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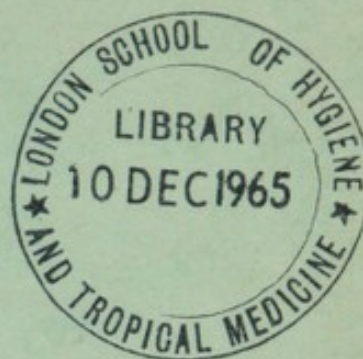
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STAFFORDSHIRE COUNTY COUNCIL

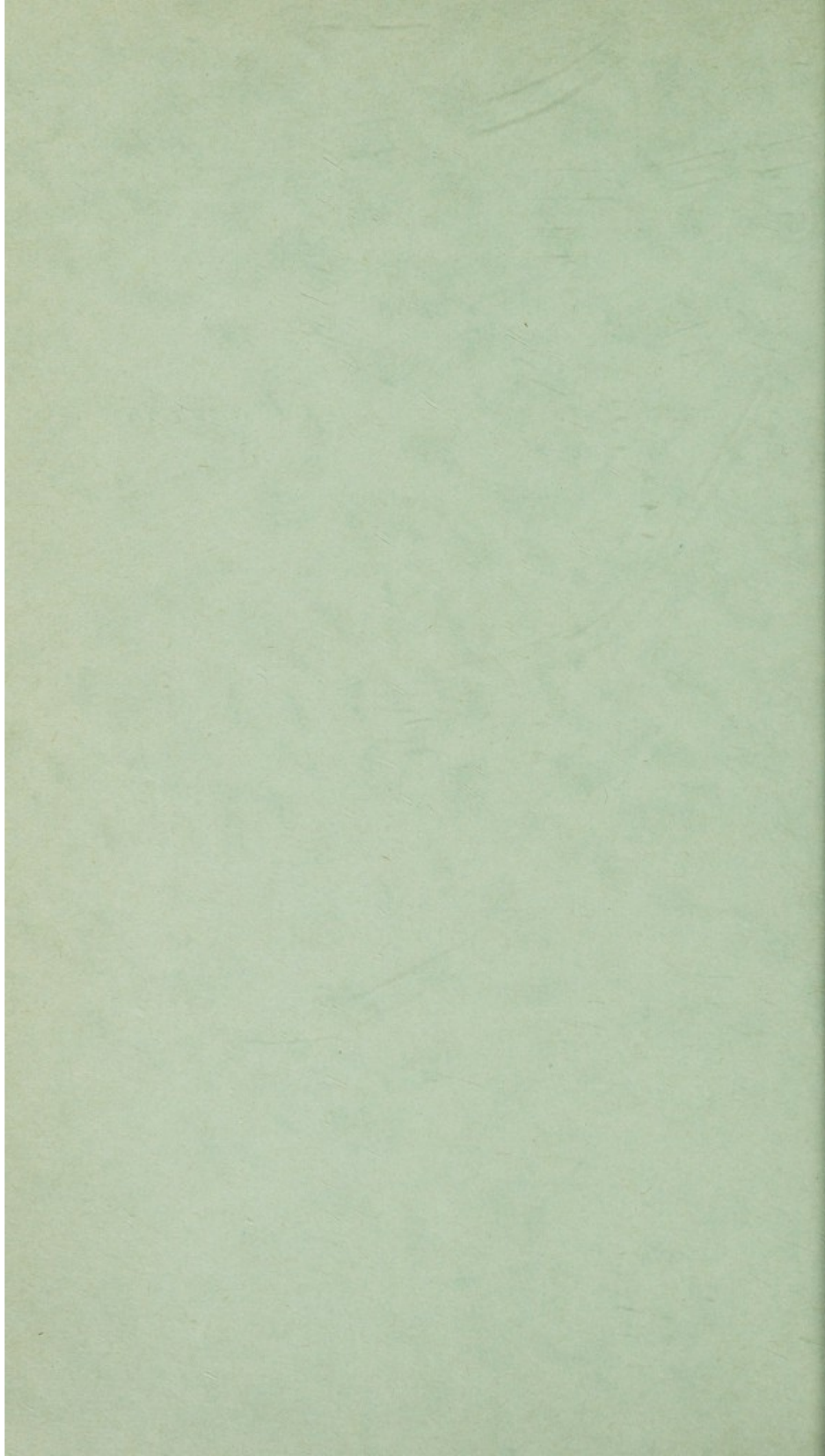
REPORT

of the

MEDICAL OFFICER OF HEALTH

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

For the Year 1964





STAFFORDSHIRE COUNTY COUNCIL

REPORT

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

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INDEX

	Page		Page
Ambulance Service ...	74	Mental Health Services ...	82
Analgesia ...	68	Midwives' Fees—Compensation ...	51
Ante-Natal Clinics ...	50	Midwives' Service ...	64
Artificial Sunlight ...	52	Milk Supply ...	21
Area Administration ...	50	Milk in Schools Scheme ...	26
Area and Population ...	8	Mothercraft Training Hostel ...	56
Atmospheric Pollution ...	21		
B.C.G. Vaccination ...	43	Neglected Children ...	60
Births ...	9, 10	Neighbourly Helps ...	82
Births, Notification of ...	55	Night Helps ...	82
Blind Persons ...	47	Nurseries and Child Minders' Regulation Act, 1948 ...	58
Cancer ...	45	Nurseries (Day) ...	58
Care of Mothers and Young Children ...	50	Nursing Comforts, Provision of ...	78
Care of Old People ...	77		
Chemical Laboratory ...	14	Old People, Care of ...	77
Child Guidance ...	62	Ophthalmia Neonatorum ...	67
Children—"at Risk" ...	81	Ophthalmic Treatment ...	52
Chiropody Service ...	79		
Chronic Sick ...	81	Poliomyelitis Vaccination ...	72
Day Nurseries ...	58	Population and Area ...	8
Deaths ...	10, 11, 12, 13	Post-Natal Clinics ...	50
Dental Laboratory ...	54	Premature Infants ...	56
Dental Treatment ...	52	Prevention of break-up of Families ...	61
Diphtheria Immunisation ...	72	Prevention of Home Accidents ...	81
Domestic Help Service ...	82	Prevention of Illness—Care and After-Care ...	76
Epileptics ...	92	Problem Families ...	61
Extra Nourishment Scheme ...	55	Puerperal Pyrexia ...	51, 68
Family Planning ...	59		
Health Officers ...	7	Sewerage and Sewage Disposal ...	30
Health Education ...	48	Small Pox Vaccination ...	71
Health Visiting ...	69	Spastics ...	92
Hearing—Testing of Young Children ...	52	Statistics, Vital ...	8
Home Accidents—Prevention of ...	81	Stillbirths ...	9, 67
Home Nursing Service ...	62		
Illegitimate Children—Care of ...	56	Tetanus Inoculation... ..	73
Infant Welfare Centres ...	50	Tuberculosis ...	37
Infantile Mortality ...	59	Tuberculosis Health Visiting ...	43
Infectious Diseases—Prevalence and Control over ...	35		
Mass Radiography ...	41	Vaccination and Immunisation ...	71
Maternal Mortality ...	59	Venereal Diseases ...	46
Maternity and Nursing Homes ...	58	Vital Statistics ...	8
Maternity Outfits ...	51	Water Supplies ...	30
Medical Examinations, Superannuation ...	49	Watery, Inflamed and Discharging eyes ...	67
		Welfare Foods, Distribution of ...	55
		Welfare Officers ...	76
		Whooping Cough Immunisation ...	73

STAFFORDSHIRE COUNTY COUNCIL

Annual Report of Medical Officer of Health

PRELIMINARY NOTE

The difficulty of demonstrating the effects of the work of a Health Department has been recognised for many years. A large part of what is done cannot be expressed in concrete terms, another part may be partly recorded as "case dealt with" and a portion is strictly statistical. These figures show this year a favourable trend and show that the services were used by larger numbers.

It will be noted that the birth rate has again increased and is now the highest since the peak of the post war "bulge", which was reached in 1948. In addition, the death rate reveals a new low record for the county and is low also in comparison with the average for England and Wales. The infant mortality rate too has dropped. Obviously, more people are living in the County and greater provision for their needs will be required. Such is the "day to day" practical sequel, but as no doubt this picture is revealed in most other Local Authorities' areas, every responsible person will be concerned with the wider issue which arises from the population explosion. The control of the death rate has been attained by the efforts of the preventive health services and the advances in treatment. Objectively viewed, some control of the birth rate in the interests of the health of the public—mental health as well as physical—is inevitable after an interval of time ; many people who read the evidence available will feel a short interval of time is indicated.

It is becoming an annual routine to report an increase in the number of deaths due to cancer of the lung and motor accidents. The latter cause is the principal killing factor between the ages of fifteen and thirty-five and the former mainly of men in their most valuable period of work. Strenuous efforts are being made to reduce the number of deaths from both causes and considerable success has been achieved in reducing the number of accidents in relation to the number of vehicles on the roads. Progress in the reduction of cigarette smoking, however, is disappointing. One reason may be that there is no appeal to the sense of public weal in the anti-cigarette campaign and that the final effects are less dramatic than those of road accidents. The main appeal for giving up cigarette smoking is that of cost, but, as this argument applies also to other forms of smoking and other things, it is not really effective. A very important step would be to remove the association, carefully cultivated by advertisements, that the most athletic members of this community smoke and the implications that their robust health derives from cigarette smoking. The real effect is quite the opposite and cigarette smoking should be looked upon with the same repugnance as we now regard spitting.

Consideration of smoking and its effects involves at once thoughts of the Health Education Section, in which, after a long delay due to his being away on the Course for the Diploma in Content and Method of Health Education, the Health Education Officer took up duty in July. It is now expected that the work of the Section will be resumed and grow to effective proportions. The Department's health education activities may be divided into talks and demonstrations given by the staff in that Section and the encouragement of other members of the staff to take a part in this field. To this end the Section has assembled statistical and other information over a wide range of subjects and is able to provide special diagrams and illustrations as required. In the long run, progress can only be made by persuading the public to act sensibly—rules and regulations will not succeed—and this is the main purpose of this important Section.

After a considerable delay it was agreed to provide vaccination against smallpox at county clinics. It can be seen on Page 71 that there was a three-fold increase in the number of children vaccinated under four years of age. There was the opposite position in the older age groups due to the number of children vaccinated during the outbreak affecting the south of the county. The results in 1964, however, demonstrate a big increase over figures in 1963 and previously, and it is hoped to attain a higher percentage still in future years.

During the year three new clinics were opened replacing out-of-date premises, and they represent a big improvement in the facilities of the districts which they serve. There remain, however, several instances where it is urgent to replace bad premises, but the building of new clinics has been hampered by delays in acquiring sites. It appears at the time of writing (August) that the much delayed improvement here will suffer further delay as will the schemes which the Health Committee have for the provision of Health Centres.

At the end of the year, in nine districts in the County, discussions had taken place with doctors who expressed interest in working from a Health Centre.

At Tamworth and Rugeley discussions had reached the stage of agreement over the design of the building and at the other centres decisions regarding sites were the usual cause of delay.

The report of the County Principal Dental Officer shows that the dental service has maintained its position during the year. At the end of the year there were the equivalent of 19.4 dental surgeons in post. In addition four dental auxiliaries were working.

There was a striking increase in the number of orthodontic appliances made and fitted. This is the expected and welcomed result of the joint appointment, with the Regional Hospital Board in 1963, of the Consultant in Children's Dentistry who spends most of his time on orthodontics. This form of treatment, which must be undertaken at a suitable age, is as rewarding to the operator as it is to the patient. The same can hardly be said, however, of the treatment of dental caries, where a preventive outlook is needed. Although it has the initial attraction of novelty, the record of fitting complete dentures to three children between $2\frac{1}{2}$ and 3 years of age is depressing. It was occasioned by the onset of extremely rapid decay and whilst it has proved successful from the point of view of the individual children, it is a forcible reminder of the need for measures to prevent tooth decay. In these particular cases it is thought that the cause was bad oral hygiene and poor dietary habits rather than consti-

tutional, but it will be interesting and valuable to keep these families under observation to see if future children born into them suffer the same dental ill health. It is interesting to speculate what improvement in their dental condition would have occurred had fluoridation of the water supplies been in operation.

There has been a slight drop in the number of children attending the county day nurseries and at the same time a considerable increase in the number of registrations of child minders, none of which is agreed unless the safety and health of the children is assured. It is clear that private enterprise is providing a more extensive service than the health authority is able to do, reasons for which may be concerned with the charges to be made and the provision of special premises by the County Council. Together with continuing costs during very slack periods, the county charge, though less than the economic cost, proves unattractive to mothers. If these costs cannot be reduced it is a sound policy to encourage the private provision of child minding under controlled conditions and more could be done to ensure good premises by allowing the use of County premises, when unused, to mothers' groups at nominal rent for this purpose. Indeed, where the need would be practically continuous, building an additional room on to the clinics would be useful. This apparently simple idea is not easy of attainment, however, for the Ministry of Health require the presence under such circumstances of a suitably trained member of the county staff and, because of staff shortages, this condition cannot often be met.

It is a pleasure to acknowledge that the progress made this year is the result of the actions of a willing and interested Health Committee, and the work of an enthusiastic staff who have been greatly helped, as in previous years, by the co-operation of the departments affected by the work of the Health Department.

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 COMMITTEE

as at 31st December, 1964

Chairman — COUNCILLOR DR. K. C. ROGERS

Vice-Chairman — COUNCILLOR G. McEVOY

Ex-Officio Members—

Councillor G. W. NEWMAN

Chairman of the County Council

„ J. COONEY, M.B.E.

Vice-Chairman of the County Council

„ E. H. BEET

Chairman of the Finance Committee

„ J. H. GEORGE

Vice-Chairman of the Finance Committee

Alderman J. J. BEECH

Councillor P. E. McELLIN

„ H. GADSBY

„ L. W. MERCER

„ Mrs. F. MATTHEWS,
J.P.

„ A. NEEDHAM

„ J. P. PENNINGTON,
J.P.

„ Mrs. E. NORTHALL

„ G. H. PHILPOTT, J.P.

„ J. R. PARSONS

„ Mrs. M. ROWLEY

„ S. H. REYNOLDS

„ W. F. TAYLOR

„ H. RUDGE

„ J. UDALL

„ F. N. SALMON

Councillor J. ADAMS

„ F. W. SAVILL

„ A. J. BARKER

„ J. D. SKELDING, J.P.

„ W. E. DREW, J.P.

„ J. SMITHEMAN

„ H. V. FEREDAY

„ W. F. TRACY

„ Mrs. H. M. GARDENER

„ R. MILO TURNER

„ J. GREENAWAY

„ Mrs. S. A. WARD,

„ A. J. R. HICKLING

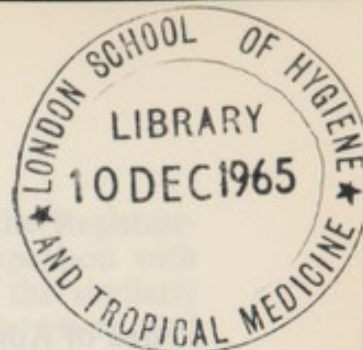
C.B.E.

„ Miss G. JOULES

„ W. H. WESTWOOD

„ H. W. WHITE

„ Mrs. D. M. W. WYNNE



HEALTH OFFICERS

(A) MEDICAL

County Medical Officer of Health

G. RAMAGE, M.A. (Admin.), M.D., Ch.B., B.Sc., M.R.C.S., L.R.C.P.,
D.P.H.

Health Department, County Buildings, Stafford, Tel. No. Stafford 3121

Deputy County Medical Officer of Health

A. WITHNELL, B.Sc., M.D., Ch.B., D.P.H.

Principal Medical Officer for Maternity and Child Welfare

MAIRIDH A. M. N. GILLATT, M.B., Ch.B., D.P.H., D.R.C.O.G.

Principal Medical Officer for Mental Health

W. JOHNSON, M.R.C.S., L.R.C.P.

Medical Officers to Area Health Committees

SHEILA M. DURKIN, M.B., Ch.B., D.P.H.

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

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

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

H. A. H. SUMMERS, M.B., B.Ch., B.A.O., 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.

P. J. C. WALKER, M.B., Ch.B., M.R.C.S., L.R.C.P., D.P.H.

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

(B) OTHER PROFESSIONAL

County Dental Officer

J. C. TIMMIS, L.D.S., R.C.S.

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 Administrative County (acres)	685,239
Estimated Home Population of Area, 1964 (Primarily for Calculation of Death-rates or incidence of Notifiable Diseases)	1,048,600
Rateable Value at 1st April, 1964 (General County Purposes)	£36,861,806
Estimated net product of a penny rate, 1964-65 (General County Purposes)	£154,537

2.—VITAL STATISTICS—MOTHERS AND INFANTS

Live Births:	
Number	20,196
Rate per 1,000 population	19.3
Illegitimate Live Births (per cent of total live births) ...	4.0
Stillbirths:	
Number	344
Rate per 1,000 total live and still births	16.7
Total Live and Still Births	20,540
Infant Deaths (deaths under one year)	398
Infant Mortality Rates:	
Total infant deaths per 1,000 total live births	20
Legitimate infant deaths per 1,000 legitimate live births ...	19
Illegitimate infant deaths per 1,000 illegitimate live births	26
Neo-natal Mortality Rate (deaths under four weeks per 1,000 total live births)	14
Early Neo-natal Mortality Rate (deaths under one week per 1,000 total live births)	12
Perinatal Mortality Rate (stillbirths and deaths under one week combined per 1,000 total live and still births) ...	28
Maternal Mortality (including abortion)	
Number of deaths	6
Rate per 1,000 total live and still births	0.29

OTHER EXTRACTS FROM VITAL STATISTICS OF THE YEAR

Deaths from all causes	10,017
Date Rate	9.6
Deaths from Cancer (all ages)	1,825
Deaths from Measles (all ages)	2
Deaths from Whooping Cough (all ages)	3
Deaths from Gastritis, Enteritis and Diarrhoea (under one year of age)	12

AREA AND POPULATION

There has been no alteration in the total area of the Administrative County this year and there was no internal change.

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 1961 and the estimated home population for mid-1964 are set out.

	<i>Census 1961 (Final)</i>	<i>Estimated Population Mid-1964</i>
Urban	736,917	779,150
Rural	248,196	269,450
Totals	985,113	1,048,600

The live births registered in the Administrative County for birth-rate purposes numbered 20,196, compared with 19,608 in the previous year, the number in the Urban Districts being 15,140 and in the Rural Districts 5,056.

Stillbirths. There were 344 stillbirths registered during the year, of which 259 were in Urban and 85 in Rural Districts. The still-birth rate per thousand of the population for the combined Urban and Rural Districts was 0.33. During the same period the rate for England and Wales was 0.31.

		LIVE BIRTH-RATE PER 1,000 OF POPULATION																			
		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	5 yrs. 1954- 1958	1959	1960	1961	1962	1963	1964
DISTRICTS	{ Combined Urban and Rural .. Urban .. Rural .. }	33.6	33.2	32.5	30.3	27.8	24.0	24.1	20.2	17.6	17.1	18.3	19.9	16.2	16.2	17.0	17.8	18.3	18.8	19.0	19.3
		35.5	34.7	33.6	31.5	29.2	25.0	25.0	20.7	18.1	17.5	18.9	20.4	16.4	16.3	17.0	17.9	18.4	18.9	19.0	19.4
		30.2	30.5	30.2	27.0	24.4	21.6	22.0	19.0	16.6	15.7	16.7	18.5	15.6	15.9	16.8	17.7	17.9	18.2	18.8	18.8
		30.8	29.7	28.7	26.9	24.5	20.4	21.3	17.8	15.6	14.9	15.2	18.2	15.8	15.7	16.5	17.1	17.4	18.0	18.2	18.4
England and Wales ..																					

DEATHS

The number of deaths in the Administrative County amounted to 10,017, the number in the Urban Districts being 7,471 and in the Rural Districts 2,546.

DISTRICTS		DEATH-RATE PER 1,000 OF POPULATION																			
		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	5 yrs. 1954- 1958	1959	1960	1961	1962	1963	1964
Staffordshire {	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	10.0	9.9	10.1	10.2	10.0	9.6
	Urban ..	18.9	17.5	16.6	15.1	14.7	15.5	12.6	11.5	11.8	11.3	11.2	10.4	10.7	10.5	10.0	9.9	10.2	10.2	10.1	9.6
	Rural ..	16.8	15.7	15.1	13.4	12.7	13.8	11.6	11.2	11.2	11.2	11.0	10.4	10.0	10.3	9.8	9.9	10.1	10.2	9.6	9.4
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	11.6	11.6	11.5	12.0	11.9	12.2	11.3

In the following table are shown the chief causes of death for 1964. The numbers given are 87.3 per cent of the total deaths.

TABLE SHOWING CHIEF CAUSES OF DEATH

Heart Disease	3,251
Cancer	1,825
Vascular lesions of nervous system	1,384
Bronchitis	631
Pneumonia	495
Other Circulatory Disease	369
All other accidents	233
Motor Vehicle Accidents	164
Congenital Malformations	134
Diabetes	74
Ulcer of Stomach and Duodenum	71
Nephritis and Nephrosis	57
Leukaemia, Aleukaemia	55

(see Table on following page)

CAUSES OF DEATH	AGE AT DEATH											TOTAL
	Under 4 weeks	4 weeks and under 1 year	1 and under 5	5 and under 15	15 and under 25	25 and under 35	35 and under 45	45 and under 55	55 and under 65	65 and under 75	75 and over	
1. Tuberculosis, respiratory	—	—	—	—	—	—	2	3	8	8	6	27
2. Tuberculosis, other	—	—	—	—	—	—	2	1	1	—	—	4
3. Syphilitic disease	—	—	—	—	—	—	—	1	3	2	4	10
4. Diphtheria	—	—	—	—	—	—	—	—	—	—	—	—
5. Whooping Cough	—	3	—	—	—	—	—	—	—	—	—	3
6. Meningococcal infections	1	1	1	1	—	—	—	—	—	—	—	4
7. Acute Poliomyelitis	—	—	—	—	—	—	—	—	—	—	—	—
8. Measles	—	—	2	—	—	—	—	—	—	—	—	2
9. Other infective and parasitic diseases	1	2	3	4	2	1	2	3	3	3	2	26
10. Malignant neoplasm stomach	—	—	—	—	—	1	6	26	66	79	64	242
11. Malignant neoplasm lung bronchus	—	—	—	1	—	1	8	63	186	118	52	429
12. Malignant neoplasm breast	—	—	—	—	—	4	22	40	47	48	30	191
13. Malignant neoplasm uterus	—	—	—	—	1	1	7	16	14	22	10	71
14. Other malignant and Lymphatic neoplasms	—	—	1	7	11	13	46	122	223	225	244	892
15. Leukaemia, aleukaemia	—	1	4	4	6	—	3	7	8	14	8	55
16. Diabetes	—	—	1	1	—	2	6	5	10	24	25	74
17. Vascular lesions of nervous system	—	—	1	—	1	11	20	67	212	363	709	1384
18. Coronary disease, angina	—	—	—	—	—	2	45	165	409	538	596	1755
19. Hypertension with heart disease	—	—	—	—	—	1	4	4	27	52	77	165
20. Other heart disease	—	1	—	1	6	16	13	49	116	277	852	1331
21. Other circulatory disease	—	—	—	—	2	3	10	23	44	85	202	369
22. Influenza	1	1	—	1	1	1	5	5	7	8	14	44
23. Pneumonia	16	30	7	3	4	2	10	16	61	110	236	495
24. Bronchitis	—	3	3	1	2	3	4	34	157	209	216	631
25. Other diseases of respiratory system	—	—	—	2	—	2	3	8	22	38	26	101
26. Ulcer of stomach and duodenum	—	—	—	—	—	—	—	5	17	26	23	71
27. Gastritis, enteritis and diarrhoea	—	12	—	—	—	1	1	6	7	8	13	48
28. Nephritis and nephrosis	—	—	1	—	5	5	12	12	5	4	13	57
29. Hyperplasia of prostate	—	—	—	—	—	—	—	—	4	14	35	53
30. Pregnancy, childbirth, abortion	—	—	—	—	—	4	2	—	—	—	—	6
31. Congenital malformations	64	32	9	7	3	9	1	6	2	1	—	134
32. Other defined and ill-defined diseases	196	18	9	15	14	17	28	54	93	127	264	835
33. Motor vehicle accidents	—	—	8	8	44	26	19	15	10	18	16	164
34. All other accidents	1	14	11	17	12	5	17	24	25	24	83	233
35. Suicide	—	—	—	—	4	5	21	24	22	24	6	106
36. Homicide and operations of war	—	—	1	1	—	1	—	1	—	—	1	5
Totals	280	118	62	73	118	137	319	805	1809	2469	3827	10017

The following table has been prepared covering the last 45 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. In 1964, 11.1 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)

YEAR	MALE			FEMALE		
	Deaths all ages	Deaths under 45	% of Total	Deaths all ages	Deaths under 45	% of Total
1920	4,626	2,295	49.61	4,084	1,935	47.38
1921	4,545	2,120	46.64	3,985	1,759	44.14
1922	4,534	1,943	42.58	4,191	1,793	42.78
1923	4,197	1,816	43.27	3,788	1,556	41.08
1924	4,332	1,795	41.43	3,906	1,520	38.91
1925	4,556	1,919	42.12	4,161	1,724	41.43
1926	4,148	1,658	39.97	3,808	1,441	37.84
1927	4,458	1,766	39.61	4,082	1,564	38.31
1928	3,965	1,449	36.54	3,563	1,180	33.12
1929	4,813	1,827	37.96	4,293	1,453	33.84
1930	4,100	1,473	35.92	3,672	1,211	32.98
1931	4,376	1,472	33.64	3,933	1,272	32.34
1932	4,190	1,425	34.01	3,824	1,174	30.70
1933	4,213	1,415	33.59	3,900	1,207	30.95
1934	4,105	1,261	30.72	3,655	1,054	28.84
1935	4,284	1,354	31.61	3,802	1,159	30.48
1936	4,203	1,266	30.12	4,022	1,100	27.35
1937	4,793	1,484	30.96	4,075	1,041	25.25
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	899	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
1957	4,999	655	13.10	4,308	433	10.05
1958	5,185	590	11.38	4,398	423	9.62
1959	5,105	579	11.34	4,354	406	9.32
1960	5,161	640	12.40	4,491	396	8.82
1961	5,355	646	12.06	4,684	395	8.43
1962	5,512	643	11.67	4,800	470	9.79
1963	5,534	648	11.71	4,789	435	9.08
1964	5,398	682	12.63	4,619	425	9.20

CHEMICAL LABORATORY

For the first time since the Laboratory was established the number of samples examined has exceeded 10,000. The proportion of the samples from County Council sources was 71.4% while 20.6% came from the six other Food and Drugs Authorities served by the Laboratory and 8.0% came from various Local Authorities within the County area and from private sources.

The estimated mid-1964 population of the area served by the Laboratory was 1,312,510 while that of the Staffordshire County Council's Administrative area for the purpose of the Food and Drugs Act was 768,420 showing an increase of 1.8% over the previous year. The total number of food and drugs samples examined for the County Council, excluding "Appeal-to-Cow" samples was 6,378 which gives a sampling rate per 1,000 of population of 8.3 per annum. This compares with last year's figures of 6,177 samples and a sampling rate of 8.2 per annum.

Of Food and Drugs samples examined for the County Council 192 or 3.0% received adverse reports as compared with 206 or 3.3% last year. The 192 faulty samples included 102 milks and 90 other food and drugs. Numerical details relating to these faulty samples are given in Table II. The adulteration rate for milks is slightly higher than last year at 2.2% but that of other food and drugs has dropped to 5.1%. The groups of foods showing higher than average rates of adulteration included canned and frozen meat products; fresh meat products; canned fruit and vegetable juices.

In addition to an increase in the number of samples received the work of the Laboratory is further increased by the revision of existing legislation and the promulgation of new Regulations relating to foods and drugs. The new Bread and Flour Regulations and the Liquid Egg (Pasteurisation) Regulations of 1963 came into force during the year and new Regulations were passed relating to Meat Treatment; Soft Drinks; Dried Milk; Mineral Hydrocarbons in Food; Milk and the Preservation of Raw Fish. The 1963 edition of the British Pharmacopoeia introducing various changes in drugs control came into force in January, 1964. During the year the Ministries concerned with the Food and Drugs Act also published proposals for Regulations controlling Canned Meat and Meat Pies and amendments to the Skimmed Milk and Non-Milk Fat Regulations. In addition the Government Standards Committee published Reports reviewing the Colouring Matter in Food Regulations and Food Labelling.

It was pointed out last year that the present inadequate and unsatisfactory laboratory accommodation was hindering essential development in the newer fields of food control. This year it has been possible to do only token amounts of work relating to antibiotics in milk and pesticide residues in food. An additional and major handicap to progress occurred in the latter part of the year when the Chief Assistant Analyst and all three Assistant Analysts (senior grade) left for better paid appointments elsewhere, and the amount of work undertaken after their departure was severely curtailed. At the end of the year the four vacancies remained.

TABLE I

The total number of samples analysed was as follows:—

For County Council

Food and Drugs Act, 1955	(a) Chief Inspector's Samples ...	3,430
	(b) County Public Health Inspector's Samples ...	2,948
	(c) "Appeal-to-Cow" Samples ...	44
Milks for Hypochlorite Test	... ..	451
Milks for Antibiotic Test	... ..	24
Fertilisers and Feeding Stuffs Act, 1926	... ..	134
Drinking Waters	... ..	36
Swimming Bath and Pool Waters	... ..	2
River and Stream Waters	... ..	Nil
Sewages, Effluents and Trade Wastes, etc.	... ..	113
Miscellaneous Samples	... ..	137
		<hr/> 7,319

For City of Stoke-on-Trent

Food and Drugs Act, 1955, Chief Inspector's Samples	...	860
Fertilisers and Feeding Stuffs Act, 1926	... ..	13
Other Samples	... ..	122
		<hr/> 995

For Borough of Rowley Regis

Food and Drugs Act, 1955	Chief Inspector's Samples	...	207
	County Public Health Inspector's Samples	...	44
Other Samples	... ..	...	39
			<hr/> 290

For Borough of Newcastle-under-Lyme

Food and Drugs Act, 1955, Chief Inspector's Samples	...	137
Other Samples	... ..	37
		<hr/> 174

For Borough of Stafford

Food and Drugs Act, 1955, Chief Inspector's Samples	...	220
Other Samples	... ..	48
		<hr/> 268

For the Urban District Council of Cannock

Food and Drugs Act, 1955, Chief Inspector's Samples	...	157
Other Samples	... ..	47
		<hr/> 204

For the Urban District Council of Brierley Hill

Food and Drugs Act, 1955, Chief Inspector's Samples	...	150
Other Samples	28
		<hr/> 178

<i>Other Authorities</i>	824
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TOTAL	...	<hr/> 10,252
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Table II shows the total number of Food and Drugs Samples submitted and the number reported against.

TABLE II

SAMPLES	Number Examined			Number reported against or below standard		
	Formal	Informal	Total	Formal	Informal	Total
Almonds	10	—	10	—	—	—
Baking Powder and Golden Raising Powder	4	—	4	—	—	—
Bread	6	1	7	—	—	—
Bun, Cake & Pudding Mixture	10	2	12	—	—	—
Butters	51	1	52	—	—	—
Cereal Products	25	6	31	—	—	—
Cheese and Cheese Products	29	13	42	—	1	1
Cocoa and Chocolate Preparations	13	2	15	—	—	—
Coconut	9	1	10	—	—	—
Coffee Ground	8	—	8	—	—	—
Coffee Extracts	13	4	17	—	—	—
Cream	13	9	22	—	—	—
Curry and Curry Powder	5	2	7	—	—	—
Custard Powder & Prepared Starches	11	—	11	—	—	—
Drinks, Alcoholic	71	8	79	—	—	—
Drinks, Non-Alcoholic	48	18	66	1	—	1
Drugs	49	66	115	4	—	4
Fats	47	—	47	4	—	4
Fish Pastes and Fish Products	39	11	50	—	—	—
Flavourings and Colourings	5	2	7	—	—	—
Flour, Self Raising	16	2	18	—	—	—
Flour, Plain, Various	7	3	10	3	1	4
Flour Confectionery	42	10	52	4	—	4
Fruit and Vegetables, Fresh	—	8	8	—	—	—
" " Dried, etc.	28	28	56	2	3	5
" " Canned	71	44	115	2	5	7
Fruit and Vegetable Juices	11	13	24	2	5	7
Fruit Curds	11	1	12	—	—	—
Foods, Baby and Tonic	4	4	8	—	—	—
Gravy Browning and Salt	9	4	13	—	—	—
Herbs, Spices and Condiments	36	6	42	1	2	3
Ice Cream	24	3	27	—	—	—
Jellies	11	5	16	1	—	1
Margarine	17	1	18	—	—	—
Glucose	3	1	4	—	—	—
Gelatine	1	1	2	—	—	—
Marzipan	10	—	10	—	—	—
Meat Products (Open)	123	21	144	10	—	10
Meat Products (Canned, etc.)	122	33	155	16	5	21
Milk	337	4,276	4,613	58	44	102
Milk, Condensed & Evaporated, etc.	12	12	24	—	—	—
Mincemeat	8	2	10	—	—	—
Oils, Refined and Salad	12	3	15	—	—	—
Pickles, various	16	1	17	—	—	—
Preserves	54	7	61	—	—	—
Puddings and Pies and Pie Fillings	30	12	42	—	1	1
Potato Products	10	6	16	—	—	—
Salad Cream and Mayonnaise	5	1	6	—	—	—
Sauces	27	9	36	2	—	2
Soups	17	15	32	1	—	1
Sugars	9	2	11	—	—	—
Sugar Confectionery	35	11	46	1	—	1
Sweet Spreads and Syrups	4	1	5	—	—	—
Tea	26	1	27	—	—	—
Vinegars	20	—	20	—	—	—
Unclassified	32	19	51	3	10	13
Total	1,666	4,712	6,378	115	77	192

FOOD AND DRUGS ACT, 1955

Of the 6,378 samples submitted from the County Area 6,186 were found to be genuine and 192 adulterated or below standard, the percentage of adulterated samples being 3.0%. The rate of adulteration for the County is 0.3% lower than last year but higher than that for the previous six years, the figures for 1947-63 being 12.2, 7.7, 5.4, 5.1, 2.9, 4.4, 2.5, 2.7, 3.0, 3.5, 2.8, 3.2, 2.7, 2.5, 2.5, 2.8 and 3.3 respectively.

(1) MILK—Four thousand, six hundred and thirteen samples of milk, of all grades were submitted for analysis. These comprised 1,829 samples of "Tuberculin Tested", 1,263 "Tuberculin Tested (Pasteurised)", 332 Channel Island, 819 "Pasteurised", 304 Sterilised and sixty-six undesignated milk. One hundred and two or 2.2 per cent were found to be adulterated, of which 57 contained added water, 4 contained added water and were fat deficient, 34 were fat deficient and 7 were deficient in fat and solids-not-fat. These figures do NOT include "Appeal-to-Cow" samples.

Action taken—Of the 102 unsatisfactory samples taken 22 were of untreated milk.

Twenty-seven of these were informal samples taken by Sampling Officers of the Health Department, viz.:—8 "Pasteurised", 1 "Pasteurised (Channel Island)", 1 "Sterilised", 10 untreated and 7 untreated (Channel Island). They were included in the 2,992 samples collected from Retailers, School Canteens, Day Nurseries, Hospitals, Institutions and milk supplied under the "Milk-in-Schools" Scheme. Fifteen of the samples were deficient in fat, 4 were deficient in fat and solids-not-fat, and 8 contained added water. Formal repeat samples were taken by Officers of the Chief Inspector's Department from the same sources.

The remaining 75 samples adversely reported upon were taken "formally" under the Food and Drugs Act, 1955. Fifty contained added water, 4 contained added water and were deficient in fat and 21 were deficient in fat only.

The deficiencies in many of these samples were slight and "follow-up" samples proved to be "Genuine". In such cases the vendors were cautioned.

There were 44 "Appeal-to-Cow" samples taken and 26 of these proved to be naturally poor milk. During the year 110 samples were treated also for the presence of antibiotics, 18 of which proved to be positive.

PROCEEDINGS

During the year proceedings have been instituted in respect of samples of Tuberculin Tested milk containing added water, a carton of pasteurised milk that was wrongly described as Tuberculin Tested Milk and Tuberculin Tested Pasteurised Milk found to contain added water. Fines amounting to £68 3s. 0d. were imposed together with £128 3s. 0d. special costs.

“Appeal-to-Cow” Samples—Of the 44 “Appeal-to-Cow” samples taken 17 were found to be naturally poor in solids-not-fat and 9 naturally poor in fat.

The average composition of the milk of all grades, including “Appeal-to-Cow” samples, but excluding Channel Island was:—

Fat	3.71%	} Total Solids—12.37%
Solids-not-fat...	8.66%	

Of the 4,200 samples of milk (excluding Channel Island) passed as genuine, 168 (4.0 per cent) were naturally poor in solids-not-fat, the deficiencies being proved by the Freezing Point (Hortvet) to be due to natural causes. Two (0.05%) were naturally poor in fat and four (0.1%) were naturally poor in both fat and solids-not-fat, the deficiencies being proved by the “Appeal-to-Cow” samples to be due to natural causes.

The poor quality of the 168 samples which failed to reach the low minimum standard of 8.5% solids-not-fat, but were passed as genuine is further emphasised when it is noted that the average quality of all samples is 8.66% solids-not-fat.

(2) GENERAL ARTICLES OF FOOD—One thousand, seven hundred and sixty-five samples were examined and 90 samples (57 formal and 33 informal) were found to be adulterated.

Proceedings were taken in respect of a sample of apple pie which was found to contain a mould growth. A fine of £15, together with £7 15s. 0d. costs was imposed.

The 90 samples which received adverse reports were either adulterated or insufficiently or wrongly labelled. The attention of the manufacturers or packers was drawn to these labelling infringements after the necessary enquiries had been made, and advice given concerning statutory labelling requirements. In many cases drafts of reprinted labels were submitted for approval, thus preventing any recurrence of the infringements.

Milks		General Articles of Food	
Fines £68 3s. 0d.	Costs £128 3s. 0d.	Fines £15 0s. 0d.	Costs £7 15s. 0d.

In addition, proceedings were instituted in respect of a bottle of milk which contained glass and a milk bottle containing sterilised milk which was in an unclean condition. Fines amounting to £45 together with £10 10s. 0d. costs were imposed.

FERTILISERS AND FEEDING STUFFS ACT, 1926

The 134 samples submitted under this section comprised 69 fertilisers and 65 feeding stuffs.

FERTILISERS

Of the 69 fertilisers examined 55 were satisfactory. The results of analysis of the remaining samples is given below.

TABLE III

<i>Number of Offences per sample</i>	<i>Nature of Offence</i>	<i>Number of Samples</i>
1	Excess of Potash	3
1	Excess of Nitrogen	3
1	Deficiency of Potash	1
1	Deficiency of soluble phosphoric acid	1
1	Excess of insoluble phosphoric acid	1
1	Deficiency of nitrogen	1
2	Excess of soluble phosphoric acid and a deficiency of insoluble phosphoric acid	1
2	Deficiency of soluble phosphoric acid and excess of insoluble phosphoric acid	1
3	Excess of nitrogen, soluble phosphoric acid and potash	1
2	Excess of soluble and insoluble Phosphoric acid	1
	<i>Number of unsatisfactory samples</i>	14

FEEDING STUFFS

Of the 65 feeding stuffs examined, 56 were satisfactory. The results of analysis of the remaining samples are given below:—

TABLE IV

<i>Number of Offences per sample</i>	<i>Nature of Offence</i>	<i>Number of Samples</i>
1	Incorrect Statutory Statement	1
1	Excess of Protein	2
1	Excess of Oil	4
1	Deficiency of Protein	1
1	No Statutory Statement	1
	<i>Number of Unsatisfactory samples</i>	9

SECTION III

WATERS, EFFLUENTS, SEWAGES AND TRADE WASTES, ETC.

The 704 samples comprising this section includes 369 Drinking Waters; 4 River and Stream Waters; 138 samples of Swimming Bath Waters; and 193 Sewages, Effluents and Trade Wastes.

In addition to the samples submitted by the County Council Officers, samples were also received from 32 of the Local Authorities within the County area, comprising 14 Urban District Councils, 9 Rural District Councils, 7 Borough Councils and the Cities of Lichfield and Stoke-on-Trent.

DRINKING WATERS

Three hundred and sixty-nine samples of drinking waters were analysed during the year: 165 for full analysis; 22 for full analysis and hardness; 5 for full mineral analysis; 9 for pH and chlorine; 108 for salinity; 5 for salinity and hardness, 3 for fluorine; 6 for metals only; 5 for full analysis and fluorine; 16 for fluorescein; 2 for full analysis and plumbo-solvency; 6 for chlorine and salinity; one for pH and plumbo-solvency; one for rust only; one for pH only; one for chlorine only; and 13 for special analysis.

Of the 369 samples analysed:—

137 were of satisfactory quality,

21 were polluted with sewage.

17 were polluted with organic vegetable matter.

12 had metallic contamination.

4 were polluted with both sewage and organic vegetable matter.

1 had metallic contamination and was polluted with organic vegetable matter.

5 were of doubtful quality.

172 were for special analysis.

SWIMMING BATH AND POOL WATERS

4 Samples were submitted for full analysis.

1 Sample was submitted for pH only.

133 Samples were submitted for pH and chlorine.

RIVER AND STREAM WATERS

4 Samples were received for full analysis.

SEWAGES, EFFLUENTS AND TRADE WASTES, ETC.

180 Samples were submitted for ordinary analysis.

13 Samples were submitted for special analysis.

SECTION IV ATMOSPHERIC POLLUTION

423 samples were submitted during the year, 270 Rain Gauges and 153 Lead Peroxide Cylinders. The number of samples examined seems to have stabilised at rather less than half the number examined prior to 1960 when the Government Department concerned suggested that the Lead Peroxide method of measuring sulphur pollution of the atmosphere was no longer necessary on the same nation-wide scale.

SECTION V MISCELLANEOUS SAMPLES

The 306 samples included in this section consist largely of samples submitted as the result of complaints and represent a volume of work out of all proportion to their numbers. They include 83 from County Council Departments; 169 from County District and other Authorities and 54 from private sources.

(a) OFFICIAL SAMPLES

The 83 samples from various County Council Departments included 29 foods. Nineteen of these were submitted on complaint and the complaint was found to be justified in 15 cases. The remaining 10 samples were for laboratory investigation. The further 54 samples related mainly to supplies for various Departments but they also include samples submitted under the Pharmacy and Poisons Act, the Merchandise Marks Act and specimens connected with blocked drains, corroded pipes, mould growths on wallpaper and the identification of dust deposits.

The 169 samples submitted by other Authorities in the County included 142 foods and drugs. All these were submitted on complaints and such complaints were confirmed in 94 cases. The remaining 27 samples included 17 samples of supplies for one Local Authority, 4 dusts for identification and six other specimens of various kinds for identification.

(b) PRIVATE SAMPLES

The 54 samples examined included 25 foods and drugs which were checked against specifications or standards of production. The remaining 29 samples included a variety of waters, cattle foods, toxicological specimens relating to alleged poisoning of animals, insects and other objects for identification and several specimens of urine for determination of alcoholic content.

MILK SUPPLY

The work of the Department in ensuring a clean and wholesome milk supply throughout the County continued. Details of the sampling of milk from various sources are set out below.

MILK PASTEURISING AND STERILISING PLANTS

Four milk processing plants held licences, two producing pasteurised milk, one sterilised milk and one both pasteurised and sterilised milk. During the year the two plants producing pasteurised milk only, ceased production.

All the plants were inspected regularly and samples of washed bottles were taken to check the efficiency of the bottle-washing plants.

THE MILK (SPECIAL DESIGNATION) REGULATIONS, 1963

The following new licences were issued during the year (figures in brackets show the total number of premises licensed at the end of the year):—

Processors' Licenses	...	...	...	Nil	(2)
Dealers' (pre-packed Milk) Licences	...	...	...	133	(1,628)
Dealers' (Tuberculin Tested) Licences	...	...	...	1	(7)

These premises have all been inspected by the County Health Inspectors. Samples of washed bottles were taken regularly from the twelve premises where bottles were washed (four processing plants, two of which ceased production during the year, and eight premises bottling tuberculin tested milk, two of which ceased bottling during the year). On each occasion six bottles were taken and an average bacterial count obtained. Follow-up action was taken where this average count was excessive.

Re-inspection and spot checks are carried out to ensure that conditions under which milk is stored are maintained in a satisfactory manner.

MILK SAMPLING

The pattern of milk sampling continued without change. Samples of retail milk were taken by the Department throughout that part of the County area where the County Council is the Food and Drugs Authority. By special arrangements samples were also collected in Rowley Regis Municipal Borough and the results notified to the Rowley Regis Health Department. These latter 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 also for the presence of tubercle bacilli and Brucella organisms. Pasteurised milks are also subjected to the Methylene Blue Test and, in addition, are checked for the efficiency of the pasteurising process (the Phosphatase Test). Sterilised milks are subjected only to the Turbidity Test.

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

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

- (1) The results of all retail samples are notified to the Medical Officer of Health of the district where the milk was sampled.
- (2) In the case of unsatisfactory samples:—
 - (i) the producer and retailer are notified.
 - (ii) if the sample is Untreated milk, the Divisional Milk Officer of the Ministry of Agriculture, Fisheries and Food, who is responsible for ensuring clean milk production, is notified of all unsatisfactory samples produced at farms situated within his Division. The Medical Officer of Health of the district where the milk is produced is also notified.

- (iii) if the sample is of heat-treated milk from a processing plant licensed by the County Council, appropriate action is taken by the County Health Inspectors. Otherwise the Medical Officer of Health of the Food and Drugs Authority concerned is notified.
- (iv) tubercular positive samples are reported to the Divisional Veterinary Officer of the Ministry of Agriculture, Fisheries and Food, to the Divisional Milk Officer 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 secreting tubercle bacilli and have them slaughtered. The Medical Officer of Health has powers under the Milk and Dairies (General) Regulations, 1959, to place restrictions on the sale of such milk for human consumption.
- (v) where Brucella infection is found the result is notified to the Divisional Veterinary Officer of the Ministry of Agriculture, Fisheries and Food, the Divisional Milk Officer and the Medical Officer of Health of the district where the milk was produced. The latter has powers under the Milk and Dairies (General) Regulations, 1959, to place restrictions on the sale of such milk for human consumption.

Details of the samples collected, together with the results of the various tests applied thereto, are set out in the following table:—

SUMMARY OF RETAIL MILK SAMPLES COLLECTED (i.e. EXCLUDING SAMPLES FROM SCHOOLS, INSTITUTIONS, &c.)
1st JANUARY to 31st DECEMBER, 1964

Grade of Milk	Total Samples Taken	Methylene Blue Test (for cleanliness)			Phosphatase Test (for correct Pasteurisation)		Turbidity Test (for Sterilised Milk)		Biological Test (for presence of T.B. and Brucella infection)		
		Samples Void	Samples Examined	Result	% 1964	% 1963	Samples Examined	Result	Examined	Positive	% 1964 1963
Tuberculin Tested	822	59	763	Passed Failed	674 89	88.3 90.0	—	—	—	—	—
Tuberculin Tested (for Biological Test only)	11	—	—	—	—	—	—	—	—	—	—
Pasteurised	3,423	184	3,239	Passed Failed	3113 126	96.1 97.7	3423	Passed Failed	3414 9	99.7 99.9	—
Sterilised	1,374	—	—	—	—	—	—	—	—	—	—
TOTALS	5,630	243	4,002	Passed Failed	3787 215	94.6 96.4	1,374	Passed	—	—	—

STREET MILKS

The previous table summarises all "street" milk samples collected, samples taken from schools, and various institutions, etc., being dealt with separately. So far as the cleanliness (Methylene Blue) test is concerned, the overall figure of 94.6% satisfactory can be considered to be reasonably good.

The results of the Phosphatase test on pasteurised milk were exceptionally good, only 9 samples failing out of a total of 3,423 samples examined, i.e. in 99.7% of the samples the milk was shown to have been adequately heat treated.

BIOLOGICAL TESTING

Four hundred and fifty-five samples of retail milk were submitted for biological examination for the presence of tubercle bacilli and also for *Brucella* infection. Once again it is very pleasing to note that none was found to be tubercular positive. Moreover, no positive samples were reported from any outside Authority in respect of milk produced within the Administrative County.

Seven samples were reported to be infected with *Brucella abortus*. Appropriate action was taken.

INFORMAL FOOD AND DRUGS SAMPLING

Not included in the table of milk samples collected is a total of 2,992 samples collected by the Sampling Officers from retail sources and from schools, institutions etc. for informal examination under the Food and Drugs Act. These samples were examined for the percentage of fat and solids-not-fat and for the presence of added water. This work is carried out as an administrative convenience and the results are notified to the Chief Inspector of Weights and Measures.

Twenty-seven samples were reported unsatisfactory as follows:—

<i>Retail</i>	8 Untreated	(4 deficient in fat 4 deficient in fat and solids-not-fat)
	7 Untreated	(6 deficient in fat,
	Channel Island	1 contained added water)
	3 Pasteurised	(1 deficient in fat,
		2 contained added water)
	1 Pasteurised	
	Channel Island	(deficient in fat)
	1 Sterilised	(deficient in fat)
<i>Schools,</i>	2 Untreated	(deficient in fat)
<i>&c.</i>	5 Pasteurised	(contained added water)

These unsatisfactory informal samples were followed up by the Chief Inspector of Weights and Measures, who reported as follows:—

"In the case of 19 of these samples, follow-up samples were found to be genuine, 2 were deficient in fat and the offenders were cautioned, 1 contained a small amount of added water and again the offender was cautioned, 2 were deficient in fat and were proved by 'Appeal-to-Cow' samples to be naturally poor. One sample contained added water but due to technical reasons proceedings were not instituted, a further sample contained added water but repeat samples were found to be genuine, and the remaining sample contained added water in respect of which a summons was issued and the dairy concerned was fined £25 together with £17 17s. 0d. costs."

PRESENCE OF HYPOCHLORITES IN MILK

Four hundred and fifty-one samples of milk, as shown below, were examined for the presence of hypochlorite residuals. Two were found unsatisfactory—a “faint trace” being detected, and the result was notified to the producer, the Medical Officer of Health of the district where the milk was produced and the Divisional Milk Officer.

Untreated	...	...	...	233 (2 unsatisfactory)
Untreated (Channel Island)	...	...	...	43
Pasteurised	...	...	...	131
Pasteurised (Channel Island)	...	...	...	27
Sterilised	...	...	...	17
Total	...	...	...	451

MILK IN SCHOOLS SCHEME

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

MAINTAINED SCHOOLS

Type of Milk	Schools sampled by Staffs. C.C.		Schools in the Areas of the Food & Drugs Authorities of Brierley Hill U.D. Cannock U.D. Stafford M.B.		No. of children supplied (figures supplied by Education Dept.)
	No. of suppliers	No. of schools supplied	No. of suppliers	No. of schools supplied	Total
Pasteurised	26	564	4	98	119,901
Untreated	6	12	—	—	275
Total	32	576	4	98	120,176

NON-MAINTAINED SCHOOLS

Pasteurised	8	25	4	4	2,527
Untreated	1	1	—	—	93
Total	9	26	4	4	2,620
Totals for all schools	41	602	8	102	122,796

All supplies are subject to the approval of the County Medical Officer. Normally a supply of Pasteurised milk is insisted upon if such is available. Failing this, Untreated milk is approved.

School milk supplies are sampled regularly, every supply being sampled at least twice a term, and every school sampled at least once each year. Untreated milks are examined bacteriologically (for cleanliness) and biologically (for the presence of tubercle bacilli and *Brucella* organisms). Pasteurised milks are submitted to the Phosphatase test for the efficiency of the pasteurising process and to the Methylene Blue test for cleanliness. In the case of unsatisfactory samples of Untreated milk, the producer and the supplier are notified, also the Divisional Milk Officer of the Ministry of Agriculture, Fisheries and Food, and the Medical Officers of Health of the districts where the milk is produced and retailed. Repeat samples are taken and failing any improvement, alternative suppliers are found.

Unsatisfactory samples of Pasteurised milk processed at dairies licensed by the County Council are investigated by the County Health Inspectors for both Methylene Blue and Phosphatase test failures. Where the dairy is not licensed by the County Council, samples which fail the tests are reported to the Medical Officer of Health of the licensing authority concerned, for appropriate action.

One thousand and sixty-eight samples (47 Untreated and 1,021 Pasteurised) were collected from schools during 1964. The following table shows the results of tests carried out:—

<i>School Milk</i>	<i>Samples Examined</i>	<i>Passed</i>	<i>Failed</i>
Methylene Blue Test	1,006 (62 void due to high atmospheric shade temperature)	956	50 (8 Untreated 42 Pasteurised)
Phosphatase Test	1,021	1,016	5
Biological Examination: (a) Tubercle bacilli (b) <i>Brucella abortus</i> }	31	31	Nil

The five samples which failed the Phosphatase test (four also failed the Methylene Blue test) were processed at dairies outside the County Council's control and the failures were therefore reported to the Food & Drugs Authorities concerned for appropriate action.

Once again it is pleasing to note that there were no samples found positive for tubercle bacilli and, in fact, there have been no positive samples since 1953. As in the preceding year, no evidence of *Brucella* infection in milk was found.

GLASS, ETC., IN SCHOOL MILK BOTTLES

Five incidents of glass in school milk bottles were reported to the Department during the year.

These were all very fully investigated and followed up, but there was no reason to take legal action against the dairies concerned.

GENERAL

In addition to samples taken under the foregoing heads, samples of milk were also taken during the year from S.C.C. School Canteens, Hospitals, Children's Homes, County Council premises, Day Nurseries, Play Groups, and certain Private Schools and Colleges.

Eight hundred and two samples were taken (37 Untreated and 765 Pasteurised), the reports on which are summarised below:—

	<i>Samples examined</i>	<i>Passed</i>	<i>Failed</i>
Methylene Blue Test	744 (58 void due to high atmospheric shade temperature)	706	38 (8 Untreated 30 Pasteurised)
Phosphatase Test	765	765	Nil
Biological Examination (a) Tubercle bacilli (b) Brucella abortus }	33	33	Nil

Appropriate action was taken in the case of all failed samples.

SUMMARY

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

Retail ("Street" Milk)	...	...	5,630
Schools	...	...	1,068
School Canteens	...	...	429
Hospitals, Homes, &c.	...	...	373
"Food & Drugs" (Milk)	...	...	2,992
"Hypochlorites"	...	...	451
Total	...	...	10,943

MISCELLANEOUS MATTERS

Little change has occurred in the routine inspection of premises and schools under the control of the County Council with particular reference to kitchens, canteens, sanitation, including small sewage disposal works, water supplies and swimming baths.

There has, however, been some diminution in the number of visits and samples with regard to sewage works and effluents both of County Council and Local Authority installations. The position is that as more works come into operation the "cover" becomes more and more thinly spread. The same remarks apply to school swimming baths and drinking water supplies though efforts are made to give these some priority.

Internal inspection of County Health Department premises under the Offices, Shops and Railway Premises Act has not so far been possible. Likewise no review of sanitary conditions in any County district has been made during the year.

It is pleasing to report that the department's activities in encouraging Local Authorities to take part in the National Survey of Air Pollution being carried out by the Department of Scientific and Industrial Research has been in some measure successful. Stone and Cannock R.D.C.s have participated in the scheme and testing stations have been set up in Penkridge and Eccleshall. Unfortunately Leek and Lichfield R.D.C.s have not been able to participate and this has left some gaps in the overall coverage. Fortunately the northern part of the County has to some extent been covered through the co-operation of the Education Committee and the Headmistress of Hollinsclough School where a station has been set up by the Department of Scientific and Industrial Research and is being operated by the Headmistress and children whose work and enthusiasm in this sphere is very much appreciated.

Two of the smaller milk processing dairies went out of business during the year and were taken over by the larger firms. These old "one man" type of dairies have decreased in numbers over the years and only one continues to operate in the County Administrative Area.

SCHEMES OF WATER SUPPLY, SEWERAGE AND SEWAGE DISPOSAL

For the financial year 1964/65 a sum of £159,697 was contributed by the County Council to District Councils towards the cost of water supply, sewerage and sewage disposal schemes.

During the year, water supply schemes estimated to have cost £61,660 and sewerage and sewage disposal schemes estimated to cost £1,400,366 were submitted to the Health Department for consideration for grants towards their costs. Applications for grants were made under the Rural Water Supplies and Sewerage Acts 1944/55 and/or under Section 56 of the Local Government Act 1958. Details of the various schemes considered during the year are as follows:—

SCHEMES OF WATER SUPPLY

Leek R.D.C.

Bradnop Water Supply Scheme

This scheme, estimated to cost £61,660, is to provide water mains in the Bradnop area of Leek Rural District. The supply is required to meet agricultural needs, particularly the improved standards required for milk production. Of the 69 properties which will be served, 46 are farms or smallholdings. In addition the domestic water supply is inadequate and unsatisfactory. The scheme is very expensive, costing some £895 per property, but if the area is to be supplied with water at all, the cost inevitably will be high due to the scattered area covered by the properties concerned. The scheme was recommended for approval.

SCHEMES OF SEWERAGE AND SEWAGE DISPOSAL

Aldridge Urban Sewerage Scheme: Stage 2

The scheme, estimated to cost £45,760, is the second stage of a large sewerage scheme in the Aldridge area. The sewers will serve existing properties and areas still to be developed. The scheme was recommended for approval.

Biddulph Urban District

Sewerage and Sewage Disposal Works Extensions

This scheme, estimated to cost £123,000, is to provide extensions to the existing sewage disposal works, Biddulph, to deal with the increased flow now reaching them. The extended works are designed to cater for a population of 20,000 with a dry weather flow of 900,000 gallons per day. The older section of the existing works will be abandoned, the newer section will be retained and incorporated into the new scheme. This department recommended that further consideration be given to the size of the sludge beds, which this department considered too small, particularly in view of the proximity of the proposed beds in relation to land allocated for residential use in the area. Subject to the foregoing the scheme was recommended for approval.

Coseley Urban District

Foxyards Sewage Disposal Works

This scheme is to provide for the reconstruction and enlargement of the Foxyards Disposal Works. The estimated cost for works and contingencies only is £375,000, included in which is a sum of £58,000 for the construction of humus tanks and ancilliary works. The scheme was recommended for approval in principle subject to probable modification if the proposed Tame Valley Drainage Board should come into effect, bearing in mind the possibility of an overall scheme of sewerage and sewage disposal for the area covered by the proposed Drainage Board.

Kidsgrove Urban District

Main Drainage Scheme

This scheme, estimated to cost £179,073, is the first stage of a re-sewerage scheme for the Kidsgrove area and covers the main trunk sewer at Hardingswood, Butt Lane, Coalpit Hill, via Second Avenue and Lower Ash Road with extensions to existing sewers near Woodshutt Street and near Maple Avenue at The Hollins. There is a long history of defective sewers flooding in times of only moderate storms. The scheme was recommended for approval.

Leek Urban District

Cheddleton Heath Sewerage Scheme

This scheme, estimated to cost £51,310, is to provide sewerage facilities in the Cheddleton Heath area, at present dealt with by cess pools and tanks. Some 112 properties are covered by the scheme, which, owing to very steep contours and the necessity for pumping, is expensive. Included in the scheme is a length of storm water sewer. Subject to the Urban District Council considering various small extensions and also deleting from the capital cost the salaries of officials preparing the scheme who are permanent employees of the Council, the scheme was recommended for approval.

Uttoxeter Urban District

Alterations and extensions to Sewage Disposal Works Section IV

This is a revised scheme of one considered by the County Council in November, 1962, the main differences being more details are given of the proposals and the Spath extension has been omitted. The works extensions are now based on a population of 12,500 ultimately reaching 24,500 in lieu of a population of 10,000, ultimately reaching 15,000. The estimated cost is £348,400 as compared with £351,600. The scheme was recommended for approval, subject to a copy of the report and recommendations of the Consulting Engineers on their negotiations with trading concerns regarding trade wastes and of the District Council's decisions thereon being made available to the County Council.

Cannock Rural District

Great Wyrley and Cheslyn Hay Sewerage Contract No. 2: Saredon Road Sewer

This scheme estimated to cost £15,000, provides for the abandonment of the existing dilapidated and inadequate small disposal works at Cheslyn Hay. This work is badly affected by mining subsidence and the scheme provides for its abandonment and in lieu laying a connecting length of sewer to an existing pumping station to pump the sewage to the Cannock Urban District Council's disposal works for treatment. The existing pumping station is to be improved and a standby pump installed. A temporary planning permission for tipping may have some effect on the length of sewer between manholes 58 and 60. Subject to this the scheme was recommended for approval.

Cheadle Rural District

Hazels Cross Sewerage Scheme

This scheme, estimated to cost £4,000, was part of the Hazels Cross and Hazels Sewerage Scheme which the County Council at their meeting on the 29th February did not approve due to lack of evidence showing the need for the scheme. The scheme now submitted deals only with the Hazels Cross area. Additional evidence has been produced which shows that nuisance exists and the only satisfactory way to deal with it and to allow the properties involved to be brought up to present day standards is the provision of a sewer. The scheme was recommended for approval.

Sewer Extension Cellarhead Road, Wetley Rocks

This scheme, estimated to cost £2,370, is to provide sewerage facilities for 8 properties at Wetley Rocks. The proposed sewer will then connect into the existing sewer. Nuisance has arisen due to the discharge of sewage effluents from a number of the properties and the only satisfactory way to deal with this is to provide a sewer to serve all the properties in the area. The scheme was recommended for approval.

Leek Rural District

Endon Sewerage and Sewage Disposal Scheme

This scheme, estimated to cost £172,000, is to provide certain relief sewers and to replace the existing inefficient and very small disposal works at Endon. Flooding has occurred due to the existing sewers being quite unable to deal with the flow and for many years the works themselves have been unable to cope with the ever-increasing amount of sewage being delivered to them. The scheme also envisages the reception of sewage from the neighbouring parish of Longsdon and allowance has been made in the design for this. The scheme was recommended for approval.

Stafford Rural District

Haughton Sewerage and Sewage Disposal Scheme

This scheme, estimated to cost £36,045, towards which a contribution of £1,870 has been promised by owners of land capable of development, is to provide a sewerage and sewage disposal scheme for the village of Haughton. At present the only sizable sewage treatment plant in the village is one which deals with Council houses and with the sewage from two private houses connected thereto. Pollution of ditches is occurring. The Rural District claim that the proposed sewers have been sited in the most economical position to serve not only the existing properties but also probable development when the scheme has been completed, and that care has been taken to avoid any pipes being laid into the main road which is narrow and already contains numerous services. Many existing properties have, however, been left with possible difficulties in making connections to the proposed new sewers since these properties have no legal right to make connections across land which may be in other ownership. This Department also suggested that consideration should be given to sewerage properties in the Jolt Lane and Park Lane districts. It is also considered that the sewer should be extended from further along the Gnosall Road. The scheme was recommended for approval subject to the foregoing comments.

Stone Rural District

Clayton Sewerage and Sewage Disposal Scheme Extension

This scheme, estimated to cost £2,629, is to provide an extension to the existing sewers at Clayton which were laid a year or two ago. Since the main sewers were laid the District Council have been requested by residents to provide the proposed extensions in Foxglove Lane. The scheme was recommended for approval.

Cocknage Sewerage Scheme

This scheme, estimated to cost £2,715, is to provide a foul water sewer for 13 County Council smallholdings on the Cocknage Estate. These will be connected to the Stoke-on-Trent sewerage system. There is no public health nuisance but if satisfactory provision is to be made to deal with bath and sink wastes as well as water closets, provision of a sewer is essential. The scheme was recommended for approval.

Eccleshall Sewerage Scheme, Stafford Road Extension

This scheme, estimated to cost £2,360, is to provide for a sewer extension on the Stafford Road, Eccleshall. This will deal with 12 dwelling houses and one garage and the sewer will connect into the main sewerage system. The existing septic tanks or cess pools are unsatisfactory owing to the nature of the subsoil. The scheme was recommended for approval.

Fulford Sewerage Scheme

This scheme, estimated to cost £36,000, is an extensive sewerage scheme covering a scattered area in the Fulford district of Stone Rural District area. The Rural District claim that the existing three small sewage disposal plants are inadequate and the effluent therefrom is passed to streams which have insufficient dilution and furthermore the area is the gathering ground of the South Staffordshire Waterworks Company. Gross pollution is also being caused in the Black Lake area. The scheme covers the villages of Fulford Mossgate, Crossgate and development in the Black Lake plantation area. The scheme was recommended for approval subject to the County Planning Officer's comments that the Engineer's figure of 205 properties requiring drainage connections should be increased to about 329 as the ultimate foreseeable requirement.

Tutbury Rural District

Extension of Sewer to serve Hadley End, Yoxall

This scheme, estimated to cost £4,704, is to provide a sewer for the 26 properties in the Hadley End area of Yoxall and to connect to the existing sewerage scheme. Nuisance arises from cesspools, septic tanks and pollution is caused in ditches. This Department suggested that the District Council should consider providing a further extension to serve an area to the west of the proposed new sewer where there are some 16 other properties, the experience of this department being that it is far cheaper to carry out a single scheme than to carry it out at different times. The scheme was recommended for approval subject to the foregoing observations.

MINISTRY OF HOUSING AND LOCAL GOVERNMENT—INQUIRIES AND VISITS OF INSPECTIONS

During the year the following Ministry Inquiries were held into proposed schemes of water supply, sewerage and sewage disposal.

The County Health Department was represented by the County Health Inspector who also accompanied the Ministry Inspector on his visits of inspection.

- 14.1.64 Seisdon R.D. Visit of inspection covering the Wombourn Sewage Disposal Works, Planks Lane Siphon Scheme, Bilbrook and Codsall Sewer Extensions and Codsall Sewage Disposal Works.
- 16.1.64. Cheadle R.D. Oakamoor Sewerage and Sewage Disposal Scheme.
- 24.9.64. Cannock R.D. Huntington and Penkridge Sewerage and Sewage Disposal Schemes.
- 24.11.64. Cheadle R.D. Waterhouses Scheme.
- 25.11.64. Stafford R.D. Haughton Sewerage and Sewage Disposal Scheme.

PREVALENCE OF, AND CONTROL OVER, INFECTIOUS DISEASES

The following statistics relate to the notifiable infectious diseases among the home population during the calendar year 1964. On reference to the tables at the end of the Report the numbers and death-rates for each Sanitary District will be found.

SMALLPOX.—No case of smallpox was notified in 1964. The last cases recorded were in 1947 when an outbreak occurred in the south of the County mainly in Bilston.

SCARLET FEVER.—There was a decrease in the incidence of this disease, 309 cases having been notified, compared with 496 in 1963. In the Urban Districts there were 215 cases and in the Rural Districts 94, as against 429 and 67 respectively in the previous year. The case-rates per thousand of the population were:—Urban Districts 0.28, Rural Districts 0.35, with a total County Rate of 0.29, whilst that for England and Wales was 0.42. The corresponding rates for 1963 were 0.56, 0.25, 0.48 and 0.37 respectively.

DIPHTHERIA.—For the third successive year no case of diphtheria was notified in 1964. The last deaths from this disease were two in 1955 when 29 cases were notified.

ENTERIC FEVER.—Four notifications of enteric fever were made during the year compared with seven in 1963. All were of paratyphoid. Two cases occurred in Urban Districts and two in a Rural District.

The 1964 case-rates for the country as a whole, for typhoid and paratyphoid were 0.00 and 0.00 per thousand of the population respectively, the Staffordshire rates being nil and 0.00.

MEASLES.—During the period, 5,045 notifications were made, which indicates an appreciable decrease, for the corresponding figure for 1963 was 16,911. Three thousand eight hundred and ninety-nine cases occurred in Urban and 1,146 in Rural Districts, compared with 12,272 and 4,639 in the previous year. The 1964 case-rates for the County and England and Wales were 4.81 and 6.47 as against 16.36 and 12.78 in 1963.

Two deaths occurred. There were six deaths in 1963.

WHOOPING COUGH.—There was a slight increase in the number of notifications, 742 being made in 1964 as compared with 737 in 1963. In Urban Districts there were 552 as against 464, whilst the corresponding figures for the Rural Districts were 190 and 273. The case-rate for the County was 0.71 and for England and Wales 0.67.

There were three deaths during the year the same as in 1963.

FOOD POISONING.—Ninety-two notifications were made in 1964 compared with 82 in 1963. Fifteen County Districts were affected against 16 last year.

DYSENTERY.—Two hundred and eighty-three notifications were made in 1964 as compared with 470 in 1963, 860 in 1962, and 516 in 1961. Twenty-three of the Sanitary Districts were affected, but in nine instances viz., Brownhills U.D., Coseley U.D., Rowley Regis M.B., Stone U.D., Uttoxeter U.D., Wednesfield U.D., Leek R.D., Stone R.D., and Uttoxeter R.D., single cases only were notified.

Cases notified in other districts were as follows:—

Aldridge U.D. 106, Brierley Hill U.D., 5, Cannock U.D. 2, Darlaston U.D. 4, Kidsgrove U.D. 7, Leek U.D. 15, Lichfield M.B. 5, Newcastle M.B. 2, Rugeley U.D. 3, Stafford M.B. 4, Tamworth M.B. 2, Cheadle R.D. 86, Lichfield R.D. 3, and Newcastle R.D. 30.

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.

No case of acute poliomyelitis was notified as against 3 in 1963. Seven cases of Acute Encephalitis were notified compared with none last year. There were no deaths from the disease.

MENINGOCOCCAL INFECTION.—Eight notifications (6 in five Urban areas and 2 in separate Rural Districts), were made during 1964, compared with 9 in 1963. Four deaths were recorded (2 in Urban and 2 in Rural Districts). In the previous year there were also four deaths of which 3 were in Rural Districts.

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

GASTRITIS, ENTERITIS AND DIARRHOEA.—Nine deaths occurred in Urban Districts and three in Rural Districts in children under one year of age, the death-rates being 0.59 and 0.59 respectively per thousand live births. The figures for 1963 were 9, nil, 0.61 and nil respectively.

INFLUENZA.—In 1964 there were 29 deaths in Urban and 15 in Rural Districts, as compared with 32 and 8 respectively in 1963.

The number of cases of notifiable infectious diseases, with the deaths, in the Administrative County during 1964 are as follows:—

Diseases	Notifications		Deaths	
	Urban	Rural	Urban	Rural
Smallpox	—	—	*	*
Scarlet Fever	215	94	*	*
Diphtheria	—	—	—	—
Enteric Fever	2	2	*	*
Measles	3,899	1,146	1	1
Whooping Cough	552	190	3	—
Puerperal Pyrexia	26	1	*	*
Erysipelas	16	2	*	*
Meningococcal Infection	6	2	2	2
Acute Poliomyelitis (Paralytic)	—	—	}	—
Acute Poliomyelitis (Non-Paralytic)	—	—		
Acute Encephalitis (Infective)	2	1		
Acute Encephalitis (Post Infectious)	3	1		
Pneumonia	128	41	366	129
Dysentery	161	122	*	*
Food Poisoning	72	20	*	*

*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:—

1964	AGE PERIODS	NEW CASES				DEATHS			
						Pulmonary		Non-Pulmonary	
						M.	F.	M.	F.
0—	2	2	—	—	—	—
1—	1	—	1	—	—	—
2—	4	2	—	—	—	—
5—	6	2	—	2	—	—
10—	5	7	3	4	—	—
15—	6	6	1	2	—	—
20—	12	14	3	2	—	—
25—	23	19	5	3	—	—
35—	29	19	1	4	2	—
45—	22	14	2	3	3	—
55—	39	7	4	1	7	1
65—	9	6	1	2	6	2
75 and upwards	4	3	2	1	3	3
Age unknown	—	—	1	—	—	—
Totals	162	101	24	24	21	6
								3	1

During 1964, 27 deaths occurred from pulmonary tuberculosis and 4 from other forms of this disease, the death-rates being 0.03 and 0.00 respectively. The corresponding rates for 1963 were 0.05 and 0.01 respectively.

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

YEAR	DEATH RATE PER 1,000 OF THE POPULATION			
	Phthisis		Other forms of Tuberculosis	
	Urban	Rural	Urban	Rural
1914	0.89	0.54	0.31	0.20
1915	0.94	0.67	0.34	0.29
1916	1.01	0.80	0.40	0.29
1917	1.01	0.74	0.34	0.31
1918	1.03	0.88	0.31	0.28
1919	0.83	0.61	0.22	0.30
1920	0.75	0.56	0.30	0.21
1921	0.80	0.53	0.23	0.21
1922	0.80	0.55	0.24	0.17
1923	0.75	0.58	0.25	0.22
1924	0.73	0.58	0.22	0.20
1925	0.83	0.49	0.22	0.14
1926	0.74	0.50	0.22	0.11
1927	0.73	0.44	0.21	0.22
1928	0.64	0.48	0.14	0.13
1929	0.76	0.54	0.15	0.12
1930	0.72	0.54	0.15	0.13
1931	0.78	0.52	0.17	0.13
1932	0.64	0.42	0.16	0.14
1933	0.72	0.50	0.14	0.08
1934	0.67	0.43	0.11	0.16
1935	0.67	0.35	0.13	0.08
1936	0.53	0.34	0.11	0.08
1937	0.60	0.41	0.13	0.11
1938	0.56	0.29	0.13	0.11
1939	0.52	0.35	0.09	0.11
1940	0.51	0.29	0.11	0.06
1941	0.57	0.33	0.16	0.14
1942	0.52	0.34	0.13	0.10
1943	0.55	0.29	0.11	0.07
1944	0.52	0.25	0.10	0.07
1945	0.56	0.22	0.11	0.09
1946	0.49	0.28	0.08	0.06
1947	0.47	0.28	0.09	0.07
1948	0.51	0.33	0.07	0.05
1949	0.45	0.22	0.06	0.03
1950	0.39	0.20	0.06	0.06
1951	0.37	0.12	0.05	0.04
1952	0.27	0.07	0.04	0.04
1953	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	0.13	0.07	0.01	0.00
1957	0.10	0.01	0.01	0.01
1958	0.09	0.05	0.01	0.01
1959	0.09	0.06	0.01	0.01
1960	0.07	0.04	0.01	0.01
1961	0.05	0.05	0.01	0.00
1962	0.06	0.03	0.00	0.01
1963	0.05	0.04	0.01	0.01
1964	0.03	0.01	0.00	0.01

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	1,029	974	1,232	1,400	1,106	1,194	1,017	1,021	1,129
1932	1933	1934	1935	1936	1937	1938	1939	1940	1941	1942	1943	1944	1945
1,074	1,011	929	825	831	858	789	726	669	788	830	841	798	769
1946	1947	1948	1949	1950	1951	1952	1953	1954	1955	1956	1957	1958	1959
775	813	852	837	807	901	805	958	808	696	623	580	533	455
1960	1961	1962	1963	1964									
415	383	342	321	311									

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:—

(See next page for table)

Year	PRIMARY NOTIFICATIONS			CASE RATE PER 1,000 OF THE POPULATION		
	Respiratory Tuberculosis	Non-Respiratory Tuberculosis	Tuberculosis (all forms)	Respiratory Tuberculosis	Non-Respiratory Tuberculosis	Tuberculosis (all forms)
1918			856			1.37
1919			699			1.04
1920			642			0.92
1921			929			1.29
1922			971			1.37
1923			1,029			1.45
1924			974			1.36
1925			1,232			1.71
1926			1,400			1.93
1927			1,106			1.55
1928			1,194			1.68
1929			1,017			1.43
1930			1,021			1.44
1931			1,129			1.59
1932			1,074			1.50
1933			1,011			1.41
1934			929			1.29
1935			825			1.14
1936			831			1.14
1937			858			1.16
1938			789			1.05
1939			726			0.95
1940			669			0.88
1941			788			1.01
1942			830			1.07
1943			841			1.09
1944			798			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
1957	527	53	580	0.57	0.06	0.63
1958	469	54	533	0.56	0.06	0.62
1959	417	38	455	0.44	0.04	0.48
1960	378	37	415	0.39	0.04	0.43
1961	341	42	383	0.34	0.04	0.39
1962	283	59	342	0.28	0.06	0.34
1963	276	45	321	0.27	0.04	0.31
1964	263	48	311	0.25	0.05	0.30

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		
	M.	F.	Total	M.	F.	Total
8,053	3,712	2,811	6,523	804	726	1,530

The figures given above indicate that in 1964 there was one case of tuberculosis in every 130 persons, or 7.7 per 1,000 of the population.

The table also shows that in 1964 there was one death in approximately every 261 cases.

MASS RADIOGRAPHY

I am grateful to the Directors of the Mass Miniature Radiography Units concerned for providing the information relevant to the county which is given in this section of the Report.

Particulars were given in the 1952 Report regarding the arrangements for mass radiography within the area. Two 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.

One hundred and fifty-eight members of the staff of the Children's Department engaged in the work of Children's Homes received an annual X-ray.

STOKE-ON-TRENT M.R. UNIT

The number of primary X-rays taken during the year was 70,000, an increase of 9,000 compared with 1963. This increase was mostly due to extensive surveys by the mobile unit in the districts coming into the unit's operational area at the re-organisation of the Regional Mass Radiography service in 1963. (Cannock, Lichfield and Tamworth.)

Respiratory Tuberculosis

The number of cases needing treatment or close supervision at clinics was considerably larger in 1964 than in 1963 (133 as against 99). This is a healthy reminder that the ultimate goal of "eradication of tuberculosis" or even of control in an "affluent" society has not yet been reached. The Mass Radiography service contributed 34% of the new notifications in Stoke and 55% in Newcastle.

Pneumoconiosis

There was again a significant fall of newly detected cases of Pneumoconiosis compared with the previous year. (208 cases as against 284). Only 14 patients showed X-ray evidence of Progressive Massive Fibrosis and 8 of these had never been X-rayed before, and may have been suffering from the disease for a long time. The marked decrease of new

cases in coalminers was probably due to the fact that no pithead surveys were held during the year. They are to be resumed in 1966. On the other hand, the number of cases detected in the local pottery industry, which was as extensively surveyed as in 1963, was much lower than in previous years and this favourable trend has now been noticeable since 1958.

Bronchogenic Carcinoma

There were 99 cases detected in 1964, 13 more than in the previous year. The male/female ratio remained at the previously established level of 10:1. Of the 99 cases, 87 were referred by General Practitioners, three attended the unit at their own request because of haemoptysis, and only 9 cases were picked up at routine factory surveys.

Acute and Chronic Respiratory Disease

(Pneumonia, Pleurisy, Bronchitis, Emphysema)

The vast increase of these conditions seen at the M.M.R. centre over the years, does not signify rising prevalence, but is an index of the changing attitudes by General Practitioners who use the unit for routine follow-ups. This time-consuming but important work, for which the 100 m.m. technique is very suitable, relieves chest clinics and hospital X-ray departments from much routine work, which can easier and more cheaply be done by mass radiography.

Cardiac Abnormalities

The large number of acquired cardiac abnormalities follows the pattern of previous years. Only a small proportion were due to post-rheumatic cardiac disease, the majority belonged into the category of hypertensive and arteriosclerotic lesions.

WOLVERHAMPTON MASS RADIOGRAPHY UNIT

During 1964 the mobile unit covered the wider area allotted to it following the closure of the Dudley Unit. The static 100mm. unit continued to concentrate on high risk groups such as general practitioner referrals, contacts, ante-natal patients, tuberculin positive children. etc.

More people were X-rayed than ever before and the rate per thousand was higher than the national average but below that of 1963. Among general practitioner referrals the active tuberculosis rate was 8.8 per thousand and 70% of these had a positive sputum. A final visit was made to High Arcal School following two visits last year due to the notification of two children aged 12 years and 13 years respectively who showed evidence of a tuberculosis infection, but nothing abnormal was found.

The Public Health Laboratory at Stafford examined most of the specimens of sputum sent by patients and 56% of the 114 active cases had sputum which was positive on direct smear or on culture.

Routine tuberculin testing of contacts and other young persons thought to be at risk was carried out each Monday morning by the Wolverhampton Tuberculosis Health Visitors. The tests were read after three days and B.C.G. or X-ray undertaken as indicated.

TUBERCULOSIS HEALTH VISITING

There are three whole-time Tuberculosis Health Visitors in the County area and the total number of visits made by these visitors to tuberculous households was 1,596.

TUBERCULOSIS

As will be seen in a previous table there were 263 notified cases of Pulmonary Tuberculosis during the year.

A total of 961 county contacts were examined at clinics during 1964 of which 22 were found to be tuberculous.

Upon notification of a case of tuberculosis the home circumstances are investigated and all contacts asked to attend for examination. Child contacts are Mantoux tested or in the case of infants Tuberculin Jelly tested and negative reactions are offered B.C.G. inoculation. All contacts except the very young are X-rayed.

Close liaison with the D.R.O. enables the Clinic to get patients into suitable employment according to their clinical condition. A few of the older age groups, especially those disabled by pneumoconiosis and those with persistently positive sputums, are unemployable and form a permanent source of re-infection, but by seeing them fairly frequently at the Clinic and re-examining their contacts when possible infection is kept to a minimum.

Owing to the restricted accommodation at the Clinic it is not possible to carry out any surveys, but there is close co-operation with the Mass Radiography Unit, especially with regard to Schools from which a case of tuberculosis has been notified.

At the Walsall Clinic every endeavour is made to arrange for the examination of contacts of new cases of tuberculosis and, in the case of children, tuberculin skin testing is extensively employed with B.C.G. vaccination of suitable children. The weekly visit of the Mass X-ray Unit to Walsall is utilised for examination of contacts over the age of 12 years. Where tuberculosis is found at post mortem examination and not known during life, arrangements are made for the contacts to be reviewed.

B.C.G. VACCINATION

Routine tuberculin testing followed by B.C.G. vaccination if necessary continued to be offered under the Authority's arrangements for school children from the age of 13 years upwards, as well as for those in approved schools and students at technical and other establishments of further education.

The number in respect of whom consent was received was 10,128 compared with 9,486 in 1963.

However, if advantage were taken of the permission given by the Ministry of Health for children to receive B.C.G. vaccination on entry into secondary schools, it is very probable that the occurrence of epidemics in schools would be almost entirely eliminated.

In order to make this effective it was necessary to start the vaccination year in September, which at the outset involved vaccination of all first and second year children. Implementation of these arrangements resulted in a further 6,324 consents, thus making a total of 16,452.

The average rate of consent (60%) was again disappointingly low and it is clear that urgent consideration must be given to ways and means of improving the situation in order to stimulate interest in this form of vaccination.

Particulars of Vaccinations done during 1964 are as follows:—

Number of children eligible	...	...	...	27,294
Number of consents received	...	...	...	16,452
Acceptance Rate	...	...	...	60%
Tuberculin tested	...	...	...	16,271
Vaccinated	...	...	...	14,398
Positive reactors	...	...	...	1,873
Percentage Positive	...	...	...	11.5%
Referred for X-ray	...	...	...	810

Family contacts of above-named group were also X-rayed as a result of which one confirmed case of active tuberculosis was found.

In addition to the routine B.C.G. programme, seven County Primary Schools and one Junior Training Centre were investigated where children were thought to be at risk as a result of several confirmed cases of tuberculosis in young children.

Figures in respect of work done in this connection concerning children outside the normal approved age group are as follows:—

Number Skin Tested	...	...	...	1,768
Number found positive	...	...	...	166
Number found negative	...	...	...	1,602
Number vaccinated	...	...	...	90

All schools staff and positive reactors were X-rayed with negative results.

Further investigations of vaccination by the multiple puncture method are in progress and it is hoped that the results may produce a great advance in technique.

Contact Scheme

The scheme for vaccination of contacts of persons suffering from tuberculosis was carried out at the Chest Clinics. The returns submitted by the Chest Physicians showed that the number of persons skin tested was 1,418, the number found positive 338, the number found negative 1,068, and the number vaccinated 919.

CANCER

In the following table the deaths from Cancer during 1964, in age and sex groups, in the Urban and Rural Districts of the County, are shown:—

Age Groups	URBAN DISTRICTS			RURAL DISTRICTS			Grand Total
	Male	Female	Total	Male	Female	Total	
0—	—	—	—	—	—	—	—
1—	—	1	1	—	—	—	1
5—	3	1	4	2	2	4	8
15—	6	4	10	1	1	2	12
25—	7	6	13	2	5	7	20
35—	29	42	71	8	10	18	89
45—	104	97	201	33	33	66	267
55—	267	153	420	61	55	116	536
65—	211	172	383	58	51	109	492
75—	124	148	272	74	54	128	400
TOTALS	751	624	1,375	239	211	450	1,825

As will be seen from the preceding table, this year there were 1,825 deaths from Cancer. In 1963 there were 1,729, preceded by 1,738 in 1962. During the period under review this group of deaths accounted for 18.2 per cent of the total civilian deaths, as compared with 16.7 per cent last year, when the total number of deaths from all causes was more by 306. 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, in fact the figure for this year is the same at 130.

In considering the mortality from Cancer, one must bear in mind that the general mortality from all causes under the age of 45 has, over a long period, become steadily less. This means, therefore, that in every population there exists an increasing number of persons, of an age more susceptible to cancer than are younger persons, the statement being supported by the fact that whilst in 1920 48.6 per cent of the deaths from all causes were of persons under 45, the figure has gradually decreased in the subsequent years to 11.1 per cent in 1964.

LUNG CANCER

The number of deaths under this heading (429) were 23.5% of the total number of deaths from Cancer during the year. In 1963 the percentage was 23.9 when the number of deaths from this cause was 413 and the total deaths from cancer 1,729 as previously stated.

VENEREAL DISEASE

During the year, 1,303 Staffordshire patients attended for diagnosis and treatment for the first time, compared with 1,237 in 1963 and the following detailed table indicates where the treatment was obtained. It will be seen that in 1964, 1,042 of the persons who attended were found not to be infected and the corresponding figure in the previous year was 981. The actual cases in 1963 and 1964 were 256 and 261 respectively.

TREATMENT CENTRE	Syphilis	Gonorrhoea	Other Conditions	Total New Cases
Birmingham General Hospital	6	48	120	174
Burton-on-Trent General Hospital	1	5	14	20
Dudley Guest Hospital	4	35	137	176
Stafford (Staffordshire General Infirmary) ..	6	24	88	118
Stoke-on-Trent (Wellesley Street)	4	17	163	184
Walsall (Manor Hospital)	10	34	220	264
Wolverhampton Royal Hospital	3	64	300	367
Totals	34	227	1,042	1,303

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

Year	Syphilis	Soft Chancre	Gonorrhoea	Total Cases	Non-Venereal
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	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
1957	43	—	163	206	700
1958	43	—	148	191	650
1959	37	—	142	179	797
1960	28	—	121	149	960
1961	32	—	155	187	920
1962	29	—	194	223	978
1963	43	—	213	256	981
1964	34	—	227	261	1,042

BLIND PERSONS

The following table gives particulars of Registered Blind and Partially Sighted Persons registered during 1964. Of the 241 cases, registered, 162 were recommended for treatment of one sort or another, and 116 of these actually received such treatment, the difference being accounted for mainly owing to refusals to have treatment due to their age.

	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	13	6	—	60
(b) Treatment (medical, surgical or optical)	64	15	—	83
(ii) Number of cases at (i) (b) above which on follow-up action have received treatment	43	10	—	63

In some cases more than one cause of blindness is given on the B.D.8 and only the primary cause has been used in those cases in preparing the Return. A list is given below of the main causes of blindness regarding the 143 cases in the "Others" column of part (i) in the preceding table.

Retinopathy	7	Maculopathy	5
Retinitis Pigmentosa	3	Atrophy due to Albinism	1
Choroidal Retinitis	1	Uveitis	2
Diebetic Retinopathy	13	Keratitis	4
Optic Atrophy	14	Vascular Sclerosis	1
Choroidal Degeneration	1	Macular Degeneration	46
Hemianopia	1	Corneal Ulceration	1
Iritis	2	Retinal Degeneration	2
Retro Bulbas Neuritis	1	Macular Dystrophy	3
High Myopia	16	Retinal Thrombosis	1
Amblyopia	3	Vascular Retinopathy	2
Albinism	3	Occlusion of central	
Pemphigus	1	Retinal Artery	1
Choroidal Sclerosis	1	Pigmented Maculacloboma	1
Cerebral Vascular	1	Arthritis	1
Corneal Scarring	2	Congenital Nystagmus	2
		TOTAL	143

Particulars of Registered Blind and Partially Sighted Persons who were recommended treatment during 1964 but did not receive such treatment

AGE	CAUSE OF DISABILITY			
	Cataract	Glaucoma	Retrolental Fibroplasia	Others
61—65	1	—	—	—
66—70	1	2	—	6
71—75	4	2	—	7
76—80	6	1	—	5
81—85	7	—	—	1
86—90	2	—	—	1

The Home Teacher of the County Welfare Department 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.

HEALTH EDUCATION

The Health Education Officer took up his duties in the County in July following the successful completion of the course at the Institute of Education, University of London, for the Diploma in Content and Method of Health Education. The Section had been without a Health Education Officer since April, 1963, and consequently had regressed rather than progressed in the advancement of a Health Education Service.

Three Health Education Lecturers continued to give talks and hold discussion groups during the year but the service was further depleted by the resignation of one member.

The Infant Welfare Centres re-introduced to the best advantage, poster programme displays, and every two months a new theme was introduced and appropriate posters were sent to all Centres. The Health Visitors were encouraged to supplement the posters with a small display on the same theme. A list of talks was prepared to suit all members of the community with the intention of distributing this list to all organisations as soon as the full complement of staff have been appointed.

In addition to the talks given on the danger of smoking, the County Council agreed to assist the Brierley Hill Urban District Council in a publicity campaign on this subject which will take place in 1965. As a forerunner to the campaign, a survey was implemented in December to ascertain the smoking habits of adults. The questionnaire was designed by the Health Education Officer in conjunction with the Area Medical Officer, and local Health Visitors completed them during the course of their normal duties. It is hoped that the result will provide valuable information and provide a lead as to the approach which must be taken to persuade the smoker to discontinue the habit.

The Ministry of Health from time to time ask Local Authorities to make public the dangers of venereal disease. Very few talks have been given to adults on this subject although it is now included in the new programme. Posters have not been distributed as it is considered that they would have very little effect, if any at all. There appears to be a higher incidence of venereal disease among young people and although this is no doubt due to a combination of factors, there is no doubt that the most effective means of bringing the incidence down is for them to understand the consequences of this disease in a broader concept of human relationships. A series of talks entitled "Learning to Live" is being carried out in schools and youth clubs, and this field of Health Education will be widened considerably in the future.

The activities of Health Education in schools has been reported fully in the Principal School Medical Officer's report.

One of the major events in Health Education during the year has been the publication of the Cohen report on Health Education, and it is satisfactory to note that the County Council is in agreement largely with its recommendations.

MEDICAL EXAMINATIONS FOR SUPERANNUATION PURPOSES

During the year 1st January, 1964, to 31st December, 1964, 1,266 candidates completed medical questionnaires. Of these 181 were medically examined as well. Full medical examinations were carried out in 1,706 other cases and 1,360 people underwent chest X-ray examination at local Mass Radiography Units.

The total number of cases dealt with was 2,972 and the total number of medical examinations was 1,887. Of these latter 1,205 were carried out by Assistant County Medical Officers in County Clinics and 682 were carried out by General Practitioners.

Of the total cases, 2,796 were found fit for inclusion within the Superannuation and Sickness Pay Schemes of this Authority, 37 were rejected, 54 were accepted as fit for the post but not for inclusion within the Superannuation and Sickness Pay Schemes, 16 were accepted as registered disabled persons and 69 withdrew from the posts for which they were being medically examined.

Seven hundred and seventy-three candidates were examined for the School Meals Service, and 140 men were examined under the Firemen's Pension Scheme Order. In 38 cases the candidates withdrew their applications before investigations were complete.

In June, 1964, a new system was introduced for non-superannuable employees in the School Meals Service, as many of these were temporary employees whose services were required urgently. The system included the completion of a freedom from infection certificate and a chest X-ray examination. This arrangement speeded up the appointments of these employees.

Between 1st June and 31st December, 1964, 606 Freedom from Infection forms were completed. Of these 341 were completed by General Practitioners and 255 were completed at County Clinics by Assistant County Medical Officers, 580 candidates underwent chest X-ray examinations and 86 candidates either left the service before investigations were complete or were given forms in error.

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. A major revision took place in 1956, details of which were given in the Report for that year.

CARE OF MOTHERS AND YOUNG CHILDREN

Infant Welfare Centres

At the end of the year there were 126 Welfare Centres in operation of which 38 are purpose built, 17 adapted and 71 occupied on a sessional basis.

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

No. of sessions	...	...	...	...	6,821
No. of children who attended during the year and who were born in:—					
1964	...	...	...	...	15,672
1963	...	...	...	...	9,360
1959-1962	...	...	...	...	6,653
TOTAL	...	...	...	...	31,685

No. of attendances during the year made by children who at the date of attendance were:

Under 1 year	...	...	...	182,465
1 but under 2	...	...	...	69,390
2 but under 5	...	...	...	55,363
TOTAL	...	...	...	307,218

PROVISION OF NEW INFANT WELFARE CENTRES

During the year clinics were opened at:—

Haregate Street, Leek	}	New purpose built clinics.
Bilston Street, Darlaston		
Group Practice Centre, Sankeys Corner, Chase Terrace	}	Rented accommodation
Memorial Institute, Rugeley Road, Burntwood		

As a result of the opening of the clinics at Darlaston and Sankeys Corner, Chase Terrace, the functions held in the following premises were transferred to these new centres:—

Jane Mill Institute, Darlaston
Youth Centre, Sankeys Corner

ANTE-NATAL AND POST-NATAL CLINICS

2,081 sessions were held during the year as follows:—

Medical Officers	...	...	...	1,121
Midwives	...	...	...	833
General Practitioners employed on a sessional basis	...	...	...	75
Hospital Medical Staff	...	...	...	52

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	...	5,609
Total number of attendances	...	25,945

Seventy-two attended the Post-Natal Clinics during the year, 81 attendances being made.

Where treatment is required, the patient is referred other than for unsatisfactory dental conditions to her own doctor. Dental treatment can be given under the County Council Scheme and the patients are offered the facilities locally available.

MATERNITY OUTFITS

The number issued during the year was 8,452 as against 7,952 for 1957, 7,592 for 1958, 7,945 for 1959, 8,793 for 1960, 8,761 for 1961, 9,400 for 1962 and 9,055 for 1963.

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 1964 27 cases of Puerperal Pyrexia were notified in the County Area.

Of the cases dealt with during the period under review, 20 were cases in which confinements had taken place in hospital, and seven were confined and treated at home.

Causes related to pregnancy

Cystitis	...	...	...	...	...	1
Engorged Breasts	...	...	...	...	...	3
Retained Membranes	...	...	...	...	...	5
Streptococcal Infection	...	...	...	...	...	3
Urinary Infection	...	...	...	...	...	2
Uterine Infection	...	...	...	...	...	3
						<hr/> 17

Causes not directly related to Pregnancy

Influenza	...	...	...	...	...	6
Leukaemia	...	...	...	...	...	1
Pneumonia	...	...	...	...	...	1
Unsatisfactory Environment	...	...	...	...	...	1
Unknown	...	...	...	...	...	1
						<hr/> 10

HEARING TESTING OF YOUNG CHILDREN

As mentioned in previous reports, the Health Committee have 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. Early ascertainment is extremely valuable in the case of deaf children because they can be given appropriate training before they reach school age and the disability combated at a stage when auditory discrimination is acute.

It is intended that children on reaching the age of nine months or as seen 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.

In September, 1962 all Health Visitors were reminded of the importance of the hearing testing of young children, particularly those "at risk".

The following table gives details of the number of children tested in 1964:—

No. of children receiving a screening test:—					
at Clinic	...	...	...	...	2,677
at Home	...	...	...	...	842
Total	...	...	...	...	3,519
No. of children who failed the test					104

Of the 104 children who failed the test 49 passed when tested again, 4 were referred to their own doctor, 11 for further specialist examination, 1 was wearing a hearing aid, 1 was a premature baby still under observation and 38 were to be retested at a later date.

OPHTHALMIC TREATMENT

During the year 157 children were referred from the Infant Welfare Centres for ophthalmic examination of which 103 were new cases.

Glasses were prescribed for 59 of these children (including 40 of the new cases). They were mostly cases of squint and were kept under observation.

ARTIFICIAL SUNLIGHT

During the year 170 cases were referred for artificial sunlight treatment.

DENTAL TREATMENT

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

	<i>Examined</i>	<i>Needing Treatment</i>	<i>Treated</i>	<i>Made Dentally Fit</i>
Expectant and Nursing mothers ...	452	422	417	253*
Children under 5 ...	1,045	805	722	457

*Patients treated and not made dentally fit requested emergency treatment only.

Expectant and nursing mothers made a total of 1,205 attendances for treatment compared with 1,132 attendances in 1963 and children under 5 a total of 1,592 attendances during the year compared with 1,190 in 1963.

The equivalent of 19.4 whole-time dental officers and 4 dental auxiliaries employed by the County Council at the end of 1964 devoted approximately 5% of their time to maternity and child welfare dentistry. Dental auxiliaries are not allowed to treat adult patients but they are making a very worthwhile contribution to the treatment of the pre-school children.

The kinds of treatment provided are as shown in the following table:—

	Extractions	General Anaesthetics	Fillings	Scalings or Sealings and Gum Treatment	Silver Nitrate Treatment	Dressings	Radiographs	Dentures Provided	
								Complete	Partial
Expectant and Nursing Mothers	904	116	501	103	8	57	23	84	58
Children under five years of age	1072	364	785	57	169	74	13	3	—

A smaller number of mothers, 417, were treated than in the previous year, 480, but more were made dentally fit, 253 compared with 177 in 1963. More extractions under general anaesthesia were performed whilst the number of fillings, 501, is only very slightly below the number, 504, for the previous year. More complete dentures, 84 compared to 71 in 1963, and fewer partial dentures, 58, as compared to 84, were supplied. There is little doubt that since charges were abolished under the National Health Service for expectant and nursing mothers in 1962, the number of such patients attending local authority clinics is declining.

There has been an increase in number of children under 5 years of age treated and in all kinds of treatment provided. The increase from 438 fillings in 1963 to 785 is commendable although one would have liked to see the numbers of fillings greater than the number of deciduous teeth extracted, 1,072. All too often mothers bring their young children to the dental surgery for the first time when they are having toothache, when, unfortunately, it is usually too late to be able to do other than extract. Great efforts in the dental health education field are needed to teach desirable habits of diet, teeth cleaning and regular visits to the dentist from an early age so that the children will have a good chance of preserving a sound and efficient dentition.

The part-time dental hygienist has been responsible for some of the scalings and polishings given to mothers and to some of the children. Some children particularly prone to rapid dental decay have been given courses of topical stannous fluoride to help increase the resistance of the enamel.

Attention is drawn to the fact that 3 complete upper dentures were provided for 3 different children aged between 2 years 6 months and 3 years. These patients required removal of all their upper teeth due to extremely rapid decay causing pain and sepsis and the dental officer

concerned felt it worth trying the insertion of dentures to aid mastication and speech, as well as restoring appearance. These were made in the County Dental Laboratory, and in 2 cases the dentures were tolerated remarkably well and only moderately well in the third case. Further experience is needed before being able to say if this is a practical line of treatment in such cases.

Staff shortage limits the amount of treatment which can be given to young children and mothers. Effective education of the public in methods of preventing dental disease together with water fluoridation would bring about a very great improvement in dental health in children after some years.

DENTAL LABORATORY

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

(a) DENTURE WORK

<i>Type of Denture</i>	<i>No. Completed</i>
Full Upper Dentures	48
Full Lower Dentures	41
Partial Upper Dentures	231
Partial Lower Dentures	29
Relines and remakes	26
Repairs to Dentures	31
Total	406

(b) ORTHODONTICS

<i>Appliances</i>	<i>No. Completed</i>
Regular Appliances (removable)	363
Study Models	701
Total	1,064

(c) SUNDRIES

<i>Nature of work</i>	<i>No. Completed</i>
Obturator	1
Crowns (29 acrylic, 3 gold)	32
Inlays	5
Special Trays	100
Ear moulds	7
Demonstration Models, sets	1
Splints	4
Total	150

It was not possible to fill, until the end of the year, the vacancy for a Dental Technician caused by a sudden death in July. The staff of the Laboratory are to be congratulated on the amount of work produced in these circumstances. In order to dispatch work to dental surgeons in a reasonable time after receipt, it was found necessary to send some mechanical work to a commercial dental laboratory as a temporary measure and the small number of such dentures and appliances does not appear in the tables above.

The number of dentures constructed in the laboratory shows a small increase, 406, as compared with 387 in 1963, there being a rise in the number of full dentures constructed and a fall in the number of partial dentures.

There has been a marked increase in the number of orthodontic appliances, 363, and study models, 701, compared with 262 and 305 respectively in 1963. This reflects the greater amount of orthodontic treatment being undertaken, largely as a result of the appointment of the Consultant in Children's Dentistry.

An increase is also shown in the number of crowns, inlays, special trays and ear moulds constructed during the year.

DISTRIBUTION OF WELFARE FOODS

The County Council in their capacity as Local Health Authority are 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.

At the end of the year Welfare Foods were being distributed from 110 clinics and 45 other centres, e.g. shops, private houses, etc., as well as from the Welfare Foods Van which covers the Leek area.

EXTRA NOURISHMENT

During the financial year 1964/65 the sales and free issues amounted to £68,093 as compared with £58,667 during the previous financial year. Of this figure, the amount apportionable to free issues was very small, in fact almost negligible.

The actual issues of Welfare Foods during 1964 were as follows:—

National Dried Milk	...	...	...	155,502 tins
Cod Liver Oil	...	...	...	17,182 bottles
Vitamin A & D Tablets	...	...	...	21,465 packets
Orange Juice	...	...	...	209,317 bottles

NOTIFICATION OF BIRTHS

The following are particulars of the live and stillbirths notified during 1964.

Number of live births	...	...	...	20,430
Number of stillbirths	...	...	...	342
Notified by midwives	...	...	...	19,489
Notified by parents and doctors	...	...	...	512

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 1964:—

Children with mothers in residential work ...	2
Children with mothers in lodgings ...	3
Children with mothers at home ...	135
Children with parents married ...	16
Children with mothers in Homes ...	8
Children with parents co-habiting ...	8
Children with foster parents ...	6
Children in Local Authority Homes ...	12
Children in Voluntary Children's Homes ...	10
Children adopted through the Association ...	80
Children adopted privately ...	15
Children stillborn ...	4
Miscarriage ...	5
Died ...	6
Transferred to other workers ...	11
TOTAL ...	321

Eighty-one girls were sent to Diocesan Homes and Homes of other religious denominations during the year and paid their own fee for accommodation.

Forty-seven of the cases concerned married women who gave birth to illegitimate children. 16 of whom were reconciled to their husbands after their babies had been placed with adopters. Five women were divorced, 15 legally separated and 11 living apart from their husbands.

The ages of the mothers ranged between 14 and 38 years, there being 96 under the age of 17 years. The ages of the putative fathers were between 15 and 52 years.

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

In 1964 thirty-eight cases were admitted nine 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 1964:—

(1) Number of Premature Live Births notified:—

(a) In hospital ...	1,041
(b) At home or Nursing Home ...	326

TOTAL ... **1,367**

(2) Number of Premature Stillbirths notified:—

(a) In hospital ...	173
(b) At home or a Nursing Home ...	32

TOTAL ... **205**

Weight at birth	PREMATURE LIVE BIRTHS													PREMATURE STILLBIRTHS	
	Born in hospital				Born at home or in a nursing home				Transferred to hospital on or before 28th day						
	Died				Died				Died						
	Total births (1)	within 24 hours of birth (2)	in 1 and under 7 days (3)	in 7 and under 28 days (4)	Total births (5)	within 24 hours of birth (6)	in 1 and under 7 days (7)	in 7 and under 28 days (8)	Total births (9)	within 24 hours of birth (10)	in 1 and under 7 days (11)	in 7 and under 28 days (12)	Born in hospital (13)		Born at home or in a nursing home (14)
1 2 lb. 3 oz. or less ..	37	28	4	1	6	6	—	—	3	—	1	1	34	9	
2 Over 2 lb. 3 oz. up to and including 3 lb. 4 oz. ..	71	20	11	2	1	—	—	—	12	1	3	—	47	7	
3 Over 3 lb. 4 oz. up to and including 4 lb. 6 oz. ..	200	25	11	3	13	1	—	—	29	2	—	—	51	7	
4 Over 4 lb. 6 oz. up to and including 4 lb. 15 oz. ..	261	9	7	2	34	1	1	—	15	—	—	1	21	6	
5 Over 4 lb. 15 oz. up to and including 5 lb. 8 oz. ..	472	11	9	2	186	2	2	—	27	—	—	—	20	3	
6 Total ..	1041	93	42	10	240	10	3	—	86	3	4	2	173	32	

1 = 1,000g, or less, 2 = 1,001—1,500g, 3 = 1,501—2,000g, 4 = 2,001—2,250g, 5 = 2,251—2,500g.

NURSERIES AND CHILD MINDER'S REGULATIONS ACT, 1948

At the end of the year 54 premises were registered and 2 persons were registered as child minders.

DAY NURSERIES

The following table gives particulars of the Day Nurseries in operation in the Administrative County during 1964:—

	No. of Approved Places		No. of Children on Register at end of the year		Average Daily Attendance	
	0-2	2-5	0-2	2-5	0-2	2-5
BILSTON, Prouds Lane	15	25	10	28	10.9	15.6
NEWCASTLE (Liverpool Road, Cross Heath) ..	15	25	16	28	9.3	18.4
STAFFORD (Riverside, South Walls)	25	25	11	13	15.6	18.1
WEDNESFIELD (Lichfield Road)	20	30	14	34	15.2	21.9
WILLENHALL (Pinson Road)	25	25	24	26	16.3	23.5

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 details of the average daily attendance of children at this Nursery during the year:—

0—2 years	...	...	...	...	6.4
2—5 years	...	...	...	...	15.4

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:—

Number of premises registered at end of year	2
Number of applications for registration granted	—
Number of Homes given up	—
Number of Homes with more than two beds	2
Number of Homes solely for midwifery and maternity cases	1

As a result of the Conduct of Nursing Home Regulations 1963, Homes previously exempted from registration are required to be registered. The two Homes previously exempted were in December awaiting registration pending completion of the necessary fire precautions required.

MATERNAL MORTALITY

Statistics provided by the Registrar General show that there were six deaths under the heading Pregnancy, Childbirth, Abortion. Four of these deaths occurred in hospital and two at home.

The following table gives similar information since 1950, viz:—

Year	No. of Deaths	Deaths Occurred	
		In Hospital	At Home
1950 ..	13	11	2
1951 ..	9	8	1
1952 ..	13	10	3
1953 ..	15	13	2
1954 ..	8	8	—
1955 ..	7	6	1
1956 ..	16	15	1
1957 ..	8	7	1
1958 ..	8	7	1
1959 ..	7	5	2
1960 ..	8	7	1
1961 ..	4	4	—
1962 ..	11	9	2
1963 ..	7	4	3

INFANTILE MORTALITY

There were 398 infant deaths during the year the death rate per 1,000 total live births being 20. Deaths from congenital malformations numbered 96.

During 1964, 27 deaths were reported by the midwives, having occurred whilst they were in attendance. The causes of these deaths were as follows:—

Feebleness and prematurity	...	...	...	6
Deformities	...	...	...	4
Pneumonia	...	...	...	3
Torn Tentorium	...	...	...	3
Asphyxiated	...	...	...	2
Congenital Heart	...	...	...	2
Others (Anoxia, Bronchiolitis, Congenital Malformation, Exomphalus, Foetal Abnormalities, Multiple Abnormalities, Multiple Congenital Defects)	...	...	...	7

FAMILY PLANNING

The Family Planning Association maintains four clinics in the Administrative County and four in the Area of adjoining Authorities in respect of which they receive assistance. Details of the sessions are as follows:—

BILSTON, Centre Health Clinic, Wellington Road, Bilston,
 Tuesday weekly 2.0—3.30 p.m. and 6.30—7.30 p.m.
 Oral Contraceptive sessions—10.0 a.m. by appointment only
 Closed Bank Holiday weeks and first fortnight in August.

BURTON-ON-TRENT, The Clinic, Cross Street, Burton-on-Trent.
Mondays weekly 6.0—8.0 p.m.
Closed Bank Holidays and all August.

CANNOCK, The Clinic, Church Street, Cannock.
1st and 3rd Thursday in month 2.0—4.0 p.m.
2nd and 4th Thursday in month 4.30—6.30 p.m.
Closed all August.

DUDLEY, Holly Hall Clinic, Stourbridge Road, Dudley.
Thursdays 6.30—8.0 p.m.

LEEK, The Clinic, Salisbury Street, Leek.
Wednesdays weekly 7.0—8.0 p.m.
1.45—2.45 p.m. on first Wednesday afternoon in month.
Closed in August and Christmas if Clinic that week.

STAFFORD, Infant Welfare Centre, North Walls, Stafford.
Thursdays weekly 2.0—4.0 p.m.
1st Thursday 12.0 noon—1.0 p.m.
1st and 3rd Thursdays 6.0—7.30 p.m.
Closed Bank Holiday weeks and all August.

STOKE-ON-TRENT, 12 Wellesley Street, Hanley, Stoke-on-Trent.
Tuesday 2.0—3.0 p.m. and 6.0—7.30 p.m.
Wednesday 2.0—3.0 p.m.
Thursday 10.30—11.30 a.m.
Closed one week at Easter and Whitsuntide, two weeks at Christmas and the whole of August.

TETTENHALL & DISTRICT, Infant Welfare Centre, Upper Green, Tettenhall.
Sessions on Monday afternoons and evenings.

WALSALL, Ambulance Station, Hatherton Road, Walsall.
Wednesdays 2.0—3.45 p.m.
Thursdays weekly 7.0—8.30 p.m.

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. As the result of the Children Act, 1964, secretarial assistance is provided through the County Children's Department.

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 387 cases were considered and a summary of the action taken is given below. Good results have been obtained in many cases.

Referred to Health Visitor	89
„ „ Probation Officer	9
„ „ N.S.P.C.C.	10
„ „ Social Welfare Officer	11
„ „ Child Care Officer	2
„ „ Mental Welfare Officer	1
„ „ Education Welfare Officer	6
„ „ Local Housing Authority for rehousing ...	7
„ „ National Assistance Board (not otherwise referred)	1
Retained under Joint Observation (2 Officers) ...	84
Retained under Joint Observation (3 or more Officers) ...	146
No action taken (problems solved)	21
	<hr/>
	387

During the year 100 were removed from the register of which 78 were satisfactorily concluded and 22 left the district. Of the total cases, 129 were in receipt of National Assistance in addition to being referred to one or more officers.

PREVENTION OF BREAK-UP OF FAMILIES

In the Annual Report for 1959 mention was made of the employment of a Social Worker amongst problem families in two southern areas of the County, which was in the nature of a pilot scheme and which continued to prove successful.

A review of the scheme was made, however, in the light of Circular No. 17/59 (Ministry of Housing and Local Government) and Circular No. 4/59 (Ministry of Health) relating to homeless families, and further consideration was given to the preventive field which remains to be covered, especially in the way of advice and assistance in the homes of the type of family referred to in the Circulars.

As mentioned above, one part of the County was covered for the purpose by a Social Worker, whilst Health Visitors in other areas have endeavoured to deal specially with any problem families brought to notice. The general experience was, however, that shortage of this type of staff had not made it possible generally for the necessary intensive visiting to be carried out and that, although the position regarding recruitment of health visiting staff might change in the future, in view of the many demands on the time of these highly trained Nurses it was not likely that Health Visitors alone could answer the problems.

With this in mind, therefore, the Health Committee decided that the Welfare Officers carrying out duties under Section 28 of the National Health Service Act in respect of the prevention of illness, care and after-care should combine these duties with those of the Social Worker, who would also carry out the combined duties. In this way the whole of the Administrative County would be covered for this purpose, and so any family in difficulty and with a likelihood of eviction would, it is hoped, be brought to notice and all possible steps be taken to prevent the threatened eviction.

It should also be mentioned that the practical assistance given by specially selected home helps to this type of family has proved very worthwhile and the service will continue to be provided whenever the need is apparent.

During the year five mothers with their children were admitted to Special Homes for convalescence as well as training in mothercraft, the average period of stay being $4\frac{1}{2}$ weeks.

The short term results have again proved satisfactory and, although it is not possible generally to assess the long term value of these arrangements, they have undoubtedly been of lasting benefit in some cases.

CHILD GUIDANCE

The Child Guidance Service has continued during the year but the non-availability of more qualified staff has again retarded any progress which may otherwise have been made. The services of the psychiatrist in the South of the County have not been obtainable and the clinics at Wombourn and Kingswinford have been limited to the seeing of very occasional urgent cases. Clinic sessions have been held as usual at Newcastle, Stafford, Lichfield and Coseley.

It is hoped that 1965 will see more staff becoming available and the plans for further extension of the Service can then come into fruition.

HOME NURSING SERVICE

At the 31st December, 1964, there were 101 whole-time general nurses, together with 73 part-time general nurses. 38 being also domiciliary midwives and 21 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 1964 six male nurses were in the employ of the County Council, being centred in Kidsgrove, Newcastle-under-Lyme, Willenhall, Tipton, Wednesbury and Cannock. These are included in the figure of 101 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.

During the year 342,228 home visits were made by the nurses, the number of cases attended being 12,990. Of this figure 1,984 acute and 2,312 chronic patients would have had to be admitted to hospital had a Home Service not been available.

The supervision of the nursing staff is undertaken by five area nursing officers and four deputy area nursing officers.

Since the 5th July, 1948, there has been a considerable increase in the number of nursing staff employed in the Home Nursing Service. The numbers have risen since that date from 61 whole-time nurses and 71 who combined general nursing with other duties to an establishment of 112 and 62 respectively. Of the 112 whole-time nurses the establishment provides for six male nurses.

The number of children who were nursed in their own homes has fallen from 6.3% to 5.1% of all new cases. This is the result of a general fall in the number suffering from almost all types of illness.

There has also been a fall in the number of patients between the ages of 5—15 but there has been an increase in the numbers in the other age groups, producing a small overall increase in the number of cases treated.

Study of the actual number of treatments given reveals an increase in all but two categories, namely, injections of antibiotics and washouts, douches and catheterisation. In the case of the former the decrease is presumably due to the increasing use of oral antibiotics.

Condition	Age 0-4	Age 5-15	Age 16-64	65 and over	Total
Tuberculosis	3	1	84	15	103
Other infectious diseases	4	11	10	4	29
Diseases of the blood	3	—	236	374	613
Diseases of the heart	—	—	147	497	644
Cerebral Haemorrhage and thrombosis	—	1	143	724	868
Other circulatory diseases	1	2	107	180	290
Respiratory diseases other than tuberculosis	134	24	244	386	788
Diseases of ear or nose and throat	94	58	79	21	252
Eye conditions	8	1	10	23	42
Dental conditions	11	3	7	2	23
Gynaecological conditions	1	1	142	257	401
Genito-urinary	5	5	74	174	258
Diseases of bones, joints and muscles	3	4	129	265	401
Diseases of digestive system	42	25	313	273	653
Diabetes	4	2	103	175	284
Parasitic conditions (worms, lice, etc.)	2	2	7	7	18
New growths	2	4	349	393	748
Senility	—	—	8	740	748
Diseases of skin and subcutaneous tissues	21	13	131	202	367
Mental and nervous conditions	2	4	74	77	157
Injuries	39	49	193	176	457
Burns and scalds	46	22	71	59	198
Sepsis	24	16	128	86	254
Post operative	43	70	866	384	1,363
Complication of pregnancy or puerperium	9	4	209	6	228
Other conditions	48	29	273	254	604
Totals	549	351	4,137	5,754	10,791

Type of Case	Total number of treatments given in all cases—old and new—during the year ended 31st December, 1964.
General Nursing	135,833
Dressings	85,912
Observation of Patient	10,609
Enemas	4,065
Changing of Pessaries	1,162
Washouts, douches and catheterisation ..	8,231
Preparation for diagnostic investigations ..	561
Injections—antibiotics	13,989
Other injections	87,262
Other treatments	7,612

MIDWIVES' SERVICE

The following are particulars of the midwives practising at the end of 1964:—

Number of midwives employed by the Authority	... 188
Number of midwives in private practice (including midwives employed in Nursing Homes):	
Domiciliary	... .. 5
Nursing Homes	... .. 3
Number of midwives employed by Hospital Management Committees	... .. 83

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

Deliveries attended by Domiciliary Midwives during the year:—

Number of domiciliary confinements attended by midwives under N.H.S. arrangements			Number of cases delivered in hospital and other institutions but discharged and attended by domiciliary midwives before the 10th day
Doctor not booked	Doctor booked	Total	
309	7,784	8,093	7,987

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 1,607 visits and interviews were undertaken for midwifery matters.

In accordance with the Rules of the Central Midwives Board 30 midwives attended a residential post-graduate course arranged by the Royal College of Midwives.

Twenty-one of the County Council's midwives are approved by the Central Midwives Board as Teacher Midwives. At the present time the County Council is participating in three Schemes for Second Period

Training, two in South Staffordshire, one with the Birmingham Regional Hospital Board and the other with the Herefordshire Hospital Management Committee; the third is in the Stafford area with the Stafford Hospital Management Committee. During the year 19 pupils completed district training in the area as part of their Part II midwifery training course. The number in training at the end of the year was five. Particulars of deliveries by midwives for the last twenty-five years are given in the following table:—

Year	*No. of deliveries by Midwives	Medical Aid Notices	Still-births	Death of Mother	Death of Child	Contact with Infection	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	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	1,118	168	1	43	67	14	815
1956	6,044	1,162	159	2	50	38	13	743
1957	6,102	1,113	157	—	48	60	17	840
1958	6,381	1,323	158	2	28	60	17	882
1959	6,273	1,274	132	1	22	57	7	1,022
1960	7,804	1,640	130	1	24	50	20	584†
1961	7,349	1,485	105	—	34	46	6	—
1962	7,416	1,294	113	1	34	39	4	—
1963	8,166	1,185	104	—	30	43	10	—
1964	8,093	1,102	84	—	27	38	3	—

*Including midwifery cases in private maternity homes.

†To 30.6.60. Not required after 1.7.60.

The percentage of doctors' calls to the number of births attended by midwives was 13.6.

The following figures show the causes which occasioned the sending for medical assistance.

PREGNANCY:

Blood Pressure Abnormal	...	...	...	19
Disproportion	...	...	...	1
Excessive sickness	...	...	...	1
Haemorrhage Ante-partum	...	...	...	7
Threatened Abortion	.	...	...	5
Toxaemia	...	...	...	4
Unsatisfactory condition and general health	...	...	...	54
Total	...	...	...	91

LABOUR:

Abnormal Presentation	4
Abortion	68
Delayed or difficult Labour	5
Eclampsia	149
Episiotomy	21
Haemorrhage Ante-partum	34
Haemorrhage Intra-partum	2
Haemorrhage Post-partum	56
Inertia	12
Lacerated Perineum	297
Placenta Praevia	1
Premature Labour	51
Prolapse of Cord	6
Retained Placenta and Membranes	28
Unsatisfactory Condition	45
Total	<u>779</u>

LYING-IN:

Abdominal Swelling and Tenderness	3
Convulsions	1
Excessive or prolonged bleeding	3
High Temperature	40
Inflamed and painful leg	9
Unsatisfactory Condition	26
Unusual swelling of breasts	1
Total	<u>83</u>

CHILD:

Asphyxia	19
Convulsions	2
Deformities	9
Feebleness and Prematurity	4
Haemorrhage (Bowel)	1
Haemorrhage (Navel)	2
Hare lip and cleft palate	2
Inflamed and Discharging Eyes	35
Jaundice	10
Rash	2
Septic Spots	1
Spina Bifida	2
Unsatisfactory Condition	54
Vomiting	6
Total	<u>149</u>
Grand Total	<u>1,102</u>

Details of the number of notifications of sending for medical help during the financial year 1964-65 are given below:—

Number of notifications of sending for medical aid	1,101
Number of claims received	1*
Percentage of claims received to notifications ...	0.09
Total amount paid to doctors during the year ...	£2 12 6

*The reason for the small number of claims is that in the large majority of cases the patients are registered with the General Practitioner for general maternity care, so that any fees are the responsibility of the Local Executive Council.

OPHTHALMIA NEONATORUM

The number of cases of Ophthalmia Neonatorum notified during the year was seven. In four instances the confinements were domiciliary and the babies were treated at home, the condition being slight in each case.

The remaining three cases were born in hospital—the condition in one instance (Gonococcal Ophthalmia) being severe. In the other two cases the condition was slight.

Vision was unimpaired in all cases.

WATERY, INFLAMED AND DISCHARGING EYES

The number of cases notified by the midwives during the year was 35 and three of these were notified by the General Practitioner concerned as cases of Ophthalmia Neonatorum. With three exceptions they were treated at home. Of the 35 cases 31 were not severe.

STILLBIRTHS

Number of Stillbirths registered	344
Reported by midwives	84
<i>Causes of those reported by midwives:—</i>	
Albuminuria	1
Ante-partum Haemorrhage	7
Asphyxia	3
Cord Prolapse	1
Cord round neck	2
Deformities	8
Hydramnios	1
Hydrocephalus	3
Hyperemesis Gravidarum	1
Impacted Shoulders	1
Inattention at Birth	3
Injury during birth	1
Intra Uterine Death	4
Maceration	12
Placental Insufficiency	11
Post Maturity	1
Precipitate Labour	1
Premature	6
Rhesus Incompatibility	1

Rhesus Negative	...	...	...	...	...	1
Spina Bifida	...	...	...	...	...	1
Torn Tentorium	...	...	...	...	...	1
Toxaemia	...	...	...	...	...	5
Unhealthy Placenta	...	...	...	...	...	1
Unsatisfactory Condition of Mother	...	...	...	...	...	1
Cause not known	...	...	...	...	...	6

ANALGESIA

At the end of 1964, 180 midwives employed by the County Council were qualified to administer analgesics.

At the 31st December, 1964, all County Council Midwives were equipped with the necessary apparatus; the number of cases which were dealt with was 2,122 when nurses were acting without a doctor and 320 when doctor was present at the time of delivery of child.

In addition midwives administered Pethidine in 3,930 cases when doctor was not present and in 597 cases when doctor was present. One hundred and eighteen midwives also used Trilene analgesia in 2,842 cases when doctor was not present and in 455 cases when doctor was present.

MIDWIVES OFF DUTY

Every fourth week midwives have a weekend off duty beginning at 9 o'clock on the Friday evening and resuming at 9 o'clock on the Monday morning.

A night rota system has not been introduced as experience from a pilot scheme showed that such an arrangement was unacceptable chiefly because the midwives prefer to deliver their own cases. Although there were no transport difficulties related to the pilot scheme, these difficulties did arise when a similar scheme was proposed in another part of the County.

On the remaining three weeks of the month they have two nights off each week finishing duty at 9 p.m. on the first night, having all the following day and night off and resuming duty at 9 o'clock the next morning.

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 27; Urban Districts 26, Rural Districts 1.

The case-rate for Puerperal Pyrexia per thousand total births (live and Still) for Staffordshire was 1.31, as compared with 6.79 for England and Wales.

The figure for Staffordshire has always been extraordinarily low and it is possible that there may have been incomplete notification of all cases of puerperal pyrexia, the above 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 40 occasions. These were specially investigated and it was found that in 21 instances the unsatisfactory conditions were due to abnormalities which could be said to arise directly from childbirth.

HEALTH VISITING

At the 31st December, 1964, the number of Health Visitors employed was 112 full time and 15 part time. In addition there were 21 nurses who held the combined post of District Nurse/Midwife/Health Visitor. In those areas which were fully staffed in accordance with the previous establishment the position has been reviewed and the establishment increased to implement the recommendations laid down in the report of the Working Party on Health Visiting. As a result the establishment of Health Visitors is now 200.

With regard to Health Visitors Training during the year, there was a great increase in interest shown in this aspect as reflected in the increasing number of candidates making application for training. Accordingly, authority was given to increase the number of students sponsored by the authority from 5 to 15 per annum and during the year 12 candidates were accepted for training.

The three students who were already in training were successful in obtaining the Health Visitors Certificate.

The following table gives particulars of the visits paid by this staff during 1964 to expectant mothers and young children:-

To Expectant Mothers

First visits	...	...	...	...	...	4,210
Total visits	...	...	...	...	...	6,558

To infants under one year

First visits	...	...	...	...	...	26,045
Total visits	...	...	...	...	...	84,615

Total visits to children aged 1 year and under						
2 years	...	...	...	...	...	40,593

Total visits to children aged 2 years but under						
5 years	...	...	...	...	...	66,883

One hundred and eighty-five instances of insanitary conditions were reported by the Health Visitors to Local Medical Officers of Health during the period.

ARRANGEMENTS FOR HEALTH VISITORS TO WORK WITH PARTICULAR GENERAL PRACTITIONERS OR GROUPS OF PRACTITIONERS

The scheme whereby four Health Visitors are working with general practitioners has continued. The benefits of this scheme tend to vary in accordance with the desire of the parties concerned to work in this way. In two cases where the scheme came into being as a result of the wishes of both the doctor and the Health Visitor, it has been very successful, and the others in which both parties were asked to participate it does not appear to have been particularly successful.

ARRANGEMENTS FOR HEALTH VISITORS TO FOLLOW UP CASES DISCHARGED FROM HOSPITAL

The work of the Liaison Health Visitor for the care of Mothers and Babies has continued. She undertakes investigations in conjunction with the District Health Visitors before the discharge of premature babies from the Wolverhampton Hospitals to the Wednesbury, Brierley Hill and Cannock areas. In addition she informs the midwives of the impending early discharge of mothers. This work has been most helpful but is not entirely satisfactory due to the fact that lack of premature baby cots have obliged the hospitals to discharge the babies even when the reports on home conditions have not been satisfactory.

The Medical Officer to the Stafford Area Health Committee has continued to hold the appointment of Honorary Specialist in Social Medicine and to be assisted by a County Social Worker.

In addition to the work carried out amongst patients in the Staffordshire General Infirmary, the service has been extended to Groundslow and Standon Hall Hospitals.

With regard to patients in the Staffordshire General Infirmary home investigations were carried out in 1,527 cases and in 29% of these cases Local Authority Services were provided when the patient returned home.

TOTAL NUMBER OF CASES FROM STAFFORDSHIRE ADMITTED TO STAFFORDSHIRE GENERAL INFIRMARY

<i>Home Investigations</i> (decided by Hospital Social Medical Officer) ... 1,527	Stafford M.B. ...	589
	Cannock District ...	419
	Rugeley District ...	202
	Stafford R.D. ...	168
	Stone U.D. ...	74
	Stone R.D. ...	63
	Uttoxeter District ...	12

NUMBER FOR WHOM LOCAL AUTHORITY SERVICES PROVIDED

District Nurse ...	223
Psychiatric Social Worker ...	62
Home Help ...	58
Health Visitor ...	42
Social Worker ...	21
District Nurse & Home Help ...	8
District Nurse & Social Worker ...	7
School Health (Convalescence) ...	4
Health Visitor and Social Worker ...	3
Local M.O.H. ...	3
County Welfare Officer ...	2
Health Visitor & N.S.P.C.C. ...	1
Housing Manager ...	1
Children's Officer ...	1
Home Help & Health Visitor ...	1

437—29% of the home investigations

HOSPITAL PATIENTS—CARE AND AFTER CARE—1st JANUARY TO 31st DECEMBER, 1964

GROUNDSTLOW HOSPITAL

Home Investigations ... 161

Local Authority Services Provided

District Nurse ... 3

Home Help ... 8

District Nurse & Social
Worker ... 1

12—7% of the home investigations

STANDON HALL HOSPITAL

Home Investigations ... 26

Local Authority Services Provided

Home Help ... 5

Health Visitor & Social
Worker ... 1

Social Worker ... 1

Home Help & Social
Worker ... 2

9—35% of the home investigations

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 AGAINST SMALLPOX

Early in 1963, the County Council agreed to amend their proposals under the National Health Service Act 1946, to provide for routine vaccination of infants under five at Infant Welfare Centres, and also for the re-vaccination of children of school age at schools and clinics.

In the following table the figures for vaccinations and re-vaccinations for 1964 are given, whilst those for 1963 are shown in brackets.

Ages at date of vaccination	Under 1	1	2 to 4	5-14	15 or over	Total
Number vaccinated	1,092 (1,420)	3,010 (1,053)	1,226 (461)	477* (2,526)	402† (920)	6,207 (6,380)
Number Re-Vaccinated ..	— (13)	5 (15)	26 (48)	228 (562)	651 (1,526)	910 (2,164)

*Vaccination not now offered as a routine after the child has started school.

†County Council no longer pay for records of vaccination from general practitioners for persons aged 16 years and over.

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 1964 the number immunised against diphtheria was as follows:

Under 5	...	...	...	...	15,797
5-14 years	...	...	...	...	4,962

Reinforcing doses were given in 23,046 cases.

During 1963 the numbers were 10,137, 3,285 and 13,127 respectively.

No notification of diphtheria was received during 1964. There have been only six confirmed cases since 1956 and it is interesting to compare figures for past years. As recently as 1943 there were 1,141 confirmed cases in the Administrative County and the previous two years also showed over 1,000 cases. For comparative purposes the totals of confirmed cases of diphtheria, together with deaths from the disease, since 1943 are given below:—

<i>Year</i>		<i>No. of Cases</i>		<i>No. of Deaths</i>
1943	...	1,141	...	68
1944	...	639	...	40
1945	...	553	...	16
1946	...	283	...	11
1947	...	178	...	13
1948	...	125	...	10
1949	...	85	...	8
1950	...	46	...	3
1951	...	118	...	8
1952	...	47	...	2
1953	...	73	...	6
1954	...	16	...	—
1955	...	29	...	2
1956	...	5	...	—
1957	...	—	...	—
1958	...	—	...	—
1959	...	2	...	—
1960	...	1	...	—
1961	...	3	...	—
1962	...	—	...	—
1963	...	—	...	—
1964	...	—	...	—

VACCINATION AGAINST POLIOMYELITIS

During the year 107,920 doses of poliomyelitis vaccine were received (2,900 Salk and 105,020 Oral) making a total of 1,684,666 doses received since the inception of the Vaccination Scheme in 1956.

Particulars of vaccinations done during 1964 are as follows:—

*Initial Vaccination
(Two injections of Salk
or three doses of Oral)*

Children born in 1964	...	...	...	...	1,980
Children born in 1963	...	...	...	...	7,445
Children born in 1962	...	...	...	...	2,620
Children born in 1961	...	...	...	...	852
Children born 1943-60	...	...	...	...	2,665
Young Persons born 1933-42	...	...	...	...	684
Others	...	...	...	...	618
Total	...	...	...	...	16,864

No. of Persons who received Reinforcing Doses

No. of persons who received a third (reinforcing) dose (either by injection or orally) during 1964	2,224
No. of children between 5 and 12 years who received a fourth (reinforcing) dose (either by injection or orally) during 1964	...	...	...	...	6,506

WHOOPIING 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 1964 and 7,785 children were immunised initially, and reinforcing doses given in 2,128 cases, by the staff at Infant Welfare Centres. A further 6,579 were immunised initially and 1,665 reinforcing doses given by general practitioners.

TETANUS INOCULATION

Particulars of inoculations against tetanus for 1964 (the vaccine being used either singly or in combination with other antigens) are as follows:—

Age	INITIAL			REINFORCING		
	0—4	5—14	TOTAL	0—4	5—14	TOTAL
	14,352	10,672	25,024	3,338	9,044	12,382

COUNTY AMBULANCE SERVICE

STATIONS

During the year the following Ambulance Stations were in operation:

24-hour Stations

Aldridge
Brierley Hill
Cannock
Darlaston
Leek
*Lichfield
*Newcastle
*Stafford
*Tipton
Tettenhall
Uttoxeter

Sub-Stations

Biddulph
Cheadle
Kidsgrove
Rowley Regis
Rugeley
Stone
Tamworth

* Radio Control Stations.

No new Stations were erected during the year but sites were explored for a new Station at Rugeley, Stafford and the Darlaston/Willenhall/Wednesfield area. The latter to replace the Darlaston Station. Both Stations, which commenced in temporary premises, are proving to be inadequate for the increasing needs of the Service apart from the necessity to provide modern accommodation for the administration, personnel and vehicles. The erection of a new Station for the Tettenhall area was authorised and building will commence in 1965.

VEHICLES

During the year fourteen Bedford/Lomas vehicles replaced vehicles which had been in service for some years. The policy of the Council to replace vehicles every five years ensures that a good standard in vehicles is maintained.

The maintenance of the vehicles was continued by direct labour as before.

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, 1964:—

STATION	Hours Open	PERSONNEL	VEHICLES		AMBULANCES		SITTING CARS	
			Ambs.	Cars	Mileage	Patients	Mileage	Patients
Aldridge	24	26	4	5	78,603	8,211	88,258	14,235
Biddulph	14	6	1	2	16,047	1,819	35,644	7,378
Brierley Hill ..	24	26	4	4	55,767	7,476	91,595	14,983
Cannock	24	29	4	4	135,966	15,154	99,637	15,897
Cheadle	16	17	2	5	45,240	4,857	88,679	15,076
Darlaston	24	32	4	6	97,957	16,857	117,925	27,924
Kidsgrove	8	4	1	1	20,886	4,325	19,083	5,526
Leek	24	25	3	4	65,071	7,107	92,050	14,394
Lichfield	24	25	3	5	67,023	8,034	108,856	14,541
Newcastle	24	32	5	4	75,050	12,214	83,540	16,609
Rowley Regis ..	16	11	2	2	39,661	6,895	47,075	7,840
Rugeley	8	4	1	1	29,352	3,933	24,866	3,636
Stafford	24	31	5	4	83,510	10,110	83,936	10,645
Stone	8	4	1	2	22,895	2,852	40,967	5,423
Tamworth	8	4	1	1	14,643	4,688	23,522	2,572
Tettenhall	24	9	2	1	26,643	3,847	20,261	3,203
Tipton	24	33	4	6	74,503	11,431	91,249	18,119
Uttoxeter	24	23	3	3	57,050	5,031	73,700	6,354
TOTALS	—	341	50	60	1,005,867	134,841	1,230,863	204,355

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

Maternity	...	...	...	...	6,904
Illness	...	...	...	...	321,860
Accidents	...	...	...	...	8,853
Infectious	...	...	...	...	676
Mental	...	...	...	...	903

The following is a comparison of the number of Stations, personnel, vehicles, patients carried and mileage at the 31st December, 1964, with the number at 31st December, 1963:—

			31.12.63	31.12.64
24-hour Stations	...	...	11	11
Sub Stations	...	...	7	7
Ambulances	...	...	50	50
Sitting Cars	...	...	58	60
Personnel	...	...	321	341
Patients carried	...	...	339,583	339,196
Mileage	...	...	2,192,153	2,236,730
Average miles per patient carried			6.45	6.59

AGENCY SERVICE

The following shows the mileage run and patients carried by the Hospital Car Service in the Stafford, Newcastle and Lichfield Areas:—

Month		Stafford		Newcastle		Lichfield		
		Mileage	Patients carried	Mileage	Patients carried	Mileage	Patients carried	
January	2,361	58	110	1	925	30
February	1,932	22	120	1	1,032	26
March	1,771	28	—	—	1,265	37
April	1,761	44	—	—	880	20
May	1,774	25	—	—	769	21
June	1,246	23	—	—	834	22
July	1,482	31	170	1	846	26
August	852	10	—	—	216	6
September	2,467	58	—	—	743	25
October	2,321	54	—	—	1,295	52
November	2,267	51	—	—	500	22
December	1,241	42	—	—	475	19
			21,475	446	400	3	9,780	306

PREVENTION OF ILLNESS, CARE AND AFTER-CARE

The following are particulars of the work undertaken during 1964 by the ten Social Workers/Welfare Officers and Assistants.

	<i>Free</i>	<i>Partial Payment by patients</i>	<i>Paid in full by patients</i>	<i>Total</i>
(1) Number of patients supplied with extra nourishment†	321	2	—	323
(2) Number of patients supplied with clothing† ...	370	1	—	371
(3) Number of patients supplied with bedding and furniture† ...	244	—	—	244
(4) Number of patients supplied with convalescent home treatment ...	47	34	7	†88
(5) Number of patients supplied with appliances* ...	673	—	—	673
(6) Number of visits and interviews with patients at home ...	—	—	—	9,623
(7) Number of patients visited in hospital or sanatoria ...	—	—	—	832
(8) Number of patients seen at Office or Clinic ...	—	—	—	1,105
(9) Housing				
(a) No. of cases recommended	—	—	—	90
(b) No. of cases re-housed...	—	—	—	45

* 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, St. John Ambulance Brigade and other voluntary associations, National Assistance Board.

‡ This total includes five cases of problem families sent to Crowley House, Birmingham and Brentwood Recuperative Centre, Marple, Cheshire, Centres for the guidance of Mother in Home Management and Child Care.

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 19 applications for the facility were received. In 15 instances full travelling expenses were allowed.

In the remaining four instances it was found the financial circumstances were such that three were allowed part expenses and one 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 approved by the Health Committee for the visitation of old people and here again the Welfare Officers/Social Workers visit the old people and advise and assist wherever necessary. As mentioned previously, the latter have been classified in five categories as follows:—

- (1) Appropriately provided for as regards accommodation, money and domestic assistance or care from relatives; needing no, or only 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.

During the year, 2,037 visits were paid to the homes of old people, and as will be realised in some cases two or more old people were living together in one house. Some old people were visited more than once during the year. Of these homes visited 463 were to cases falling in Category 1, 313 in Category 2, 621 in Category 3, 568 in Category 4 and 280 in Category 5.

The actual number of homes visited was 1,481 and 859 cases were of a social nature, 246 cases were referred to County Council agencies, i.e., for domestic assistance, extra nourishment, nursing equipment, to County Welfare Officers, etc., and 376 referred to outside bodies—National Assistance Board, Voluntary Associations, Red Cross, W.V.S., etc.

NURSING COMFORTS

As explained in the Annual Report for 1950, an arrangement was entered into with the British Red Cross Society and the St. John Ambulance Brigade, whereby in return for a contribution from the County Council to these Associations, they undertook to provide the majority of the articles of equipment required under the Nursing Comforts Scheme and most of the Depots and staff required to man them.

When the scheme commenced the British Red Cross Society maintained eleven depots and the St. John Ambulance Brigade eight. At the present time there are sixty-nine nursing comforts depots, fifty-three manned by British Red Cross Society personnel (excluding Depot Headquarters), and sixteen by St. John Ambulance Brigade Staff. Sixty-three of the depots are in the homes of the voluntary helpers of the Societies or in premises owned or rented by the latter and six are held at the County Council premises, five at Infant Welfare Centres and one at an Ambulance Station.

Many kinds of nursing comforts equipment are provided on loan under the scheme, but in every case of loan a note is required by the staff of the depot concerned either from the family doctor or district nurse. Liaison between the Health Department and the depots is maintained by the Social Worker/Welfare Officer who is responsible for transfer of much of the larger items of equipment and assisting patients generally to obtain their requirements.

Each depot carries a certain amount of "basic" equipment, such as air rings, bed pans, feeding cups, urinals, rubber sheets, etc., but in addition, may have additional larger items, such as commodes, mattresses, wheel chairs, etc. Special beds and Hoyer and Zimmer hoists for paraplegic cases which enable helpless patients to be lifted easily by their relatives, are also available. Each hoist costs some £60, and every case is carefully investigated by a Nursing Officer and Social Worker before provision is agreed.

As regards the financial aspect of the scheme, for the first year, 1950, it was agreed that a contribution of £250 should be made to each Organisation to cover the cost of equipment, rents, etc., and in the following year the amount of contribution was increased to £400 to each of the Societies.

The demand for the service has developed over the years, and expansion has been such that the contributions to the Societies for 1964/65 were £4,000 for the British Red Cross Society and £822 for the St. John Ambulance Brigade.

Quarterly statements of expenditure are provided by both Societies and, on occasions, a check of equipment at the depots is undertaken by staff of the Health Department.

There is no doubt that the Societies are performing a worthwhile and economic service for the County Council, whose expenditure would be considerably more if the Authority undertook to maintain its own depots, (which are open principally in the evenings for the convenience of householders), pay personnel to run them, etc.

CHIROPODY SERVICE

At the 31st December, 1964, there were four whole-time chiropodists and eighteen part-time chiropodists employed by the County Council. Part-time chiropodists were working a total of 72 sessions a week, the equivalent of 7.2 whole-time staff in addition to the four whole-time staff. The establishment for 1964-65 was twelve whole-time chiropodists. One whole-time chiropodist resigned and left on the 31st May, 1964, to take up a post elsewhere and one part-time chiropodist left the service on the 7th July, 1964. Three whole-time and seven part-time chiropodists joined the staff during 1964, to bring the total number employed at the end of the year to twenty-two.

The establishment of a post of Chief Chiropodist was approved by the Health Committee at their meeting on the 10th October, 1964, and an appointment has since been made.

Two of the three trainee chiropodists chosen to qualify through the In-Service Training Scheme, commenced their three-year qualifying courses at recognised schools of training in the autumn of 1964. The third trainee has obtained a place at Manchester Foot Hospital for the course commencing in the autumn of 1965.

Because of the difficulties arising as a result of pressure on the Ambulance Service and the uncertainty of the Voluntary Car Service, authority for the general use of taxis throughout the County to convey handicapped persons to and from chiropody clinics was granted by the Health Committee, but could not be put into immediate practice because of the financial position of the Service.

At 31st December, 1964, treatment had been authorised for 7,393 adult patients since the inception of the Service in 1960. One thousand nine hundred and thirty-three adult patients were registered during 1964. 16,991 clinic treatments were given and 8,126 domiciliary visits were made.

In addition to the number of adult patients registered for treatment, 667 school children had been registered at 31st December, 1964. This was an increase of 407 during the year and a total of 1,704 treatments were given in this period.

The following defects were found amongst children during 1964:—

Warts	...	...	...	...	...	4
Verrucae	...	...	...	...	...	318
Athletes Foot	...	...	...	...	...	12
Corns	...	...	...	...	...	37
Painful Skin	...	...	...	...	...	2
Ingrowing Toenails	...	...	...	...	...	3
Hallux Valgus	...	...	...	...	...	5
Callosities	...	...	...	...	...	13
Drop. Met. Heads	...	...	...	...	...	1
Pes Cavus	...	...	...	...	...	1
Overlapping Toes	...	...	...	...	...	2
Onyryphoris	...	...	...	...	...	1
Pes Planus	...	...	...	...	...	2
Valgoid Ankles	...	...	...	...	...	1

Sessions for the treatment of school children only were started at Leek, Kidsgrove, Biddulph, Audley and Lower Gornal on a weekly basis. The chiropodist in the Leek Area gave special attention to this work and the incidence of verrucae was greatly reduced. In co-operation with school nurses, this chiropodist also attended at school inspections to carry out foot examinations. This procedure is shortly to be extended to the Biddulph and Kidsgrove areas.

At 31st December, 1964, chiropody treatment was being provided at the following clinics:—

Aldridge	Kidsgrove	Shelfield
Audley	Kingswinford	Short Heath
Barton-u-Needwood	Leek, Salisbury St.	Stafford, Rising Brook
Biddulph	Leek, Haregate St.	Stafford, North Walls
Bilston	Lichfield	Stone
Blackheath	Longnor	Streetly
Brewood	Lower Gornal	Tamworth
Brierley Hill	Madeley	Tettenhall
Brownhills	Newcastle	Tipton, Central Clinic
Cannock	Old Hill	Tipton, Birch St. Clinic
Chadsmoor	Pelsall	Tutbury
Chase Terrace	Penkridge	Uttoxeter
Codsall	Pheasey	Wednesbury, Mesty
Coseley	Quarry Bank	Croft Clinic
Darlaston	Rolleston	Wednesbury Kings Hill
Eccleshall	Rugeley	Wetley Rocks
Gnosall	Sedgley	Wombourn

In addition to these centres, patients were visited in Alstonfield and chiropody sessions were held at two private surgeries—one in Stafford and the other in Stone.

New clinics were opened at Chase Terrace and Haregate Street, Leek and clinics re-opened at Darlaston, Brewood, Codsall, Gnosall and Wetley Rocks in addition to increased sessions planned at existing clinics.

Progress was made in the treatment of school children wherever the staff position allowed and it is hoped that, as more qualified chiropodists become available, school children's sessions will be brought into operation throughout the County.

The overall picture of the Chiropody Service during 1964, was one of steady expansion and demand for treatment. The number of chiropodists entering the Service increased due to many previously unqualified chiropodists being accepted on the State Register in accordance with the Professions Supplementary to Medicine Act, 1960, but some appointments were turned down because the salary scale was considered to be too low, or the question of housing too difficult.

SUPPLY OF INCONTINENCE PADS

For the past three years incontinence pads have been available to the District Nurses for their patients. Following a request by the Ministry of Health it was decided by the Health Committee that these pads should be made available to patients who were not being attended by the District Nurse, if a request were made to the Area Medical Officer by the patient's general practitioner. During 1964, 129,100 pads were supplied to cases of all types within the County of Stafford.

REGISTER OF CHILDREN "AT RISK" AND SUFFERING FROM CONGENITAL DEFECTS

In 1963 notification by Midwives and Health Visitors of all cases who were "At Risk" was instituted. By this term is meant any adverse factor either mental, physical or environmental which might affect the child. These children are kept under observation and reports made at six monthly intervals until the child is felt to be no longer at risk or is transferred to the care of the School Health Service.

At the request of the Ministry of Health, special reports have been made on all children "at risk" on account of congenital defects. Details of these cases are reported to the Registrar General monthly. During 1964, 212 such cases were reported.

PREVENTION OF HOME ACCIDENTS

As stated in the 1956 Report, the functions relating to home safety have been delegated to Area Health Committees. Voluntary Home Safety Organisations have been set up in various districts.

Throughout the year posters have been displayed in appropriate places including clinics, and leaflets have been distributed from time to time.

Talks have been given in schools throughout the County, and special Home Safety Books issued. A large number of fire guards have been issued on loan to old persons.

Personal advice was given by Social Workers and Nursing and Domestic Help Staff, this staff being requested to report any dangers they may observe during their home visits without making this in any way the prime function or interfering with their other duties.

ADMISSION OF CHRONIC SICK TO HOSPITAL

During the year the number of cases referred by general practitioners to Area Medical Officers was 1,011, the object being to achieve the best means of using the beds available for the treatment of the chronic sick.

Of the total referred 694 were admitted to chronic sick hospital accommodation, seven to Mental Hospitals, nineteen to Part III Accommodation and 24 to General Hospitals. In 405 cases one or more of the County Council's Services were of help to the patients pending admission.

In 267 cases, therefore, the patients were cared for at home, the County Council's Services being of assistance in 183 instances, viz.:—

Nursing	...	...	...	...	...	65
Domestic Help	...	...	...	...	...	48
Social Welfare	...	...	...	...	...	3
Nursing and Domestic Help	...	...	...	...	...	60
Nursing and Social Welfare	...	...	...	...	...	1
Domestic Help and Social Welfare	...	...	...	...	...	3
Nursing, Domestic Help and Social Welfare	...	...	...	...	...	3

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, 1,257 Domestic Helps were employed compared with 1,255 at the end of the previous year.

During the year 6,186 cases were attended compared with 5,689 in 1963.

The number of Domestic Help Organisers at the 31st December, 1964, was fourteen, the whole-time equivalent being 13 3/10ths.

The 6,186 cases attended during the year were classified as follows:—

Aged 65 or over on first visit in 1964 ... 4,994

Aged under 65 on first visit in 1964:—

Chronic sick and tuberculous ... 343

Mentally disordered ... 31

Maternity ... 487

Others ... 331

NIGHT HELPS

Mention was made in the 1959 Report of the scheme of night helps (or night sitters or watchers) which assists 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 is also intended to give families opportunities of taking annual holidays in cases where there are aged parents who cannot temporarily be removed to a Home, etc.

During the year 23 Night Helps were employed.

NEIGHBOURLY HELP SERVICE

Particulars were given in the Annual Report for 1957 of this scheme. During the year under review 99 helpers have been engaged.

MENTAL HEALTH SERVICE

ADMINISTRATION

The Mental Health Sub-Committee (of the Health Committee) deals with the functions of the County Council relating to the Mental Health Service, the recommendations of the Sub-Committee being subject to the approval of the Health Committee and the County Council.

The Mental Health Section of the County Health Department administers both the mental health and child guidance services under the medical direction of the Principal Medical Officer for Mental Health (qualifications M.R.C.S.(Eng.), L.R.C.P.(Lond.)). The chief administrative officer is the County Mental Welfare Officer (D.P.A.).

At the end of the year under review the field staff was as follows:—

- (a) *Mental Health*: 17 Mental Welfare Officers (seven qualified by length of service as defined in the Younghusband Report).

The duties of the Mental Welfare Assistants have now been combined with those of the general Welfare Assistants.

- (b) *Child Guidance*: Three full-time Psychiatric Social Workers (one qualified and two unqualified) and two part-time (six sessions per week qualified and three sessions per week unqualified).

In addition there were four Casework Supervisors (qualified Psychiatric Social Workers) each in charge of one of the Mental Health Centres covering the areas into which the County is divided for mental health purposes. The Casework Supervisors undertake some field work—particularly with cases of special difficulty—and supervise the general casework within their respective areas. They are also responsible for the day-to-day management and administration of the Centres, seeking to promote and integrate the mental health and child guidance work within their area.

TRAINING CENTRE STAFF

(a) Supervisors: 11 (seven with the N.A.M.H. Diploma and one holding the Recognition Certificate issued by the National Joint Council for Mental Health). This number includes two Supervisors already appointed to Centres expected to open during 1965.

(b) Instructors (at Adult Centres): 19 including deputies (none with the N.A.M.H. Diploma).

(c) Assistant Supervisors (at Junior Centres): 32 including deputies (eight with the N.A.M.H. Diploma). There were two vacancies at 31st December, 1964.

Teaching Staff Establishment at the Individual Centres:

	<i>No. on Roll</i>	<i>Staff Establishment</i>
BILSTON JUNIOR	68	Supervisor, 6 Assistants, Nursery Assistant
CANNOCK JUNIOR TRAINING CENTRE	66	Supervisor, 7 Assistants, Nursery Assistant
CANNOCK ADULT ANNEXE	20	
LEEK JUNIOR	34	Supervisor, 3 Assistants
LICHFIELD MIXED	55	Supervisor, Deputy, 4 Assistants
NEWCASTLE JUNIOR	61	*Supervisor, Deputy, 5 Assistants, Nursery Assistant
ROWLEY REGIS JUNIOR	71	Supervisor, Deputy, 7 Assistants, Part-time Instructor
STAFFORD MIXED	42	Supervisor, 3 Assistants
AUDNAM ADULT	68	Supervisor, Deputy, 5 Instructors
NEWCASTLE ADULT	67	*Supervisor, Deputy, 5 Instructors, Part-time Instructor
WILLENHALL ADULT	69	Supervisor, Deputy, 5 Instructors, 2 Part-time Instructors
HOME TEACHERS	28	(15 covered by the Home Teacher in the north of the County where there is no Adult Training Centre within easy travelling distance, plus 13 juniors taught by Education Department teaching staff.)

*The Supervisor at Newcastle administers both Junior and Adult Departments.

There are no out-county persons attending Staffordshire Training Centres.

The total number on roll in the above table is 649. In addition, at the end of 1964 many Staffordshire Mentally subnormal adults and children were attending Training Centres of other local authorities by special arrangement. The numbers involved are shown in the following table.

<i>Local Authority</i>	<i>Training Centre</i>	<i>Adults</i>	<i>Juniors</i>
Wolverhampton C.B.	Oxley	15	—
„	Oxley Baby Unit	—	1
„	Waterloo Road	—	7
Burton-on-Trent C.B.	Anglesey Road	—	5
Smethwick C.B.	Albert Bradford	5	4
Stoke-on-Trent C.B.	Fenton	—	1
„	Shelton	29	—
		49	18
TOTAL		...	67

The total number of Staffordshire children and adults receiving training is therefore 716—an increase of 83 over the previous year's figure. There remain, however, still small waiting lists at most of the Junior Centres, and some further building for juniors is included in the ten-year building programme, plus two larger Centres for the Bilston and Lichfield areas to replace existing Centres using old buildings. Plans for building more Adult Centres are also well advanced and two new Centres (at Stafford and Leek) should open during 1965.

The increase this year in the numbers of persons receiving training is mainly due to the opening of the new Junior Training Centre at Cannock, and an increased intake of children at the Leek Junior Training Centre which is now functioning at full capacity. The Committee also decided to keep open for training purposes the old Community Hall at Cannock as an annexe to the new Centre. This annexe caters for twenty to thirty of the adults who attended the old Mixed Training Centre which used the Community Hall. The Cannock Centre therefore remains a "Mixed" Centre pending the building of an Adult Centre in the area.

The number of children on the waiting list for training was 30 at the end of the year, and the adult waiting list was 28 although this does not by any means represent the full number of adults within the community who will eventually be provided with places.

The annual holidays for the Training Centre children and adults at Tan-y-Bryn were again most successful. In all, 489 mentally handicapped persons from Training Centres had one week's holiday during the summer months. These were accompanied by 102 members of the Training Centre staff who worked with the staff of the Home to give their charges an enjoyable holiday. In addition, two parties of unaccompanied mentally handicapped adults (58 in all) and one party of children attending child guidance clinics for treatment (27) were accommodated at the Home during the summer. All children under 16 years of age are accom-

modated free of charge, while each adult is required to contribute towards the board and lodging an amount based on personal income and outgoings.

During the year several improvements were made to facilities provided at Tan-y-Bryn, notably the setting out of a playground together with swings, see-saw, slide, revolving platform and "Jungle Jim" which have been much enjoyed by the residents accommodated at the Home from time to time.

The Staffordshire Association for Mental Welfare which arranged the training centre holidays before Tan-y-Bryn was provided by the County Council has continued to support the work of the training centres and hostels through its local voluntary committees.

Over £2,150 was raised by these committees during the year and was used to bring extra happiness to the children in many ways. Annual outings, visits to the theatre, summer holidays and Christmas parties are typical occasions when the voluntary committees are able to help with personal service and additional funds. Many useful items of equipment have been supplied from voluntary sources, either out of funds raised by voluntary committees or as gifts from private firms and other bodies. The voluntary committees also serve as a link between the training centre or hostel and the local community—a vital necessity in view of the ignorance and prejudice towards mental disorder which regrettably still exists.

The growing provision of hostels for the mentally disordered is adding to the need for voluntary service, and there remains much work for the Staffordshire Association for Mental Welfare to do. The Association is continuing to widen its scope and is engaged in recruiting more local voluntary committees some of which will function on a regional basis serving all mental health establishments, including psychiatric hospitals, if required, in a given area of the County.

COURSES ATTENDED BY TRAINING CENTRE STAFF

The Supervisors of the Leek and Stafford Adult Training Centres successfully completed the N.A.M.H. Diploma Course in July, 1964. They were placed at other Centres in the County pending the actual opening of their respective Centres, which should be during 1965.

Four Assistant Supervisors from the Rowley Regis (2), Stafford and Bilston Junior Training Centres also successfully completed their respective one-year Diploma Courses in Sheffield in July, 1964. From 15th September, 1964, a further two instructors from Adult Training Centres (Newcastle and Willenhall) were seconded on the one-year Adult Course and four more Assistant Supervisors from junior Centres (Newcastle (2), Rowley Regis and Bilston) commenced one-year or two-year Courses from the same date. Two Assistant Supervisors (from Rowley Regis and Bilston) also continued into their second year of the two-year Course in Bristol which will be completed in July, 1965.

OTHER ASPECTS OF STAFF TRAINING

(a) County Training Scheme for Training Centre Staff

A total of thirteen Trainee Assistant Supervisors held appointments during the year, four of them being newly appointed from September, 1964. Five were promoted to posts of Assistant Supervisor or (in one

case) Instructor. Twelve were in post at the end of 1964, centred at Newcastle (4), Leek (2), Rowley Regis (2), Bilston (2), Cannock (1) and Lichfield (1).

The County Training Scheme provides for a four-year Course designed to give new entrants to the work experience of teaching methods in Adult and Junior Training Centres as well as lectures and visits of observation in preparation for their attendance on the N.A.M.H. Diploma Course. During 1964 the probationary period for these employees was extended from three to twelve months.

It is the basic intention that three trainees will complete the four-year Course each year, although in practice most of the trainees are obtaining promotion before the end of the four-year period. They do, however, continue to attend the lectures until the training period is completed. There is an appropriate intake of new trainees, mostly straight from school in September of each year.

During the year under review short courses of lectures have been given to the Trainee Assistant Supervisors on the following subjects:—Physiology, Anatomy and Hygiene, the Social Services, Child Guidance and Mental Health Services, the medical aspects of mental subnormality and family and social problems. Visits have also been made to three hospitals for the mentally subnormal and an Adult Training Centre. Many applications are received for the few vacancies available each year and there is no difficulty in maintaining a high educational standard at least on a par with the minimum requirements of the National Association for Mental Health when considering applications for the Diploma Course.

(b) Annual Refresher Course

The Annual Refresher Course for teachers of the mentally handicapped was held for the third year in succession at Nelson Hall Teachers' Training College, near Stafford. The theme of the Course was the Rehabilitation of the Mentally Handicapped. The Course was for four days from 23rd to 26th March, and was officially opened by the Chairman of the Mental Health Services Committee of the Regional Hospital Board. The number of students attending was 135 of whom just over half were from Local Authorities other than Staffordshire including students from as far afield as Cumberland and South Shields, Norfolk and Oxford.

More practical sessions were provided, with a wide choice of subjects and visits of observation to hospitals and training centres.

This year for the first time additional lectures and discussions were held for social workers as an annexe to the main Course. This part of the Course was attended by approximately thirty-five Mental Welfare Officers and other social workers.

The continued popularity of the Course is an indication of its success, and once again considerable credit must go to the College itself and to the Staff there who are most hospitable.

(c) Short Courses

Staff in the Mental Health and Child Guidance Service are encouraged to attend short courses and conferences relevant to their work, grants towards expenses being paid by the Authority. During 1964 thirty-two members of the staff attended such courses and conferences.

DEVELOPMENT OF THE SERVICE DURING 1964

Nineteen-sixty-four saw the opening of four new establishments. On 24th February the new 60-place replacement Junior Training Centre was opened in Cannock. The Old Community Hall premises in Hall Court Lane continued to be used for the training of a group of 20 adults and this is administered as an annexe to the new Junior Centre. The use of the old premises will, of course, discontinue when an Adult Training Centre is built in the Cannock area. The new Junior Hostel for 24 children came into use on 1st June. The Training Centre and Hostel are built on the same site and the children from the Hostel attend the Training Centre.

The Hostel adjacent to the new Junior Training Centre in Leek which had opened towards the end of 1963 took its first residents on 3rd February. This Hostel accommodates 9 children who receive training at the Training Centre.

The Authority's first Hostel for working men and women recovering from mental illness was opened on 9th December in Clayton Road, Newcastle. This establishment, which the Health Committee named "Orchard House" accommodates up to 24 residents in single bed-sitting rooms for periods normally up to six months with a view to rehabilitating them into work and lodgings after discharge from hospital. The residents need to be carefully selected to ensure that the Hostel can carry out its functions of rehabilitation, and they are all therefore considered from the viewpoint of the psychiatrist, the social worker, and the Ministry of Labour Disablement Re-settlement Officer before being recommended for residence. Because of this, the number of residents has increased comparatively slowly, and even so a few have proved unsuitable or have had a relapse necessitating return into hospital.

The adaptations to Summerhill Grange, Kingswinford, and the building of Hillport House, Newcastle, both Homes for elderly persons who are mentally disturbed were nearing completion at the end of 1964 and will be brought into use early in the new year. Building operations were also well in hand for new Adult Training Centres and Hostels at Stafford and Leek.

Of the new premises opened during the year there were 59 children attending the Junior Training Centre in Cannock and 27 adults in the Community Centre Annexe. There were 15 residents in the Cannock Junior Hostel, 9 in the Junior Hostel at Leek, and 14 residents at Orchard House, Newcastle. Staffing difficulties have again been experienced particularly in filling nursing and attendant posts in the residential establishments. This problem will become increasingly acute as more establishments are opened throughout the country. It is not always possible, owing to staff shortages, to maintain the Homes and Hostels at full capacity.

WORK UNDERTAKEN IN THE COMMUNITY

New Cases:

Particulars of new cases reported to the Local Health Authority during 1964 are given below. These are shown under each of the four categories laid down by the Mental Health Act, 1959.

Referred by	Mentally Ill		Psycho-pathic		Sub-normal		Severely Sub-normal		Totals		Grand Total
	M	F	M	F	M	F	M	F	M	F	
(A) General Practitioners											
(1) Under 16 years of age ..	1	—	—	—	7	13	1	5	9	18	959
(2) Aged 16 years and over ..	402	520	—	1	4	5	—	—	406	526	
(B) Hospitals (after in-patient treatment) ..											
(1) Under 16 years of age ..	1	—	—	—	—	—	—	—	1	—	1,027
(2) Aged 16 years and over ..	459	554	1	—	5	1	3	3	468	558	
(C) Hospitals (after or during out-patient or day treatment)											
(1) Under 16 years of age ..	3	2	—	—	—	—	1	—	4	2	378
(2) Aged 16 years and over ..	163	203	—	—	—	—	3	3	166	206	
(D) Local Education Authority											
(1) Under 16 years of age ..	1	—	—	—	18	14	10	13	29	27	111
(2) Aged 16 years and over ..	1	2	—	—	26	17	2	7	29	26	
(E) Police and Courts ..											
(1) Under 16 years of age ..	1	—	—	—	1	—	—	—	2	—	206
(2) Aged 16 years and over ..	119	79	—	—	3	—	2	1	124	80	
(F) Other Sources											
(1) Under 16 years of age ..	4	4	—	—	14	17	12	10	30	31	662
(2) Aged 16 years and over ..	258	288	3	2	8	9	18	15	287	314	
TOTAL ..											3,343

Community Care

In addition to the 716 persons actually receiving training and the 58 on waiting lists for the Training Centres, many other mentally disturbed or mentally subnormal persons living within the community were being visited by the Mental Welfare Staff. The extent of the community care provided by the Local Health Authority during the period under review can be seen in the following table which gives the numbers receiving care at 31st December, 1964.

	Mentally Ill		Psycho-pathic		Sub-normal		Severely Sub-normal		Totals		Grand Total
	M	F	M	F	M	F	M	F	M	F	
(A) Receiving training in a day centre											
(1) Under 16 years of age ..	—	—	5	6	12	6	215	186	232	198	} 655
(2) Aged 16 years and over ..	—	—	—	—	9	5	119	92	128	97	
(B) Awaiting entry thereto:											
(1) Under 16 years of age ..	—	—	—	—	—	—	12	18	12	18	} 58
(2) Aged 16 years and over ..	—	—	—	—	—	—	13	15	13	15	
(C) Receiving training in a residential training Centre:											
(1) Under 16 years of age ..	—	—	—	—	—	—	18	6	18	6	} 35
(2) Aged 16 years and over ..	—	—	—	—	—	—	4	7	4	7	
(D) Awaiting entry to a Residential training Centre:											
(1) Under 16 years of age ..	—	—	—	—	—	—	—	—	—	—	} —
(2) Aged 16 years and over ..	—	—	—	—	—	—	—	—	—	—	
(E) Receiving tuition from Home Teacher:											
(1) Under 16 years of age ..	—	—	—	—	—	—	9	3	9	3	} 24
(2) Aged 16 years and over ..	—	—	—	—	—	1	6	5	6	6	
(F) Awaiting such training:											
(1) Under 16 years of age ..	—	—	—	—	—	—	—	2	—	2	} 2
(2) Aged 16 years and over ..	—	—	—	—	—	—	—	—	—	—	
(G) Receiving home visits and not included in above:											
(1) Under 16 years of age ..	23	15	—	—	26	20	35	33	84	68	} 1,660
(2) Aged 16 years and over ..	472	604	6	1	140	110	73	102	691	817	
(H) Resident in Local Authority Home/Hostel:											
(1) Under 16 years of age ..	—	—	—	—	—	—	—	—	—	—	} 20
(2) Aged 16 years and over ..	7	4	—	—	7	2	—	—	14	6	
(I) Awaiting such residence:											
(1) Under 16 years of age ..	—	—	—	—	—	—	—	—	—	—	} —
(2) Aged 16 years and over ..	—	—	—	—	—	—	—	—	—	—	
(J) Resident at L.A. expense in other residential Homes/Hostels:											
(1) Under 16 years of age ..	—	—	—	—	—	—	—	1	—	1	} 4
(2) Aged 16 years and over ..	—	—	—	—	1	1	—	1	1	2	
(K) Resident at L.A. expense by boarding out in private household:											
(1) Under 16 years of age ..	—	—	—	—	—	—	1	—	1	—	} 1
(2) Aged 16 years and over ..	—	—	—	—	—	—	—	—	—	—	
(L) Totals (A to K)											
(1) Under 16 years of age ..	23	15	5	6	38	26	284	244	350	291	} 2,448
(2) Aged 16 years and over ..	479	608	6	1	157	119	215	222	857	950	

For the majority of mentally subnormal children and adults regular visits by the Mental Health Staff experienced in the work who can advise wisely when difficulties arise, are sufficient. Those admitted to the Training Centres gain benefit and happiness from the friendly school atmosphere, and the majority can remain living at their own homes. The Hostels which have now been opened in conjunction with Training Centres are all full to capacity during term-time. These are mainly mentally subnormal persons who live too far from the Training Centre to otherwise attend or they have unsuitable home backgrounds. Many go home for the weekends and the Centre holidays.

Other mentally handicapped persons living in the community are able to work and ready assistance is given to the Social Workers by officers of the Ministry of Labour in placing them in suitable employment. The National Assistance Board comes to the aid of those who are unemployable.

At 31st December, 1964 there were three subnormal persons under statutory guardianship:—

<i>Under Guardianship</i>	<i>Under 16 years of age</i>		<i>Aged 16 years and over</i>	
	<i>M.</i>	<i>F.</i>	<i>M.</i>	<i>F.</i>
(a) of L.H.A.	1*	—	1	—
(b) of persons other than L.H.A.	—	—	1	—

*This is a Newcastle Borough case.

All receive regular visits and one attends a Training Centre.

Hospital Care

Admission of persons to hospitals for the mentally subnormal under provisions of the Mental Health Act, 1959, made during the year:—

Informal admissions	...	...	32
Section 26	...	...	8
Section 60	...	...	10
Section 67	...	...	Nil

The following table indicates the extent of temporary residential care provision during 1964, and the state of the hospital waiting list at the end of the year.

	<i>Mentally Ill</i>		<i>Psycho- pathic</i>		<i>Sub- normal</i>		<i>Severely Sub- normal</i>		<i>Totals</i>		<i>Grand Total</i>
	<i>M</i>	<i>F</i>	<i>M</i>	<i>F</i>	<i>M</i>	<i>F</i>	<i>M</i>	<i>F</i>	<i>M</i>	<i>F</i>	
Number of persons in L.H.A. Area awaiting admission to Hospital at 31.12.64:											
(A) In urgent need of hospital care:											
(1) Under 16 years of age ..	—	—	—	—	2	—	10	8	12	8	} 26
(2) Aged 16 years and over ..	—	—	—	—	—	1	5	—	5	1	
(B) Not in urgent need of hospital care:											
(1) Under 16 years of age ..	—	—	—	—	—	—	6	1	6	1	} 13
(2) Aged 16 years and over ..	—	—	—	—	—	—	3	3	3	3	
Number of admissions for temporary residential care during 1964:—											
(A) to N.H.S. Hospitals											
(1) Under 16 years of age ..	—	—	—	—	—	—	26	24	26	24	} 61
(2) Aged 16 years and over ..	—	—	—	—	—	—	8	3	8	3	
(B) to L.H.A. residential accommodation:											
(1) Under 16 years of age ..	—	1	—	—	9	6	11	14	20	21	} 100
(2) Aged 16 years and over ..	7	12	—	1	8	10	13	8	28	31	
(C) Elsewhere:											
(1) Under 16 years of age ..	—	—	—	—	—	—	4	1	4	1	} 5
(2) Aged 16 years and over ..	—	—	—	—	—	—	—	—	—	—	

THE MENTAL HEALTH CENTRES

There are at present three Mental Health Centres in permanent premises and one building in Sedgley is temporarily housing the staff of the two Mental Health Centres serving the industrial south of the County.

The Mental Health Centres provide a focal point for all aspects of mental health for each area, and in addition to the normal services provided as amplified in the tables above, as the experience of the staff widens and more qualified personnel become available, so the Centres are becoming increasingly recognised as agencies willing to offer expert help and advice on the psychiatric aspects of the normal problems of living. These may be marital problems, delinquency, unemployment, etc. where emotional problems and disturbed inter-personal relationships are complicating features.

The statistics which are collected from time to time (some of which are included in this report) all show a general increase in the amount of work done within the community from the Mental Health Centres. The number of supportive home visits which the Mental Welfare staff have been able to make has increased steadily over the past few years (by over 3,000 between 1963 and 1964) and there are strong indications in several parts of the County of the benefits of this progress in effective preventive work and a corresponding lowering in the numbers of patients admitted into hospitals for the mentally ill, and the subnormal. In other areas shortage of staff has temporarily slowed down this momentum.

The Mental Welfare Officer establishment for the County was increased to twenty in 1964 with provision for a further two officers from April, 1965.

The diagnostic clinics held in collaboration with the staff of the Birmingham Regional Hospital Board have continued. These are for mentally subnormal children and adults and families in the south of the County (with clinics at Stafford, Lichfield, Coseley and Kingswinford) and there also exist facilities for children from the Staffordshire Administrative Area to attend similar clinics at Stoke-on-Trent in the north of the County administered by the Stoke-on-Trent Health Authority in conjunction with the Regional Hospital Board. The clinics in the southern area are held every two months and are staffed by consultants from St. Margaret's Hospital at Great Barr and psychologists and social workers provided by the County Health Department. Patients are referred by, or with the approval of, the family doctor, and we look forward to the time when every child with suspected mental subnormality will be seen as a matter of course, without delay, by specialists in this branch of medicine.

The Social Clubs at Lichfield and Stafford have also flourished during 1964, and plans are in hand for further experiments in this field during 1965.

In addition to the case conferences and staff meetings at the respective Mental Health Centres, which prove useful to students from the social work and child care courses, the social workers at the Newcastle Mental Health Centre have been attending fortnightly clinical conferences which have proved of some value in increasing their knowledge of the psychiatric aspect.

THE FUTURE

The Ten-year Building Programme originally planned three years ago is now lagging well behind schedule for lack of suitable sites for many of the projects. Only two of the projects in the 1964/65 programme had been put in hand by the end of 1964, and many of the remainder will probably have to be transferred to future years. The main need is Training Centres and Hostels for the mentally subnormal. These tend to fill up very quickly very soon after they are built. There is also a known demand for Special Care Units which is not at present being met.

With the future of the service in mind, the Authority, as reported elsewhere, sends many of the staff on Courses of various kinds including one- and two-year Courses, and Staffordshire is itself becoming more widely used for placements for students on Social Welfare, Child Care and Training Centre Staff Courses at universities and colleges.

EPILEPTICS AND SPASTICS

The following are particulars of the known cases of epilepsy and cerebral palsy from the Administrative County at the 31st December, 1964:—

EPILEPSY

Adults

No. in Part III Accommodation	...	16
No. in own homes	...	58
No. chargeable to the Authority in colonies outside the County	...	24
		<hr/> 98

Children between the ages of 2 and 16 years

Epileptics

At Special Schools	...	4 (3 boys 1 girl)
At ordinary schools	...	226 (107 boys 119 girls)
Home Tuition	...	2 (1 boy 1 girl)
At home without tuition (i.e. Pre-School Age)	...	10 (7 boys 3 girls)
		<hr/> 242 (118 boys 124 girls)

Other major defects accompanied by epilepsy

At Special Schools	...	17 (13 boys 4 girls)
On waiting list for Special Schools (at ordinary schools)	...	1 (boy)
At ordinary schools	...	12 (7 boys 5 girls)
Having home tuition	...	3 (2 boys 1 girl)
		<hr/> 33 (23 boys 10 girls)

275

Children under 2 years of age

No. treated in hospital	3	
No. treated by general practitioners ...	5	
	<hr/>	
	8 (6 boys 2 girls)	8

Mental subnormal persons receiving community care with the additional handicap of epilepsy

No. under 16 years	29 (17 male 12 female)	
No. 16 years and over	51 (31 male 20 female)	
	<hr/>	
	80 (48 male 32 female)	80
		<hr/>
		461

CEREBRAL PALSY

Adults

No. in own homes	69	
No. in Voluntary Homes but chargeable to the authority	3	
	<hr/>	
		72

Children 2—16

At Special Schools for the Physically Handicapped:—

Residential	32 (25 boys 7 girls)	
Day	10 (8 boys 2 girls)	

At Special Schools for other causes:—

Residential	11 (6 boys 5 girls)	
Day	4 (3 boys 1 girl)	

At Nursery Schools	1 (girl)	
At ordinary schools	94 (59 boys 35 girls)	
Having Home Tuition	11 (4 boys 7 girls)	

At Home without Tuition

(? Educability)	2 (boys)	
(Pre-School Age)	21 (11 boys 10 girls)	

Unsuitable for Education on Mental Grounds

	74 (44 boys 30 girls)	
	<hr/>	
	260 (162 boys 98 girls)	260

Children under 2

No. treated in hospital	6	
No. treated by general practitioners ...	1	
	<hr/>	
	7 (boys)	7

Mental subnormal persons receiving community care with the additional handicap of cerebral palsy

No. under 16 years	56 (22 male 34 female)	
No. 16 years and over	54 (26 male 28 female)	
	<hr/>	
	110 (48 male 62 female)	110
		<hr/>
		449

In addition to the 80 persons suffering from epilepsy and the 110 suffering from spastic conditions in addition to mental subnormality, 18 subnormals were suffering from both epilepsy and cerebral palsy (10 male and 8 female). One of these attended an Adult Training Centre and 3 attended Junior Training Centres.

Of the 80 persons suffering from epilepsy in addition to mental subnormality, 37 were in attendance at Training Centres and two were receiving Home Teaching.

Of the 110 subnormals suffering from spastic conditions, 39 attended Training Centres and 4 received Home Teaching.

With regard to adults, the figures given relate to those registered by the County Welfare Department under the scheme relating to the 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 found 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 the children are examined in the "leaver group".

Table showing Population, Number of Persons per acre, Birth and 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

DISTRICT	Population at all ages		Number of persons per acre	Live Birth-rate per 1,000 of Population	Adjusted Live Birth-rate by comparability factor	Still-births, Rate per 1,000 of Population	Crude death-rate per 1,000 of Population	Adjusted death-rate by comparability factor	Neo-natal Mortality rate per 1,000 registered live births (Infants under 4 weeks of age)	Mortality in children under one year per 1,000 registered live births	Zymotic Mortality Per 1,000 of Population			Per 1,000 of Population							
	Census 1961	Estimated 1964									Measles	Whooping Cough	Diphtheria	Tuberculosis, Respiratory	Tuberculosis, other	Malignant Neoplasm	Bronchitis	Pneumonia	Other Diseases of Respiratory System	Nephritis and Nephrosis	Congenital Malformations
Aldridge ..	50,981	58,890	6.3	24.4	17.6	0.39	5.8	10.8	8	15	—	0.03	—	—	1.29	0.22	0.32	0.03	0.10	0.19	
Amblecote ..	3,008	3,000	4.5	19.0	20.1	—	9.3	9.3	—	—	—	—	—	—	2.00	1.33	—	—	0.33	—	
Biddulph ..	14,060	15,110	2.3	17.7	16.3	0.33	8.5	11.7	19	26	—	—	—	0.07	—	2.18	0.33	0.33	0.13	—	
Bilston ..	33,077	32,690	17.5	16.6	15.8	0.49	9.3	13.2	17	24	0.03	—	—	0.06	0.03	2.05	0.64	0.70	0.06	0.09	
Brierley Hill ..	56,377	59,510	10.2	20.2	18.0	0.29	9.1	11.8	12	20	—	—	—	0.07	—	1.97	1.06	0.40	0.13	0.08	
Brownhills ..	26,392	28,700	4.6	24.7	20.7	0.52	8.7	13.1	16	24	—	—	—	—	—	1.60	0.73	0.56	0.14	0.07	
Cannock ..	42,186	45,060	5.5	18.7	18.5	0.33	10.5	12.1	15	20	—	—	—	—	—	1.69	0.78	0.22	0.09	0.09	
Coseley ..	39,557	41,320	13.0	19.0	15.4	0.46	7.1	11.6	5	6	—	—	—	0.05	—	1.04	0.68	0.24	0.02	—	
Darlaston ..	21,732	21,540	14.1	14.4	14.0	0.23	10.7	15.4	16	19	—	—	—	—	—	2.51	0.84	0.37	0.09	0.05	
Kidsgrove ..	19,726	20,830	5.1	21.8	19.6	0.43	9.6	14.8	18	26	—	—	—	0.05	—	1.78	0.38	0.34	0.05	0.05	
Leek ..	19,173	19,100	4.4	14.5	16.0	0.26	14.1	12.7	18	25	—	—	—	—	—	2.57	0.68	0.63	0.10	0.10	
Lichfield ..	14,077	18,130	5.0	24.4	22.0	0.39	9.9	10.0	11	27	—	—	—	—	—	1.71	0.50	0.33	0.11	—	
Newcastle ..	76,433	77,000	8.7	18.1	17.2	0.26	10.2	13.2	13	19	—	—	—	0.04	—	1.91	0.74	0.65	0.19	0.06	

Deaths occurring during the year 1964 classified according to Diseases and Localities,
together with Births occurring during the year.

URBAN

DISTRICT	Live Births	Still Births	Deaths from all causes	Deaths under 1 year	Deaths under 4 weeks	Tuberculosis, Respiratory	Tuberculosis, other	Syphilitic Disease	Diphtheria	Whooping Cough	Meningococcal Infections	Acute Poliomyelitis	Measles	Other Infective and Parasitic Diseases	Malignant Neoplasm					Leukaemia, Apleukaemia	Diabetes	Vascular Lesions of Nervous System	Coronary Disease, Angina	Hypertension with Heart Disease	Other Heart Disease	Other Circulatory Disease	Influenza	Pneumonia	Bronchitis	Other Diseases of Respiratory System	Ulcer of Stomach and Duodenum	Gastritis, Enteritis and Diarrhoea	Nephritis and Nephrosis	Hyperplasia of Prostate	Pregnancy, Childbirth	Congenital Malformations	Other Defined and Ill-defined Diseases	Motor Vehicle Accidents	All other Accidents	Suicide	Homicide and operations of War			
															Stomach	Lung, Bronchus	Breast	Uterus	Other Malignant and Lymphatic Neoplasms																									
Aldridge ..	1434	23	343	22	11	-	-	-	-	2	-	-	-	-	-	7	9	17	5	38	3	3	41	59	6	29	9	3	19	13	2	4	1	6	1	-	-	11	37	5	7	6	-	-
Amblecote ..	57	-	28	-	-	-	-	-	-	-	-	-	-	-	-	1	2	1	-	2	-	1	4	3	1	2	-	1	-	4	-	-	-	-	1	-	-	4	1	-	-	-	-	-
Biddulph ..	267	5	128	7	5	1	-	-	-	-	-	-	-	-	-	6	10	1	-	16	-	1	13	29	1	9	3	-	5	5	2	2	-	-	-	1	-	15	1	6	1	-	-	-
Bilston ..	543	16	305	13	9	2	1	1	-	-	1	-	1	-	-	9	15	7	-	36	-	1	44	44	8	23	12	6	23	21	2	1	1	3	2	-	-	29	5	4	3	-	-	
Brierley Hill	1201	17	540	24	14	4	-	-	-	-	-	-	-	3	22	28	8	5	54	1	2	58	81	8	54	20	1	24	63	8	5	2	5	2	-	6	50	8	13	5	-	-		
Brownhills ..	708	15	251	17	11	-	-	-	-	-	-	-	-	1	5	12	4	1	24	1	2	24	34	5	30	8	1	16	21	4	2	2	2	1	-	5	30	4	5	6	1	-	-	
Cannock ..	843	15	475	17	13	-	-	1	-	-	-	-	-	4	8	9	11	7	41	1	3	82	80	5	99	13	2	10	35	4	5	1	4	6	1	4	26	6	4	3	-	-		
Coseley ..	785	19	294	5	4	2	-	-	-	-	1	-	-	-	-	3	19	2	-	19	-	8	45	51	10	35	12	6	10	28	1	2	1	-	2	-	4	15	4	11	2	1	-	
Darlaston ..	310	5	231	6	5	-	-	-	-	-	-	-	-	-	-	8	14	5	1	26	-	1	30	43	8	35	5	1	8	18	2	1	-	1	-	1	11	5	2	5	-	-		
Kidsgrove ..	454	9	199	12	8	1	-	1	-	-	-	-	-	3	8	7	6	1	15	2	3	28	45	3	10	13	2	7	8	1	1	1	1	-	-	5	19	2	4	2	-	-		
Leek ..	276	5	270	7	5	-	-	-	-	-	-	-	-	1	7	7	8	2	25	-	-	40	47	3	36	10	-	12	13	2	1	2	2	-	-	4	28	7	7	6	-	-		
Lichfield ..	443	7	180	12	5	-	-	-	-	-	-	-	-	1	2	8	3	5	13	-	-	31	27	3	19	10	-	6	9	2	-	1	-	-	4	32	2	2	-	-	-			
Newcastle ..	1394	20	786	26	18	3	-	2	-	-	-	-	-	1	19	38	12	5	73	2	6	103	147	3	91	39	2	50	57	15	1	4	5	5	-	5	48	9	28	12	1	-		

URBAN—continued

DISTRICT	Population at all ages		Number of persons per acre	Live Birth-rate per 1,000 of Population	Adjusted Live Birth-rate by comparability factor	Still-births, Rate per 1,000 of Population	Crude death-rate per 1,000 of Population	Adjusted death-rate by comparability factor	Neo-natal Mortality rate per 1,000 registered live births (Infants under 4 weeks of age)	Mortality in children under one year per 1,000 registered live births	Zymotic Mortality Per 1,000 of Population			Per 1,000 of Population							
	Census 1961	Estimated 1964									Measles	Whooping Cough	Diphtheria	Tuberculosis, Respiratory	Tuberculosis, other	Malignant Neoplasm	Bronchitis	Pneumonia	Other Diseases of Respiratory System	Nephritis and Nephrosis	Congenital Malformations
Rowley Regis	48,166	49,130	13.0	15.5	15.0	0.22	10.5	13.8	18	20	—	—	—	0.02	—	2.04	0.90	0.47	0.08	0.04	0.06
Rugeley	13,012	15,140	5.3	27.2	24.5	0.33	7.0	10.6	19	22	—	—	—	—	—	0.99	0.33	0.33	0.07	—	0.26
Sedgley	27,927	31,600	8.3	20.3	17.3	0.32	12.0	12.1	19	20	—	—	—	0.06	—	1.80	0.66	0.57	0.03	—	0.25
Stafford	47,814	49,480	9.7	20.1	19.7	0.32	11.7	11.2	15	21	—	—	—	—	—	1.58	0.49	0.83	0.04	0.06	0.20
Stone	8,791	9,940	5.1	18.5	18.9	0.10	13.9	9.6	11	22	—	—	—	0.10	0.10	1.81	1.61	0.20	0.10	0.10	0.10
Tamworth	13,555	16,120	6.0	21.1	21.3	0.37	11.8	10.9	9	9	—	—	—	—	—	1.86	0.62	0.56	0.12	0.06	0.06
Tettenhall	14,800	15,620	6.2	11.1	11.5	0.13	8.8	10.9	23	34	—	—	—	—	—	1.54	0.38	0.38	0.13	—	0.06
Tipton	38,091	37,990	7.5	18.7	17.8	0.37	10.1	14.7	15	25	—	—	—	0.05	—	2.24	0.76	0.37	0.13	0.08	0.21
Uttoxeter	8,168	8,260	2.4	15.9	15.9	0.36	11.3	12.7	31	31	—	—	—	—	—	1.21	0.61	0.61	—	—	—
Wednesbury	34,511	34,760	17.2	17.3	17.0	0.35	9.4	13.0	18	20	—	—	—	0.03	—	1.90	0.63	0.40	0.06	0.09	0.14
Wednesfield	32,986	35,070	13.9	21.2	15.9	0.29	6.9	13.5	15	24	—	0.03	—	—	—	1.40	0.37	0.40	0.03	—	0.14
Willenhall	32,317	35,160	12.4	20.7	18.4	0.37	9.9	14.5	15	25	—	—	—	—	—	1.73	0.85	0.71	0.14	0.09	0.17
Totals and Averages	736,917	779,150	7.8	19.4	17.7	0.33	9.6	12.7	14	20	—	0.00	—	0.03	0.00	1.76	0.67	0.47	0.09	0.06	0.13

URBAN—continued

DISTRICT	Live Births	Still Births	Deaths from all causes	Deaths under 1 year	Deaths under 4 weeks	Tuberculosis, Respiratory	Tuberculosis, other	Syphilitic Disease	Diphtheria	Whooping Cough	Meningococcal Infections	Acute Poliomyelitis	Measles	Other Infective and Parasitic Diseases	Malignant Neoplasm						Leukaemia, Aleukaemia	Diabetes	Vascular Lesions of Nervous System	Coronary Disease, Angina	Hypertension with Heart Disease	Other Heart Disease	Other Circulatory Disease	Influenza	Pneumonia	Bronchitis	Other Diseases of Respiratory System	Ulcer of Stomach and Duodenum	Gastritis, Enteritis and Diarrhoea	Nephritis and Nephrosis	Hyperplasia of Prostate	Pregnancy, Childbirth Abortion	Congenital Malformations	Other Defined and Ill-defined Diseases	Motor Vehicle Accidents	All other Accidents	Suicide	Homicide and operations of War
															Stomach	Lung, Bronchus	Breast	Uterus	Other Malignant and Lymphatic Neoplasms																							
Rowley Regis	762	11	518	15	14	1	—	1	—	—	—	—	—	—	1	14	27	5	4	50	4	3	67	105	10	71	17	—	23	44	4	2	1	2	3	—	3	37	6	11	2	—
Rugeley ..	412	5	106	9	8	—	—	—	—	—	—	—	—	—	—	2	3	—	2	8	1	1	17	20	2	12	3	—	5	5	1	—	1	—	2	—	4	9	3	4	1	—
Sedgley ..	642	10	380	13	12	2	—	—	—	—	—	—	—	—	—	5	11	5	—	36	1	2	71	83	10	37	19	1	18	21	1	5	2	—	2	—	8	24	3	10	3	—
Stafford ..	995	16	577	21	15	—	—	1	—	—	—	—	—	—	—	6	15	12	5	40	2	4	78	97	8	151	11	—	41	24	2	7	1	3	—	1	10	35	3	13	7	—
Stone ..	184	1	138	4	2	1	1	—	—	—	—	—	—	—	1	1	5	3	—	9	—	2	23	23	—	27	3	—	2	16	1	2	1	1	1	—	1	9	3	1	1	—
Tamworth ..	340	6	191	3	3	—	—	1	—	—	—	—	—	—	—	1	10	5	—	14	5	—	29	31	4	27	14	—	9	10	2	3	—	1	6	—	1	14	2	1	1	—
Tettenhall ..	174	2	137	6	4	—	—	—	—	—	—	—	—	—	—	2	5	4	—	13	1	3	28	19	—	13	2	—	6	6	2	—	3	—	1	—	1	15	4	7	2	—
Tipton ..	712	14	385	18	11	2	—	—	—	—	—	—	—	—	1	11	18	11	5	40	2	1	48	67	7	35	12	—	14	29	5	4	5	3	2	1	8	35	4	10	5	—
Uttoxeter ..	131	3	93	4	4	—	—	1	—	—	—	—	—	—	—	3	3	—	1	3	1	3	21	23	1	6	2	—	5	5	—	1	—	1	—	—	9	—	3	1	—	
Wednesbury	602	12	327	12	11	1	—	1	—	—	—	—	—	—	1	11	25	7	2	21	2	2	37	55	7	51	10	—	14	22	2	1	2	3	1	—	5	28	5	8	3	—
Wednesfield	743	10	241	18	11	—	—	—	—	1	—	—	—	—	1	6	15	4	1	23	2	1	33	40	8	19	4	1	14	13	1	2	3	—	—	5	26	7	8	1	2	
Willenhall ..	728	13	348	18	11	—	—	—	—	—	—	—	—	—	—	7	18	7	3	26	2	5	42	51	8	37	16	2	25	30	5	2	1	3	3	—	6	32	8	4	5	—
Totals ..	15140	259	7471	309	214	20	2	10	—	3	2	—	1	19	174	333	148	55	665	33	58	1037	1304	129	958	267	29	366	520	71	54	36	46	41	4	101	617	107	173	83	5	

RURAL

DISTRICT	Population at all ages		Mean area per person in acres	Live Birth-rate per 1,000 of Population	Adjusted Live Birth-rate by comparability factor	Still-births, Rate per 1,000 of Population	Crude death-rate per 1,000 of Population	Adjusted death-rate by comparability factor	Neo-natal Mortality rate per 1,000 registered live births (Infants under 4 weeks of age)	Mortality in children under one year per 1,000 registered live births	Zymotic Mortality Per 1,000 of Population			Per 1,000 of Population								
	Census 1961	Estimated 1964									Measles	Whooping Cough	Diphtheria	Tuberculosis, Respiratory	Tuberculosis, other	Malignant Neoplasm	Bronchitis	Pneumonia	Other Diseases of Respiratory System	Nephritis and Nephrosis	Congenital Malformations	
Cannock	30,214	34,790	1.6	24.7	20.5	0.43	8.5	11.5	13	16	—	—	0.03	0.03	1.61	0.37	0.23	0.09	0.06	0.11
Cheadle	38,153	41,680	1.4	17.4	16.9	0.24	11.3	10.8	19	23	—	—	—	—	2.18	0.41	0.43	0.10	0.07	0.17
Leek	19,614	20,770	3.5	18.7	17.4	0.39	9.6	12.4	5	8	—	—	—	—	1.64	0.43	0.48	0.05	0.05	0.05
Lichfield	39,895	42,880	2.0	20.6	20.2	0.40	10.3	10.0	11	14	0.12	—	0.07	—	1.49	0.42	0.82	0.16	0.05	0.09
Newcastle	18,204	18,520	2.2	12.9	12.4	0.16	11.6	12.6	29	34	—	—	0.11	—	1.84	0.38	0.76	0.11	0.05	0.11
Seisdon	37,951	40,690	1.0	17.7	14.7	0.25	7.2	10.2	10	14	—	—	—	—	1.55	0.37	0.22	0.15	0.02	0.15
Stafford	17,903	19,990	4.0	18.9	18.9	0.40	8.9	10.8	16	29	—	—	0.05	0.05	1.55	0.25	0.30	0.10	—	—
Stone	18,473	18,950	3.2	16.4	15.6	0.11	10.0	11.2	13	16	—	—	—	—	1.90	0.74	0.53	0.11	—	0.21
Tutbury	17,462	19,270	1.6	18.5	18.5	0.36	8.4	9.7	14	20	—	—	—	—	1.19	0.42	0.67	0.10	—	0.16
Uttoxeter	10,327	11,910	4.8	16.5	20.0	0.42	8.5	9.8	—	10	—	—	—	—	1.51	0.42	0.50	0.08	0.08	0.17
Totals and Averages	248,196	269,450	2.2	18.8	17.7	0.32	9.4	11.1	13	18	0.00	—	0.03	0.01	1.67	0.41	0.48	0.11	0.04	0.12

RURAL

DISTRICT	Live Births	Still Births	Deaths from all causes	Deaths under 1 year	Deaths under 4 weeks	Tuberculosis, Respiratory	Tuberculosis, other	Syphilitic Disease	Diphtheria	Whooping Cough	Meningococcal Infections	Acute Poliomyelitis	Measles	Other Infective and Parasitic Diseases	Malignant Neoplasm					Leukaemia, Aleukaemia	Diabetes	Vascular Lesions of Nervous System	Coronary Disease, Angina	Hypertension with Heart Disease	Other Heart Disease	Other Circulatory Disease	Influenza	Pneumonia	Bronchitis	Other Diseases of Respiratory System	Ulcer of Stomach and Duodenum	Gastritis, Enteritis and Diarrhoea	Nephritis and Nephrosis	Hyperplasia of Prostate	Pregnancy, Childbirth Abortion	Congenital Malformations	Other Defined and Ill-defined Diseases	Motor Vehicle Accidents	All other Accidents	Suicide	Homicide and operations of War
															Stomach	Lung, Bronchus	Breast	Uterus	Other Malignant and Lymphatic Neoplasms																						
Cannock ..	859	15	296	14	11	1	1	-	-	-	-	-	-	1	9	8	5	3	31	3	4	35	56	7	36	8	3	8	13	3	2	3	2	1	-	4	23	13	8	5	-
Cheadle ..	726	10	470	17	14	-	-	-	-	-	-	-	-	1	15	16	12	1	47	8	2	45	57	6	107	16	5	18	17	4	1	1	3	1	-	7	48	13	16	3	-
Leek ..	388	8	200	3	2	-	-	-	-	-	-	-	-	-	4	7	3	2	18	1	2	34	42	6	18	11	1	10	9	1	-	1	1	2	-	1	16	2	5	3	-
Lichfield ..	884	17	441	12	10	3	-	-	-	-	1	-	1	2	14	18	8	2	22	2	1	74	89	5	47	10	3	35	18	7	6	1	2	4	-	4	36	14	6	6	-
Newcastle ..	238	3	215	8	7	2	-	-	-	-	-	-	-	2	5	5	1	-	23	-	2	30	41	2	23	19	-	14	7	2	1	2	1	1	-	2	18	2	9	1	-
Seisdon ..	720	10	294	10	7	-	-	-	-	-	-	-	-	-	7	20	5	1	30	1	2	35	64	5	37	14	1	9	15	6	5	2	1	-	-	6	18	4	2	4	-
Stafford ..	377	8	178	11	6	1	1	-	-	-	-	-	-	-	5	8	1	2	15	1	1	21	24	1	43	9	-	6	5	2	-	1	-	1	-	23	4	2	1	-	
Stone ..	311	2	190	5	4	-	-	-	-	-	-	-	-	1	1	5	5	1	24	4	-	38	24	1	22	8	1	10	14	2	1	1	-	2	1	4	15	2	3	-	-
Tutbury ..	357	7	161	7	5	-	-	-	-	-	1	-	-	-	4	6	1	3	9	1	2	21	30	1	24	4	-	13	8	2	-	-	-	-	1	3	17	2	8	-	-
Uttoxeter ..	196	5	101	2	-	-	-	-	-	-	-	-	-	-	4	3	2	1	8	1	-	14	24	2	16	3	1	6	5	1	1	1	-	1	-	2	4	1	1	-	-
Totals ..	5056	85	2546	89	66	7	2	-	-	-	2	-	1	7	68	96	43	16	227	22	16	347	451	36	373	102	15	129	111	30	17	12	11	12	2	33	218	57	60	23	-

Table showing the number of cases of certain Infectious Diseases notified in each sanitary area during the year ended 31st December, 1964, and the Attack-Rates per 1,000 of the population.

URBAN

DISTRICT	Estimated Population 1964 for calculating rates	Smallpox		Typhoid		Para- Typhoid		Scarlet Fever		Whooping Cough		Diphtheria		Erysipelas		Measles		Pneumonia		Puerperal Pyrexia		Polio- myelitis Cases
		Cases	Rate	Cases	Rate	Cases	Rate	Cases	Rate	Cases	Rate	Cases	Rate	Cases	Rate	Cases	Rate	Cases	Rate	Cases	Rate	
Aldridge ..	58,890	-	-	-	-	1	0.02	19	0.32	52	0.88	-	-	3	0.05	532	9.03	5	0.08	2	0.03	-
Amblecote ..	3,000	-	-	-	-	-	-	2	0.67	-	-	-	-	-	-	3	1.00	-	-	-	-	-
Biddulph ..	15,110	-	-	-	-	-	-	9	0.60	7	0.46	-	-	1	0.07	165	10.92	3	0.20	-	-	-
Bilston ..	32,690	-	-	-	-	-	-	2	0.06	28	0.86	-	-	-	-	173	5.29	6	0.18	-	-	-
Brierley Hill ..	59,510	-	-	-	-	-	-	17	0.29	8	0.13	-	-	-	-	254	4.27	1	0.02	4	0.07	-
Brownhills ..	28,700	-	-	-	-	-	-	6	0.21	7	0.24	-	-	-	-	151	5.26	3	0.10	-	-	-
Cannock ..	45,060	-	-	-	-	-	-	11	0.24	82	1.82	-	-	2	0.04	286	6.35	8	0.18	1	0.02	-
Coseley ..	41,320	-	-	-	-	-	-	8	0.19	12	0.29	-	-	-	-	148	3.58	8	0.19	2	0.05	-
Darlaston ..	21,540	-	-	-	-	-	-	6	0.28	32	1.49	-	-	1	0.05	62	2.88	1	0.05	-	-	-
Kidsgrove ..	20,830	-	-	-	-	-	-	1	0.05	3	0.14	-	-	-	-	70	3.36	2	0.10	-	-	-
Leek ..	19,100	-	-	-	-	1	0.05	-	-	38	1.99	-	-	1	0.05	24	1.26	2	0.10	2	0.10	-
Lichfield ..	18,130	-	-	-	-	-	-	7	0.39	16	0.88	-	-	-	-	307	16.93	4	0.22	13	0.72	-
Newcastle ..	77,000	-	-	-	-	-	-	13	0.17	51	0.66	-	-	3	0.04	298	3.87	55	0.71	2	0.03	-

URBAN—continued

DISTRICT	Estimated Population 1964 for calculating rates	Smallpox		Typhoid		Para- Typhoid		Scarlet Fever		Whooping Cough		Diphtheria		Erysipelas		Measles		Pneumonia		Puerperal Pyrexia		Polio- myelitis Cases
		Cases	Rate	Cases	Rate	Cases	Rate	Cases	Rate	Cases	Rate	Cases	Rate	Cases	Rate	Cases	Rate	Cases	Rate	Cases	Rate	
Rowley Regis ..	49,130	-	-	-	-	-	-	25	0.51	22	0.45	-	-	-	-	263	5.35	2	0.04	-	-	-
Rugeley ..	15,140	-	-	-	-	-	-	-	-	27	1.78	-	-	-	-	76	5.02	-	-	-	-	-
Sedgley ..	31,600	-	-	-	-	-	-	-	-	1	0.03	-	-	-	-	13	0.41	-	-	-	-	-
Stafford ..	49,480	-	-	-	-	-	-	7	0.14	59	1.19	-	-	-	-	191	3.86	11	0.22	-	-	-
Stone ..	9,940	-	-	-	-	-	-	-	-	-	-	-	-	-	-	87	8.75	-	-	-	-	-
Tamworth ..	16,120	-	-	-	-	-	-	-	-	3	0.19	-	-	2	0.12	46	2.85	1	0.06	-	-	-
Tettenhall ..	15,620	-	-	-	-	-	-	2	0.13	21	1.34	-	-	-	-	57	3.65	4	0.26	-	-	-
Tipton ..	37,990	-	-	-	-	-	-	39	1.03	14	0.37	-	-	-	-	76	2.00	4	0.11	-	-	-
Uttoxeter ..	8,260	-	-	-	-	-	-	-	-	4	0.48	-	-	3	0.36	7	0.85	1	0.12	-	-	-
Wednesbury ..	34,760	-	-	-	-	-	-	4	0.12	11	0.32	-	-	-	-	73	2.10	2	0.06	-	-	-
Wednesfield ..	35,070	-	-	-	-	-	-	27	0.77	35	1.00	-	-	-	-	407	11.60	2	0.06	-	-	-
Willenhall ..	35,160	-	-	-	-	-	-	10	0.28	19	0.54	-	-	-	-	230	6.54	3	0.09	-	-	-

RURAL

DISTRICT	Estimated Population 1964 for calculating rates	Smallpox		Typhoid		Para- Typhoid		Scarlet Fever		Whooping Cough		Diphtheria		Erysipelas		Measles		Pneumonia		Puerperal Pyrexia		Polio- myelitis Cases
		Cases	Rate	Cases	Rate	Cases	Rate	Cases	Rate	Cases	Rate	Cases	Rate	Cases	Rate	Cases	Rate	Cases	Rate	Cases	Rate	
Cannock ..	34,790	-	-	-	-	-	-	7	0.20	26	0.75	-	-	1	0.03	274	7.87	3	0.09	-	-	-
Cheadle ..	41,680	-	-	-	-	-	-	9	0.22	29	0.70	-	-	1	0.02	144	3.45	1	0.02	1	0.02	-
Leek ..	20,770	-	-	-	-	-	-	7	0.34	11	0.53	-	-	-	-	80	3.85	2	0.10	-	-	-
Lichfield ..	42,880	-	-	-	-	-	-	9	0.21	27	0.63	-	-	-	-	198	4.62	9	0.21	-	-	-
Newcastle ..	18,520	-	-	-	-	-	-	-	-	42	2.27	-	-	-	-	14	0.76	8	0.43	-	-	-
Seisdon ..	40,690	-	-	-	-	2	0.05	17	0.42	27	0.66	-	-	-	-	206	5.06	13	0.32	-	-	-
Stafford ..	19,990	-	-	-	-	-	-	1	0.05	6	0.30	-	-	-	-	50	2.50	1	0.05	-	-	-
Stone ..	18,950	-	-	-	-	-	-	34	1.79	3	0.16	-	-	-	-	87	4.59	1	0.05	-	-	-
Tutbury ..	19,270	-	-	-	-	-	-	7	0.36	17	0.88	-	-	-	-	83	4.31	3	0.16	-	-	-
Uttoxeter ..	11,910	-	-	-	-	-	-	3	0.25	2	0.17	-	-	-	-	10	0.84	1	0.08	-	-	-