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STAFFORDSHIRE COUNTY COUNCIL

REPORT

of the

MEDICAL OFFICER OF HEALTH

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

For the Year 1965







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STAFFORDSHIRE COUNTY COUNCIL

Annual Report of Medical Officer of Health

PRELIMINARY NOTE

It is well known that the foreword to the annual report can be written no earlier than some six months after the period to which the report refers owing to the time required to produce the statistics. Therefore, comment has no value in immediacy and to this lack is added, this year, the fact that a large area of the county is, at the time of writing, now outside the administrative county. The effect of this change on the quality of the service to the remaining county is another subject and some time must elapse to see if the theoretical possibilities materialise. The relatively small changes of the county boundary in the Tamworth and Stoke-on-Trent areas roughly balance each other, leaving a slight gain to the county.

The statistics in the report show further movements in trends which are already widely known. Thus, the birth rate is again up, the number of deaths from cancer increased slightly, as did accidents.

The birth rate has risen steadily in recent years, and now reaches the same level as in 1948, which resulted in the "bulge"—and the consequential difficulties. The improved social conditions, coupled with, or leading to, the earlier marriages and popularity of slightly larger families, suggest that this tendency will continue. The consequences for the Health Department are clearly that more of every service provided will be required in the ensuing years, and it is likely that new services will develop. It will be noted with satisfaction that this increase in births has been accompanied by a fall in the maternal mortality.

The increased deaths from cancer are an unwelcome reminder that all the known methods of reducing its onset must be rigorously pursued. In this effort the most important weapon is health education and the report on Page 53 of the development of this aspect of the Health Department's work shows that considerable advances in this direction have been made. Perhaps it is grasping at straws, but the impression that some school children are appreciating the importance of non-smoking shows hope of a little success.

A study of the Table on page 13 showing an analysis of the causes of death, shows that if heart and circulation diseases are added, which is correct from the pathological point of view, and the same is done to affections of the lung, the numerically decreasing order of deaths is heart disease, cancer, lung affection and all accidents. But the latter has shown the greatest percentage increase in the year under review compared with last. For a long time accidents have been the first cause of death in children up to 12 years, but now it is becoming a major factor in adults although a large proportion of these deaths are preventable.

The need to reduce these figures has been recognised for a long time and it should be kept in mind that accidents are not limited to people in later life (though home accidents may be) but affect those in normal health. Many authorities, as well as from the Health Departments, are concerned in the effort to reduce the number and an aspect requiring revision is more effective supervision of medical fitness to drive. The present conditions of issue of a licence are imprecise and relate to the time when speeds were much lower and congestion on the roads less. The exact part played by medical unfitness in causing deaths is not known but any contributory cause is important and warrants action. Home accidents are still responsible for more deaths than road accidents and to reduce both the main hope lies in training young people, for it is nearly impossible to change the habits of older people.

The environmental services of the county continue to provide an essential need. The examination of sewage effluents and water samples forms a large part of the work of the laboratory, though newer, more complex, methods of examination of other substances are constantly being introduced. The lowest recorded figure for the adulteration of milk in the county was recorded during the year, which is very welcome, but the situation in respect of other foodstuffs, particularly prepared meats, was slightly worse than for the previous year.

Progress is being made in the provision of water supplies and sewage disposal and a number of schemes have been approved for construction during the year. This is satisfactory as far as it goes, but this is not far enough. The urgent need to build houses nearly always outstrips the provision of adequate sewerage and most works are trying to deal with heavy overloads. This not only leads to health hazards, but is costly economically when expensive plant is spoilt.

The incidence of infectious diseases does not show any abnormal features. An increase in the number of cases of gonorrhoea which has been prominent for some years in some county boroughs, is now occurring in the county. This year's figures were the highest since 1949.

Follow-up tests on children vaccinated against tuberculosis are very promising and the results after one year have proved to be as good as those used by the orthodox method. But there are variations in firing of individual guns; a technical problem which is being dealt with by the manufacturers and when this has been resolved it is hoped that an increasing use can be made of the dermo-jet as supplies become available because of the absence of pain.

The increased number of children in the county and the small number and daily maintenance charge at the day nurseries has led the public to provide for its own needs in this respect privately. While the day nurseries maintained by the county were fully occupied during this year, the number of private premises registered under the Nurseries' and Child-Minders' Regulation Act increased from 54 to 70.

A number of new premises came into use during the year and, for some, official openings were held. Ambulance stations at Tettenhall and Rugeley were opened and replaced very poor premises.

A new maternity and child-welfare clinic was opened in Cannock to replace adapted premises which were inconvenient and too small. A new plan was adopted which has resulted in a most attractive building, which must improve the standard of service given within it. A modern purpose-built maternity and child-welfare centre at Glascote was transferred to the county from Warwickshire and it will continue to serve the population for whom it was built.

The remaining new buildings opened during the year formed part of the Mental Health Service. Two homes for the elderly mentally frail were opened—one in Newcastle and another in the south of the county at Brierley Hill. These are the first hostels of this type to be opened in the county and while invaluable to those admitted, will provide the necessary experience in determining the optimum part which this type of hostel can play.

An important occasion for the whole county was the visit by the Minister of Health, Mr. Kenneth Robinson, to open the new adult training centre and hostel in Stafford. These buildings are adjacent and their design is the result of much experience. It is believed that their service to the mentally handicapped will maintain the importance of the occasion of its opening.

Much comment could be made on the progress of the Mental Health Service and it is hoped that this section will be carefully received. Mention must be made here of the part played by the Staffordshire Voluntary Committee for Mental Health. Staffordshire is in the forefront in making community provision for the mentally handicapped, but a domiciliary service can only be achieved by the acceptance of the trainees by the public and here is an important role for the voluntary committees. That they are fulfilling this role is clear from the report on their activities on page 91 and it is with great pleasure that the formation of four new voluntary committees is noted. Three of these are in connection with the new hostels and this is a particularly welcomed development.

It is only due that thanks should be expressed to everybody who did more than they need have done towards making the Health Department's services a success; starting with the Health Committee, whose continued enthusiasm pervades the whole service, continuing with the other County Departments concerned with the health services and, not least, to the staff, both professional and clerical, who have given of their best during the year.

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, 1965

Chairman — COUNCILLOR DR. K.C. ROGERS

Vice-Chairman — COUNCILLOR G. McEVOY

Ex-Officio Members—

Councillor G. W. NEWMAN	<i>Chairman of the County Council</i>
„ J. COONEY, M.B.E.	<i>Vice-Chairman of the County Council</i>
„ E. H. BEET	<i>Chairman of the Finance Committee</i>
„ J. H. GEORGE	<i>Vice-Chairman of the Finance Committee</i>

Alderman J. J. BEECH	Councillor P. E. McELLIN
„ H. GADSBY	„ L. W. MERCER
„ Mrs. F. MATTHEWS, J.P.	„ Mrs. F. M. MILNE
„ J. P. PENNINGTON, J.P.	„ A. NEEDHAM
„ G. H. PHILPOTT, J.P.	„ Mrs. E. NORTHALL
„ Mrs. M. ROWLEY	„ J. R. PARSONS
„ W. F. TAYLOR	„ S. H. REYNOLDS
„ J. UDALL	„ H. RUDGE
Councillor J. ADAMS	„ F. N. SALMON
„ A. J. BARKER	„ F. W. SAVILL
„ W. E. DREW, J.P.	„ J. D. SKELDING, J.P.
„ H. V. FEREDAY	„ J. SMITHEMAN
„ Mrs. H. M. GARDENER	„ W. F. TRACY
„ J. GREENAWAY	„ R. MILO TURNER
„ A. J. R. HICKLING	„ Mrs. S. A. WARD, C.B.E.
„ Miss G. JOULES	„ W. H. WESTWOOD
	„ 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. (left 30.9.1965)

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)	655,224
Estimated Home Population of Area 1965 (Primarily for Calculation of Death-rates or incidence of Notifiable Diseases)...	1,072,420
Rateable Value at 1st April, 1965 (General County Purposes)	£38,285,123
Estimated net product of a penny rate, 1965-66 (General County Purposes)	£158,271

2.—VITAL STATISTICS—MOTHERS AND INFANTS

Live Births:	
Number	21,289
Rate per 1,000 population	19.9
Illegitimate Live Births (per cent of total live births)	3.32
Stillbirths:	
Number	410
Rate per 1,000 total live and still births	18.9
Total Live and Still Births	21,699
Infant Deaths (deaths under one year)	410
Infant Mortality Rates:	
Total infant deaths per 1,000 total live births	19
Legitimate infant deaths per 1,000 legitimate live births	19
Illegitimate infant deaths per 1,000 illegitimate live births	29
Neo-natal Mortality Rate (deaths under four weeks per 1,000 total live births)	13
Early Neo-natal Mortality Rate (deaths under one week per 1,000 total live births)	11
Perinatal Mortality Rate (still births and deaths under one week combined per 1,000 total live and still births) ...	30
Maternal Mortality (including abortion)	
Number of deaths	2
Rate per 1,000 total live and still births	0.09

OTHER EXTRACTS FROM VITAL STATISTICS OF THE YEAR

Deaths from all causes	10,378
Death Rate	9.7
Deaths from Cancer (all ages)	1,890
Deaths from Measles (all ages)	1
Deaths from Whooping Cough (all ages)	—
Deaths from Gastritis, Enteritis and Diarrhoea (under one year of age)	7

AREA AND POPULATION

During 1965, boundary changes came into force (on 1.4.65) as a result of the Stoke-on-Trent and the Staffordshire and Warwickshire (Tamworth) Orders, when the following areas were transferred.

Tamworth Order

The following parts of Warwickshire were added to the Borough of Tamworth in the Administrative County of Staffordshire.

- (i) The parishes of Amington and Glascote.
- (ii) Parts of the parishes of:
 - (a) Wilnecote and Castle Liberty
 - (b) Kingsbury
 - (c) Shuttington
 - (d) Dordon
 - (e) Polesworth

These transfers added approximately 4,900 acres, 15,000 population and £410,000 rateable value to Tamworth Borough.

Stoke-on-Trent Order

This Order provided for a revision of boundaries between the Administrative County and the City of Stoke-on-Trent.

The districts affected were:—Parts of Newcastle M.B. and Kidsgrove U.D.

Parts of the Parishes of	Caverswall	—	in Cheadle R.D.
	Norton-in-the		
	Moors	—	in Leek R.D.
	Bagnall	—	in Leek R.D.
	Fulford	—	in Stone R.D.
	Barlaston	—	in Stone R.D.
	Swynnerton	—	in Stone R.D.

Parts added to the City had a total area of 1,900 acres, a population of some 14,000 and a rateable value of £320,000.

Parts of the City transferred to the Administrative County had a total area of 160 acres, a population of approximately 1,200 and a rateable value of £30,000.

There was also, in the Leek Rural District, an incidental transfer from the Parish of Norton-in-the Moors to the Parish of Bagnall.

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

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

In the following table the final census population of the Administrative County for 1961 and the estimated home population for mid-1965 are set out.

	<i>Census 1961 (Final)</i>	<i>Estimated Population Mid-1965</i>
Urban	736,917	805,110
Rural	248,196	267,310
Totals	985,113	1,072,420

The live births registered in the Administrative County for birth-rate purposes numbered 21,289 compared with 20,196 in the previous year, the number in the Urban Districts being 15,871 and in the Rural Districts 5,418.

Stillbirths. There were 410 stillbirths registered during the year, of which 313 were in Urban and 97 in Rural Districts. The Still-birth rate per thousand of the population for the combined Urban and Rural Districts was 0.38. During the same period the rate for England and Wales was 0.28.

DISTRICTS		LIVE BIRTH-RATE PER 1,000 OF POPULATION																
		5 yts. 1889- 1893	5 yts. 1894- 1898	5 yts. 1899- 1903	5 yts. 1904- 1908	5 yts. 1909- 1913	5 yts. 1914- 1918	5 yts. 1919- 1923	5 yts. 1924- 1928	5 yts. 1929- 1933	5 yts. 1934- 1938	5 yts. 1939- 1943	5 yts. 1944- 1948	5 yts. 1949- 1953	5 yts. 1954- 1958	5 yts. 1959- 1963	1964	1965
Staffordshire { Combined Urban and Rural .. Urban .. Rural .. England and Wales ..		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	18.2	19.3	19.9
		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	18.2	19.4	19.6
		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	17.9	18.8	20.6
		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	17.4	18.4	17.2

DEATHS

The number of deaths in the Administrative County amounted to 10,378, the number in the Urban Districts being 7,790 and in the Rural Districts 2,588.

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	5 yrs. 1959- 1963	1964	1965
Staffordshire { Combined Urban and Rural .. Urban .. Rural .. England and Wales ..	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	9.6	9.7
	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	9.6	9.6
	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	9.9	9.4	9.8
	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	11.8	11.3	11.9

In the following table are shown the chief causes of death for 1965. The numbers given are 88.3 per cent of the total deaths.

TABLE SHOWING CHIEF CAUSES OF DEATH

Heart Disease	3,332
Cancer	1,890
Vascular lesions of nervous system	1,539
Bronchitis	673
Pneumonia	492
Other Circulatory Disease	401
Motor Vehicle Accidents	189
All other accidents	246
Congenital Malformations	144
Diabetes	86
Ulcer of Stomach and Duodenum	55
Nephritis and Nephrosis	47
Leukaemia, Aleukaemia	73

(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 ..	—	—	—	—	1	1	6	2	4	16	6	36
2. Tuberculosis, other ..	—	—	—	—	—	—	—	—	1	—	—	1
3. Syphilitic disease ..	—	—	—	—	—	—	—	1	2	8	1	12
4. Diphtheria ..	—	—	—	—	—	—	—	—	—	—	—	—
5. Whooping Cough ..	—	—	—	—	—	—	—	—	—	—	—	—
6. Meningococcal infections ..	1	1	1	—	1	—	—	—	—	—	—	4
7. Acute Poliomyelitis ..	—	—	—	—	—	—	—	—	—	—	—	—
8. Measles ..	—	—	1	—	—	—	—	—	—	—	—	1
9. Other infective and parasitic diseases ..	1	—	1	2	—	2	2	4	2	3	1	18
10. Malignant neoplasm stomach ..	—	—	—	—	—	2	4	27	79	107	68	287
11. Malignant neoplasm lung bronchus ..	—	—	—	—	1	—	16	81	187	131	37	453
12. Malignant neoplasm breast ..	—	—	—	—	—	2	13	37	47	36	51	186
13. Malignant neoplasm uterus ..	—	—	—	—	1	1	15	18	20	18	8	81
14. Other malignant and Lymphatic neoplasms ..	—	—	5	3	2	21	36	105	204	274	233	883
15. Leukaemia, aleukaemia ..	—	1	4	6	3	3	10	5	10	13	18	73
16. Diabetes ..	—	—	—	—	1	4	3	4	16	31	27	86
17. Vascular lesions of nervous system ..	—	1	—	—	4	9	16	53	221	437	798	1539
18. Coronary disease, angina ..	—	—	—	—	—	6	58	166	428	640	672	1970
19. Hypertension with heart disease ..	—	—	—	—	—	1	2	3	31	63	81	181
20. Other heart disease ..	—	1	1	—	5	6	20	44	110	234	760	1181
21. Other circulatory disease ..	—	—	—	1	1	4	11	15	61	104	204	401
22. Influenza ..	—	1	—	1	—	1	7	—	2	7	11	30
23. Pneumonia ..	6	38	8	1	6	4	11	18	48	102	250	492
24. Bronchitis ..	—	2	2	—	2	5	11	28	172	219	232	673
25. Other diseases of respiratory system ..	—	1	—	1	—	3	2	13	29	29	42	120
26. Ulcer of stomach and duodenum ..	—	—	—	—	—	1	2	2	14	15	21	55
27. Gastritis, enteritis and diarrhoea ..	1	6	4	—	—	1	—	1	10	10	13	46
28. Nephritis and nephrosis ..	—	—	—	1	2	5	4	8	8	10	9	47
29. Hyperplasia of prostate ..	—	—	—	—	—	—	—	—	1	14	31	46
30. Pregnancy, childbirth, abortion ..	—	—	—	—	1	1	—	—	—	—	—	2
31. Congenital malformations ..	81	28	12	8	2	—	5	2	4	1	1	144
32. Other defined and ill-defined diseases ..	193	24	8	9	10	17	32	64	81	127	237	802
33. Motor vehicle accidents ..	—	—	8	14	43	21	25	16	24	26	12	189
34. All other accidents ..	3	19	7	7	14	16	12	19	29	26	94	246
35. Suicide ..	—	—	—	—	7	10	15	21	19	14	2	88
36. Homicide and operations of war ..	—	1	—	—	1	—	1	2	—	—	—	5
Totals ..	286	124	62	54	108	147	339	759	1864	2715	3920	10378

The following table has been prepared covering the last 46 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 1965, 10.8 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
1965	5,569	678	12.17	4,809	440	9.15

CHEMICAL LABORATORY

The total number of samples examined was 9,421 which shows a drop of 8.1% when compared with the 10,252 samples examined in 1964. This reduction in samples examined was due to a complete failure to recruit qualified Assistant Analysts to succeed the four out of the nine such staff who left in October 1964. The proportion of samples from County Council sources was 69.8% while 21.8% came from the six other Food and Drugs Authorities served by the Laboratory and 8.4% came from various other Local Authorities within the County area and from private sources.

The estimated mid-1965 population of the area served by the Laboratory was 1,349,050 while that of the County Council's Administrative Area for the purpose of the Food and Drugs Act, was 787,690 showing an increase of 2.5% over the previous year. The total number of food and drugs samples examined for the County Council, excluding "Appeal-to-Cow" samples, was 5,420 which gives a sampling rate per 1,000 of population of 6.9 per annum. This compares with last year's figure of 6,378 samples and a sampling rate of 8.3 per annum.

Of the Food and Drugs samples examined for the County Council 137 or 2.5% received adverse reports as compared with 192 or 3.0% for the previous year. The 137 faulty samples included 42 milks and 95 other foods and drugs. Numerical details relating to these faulty samples are given in Table II. The adulteration rate for milk, at 1.0% is the lowest ever recorded by the Laboratory. The corresponding rate for other foods and drugs, at 7.7% is rather higher than usual.

Canned and open meat products again show higher than average rates of adulteration. It is hoped that the long-promised Regulations providing standards for such products will come into force shortly.

Efforts to increase the efficiency of Food and Drugs legislation have continued providing the usual increase in work required to be done on many of the samples examined. Last year's Regulations relating to Soft Drinks, Dried Milk and Mineral Hydrocarbons in Food came into full operation during the year and to these may be added the current year's Regulations relating to Cheese. The year is, however, most notable for its promise of future legislation. Nine of the present Regulations are to be revised and at least four new Regulations are visualised relating to imported foods and to various Meat Products. There is also a promise of a major change in the control of the sale of Drugs and it is possible that they will no longer be subject to the present Food and Drugs Act. It seems certain, however, that the Laboratory Facilities now available under the Food and Drugs Act will have to provide the analytical service required by any new Drugs Control Act.

With a serious shortage of staff throughout the year the work of the Laboratory had to be curtailed. The Government's restriction on expenditure also delayed the purchase of needed modern equipment. It was possible, however, to continue on a limited scale, the testing of milks for the presence of antibiotics. The results showed a considerable improvement over the previous year only six of the 145 samples tested as against 17 of the 110 samples tested in 1964 contained penicillin or other antibiotics.

Following such a year of limited activity it is a relief to be in a position to state that, in mid-1966, the staffing situation has improved. The modern equipment needed to enable the Laboratory to play its part in testing foods for pesticide residues has been provided and it is hoped to participate in a national scheme of testing which is now being prepared.

TABLE I

The total number of samples analysed was as follows:—

For County Council

Foods and Drugs Act, 1955	(a) Chief Inspector's Samples	...	2,813
	(b) County Health Inspector's Samples	...	2,607
	(c) "Appeal-to-Cow" Samples	...	44
Milks for Hypochlorite Test	...	...	511
Milks for Antibiotic Test	...	...	145
Fertilisers and Feeding Stuffs Act, 1926	...	...	160
Drinking Waters	...	...	29
Swimming Bath and Pool Waters	...	...	1
River and Stream Waters...	...	...	Nil
Sewages, Effluents and Trade Wastes	...	...	185
Miscellaneous Samples	...	...	78
			6,573

For City of Stoke-on-Trent

Food and Drugs Act, 1955, Chief Inspector's Samples	...	850
Fertilisers and Feeding Stuffs Act, 1926	...	22
Other Samples	...	63
		935

For Borough of Rowley Regis

Food and Drugs Act, 1955	(a) Chief Inspector's Samples	...	121
	(b) County Health Inspector's Samples	...	38
Other Samples	...	...	34
			193

For Borough of Newcastle-under-Lyme

Food and Drugs Act, 1955, Chief Inspector's Samples	...	184
Other Samples	...	57
		241

For Borough of Stafford

Food and Drugs Act, 1955, Chief Inspector's Samples	...	202
Other Samples	...	80
		282

For Urban District Council of Brierley Hill

Food and Drugs Act, 1955, Chief Inspector's Samples	...	162
Other Samples	...	30
		192

For Urban District Council of Cannock

Food and Drugs Act, 1955, Chief Inspector's Samples	...	173
Other Samples	...	41
		214

Other Authorities

...	...	791
TOTAL	...	9,421

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

TABLE II

SAMPLES	Number Examined			Number adulterated or below standard		
	Formal	Informal	Total	Formal	Informal	Total
Almonds, Ground	5	1	6	1	—	1
Baking Powder and Golden Raising Powder	4	—	4	—	—	—
Bread	8	2	10	1	—	1
Bun, Cake & Pudding Mixture	4	1	5	—	—	—
Butters	37	2	39	3	—	3
Cereal Products	16	4	20	1	—	1
Cheese and Cheese Products	18	9	27	—	1	1
Cocoa and Chocolate Preparations	6	—	6	—	—	—
Coconut	3	1	4	—	—	—
Coffee Ground	13	2	15	—	—	—
Coffee Extracts	6	1	7	—	—	—
Cream	4	1	5	—	—	—
Curry and Curry Powder	7	3	10	1	1	2
Custard Powder & Prepared Starches	6	2	8	—	—	—
Drinks, Alcoholic	32	—	32	—	—	—
Drinks, Non-Alcoholic	48	9	57	1	—	1
Drugs	20	18	38	1	—	1
Fats	27	1	28	3	—	3
Fish and Fish Products	20	15	35	1	1	2
Flavourings and Colourings	1	1	2	—	—	—
Flour, Self Raising	12	—	12	—	—	—
Flour, Plain, Various	9	—	9	—	—	—
Flour Confectionery	55	9	64	5	—	5
Fruit and Vegetables, Fresh	—	22	22	—	—	—
" " Dried, etc.	15	9	24	3	3	6
" " Canned	51	24	75	1	1	2
Fruit and Vegetable Juices	9	1	10	—	1	1
Fruit Curds	6	2	8	1	1	2
Foods, Baby and Tonic	4	—	4	—	—	—
Glucose	2	1	3	—	—	—
Gravy Browning and Salt	4	2	6	—	—	—
Gelatine	2	—	2	—	—	—
Herbs, Spices and Condiments	31	8	39	3	—	3
Ice Cream	7	—	7	—	—	—
Jellies	9	2	11	—	—	—
Margarine	13	—	13	2	1	3
Marzipan	4	1	5	—	1	1
Meat Products (Open)	93	11	104	12	2	14
Meat Products (Canned, etc.)	83	27	110	10	10	20
Milk, Condensed & Evaporated, etc.	14	8	22	—	—	—
Milk	229	3,950	4,179	23	20	43
Mince-meat	2	—	2	—	—	—
Oils, Refined and Salad	16	—	16	—	—	—
Pickles, various	9	2	11	—	—	—
Preserves	20	16	36	—	3	3
Potato Products	12	4	16	—	—	—
Puddings and Pies and Pie Fillings	25	7	32	—	—	—
Salad Cream and Mayonnaise	3	2	5	—	—	—
Sauces	12	10	22	—	1	1
Soups	36	17	53	3	1	4
Sugars	4	6	10	—	—	—
Sugar Confectionery	25	11	36	1	—	1
Sweet Spreads and Syrups	2	—	2	—	—	—
Tea	20	—	20	—	—	—
Vinegars	19	4	23	—	—	—
Unclassified	20	17	37	—	—	—
COMPLAINTS	—	12	12	—	12	12
Total	1,162	4,258	5,420	77	60	137

Figures for all official Food and Drugs samples reported against are given below with those for 1964. The "Appeal-to-Cow" samples are not included.

Total of Official Food and Drugs Samples

					<i>Number of Samples</i>	<i>Per Cent Adulteration</i>
1965	...	...	...	...	5,420	2.5
1964	...	...	...	...	6,378	3.0

Number of samples reported against—137

MILK

The figures for milk adulteration are shown below together with the corresponding figures for 1964.

					<i>Number of Samples</i>	<i>Per Cent Adulteration</i>
1965	...	...	...	...	4,179	1.0
1964	...	...	...	...	4,613	2.2

"Appeal-to-Cow" samples are not included

The average composition of the milks samples received during the year, including "Appeal-to-Cow" samples but excluding Channel Island milks is given below with the figures for 1964.

				<i>Number of Samples</i>	<i>Fat</i>	<i>Solids-not Fat</i>	<i>Total Solids</i>
1965	...	...	...	3,982	3.73%	8.59%	12.32%
1964	...	...	...	4,325	3.71%	8.66%	12.37%

The 3,982 samples of milk included 44 "Appeal-to-Cow" samples

The average composition of the Channel Island milks was as follows, with the corresponding figures for 1964.

				<i>Number of Samples</i>	<i>Fat</i>	<i>Solids-not- Fat</i>	<i>Total Solids</i>
1965	...	...	...	241	4.69%	9.08%	13.77%
1964	...	...	...	332	4.92%	9.06%	13.98%

Of the 4,179 samples of milk 42 were adulterated. Of the adulterated samples 8 contained added water ; 14 contained added water and were also deficient in fat ; 16 were fat deficient and 4 were deficient in both fat and solids-not-fat.

Adulteration of the various grades of milk was as follows :—

<i>Pasteurised</i>	...	Of 1,845 samples of milk 7 were adulterated. (0.4%)
<i>Sterilised</i>	...	All 225 samples satisfactory.
<i>Homogenised</i>	...	All 21 samples were satisfactory.
<i>Channel Island</i>	...	Of 241 samples 5 were adulterated. (2.1%)
<i>Untreated</i>	...	Of 1,847 samples 30 were adulterated. (1.6%).

Of the 3,901 samples of milk passed as genuine (excluding Channel Island) 72 (1.8%) were naturally poor in solids-not-fat the deficiencies being proved by the Freezing Point (Hortvet) to be due to natural causes; 16 (0.4%) were naturally poor in fat, the deficiencies being proved by the "Appeal-to-Cow" samples to be due to natural causes.

“Appeal-to-Cow” samples

These samples which are in addition to those listed in Table II totalled 44 and included 11 (25%) which were naturally poor in fat and 6 (18%) which were naturally poor in solids-not-fat.

OTHER FOOD AND DRUGS

Of the 1,241 samples submitted 95 received adverse reports. The percentage adulteration is shown below with the corresponding figures for 1964.

					<i>Number of Samples</i>	<i>Per Cent Adulteration</i>
1965	...	...	...	...	1,241	7.7
1964	...	...	...	...	1,765	5.1

SECTION II

FERTILISERS AND FEEDING STUFFS

FERTILISERS AND FEEDING STUFFS ACT, 1926

The 160 samples submitted under the above Act comprised 73 Fertilisers and 87 Feeding Stuffs.

FERTILISERS

Of the 73 samples examined 64 were satisfactory. The results of analysis of the remaining samples is given below.

TABLE III

<i>Number of Offences per samples</i>	<i>Nature of Offence</i>	<i>Number of Samples</i>
1	Deficient of nitrogen	1
1	Incomplete Statutory Statement	1
1	Excess of nitrogen	2
1	Excess of Potash	1
1	The amount passing through a prescribed sieve less than the amount stated	2
2	Deficient of soluble phosphoric acid and amount passing through a prescribed sieve less than the amount stated	1
3	Excess of nitrogen, a deficiency of potash and soluble phosphoric acid	1
	<i>Number of unsatisfactory samples</i>	9

FEEDING STUFFS

Of the 87 samples examined 74 were satisfactory. Results of analysis of the remaining samples is given below:—

TABLE IV

<i>Number of Offences per samples</i>	<i>Nature of Offence</i>	<i>Number of Samples</i>
1	Excess of Protein	6
1	Excess of Fibre	3
1	Excess of Oil	2
1	Deficiency of Oil	2
	<i>Unsatisfactory samples</i>	13

SECTION III

WATERS, SEWAGES, EFFLUENTS, AND TRADE WASTES ETC.

The 700 samples comprising this section included 270 Drinking Waters ; 281 Effluents etc ; 9 River and Stream waters; 134 Swimming Bath and Pool Waters and 6 for special analysis.

In addition to those samples submitted by the County Council Officers, samples were also received from 29 of the Local Authorities within the County Area, comprising, 14 Urban District Councils, 7 Rural District Councils, 6 Borough Councils and the Cities of Lichfield and Stoke-on-Trent.

DRINKING WATERS

270 samples were analysed during the year:—

- 146 for full analysis
 - 19 for full analysis and hardness
 - 1 for full mineral analysis
 - 5 for Lead content only
 - 6 for metals only
 - 51 for saline content only
 - 4 for oil content only
 - 1 for partial analysis and fluorine
 - 2 for pH, chlorine and chloride
 - 3 for fluorine only
 - 1 for pH and chlorine
 - 7 for pH and metals
 - 2 for pH and plumbo solvency
 - 22 for special analysis

Of the 270 samples of water analysed:—

- 133 were satisfactory
 - 2 were polluted with sewage
 - 12 were polluted with organic vegetable matter
 - 8 contained metallic contamination
 - 1 contained both sewage and organic vegetable matter
 - 1 was of doubtful quality
 - 3 were unsuitable for drinking purposes
- 110 were for special analysis

SWIMMING BATH AND POOL WATERS

2 Samples were submitted for full analysis

132 Samples were submitted for pH and chlorine only

RIVER AND STREAM WATERS

4 Samples were submitted for ordinary analysis

5 Samples were submitted for special analysis

SEWAGES, EFFLUENTS AND TRADE WASTES ETC.

254 Samples were submitted for ordinary analysis

27 Samples were submitted for special analysis

6 Samples of water were submitted for special analysis

SECTION IV

ATMOSPHERIC POLLUTION

The total number of samples examined in 1965 was 417 compared with 423 in 1964. This figure includes 264 Rain Gauges and 153 Lead Peroxide Cylinders. The results obtained in 1965 are in Tables V and VI. The Rain Gauge figures have been adjusted to a twelve month period where necessary and in both Tables the corresponding figures for 1964 are included for comparison. In Table V the highest and lowest monthly figures have been included to show the extent of the seasonal variation. The Rain Gauges and Lead Peroxide Cylinders from Area I were not submitted for several months in 1964 and the comparison with the more complete data in 1965 may be misleading.

Most Areas showing a large increase in Annual Deposit in 1963 showed a decrease in 1964. The decrease has continued in 1965 but the figures have not yet returned to 1962 levels. However, it is pleasing to note that in most areas where comparisons can be made over several years the sulphur pollution as determined by the lead peroxide method has decreased considerably since 1961. In particular in Area A the sulphur pollution figures are lower than those obtained in 1954.

TABLE V
LEAD PEROXIDE CYLINDERS

AVERAGE SULPHUR POLLUTION (mgm. SO₃/100 sq. cm/day)

Area	Site	1964	1965	Highest Month 1965	Lowest Month 1965
A	1	1.19	1.09	2.32	0.38
	2	2.18	1.88	4.03	0.80
	3	1.97	1.99	5.99	0.92
G	B	0.96	0.95	1.49	0.45
	I	1.41	1.28	2.57	0.42
	J	0.99	1.25	5.15	0.22
	K	1.27	0.95	1.44	0.45
H	D690	1.65	1.59	2.80	0.86
	D691	2.26	1.76	3.38	0.50
	D1330	2.26	1.75	3.05	0.50
I	1	1.15	0.77	1.44	0.36
J	1	2.20	2.16	4.10	1.07
N	1	1.47	1.28	2.03	0.55

TABLE VI

RAINWATER DEPOSIT GAUGES

Area	Gauge Number	Annual Rainfall		Annual Solid Deposit	
		(inches)		(Tons/sq/Mile)	
		1964	1965	1964	1965
A	G.D.6	20.30	23.63	209.8	213.2
	D1034	17.89	25.44	186.6	160.5
	D311	22.53	30.41	158.0	138.9
B	D312	21.58	29.53	172.6	150.5
	D150	21.99	27.98	200.3	174.8
C	D131	27.60	38.31	156.8	131.6
D	D353	19.47	27.68	176.8	164.9
	D354	17.90	23.96	151.0	148.2
E	D243	20.80	29.66	194.2	212.7
	D244	18.82	23.38	240.4	192.1
	D245	20.60	18.53	153.0	133.2
	D264	20.87	31.23	246.1	209.5
G	D349	16.07	26.63	217.8	289.6
	D351	17.56	22.73	184.1	170.1
	D352	16.37	23.12	195.7	236.4
H	D690	19.86	24.53	229.7	244.0
	D691	19.19	29.87	298.1	326.8
	D1330	19.08	27.85	692.7	740.9
I	D1387	19.86	27.10	162.3	186.3
J	D4465	19.97	27.17	207.7	221.8
L	D2291	30.59	35.22	793.0	588.0
	D4697	31.68	36.84	551.5	367.5
N	D3405	21.40	32.07	88.4	106.0

SECTION V

MISCELLANEOUS SAMPLES

The 254 samples in this section consist mainly of samples submitted as the results of complaints. They include 68 samples from County Council Departments ; 130 from County District and Other Authorities and 56 from private sources.

(a) OFFICIAL SAMPLES

The 68 samples from various County Council Departments included 19 foods of which 6 were connected with Laboratory investigations on routine samples and the remainder were connected with complaints or checks on specifications. Five samples of *Dried Milk* were rather below standard regarding solubility and a sample of *Liquid Milk* was found to contain 45% of added water. A fragment found in a *School Milk* was found to be a piece of quartz and not, as suspected, a fragment of glass. A further *School Milk* contained several pieces of foam rubber and a foreign body in a *School Meal* proved to be an earwig. The most interesting samples, analytically, was a sample of *Canned Pilchards* containing portions of suspicious-looking green material. This, however, proved to be due to contamination with diatomaceous material from the gut of the fish and not due to decomposition of the fish.

The remaining 49 samples include 36 samples of *Detergents* and other cleansers relating to the School Meals Service, samples taken under the Pharmacy and Poisons Act and the Merchandise Marks Act, a sample of *Gas Coke* for moisture content, a sample of *Anti-Freeze* and complaints and specification samples.

The 130 samples submitted by other Authorities in the County included 119 foods of which 114 were relating to complaints. Such complaints were confirmed in 88 cases. The bulk of these samples consisted of *bottles of milk* containing foreign matter, usually consisting of mould growth in bottles inadequately washed, and of *Bread* containing insects or grease and rust. The remaining 11 samples included a *Child's Toy Coffee Set* which was found to contain no significant quantities of toxic metals, deposits from kettles and a sample for identification ; sludges for the determination of manurial value and the remainder for identification or check against specification.

(b) PRIVATE SAMPLES

The 56 samples in this group included 45 foods. Eighteen of these consisting of *Milk and Cream* samples submitted by local producers. Three samples of *Pre-packed Peeled Potatoes* were examined for preservative content. Such potatoes are treated with sulphite preservative in order to delay development of discoloration but the amount of residual preservative allowed in the potatoes is, apparently, too small to allow for the effective application of this process. Sixteen samples of *Luncheon Meat and Tongue* were analysed for a local Hospital Board and the remaining food samples were concerned with complaints or investigations.

The other 11 samples consisted of *Cattle Foods*, *Deposits from Hot Water Systems*, *Petrol and Oil Mixtures*, and a few complaint samples.

MILK SUPPLY

The work of the Department in endeavouring to ensure a clean, wholesome and disease free milk supply throughout the County continued. Details of the sampling of milk from various sources are set out below.

MILK PASTEURISING AND STERILISING PLANTS

During the year, one new Dealer's (Pasteuriser's) Licence was issued and one dealer who held a similar licence from another authority was transferred into the County area following revision of boundary arrangements. This latter licence holder's premises were not satisfactory and following requests to improve matters, he decided to go out of business.

The position at the end of the year, therefore, was:—

1 firm held a Dealer's (Pasteuriser's) and a Dealers (Steriliser's) Licence

1 firm held a Dealer's (Pasteuriser's) Licence

1 firm held a Dealer's (Steriliser's) Licence

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

The modern very high speed machines used for crating, de-crating, washing and filling of milk bottles make the detection of faults, such as foreign bodies in bottles and bottles which have not been thoroughly cleansed, almost impossible. One firm is using plant which is capable of filling and capping bottles at the rate of 300 per minute. It may be argued that the presence of, say, a bottle cap or a dirty mark on the inside of a bottle may be harmless after the bottles have passed through the washing and sterilising machines, but, nevertheless, the fact that this type of offence can occur much more frequently than in times past, due to the use of high speed machines, is unsatisfactory, because it does indicate a lack of supervision and/or the washing machine is not effective.

It is also aesthetically a poor advertisement for "fresh clean milk" and finally it is against the law which requires vessels into which milk is put shall be clean.

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:—

Dealers' (Pre-packed Milk) Licences	...	...52	(1680)
Dealers' (Untreated Milk) Licenses	...	... 1	(7)

Samples of washed bottles were taken regularly from the seven premises bottling Untreated 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 street or 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.

As from 1st January 1965 the words "Tuberculin Tested" as applied to raw milk disappeared under the Milk (Special Designation) Regulations, 1963. From that date the only designations for milk were "Untreated" (which replaced the old "Tuberculin Tested,") "Pasteurised" and "Sterilised."

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.

Details of the samples collected, together with the results of the various test applied thereto, are set out in Table I. This table deals only with street or retail milks, samples from schools and various other institutions are shown separately in Tables III and IV.

The results shown in Table I indicate that 95.4% of the samples were satisfactory on the Methylene Blue Test.

The results of the Phosphatase Test on Pasteurised milk were exceptionally good, only 6 samples failing out of a total of 3234 samples examined, i.e. in 99.8% of the samples the milk was shown to have been adequately heat treated.

BIOLOGICAL TESTING

Four hundred and four samples of retail milk were submitted for biological examination for the presence of tubercle bacilli and also for *Brucella* infection. A bulked sample of milks taken from one producer who was a retailer as well as a school supplier, was found to be tubercular positive. No positive samples were reported from any outside Authority in respect of milk produced within the Administrative County.

The finding of a positive T.B. sample was remarkable in that the last positive street milk sample was taken by this Department in October, 1959 and the last school milk found to be positive was taken in 1954.

Despite intensive investigations by the Ministry of Agriculture, Fisheries and Food, Divisional Veterinary Department, the offending animal or animals could not be found.

Sixteen samples were reported to be infected with *Brucella abortus* (three of the samples were produced outside the Administrative County.) Appropriate action was taken.

TABLE I
SUMMARY OF RETAIL MILK SAMPLES COLLECTED (i.e. EXCLUDING SAMPLES FROM SCHOOLS, INSTITUTIONS, &c.)
1st JANUARY to 31st DECEMBER, 1965

Type 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	% 1965	% 1964	Samples Examined	Result	Examined Positive	% 1965	% 1964
Untreated	825	27	798	Passed 728 Failed 70	91.2	88.3	—	—	404 { T.B. 1* 0.2 B.A. 16 4.0	0.2	Nil
(Biological Test only)	37	—	—	—	—	—	—	—		4.0	1.5
Pasteurised	3,234	164	3,070	Passed 2961 Failed 109	96.4	96.1	3234	Passed 3228 Failed 6 % Satis. 1965 99.8 1964 99.7	—	—	—
Sterilised	1,221	—	—	—	—	—	—	1,221 Passed	—	—	—
TOTALS	5,317	191	3,868	Passed 3689 Failed 179	95.4	94.6	—	—	—	—	—

* Note This was a bulked sample of milk from 4 schools, 3 canteens and 1 street sample all supplied by the same producer/retailer.

INFORMAL FOOD AND DRUGS SAMPLING

Not included in the tables of milk samples collected is a total of 2,645 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.

Fifteen samples were reported unsatisfactory as follows:—

<i>Retail</i>	7 Untreated	(6 deficient in fat 1 deficient in fat and solids-not-fat)
	2 Untreated (Channel Island)	(Deficient in fat)
	3 Pasteurised	(Deficient in fat)
<i>Schools</i>	1 Untreated	(Deficient in fat)
	2 Pasteurised	(deficient in solids-not-fat and containing added water)

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

8 Untreated	Genuine
4 Pasteurised	Genuine
2 Untreated	Deficient in fat. Proved by "Appeal to Cow" to be nat- urally poor.
1 Pasteurised	Added Water. Deficient in fat. In his report the Chief Inspector of Weights and Measures states that this offender was cautioned.

PRESENCE OF HYPOCHLORITES IN MILK

Five hundred and eleven samples of milk, as shown below, were examined for the presence of hypochlorite residuals. One (Pasteurised) was found to be unsatisfactory, the presence of hypochlorite being detected. The result was notified to the processor and the Medical Officer of Health of the district where the milk was processed—which was outside the Administrative County.

Untreated	...	...	...	201
Untreated (Channel Island)	...	...	...	38
Pasteurised	...	...	...	170 (1 unsatisfactory)
Pasteurised (Channel Island)	...	...	...	60
Sterilised	...	...	...	42
Total	...	...	...	511

MILK IN SCHOOLS SCHEME—GENERAL

At the end of the year under review, the position regarding the numbers of school children receiving milk and the type of milk supplied under the Milk in Schools Scheme to the various schools in the Administrative area (excluding Newcastle Excepted District) was as shown in Table II.

TABLE II

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. (Not sampled by Staffs C.C.)		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	575	4	98	114,978
Untreated	6	12	—	—	184
Total	32	587	4	98	115,162

NON-MAINTAINED SCHOOLS

Pasteurised	8	25	4	4	3,625
Untreated	1	1	—	—	101
Total	9	26	4	4	3,726
Totals for all schools	41	613	8	102	118,888

All the 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.

SAMPLING

School milks supplied 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 the Methylene Blue test for cleanliness.

Where samples are repeatedly unsatisfactory alternative suppliers are found.

The results of the samples taken from schools are shown in Table III.

TABLE III

<i>School Milk</i>	<i>Samples Examined</i>	<i>Passed</i>	<i>Failed</i>
Methylene Blue Test	918 (excluding 50 void due to high atmos- pheric shade temper- ature)	902	16 (5 Untreated 11 Pasteurised)
Phosphatase Test	917	917	Nil
Biological Examination:			
(a) Tubercle bacilli	38	(a) 37	(a) 1*
(b) Brucella abortus		(b) 38	(b) Nil

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.

* It should be noted here that the positive T.B. milk sample reported under the heading "Biological Test" in Table III was made up of bulked samples from four schools, three canteens and one retail or street sample—all supplied by the same producer/retailer.

It was not possible to say which of the eight separate samples was positive so it is not possible to say if the school or retail or both deliveries were infected. As a precaution, however, the supply of milk to the schools and canteens from this particular producer was stopped forthwith and an alternative supply arranged. Unfortunately, as before mentioned, the actual cow or source of infection was not found. Subsequent samples taken by this Department from the herd have been found to be clear.

No evidence of *Brucella abortus* was found in milk supplied to schools but two retailers whose retail milk was found to be affected and who also supplied a school or schools, were stopped from supplying milk to the schools as a precautionary measure and until the herds from which the milk was obtained were free of infection. Five cows which reacted were removed from one herd. Later samples taken from both herds by this Department were free of infection and in one case the supply to the schools has been resumed.

GLASS ETC. IN SCHOOL MILK BOTTLES

Eleven incidents of glass in school milk bottles were reported to the Department during the year, as well as twenty complaints concerning foreign bodies in milk bottles, dirty or damaged bottles. All were fully investigated and the matters taken up with 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 nine samples were taken (40 Untreated, 768 Pasteurised and 1 Sterilised) the reports on which are summarised in Table IV.

TABLE IV

<i>School Canteens, Hospitals, etc.</i>	<i>Samples examined</i>	<i>Passed</i>	<i>Failed</i>
Methylene Blue Test	759 (excluding 49 void due to high atmos- pheric shade temper- ature)	737	22 (6 Untreated 16 Pasteurised)
Phosphatase Test	768	768	Nil
Turbidity Test	1	1	Nil
Biological Examination (a) Tubercle bacilli (b) Brucella abortus	35	(a) 34 (b) 35	(a) 1* (b) Nil

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

*This is the positive T.B. sample already referred to in Tables I and III.

TESTING FOR ANTIBIOTICS IN MILK

Following the report of the Milk Hygiene Sub-Committee of the Milk and Milk Products Technical Advisory Committee in 1963 on Antibiotics in Milk in Great Britain and, later, the issue of Circular FSH 15/64-Antibiotics in Milk- by the Ministry of Agriculture, Fisheries and Food, in which the Ministry supported the recommendation that the Food and Drugs Authorities should be encouraged to sample and test ex farm milk for antibiotics, this Department took over the work from the Weights and Measures Department and started a series of tests and investigations.

The report recorded the unanimous view of the medical experts who were consulted, that the presence in milk of any antibiotic was undesirable.

The tests for antibiotics are capable of detecting penicillin down to a level of 0.05 international units per ml. and are also sensitive to other inhibitory substances.

In 1965, 136 samples of milk were taken from producer/retailers and from a dairy receiving milk for processing. Three samples were found to contain, in each case, traces of antibiotics equivalent to 0.03 international units per ml. and were all from producer/retailers.

Follow-up action was taken in each case and investigations into the whole field of antibiotics detection is still proceeding.

SUMMARY

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

Retail ("Street" Milks)	...	...	5,317
Schools	...	...	968
School Canteens	...	...	444
Hospitals, Homes &c.	...	...	365
"Food and Drugs" (Milk)	...	...	2,645
"Hypochlorites"	...	...	511
"Antibiotics"	...	...	136
			10,386

MISCELLANEOUS MATTERS

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

Due to the increase of works in other directions a diminution in the number of visits and samples with regard to sewage disposal works and effluents, both of County Council and Local Authority installations, reported last year, has occurred. The same remarks apply to school swimming baths and drinking water supplies, though efforts are made to give these some priority.

A start has been made on internal inspection of County Health Department premises under the Offices, Shops and Railway Premises Act.

No review of sanitary conditions in County districts has been made during the year.

The relationship between District Councils' Health Departments, Surveyors' Departments and the County Health Inspectorate continues to be excellent and is one which makes for close co-operation in all aspects of the work falling within their respective provinces.

SCHEMES OF WATER SUPPLY, SEWERAGE AND SEWAGE DISPOSAL

For the financial year 1965/66 a sum of £150,199 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 £31,559 and sewerage and sewage disposal schemes estimated to have cost £1,639,845 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

Uttoxeter Urban District

Cullamore Lane Water Main Extension

This scheme, estimated to cost £6,903, is to extend a water main from a point near Blounts Green, along Cullamore Lane and Wood Lane. Existing well and spring supplies are known to be unfit. The scheme will provide for some 21 agricultural properties and 22 domestic properties in the Urban and Rural District.

The scheme was recommended for approval.

Cannock Rural District

Bednall Head Water Supply Scheme

This scheme, estimated to cost £9,656, is an amended scheme following suggestions made by this Department to improve the original proposals. The amended scheme provides for a larger number of properties and for spare reservoir storage capacity for all the properties served should the electricity supply fail and the pumps be thereby out of action.

The scheme was recommended for approval.

Leek Rural District

Eastern Parishes Water Supply—Section A(2)—Extension to Grindon Moor

This scheme, estimated to cost £15,000, forms part of the overall major scheme of water supply for the Eastern Parishes of the Leek Rural District, approved by the County Council in March, 1949. The Grindon Moor extension will provide for some 14 properties, principally farms. The average cost of the property, about £1,070, is very high but if these particular properties are to have a water supply at all the high cost is inevitable.

The scheme was recommended for approval.

Coseley Urban District

Sewage Disposal Works Extensions—Stage I

Consists of the construction of 2 new humus tanks to replace the existing ineffective and rapidly deteriorating tanks, a new pumping station with ancillary equipment and the piping in of a section of Swan Brook on the works site.

The estimated cost is £65,000.

There is no doubt about the need for the proposals and in the absence of any major Tame Valley trunk sewer proposals, the scheme was recommended for approval.

Kidsgrove Urban District

Reconstruction of Red Bull Sewage Disposal Works—Stage II

This scheme, estimated to cost £208,900, comprises the second stage of extensions to the Kidsgrove Urban District Council's Red Bull Sewage Disposal Works. The first stage of the extensions was completed a few years ago. The proposed extensions include provision for sludge elutriation and pressing in order to deal with the difficult sludge disposal problem at these works. Subject to certain items being deleted from the cost—they were considered items which should properly be dealt with under the heading of 'Maintenance' on the existing works—the scheme was recommended for approval.

Lichfield City

Surface Water Sewer - Burton Old Road

This scheme, estimated to cost £6,050, is to provide a surface water sewer designed to accept the run-off from an area bounded by the Trent Valley Road, Burton to Birmingham railway line and Crossfield Road. The object is to divert as much surface water as possible from the foul sewers.

Reconstruction of Manholes in Town Centre

This scheme, estimated to cost £15,000, involves the separating of storm water and foul sewerage in the Sandyford Street to St. Chad's Church area. Existing sewers are very old and so arranged that the foul sewer is immediately below the storm water culvert access to both being gained through combined manholes. Storm water is taken through the manholes in a metal trough which, in times of storm, overflows into the foul sewer below causing considerable surcharging. The scheme is to by-pass the dual manholes with 39" and 36" diameter concrete pipes to deal with the surface water and the scheme also includes the construction of new storm water manholes.

Both the above schemes form part of the overall scheme for the reconstruction of the sewerage arrangements in the City of Lichfield and were recommended for approval.

Storm Water Outfall Sewer - Netherstowe

This scheme is to provide for the construction of a length of 72" diameter storm water outfall sewer with a storm overflow manhole on the existing foul sewer, together with alterations through the open channel culverts adjacent to St. Chad's Church and the railway embankment.

Also included in the scheme is an item for the cleaning out of the Curborough Brook below the outfall culvert. The existing brook course in the Netherstowe area is prone to flooding which will inevitably become worse as development proceeds upstream. The proposals are meant to obviate nuisances caused thereby and the storm overflow is to relieve the sewage disposal works from excessive loading during periods of storm. The capital cost of the scheme, estimated to be £45,750, also forms part of the overall scheme for the reconstruction of the sewerage arrangements in the City of Lichfield. The scheme was recommended for approval.

Stafford Borough

Brancote Sewage Disposal Works Extensions

This scheme, at present estimated to cost £600,000, is to provide extensions to the Stafford Borough sewage disposal works and includes the provision of sludge pressing equipment, mains electricity supplies and workshop facilities.

Stage I of the scheme, estimated to cost £357,000, will be carried out on land already owned by the Council and is to provide for some 67,200 population by 1972/73, with a dry weather flow of 3.68 million gallons per day based on a projected sewage flow to the works of 54.8 gallons per head of population per day.

Stage II of the extensions which the Borough Council have in mind will require the purchase of extra land.

Stage I of the scheme was recommended for approval and Stage II was recommended for approval in principle only.

Stone Urban District

Stafford Road Sewage Disposal Works and Pumping Station, West-Bridge Park - Extensions

This scheme, estimated to cost £368,700, is to provide considerable extensions and improvements to the existing Stafford Road, Stone sewage disposal works - these are grossly overloaded - and to the Westbridge Park pumping station which is also unable to deal adequately with the volume of sewage it receives. Included in the scheme is a new 21" rising main and a 30" outfall effluent drain. There is no doubt an urgent need for the works extensions and improvements to the pumping arrangements to deal with the full volume of sewage, some of which is now only receiving partial treatment or is passing over storm overflows on the lines of sewers without proper treatment. Subject to some comments on the siting of proposed sludge drying beds, the scheme was recommended for approval.

Cannock Rural District

Lapley Sewerage and Sewage Disposal Scheme

This scheme, estimated to cost £26,200, is to provide a sewerage and sewage disposal scheme for the village of Lapley. It will replace an existing Council house sewage disposal works and a tank giving partial treatment to sewage from other properties. There are no proper sewerage arrangements in the village and considerable pollution of ditches is obvious. A built-in mechanical type of plant is proposed, which will be the first of its kind to be provided in this area by a local authority under the Rural Water Supplies and Sewerage Acts. This Department will regard the plant as experimental and it is considered the layout of the works should be such that a conventional type of plant can be substituted later if found necessary. Subject to a suggestion that a small extension should be made to deal with certain properties, the possibility of a much shorter length of outfall pipe from the works, and some savings on the construction of man-holes being considered, the scheme was recommended for approval.

Cheadle Rural District

Ostlers Lane, Cheddleton - Sewer Extension

This scheme is to provide a small sewer extension adjoining Ostlers Lane, with the object of connecting 5 properties to the main sewer. Complaints have been made regarding smell and the discharge of effluent on to the adjoining fields. The net capital cost of the scheme after deducting contributions totalling £170 from property owners, is £1,910 and the scheme was recommended for approval.

Totmonslow, Tean - Sewerage Scheme

This scheme, estimated to cost £5,200, is to provide a sewer extension to enable 9 properties, at present served by septic tanks which give rise to nuisances, to be connected to the Blythe Valley Trunk sewer. The owners of the properties concerned have requested the connection and have offered a contribution of £500 towards the cost. The estimated net cost of the scheme is, therefore, £4,700. The scheme was recommended for approval.

Waterhouses - Sewerage and Sewage Disposal Scheme

This scheme, estimated to cost £98,500, is to replace an earlier scheme of sewerage and sewage disposal which dealt with the Waterhouses area. The amended scheme takes in the village of Cauldon and the Hoftens Cross area and arises out of this Department's suggested investigations into the outfall from a proposed sewerage scheme at Hoftens Cross. The investigations showed there was possibility of water supplies being polluted and, accordingly, this amended scheme was put forward to deal with the whole of the sewage in the area at the Waterhouses proposed disposal works. This Department also suggested further extensions to the scheme to serve various properties in the Cauldon area and subject to these points, the scheme was recommended for approval.

Whiston - Sewerage Scheme

This scheme, estimated to cost £34,000, is to provide a sewerage scheme for the rather scattered area of Whiston, Whiston Brook and Lees. The sewers will be connected to the recently extended sewage disposal works at Froghall. There are no proper sewerage facilities in the area, except for a small plant for 6 Council houses and the school canteen. There are proposals for a new primary school to be built in the area as well as some 20 or 30 new houses. The scheme was recommended for approval.

Lichfield Rural District

Elford - Sewerage and Sewage Disposal Scheme

This scheme, estimated to cost £49,100, is to provide a sewerage and sewage disposal scheme for the village of Elford where no proper sewage disposal facilities exist at the present time. Ninety-four existing and eighty-four future houses are provided for in the scheme as well as the school, public house, hall and club. The scheme was recommended for approval.

Seisdon Rural District

Codsall - Sewage Disposal Works Extensions

This scheme, estimated to cost £198,035, is to provide extensions to deal with the overloaded Codsall works at Bilbrook. It includes the provision of a balancing tank as well as sludge pressing machinery in lieu of drying beds.

The scheme was recommended for approval.

Uttoxeter Rural District

Bramshall - Sewerage and Sewage Disposal Scheme

This scheme, estimated to cost £45,500, provides for the sewerage of the village of Bramshall, the proposals being to drain the village area to a trunk sewer communicating with the Uttoxeter Urban District sewerage system. Part of the sewage will require to be pumped due to the contours of the ground. The trunk sewer has been enlarged at an additional cost of £2,400 towards which the Uttoxeter Urban District Council have agreed to make a contribution since the enlarged sewer will also be able to cater for proposed development within the area of the Urban District.

The scheme was recommended for approval.

Marchington and Draycott-in-the-Clay - Sewerage and Sewage Disposal Scheme

This scheme, estimated to cost £115,000, is to provide a joint sewerage and sewage disposal scheme for the villages of Marchington and Draycott-in-the-Clay. The sewage disposal and treatment section of the scheme is provided for by the Rural District Council acquiring and extending an existing sewage disposal works known as the Eastern Disposal Works at present in the ownership of the War Department. The cost of the disposal works is not included in the figure quoted above. Provision is made in the scheme for dealing with sewage from the War Department's Western Camp, which will eventually be abandoned, probably in 10 to 15 years time. The scheme involves a considerable amount of pumping owing to adverse ground conditions but it is felt the principle of one central sewage disposal works outweighs this disadvantage. Subject to further discussion on possible future population figures, the scheme was recommended for approval.

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

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.

- | | |
|----------------|--|
| 11.3.65 | Leek Urban District—Ministry Inquiry with regard to the Cheddleton Heath Sewerage Scheme. |
| 25.5.65 | Leek Rural District—Ministry Inquiry into the Endon Sewerage and Sewage Disposal Scheme. |
| 26 and 27.5.65 | Uttoxeter Rural District—Ministry Inquiry into the Bramshall, Marchington and Draycott Sewerage and Sewage Disposal Scheme. |
| 16.9.65 | Seisdon Rural District—Wombourn—Ministry Inquiry into the Codsall Sewage Disposal Works Extensions. |
| 17.9.65 | Stafford Borough—Ministry Inquiry regarding extensions to Stafford Borough Brancote Sewage Disposal Works. |
| 29.9.65 | Biddulph Urban District—Ministry Inquiry regarding extension to the Urban District Council's sewage disposal works. |
| 14.10.65 | Lichfield Rural District and City. This was a planning appeal regarding the siting of slaughterhouses in both the City and Rural District areas. |

PREVALENCE OF, AND CONTROL OVER, INFECTIOUS DISEASES

The following statistics relate to the notifiable infectious diseases among the home population during the calendar year 1965. On reference to the tables at the end of the Report the numbers and attack-rates for each Sanitary District will be found.

SMALLPOX—No case of smallpox was notified in 1965. The last cases recorded were in 1947 when an outbreak occurred in the south of the County mainly in Bilston.

SCARLET FEVER—There was an increase in the incidence of this disease, 585 cases having been notified compared with 309 in 1964. In the Urban Districts there were 471 cases and in the Rural Districts 114, as against 215 and 94 respectively in the previous year. The case-rates per thousand of the population were :—Urban Districts 0.58, Rural Districts 0.43, with a total County Rate of 0.54, whilst that for England and Wales was 0.43. The corresponding rates for 1964 were 0.28, 0.35, 0.29 and 0.37 respectively.

DIPHTHERIA—For the fourth successive year no case of diphtheria was notified in 1965. The last deaths from this disease were two in 1955 when 29 cases were notified.

ENTERIC FEVER—Seven notifications of enteric fever were made during the year compared with four in 1964. All were of paratyphoid. Six cases occurred in Urban Districts and one in a Rural District.

The 1965 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, 10,642 notifications were made, which indicates an appreciable increase, for the corresponding figure for 1964 was 5,045. Seven thousand six hundred and seven cases occurred in Urban and 3,035 in Rural Districts, compared with 3,899 and 1,146 in the previous year. The 1965 case-rates for the County and England and Wales were 9.92 and 10.6 as against 4.81 and 6.47 in 1964.

One death occurred. There were two deaths in 1964.

WHOOPING COUGH—There was a decrease in the number of notifications, 185 being made in 1965 as compared with 742 in 1964. In Urban Districts there were 131 as against 552 whilst the corresponding figures for the Rural Districts were 54 and 190. The case-rate for the County was 0.17 and for England and Wales 0.27.

There were no deaths during the year compared with three in 1964.

FOOD POISONING—Thirty-seven notifications were made in 1965 compared with 92 in 1964. Seventeen County Districts were affected as against 15 last year.

DYSENTERY—Four hundred and seventy-six notifications were made in 1965 as compared with 283 in 1964, 470 in 1963, and 860 in 1962. Twenty-eight of the Sanitary Districts were affected but in five instances, viz, Rugeley U.D., Sedgley U.D., Tamworth M.B., Uttoxeter U.D. and Willenhall U.D., single cases only were notified.

Cases notified in other districts were as follows :—

Aldridge U.D. 66, Biddulph U.D., 5, Bilston M.B., 5, Brierley Hill U.D., 26, Cannock U.D., 9, Kidsgrove U.D., 3, Leek U.D., 3, Lichfield M.B., 7, Newcastle M.B., 43, Rowley Regis M.B., 3, Stafford M.B., 3, Tipton M.B., 13, Wednesbury M.B., 11, Wednesfield U.D., 5, Cheadle R.D., 53, Leek R.D., 2, Lichfield R.D., 6, Newcastle R.D., 3, Seisdon R.D. 7, Stafford R.D., 4, Stone R.D., 2.

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.

One case of acute poliomyelitis was notified as against none in 1964. Two cases of acute encephalitis were notified compared with seven last year. There were no deaths from the disease.

MENINGOCOCCAL INFECTION—Six notifications (3 in 3 Urban areas and 3 in separate Rural Districts,) were made during 1965, compared with 8 in 1964. Four deaths were recorded (2 in Urban and 2 in Rural Districts). In the previous year there were also four deaths of which two were in Rural Districts.

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

GASTRITIS, ENTERITIS AND DIARRHOEA—Five deaths occurred in Urban Districts and two in Rural Districts in children under one year of age, the death rates being 0.31 and 0.37 respectively per thousand live births. The figures for 1964 were 5, 2, 0.59 and 0.59 respectively.

INFLUENZA—In 1965 there were 25 deaths in Urban and 5 in Rural Districts, as compared with 29 and 5 respectively in 1964.

The number of cases of notifiable infectious diseases, with the deaths, in the Administrative County during 1965 are as follows:—

Diseases	Notifications		Deaths	
	Urban	Rural	Urban	Rural
Smallpox	—	—	*	*
Scarlet Fever	471	114	*	*
Diphtheria	—	—	—	—
Enteric Fever	6	1	*	*
Measles	7,607	3,035	1	—
Whooping Cough	131	54	—	—
Puerperal Pyrexia	23	5	*	*
Erysipelas	18	4	*	*
Meningococcal Infection	3	3	2	2
Acute Poliomyelitis (Paralytic)	—	1	}	—
Acute Poliomyelitis (Non-Paralytic)	—	—		
Acute Encephalitis (Infective)	2	—		
Acute Encephalitis (Post Infectious)	—	—		
Pneumonia	84	62	341	151
Dysentery	399	77	*	*
Food Poisoning	24	13	*	*

*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:—

1965	AGE PERIODS	NEW CASES				DEATHS			
						Pulmonary		Non-Pulmonary	
						M.	F.	M.	F.
0—	..	..	..	1	2	—	—	—	—
1—	..	..	..	1	1	—	1	—	—
2—	..	..	..	10	5	1	—	—	—
5—	..	..	..	4	4	—	1	—	—
10—	..	..	..	3	3	1	—	—	—
15—	..	..	..	10	2	1	5	}	1
20—	..	..	..	9	7	5	2		
25—	..	..	..	25	14	2	6	1	—
35—	..	..	..	19	11	6	4	3	3
45—	..	..	..	31	9	3	1	2	—
55—	..	..	..	28	9	—	2	3	1
65—	..	..	..	13	3	1	—	15	1
75 and upwards	..	..	..	5	1	—	1	4	2
Age unknown	..	..	..	—	—	—	—	—	—
Totals	..	..	..	159	71	20	23	28	8
								—	1

During 1965, 36 deaths occurred from pulmonary tuberculosis and one from other forms of this disease, the death-rates being 0.03 and 0.00 respectively. The corresponding rates for 1964 were 0.03 and 0.00 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			
	Pulmonary Tuberculosis		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
1965	0.03	0.03	0.00	0.00

NOTIFICATION

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

1918	1919	1920	1921	1922	1923	1924	1925	1926	1927	1928	1929	1930	1931
856	699	642	929	971	10,29	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	1965								
415	383	342	321	311	273								

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
1965	230	43	273	0.21	0.04	0.25

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
6,844	3,233	2,491	5,724	541	579	1,120

The figures given above indicate that in 1965 there was one case of tuberculosis in every 156 persons, or 6.3 per 1,000 of the population.

The table also shows that in 1965 there was one death in approximately every 185 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.

Ninety-one 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

In August 1965 the Headquarters and the static 100 m.m. unit moved into the newly opened Central Out-Patients' Department of the North Staffordshire Hospital Centre. The 100 m.m. unit is now situated in a very convenient position in the main waiting hall of the Out-Patients' Department. In order to cope with the increased number of patients the 100m.m. sessions were increased from 7 to 11 per week. On the other hand the primary large film sessions for Ante-Natal cases and children had to be reduced from 2 to 1 session weekly. However, as the service for Ante-Natal cases has now been limited to selected cases sent by general practitioners, this has proved sufficient even during the winter months.

Apart from the new scheme of routinely x-raying certain out-patients, the new location of the service's headquarters, especially the easy access to laboratory facilities and the close vicinity of other departments, has its great advantages. These are likely to be enhanced if and when the main chest clinics in the area eventually move into the Out-Patients' Department.

The number of primary X-rays taken by the static unit rose by about 2,000 compared with 1964. This was mostly due to the x-raying of new out-patients during the last three months of the year. The mobile unit x-rayed 6,000 persons less than during the previous year as a result of giving preference to the x-raying of smaller selected groups and of prolonging the intervals between routine industrial surveys.

Respiratory Tuberculosis

The number of cases in need of active treatment and/or close supervision was considerably lower than in 1964, (94 as against 133.) The lower case-finding rates were noticeable in most groups. After the steep rise in 1964 the number of cases has now fallen to the level of 1963. Just the same the figures clearly show that in many places of the unit's operational area tuberculosis has remained a problem and its eradication is still a distant goal. During the year the unit contributed 41% of the newly notified cases (during life) in Stoke and 34% in Newcastle.

It must again be stressed that compared with most other industrial areas in the Midlands, North Staffordshire has a very low proportion of immigrants from Asia, especially from Pakistan. Some General Practitioners do their best to send their immigrant patients for regular routine X-rays, but the total number of Asian immigrants X-rayed in 1965 was only 290. The high case-finding rates in this group, need no comment.

During the past 13 years the service detected 2,238 cases of clinically significant tuberculosis in Staffordshire and Shropshire.

Pneumoconiosis

The favourable trend with regard to newly detected cases of pneumoconiosis in North Staffordshire which had been apparent for some years, seems to continue. Only 186 cases were found compared with an annual mean of 383 during the previous five years. The very marked decrease in coal miners was probably influenced by the absence of pithead surveys in 1965, but evidence from other sources, such as the Annual Reports of the National Coal Board and the Ministry of Pensions and National Insurance suggest that the attack rates of the disease are now gradually on the decline. Apart from the improved conditions underground, the marked contraction of the industry and the decrease in manpower are likely to contribute to lower numbers in the future.

There can be little doubt that the falling rates in the local pottery industry are factual and not only a statistical freak. One hopes that not only the radiological and clinical diagnoses but also the annual statistical evaluations, provided by the Mass Radiography Service have contributed to the improved working conditions in many factories.

It should also be mentioned that of the 169 "new" cases of simple pneumoconiosis, 73 men and women had never been x-rayed before. Most of them were above the age of 50 and may therefore have acquired the condition under industrial conditions which have now considerably changed. The respective figure for Progressive Massive Fibrosis was 11 or more than half of the total of "newly" detected cases.

Bronchogenic Carcinoma

118 cases were detected during the year, 19 more than in 1964. **For the first time in the unit's history there were more cases of lung cancer than of active tuberculosis.** The proportional increase in women was higher than in men and with a very few exceptions all patients were smokers of cigarettes. The resectability rates remained at the deplorably low levels of previous years i.e. 23.7%.

There is only one faint glimmer of hope. Statistics show that the proportion of men under the age of 54 years in whom lung cancer was diagnosed has been slightly decreasing since 1957. This, although based on relatively small figures, is in accordance with the findings by Springett (1966, Thorax, 21,132) who suggested that the maximum of mortality from lung cancer is gradually shifting to higher age groups.

WOLVERHAMPTON MASS RADIOGRAPHY UNIT

In 1965 the mobile unit visited all parts of the four counties which make up its parish. Maximum coverage was given to the highly industrialized areas of Staffordshire, but the rural areas of Herefordshire, Shropshire and Worcestershire were also included. The static 100mm. unit again examined the high risk groups of general practitioner referrals, contacts, tuberculin positive children, etc.

SURVEYS AT BASE

The numbers fell slightly compared with 1964, but over recent years have averaged about 16,500. Twice weekly sessions were held for general practitioner referrals and one day set aside each week for x-raying antenatal patients on large film. Patients with acute inflammatory abnormalities were usually recalled for further 100mm. review without clinical examination.

TUBERCULOSIS IN THE AREA

The rate per thousand fell compared with 1964 but was still 1.3, while the combined rate for those requiring close review and those requiring occasional review was 3.7. From April 1965, new immigrant arrivals were referred for x-ray from several sources, mainly from the Medical Officer of Health, and the rate of 6.0 per thousand demonstrates the value of these examinations. In subsequent years it is hoped to repeat the chest x-rays of as many new immigrants as can be traced by the health visitors and thus estimate the attack rate after arrival in this country. Frequent changes of address will, however, make this difficult but it is hoped to contact at least 50%.

TUBERCULOSIS AMONG ASIANS

During the year the number of Asians x-rayed was 3,034. The active rate among general practitioner referrals was 26.2 per thousand representing 13 cases in 497 patients, and the overall rate for the total was 7.6 per thousand.

The Public Health Laboratory at Stafford examined most of the sputum specimens sent by patients from home and 57% of active cases had sputum which was positive on direct smear or culture. Sensitivity to anti-tuberculous drugs was routinely tested and results forwarded.

Routine tuberculin testing of contacts and other young persons thought to be at risk was carried out each Monday morning by the 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 459.

TUBERCULOSIS

As will be seen in a previous table there were 230 notified cases of Pulmonary Tuberculosis during the year.

A total of 1544 county contacts were examined at clinics during 1965 of which 38 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 Clinics 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 Chest Clinics 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, as well as for those in approved schools and students at technical and other establishments for further education. The policy adopted in September 1964, of offering vaccination to children in their first year in secondary schools was continued, together with any other children who have missed it in previous years for various reasons.

The positive reactor rate was reduced to a fairly satisfactory low level during the year, probably partly due to the fact that younger children are being tested.

Particulars of vaccinations done during 1965 are as follows:—

Number of children eligible	...	...	...	25,251
Number of acceptances	...	...	...	17,950
Acceptance rate	...	...	...	71%
Tuberculin tested	...	...	...	15,284
Vaccinated	...	...	...	13,737
Positive reactors	...	...	...	1,547
Percentage positive	...	...	...	10.1%
Referred for X-ray	...	...	...	741

In addition to the routine B.C.G. programme, a study on B.C.G. vaccination by multiple puncture was continued, making concurrent comparisons with the intradermal technique. In this connection it was necessary to retest large groups of vaccinated children at 10 to 13 weeks after vaccination and again at an approximate interval of one year.

Trials were continued in the use of the "Dermo jet" instrument which provides a method of administering B.C.G. vaccine which is highly acceptable to school children. Because no needles are used, emotional reactions to the injection are entirely eliminated. It is anticipated that if this procedure should be adopted as a routine, it will raise the acceptance level among school children.

CONTACT SCHEME (CIRCULAR 19/64)

The scheme for vaccination of persons known to have been in, or likely to come into contact with cases of tuberculosis, was carried out at the Chest Clinics. The returns submitted by the Chest Physicians showed that the number of persons skin tested was 1,391, the number found positive 367, the number found negative 1,024, and the number vaccinated 1,009.

CANCER

In the following table the deaths from Cancer during 1965, 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—	2	2	4	1	—	1	5
5—	2	1	3	—	—	—	3
15—	2	2	4	—	—	—	4
25—	10	11	21	2	3	5	26
35—	24	40	64	10	10	20	84
45—	129	99	228	25	15	40	268
55—	278	145	423	74	40	114	537
65—	241	191	432	85	49	134	566
75—	120	166	286	51	60	111	397
TOTALS	708	657	1,465	248	177	425	1,890

As will be seen from the preceding table, this year there were 1890 deaths from Cancer. In 1964 there were 1825 preceded by 1729 in 1963. During 1965 this group of deaths accounted for 18.2 per cent of the total civilian deaths, the same percentage as for 1964, but the total number of deaths from all causes was more by 361. As stated in previous Reports, there is little variation from year to year in the group of deaths from this cause which occur in persons under the age of 45 years, the figure for this year being 122.

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 10.8 per cent in 1965.

LUNG CANCER

The number of deaths under this heading (453) were 24.0% of the total number of deaths from Cancer during the year. In 1964 the percentage was 23.5 when the number of deaths from this cause was 429 and the total deaths from cancer 1825 as previously stated.

VENEREAL DISEASE

During the year, 1534 Staffordshire patients attended for diagnosis and treatment for the first time compared with 1303 in 1964 and the following detailed table indicates where the treatment was obtained. It will be seen that in 1965, 1183 of the persons who attended were found not to be infected and the corresponding figure in the previous year was 1042. The actual cases in 1964 and 1965 were 261 and 351 respectively.

TREATMENT CENTRE	Syphilis	Gonorrhoea	Other Conditions	Total New Cases
Birmingham General Hospital	13	59	201	273
Burton-on-Trent General Hospital	—	2	10	12
Dudley Guest Hospital	7	50	123	180
Stafford (Staffordshire General Infirmary) ..	—	11	91	102
Stoke-on-Trent (Wellesley Street)	3	40	213	256
Walsall (Manor Hospital)	4	70	257	331
Wolverhampton Royal Hospital	2	90	288	380
Totals	29	322	1,183	1,534

For comparative purposes the totals of the cases included in the foregoing table for the last thirty-one 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
1965	29	—	322	351	1,183

BLIND PERSONS

The following table gives particulars of Registered Blind and Partially sighted Persons registered during 1965. Of the 261 cases registered, 163 were recommended for treatment of one sort or another, and 118 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	22	6	—	70
(b) Treatment (medical, surgical or optical)	42	31	—	90
(ii) Number of cases at (i) (b) above which on follow-up action have received treatment	20	25	—	73

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 160 cases in the " Others " column of part (i) in the preceding table.

Macular Degeneration	...	54	Retinitis Pigmentosa	7
Retinopathy ...	...	12	Rupture of Emiliation	1
Diabetic Retinopathy	...	11	Keratitis ...	1
Choroido Retinitis	...	1	Iritis ...	3
Cerebral Haemorrhage	...	3	Traumatic Colar	1
Optic Atrophy	...	13	Vasculitis Retina	1
C.R.A. Occlusion	...	1	Disciform Degeneration	
High Myopia	...	7	of Maculae	1
Temporal Arteritis	...	1	Lens changes	1
Retinal Atrophy	...	1	Choroidal Sclerosis	1
Iridio-Cyclitis...	...	3	Detached retina	6
Maculopathy	...	4	Trephine Aphakic	1
Macular Dystrophy	...	8	Pan othebrids	1
Ophthalmia	...	3	Congenital Nystagmus	3
Uveitis	...	1	Aphakia	2
Melasae Chorois	...	1	Thrombosis Aphakia	1
Undeveloped Optic Nerve	...	1	Bilateral Papilloedema	1
Retrobular Neuritic	...	1	Colobomo	1
(due to malnutrition)			Chroiditis and Neoplasm	1
			Total	160

Particulars of Registered Blind and Partially Sighted Persons who were recommended treatment during 1965 but did not receive such treatment.

AGE				CAUSE OF DISABILITY			
				Cataract	Glaucoma	Retrolental Fibroplasia	Others
51—55	..	..	..	—	—	—	1
55—60	..	..	..	—	—	—	—
61—65	..	..	..	2	—	—	3
66—70	..	..	..	2	—	—	—
71—75	..	..	..	—	5	—	11
76—80	..	..	..	13	1	—	—
81—85	..	..	..	4	—	—	—
86—90	..	..	..	—	—	—	1
90 and over	..	..	..	1	—	—	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

In presenting a report on the work of the Health Education Section, one is invariably drawn to provide a statistical data as a measure of the amount of work carried out. Unlike many sections of the Department, with Health Education this does not necessarily indicate success. It is the continual approach over the years which in the long run will show whether the community's attitude to positive health thinking has changed with a consequent improvement in personal and communal health. That there will be some failure is inevitable but the success of health education must be measured overall. I believe the necessary results will be achieved although continual reinforcement will still be required. Changes in people's habits do not occur very rapidly and the change often is almost imperceptible. It is for this reason that figures are required to indicate any change, and some time in health education must be given to planned research.

During the year the Health Education Lecturers were designated Health Education Officers which brought their designation more in line with the duties that in fact they are carrying out. The year saw many improvements in the staffing situation. In January the Deputy Health Education Officer commenced duty followed in September by three assistant Health Education Officers and a Technical Assistant.

A van was purchased in August for the use of the section and this vehicle has already proved extremely useful in conveying exhibition equipment and projector equipment for the Technical Assistant.

Between September and December, the Technical Assistant carried out 70 Film shows, and the significant point is that all these shows were for members of the outside staff, particularly for staff undertaking Mothercraft and Relaxation classes. This is an indication that staff are realising the assistance the section can give in furthering their own health education programme and it is intended that this side of the section's work will be developed in the future.

During 1965 a start was made in providing exhibitions on health education and with the increase in staff this will be extended in the future.

In May the section provided a stand at the Uttoxeter Safety Exhibition. The theme was General Safety in the Home and an estimated 1,400 children and 200 adults visited the stand during the two days.

October saw National Fire Safety week and a suitable exhibition was arranged at Cannock in conjunction with Cannock Area Health Committee. The exhibition included sections on dangers of fireworks, children's safety, and how to call the fire brigade.

Smaller displays on dental health and fire safety have been produced and these are being displayed at clinics, and during November and December they were installed in four clinics in the County.

The Health Education personnel continued to devote the greater part of their duty to giving lectures and conducting group discussions and the details are as follows:—

<i>Subject</i>				<i>Lectures</i>	<i>Audience</i>
Dental	...	...	...	3	55
Personal Health	...	...	...	4	122
Parentcraft	...	...	...	196	2,343
*Learning to Live	...	...	...	18	444
Smoking	...	...	...	4	110
Home Safety	...	...	...	10	279
Other	...	...	...	41	1,224

*Explanation of the school programme to parents.

(Mouth to Mouth resuscitation)
(Public Health)
(Foot Health)

Details of the school health programme is given in the Principal School Medical Officer's report but briefly this is 656 lectures, 27,125 children.

During the year, a survey on the smoking habits of adults was completed in the Brierley Hill Urban District when 867 adults of 16 years and over were interviewed. The result of the survey has brought to light some interesting facts which have been helpful in planning the method by which the dangers of smoking should be put over to the community.

Whilst the number of lectures to adult groups on smoking is not high, this subject has been dealt with in schools where it is incorporated in the Health Education Syllabus to Secondary School Children. It seems from discussions with school children that a general opinion is emerging that smoking is not desirable and there appears to be in many instances a genuine endeavour not to start smoking when they leave school. Of course many children have been or are smoking, but in the majority of cases not to such an extent that they have formed an unbreakable habit.

In the case of Venereal Disease, this has continued to be part of the Health Education Programme although this has been directed in the main to older school children and young adults. It has not been treated as a subject on its own but forms part of a series of talks and group discussion among school children and at Youth Clubs.

It should be mentioned that members of the staff of the Department other than those actually engaged in the Health Education Section, also give lectures and lead discussions on a wide variety of topics. Close liaison is maintained between such medical and nursing staff and that of the Health Education Section.

MEDICAL EXAMINATIONS FOR SUPERANNUATION PURPOSES

The County Health Department is responsible for the medical screening of all candidates for superannuable posts with this Authority to ascertain whether applicants should be included in the Superannuation and Sickness Pay Schemes.

In December 1965, a new scheme necessitating the completion of a medical questionnaire by all candidates, other than those where physical fitness or freedom from infection was a prime factor, came into operation. This system resulted in an immediate acceleration of the issue of medical certificates and saved time at the clinics.

In cases where actual medical examinations were necessary, these were carried out by the candidates' own doctors or by Assistant/County Medical Officers at County Clinics.

During the year 1st January 1965 to 31st December 1965, the total number of candidates referred was 2,844. The following tables show the number of applicants examined in various categories and the results of these examinations.

TYPE OF SCREENING UNDERTAKEN

<i>Total Number of Candidates Referred for Screening</i> ...	2,844
<i>Number of Candidates who underwent full medical examination</i>	1,588
<i>Number of Candidates who completed medical questionnaire only</i>	1,256
<i>Number of Candidates who underwent Chest X-ray at Local Mass X-ray Units</i>	1,295
Medical Examinations carried out by General Practitioners were	469
Medical Examinations carried out by Assistant County Medical Officers were	1,119

RESULT OF SCREENING

<i>No. of Candidates found fit to be included in Superannuation and Sick Pay Schemes</i>	2,698
<i>No. of Candidates found fit for work but not for inclusion in S. and S.P. Schemes</i>	31
<i>No. of Candidates found fit apart from minor defects</i> ...	38
<i>No. of Candidates Rejected</i>	17

Further enquiries were necessary in 87 cases and 60 cases were not completed because the applicants withdrew from the posts for which they had been examined.

Under the Firemen's Pension Scheme Order, 175 men were examined.

TEMPORARY OR PERMANENT NON-SUPERANNUABLE EMPLOYEES IN THE SCHOOL MEALS SERVICE

Freedom from infection certificates, medical forms 'A' were completed in respect of 1,187 employees during the year. Of these 596 were carried out by General Practitioners and 591 at County Clinics by Assistant County Medical Officers.

One thousand one hundred and forty-one employees underwent chest x-ray examinations through the Mass Radiography Service, and of the total number of cases, 119 were not completed either because the applicants resigned before arrangements for chest x-rays were made or because their applications were withdrawn before appointment. Further enquiries were found to be necessary in 18 cases.

CARE OF MOTHERS AND YOUNG CHILDREN

Infant Welfare Centres

At the end of the year there were 128 Welfare Centres in operation of which 40 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	...	...	...	...	7,181
No. of children who attended during the year and who were born in:—					
1965	...	...	...	...	16,230
1964	...	...	...	...	9,004
1960—1963	...	...	...	...	8,191
Total	...	...	...	...	33,425

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

Under 1 year	...	...	...	141,993
1 but under 2	...	...	...	93,800
2 but under 5	...	...	...	56,784
Total	...	...	...	292,577

PROVISION OF NEW INFANT WELFARE CENTRES

During the year clinics were opened at:—

Beecroft Road, Cannock—New Purpose built Clinic

Lancashire Dynamo Sports Club,
Brereton, Rugeley

Claregate, Wrottesley,
Brierley Hill

} Rented accommodation

Band Room, Sharpe Street,
Amington, Tamworth.

Parish Hall, Wilnecote,
Tamworth.

Argyle Street, Glascote,
Tamworth.

} Taken over from Warwickshire on 1.4.65 under the Staffordshire and Warwickshire (Tamworth) order.

As a result of the opening of the new clinic at Beecroft Road, Cannock, the functions held at the clinic at Church Street, Cannock, were transferred, and the latter premises closed down. In addition the clinic held in rented premises at Brockmore, Brierley Hill, was closed, the owners of the property requiring the premises for other purposes.

The Infant Welfare Centres situated at Weston Coyney and Baddeley Green, Stoke-on-Trent, were transferred to Stoke-on-Trent County Borough under the Stoke-on-Trent Order which came into effect on the 1st April, 1965.

ANTE-NATAL AND POST-NATAL CLINICS

1,995 sessions were held during the year as follows:—

Medical Officers	...	...	...	...	945
Midwives	...	...	...	...	828
General Practitioners employed on a sessional basis	...	...	...	...	171
Hospital Medical Staff	...	...	...	...	51

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	...	5,573
Total number of attendances	...	20,810

One hundred and twenty-seven attended the Post Natal Clinics during the year, 161 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 8,568 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, 9,055 for 1963 and 8,452 for 1964.

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 1965, 28 cases of Puerperal Pyrexia were notified in the County Area.

Of the cases dealt with during the period under review, 19 were cases in which confinements had taken place in hospital, and nine were confined and treated at home.

Causes related to pregnancy

Breast Abscess ...	...	...	...	...	1
Engorged Breasts ...	...	...	...	...	3
Retained Membranes ...	...	...	...	...	1
Urinary Infection ...	...	...	...	...	6
Uterine Infection ...	...	...	...	...	10
					21

Causes not directly related to pregnancy

Influenza... ..	...	...	...	...	2
Common Cold ...	...	...	...	...	2
Miscellaneous ...	...	...	...	...	3
					7

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 soon as possible thereafter, will be tested as a routine. Younger children in whom there is a suspicion of deafness or any child who does not appear to 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 1965:—

No. of children receiving a screening test:—

at Clinic	...	...	...	...	...	3,321
at Home	...	...	...	...	...	1,180
Total						4,501

No. of children who failed the test 97

Of the 97 children who failed the test, 60 passed when retested, 15 were referred to specialists, 17 were to be retested at a later date, 4 were referred to their own doctor and one was awaiting an operation for tonsils and adenoids.

ARTIFICIAL SUNLIGHT

During the year 109 cases were referred for artificial sunlight treatment.

DENTAL TREATMENT

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

	Number of persons examined during the year	Number of persons who commenced treatment during the year	Number of Courses of Treatment completed during the year*
Expectant and Nursing Mothers	329	320	230
Children under five years	1364	1115	747

*A patient may have had more than one course of treatment during the year and some patients may have requested emergency treatment only.

Expectant and nursing mothers made a total of 1,041 attendances for treatment compared with 1,205 in 1964 and children under 5 a total of 1,841 attendances compared with 1,592 in 1964. These figures, as noted in previous reports of recent years, reflect the continuing trend of a declining demand for treatment by expectant and nursing mothers who increasingly obtain treatment through the National Health Service. On the other hand the demand for treatment by young children is growing.

The equivalent of 19.3 whole-time dental officers and 7 dental auxiliaries in post at the end of the year devoted approximately 5% of their time to maternity and child welfare dentistry. Whilst it is strongly felt that an increase in the amount of treatment for the under 5's would be beneficial in reducing trouble later, the urgent treatment needs of the school population have not made this possible.

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

	Scaling & Gum Treatment	Fillings	Silver Nitrate Treatment	Crowns and Inlays	Extractions	General Anaesthetics	Dentures Provided		Radiographs
							Full Upper or Lower	Partially Upper or Lower	
Expectant and Nursing Mothers	160	580	2	—	509	70	42	92	22
Children under five years of age	138	978	228	—	1155	383	3	4	16

A smaller number of mothers were treated than in the previous year, 320 compared with 417 and fewer extractions, 509, were performed compared to 904 in 1964, whilst the number of general anaesthetics fell from 116 to 70. On the other hand a greater number of fillings, 580, were carried out compared with 501 in the previous year. Considerably fewer complete dentures, 42 compared with 84 in 1964, but more partial dentures 92 as compared with 58, were supplied.

There has been an increase in the number of children treated under 5 years of age, together with an increase in the number of fillings from 785 in 1964 to 978 in 1965. This increase in fillings is commendable although it is to be regretted that the state of young children's teeth necessitate such treatment.

1,155 deciduous teeth were extracted, compared to 1,072 in 1964, reflecting the fact that young children so often attend for the first time with toothache when it is too late to give any treatment other than extraction. The consumption of refined carbohydrates, encouraged by attractive advertising, is responsible for much of the early dental damage and every effort must be maintained in the field of dental health education to teach good dietary habits, oral hygiene and the importance of visits to the dentist before trouble starts. Attention is drawn to the dental danger of vitamin C fruit syrups, which are usually heavily sweetened with fermentable glucose. Where the supplement of such syrups is considered necessary for the general health of the child, the syrup should be preferably taken through a straw and in any case should be followed by a drink of water to wash away from the teeth any remaining syrup.

Mr. Griffiths, the dental officer at Brierley Hill Clinic, reports as follows:— "I have kept under review the very young patients, referred to in the last annual report, who received complete upper dentures at about the age of 3 years due to the removal of badly decayed teeth causing pain and sepsis. On average, I have found it necessary to reline the dentures every 6 months to correct the fit of the dentures to the growing mouth. Four more young children between the ages of 2½ and 4 years received partial upper dentures during the year to replace anterior teeth lost through extensive decay.

I have attempted to find out from the parents why these children should have such grossly carious teeth, often accompanied by abscesses and general sepsis. In some cases, it was claimed that the teeth were decayed when they erupted, but in other cases the caries developed only after the child had been given vitamin C additives to the general diet in the form of a rose hip syrup. I have no doubt that these children were in the habit of eating a large amount of sweets, though they will not always admit this, and that their oral hygiene was not as strict as I would have liked to see.

All the partial dentures were fitted for reasons of aesthetics and to help speech, rather than to restore masticatory function, and the child's acceptance of these partial dentures is 100%.

Of the two cases of full dentures followed up, one can be considered a failure due to apathy and ignorance on the part of the mother which has been passed on to the child, whilst the other case has been completely successful. I feel that where the clinical conditions exist, this type of treatment should be carried out since the response is very rewarding. All of this work has been experimental and I would like to express appreciation for the close co-operation I have received from the staff of the County Dental Laboratory. I feel that the results obtained have been well worth the effort by all concerned."

The fact that the need exists at all for such treatment is a sad commentary on the state of the children's teeth at the present time. Obviously oral hygiene and dietary discrimination are of paramount importance but some improvement in the caries resistance of the teeth such as has been proved to occur when the water supply is fluoridated would be of tremendous help in solving this distressing state of affairs.

The part-time dental hygienist has continued to carry out scalings and polishings and to give advice on dental care to mothers and children. The dental auxiliaries and the hygienist have given courses of topical stannous fluoride to those children apparently prone to rapid dental decay to increase the resistance of the enamel. It should perhaps be pointed out that the topical application of stannous fluoride, although beneficial, is time consuming and is not a practical alternative to fluoridating the water supply.

DENTAL LABORATORY

The summary of work completed during the year by 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	...	...	...	...	33
Full Lower Dentures	...	...	...	...	15
Partial Upper Dentures	...	...	...	...	185
Partial Lower Dentures	...	...	...	...	62
Relines and Remakes	...	...	...	...	29
Repairs to Dentures	...	...	...	...	32
Total	...	...	...	...	355

(b) ORTHODONTICS

<i>Appliances</i>					<i>No. Completed</i>
Regulation Appliances (Removable)	...	...	...	...	398
Study Models	...	...	...	...	611
Total	...	...	...	...	1,009

(c) SUNDRIES

<i>Nature of Work</i>						<i>No. Completed</i>
Crowns (acrylic 40) (gold 8) (porcelain 2) ...						50
Inlays						9
Special Trays						74
Ear Moulds						7
Demonstration Modes, sets of						—
Gum Shields						7
Total						147

There were no changes during the year in the staff of the County Dental Laboratory which consists of the Maxillo-Facial Technician in charge and 3 whole-time dental technicians. The staff have worked well to carry out all the work without the necessity of sending any out to commercial dental laboratories. The vacancies for 2 dental technician apprentices were advertised during the year but attracted only 3 applications. One provisional appointment was made but the apprentice left after 6 weeks. At the present time there is a marked shortage of trained dental technicians throughout the country and very few young men are prepared to consider entering the Craft of Dental Technology with its five-year apprenticeship period and low remuneration prospects.

The totals of work carried out in the County Dental Laboratory show a decrease to 48 compared with 89 in the numbers of full dentures and 247 compared with 260 partial dentures constructed during the year. There has, however, been an increase in the number of orthodontic appliances, 398 compared with 363 in 1964, and of crowns, 50 compared with 32 in the previous year.

FLUORIDATION OF WATER

The Health Committee of the County Council at their meeting in October 1963, resolved that the question of fluoridation of public water supplies should be dealt with on the basis of water undertaking areas and that where a majority of Councils of County Districts within the area of supply of water undertaking are in favour of the fluoridation of the water supply, negotiations with that water undertaking for the treatment of the water should proceed. Furthermore, where the water undertaking has various independent sources of supply each supplying a group of County Districts and the majority of any group is in favour of fluoridation, then negotiations with the water undertaking should proceed in respect of the treatment of that source of supply.

At the present time no arrangements have been made for the fluoridation of public water supplies within the Administrative County, although in view of a majority of District Councils in the South Staffordshire Waterworks Co's Area having decided in favour of fluoridation, negotiations are proceeding.

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.

At the end of the year Welfare Foods were being distributed from 114 clinics and 41 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 1965/66 the sales and free issues amounted to £69,582 as compared with £68,093 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 1965 were as follows:—

National Dried Milk	...	...	...	140,372 tins
Cod Liver Oil	...	...	...	17,894 bottles
Vitamin A and D Tablets	...	...	...	19,875 packets
Orange Juice	...	...	...	233,277 bottles

NOTIFICATION OF BIRTHS

The following are particulars of the live and stillbirths notified during 1965:—

Number of live births	...	...	...	21,361
Number of stillbirths	...	...	...	394
Notified by midwives	...	...	...	19,997
Notified by parents and doctors	.....	...	...	880

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

This service is provided by the Lichfield Diocesan Association for Moral Welfare Work acting on behalf of the County Council, who in turn make a substantial financial contribution to the Association.

The following are particulars of the mothers and children dealt with during 1965:—

The babies were placed as follows:—

With parents married	...	...	...	18
With mothers at home	...	...	...	122
With mothers in residential situation	...	...	...	2
With mothers in Homes	...	...	...	9
With parents cohabiting	...	...	...	3
With foster parents	...	...	...	14
In voluntary Children's Homes	...	...	...	2
Adopted through this Association	...	...	...	109
Placed privately for adoption	...	...	...	7
Transferred to Caseworkers in other areas	...	...	...	21
Total	...	...	...	307

During the year 102 mothers were accommodated in Diocesan Homes and Homes of other religious denominations and paid their own fee for accommodation.

Forty-two of the cases were married women who gave birth to illegitimate children, 12 of whom were reconciled with their husbands after their babies had been placed for adoption. Eight of these women divorced, 17 legally separated and five were living apart from their husbands.

The ages of the mothers ranged between 13 and 43 years, there being 35 cases under the age of 17. The ages of the putative fathers ranged between 15 and 57 years.

The County Council administers a Mothercraft Training Hostel at Kingswinford which has accommodation for 18 cases, and during 1965, 36 cases were admitted.

The Caseworkers of the Association deal with all aspects of the work involved in the care of mothers and children. Their main tasks involve making arrangements for confinements; arranging for the adoption of babies, which includes visits and interviews to prospective adopters; visiting babies after adoption; conveying cases to and from Homes and taking affiliation proceedings.

PREMATURITY

The following table gives particulars of the number of premature infants who were born during 1965:—

(1) Number of Premature Live Births notified:—

(a) In hospital	1,057
(b) At home or a Nursing Home	265
Total	<u>1,322</u>

(2) Number of Premature Stillbirths notified ...

(a) In hospital	168
(b) At home or a Nursing Home	23
Total	<u>191</u>

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				
				Nursed entirely at home or in a nursing home			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)	Died		Born	
											in 1 and under 7 days (11)	in 7 and under 28 days (12)			in hos- pital (13)	at home or in a nursing home (14)
1 2 lb. 3 oz. or less ..	37	22	9	2	3	3	—	—	4	—	2	1	24	9
2 Over 2 lb. 3 oz. up to and including 3 lb. 4 oz. ..	78	24	10	11	2	2	—	—	13	2	3	3	46	8
3 Over 3 lb. 4 oz. up to and including 4 lb. 6 oz. ..	216	20	17	45	12	2	—	2	25	1	—	6	45	—
4 Over 4 lb. 6 oz. up to and including 4 lb. 15 oz. ..	207	5	3	38	20	—	1	4	11	—	1	1	30	3
5 Over 4 lb. 15 oz. up to and including 5 lb. 8 oz. ..	519	6	4	96	137	1	—	4	38	2	1	22	23	3
6 Total ..	1057	77	43	192	174	8	1	10	91	5	7	33	168	23

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 MINDERS' REGULATIONS ACT 1948

At the end of the year 70 premises were registered and two persons were registered as child minders.

DAY NURSERIES

The following table gives particulars of the Day Nurseries in operation in the Administrative County during 1965.

	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	19	21	4	32	6.0	20.7
NEWCASTLE (Liverpool Road, Cross Heath)	15	25	16	28	11.3	19.9
STAFFORD (Riverside, South Walls) .. .	25	25	15	35	16.1	18.9
WEDNESFIELD (Lichfield Road) .. .	20	30	16	32	10.3	25.0
WILLENHALL (Pinson Road) .. .	25	25	21	29	15.8	22.3

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 attendances of children at this Nursery during the year:—

0—2 years	...	...	...	...	5.9
2—5 years	...	...	...	...	18.1

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	4
Number of applications for registration granted	2
Number of Homes given up	—
Number of Homes with more than two beds	4
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 necessary conditions required concerning the two homes previously exempted, were completed during the year and registration granted.

MATERNAL MORTALITY

Statistics provided by the Registrar General show that there were two deaths under the heading Pregnancy, Childbirth, Abortion. One of these deaths occurred in hospital and one 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
1964	6	4	2

INFANTILE MORTALITY

There were 410 infant deaths during the year the death rate per 1,000 total live births being 19. Deaths from congenital malformations numbered 144.

During 1965, 27 deaths were reported by the midwives, having occurred whilst they were in attendance. The causes of these deaths were as follows:—

Atelectasis	...	...	...	...	7
Birth Injury	...	...	...	...	2
Concealed Birth	...	...	...	...	1
Congenital Abnormalities	...	...	...	...	13
Infections	...	...	...	...	1
Prematurity	...	...	...	...	3

FAMILY PLANNING

The Family Planning Association maintains six clinics in the Administrative County and five in the area of adjoining Authorities. The Family Planning Association is an autonomous body, the County Council assisting through financial contributions

Financial assistance during 1965 was approved for payment to these clinics.

Details of the sessions are as follows:—

BILSTON, Centre Health Clinic, Wellington Road, Bilston.

Tuesdays weekly 10.30 a.m.—12 noon

2 p.m.—3 p.m.

6.30 p.m.—7.30 p.m.

Closed Bank Holiday weeks and first fortnight in August.

BURTON-UPON-TRENT, The Clinic, Cross Street,

Burton-upon-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.

1st and 3rd Monday in month 7.0—8.0 p.m.

Thursdays 6.30—8.30 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.

Monday 6.0—8.0 p.m.

Thursday 10.0 a.m.—12 noon

2.0—4.0 p.m.

6.0—7.30 p.m.

1st Thursday in month 12.0 noon—1 p.m.

RUGELEY, (sub clinic of Stafford F.P.A.) Heron Court Infant Welfare Centre

Fridays 2.0—4.0 p.m.

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—5.0 p.m.

Thursday 10.0 a.m.—12.30 p.m.

Closed one week at Easter and Whitsuntide, three weeks at Christmas the and whole of August.

BENTILEE—STOKE-ON-TRENT (sub clinic of Stoke-on Trent F.P.A.)

Mondays 6.30—7.30 p.m.

TETTENHALL and DISTRICT, Infant Welfare Centre, Upper Green, Tettenhall.

Monday 2.30—3.30 p.m. } For advice

6.30—7.30 p.m. }

2nd, 4th and 5th Monday supplies only

WALSALL, Ambulance Station, Hatherton Road, Walsall

1st and 3rd Monday 10.0 a.m.—12 noon.

Wednesday 2.30—4.0 p.m.

Thursday 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 468 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 ...	...	...	...	...	100
" " Probation Officer ...	...	...	...	...	18
" " N.S.P.C.C. ...	...	...	...	...	19
" " Social Welfare Officer ...	...	...	...	...	36
" " Mental Welfare Officer ...	...	...	...	...	13
" " Child Care Officer ...	...	...	...	...	20
" " Education Welfare Officer ...	...	...	...	...	29
" " Local Housing Authority for rehousing ...	...	...	...	...	13
Retained under Joint Observation (2 Officers) ...	...	...	...	...	111
Retained under Joint Observation (3 or more Officers) ...	...	...	...	...	65
No action taken (problems solved) ...	...	...	...	...	44
Total ...	...	...	...	...	468

During the year 104 were removed from the register of which 71 were satisfactorily concluded and 33 left the district. Of the total cases, 116 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 the Social Worker, whilst Health Visitors in the 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 1966 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, 1965, there were 110 whole-time general nurses, together with 64 part-time general nurses, 37 being also domiciliary midwives and 17 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 1965, nine male nurses were in the employ of the County Council, being centred in Leek, Kidsgrove Aldridge, Cannock, Wednesfield, Bilston, Wednesbury and Newcastle Borough. These are included in the figure of 110 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 358,549 home visits were made by the nurses, the number of cases attended being 14,186. Of this figure 2,093 acute and 2,327 chronic patients would in the opinion of the attending nurse have had to be admitted to hospital had a home nursing service not been available.

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

HOME NURSING—CIRCULAR 17/55

The number of children who were nursed in their own homes has remained at 5% approximately of the total number of new cases.

There has been a fall in the number of new cases except in the 5—15 age group in which there has been a very slight increase in numbers. The total number of cases treated has, however, increased by 1,196.

Study of the actual number of treatments given reveals an increase which is most marked in the case of washouts, douches and catheterisation injections and visits of observation.

Condition	Age 0-4	Age 5-15	Age 16-64	65 and over	Total
Tuberculosis	3	8	93	13	117
Other infectious diseases	8	1	10	9	28
Diseases of the blood	3	7	232	384	626
Diseases of the heart	3	3	129	511	646
Cerebral Haemorrhage and thrombosis	—	—	152	697	849
Other circulatory diseases	—	1	69	121	191
Respiratory diseases other than tuberculosis	113	18	217	323	671
Diseases of ear or nose and throat	132	88	103	21	344
Eye conditions	7	3	3	32	45
Dental conditions	9	5	9	1	24
Gynaecological conditions	—	—	130	228	358
Genito-urinary	8	10	68	152	238
Diseases of bones, joints and muscles	2	2	171	232	407
Diseases of digestive system	36	29	296	256	617
Diabetes	2	4	91	162	259
Parasitic conditions (worms, lice, etc.)	2	2	6	—	10
New growths	1	3	302	474	781
Senility	—	—	12	682	694
Diseases of skin and subcutaneous tissues	22	17	156	209	404
Mental and nervous conditions	3	3	88	57	151
Injuries	30	45	125	135	335
Burns and scalds	49	16	60	51	176
Sepsis	19	22	114	79	234
Post operative	29	47	710	302	1,088
Complication of pregnancy or puerperium	7	3	236	2	248
Other conditions	42	35	205	204	476
Totals	531	372	3,787	5,327	10,017

Type of Case	Total number of treatments given in <i>all cases</i> —old and new—during the year ended 31st December, 1965.
General Nursing	147,845
Dressings	89,449
Observation of Patient	16,884
Enemas	4,290
Changing of Pessaries	1,143
Washouts, douches and catheterisation	12,189
Preparation for diagnostic investigations	662
Injections—antibiotics	14,880
Other injections	107,190
Other treatments	11,020

MIDWIVES' SERVICE

The following are particulars of the midwives practising at the end of 1965:—

Number of midwives employed by the Authority	...	199
Number of midwives in private practice (including midwives employed in Nursing Homes):		
Domiciliary	... ..	2
Nursing Homes	... ..	2
Number of midwives employed by Hospital Management Committees	... ..	84

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	
333	7,237	7,570	9,857

As mentioned in the section of this Report relating to Home Nursing, the Supervisors' duties include supervision of Home Nursing staff, and in addition, supervision of Health Visitors, School Nurses and Midwives. During the year 1,738 visits and interviews were undertaken for midwifery matters.

In accordance with the Rules of the Central Midwives Board, 33 midwives attended a residential post-graduate course arranged by the Royal College of Midwives.

Sixteen 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 20 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 six. Particulars of deliveries by midwives for the last twenty-six years are given in the following table:—

Year	*No. of deliveries by Mid-wives	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	—
1965	7,570	1,094	93	—	29	43	5	—

*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 14.4.

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

PREGNANCY:

Blood Pressure Abnormal	...	...	...	29
Haemorrhage Ante-partum	...	...	...	3
Threatened Abortion	...	...	...	5
Toxaemia	...	...	...	11
Unsatisfactory condition and general health	...	...	...	46
Total	...	...	...	94

LABOUR

Abnormal Presentation ...	...	...	...	70
Abortion ...	...	...	...	1
Delayed or difficult Labour ...	...	...	...	154
Eclampsia ...	...	...	...	3
Episiotomy ...	...	...	...	37
Haemorrhage Ante-partum ...	...	...	...	32
Haemorrhage Intra-partum ...	...	...	...	3
Haemorrhage Post-partum ...	...	...	...	34
Inertia ...	...	...	...	20
Lacerated Perineum ...	...	...	...	251
Premature Labour ...	...	...	...	57
Prolapse of Cord ...	...	...	...	2
Retained Placenta and Membranes ...	...	...	...	43
Unsatisfactory Condition ...	...	...	...	57
Total ...				764

LYING-IN:

Abdominal Swelling and Tenderness ...	...	...	...	3
High Temperature ...	...	...	...	52
Inflamed and Painful leg ...	...	...	...	11
Unsatisfactory Condition ...	...	...	...	22
Total ...				88

CHILD:

Asphyxia ...	...	...	...	20
Convulsions ...	...	...	...	3
Deformities ...	...	...	...	5
Feebleness and Prematurity ...	...	...	...	8
Haemorrhage (Bowel) ...	...	...	...	4
Haemorrhage (Mouth) ...	...	...	...	1
Hare lip and cleft palate ...	...	...	...	5
Inflamed and Discharging Eyes ...	...	...	...	29
Jaundice ...	...	...	...	17
Rash ...	...	...	...	3
Spina Bifida ...	...	...	...	1
Unsatisfactory Condition ...	...	...	...	48
Vomiting ...	...	...	...	4
Total ...				148
Grand total ...				1,094

Details of the numbers of notifications of sending for medical help during the financial year 1965-66 are given below:—

Number of notifications of sending for medical aid	1,058
Number of claims received	3*
Percentage of claims received to notifications ...	0.29
Total amount paid to doctors during the year...	£6 6 0

*The reason for the small number of claims is that in the large majority of cases the patients are registered with their 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 six. In three instances the confinements were domiciliary, and out of the total of six cases two were severe. Vision was unimpaired in all cases.

WATERY, INFLAMED AND DISCHARGING EYES

The number of cases notified by the midwives during the year was 26. With five exceptions they were treated at home, and of 26 cases 24 were not severe.

STILLBIRTHS

Number of Stillbirths registered	... ..	410
Reported by midwives	... ..	93

Causes of those reported by midwives:—

Asphyxia	... ..	3
Ante-Partum Haemorrhage	... ..	3
Anencephalic	... ..	1
Prolapse of cord	... ..	3
Cord around neck...	... ..	1
Other congenital abnormalities	... ..	13
Hydrocephalus	... ..	1
Inattention at birth	... ..	1
Injury during birth	... ..	1
Intra Uterine death	... ..	15
Impacted shoulder	... ..	1
Mal-presentation	... ..	2
Placental insufficiency	... ..	12
Post maturity	... ..	2
Pre-eclamptic toxemia	... ..	6
Prematurity	... ..	13
Rhesus incompatibility	... ..	3
Spina Bifida	... ..	1
Unsatisfactory condition of mother	... ..	1
Unknown cause	... ..	10

ANALGESIA

At the end of 1965, 174 midwives employed by the County Council were qualified to administer analgesics.

At the 31st December 1965, all County Council Midwives were equipped with the necessary apparatus; the number of cases which were dealt with was 1,646 when the nurses were acting without a doctor and 180 when a doctor was present at the time of delivery of the child.

In addition, midwives administered Pethidine in 3,889 cases when a doctor was not present and in 460 cases when a doctor was present. One hundred and twenty midwives also used Trilene analgesia in 2,923 cases when a doctor was not present and in 448 cases when a doctor was present.

MIDWIVES OFF DUTY

During the past year the hours of duty for nurses in hospital have been reduced. While it is not possible to arrange for domiciliary nursing staff to work a stated number of hours, an effort has been made to give some extra off duty when the demands of the service permit.

The standard off duty is one weekend every four weeks and 36 hours off during each of the other three weeks.

There is no night rota in operation as this was discontinued at the request of the midwives.

HEALTH VISITING

At the 31st December, 1965, the number of Health Visitors employed was 130 full-time and 12 part-time. In addition there were 17 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 210.

The Health Visitors Training Scheme continues to prove successful. Approval has been given to 15 students per annum being sponsored by the Authority during each of the next five years, and during the year eight candidates were accepted for training.

The twelve students who were already in training, were all successful in obtaining the Health Visitor's Certificate.

The following table gives particulars of the visits paid by this staff during 1965 to expectant mothers and young children:—

To Expectant Mothers

First visits	...	...	...	...	...	4,470
Total visits	...	...	...	...	...	6,357

To infants under one year

First visits	...	...	...	...	...	25,510
Total visits	...	...	...	...	...	73,313

Total visits to children aged 1 year and under 2 years 42,290

Total visits to children aged 2 years but under 5 years 74,536

Two hundred and eighteen 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

Due to the severe shortage of Health Visitors it has not been possible to make any extension in the scheme for the attachment of Health Visitors to general practitioners.

It is hoped that as Health Centres are completed more staff may become available and attachment may take place as a natural sequel to the changed conditions of work.

ARRANGEMENTS FOR HEALTH VISITORS TO FOLLOW UP CASES DISCHARGED FROM HOSPITAL

When the Health Visitor is aware that cases have been discharged from hospital these are followed up but this is not always possible through lack of notification.

In the case of Stafford Area the liaison scheme in charge of the Area Medical Officer continues to be successful.

In the Wednesbury, Brierley Hill and Cannock Areas the work of the Liaison Health Visitor for the care of mothers and babies continued. She visits the appropriate hospitals and in conjunction with the District Health Visitors ensures that the homes of premature babies are suitable and ready to receive them before they are discharged from the premature baby unit.

In addition she informs the midwives of the impending early discharge of mothers and babies to their care.

HOSPITAL PATIENTS—CARE AND AFTER CARE—1st JANUARY TO 31st DECEMBER, 1965

The Medical Officer to the Stafford Area Health Committee 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 1,426 cases and in 26% of these cases Local Health Authority Services were provided when the patient returned home.

TOTAL NUMBER OF CASES FROM STAFFORDSHIRE ADMITTED TO STAFFORD- SHIRE GENERAL INFIRMARY

Home Investigations	{	Stafford M.B.	...	512
(decided by Hospital Social		Cannock District	...	462
Medical Officer)		Rugeley District	...	172
1,426		Stafford R.D.	...	139
		Stone U.D.	...	60
		Stone R.D.	...	72
		Uttoxeter District	...	9

NUMBER FOR WHOM LOCAL AUTHORITY SERVICES PROVIDED

District Nurse	...	...	172
Psychiatric Social Worker			62
Home Help	...	...	38
Health Visitor	...	...	64
Social Worker	...	...	9
District Nurse and Home Help	...	...	7
District Nurse and Social Worker	...	...	8
Health Visitor and Social Worker	...	...	2
Children's Officer	...	...	2
Home Help and Health Visitor	...	...	8
Probation Officer	...	...	1

373—26% of the home investigations

GROUNDSTLOW HOSPITAL

Home Investigations	...	140
<i>Local Authority Services Provided</i>		
District Nurse	...	5
Local M.O.H.	...	2
Health Visitor	...	6

13—9% of the home investigations

STANDON HALL HOSPITAL

Home Investigations	...	15
<i>Local Authority Services Provided</i>		
Home Help	...	1
Health Visitor	...	1
Social Worker	...	4

6—40% 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—PERSONS AGED UNDER 16

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 1965 are given, whilst those for 1964 are shown in brackets.

Ages at date of vaccination	..	Under 1	1—2	2—4	5—15	Total
Number vaccinated	.. ..	996 (1092)	3822 (3010)	2556 (1226)	388* (477)	7762 (5805)
Number re-vaccinated	.. ..	— (—)	2 (5)	33 (26)	922 (228)	957 (259)

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

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 1965 the numbers immunised against diphtheria were as follows:

Year of Birth					Others under age 16	Total
1965	1964	1963	1962	1958—61		
6,037	7,100	1,964	763	3,721	740	20,325

Reinforcing doses were given in 18,313 cases.

In the 1964 Report the Diphtheria statistics were shown in a different form from the above and were as follows:—

Numbers Immunised

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

Reinforcing doses were given in 23,046 cases.

No notification of diphtheria was received during 1965. There have been only six confirmed cases since 1956 and it is interesting to compare figures for past years. In 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:

Year	No. of Cases	No. of Deaths
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

<i>Year</i>		<i>No. of cases</i>		<i>No. of deaths</i>
1953	...	73	...	6
1954	...	16	...	—
1955	...	29	...	2
1956	...	5	...	—
1957	...	—	...	—
1958	...	—	...	—
1959	...	2	...	—
1960	...	1	...	—
1961	...	3	...	—
1962	...	—	...	—
1963	...	—	...	—
1964	...	—	...	—
1965	...	—	...	—

VACCINATION AGAINST POLIOMYELITIS

During the year 181,000 doses of poliomyelitis vaccine were received (11,00 Salk injection form and 170,000 Oral) making a total of 1,865,000 doses received since the inception of the Vaccination Scheme in 1956.

Particulars of vaccinations done during 1965 are as follows:—

				<i>Initial Vaccination (Two injections of Salk or three doses of Oral)</i>
Children born in 1965	...	...	...	3,739
Children born in 1964	...	...	...	8,903
Children born in 1963	...	...	...	2,298
Children born in 1962	...	...	...	912
Children born in 1958-61	...	...	...	1,555
Others under age 16	...	...	...	1,335
Total	...	...	...	18,742

No. of persons who received reinforcing doses

Children born in 1965	...	...	...	240
Children born in 1964	...	...	...	870
Children born in 1963	...	...	...	1,163
Children born in 1962	...	...	...	1,247
Children born in 1958-61	...	...	...	10,403
Others under age 16	...	...	...	13,986
Total	...	...	...	27,909

Protection against poliomyelitis, diphtheria, tetanus and whooping cough may now be given at the same time.

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 1965, and the following are the number of primary courses and reinforcing doses given during the year.

Primary Vaccinations

Children born in 1965 ...	...	...	...	5,767
Children born in 1964 ...	...	...	...	6,781
Children born in 1963 ...	...	...	...	1,767
Children born in 1962 ...	...	...	...	613
Children born in 1958-61 ...	...	...	...	346
Others under age 16 ...	...	...	...	32
Total ...	...	...	...	15,306

Reforcing Doses

Children born in 1965 ...	...	...	...	189
Children born in 1964 ...	...	...	...	1,259
Children born in 1963 ...	...	...	...	1,671
Children born in 1962 ...	...	...	...	802
Children born in 1958-61 ...	...	...	...	1,014
Others under age 16 ...	...	...	...	131
Total ...	...	...	...	5,066

TETANUS INNOCULATION

Particulars of inoculations against tetanus for 1965 (the vaccine being used either singly or in combination with other antigens) are as follows:—

Initial

Children born in 1965 ...	...	...	...	5,828
Children born in 1964 ...	...	...	...	6,924
Children born in 1963 ...	...	...	...	1,863
Children born in 1962 ...	...	...	...	677
Children born in 1958-61 ...	...	...	...	7,864
Others under age 16 ...	...	...	...	2,921
Total ...	...	...	...	26,077

Reinforcing

Children born in 1965 ...	...	...	...	198
Children born in 1964 ...	...	...	...	1,320
Children born in 1963 ...	...	...	...	1,791
Children born in 1962 ...	...	...	...	906
Children born in 1958-61 ...	...	...	...	7,447
Others under age 16 ...	...	...	...	4,561
Total ...	...	...	...	16,223

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
Tettenhall
*Tipton
Uttoxeter

*Radio Control Stations

Sub-Stations

Biddulph
Cheadle
Kidsgrove
Rowley Regis
Rugeley
Stone
Tamworth

During the year new Ambulance Stations were erected at Regis Road, Tettenhall and Sheep Fair, Rugeley and the new premises were completed on the 7th October and the 19th November 1965 respectively. These stations replaced unsatisfactory rented accommodation.

Due to the growth of the service alterations and extensions have been carried out at the following stations:

Kidsgrove Station: erection of one additional garage bay—completed on 30.12.65.

Newcastle Station: erection of three additional garage bays and stock room for vehicle spares—completed on 30.12.65.

„ „ new rest room and cleansing room—completed on 30.9.65.

The alterations at Newcastle Station provided more suitable accommodation as a workshop for the maintenance and servicing of vehicles in the northern area of the County. The new rest room and cleansing room enabled the existing rest room to be adapted as a Radio Control Room providing improved facilities for the staff and radio equipment, and the existing cleansing room was adapted as an office for the Superintendent.

Tamworth Station: erection of two additional garage bays—completed on 11.11.65.

The hours of opening of the sub-stations have been increased during the year and additional staff appointed. All sub-stations are now operating for 16 hours per day.

VEHICLES

During the year twelve 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 is maintained.

The maintenance of vehicles continued by direct labour.

MILEAGE, PATIENTS CARRIED, VEHICLES, ETC.

The table below gives the mileage and number of patients carried by each ambulance station during 1965, together with the establishment of personnel and vehicles as at the 31st December 1965:—

STATION	Hours Open	PERSONNEL	VEHICLES		AMBULANCES		SITTING CARS	
			Ambs.	Cars	Mileage	Patients	Mileage	Patients
Aldridge	24	26	4	5	86,656	9,655	88,393	14,052
Biddulph	16	6	1	2	16,626	1,696	35,340	7,060
Brierley Hill ..	24	26	3	4	55,061	7,364	91,724	15,351
Cannock	24	29	4	4	136,570	14,929	104,778	16,064
Cheadle	16	17	2	5	36,690	3,570	87,638	14,811
Darlaston	24	32	4	6	97,358	17,494	113,572	28,029
Kidsgrove	16	6	2	1	27,410	5,584	19,413	5,775
Leek	24	25	3	4	61,283	7,069	93,855	14,187
Lichfield	24	25	3	5	71,906	10,772	104,172	15,309
Newcastle	24	32	5	4	71,543	12,925	87,271	18,009
Rowley Regis ..	16	11	2	2	36,533	6,236	43,009	7,157
Rugeley	16	6	1	1	35,092	5,095	29,137	5,123
Stafford	24	30	5	4	93,200	11,005	92,174	12,597
Stone	16	6	1	2	24,721	3,043	44,908	6,007
Tamworth	16	11	2	1	32,094	5,815	37,783	4,340
Tettenhall	24	11	1	1	32,293	4,711	19,117	3,025
Tipton	24	33	4	6	75,454	10,801	104,315	22,024
Uttoxeter	24	23	3	3	64,175	6,126	83,491	7,344
TOTALS	—	355	50	60	1,054,665	143,890	1,280,090	216,264

The analysis of the types of patients carried is given below:—

Maternity	...	...	...	7,193
Illness	...	...	...	342,282
Accidents	...	...	...	9,397
Infectious	...	...	...	544
Mental	...	...	...	738

The following is a comparison of the number of Stations, personnel vehicles, patients carried and mileage at the 31st December 1965 with the number at 31st December 1964:—

	31.12.64	31.12.65
24-hour Stations	11	11
Sub Stations	7	7
Ambulances	50	53
Sitting Cars	60	60
Personnel	341	355
Patients carried	339,196	360,154
Mileage	2,236,730	2,334,755
Average miles per patient carried	6.59	6.76

AGENCY SERVICE

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

Month	Stafford		Lichfield	
	Mileage	Patients carried	Mileage	Patients carried
January ...	1,203	33	565	16
February...	2,260	70	1,040	16
March ...	2,365	61	992	24
April ...	1,096	34	419	13
May ...	2,230	51	1,093	19
June ...	1,551	36	490	17
July ...	1,380	38	745	14
August ...	1,978	38	405	9
September ...	1,172	33	440	16
October ...	1,558	34	630	20
November ...	1,291	28	729	32
December ...	994	32	381	10
	19, 078	488	7,929	206

PREVENTION OF ILLNESS, CARE AND AFTER-CARE

The following are particulars of the work undertaken during 1965 by the ten Social Workers/Welfare Officers and Assistants.

	<i>Partial</i>		<i>Paid in full by patients</i>	<i>Total</i>
	<i>Free</i>	<i>Payment by patients</i>		
(1) Number of patients supplied with extra nourishment†	349	2	—	351
(2) Number of patients supplied with clothing ...	372	—	—	372
(3) Number of patients supplied with bedding and furniture ...	261	—	—	261
(4) Number of patients supplied with convalescent home treatment ...	37	25	1	†63
(5) Number of patients supplied with appliances*	691	—	—	691
(6) Number of visits and interviews with patients at home ...	—	—	—	9,634
(7) Number of patients visited in hospital or sanatoria ...	—	—	—	841
(8) Number of patients seen at Office or Clinic ...	—	—	—	1,173
(9) Housing				
(a) No. of cases recommended	—	—	—	99
(b) No. of cases re-housed	—	—	—	51

*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 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 provision of Section 28 of the National Health Service Act, 1946, 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. During the year 28 applications for the facility were received. In 24 instances full travelling expenses were allowed.

In the remaining four instances it was found that 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 the 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 2,028 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, 452 were to cases falling in Category 1, 301 in Category 2, 642 in Category 3, 572 in Category 4 and 101 in Category 5.

The actual number of homes visited was 1,536, and 862 cases were of a social nature, 236 cases were referred to County Council agencies, i.e., for domestic assistance, extra nourishment, nursing equipment to County Welfare Officers, etc., and 438 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 seventy nursing comforts depots, fifty-three manned by the British Red Cross Society personnel (excluding Depot Headquarters), and seventeen 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 seven are held at the County Council premises, six 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.

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 1965/66 were £4,109 for the British Red Cross Society and £874 for the St. John's 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

The steady growth of the Chiropody Service continued in 1965, with more time being given to the inspection and treatment of school children wherever possible. The number of treatments given during 1965 were as follows:—

<i>Clinic</i>	<i>Adults</i>	<i>Domiciliary</i>	<i>Children</i>
			<i>Clinics and School premises</i>
25,878		9,911	9,956

The growth of the Service since its inception in August 1960, is shown by the following figures:—

<i>Date</i>	<i>Patients Referred</i>	<i>Treatments During each year</i>		<i>School Children</i>		<i>Chiropodists</i>		<i>Clinics</i>
	Number on Register at end of each year	Clinic	Domiciliary	Referred	Treatments given	W/T	P/T	
31.12.60	311	422	10	—	—	4	Nil	32
31.12.61	2,602	7,600	—	8	—	6	1	48
31.12.62	4,333	9,192	2,380	194	404	4	5	41
31.12.63	5,459	9,690	4,135	260	188	2	12	50
31.12.64	7,393	16,991	8,026	667	1,704	4	18	50
31.12.65	9,893	25,878	9,911	3,046	9,956	5	24	64

The 12,939 adults and children authorised to receive treatment represents 1.21% of the total population of the Administrative County. 15.3% of chiropodists time was given to the treatment of school children and approximately 98.5% of the adult patients treated were old-age pensioners. The remaining 1.5% was comprised of physically handicapped persons and expectant mothers.

In addition to the above figures, Grants were authorised for two voluntary bodies where chiropody treatment was provided by a qualified chiropodist. The number of treatments provided by these organisations during 1965 was 719.

Because of the growth of the Service, a Chief Chiropodist was appointed to visit clinics throughout the Administrative County, advise chiropodists where any problem of treatment might arise and be responsible for the distribution of medicaments and the ordering of equipment.

Plans for the provision of an Appliance Centre were approved. The Centre will supply permanent appliances for the aged, which it is anticipated will reduce the cost of medicaments and dressings and enable a large number of patients to go for longer periods without treatment. The main purpose of the Appliance Centre will, however, be to provide preventive and corrective treatment for school children.

Arrangements were made for County Chiropodists to carry out foot inspections in the schools and, with the co-operation of Head Teachers, to hold treatment sessions in schools. Head Teachers welcomed this idea, as chiropodists organised inspections so as to cause a minimum of disruption to school curriculum, and quickly cleared outbreaks of such infectious conditions as verrucae.

Chiropodists were concerned about the number of children found to have foot troubles due to incorrect footwear. Cases of frictional heloma durum and distortion of the toes—(i.e. plantar or dorsal flexed with abduction or adduction) and efforts were made to enlist the help of parents by inviting them to meet the chiropodists at children's treatment sessions. School foot inspections emphasised the need to provide preventive and corrective treatment at an early age.

Staff problems were resolved by the employment of part-time chiropodists on a sessional basis but as part-time help is mostly centred in heavily populated areas in the South of the County, the most satisfactory solution to the problem of providing a well balanced service throughout the County is still one of recruiting full-time staff who could reside where their services could be used to the best advantage.

SUPPLY OF INCONTINENCE PADS

In 1961 a pilot scheme was introduced to assess the value of incontinence pads in certain patients under the care of the Domiciliary Nurses. This indicated that these pads were of great value in enabling difficult cases to be nursed at home and in 1962 arrangements were made for them to be supplied to any case under the care of the Home Nurse.

Ministry of Health Circular 14/63 desired local authorities to make this service available to patients other than those cared for by the Home Nurse. Arrangements were therefore made for the Area Medical Officers to supply incontinence pads in such cases on receipt of a certificate from the general practitioner in attendance.

Methods of disposal vary in different parts of the County. In some cases the District Council makes special collections for incineration, while in others they are collected with ordinary refuse. In both cases the are placed in wet strength paper sacks before being offered for disposal.

During 1965, 153,600 pads were supplied to cases of all types within the Administrative County.

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

The register of children "at risk" which was instituted in 1963, continues to be kept up to date. The cases notified are reviewed at intervals by the Health Visitors, Assistant County Medical Officers and General Practitioners.

Liaison exists between the Maternity and Child Welfare, School Health and Mental Health Sections, so that provisions may be made at all levels for the needs of children with various handicaps.

Arrangements are being made for the results to be recorded by computer.

Special reports continue to be made to the Registrar General concerning all "at risk" children who suffer from congenital abnormalities. During 1965, 319 cases have been 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.

As already mentioned, in May the Health Education Section provided a stand of the Uttoxeter Safety Exhibition. The theme was General Safety in the Home and an estimated 1,400 children and 200 adults visited the stand during the two days.

ADMISSION OF CHRONIC SICK TO HOSPITAL

During the year the number of cases referred by general practitioners to Area Medical Officers was 918, the object being to achieve the best means of using the beds available for the treatment of the chronic sick.

Of the total referred, 505 were admitted to chronic sick hospital accommodation, 8 to Mental Hospitals, 28 to Part III Accommodation, 19 to General Hospitals and 2 to private Nursing Homes. In 297 cases one or more of the County Council's Services were of help to the patients pending admission.

In 356 cases, therefore, the patients were cared for at home, the County Council's Services being of assistance in 192 instances, viz:—

Nursing	...	...	...	...	...	75
Domestic Help	...	...	...	...	...	53
Nursing and Domestic Help	...	...	...	...	...	58
Nursing and Social Welfare	...	...	...	...	...	3
Nursing, Domestic Help and Social Welfare	...	...	...	...	...	3
						192

DOMESTIC HELP SERVICE

The Service continued to expand further during the year and at the 31st December, 1,346 Domestic Helps were employed compared with 1,257 at the end of the previous year. The rather large increase in the number of domestic helps employed during the year is accounted for by the large percentage of part-time workers engaged.

During the year, 6,949 cases were attended compared with 6,186 in 1964.

The number of Domestic Help Organisers at the 31st December, 1965, was 14 the whole-time equivalent being 13 $\frac{3}{10}$ ths

The 6,949 cases attended during the year were classified as follows:—

Aged 65 or over on first visit in 1965	...	5,773
Aged under 65 on first visit in 1965:—		
Chronic sick and tuberculous	...	321
Mentally disordered	...	32
Maternity	...	482
Others	...	341

NIGHT HELPS

The scheme for employing night helps (or night sitters or watchers) was introduced in 1956 and is designed to provide help 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, i.e. where a wife is ill in bed and the husband has to work during the night and the presence of children may be involved. 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 34 Night Helps were employed.

NEIGHBOURLY HELP SERVICE

This service, which is regarded as a feature of the Domestic Help Scheme, is one in which arrangements are made for neighbours to look after old or sick people living alone, and for the helpers to receive a daily fee for the work they undertake, i.e., lighting fires, undertaking shopping, collecting pensions, helping the old people when they are getting up or going to bed, etc. The importance and justification for the scheme is that it has helped old people to remain in their homes in familiar surroundings and that generally it results in obviating, or at least delaying, admissions to residential accommodation, thus bringing about a considerable saving in public money.

The scheme works in harmony with other valuable services provided by voluntary bodies for old people, to enable them to remain longer in their own homes.

During the year under review, 139 neighbourly helps were 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 senior administrative assistant 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*: 19 Mental Welfare Officers of whom seven are qualified by length of service as defined in the Younghusband Report. There were 3 vacancies at 31.12.65 (not included in above figure).
- (b) *Child Guidance*: 3 full-time Psychiatric Social Workers (one of whom is qualified) and 2 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 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.

(c) *Training Centres*

- (i) 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).
- (ii) Instructors (at Adult Centres): 22 including deputies (two with the N.A.M.H. Diploma). There were 2 vacancies.
- (iii) Assistant Supervisors (at Junior Centres): 36 including deputies (ten with N.A.M.H. Diploma).

TRAINING CENTRES

The Training Centres are listed below setting out the numbers of trainees on roll:—

JUNIOR CENTRES			ADULT CENTRES		
		<i>No. of Trainees on roll</i>			<i>No. of Trainees on roll</i>
Bilston	...	66	Audnam	...	70
Cannock	...	70	*Leek	...	—
Cannock (Adult Annexe)	...	28	Newcastle	...	68
Leek	...	35	Stafford	...	43
Lichfield (Mixed)	...	53	Willenhall	...	66
Newcastle	...	62			
Rowley Regis	...	75			
Stafford	...	40			

*Leek Adult Training Centre is expected to open early in 1966.

Home Teachers

No. of Trainees ... 27 (14 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).

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

The total number of trainees on roll in the above table is 703. In addition, at the end of 1965 some 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	18	—
Wolverhampton C.B.	Waterloo Road	—	16
Burton-on-Trent C.B.	Anglesey Road	—	6
Smethwick C.B.	Albert Bradford	8	4
Stoke-on-Trent C.B.	Fenton	—	1
Stoke-on-Trent C.B.	Shelton	25	—
		51	27

TOTAL ... 78

The number of Staffordshire children and adults receiving training is therefore 781—an increase of 65 over the previous year's figure. There remain small waiting lists at most of the Junior Centres, and some further building for juniors is included in the ten-year building programme, plus the replacement of the two larger centres in the Bilston and Lichfield areas. Plans for building more adult centres are also well advanced in addition to the Stafford Centre opened in 1965 and the Leek Centre to open shortly in the new year.

The number of children on the waiting list for training was 45 at the end of the year, and the adult waiting list was 31 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, 581 mentally handicapped persons from training centres had one week's holiday during the summer months. These were accompanied by 119 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 (51 in all) and one party of children attending child guidance clinics for treatment (37) were accommodated at the Home during the summer. All children under 16 years of age are accommodated free of charge, while each adult is required to contribute towards the board and lodging an amount based on personal income and outgoings.

The County Council, with assistance from the Voluntary Committee attached to the Home, have continued with the programme of improvements to the facilities provided. A new gardener's store shed was installed, the lean-to greenhouse was improved, and the Voluntary Committee presented a garden shelter for the use of the residents adjacent to the playground.

VOLUNTARY WORK IN THE MENTAL HEALTH FIELD

The Staffordshire Association for Mental Welfare expanded its services during the year by the formation of four new local voluntary committees, viz:—

The Friends of Hillport House—a committee to provide voluntary services and additional amenities for the 40 elderly men and women at Hillport House.

"Leighfields" Social Committee—to supplement the work of the new adult Training Centre and Adult Hostel for the mentally handicapped at Stafford.

The Friends of Orchard House—to provide voluntary service and additional amenities for the residents at the Home for working men and women, Orchard House, Clayton Road, Newcastle.

The Summerhill Grange Social Committee—to give similar services and amenities for the 29 elderly residents at Summerhill Grange, Kingswinford.

The local voluntary committees are giving their attention more and more to the provision of services, especially at the residential establishments. It is in this way that the community services for the mentally disordered will become an integral part of ordinary society and that "community care" in its full sense will be achieved. One of the Association's local committees, the Leek and Cheadle Committee for Mental Health, has started a successful scheme for visiting friendless patients at the nearby hospital for the mentally ill, St. Edward's Hospital, Cheddleton, thus establishing a valuable link between the Hospital and people living in the area. Despite these efforts, isolation and loneliness still remain the chief obstacles to be overcome in promoting the welfare of the mentally disordered and their families. Much remains to be done and the Staffordshire Association for Mental Welfare is alive to the need for expanding still further its voluntary services so that many more members of the public may take an active part. In addition to the voluntary services, the Association's committees have not neglected their fund-raising activities and have increased their income considerably over the figure for the previous year. The local committees, together with the Association's central Benevolent Fund, raised approximately £3,330 from voluntary subscriptions, proceeds of coffee mornings, garden parties, etc. during the year. This is a praiseworthy achievement and is an indication of the enthusiasm of the members of the local committees as well as an awakening of interest on the part of the general public in the problem of mental disorder. The County Council bears the full cost of the Association's administrative expenses so that all money raised from voluntary sources can be fully utilised for the benefit of trainees at the training centres, residents at the hostels and other mentally disordered people.

COURSES ATTENDED BY TRAINING CENTRE STAFF

Two Instructors (from the Newcastle and Shepwell Green Adult Training Centres) successfully completed the N.A.M.H. Diploma Course in July, 1965. By the end of the year, one had gained promotion to Deputy Supervisor status.

Four Assistant Supervisors from the Newcastle (2), Lichfield and Bilston Junior Training Centres also successfully completed their respective Diploma Courses in July, 1965. From September, 1965, a further three instructors from Adult Training Centres (Audnam (2) and Willenhall) were seconded on the one-year Adult Course and three more Assistant Supervisors from junior centres (Stafford, Leek and Lichfield) commenced one-year or two-year Courses at the same time. Two Assistant Supervisors (from Rowley Regis and Cannock) also continued into their second year of the two-year Course in Bristol which will be completed in July, 1966.

OTHER ASPECTS OF STAFF TRAINING

(a) *County Training Scheme for Training Centre Staff*

During 1965 the existing Training Scheme was revised following the publication of the Scott Report covering the whole question of the training of staff at training centres for the mentally subnormal. This Report provided, inter alia, for the minimum age for entry to the Diploma Course to be reduced to eighteen years, and recommended that local authorities should establish training schemes for school leavers between the ages of sixteen and eighteen years.

The County Council Scheme was allowed to "wind down" as trainees became promoted to posts of Assistant Supervisor or Instructor, and at the end of the year there were only two trainees on the Scheme. The revised County Scheme provides for a change of designation from "trainee" to "student", and for the two-year period of the Diploma Course to be included in the four-year period of the County Scheme.

The age of recruitment has been raised from 15 to 16 years, and the students are eligible for promotion to Assistant Supervisors' posts during the third or fourth year of training (i.e. while they are absent on the Diploma Course.)

(b) *Annual Refresher Course*

The Annual Refresher Course for teachers of the mentally handicapped was held for the fourth year in succession at the Madeley College of Education, near Stafford. The Course was for four days from the 6th to 9th April. The number of students attending was 129 of whom 50 were from local authorities other than Staffordshire including students from as far afield as Newcastle-on-Tyne, Carlisle and Peterborough.

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

The continued popularity of the Course owes much to the comfortable accommodation, good food and cordiality of the staff of the college.

(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 1965 twenty-three members of the staff had the opportunity of attending such courses and conferences.

DEVELOPMENT OF THE SERVICE DURING 1965

Nineteen-sixty-five saw the opening of four new establishments. On 4th February the new purpose-built home for the elderly mentally frail was brought into use at Hillport House, Newcastle to provide accommodation for 40 residents. A similar home received its first residents on 10th March at Summerhill Grange, Kingswinford. This is for 29 residents in adapted premises situated in most pleasant surroundings.

The purpose-built Adult Training Centre and Hostel at Stafford came into use on the 5th July and 23rd August respectively. The Training Centre is 60-place, and the hostel takes 23 residents who normally attend the Training Centre during the day. The establishments are on adjacent sites.

The building construction work to provide Junior and Adult Hostels at Lichfield was started towards the end of the year, and these premises should be ready for occupation early in 1967.

By the end of 1965 in the new premises opened during the year there were 34 old people resident at Hillport House and 21 at Summerhill Grange, Kingswinford. The Adult Hostel in Stafford filled very quickly and at the end of the year 20 beds were occupied, and the Training Centre had 43 trainees. Staffing difficulties have again been experienced, particularly in the Hostels—a problem which will become increasingly acute as more residential establishments are opened throughout the country. It is not always possible, owing to staff shortages, to maintain the Homes and Hostels at full capacity.

There were six Official Openings during the year. On the 14th and 18th January the Junior Training Centres and Hostels at Leek and Cannock were officially opened. The opening ceremonies at Hillport House, Newcastle and Summerhill Grange, Kingswinford were held on 29th April and 30th June respectively. Both are Homes for elderly mentally frail men and women.

Orchard House, Newcastle—a Home for patients discharged from hospitals for the mentally ill—was officially opened on 24th May, and the opening ceremony at the new Hostel and Training Centre for Adults at Stafford was performed on 21st September.

WORK UNDERTAKEN IN THE COMMUNITY

New Cases:

Particulars of new cases reported to the Local Health Authority during 1965 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	2	—	—	6	4	9	13	16	19	1,022
(2) Aged 16 years and over	420	554	1	2	6	2	2	—	429	558	
(B) Hospitals (after in-patient treatment)											
(1) Under 16 years of age ..	1	2	—	—	—	—	6	4	7	6	1,133
(2) Aged 16 years and over	445	603	7	3	2	4	32	24	486	634	
(C) Hospitals (after or during out-patient or day treatment)											
(1) Under 16 years of age ..	—	—	—	—	1	—	5	1	6	1	401
(2) Aged 16 years and over	162	225	3	2	—	2	—	—	165	229	
(D) Local Education Authority											
(1) Under 16 years of age ..	—	—	—	—	5	6	14	17	19	23	104
(2) Aged 16 years and over	—	—	—	—	24	35	2	1	26	36	
(E) Police and Courts											
(1) Under 16 years of age ..	1	—	—	—	2	1	1	2	4	3	151
(2) Aged 16 years and over	86	51	—	—	—	2	4	1	90	54	
(F) Other Sources											
(1) Under 16 years of age ..	2	—	2	—	23	32	32	34	59	66	847
(2) Aged 16 years and over	307	356	1	1	18	14	13	12	339	383	

TOTAL .. 3,658

Community Care

In addition to the 781 persons actually receiving training and the 76 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, 1965.

	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	—	8	5	210	169	223	174	} 694
(2) Aged 16 years and over	—	—	5	2	23	3	136	128	164	133	
(B) Awaiting entry thereto:											
(1) Under 16 years of age ..	—	—	—	—	—	—	19	25	19	25	} 77
(2) Aged 16 years and over	—	—	—	—	—	—	14	19	14	19	
(C) Receiving training in a residential training centre:											
(1) Under 16 years of age ..	—	—	1	—	1	15	14	16	15	15	} 60
(2) Aged 16 years and over	—	—	—	—	5	4	9	11	14	15	
(D) Awaiting entry to a residential training centre:											
(1) Under 16 years of age	—	—	—	—	—	—	3	3	3	3	} 8
(2) Aged 16 years and over	—	—	—	—	—	—	2	—	2	—	
(E) Receiving tuition from Home Teacher:											
(1) Under 16 years of age ..	—	—	—	—	—	—	7	8	7	8	} 27
(2) Aged 16 years and over	—	—	—	—	—	1	6	5	6	6	
(F) Awaiting such training:											
(1) Under 16 years of age ..	—	—	—	—	—	—	—	—	—	—	} —
(2) Aged 16 years and over	—	—	—	—	—	—	—	—	—	—	
(G) Receiving home visits and not included in above											
(1) Under 16 years of age ..	—	—	—	—	8	11	38	29	46	40	} 1,533
(2) Aged 16 years and over	459	561	5	2	154	140	54	72	672	775	
(H) Resident in Local Authority Home/Hostel:											
Under 16 years of age	—	—	—	—	—	—	—	1	—	1	} 108
(2) Aged 16 years and over	22	46	—	—	6	6	14	13	42	65	
(I) Awaiting such residence:											
(1) Under 16 years of age	—	—	—	—	—	—	—	—	—	—	} 6
(2) Aged 16 years and over	—	—	—	—	—	—	3	3	3	3	
(J) Resident at L.A. expense in other residential Homes/Hostels:											
(1) Under 16 years of age ..	—	—	—	—	—	—	—	—	—	—	} 3
(2) Aged 16 years and over	—	—	—	—	—	1	—	2	—	3	
(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 ..	—	—	6	—	16	17	288	241	310	258	} 2,504
(2) Aged 16 years and over	481	607	10	4	188	155	238	253	917	1,019	

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, 1965, there were two 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.	—	—	—	—

*This is a Newcastle Borough case.

Both 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	...	...	...	20
Section 26	...	...	...	6
Section 60	...	...	...	5
Section 65	...	...	...	1

The following table indicates the extent of temporary residential care provided during 1965, 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 31.12.65:											
(A) In urgent need of hospital care:											
(1) Under 16 years of age ..	—	—	—	—	—	—	18	8	18	8	} 30
(2) Aged 16 years and over ..	—	—	—	—	—	—	4	—	4	—	
(B) Not in urgent need of hospital care:											
(1) Under 16 years of age ..	—	—	—	—	—	—	4	1	4	1	} 13
(2) Aged 16 years and over ..	—	—	—	—	—	—	5	3	5	3	
Number of admissions for temporary residential care during 1965:—											
(A) to N.H.S. Hospitals											
(1) Under 16 years of age ..	—	—	—	—	—	—	18	9	18	9	} 33
(2) Aged 16 years and over ..	—	—	—	—	—	—	3	3	3	3	
(B) to L.H.A. residential accommodation:											
(1) Under 16 years of age ..	—	1	—	—	7	9	12	10	19	20	} 117
(2) Aged 16 years and over ..	11	25	—	—	11	9	11	11	33	45	
(C) Elsewhere:											
(1) Under 16 years of age ..	—	—	—	—	—	—	4	—	4	—	} 4
(2) Aged 16 years and over ..	—	—	—	—	—	—	—	—	—	—	

THE MENTAL HEALTH CENTRES

At the end of the year under review there were three Mental Health Centres in permanent premises and one building in Sedgley was 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 services provided as amplified in the tables above, as the experience of staff widens and additional qualified personnel become available, so the Centres are becoming increasingly recognised as agencies willing to offer skilled help and advice on the emotional problems of living. These may be marital problems, delinquency, unemployment, etc. without marked psychiatric illness but where 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, and there are 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 to 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-two from April, 1965.

The subnormality clinics held in collaboration with the staff of the Birmingham Regional Hospital Board have continued. These are diagnostic and advisory clinics for mentally subnormal children, adults and their families in the south of the County (with clinics at Stafford, Lichfield, Coseley and Kingswinford). Similar facilities exist for children from the North Staffordshire administrative area to attend clinics held by the Regional Hospital Board staff in Stoke-on-Trent. 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 Newcastle have also flourished during 1965, and plans are in hand for further experiments in this field during 1966. The Stafford area Social Club is temporarily closed through staff shortage. Activities undertaken include handicrafts, Bingo, Beetle, Table Tennis, Dancing, etc. and an outing to Blackpool to view the lights.

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

It is still proving very difficult to obtain sites for many of the projects on the ten-year Building Programme which was originally planned four years ago. Although several projects had been brought forward from previous years to be added to those already on the list for 1965/66, it was only possible to commence work on the sites of two of the proposed establishments by December, 1965. Once again it will be necessary to defer many of the projects until future years. The first essential is to press forward with the provision of Training Centres and Hostels for the Mentally Subnormal, and also the Special Care Units for which there is a known need in the community.

EPILEPTICS AND SPASTICS

The following are particulars of the known cases of epilepsy and cerebral palsy in the Administrative County at the 31st December, 1965:—

EPILEPSY

Adults

No. in Part III Accommodation	...	25
No. in own homes	...	49
No. chargeable to the Authority in colonies outside the County	...	30
		104

Children between the ages of 2 and 16 years

Epileptics

At special Schools	...	7 (5 boys 2 girls)
At Ordinary Schools	...	282 (143 boys 139 girls)
Home Tuition	...	3 (2 boys 1 girl)
At home without tuition (i.e. Pre-School age)	...	Nil
		292 (150 boys 142 girls)

Other major defects accompanied by epilepsy

At Special Schools	...	14 (9 boys 5 girls)
On waiting list for Special Schools (at ordinary schools)	...	2 (boys)
At ordinary schools	...	10 (7 boys 3 girls)
Having home tuition	...	4 (2 boys 2 girls)
		30 (20 boys 10 girls)

322

Children under 2 years of age

No. treated in hospital	...	...	7	
No. treated by general practitioners	...	...	1	
			8 (6 boys 2 girls)	8

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

No. under 16 years	...	...	...	38 (22 male 16 female)	
No. 16 years and over	...	...	...	59 (37 male 22 female)	
				97 (59 male 38 female)	97
					531

CEREBRAL PALSY

Adults

No. in own homes	...	...	...	58	
No. in Voluntary Homes but chargeable to the authority	...	...	...	14	
					72

Children 2—16

At Special Schools for the Physically Handicapped:—

Residential	...	...	...	...	38 (30 boys 8 girls)
Day	...	...	...	...	17 (12 boys 5 girls)

At Special Schools for other causes:—

Residential	...	...	...	...	10 (6 boys 4 girls)
Day	...	...	...	...	4 (3 boys 1 girl)

At Nursery Schools Nil

At ordinary schools 52 (35 boys
17 girls)

Having Home Tuition 4 (girls)

At Home without Tuition

(? Educability) Nil

(Pre-School Age) 9 (4 boys
5 girls)

Unsuitable for Education on Mental

Grounds 70 (42 boys
28 girls)

	204 (132 boys 72 girls)	204
-------	----------------------------	-----

Children under 2

No. treated in hospital	...	...	3	
No. treated by general practitioners			4	
			7 (5 boys 2 girls)	7

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

No. under 16 years	...	...	...	60 (24 male 36 female)	
No. 16 years and over	...	...	...	60 (29 male 31 female)	
				120 (53 male 67 female)	120
					403

In addition to the 97 persons suffering from epilepsy and the 120 suffering from spastic conditions in addition to mental subnormality, 27 subnormals were suffering from both epilepsy and cerebral palsy (16 male and 11 female.) Two of these attended an Adult Training Centre and 4 attended Junior Training Centres.

Of the 97 persons suffering from epilepsy in addition to mental subnormality, 41 were in attendance at Training Centres and two were receiving Home Teaching.

Of the 120 subnormals suffering from spastic conditions, 42 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 in residential accommodation under the same Act.

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 1965									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	60,600	6.5	22.8	16.6	0.33	6.5	12.6	10.1	17.4	—	—	—	1.12	0.43	0.26	0.08	0.05	0.17		
Amblecote	3,000	3,010	4.5	15.2	16.1	—	12.9	13.0	43.5	87.0	0.33	—	—	3.32	0.13	1.00	—	—	—		
Biddulph	14,060	15,770	2.4	22.2	20.4	0.25	8.8	12.1	8.6	22.8	—	—	—	1.84	0.63	0.38	0.06	—	—		
Bilston	33,077	32,400	17.3	18.6	17.7	0.68	10.4	12.1	21.5	24.8	0.03	—	—	1.94	1.14	0.37	0.09	0.06	0.19		
Brierley Hill	56,377	61,070	10.4	22.8	20.3	0.38	9.3	11.9	10.8	15.8	0.02	—	—	1.85	1.08	0.36	0.07	0.03	0.16		
Brownhills	26,392	29,200	4.6	23.8	20.0	0.55	8.3	12.5	12.9	15.8	0.10	—	—	1.51	0.65	0.38	0.07	—	0.10		
Cannock	42,186	45,810	5.6	18.9	18.7	0.28	9.3	9.8	14.0	18.9	0.07	—	—	1.48	0.68	0.31	0.17	0.10	0.13		
Coseley	39,557	41,900	13.2	18.9	15.3	0.31	8.2	13.1	13.9	18.9	0.02	—	—	1.60	0.69	0.45	0.17	0.02	0.10		
Darlaston	21,732	21,410	13.9	14.4	14.0	0.19	10.6	15.2	26.0	32.5	0.05	—	—	2.76	0.97	0.37	0.09	—	0.05		
Kidsgrove	19,726	21,290	5.2	20.2	18.2	0.42	8.1	12.2	14.0	16.3	0.09	—	—	1.97	0.14	0.23	0.14	0.05	0.14		
Leek	19,173	19,120	4.4	13.7	15.1	0.42	13.3	11.2	3.9	11.5	0.05	—	—	2.30	0.78	2.88	0.37	0.05	0.05		
Lichfield	14,077	20,030	5.6	26.6	23.9	0.25	10.2	9.8	3.8	9.4	—	—	—	—	0.35	0.30	0.20	—	0.15		
Newcastle	76,433	77,810	8.8	16.5	15.7	0.38	11.5	14.4	14.0	23.3	0.03	—	—	2.1	0.56	0.60	0.18	0.06	0.15		

Deaths occurring during the year 1965 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 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																						
Aldridge ..	1382	20	392	24	14	-	-	-	-	-	-	-	-	1	8	16	9	3	32	5	6	45	79	12	29	10	3	16	26	5	2	1	3	1	1	10	45	13	9	2	-
Amblecote ..	46	-	39	4	2	1	-	-	-	-	-	-	-	-	1	1	-	1	7	-	-	7	3	-	1	1	3	4	-	1	1	-	-	-	5	1	1	-	-		
Biddulph ..	351	4	139	8	3	-	-	-	-	-	-	-	-	-	4	4	6	1	14	2	2	18	28	3	11	14	-	6	10	1	-	1	-	-	-	10	-	2	2	-	
Bilston ..	604	22	337	15	13	1	-	1	-	-	-	-	-	-	12	19	3	-	29	3	2	59	54	3	26	5	3	12	37	3	3	1	2	1	-	6	32	5	14	1	-
Brierley Hill	1395	23	565	22	15	1	1	1	-	-	-	-	-	-	10	33	9	5	56	7	1	71	83	7	57	19	2	22	66	4	6	3	2	1	-	10	55	9	17	7	-
Brownhills ..	696	16	242	11	9	3	-	-	-	-	-	-	-	-	9	5	6	2	22	2	3	30	49	6	21	9	2	11	19	2	3	1	-	1	-	3	17	6	8	2	-
Cannock ..	858	13	427	16	12	3	-	-	-	-	-	-	-	-	10	14	6	8	30	2	4	65	69	5	89	12	-	14	31	8	1	-	5	2	-	6	27	5	9	2	-
Coseley ..	794	13	344	15	11	1	-	-	-	-	-	-	-	-	11	17	1	-	38	2	1	39	69	11	31	11	-	19	29	7	1	-	1	-	4	27	4	15	3	1	
Darlaston ..	308	4	226	10	8	1	-	-	-	-	-	-	-	1	12	13	4	3	27	1	2	26	28	7	28	5	1	8	25	2	1	-	-	-	1	19	1	5	4	-	
Kidsgrove ..	430	9	173	7	6	2	-	-	-	-	-	-	-	2	8	12	3	3	16	3	2	22	52	-	6	7	1	5	3	3	-	1	1	1	3	12	2	2	1	-	
Leek ..	262	8	254	3	1	1	-	-	-	-	-	-	1	1	6	13	5	1	19	1	6	40	42	10	27	8	-	11	15	7	1	3	1	6	-	1	17	4	4	3	-
Lichfield ..	533	5	205	5	2	-	-	1	-	-	-	-	-	-	10	-	7	1	10	-	1	36	25	3	23	27	-	6	7	4	2	2	-	-	3	29	3	2	3	-	
Newcastle ..	1290	30	898	30	18	2	-	1	-	-	-	-	-	2	26	41	10	10	77	5	6	163	202	9	80	42	6	47	44	14	4	1	5	5	12	51	12	15	6	-	

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 1965									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	49,340	13.0	14.6	14.2	0.22	10.3	13.4	11.1	16.7	—	—	—	0.04	—	1.91	0.69	0.55	0.1	0.02	0.10
Rugeley	13,012	15,850	5.5	26.6	23.9	0.44	9.1	13.7	28.4	30.8	—	—	—	—	—	1.64	0.44	0.32	0.19	—	0.32
Sedgley	27,927	32,510	8.5	21.3	18.1	0.55	13.5	12.0	7.2	8.7	—	—	—	0.03	—	2.43	0.92	0.65	0.03	0.03	0.03
Stafford	47,814	50,700	10.0	19.2	18.8	0.49	11.1	10.3	17.5	24.7	—	—	—	0.02	—	1.85	0.45	0.51	0.08	0.02	0.14
Stone	8,791	9,980	6.1	21.3	21.7	0.10	14.0	10.4	18.8	18.8	—	—	—	—	—	2.20	1.30	0.40	0.40	0.10	0.20
Tamworth	13,555	28,460	3.7	22.1	20.3	0.35	9.5	9.3	11.2	14.0	—	—	—	—	—	1.90	0.53	0.39	0.07	0.07	0.04
Tettenhall	14,800	16,000	6.4	13.2	13.7	0.31	9.4	11.5	28.3	28.3	—	—	—	—	—	1.25	0.44	0.38	—	—	0.19
Tipton	38,091	38,240	17.7	18.8	17.9	0.39	9.5	13.5	15.3	27.9	—	—	—	0.05	—	2.07	0.81	0.31	0.18	0.03	0.21
Uttoxeter	8,168	8,300	2.5	18.7	18.7	0.48	10.1	11.2	12.9	19.4	—	—	—	—	—	1.45	0.24	0.12	—	—	0.12
Wednesbury	34,511	34,850	17.2	18.1	17.7	0.26	10.7	14.5	6.3	9.5	—	—	—	0.06	—	2.07	0.80	0.60	0.11	0.11	—
Wednesfield	32,986	35,420	14.1	21.5	16.1	0.56	6.1	11.8	18.3	19.7	—	—	—	—	—	1.47	0.36	0.31	0.03	0.08	0.23
Willenhall	32,317	36,040	12.7	21.1	18.8	0.58	8.3	12.0	17.1	25.0	—	—	—	0.06	—	1.72	0.47	0.44	0.06	0.06	0.27
Totals and Averages	736,917	805,110	7.7	19.6	17.6	0.39	9.6	12.3	13.7	19.3	—	—	—	0.03	—	1.8	0.66	0.42	0.11	0.04	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, 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																							
Rowley Regis	720	11	510	12	8	2	—	—	—	—	1	—	—	—	2	12	22	12	3	45	3	3	70	114	13	59	13	2	27	34	5	3	1	1	4	—	5	29	3	14	8	—
Rugeley ..	422	7	144	13	12	—	—	—	—	—	—	—	—	—	—	4	5	2	1	14	—	1	17	29	—	15	6	—	5	7	3	—	—	—	1	—	5	20	4	3	2	—
Sedgley ..	692	18	439	6	5	1	—	1	—	—	—	—	—	—	—	7	20	11	5	36	1	4	75	90	11	61	20	—	21	30	1	2	2	1	1	—	1	21	5	8	3	—
Stafford ..	973	25	561	24	17	1	—	1	—	—	—	—	—	—	2	8	18	11	7	50	6	6	66	116	10	107	17	—	26	23	4	2	3	1	3	—	7	46	10	8	2	—
Stone ..	213	1	140	4	4	—	—	—	—	—	—	—	—	—	—	2	4	5	2	9	1	—	26	13	2	33	3	—	4	13	4	1	2	1	—	—	2	7	1	2	3	—
Tamworth ..	715	10	271	10	8	—	—	—	—	—	—	—	—	—	—	10	12	7	5	20	2	2	42	48	8	22	21	—	11	15	2	3	1	2	2	—	1	23	8	3	1	—
Tettenhall ..	212	5	151	6	6	—	—	2	—	—	—	—	—	—	—	2	5	3	—	10	1	3	31	29	1	20	4	1	6	7	—	1	1	—	—	—	3	8	3	10	—	—
Tipton ..	718	15	363	20	11	2	—	—	—	—	1	—	—	—	2	17	20	6	2	34	2	6	41	60	8	37	3	1	12	31	7	3	2	1	3	—	8	27	12	9	4	2
Uttoxeter ..	155	4	84	3	2	—	—	—	—	—	—	—	—	—	—	—	4	1	—	7	—	—	13	16	1	17	5	—	1	2	—	—	—	—	—	1	9	2	5	—	—	
Wednesbury	632	9	371	6	4	2	—	—	—	—	—	—	—	—	—	10	27	5	1	29	1	5	55	75	5	43	14	—	21	28	4	—	1	4	—	—	—	22	3	12	4	—
Wednesfield	709	20	216	14	13	—	—	—	—	—	—	—	—	—	1	11	9	7	2	23	3	—	26	41	4	7	7	2	11	13	1	—	3	3	—	—	8	22	6	3	3	—
Willenhall ..	761	21	299	19	13	2	—	—	—	—	—	—	—	—	1	13	14	7	2	26	3	4	34	51	7	21	14	1	16	17	2	2	1	2	4	—	10	23	7	12	3	—
Totals ..	15871	313	7790	307	217	26	1	8	—	—	2	—	1	15	213	358	146	68	680	56	70	1117	1466	146	871	297	25	341	536	93	42	32	36	36	2	110	603	129	192	69	3	

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 1965									Measles	Whooping Cough	Diphtheria	Tuberculosis, Respiratory	Tuberculosis, other	Malignant Neoplasm	Bronchitis	Pneumonia	Other Diseases of Respiratory System	Nephritis and Nephrosis	Congenital Malformations
Cannock	..	..	1.5	25.8	21.7	0.53	8.3	11.8	15.5	20.7	—	—	—	0.02	—	1.65	0.58	0.32	0.10	0.02	0.19
Cheadle	..	..	1.6	17.7	18.1	0.50	12.1	10.4	9.0	18.0	—	—	—	0.05	—	1.72	0.53	0.80	0.08	0.08	0.05
Leek	..	..	4.1	19.1	19.5	0.39	8.2	9.8	20.7	27.5	—	—	—	—	—	1.71	0.46	0.2	—	—	0.02
Lichfield	..	..	1.9	24.4	23.9	0.48	11.6	10.7	9.2	11.0	—	—	—	0.02	—	1.59	0.71	1.5	0.22	—	0.11
Newcastle	..	..	2.1	14.2	13.6	0.32	11.6	12.5	11.3	18.9	—	—	—	0.11	—	1.56	0.54	0.27	0.22	0.05	0.05
Seisdon	..	..	1.0	18.4	15.3	0.24	7.6	10.6	21.1	31.7	—	—	—	0.02	—	1.74	0.41	0.24	0.02	0.02	0.19
Stafford	..	..	4.0	17.8	17.4	0.20	7.7	9.7	11.2	13.9	—	—	—	—	—	1.29	0.30	0.30	0.15	—	0.15
Stone	..	..	3.1	19.3	18.3	0.31	9.6	11.4	10.6	15.9	—	—	—	0.10	—	1.28	0.36	0.41	—	0.10	0.05
Tutbury	..	..	1.6	20.1	19.9	0.20	9.7	11.9	14.7	24.6	—	—	—	0.05	—	1.18	0.54	0.40	0.05	0.10	0.15
Uttoxeter	..	..	4.6	19.2	23.2	0.16	9.0	11.6	4.3	17.1	—	—	—	—	—	1.23	0.41	0.16	0.08	0.08	0.08
Totals and Averages	..	..	2.2	20.6	19.4	0.38	9.8	11.2	12.7	19.0	—	—	—	0.04	—	1.61	0.52	0.57	0.10	0.04	0.13

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 ..	968	20	312	20	15	1	—	2	—	—	—	—	—	1	13	9	6	—	34	2	2	47	51	4	30	12	3	12	22	4	1	3	1	2	—	7	28	9	4	1	1	
Cheadle ..	665	19	456	12	6	2	—	1	—	—	1	—	—	1	12	14	8	3	28	2	1	65	83	5	107	19	—	30	20	3	—	—	3	—	—	2	31	4	8	3	—	
Leek ..	291	6	125	8	6	—	—	—	—	—	—	—	—	—	10	4	1	—	11	2	1	31	16	1	8	9	—	3	7	—	—	—	—	1	—	3	12	2	2	1	—	
Lichfield ..	1090	20	517	12	10	1	—	1	—	—	—	—	—	—	6	15	10	3	37	1	4	78	114	8	44	12	1	67	32	10	5	2	—	—	—	5	27	18	11	4	1	
Newcastle ..	265	6	216	5	3	2	—	—	—	—	—	—	—	—	3	8	2	3	13	2	1	43	48	5	17	21	1	5	10	4	5	3	1	—	—	1	15	2	1	—	—	
Seisdon ..	762	10	313	21	14	1	—	—	—	—	—	—	—	—	8	18	5	2	39	4	—	57	56	2	23	9	—	10	17	1	1	3	1	1	—	8	32	4	8	3	—	
Stafford ..	358	4	156	5	4	—	—	—	—	—	—	—	—	—	6	7	4	—	9	1	3	20	35	4	15	3	—	6	6	3	1	—	—	1	—	3	13	7	7	2	—	
Stone ..	378	6	188	6	4	2	—	—	—	—	—	—	—	1	8	4	4	1	8	—	1	40	37	1	20	8	—	8	7	—	—	—	3	2	1	—	1	19	5	4	3	—
Tutbury ..	407	4	196	10	6	1	—	—	—	—	1	—	—	—	6	9	—	1	18	2	1	23	41	5	30	7	—	8	11	1	—	—	2	1	—	3	15	4	5	1	—	
Uttoxeter ..	234	2	109	4	1	—	—	—	—	—	—	—	—	—	2	7	—	—	6	1	2	18	23	—	16	4	—	2	5	1	—	—	—	1	3	—	1	7	5	4	1	—
Totals ..	5418	97	2588	103	69	10	—	4	—	—	2	—	—	3	74	95	40	13	203	17	16	422	504	35	310	104	5	151	137	27	13	14	11	10	—	34	199	60	54	19	2	

Table showing the number of cases of certain Infectious Diseases notified in each sanitary area during the year ended 31st December, 1965, and the Attack-Rates per 1,000 of the population.

URBAN

DISTRICT	Estimated Population 1965 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 ..	60,600	-	-	-	-	-	-	54	0.90	3	0.05	-	-	-	-	726	11.98	2	0.03	-	-	-
Amblecote ..	3,010	-	-	-	-	-	-	-	-	-	-	-	-	-	-	13	4.32	-	-	-	-	-
Biddulph ..	15,770	-	-	-	-	-	-	32	2.0	-	-	-	-	-	-	78	4.91	3	0.19	-	-	-
Bilston ..	32,400	-	-	-	-	-	-	2	0.06	5	0.15	-	-	2	0.06	256	7.90	2	0.06	1	0.03	-
Brierley Hill ..	61,070	-	-	-	-	-	-	42	0.69	-	-	-	-	3	0.05	388	6.35	2	0.03	10	0.16	-
Brownhills ..	29,200	-	-	-	-	-	-	23	0.79	25	0.85	-	-	1	0.03	499	17.09	6	0.21	-	-	-
Cannock ..	45,810	-	-	-	-	2	0.04	10	0.22	13	0.28	-	-	-	-	365	8.17	3	0.07	-	-	-
Coseley ..	41,900	-	-	-	-	1	0.02	28	0.64	2	0.05	-	-	2	0.05	501	11.96	10	0.24	-	-	-
Darlaston ..	21,410	-	-	-	-	2	0.09	5	0.23	8	0.37	-	-	-	-	143	6.68	-	-	-	-	-
Kidsgrove ..	21,290	-	-	-	-	-	-	15	0.70	2	0.09	-	-	-	-	92	3.85	1	0.05	-	-	-
Leek ..	19,120	-	-	-	-	-	-	24	1.26	10	0.52	-	-	-	-	344	17.99	8	0.42	3	0.16	-
Lichfield ..	20,030	-	-	-	-	-	-	10	0.50	-	-	-	-	-	-	70	3.49	4	0.20	6	0.30	-
Newcastle ..	77,810	-	-	-	-	-	-	80	1.03	3	0.04	-	-	2	0.03	723	9.29	26	0.33	2	0.03	-

URBAN—continued

DISTRICT	Estimated Population 1965 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..	49,340	-	-	-	-	-	-	26	0.53	13	0.26	-	-	1	0.02	346	7.01	5	0.10	-	-	-
Rugeley ..	15,850	-	-	-	-	-	-	-	-	-	-	-	-	-	-	199	12.55	-	-	-	-	-
Sedgley ..	32,510	-	-	-	-	-	-	7	0.22	1	0.03	-	-	-	-	315	9.69	-	-	-	-	-
Stafford ..	50,700	-	-	-	-	-	-	8	0.16	37	0.73	-	-	-	-	576	11.36	-	-	-	-	-
Stone ..	9,980	-	-	-	-	-	-	1	0.10	2	0.20	-	-	-	-	128	12.82	-	-	-	-	-
Tamworth ..	28,460	-	-	-	-	-	-	3	0.11	1	0.04	-	-	2	0.07	134	4.71	1	0.04	-	-	-
Tettenhall ..	16,000	-	-	-	-	-	-	2	0.13	1	0.06	-	-	-	-	183	11.43	5	0.31	-	-	-
Tipton ..	38,240	-	-	-	-	-	-	54	1.41	1	0.03	-	-	-	-	417	10.90	1	0.03	-	-	-
Uttoxeter ..	8,300	-	-	-	-	-	-	3	0.36	-	-	-	-	2	0.24	159	19.15	-	-	1	0.12	-
Wednesbury ..	34,850	-	-	-	-	-	-	6	0.17	2	0.06	-	-	1	0.03	183	5.25	-	-	-	-	-
Wednesfield ..	35,420	-	-	-	-	-	-	30	0.84	1	0.03	-	-	2	0.06	363	10.25	2	0.06	-	-	-
Willenhall ..	36,040	-	-	-	-	1	0.03	6	0.17	1	0.03	-	-	-	-	406	11.26	3	0.08	-	-	-

RURAL

DISTRICT	Estimated Population 1965 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	37,580	-	-	-	-	-	-	7	0.19	9	0.24	-	-	-	-	418	11.12	3	0.08	-	-	-
Cheadle	37,670	-	-	-	-	-	-	43	1.14	4	0.11	-	-	-	-	458	12.16	4	0.11	-	-	-
Leek	15,220	-	-	-	-	-	-	8	0.53	8	0.53	-	-	-	-	280	18.40	1	0.07	-	-	-
Lichfield	44,730	-	-	-	-	-	-	21	0.47	6	0.13	-	-	2	0.04	342	7.64	41	0.92	2	0.04	1
Newcastle	18,610	-	-	-	-	1	0.05	3	0.16	5	0.27	-	-	-	-	263	14.13	1	0.05	1	0.05	-
Seisdon	41,350	-	-	-	-	-	-	7	0.17	1	0.02	-	-	1	0.02	499	12.06	8	0.19	2	0.04	-
Stafford	20,170	-	-	-	-	-	-	3	0.15	6	0.30	-	-	-	-	154	7.63	-	-	-	-	-
Stone	19,560	-	-	-	-	-	-	14	0.72	-	-	-	-	-	-	217	11.09	1	0.05	-	-	-
Tutbury	20,250	-	-	-	-	-	-	4	0.20	15	0.74	-	-	1	0.05	297	14.67	2	0.10	-	-	-
Uttoxeter	12,170	-	-	-	-	-	-	4	0.33	-	-	-	-	-	-	107	8.79	1	0.08	-	-	-