is a list of schemes considered by the Health Department during 1954 for grants or loans under the Rural Water Supplies and Sewerage Act, 1944, or the Public Health Act, 1936. In all, during the year, schemes of water supply at an estimated cost of £130,973 and sewerage and sewage disposal at an estimated cost of £1,152,711 were considered by the Department.

WATER SUPPLIES.

Cheadle Rural District — Ramsor Road, Oakamoor.

This was a small mains extension scheme to supply a group of isolated properties at an estimated cost of $\pounds 1,900$. The scheme was recommended for approval.

Seisdon Rural District — Husphins Lane, Codsall.

This was another small mains extension estimated to cost \pounds 1,133 and which was also recommended for approval.

Stafford Rural District.

This was a comprehensive scheme estimated to cost £115,250 to serve the parishes of Colwich, Stowe, Weston-on-Trent, Gayton, Fradswell, Salt, Enson, Marston, Hopton and Coton.

The supply was to be obtained from Stafford Borough and distributed over the district by a network of mains and booster stations.

Subject to suggestions that certain mains be either extended or diverted in order to supply more properties the scheme was recommended for approval.

Stone Rural District.

Two short mains extensions to serve properties at Mossgate and Hilderstone were recommended for approval. The estimated costs were $f_{1,312}$ and $f_{1,850}$ respectively.

Uttoxeter Rural District.

Abbots Bromley — Radmore Lane extension.

A scheme to extend the main from Abbots Bromley along Radmore Lane at a cost of $f_{3,950}$ was considered and, subject to certain suggestions to decrease the cost, was in the main recommended for approval.

Bromley Hurst Main Extension.

This extension estimated to cost $\pounds 5,598$ was to supply a number of isolated farms. The cost per property was far in excess of the average and the scheme was mainly to serve agricultural interests as distinct from domestic. The scheme was recommended for approval, but the amount of grant to be paid by the County Council was to be based on what the Committee considered a reasonable cost per property.

SEWERAGE AND SEWAGE DISPOSAL.

Biddulph Urban District — New Buildings, Brindley Ford.

A scheme to provide sewerage facilities at an estimated cost of $\pounds 3,012$ to drain certain properties at New Buildings was recommended for approval, subject to the County Council's grant being based on the cost of the sewer and not including other works which it was found had been included in the estimated cost.

Brownhills Urban District - Walsall Wood Sewage Works extensions.

A scheme to provide extra sludge drying beds, pumping station and regrading the levels of the humus and settlement tank beds at an estimated cost of $\pounds 22,424$ was recommended for approval, subject to certain suggestions made by the department which would have the effect of decreasing the cost.

Coseley Urban District.

A scheme estimated to cost £36,500 to replace the existing pumping station at Princes End and the rising main therefrom to the Coseley Urban District sewage disposal works was recommended for approval. The scheme had become necessary owing to the limited capacity of the existing pumping station and rising main and also to the rising main causing trouble due to breaks.

Darlaston Urban District — Bentley Estate Sewer.

Applications from Darlaston Urban District Council for grants towards the cost of sewers serving this estate were considered. The applications fall into three sections. (1) With regard to the main trunk sewer the cost of which was shared between Walsall County Borough and Darlaston since it serves both districts, (2) the cost of the trunk sewer maintenance, reception and treatment of sewage from Darlaston by Walsall, and (3) the cost of the sewer linking the main trunk sewer with the Bentley Estate in Darlaston.

The estimated cost of (3) was $\pounds 20,351$ and consideration towards a contribution under the Local Government Act, 1948, Section 126, was referred to the Finance Committee by the Health Committee.

Contributions were also recommended in respect of (1) and (2).

Kidsgrove Urban District.

High Street, Newchapel.

An application for a grant towards the cost of a sewer estimated to cost $\pounds 2,550$ was not recommended for approval. The sewer was to replace a length of existing sewer which had become affected by subsidence. The sewer did not and was unlikely to cater for any further properties than those originally connected to it and in effect the replacing of the defective length could be classed as coming under maintenance rather than providing a new sewer.

Red Bull Sewage Disposal Works — Provision of temporary sludge beds and repairs to filter.

A scheme estimated to $\cot \frac{f}{2}3,968$ to provide temporary sludge beds and to carry out certain "first aid" work on filter beds was not recommended for approval since it was again held that the work was maintenance work and again so far as the sludge beds were concerned was purely temporary since the work done could not be incorporated into the proposed scheme for a major extension to the works which was under consideration at the same time.

Extensions to Red Bull Sewage Works.

A major scheme to extend these works was received during the year, but several technical points had to be settled and discussions were still taking place between the Health Department, Kidsgrove Urban District Council and their Consulting Engineers at the end of the year.

Stafford Municipal Borough.

Main Drainage Scheme (Foul Water) Section 1.

This scheme estimated to cost £36,604 5s. 10d. was to provide a new sewer between Gaol Square and the new pumping station in Lammascote Road. The sewer was necessary to relieve existing surcharged sewers and was recommended for approval.

New Sewage Disposal Works at Brancote Gorse.

This scheme, which includes new disposal works, a rising main between the works and a new pumping station at Lammascote Road, is estimated to cost £521,718 and was recommended for approval.

Willenhall Urban District — Sewers at Ashmore Lake, Perry Hall Road and Sandbeds.

The proposals were the second instalment of the comprehensive scheme of sewerage and sewage disposal in the Willenhall district. They were to provide at an estimated cost of $\pounds 28,750$ three new relief sewers to obviate surcharging of existing sewers and consequent flooding.

The scheme was recommended for approval.

Cheadle Rural District — Internal drainage schemes for parishes of Caverswall, Forsbrook and Draycott.

The schemes estimated to cost \pounds 19,000 fell into four sections.

(1) Weston Coyney.

The outfall to the existing overloaded works is to be connected to the new Blythe Valley trunk sewer and the existing works abandoned.

(2) Caverswall and Cookshill.

The proposals were to sewer these areas which at the time were not sewered. Connections will be made between the proposed sewers and the main trunk sewer.

(3) Blythe Bridge and Forsbrook.

Certain properties are to be connected to the main trunk sewer by means of a connecting sewer in lieu of existing septic tanks.

(4) Cresswell.

Two small sewage disposal works will be abandoned, the existing sewers being connected to the trunk sewer.

The scheme was recommended for approval, subject to consideration being given to the possibility of connecting various properties north of the railway at Cresswell to the scheme.

Leek Rural District.

Light Oaks, Milton - Sewerage Scheme.

A scheme for the sewerage of the Light Oaks area, Milton, estimated to cost $\pounds 25,000$ (a 1952 estimate) was recommended for approval. The recommendation also included a suggestion that a certain length of sewer should be extended to allow for the connection of further properties and that the scheme was being approved subject to extensions at the Baddeley Green Works being carried out.

Baddeley Green Sewage Disposal Works Extensions.

A scheme estimated to $\cot f_{37,420}$ to provide extensions at the above works was approved in principle. The extensions are linked up with the Light Oaks Sewerage Scheme since the sewage from that area will drain to the Baddeley Green Works.

Brown Edge Sewer Extensions.

Norton Green Sewage Disposal Works Extensions.

A joint scheme covering the sewering of certain areas of Brown Edge and extensions to the Norton Green Sewage Disposal Works was recommended for approval in principle.

The estimated cost of the proposed works was $\pounds 48,600$.

Again the department suggested that consideration should be given to extending one of the sewers to enable some twenty more properties to be connected.

Lichfield Rural District.

A scheme was put forward to provide certain new sewers in Shenstone and to provide a new sewage disposal works to replace the existing obsolete ineffective and overloaded works at an estimated cost of \pounds 71,801 10s. 0d.

Also included in the scheme was a long length of sewer from Shenstone Wood End to the proposed new works. This latter sewer would take in a comparatively small number of properties, but would relieve the load on the Forge Lane sewage disposal works to which the flow from Shenstone Wood End was partly pumped.

The section of the scheme dealing with the sewerage of Shenstone and the new works was recommended for approval, but the need for a long sewer from Shenstone Wood End was not felt to be sufficiently strong to recommend that particular part of the scheme for approval.

Seisdon Rural District.

Codsall Sewage Works Extensions.

The proposals estimated to cost \pounds 76,850 are to provide much needed extensions at the Codsall Works to relieve existing overloading and to provide for future building, particularly "overspill" housing in the area.

The scheme was recommended for approval.

Radford Lane, Lower Penn.

A small sewer extension estimated to cost $f_{1,527}$ to cater for a number of properties on the boundary of the Seisdon Rural District and Tettenhall Urban District was recommended for approval.

Parishes of Trysull and Seisdon.

A scheme for the sewerage of Trysull and Seisdon villages, the sewage from which would be pumped to the Wombourne Sewage Disposal Works, was approved. The estimated cost was given as $\pounds 47,310$.

Allied with this scheme was a proposal to extend the Wombourne Sewage Disposal Works. These works are heavily overloaded and since the load is constantly increasing in no small measure from overspill housing and also since the extra flow from Trysull and Seisdon will have to be dealt with extensions were regarded as urgent. The estimated cost of the extensions is $f_{64,990}$.

Stafford Rural District.

Great Haywood Sewerage and Sewage Disposal.

The scheme was to provide sewers in the village of Great Haywood which would gravitate the sewage to a pumping station whence it would be pumped to the ex-R.A.F. sewage disposal works (the works having been purchased from the R.A.F. by the Rural District Council) at Hixon.

The estimated cost was given as £21,944.

The department suggested that a length of sewer be added to the scheme to allow for the easier connection to the sewerage system of a School and certain other adjacent properties — this has since been incorporated into the scheme — and subject to this suggestion the scheme was recommended for approval.

Milford, Brocton and Walton Sewerage Scheme.

This scheme is to provide for the sewerage of the villages mentioned. The sewage will be pumped from Milford to the new Stafford Borough Sewage Disposal Works at Brancote Gorse. The scheme is the alternative from an earlier scheme proposed by the Rural District Council whereby the sewage would be dealt with by a separate works near Tixall. This alternative scheme is one which was suggested by this department and which the Ministry later upheld.

The estimated cost of the scheme is £78,028 and another extension to deal with properties in the Pool Lane area at Brocton which this department suggested should be brought into the scheme was estimated to cost £4,715.

Both the schemes were recommended for approval.

MINISTRY OF HOUSING AND LOCAL GOVERNMENT INQUIRIES.

During the year the Ministry of Housing and Local Government held Inquiries into the following schemes at all of which the Health Department was represented :

23rd March. Stafford Rural District. Great Bridgeford Sewerage and Sewage Disposal Scheme.

20th May. Leek Rural District. Milton Light Oaks Sewerage Scheme. Baddeley Green Extensions to Sewage Disposal Works. Norton Green Extensions to Sewage Disposal Works. Brown Edge Sewerage Scheme.

3rd June.	Cheadle Rural District. Cresswell, Cookshill and Cavers- wall Sewerage Schemes.
29th June.	Stafford Rural District. Great Haywood Sewerage Scheme. Eastern area sewerage scheme.
21st July.	Lichfield Rural District. Shenstone Sewerage and Sewage Disposal Scheme.
11th Aug.	Coseley Urban District. Gospel Oak and Princes End area. Proposed pumping station and rising main for sewerage.
15th Sept.	Seisdon Rural District. Visit by Ministry Engineering Inspector regarding Pattingham and Himley Sewerage and Sewage Disposal Schemes.
23rd Sept.	Stafford Rural District. Eastern Area Water Scheme.
24th Nov.	Seisdon Rural District. Codsall Sewage Works Extensions.

In cases where the County Council are making contributions under the Rural Water Supplies and Sewerage Acts or the Public Health Act sewage works are regularly inspected and samples taken by the County Sanitary Inspectors to ensure the works are being properly maintained.

It is very satisfactory to see the continued interest by District Councils in improving or extending water, sewerage and sewage disposal schemes, in all of which this department can and does play a very important part. Not only are suggestions made to improve schemes or bring about co-operation between adjoining districts where such would be of mutual advantage, but where it is seen that unnecessary or needlessly expensive projects are included in schemes they are not recommended for approval. Over the past years a very friendly spirit has been built up between the department and the surveyors and consulting engineers who put forward the schemes. In very many cases advice is sought from this department in the early stages of such schemes and this side of the work of the County Health Department is proving of great and increasing value to both the District and County Authorities.

PREVALENCE OF, AND CONTROL OVER, INFECTIOUS DISEASE

The following statistics relate to the notifiable infectious diseases amongst the home population during the calendar year 1954. On reference to the tables at the end of the Report the numbers and deathrates for each Sanitary District will be found.

SMALLPOX.—No case of Smallpox was notified in 1954. The last cases recorded were in 1947, when an outbreak occurred in the south of the County, mainly in Bilston.

SCARLET FEVER.—There was a decrease in the incidence of this disease, 895 cases having been notified, compared with 1,023 in 1953. In the Urban Districts there were 661 cases and in the Rural Districts

234, as against 783 and 240 respectively in the previous year. The caserates per thousand of the population were:—Urban Districts 1.01, Rural Districts 1.05, with a total County Rate of 1.02, whilst that for England and Wales was 0.97. The corresponding rates for 1953 were 1.21, 1.09, 1.18 and 1.39 respectively.

DIPHTHERIA.—There was a marked decrease in the incidence of this disease, for 16 notifications were made, compared with 73 in the previous year. In the Urban Districts there were 16 cases, as against 71, and in the Rural Districts nil as against 2. The total case-rate was 0.02, whilst that for England and Wales was 0.00, as against 0.08 and 0.01 respectively in the previous year.

No deaths occurred.

In 1953 there were six deaths from this disease.

ENTERIC FEVER.—Three notifications of enteric fever were made during the year, the same as in 1953. One case was of typhoid and two of paratyphoid. Each case occurred in Urban Districts.

Of the three cases notified in 1953, one of typhoid and one of paratyphoid occurred in Urban Districts, and one case of paratyphoid occurred in a Rural District.

The 1954 case-rates for the country as a whole, for typhoid and paratyphoid, were 0.00 and 0.01 per thousand of the population respectively, the Staffordshire rates being 0.00 and 0.00.

MEASLES.—During the period, 2,892 notifications were made, which indicates an appreciable decrease, for the corresponding figure for 1953 was 11,514. One thousand, five hundred and sixty-five cases occurred in Urban and 1,327 in Rural Districts, compared with 8,968 and 2,546 in the previous year. The 1954 case-rates for the County and England and Wales were 3.30 and 3.32 as against 13.26 and 12.36 in 1953.

One death occurred in an Urban District and one in a Rural District, the death-rates being 0.00 and 0.00 respectively. There were six deaths in 1953.

WHOOPING COUGH.—There was a marked decrease in the number of notifications, 1,947 being made in 1954, as compared with 3,495 in 1953. In the Urban Districts there were 1,440, as against 2,710, whilst the corresponding figures for the Rural Districts were 507 and 785. The case-rate for the County was 2.22 and for England and Wales, 2.39.

There were 3 deaths in the Urban Districts and one in the Rural, the death-rates being 0.00 and 0.00 respectively. In 1953, twelve deaths were due to this cause.

DYSENTERY.—Eight hundred and seventy-nine notifications were made in 1954 as compared with 54 in 1953, 134 in 1952 and 407 in 1951. Twenty-two of the 35 Sanitary Districts were affected, but in three instances, viz: Wednesbury M.B., Wednesfield U.D. and Stafford R.D., single cases only were notified. Cases notified in other districts were as follows:—Aldridge U.D. 4, Brierley Hill U.D. 33, Brownhills U.D. 11, Cannock U.D. 517, Coseley U.D. 14, Leek U.D. 8, Newcastle M.B. 123, Rowley Regis M.B. 7, Rugeley U.D. 5, Stafford M.B. 7, Tettenhall U.D. 5, Tipton M.B. 2, Willenhall U.D. 2, Cannock R.D. 46, Cheadle R.D. 19, Leek R.D. 2, Lichfield R.D. 18, Newcastle R.D. 13 and Stone R.D. 40.

ACUTE POLIOMYELITIS, ACUTE ENCEPHALITIS, MENINGOCOCCAL INFECTION.—New regulations designed to replace former legislation were brought into operation on the 1st January, 1950. They introduced nomenclature consistent with the international standard classification of diseases and slightly extended the scope of clinical conditions notifiable under the head of acute encephalitis.

Thirty-one cases of Acute Poliomyelitis were notified, compared with 43 in 1953, 23 occurring in Urban and eight in Rural Districts. Two cases of Acute Encephalitis were notified, the same as in the previous year. One death from Acute Poliomyelitis occurred in an Urban District. In 1953 there were four deaths, three in Urban and one in a Rural District.

Eighteen notifications of Meningococcal Infection (15 in 11 Urban areas and 3 in 3 Rural Districts) were made during 1954, compared with 24 in 1953. Five deaths occurred, of which four were in Urban Districts. In the previous year there were six deaths.

The deaths from non-notifiable infectious diseases were as follows :---

GASTRITIS, ENTERITIS AND DIARRHŒA.—Eight deaths occurred in Urban Districts and three in Rural Districts in children under one year of age, the death-rates being 0.79 and 0.89, respectively, per thousand live births. The figures for 1953 were 8, 2, 0.77 and 0.60 respectively.

INFLUENZA.—In 1954 there were 28 deaths in Urban and 6 in Rural Districts, as compared with 85 and 30, respectively, in 1953.

Diseases		19.5	Notific	ations	Deaths		
Discuses			Urban	Rural	Urban	Rural	
Smallpox			_		*	*	
Scarlet Fever			661	234	*	*	
Diphtheria			16				
Enteric Fever			3		*	*	
Measles			1,565	1,327	1	1	
Whooping Cough			1,440	507	3	î	
Puerperal Pyrexia			36	10	*	*	
Erysipelas			49	38	*	*	
Meningococcal Infection			15		4	1	
Acute Poliomyelitis (Paralytic))		21	5	2		
Acute Poliomyelitis (Non-Para			2	3 5 3		and the second	
Acute Encephalitis (Infective)	,,		_	_	ſ *		
Acute Encephalitis (Post Infec			2	_	a constant of		
Pneumonia			450	152	206	GA.	
Dysentery			740	132	200	64	

* Not classified in Registrar-General's Return

TUBERCULOSIS

The following table shows new cases of tuberculosis, including primary notifications and cases which came to notice, otherwise than by formal notification, and deaths from the disease, classified according to age and sex :—

1954				New Cases				DEATHS			
Age Perio		ERIODS		Pulmonary			on- onary	Pulmonary		Non- Pulmonary	
				М.	F.	M.	F.	M.	F.	M.	F.
0					1	2	2	1	_		1
1— 2— 5—				-	1 3	2 2 6	-	12-	-		1
2—				10	10		6	3			
5—				15	14	10	6 8 5 5	11		1	2
-01				16	18	7 2 2 3 3 5 3	5	5			
5				43	47	2	5	21	4	2	1
20-				25	54	2	11	15			
25—				80	85	3	11	118	9	6	6
35—				68	28	3	$\frac{1}{2}$	5	1 martin		
15—				73	20	5	2	162	15	· 5	1
55—				60	14	3	-	15	1001		
35—				20	4		-	22	5	1	5
75 and	upwa	rds		-	1	1	2	4	2		
	Tota	als		410	299	46	53	109	35	15	17

During 1954, 144 deaths occurred from pulmonary tuberculosis and 32 from other forms of this disease, the death-rates being 0.16and 0.04 respectively. The corresponding rates for 1953 were 0.17 and 0.03.

	DEATH RATE PER 1,000 OF THE POPULATION							
Year	Pht	hisis	Other forms of Tuberculosis					
	Urban	Rural	Urban	Rural				
1914	0.89	0.54	0.31	0.20				
1915	0.94	0.67	0.34	0.29				
1916	1.01	0.80	0.40	0.29				
1917	1.01	0.74	0.34	0.31				
1918	1.03	0.88	0.31	0.28				
1919	0.83	0.61	0.22	0.30				
1920	0.75	0.56	0.30	0.21				
1921	0.80	0.53	0.23	0.21				
1922	0.80	0.55	0.24	0.17				
1923	0.75	0.58	0.25	0.22				
1924	0.73	0.58	0.22	0.20				
1925	0.83	0.49	0.22	0.14				
1926	0.74	0.50	0.22	0.11				
1927	0.73	0.44	0.21	0.22				
1928	0.64	0.48	0.14	0.13				
1929	0.76	0.54	0.15	0.12				
1930	0.72	0.54	0.15	0.13				
1931	0.78	0.52	0.17	0.13				
1932	0.64	0.42	0.16	0.14				
1933	0.72	0.50	0.14	0.08				
1934	0.67	0.43	0.11	0.16				
1935	0.67	0.35	0.13	0.08				
1936	0.53	0.34	0.11	0.08				
1937	0.60	0.41	0.13	0.11				
1938	0.56	0.29	0.13	0.11				
1939	0.52	0.35	0.09	0.11				
1940	0.51	0.29	0.11	0.06				
1941	0.57	0.33	0.16	0.14				
1942	0.52	0.34	0.13	0.10				
1943	0.55	0.29	0.11	0.07				
1944	0.52	0.25	0.10	0.07				
1945	0.56	0.22	0.11	0.09				
1946	0.49	0.28	0.08	0.06				
1947	0.47	0.28	0.09	0.07				
1948	0.51	0.33	0.07	0.05				
1949	0.45	0.22	0.06	0.03				
1950	0.39	0.20	0.06	0.06				
1951	0.37	0.12	0.05	0.04				
1952	0.27	0.07	0.04	0.04				
1953 1954	0.19 0.18	0.10 0.13	0.04	0.00				

The table which follows shows the death-rates in the Urban and Rural Districts of the County from 1914 :---

- 0

NOTIFICATION.

1918	1919	1920	1921	1922	1923	1924	1925	1926	1927	1928	1929	1930	1931
856	699	642	929	971	1029	974	1232	1400	1106	1194	1017	1021	1129
1932	1933	1934	1935	1936	1937	1938	1939	1940	1941	1942	1943	1944	1945
1074	1011	929	825	831	858	789	726	669	788	830	841	798	769
1946	1947	1948	1949	1950	1951	1952	1953	1954					
775	813	852	837	807	901	805	958	808					

The following table gives particulars of primary notifications of tuberculosis notified in the Administrative County each year since 1918, together with the case rates per 1,000 of the estimated population. Only from 1946 is it possible to divide these figures to show numbers of respiratory and non-respiratory notifications, and the appropriate case rates are given :—

	Prima	RY NOTIFIC	ATIONS	Case Rate per 1,000 of the Population			
Year	Respiratory Tuberculosis	Non- Respiratory Tuberculosis	Tuberculosis (all forms)	Respiratory Tuberculosis	Non- Respiratory Tuberculosis	Tuberculosis (all forms)	
1918			856			1.37	
1919			699			1.04	
1920	ando cancor	CONTRACTOR OF THE	642	beir mandel	and a second	0.92	
1921	All India and	Louis Internet	929			1.29	
1922	100 109 109		971			1.37	
1923	Scone winds		1,029	the second second	a stratest	1.45	
1924			974			1.36	
1925			1,232	1.4	and the state	1.71	
1926			1,400			1.93	
1927		- WART I	1,106			1.55	
1928			1,194	C. COLORIS		1.68	
1929	the second succession		1,017			1.43	
1930			1,021		NAMES OF A DESCRIPTION OF	1.44	
1931			1,129	Del Villand	ALERA PROPERTY.	1.59	
1932			1,074	Second Street St		1.50	
1933	100.05000.00		1,011	Completioner		1.41	
1934			929			1.29	
1935			825			1.14	
1936			831	a mastoria	CIO ILILLIS-	1.14	
1937	and and the		858			1.16	
1938			789	2222 2222 228		1.05	
1939	19 - 12 - 14 - 14 - 14 - 14 - 14 - 14 - 14		726	No. 10000000		0.95	
1940			669			0.88	
1941			788			1.01	
1942	CONTRACT OF STATE		830	RY AND THE	CONTRACTION OF	1.07	
1943			841			1.09	
1944	indo I abrid	alad a sort	798	Sol and some	in the second	1.03	
1945	000	100	769			1.00	
1946	636	139	775	0.80	0.17	0.97	
1947	681	132	813	0.84	0.16	1.00	
1948	728	124	852	0.88	0.15	1.03	
1949	713	124	837	0.85	0.15	1.00	
1950 1951	706	101	807	0.83	0.12	0.95	
1951	778	123	901	0.91	0.14	1.05	
1952	712	93	805	0.83	0.11	0.94	
1953	864	94	858	1.00	0.11	1.10	
1934	709	99	808	0.81	0.11	0.92	

The following is a summary of cases, other than primary notifications, coming to notice from other sources during the year :--

Number of second other then printers potifications	1954
Number of cases other than primary notifications coming to knowledge within the year	30
Number of un-notified cases which died	21
Number of other cases which died, notification being made after death	9

Ratio of un-notified cases which died to total deaths 1:5.9

In 1954, roughly 11 out of 13 deaths were of cases notified under the regulations before decease.

The total notifications are classified in a preceding table.

REGISTERS OF DISTRICT MEDICAL OFFICERS OF HEALTH.

At the end of the year the following cases were included in these registers :—

TOTAL		PULMONARY		No	N-PULMON	ARY
CASES	М.	F.	Total	M.	F.	Total
8,371	3,581	3,085	6,666	818	887	1,705

The figures given above indicate that in 1954 there was one case of tuberculosis in every 105 persons, or 9.6 per 1,000 of the population.

The table also shows that in 1954 there was one death in approximately every 49 cases.

MASS RADIOGRAPHY

Particulars were given in the 1952 Report regarding the arrangements for mass radiography within the area. Four units are concerned and surveys have been conducted at which wherever possible appropriate categories of officers employed by the County Council have attended, i.e., those whose employment is in any way connected with the care of children — staffs of Children's Homes, teachers, etc.

During the year some 232 persons were examined in this way in connection with their appointments to the staff of the County Council.

TUBERCULOSIS HEALTH VISITING

As was reported in the 1953 Report, three whole-time Tuberculosis Health Visitors have been appointed and the total number of visits made by the Visitors to tuberculous households was 3,866.

TUBERCULOSIS - 1954, CIRCULAR 1/54.

As will be seen in a previous table there were 709 notified cases of pulmonary tuberculosis during the year. It is not possible this year to give the total number of contacts examined for varying reasons, including a new system of contact review which is still under revision at one Chest Clinic. It is hoped that reliable figures regarding contact work will be available from all the Clinics as from 1st January, 1956, and will be included in that year's Annual Report. Figures are, however, available in respect of three Chest Clinics in Staffordshire. At Newcastle, 325 contacts were examined, of which 3 were found to be tuberculous, at Wednesbury of 489 contacts examined 7 were tuberculous, and at Stafford the figures were 856 and 22 respectively.

The Stafford figures do not include the X-raying and skin testing of three schools which was carried out as a result of the finding of a case of tuberculosis in a teacher in each of the schools. In two of the schools not a single case of tuberculosis was found in either the teachers or the 533 children examined. In the third school no other teacher was found to have tuberculosis, although of the 63 children examined there were 2 cases of active primary tuberculosis. This was a much smaller country school and the disparity in the results obtained, as compared with the other two schools, may be due to the fact that there was much more intimate contact between teacher and pupil in this country school. In the other two schools the head teacher was the patient in one instance, who, really owing to his illness, did not have a great deal of contact with the children, and in the other instance the tuberculous lesion in the teacher concerned was not very active.

EMPLOYMENT.

Where possible the employment of known cases of tuberculosis is dealt with by consultation with the Chest Physician and the Disablement Resettlement Officer of the Ministry of Labour. Suitable cases are referred to Rehabilitation Centres.

EARLY CASES AMONG CHILDREN AND OTHERS.

Surveys have continued to be carried out by the Mass Miniature Radiography Units of school children, in the course of which some 4,678 children of 14 years and over from 57 schools were examined during 1954.

CASES BECOMING KNOWN AFTER DEATH FROM TUBERCULOSIS.

As far as is possible full examinations are made of the contacts of those cases who were not notified as tuberculous during life.

B.C.G. VACCINATION

During the year a total of 519 cases have been vaccinated at the Tuberculosis Dispensaries.

CANCER

In the following table the deaths from Cancer during 1954, in age and sex groups, in the Urban and Rural Districts of the County, are shown :—

1.00	URE	BAN DISTR	ICTS	Ru	Canad		
Age Groups	Male	Female	Total	Male	le Female Total		Grand Total
0	-	1	1	-	-		1
1	3	2	5	_	1	1	6
5	2	2	4	-	1	1	5
15—	4	2	6	-	1	1	7
25—	32	56	88	13	8	21	109
45—	262 ·	214	476	85	84	169	645
65—	173	145	318	61	53	114	432
75—	134	136	270	48	45	93	363
Totals	610	558	1,168	207	193	400	1,568

As will be seen from the preceding table, this year there were 1,568 deaths from Cancer. In 1953 there were 1,455 preceded by 1,388 in 1952. This year's total is the highest number so far recorded in the Administrative County, the previous highest being last year. In each year since 1937 the figure has exceeded 1,000. During the period under review this group of deaths accounted for $17 \cdot 1$ per cent of the total civilian deaths, as compared with $16 \cdot 4$ per cent last year, when the total number of deaths from all causes was less by 327. As stated in previous Reports, there is little variation from year to year in the group of deaths from this cause which occur in persons under the age of 45 years, the current number being 128, as against 116 and 113 in 1952 and 1953, respectively. This year's figure, however, is the highest number since 1947, when 121 deaths occurred.

In considering the mortality from Cancer, one must bear in mind that the general mortality from all causes under the age of 45 has, over a long period, become steadily less. This means, therefore, that in every population there exists an increasing number of persons of an age more susceptible to cancer than are younger persons, the statement being supported by the fact that whilst in 1920 48.6 per cent of the deaths from all causes were of persons under 45, the figure has gradually decreased in the subsequent years to 11.1 per cent in 1954.

VENEREAL DISEASES

During the year, 867 Staffordshire patients attended for treatment for the first time, compared with 920 in 1953, and the following detailed table indicates where it was obtained. It will be seen that in 1954, 707 of the persons who attended were found not to be infected, and the corresponding figure in the previous year was 698. The actual cases in 1953 and 1954 were 222 and 160 respectively.

TREATMENT CENTRE	Syphilis	Gonorr- hœa	Other Condi- tions	Total New Cases
Birmingham (Lancaster Street)			3	3
Birmingham General Hospital	. 11	11	77	99
Burton-on-Trent General Infirmary .			1	1
Derby Royal Infirmary			7	7
Dudley Guest Hospital	0	33	119	160
Doncaster Royal Infirmary		1		1
Stafford (Staffordshire General Infirmary) .		7	59	73
Stoke-on-Trent (North Staffordshire Roya			00	
Infirmary)	0	9	71	88
Stoke-on-Trent (Wellesley Street)		1	58	63
Walsall (Manor Hospital)	0	14	172	189
Wolverhampton Royal Hospital	10	33	140	183
Totals	. 51	109	707	867

For comparative purposes the totals of the cases included in the foregoing table for the last twenty years have been extracted and are given below :—

Ye	ar	Syphilis	Soft Chancre	Gonorrhœa	Total Cases	Non-Venerea
1935		166	4	322	492	295
1936		137	6	294	437	341
1937		116	5	320	441	326
1938		133	35	302	438	344
1939		116	5	283	404	310
1940		126	1	244	371	348
1941		111	1	267	379	359
1942		134	2	266	402	512
1943		163	2 2	271	436	783
1944		171	2	273	446	791
1945		186		355	541	867
1946		275	2	451	728	1,180
1947		147	2	254	403	682
1948		177	4	219	400	904
1949		148	-	234	382	842
1950		85	-	178	263	824
1951		67		163	230	760
1952		54		136	190	666
1953		64	_	158	222	698
1954		51	-	109	160	707

BLIND PERSONS

The following table gives particulars of Registered Blind and Partially Sighted Persons registered during 1954. Of the 238 cases registered, 118 were recommended for treatment of one sort or another, and 78 of these actually received such treatment.

		CAUSE OF DISABILITY					
		Cataract	Glaucoma	Retrolental Fibroplasia	Others		
(i)	Number of cases registered during the year in respect of which para. 7(c) of Forms B.D.8 recommends :						
	 (a) No treatment (b) Treatment (medical, surgical or optical) 	41 52	21	_	68 45		
(ii)	Number of cases at (i) (b) above which on follow-up action have received treatment	35	14		29		

The Home Teacher visits each case to see what help can be given and to ensure they obtain all assistance to which they are entitled under the Act.

OPHTHALMIA NEONATORUM

The number of cases of Ophthalmia Neonatorum notified during the year was 11. In 7 instances the confinements were domiciliary, and of these 6 were nursed at home and one was admitted to hospital.

The remaining four cases were born in hospital. In one instance the condition occurred subsequent to transfer to another hospital and was satisfactorily cleared up prior to discharge. The other three cases were discharged home to own doctor although in two instances they were re-admitted to another hospital.

Of the 11 cases, 4 were moderately severe and 7 slight. Vision was unimpaired in every instance.

GENERAL HEALTH PROPAGANDA

During the year the facilities for the provision of general health and sex education lectures continued and talks were given to Youth Clubs, Parent/Teacher Associations and Women's Institutes, etc.

In 1954, as formerly, the County Council made a grant to the Central Council for Health Education and during the year the latter again provided a speaker to give some of the talks and lectures mentioned above and also educational exhibition stands and a succession of interchangeable topic material.

The stands were in use at the Welfare Centres and School Clinics in each Area.

MEDICAL EXAMINATIONS FOR SUPERANNUATION PURPOSES

The responsibility for the medical examination and certification of the physical fitness or otherwise of persons for appointment to the staff of this Authority rests with the County Medical Officer, and during the year 687 medical examinations were undertaken, 293 by medical staff of the Department at County Council Clinics and 394 by General Practitioners and other Authorities. The figures for the previous year were 443, 210 and 233 respectively.

AREA ADMINISTRATION

In the Report for 1948 particulars of the Area Committees and of their districts and population were given, and in the Report for 1951 mention was made of the revised scheme of administration which came into operation on the 1st July, 1951. No major change has taken place since that time.

CARE OF MOTHERS AND YOUNG CHILDREN

INFANT WELFARE CENTRES.

During 1954, seven new Centres were opened, particulars being as follows :

Methodist Schoolroom, Sandy Lane, Brown Edge.

Community Centre, Weston Coyney.

Westlands Methodist Church Hall, Pilkington Avenue, Clayton, Newcastle.

Community Centre, Curborough Road, Curborough, Lichfield.

Community Centre, Rolleston.

Perton/Wrottesley, Wrottesley Park.

Community Centre, Enville Road, Wall Heath.

During the year the Centres at Seighford and Pattingham were closed.

At the end of the year there were 110 Welfare Centres in operation, of which 61 were combined (i.e., Minor Ailment Clinics and Welfare Centres) and 49 were Welfare Centres only.

The following are particulars of the number of sessions and attendances made during the year :

No. of session	ns		 		4,998
No. of childre and who			ing the	year	
1954			 		7,917
1953			 		5,962
1952—1949	•••	• •	 		4,815
Tot	al		 		18,694

No. of attendances children who a were :	during t the o	the ye	ar mad attend	le by ance	
Under 1 year					116,723
1 but under 2					30,976
2 but under 5					29,927
Total	.,				177,626

ANTE-NATAL CLINICS.

At 31st December, 1954, there were 46 Ante-Natal Clinics (special sessions being held at 34 of them) and 4 Post-Natal Clinics (1 special and 3 held in conjunction with Welfare Centre sessions).

The following are the numbers of expectant mothers and attendances made by them during the year at the Ante-Natal Clinics :

Number of expectant mothers	attend	ling	 	5,891
Total number of attendances			 	19,103

One hundred and forty-five women attended the Post-Natal Clinics during the year, 175 attendances being made.

Where treatment is required, the patient is referred to her own doctor, through the medium of the midwife, except for unsatisfactory dental conditions. Treatment of the latter can be given under the County Council scheme and the patients are offered the facilities provided.

RURAL ANTE-NATAL SCHEME.

During the year no cases were dealt with under the scheme.

MATERNITY OUTFITS.

In accordance with the provisions of the National Health Service Act, maternity outfits are required to be provided by Local Health Authorities for approprate cases free of cost. The number issued during the year was 6,970 as against 7,125 for 1951, 6,709 for 1952 and 7,263 for 1953.

PAYMENT OF MIDWIVES' FEES.

The compensation fee of 10/- was not claimed by any independent midwives during the period covered by this Report in respect of any cases which had been booked by them and which they had lost as a result of County Council activities.

PUERPERAL PYREXIA.

In 1954, 46 cases of Puerperal Pyrexia were notified in the County area.

Of the cases dealt with during the period under review, 9 were sent to hospital and 14 were cases in which confinement had taken place in hospital. OPHTHALMIC TREATMENT.

During the year, 124 children were referred from the Infant Welfare Centres for ophthalmic examination.

Glasses were prescribed for 80 of these children who are mostly cases of squint and are kept under supervision.

These cases, with others seen in previous years, made 274 visits to the Clinics.

ARTIFICIAL LIGHT.

During the year, 331 cases were referred for artificial light treatment.

DENTAL TREATMENT.

The following table shows the number of cases provided with dental care :

Expectant and nursing	Examined	Needing Treatment	Treated	Made Dentally Fit
mothers	551	551	540	418
Children under five		1,145	1,145	1,145

The form of treatment provided is shown in the table below :--

	ctions	d hetics	ugs ngs or ngs and Treatment r Nitrate tment		nent			tures vided	
	Extractions	General Anæsthetics	Fillings	Scalings Scalings Gum Tre	Silver Treatn	Dressings	Radiographs	Com- plete	Partial
Expectant and Nursing Mothers	2,431	272	331	143	4	520	62	221	158
Children under five	1,929	560	55	-	190	12	-	-	-

Dentures supplied were constructed in the County Dental Laboratory. X-ray units are available at Stafford, Bilston, Sedgley, Cannock and Newcastle Clinics, and the radiographs were taken at these centres. In all other areas arrangements have been made with private practitioners to undertake X-ray examinations on behalf of this Authority.

DENTAL LABORATORY.

The summary of work completed during the year at the County Dental Laboratory is shown in the following tables :---

Dent	URE	WORK		
Nature o	of Den	iture	Ne	os. Completed
Full upper dentures			 	205
Full lower dentures			 	153
Partial upper dentures			 	379
Partial lower dentures			 	85
Remakes			 	2
Repairs to dentures			 	179
Total			 	1,003

ORTHODONTICS

Appl	iances		No	s. Completed
Regulation appliances		 		425
Repairs to appliances		 		4
Total		 		429

SUNDRIES

		Na	ture of		No	os. Completed	d
Obturators				 		9	
Crowns				 		4	
Inlays				 			
Splints				 			
Special tra	ys			 		124	
Т	otal			 		137	

DISTRIBUTION OF WELFARE FOODS.

On and from the 28th June, 1954, the County Council in their capacity as Local Health Authority became responsible for the distribution of Welfare Foods, a function previously undertaken by the Ministry of Food, the foods concerned being :

National Dried Milk

Orange Juice

Cod Liver Oil

Vitamin A and D Tablets.

Prior to the 28th June Welfare Foods were distributed from Food Offices, Ministry of Labour premises, County Council Clinics, shops and voluntary centres. In addition, in the rural districts of Cheadle, Leek and Newcastle distribution took place from a mobile van. For a time after the 28th June the Ministries of Food and Labour allowed distribution and storage to continue from their premises, but the County Council had to negotiate with the owners of the premises used for distribution purposes by the Ministry in order to take over the tenancies, so that there would be no break in the service. All the arrangements made were for a temporary period only pending a review by the Health Committee. This review took place in November when the recommendations of each Area were considered at a special meeting of the Health Committee. As a result it was possible at some centres to reduce the hours of opening with a consequent saving in food clerks' salaries. The Committee also gave approval to the purchasing of a Morris Minor 8 h.p. van to replace the Civil Defence Vehicle which had been in use in the areas mentioned from the time the County Council took over distribution. The recommendations of the Special Meeting of the Health Committee were to come into effect on and from the 1st January, 1955.

EXTRA NOURISHMENT.

During the financial year 1954–55 the sales and free issues amounted to $\pounds 18,011$ as compared with $\pounds 18,063$ during the previous financial year. Of this figure, the amount apportionable to free issues was very small, in fact almost negligible.

NOTIFICATION OF BIRTHS.

The following are particulars of the live and stillbirths notified during 1954 :---

Number of live births			 	13,547
Number of stillbirths	••	• •	 	367
Notified by midwives		• •	 • •	13,298
Notified by parents and	doctors		 	616

The births registered during the period cannot strictly be compared with those notified because of the period allowed by law for each purpose.

CARE OF ILLEGITIMATE CHILDREN.

Full information has been given in previous Reports of the arrangements in being with the Lichfield Diocesan Association for Moral Welfare Work, and the following are the particulars of the children dealt with during 1954 :—

Children with mothers at home	bables sided	48
,, with parents married	West childre	10
" with mothers in situation	IS	4
,, with mothers in lodgings	abonited app	3
,, with relatives		4
,, with parents co-habiting		2
Child with foster parents		1
Children in Local Authority Home	s	9
" in Voluntary Children's H	Iomes	3
" with adopters		53
Child transferred		1
Children died		6
" stillborn		4
Miscarriage		1
		149

Thirty-five girls were sent to Diocesan Homes and Homes of other religious denominations during the year.

BROADFIELD HOUSE, KINGSWINFORD.

As mentioned in last year's Report, the County Council has a Mothercraft Training Hostel at Kingswinford, with accommodation for 18 cases.

In 1954, 34 cases were admitted, 6 still being in residence at the end of the year.

During the year it was decided that the scope of types of cases for admission to the Hostel should be widened to include, in addition to unmarried women, married women who are living apart from their husbands, widows or divorcees, and married women living with their husbands where temporary removal from their homes might help in solving the family problem arising from what has occurred. In addition, it was decided that a woman who is expecting or has recently had a legitimate child and has been deserted by her husband or is homeless, i.e., having been evicted, etc., and whose object in seeking admission is to find temporary living accommodation, might be admitted providing that —

- a vacancy is readily available, i.e., that there will be no question of the preclusion of a case from the Administrative County coming within the categories it is agreed can properly be received;
- (2) the maximum period of stay shall be two months before confinement and two months after the baby is born, or, if the confinement has already taken place, until the child is two months old;
- (3) a case shall not usually be accepted where it is likely the period of stay will be short, i.e., not exceeding one week. In these instances the Welfare Services Committee will provide accommodation;
- (4) the patient is suitable for admission in every way, has no detrimental habits such as uncleanliness, abusiveness, drunkenness, etc., which would be likely to cause disturbances in the Hostel. It is agreed that women possessing such traits would be found accommodation by the Welfare Services Committee.

Furthermore, the Committee resolved that an unmarried or other woman with an older illegitimate child or children who has been forced to leave home on its or their account be not admitted and that no child be retained after the age of two months.

PREMATURITY.

(2)

The following table gives particulars of the number of premature infants who were born during 1954 :---

(1) Number of Premature Live Births Notified.

(a) In hospital					 568
(b) At home					 359
(c) In private Nu	ursing h	omes			 11
		To	tal		 938
Number of Prematu	re Still	births	Notifie	d.	
(a) In hospital(b) At home(c) In private nu					 114
(b) At home					 65
(c) In private nu	rsing he	omes	•••		 2
		То	tal		 181

RE	Born	in ing home	1	-	-	1	5
PREMATURE		Born at home	30	15	4	16	65
PRU	Born	in hos- pital	43	36	20	15	114
	sing d t to day	Sur- vived 28 days	1	1		1	1
1000	Born in nursing home and transferred to hospital on or before 28th day	Died within 24 hrs. of birth			1		1
	Borr ho tran hos befo	Total	T	T		1	1
20	sing ursed ere	Sur- vived 28 days		1	1	7	6
11-21 0-61 32-61	Born in nursing home and nursed entirely there	Died within 24 hrs. of birth			1	1	1
SHT	Borr home ent	Total	1	1	5	œ	11
PREMATURE LIVE BIRTHS	e and to day	Sur- vived 28 days	=	22	13	21	67
RE LIV	Born at home and transferred to hospital on or before 28th day	Died within 24 hrs. of birth	œ	9	5	-	17
MATUI	Born trau hos befo	Total	22	33	19	28	102
PRE	ome ed tome	Sur- vived 28 days	1	12	39	183	234
	Born at home and nursed entirely at home	Died within 24 hrs. of birth	7	9	61	· 1	16
	Bol ar entir	Total		21	41	188	257
	pital	Sur- vived 28 days	18	94	84	259	455
bas	Born in hospital	Died within 24 hrs. of birth	33	13	4	12	62
Sector 1	Borr	Total	71	120	95	282	568
	Wreight at hirth		3 lb. 4 oz. or less (1,500 gms. or less)	Over 3 lb. 4 oz. up to and in- cluding 4 lb. 6 oz. (1,500- 2,000 gms.)	Over 4 lb. 6 oz. up to and in- cluding 4 lb. 15 oz. (2,000- 2,250 gms.)	Over 4 lb. 15 oz. up to and in- cluding 5 lb. 8 oz. (2,250- 2,500 gms.)	TOTALS

NURSERIES AND CHILD MINDERS' REGULATION ACT, 1948.

At the end of 1953 premises were registered in two instances under the above-mentioned Act. No new applications were received and one of the nurseries ceased to be so registered during the period. At the 31st December, therefore, premises were registered in one instance only.

DAY NURSERIES.

The following table gives particulars of the Day Nurseries in operation in the Administrative County during 1954 :---

		No. of Approved Places		Chil on Re at er	No. of Children on Register at end of the year		Average Daily Attendance	
		0-2	2-5	0-2	2-5	0-2	2-5	
NEWCASTLE (Liverpool Road, Cross He	ath)	15	25	15	25	8.04	15.11	
STAFFORD (Riverside, South Walls)		25	25	13	33	15.0	18.0	
TIPTON (Toll End Road)		12	38	12	19	10.0	19.0	
BILSTON (Prouds Lane)		10	30	10	18	6.8	13.6	
WEDNESFIELD (Lichfield Road)		20	30	8	11	5.4	9.1	
WILLENHALL (Pinson Park)		25	25	34	27	24.1	16.5	

The Kidsgrove, Silverdale and Shepwell Green Day Nurseries were closed on the 30th April, 1954.

As has been stated in the previous Report, the County Council also accepted financial responsibility for 20 of the places provided in a Nursery owned by Messrs. Rubery, Owen & Co. Ltd., of Darlaston. The total number of places provided in this Nursery is 42, 10 being approved for children up to two years of age, the remaining 32 being for children aged 2–5 years.

The following are the details of the average daily attendance of children at this Nursery during the year :--

0-2 years	 	 1.4
2-5 years	 	 10.3

MATERNITY AND NURSING HOMES

The County Council are responsible for the registration and inspection of these Homes in the Administrative County.

The following are particulars of the premises registered during the year :---

Number of premises registered at end of year	10
Number of applications for registration granted	-
Number of Homes given up	-
Number of Homes with more than two beds	5
Number of Homes solely for midwifery and	
maternity cases	8
Number of Homes exempted from registration	2

MATERNAL MORTALITY

Until the 1949 Report it had been possible to include a table showing the mortality rate for the Administrative County giving deaths per thousand (live and still) births over a period of years. Figures, however, are not now given by the Registrar-General to coincide with the information previously shown, and the only information relative to the above heading received shows that there were 8 deaths during the year arising from pregnancy, childbirth and abortion. All of these occurred in Hospital.

In 1953 the number of maternal deaths occurring in the Administrative County was 15.

Of the number of cases attended by midwives or maternity nurses one death only was reported in accordance with the rules of the Central Midwives Board.

INFANTILE MORTALITY

Here again, until the Report for 1950 it was possible to include a table showing statistics over previous years relating to deaths from premature birth, congenital malformations, birth injuries and infantile diseases. The Registrar-General, however, has only defined one of the above-mentioned categories in his statistics, i.e., congenital malformations, and the number given under this heading is 64. The remaining causes mentioned above have not been classified.

During 1954, 50 deaths were reported by the midwives, having occurred whilst they were in attendance. Eight of these were due to feebleness and prematurity.

FAMILY PLANNING

The Family Planning Association maintains three clinics in the Administrative County, at Bilston, Stafford and Cannock. At Bilston the sessions are held at the Centre Health Clinic on Tuesday afternoons weekly, at Stafford each Thursday afternoon, at North Walls Clinic, and at Cannock at Church Street on the 2nd and 4th Thursday afternoons. A family planning clinic is held each Monday evening from 6.0 p.m. to 8.0 p.m. at the Infant Welfare Centre, Cross Street, in the County Borough of Burton-on-Trent.

CHILDREN NEGLECTED OR ILL-TREATED IN THEIR OWN HOMES

Full particulars were given in a previous Annual Report of the joint circular dated 31st July, 1950, of the Home Office, Ministry of Health and Ministry of Education, which is concerned with the action to be taken on the discovery of neglect or ill-treatment of children in their own homes. Periodical meetings with members of all interested Authorities, Societies, etc., are held by Medical Officers to Area Health Committees, who act as local co-ordinating officers on behalf of the County Medical Officer of Health, and good results continued to be obtained in many cases. During the year some 113 cases were considered and the necessary action taken wherever possible.

HOME NURSING SERVICE

At the 31st December, 1954, there were 78 whole-time general nurses, together with 75 part-time general nurses, 41 being also domiciliary midwives and 34 district nurse-midwives with part-time health visiting duties.

The principle of employment of male nurses in certain thicklypopulated districts, for the nursing of patients suffering from diseases which could be more appropriately nursed by a male nurse, and heavy nursing cases, was agreed in 1950, and by the end of 1954 six male nurses were in the employ of the County Council, being centred in Newcastle-under-Lyme, Willenhall, Tipton, Wednesbury, Brierley Hill and Cannock. These are included in the figure of 78 whole-time general nurses.

As previously stated, the combined appointments are in those rural districts where the scattered population makes it impossible to separate general from midwifery work without creating districts too large to be practicable for either service.

Of the foregoing staff, 117 were car users, 4 had autocycles, two used cyclemasters and one a motor-cycle, the remainder using ordinary cycles for their work.

During the year, 328,960 home visits were made by the nurses, the number of cases attended being 14,795.

The supervisory duties are undertaken by four Supervisors who are also Supervisors of Midwives and Health Visitors.

MIDWIVES' SERVICE

The following are particulars of the midwives practising at the end of 1954 :---

Number of midwives em	nployed	by the		(i reli (S.)	165 including 3 ef midwives) R.N., S.C.M. S.C.M. 76).
Number of midwives in ing midwives emplo					
Domiciliary					14*
In Institutions					8
Number of midwives Management Comn			Hos	pital 	66

*In addition, six out-of-area midwives notified, but of these only one took any cases.

The following table shows the number of cases dealt with by the midwives in the area of the Local Supervising Authority during the year :—

HE AREA			Cases in Institutions	8	1		3,805	150	3,963
WIVES IN T			Totals	7,034	1	I	-	82	7,116
DED BY MID E YEAR	8	booked	Doctor not present at time of delivery of child	3,346		1		10	3,356
NUMBER OF DELIVERIES ATTENDED BY MIDWIVES IN THE AREA DURING THE YEAR	Domiciliary Cases	Doctor booked	Doctor present at time of delivery of child (either the booked Doctor or another)	1,246				28	• 1,274
OF DELIVE	I	Doctor not booked	Doctor not present at time of delivery of child	2,324	. 1			42	2,366
NUMBER		Doctor ne	Doctor present at time of delivery of child	118		1		2	120
) Midwives employed by the Authority	 Midwives employed by Voluntary Organisations : (i) Under arrangements with the Local Health Authority in pursuance of Section 23 of the National Health Service Act, 1946 	 (ii) Otherwise (including Hospitals not transferred to the Minister under the National Health Service Act) 	Midwives employed by Hospital Management Committees or Boards of Governors under the National Health Service Act) Midwives in Private Practice (including Midwives employed in Nursing Homes)	TOTALS
				(a)	(q)		(0)	(q)	

Of the midwives employed by the Authority, 127 were car users, seven had autocycles, one used a Bond Minicar, one used a motorised cycle, the remainder using ordinary cycles for their work.

(These figures include the details of the transport of district nursemidwives which are also included in those relating to the Home Nursing Service.)

As mentioned in the section of this Report relating to Home Nursing, the Supervisors' duties also include supervision of that staff and, in addition, inspection of health visitors, school nurses and general nurses. During the year 1,442 visits and interviews were undertaken for midwifery matters.

Since the Act came into operation the names of 115 midwives have been removed from the roll in consequence of action taken by the Local Supervising Authority. In the year under review no such action was taken.

No applications were received during the year from independent midwives for compensation for loss of practice consequent upon suspension from duty, they themselves not being in default, after contact with infection.

Particulars	of the	notifications	by	midwives	for	the	last	fifteen	
years are given	in the f	ollowing table	:						

Year	*No. of Births attended by Mid- wives	Medical Aid Notic e s	Still- births	Death of Mother	Death of Child	Contact with Infec- tion	Laying out the Dead	Artificia Feeding
1940	8,714	3,822	206	8	176	157	31	253
1941	9,101	3,966	220	8	187	151	38	280
1942	9,325	3,811	214	87	161	118	28	331
1943	9,190	3,546	172	3	159	125	17	374
1944	9,136	3,482	143	8	181	108	21	484
1945	8,159	3,259	133	85	119	113	14	460
1946	8,526	3,248	164	5	151	94	22	474
1947	9,375	3,358	167	4 5	127	125	18	568
1948	8,071	3,375	199	5	130	87	20	728
1949	6,520	1,767	146	5	81	82	21	616
1950	6,586	1,376	172	2	89	85	16	655
1951	5,909	1,467	161	1	67	85	20	709
1952	5,252	1,375	160	4 5	69	86	19	728
1953	5,895	1,290	148	5	48	60	21	764
1954	5,722	- 1,225	146	1	50	51	17	744

* Including midwifery cases in Private Maternity Homes

The percentage of doctors' calls to the number of births attended by midwives was 21.4. The following figures show the causes which occasioned the sending for medical assistance :---

PREGNANCY :

	Albuminuria Blood D		• ;				20
	Blood Press			•••	• •		3
	Hæmorrhage Loss of Bloo	d Ante-pa	itum	••	•••	• •	30
	? Presentati			•••			$\frac{1}{2}$
	Threatened .						23
	Unsatisfacto			genera	al hea	lth.	71
				0			
	Tot	al					150
LABOUR	enten viere der						
	Abnormal Pr	recontatio					00
	Abortion			••	• •	• •	28
	Delayed or I	Difficult I	abour	•••		• •	39 104
	Hæmorrhage					•••	7
	Hæmorrhage	Post-par	tum				42
	Inertia						16
	Inertia Lacerated Pe	erineum					381
	Premature L						16
	Prolapse of (4
	Retained Pla			oranes			33
	Unsatisfactor	ry Condit	10N		••		56
	Tot	al					
	100	di		22	::	• •	726
LYING-I	N :						
	High Temper	rature					56
	Inflamed and			•••	••	•••	13
	Unsatisfactor Unusual Swe			••		• •	59
	Unusual Swe	ning of D	leasts			•••	1
	Tota	al					129
					•••		
CHILD :							
	Asphyxia						12
	Convulsions						3
	Deformities						6
	Feebleness ar	nd Prema	turity				39
	Hare Lip and						2
	Inflamed and	Discharg	ging Eye	es			71
	Jaundice						5
	Pemphigus						$5 \\ 1 \\ 2 \\ 4$
	Rash						2
	Spina Bifida	··· ···		•••		• •	
	Unsatisfactor	y Conditi	on	•••	•••	• •	75
	Tota	ıl					220
	Gra	ND TOTA	L				1,225

Details of the number of notifications of sending for medical help during the financial year 1954-55 are given below :—

Number of notifications of sending for medical	aid	1,208
Number of claims received		199
Percentage of claims received to notifications		16
Total amount paid to doctors during the year		£560 10s. 6d.

WATERY, INFLAMED AND DISCHARGING EYES.

The number of cases notified during the year was 71. With three exceptions all were treated at home. Vision was unimpaired in each instance. Of the 71 cases, 67 were not severe. They include medical aid calls for all unsatisfactory eye conditions and not only notified cases of Ophthalmia Neonatorum.

STILLBIRTHS.

Number of Stillbirths reg	gistered					378
Reported by midwives						146
Causes of those reported b	y midw	ives:-	- inemi			
Albuminuria						5
Ante-partum Hæmo	rrhage					5
Anencephalic						2 5
Cord Prolapse						
Cord round Neck						6
Deformities						14
Diabetes Mellitus						1
Difficult Labour						14
Fall and Shock						5
History of Previous	Stillbir	ths an	nd Abo	rtions		1
Hydrocephalic						3
Intra Cranial Hæmo	orrhage					1
Knot in Cord						1
Maceration						28
Malpresentation						1
Placenta Prævia						1
Precipitate Labour						1
Premature						27
Spina Bifida						4
Torn Tentorium						1
Toxæmia						2
Unsatisfactory Cond	lition o	f Mot	her			2 5
Cause not known						13
					INTO BALLON	

GAS AND AIR ANALGESIA

At the end of 1954, 133 midwives employed by the County Council had received approved training in the administration of gas and air analgesia, and all existing midwives at present untrained will be trained as quickly as available vacancies at recognised training schools and staffing difficulties permit. At the 31st December, 1954, 133 midwives were equipped with the necessary apparatus; the number of cases which were dealt with was 2,413, when nurses were acting as midwives, and 751 in their capacity as maternity nurses.

In addition, midwives administered Pethidine in a further 2,491 cases when acting as midwives and in 768 cases when acting as maternity nurses.

PUERPERAL PYREXIA REGULATIONS

Puerperal Pyrexia is defined as any febrile condition occurring in a woman in whom a temperature of 100.4° Fahrenheit (38° Centigrade) or more has occurred within fourteen days after child-birth or miscarriage.

The total notifications from the Administrative County were 46; Urban Districts 36, Rural Districts 10.

The case-rate for Puerperal Pyrexia per thousand total births (live and still) for Staffordshire was 3.31, as compared with 17.74 for England and Wales.

The figure for Staffordshire is extraordinarily low and it is possible that there may have been incomplete notification of all cases of puerperal pyrexia, the definition of which term was revised and defined under the Puerperal Pyrexia Regulations, 1951.

As will have been observed from a previous table, the midwives summoned medical assistance for rises of temperature on 56 occasions. These were specially investigated and it was found that in 27 instances the unsatisfactory conditions were due to abnormalities which could be said to arise directly from childbirth.

HEALTH VISITING

At the 31st December, 1954, the number of Health Visitors was 84 whole-time and one Health Visitor Lecturer and 34 part-time Health Visitors.

The arrangements mentioned in the Annual Report for 1945 concerning the training of Health Visitors were continued, and five nurses received such training during the year.

The following table gives particulars of the visits paid by this staff during 1954 to expectant mothers and young children :

To Expectant Mothers				
First visits				
Total visits				7,963
To Infants under one year	r			
First visits				14,000
Total visits				63,517
Total visits to children	aged	1 year	and	
under 2 years				38,093
Total visits to children	aged	2 years	but	
under 5 years				69,545

Three hundred and thirty-three instances of insanitary conditions were reported by the Health Visitors to Local Medical Officers of Health during the period. LECTURES ON MOTHERCRAFT.

As in previous years lectures on mothercraft continued at Infant Welfare Centres and Ante-Natal Clinics.

Talks were given at 318 sessions of 33 Centres in various parts of the Administrative County, the total attendance being 3,970.

The Lecturer has been provided with a film projector and film strips which have made the talks more instructive and added greatly to the interest.

VACCINATION AND IMMUNISATION

In a previous Annual Report particulars were given of the arrange-. ments made for this service from the 5th July, 1948, as required under the National Health Service Act, 1946.

VACCINATION.

Every effort has continued to be made, through the medium of the midwife, health visitor and family practitioner during visits to the homes, Welfare Centres, etc., to encourage parents to have their babies vaccinated and the following are the particulars of the cases vaccinated or re-vaccinated during 1954. The figures for 1953 are given in brackets.

Age at date of vaccinat	tion	Under 1	1	2 to 4	5 to 14	15 or over	Total
Number Vaccinated		1,810 † (1,712)*	295 (365)	119 (167)	113 (142)	225 (307)	2,562 (2,693)
Number Re-Vaccinated		2 (6)	(3)	13 (13)	36 (65)	590 (593)	641 (680)

† 13.4% of the Births for 1954.

* 12.5% of the Births for 1953.

DIPHTHERIA IMMUNISATION.

Here again, every endeavour has been made during the year, through the medium of the Health Visitors, Welfare Centres, School Clinics, Teachers, etc., to ensure that the immunisation of children is carried out, and during 1954 the number immunised against diphtheria was as follows:

Under 5	 	 	 8,989
5—14 years	 	 	 3,973

Reinforcing doses were given in 15,653 cases.

During 1953 the numbers were 7,960, 2,599 and 8,882 respectively.

The following table gives particulars of immunisation in relation to child population at the 31st December, 1954 :---

Number of children at the 31st December, 1954, who had completed a course of immunisation *at any time before that date* (i.e., at any time since the 1st January, 1940).

Age at 31.12.54 i.e. Born in Year	Under 1 1954	1 to 4 1953–1950	5 to 9 1949–1945	10 to 14 1944–1940	Under 15 Total
Last complete course of injections (whether primary or booster) A. 1950–1954	892	29,693	49,443	27,951	107,979
B. 1949 or earlier	-		14,869	28,152	43,021
C. Estimated mid-year child population	13,550	53,650	142,200		209,400
Immunity Index 100 A/C	6.58	55-35	54.43		51.57

During 1954 there were 86 original notifications concerning suspected cases of diphtheria or of being carriers of the disease. Of these, sixteen were confirmed cases of diphtheria and four received a final diagnosis of diphtheria carrier. In addition, as the result of swabbing home contacts and an entire school in the Coseley Urban District, thirteen further carriers were discovered.

Of the 16 confirmed cases, three were in the 0—4 age group and had no record of immunisation. Eight were in the 5—14 age group and six of these had records of immunisation, of which only one had been immunised within the previous two years. The remaining five cases were of persons aged 15 or over and included a school girl of fifteen who had no record of immunisation.

Of the 17 carriers, four were under 5 years of age and 13 between 5 and 14 years. In the first age group two had no record of immunisation and two had been immunised within one year. All the thirteen carriers between 5 and 14 years had records of immunisation, viz :

Immunised	within	1 year		 	2
"	"	1—2 ye	ars	 	1
.,	"	2-3	"	 	6
,,	"	3—4	"	 	1
"	,,	4-5	,,	 	3

It will be seen that there were 11 confirmed cases of diphtheria relative to children under 15 years during the year (as compared with 55 in 1953).

The following table gives particulars of the incidence of, and mortality from, diphtheria amongst the child population of the Administrative County between 1950 and 1954 : DIPHTHERIA IMMUNISATION

INCIDENCE OF, AND MORTALITY FROM, DIPHTHERIA AMONGST THE CHILD POPULATION

ADMINISTRATIVE COUNTY 1950-1954

$ \begin{array}{ c c c c c c c c c c c c c c c c c c c$		Pol	Percentage of Total Population in Age Group	tage o n in A	f Tota ge Gr	dno		No. c of Dij	No. of Cases of Diphtheria	es ria		per 1	Attack Rate 1,000 of Population in Age Group	Attack Rate 000 of Popul n Age Group	e ilatior p		N froi	No. of Deaths from Diphtheria	Death	s ia		Case	Fatality per cent	Case Fatality Rate per cent.	
Children under 5 Immunised Immunised		1950		1952		1954	1950	1951	952 1	953 19			-		and the second s	954 19	50 19	51 195	32 195	3 195	4 1950	1951	1952	1953	1954
$ \begin{array}{cccccccccccccccccccccccccccccccccccc$	under if age :																			141-	110				
59.2 57.7 57.9 57.5 54.5 10 22 10 17 3 0.22 0.51 0.24 0.43 0.08 -1 2 100-0 100-0 100-0 100-0 18 23 12 23 3 0.24 0.31 0.17 0.33 0.04 -1 1 2 76.0 100-0 100-0 190-0 12 7 12 6 0.09 0.11 0.06 0.1 2 1 2 76.0 80-1 84-2 9 12 7 12 6 0.09 0.11 0.06 1 2 2 24-0 199 15-8 84-7 9 12 7 12 6 0.33 2.64 0.60 1 2 - - - - - - - - 1 2 - - - - - 1 2 2		40.8						1	61	9	-			07. 0.	-	- IEN		1	. 1		IIN	IIN	IIN	Nil 16.67	liN
		59.2								17					-	- 80.	1			1	IiN	4.55		20-00 17-65	IIN
76-0 $80\cdot1$ $84\cdot2$ $84\cdot7$ 9 12 7 12 6 $0\cdot09$ $0\cdot11$ $0\cdot06$ 1 $$ $$ $24\cdot0$ $19\cdot9$ $15\cdot8$ $18\cdot2$ $15\cdot3$ 10 69 13 20 2 $0\cdot33$ $2\cdot64$ $0\cdot60$ $0-09$ $$ $ 24\cdot0$ $19\cdot9$ $15\cdot8$ $18\cdot2$ $15\cdot3$ 10 69 13 20 2 $0\cdot33$ $2\cdot64$ $0\cdot60$ $0-15$ $$ $ 100\cdot0$ $100\cdot0$ $100\cdot0$ $100\cdot0$ 19 81 20 32 8 $0\cdot15$ $0\cdot23$ $0\cdot06$ 1 5 $ 100\cdot0$ $100\cdot0$ $100\cdot0$ $100\cdot0$ 100 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12	Total	100-0	100-0	100-0	100-0	100.0				23			-		-	-					IIN	4.35		16-66 17-39	IIN
$ \begin{array}{cccccccccccccccccccccccccccccccccccc$	Children aged 5 to 14 years :							-	1							1	-								
$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$		76-0	80.1		81.8			12	-						111	·05	-	1	1		11-11	Nil	liN	IIN	IIN
100-0 10-0 10-0 10-0 10-0 10-	Not Immunised	24.0					10	69		20		17.77			- 211	60.	1	1	1		IIN	7-25	IIN	10-00	IIN
62:9 66:4 69:7 68:8 72:1 17 13 9 18 6 0:13 0:09 0:06 0:13 0:09 1 - - 37:1 33:6 30:3 31:2 27:9 20 91 23 37 5 0:27 1:31 0:37 0:57 0:09 - 6 2 100:0 100:0 100:0 100:0 37 104 32 55 11 0:18 0:50 0:15 0:05 1 6 2		100.0	100.0	100.0	100.0	100.0	19			32						_	-	1	5		5.26	6-17	IIN	6.25	IIN
62:9 66:4 69:7 68:8 72:1 17 13 9 18 6 0:13 0:09 0:06 0:13 0:04 1 <td>All children under 15 years of age :</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>CO DA</td> <td></td>	All children under 15 years of age :							CO DA																	
$\begin{array}{c ccccccccccccccccccccccccccccccccccc$		62.9					17	13		18							-	1	- 1		5.88	IiN	IiN	5.56	Nil
$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$	Not Immunised	37-1								37		-				60-	1			1	Nil	6.59	No. of Concerns	8-70 13-51	Nil
		100.0	100.0	100-0	100-0	100-0	37		32								1	5	9		2.70	5.77		6-25 10-91	Nil

WHOOPING COUGH IMMUNISATION.

As mentioned in the last Report, a scheme of immunisation against whooping cough was commenced throughout the County Area in September of that year, operated both by general practitioners and also by the County medical staff at the Infant Welfare Centres.

The scheme continued to work satisfactorily during 1954 and 3,292 children were immunised initially, and reinforcing doses given in 10 cases, by staff at Infant Welfare Centres. A further 1,824 children were immunised initially, and 39 reinforcing doses were given, by general practitioners.

COUNTY AMBULANCE SERVICE

STATIONS.

During the year no change occurred in the status of the Ambulance Stations which continued to operate as follows :

24-hour Stations

Sub-Stations

Brierley Hill Cannock Coseley Darlaston Leek Lichfield Newcastle Stafford Uttoxeter Aldridge Biddulph Brownhills Cheadle Kidsgrove Rowley Regis Rugeley Stone Tamworth Tettenhall Willenhall

Towards the end of the year the building of a new combined Fire and Ambulance Station commenced at Cheadle and approval was obtained from the Ministry to the erection of a new station at Leek.

VEHICLES.

The repairs and maintenance of the ambulance vehicles as far as mechanical condition is concerned was dealt with as in recent years by the County Transport Department. During the year 18 Daimler ambulance vehicles were purchased to replace older types of vehicles and a total of 32 Daimlers are now operating out of a total of 92 vehicles. The Ambulance Committee considered replacements of some of the Commer 14 h.p. vehicles needed for Sitting Case Cars and decided upon the purchase of 20 Bedford/Lomas vehicles for which Ministry approval is awaited.

Owing to the increasing work in the Uttoxeter and Wednesbury Areas it was found necessary to increase the vehicle establishment at the Uttoxeter and Willenhall Stations by one vehicle at each of these Stations. MILEAGE, PATIENTS CARRIED, VEHICLES, ETC.

The table below indicates the mileage and the number of patients carried by each station during the year, together with the number of personnel and vehicles at the 31st December, 1954.

		K. 80	PERSO	ONNEL	VEH	ICLES	Амви	LANCES	SITTIN	G CARS
STATION		Hours Open	Station Officers	Driver/ Attendants	Amb.	S. Cars	Mileage	Patients	Mileage	Patients
Aldridge		16	1	7	2	1	37,996	4,354	18,547	1,900
Biddulph		8	1	3	2		29,959	4,017		
Brierley Hill		24	1	21	5	2	82,870	11,492	58,854	7,784
Brownhills	• •	16	1	11	3	1	54,465	7,971	18,932	2,739
annock		24	1	20	4 5 5	3	77,670	9,961	72,291	10,173
Coseley		24	1	21	0	2	93,760	15,438	34,564	9,003
Cheadle Darlaston		16 24	1	11	5		73,004	9,365	02.020	Ente
Kidsgrove		24	1	21 2	0	2	91,776 9,572	16,620 1,924	25,058 17,363	5,046 3,686
Leek		24	1	16	5	2	85,266	9,026	34,332	6,844
ichfield	•••	24	1	16	3	4	62,080	4,881	44,136	4,312
Newcastle		24	1	21	4	3	62,447	11,157	66,194	12,308
Rowley Regis		12	î	5	3	_	47,116	10,108	00,104	12,000
Rugeley		8	î	3	Ĩ	1	14,749	1.018	33,537	2,389
stafford		24	î	21	3	4	40,591	4,480	73,611	7,637
stone			î	. 3	1	1	21,541	2,596	21,342	2,385
amworth		8 8	1	3	1	1	11,943	1,155	24,117	2,145
fettenhall		8	1	3	1	1	10,852	2,189	14,405	2,401
Ittoxeter		24	1	16	4	2	46,665	2,810	37,271	2,584
Willenhall	•••	8	1	5	2	1	19,727	5,315	11,191	3,268
Totals		_	20	229	60	32	974,049	135,877	605,745	86,604

An analysis of the types of patients carried is given below :

Maternity	 	 3,776
Illness	 	 210,654
Accident	 	 4,398
Infectious	 	 3,069
Mental	 	 584
		222,481
		State of the second sec

The following is a comparison of the number of Stations, personnel, vehicles, patients carried and mileage at the 31st December, 1954, with the number at 31st December, 1953 :—

		31.12.53	31.12.54
24-hour Stations	 	9	9
Sub-Stations	 	11	11
Ambulances	 	57	60
Sitting Cars	 	33	32
Personnel	 	248	249
Patients Carried	 	210,801	222,481
Mileage	 	1,556,940	1,579,794

AGENCY SERVICE.

The arrangements made with the Women's Voluntary Service for a Hospital Car Service in the Area administered by the Stafford Area Health Committee continued throughout the year. Efforts have been made to obtain volunteers for this service in the Rowley Regis, Cannock and Newcastle Areas, but so far without success.

The following shows the number of volunteers, mileage run and patients carried by this Service in the Stafford Area :

			No. of		Patients
Month			Cars	Mileage	Carried
January		 	 7	1,381	40
February	7	 	 5	1,074	23
March		 	 5	707	16
April		 	 6	1,995	48
May		 	 6	2,009	33
June		 	 6	2,145	45
July		 	 6	1,794	44
August		 	 6	2,625	68
Septembe	er	 	 6	1,816	40
October		 	 6	1,387	31
Novembe		 	 7	1,357	34
Decembe	r	 	 6	2,252	46
				inter <u>nationa</u> ntain	and the state of
				20,542	468

FINANCIAL ARRANGEMENTS WITH OTHER AUTHORITIES.

No change occurred in the accepted charge of 2/- per mile for ambulance vehicles and 9d. for sitting cars between County Authorities, also the standard charge of 2/9 per mile for ambulances and 1/3 for sitting cars in respect of County Borough Councils, any variation in these rates being specially approved by the Committee.

PREVENTION OF ILLNESS, CARE AND AFTER-CARE

The following are particulars of the work undertaken during 1954 by the four Social Workers :---

			Partial payment by	Paid in full by	1
(1)	Number of patients supplied with	Free		patient	Total
	Number of patients supplied with extra nourishment	780	8	-	788
(2)	Number of patients supplied with clothing [†]	534	16		550
(3)	Number of patients supplied with				
(4)	bedding [†]	387	17	_	404
	convalescent home treat-	71	127	0	000
	ment	71	127	2	200

(5)	Number of patients supplied with appliances*	362		YINE Y	362
	Number of visits and interviews with patients	-	1	-	4,247
(7)	Housing (a) No. of cases recommended (b) No. of cases re-housed	-		-	246 105
(8)	No. of shelters supplied to T.B. patients	_	Mill-puly		105

*Includes invalid chairs, air beds, rubber rings, hot water bottles, articles for occupational therapy, bed rests, etc. The majority of such appliances were provided on loan.

[†] Includes cases where assistance was given through Social Workers by bodies other than the Staffordshire County Council, e.g., British Red Cross Society and other voluntary associations, National Assistance Board.

The provisions of this Section of the Act empower the Local Health Authority to recover reasonable charges from persons availing themselves of the services provided, subject to consideration of their means. The foregoing table indicates to what extent there was recovery or partial recovery of charges during the year.

In addition to the foregoing, the Social Workers are concerned with the provision of travelling warrants to relatives to enable them to visit patients in hospital in accordance with Ministry of Health Circular 85/49, particulars of which were given in the Annual Report for that year. During the year 27 applications for the facility were received. In 21 instances full travelling expenses were allowed and three were granted partial assistance. In the remaining three instances it was found the financial circumstances were such that the cases could not be considered to be necessitous ones, so that the County Council could not pay the travelling expenses involved.

CARE OF OLD PEOPLE

In the Report for 1953 particulars were given of the scheme inaugurated by the Health Committee for the visitation of old people and here again the Social Workers visit the old people and advise and assist wherever necessary. As mentioned previously, the latter have been classified in five categories as follows :—

- (1) Appropriately provided for as regards accommodation, money and domestic assistance or care from relatives; needing no, or only very slight, help from public sources; not lacking such social contacts as are appropriate; adequately nursed and treated at home if infirm, i.e., those about whom no anxiety need be felt.
- (2) In reasonable health and not without material necessities (e.g., food, shelter, clothing, ability to pay for household help), but lonely and lacking social contacts and relatives or friends able and willing to take an interest in them; i.e., those whose main need is sympathetic visiting and observation, old people's clubs, holidays and other outside interests.

- (3) Needing substantial assistance from public and/or voluntary services (e.g., domestic helps, home nursing, social workers, someone to shop and collect pensions, etc.), but who with such assistance could be adequately cared for at home.
- (4) "Chronic sick " or seriously demented requiring more nursing care, supervision and treatment than could be provided in their homes and whose real need is a hospital bed, though the domiciliary services may be required while a bed is awaited.
- (5) Those (whether sick or not) living in grossly insanitary conditions such as to require initial action by the District Medical Officer of Health to secure cleansing or removal.

Cases are brought to the notice of the Social Workers in various ways, i.e., Health Visitors, General Nurses, General Practitioners, Medical Officers of Health, Housing Welfare Officers, National Assistance Board, etc.

During the period under review some 654 homes were visited -206 to cases falling in Category 1, 95 in Category 2, 311 in Category 3, 25 in Category 4 and 17 in Category 5.

Seven hundred and fifty-five visits to these homes were paid — 329 of these were of a social nature, 219 to cases referred to County Council agencies, i.e., for domestic assistance, extra nourishment, nursing equipment, to the County Welfare Officer, etc., and 207 to outside bodies — National Assistance Board, Voluntary Associations, Red Cross, W.V.S., etc.

NURSING COMFORTS

The arrangements entered into with the British Red Cross Society and the St. John Ambulance Brigade with regard to the Nursing Comforts Scheme, as described in the Annual Report for 1952, continued to work satisfactorily. At the end of 1954, 67 Nursing Comforts Depots were in operation as compared with 62 at the beginning of the year.

ADMISSION OF CHRONIC SICK TO HOSPITAL

In a previous Report particulars were given of the scheme in operation in the area of the Stoke-on-Trent Hospital Management Committee whereby, in an endeavour to achieve the best means of using the beds available for the treatment of the chronic sick, the General Practitioners wishing to remove to hospital a chronic sick case resident in the County Area first applies to the Area Medical Officers so that the latter might overcome, if possible, the home difficulties by arranging the requisite facilities to enable the patient to remain at home or otherwise to refer the case to the Secretary of the Hospital Management Committee, confirming that such efforts had been unsuccessful and indicating the degree of urgency in each case.

During the year the Lichfield, Sutton Coldfield and Tamworth Group of Hospitals, who had decided to establish the same procedure, asked for the County Council's participation on similar lines and this was approved by the Health Committee. In both areas the scheme has proved most successful.

During the year the number of cases referred to Area Medical Officers was 349.

Of the total number referred, 201 were admitted to chronic sick hospital accommodation, four to Mental Hospitals, seven to Part III Accommodation and nine to General Hospitals. In 109 of these cases one or more of the County Council's Services were of help to the patients pending admission.

In 128 cases, therefore, the patients were cared for at home, the County Council's Services being of assistance in 67 instances, viz. :--

Nursing				 	33
Domestic Help				 	12
Social Welfare				 	4
Nursing and Domes	stic He	elp		 	9
Nursing and Social				 	3
Domestic Help and			re	 	4
Nursing, Domestic					2

OCCUPATIONAL THERAPY.

During 1951 an Occupational Therapist was appointed to undertake this work in the homes of tuberculous patients in the south of the County, the patients residing principally in the Administrative County within the Dispensary Areas of Wolverhampton and Wednesbury, and in addition she has been concerned with a small number of cases in the Dudley Dispensary Area and also has held weekly classes in both Wolverhampton and Wednesbury.

In view of the increases in numbers, however, and because waiting lists have developed, it was felt that there was justification for an extension of the scheme by the appointment of a second Occupational Therapist in the south of the County, the areas being divided appropriately. A second Therapist was appointed and took up duty in September last.

The scheme has proved very satisfactory and during the year 1,086 visits were paid to patients in their homes, the number of patients on the registers of both Occupational Therapists at the end of the year being 50 and 21 respectively.

The numbers of cases who attended the classes at Wolverhampton and Wednesbury during the year were 139 at Wolverhampton and 109 at Wednesbury.

In addition a class in handicraft was commenced in October last at Broadfield House Mothercraft Training Hostel, Kingswinford, conducted by the second Occupational Therapist on one afternoon weekly. The Matron of the Hostel has commented that the class has made an enjoyable break in routine and that the girls are interested and undertake some good handwork.

The average number of girls attending the class during the three months was 8.

DOMESTIC HELP SERVICE

Full particulars of the above-mentioned Service have been given in a previous Report.

The Service continued to expand further during the year and at the 31st December, 456 Domestic Helps were employed compared with 346 at the end of the previous year.

During the year 2,008 cases were attended compared with 1,393 in 1953.

MENTAL HEALTH SERVICES

(1) Administration.

A Mental Health Sub-Committee of the Health Committee is appointed to deal with the functions of the County Council relating to the Mental Health Service, the recommendations of this Sub-Committee being subject to the approval of the Health Committee.

The medical direction of the Mental Health Section is undertaken by the County Psychiatrist subject to the general direction of the County Medical Officer of Health. The post is filled at present by a Medical Officer with the following qualifications : M.B., Ch.B., D.P.M. He is employed part-time by the Health Committee, the remainder of his time being spent in duties undertaken for the School Health Service.

A Mental Welfare Officer is employed, her qualifications being a B.A. degree with a Secondary Teachers' Diploma. She is authorised to present petitions under the Mental Deficiency Act, 1913, and makes the necessary arrangements for the majority of the certifications under this Act.

No Psychiatric Social Workers are employed.

The four Mental Welfare Visitors are qualified as under :

- (i) Social Science Diploma.
- (ii) Social Science Diploma.
- (iii) R.M.P.A. Certificate, with five years' experience in industrial social work prior to appointment in 1948.
- (iv) Uncertificated teacher with 18 years' experience in mental health social work.

Seven Duly Authorised Officers are employed in a full-time capacity. In addition, one of the Mental Welfare Visitors undertakes relief duties at weekends and during annual leave periods of one of the regular officers.

The Occupation Centre staffs are as follows :

Supervisors. Two with the diploma of the National Association for Mental Health, two who hold the Recognition Certificate issued by the National Joint Council for Mental Health and three with no qualifications. Assistant Supervisors. One with the diploma of the National Association for Mental Health, one uncertificated teacher and nineteen who are unqualified, including two who are engaged on a temporary basis and one who is at present undertaking the course organised by the National Association for Mental Health with a view to obtaining their diploma.

In addition, three trainee assistant supervisors have been appointed and are at present under training, together with a fourth who works in a voluntary capacity.

An unqualified Home Teacher is employed in the sparsely populated districts in the north of the County where it is not feasible to provide Occupation Centres.

The number of certified mental defectives from the Administrative County at the 1st January, 1955, was as follows :

St. Margaret's Hospital, (Great	Barr				470
Stallington Hall					1.000	103
Other Institutions (include	ling S	tate In	nstitutio	ons)		182

Supervision of mentally defective patients on licence was carried out on behalf of Hospital Management Committees of the Birmingham Regional Hospital Board as requested by Medical Superintendents. During the year 72 patients were thus supervised, 38 from St. Margaret's Hospital, Great Barr Park, 8 from Stallington Hall, one from Burton Road Hospital, one from Andressey Hospital, 5 from Monyhull Hall, one from Chelmsley Hospital and 18 from out-county authorities. Six patients on licence were discharged from their orders during the year, four were returned to hospital and one died. Approximately 227 reports on the home conditions of defectives who were seen by Visiting Justices for renewal of their Order were submitted after investigation of the circumstances in each case. On 31.12.54 there were 45 defectives on licence under supervision from Staffordshire Hospitals and 14 on licence from other counties.

It has been arranged with the Medical Superintendents of two of the Mental Hospitals in the County (St. Matthew's Hospital, Burntwood and St. George's Hospital, Stafford) for those Officers of the County who undertake the after-care of patients discharged from Mental Hospitals to attend at those hospitals on the case conferences on the patients for whom they will be responsible on discharge. This is of great advantage not only to the patient, for whom it ensures continuity of treatment and care, but also to the Officers concerned, as it enables them to be briefed in the specific problems regarding each patient.

No duties have been delegated to Voluntary Associations although the Staffordshire Association for Mental Welfare is responsible for the financial aspects of the annual holiday provided for the defectives attending Occupation Centres towards the cost of which the County Council makes a grant. This Association has Sub-Committees attached to each Centre which raise funds locally towards the cost of such holidays and other social amenities. Whenever possible one member of the County Occupation Centre staffs is seconded each year to attend the course for the diploma of the National Association for Mental Health and one Assistant Supervisor is attending the 1954/55 course. The trainee scheme mentioned in the 1952 report is now in full operation. Two trainees were engaged in September, 1953, and have since been receiving training in the Occupation Centres at Newcastle and Bilston. The vacancy which existed at the end of 1953 for a trainee assistant supervisor at the other Centre selected for training purposes, Lichfield, has now been filled.

The usual four-day residential refresher course for Occupation Centre staffs was held in April this year at Walton Hall Special School and 25 members of the County staff attended, together with 13 students from outside the Administrative County. The National Association for Mental Health did not this year organise a residential refresher course, but held an intensive one-day course at Manchester to which five members of the County staff were sent.

Although authorisation has been given for the attendance of Mental Welfare Visitors and Duly Authorised Officers on Refresher Courses it has for some time been impossible to arrange for this due to there being no suitable courses available.

(2) ACCOUNT OF WORK UNDERTAKEN IN THE COMMUNITY.

(a) Under Section 28, National Health Service Act, 1946. Prevention, Care and After-Care.

During the year 425 new cases were referred for preventive care and after-care to the Social Workers in Mental Health. In all, 1,495 visits of after-care were made by these Duly Authorised Officers and at the end of the year 249 cases remained on the registers. An increase is again shown in the number of new cases referred.

It is appreciated that considerable scope exists for increased attention to the preventative aspects of mental health.

(b) Under the Lunacy and Mental Treatment Acts, 1890–1930, by Duly Authorised Officers.

One thousand, five hundred and eighty-three cases were referred to the Duly Authorised Officers under the Lunacy and Mental Treatment Acts. They were dealt with as follows :—

Voluntary cases under Section 1 of the Mental	
Treatment Act	413
Temporary cases under Section 5 of the Mental	
Treatment Act	3
Three-day Orders under Section 20 of the	
Lunacy Act	320
Summary Reception Orders, Secs. 14-16 of the	
Lunacy Act	301
Fourteen-day Orders Section 21 (1) of the	
Lunacy Act	149

Reception Orders on Petition Sections 4 an	1d 5	
of the Lunacy Act		2
Urgency Orders Section 11 of the Lunacy	Act	2
Admitted to chronic sick hospitals		37
Referred to Welfare Services Committee		13
Other disposals		6
Cases seen in which no action was taken		337
		1,583

Again it is noted that the proportion of cases dealt with on Summary Reception Orders remains low and an increase is shown in the percentage admitted as voluntary patients. The figure shown under Section 1 of the Mental Treatment Act refers only to cases in which the Duly Authorised Officers were concerned and not to the total admissions under this Section.

(c) Under the Mental Deficiency Acts, 1913-38. Ascertainment.

Unde	r age 16			Total
Male	Female	Male	Female	Total
37 1 8 	$\frac{26}{5}$			63 29 15 2 18
10 <u>1</u> 10	1	1	3	5
0076				-
	Male 37 1 8	$ \begin{array}{c} 37 & 26 \\ 1 & - \\ 8 & 5 \\ - & - \end{array} $	Male Female Male 37 26 - 1 - 17 8 5 2 - - 1	MaleFemaleMaleFemale 37 26 $ 1$ $ 17$ 11 8 5 2 $ 2$ 2 7 7

Particulars of cases reported during the year 1954 :---

The number of cases in the community awaiting removal to institutions on 31-12-54 was :---

Und	er 16	16 an	nd over	
Males	Females	Males	Females	Total
35	27	26	25	113

Guardianship.

On the 31st December, 1954, there were five defectives under statutory guardianship — four males and one female. All attend Occupation Centres and are regularly visited. In addition supervision is carried out on behalf of another Local Health Authority in respect of one of their cases under guardianship at present residing in Staffordshire. Grants from the National Assistance Board have relieved the financial stringency, which formerly necessitated a number of guardianship orders to secure adequate maintenance for the defectives at home.

Supervision.

On the 31st December, 1954, the following mental defectives were under supervision :--

Statutory Superv	rision :—		Male	Female	Total
(i) Under 16 (ii) Aged 16	3 years of age years and over	··· ··	196 326	157 266	353 592
Voluntary Superv	vision :—				
(i) Under 16 (ii) Aged 16	3 years of age years and over		$\frac{3}{262}$	4 250	7 512
			787	677	1,464
				the second se	

Out of a total of 1,464 cases, 35.5% are under voluntary supervision.

Five thousand, five hundred and sixty domiciliary visits and interviews by the four Mental Welfare Visitors took place during the year. In addition, 15 visits were paid to the homes of educationally sub-normal children at the request of the County Education Authority.

Eight defectives appeared before Courts of Law during the year; of these five were admitted to institutions, three under Section 9 and two under Section 8 of the Mental Deficiency Act, 1913. Petitions for orders under the Mental Deficiency Acts were presented in the case of 38 alleged defectives in the County and twelve on behalf of other Authorities.

Two defectives were admitted to institutions under Section 3 of the Mental Deficiency Act as "placed" cases without an order, and two were sent to Voluntary Homes, making a total of 47 vacancies offered by the Birmingham Regional Hospital Board for County Cases in the year.

At the close of the year there were 113 defectives awaiting beds in institutions and, in addition, 10 who had been admitted to Mental Hospitals pending transfer to Mental Deficiency Institutions. The question of the lack of vacancies in Mental Deficiency Hospitals for even the most urgent cases is one which makes for great difficulty in carrying out satisfactory supervision in the community. On more than one occasion an elderly defective has suddenly been bereft of care and left without a home because of the death of the relative who has always looked after him or her, or through the serious illness of such relative. Whereas under the Lunacy Act a bed must be made available for a patient in these institutions, no such provision is certain for a mental defective in his extremity under the Mental Deficiency Act, and in so

far as these circumstances are bound to befall a number of individual defectives, some special provision for them is imperative, for where parents have borne the burden of the care of a backward child to the end of life, the State would seem to have a special obligation to take on the responsibility of adequate care for the defective's remaining years. The waiting list is a long and sad one, but it would be longer were it not for the domiciliary supervision carried out by the four Mental Welfare Visitors who pay regular visits to the homes generally each quarter. Through their efforts advice is given to parents and the defectives when things seem to be going wrong regarding the special care needed by the defective. Personal effort is made to find the right employment or training for the individual as the case may be, and the help of others is enlisted in regard to physical care, housing difficulties, employment, National Assistance and other problems as they arise. It will be realised that close co-operation between the visitors and Occupation Centres' staffs is most valuable in the interests of the defectives ; the visitors do much to win the confidence of parents in sending their children to Centres in the first instance when they have received the shock of knowing that their child must be excluded from the ordinary school. To advise institutional care is always the visitor's last resort when every effort to help the defective to remain in the community has failed.

Training.

The number of Occupation Centres in the County Area is unchanged (7) and the Home Teacher continues to operate over a wide area around Leek in North Staffordshire. The particulars are as follows :—

		No.	on Registe	r
Centre	2		31.12.54	Staff at 31.12.54
Stafford			17	Supervisor and one assistant.
Cannock			22	Supervisor and one assistant.
Bilston			60	Supervisor, four assistants and two trainees.
Kingswinford			46	Supervisor and four assistants.
Tipton			32	Supervisor and two assistants.
Newcastle			53*	Supervisor, five assistants and a trainee.
Lichfield			46†	Supervisor, three assistants and a trainee.
			10	
			276	

Home Teacher centred on Leek .. 25

*Includes ten children from City of Stoke-on-Trent.

†Includes one boy from Warwickshire.

In addition, the County Council have arranged with Wolverhampton County Borough Council and with Burton-on-Trent County Borough Council for cases living near to those Authorities' Occupation Centres who cannot reach a County Centre from where they live to be admitted to the Out-County Centre. At the end of the year three cases were maintained in Wolverhampton Centre and two in Burton-on-Trent. In order to provide suitable training for the adult defectives living in the north of the County, the Stoke-on-Trent City Council were approached with a view to places being offered at their Adult Training Centre in Hanley. Reciprocal arrangements have been made whereby children from the City are admitted to Newcastle Occupation Centre and twenty older defectives from the Administrative County are admitted to the City Adult Training Centre. At the end of the year we were maintaining the full agreed number of cases at the City Centre — 20.

The general policy of separate provision for adult defectives has been accepted in so far as this is practicable, but at present numbers are sufficient only to warrant the establishment of an Adult Centre to serve the south of the County. Suitable premises for this Adult Centre have now been found and work is at present in progress on structural alterations. The Centre will be in operation next year and initially will accommodate 40 defectives aged 16 years and over ; it is anticipated that eventually 60 places will be available. The Centre is situated at Shepwell Green, Willenhall - the premises were formerly used as a Day Nursery and after conversion should be most suitable for use as an Adult Centre. Indeed it is extremely unlikely that any other existing building would serve the purpose as well even if an alternative building could have been found. Property of the desired type proved to be unobtainable in the area to be served by the new Centre and it was most fortunate, therefore, that approval was forthcoming for the adaptation of the former Day Nursery.

There has been no change in the buildings from which the Centres operate during 1954. The accommodation for Tipton and Stafford Centres continues to give anxiety, but work has commenced on the building of a new Centre in Rowley Regis which will replace the one at Tipton and it is anticipated that the Centre will be in operation early in 1956. Approval has been obtained for a new Centre to be erected in Stafford and the site chosen, but the final plans have not yet been drawn up.

Summer holidays of one week's duration were arranged in cooperation with the Staffordshire Association for Mental Welfare for pupils attending Occupation Centres as follows :—

Centre	Address	Date	Pupils
Newcastle	Eastwood Grange, Ash-	EPULSET	
	over, Derbyshire	May 14-21/54	37
Kingswinford	Brynteg, Rhyl	May 21-28/54	18
Kingswinford	Brynawelon, Rhyl	May 21-28/54	12
Cannock	Brynteg, Rhyl	May 28-June 4/54	18
Bilston			15
Bilston	Brynawelon, Rhyl	May 28-June 4/54	5
Stafford		May 28-June 4/54	5
Lichfield	Havelon, Kinmel Bay	June 18-25/54	20
Tipton	Havelon, Kinmel Bay		20

Similar arrangements to those made in 1953 were made in 1954 for pupils attending Occupation Centres to have a week's holiday in the care of the Staff of the Centre each attended. Pupils from the Newcastle Centre visited Derbyshire. Groups from the other six Centres went to Rhyl.

It was most gratifying to hear from all proprietors that because of their good behaviour the children would be welcome to stay again on a future occasion, a tribute to the members of the Centre Staffs for their good training of the children and the able way in which they looked after them.

The cost of the holidays was met from contributions by the parents, donations from the Centre Committees of the Staffordshire Association for Mental Welfare and from the Health Committee.

The day-to-day administration of the Centres and appointment of their staffs is the responsibility of the Health Committee of the Area in which the Centre is situated. The majority of the Area Health Committees have appointed a representative to serve on the local Centre Committee of the Voluntary Association. The Parents' Association at Newcastle Centre continues to do good work and a similar Association has now been formed at Bilston Occupation Centre. All Centres have been inspected by the Board of Control.

The Home Teacher has continued to give weekly or fortnightly lessons to the 25 defectives on her register during the school terms, travelling by car 6,180 miles during the year. None of the defectives she visits could reach a Centre from the remote villages of North Staffordshire in which they live. The painstaking and conscientious work done through these visits makes the service well worth while, although the travelling involved is arduous and in some weathers impossible. Eight hundred and one visits were made by the Home Teacher during the year.

The Social Club opened in April, 1952, and held since that time at Bilston Occupation Centre was closed in October, but it is hoped that it will prove possible to have a similar organisation attached to the Adult Industrial Occupation Centre.

EPILEPTICS AND SPASTICS

The following are particulars of the known cases of epilepsy and cerebral palsy from the Administrative County at the 31st December, 1954 :---

EPILEPSY.

Adults

No. in Part III Accommodation		12
No. in own homes		46
No. chargeable to the Authority	in	
colonies outside the County		26

Chi	ldren between the ages of Epileptics	f 2 and	15 ye	ars			
	At Special Schools				6	(4 boys 2 girls)	
	Awaiting admission to At ordinary schools	o Specia	d Sch	ools 	103	(50 boys	
	Home Tuition				3	53 girls) (2 boys 1 girl)	
	At home without 7 school)	fuition 	(i.e. 	pre- 	5	(1 boy 4 girls)	
					117	(57 boys 60 girls)	
	Epilepsy with other ma	ajor defe	ects				
	At Special Schools				14	(10 boys 4 girls)	
	At ordinary schools					(15 boys 4 girls)	
	E.S.N. Pre-school	••	•••		2	(1 boy 1 girl)	
	E.S.N. on Home Tuit	ion	•••		3	(2 boys 1 girl)	
	Spastic (pre-school) ? Ineducable	::	 	 	1 4	(boy) (2 boys 2 girls)	
					43	(31 boys 12 girls)	160
Chil	dren under 2 years of a	ge					
	No treated in hospital No. treated by genera		 tioner	 s	$\frac{2}{2}$		
					4	(2 boys 2 girls)	4
	ntal defectives under statu prvision with the additu ppsy						
	No. under 16 years				34	(18 male	
	No. 16 years and over				59	16 female) (28 male 31 female)	
					93	(46 male	93
						47 female)	
							341

CEREBRAL PALSY

Adults

No. in own homes

. .

. .

Children 2–15

Children 2-10				
At Special Schools for Cerebral Palsy	• • •	20	(12 boys	
At Special Schools for other causes		7	8 girls) (3 boys	
Awaiting admission to Special Schoon account of Cerebral Palsy	ools	26	4 girls) (15 boys	
Awaiting admission to Special Schoon account of other causes	ools	4	11 girls) (1 boy	
Attending ordinary schools		39	3 girls) (20 boys 19 girls)	
Attending private schools	•••	2	(1 boy 1 girl)	
Having tuition at home		10	(7 boys	
Without tuition at home	••	7	3 girls) (5 boys 2 girls)	
Awaiting action under Education A 1944, Section 57(3)		7	1	
Under investigation		1	5 girls) (1 girl)	
		123	(66 boys 57 girls)	123
Children under 2				
No. treated in hospital No. treated by general practitioners	· · ·	5 2		
		7	(4 boys 3 girls)	7
Mental defectives under statutory and volunt supervision with the additional handicap cerebral palsy				
No. under 16 years	::	58	(25 male	
No. 10 man and and		50	33 female)	
No. 16 years and over		55	(24 male 29 female)	
No. 16 years and over				111

Of the 93 persons suffering from epilepsy in addition to mental defect, 20 attend Occupation Centres and one has Home Teaching.

Of the 111 defectives suffering from spastic conditions, 28 attend Occupation Centres and two have Home Teaching. Nineteen persons in these two totals suffer from both epilepsy and cerebral palsy.

With regard to adults, the figures given relate to those registered by the County Welfare Department under the scheme relating to permanently handicapped made under Section 29 of the National Assistance Act, 1948, and those chargeable in Part III Accommodation.

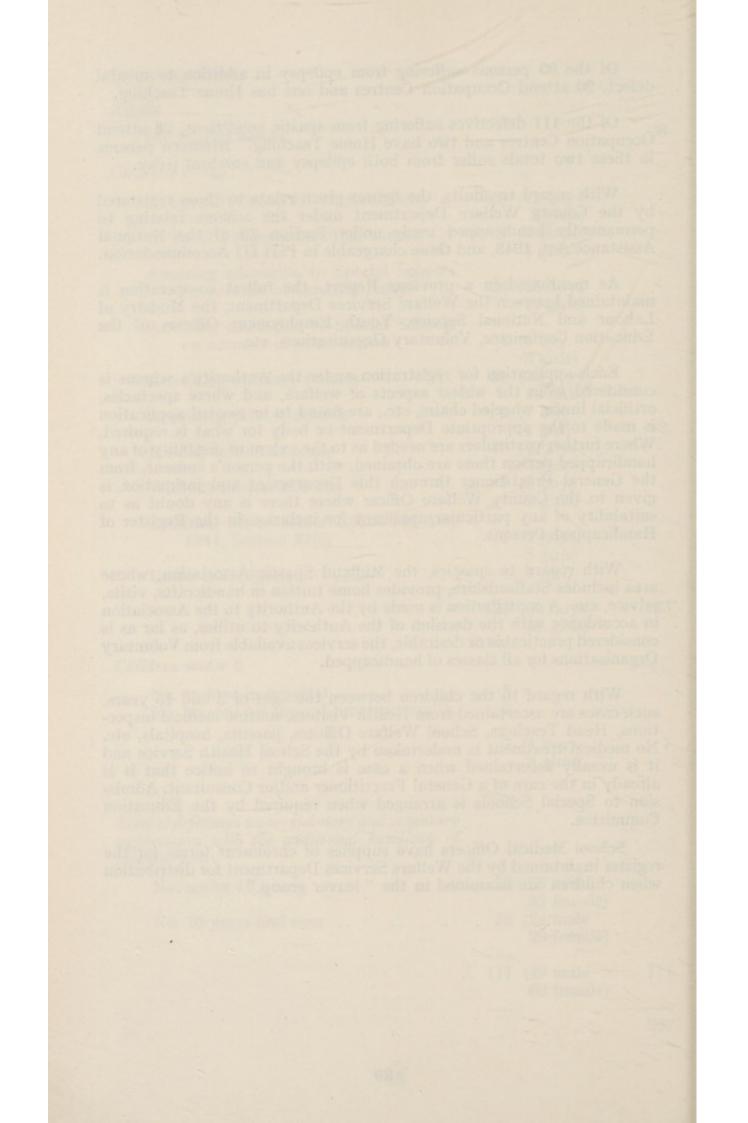
As mentioned in a previous Report, the fullest co-operation is maintained between the Welfare Services Department, the Ministry of Labour and National Service, Youth Employment Officers of the Education Committee, Voluntary Organisations, etc.

Each application for registration under the Authority's scheme is considered from the widest aspects of welfare, and where spectacles, artificial limbs, wheeled chairs, etc., are found to be needed application is made to the appropriate Department or body for what is required. Where further particulars are needed as to the extent of disability of any handicapped person these are obtained, with the person's consent, from the General Practitioner through this Department and intimation is given to the County Welfare Officer where there is any doubt as to suitability of any particular applicant for inclusion in the Register of Handicapped Persons.

With regard to spastics, the Midland Spastic Association, whose area includes Staffordshire, provides home tuition in handicrafts, visits, advice, etc. A contribution is made by the Authority to the Association in accordance with the decision of the Authority to utilise, as far as is considered practicable or desirable, the services available from Voluntary Organisations for all classes of handicapped.

With regard to the children between the ages of 2 and 15 years, such cases are ascertained from Health Visitors, routine medical inspections, Head Teachers, School Welfare Officers, parents, hospitals, etc. No medical treatment is undertaken by the School Health Service and it is usually ascertained when a case is brought to notice that it is already in the care of a General Practitioner and/or Consultant. Admission to Special Schools is arranged when required by the Education Committee.

School Medical Officers have supplies of enrolment forms for the register maintained by the Welfare Services Department for distribution when children are examined in the "leaver group."



TABLES

Table showing Population, Number of Persons per acre, Birth and Death-rates as well as the Death-rates at all ages and among Children under 1 year, and the Death-rates from Zymotic Diseases, Tuberculosis, Diseases of the Respiratory Organs, &c.

URBAN

		suc	Congenital		0.33	0.17	90-0	90.0	0.05	0.10	1	0.05	90.0	0.11	0.18	0.13
		pu	Nephritis a	0.16	1	0.08	0.12	80-08	0.05		60.0	60.0	0.18	0.21	1	0.13
ation		C 494	Other Disea Respiratory	0.25	1		0.18	90-0	0-47	0.10 0.15		0.05	0.30		60.0	
Popul			Pneumonia	0-16 0-25	0.33	0.34 0.17	0.53	0-26 0-06	0-37	0-22	0.30 0.12	0-32	0.42	0-16 0-26	0.18 0.09	0.38
000 of			Branchitis	0.25	0.66	0.76	0.71	69-0	0.37	19-0	99-0	0-95	10.1	0.26	0.46	0.38
Per 1,000 of Population	uselq	loən	1 tasayilsM	66-0	1.66	2.12	1.69	1.70	1.08	1-63	1.76	1.32	1.67	1.89	2.20	2.11 0.38 0.38 0.15
	ther	o 's	Tuberculosi	0-22		0.08	1	90.0	60.0	0.07	0.06	1	1	1	60.0	
			Tuberculosi Respiratory	0.10	1	0.08	0.18	0.14	0.19	0.19	0.30	0.36	0.12	0.11	I	0.20 0.04
-	20	tion	Diphtheria		1	1		1	1			!		1		
Zymotic	Mortality Per 1,000	Population	Cough Whooping	1	1	1		1	1	1	0.06			1	1	
Z	M	of	Measles			1	1	1			1	1-	- 1			0.01
000	,I Toq	69L	Mortality in Wortality in registered li	18	47	26	32	24	30	39	26	19	43	26	45	25
OAL	tered l	sin	Neo-natal A per 1,000 re births (Infa weeks of ag	11	47	21	20	16	17	30	12	6	25	17	41	18
	tactor	th i	Adjusted do	9.8	6.7	11.7	13.0	11.3	12.0	12.1	12.0	11.7	12.0	11.8	11.0	12.3
2	te per	nd er-re	Crude deatl	7.0	10.9	9.5	9.8	6.7	6.7	10.3	8.6	8.7	6.7	12.6	11.8	10-5 12-3
			Still-births, 1,000 of Po	0.38	0-33	0-93	0.44	0-39	0.28	0-51	0.48	0.50	0.54	0.47	0.64	0-37
À	drifider Birth	redu ənş	Adjusted L factor	13-6	13.3	16.2	14.6	14.5	16.1	15.0	13.7	13.1	15.3	12.5	19-3	15-9
	ation ber	nd	Live Birth- 1,000 of Po	14-5	14.2	16-5	16-4	15.1	6-91	15-6	14-9	14.4	16.8	12.0	20.1	16.1
	suos	neg	per acre Number of	3-4 14-5	4.5 14.2	1.8 16.5	18-1 16-4	8-4 15-1	3.4 16.9	5-0 15-6	10-6 14-9	14-4 14-4	4.1 16.8	4.4 12.0	3.0 20.1	8-0 16-1
ation	ages		Estimated 1954	31,440	3,020	11,770	33,810	49,350	21,390	41,090	33,530	21,990	16,760	19,040	10,930	70,970
Ponulation	at all ages		Census 1951 (Final)	29,171	3,165	10,896	33,458	48,966	21,489	40,917	34,397	22,012	16,229	19,356	10,619	70,036
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		ICT		:	:	:	:	:	:	:	:	:	:	:	:	:
		DISTRICT		Aldridge	Amblecote	Biddulph	Bilston	Brierley Hill	Brownhills	Cannock	Coseley	Darlaston	Kidsgrove	Leek	Lichfield	Newcastle

Deaths occurring during the year 1954 classified according to Diseases and Localities, together with Births occurring during the year.

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TRICT Still Bittles e 456 12 ote 456 12 oh 554 15 ote 554 16 ote 554 19 ote 554 16 ote 362 6 ills 362 6 on 317 11 on 237 11 on 237 11 on 2229 9 on 2229 9 d 2200 7 the 1140 266	səsi	Desths from all cau	219	33	112	333	477	208	423	288	192	163	239	129	743
TRICT 456 e 456 ote 456 ote 456 ote 456 ote 43 oh 194 oh 194 oh 194 oh 194 oh 194 oh 254 oh 243 oh 243 oh 230 oh 220 d 220 d 220 d 1140		Still Births	12	-	11			9	21	16	П	6	6	2	26
rrancr e ote bh k k wre d the		Live Births		43	194			362	-	498	317	282	229	220	1140
Distract Aldridge Amblecote Biddulph Biddulph Bilston Brierley Hill Brierley Hill Brownhills Cannock Cannock Cannock Coseley Darlaston Kidsgrove Leek Lichfield Newcastle	1	the liter	:	:	:	:	:	:	:	:	:	:	:	:	
Dist Dist Aldridge Ambleco Ambleco Biddulph Biddulph Biston Brierley Brierley Brownhil Brownhil Cannock Cannock Coseley Darlastoi Kidsgrov Leek Leek		RIC		te	-		Hill	lls				e			e
D Aldri Ambl Biddu Biddu Brierl Brerd Brow Canno Canno Canno Canno Leek Lichfi Lichfi Newc		ISI	dge	eco	lph	ų	ey	lida	ock	ey	stoi	TOV	:	ield	ast
N L K D C C B B B B F F I		A	drid	mbl	nbb	lsto	rierl	IMO.	unne	sele	arla	idsg	sek	chf	ewc
		2	A	A	BI	Bi	Bi	BI	Co	ŭ	D	K	L	L	Z

URBAN-continued

		Congenital Malformations	90.0	0.10	0.25	0.20	0.23	0.23	0.30	0.15	0.13	0.03	0.05	0.13	0.10		
	E BR	Nephritis and Nephrosis	0-08	0-10	0.13	0.12	0.12	0.15 (0.10	0.10	0.27	0-03	0.10	0.03	0-11	I	1
lation		Other Diseases Respiratory Sy	0.12	01.0	0.34	0-02	0.35	0.15	0.10	0.05	1	0.20	0.10	0-03	0.14	I	
Population		Pneumonia	0.35	0.10	0.29	0.17	0.35	86.0	0.50	0.25	0.40	0.37	0.05	0-39	0.32	0.50	0.49
,000 of	-	Branchitis	0.53	0.68	1.89	0.88	1.06	0.45	1.29	0-64	99-0	0-61	0.35	76.0	0-67		
Per 1,	uselo	Nalignant Neol	1.65	2.25	3-90	1.93	2.46	2.64	1.59	1.14	1.33	1.76	1.70	1-68	1.79		
	ther	Tuberculosis, o	1	1	1	-	1	1	1	0-03	1	90.0	1	1	0.04		
		Tuberculosis, Respiratory	0.12		0.29	0.10	1	0.23	0.20	0.20		0.37	0.15	0.13	0.18	1	EI
0	V 0	Diphtberia B.	1	1	1	1	9	1	1	1	1	1	1	1		0.00	0.00
Zymotic	fortalit er 1.00	Population Cough Whooping Diphtheria				1	1	1	-	1	-1	0-03	1	1	00-0	00-0	0.00
2	M	Measles	=1		21	1		1	-	-1		-	1	-	0.00	I	No I
000	per I,	Mortality in ch under one year registered live	21	64	43	31	36	44	33	30	10	22	10	34	29	29	24
SVI	(para)	Neo-natal Mort per 1,000 regist births (Intants weeks of age)	19	54	33	18	27	25	27	24	10	11	3	25	20	F	I
		Adjusted death comparability	0.11	11-0	30.2	12.7	18-9	12.2	11-4	10.1	11.4	2.11	6-7	12.6	12.5		351
3		Crude death-ra 1,000 of Popula	8.6	10.0	31.1	11.8	19.5	13-1	11.6	7-4	11.2	9.2	7.0	9-4	10.5	12-0	11.3
L	te per	still-births, Radiated and Population	0-37	0.29	0.42	0.49	0.23	0.15	0.50	0.48	0.13	0-40	0-55	0.45	0.43	0.44	0.35
		Adjusted Live factor factor	11.9	19-7	12.1	16.2	12.5	15.1	17-4	15.8	13.5	14.2	18.1	14.4	14.7	1	19 19
	ttion ber	Live Birth-rate	12.5	6.61	12.7	16.5	12.9	15.4	8.3	1.7	13.4	15.4	0.61	5.3	15.5	16.8	15.5
	-	per acre Number of pers	13-0 12-5	3-6 19-9	6.2 1	8-0 16-5	5.2 1	4.9 15.4	4.0 18.3	18-2 17-7	2.2	17.1	8-0 19-0	10.9 15.3	6.6 1	-	
	ages	Estimated 1954	49,120	10,240	23,860	40,940	8,520	13,270	10,060	39,350	7,530	34,710	20,020	31,000	653,710		umb yoi
Domination	at all ages	Census 1951 (Final)	49,402	8,525	23,114	40,263	8,299	12,889	7,743	39,382	7,447	34,759	17,418	30,696	640,648	1	I becom
	10	2 4 2		:	:	:	:	:	:		:	:	:	:	:	in 	esi- 000
		10	2:	:	8:	:	1:	8:	12:	8.	-	10025		-	ages	towns	vns, r on 25,
		DISTRICT	gis									A	P		Aver	e to	r tov ulati
		D	Rowley Regis	Rugeley	Sedgley	Stafford	Stone	Tamworth	Tettenhall	Tipton	Uttoxeter	Wednesbury	Wednesfield	Willenhall	Totals and Averages	160 large England	160 smaller towns, resi- dent Population 25,000 -50,000

	Homicide and operations of War	1	1.	1	1	1	1	1	1	1	i.	1	11	10
-	Suicide	0	-	3	10	1	4	63	3		3	00	00	74
-	All other Accidents	*	1	19	9	61	3	01	10	1	9	3	6	139
siua	Motor Vehicle Accid		-	61	9	c1	-	1	1	-	61	61	-	60 1
-	Ill-defined Diseases	_						1.01		4	-	-		
_	Malformations Other Defined and		20	200	38	28	25	16	35	-	27	20	32	870
	Congenital	3	-	9	80	61	3	3	9	-	-	-	4	67
'q3	Pregnancy, Childbir Abortion	1	1	-	-	1	1	1	-	1	1	1	1	4
	Prostate Prostate	61	1	61	61	01	1	-	4	61	3	1	-	45
siso.	Nephritis and Nephr	4	-	3	in	-	61	-	4	61	-	01	-	69
	Gastritis, Enteritis and Diarrhosa	-	-	61	1	1	-	1	3	I	61	61	-	32
	Ulcer of Stomach	4	1	1	6	1	1	-	01	-	5	61	10	83
-	Other Diseases of Respiratory System	9	-	00	-	3	01	-	61	1	1	01	-	94
-	Bronchitis	9	~	45	36	6	9	13	25	5	21	5	30	437
-			-	4	7 3	00	3	5 1	0 5	3		-		64
_	Pneumonia				_		-		-		2 13		- 12	28 206
-	Disease	6 1	5 2	28 2	14 3	2 1	0	4	30	1 1	9 2	6 1	00	258 2
-	Other Circulatory	-									-		-	1 2
	Other Heart Disease	100	16	165	117	41	28	14	50	16	48	14	42	1261
	Hypertension with Heart Disease	20	4	16	13	13	3	4	9	3	8	63	4	178
	Coronary Disease, Angina	43	10	41	63	12	14	13	25	15	34	10	26	688
-	Vascular Lesions of Nervous System	60	4	17	62	29	21	18	43	14	49	20	34	886
-	Diabetes Lesions of		1	8	3 6	8	6	1	61	3	1	-	3	588
si	Leukæmia, Aleukæm		-	1	-	-	1	1	I	I	1	61	-	21
Neoplasm	Other Malignant and Lymphatic Neoplasms	01	15	49	43	7	21	10	28	3	33	21	24	566
Neol	Uterus	10	1	ŝ	8	3	-	1	3	1	-	1	-	342
	Breast	10	1	15	11	1	3	T	4	61	4	io	ŝ	133
Malignant	Lung, Bronchus	19	5	11	14	7	3	4	9	1	6	3	10	198
M	Stomach	23	61	13	00	3	2	61	4	61	14	10	12	229 198
	Other Infective and Parasitic Diseases	1	I	1	-	1	I.	I	1	1	67	-	1	10
	Measles Measles	-	1	1	1	1	1	1	1	1	1	h	1	-
_	Acute Poliomyelitis	1	1	1	1	1	I	1	1	1	1	1	1	-
	Meningococcal	1	1	1	1	1	1	L	1	1	1	I	1	4
_	Mhooping Cough		1	1	1	1	1	1	1	1	-	1	1	3
-	Diphtheria	-	1	1	1	-	1		1	1	1	-	1	1
-	Tuberculosis, other Syphilitic Disease		-	1	1		1	-	-	1	10	-	1	25 8
-	Respiratory	19	1	-	4	1	3	61	00	1	13	3	-	15
-	Deaths under 4 week Fuberculosis,	-	II	10	61	3	in	10	17	1	6	1	12	03 1
-	Desths under 4 week	-	13 1	13 1	21 1	4	6	9	-	-	12	4	16 1	96 2
-		-			_			1	3 2	4		0		95 2
sə	Ceaths from all caus		102	742	484	166	174	11	293	84	321	140	1 292	2 68
_	sdill Births	118	33	10	20	61	67	ŝ	19	1	14	11	14	4 28
	adriiß svi.	616	204	304	674	110	204	184	695	101	535	381	474	10164 282 6895 296 203 115
	and	IS	:	:	:	:	:	:	:	:	:	:	:	:
	RICI	Reg					Ŧ	H		H	oury	ied	H	
	DISTRICT	Rowley Regis	Rugeley	Sedgley	Stafford	Stone	Tamworth	Tettenhall	Tipton	Uttoxeter	Wednesbury	Wednesfied	Willenhall	Totals
1		R	R	Se	St	St	T	Ĥ	F	þ	N	1	1	1

URBAN-continued

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	su	Congenital Malformatio	80.0	0.12	90-0	0-02	+	0-04	0.10	0.18	0.13	0.18	0.08
	p	Nephritis an Nephrosis					0-23		1	0.18	1		
			1	0.03	0-06	60-0	0.06	10	0.05	1	0.07	1	0.13 0.03 1.80 0.47 0.29 0.04 0.11
		Pneumonia	0.12	0.12			0-23	0-29	0-26	0.24	0.20	0-45	0-29
		Branchitis	0.55										0-47
use	cobr	Malignant N	1-66										1.80
161	110 '	Tuberculosis	1		L	0-02		1		1	1		0-03
T	4	Respiratory	0.16		0.18			0.04	1	0.30	0-07		0.13
	0 tion	Diphtheria	1	1	1	1	1	1	1	F	1	1	1
ortalit	opula	Cough Whooping	1	1	1	0.02	1	1	1	!	1	4	00-0
W	of H	Measles	1	0-03	1		1	1	12	13	1	1	0.00 0.00
er 1,	ar p	under one ye	27	29	44	26	36	17	23	27	30	30	28
I ber	n stu 191sta	per 1,000 rep	22	23	36	26	22	10	2	23	21	24	21
rate ctor	el ta	eomparted de	10.1	14.7	12-0	12.2	10-0	9-4	9.4	6-01	9.5	9-3	11-11
ion a	teing	Crude death 1,000 of Pop	9.1		11-0		10.4	8.9	7.8	9.8	9-6	9-1	10-3
ion Per	Rate	Still-births, 1,000 of Pol	0-63	0-39		0.19		0-41	0-57	0-24	0-67	0-36	0-43 10-3 11-1
drift Hilidi	tbsra	Adjusted Li factor	17.1	13.8	14-9	15.2	15.6	17-4	17-0	14-6	16.4	16-7	15.7
uor	avind	10,4 10 000'T	17.8	13.3	14.6	13.6	15.6	16.9	15.6	15.4	15.6	14.8	
IOSIO	er be	Mean area p Mean area p	2.2	1.8	4-3	2.0	2.3	1-7	4.1	3.7	2.1	5.1	2.6 15.1
ages		Estimated 1954	25,340	33,230	16,950	42,580	17,650	24,370	19,460	16,590	15,030	11,100	222,300
at all		Census 1951 (Final)	24,166	32,844	16,863	41,084	17,126	22,322	18,614	16,789	14,839	9,862	214,509
			:	:	:	:	:	:	:	:	:	:	
	TRICT		: 0					: 0	:		:		Averages
DISTE			Cannock	Cheadle	Leek	Lichfield	Newcastle	Seisdon	Stafford	Stone	Tutbury	Uttoxeter	Totals and Averages
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strater stle stle stle stle stle i ter i ls i ls			Live Births	452	441	248	577	275	413	304	256	235	164	3365	
DISTRIC: DISTRIC: Cannock Cannock Cheadle Cheadle Lichfield Newcastle Seisdon Stafford Stafford Stafford Stone Tutbury Uttoxeter Totals				8:	:	:	:	:	:	:	:	:	:		
Dist Dist Cannock Cannock Cheadle Cheadle Leek Lichfield Newcastl Newcastl Seisdon Stafford Stafford Stone Tutbury Uttoxete Totals			RICI					e					H		
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RURAL

Table showing the number of cases of certain Infectious Diseases notified in each sanitary area during the year ended 31st December, 1954, and the Attack-Rates per 1,000 of the population.

	2	-	
	10	5	
	Ē	2	
	1	5	

	Cases	Ĩ		-							,		-	
	Poliomy	3	1	-	-	-	61	3	1	67		61	1	1
Puerperal Pyrexia	s Rate	0.03	1	0.08	0.06	0.04	1	0.10	0.15	60-0		1	0.73	1
	Case	-	- 1	-	61	61		4	ŝ	61	1		8	1
monia	Rate	0.57	1	1.78	1.24	0.12	0.65	0.54	3.37	0.73	0.48	0.53	60-0	0.15
Pneumonia	Cases	18	1	21	42	9	14	22	113	16	8	10	1	11
sles	Rate	1.02	1	4.33	0-33	0.12	0.42	2.77	1.64	0.41	2.45	11.71	1	10.68
Measles	Cases	32	1	51	11	9	6	114	55	6	41	223	1	758
pelas	Rate	0.06	1	0.08	60-0	90-0	60.0	0.29	0.03	1		0.05	1	90-06
Diphtheria Erysipelas	Cases	5	1	1	09	3	5	12	1	1	1	1	1	4
heria	Rate	0.13	1	-1	0-03	1		1	0.21	1	1	1	I	1
Dipht	Cases	4	1	1	1	1	1	1	7	1	.	L	I	1
Whooping Cough	Rate	2.42	2.98	0.17	3.49	1.46	0.65	0.34	4.15	6.28	0.06	8.19	1	1.93
Whoopir Cough	Cases	76	6	63	118	72	14	14	139	138	1	156	1	137
let er	Rate	1.43	I	1.27	17-0	1.09	68.0	1-63	0.72	1.05	0.54	2.10	1	1-32
Scarlet Fever	Cases	45	1	15	26	54	19	67	24	23	6	40	1	94
a- noid	Rate (1	1		1	1	1	1	1	1	1	1	1	1
Para- Typhoid	Cases		1	1	1	1	-	1	1	1	1	1	1	
biot	Cases Rate Cases	1	1	1	1	1	1	1	1	1		1	1	1
Typhoid	Cases	1	1	1	1	1	1	1	1	1	1	1	1	I
lpox	Rate	1	1	1	1	1	1	1	1	1	1	I	1	1
Smallpox	Cases	I	1	1	1	1	1	1	1	1	1	I	1	
Estimated Population	b0	31,440	3,020	11,770	33,810	49,350	21,390	41,090	33,530	21,990	16,760	19,040	10,930	70,970
-	1	:	:	:	:	:	:	:	:	:	:	:	:	:
Distrator	1.000	Aldridge	Amblecote	Biddulph	Bilston	Brierley Hill	Brownhills	Cannock	Coseley	Darlaston	Kidsgrove	Leek	Lichfield	Newcastle

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URBAN-continued

eitif9	Poliomy Cases	1	1	+	1	1	1	1	1	1	33	1	I
peral	Rate	0.02	ł	Ĩ	0.15		1		0.03	1	1	0.15	1
Puerperal Pyrexia	Cases Rate	-		1	9	1	1		1		1	3	
nonia		0.02	1.	0.59	0.32	0.47	0.68	2.29	0.81	0.13	1.12	0.20	06-0
Pneumonia	Cases	-	1	14	13	4	6	23	32	-	39	4	28
	Rate	0.20	0.10	0.04	0.42	5.63	0.08	0.40	3.38	0.13	0.14	0.70	0-68
Measles	Cases Rate Cases Rate	10	1	1	17	48	1	4	133	-	S	14	21
pelas		0.04	Ŧ	0.13	0.02	1	0.15	0.10	0.05	0.40	90.0	0.15	0.03
Diphtheria Erysipelas	Cases Rate Cases Rate Cases Rate Cases Rate	5	T	3	1	1	5	1	67	3	5	3	1
theria	Rate	0.02		1	1	1	1	1	0.08	1	1	1	1
Dipht	Cases	1	1		1		1		3	1	1	1	
ping	Rate	1.40	0.39	0.88	86.0	0-94	4.09	8.45	1.63	1.86	3.83	2.85	0.48
Whooping Cough	Cases	69	4	21	40	8	54	85	64	14	133	57	15
rlet	Rate	0.55	0.59	0.17	1.56	0.59	0.53	09-0	0.43	2.66	0.52	1.80	1.13
Scarlet Fever	Cases	27	9	4	64	S	7	9	17	20	18	36	35
Para- Typhoid		1	0.10	1	1	1		1	1	0.13	1	1	1
Pa Typ	Cases	G	1			1	1	I	1	1	1	1	1
Typhoid	Rate	1	1	0.04	1	1	1	1	1	I	1	1	
Typ	Cases Rate Cases Rate Cases Rate	de	101	1	Me	1	1	1	1	1	1	1	
Smallpox	Rate	1	1		1		1	1	1	I	1	1	1
Smal	and the second se	1			1	1	1		1	I	1	1	
Estimated Population	calculating	49,120	10,240	23,860	40,940	8,520	13,270	10,060	39,350	7,530	34,710	20,020	31,000
H		çis	:	:	:	:	:	:	:	:	y		:
District	No.	Rowley Regis	Rugeley	Sedgley	Stafford	Stone	Tamworth	Tettenhall	Tipton	Uttoxeter	Wednesbury	Wednesfield	Willenhall

yelitis	Poliom	1	-	1	3	1	+	+		deg	1
Puerperal Pyrexia	Cases Rate	1	0.06	1	C0-07	0.06	0.12	1	0-06	1	1
	Cases	1	67	1	8	1	eo	ł	-	T	1
Pneumonia	Cases Rate	0.87	0.81	0.59	66-0	0.45	0.86	0.21	09-0	0.27	0.36
Pneu		22	27	10	42	8	21	4	10	4	4
Measles	Rate	0.16	22-09	10-62	0.31	19-55	0.49	0-41	5-67	0.20	1.26
	Cases Rate Cases Rate	4	734	180	13	345	12	8	94	S	14
pelas	Rate	0-04	0.24	0.29	0-26	0.23	0.12	0.15	1	1	0.27
Diphtheria Erysi pelas	Cases	1	8	S	11	4	3	3	1	L	3
heria		1	1	1	1	1	1	Ĩ	1	Г	1
Dipht	Cases Rate		1	Ĩ	1	1	1	+	1	1	1
Whooping Cough		0.75	1.66	6.72	1.22	2.72	4.92	1.18	1-33	2.73	1.17
Whoopir Cough	Cases Rate	19	55	114	52	48	120	23	22	41	13
rlet	Rate	1.30	0.81	0-94	1.53	0.17	0.78	86-0	1.27	1-53	0-72
Scarlet Fever	Cases Rate Cases Rate Cases Rate	33	27	16	65	33	19	19	21	23	8
ra- hoid	Rate	1		1	-	1	1	1	at	1000	
Para- Typhoid	Cases	1	1	1	1	1	+	1	1	1.16	1
hoid	Rate	1	1	I	1	I		1	1	1	H
Typhoid	Cases	1	1	1	1	+	ľ	1	1	1	(in
Smallpox	Rate	1	1	1	1	1	1	1	1	1	1
	Cases	1	1	1	1	-1	1	1	1	I	1
Estimated	calculating rates	25,340	33,230	16,950	42,580	17,650	24,370	19,460	16,590	15,030	11,100
	R		:	::	:		:		:	:	:
understaller (DISTRICT	Cannock	Cheadle	Leek	Lichfield	Newcastle	Seisdon	Stafford	Stone	Tutbury	Uttoxeter

RURAL