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STAFFORDSHIRE COUNTY COUNCIL

# REPORT

of the

# MEDICAL OFFICER OF HEALTH

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

For the Year 1956

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# STAFFORDSHIRE COUNTY COUNCIL

# Annual Report of the Medical Officer of Health

#### PRELIMINARY NOTE

The vital statistics for the year 1956 again show an increase in the total population of the County, which is due to a higher birth-rate, increased immigration accentuated by the success of the County Overspill Scheme, and, lastly, to a reduction in the death rate. A more commonplace way of putting it is that the population of the County is rising so that more people need the many-sided services provided by the Health Committee, which, in fact, have not sufficiently developed to keep pace with the need.

The number of staff has increased only by the whole-time equivalents of 10 health visitors, 3 midwives and 1½ home nurses. No new clinics have been built, though two additional ones have been established in adapted existing buildings in Wednesfield and Darlaston. Provision of new maternity and child welfare clinics is one of the outstanding needs of the services, and the question is receiving the close attention of the Health Committee, but, unfortunately, progress in this direction has been continuously hampered by the national financial stringencies.

Reference to the table on Page 11 shows that the number of deaths from bronchitis was 637, which is six times as great as the number caused by pulmonary tuberculosis. The fall in the rates from the main causes of death naturally brings into prominence other causes which have remained stationary, or have fallen only to a slight degree, and bronchitis is one of these. The medical and environmental causes are known, though there remains a personal factor which cannot be estimated. It is possible to reduce invalidism from bronchitis by improvement of the atmospheric conditions and, as an immediate individual action, by removing anyone suffering from the condition in its early stages to cleaner atmospheric surroundings. Here, in personal terms, for the number of sufferers from bronchitis greatly exceeds the number dying from that disease, is repeated the case for ridding the country of atmospheric pollution from all causes, including tobacco smoke and road vehicle fumes. These latter agents, and particularly cigarette smoking, have also been shown to be "trigger factors" in the incidence of cancer of the lung.

As for so many years, an increase in the deaths due to cancer is shown in the 1956 figures in the table on Page 56. The ages at which the greatest number of deaths occur are 45 years and upwards, and it cannot now be held that, say, the 45-55 group constitutes old age, but this is the time when lung cancer is most likely to occur. Dr. Posner, the Director of the North Staffordshire Mass Miniature Radiography Unit, remarks in his Annual Report, part of which is quoted on Page 53. "At the general practitioner sessions for men it is not uncommon to find more cases of bronchogenic carcinoma than of active respiratory tuberculosis." In this connection it is interesting to note that in Staffordshire the number of deaths in men is eight times as many as those occurring in women, a fact which is in line with the thought that cancer may be associated with the lack of essential fatty acids in the diet, for it is known that the need for these is much higher in men than women.

It is satisfactory that in 1956 no deaths occurred from diphtheria in the County, though five verified cases did occur. Unfortunately, there were five deaths from whooping cough and one from poliomyelitis, diseases which caused no fatalities in the previous year. Immunisation is available against all three diseases but has not been carried out in the maximum number of children. In the case of poliomyelitis, the reason is the technical difficulty of making available an adequate supply of suitable vaccine, whereas for diphtheria and whooping cough it is a matter of persuading parents that these types of protection are worth the small amount of trouble involved in filling in consent forms and taking their children for the injections.

It will be noted in the report of the County Analyst that a record number of samples was analysed this year, and it is indeed welcome news that, at the time of writing, extensions to the County Laboratory are being put in hand, though this relief will be a short-lived one if the work continues to grow at the same rate as in recent past years. Additional duties and a widening range of examinations to be carried out are constantly appearing, for example, this year the analysis of flour becomes a County responsibility, and further work will result from the widening of the Food and Drugs activities under the Consolidating Food and Drugs Act which came into force in January, 1956.

Although the adulteration rate was slightly increased in 1956, this was not so as regards milk, where the position generally continues to improve in many directions. During the year the Borough and Rural District of Newcastle-under-Lyme were included in the "Specified Areas," which means that 85 per cent of the population of the County is now in areas where only specially designated milks may be sold. An inspection of the table on Page 31 will show that 93.7 per cent of the milks tested were found to be clean, and all pasteurised milks have been properly heat treated, but there is still no ground for complacency in the question of cleanliness of the milk supplies and vigilance is as necessary to-day as ever.

During the year, considerable changes occurred in the administration of the Ambulance Service. Radio control was introduced and the County Transport Department, which had hitherto been responsible for the mechanical maintenance of the fleet, was closed down. As regards wireless control, the transmitters were installed at four main stations, viz., Newcastle, Stafford, Lichfield and Darlaston.

This has necessitated a change in the administrative structure and raised the possibility of closing some of the smaller stations, matters which are now being discussed by the appropriate Committees. In any case, the improved effectiveness in the use of the vehicles has already shown the value of the wireless, and considerable economies are anticipated by the adoption of revised arrangements for vehicle maintenance. The mileage run during the year approximates to that of the previous year and one again hopes that the peak mileage has been reached.

The opening of the new Special Training Centre for Mental Defectives at Regent Road, Tipton, resulted in an enormous improvement which had been awaited for years. The design of the building was the result of considerable experience accumulated from the other Centres maintained by the Health Committee, and the use of the building so far has not revealed any way in which it could have been improved. The provision of a second new Centre to replace the unsatisfactory premises in Stafford has been approved, though this will be a much smaller building, and when this Centre is completed the mental deficiency facilities in the County will be reasonably satisfactory. This is, unfortunately, in direct contrast with the lack of child guidance facilities, which could do so much to enable children to take a full part in the normal life of the community.

It is impossible to comment on all aspects of the work of the Department which is detailed in the full Report, and anyone reading the latter will appreciate that it represents the work of many people, each of whom is giving his or her best towards the improvement of the health of the County. The same remark, of course, applies to the clerical staff and to the other Departments who are concerned. We are grateful also for the enthusiasm and interest of the Health Committee, which greatly encourages us to strive for the best possible Health Service in Staffordshire.

## **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

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.

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

H. S. COULSTING, M.B., Ch.B., M.R.C.S., L.R.C.P., D.P.M. (Left, 14/1/56)

CHRISTINA J. McLEAY, M.B., Ch.B. (Commenced 16/2/56)

Medical Officers to Area Health Committees

A. W. M. BATTERSBY, L.R.C.P., L.R.C.S., L.R.F.P.S., D.P.H. J. H. DONNELLY, T.D., L.R.C.S., L.R.C.P., L.R.F.P. & S., D.P.H.

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

A. H. KYNASTON, M.R.C.S., L.R.C.P., D.P.H. (Left 22.12.56)

W. D. H. McFARLAND, M.B., B.Ch., B.A.O., D.P.H.

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

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

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

R. WEBSTER, M.B., Ch.B., D.T.M. & H., 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 Health Inspector H. PREST, M.I. San. E.

# SUMMARY OF STATISTICS

# 1.—GENERAL STATISTICS

Area of Adı	ministrative Cou	inty			(	(acres)	685,239
Estimated calculated Disease	Home Population of Death-	rates o	or incid	ence o	f Noti	fiable	002 200
	s) alue at 1st April			•••			902,200
(Genera	d County Purpo	ses)				£	8,387,146
Estimated r (Genera	net product of a al County Purpo	penn oses)	y rate, 	1956-57			£32,708
2.—EXT	RACTS FROM	VITA	I STA	TISTI	S OF	THE	VEAD
	anoro ritom	* 1111		M.		THE	ILAK
Live Births,	Legitimate Illegitimate		$^{14,234}_{\ 446}$	7,282 236	6,952 210		
	Total		14,680	7,518	7,162	Birth-	ate 16.3
Still-births,	Legitimate Illegitimate		371 17	194 11			
	Total		388	205	183	Rate 1	per 1,000
Deaths						total b	irths 25.7 rate 10.6
					eaths	Rate f	per 1,000 births
Deaths from	pregnancy, chil	dbirth	, aborti	on	16	. 1	.1
Death Rates	s of Infants und	der or	ne year	of			
All infa	nts per 1,000 liv	e birt	hs				28
Legitim live	ate infants per births	1,000	legitima 	ite 			28
Illegitim live	nate infants per l	l,000 i	llegitim:	ate			31
Deaths from	Cancer (all ages	s)					1,633
Deaths from	Measles (all age	es)					-
Deaths from	Whooping Cou	gh (all	ages)				5
Deaths from Diarrhoo	n Gastritis, E ea (under one ye	Enterit ear of	is and age)				8

#### AREA AND POPULATION

Although there has been no alteration in the total area of the Administrative County this year there was an internal change, as 316.25 acres were taken from the Stone Rural District and added to Stone Urban District.

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, re-introduced 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-1956 are set forth:

				Census, 1951 (Final)	Estimated Population, Mid-1956
Urban		ě	 	640,648	673,600
Rural	1	E E	 	214,509	228,600
Totals			 	855,157	902,200

#### BIRTHS

The live births registered in the Administrative County for birthrate purposes numbered 14,680, compared with 13,552 the previous year, the number in the Urban Districts being 11,042 and in the Rural Districts 3,638.

Stillbirths. There were 388 stillbirths registered during the year, of which 291 were in Urban and 97 in Rural Districts. The stillbirth-rate per thousand of the population for the combined Urban and Rural Districts was 0.43. During the same period the rate of England and Wales was 0.37.

				L	IVE BIR	тн-Ка	LIVE BIRTH-RATE PER	1,000	OF POPULATION	ULATIO	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	1955	1956
Combined Urban	33.6	33.2	32.5	30-3	27.8	24.0	24-1	20.5	17.6	17.1	18.3	6-61	16.2	15.4	15.2	16.3
Urban	35.5	34.7	33.6	31.5	29.5	25.0	25.0	20.7	18.1	17.5	18.9	20.4	16.4	15.5	15.4	16.4
S Rural	30.5	30.5	30.2	27.0	24.4	21.6	22.0	19.0	9-91	15.7	16.7	18.5	15.6	15.1	14.7	15.9
England and Wales	30.8	29.7	28.7	56.9	24.5	20.4	21.3	17.8	15.6	14.9	15.2	18.2	15.8	15.2	15.0	15.6
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	8.91	14.9	15.6
			-		80	* 4 years.	ears.	la la	O.S.	11	I I		200			
						DEATHS	THS									
the	Th	The number of dea	ber of	death ban Di	s in the	being	The number of deaths in the Administrative County amounted to mber in the Urban Districts being 7,184 and in the Rural Districts	ative and in	Count n the	y amo Rural	unted to Districts	to 9,5	9,597, 2,413.			
Dierprore					<b>ВЕАТН</b>	DEATH-RATE	PER	1,000 oF	POPULATION	NOITA						
	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	1955	1956
Combined Urban and Rural	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	10.8	10.6
tford Urban	18.9	17.5	16.6	15.1	14.7	15.5	12.6	111.5	11.8	11.3	11.2	10.4	10.7	10.5	10.9	10.7
G Rural	16.8	15.7	15.1	13.4	12.7	13.8	11.6	11.2	111.2	111.2	11.0	10.4	10.0	10.3	10.5	9.01
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	11.7	11.7
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	9.11	9.11
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	9-11	11.3	11.6	9.11
	-		-					-					-	-	-	-

In the following table I have shown the *chief* causes of death for 1956. The numbers given are 81.5 per cent. of the total deaths.

## TABLE SHOWING CHIEF CAUSES OF DEATH

Heart Disease				 2,979
Cancer				 1,633
Vascular lesions of	nervous	syste	m	 1,274
Bronchitis				 637
Other Circulatory I	Disease			 348
Pneumonia				 300
All other accidents				 246
Motor Vehicle Accie	dents			 96
Congenital Malform	ations			 110
Nephritis and Neph	rosis			 89
Tuberculosis, respir	atory			 104
Tuberculosis, other	forms			 6

(See Table on following page)

					AGE	AT DI	EATH			
	Causes of Death	Under 1	1 and under 5	5 and under 15	15 and under 25	25 and under 45	45 and under 65		75 and over	Тотац
1	. Tuberculosis, respir-						in media			
9	atory	-	-	-	8	25	50	16	5	104
	. Tuberculosis, other . Syphilitic disease		1		1	2 2	2 5	-	1	6
	. Diphtheria	_	_				- 5	7	2	17
5	. Whooping Cough	3	2	_	_	_				5
6	. Meningococcal in-									,
7	fections	3	-	-	-	-	-	-	-	3
	. Measles		1	_	=	-	-		-	1
	. Other infective and		10.000			-			-	-
	parasitic diseases	1	1	4	3	4	8	2	3	26
10	. Malignant neoplasm					100000	100		100	
11	stomach	-	-		-	9	107	106	85	307
	lung bronchus			1		17	188	75	10	200
12	. Malignant neoplasm					17	100	13	16	296
	breast		-	_	_	14	73	32	27	146
13.	. Malignant neoplasm									
14	uterus Othermalignantand	_	-	-	-	11	31	20	8	70
	Lymphatic neo-				S. Innivid	INET !	and the			
	plasms		7	8	10	49	287	245	208	814
15.	Leukæmia, aleukæ-	3			1		201	243	200	014
10	mia	-	4	9	2	4	28	5	5	57
17	Diabetes Vascular lesions of	-	-	1		-	16	28	21	66
17.	nervous system			1	1	21	252	204	505	
18.	Coronary disease,			1	1	31	252	394	595	1274
	angina	-	-	_		28	342	404	320	1094
19.	Hypertension with							101	320	1034
20	heart disease	-	-	-	-	4	46	81	101	232
21	Other heart disease Other circulatory		1	-	7	30	211	391	1013	1653
	disease			-	2	13	56	87	100	240
22.	Influenza	3	_	1	_	1	17	12	190	348 60
23.	Pneumonia	58	6	4	2 2	12	68	59	91	300
	Bronchitis Other diseases of	3	2	2	2	8	162	228	230	637
20.	Other diseases of respiratory system	1		1		-				
26.	Ulcer of stomach	1	-	1	_	5	44	35	21	107
	and duodenum	_	_		_	4	37	13	23	77
27.	Gastritis, enteritis					-	3,	13	20	11
00	and diarrhœa	8	1	1	-	5	12	7	15	49
20.	Nephritis and nephrosis	1		2	-				100	
29.	Hyperplasia of	1		2	5	13	32	13	23	89
	prostate	-	_			_	3	17	40	60
30.	Pregnancy, child-						3	17	40	60
21	birth, abortion		-	-	2	14	-	_	_	16
31.	Congenital mal- formations	00	-		.	_				
32.	Other defined and	90	7	1	3	7	2		-	110
	ill-defined diseases	223	13	14	11	59	152	160	105	1100
33.	Motor vehicle acci-	HEE .				33	153	160	495	1128
24	dents	1	5	8	23	23	20	10	6	96
35	All other accidents Suicide	16	9	9	10	32	28	38	104	246
	Homicide and oper-	-	-	7	4	23	43	17	9	96
	ations of war	1		_	_	2	2	2		_
-		-				2	2	2	-	7
	Totals	412	60	66	96	451	2325	2504	3683	9597
						- 100			2000	2011

The following table has been prepared covering the last 37 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 1956, 11.3 per cent. of all deaths occurred under the age of 45.

Deaths under 45 Years of Age — Male and Female — Shewing Percentage of Total Deaths (All Ages)

Vara	ppiidles	MALE		and its own	FEMALE	
YEAR	Deaths	Deaths	% of	Deaths	Deaths	% of
	all ages	under 45	Total	all ages	under 45	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	4,480	576	12.86
1952	4,519	647	14.32	3,993	510	12.77
1953	4,705	657	13.96	4,154	506	12-18
1954	4,849	560	11.55	4,337	457	10.54
1955	5,169	669	12.94	4,447	447	10.05
1956	5,114	630	12.32	4,483	455	10.15

#### CHEMICAL LABORATORY

The following relates to the work undertaken during 1956:

The Laboratory has continued to provide the analytical service demanded of the County Council in dealing with the requirements of the Food and Drugs Act, 1955, the Fertilisers and Feeding Stuffs Act, 1926, and related legislation. It has also carried out a great deal of analytical work connected with the determination of the quality of drinking water and other water supplies, sewage and sewage effluents and trade wastes. A further considerable part of the work undertaken

consisted of analyses relating to the estimation of atmospheric pollution occurring in many parts of the County. To a smaller degree the Laboratory's facilities were available to, and used by, other Departments of the County Council and it has, of course, continued to provide the services required by the six other autonomous Food and Drugs Authorities within the County area. The numerical details relating to all the work carried out are given in Table I.

The mid-1956 population of the area served by the Laboratory was 1,176,200. The Staffordshire County Council's administrative area, for the purposes of the Food and Drugs Act, had a population of 646,210. Since the total number of food and drugs samples submitted by the Chief Inspector of Weights and Measures Department and by the Public Health Inspector was 5,380 the sampling rate per 1,000 of population was 8.3.

The long-awaited consolidation of the Acts and Regulations relating to food and drugs was completed in 1955 and the new and comprehensive Food and Drugs Act, 1955, came into force on the 1st January, 1956. The new Act gives increased powers of control and has closed some of the loop-holes in the old Act. It has been necessary to issue new Regulations relating to the composition of Butter and Margarine with a consequential amendment of the Labelling of Food Order. Amendments have also been made to the Food Standards Orders relating to Curry Powder and Tomato Ketchup. The regulations dealing with Mineral Oil in Food had to be amended as a result of the inclusion, in the new Act, of Chewing Gum in the definition of Food. Following the removal of control from Bread and Flour, Regulations dealing with the Composition of Flour came into force during the year and their administration became the duty of the Food and Drugs Authorities. New Regulations concerning Channel Island Milk now fix an absolute standard of 4.0% for its fat content. An entirely novel feature of the new Act provides that a vendor of an article which has been sampled under the Act may demand, on payment of a nominal fee, a copy of the Analyst's Certificate relating to that article. During the year six such "Shilling Certificates" were issued. Further new Regulations and Standards are foreshadowed in Reports produced by the Food Standards Committee of the Ministry of Agriculture, Fisheries and Food. These deal with various additive to foods-Emulsifying and Stabilising Agents as well as Colouring Matters. They also deal with the contamination of foods with Copper and with suggested standards of composition for Processed Cheese and Cheese Spread, and for Sausages.

Of the food and drugs samples examined for the Staffordshire County Council 3.5% received adverse reports and this slight increase over last year's rate of 3.0% was due entirely to an increase in the number of foods and drugs other than milk which were faulty. Details of these faults are given in Table II and in the body of this Report but some general comment is appropriate here. The fact that 22 out of 98 samples of sausage received adverse reports suggests that this article of food is less reliable than most, but 17 of the 22 faulty samples offended against the Preservative Regulations and only 5 samples committed the more serious offence of being low in meat content.

The labels or descriptions of 26 samples were found to be defective and 12 of these concerned the labelling of pre-packed foods. It is widely believed and, not infrequently, stated that pre-packaging of foods by large and well-equipped manufacturers has so greatly increased the protection of the consumer that it is hardly worth while sampling such products. Such a belief is contrary to the findings of the Laboratory and it is only right to point out that the vigilance and efficiency of Sampling Officers and Analysts has, on occasion, exceeded that of some of the very large producers of foods in this country.

An attempt was made during the year to increase the number of drugs samples, but the 160 samples examined is quite inadequate for the area served. This selective sampling may possibly explain why 18 of these were faulty. They included 64 preparations containing Vitamin A of which 8 were faulty.

It is appropriate, here, to draw attention to the number of samples examined during the year. At 9,878 this number exceeded the previous year's total by nearly 1,000 and was the highest number examined in any year since the Laboratory was established in 1931. It is interesting to note, too, that this work was done in exactly the same amount of laboratory space initially allotted to the County Chemical Laboratory in the 1930's when the average number of samples dealt with was little over 2,000 a year. This degree of compression is, somewhat naturally, tending to produce "explosive" conditions and the extra accommodation promised for the near future will be extremely welcome. It has been possible to deal with such an outstanding increase in work because of an increase in establishment during the previous year and because there were no changes in the staff during 1956. The purchase of up-to-date, though expensive, equipment also helped in this achievement.

# TABLE I

The total number of sam	ples a	anal	ysed w	ras as fo	ollows :-	-	
For County Council:			D38100				
Food and Drugs Act, 1955.	(a)	Ch	ief Ins	pector's	s Sample	es	4,263
	(b)	Ch	ief Pul	blic He	alth Ins	pec-	
				amples			1,117
	(c)	" A	Appeal-	to-Cow	" Sam	ples	142
	(d)			Sample			Nil
Milks for Hypochlorite Tes		-		STATISTICS.		-	241
Fertilisers and Feeding Stu		ct.	1926				171
Drinking Waters							393
Swimming Bath and Pool	Wate	ers					82
River Waters							245
Sewage and Sewage Effluer	nts,	Fra	de Was	stes, et	c		291
Atmospheric Pollution			***				888
Miscellaneous Samples Pharmacy and Poisons Act	109						116
Fliarmacy and Foisons Act	, 196	99	***	4	577		1
							7,950
For City of Stoke-on-Trent:							1,000
Food and Drugs Act, 1955.	. Cl	nief	Inspec	ctor's S	amples		894
Fertilisers and Feeding Stu							7
Miscellaneous Samples							12
							010
For Borough of Rowley Regis							913
Food and Drugs Act, 1955.		ief	Inspec	tor's S	amples		298
Miscellaneous Samples		nei	mspec	101 5 5	ampies		3
							301
For Borough of Newcastle-und							
Food and Drugs Act, 1955.	. Cl	nief	Inspec	ctor's S	amples		109
Miscellaneous Samples							4
							110
For Urban District Council of	Rri	orla	u Hill				113
Food and Drugs Act, 1955.					amples		176
Miscellaneous Samples							Nil
							176
For Borough of Stafford:							
Food and Drugs Act, 1955.	. Ch	net	Inspec	tor's S	amples		232
Miscellaneous Samples							1
							233
For Urban District Council of	Can	noc	k ·				200
Food and Drugs Act, 1955.				tor's S	amples		182
Miscellaneous Samples							10
							192
m . 1							
Total							9,878

## COUNTY COUNCIL SAMPLES.

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

TABLE II.

		Number Examine			er Adul elow sta	
Samples	For- mal	Infor- mal	Total	For- mal	Infor- mal	Total
Almonds	8	2	10	_	_	-
Baking Powder and Golden Raising					7990	100
Powder	3	2	5		-	-
Bread	4	3	7	_	1	1
Bun, Cake and Pudding Mixture	11	9	20	-		
Butter	63	1	64	-	_	-
Canned Fruit and Vegetables	32	27 12	59 26	3	1 2	5
Cereal Products	14 22	3	25	1	_	1
Cheese Cocoa and Chocolate Preparations	5	_	5	_		
Coconut	3	1	4		-	
Coffee (Ground)	7		7	112	1	
Coffee Extracts, Coffee and Chicory					1000	
Extracts	5	9	14			-
Cream	10	5	15	_	_	-
Curry Powder	2	-	2		-	-
Custard Powder and Prepared Starches	2	3	5		-	-
Dried Fruit	5	15	20	-	2	2
Drinks, Alcoholic	34	-	34	4	-	4
Drinks, Soft (Liquid and Powder)	52	8	60	-	1	
Drugs (including Vitamin A Products)	64	96	160	5	13	18
Fats		2	49		-	-
Fish Pastes and Fish Products	22	26	48			
Flavourings and Colourings	27	1 2	5 29	3		3
Flour, Confectionery	6	3	9	-	_	-
,, Self Raising	11	4	15	THE V		
Fruit Curds	5	6	11	-	_	_
Foods, Baby and Tonic	7	2	9	1	1	2
Fruit Curds Foods, Baby and Tonic	0	-	2	_	_	_
Gravy Browning and Salt	6	3	9		-	-
Herbs, Spices and Condiments	35	13	48	2	1	3
Honey		1	2	11-	-	-
Ice Cream	43	-	43	1	-	1
Ice Lollies and Lollipops	5	-	5	-	-	-
Jellies (Table)	5	6	11		-	
Margarine		1	23	-	-	-
Marzipan		1	6	1000	-	-
Meat Products (a) Sausage and Sausage			00	00		00
Meat	97	1 1 2	98	22		22
(b) Brawn, etc	14 53	13	27 97	1	5	6
Meat Pastes and Meat Products, Canned	0.050	1,119	3,971	92	13	105
Milks	0	8	14	1	1	2
3.51	4	3	7			
Oils, Refined and Salad	1	2	3		-	-
Pickles, Various	8	4	12	_	_	-
Preserves, Various	21	7	28	11-	-	-
	11.00	7	22	1	1	

	Compa				Number		The second secon	er Adult low star	
	SAMPLI	55		For- mal	Infor- mal	Total	For- mal	Infor- mal	Total
Potato Product	ts		 	2	_	2	_	_	_
Salad Cream as	nd Dres	sing	 	3	2	5			-
Sauces, Various	s		 	13	11	24	1	1	2
Soups			 	8	7	15	1	_	1
Sugar			 	8	7	15	-		-
Sugar, Confecti	ionery		 	68	1	69	4	_	4
Sweet Spreads		rups	 	4	4	8	-	-	
Tea			 	48	_	48	-		
Vinegar			 	24	5	29	1		1
Unclassified			 	14	6	20	2	1	3
Т	otal		 	3,863	1,517	5,380	145	42	187

FOOD AND DRUGS ACT, 1938.

Of the 5,380 samples submitted from the County Area, 5,193 were found to be genuine and 187 adulterated or below standard, the percentage of adulterated samples being 3.5%. The rate of adulteration for the County is a little higher than that of last year, the figures for 1947-55 being 12.2, 7.7, 5.4, 5.1, 2.9, 4.4, 2.5, 2.7 and 3.0 respectively.

(1) MILK.—Three thousand, nine hundred and seventy one samples of milk, of all grades, were submitted for analysis. These comprised 523 samples of "Tuberculin Tested," 431 "Tuberculin Tested (Pasteurised)," 150 Channel Island, 1,430 "Pasteurised," 415 Sterilised and 1,022 undesignated milk. One hundred and five or 2.6 per cent. were found to be adulterated, of which 38 contained added water, nine contained added water and were fat deficient, 45 were fat deficient and 13 were deficient in fat and solids not fat. These figures do NOT include "Appeal to Cow" samples.

Action Taken.—of the 105 unsatisfactory samples taken, 61 were of undesignated milk and 44 were of designated milk.

Thirteen of these were informal samples taken by Sampling Officers of the County Health Inspector's Department, viz.: 2 "Tuberculin Tested," 9 "Pasteurised" and 2 undesignated. They were included in the 1,117 samples collected from School Canteens, Day Nurseries, Hospitals, Institutions and milk supplied under the "Milk in Schools" scheme. Eleven of the samples were deficient in fat, one was deficient in fat and solids-not-fat and one contained added water and was deficient in solids-not-fat. Formal repeat samples taken by Officers of the Chief Inspector's Department from the same sources proved to be genuine except in one case of Tuberculin Tested Milk which proved to be seriously deficient in fat. Action was taken in respect of this sample.

The remaining 92 samples adversely reported upon were taken "formally" under the Food and Drugs Act, 1938, and comprised 59 samples of undesignated milks and 33 of designated milk.

The samples of undesignated milk were dealt with as follows :-

The deficiencies in the case of 14 samples were small and the vendors cautioned. "Follow up" and/or "Appeal to Cow" samples were taken in the case of 11 samples, all of which were found to be genuine. Thirteen samples were noted down for further sampling. Action was taken in regard to 20 samples. No action was taken in respect of one sample.

Thirty-three samples of Designated milk were found to be adulterated, viz.: Of the Sterilised Milk samples 16 contained added water, 2 samples contained added water and were deficient in fat, 1 sample of Tuberculin Tested Pasteurised Milk was deficient in fat, 5 samples of Tuberculin Tested Milk were deficient in fat and 5 samples were deficient in fat and solids-not-fat, 4 samples of Channel Islands Milk were deficient in fat. With regard to 8 samples of Designated Milk, repeat samples taken from the same source were found to be genuine. Two samples were noted down for further sampling. Vendors were cautioned with regard to 5 samples. From 18 samples taken from 3 vendors action was taken upon 4 of the samples.

Two hundred and fifty samples were below the presumptive standard. Of these, 172 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. Six hundred and thirty samples which were low in fat and 15 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 20 samples of Milk, 1 sample of Tuberculin Tested Milk, 3 samples of Sterilised Milk adulterated with added water and 1 sample of Tuberculin Tested Milk deficient in fat. Fines amounting to £152 0s. 0d. were imposed, together with £142 10s. 9d. special costs.

"Appeal to Cow" Samples.—Of the 142 "Appeal to Cow" samples taken, 16 were found to be naturally poor in solids-not-fat, 30 naturally poor in fat and 10 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 ... ... 
$$3.65\%$$
 Solids-not-fat ...  $8.69\%$  Total Solids—12.34%

Of the 3,866 samples of milk of all grades, passed as genuine, 172 (4.5 per cent.) were naturally poor in solids-not-fat, their Freezing Point (Hortvet) showing that they were genuine. Sixty-three samples (1.6%) were naturally poor in fat and 15 (0.4%) 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 poor quality of the 250 samples which failed to reach the low minimum standard of 3.0% fat or 8.5% solids-not-fat, but were passed as genuine, is further emphasised when the average quality of all samples is noted, namely, 3.65% of fat and 8.69% of solids-not-fat.

(2) General Articles of Food.—One thousand, four hundred and nine samples were examined and 82 samples (53 formal and 29 informal) were found to be adulterated.

Proceedings were taken in respect of 1 sample of Pork Sausage deficient in meat content, 2 samples of Whisky containing added water, 1 sample of Wine Cocktail underproof in spirit and 1 sample of Salmon Sandwiches not containing salmon. Fines of £102, together with special costs amounting to £18, were imposed.

Informal samples of Garden Mint in Vinegar, Cascara Sagrada Tablets, Unsweetened Condensed Milk, Creamed Rice, Health Bread, Irish Stew, Glycerine Lemon and Ipecac Mixture, Onion Sauce, Mixed Fruit, Cod Liver Oil, Dried Peas, Head and Stomach Pills, Iron Jelloids, Capsules of Halibut Liver Oil, Glucose with Calcium Phosphate, French Beans, Malt Extract and Cod Liver Oil, Cough Balsam and Cod Liver Oil Compound 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 recurrence.

FERTILISERS AND FEEDING STUFFS ACT, 1926.

The 171 samples for analysis comprised 79 Fertilisers and 92 Feeding Stuffs.

#### Fertilisers.

Of the 79 fertilisers, 64 were satisfactory. The results of analysis of the remaining samples are given in the following table :—

#### TABLE III

Number Officers per samp	Nature of Offence	Number of samples
1	Excess of potash	2
	Excess of insoluble phosphoric acid	1
	Deficient of soluble phosphoric acid	1
	Excess of nitrogen	3
	No statutory statement	1
2	Excess of both insoluble phosphoric acid and potash	2
3	Deficiency of phosphoric acid, an excess of nitrogen and incorrectly named	2
	Excess of soluble phosphoric acid and of potash and failed to declare the presence of insoluble phosphoric acid	2
	Deficient of insoluble phosphoric acid and of potash and carried no statement of phosphoric acid content	age of
	Total number of unsatisfactory samples	15

#### Feeding Stuffs.

Of the 92 feeding stuffs, 77 were satisfactory. The results of analysis of the remaining samples are given in the following table:—

#### TABLE IV

Number Offences per samp	s Nature of Offence	ilam Social		Number f samples
1	Deficient of oil			4
	Deficient of protein			3
	Excess of oil			2
	Incorrect statutory statement			1
	No statutory statement		***	1
2	Deficient of oil and contained excess of prot	ein		3
	Deficient of fibre and contained an e	xcess	of	
	protein			1
	Total number of unsatisfactory samples .			15

#### DRINKING WATERS.

Three hundred and ninety three samples of drinking water were submitted in the course of the year; 30 for full analysis; 303 for partial analysis; 35 for fluorine content only; 4 for full analysis and fluorine content; 3 for chlorine only; one for hardness and metals; 4 for metals only; 3 for partial analysis and metals; one for hardness only; 2 for mineral analysis; one for partial analysis and plumbo solvency and 6 for special analysis.

### Of the 393 samples for analysis :-

267 samples were of satisfactory quality.

- 17 samples contained sewage pollution.
- 61 samples contained organic pollution.
- 10 samples contained metallic contamination.
- 2 samples contained both sewage and metallic contamination.
- 6 samples contained both sewage and organic contamination.
- 1 sample contained sewage, organic and metallic contamination.
- 3 samples contained organic and metallic contamination.
- 2 samples were unsatisfactory in quality.
- 6 samples were of doubtful quality.
- 18 samples were for special analysis.

#### SWIMMING BATH AND POOL WATERS.

- 55 samples were submitted for full analysis.
- 27 samples were submitted for chlorine content only.

#### RIVER WATERS.

- 215 samples were submitted for ordinary analysis.
  - 30 samples were submitted for fluorine estimation only.

SEWAGE, SEWAGE EFFLUENTS AND TRADE WASTES, ETC.

275 samples were submitted for ordinary analysis.
16 samples were submitted for special analysis.

THE FLUORINE CONTENT OF WATER.

It is now well established that fluorides in water to the extent of one part per million expressed as fluorine reduce the occurrence of dental caries in children. A number of water authorities in the United States of America have, for some time, increased the fluoride content of their water supplies to this extent in order to obtain a reduction in the incidence of dental caries. A United Kingdom Mission of experts visited the U.S.A. in 1952 to study the effects of this fluoridation of domestic water supplies and their Report to the various Ministries concerned was published in 1953. In this Report it was recommended that, after certain preliminary investigations have been made, fluoride should be added to the water supplies of some selected communities under very strictly controlled conditions. Subsequent study of the effects—both medical and dental—on people of all ages would enable a decision to be made as to whether or not general fluoridation of water supplies is wholly desirable.

During the year thirty samples of water, taken on seven occasions, from various points on a river known to be liable to fluoride pollution and from the large reservoir which this supplies were examined for fluorine content. It has been found that, although the rate of pollution varies considerably, the amount of fluorine in the water of the reservoir remains reasonably near to one part per million.

Thirty five samples of drinking water supplies from different parts of the County were also examined for fluorine content and the following results were obtained:—

Number of Samples		Fluoride expressed as Fluorine					
of Samples		as I morine					
21	 	Nil to 0.09 parts per million					
8	 	0.10 ,, 0.19 ,, ,, ,,					
2	 	0.20 ,, 0.49 ,, ,, ,,					
4	 	0.50 ,, 0.70 ,, ,, ,,					

#### Atmospheric Pollution.

The Report of the Government Committee on Air Pollution which was published in 1954 has been followed by the passing of the Clean Air Act this year. A definite step forward has been made in this matter and powers now exist whereby it will be possible, in due course, to control and even eliminate the more obvious forms of air pollution.

Measurement of the amount of air pollution is a necessary preliminary to its prevention and the Fuel Research Section of the Department of Scientific and Industrial Research has studied methods of making such measurements for many years. These approved methods are used in the County Chemical Laboratory.

Samples relating to atmospheric pollution were examined for ten Local Authorities in the County area during the year. The 888 samples examined show a further increase over the 849 samples examined last year. It is of interest to note that when this branch of analysis was first undertaken by the laboratory in 1948 thirty two samples were submitted by one Local Authority.

The results of the measurements made during the year are given in the following Tables which also give the corresponding figures for 1955:

TABLE V LEAD PEROXIDE CYLINDERS.

District	100		Site		(m	$gm. SO_3/10$	hur Pollutio 00 sq. cm/day
10000						1955	1956
A	 		1	,		1.48	1.38
**	 		2			2.30	2.90
			3			2.13	2.78
В	 		1			2.15	2.37
	231935	- 100	2			1.50	1.80
			3			1.78	1.80
			4			2.34	1.72
			5			1.95	2.11
			6			2.80	2.61
С			1			1.65	1.84
	 		2			2.33	2.52
			3			1.47	1.61
D	 -		1		-	3.27	2.74
Ъ	 		1 2			4.60	4.47
E	 		1			9.10	9.50
E	 		1			2.10	2.59
			2			2.21	2.08
			3			2.07	2.10
			4			2.30	3.09
			5			2.40	2.52
			6			2.93	3.30
1.782	3.319		7			2.64	2.67
F	 		1			2.05	2.37
			2			2.26	2.39
G	 		A			1.59	1.61
			В			0.96	1.42
			. C			2.29	2.67
			D.			1.95	2.14
			E			1.91	1.82
			F G			1.86	1.74
			G			1.18	1.67
			H			1.04	1.15
						1.72	1.70
			I J K			1.36	1.61
			K			1.27	1.45
	-		L			2.21	2.61
			N			1.23	1.83
			0			0.87	1.50

TABLE V-continued

Area		Site	A: (m	Average Sulphur Pollution (mgm. SO <sub>3</sub> /100 sq. cm/day		
		Chile Ph - I	THE EVEN		1955	1956
H	 	 1			1.99	2.38
		2			1.55	1.67
		3			2.05	2.16
I	 	 1			0.72	0.80
		2			1.30	0.95

TABLE VI

RAINWATER DEPOSIT GAUGES.

Area Gauge No.		Annual (inc.		Annual So (tons/sq	
	omige ite.				
	D	1955	1956	1955	1956
A	D1445	22.83	24.61	156.9	165.6
	D1034	17.78	21.80	121.5	150.4
	D311	24.76	23.93	130.9	134.4
В	D150	22.27	20.47	155.0	169.3
	D312	26.05	20.41	227.0	190.3
С	D131	26.77	33.18	222.4	225.5
	D895	24.68	28.29	186.4	204.5
	D234	25.87	30.43	127.3	143.8
D	D353	23.87	20.81	215.8	194.7
	D354	23.81	21.63	172.6	173.9
Е	D243	24.37	21.74	217.7	200.3
	D244	24.17	22.61	323.0	324.2
	D245	26.71	18.25	247.3	279.5
	D246	23.93	23.14	244.5	237.1
	D2033		18.81	_	374.8
F	D374	23.92	22.24	151.9	168.0
	D376	24.10	23.44	162.9	184.8
G	D349	20.09	18.62	102.3	175.9
	D350	18.96	20.73	159.7	141.9
	D351	17.72	22.96	87.0	110.3
	D352	22.86	24.70	124.5	160.8
	D1650	_	23.53	-	200.0
	D1881	_	24.66	·	149.8
Н	D690	19.77	22.06	158.7	151.4
	D691	22.71	21.68	199.9	221.7
7	D1330	21.19	21.45	464.8	546.7
I	D1387	27.33	26.34	114.7	107.6

N.B.—All results corrected to period of 12 months.

MISCELLANEOUS SAMPLES.

The 116 samples in this Section are grouped as follows :-

(a) Official Samples.

Sixty samples are included in this group of which 31 consist of foods submitted, usually, on complaint. Nine samples of Apples were examined for toxic metals as a result of complaints that they were contaminated with spray residues. The amount of arsenic found varied from 0.5 to 1.1 parts per million while the lead present varied from 2.0 to 3.5 parts per million. Eight samples of various Cooked Foods were submitted from school kitchens for examination for metallic contamination. The analytical results did not suggest that the foods were contaminated to a harmful degree. One sample of Bottled Milk, one Milk Bottle and one of bottled Orange Juice were submitted with the complaint that the bottles were dirty. The milk bottle was quite clean except for a deposit of bird-droppings at the bottom of it. The filled milk bottle looked a little dirty when full but appeared reasonably clean after removal of the milk and a gentle rinsing. Such bottles develop scratched surfaces after much use and then look dirty, when full, against the background of milk although dirt, if any, is present in minute amounts only. The orange juice bottle was definitely dirty and the contents of the bottle contained suspended dirt. Four samples of Bread were examined for the presence of foreign matter. In one case the foreign matter consisted of a little charred flour while in another case it consisted of charred flour mixed with traces of rust, grease and a few cotton fibres. The third loaf included a fragment of what was almost certainly malt bread. The fourth loaf, by far the worst, contained in one part a mass of printed paper and, in another part, a piece of cotton fabric. Two samples of Dried Milk were found to contain particles of charred milk powder and a sample of Weetabix was also found to contain charred matter. Two samples of Pickling Brine were found to be free from suspected metallic contamination and a sample of Chocolate was also found to be free from such contamination though it had deteriorated slightly. Finally a sample of High Ratio Flour was submitted to a complete analysis and estimation of calorific value.

Twenty-one samples were examined for the County Health Department. Eight samples of *Herbage* had their fluoride content estimated in order to check the degree of contamination from a nearby factory. The amount of fluoride found varied from 15.3 to 111.8 parts per million of dry matter expressed as fluorine. Seven samples of *Liquid Detergents* were examined in order to ascertain their comparative value for washing-up purposes and proved something of a novelty since a method of testing had to be devised which raised the domestic process of washing-up to a reasonably sound scientific level. Six samples of *Hard Soap* were also examined in order to ascertain their comparative value and, for this product, well proved analytical methods are available.

Four samples were received from the County Surveyor's Department including three samples of *Anti-Freeze* for checking against specification and a sample of *Concrete* which had deteriorated.

The remaining four samples included two Kettles for identification of the deposits they contained, a sample of Tartaric Acid for confirmation of its identity and a sample of Sewage Sludge also submitted for identification.

#### (b) Private Samples.

Fifty-six samples comprise this group and include nineteen foods, eighteen waters and effluents and nineteen other samples of various kinds.

The Foods include 13 Sterilised Milks and one Bulk Milk from a factory where trouble was experienced in working a new type of sterilising plant. Two Ice Cream samples and one sample each of Beef Sausage and Pork Sausage were submitted by their makers for an analytical check on their manufacturing process. A loaf of Bread was sent in by a wholesaler for the identification of foreign matter present. This proved to be charred flour and not, as suspected, rodent excreta.

The fifteen Drinking Waters were of no particular interest, but the three Effluents in this group were suspected of containing cyanide and analysis proved that cyanide was present in toxic amounts.

Eleven of the remaining nineteen samples consisted of specimens connected with cases of animal poisoning. A Horse's Stomach was found to contain no poisons and the organs from a Fox were devoid of the strychnine suspected to be present. On the other hand the organs from a Dog did contain strychnine and specimens from four Heifers all contained cyanide.

Four samples of Paint were submitted by a local manufacturer to be tested for lead and two specimens of Urine were submitted for the estimation of alcohol content. The remaining samples were an animal Feeding Stuff and a piece of Copper Piping connected with one of the water samples examined.

#### MILK SUPPLY

During the year, the Department continued its work of endeavouring to ensure that all milk supplied in the administrative area reached the consumer in a clean and wholesome condition and free from diseaseproducing organisms.

Tables are given which show the number of samples of retail ("street") milk of the various grades which have been collected, while figures of samples taken during the year at schools, hospitals, institutions etc., in the County are given in separate paragraphs. The number of undesignated milk samples collected has further decreased as compared with the figure for 1955, showing the continued trend towards the elimination of undesignated milk from retail sale.

#### SPECIFIED AREAS.

One further area of the County was scheduled as a "Specified Area" during the year under the Milk (Special Designations) (Specified Areas) Order, 1956, which operated from 10th April, 1956. Under this Order the Rural District of Newcastle-under-Lyme was included as an area where only "specially-designated" milks may be sold. As the result of this Order, approximately 85% of the population of the Administrative County are now living in areas where only pasteurised, sterilised and tuberculin tested milks may be sold. Indeed only the central rural belt and the north-east corner of the County comprising the urban and rural districts of Stone and Uttoxeter, Stafford, Cheadle and Leek rural

districts, and the urban district of Leek, are now exempt from the provisions of these Orders. It is interesting to note that the Ministry of Agriculture, Fisheries and Food stated that as from 10th April, 1956, 81% of the population of England and Wales were residing in areas where only "specially designated" milk may be retailed. The County Council, as Food and Drugs Authority, are responsible for the enforcement of these Orders, except of course in the areas of those Authorities which are themselves Food and Drugs Authorities. Legal proceedings were instituted during the year in one case in which a retailer was found to be selling undesignated milk in a specified area where the particular Order had been in operation since 1st November, 1953. A fine of £5 was imposed and the defendant also had to find costs amounting to £2 7s. 9d. Thirteen other retailers and/or producers received warning notices of contraventions. In each case immediate steps were taken by the retailers or producers to remedy matters.

#### MILK PASTEURISING AND STERILISING PLANTS.

The County Council is responsible for the licensing and supervision of these plants within its "Foods and Drugs" area, and the plants and dairies are closely supervised and regular routine visits of inspection made for the purpose by the County Health Inspectors. At the end of the year four pasteurising and three sterilising licences were in operation and another dairy was preparing for the installation of milk pasteurising plant. The milk from these licensed dairies is, of course, subject to very frequent sampling in the course of the routine milk sampling which is described below. An additional control, as well as being very useful to the dairymen concerned, is the routine examination of washed bottles which is carried out by the Department. These tests are performed each month in order to show whether the bottle washing plant is working efficiently and producing bottles of a satisfactory standard of cleanliness. When unsatisfactory results are obtained, steps are taken to ascertain the causes, and in some cases it is necessary to have plant overhauled, or even, in extreme cases, replaced.

#### MILK SAMPLING.

Samples of retail milk ("street milks") are taken by the Department throughout the administrative area, except in the areas of Authorities who are themselves Food and Drugs Authorities. The exception is the Municipal Borough of Rowley Regis, where the County Council staff, by arrangement, undertake milk sampling on their behalf and report the results to the Rowley Regis Health Department. The results of these samples are included in the figures given in the tables.

The samples of retail milk are subjected to appropriate tests. "Raw" milks are examined for cleanliness (the 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. For some time it has been the practice to submit a proportion of the samples of pasteurised milk to the test for the presence of tubercle bacilli, for check purposes. This was continued during the first quarter of 1956 and 25 samples were examined in this time and all proved negative. It was then decided that the guinea pigs used for this purpose could be used to better advantage in other ways and such examinations were therefore discontinued from the end of March.

The work of milk sampling is carried out throughout the administrative "Food and Drugs" area by two sampling officers, apart from occasional special samples which may be collected by the County Health Inspectors in the course of their duties.

Action taken upon the results of the samples is as follows :-

The results of all the retail samples are notified to the Medical Officer 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, Fisheries and Food of the County where the milk was produced is notified of unsatisfactory samples, since the responsibility for clean milk production rests upon these officers. Unfortunately no information is received in the Department as to action 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, Fisheries and Food, and to the Medical Officers of Health of the Districts where the milk was produced and retailed. The Ministry's officers 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 upon 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, some improvement is shown by all the grades of milk, and the overall figure of 93.7% satisfactory can be regarded as reasonably good. The continuing reduction in the proportion of ungraded milk samples contributes to the improvement in this overall figure. The results of the phosphatase test on pasteurised milk were again very good. The public has a right to expect a high degree of protection in the case of pasteurised milk, and it is therefore gratifying that only 15 phosphatase failures occurred out of 2,457 samples examined, i.e., in 99.4% of the samples the milk was shown to be adequately heat treated. It is further of some interest to note that none of the unsatisfactory samples was from a dairy licensed by the County Council.

#### UNDESIGNATED MILK SAMPLES.

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 Orders.

BIOLOGICAL TESTING.

The total number of retail milk samples submitted to the biological test (i.e., for the detection of the organisms of tuberculosis) was 824. This shows a considerable reduction from the previous year (1,364), partly due to the decrease in the number of undesignated samples collected and partly due to the guinea pig supply position necessitating a reduction in the number of tuberculin-tested and pasteurised samples examined, compensated for by increased sampling at the farms (details of this work are given below). Of the 824 samples examined, 15 were found to be tubercular positive, as against 21 in 1955. From the 15 positive samples, 11 cows were found by the Ministry of Agriculture, Fisheries and Food to be affected with tuberculosis and were slaughtered under the Tuberculosis Order of 1938.

Apart from the above biological examinations, 853 bulk samples of milk were taken at undesignated farms in the County and submitted to biological examination only, in accordance with the duty expressly laid upon County Councils by Section 31 and the Sixth Schedule of the Food and Drugs Act, 1955. Sixty-three of the samples were found to be positive and, as a result of the investigations which followed, 56 cows were found to be affected with tuberculosis and were slaughtered under the Tuberculosis Order.

During the year, 26 cases occurred where milk produced in Staffordshire had been sampled by outside Authorities, usually at large dairies where the milk was about to be processed, 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, Fisheries and Food, and also to the Medical Officer of Health of the District where the milk is produced. As a result of the investigations which followed 20 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 87 tubercular cows were detected and slaughtered under the Tuberculosis Order. In other words these 87 animals which otherwise would probably not have been detected were eliminated as sources of tubercular milk and infectors of other animals.

Informal Food and Drugs Sampling.

Not included in the tables of milk samples collected is a total of 1,117 samples collected by the sampling officers while visiting schools school canteens, hospitals, etc., for informal examination under the Food and Drugs Act, 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. Thirteen samples were reported as unsatisfactory, as follows:—

Undesignated Milk. 1 sample deficient in fat and solids-not-fat.

1 ,, ,, fat.

Tuberculin-tested. 2 samples deficient in fat. Pasteurised. 8 samples deficient in fat.

1 sample containing added water.

PRESENCE OF HYPOCHLORITES IN MILK.

Examinations for the presence of hypochlorite residuals in milk were continued during the year under review. A total of 241 samples was examined, as follows, but in no case was any positive evidence found:—

Tuberculin-	tested	milks			 106
,,	,,	(Channel	Isla	nd) milks	 42
,,	"	(Pasteuri	sed)	milks	 18
Pasteurised	milks				 58
Sterilised	,,				 17
	Tota	1			 241

This is a considerable increase on the previous year's total (127) and a special effort was made to cover all farm-bottled milks, but the results indicate that care is being taken generally to ensure that traces of hypochlorite do not remain in milk bottles after washing.

The following is a summary of all the samples of milk collected by the Department during the year:—

Retail ("Street") Milks			4,458
Schools			951
Institutions, School Canteens, etc.			556
Sampling at farms (for biological te	st on	ly)	853
"Food and Drugs" samples			1,117
"Hypochlorite" samples			241
Total			8,176

The number of street milks collected is tending to fall year by year as the operation of Specified Areas Orders has the effect of reducing the number of different milk supplies being sold. During 1956, however, considerably more work was done on sampling at the farms for the detection of tuberculosis in cows.

SUMMARY OF "STREET" MILK SAMPLES COLLECTED (i.e. EXCLUDING SAMPLES FROM SCHOOLS AND INSTITUTIONS) 1st JANUARY to 31st DECEMBER, 1956

sis) % 1955	3.1	Ē	1	īZ	11	1.5
Test uberculos % 1956	3.6	Ē	1	Z	11	1.8
Biological Test (for presence of Tuberculosis) % mitted Positive 1956 1	15	Z	lend	īZ	11	15
Phosphatase Test (for Sterilised (for presence of Tubercu (for correct milk) (for Dasteurisation) (for Sterilised milk) (for presence of Tubercu (for Submitted Result Submitted	414	385	1	25	11	824
Turbidity Test (for Sterilised milk)	1	1	1		691 8% Satisfactory	699 Satisfactory
Turbi (for 9	1	1	1	1	8% }	es 669
e Test ect ttion) Result	1	1	Passed 2442 Failed 15	1956 99-4 1955 99-5	11	
Phosphatase Test (for correct pasteurisation) Submitted Result	1	-	97.4 2457 Passed 2442 Failed 15	%Satis.1956 99.4	11	
1955	71.3	89.4	97.4	7.76	11	8.06
Test ss) % 1956	8.92	90.3	97.5	1.86	11	93-7
Methylene Blue Test (for Cleanliness) %	Passed 328 Failed 99	Passed 789 Failed 85	Passed1167 Failed 30	Passed1234 98-1 Failed 24	11	Passed 3518 Failed 238
Methylene I (for Clean Submitted Result	427	874	1,197	11,258	11	3,756
Total samples taken	*428	874	1,198	1,259	169	4,458
Grade of Milk	Undesignated	"Tuberculin- tested"	"Tuberculin-tested (Pasteurised) "	" Pasteurised "	"Sterilised"	TOTALS

NOTE.—Of the 414 samples of undesignated milk submitted to the biological test, 26 were from Urban Districts, of which all were Negative, and 388 were from Rural Districts, of which 15, or 3.9% were Positive.

\*One sample of undesignated milk was submitted to the biological test only.

\*One sample of "T.T. Pasteurised" and one sample of "Pasteurised" milk were declared void on the methylene blue test owing to high atmospheric shade temperature on the date sampled.

# UNDESIGNATED MILK SAMPLES 1ST JANUARY TO 31ST DECEMBER, 1956

Sanitary District	No. of Samples Submitted		OF EXAM		Sub- mitted	T.B.  Positive	% Positive
URBAN: *Aldridge *Amblecote *Biddulph *Bilston *Brownhills *Coseley *Darlaston *Kidsgrove Leek *Lichfield *Rowley Regis *Rugeley *Sedgley *Stone *Tamworth *Tettenhall *Tipton Uttoxeter *Wednesbury *Wednesfield *Willenhall RURAL: *Cannock Cheadle Leek *Lichfield \$Newcastle *Seisdon \$Stafford \$Stafford Stone *Tutbury Uttoxeter *Tutbury Uttoxeter	19 — 154 115 — 8 — 22 57 — 42	13   1   1   6   127   84   7   15   46   29		31·6	17 		
Totals	427	328	99	23-2	414	15	3.6

<sup>\*</sup> Specified Area during whole of year under review.

<sup>§</sup> Specified Area as from 10/4/56.

<sup>‡</sup> One parish only included within a Specified Area.

MILK IN SCHOOLS SCHEME.

At 31st December, 1956, 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		Schools by Staf		Schools sampled by Food & Drugs Authorities	No. of children supplied (figures from the Education Dept.)	
Missyntaid off old Ministra sale as Mary and their	HINE Seell WAS	No. of suppliers	No. of schools supplied	(Brierley Hill U.D., Cannock U.D., Stafford M.B.)	Total	As % of total
Pasteurised		40	522	90	101,176	99.63
Tuberculin-tested		13	14	Nil	323	0.32
Undesignated		3	3	Nil	55	0.05
Totals		56	539	90	101,554	

Only one school was without a supply of liquid milk at the end of the year, probably the lowest number since the inception of the scheme.

During the last quarter of the year the milk supplied to non-maintained schools was brought under the sampling scheme. A total of 40 such schools was involved. Of these, 39 received pasteurised milk from 23 different suppliers and one school received tuberculin tested milk. Figures supplied by the Education Department show that at the end of the year 2,900 children in these schools were receiving pasteurised milk and 71 tuberculin-tested milk. None received undesignated milk.

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. It will be seen from the above table that the number of children not receiving pasteurised milk is a very small percentage of the total.

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 the 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 1956 was 951. Of these, 23 failed to conform with the required standard of cleanliness. This is again an improvement on the figures for 1955, when 32 failed out of a total of 1,029 samples. 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, Fisheries and Food, and repeat samples are taken. When considered necessary the producer's premises are also visited by the County Sanitary Staff. If no improvement is then forthcoming it is recommended to the Director of Education that the supply of milk from such source is stopped, and attempts are made to obtain a supply from a source which can be approved.

During the year, 854 samples of pasteurised milk were submitted to the phosphatase test, and all the samples passed the test, an excellent result which beats all previous records. Unsatisfactory samples of pasteurised milk processed in the Administrative County (excluding areas of Food and Drugs Authorities) are investigated by the County Health Inspectors 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.

Of the school milk samples, 49 were submitted to the biological test, but no positives were found. These figures reflect the continued trend towards the elimination of "raw" school milk supplies, and it is pleasing to note that no sample has been found to contain pathogenic organisms since 1953. The number of positives in recent years has been as follows:—

1950	1951	1952	1953	1954	1955	1956
5	3	4	2	Nil	Nil	Nil

#### GENERAL.

Apart from milk sampling undertaken under the foregoing heads, sampling was also carried out during the year at certain private schools, hospitals, sanatoria, institutions and school canteens.

Of 556 samples collected, 22 were unsatisfactory from a cleanliness standpoint. Five hundred samples were submitted to the phosphatase test for efficient pasteurisation and 4 of these were found to be unsatisfactory. These figures are an improvement on last year, when there were 37 failures on the methylene blue test out of 505 samples collected, and 13 failures on the phosphatase test out of 439 samples examined.

The samples which failed were dealt with appropriately.

Thirty-eight samples were submitted to the biological test and all were reported negative.

#### HOUSING.

In order to get an overall picture of the housing position in the County during the year, a questionnaire was addressed to all District Medical Officers of Health. Tables 1, 2 and 3 are drawn up showing the position in the districts of those who replied.

It should be noted that the tables show the work done in 1956 and therefore are not truly indicative of the work done over a period; nevertheless, they do show that some districts are more active than others in this respect.

- Table 1. Improvement Grants. The table shows the number of houses which have been dealt with is comparatively small, particularly so in the industrial areas. It is also noticeable that houses which have been improved are, in the main, owner-occupied; tenanted houses have received much less attention. (Some difference in the figures of applications received and those given grants is accounted for by a number of applications being still under consideration.)
- Table 2. Also shows a marked difference in the work done by the various districts and the reluctance to have work done under the Housing Act. Incidentally, work done under the Public Health Act is mainly for very minor repairs and cannot be regarded as any real contribution towards solving the problem of unfit houses.
- Table 3. Gives an indication of the problems facing each local authority and what progress has been made towards overcoming the same.

IMPROVEMENT GRANTS—SUMMARY OF CASES DEALT WITH DURING YEAR ENDED 31ST DECEMBER, 1956 HOUSING ACT, 1949, AS AMENDED BY HOUSING RENTS AND REPAIRS ACT ,1954 TABLE I.

Dictaica			No. of Appl	Applications		Number	Number granted	Total nalus of	Total natur of
Destree		Dealt with	No. of houses involved	Refused	Withdrawn	Owner- Occupiers	Others	work involved	Grants
								€ s. d.	€ s. d.
	:	4	4	1	1	4	1	1,120 0 0	510 0 0
	:	10	13	1	00	4	01	1,724 0 0	0
								(After with-	(Actual)
Newcastle	:	101	101	14	1	39	24	Not recorded	8,812 0 0
Rowley Regis	:	44	99	7	03	36	80	15,020 0 0	7,017 0 0
	:	35	35	63	1	53	3	8,780 0 0	3,169 0 0
Tamworth	:	00	80	61	1	9	1	825 0 0	412 0 0
	:	1	ı	1	1	1	1	1 1 1	1 1 1
		Received 16	17					C 2,316 0 0	685 0 07
Wednesbury	:	Passed 11	12	1	1	6	03	Applications	Actual
		Pending 4	4					(Approved	Grants made
Urban Districts:									
	:	13	13	1	03	4	1	0 0 899	819 0 0
Amblecote	:	01	01	1	1	1	1	180 0 0	80 0 0
Biddulph				DOES	DOES NOT MAKE IM PROVEMENT	PROVEMENT	GRANTS	No.	
Brierley Hill	***	59	59	1	1	23	4	9,584 0 0	4,792 0 0
Brownhills	::	17	17	03	1	14	-01	4,041 0 0	2,020 0 0
	:	34	41	1	1	30	11	8,046 0 0	4,023 0 0
****	:	01	03	03	1	-		1 1 1	1 1
Darlaston	::	1	1	1	1	1	1	1 1 1	1 1 1
Kidsgrove	:	55	653	63	1	50	03	2,712 0 0	1,224 0 0
		933	84	-	-	00	0	0 0 0 0	0 0000

TABLE I-continued.

District		No. of Applications	ications		Number granted	granted	Total a	Jaco	f Total malue of	alasa
200 1800 7	Dealt with	No. of houses involved	Refused	Withdrawn	Owner- Occupiers	Others	work involved	olved	Gra	Grants
							A	s. d.	4	s. d.
Urban Disticts (Continued) :										
Rugeley	5	10	1	-	23	9	2,699	0 0	1,187	0
Sedgley	6	6	1	1	+	ű	2,556	0 0	1,278	0
Stone	21	21	1	1	111	10	5,995	0 0	2,951	0
Tettenhall	1	1	-	1	-	1	1	1	1	1
Uttoxeter	12	11	1	1	10	1	2,886	6 0	1,325	-
Wednesfield	13	14	I	5	00	1	8,162	0 0	793	
Willenhall	6	6	1	1	7	1	2,049	0 0	1,024	0
Rural Districts:										
Cannock	43	54	1	1	21	35	24,257	0 0	11,377	0
Cheadle	32	350	9	1	25	1	21,666	0 0	6,719	0
Leek	I	1	1	1	1	1	1	1	1	1
Lichfield	18	67 67	1	-	6	6	12,385	0 0	5,388	0
Newcastle	27	53	01	1	20	4	14,505	0 0	5,079	0
Seisdon	32	45	01	1	90	01	25,189	0 0	11,045	0
Stafford	30	49	03	01	35	7	30,582	0 0	12,356	0
Stone	26	31	1	1	12	1.7	17,942	0 0	7,576	0
Tutbury	I	-	-	1	1	1	1	1	1	1
Uttoxeter	99	58	63	1	28	24	24.249	1 3	9 991	14

TABLE II.

Uttoxeter	1	11	11	11	11	9	1 1	11	11	11	1	1	1 1
Tutbury						pev	yet recei	1011	пинэя		Outres.		
Stone	01	1	1	1	7	42	12	1	1	1	31	1	T
Stafford	10	01	1	II	4	88		1		11	1		
nobsieS	6	-	11	T	1	27	52	IT	00	-			1
Newcastle	10	T	1	T	10	13		Ti	-	TT			
Lichfield	- 6	-	11	1	1	8	9	Ti	90	Ti	1	1	
Leek	T	1	T	Ti	10	8	1	T	1	T	1	1	
Cheadle	=	Ti	İ	T	6	23	57	i i		-	1	-	
Rural Districts:	0	1	1	i	10	92	1	T	1	1		1	T
Willenball	24	64		11		52	34	18		1		1	
Wednesfield	- 68	-	-	Ti	T	281	D	133	91	Ti	1	1	1
Uttoxeter	9	6	1	Ti	T	17		1		I	1	1	<u> </u>
Tettenball		-		11	1	-	yet recei	10tt	muion	1 '			-
Stone		01	IT	TI	122	198	7	11	1	T		T	TT
Sedgley	24 2	-	1	11	12	8	-	1	-	1	6		
Kugeley	- 6	01	-	1	1	36	16	1	1 9	1		1	
Геек		-	-	1	-	-	yet rece	1011					
Midsgrove	33	22	-	-	10.0	375	85	II	l l	II		1 1	
		64			1 64		yet recei	1011	minney	1		1	-
Cosedey	37			T	L	Post	100	II	- I	11			
		04	1	+	17	9	-	1		1 1			2
Саппоск	15 41		1	1	04	236	7 107	01	-	1		-	25
sllidaword		01	1	11	70	8	7 47	01		-			-
Brierley Hill	5 22	01		-	-	131	3 37	-	1		1		
dqlubbid	-	-	1		1	81	6	00			-		
Aldridge	- 52	-	1	-	1	48 33	13	1	1	1		1	1
Trban Districts :			1	_	1	4		11		1		1	
Mednesbury			-	-	-	2241	0.		HIDAON				
notqiT		1		11	11		9091 19V	100	Return				
Тапьчоттр	72 15	1	1	11	1	1 43	00	1	-	1 1			
- Stafford	-	1	-	+	-	0 0		1		1		10	
Rowley Regis	3 31	-	-	1		98	98	1	-			-	
Newcastle	- 93	1	1	11	- 15	84 194 362 91	2 2	11	1				
Lichfield			1	1	1		-	1		1			
Boroughs : Bilston	- 6		1	1 1	1	y 8 252	nr 124	1	-				25
ACTION TAREN (During Year ended 31/12/56)	DEMOLITION AND CLOSING ORDERS: Houses demolished as a result of formal or informal action under the Housing Act, 1936	Houses closed in pursuance of an undertaking given by	Parts of building closed	Closing Orders made under Housing Act, 1949	Closing Orders made under Local Government Act, 1953	Repairs: Number of unfit or defective houses rendered fit by informal action under the Public Health or Housing Acts	Number of houses where defects were remedied after service of formal notices under Public Health Acts	(b) by local authorities	Number of houses made fit after service of formal notices under the Housing Act, 1936.	(b) by local authorities	Houses reconstructed, enlarged or improved and Demolition Orders revoked under Housing Repairs and Rents Act, 1954	UNFIT HOUSES IN TEMPORARY USE: HOUSES licensed for temporary occupation under Housing Repairs and Rents Act, 1954	PURCHASE OF HOUSES BY AGREEMENT: Houses purchased in Clearance Areas (other than those included in confirmed Clearance Orders or Compulsory Purchase Orders)

TABLE III. HOUSING—POSITION AT 31.12.56

Applicants on Housing List at end	of year	1,815	490	1,568	2,000 approx.	1,188	Horough Residents	Outside Borough Residents	1,025	18
ses constructed since 1945	Private	271	211	1,286 incl. 544 Nat. Coal Board	efabs	847	95		1,982	12
Houses constructed since 1945	Council	2,057	671	4,060	147 prefabs 1,763	2,366	874	,	1,335	128
Houses under con- struction at end of year	Private	N	30	Ĭ.	75	Not			929	One
Houses under con struction at end of year	Council	183	र्ट	352	240	31	=	1	204	ō
Houses erected during year	Private	14	8	135	98	210	6.		747	Nil
Houses	Council	200	71	361	150	144	37		244	2.
Con- verted	flats	N	None	Council Nil Private Unknown	1	N	4		m	EN.
De- molished	year	16	None	93	31	72	10		53	One
To replace those re- quiring demoli-	relieve over- crowding	2,741	160	1,320 estimated	778	615	461		204	70
Requir- ing de-	tion	1,509	160	1,291	705	346	194		203	70 ated)
In need of recon-	gumonin	approx.	180	7,500 estimated		at least 269	1		(Per Secs. 11 & 25 Housing Act)	(Estimated)
In need of minor	repairs	approx. 11,000	approx.	Unknown	-N ot Known	1	1		1	1
Fit	ation	approx. 1,185	2,650	21,250 (including houses in Col. 6)	Y	11,639 approx.	3,719	received	1	903 (includes houses in Col. 6)
Houses in dis-	ruci	14,044	3,289 excl. combined business premises	23,701	14,694	12,254	4,180	not yet	10,264	973
Popn.	est.)	33,830	10,930	71,220	49,180	41,220	13,350	Returns	33,100	3,150
		:	•	-	:	1		Ť		:
District		Bilston	Lichfield	Newcastle	Rowley Regis	Stafford	Tamworth	Wednesbury	Urban Districts: Aldridge	Amblecote

HOUSING-TABLE III (continued)

Applicants on Housing	of year	230	2,430	920	186'1	1,525		250 estimated		268	
nstructed 1945	Private	620	1,075	984 Traditional 134 Prefabs 131 342	287	899		289 450	accure 30	831	
Houses constructed since 1945	Council	722	2,566	984 Traditio 134 Prefabs 1,131	1,495	1,793		1,194 289 +N.C.B. 450	T English E	391	
nder con- 1 at end ear	Private	15	202	172	<b>⊕</b>	285		9		12	
Houses under con- struction at end of year	Council	16	180	287	88	102		90		22	
Houses erected during year	Private	35	323	134	31	174		06		81	
Houses	Council	09	172	218	89	182		8		17	
Con- verted	flats	N	1	1	Ī	1		N		N. I.	
De- molished	year	10	22	45	4	37		8	-	9	NO.
To replace those re- quiring demoli- tion and	relieve over- crowding	30 approx.	1,150 estimated	1	889	2,000 approx.		1,500 1,900 (Estimated in	(000	(O) 50 (O) 50	110
Requir- ing de- moli-		35	839 Housing Survey 269 orders operative	689	674	323		1,500 (Estim	-	09	
In need of recon-		74	1	1	0=	No est imates avail able		500		310	
In need of minor repairs		No estimate	1	Known-	0-	No est avail		000 1,000 -Est imated-		330	
Fit for habit-	ation	3,965	1	-Not	0-	7,589	received	2,500 ——Est	received	2,707	
Houses in dis-		4,074	15,038	6,290	11,498 + 418 houses & shops	9,912	not yet	5,500	not yet	3,407	
Popn. (Mid 1955	est.)	12,640	49,740	21,880	41,730	33,420	Return	17,790	Return	11,120	
		:	:	1		:	-	:	:	-	
District		Biddulph	Brierley Hill	Brownhills	Cannock	Coseley	Darlaston	Kidsgrove	Leek	Rugeley	The state of the s

HOUSING-TABLE III (continued)

Applicants on Housing List at end		938	325	183	486	1,475	1,002	819	+ applicants living outside	707
Houses constructed since 1945	Private	492	57	99	689	382	Not available	1,057	492	402
Houses constru since 1945	Council	1,379	439	424	3,001	1,369	849	1,083	X+ 380 N.C.B.	1,682
ider con-	Private	188	9	4	60 overspill	150	67	1111	92	E3
Houses under con- struction at end of year	Council	58	32	34	486 Corporation 176	268	8	27	1	€
erected ; year	Private	142	01	4	522 113 By Wolverhampton 100	112	100	162	. 161 C.B.	73
Houses erected during year	Council	261	7.1	72	522 By Wolve 100	224	8	90	58 + 1 78 N.C.B.	97
Con- verted	flats	Nii	N	IN	1	N	1	1	E N	61
De- molished	year	20	26 + 14 closed	9	69	24	o.	11	E.	6
To replace those re- quiring demoli-	relieve over- crowding	52	78	16	500 Esti- mated	1,500	accurate fig. for over- crowding not avail- able	1	1	No fig. for over- crowding
Requir- ing de-	tion	52	70	16	991	1,000	110	265	196	262 per Councils 5 year pro- gramme
In need of recon-	S	NII	250+ 100 ex- bathr'ms	009	81	mation	Est.	1	177	1,600
In need of minor	repairs	Not known	200	459	40 Esti- mated	No information	1,140 Esti- mated	1	3,008	1,500 Esti- mated
Fit	ation	Not	2,144	1,350	5,351	8,064 approx.	5,923	1	1,278	7,600
Houses in dis-		7,305	2,764	2,500	6,000	9,064 approx.	7,159	11,037	4,959	11,000 approx.
Popn. (Mid	est.)	24,130	8,710	7,580	C-8	31,100	25,110	34,420	17,613	42,580
riet							::			
District		Sedgley	Stone	Uttoxeter	Wednesfield	Willenhall	Kurai Districts: Cannock	Cheadle	Leek	Lichfield

HOUSING-TABLE III (continued)

Applicants on Housing	List at cita	07+	760	263	438	*	661
nstructed 1945	Private	212	1,553	250	246		94
Houses constructed since 1945	Council	S64 (100 N.C.B.)	2,006	475	622		394
ider con-	Private	17	618	58	35		3
Houses under con- struction at end of year	Council	88	164	7	78		NEI
erected ; year	Private	38	357	7	40		80
Houses erected	Council	10	312	6	(8)		Nil
Con- verted	flats	Nil	N.	E N	Nii	K	Nil
De- molished	year	10	6	10	10		NEI
To replace those re- quiring demoli-	relieve over- crowding	376	143	360 approx.	185		192
Requir- ing de-	tion	326	227	459*	136		192
In need of recon-	Smironing	1,464	16	334 Major repair 842	275		864
In need of minor	repairs	1,241	450 Esti- mated	1,090	438		614
Fit	ation	2,489	8,555	4,914 1,528 (Inclu des 661 farm houses which are not classified)	3,714	received	1,200
Houses in dis-		5,520	9,248	4,914 (Inclu farm bou are not	4,563	not yet received	2,870
Popn.	est.)	17,650	26,220	19,510	16,730	Return	11,150
District		Rural Districts—cont. Newcastle	Seisdon	Stafford	Stone	Tutbury	Uttoxeter

\* Some may be saved at unreasonable cost.

† Under confirmed clearance orders operative demolition orders awaiting confirmation of Ministry.

## WATER SUPPLIES, SEWERAGE AND SEWAGE DISPOSAL

For the financial year 1956/57 a sum of £59,654 was contributed by the County Council to District Councils towards the cost of water supply, sewerage and sewage disposal schemes.

Details of schemes considered by the Health Department during 1956 for grants or loans under the Rural Water Supplies and Sewerage Acts, 1944 and 1951, or the Public Health Act, 1936, are listed below.

In all, during the year, schemes of water supply estimated to cost £137,906 and schemes of sewerage and sewage disposal estimated to cost £435,294 were submitted to the Department for consideration.

WATER SUPPLY SCHEMES.

Cheadle Rural District.

Bottom Houses-Winkhill-Ipstones Edge area.

The scheme, estimated to cost  $\pm 44,200$ , to supply water in a sparsely populated area where properties were also widely scattered was very costly from the point of view of cost per dwelling.

Nevertheless, since there is a need for water and if the need is to be met at all, the cost will inevitably be high. The scheme was recommended for approval in principle.

Blore with Swinscoe-Mains extension.

This scheme was an amended scheme of one approved by the County Council in November, 1953. The estimated cost was £23,000; as in the previous scheme the cost per property was high, nevertheless it was recommended for approval for similar reasons.

Seisdon Rural District.

Lutley Lane, Enville.

The scheme, estimated to cost £5,797, was for a mains extension to supply four farms and one farm cottage, but was not recommended for approval.

Four Ashes, Enville.

A scheme to provide a mains extension at a cost of £,11,793 was approved in principle.

Six Ashes, Bobbington.

A scheme to provide an extension costing  $\pm 3,290$  was recommended for approval in principle.

Patshull Estate.

A scheme, estimated to cost £6,200, was reviewed, but no recommendation was made by the end of the year.

Stone Rural District—Water mains extension to Summerhill, Coton Hayes and Milwich areas.

This scheme, estimated to cost £34,626, was later withdrawn by the Rural District Council.

Uttoxeter Rural District-Alders Brook.

A small mains extension, estimated to cost £900, was recommended for approval.

Schemes of Sewerage and Sewage Disposal.

Aldridge Urban District.

A new sewer to relieve flooding in the Leighswood Road area at Aldridge was recommended for approval at an estimated cost of  $\pounds 983$ . The existing sewer was of insufficient capacity and the scheme was the first stage of a scheme to improve the surface water drainage in the area.

# Bilston M.B.—Ettingshall Resewerage Scheme.

This scheme, the capital cost of which was £62,719, was to replace old sewers of insufficient capacity, to relieve flooding and to enable housing development to proceed and was recommended for approval.

# Rowley Regis M.B.

A scheme, estimated to cost £8,311, to provide a foul and surface water sewer in Darbys Hill Road and Oakham Road was recommended for approval. The provision of the foul sewer enabled a number of existing dumb wells and cesspools to be abolished and land was opened up for development.

Another scheme to lay a surface water sewer and a foul sewer to relieve flooding and to save the need for sewage pumping in the Codsall area was recommended for approval. The estimated cost was £28,900.

## Stone Urban District.

A scheme to provide extra sludge drying beds was recommended for approval after suggestions from this Department to improve the efficiency of the proposed beds had been agreed by the Stone Urban District Council. The estimated cost was £3,737.

#### Tettenhall Urban District.

A scheme, estimated to cost £137,000, to provide a new sewage disposal works was recommended for approval. This scheme amended an earlier scheme considered by the Health Committee in 1951. The earlier scheme envisaged the new works to be built on the site of the existing works. Since then the flow has increased so much that it would be difficult to deal with it while building work was going on. Furthermore, since a new outfall sewer will also be required to supplement the existing overloaded sewer a site much nearer Tettenhall has been chosen thereby decreasing the length of new sewer required.

#### Cannock Rural District.

Cheslyn Hay and Great Wyrley sewer extensions.

The scheme to provide sewer extensions to serve existing properties and future development at New House Road, Cheslyn Hay, Norton Lane and Walsall Road, Great Wyrley, at an estimated cost of £3,395 was recommended for approval.

Shareshill and Little Saredon.

The scheme was to provide sewerage facilities for the villages of Shareshill and Little Saredon at an estimated cost of £16,765. Sewage was to be disposed of by pumping it to the Wolverhampton sewage disposal works at Coven.

The scheme was recommended for approval, but with the observation that the Little Saredon section could be classed as desirable rather than necessary.

Cheadle Rural District—Sewer connections to the Blythe Valley trunk sewer in the Upper Tean, Lower Tean and Checkley areas.

This scheme, estimated to cost £45,250, provided for various connections to the Blythe Valley trunk sewer from a number of villages and hamlets not at present sewered. The scheme was in the main recommended for approval, but one or two sections which were not considered urgent or were very costly were classed as desirable rather than necessary.

Newcastle Rural District-Loggerheads.

A scheme providing for the sewering of the Loggerheads area and the replacement of the existing disposal works which were badly overloaded and only dealt with a small section of the area was recommended for approval. The estimated cost was £36,450.

Seisdon Rural District—Wombourne sewage disposal works extensions.

Trysull and Seisdon sewerage.

The scheme amended an earlier scheme considered by the Health Committee in 1954.

The amended scheme, estimated to cost £98,000 for the sewage disposal works extensions and £55,500 for the sewers, was to deal with a larger population than that provided for in the original scheme (12,750 population as against 10,520) and was the result of consultation between the Seisdon Rural District Council officials, their consulting engineers and the County Health and Planning Departments.

The scheme was recommended for approval.

Stafford Rural District.

Hyde Lea.

This scheme amended an earlier scheme due to the re-aligning of the sewer to avoid gas and water pipes in the road and also to open up more land. The estimated cost was £8,236 and the scheme was recommended for approval in principle. The scheme was to provide sewerage facilities in the Hyde Lea area by the provision of sewers linking up to the Stafford Borough sewer.

Woodseaves.

The scheme, estimated to cost £11,505, was to provide sewerage and sewage disposal facilities for the village, the bulk of which—apart from Council houses—was unsewered. The two small Council houses disposal works would be abandoned and the whole of the sewage would be dealt with at one works. The scheme was recommended for approval.

Stone Rural District.

Yarnfield.

A scheme to provide sewers and a small sewage disposal plant for the village at an estimated cost of  $\pounds$ 3,883 was recommended for approval.

Meir Heath and Stallington.

This was an amended scheme from one considered in 1952. The amended scheme, estimated to cost £26,180, was the result of suggestions by this Department that some economies might be made on the original scheme which was estimated to cost £30,300.

The scheme was recommended for approval with the suggestion that a small extra length of sewer should be included to deal with a small group of houses for which provision had not been made.

Tutbury Rural District-Barton-under-Needwood sewage disposal.

This was again an amended scheme to deal with a population of 2,496 in lieu of an earlier scheme dealing with a population of 1,950. The present scheme provided for the sewage works to be built on a different site from the 1951 scheme. Included in the scheme were certain lengths of new sewer and the estimated cost of the whole was  $\pm 37,960$ ; it was recommended for approval.

MINISTRY INQUIRIES AND VISITS OF INSPECTION REGARDING SEWERAGE AND SEWAGE DISPOSAL SCHEMES OF SCHEMES OF WATER SUPPLY.

Eight such visits were made during the year, at all of which the Department was represented :—

8th February. Newcastle R.D. Visit of Inspection by Ministry of Housing and Local Government Engineering Inspector regarding the Audley and Madeley Sewerage and Sewage Disposal Scheme.

16th May.

Aldridge U.D. Ministry of Housing and Local Government Inquiry regarding the Aldridge and Lichfield R.D. joint Sewerage and Sewage Disposal Scheme.

31st May. Cannock R.D. Inquiry into the Wheaton Aston Sewerage and Sewage Disposal Scheme.

2nd June. Stafford R.D. Visit of Inspection—Great Bridgeford Sewerage and Sewage Disposal Scheme.

26th July. Tettenhall U.D. Ministry Inquiry regarding proposed new disposal works.

10th August. Cheadle R.D. Ministry Inquiry regarding the Blorewith-Swinscoe Water Scheme.

6th November. Tutbury R.D. Ministry Inquiry regarding Bartonunder-Needwood Sewerage and Sewage Disposal Scheme.

8th November. Leek R.D. Visit of Inspection regarding Light Oaks and Brown Edge Sewerage Schemes.

All sewage disposal works in respect of which the County Council are paying grants towards the cost continue to be visited and samples of effluent taken by the County Health Inspectors in order to ensure the works are being properly maintained.

Other sewage disposal works are also visited from time to time.

## PREVALENCE OF, AND CONTROL OVER, INFECTIOUS DISEASE

The following statistics relate to the notifiable infectious diseases amongst the home population during the calendar year 1956. 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 1956. The last cases recorded were in 1947, when an outbreak occurred in the south of the County, mainly in Bilston.

Scarlet Fever.—There was again a decrease in the incidence of this disease, 551 cases having been notified, compared with 627 in 1955 and 895 in 1954. In the Urban Districts there were 432 cases and in the Rural Districts 119, as against 467 and 160 respectively in the previous year. The case-rates per thousand of the population were:—Urban Districts 0.64, Rural Districts 0.52, with a total County Rate of 0.61, whilst that for England and Wales was 0.74. The corresponding rates for 1955 were 0.70, 0.71, 0.70 and 0.73 respectively.

DIPHTHERIA.—There was a decrease in the incidence of this disease, for 5 notifications were made, compared with 29 in the previous year. In the Urban Districts there were 3 cases, as against 10, and in the Rural Districts 2 as against 19. The total case-rate was 0.01, whilst that for England and Wales was 0.00, as against 0.03, and 0.00 respectively in the previous year.

No deaths occurred.

In 1955 there were two deaths from this disease.

ENTERIC FEVER.—Four notifications of enteric fever were made during the year as against six in 1955. All cases were of paratyphoid and occurred in Urban Districts.

Of the six cases notified in 1955 (two of typhoid and four of paratyphoid) four (including the two cases of typhoid) occurred in Urban Districts.

The 1956 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 nil and 0.00.

MEASLES.—During the period, 1.969 notifications were made, which indicates an appreciable decrease, for the corresponding figure for 1955 was 13,610. One thousand two hundred and ninety-six cases occurred in Urban and 673 in Rural Districts, compared with 10,623 and 2,987 in the previous year. The 1956 case-rates for the County and England and Wales were 2.18 and 3.59 as against 15.29 and 15.61 in 1955.

No deaths occurred. There were seven deaths in 1955.

Whooping Cough.—There was an increase in the number of notifications, 2,310 being made in 1956, as compared with 1,057 in 1955. In the Urban Districts there were 1,814 as against 848, whilst the corresponding figures for the Rural Districts were 496 and 209. The case-rate for the County was 2.56 and for England and Wales, 2.07.

There were five deaths during the year. In 1955 there were no deaths due to this cause.

Dysentery.—Seven hundred and twenty-six notifications were made in 1956 as compared with 374 in 1955, 879 in 1954 and 54 in 1953. Twenty-eight of the 35 Sanitary Districts were affected, but in four instances, viz., Sedgley U.D., Tamworth M.B., Tettenhall U.D. and Willenhall U.D., single cases only were notified.

Cases notified in other districts were as follows:—Aldridge U.D.24, Amblecote U.D. 2, Bilston M.B. 19, Brierley Hill U.D. 3, Brownhills U.D. 182, Cannock U.D. 19, Darlaston U.D. 3, Kidsgrove U.D. 10, Leek U.D. 5, Lichfield M.B. 20, Newcastle M.B. 120, Rowley Regis M.B. 4, Rugeley U.D. 7, Stafford M.B. 91, Tipton M.B. 32, Uttoxeter U.D. 40, Wednesbury M.B. 21, Cheadle R.D. 19, Lichfield R.D. 26, Newcastle R.D. 20, Seisdon R.D. 4, Stafford R.D. 14, Stone R.D. 12 and Uttoxeter R.D. 25.

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-two cases of Acute Poliomyelitis were notified, compared with 45 in 1955, 22 occurring in Urban and 10 in Rural Districts. Five cases of Acute Encephalitis were notified as against two in the previous year. One death occurred in an Urban District. There was no death in 1955.

Vaccination against Poliomyelitis.—The response of the public has been encouraging, 27,716 consents having been received for the vaccination of children born between the years 1947-54 (the years laid down by the Ministry).

Sufficient vaccine was provided by the Ministry for the vaccinations of some 2,600 children born in the months of November, 1947-54 and March, 1951-54 with August, 1947-54, as a reserve month.

Fifteen notifications of Meningococcal Infection (10 in 8 Urban areas and 5 in 3 Rural Districts) were made during 1956, compared with 19 in 1955. Three deaths occurred (two in Urban Districts). In the previous year there were four deaths.

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

Gastritis, Enteritis and Diarrhoea.—Five deaths occurred in Urban Districts and three in Rural Districts in children under one year of age, the death-rates being 0.45 and 0.82 respectively, per thousand live births. The figures for 1955 were 13, 1, 1.27 and 0.30 respectively.

INFLUENZA.—In 1956 there were 45 deaths in Urban and 15 in Rural Districts, as compared with 66 and 19 respectively, in 1955.

The number of cases of notifiable infectious diseases, with the deaths, in the Administrative County during 1956 are as follows:—

	Disea	coc		Notific	ations	Dea	ths
	Disca	iscs		Urban	Rural	Urban	Rural
Smallpox				 -		*	
Scarlet Fever				 432	119	*	
Diphtheria				 3	2		
Enteric Fever				 4		*	*
Measles				 1296	673	_	
Whooping Cou	gh			 1814	496	5	
Puerperal Pyre				 32	6	*	
Erysipelas				 40	30	*	*
Meningococcal				 10		2	1
Acute Poliomy			ic)	10	5 5 5	7	1
Acute Poliomy				12	5	1	
Acute Encepha	alitis (I	nfectiv	e)	 2	_	1	
Acute Encepha	alitis (F	ost In	fectious	2	1		
Pneumonia				297	84	227	73
Dysentery				606	120	*	*

<sup>\*</sup> 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:—

1956					New	CASES			DEA	THS	
1	AGE PI	ERIODS		Pulm	onary		on- onary	Pulm	onary	No Pulm	on- onary
				M.	F.	M.	F.	M.	F.	M.	F.
0				1	1	_	_	_	-	-	_
1	::	::	::	12	1 2 11	1 2	-	}-	TREAM	1	1 77
5-				8	8 7	2 4 3	5 3	14-	-	_	
10-				9	7		1	3			
20-				28 27	49	6	4	} 4	4		-
25		1:00	0::	58	43 59	6 6 4 3	1 4 3 4 3	13	12	2	1
35				42	36	3	3	1	12	-	
15				68	18	_	1	141	9	2	-
55—				56	11	1	1	5			
65—				21	2 4	1	1	15	1 3	-	-
o and	upwar	ds		4	4	_		2	3	1	-
	Tota	ls		336	251	31	26	75	29	6	1

During 1956, 104 deaths occurred from pulmonary tuberculosis and 6 from other forms of this disease, the death-rates being 0.12 and 0.01 respectively. The corresponding rates for 1955 were 0.09 and 0.01.

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

	DEAT		ER 1,000 OF	THE
YEAR	Pht	hisis	Other fo	
	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	0.19	0.10	0.04	0.00
1954	0.18	0.13	0.04	0.03
1955	0.10	0.04	0.01	0.01
1956	0.10	0.04	0.01	0.00

## NOTIFICATION.

The following are particulars of the primary notifications made from 1918:—

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	1955	1956			
775	813	852	837	807	901	805	958	808	696	623			

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 NOTIFICA	ATIONS	Case Ra	TE PER 1,000 POPULATION	OF THE
Year	Respiratory Tuberculosis	Non- Respiratory Tuberculosis	Tuberculosis (all forms)	Respiratory Tuberculosis	Non- Respiratory Tuberculosis	Tuberculosi (all forms)
1918			856			1.37
1919	THE STATE OF		699			1.04
1920			642			0.92
1921			929			1.29
1922	1981		971			1.37
1923			1,029			1.45
1924			974			1.36
1925			1,232			1.71
1926	Allo bridge		1,400			1.93
1927	Dana on I		1,106			1.55
1928	2		1,194			1.68
1929			1,017			1.43
1930	120 120 120 120 120		1,021			1.44
1931		THE PERSON	1,129			1.59
1932			1,074			1.50
1933		YMA	1,011			1.41
1934			929			1.29
1935	10 10 314	Name of the last	825			1.14
1936	DOT OUR DAY		831			1.14
1937	metros africas		858			1.16
1938			789 726			1.05
1939						0.95 0.88
1940	1797 HWE	PER PROPERTY OF	669 788			1.01
1941 1942			830			1.07
1943			841			1.09
1944			798		ALL SHARE OF	1.03
1945			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	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	958	1.00	0.11	1.10
1954	709	99	808	0.81	0.11	0.92
1955	620	76	696	0.70	0.09	0.78
1956	568	55	623	0.63	0.06	0.69

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

Number of cases other than primary notifications	1956	
coming to knowledge within the year	21	
Number of un-notified cases which died	4	
Number of other cases which died, notification being made after death	17	

Ratio of un-notified cases which died to total deaths 1:5.2

In 1956, roughly 9 out of 11 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 CASES		PULMONARY	Non-Pulmonary				
CASES	M.	F.	Total	M.	F.	Total	
8,935	3,895	3,360	7,255	819	861	1,680	

The figures given above indicate that in 1956 there was one case of tuberculosis in every 101 persons, or 9.9 per 1,000 of the population.

The table also shows that in 1956 there was one death in approximately every 81 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 279 persons were examined in this way in connection with their appointments to the staff of the County Council.

In addition, 111 members of the staff of the Children's Department engaged in the work of Children's Homes received an annual X-ray.

The following are short reports of work done by Units operating in the Administrative County during 1956:—

STOKE-ON-TRENT M.R. UNIT.

During the year, the Unit carried out 67,000 miniature X-ray examinations, an increase of 13,000 against 1955.

The number of General Practitioners' cases and of self-referred persons who attend the Unit's headquarters, is increasing from year to year. Chest X-rays are offered to all expectant mothers in Stoke, Newcastle and in the area of the Newcastle Rural District Council. The number of 1,400 Ante-Natal Chest X-rays in 1956 compares unfavourably with the average annual number of births in Stoke and Newcastle (5,000) and it is obvious that full use of the service for this important group is not yet being made.

A scheme to X-ray all adult family contacts of children who were Mantoux positive at the age of 5, was started in Newcastle at the end of the year and will be fully developed in 1957.

### Tuberculosis.

The total prevalence rate of active tuberculosis—3.1 per thousand—was similar to that in the three previous years. Of the 221 active cases, 32 had been previously known at chest clinics, but a considerable proportion of these persons had failed to attend the clinics regularly or otherwise defaulted against the advice of the chest physicians. By renewing their supervision and in some cases treatment, they became practically though not statistically "new cases."

It is most encouraging that the tuberculosis rates in the Pottery industry have significantly fallen since the first round of surveys. However, in view of the close relation between silicosis and tuberculosis, surveys in the industry will be fully continued.

## WOLVERHAMPTON M.R. UNIT.

There was no change in the type of work undertaken by the Unit during 1956, and the regular sessions at Base for general practitioner referrals, ante-natal cases, etc., continued. These various groups examined at New Cross Hospital provided about one-third of all persons X-rayed during the year.

#### SURVEYS AT BASE.

Nearly seventeen thousand persons were X-rayed at the New Cross Hospital Base and of these, 6,845 were from the three groups known to yield the highest incidence of tuberculosis.

Each Monday morning the Unit was available for the examination, without appointment, of patients referred by general practitioners, contacts of notified and other cases, ante-natal cases, School Medical Department referrals, teachers, hospital staff, etc.

General practitioners in the Wolverhampton, Bilston and Willenhall areas regularly referred patients, and others came from Seisdon, Shifnal, Coseley, etc.: over 100 attended each week. Where the miniature film was normal a report was received by the general practitioner within 48 hours. Still greater use should be made of this service which provides a speedy and economical way of X-raying large numbers of patients with no loss of abnormality detection. Almost all of those recalled for further investigation were seen at the Chest (Medical) Out Patient Clinic at New Cross Hospital on the following Thursday morning, the large films being taken at the Hospital X-ray Department. Others were seen on the following Monday at the Mass Radiography Unit.

Examination of contacts of notified cases was arranged by the Health Visitors during their home visits and 1,181 attended during the year, slightly more than in 1955. Tuberculin testing, by means of the Heaf Gun, was offered to children and young adults under the age of 21 years, when they attended the Monday morning sessions, and this was carried out by a Health Visitor immediately after the miniature film had been taken. Negative reactors were vaccinated with B.C.G. at the Thursday morning Chest (Medical) Out Patient Clinic.

The School Medical Department arranged for all children with positive tuberculin tests and many of their family contacts to be examined. Children being tuberculin tested prior to B.C.G. vaccination were also sent for X-ray.

There was an increase in the number of ante-natal cases referred by the clinics and by general practitioners. It must be stressed how important it is for these patients to be sent along for X-ray as early in pregnancy as possible. In this way, most of those with active tuberculosis can have their hospital treatment nearly completed by the time the baby is due. The period of separation of baby from mother is then greatly shortened.

The arrival of Hungarian Refugees at Hednesford resulted in the Unit visiting the R.A.F. Camp once before the end of the year and several cases of active tuberculosis were discovered.

## TUBERCULOSIS.

154 cases of tuberculosis requiring immediate treatment and 23 requiring close clinic supervision were found, a total of 177 and identical with the figure for 1955.

The rate for general practitioner referrals, contacts and those referred by the School Medical Department, was 13 per thousand, representing 89 active cases of whom 48 had a positive sputum. Excluding these three groups, the rate among all other groups was 1.8 per thousand, representing 88 active cases of whom 35 had a positive sputum.

## DUDLEY MOBILE M.R. UNIT.

In 1956 the work of the Dudley Unit increased at Base, particularly in the number of Doctors' cases referred, thus the overall picture for the year is one of less routine miniature film work in the area, but an increase in special group work, with a relevant rise in the rate of tuberculosis found, although there has been a fall in the number of examinations.

The total number of miniature films taken has dropped by 17,877 compared with 1955, but the prevalence rate of tuberculosis is now 2.3 per thousand, against 1.9 in 1955; these facts are accounted for by the regular return of the Unit to Base and to the other centres for special group examinations which involve considerable travelling time for comparatively few films at each session.

The sessions at Base continue on the first and third Fridays of each month and are becoming increasingly widely known as evidenced, not only by the increase in the number of cases referred by General Practitioners, but by the number of self referred people who are only examined if willing for a report to be sent to their Practitioner.

SOUTH STAFFORDSHIRE.

All the industrial areas of South Staffordshire covered by this Unit were visited. Brierley Hill in March, Sedgley in the Autumn and Tipton as usual, had its annual visit commencing in December and continuing into January, 1957.

In Brierley Hill the Unit was removed from the Van for siting centrally in the Town Hall for three weeks, but this did not yield as good results as when the Unit was fully mobile, visiting factories before undertaking public sessions.

These three towns gave, as expected, a relatively high rate of abnormal findings, and forty-one new cases of pneumoconiosis were discovered and referred to the Panel for assessment. More tuberculosis was found in Tipton this year than twelve months ago.

## TUBERCULOSIS HEALTH VISITING

As stated in previous reports there are three whole-time Tuberculosis Health Visitors and the total number of visits made by the Visitors to Tuberculous households was 4,918.

Tuberculosis-1956, Circular 1/54.

As will be seen in a previous table there were 568 notified cases of pulmonary Tuberculosis during the year.

Figures are available from 7 of the 8 clinics dealing with contacts residing in the Administrative County and in total 2,170 contacts were examined at the Clinics or Mass Radiography Units during 1956, of which 50 were found to be Tuberculous.

There has been little change in procedure as mentioned in last year's report at the Newcastle Clinic. On a case being notified the home circumstances are investigated by the Health Visitor and also by the Welfare Officer, and all contacts are asked to attend the Clinic for examination. The children of notified cases are Mantoux tested, or in the case of the very young, Tuberculin Jelly tested and negative cases are offered B.C.G. innoculation. The response is satisfactory.

The employment in this area of known cases of tuberculosis has always been rather a problem because of the types of industry available in this district, but with the co-operation of the Social Welfare Officer and the D.R.O., it was possible to get most of the patients into suitable jobs according to their clinical condition. A few of the older age group with chronic disease and persistently positive sputum, sometimes complicated by pneumoconiosis, form a residue of unemployables and are also a potential source of infection, but these cases are examined regularly and the General Practitioners refer any member of the family who develop symptoms which suggest the need for examination at the Clinic.

The Stafford Clinic reports a most satisfactory position regarding the examination of "contacts" of newly notified cases—99% of contacts were seen which means that with the exception of one family all were examined. Similarly all those who were offered B.C.G. Vaccination in the same group have accepted it and have been done. This is a definite improvement on previous years and shows that the Public is certainly

more ready to accept the facilities offered to them. The "contacts" of people who are notified as dying from Tuberculosis after death are examined and followed up the same way as the "contacts" of other notified cases. Early cases, whether among adults or children, are followed up routinely at the Clinic, as in previous years.

## B.C.G. VACCINATION

During the year a total of 705 cases were vaccinated at the Tuberculosis Dispensaries.

In 1953 the Ministry of Health issued a circular allowing Local Health Authorities to extend this type of vaccination to school children in the 13 to 14 year age group, but as the medical evidence was not clear and trials were being undertaken by the Medical Research Council the Health Committee, who considered the matter in 1953 and 1954, decided to await the results of the trials before implementing the scheme. This year the results have been ascertained and as it appears certain that B.C.G. can contribute substantially to the preventive aspects of the tuberculosis problem the County Council have agreed that a scheme of vaccination shall be initiated in the County as soon as possible and the necessary arrangements for the appointment of vaccination teams, etc., were being made at the end of the year.

#### CANCER

In the following table the deaths from Cancer during 1956, in age and sex groups, in the Urban and Rural Districts of the County, are shown:—

Age	UR	BAN DISTI	Ru	I STORY			
Groups	Male	Female	Total	Male	Female	Total	- Grand Total
0—	_	_	_	_	_	_	-
1	4	1	5	1	1	2	7
5—	3	3	6	1	1	2	8
15—	4	2	6	1	3	4	10
25—	42	44	86	5	9	14	100
15—	310	235	545	78	63	141	686
55—	205	165	370	62	46	108	478
75—	120	125	245	45	54	99	344
Totals	688	575	1,263	193	177	370	1,633

As will be seen from the preceding table, this year there were 1,633 deaths from Cancer. In 1955 there were 1,523 preceded by 1,568 in 1954. This year's total is the highest number so far recorded in the Administrative County, the second highest being in 1954. In each year since 1937 the figure has exceeded 1,000. During the period under review this group of deaths accounted for 17.0 per cent. of the total civilian deaths, as compared with 15.8 per cent. last year, when the total number of deaths from all causes was larger by 19. 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 125, the same as last year. In 1954 the figure was 128.

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 11.3 per cent. in 1956.

#### VENEREAL DISEASES

During the year, 694 Staffordshire patients attended for diagnosis and treatment for the first time, compared with 706 in 1955, and the following detailed table indicates where it was obtained. It will be seen that in 1956, 531 of the persons who attended were found not to be infected, and the corresponding figure in the previous year was 562. The actual cases in 1955 and 1956 were 144 and 163 respectively.

TREATMENT CENTRE		Syphilis	Gonorr- hœa	Other Condi- tions	Total New Cases
Birmingham General Hospital		2	11	65	78
Burton-on-Trent General Infirmary			1	4	5
Dudley Guest Hospital		7	35	111	153
Stafford (Staffordshire General Infirmary	)	11	6	56	73
Stoke-on-Trent (North Staffordshire Re	oval				
Infirmary)		14	12	67	93
Stoke-on-Trent (Wellesley Street)		5	10	49	64
Walsall (Manor Hospital)		3	6	40	49
Wolverhampton Royal Hospital		4	36	139	179
Totals		46	117	531	694

For comparative purposes the totals of the cases included in the foregoing table for the last twenty-two 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	3	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
1955		39	-	105	144	562
1956		46	_	117	163	531

## BLIND PERSONS

The following table gives particulars of Registered Blind and Partially Sighted Persons registered during 1956. Of the 250 cases registered, 136 were recommended for treatment of one sort or another, and 90 of these actually received such treatment, the difference being accounted for mainly owing to refusals to have treatment due to their age.

	des to, the french life middle	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	22	6	18-190	86	
	(b) Treatment (medical, surgical or optical)	65	19	-	52	
(ii)	Number of cases at (i) (b) above which on follow-up action have received treatment	41	14	113/1	35	

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 17. In 12 instances the confinements were domiciliary. Of these 10 were nursed at home, and two were admitted to hospital.

The remaining five cases were born in hospital. In every instance the condition occurred subsequent to discharge. Two children were admitted to hospital, one was treated at hospital as an out-patient and two were treated at home.

Of the 17 cases, 3 were moderately severe and 14 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 1956, as formerly, the County Council made a grant to the Central Council for Health Education and during the year the latter again provided speakers to give "in-service" training to various sections of the staff to enable them better to understand and use the techniques of health education. In addition, exhibition stands and a succession of interchangeable topic material were supplied by the Central Council for use at Clinics.

The topics on health subjects were in use at the Welfare Centres and School Clinics in each Area. Posters and leaflets on a wide range of health educational subjects were again distributed and displayed throughout the Administrative County.

Increasing attention is being given to the use of visual aids, and a "library" of flannelgraphs has been established in order to assist in the work of health education. Film strips dealing with the promotion of better health are also being used as part of the educational programme and the subjects include Social Services, Home Safety, Home Nursing, Midwifery, Child development and the care of children's teeth, eyes, ears, etc., and the audiences have expressed their interest and appreciation.

Display cards giving details of services provided by the County Council under the National Health Service Scheme were supplied to all Welfare Centres and to those family doctors with practices in the Administrative County.

Three projectors were purchased for showing of film strips and have been allocated to various Areas of the County.

# 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 658 medical examinations were undertaken, 341 by medical staff of the Department at County Council Clinics and 317 by General Practitioners and other Authorities. The figures for the previous year were 627, 342 and 285 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 until this year when a revision took place of the Ambulance Service arrangements. Details of this revision will be found under the appropriate section of this Report.

#### CARE OF MOTHERS AND YOUNG CHILDREN

INFANT WELFARE CENTRES.

During 1956, two new Centres were opened at Guest Avenue, Wednesfield and Queen Elizabeth Avenue, Darlaston.

During the year the Centre at Bolehall was closed.

At the end of the year there were 109 Welfare Centres in operation, of which 59 were combined (i.e., Minor Ailment Clinics and Welfare Centres) and 50 were Welfare Centres only.

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

No. of session	ns					5,294
No. of children				ing the	year	
1956						8,169
1955						4,428
1954—1951						4,219
Tot	al		10.00			16,816
No. of attend children were :						
Under	1 year	to make	·			133,721
1 but	under 2	2				32,928
2 but	under a	5				31,883
Tot	al			ee		198,532

PROVISION OF NEW INFANT WELFARE CENTRES.

In July a deputation consisting of the Chairman of the Health Committee, Vice-Chairman of the County Council and certain County Councillors visited the Ministry of Health regarding the urgency for provision of new Welfare Centres at Stafford (Rising Brook), Willenhall (Short Heath) and Tipton (Birch Street), but the Minister was unable to recommend the necessary loan sanction at that time. He stated, however, that when building was again possible and consideration could be given to the various schemes now awaiting loan sanction those mentioned would receive sympathetic consideration. New clinic schemes will continue to be forwarded to the Ministry for approval in principle and when this is received and the site is secured the preparation of working drawings, etc., will be proceeded with, to go out to tender without delay when loan sanction is eventually received.

#### ANTE-NATAL CLINICS.

At 31st December, 1956, there were 46 Ante-Natal Clinics (special sessions being held at 34 of them) and 3 Post-Natal Clinics (1 special and 2 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 attending ... 5,987 Total number of attendances ... 17,004

One hundred and forty-two women attended the Post-Natal Clinics during the year, 170 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 appropriate cases free of cost. The number issued during the year was 7,662 as against 6,709 for 1952, 7,263 for 1953, 6,970 for 1954 and 6,721 for 1955.

## 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 1956, 38 cases of Puerperal Pyrexia were notified in the County area.

Of the cases dealt with during the period under review, 7 were sent to hospital and 16 were cases in which confinement had taken place in hospital.

## HEARING TESTING OF YOUNG CHILDREN.

On the 15th January, 1955, the Health Committee approved a scheme for screening tests of the hearing of young children, in order to ascertain deafness and defective hearing at the earliest possible age. The procedure is extremely valuable in the interests of the children because they can be given appropriate training before they reach school age and the disability combatted earlier in life.

Thirty selected Health Visitors and three Assistant County Medical Officers from all parts of the County have received the necessary training. Each of the Health Visitors concerned has been provided with the necessary equipment and it is intended that all children on reaching the age of nine months, or as soon as possible thereafter, will be tested as a routine. Younger children in whom there is a suspicion of deafness or any child who does not appear to be making satisfactory progress with speech are also tested.

Any child who fails the tests is referred for examination by a Medical Officer at the Welfare Centre most convenient for the mother, in order to exclude as the cause of deafness conditions which require immediate treatment. The records of the results of the screening tests by the Health Visitors are made available to the Medical Officers for this examination. The Medical Officer at the Centre then refers the names of children considered to be deaf together with the results of the screening tests, to the Central Department for arrangements to be made for examination at a diagnostic clinic, one of which is in Stafford and the other at Newcastle. For the time being children in the South of the County are attending a diagnostic clinic in Birmingham.

As far as the diagnostic clinics at Newcastle and Stafford are concerned, two Medical Officers and two Health Visitors received special instruction at the Department of Education of the Deaf, Manchester University, in September, 1955.

Sessions of the diagnostic clinics are held as and when a sufficient number of children have been referred for testing, and children whose deafness is confirmed are referred to an Aural Surgeon at a Centre most convenient to the mother.

The Scheme came into operation on the 1st January, 1956, and the following table gives details of the number of children tested:—

No. of children	receiving a	screening	test at-
-----------------	-------------	-----------	----------

Clinic					 110
at home					 129
		Total			 239
No. of childre	n w	ho failed	the tes	t	 8

## OPHTHALMIC TREATMENT.

During the year 142 children were referred from the Infant Welfare Centres for ophthalmic examination.

Glasses were prescribed for 94 of these children who are mostly cases of squint and are kept under supervision.

These cases, with others seen in previous years, made 269 visits to the Clinics.

#### ARTIFICIAL LIGHT.

During the year 328 cases were referred for artificial light treatment.

## DENTAL TREATMENT.

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

	Examined	Needing Treatment	Treatment	Made Dentally Fit
Expectant and nursing mothers		517	515	255
Children under five	804	804	804	804

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

	Extractions	General	90	gs or gs and freatment	Nitrate	sgu	Radiographs		tures
	Extra	General Anæsth Fillings			Silver Nitr Treatment Dressings		Com- plete	Partial	
Expectant and Nursing Mothers	2,377	302	335	150	-	502	35	190	112
Children under five	1,308	336	113	-	30	_	_	_	

Dentures supplied were constructed in the County Dental Laboratory. X-ray units are available at Stafford, Bilston, Sedgley, Cannock, Lichfield 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:—

	DEN	TURE	Work			
No	ature of	Dent	ure		Nos.	Completed
Full upper denter Full lower denter Partial upper de Partial lower de Remakes	ures ires entures ntures					109 83 284 47 12 24
Repairs to denti	ires		***	1000		
Total						559
						MIN
			NTICS			6 1117
	Appl	iances			Nos	s. Completed
Regulation appli Repairs to appli						315 9
Total						324
						MD.
	S	UNDR	IES.			
-	Natu	re of			Nos	. Completed
Obturators						_
Crowns						
Inlays					•••	H-NTTON.
Splints		***	***	II PARKETO	***	83
Special trays	***				0 15 14	1
Ear plugs						U. Ivonia
Total						84

# DISTRIBUTION OF WELFARE FOODS.

The County Council in their capacity as Local Health Authority are now responsible for the distribution of Welfare Foods, i.e., National Dried Milk, Orange Juice, Cod Liver Oil and Vitamin A and D Tablets.

Several of the Voluntary Centres, i.e., at shops or private houses, in the rural parts of the County ceased to exist during the year, but little difficulty was experienced in finding other volunteers to undertake the work. EXTRA NOURISHMENT.

During the financial year 1956-57 the sales and free issues amounted to £25,182 as compared with £20,200 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 1956:—

Number of live births		 	14,751
Number of stillbirths		 	381
Notified by midwives		 	14,470
Notified by parents and de	octors	 	662

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 1956:—

Children	with moth	ers at	home			91
"	with parer					10
"	with moth	ers in	situation	ns		2
"	with moth					1
"	with parer	its co-	habiting			4
"	in Local A				***	7
- ,,	in Volunta		ldren's	Homes	***	4
",	with adop	ters			400	47
Child tra		***				4
Children						3
	stillborn					3
Miscarria	age					3
						179

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

Forty-eight of the cases concerned married women; 7 of these were widows, 10 divorced and 7 legally separated. These cases have frequently involved finding temporary accommodation for the children of the marriage and interviewing the husband with a view to reconciliation and/or obtaining his consent to the making of an Adoption Order.

The ages of the mothers ranged between 13 and 43, there being 21 under the age of 17 years.

# Broadfield House, Kingswinford.

As mentioned in previous reports the County Council has a Mothercraft Training Hostel at Kingswinford with accommodation for 18 cases.

In 1956, 54 cases were admitted, 15 still being in residence at the end of the year.

## PREMATURITY.

The following table gives particulars of the number of premature infants who were born during 1956:—

(1)	Number	of Premature	Live Birt	hs Note	ified.	
	(a)	In hospital				 633
	(b)	At home				 362
	(c)	In private n	ursing ho	omes		 10
			То	tal		 1,005
(2)	Number	of Premature	Stillbirth	s Notif	ied.	
	(a)	In hospital				 126
	(b)	At home				 51
	(c)	In private r	nursing h	omes		 4
			То	tal		 181

PREMATURE LIVE BIRTHS STILLBIRTHS	-	Total List of days birth	9 7 1 26 10 10 61 25	19 2 17 35 5 22 1 - 1 - 34 11	36 - 34 14 - 9 3 - 2 14 3	196     3     191     27     2     20     5     i     4     1     -     -     17     12	
	spital	Sur- vived 28 days	28	89	116	309	501
	Born in hospital	Died within 1 24 hrs. of birth	43	16	7	4	ct
	Born	Total	93	93	127	320	(00)

NURSERIES AND CHILD MINDERS' REGULATION ACT, 1948.

During 1956 two applications for registration were received under the above-mentioned Act, one for the registration of premises and the other as a child minder, so that at the end of the year premises were registered in two instances and two persons remained registered as child minders.

## DAY NURSERIES.

The following table gives particulars of the Day Nurseries in operation in the Administrative County during 1956:—

	No. of Approved Places		red at end of			Average Daily Attendance	
	0-2	2-5	0-2	2-5	0-2	2-5	
Newcastle (Liverpool Road, Cross Heath)	15	25	14	21	7.3	13.5	
STAFFORD (Riverside, South Walls)	25	25	9 7	36	11.0	16.0	
TIPTON (Toll End Road)	12	38	7	21	6.0	16.0	
Bilston (Prouds Lane)	10	30	9	25	7.6	15.0	
Wednesfield (Lichfield Road)	20	30	9	21	5.5	13.7	
WILLENHALL (Pinson Park)	25	25	10	24	13.1	16-1	

As has been stated in previous Reports, the County Council also accepts 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	 	 3.1
2 - 5	years	 	 10.7

#### 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 1950 Report it has 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 16 deaths during the year arising from pregnancy, childbirth and abortion. Fifteen of these occurred in hospital.

In 1955 the number of maternal deaths occurring in the Administrative County was 7.

Of the number of cases attended by midwives or maternity nurses two deaths were reported in accordance with the rules of the Central Midwives Board.

As a result of routine enquiry into each of these maternal deaths 8 were considered to have been unavoidable, 2 to be due to the mothers' own action or neglect and in the remaining 6 there appeared to be some contributory factors which might possibly have been avoided.

The series of meetings held during the latter half of the year in various parts of Staffordshire between professional representatives of the hospital, general practitioner and local authority health services to discuss what part each should play in the care of the expectant mother, especially in relation to toxaemia of pregnancy, should result in a much greater degree of co-operation between them and in earlier diagnosis and treatment of conditions which if untreated might lead to death of the mother.

## 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 90. The remaining causes mentioned above have not been classified.

During 1956, 50 deaths were reported by the midwives, having occurred whilst they were in attendance. Twelve of these were due to feebleness and prematurity.

#### FAMILY PLANNING

The Family Planning Association maintains four clinics in the Administrative County, at Bilston, Cannock, Leek and Stafford. 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 Church Street, Cannock on the 2nd and 4th Thursdays from 2 to 4 p.m. and 4.30–6.30 p.m. respectively. The Leek Clinic at Salisbury Street is held on Wednesdays fortnightly from 7.0 p.m. to 9.0 p.m. 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 have been given in a previous 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. The Medical Officers to the Area Health Committees act as co-ordinating officers on behalf of the County Medical Officer, and periodical meetings are held between them and the interested Authorities, Societies, etc., in their respective Areas. During the year some 127 cases were considered and the necessary action taken wherever possible. Good results were obtained in many cases.

## PREVENTION OF BREAK-UP OF FAMILIES

Mention was made in the 1955 Report of Ministry of Health Circular 27/54, dated 30th November, 1954, which stressed, *inter alia*, the importance of the health of children in relation to the break-up of families and which suggested that the duties of maintaining the families by preventive action should be undertaken under Section 28 (Prevention of Illness, Care and After-Care) of the National Health Service Act by the health visiting staff and that certain Local Authorities might find a need to employ a trained Social Case Worker.

As stated previously, the Health Committee approved the scheme, which included the appointment of a Social Worker to serve the Rowley Regis/Wednesbury Areas, and the person appointed commenced duty in February, 1957.

The Ministry in addition, stated that an essential feature of the care of these problem families is that *one* particular visitor only should visit—these homes are liable to be visited by a plethora of visitors from various Departments and Organisations, and the Health Committee agreed that the views of the other Departments, District Councils, Societies, etc., should be ascertained, with the suggestion that when an impending or actual problem family is to be visited, visits other than those of the Health Visitor concerned should be suspended. This investigation has been carried out and it is very satisfactory to know that most of those approached in this way have agreed to co-operate, and this scheme of visitation began towards the end of the year. It is, of course, too early to assess the results of the work carried out by the Health Visitors concerned or Social Worker as yet.

A third aspect of the scheme for the prevention of break-up of families, i.e., where eviction is likely through arrears of rent, complaints from neighbours, damage to houses, etc., has also been considered by the Health Committee, and the District Councils have been approached with regard to the provision in their districts of "half-way houses" as temporary accommodation for families evicted from their homes for such reasons as those given above.

## HOME NURSING SERVICE

At the 31st December, 1956, there were 83 whole-time general nurses, together with 79 part-time general nurses, 47 being also domiciliary midwives and 32 district nurse-midwives with part-time health visiting duties.

The principle of employment of male nurses in certain thickly populated 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 at the end of 1956 five male nurses were in the employ of the County Council, being centred in Newcastle-under-Lyme, Willenhall, Tipton, Wednesbury and Cannock. These are included in the figure of 83 whole-time general nurses mentioned above.

As previously stated, the combined appointments of District Nurse and Midwife or Health Visitor are made 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, 139 were car users, one had an autocycle, the remainder using ordinary cycles for their work.

During the year 342,670 home visits were made by the nurses, the number of cases attended being 13,889.

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

HOME NURSING-CIRCULAR 17/55.

Since the 5th July, 1948, there has been a considerable increase in the number of nursing staff employed in the Home Nursing Service and whereas at that time 61 whole-time nurses and 71 who combined general with other nursing duties were employed, on the 31st December, 1956, the establishment figures were 84 and 79 respectively. Of the 84 whole-time nurses the establishment provides for 6 male nurses.

The nursing of sick children is undertaken by each nurse in her own district and based on statistics for 1956, children in the 0-5 age group formed only 4.8% of the total patients attended.

The greatest proportion of the Home Nurse's time continues to be taken up with the care of the chronic sick and aged infirm, but helped by the nurses many of these patients who otherwise would become bedfast are encouraged to get up and, so far as possible, take part in their family life. As a result fewer patients in these categories now develop bed sores and there is less deterioration of their mental powers.

More cases of tuberculosis are now nursed at home, particularly in the early stages of the disease, but terminal cases are fewer. There is also an increase in the home nursing of diseases which respond to treatment by antibiotics, such as pneumonia and septic conditions, and more patients receive preparatory enemata from the Home Nurses prior to special investigations at hospital. It is possible this year to give a full analysis of the types of work which Home Nurses were called upon to do during the whole of 1956, and the figures are given in the table below. As will be seen the trends follow a similar pattern to those for the single month of December given in the 1955 Report.

		Age 0-5	Age 5-15	Age 15–65	Age over 65	Total
Accidental wounds		 73	189	333	120	715
Burns and Scalds		 108	52	131	66	357
Sepsis		 47	39	338	148	572
Tuberculosis		 2	11	484	57	554
Other Respiratory disease		 132	51	496	534	1,213
Ear, nose and throat		 67	87	165	41	360
Dental conditions		 3	11	15	11	40
Eye conditions		 26	20	19	86	151
Gynaecological conditions		 1	_	503	399	903
Other genito-urinary		 28	2	231	288	549
Bones and joints	10.0.0	 7	27	166	256	456
Rheumatic diseases		 2	11	239	281	533
Cerebral Haemorrhage and	1				1	
Thrombosis		 1	-	287	975	1,263
Veins and other circulator	y	 6	5	408	1,056	1,475
Heart		 2	-	620	1,483	2,105
Diabetes		 1	1	319	535	856
Enemas		 70	78	794	717	1,654
Gastro-intestinal diseases		 42	13	216	223	494
Helminth infections		 8	7	15	6	36
Infectious diseases		 34	11	10	12	67
Injections (for asthma)		 3	6	36	39	84
Injections (for relief of pai	n)		5	111	115	231
Injections (antibiotics)		 74	135	1,052	370	1,631
Mental		 1	5	138	104	248
New growths		 2	5	350	356	718
Post-operative		 111	4.7	705	350	1,212
Senility		 -	_	54	1,155	1,210
Skin		 55	28	86	132	301
Other diseases		 101	21	438	580	1,140
Total		 1,007	864	8,759	10,493	21,123

## MIDWIVES' SERVICE

The following are particulars of the midwives practising at the end of 1956:—

Number of midwives employed by the Authority

Number of midwives employed by Hospital

Number of undwives em	DIOVEC	I DV LIN	Treffer	JIILY	- A-1/2-1/2
2,000	15			(i	including 3
				reli	ef midwives)
					R.N., S.C.M.
				The state of the s	S.C.M. 77)
Number of midwives in	privat	e pract	ice (in		
ing midwives emplo	ved in	Nursir	ng Hon	nes):	
Domiciliary					10*
In Institutions					5

Management Committees ... ... 72
\*In addition, six out-of-area midwives notified, but of these only two 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:—

71

		NUMBER	OF DELIVE	NUMBER OF DELIVERIES ATTENDED BY MIDWIVES IN THE AREA DURING THE YEAR	DED BY MID'E YEAR	WIVES IN T	HE AREA
			I	Domiciliary Cases	25		
		Doctor no	Doctor not booked	Doctor	Doctor booked		
Section 19 Section 19		Doctor present at time of delivery of child	Doctor not present at time of delivery of child	Doctor present at time of delivery of child (either the booked Doctor or another)	Doctor not present at time of delivery of child	Totals	Cases in Institutions
(a)	Midwives employed by the Authority	901	1,804	1,202	4,163	7,275	20
1	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	1	1		1	1	1
	(ii) Otherwise (including Hospitals not transferred to the Minister under the National Health Service Act)	1	I			1	1
	Midwives employed by Hospital Management Committees or Boards of Governors under the National Health Service Act	1	1	Ī		1	2,900
	Midwives in Private Practice (including Midwives employed in Nursing Homes)	2	75	23	2	102	108
	TOTALS	108	1,879	1,225	4,165	7,377	3,028

Of the midwives employed by the Authority, 143 were car users, three had autocycles and one used a Bond Minicar, the remainder using ordinary cycles for their work.

(These figures include the details of the transport of district nurse-midwives 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 1,312 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 seventeen years are given in the following table :—

Year	*No. of Births attended by Mid- wives	Medical Aid Notices	Still- births	Death of Mother	Death of Child	Contact with Infec- tion	Laying out the Dead	Artificial 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	7	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	8	119	113	14	460
1946	8,526	3,248	164	5	151	94	22	474
1947	9,375	3,358	167	4	127	125	18	568
1948	8,071	3,375	199	5 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	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
1955	5,693	1,188	168	1	43	67	14	815
1956	6,044	1,162	159	2	50	38	13	743

<sup>\*</sup>Including midwifery cases in private maternity homes.

The percentage of doctors' calls to the number of births attended by midwives was 19.2.

The following figures show	the causes wl	hich occasioned	the sending
for medical assistance :-			min the

		_					
PREGNA							
	Albuminuria	777					8
	Blood Pressur						8
	Hæmorrhage		rtum		***	***	17
	Loss of Blood						1
	Threatened A						13
	Unsatisfactory	y condit:	ion and	genera	al health	h	27
	-						
	Tota	1					74
The Post							
LABOUR							
	Abnormal Pre		n		***		43
	Abortion						22
	Albuminuria		:				2
	Delayed or D						103
	Hæmorrhage						25
	Hæmorrhage						1
	Hæmorrhage	Post-par	rtum				47
	Inertia						20
	Lacerated Per						386
	Placenta Præ						1
	Premature La						28
	Prolapse of Co						6
	Retained Place			branes			32
	Unsatisfactor	y Condi	tion				54
	Tota	l					770
Lying-i	N :						180
Lying-i		ature					72
Lying-i	High Tempera		 Leg				72 16
Lying-i		Painful					
LYING-I	High Tempera Inflamed and	Painful					16 49
Lying-i	High Tempera Inflamed and	Painful y Condi					16
Lying-i	High Tempera Inflamed and Unsatisfactor	Painful y Condi					16 49
LYING-I	High Tempera Inflamed and Unsatisfactor	Painful y Condi					16 49
	High Tempera Inflamed and Unsatisfactor	Painful y Condi					16 49
	High Temper: Inflamed and Unsatisfactor Tota	Painful y Condi					16 49 137
	High Tempers Inflamed and Unsatisfactor  Tota  Asphyxia Convulsions Deformities	Painful y Condi ıl	 				$   \begin{array}{r}     16 \\     49 \\ \hline     137 \\     \hline     10 \\     2 \\     4   \end{array} $
	High Tempers Inflamed and Unsatisfactor Tota  Asphyxia Convulsions	Painful y Condi ıl	 				16 49 137 10 2
	High Tempers Inflamed and Unsatisfactor  Tota  Asphyxia Convulsions Deformities Feebleness an Hæmorrhage	Painful y Condi ul   d Prem (Bowel)	ion aturity				16 49 137 10 2 4 33 1
	High Tempers Inflamed and Unsatisfactor  Tota  Asphyxia Convulsions Deformities Feebleness and	Painful y Condi ul   d Prem (Bowel)	ion aturity				16 49 137 10 2 4 33 1 1
	High Tempers Inflamed and Unsatisfactor  Tota  Asphyxia Convulsions Deformities Feebleness an Hæmorrhage	Painful y Condi al  d Prem (Bowel) (Mouth)	ition aturity				16 49 137 10 2 4 33 1
	High Tempers Inflamed and Unsatisfactor  Tota  Asphyxia Convulsions Deformities Feebleness an Hæmorrhage Hæmorrhage	Painful y Condi   d Prem (Bowel) (Mouth)	ion aturity 'a'ate				16 49 137 10 2 4 33 1 1 1 5 44
	High Tempers Inflamed and Unsatisfactor  Tota  Asphyxia Convulsions Deformities Feebleness an Hæmorrhage Hæmorrhage Hare Lip and	Painful y Condi   d Prem (Bowel) (Mouth)	ion aturity 'a'ate				16 49 137 10 2 4 33 1 1 5 44 7
	Asphyxia Convulsions Deformities Feebleness an Hæmorrhage Hare Lip and Inflamed and	Painful y Condi   d Prem (Bowel) (Mouth)	ion aturity 'a'ate				16 49 137 10 2 4 33 1 1 5 44 7
	Asphyxia Convulsions Deformities Feebleness an Hæmorrhage Hare Lip and Inflamed and Jaundice Pemphigus Rash	Painful y Condi   d Prem (Bowel) (Mouth)	ion aturity 'a'ate				16 49 137 10 2 4 33 1 1 5 44 7 1 4
	Asphyxia Convulsions Deformities Feebleness an Hæmorrhage Hæmorrhage Hare Lip and Inflamed and Jaundice Pemphigus	Painful y Condi  Il  Id Prem (Bowel) (Mouth) Cleft P Discha	aturity 'a'ate rging E				16 49 137 10 2 4 33 1 1 5 44 7 1 4 6
	Asphyxia Convulsions Deformities Feebleness an Hæmorrhage Hamorrhage Hare Lip and Inflamed and Jaundice Pemphigus Rash Spina Bifida Unsatisfactor	Painful y Condi   d Prem (Bowel) (Mouth) Cleft P Discha	aturity a'ate rging E				16 49 137 10 2 4 33 1 1 5 44 7 1 4 6 6 62
	Asphyxia Convulsions Deformities Feebleness an Hæmorrhage Hare Lip and Inflamed and Jaundice Pemphigus Rash Spina Bifida	Painful y Condi   d Prem (Bowel) (Mouth) Cleft P Discha	aturity a'ate rging E				16 49 137 10 2 4 33 1 1 5 44 7 1 4 6
	Asphyxia Convulsions Deformities Feebleness an Hæmorrhage Hare Lip and Inflamed and Jaundice Pemphigus Rash Spina Bifida Unsatisfactor Watery Bliste	Painful y Condi   d Prem (Bowel) (Mouth) Cleft P Dischar y Condi	aturity aturity afate rging E tion				16 49 137 10 2 4 33 1 1 5 44 7 1 4 6 62 1
	Asphyxia Convulsions Deformities Feebleness an Hæmorrhage Hamorrhage Hare Lip and Inflamed and Jaundice Pemphigus Rash Spina Bifida Unsatisfactor	Painful y Condi   d Prem (Bowel) (Mouth) Cleft P Dischar y Condi	aturity aturity afate rging E tion				16 49 137 10 2 4 33 1 1 5 44 7 1 4 6 6 62
	Asphyxia Convulsions Deformities Feebleness an Hæmorrhage Hamed and Jaundice Pemphigus Rash Spina Bifida Unsatisfactor Watery Bliste	Painful y Condi   d Prem (Bowel) (Mouth) Cleft P Discha y Condi ers	tion aturity atate rging E tion				16 49 137 10 2 4 33 1 1 5 44 7 1 4 6 62 1 181
	Asphyxia Convulsions Deformities Feebleness an Hæmorrhage Hamed and Jaundice Pemphigus Rash Spina Bifida Unsatisfactor Watery Bliste	Painful y Condi   d Prem (Bowel) (Mouth) Cleft P Dischar y Condi	tion aturity atate rging E tion				16 49 137 10 2 4 33 1 1 5 44 7 1 4 6 62 1

Details of the number of notifications of sending for medical help during the financial year 1956-57 are given below :—

Number of notifications of sending for medical	aid		1,161
Number of claims received			87
Percentage of claims received to notifications			7.5
Total amount paid to doctors during the year		£,245	16s. 0d.

#### WATERY, INFLAMED AND DISCHARGING EYES.

The number of cases notified during the year was 44. With two exceptions all were treated at home. Vision was unimpaired in each instance. Of the 44 cases, 39 were not severe. They include medical aid calls for all unsatisfactory eye conditions and not only notified cases of Ophthalmia Neonatorum.

#### STILLBIRTHS.

Number of Stillbin		egistere	d		 	388
Reported by midv	vives			***	 ***	159
Causes of those rep	orted	by mid	wives :-	_		
Anencephalic					 	4
Ante-partum Hær	norrh	age			 	6
Asphyxia					 	2
Atelectasis					 	2
Cord Prolapse					 	5
Cord round Neck					 	2
Deformities					 	28
Difficult Labour					 	7
Fall and Shock					 	2
Hydrocephalic					 	2
Knot in Cord					 	1
Maceration					 	26
Malpresentation					 	10
Post Mature					 	4
Premature					 	27
Toxæmia					 	8
Unsatisfactory Co	nditio	n of M	other		 	3
Uterine Inertia					 	1
Cause not known					 	19

#### GAS AND AIR ANALGESIA

At the end of 1956, 147 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 vacancies become available at recognised training schools and staffing difficulties permit.

At the 31st December, 1956, 144 midwives were equipped with the necessary apparatus; the number of cases which were dealt with was 2,820, when nurses were acting as midwives, and 698 in their capacity as maternity nurses.

In addition midwives administered Pethidine in a further 3,352 cases when acting as midwives and in 979 cases when acting as maternity nurses. Six midwives also used Trilene analgesia in 135 cases when acting as midwives and in 212 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.

Regulations amending the Puerperal Pyrexia Regulations, 1951, came into operation on the 1st March, 1955.

Cited as the Puerperal Pyrexia (Amendment) Regulations, 1954, a new form of certificate was prescribed for the notification of cases of puerperal pyrexia by medical practitioners and required the cause of the disease, if known, to be stated.

The total notifications from the Administrative County were 38; Urban Districts 32, Rural Districts 6.

The case-rate for Puerperal Pyrexia per thousand total births (live and still) for Staffordshire was 2.52, as compared with 16.3 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 72 occasions. These were specially investigated and it was found that in 33 instances the unsatisfactory conditions were due to abnormalities which could be said to arise directly from childbirth.

#### HEALTH VISITING

At the 31st December, 1956, the number of Health Visitors was 102 whole-time and one Health Visitor Lecturer and 32 part-time Health Visitors.

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

The following table gives particulars of the visits paid by this staff during 1956 to expectant mothers and young children:—

To Expectant Mothers				
First visits				3,426
Total visits				7,350
To Infants under one year	r			
First visits				15,789
Total visits				72,468
Total visits to children	aged	1 year	and	
under 2 years				39,347
Total visits to children	aged 2	2 years	but	
under 5 years				74,315

Two hundred and fifty seven 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 380 sessions of 41 Centres in various parts of the Administrative County, the total attendance being 5,286.

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 arrangements 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 1956. The figures for 1955 are given in brackets.

Age at date of vaccination	Under 1	1	2 to 4	5 to 14	15 or over	Total
Number Vaccinated	2,314 * (1,823)†	287 (340)	161 (152)	160 (142)	256 (254)	3,178 (2,711)
Number Re-Vaccinated	2 (1)	1 (—)	17 (9)	70 (58)	561 (403)	651 (441)

<sup>\* 15.8%</sup> of the births for 1956. † 13.5% of the births for 1955

#### 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 1956 the number immunised against diphtheria was as follows :-

Under 5	 	 	 8,256
5 – 14 years	 	 	 3,958

Reinforcing doses were given in 14,368 cases.

During 1955 the numbers were 7,869, 2,669 and 10,175 respectively.

The following table gives particulars of immunisation in relation to child population at the 31st December, 1956 :-

Number of children at the 31st December, 1956, who had completed a course of immunisation at any time before that date (i.e., at any time since the 1st January, 1942).

Age at 31.12.56 i.e. Born in Year	Under 1 1956	1 to 4 1952–1955	5 to 9 1947–1951	10 to 14 1942–1946	Under 18 Total
Last complete course of injections (whether primary or booster) A. 1952–1956	1,051	29,888	53,655	28,213	112,807
B. 1951 or earlier	-	_	14.032	37,212	51,244
C. Estimated mid-year child population	14,000	52,900	149	.600	216,500
Immunity Index 100 A/C	7-51	56-50	54	-72	52·10

During 1956 there were 21 original notifications concerning suspected cases of diphtheria or of being carriers of the disease. Of these, five were confirmed cases of diphtheria and three were termed carriers. All positive nose and throat swabs were of type "gravis."

Of the five confirmed cases (as compared with 29 in 1955 and 16 in 1954) three were in the 0-4 age group and of these only one had a record of immunisation, this being done exactly three years before the date of onset.

The other two cases were aged 8 and 9 years, there being a record of immunisation in one instance. There was no record of the three carriers having been immunised.

The three carriers and three of the five cases had association with cases and carriers at the Special School in which an outbreak of diphtheria occurred late in 1955, as mentioned in the 1955 Annual Report. There were, therefore, only two which could justifiably be considered for comparison with confirmed cases in previous years, the numbers of which will be seen in the following table giving particulars of the incidence of, and mortality from, diphtheria amongst the child population of the Administrative County between 1952 and 1956. This is by far the lowest number ever recorded in the County, the previous lowest being in 1954, when as stated above there were 16 confirmed cases. In 1944 and 1945 there were 639 and 553 confirmed cases respectively, and even in 1951 118 were recorded of which 104 were under 15 years of age.

DIPHTHERIA IMMUNISATION

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

# ADMINISTRATIVE COUNTY 1952-1956

	Pop	Percen	Percentage of Total Population in Age Group	f Tota ge Gr	1 oup		No. o	No. of Cases of Diphtheria	s ia		per 1,0	Attack Rate ,000 of Popul in Age Group	Popu Groun	Attack Rate 1,000 of Population in Age Group		fror	of 1 n Dip	No. of Deaths from Diphtheria	s	11117	Case	Fatality per cent	Case Fatality Rate per cent.	e -
	1952	1953	1954	1955		1952	1953 1	1956 1952 1953 1954 1955	55 195	1956 1952	52 1953		1954 19	1955 18	92 18	52 19	53 195	34 195	5 195	1956 1952 1953 1954 1955 1956 1952	1953	1954	1955	1956
Children under 5 years of age:															177			VAR				ilima		
Immunised	42.1	42.5	45.5	46.8	46.2	67	9	1	4	1 0.07	0.50		Nil 0	0.13 0	0.03	-		-	1	Nil	16-67	Nii	Nil	Nil
Not Immunised	6.73	57.5	54.5	53.2	53.8	10	17	8	60	2 0.24	24 0.43	-	0.08	0 60.0	90.0	2 3	1		1	20.00	20.00 17.65	IIN .	IIN	Z
.: Total .:	100-0 100-0 100-0 100-0 100-0	100.0	100-0	100.0	100.0	12	23	60	7 3	3 0-17	7 0.33		0.04 0.	0-11-0	0.04	2 4		1	1	16-66	17-39	Nil	NI	Z
Children aged 5 to 14 years:			bioxi		30		910											AME					20,000	
Immunised	84.2	81.8	84.2 81.8 84.7 86.7 89.0	2.98	89.0	7	12	9	11	90-0	0.11		0.02	0-00	0.01	1	1	1	1	Nil	Nil	Nii	Nil	Nil
Not Immunised	15.8	18.2	15.8 18.2 15.3 13.3	13.3	6-11	13	20	61	11	09-0	62-0 09		0-09	0.57 0	90-0	1 22	1	- 2	1	Nil	10-00	IIN (	18.18	Z
Total	100.0	100.0	100-0 100-0 100-0 100-0 100-0	100-0	10000	20	32	8	22	2 0.15	15 0.23	-	0 90-0	0.15 0	0.01	- 2		- 2	1	Nil	6.25	N	60.6	Z
All children under 15 years of age :							192.11								14-32					nej		harding.	1	
Immunised	69.7	8.89	72.1	74-3	75.8	6	18	9	15	2 0.06	90 0.13		0.04	0 60.0	0.01	1		1	1	N	5.56	i Nii	EN	III
Not Immunised	30.3	31.2	27-9	25.7	24.2	23	37	0.	14	3 0.37	37 0-57	-	0-09	0.26 0	90-0	2 5		- 2	His	8-70	8-70 13-51	Nil	14-29	Z
Total		100.0	100-0 100-0 100-0 100-0 100-0	100.0	100.0	32	55	= 5	29	5 0.15	15 0.26	-	0.02	0.14 0	0.05	2 6	10	- 2	1	6.25	10.91	N	06-9	Z

WHOOPING COUGH IMMUNISATION.

A scheme of immunisation against whooping cough was commenced throughout the County Area in September, 1953, operated both by general practitioners and also by the County medical staff at the Infant Welfare Centres.

The scheme continued to work satisfactorily during 1956 and 3,538 children were immunised initially, and reinforcing doses given in 127 cases, by staff at Infant Welfare Centres. A further 2,447 were immunised initially, and 185 reinforcing doses were given, by general practitioners.

#### COUNTY AMBULANCE SERVICE

STATIONS.

During the year Radio Control of the Service was introduced and four of the 24-hour Stations marked thus \* became Radio Control points. The Stations, however, continued to operate as follows:—

24-hour Stations	Sub-Stations
Brierley Hill	Aldridge
Cannock	Biddulph
Coselev	Brownhills
Darlaston *	Cheadle
Leek	Kidsgrove
Lichfield *	Rowley Regis
Newcastle *	Rugeley
Stafford *	Stone
Uttoxeter	Tamworth
	Tettenhall
	Willenhall

A new Station at Aldridge was opened in August by Alderman A. G. B. Owen, C.B.E., replacing unsatisfactory premises, and at Tamworth a new Station was taken over in July replacing use of Fire Brigade premises which had been in joint use since 1953. The building of new premises proceeded at Leek and Stone.

#### VEHICLES.

The repair and maintenance of the ambulance vehicles became the responsibility of the Health Department on the closing of the Transport Department on 31st July, involving the following numbers and types of vehicles:—

- 32 Daimler Ambulances
- 36 Bedford Sitting Case Cars
- 19 Commer Ambulances
  - 2 Karrier Sitting Case Cars
  - 1 Morris Ambulance
  - 1 Austin Ambulance
- 1 Landrover Ambulance

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Servicing and Repairs.

Vehicles at 13 of the Stations were serviced by local garages under terms and arrangements made by, and taken over from, the Transport Department.

Vehicles at the remaining 7 Stations were serviced by three mechanics, one being based at each of the following Stations:—

Brierley Hill Cannock Newcastle

These mechanics were appointed initially by the Transport Department.

#### Radio Control.

During the year approval was given for the installation of a scheme of radio control of the Service from four controls at Stafford, Lichfield, Newcastle and Darlaston, and following the appointment of a Superintendent at each of these Stations the scheme of radio control came into operation on the 1st October.

Arising therefrom it was necessary to revise the schedule of delegated powers to Area Health Committees and from the 1st October, 1956, certain duties, including the appointment of supervisory and administrative staff at the Stations, the investigation of disciplinary matters arising from operational control, the responsibility for training and standards of proficiency, and the investigation of complaints of accidents were transferred from Area to Central administration.

On account of the impending changes within the Ambulance Service it was decided to appoint a County Ambulance Officer and a Technical Assistant and the persons appointed took up duty in June and August respectively.

#### MILEAGE, PATIENTS CARRIED, VEHICLES, ETC.

The table below shows the mileage and number of patients carried by each Station during the year, together with the number of personnel and vehicles at the 31st December, 1956.

			Vehicles		Ambulances		SITTING CARS	
STATION	Hours Open	THE RESIDENCE OF TAXABLE	Amb.	S. Cars	Mileage	Patients	Mileage	Patients
Aldridge .	16	8	2	1	26,822	3,700	24,947	2,790
Biddulph .	8	4	1	1	31,665	6,170	-	-
Brierley Hill .	24	22	4	3	74,912	9,856	70,058	8,689
Brownhills .	16	12	2	2	40,671	6,021	29,747	3,782
Cannock .	24	21	4	3	79,424	9,747	78,898	11,986
coseley	24	22	4	3	66,900	10,197	70,665	15,683
headle .	16	12	4	1	60,293	7,032	17,793	4,352
Darlaston	24	24	4	3	76,344	14,426	48,090	9,422
Kidsgrove .	8	4	1	1	11,404	2,317	15,088	3,745
	24	19	4	3	70,954	5,659	63,387	10,330
	24	19	4	3	59,153	4,728	46,334	4,764
Newcastle .	24	24	4	3	78,042	14,494	50,524	9,265
Rowley Regis .	12	6	2	1	36,748	8,140	17,533	3,426
Rugeley	8	4	1	1	23,588	2,667	17,893	3,666
stafford .	24	24	5	2	56,181	7,071	68,498	8,044
Stone	8	4	1	1	21,927	3,011	22,458	2,799
Tamworth .	8		1	1	11,989	1,903	22,724	3,806
Tettenhall .	8	2	1	1	11,193	2,262	15,005	2,693
Jttoxeter .	24	17	3	3	45,161	2,807	46,478	3,456
Willenhall .	8	6	2	1	18,001	6,225	20,136	6,095
Totals .		258	54	38	901,372	128,433	746,256	118,793

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

Maternity		 	4,351
Illness		 	235,450
Accidents		 	4,873
Infectious		 	1,756
Mental	•••	 	796
			247,226

The following is a comparison of the number of Stations, personnel, vehicles, patients carried and mileage at the 31st December, 1956, with the number at 31st December, 1955:—

			31.12.55	31.12.56
24-hour Stations			9	9
Sub-Stations			11	11
Ambulances			57	54
Sitting Cars			35	38
Personnel			250	258
Patients carried			233,196	247,226
Mileage			1,626,971	1,647,628
Average miles per	patie	ent		
carried		***	6.97	6.66

#### AGENCY SERVICE.

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

sometinden?		No. of		Patients
Month		Cars	Mileage	Carried
January	 	 5	799	13
February	 	 5	427	8
March	 	 5	723	13
April	 	 6	389	9
May	 	 6	554	12
June	 	 4	876	18
July	 	 4	963	22
August	 	 4	935	17
September	 	 4	804	11
October	 	 4	568	28
November		 4	576	16
December	 	 4	227	7
			7,841	174

#### FINANCIAL ARRANGEMENTS WITH OTHER AUTHORITIES.

The County Councils' Association recommended an inter-County rate of 2/6d. per mile for ambulances and large dual purpose vehicles and 1/6d. per mile for small dual purpose vehicles, and these rates were accepted by the Health Committee subject to any charges made in excess of these amounts. Similar charges would be made on the Council concerned should transport be provided on that Council's behalf by the Staffordshire County Council. This procedure is adopted in respect of the standard charge of 2/9d. per mile for ambulances and 1/3d. for sitting cars made by County Borough Councils.

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

The following are particulars of the work undertaken during 1956 by the four Welfare Officers:—

by	the four Wenare Officers.	Free		Paid in full by patient	Total
(1)	Number of patients supplied with extra nourishment†	644	10	-	654
(2)	Number of patients supplied with clothing†	416	16	-	432
(3)	Number of patients supplied with bedding†	259	15	-	274
(4)	Number of patients supplied with convalescent home treatment	70	108	11	‡189
(5)	Number of patients supplied with appliances*	229	-	_	229
(6)	Number of visits and interviews with patients	_	-	-	4,641
(7)	Number of patients seen at Office or Clinic	-	_	-	2,086
(8)	Housing (a) No. of cases recommended		_		163
	(b) No. of cases re-housed	-	_	_	74
(9)	No. of shelters supplied to T.B.	nderny obv <u></u> d	ingo and the	orez.	_

- \* 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 Welfare Officers by bodies other than the Staffordshire County Council, e.g., British Red Cross Society and other voluntary associations, National Assistance Board.
- ‡ This total includes 4 cases of problem families sent to Centres for the Guidance of Mothers in Home Management and Child Care.
  - (3 were sent to Crowley House, Birmingham.
  - I was sent to the Brentwood Recuperative Centre, Marple, Cheshire.)

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 Welfare Officers are concerned with the provision of travelling warrants to relatives to enable them to visit patients in hospital in accordance with the Ministry of Health Circular 85/49, particulars of which were given in the Annual Report for that year. During the year 35 applications for the facility were received. In 30 instances full travelling expenses were allowed and four were granted partial assistance. In the remaining one instance it was found the financial circumstances were such that the case could not be considered to be a necessitous one, 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 Welfare Officers 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 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 Welfare Officers in various ways, i.e., Health Visitors, General Nurses, General Practitioners, Medical Officers of Health, Housing Welfare Officers, National Assistance Board, etc.

One of the Welfare Officers has commented as follows :-

"I find that being able to send old people to Convalescent Homes where medically recommended is very much appreciated and is of great value in retaining their independence. I have had several cases over the year of old people living by themselves, who were getting to the stage where they found it difficult to manage, but after two weeks at a Home such as Gable House they have been able to carry on and the difference is most noticeable." During the period under review some 677 homes were visited—120 to cases falling in Category 1, 55 in Category 2, 431 in Category 3, 54 in Category 4 and 17 in Category 5.

Seven hundred and ninety-seven visits to these homes were paid—446 of these were of a social nature, 153 to cases referred to County Council agencies, i.e., for domestic assistance, extra nourishment, nursing equipment, to the County Welfare Officer, etc., and 198 referred 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 1956, 74 Nursing Comforts Depots were in operation as compared with 69 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 local Area Medical Officer 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 number of cases referred to Area Medical Officers was 596.

Of the total number referred, 423 were admitted to chronic sick hospital accommodation, five to Mental Hospitals, one to Part III Accommodation and fourteen to General Hospitals. In 185 of these cases one or more of the County Council's Services were of help to the patients pending admission.

In 153 cases, therefore, the patients were cared for at home, the County Council's Services being of assistance in 79 instances, viz. :—

Nursing					 39
Domestic Help					 13
Social Welfare					 6
Nursing and Do	omestic He	elp			 9
Nursing and So	cial Welfa	re		***	 3
Domestic Help	and Socia	l Welfa	re		 3
Nursing, Domes	stic Help	and Soc	cial We	lfare	 6

#### PREVENTION OF HOME ACCIDENTS

The County Council have approved the recommendation of the Health Committee that the functions relating to home safety should be delegated to Area Health Committees and that the latter be advised to set up Advisory Sub-Committees with power to co-opt members to serve thereon from any Voluntary Home Safety Organisations in their respective Areas. The advantage of this course is that the Area Committees are responsible for the day to day control of the Nursing and Domestic Help Staff, who are the personnel intimately concerned with home conditions.

In addition to displaying posters, supplying leaflets, etc., in several of the Areas exhibitions, which have proved to be very popular, have been held illustrating the prevention of home accidents, and it is hoped that as the result of the measures taken this type of accident will be prevented, to some extent at least, in future years.

The co-operation of the Regional Hospital Board was also sought to provide that notification might be made to the Health Department of cases of severe home accidents requiring hospital treatment to enable visits to be made to the homes of the patients concerned in an endeavour to remove the source of danger and accident.

#### OCCUPATIONAL THERAPY

There was again unfortunately further curtailment of this scheme during 1956, because as explained in the 1955 Report the remaining Occupational Therapist who was obliged to cease duty for domestic reasons did not return until June. However, during the remainder of the year 291 visits were made to patients in their homes—the number of patients on the register being 147.

The numbers of cases who attended the classes at Wolverhampton and Wednesbury during the same period (June to December) were 64 at Wolverhampton and 58 at Wednesbury.

The vacancy on the establishment for a second Occupational Therapist was not filled during the year.

#### 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, 621 Domestic Helps were employed compared with 497 at the end of the previous year.

During the year 2,825 cases were attended compared with 2,344 in 1955.

#### NIGHT HELPS

The Ministry of Health have agreed to the provision by the County Council of a scheme of night helps (or night sitters or watchers). This scheme is intended to assist in cases of serious, chronic and terminal illnesses to relieve the heavy strain on relatives by enabling them to have periods of undisturbed sleep during certain nights of the week, where a wife is ill in bed, the husband has to work during the night and the presence of children may be involved, etc. The scheme also gives families opportunities of taking annual holidays in cases where there are aged parents who cannot temporarily be removed to a Home, etc.

At the end of the year four Night Helps were being employed.

#### 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. She is employed part-time by the Health Committee, the remainder of her 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 Workers 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 20 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 Workers undertakes relief duties at weekends and during annual leave periods of one of the regular officers.

The Special Training 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.

Association for Mental Health, one uncertificated teacher and nineteen who are unqualified, including one who is attending the course organised by the National Association for Mental Health for their Diploma. In addition a temporary assistant supervisor is employed in place of the assistant absent on this course.

One trainee assistant supervisor is at present under training.

The staff of the Practical Training Centre for adult mental defectives is as shown below :-

Supervisor—Male, Diploma of the National Association for Mental Health.

Deputy Supervisor-Male, unqualified.

Woodwork Instructor-Male, cabinet-maker.

Boot and Shoe Repairer Instructor—Male, craftsman.

General Handicrafts Instructors-Female, unqualified (2).

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

The number of certified mental defectives from the Administrative County at the 31st December, 1956, was as follows:—

St. Margaret's Hospi	ital, Gre	at Bar	r		440	
Stallington Hall					109	
Other Institutions (including State Institutions)						
	Tot	al			762	

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 92 patients were thus supervised, 58 from St. Margaret's Hospital, Great Barr Park, 7 from Stallington Hall, one from Burton Road Hospital, one from Andressey Hospital, 8 from Monyhull Hall, 3 from Chelmsley Hospital and 14 from out-County authorities. Fortyfour patients on licence were discharged from their orders during the year and four were returned to hospital. Approximately 210 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 31.12.56 there were 26 defectives on licence under supervision from Staffordshire Hospitals and 12 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 Special Training Centres towards the cost of which the County Council makes a grant. This Association has Sub-Committees attached to six of the Centres which raise funds locally towards the cost of such holidays and other social amenities. Whenever possible one member of the County Special Training Centre staffs is seconded each year to attend the course for the diploma of the National Association for Mental Health, and an assistant supervisor who was engaged in the first instance as a trainee was selected as the candidate for the 1956-57 course. Approval has also been obtained to participation in the two year "In-Service" Diploma Course for Teachers of the Mentally Handicapped organised by the City of Birmingham Education Department during 1956-58. One member of the staffs of the Special Training Centres and one member of the Practical Training Centre Staff commenced this Course in September. The trainee scheme mentioned in the 1952 report has been in operation since 1953. Two of the trainees were appointed to the posts of Assistant Supervisor during the year, and the vacancies thus created were not filled by the end of the year.

The usual four-day residential refresher course for Special Training Centre staffs was held in April this year at Walton Hall Special School and 31 members of the County staff attended, together with 2 students from outside the Administrative County. One member of the Centres' staffs attended the residential refresher course organised by the National Association for Mental Health in July.

Although authorisation has been given for the attendance of Mental Welfare Workers 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 686 new cases were referred for preventive care and after-care to the Social Workers in Mental Health. In all, 1,677 visits of after-care were made by these Duly Authorised Officers and at the end of the year 310 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, seven hundred and seventy-one 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 Menta Treatment Act	. 492
Temporary cases under Section 5 of the Menta Treatment Act	1
Three-day Orders under Section 20 of the Lunacy Act	971

Urgency Order, Section 11, Lunacy Act		1
Summary Reception Orders, Secs. 14-16 of Lunacy Act	the 	317
Fourteen-day Orders Section 21(1) of	the	101
Lunacy Act		181
Referred to Neurosis Centres		18
Admitted to chronic sick hospitals		5
Other disposals		8
Cases seen in which no action was taken		371
		1,771

Again it is noted that the proportion of cases dealt with on Summary Reception Orders remains low and there is no significant change 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. Particulars of cases reported during the year 1956:—

		Unde	r age 16	Aged 16 and over		T-t-1
		Male	Female	Male	Female	Total
(a)	Cases at 31st December, 1956, ascertained to be defectives subject to be dealt with under the Act.  (i) Reported by Local Education Authorities: Children at school or liable to attend school On leaving special schools On leaving ordinary schools  (ii) Reported by Police or Courts (iii) Other Sources	17 1 12 - 4	19 1 6 -	14 1 3	- 8 - 1	36 24 18 1 12
(b) (c)	Cases reported but not regarded at 31st December as defectives "subject to be dealt with" on any ground	5	5	6	7	23
	tal number of cases reported during the year	39	35	25	17	116

The number of cases in the community awaiting removal to institutions on 31.12.56 was:—

Una	ler 16	16 ar		
Males	Females	Males	Females	Total
29	23	23	25	100

Guardianship.

On the 31st December, 1956, there were four defectives under statutory guardianship—all four were males. All attend Special Training Centres and are regularly visited. In addition supervision is carried out on behalf of other Local Health Authorities in respect of two 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, 1956, the following mental defectives were under supervision :—

	Male	Female	Total
Statutory Supervision:			
(i) Under 16 years of age	185	178	363
(ii) Aged 16 years and over	362	291	653
Voluntary Supervision:			
(i) Under 16 years of age	3	3	6
(ii) Aged 16 years and over	281	248	529
	831	720	1,551
		-	

Out of a total of 1,551 cases 34.4% are under voluntary supervision.

Six thousand, four hundred and ninety domiciliary visits and interviews by the four Mental Welfare Workers took place during the year. In addition, 4 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 six were admitted to institutions, four under Section 8 of the Mental Deficiency Act, 1913. Petitions for orders under the Mental Deficiency Acts were presented in the case of 36 alleged defectives in the County and thirteen 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 a Voluntary Home, making a total of 44 vacancies offered by the Birmingham Regional Hospital Board for County cases in the vear.

At the close of the year there were 100 defectives awaiting beds in institutions and, in addition, 10 who had been admitted to Mental Hospitals pending transfer to Mental Deficiency Institutions.

Again this year the pressure on beds in Mental Deficiency Hospitals provided by the Birmingham Regional Hospital Board has been so acute that some of the most urgent cases cannot be placed. The distress this causes to the defective concerned and to the relatives is very great.

For the majority of defectives regular domiciliary visiting by Social Workers experienced in mental health work who can advise wisely when difficulties arise meets their need, linked as this is in the County with facilities for admission to the Day Special Training Centres in suitable cases. The opening of a Practical Training Centre for trainees over the age of 16 years at Shepwell Green in December, 1955, was an important development of the County Council's Scheme for community care.

Training to which they can respond and a "school life" of their own brings happiness and inspiration into the lives of many of these young people, and makes it possible for them in spite of their handicaps to continue to live at home.

For those able to work ready co-operation over their placement has been given to the Mental Welfare Workers by the Officers of the Ministry of Labour, and by the National Assistance Board with those who are unemployable.

Under the provisions of the Ministry of Health's Circular 5/52 most valuable help has again been afforded to individual defectives under supervision during the year. Seventeen defectives under 16 years and 16 over 16 years old were admitted under these provisions for temporary residential care to Mental Deficiency Hospitals for varying periods up to eight weeks. This has given much needed relief to responsible relatives when difficulties have arisen in their homes.

#### Training.

The number of Special Training 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:—

	1	No. on Register	A Company of the Comp
Centre		31.12.56	Staff at 31.12.56
Stafford		15	Supervisor and one assistant
Cannock		22*	Supervisor and one assistant
Bilston		51	Supervisor and four assistants
Kingswinford		43	Supervisor and four assistants
Rowley Regis		30	Supervisor and two assistants, Male Caretaker/Gardener/Instructor
Newcastle		63†	Supervisor and five assistants, Male Caretaker/Gardener/Instructor
Lichfield	•••	42‡	Supervisor, four assistants and one trainee
		266	

Home Teacher centred on Leek ... 25

- \* Includes one boy maintained by Burton-on-Trent.
- † Includes six children from City of Stoke-on-Trent.
- ‡ Includes one boy from Warwickshire.

In addition, the County Council have arranged with Wolverhampton County Borough Council, with Burton-on-Trent County Borough Council and with Stoke-on-Trent City 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 two cases were maintained in Wolverhampton Centre, two in Burton-on-Trent and two in Fenton Centre.

The new Special Training Centre at Rowley Regis mentioned in the last Report was completed this year and commenced operation on the 12th September. The use of the hired premises at Ocker Hill, Tipton, was therefore, discontinued at the end of the Summer Term and the children and staff transferred to the new building. This was designed as a 60-place Centre to serve the district, including Tipton, Rowley Regis, Old Hill, Blackheath, Brierley Hill, Quarry Bank, but until the end of the year only the 30 children who attended the Tipton Centre were admitted to the new Centre. Additional coach transport was planned so that in the New Year, some 25 defectives attending the Kingswinford Centre, one of the three Centres housed in rented accommodation, could be admitted to the Rowley Regis Centre, the staff of which will be increased to the full establishment for the 60 places provided. The final plans of the new Special Training Centre to be built in Stafford to replace the rented accommodation (the owners of which having requested that the building be vacated in June, 1957) were drawn up early in the year and in the autumn approval was obtained to the acceptance of a tender for the erection of the new Centre, the building of which will commence early in 1957. It is anticipated that this Centre, designed for 30 places, will be ready for occupation during the autumn of 1957.

As previously stated, 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. Adaptations were completed at the former Day Nursery at Shepwell Green, Willenhall, and the premises were opened for use as a Practical Training Centre for adult mental defectives on the 5th December, 1955. The Centre is designed to accommodate sixty trainees, but in the first instance admissions were limited to those defectives over the age of 16 years who were attending the Bilston, Tipton and Kingswinford Special Training Centres. New admissions have, however, been effected throughout the year and the number on the register at 31.12.56 was 52. The staff were as shown earlier, an additional female general handicrafts instructor having been appointed during the year.

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 were made in 1954 whereby children from the City are admitted to Newcastle Special Training Centre and older defectives from the Administrative County are admitted to the City Adult Training Centre. In 1955 the City Council agreed to our request that a further five places should be placed at the disposal of the County Council and this year another place was made available. At the end of the year the full agreed number of County cases, 26, were attending.

Summer holidays of one week's duration were arranged for 160 pupils attending Special Training Centres. There were altogether nine parties and the arrangements were made by the Staffordshire Association for Mental Welfare. 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 Area 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' Associations at Newcastle and Bilston Centres continue to do good work. 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 5,595 miles during the year. Seven hundred and fourteen visits were made by the Home Teacher during the year.

#### **EPILEPTICS AND SPASTICS**

The following are particulars of the known cases of epilepsy and cerebral palsy from the Administrative County at the 31st December, 1956 :--

975				
H	DI	T 12	DC	37
200	LI	LE	LO	I.

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- 4	- 7		-7			
- 68	12	20.4	п.	•	c	
A	u	204	an.	æ.	3	

Adults.						
No. in Part III Accon	nmodat	tion		12		
No. in own homes				54		
No. chargeable to t colonies outside t				25		
colonies outside t	ne cou	nty		20		91
Children between the ages of Epileptics.	of 2 and	d 16 ye	ars.			
At Special Schools				3	(2 boys 1 girl)	
Awaiting admission to	o Spec	ial Sch	ools	2	(boys)	
At ordinary schools					93 boys	
Home Tuition					116 girls)	
Home Tuition	•••			9 (	(2 boys 3 girls)	
At Home without T	uition	(i.e., ]	Pre-		o giris)	
School Age)				8 (	6 boys	
					2 girls)	
				997 /	105 horse	
Military I will be their Jacks					105 boys 122 girls)	
Epilepsy with other ma	jor defe	ects.			122 61113)	
At Special Schools				15 (	11 boys	
topoli, and the second					4 girls)	
At ordinary schools					17 boys	
Having Home Tuition					4 girls) 6 boys	
Training Training Tuttion					6 girls)	
Pre-School Age					boys)	
? Mentally Deficient (I	Pending	g refere	nce			
to L.H.A.)					3 boys	
					1 girl)	
				54 (	39 boys	281
					5 girls)	
					Control of the last of the las	

Children under 2 years of age.		
No. treated in hospital	2	
No. treated by general practitioners	1	
	3 (2 boys 1 girl)	3
Mental defectives under statutory and voluntary supervision with the additional handicap of epilepsy.		
No. under 16 years	37 (13 male	
No. 16 years and over	24 female) 72 (38 male	
American Commission Commission of the Commission	34 female)	
	109 (51 male 109 58 female)	9
	484	4
	the Start Loads -	-
CEREBRAL PALSY.		
Adults.		
No. in own homes	31	
No. in Voluntary Home but chargeable to the Authority	4 3	5
Children 2—16.		
At Residential Special Schools on account of Cerebral Palsy	35 (20 boys 15 girls)	
At Day Special Schools for Physically	100 and 100 and 100	
Handicapped	5 (2 boys 3 girls)	
At Special Schools for other causes	9 (5 boys 4 girls)	
Under Investigation (re Educability)	10 (8 boys 2 girls)	
Waiting List for Special Schools (Physically Handicapped)	15 (7 boys 8 girls)	
Attending ordinary schools	79 (43 boys 36 girls)	
*Having tuition at home	12 (4 boys 8 girls)	

AL	1	*44	
AT.	nome	withou	t tuition-

(a)	of average intelligence	 4 (girls)	
(b)	? intelligence	 14 (5 boys 9 girls)	
		183 (94 boys 89 girls)	183

\* In addition to the 12 children for whom home tuition is the best possible provision, six boys and six girls on waiting lists for special schools and three boys whose educability is in doubt were having home tuition as an interim measure.

#### Children under 2.

No. treated in hospital No. treated by general practitioners	5 3	
	8 (5 boys 3 girls)	8
Mental defectives under statutory and voluntary		
supervision with the additional handicap of cerebral palsy.		
No. under 16 years	49 (24 male 25 female)	
No. 16 years and over	74 (38 male 36 female)	
	123 (62 male 61 female)	123
	To the local	349

Of the 109 persons suffering from epilepsy in addition to mental defect, 35 attend Special Training Centres and one has Home Teaching.

Of the 123 defectives suffering from spastic conditions 38 attend Special Training Centres and two have Home Teaching. Thirty 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 16 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

	SI	Mephrosis Congenital Malformation	80.0	1	80.08	- 0.18	8 0.04	0.14 0.18	01.0	0.09 0.09 0.12	60.0	0.27	0.05 0.16 0.05	1	0.53 0.41 0.22 0.04 0.15
non	System	Other Disease Respiratory : Nephritis and	0.14 0.06	0.33	0.23 0.23	- 60	0.08		0.05 0.02	0.0	0.09	0.05 0.05	05 0.1	- 60	22 0.0
of Population	to se	Pneumonia		0.67 0.	0.08 0.	0.44 0.09	0.18	1.60 0.46 0.46 0.37	0.21 0.	54		0.11 0.	0.87 0.	0.54 0.09	.41 0.
1,000 of 1		Bronchitis	0.42 0.31	0	0.31 0	0.91 0	1.01	0 94.	0.86 0	.02 0.	0.90 0.27	0.38 0	0.58 0	0.45 0	0 29
	useldo	Malignant Ne	1.28	1.33	1.08	1.71	1.77 1	0 09.1	2.10	1.17 1	2.30	1.53	2.27	2.35	2.35
	other	Tuberculosis,	0.03	1	1	1	0.05	1	0.05	1	1	1	1	1	1
		Tuberculosis, Respiratory	0.08	1	0.08	0.09	0.08	0.23	0.12	0.09	0.23	0.11	-	0.09	0.16
io	000 ation	Diphtheria	1	1	1	1	1	1	1	1	-	1	1	1	1
Zymotic	Per 1,000 Population	Whooping	1	4	1	1	1	1	1	0.03	1	1	1	1	1
	fo		1	1	-	1	1	1	1	1	1	1	1	1	1
000	I per I	Mortality in o under one yea registered live	34	1	19	40	21	37	21	35	200	59	36	19	27
live	istered ts unde	Wee-natal Mo per 1,000 regi births (Infant weeks of age)	58	1	16	88	15	24	18	19	13	23	88	6	21
		Adjusted dea grillideraqmoo	12.9	8.3	12.0	13.0	11.9	13.8	12.9	14.8	15.2	12.5	11.9	11.8	14.1
J	rate pe	Crude death- 1,000 of Popu	8.0	8.7	8.6	9.0	9.5	10.5	10.5	9.5	10.4	8.9	11.7	12.5	11.3
15	sate pe	Still-births, F 1,000 of Popu	0.47	1	0.46	0.50	0.36	0.59	0.36	0.30	0.50	0.82	0.47	0.45	16.4 0.49 11.3 14.1
£1,	e Birtl	Adjusted Liv rate by comp factor	16.1	11.9	18.6	16.6	13.5	16.5	16.1	14.9	12.9	18.8	13.7	18.7	16.4
	ne per	Live Birth-ra 1,000 of Popr	18.1	12.7	2.0 19.8	17.6	14.1	17.2	5.1 16.8	16.2	14.2	21.1	13.2	3.1 19.5	16.6
	suosia	Number of pe	3.9	4.5	2.0	18.2	8.6	3.5	5.1	10.6 16.	14.5	4.5	4.4 13.	3.1	8.2 16.
lation	ages	Estimated 1956	35,930	8,000	12,970	33,960	50,280	21,880	41,950	33,420	22,140	18,270	18,970	11,050	73,160
Population at all ages Census Estin		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
			:	:	:	:	:	:	:	:	:	:		:	:
District		ıcı	:	:	:	:	:	:	:	:	1-	:	:	:	:
		Aldridge	Amblecote	Biddulph	Bilston	Brierley Hill	Brownhills	Cannock	Coseley	Darlaston	Kidsgrove	Leek	Lichfield	Newcastle	

Deaths occurring during the year 1956 classified according to Diseases and Localities, together with Births occurring during the year.

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1	otor Vehicle Accidents	-	K	0.1	01	4	01	10	9	01	1	1	65	1-
ı	-defined Diseases	III S	-	12	47	89	21	62	37	36	0.1	01	14	99
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١	noition	IV I	1	- 1		-	1	1	-	1	-	1	1	03
ı	ostate egnancy, Childbirth,	Id -		0.1	-	10	1	4	1	1	0.3	1	01	4
ı	speritis and Nephrosis	-	1	00	1	4	00	н	00	1	-	00	1	00
1	stritis, Enteritis d Diarrhœa		1	-	-	0.1	0.1	1	-	-	1	-	1	1
1	cer of Stomach d Duodenum	ue ve	)	1	10	-	00	0.1	.0		-	1	01	944
1	her Diseases of spiratory System	St E	, -	00	00	1	00	0.1	00	0.1	-	=	-	16
١	onchitis	10	1	4	31	51	10	36	35	50	1	=	10	39
١	einomia	-d =	03	1	1.5	6	10	6	18	9	0.1	7	9	30
	ezuəny			01	00	62	55	9 1	6 1	7 5	1 1	1 -	00	00
-	her Circulatory sease	0				7 16		5 14			5 14	-	-1	38
-	her Heart Disease	10	2	19	500	0.7	44	85	50	333	1.5	44	63	103
-	ypertension with		-	10	9		9	00	00	6	0	-1	4	32
١	eugu	A S	3 10	15	99	62	14	43	000	21	53	33	6	15
١	rvous System	- 0	01	17	36	64	31	20	49	17	18	30	17	261
l	abetes secular Lesions of	Λ		01	00	-	01	10	00	1	1	-	1	63
ı	ukæmia, Aleukæmia		1	-	-	01	00	00	-	1	1	1	-	2
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1	Ing, Bronchus	-		03	6	116	4	9 15	6 11	5 14	6	6	4	500
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١	her Infective and Parasitic Diseases	0 -		1	03	03	-	-	1	1	03	1	-	01
1	sasles	-	1	1	1	1	1	T.	1	1	-	1	1	-
1	Infections rute Poliomyelitis	-		1	1	1	1	-	1	1	1	1	-1	1
1	hooping Cough		T	1	1	1	1	P	-	1	1	1	1	1
1	Phtheria	1 _ D		1	1	1	1	1	1	1	1	1	1	1
1	philitic Disease	-		1	1	-	-	-	1	1	-	1	1	01
ı	Respiratory Derculosis, other	T		-	00	4	10	5	00	0	01	1	-	100
-	perculosis,	00	1	4	-	11	6	100	10	#	6	-	01	25 1
1	saths under 4 weeks	_ D	•	10	24 1	15 1	14	15 1	19 1	00	=	6	-#	60
	saths under I year		. 19	01					F-	1	162 1	01	300	-
-	saths from all causes	d o	1	=======================================	908	477	224	441	31	231	-	555	-	824
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1	DISTRICT	rido	blec	dul	ton	Brierley Hill	Brownhills	mod	Coseley	Darlaston	Kidsgrove	Leek	Lichfield	Newcastle
1		Aldridge	Amblecote	Biddulph	Bilston	Bri	Bro	Cannock	Cos	Da	Kid	Lee	Lic	Ne

1		Congenital Malformations	90.0	0.44	0.17	0.14	0.34	0.15	60.0	0.10	1	0.20	0.04	0.13	0.12	1	
		Nephritis and sisondow	0.16	1	0.08	0.15	1	0.07	1	0.18	0.13	0.50	0.04	0.03	80.0		1
ation	ber Diseases of giratory System		80.0	60.0	0.12	0.00	0.23	0.07	0.18	0.09	1	0.14	80.0	0.19	0.11	1	
Population		Pneumonia	0.37	0.09	0.87	68	00	0.52	0.44	0.35	1	0.35	0.30	0.45	34	.67	0.45
jo 000'		Bronchitis	0.65 0	53	.82	0 68.	.69 0.	20 0	53	92	.38	12 0	55	61	78 0	0.	1
-	uselq	Malignant Neo	.81 0	.51 0.	1 06.	0 22	.87 1	.85 1	.02 0.	.54 0.	.28 0.	.93 1	.10 0.	.86 0.	.88		
-	ther	Tuberculosis, o	-	-	01	0.02	03	01	01	1	-	-	0.04 1	-	0.1		
		Tuberculosis, Respiratory	0.14	0.18	0.21	14 0	-	0.07	ī	0.20	133	00	0.08 0	113	13 0.		
	T	1 .	0	0	0	0	-	0.	T	0	- 0.1	- 0	0	- 0.1	0.	0.00	00
Zymotic	1,000	Whooping Cough Cough Diphtheria	-	81	-	-	-	-	-	- 80	1	-	- 1	-	10		00 0.00
Zyn	Co   peet	Measles 2 Whooping 2	-	- 0.18	-	-	-	-	1	- 0.03	-	-	- 0.04		- 0.0	0.00	- 0.00
	driid	registered live	-	-	1	-			1	1	-		1	-			
		weeks of age) Mortality in cl under one year	17	49	59	60	43	19	200	26	16	56	03	62	88	24	24
live	tered	Neo-natal Mor per 1,000 regard births (Infanta	14	35	14	21	17	19	18	50	16	19	15	16	20		
		Adjusted deat comparability	12.8	13.1	6.01	11.8	9.6	12.4	11.7	11.5	11.6	14.8	11.9	14.1	13.1		F
		Crude death-ra 1,000 of Popul	6.6	9.5	56.6	12.5	18.5	15.7	10.0	7.7	10.7	10.7	6.9	9.7	10.7	11.6	1.6
II.	ation	Still-births, R. 1,000 of Popul	0.26	08.0	0.29	0.86	0.45	0.37	56	0.35	0.51	55	.55	0.42	0.43	0.37	.36 1
Á1	ilider	Adjusted Live rate by compa factor	11.4	22.8	3.6	5.8	00	9.6	7.2 0.	5.6	15.8	5.4 0	7.8 0.	14.6	5.4	1	0.
	none	Live Birth-rat 1,000 of Popul	-0	-	65	1.	1.	.9	1.	.5 1	9	.7 1	2.	10	4.	9.	9.
-		ber acre	13.0 12.	3.9 25.	6.3 14	8.1 16.	4.5 13.	4.9 15.	4.6 19.	.2 17.	2.3 15.	.1 16.	9.4 20.	11.0 15.	.7 16.	15.	- 15.
	suos.	Number of per	13	60	9	00		4	4	18.2	0.1	17.1	6	11	6.	1	
Population	at all ages	Estimated 1956	49,180	11,270	24,130	41,420	8,860	13,350	11,410	39,540	7,820	84,710	23,700	81,280	673,600		
Popu	Popu at all at all 1951		49,402	8,525	28,114	40,263	8,299	12,889	7,743	39,382	7,447	34,759	17,418	30,696	640,648		-
	DISTRICT		:	:	:	:	:	:	:	:	:	1	:	:	:	in ::	-is 000
			1		1		-	1	1	-	:	:			sage	towns in	18, re
															Averages	tov	towration
			Rowley Regis	Rugeley	gley	Stafford	ле	Tamworth	Tettenhall	поз	Uttoxeter	Wednesbury	Wednesfield	Willenhall	Totals and	160 large England	dent Population 25,000
			Row	Rug	Sedgley	Staf	Stone	Tam	Tett	Tipton	Utte	Wed	Wed	Will	Tota	160 En	160 den -50

Compared by Comp	2   2   2   2   2   2   2   2   2   2	66 182 7
11   1   1   1   1   1   1   1   1	2	99
11   2   2   2   2   2   2   2   2   2	25   55   56   57   58   58   59   59   59   59   59   59	99
11   2   2   2   2   2   2   2   2   2	2   2   2   2   2   2   2   2   2   2	_
The control of the	2   2   2   2   2   2   2   2   2   2	20
1	1	20
Comparison	2   2   2   2   2   2   2   2   2   2	-
The control of the	2   2   2   2   2   2   2   2   2   2	-
Control   Cont	### 1	4
The color of the	1	-
Colonary Diseases   Colo	3   2   2   2   2   2   2   2   2   2	_
The control of the	2    2    2    2    3    3    3    4    4	-
The company of the	S   Or   G   Or   Or   Or   Or   Or   Or	7
The Colored Physics	8 0. 0. 0. 1 0. 1 0. 1 0. 0. Hypertension with the control of the	
The Color of the	3	01
The Pitths   The	3	4
The Pitths   The	Hypertension with w w w w Heart Disease	2.24
The field of the bitches and t	dtiw golagations H	13
The Births and the Bi		7.7
The Births and a causes and a cause and a		-
September   Sept	majsky snowing of the control of the	
The file of the first state of the file of	Vascular Lesions of	00
Regis   Care		L-
Registron   Regi	sussettoon	4
The field in the f	a transignant There are a are are are are are are are ar	
The field the field that the field t		
The control of the	Breast 1	4 11
The control of the	gg Strong, Bronchus	0.24
Table   Tabl	demots 2	24(
The Births  Tall field	secondiff sitionard	
The field in the f		
Regis   Cr   Reg	shillsum it of a track	-
Regis   Regi	Meningococcal	
Regis.   Regis   Reg	1 2 2	1
Regis   Regis   Regis   Regis   Regis   Regis   Regis   Regis   Stall Births   Stall	77-11-154	6
Regis 288 13 114 4 4 4 4 5 22 14 5 6 11 11 12 2 14 4 4 4 4 4 5 11 11 12 2 14 15 1 1 14 4 4 4 4 4 15 11 11 11 11 11 11 11 11 11 11 11 11	- Control of the Cont	VQ.
Regis 588 13 452 10 Deaths under I year all causes the mail causes all 668 15 505 22 14 4 4 4 4 4 4 4 4 4 4 580 19 372 14 5 5 2 14 5 5 2 14 5 5 10 Deaths under I year all 693 14 304 18 14 5 5 2 14 5 2 14 5 2 14 5 5 2 14 5 2 14 5 5 2 14		88
Regis 288 13 452 10  The Births all causes and causes and causes are all 668 15 505 22  The Births all causes are all 668 15 505 22  The cause and causes are all 688 14 304 18  The cause are all 688 15 10 Deaths under I year all 689 14 304 18  The cause are all 688 15 10 Deaths under I year all 689 19 372 10 Deaths under I year all 122 4 84 2  The cause are all 688 13 304 18  The cause are all 688 13 304 14  The cause are all 688 15 10 Deaths under I year all 689 19 372 10 Deaths under I year all 122 4 84 12 12 13 14 12 13 10 14 12 13 10 14 12 13 10 14 12 13 10 14 12 11 11 11 10 14 12 11 11 11 11 11 11 11 11 11 11 11 11		22
REGIS 288 13 452  Regis 288 9 107  The causes of the		310
Regis 588 13  Regis 588 13  The cr 212 5  The cr 116 4  The cr 212 4  The cr 580 19  Gield 479 13  all 485 13  tals 11042 291		184
REGIS 588 Regis 588  The control of the contr		11 73
Regis Regis cth all sifield all tals	sdrill Births	60
Regis Regis cth all sfield all tals	edrift ov. 1.1 c	1104
strrct strrct sy Regis sy ord rorth nhall n esbury testield nhall Cotals		
sy Re ey rorth uhall nhall fotals	ry rdy	1
Co n n n n n n n n n n n n n n n n n n n	Re Re Lith all all all all	
The hand of the ha	Drs.  ley ley ley corc wo wo wo wo nes nes nes enh	
tug tug tug edg edg edg taf ton ton ton ipt ipt Vec Vec	DIST Rowley Rugeley Sedgley Stafford Stafford Tamwon Tettenh Tipton Uttoxet Wednes Wednes	Totals

URBAN-continued

ation		AS.	Other Dises Respiratory Rephritis an Mephrosis	0.04 0.08 0.04	0.14 0.37 0.11	0.11 0.11 0.11	.24 0.17 0.05	0.17 0.17 0.06	0.14 0.11 0.	0.10 - 0.05	0.12 0.18 0.	0.13 - 0.13	0.18	0.14 0.14 0.1
Population			Pneumonia	0.32	0.60	0.22 0	0.34 0.	0.17 0	0.55 0	0.10	0.54 0	0.26	60.0	0.35
Per 1,000 of			Bronchitis	0.75	0.46	0.33	0.68	0.40	0.43	0.36	0.30	0.45	0.62	0.49
Per 1	use	doə	Malignant N	1.73	1.71	1.14	1.58	1.93	1.78	1.76	1.32	1.29	1.78	0.00 1.62
	ted	to 's	Tuberculosi	1	1	0.05	1	1	1	1	-	-	1	
			Tuberculosi Respiratory	1	0.23	-	1	0.17	0.14	I	90.0		-1	0.02
ic	ty 9	ation	Diphtheria	1	1	1	1	-	1	1	1	1	1	
Zymot	Mortality Per 1 000	Population	Whooping		1		1		1	1	1	-	L	
	-	Jo	Measles	1	1	1	1	1	1		I	-	-	1
000	er I,	ear I	Mortality in under one y registered li	18	60	800	7.03	14	35	41	66	16	18	8 63
DAT	ered l	giste	Neo-natal N per 1,000 re births (Infa weeks of ag	16	55	3.5	600	10	59	21	16	175	12	21
pà	rate actor	ty fa	Adjusted de ilideraqmoo	10.8	11.8	11.9	11.1	11.6	12.4	11.5	10.5	9.6	10.1	11.6
			Crude deatl 1,000 to Po	8.9	14.8	10.1	10.9	11.2	9.5	8.9	9.0	9.0	9.5	10.6
	tion tion	Rat	still-births, of lo 000,1	0.55	0.57	0.16	0.34	0.51	0.25	0.41	0.54	0.65	0.27	
			Adjusted La rate by con factor	18.8	16.6	17.4	16.0	12.3	17.1	16.4	13.9	16.6	17.0	16.4 0.42
	per	eluq pula	Live Birth- 1,000 of Po	9.61	16.0	17.1	14.3	12.3	18.2	15.0	14.6	15.8	15.0	6.91
1	nosie	ser p	Mean area i in acres	03	1.7	4.0 17.	2.0 14	60	1.5 18.	4.1 15.	60	2.0 15.	5.0 15.	2.6 15.9
Jotion	at all ages		Estimated 1956	25,380	35,110	18,380	41,250	17,630	28,070	19,840	16,690	15,490	11,260	228,600
Dom	ata		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
				-		:	:	:	:	1	:	:	:	:
	ICT		;	-	:	:	:	:	:	:	:		rages	
	DISTRICT			Cannock	Cheadle	Leek	Lichfield	Newcastle	Seisdon	Stafford	Stone	Tutbury	Uttoxeter	Totals and Averages

RURAL

Standard		Homicide and operations of War	01	1	1	1	1	1	10	1	1	1	00
28. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2.			00	01	1	00	-	4	00	1	01	-	61
1		All other Accidents	9		7	r-	00	10	10	00	4	t-	64
1	stu	Motor Vehicle Accide	00	01	4	7	01	10	00	1	9	1	-
1			50	64	1.7	0.2	14	00	21	18		9	84
263   16   24   25   25   25   25   25   25   25		Malformations	-		_			_	-		_	01	1-
1	*01	Abortion	1	01	1	01	1	1	1	1	-	1	- 1
1	-	Prostate	01	-	1	4	-	4	1	01	-	1	15
Second	siso	The second secon	01	13	01	1-	00	00	1	00	1	1	00
1			1	0	1	00	1	00	01	1	0.1	- 1	
1			-	*	-	60	-	00	00	1	00	00	62
1			-	0	0.1	10	00	4	01	.01	01	- 1	31
10		Bronchitis	19	16	9		t-	12	1-	10	-	1-	113
1		Pneumonia	00		4	14	00	-	01	6	4	-	00
Complete				-		_	01	-	10	1	-	01	
1			10	0.1	9		9	9	6	00	1-	9	101
1		Other Heart Disease	34	138	37	7.9	333	50	60	27	30	20	458
1			Ξ	1-	9	10	9	9	00	01	00	-	-
Color Material System   Color Material Material System   Color Material Syst		Angan	31	20	30	62	34	00	00	19	14	10	
Compared Properties	-	Nervous System	00	4	63	4	00	'00	10		9		00
Colored Malignant   Colo	-		_			-	-	01	100000			- 12	L.
Comparison of the comparison	en		-	-				-	-				101
Compact   Comp	asm	and Lymphatic	00 01	30	13	07	18	50	17	14	14	14	-
Compact   Comp	copl	Uterus	00	4	03	01	-	-	01	-	1	-	17
Sample   State   Sta		Breast	1	10	03	00	00	9	10	01	1	01	34
Sample   State   Sta	align	Lung, Broachus	Ĭ.	6	00	10	-	13	7	-	-	04	52
Sample   S	M	Stomach	00	122	-	13	11	10	00	4	4	1	67
Sample   S			1	-	1	1	1	-	1		1	01	10
Scale   Scal					_								
Same			-		-	-	100						
Scalar   S		Meningococcal										19	
Seaths from all causes   Seaths from all cau	-					-		-		-	_		
CT   CT   CT   CT   CT   CT   CT   CT	-	and a second second second second	1	0.1	1	4	1	1	-	1		-	
FIG. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.		Tuberculosis, other	1	1	-	1	1	1	1	1	1	1	-
FIG. 169 8 12 10 14 8 18    Salah under 4 weeks 15 244 10 139 8 173 12 13 10 14 8 15 10 10 10 10 10 10 10 10 10 10 10 10 10			-	00	1	-1	00	4	1	-	1	1	16
FICT  FIG. 18 104 4 10 139 6 105 105 105 105 105 105 105 105 105 105	83		00	14	10	13	-	1.5	9	7	00	0.1	92
FICT  Integration  Fig. 169 8  Integration  Fi		Deaths under I year	6	18	22	16	00	18		1-	+	00	
FICT  Integration  Fig. 169 8  Integration  Fi	sos	Deaths from all cau	525	250	186	151	197	898	173	093	683	0.4	1131
FICT  RICT  1497  1590  1706 Births  160  1707 Births  1808		Still Births	-					-		-0100			_
r r					314		217	511	590	243	-	691	
RICT .	-		-:	;	;	1	:	:	:				
DISTRI annock headle eek ichfield ewcastle eisdon tafford tone utbury ttoxeter Totals		CT											
		DISTRI	annock	headle	eek	ichfield	ewcastle	nopsia	tafford	one	utbury	ttoxeter	Totals

Table showing the number of cases of certain Infectious Diseases notified in each sanitary area during the year ended 31st December, 1956, and the Attack-Rates per 1,000 of the population.

## URBAN

sitilə.	Poliomy	1	1	-	-	1	1	1	01	1	1	-	1	9
peral	Rate	0.03	1	1	90.0	1	T	0.17	0.03	1	1	1	0.54	0.02
Puerperal Pyrexia	Cases	1	1	1	01	1	1	-	1	1	1	1	9	5
nonia	Rate	0.50	1	0.77	0.38	0.12	1.05	0.52	1.97	0.63	0.33	0.21	0.09	0.33
Pneumonia	Cases Rate Cases Rate	18	1	10	13	9	600	61	99	11	9	4	1	24
sles	Rate	0.67	1	7.63	90.0	0.03	0.23	0.14	09.0	0.14	0.88	17.66	0.18	8.53
Measles	Cases Rate	5.4	1	66	01	-	0	9	20	00	91	335	93	624
pelas	Rate	90.0	1	0.15	0.03	0.03	0.02	0.36	0.12	1	1	0.16	1	0.01
Erysipelas	Cases Rate Cases Rate	03	1	01	-	-	1	15	4	I	-1	00	1	1
Diphtheria	Rate	0.03	1	1	1	1	0.05	1	0.03	1	1	-	1	1
Dipht	Cases	1	1	1	1	1	1	1	1	ľ	1	1	1	
ping gh	Rate	1.81	1.67	1.46	5.36	2.67	4.11	3.67	6.40	89.0	0.93	0.84	0.63	2.23
Whooping Cough	Cases Rate	47	0	19	182	184	90	154	214	1.5	17	91	2	163
let er	Rate	0.70	0.33	20.5	0.24	0.18	0.78	0.64	0.78	0.14	0.11	1.05	0.36	0.45
Scarlet Fever	Cases Rate	25	1	65	00	6	17	27	26	00	01	50	4	33
ra- noid	Rate	1	1		I	0.05	0.00	1	1		1	1	1	1
Para- Typhoid	Cases	1	1	1	1	1	01	1	1	1	1	1	1	1
piou	Rate	1	1	1	1	1	1	1	1	1	1	-	1	1
Typhoid	Cases Rate Cases Rate Cases Rate	1	1		1	1	-	1	1	1	1	1	1	-
wodl	Rate	1	1	1	+	1	I	1	1		1	1	1	1
Smallpox		1	1	1	1	1	1	1	1		1	1	1	1
Estimated Population	calculating	35,930	3,000	12,970	33,960	50,280	21,880	41,950	33,420	22,140	18,270	18,970	11,050	73,160
H		:	-	:	:			:	:	:	:	:	:	
DISTRICT		Aldridge	Amblecote	Biddulph	Bilston	Brierley Hill	Brownhills	Cannock	Coseley	Darlaston	Kidsgrove	Leek	Lichfield	Newcastle

# URBAN—continued

sitiləyı	Poliom	01	-	1	01	1	1	1	1	-	01	1	01
peral	Rate	0.05	1	1	0.10	1	0.07		1	0.13	0.03	1	0.06
Puerperal Pyrexia	Cases Rate	-	1	1	4	1	-	1	1	-	1	1	01
Pneumonia	Rate	0.12	1	0.33	0.24	0.23	06.0	1.14	0.28	1	0.37	0.17	0.35
Pneur	Cases Rate	9	1	œ	10	03	12	13	11	1	13	4	11
sles	Rate	0.31	1	0.17	6.94	1	1	1.05	0.18	4.99	90.0	1.39	0.26
Measles	Cases Rate	1.5	1	7	39		1	12	-	39	01	23.53	œ
pelas	Cases Rate	1	1	1	0.02		0.02	a.F	0.03	0.38	0.03		0.03
Diphtheria Erysipelas		1	1	1	00	1	-	1	1	00	1		1
theria	Cases Rate	1	1	1	1	1			1	-	1		1
Diph	Cases	1	1	1	1	1	1	1	1		1		
ping	Rate	2.09	5.06	4.31	1.21	0.34	0.90	0.88	2.33	5.50	2.19	4.22	3.23
Whooping Cough	Cases	103	57	104	90	00	12	10	9.5	43	92	100	101
let rer	Rate	0.98	0.27	0.21	0.94	1	0.15	0.70	1.42	0.13	0.81	1.27	0.26
Scarlet Fever	Cases	48	00	5	39	1	0.1	00	99	1	80	30	8
ra- noid	Rate	1	1	1	0.05	1	1	1	1		E	1	18
Para- Typhoid	Cases Rate Cases Rate Cases Rate	-	1	Ī	1	1	1	1	1	1	1	1	1
hoid	Rate	1	1	1	1	1	1	1	1		1		1
Typhoid	Cases		I	Ī	1	1	1	1	1	1	1	1	
npox	Rate	1	1	1	1	1	1	1	1		1		1
Smal		1	-	1	1	1	1	1	1	li.	1	1	1
Estimated Smallpox Population	calculating	49,180	11,270	24,130	41,420	8,860	13,350	11,410	39,540	7,820	34,710	23,700	31,230
Discounter	DISTRICT	Rowley Regis	Rugeley	Sedgley	Stafford	Stone	Tamworth	Tettenhall	Tipton	Uttoxeter	Wednesbury	Wednesfield	Willenhall

### URAL

elitis	Poliomy	00	00	1	1	1	-	01	-	1	1
Puerperal Pyrexia	Rate	1	0.11	1	1	1	1	1	1	1	0.18
_	Cases Rate	1	4	1	1	4	1	1	1	1	01
Pneumonia	Rate	0.32	0.48	0.11	0.48	90.0	0.57	0.31	0.30	0.39	0.27
Pneu	Cases	00	17	01	20	-	16	9	20	9	00
Measles	Cases Rate Cases Rate	1.73	3.53	9.47	0.56	9.93	0.75	0.52	0.48	5.10	1.33
Mea		44	124	174	60	175	21	10	00	7.9	15
ipelas	Cases Rate	0.24	0.14	0.05	0.27	0.11	0.04	1	1	0.13	0.18
Diphtheria Erysipelas		9	5	1	11	01	-	- 1	1	01	φı.
theria	Cases Rate	1	1	0.11	1	1	1	- 1	1		T
Diph		1	1	63	1	1	1	1	1	1	1
Whooping	Cases Rate	2.76	4.33	1.80	1.50	2.55	0.75	0.83	2.28	1.94	2.58
Whoopin	Cases	02	152	000	65	45	21	16	38	30	59
rlet	Rate	0.35	0.46	0.65	0.48	0.57	0.43	1.45	0.24	0.52	L
Scarlet	Cases Rate	6	16	12	50	10	12	88	4	00	P
ra- noid	Rate	1	1	1	1	1	1	1	1	No.	In.
Para- Typhoid	Cases	1	1	1	1	-1	1	1	1	I	T
piou	Rate	1	1	1	1	1	1	1	1	1	T
Typhoid	Cases Rate Cases Rate	1	1	1	1	1	1	1	1	1	T
lpox	Rate	1		1	1	1	1	1	1	1	10
Smal		1	1	1	1	1	1	1	1	1	1
Estimated Smallpox Population	calculating	25,380	35,110	18,380	41,250	17,630	28,070	19,340	16,690	15,490	11,260
5		:	:	:	. :	:	;	:	:	:	
District	Title soul	Cannock	Cheadle	Leek	Lichfield	Newcastle	Seisdon	Stafford	Stone	Tutbury	Uttoxeter