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Warwickshire County Council.

ANNUAL REPORT

OF THE

COUNTY MEDICAL OFFICER OF HEALTH

FOR THE YEAR

1950.

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Office of the County Medical Officer of Health, Shire Hall, Warwick.

To the Warwickshire County Council.

Mr. CHAIRMAN, LADIES AND GENTLEMEN,

I have the honour to report on the Health of the County of Warwickshire during 1950. The year has been one of consolidation rather than change, and in my report I shall draw attention to the places where progress has been made and to the many problems which still exist.

For the third year in succession there was a fall in the birth-rate, which was 15.7 in 1950 compared with 17.2 in 1949. Other vital statistics follow the satisfactory downward trends of recent years; the stillbirth rate of 18.9 per 1,000 births showed a slight reduction on the 1949 value of 19.4; the maternal mortality rate fell from 0.85 to 0.38, and the infant mortality rate from 28.8 to 26.9 per 1,000 total births.

As in 1949, 5% of all births were illegitimate, and though the illegitimate infant mortality rate of 34.8 was an improvement on the 1949 value of 45.7, the illegitimate stillbirth rate increased to 33.6, compared with 28.0 in 1949.

Infant Mortality.

As previously stated, the infant mortality rate fell from 28.8 per 1,000 live births in 1949 to 26.9 in 1950; this was again the lowest ever recorded in the county and compares favourably with the provisional figure of 29.8 for England and Wales. It is encouraging to find that the reduction of 8% of the 1949 figure occurred not only at ages over 1 month, but also in the neonatal period, which has previously shown a less marked decrease. The neonatal death rate in 1950 was 17.4 per 1,000 live births, compared with 19.0 in 1949 and it is to be hoped that this healthy sign indicates that we are to see further appreciable reductions in the deaths among very young infants.

The causes of infant deaths are set out in Table 11 and it will be seen that prematurity was again the principal cause, responsible for nearly one death in four. In this group, however, the reduction on the 1949 figure was particularly pronounced; there were 46 deaths, giving a death rate of 6 per 1,000 live births, compared with 68 deaths or 8 per 1,000 live births in the previous year. Other causes with marked improvements were bronchitis and pneumonia, whooping cough and tuberculous diseases, but the numbers in these last two groups are low. In two categories, haemolytic disease and asphyxia, the number of deaths was greater than in 1949.

Maternal Mortality.

Last year I drew attention to the steady downward trend in the infant mortality rate over the last 40 years, and it is of interest to consider the trend in maternal mortality over the same period. This is shown graphically in Figure 2. Unlike the infant mortality rate, which was reduced by 40% between 1910 and 1930, the maternal death rate remained at the same level throughout this twenty year period, and began to fall only as recently as 1934. Since then, however, the downward trend has been maintained and the rate for England and Wales in 1950 was less than a quarter of the rate in 1935. In Warwickshire, the maternal mortality rate does not differ greatly from the England and Wales value, but because of the small numbers its fluctuations are more marked; in 1949 there were 7 maternal deaths among Warwickshire women, and in 1950 only 3, giving a maternal mortality rate of 0.4 per 1,000 births.

Premature Births.

Table 12 shows in some detail the proportion of premature babies who survive. Of the 7,847 births notified in the county in 1950, 552 or 6.7% were premature, that is, weighed 5½ bs. or less at birth; of these 82 were premature still-births, leaving 470 premature live births, and of these 86% survived the first month of life; in 1949 the figure was 84%. Some idea of the increased susceptibility of these babies to the hazards of the early days of life may be obtained by a comparison with total births in the county, of whom approximately 98% survive the first

month of life. It will be seen from the table that the chance of survival of the heaviest of the premature live-born babies is very high, but that there is a rapid falling off in the survival rate as the weight at birth decreases.

Pulmonary Tuberculosis.

There were 407 new notifications of pulmonary tuberculosis in 1950, compared with 431 in 1949, and at the end of the year, there were 2,135 notified cases on the register, 245 of whom were children under 15. 122 persons died from pulmonary tuberculosis during the year, compared with 146 in 1949 and 186 in 1948.

Patients suffering from tuberculosis are classified according to whether they are found to have tubercle bacilli, and also according to severity. The classification at the time of notification was obtained for 246 of the newly notified respiratory cases, and was found to be as follows:—

f disease.	- 1	No. of case
RA 1		81
RA 2		32
RA 3		16
RB 1		25
RB 2	***	59
RB 3		33
		246
	RA 1 RA 2 RA 3	RB 1 RB 2

The 106 cases who were at stages RA 1 and RB 1 at the time of notification showed only slight constitutional disturbance, but in the other 146 cases, constitutional disturbance was more pronounced. The category RA 3 is anomalous, for though clinically the cases in it are advanced, at the time of notification no tubercle bacilli had been found; it is probable, however, that with more systematic examination bacilli would be found and these cases would then fall into the category RB 3.

Of the 126 persons who died from pulmonary tuberculosis, 11% had not been notified, 21% were notified during the year, and 17% were notified in 1949. 15% of the cases had been notified at least 5 years before death.

Efforts to prevent the spread of this disease can be made in various ways. Perhaps the most important is the rehousing of families living in overcrowded and insanitary conditions, particularly when there are cases of tuberculosis in the household. Progress in this direction is slow. The maximum isolation should of course always be given to the infectious case.

Another preventive measure is the use of Mass Radiography to detect pulmonary tuberculosis in selected groups of people. The mobile unit of the Regional Hospital Board's Mass Radiography Centre made nine surveys in Warwickshire during 1950. Three were industrial surveys, three were in mental institutions, one was at a colliery, one at a school and one at a Polish camp. Altogether, 6,515 people were x-rayed, and 64 of these, or just under 1% were referred to dispensaries as suspected active pulmonary tuberculosis. The proportion referred was highest at the Polish Camp where 13 of the 615 men x-rayed were found to have significant tuberculosis lesions.

A third means of prevention is provided by B.C.G., and a scheme for the vaccination of young children exposed to grave risk of infection is being introduced.

While everything possible is done to prevent the spread of pulmonary tuberculosis, new cases continue to be discovered and must be treated. It is heartening to be able to report that in recent months there has been a reduction in the waiting list for the King Edward VII Memorial Sanatorium, Hertford Hill; during 1950 the average waiting time for admission was 25 weeks for men and 19½ weeks for women, and at the end of the year, 100 Warwickshire patients were on the waiting list. By 1st May, 1951, this had been reduced to 72, an improvement effected principally by an extension of the practice of treating patients in their own homes, rather than by increasing the number of sanatorium beds.

Each of the 2,135 cases in the county is a potential source of infection to others, and the importance of examining contacts and of establishing a hygienic routine in all homes where tuberculosis is present, cannot be over emphasised.

Smallpox.

It is again satisfactory to report a complete absence of smallpox in the county during the year. The measures for control of epidemic diseases generally have been reviewed by the Ministry of Health, with particular regard to possible outbreaks of smallpox. As a result, arrangements have been made for the fullest co-operation between Hospitals and Medical Officers of Health and the protection of Hospital staffs.

In 1950 precautionary steps were taken in connection with the incidence of smallpox on the R.M.S. "Chitral," which arrived at Tilbury on 5th March, the S.S. "Cilicia" at Liverpool on April 16th, and the S.S. "Strathnaver" at Port of London on 1st July. Presumed contacts from these vessels travelling to destinations within the County were kept under surveillance for the prescribed period, and no cases were reported.

Although there have been no cases of smallpox in the county for many years, protection against the disease by vaccination is as important as ever. It is therefore disturbing to find that the proportion of children who are not vaccinated is very high. 1950 showed an improvement on 1949 with 1,095 vaccinations of children under one, compared with 889, but this represents only 14% of the live births. A further 830 children were vaccinated at ages one to four, compared with 692 in 1949. It is desirable to maintain a high level of vaccination in the population in order to prevent an outbreak of smallpox in the event of an actual case coming into the county.

Diphtheria.

During the year 14 cases of diphtheria were notified. 4 of the individuals had been immunised and 10 had not. There was only one death, a woman who had not been immunised.

Diphtheria Immunisation.

4,441 children completed courses of primary immunisation during the year and 4,502 were given booster doses. The number receiving primary immunisation was the lowest recorded for several years, the reduction on previous years being due to the stopping of all immunisation in the county from the end of June until the end of October, as a precautionary measure during the epidemic of poliomyelitis. This meant that although for the first six months of the year immunisation was carried out as usual and nearly 3,000 children received the full primary course, during the second half year less than half that number were treated. Although it may seem right to discontinue immunisation when poliomyelitis is prevalent, it must be remembered that serious consequences may arise if the level of immunisation in the county is allowed to fall. It will be seen from Table 17 that the situation at present is not satisfactory, for at the end of 1950, only 55% of the children in the county were immunised. The situation is disturbing because the level of immunisation in the lower age groups has already fallen. In particular, of 8,228 children born in 1949, only 3,336 had been immunised by the end of 1950. It is important that this trend should be arrested, for a high level of immunisation is a necessary protection against the spread of diphtheria.

Poliomyelitis.

The outbreak of poliomyelitis in the county during 1950 was similar in its intensity to that of 1947. There were 133 notifications and 8 deaths, compared with 123 notifications and 10 deaths in 1947. As will be seen from Figure 4, which shows diagrammatically the monthly notifications throughout the last four years, August was the peak month in both 1947 and 1950.

The incidence of notified cases in Warwickshire was somewhat higher than in England and Wales, but not as high as in Birmingham and Coventry. The areas in the County with the highest incidence were Sutton Coldfield and the North-Western area, i.e. two of the three areas adjacent to Birmingham.

For most of the cases notified, detailed reports were obtained, and the latest information about these cases is given in Table 21. It will be seen from this table that rather less than

one-third were children under 5, just over one-third were schoolchildren, and one-third were 15 years of age and over. At the time of writing, about nine months after the peak of the epidemic, one-third of the patients were still under treatment; most of these will recover with a degree of residual paralysis which may only be slight. Of the other 81 cases, 64 have recovered completely, with no paralysis, 9 have recovered but have some degree of paralysis, and 8 died.

In the present state of knowledge of this disease, it is impossible to take decisive preventive measures, but advice is given which may reduce the size of the epidemic. During the period when poliomyelitis was prevalent in the midlands, tonsil and adenoid operations and immunisation against diphtheria were temporarily suspended.

I have already discussed in this letter and in my report as County School Medical Officer the serious results which may arise from taking this possibly sensible precaution, and it will be clear that great vigilance must be exercised and all available evidence considered on any occasion when the question of suspending preventive measures against one disease are weighed against the possible increase of another.

Other Infectious Diseases.

Measles was widespread in the county during 1950, and 5,347 cases were notified, the largest number since 1941. Most areas of the county had high notification rates, but the outbreak was particularly marked in the Rugby and North Western areas, where 17 cases per 1,000 of the population were notified. It is satisfactory to report that there were no deaths from this disease in 1950. In 1941, with a comparable number of cases, there were 23 deaths.

Notifications of whooping cough also reached the highest level since 1941. In 1950, there were 1,578 cases and 4 deaths, compared with 1,679 cases and 25 deaths in 1941.

629 cases of scarlet fever were notified during 1950 and for the fourth year in succession, there were no deaths. In 1941, there were 634 cases and 2 deaths.

Venereal Diseases.

The number of new cases of venereal disease treated at clinics fell from 228 in 1949 to 180 in 1950 (124 men and 56 women). There was also a substantial decrease in the number of persons who ceased to attend clinics before their treatment was complete, and nearly all defaulters are non-infective. This improvement is due largely to the use of penicillin in combating the disease; short but intensive treatment has, in most cases, dispensed with the need for patients to attend clinics weekly over long periods during which they become discouraged and default.

Ante-Natal and Post-natal Clinics.

The division of responsibility for providing clinics for pregnant women is a thorny problem. Since the implementation of the National Health Service Act, the majority of women have decided that the hospital is the proper place for a child to be born. This is in many ways strange, for an ever increasing number of young mothers are being allotted new council houses, which are ideally suitable for home confinements. The Act, however, gives considerable financial advantage to the mother who has her baby in hospital, for while in hospital there is no expense, whereas, if the baby is delivered at home there is considerable expense, and mothers receive the same allowances in each case. This state of affairs has led to a drift of mothers away from home confinements at a time when a greater number of babies could have been born in good modern houses, and attended by the district midwife, who has usually had many years midwifery experience. It is desirable that more efforts should be made to persuade the mother that it is safe and proper to have a baby at home and that by doing so, she can be treated as an individual coming under the care of one midwife and one health visitor, and able to call on the advice and help of her own family doctor.

Dental treatment of expectant and nursing mothers and pre-school children.

Under Section 22 of the National Health Service Act, the local health authority is required to make arrangements for the dental care of expectant and nursing mothers and of children under five. The aim of this section of the Act was to give priority to mothers and young children, and it was intended that the service should be expanded to provide for the dental examination of all expectant mothers and periodical examination of young children. Owing to

the shortage of dental officers, this expansion has not been possible, and though a service for mothers and young children was started in 1948 and has been maintained ever since, it does not provide the comprehensive dental care which was envisaged, but only treatment for mothers who ask for it for themselves or their children. During 1950, 47 mothers and 294 pre-school children were treated in this way by county dentists, and in addition a few cases were referred to private practitioners.

The Illegitimate Child and its Mother.

Care of the illegitimate child and its mother is carried out by a social worker, who gives help both antenatally and postnatally. During the antenatal stage, the Social Worker interviews the woman and arranges medical care. For most of these women a hospital confinement is booked, and only a few are confined at home. If the woman has to leave her lodgings or wishes to move from her home district, a light post, usually of a domestic type, is found for her, and most of the ante-natal beds in the hostel at Stratford-on-Avon are used by these cases, who are admitted for the last month before confinement.

In the postnatal period, adoption of the child may be considered; the baby is then referred to the Children's Department, and adoption is usually straightforward. If the mother is a married woman, adoption is sought through one of the national societies in London. In some cases, the mother may be totally unsuitable for having the child in her care, nor can adoption be considered. The Social Worker then approaches the Voluntary Societies, seeking admittance to a Home for the child.

Many mothers, however, keep their babies. Some are absorbed back into their own families, but most are placed in residential domestic posts where there is no objection to a child. Help is then given with baby clothes, and a pram and a cot may be loaned until the mother is financially established. For women who wish to work at non-resident jobs, Day Nursery accommodation for the baby is offered, but living accommodation is very difficult to obtain. Occasionally, foster-homes are obtained, but the cost of the foster-home, together with the provision of clothes for the child, is usually too high, and this is rarely successful for long.

After-care visits are made by the Social Worker in cases where a woman keeps her baby, as it has been found that many problems arise after the mother leaves hospital. It is found that rehabilitation is usually complete six months after the birth of the baby, but when asked for help is given afterwards.

Guild Street Antenatal and Postnatal Home.

This home is a hostel for the unmarried mother and her child, and although it is a small unit, it fills an urgent need very successfully. There is accommodation for six antenatal and six postnatal cases. In 1950, 109 mothers were admitted, one-third of them for both antenatal and postnatal stay, and the average length of stay was 27 days antenatally and 22 days postnatally. A further 9 expectant mothers and 5 postnatal cases had to be sent to other homes; the main reasons being either that there was no accommodation available at Guild Street, or that the mother was very young and could more appropriately be sent for a long stay in a home where training was available.

Day Nurseries and the Nursery Nurses Training Scheme.

After consultations with representatives of the Ministries of Health and Education the Nursery Nurses Training Scheme was reorganised during the last quarter of 1950. A hostel for 14 students was set up in the Rugby area and during each of the two years of training the students, of whom there are 42 on establishment, go into residence at the hostel for 3 months and attend an intensive course of lectures at the Rugby College of Technology. In this way, the requirements of the National Nursery Examination Board for the further education of students in training have been met. Practical training is acquired at the recognised day nurseries in the county, at nursery schools and at one residential nursery. The scheme is working well, and there has been a large number of applicants for the training. It has therefore been possible to select a group of girls whose standard of education is suitably high.

It will be noted on Page 25 that most of the day nurseries are not filled to capacity, a result which was expected when the Council laid down special conditions for admission. When

the scheme for restricting admissions started, the staffing requirements were kept to two thirds of the standard of 5 children to one trained member of staff, recommended by the Ministry of Health in June, 1947 (Monthly Bulletin of the Ministry of Health). Attendance figures indicate that the number of children present on a given day was rarely above two-thirds of the maximum and that the average for the year was slightly less.

In spite of this low level of staffing, the cost during 1950 rose to 10/6d, per day attendance, compared with 9/3d, in the preceding year. Although the cost of maintaining these establishments is high, the work is well worth while. First, the present conditions for admission are that the mother is either not maintained or inadequately maintained by the father of the child and the nurseries afford these women an opportunity to remake their lives and make themselves independent. Secondly, certain children are admitted on the grounds of the ill-health of the mother, and in this case, the nursery affords a considerable saving to the Children's Committee, who would otherwise have to find accommodation for them. Thirdly, the maintenance of a nucleus of day nurseries should be regarded as an important Civil Defence measure, for in time of war an existing scheme could be expanded much quicker than a new one could be initiated. Lastly, taking the broad outlook, day nurseries provide an opportunity for girls to obtain training in child care.

The number of students in training at the end of 1950 was 40, compared with 29 at the end of 1949. 12 students passed the County examination, 10 passed the R.S.I. examination, and 7 that of the National Nursery Examination Board.

Nurseries and Child Minders Regulation Act, 1948.

Under this Act, Local Health Authorities are required to keep registers of premises, other than private dwellings, where children are received to be looked after during the day, and of persons who for reward receive children under 5 into their homes. In practice, there is similarity in the two types of registration, for where premises are registered, it must be ascertained that the children will be looked after by suitable persons, and where persons are registered, it must be ensured that the home is suitable for the day-time accommodation of children.

At the beginning of 1950, 2 child minders were registered, one at Rugby receiving 8 children and one at Sheldon receiving 3 children. During the year certificates of registration were issued to 2 child minders, one at Shirley and one at Rugby, both to accommodate 8 children. The original Rugby registration lapsed, because the child minder left the county. Premises at Warwick were also registered during 1950, with accommodation for 5 children. At the end of the year, therefore, three certificates of registration were in force for child minders and one for premises.

Registration of Nursing Homes.

During 1950, five Nursing Homes were closed by the proprietors, and "Oakhurst" Maternity Unit in Sutton Coldfield was taken over by the Regional Hospital Board. One new Nursing Home was registered. Table 15 gives details of the 14 Homes which were on the register at the end of the year.

Inspections of these Nursing Homes are made periodically. During the past year they have all been inspected and have been found to be maintaining satisfactory standards,

County Ambulance Service.

During the past year this service has become stabilised. Throughout the County the cover is considered adequate and there should be no need for further expansion except for some specific reason. The circumstances which might necessitate expansion of the Service are:—

- The trend for nationalised industries to dispense with their emergency ambulance cover and use the National Health Service.
- (2) The further development of Hospital Authorities, e.g. the increase of the facilities of the Pump Rooms.
- (3) A decrease in the mileage undertaken by the Women's Voluntary Services Hospital Car Service.
- (4) The needs of Civil Defence.

During the year under review, 1,045,166 miles were travelled by the Ambulance Service. 87,402 patients were carried. This is a little over 3% increase in mileage and 8% in patients. The W.V.S. Hospital Car Service has operated in rural districts and covered 102,899 miles and carried 4,049 patients. The accompanying graph shows that a position of stability has, in all probability, been reached and that the requirements of the County approximate to 1,000,000 miles per year. This stabilisation has been achieved by close scrutiny of all requests and a continually improved liaison with the hospitals. The experience of officers concerned is that this rigid scrutiny and constant liaison must go on if the mileage is to be kept down to its present level. One of the greatest difficulties, however, is that the majority of the requests come from hospitals and are made by the resident medical staff. These residents change continually and in consequence every six months there are new medical officers to be contacted and the whole position explained in detail.

The last two years have shown a development in train travel. Where applicable, patients are taken to the train by ambulance and met at the station nearest to their destination by an ambulance of the Authority of that area. Some difficulty has been experienced in persuading certain medical officers that train travel is in many ways preferable to car travel, and there are instances of requests for long journeys by car for small children and old people. It should be remembered that it is much safer and more comfortable to travel by train than car, particularly in the winter months, as trains are less likely to be affected by the hazards of our variable winter climate. The liaison with British Railways has been excellent, and patients who have experienced that method of travel report that it is comfortable and that the facilities on a long train journey are better than those given when travelling by car.

The most difficult problem that faces the officers who have responsibility for the day to day administration of the Service is the interpretation of need. As a general rule the need should be a medical one, but there are some cases, where transport has to be supplied because public transport is inadequate or even non-existent. All applications are carefully scrutinised and all details of the service are kept under constant observation.

Health Education.

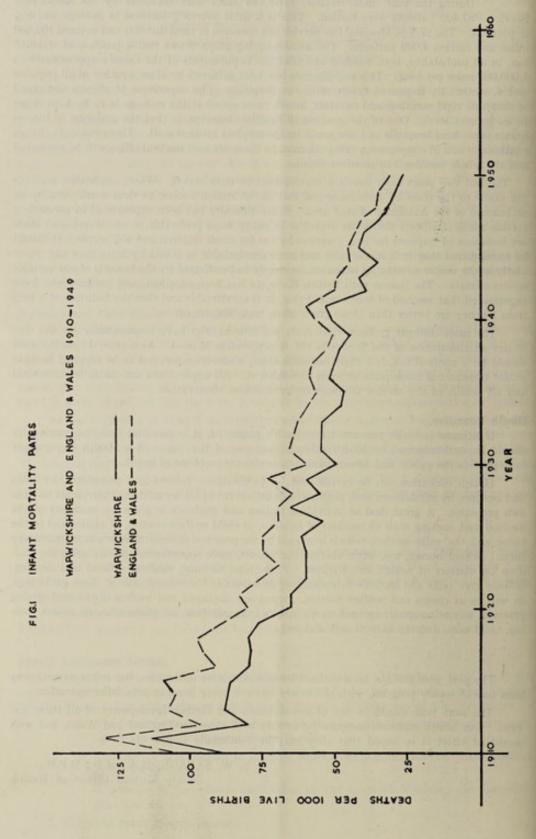
If sickness is to be prevented and health promoted, it is essential that the community should be well informed on health subjects, and one of the duties of a Health Department is to provide the public with information and advice on problems of health.

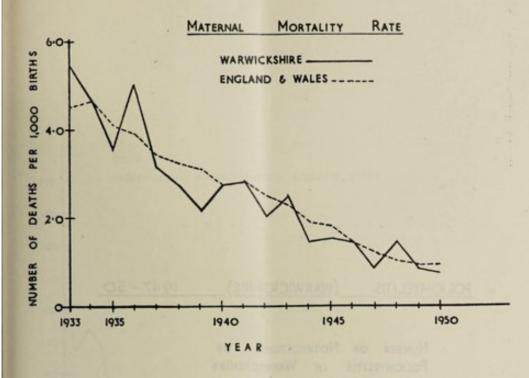
Health education can be carried out by publications, posters and pamphlets, by talks and lectures, by exhibitions, and, perhaps most important of all, by advising individuals on their own problems. A great deal of individual tuition and guidance is given by members of the medical and nursing staff to mothers of families, at child welfare centres, at clinics and in the home, and the value of their talks is increased by the practical demonstrations which accompany them. School nurses, too, when visiting the schools, have opportunities of educating the children on matters of health and hygiene. From time to time, medical officers and nursing officers give talks and lectures to various organisations in the county, and at these gatherings, as well as at clinics and welfare centres, posters are displayed and leaflets distributed, giving practical advice on questions such as diphtheria immunisation, infectious diseases, infant feeding, child care, and the care of ears and feet.

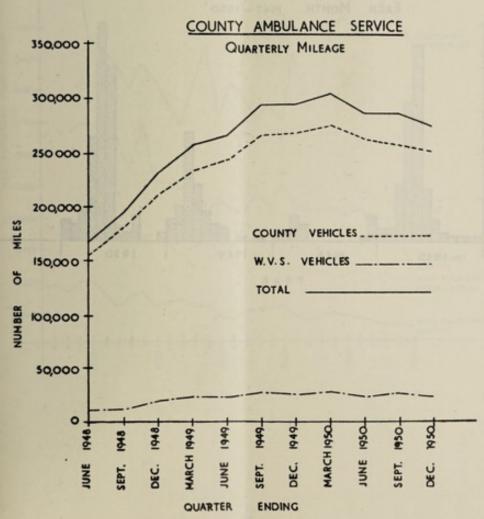
The past year has not been without its administrative difficulties, but it has nevertheless been one of steady progress, with the newer services being brought into fuller operation.

The next year should be one of consolidation and further development of all these services. Our health statistics compare favourably with those for England and Wales, but with persistent effort it is hoped that they may be continually improved.

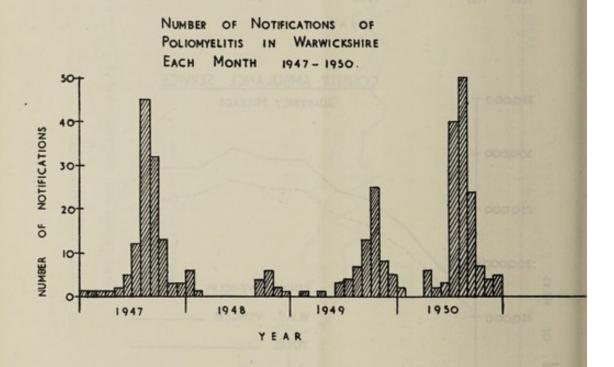
S. W. SAVAGE, M.A., M.D., D.P.H., County Medical Officer of Health.

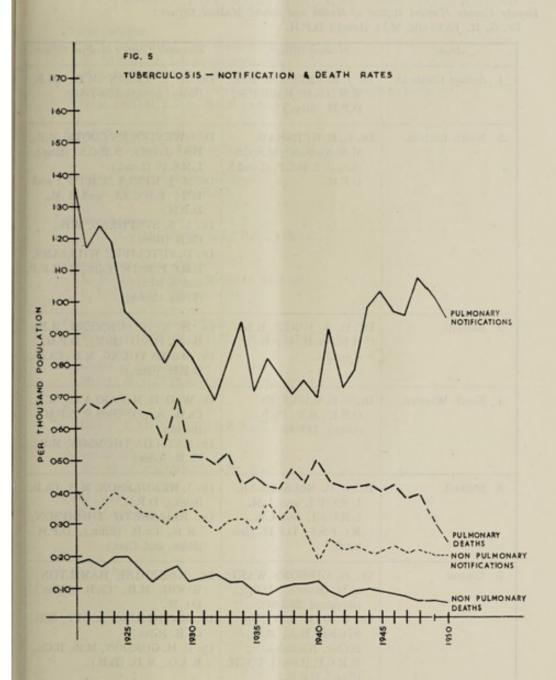






POLIOMYELITIS (WARWICKSHIRE) 1947 - 50





STAFF OF THE COUNTY HEALTH SERVICE

(On 31-12-1950 except where otherwise stated).

County Medical Officer of Health and School Medical Officer: Dr. S. W. SAVAGE, M.A., M.D. (Camb.), D.P.H.

Deputy County Medical Officer of Health and School Medical Officer: Dr. G. H. ȚAYLOR, M.D. (Lond.) D.P.H.

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1 Sutton Coldfield.	Dr. J. R. PRESTON, B.Sc., M.B., Ch.B., F.R.F.P.S., D.P.H. (Glas.)	Dr. M. E. LEMIN, M.B., Ch.B. (Edin.) (resigned 24-1-51).
2 North Eastern.	Dr. G. R. KERSHAW, M.A. (Cantab.), M.R.C.S. (Eng.), L.R.C.P. (Lond.), D.P.H.	Dr. GWENDOLEN COOTE, M.B., B.S. (Lond.), M.R.C.S. (Eng.), L.R.C.P. (Lond.). Dr. M. J. KELLY, L.R.C.P.I and L.M., L.R.C.S.I. and L.M., D.P.H. Dr. L. S. STEPHENS, M.B., Ch.B. (Birm.). Dr. D. SUTCLIFFE WILLIAMS, L.R.C.P. and S. (Edin.), L.R.F.P. and S. (Glas.). (From 12-3-51).
3 Eastern.	Dr. D. J. JONES, B.Sc., M.B., Ch.B., D.P.H (Cardiff).	Dr. H. A. H. SUMMERS, M.B., B.Ch., B.A.O. (Belf.), D.P.H. Dr. AGNES YOUNG, M.B., Ch.B., D.P.H. (Glas.).
4 North Western.	Dr. N. C. MACLEOD, O.B.E., M.B., Ch.B. (Glas.), D.P.H.	Dr. W. D. H. McFARLAND, M.B., Ch.B. B.A.O. (Belf.), D.P.H. (Lond.). Dr. MATILDA THOMSON, M.B., Ch.B. (Glas.)
5 Solihull.	Dr. I. M. McLACHLAN, L.R.C.P.I. and L.M., L.R.C.S.I. and L.M., R.C.P.S.I., D.P.H. (Ire- land).	Dr. J. HENDERSON, M.B., Ch.B. (Glas.), D.P.H. Dr. ELIZABETH THOMPSON, M.B., Ch.B. (Edin.), D.P.H. (Edin. and Glas.)
6 Central.	Dr. H. GIBBONS WARD, M.D. (Manch.), D.P.H., (Resigned 28-2-51). Dr. F. D. M. LIVING- STONE, B.A., M.B., B.Chir. (Cantab.). M.R.C.P. (Lond.), D.C.H. (Eng.), D.P.H. (From 1-3-51).	Dr. JOSEPHINE HAMILTON WOOD, M.B., Ch.B. (Birm'), D.C.H. Dr. KATHERINE SCOTT, M.B. Ch.B. (Glas.). Dl. E. H. GORDON, M.B., B.Ch., B.A.O., M.D. (Belf.).
7 Southern.	Dr. J. B. BRAMWELL, M.A., M.B., B.Ch., D.P.H. (Cantab.).	Dr. ELIZABETH THOMAS, M.B., B.Ch., B.A.O. (Belf.), D.P.H. Dr. W. M. WALKER, M.C., M.B., B.Ch., B.A.O. (Belf.).

Temporary Full-time Medical Officers.

Dr. IVY NICHOLLS, M.B. Ch.B. (Until 31-3-51).

Dr. MARGARET STEANE, M.B., Ch.B. (Until 11-10-50).

Senior Dental Officer.

J. C. CROSSLEY, L.D.S., R.F.P.S. (Glas.), L.D.S. (Leeds). (Resigned 28-2-51).

Dental Surgeons:

H. J. BASTOW, L.D.S. (Birm.)

W. DOUGLAS, L.D.S. (St. Andrews).

V. L. L. HALL, L.D.S., R.C.S. (Eng.)

Mrs. B. REUTT, DIP. DENT. SURG. ACAD. STOMATOLOGY (Warsaw).

G. R. SMITH, L.D.S., R.C.S. (Edin.)

County Sanitary Inspector.

F. H. LEGGAT, F.R.SAN.I., A.M.I.S.E., M.S.I.A.

Assistant County Sanitary Inspector.

K. L. SPENCE, Cert.R.S.I.

County Analyst:

F. G. D. CHALMERS, M.A., B.Sc., F.R.I.C.

County Ambulance Officer:

L. E. STALLARD. (Resigned 31-3-51).

C. L. JONES. (From 1-4-51).

Superintendent Nursing Officer:

Miss B. SHENTON, M.B.E., S.R.N., S.C.M., H.V. Cert.

Supervisor of Midwives:

Miss D. M. KETTLE, S.R.N., S.C.M.

Social Worker:

Miss J. A. SUTCLIFFE, S.R.N., H.V. Cert.

Statistical Officer.

Mrs. O. M. CHAMBERLAIN, B.A.

Chief Clerk:

L. J. ALLEN.

-						
	Area.	District Nursing.	District Nursing and Midwifery combined.	District Nursing, Mid- wifery and Health Visit- ing combined.	Health Visiting.	Midwifery.
	Sutton Coldfield. Area Nursing Officer. MacDiarmid, Miss M.	GLOVER, Miss S.	BAUM, MISS D. E. BRITLAND, MISS K. COTTINGHAM, Mrs. L. M. HISCOX, MISS E. M. JONES, MISS B. L. WHITMORE, MISS L. E. WILLIAMS, MISS B.		DRESSLER, Mrs. D. G. FORRESTER, Miss A. GREEN, Miss V. F. KIRK, Miss E. O'RIGRDAN, Miss E. TAYLOR, Miss D. G. (School Nurse).	
	2. North Eastern. Area Nursing Officer. FOSTER, Miss M. I.	AINSWORTH, MISS J. HICKEY, MISS B. O'DONNELL, MISS V. TURNER, MISS W.	Cameron, Miss S. Dutfield, Miss D. Fulluck, Miss I. Harding, Mrs. A. Harvey, Mrs. E. M.		CUNNINGHAM, Miss A. M. DAVIES, Miss K. N. DILCOCK, Miss O. EMERSON, Miss L. M. FITZPATRICK, Miss C.	BOURNE, MISS D. CROSSAN, MISS N. C. HARRIS, Mrs. A. HARVEY, MISS W. E. MCLEAN, Mrs. M. W. E.
-				*	FLYNN, Miss K. T. FOX, Miss N. HALLSWORTH, Miss M. A. MALCOLM, Mrs. C. BOFF, Mrs. L. W. School	PULLAN, MISS S. A. STACEY, Mrs. L. WALLBANK, Mrs. S. M. WATSON, Mrs. M. S.
					Mason, Miss D. / Nurses	
	3. Eastern. Area Nursing Officer. WARD, Miss D. M.	MERRICK, Miss D. M.	Boden, Mrs. C. Brady, Miss P. A. Carter, Miss M. J. Hall, Miss E. Mansurgh, Miss C. Meredith, Miss E.		BAYLIS, MISS K. M. LIVINGSTON, MISS J. M. NUTTING, MISS M. ROBERTS, Mrs. M. P. WALKER, Mrs. M.	Boddy, Miss J. H.
			METCALFE, Miss D. ROBSON, Mrs. M. SLATER, Miss H.			
14	4. North Western. Area Nursing Officer. ROBERTS, Miss L. E.		ALEXANDER, Miss J. ANKRETT, Mrs. M. CONNOLLY, Miss M. DAVIS, Mrs. R. GARDNER, Miss H. HARPER, Miss R. HARTWELL, Miss B. HOPKINS, Miss L. W. KELLY, Mrs. A. P. MANIFOLD, Miss B. MACLENNAN, Mrs. G. M. PRITCHARD, Miss K. M. SQUIRES, Mrs. L. WADE, Miss B. WHETTER, Mrs. F. YOUNG, Mrs. C. E.	SHEPRERD, Miss J.	ADAMS, Miss E. S. EDWARDS, Miss B. HUMPHRIES, Miss E. M.	
	5. Solihull. Area Nursing Officer. LAMB, Miss E. J.		HALL, Mrs. B. L. HALL, Mrs. L. HARTSHORNE, Miss W. M. HUGHES, Miss S. JONES, Miss C. KNIGHT, Mrs. W. PILKINGTON, Miss B.	•	AGUTTER, Miss M. E. ATKINSON, Miss M. G. BALL, Miss M. A. GRANT, Miss A. MANTON, Miss D. A. MORGAN, Miss F. E. SMITH, Mrs. I. F.	TAYLOR, Miss M.
	6. Central. Area Nursing Officer. NORMINGTON, Miss L. A.	LANE, Miss F. M. WARR, Mrs. B.	BECK, MISS M. GRIFFITHS, MISS A. J. HARTSHORNE, MISS M. HARRIS, MISS E. M. MARES, MISS M. MARSHALL, MISS E. PAYNE, MISS A. PHILLPOTT, MISS M. E. STANLEY, MISS M. THOMAS, MISS M. TOMPRINS, MISS M. I. VEEL, MTS. E. WALKER, MTS. R. A.		Brown, Mrs. G. O. CORBALLY, Miss M. DALTON, Mrs. H. M. DAVIE, Miss M. C. GODLEY, Miss M. GRIFFITHS, Miss M. HUFTON, Mrs. M. A. MALARKEY, Miss S. PRIESTLEY, Mrs. S. P. ROBERTS, Miss G. E. WYTON, Miss M. MORRIS, Miss M. J. (School Nurse).	Hannon, Miss J. P. Lewis, Miss D. G.
The Real Property lies and the least of the	7. Southern. Area Nursing Officer. KING, Miss V. M. EMERGENCY NURSES (all areas).	HORTON, Miss D.	BUCKLEY, Miss M. FORREST, Miss M. GLEW, Miss M. HARRIES, Miss E. HEDGES, Miss M. J. HIGLEY, Miss H. HUNT, Mrs. E. MOODY, Miss C. QUINN, Mrs. G. REDSHAW, Miss S. SHERWOOD, Mrs. P.	FIFE, Miss E. T. SCHOFIELD, Miss E.	BUTTERWORTH, MISS P. EVERITT, MISS. A. M. FLYNN, MISS T. T. IDLE, MISS. N. B. JAMES, MIS. M. M. LAPHAM, MISS N. G. McLEOD, MISS M. H. WHITTAM, MIS. C. O.	Brown, Miss A.
			HUNT, Mrs. E. MOODY, Miss C. QUINN, Mrs. G.		McLeod, Miss M. H	

TABLE 1. WARWICKSHIRE-STATISTICS FOR 1950.

read	Death Rate. (per 1000 total births)	1	18.53	1.14	1.35	0.92	11	1	1	11111	1	1111	1	0.38
Maternal Mortality	No. of Deaths.	-	1	0.0	-1	-	11	-	1	11111	-	1111	1	89
ant	Death Rate. (per 1000 line births)	13.76	18.03 38.46 30.30	25.90	19.36	22.66	46.43	39.47	28.01	29.26 20.74 13.51 40.89	28.90	14.28 27,70 37,03 29,22	26.46	26.94
Infant	De	6	16	4	14 10	54	30	36	8	F 6 51 F E	27	8 G X G	553	207
Taberculosis, Other Forms	Death Rate. (per 1000)	90.04	0.04	0.07	0.04	0.07	0.05	0.07	0.01	0.13	90.04	0.06	0.02	0.05
Tuber	1	21	- -	00	01 09	10	01 01	7	-	01 01	7	1-	60	27
5. Tuberculosis, Pulmonary.	Death Rate. (per 1000 population)	0.33	0.42	0.38	0.21	0.25	0.18	0.20	0.17	0.16 0.26 0.31 0.10	0.16	0.13	61.0	0.24
Tuber	No. of Deaths.	16	800	39	01	17	1-4	11	120	84 40	16	014 10	11	122
4. Deaths.	Death Rate. (adjusted) (per 1000) population)	10.39	10.68 11.08 9.64	10.48	10.91	11.17	10.84	10.70	9.79	11.58 11.22 8.98 11.65 8.61	10.81	11.11 11.55 10.61 8.64	10.07	10,48
De	No.	919	493 225 206	924	482	687	340	909	587	463 176 108 168	1,047	193 167 116 181	929	4,926
3. Stillbirths.	Stillbirth Rate. (per 1000 total births)	19.49	32.71 23.47 17.36	26.91	18.99	17.62	18.23	17.24	13.34	85.16 8.28 8.70 8.70	15.58	23.25 13.69 14.59 19.10	18.07	18.90
Stitt	No.	13	10 30	47	14	19	22.4	16	14	50 00	69	0000	16	148
Births.	Birth Rate (adjusted) (per 1000) population)	13.78	16.27 16.61 17.03	16.45	15.60	15.80	18.50	17.58	14.38	16.49 16.47 13.73 17.87	15.32	14.20 16.92 17.87 15.31	15.81	15.72
2. Live L		654	887 416 396	1,699	723 336	1,059	970	912	1,035	241 148 214 269	1,453	210 216 135 308	869	7,681
I. Population.	Mid- 1950.	47,440	53,940 24,540 23,700	102,180	46,780	67,010	36,990 15,890	52,880	67,640	36,370 15,360 10,550 12,870 19,670	94,820	14,930 13,140 8,230 20,310	56,610	488,580
Popu	Mid- 1949.	47,440	53,350 24,040 23,710	101,100	45,860	66,490	36,160	52,060	098'99	36,040 15,170 10,230 13,090 20,750	95,280	14,610 13,120 8,090 19,720	55,540	484,760
	Acres.	13,978	11,757 7,851 21,945	41,553	6,992	87,623	61,775	83,817	20,189	2,833 5,957 62,527 55,407	181,791	6,900 37,524 53,339 81,996	179,759	558,710
	Area, and County Districts.	Sutton Coldfield. Sutton Coldfield M.B.	North-Eastern. Nuneaton M.B Bedworth U.D Atherstone R.D	TOTAL	Rugby M.B Rugby R.D	TOTAL	North-Western. Meriden R.D Tamworth R.D	TOTAL	Solihull,	Learnington M.B Warvick M.B Kenilworth U.D Southam R.D Warvick R.D	TOTAL	Southern. Stratford-on-Avon M.B. Alcester R.D Shipston-on-Stour R.D. Stratford-on-Avon R.D.	TOTAL	COUNTY TOTALS
	No.	_	21		00		+		10	0		1-		

TABLE 2 STATISTICAL REVIEW, 1921-1950.

IABLE 2		SIAIISII		1151, 1021			
	Birth	Death	Pulmonary Tubercu-	Cancer	Infant	Still-births per 1,000	Maternal Mortality
Year.	Rate.	Rate.	losis	Death Rate	Mortality.	total	per 1,000
			Death Rate			births.	live births.
1921.	22.27	10.73	0.64	1.23	65	-	3.60
1922.	21.16	11.04	0.68	1.03	60	-	5.01
1923.	19.75	10.29	0.66	1.11	60	-	2.80
1924.	18.76	10.98	0.69	1.25	60	-	4.30
1925.	18.46	11.15	0.70	1.31	62	-	5.00
1926.	17.52	10.52	0.65	1.38	54	_	3.30
1927.	17.30	11.25	0.64	1.36	66		2.90
1928.	16.83	10.13	0.55	1.33	55	-	4.59
1929.	16.29	12.70	0.70	1.30	60		4.20
1930.	16.63	10.82	0.51	1.43	49	42	4.50
1931.	15.69	11.06	0.51	1.42	55	35	4.30
1932.	15.38	11.52	0.49	1.47	55	35	3.70
1933.	13.71	11.42	0.52	1.53	54	35	5.20
1934.	14.31	10.71	0.42	1.43	48	34	4.97
1935.	13.44	9.60	0.45	1.45	47	40	3.68
1936.	15.08	10.56	0.42	1.51	52	33	5.21
1937.	15.32	11.25	0.41	1.57	50	35	3.17
1938.	16.63	10.17	0.47	1.45	48	30	2.87
1939.	16.18	10.19	0.43	1.54	45	32	2.26
1940.	15.83	12.69	0.50	1.51	51	35	2.82
1941.	15.94	11.69	0.43	1.55	53	33	2.99
1942.	17.38	10.26	0.41	1.55	39	32	2.14
1943.	18.98	10.62	0.41	1.55	42	28	2.70
1944.	20.88	10.64	0.42	1.66	35	25	1.50
1945.	18.95	10.45	0.40	1.57	42	25	1.56
1946.	19.64	10.61	0.42	1.67	40	22	1.46
1947.	20.77 .	10.68	0.38	1.64	34	20	0.83
1948.	18.24	9.62	0.39	1.67	31	20	1.50
1949.	17.22	10.78	0.30	1.65	29	19	0.85
1950.	15.72	10.48	0.24	1.55	27	19	0.39

MORTALITY STATISTICS

TABLE 3

DEATHS CLASSIFIED BY AGE.

Age group.	Age group.							
Under 1			207					
1 and under 5			45					
5 and under 15			38					
15 and under 45			334					
45 and under 65			1,086					
65 upwards			3,216					
To	TAL		4,926					

TABLE 4

DEATHS CLASSIFIED BY CAUSE.

Cause of Death.	No. of deaths.
Heart and circulatory diseases	1,731
Malignant Neoplasms	762
Vascular lesions of Nervous System	m 646
Pneumonia	228
Bronchitis	242
Violent deaths	220
Congenital Malformations	44
Respiratory Tuberculosis	122
Nephritis and Nephrosis	65
All other diseases	866
TOTAL	4,926

TABLE 5 NUMBER OF DEATHS FROM INFECTIOUS DISEASES, 1940-50.

DISEASE.	1940.	1941.	1942.	1943.	1944.	1945.	1946.	1947.	1948.	1949.	1950
Diphtheria	11	29	15	1	9	6	3	3	12	1	1
Scarlet Fever	-	2	2	4	2	1	1		_	_	_
Measles	2	23	1	6	4	12	3	4	3	2	_
Whooping cough	6	25	3	13	7	12	5	10	2	5	4
Poliomyelitis and En- cephalitis.	2	1	2	2	-	1	4	10	4	7	13
Pneumonia	246	254	210	251	217	204	219	273	199	271	228
Tuberculosis (Pulmon- ary).	213	202	187	184	188	175	192	179	186	146	122
Tuberculosis (Other forms).	55	45	34	41	47	40	39	36	31	31	27

TABLE 6.

LIVE BIRTHS AND INFANT DEATHS,

			Males.	Females.	Total.	Birth Rate.	Deaths of Infants under 1 Year.	Infant Mortality Rate.
LIVE BIRTHS :-								
Legitimate			3754	3553	7307	14.96	194	26.55
Illegitimate	***	***	195	179	374	0.76	13	34.76
Totals			3949	3732	7681	15.72	207	26.94

TABLE 7.

STILLBIRTHS.

	Males.	Females.	Total Stillbirths.	Stillbirth Rate.
STILLBIRTHS :— Legitimate	70	65	135	18.14
Illegitimate	4	9	13	33.59
TOTAL	74	74	148	18.90

TABLE 8.

PREMATURE BIRTH RATES.

		1945	1946	1947	1948	1949	1950
	Total (Live and Still) Births —Registrar-General.		9050	9734	8836	8391	7829
Premature	Number (N.O.B.)	357	530	439	530	518	440
Live Births.	Rate per 1000 births	41.98	58.56	45.09	59.98	61.73	56.20
Premature Stillbirths	Number (N.O.B.)	26	45	33	75	86	82
Stillbirths	Rate per 1000 births	3.05	4.97	3.39	8.48	10.24	10.47

TABLE 9. ANALYSIS OF STILLBIRTHS AND MATERNAL DEATHS, 1947-1950.

	100	DEL	1947	-			1948		11		19	1949.			1950	0	
Area.	comprised.	Cuitt	SHILL	Mat. Deaths	1 .	Coun	Skill	Mat. Deaths	1 .	Cum	Still	Mat. Deaths	1 32	Cest	Still	Mat. Deaths	eaths.
		Births.	Rate.	Sepsis Other.		Births.	10000	Sepsis. Other.	-	Births.	1000	Sepsis.	Other.	Births.	Rate.	Sepsis Other	Other.
I. SUTTON COLD- FIRED.	Sutton Coldfield M.B.	7	16.07	1	1	=	14.49	1	1	13	19.49	Jan	1	13	19.49	1	1
2. NORTH-EASTERN	Nuneaton M.B Bedworth U.D Atherstone R.D	8123	18.08 27.23 21.00	-11	-1-	8==	18.11 23.30 23.75	7.11		1000	28.04 19.18 16.09	111	.111	129	32.71 23.47 17.36	111	1
3. EASTERN.	Rugby M.B	10	11.42	11	-1	17	20.47	1-		-=	8.70	11	11	14	18.99	11	-1
4. NORTH-WESTERN.	Meriden R.D	10	19.03	11	-1	88	28.01	11	1-	113	19.43	11	-1	10.4	18.23	11	11
5. SOLHULL.	Solihull U.D	20	18.24	1	-	24	20.11	1	01	18	16.82	1	1	11	13.34	1	1
6. CENTRAL.	Leamington M.B Warwick M.B Kenilworth U.D Southam R.D Warwick R.D	0.000	26.91 19.35 9.38 23.29 26.31	-1111	111-1	241.41	16.37 14.03 31.81 16.87 23.20	-1111	11111	40000	21.14 24.00 15.15 21.64 18.51	11111	04 -	50 10-	25.16 8.23 8.23 3.70	11111	11111
7. SOUTHERN.	Stratford-on-Avon M.B Alcester R.D Shipston-on-Stoar R.D. Stratford-on-Avon R.D.	1167	24.64 24.00 7.04 31.33	1111	1111	60 10	10.98 20.49 15.43	1111	-111	10 10 4 10	19.26 27.02 8.31	1111	1100-	10 00 01 10	13.25 13.69 14.59 19.10	1111	TITT
-	COUNTY TOTALS	161	19.93	01	9	177	20.03	7	6	163	19.42	1	1	148	18.90	T	60

				707			
Area.		County District.		No. of of inf under 1 1950	ants	The second second	fortality 000 live ths. 1949
1. Sutton Coldfield	S	outton Coldfield M.B.		 9	14	13.8	21.4
2. North Eastern	B	Juneaton M.B Bedworth U.D Atherstone R.D		 16 16 12	22 18 12	18.0 38.5 30.3	22.9 39.1 28.0
		TOTAL		 44	52	25.9	27.5
3. Eastern		Rugby M.B Rugby R.D		 14 10	21 9	19.4 29.8	26.3 25.7
	6	TOTAL		 24	30	22.7	26.1
4. North Western		feriden R.D		 30 6	17 3	46.4 22.6	25.9 10.8
		TOTAL		 36	20	39.5	21.4
5. Solihull	s	olihull U.D		 29	33	28.0	31.4
6. Central	K S	Varwick M.B Varwick M.B Varwick M.B Varwick U.D Varwick R.D Total		 17 5 2 7 11	24 4 9 11 15	29.3 20.7 13.5 32.7 40.9	37.0 16.4 46.2 48.7 56.6
7. Southern	A	tratford-on-Avon M. lcester R.D hipston-on-Stour R. tratford-on-Avon R. Total	D.	 3 6 5 9	5 6 3 11	14.3 27.7 37.0 29.2 26.5	19.7 27.9 20.8 30.7 25.7
		COUNTY	Тота	207	237	26.9	28.8

TABLE 11 INFANT DEATHS—ANALYSIS BY CAUSE AND AGE.

		Number (of Death:	s.	To	al
Cause of death.	Under 1	month.	1-12 1	nonths.		year.
. 350	1950.	1949.	1950.	1949.	1950.	1949.
Prematurity	 46	66	0_	2	46	68
Bronchitis and Pneumonia	 10	7	20	31	30	38
Congenital Malformations	 22	28	15	9	37	37
Asphyxia, Atelectasis	 20	17	4	3	24	20
Injury at Birth	12	12	_		12	12
Enteritie and Diagrapase	 1	2	11	10	12	12
Haemolytic Disease	12	5	_	-	12	5
Whooping Cough	-		2	5	2	5
Tuberculous Diseases	-		2	5	2	5
Other Causes	11	19	19	16	30	35
Total	 134	156	73	81	207	237

TABLE 12.

PREMATURE BIRTHS IN WARWICKSHIRE, 1950. Total Notified Births—7,847.

Percent-	ring of line	births.	88288111	8
No.	Sur-	raceng.	182 99 99 17 17 17 17 17 17 17 17 17 17 17 17 17	98
; in the		15—28	-01	n
ose Dying	4	8—14	001	4
of the	-	7	101111111	54
ival o	cwo.	9	11-1-1-11	8
Sur		0	111111111	
ys of	5	4	- 61 -	4
of da	Number of days of Survival of those Dying in the First Four Weeks of Life.		111-111	20
umber of	67	-01 - 1		
Nu		-	01400-0404	75
Premature	Down days	Dorn acad.	E + 6 0 E 0 9 + 8	68
Number of Premature Births.	Down office	DOTE MINE.	186 1112 56 40 15 17 4	9
	Weight Group.		1b. oz. 1b. oz. 5 8 4 9 - 5 8 8 3 9 - 4 8 8 8 9 - 4 0 8 1 - 2 9 - 3 0 1 9 - 2 0 1 1 - 1 8 8 1 1 - 1 8 8 1 1 - 1 8 8 1 1 - 1 8 1 1 - 1 8 8 1 1 - 1 8 8 1 1 - 1 8 8 1 1 - 1 8 8 1 1 - 1 8 8 1 1 - 1 8 8 1 1 - 1 8 8 1 1 - 1 8 8 1 1 - 1 8 8 1 1 - 1 8 8 1 1 - 1 8 8 1 1 - 1 8 8 1 1 - 1 8 8 1 1 - 1 8 8 1 1 - 1 8 8 1 1 - 1 8 8 1 1 - 1 8 8 1 1 - 1 8 8 1 1 1 - 1 8 8 1 1 1 - 1 8 8 1 1 1 1	TOTAL:

1	_			_	CHILD	WELFARE CENTY	NES.	New C	aure Age	Number	on Weginter	-
	Area	Area.	Centre.	Tope	Where held.	When held (all meetings at 2 p.m.	Medical Officer.		attendance.	at red	-	No. of Attend-
	No.			Centre.		unless otherwise stated)			Over 1 and under 5 yes.		Over 1 and hander 5 yes.	desire.
ı	1	SUTTON COLDERED .	Boldmere	C.F.	Britwell Hall,	Every Wednesday	Dr. M. E. Lemin	122	34	102 40	274	2,620 1,140
-1			Four Oaks Minworth	C.F.	All Saints' Ch. Hall The Green	Every Tuesday Alternate Wed's	Dr. E. M. Stockwin Dr. E. M. Stockwin	61 28	16 8	23	48	472
-			Sutton Coldfield Sutton Coldfield	C.F.	Bannersgate Rd. 49, Holland Street	Every Friday Every Monday	Dr. M. E. Lemin Dr. M. E. Lemin	60 85	21 28	56 68	198 228	1,834 2,393
			Sutton Coldfield	C.F.	Walmley Road	Every Thursday	Dr. M. E. Lemin	80	15	78	168	1,852
H	2	Marrie Parente	Austra	v.	Church Hall	Every Wednesday	Dr. McFarland	62	13	47	118	1,764
	*	NORTH-EASTERN.	Andey Athentone	V.	Church Hall	Every Wednesday	Dr. C. V. Spark	67	35	64	84 24	1,387 214
			Baddesley Ensor Bedworth	V.	Church Hall Saunders Avenue	Last Fri. in month Every Monday and	Dr. G. K. Coote Dr. I. Nicholls.	261	17	191	287	5,075
			Bulkington	V.	Council Offices	Thursday Every Wednesday	Dr. I. Nicholls	51	3	43	74	1,437
			Dordon Nuneuton	V. C.F.	Church Hall Riversley Park,	Alternate Mondays Every Monday,	Dr. A. Lindsay Dr. H. Burns	38 412	3 83	38	72 681	883 7,336
					Coton Road	Torsday and Wed- nesday	-					
			Polesworth	V.	Church Hall	Alternate Tuesdays	Dr. C. A. Cowie	51	5	49 157	125 264	1,549
			Stockingford	C.F.	Cross Street	Every Monday and Wednesday	Dr. G. K. Coote	177	35	100	-	3000
-							- 3	-		-		-
	3	EASTERN.	Bitton Binley†	C.M.	Church House Village Hall	1st & 3rd Wed, 2nd & 4th Wed.	Dr. A. H. M. Young D. H. A. H. Summers	118 37	56 18	71 18	39	951 933
			Brinklow Dunchurch	V.	W.L. Hall	1st & 3rd, Wed. 2nd & 4th Thursday	Dr. H. A. H. Summers Dr. A. H. M. Young	29	7	25 15	73 81	764 469
			Hillmorton	V.	Dorothy Fenwick Memorial Hall	2 & 4th Monday	Dr. A. H. M. Young	48	19	36	63	596
			Long Lawford	V.	Church Hall, Chapel St.	1st & 3cl Tuesday	Dr. H. A. H. Summers	35	2	25	62	658
			Newbold* New Bilton	C.F.	Church Rooms.	1st & 3rd Friday.	Dr. H. A. H. Summers		10 58	19	37 174	478 2,001
				V.	Wesleyan Chapel, Lawford Road	Every Wednesday	Dr. R. E. Smith	170				4,497
			Rogby		F.A.P. Temple St.	1st & 3rd Monday and every Friday	Dr. A. H. M. Young	288	60	211	299	
			Stretton-on-Duns- more	C.F.	Village Hall	he & 3rd Thursday	Dr. H. A. H. Summers		16	39	68	521
			Weiston	C.M.	Oddfellows Hall	4th Thurs, in month	Dr. H. A. H. Summers		3	16	49	252
			Wolvey	C.M.	Village Hall, Sharpe St.	2nd & 4th Tuesday	Dr. H. A. H. Summers	55	17	45	90	624
	-			-								
	4	NORTH-WESTERN	Amington	V.	The Band Room	Alternate Wednes- days	Dr. M. Thomson	46		38	63	748
			Ariey Balsall Common	V. C.M.	Miners' Welfare Hall Women's Institute	Alternate Tuesdays 3rd Wednesday	Dr. M. Thomson Dr. M. J. Kelly	80 22	2	71 20	108 42	1,193
			Berkswell Castle Bromwich	C.M. V.	Reading Room Victory Hall	Every 4th Tuesday Every Tuesday	Dr. J. Gaston Dr. M. J. Kelly	16	14 7	15 62	40 156	177
			Coleshill Fillongley	V.	Town Hall Village Hall	Every Monday	Dr. M. J. Kelly	58 17	3	54 14	161	1,470
			Hampton-in-Arden	C.M.	Girls Old School,	First Friday 1st & 3rd Thursdays	Dr. M. Thomson Dr. M. J. Kelly	15	-	14	32	223 307
			Keessley	y.	High St Welfare Centre Hut	Every Thursday	Dr. M. Thomson	97	11	82	166	2,472
			Kingsbury	V.	Methodist School Room	Alternate Tuesdays	Dr. M. Thomson	33	-	34	98	900
			Marston Green	C.M.	Free Church Hall Village Hall	Ist & 3rd Fridays Alternate Mondays	Dr. M. J. Kelly Dr. M. J. Kelly	39	-	37	52 46	576 508
10			Nether Whitacre	C.M.	Methodist School Room	3rd Friday	Dr. M. Thomson	9		5	34	130
-			Newton Regis	V.	The Institute	Alternate Wednes- days	Dr. M. Thomson	10	1	10	36	218
			Water Orton	V.	Church Hall	Alternate Wednes-	Dr. M. J. Kelly	37	3	28	51	549
			Wilnecote	V.	Parish Hall	Alternate Mondays	Dr. J. V. L. Grant	45	4	45	83	1,134
	5	SOLINGEL.	Hockley Heath	C.M.	The Institute	Alternate Tuesdays	Dr. E. A. Galbraith	27	2	26	38	443
			Knowle	V.	Women's Institute, Station Road	1st & 3rd Thursdays	Dr. M. E. Rowe Dr. J. L. Whatley	85	13	81	91	1,311
			Olton	C.M.	Congregational Church Room	Every Thursday	Dr. E. Thompson	108	20	103	215	2,122
		-	Sheldon	C.M.	Wagon Lane, Old Isol. Hospital	Every Tuesday and Friday	Dr. J. Henderson	182	25	165	262	2,611
			Shirley	V.	The Institute, Church Rd.	Every Tuesday and Wednesday	Dr. J. Henderson	193	29	189	436	4,675
			Solibull	V.	F. A. Post, Solibuli	Every Monday	Dr. E. Thompson	104	18	92	219	2,813
					Hospital				3.5			
	6	CENTRAL	Burford	C.M.	Village Hall	3rd Wednesday, 10-12 noon	Dr. J. Hamilton	17	2	15	31	297
			Bishops Itchington	V.	Memorial Hall	Alternate Wednes-	Wood, Dr. E. H. Gordon	45	4	42	71	775
			Cubbington	V.	Methodist Sunday	days Alternate Tuesdays	Dr. P. Whitfield	21	3	18	- 66	565
	1		Kenilworth	V.	School Parochial Hall	Every Friday	Dr. E. H. Gordon	89	19	74	125	1,493
			Lapworth	C.M.	The Café	4th Tuesday, 10—12 noon	Dr. J. Hamilton Wood.	9	5	8	36	161
			Learnington Spa	CF.	4, Holly Walk	Every Wednesday and Friday	Dr. J. Hamilton Wood	331	23	291	419	5,427
			Lillington	C.M.	Men's Club	Every Thursday	Dr. J. Hamilton Wood	66	15	54	163	1,643
			Long Itchington Napton	V.	Village Hall The Victory Hut	4th Monday Alternate Tuesdays	Dr. E. H. Gordon Dr. E. H. Gordon	12 21	3	10 18	29 43	170 361
			Stockton	C.M.	C.W.C. Hut Village Hall	Alternate Tuesdays 4th Monday	Dr. K. Scott Dr. K. Scott	38 6	3 2	34 3	57 33	567 154
			Stoneleigh Warwick	C.M.	The Institute Lakin Road	Alternate Mondays Every Wednesday	Dr. E. H. Gordon Dr. P. Whitfield	20 199	41	19 189	56 190	476 3,233
			Whitnash	C.M.	Village Hall	and Friday 2nd & 4th Fridays	Dr. D. F. L. Croft	28	6	25	79	458
			Wroxall	C.M.	The School	1st Wednesday, 10-12 noon	Dr. J. Hamilton Wood	15	1	13	30	136
				-	1							-
	7	SOUTHERN.	Alcester	C.M.	Baptist School Women's Institute	Alternate Fridays 2nd & 4th Monday	Dr. E. S. Thomas Dr. W. Walker	40 26	18	30 17	73 26	688 120
			Bidford-on-Avon	V.	Welfare Hut	Every Tuesday	Dr. W. Walker Dr. M. V. Murray	29	8	28	65	1,010
			Earlewood Henley-in-Arden	V.	Village Hall	2nd & 4th Mondays Alternate Mondays	Dr. G. W. Phillips Dr. R. Van Farr	40 22	3 11	24 17	57 71	639 756
			Kineton Lower Brailes	V.	The Village Hall Church Institute	Alternate Fridays 3rd Thursday,	Dr. W. Walker Dr. W. Walker	27	36 8	20	159	992 201
			Shipston-on-Stour Strutford-on-Avon	V. C.F.	The Hostel Tyler Street	1st & 3rd Tuesdays Every Tuesday and	Dr. W. Walker Dr. E. S. Thomas	50 171	23 29	43 158	132	989
			Studiey	v.	Wesleyan School	Wednesday Absenues Thursdays	Dr. E. S. Homas	55	11	49	96	645
			Tanworth-in-Arden Welford-on-Avon	C.M.	Muntz Memorial Hall Memorial Hall		Dr. E. A. Galbraith Dr. W. Walker	16 11	3 6	13	20	155
			Wellesbourne Whitchurch	C.M.	Conservative Club The Hot	3rd Thursday 4th Wednesday	Dr. W. Walker Dr. W. Walker	25 12	4 2	19	26 64	158 270
			-			an areassay	and the Wallett and	100		12	28	135
N								5,244	1,078	4,418	8,998	98,688
	87	N. S. Contract		Ph Annu				200		THE REAL PROPERTY.		Sec.

V. C.F. C.M. ... Voluntary.
... County Fixed.
... County Mobile.

Commenced 14th August, 1980.
 Commenced 10th May, 1980.
 Commenced March, 1980.

MIDWIFERY.

At the end of 1950, there were 210	midwi	ves pra	ctisin	g in th	e Coun	ty, as fo	llows :	-
Domiciliary.								
Employed by County Council		***					93	
In private practice							13	106
Institutional.								
Employed by the Hospital M	M anager	ment	Comm	ittees	under	the	00	
National Health Service Act							93	
Employed by Nursing Homes								104
								210
								50
The number of cases attended dur	ring the	year	was as	follo	ws:-			
		ciliary				tutional.		Total
	1950.	194	9.		1950.	1949.		Total. 1950.
As Midwives As Maternity Nurses with	2,314	2,6	91		5,892	5,600		
Doctors	481	5	60		1,000	1,191		
Total	2,795	3,2	51		6,892	6,791		9,687
Number of cases in which Mid- wives sought medical aid	475				36*			511
*This figure may be i	ncompl	ete.						
Puerperal Pyrexia.			20					
No of cases notified No. of cases admitted to Hos Deaths from puerperal sepsis	pital		3					
Notification of Births.								
No. of births notified in 1950		birth			10	,552		
	Still	births	4			192		
					10	,744		
Adjusted number of notified	births,	Live	Birth:		7	,713 134		
		Julia	on eno		-	7,847		
Unadjusted Notifications.			1950.	19	49.	1948.	1947.	
Institutional confinements			74%	70		66%	58%	
Domiciliary confinements			26%	30	%	34%	42%	
Adjusted Notifications. Institutional confinements		1950. 64%						
Domiciliary confinements		36%						

HEALTH VISITING.

At the end of 1950, the County employed 52 Health Visitors, who combined health visiting with school nursing. The following is a summary of visits made by them during the year:—

			Number of First visits.		Total number of visits.
Expectant mothers					1,390
Children under 1 year		***	7,792		38,101
Children 1-5 years	***	***	2,956		52,276
Other cases			1,875	***	3,136
TOTAL					94,903

HOME NURSING.

93 District Nurses were employed in the County at the end of 1950; the majority of these nurses combine home nursing with midwifery. 7,876 cases were attended during the year, and 172,316 visits were made in the course of home nursing.

SCHEME FOR THE CARE OF THE ILLEGITIMATE CHILD AND ITS MOTHER.

NEW CASES REFERRED IN YEAR ENDED 31ST DECEMBER, 1950.

Number of Cases refer	rred	30	1.				
Source of R	tefere	nce.	3			Number of	Cases.
Moral Welfare Societi	es					46	
Medical Officers, Nurs	ses, a	and Mic	lwives			128	
General Practitioners	***	***		****	1000	29	
Probation Officers						13	
Hospital Almoners			***			. 21	
Selt-referred			***		***	52	
Miscellaneous sources			***		***	12	
						-	
						301	

Warwickshire women		259
Non-Warwickshire women	***	42
		301

			Age.		Nu	mber of cases.
			Under 19 year	S		47
Single	 	238	19-25 years			126
Married	 	28	26-30 years			71
Widowed	 	7	31-40 years	***	***	46
Divorced	 	11	41-50 years	***		4
Separated	 	17	Not recorded	***		7
		301				301

Previous Pregnancies.

Of the 238 single women, 54 had previously borne children. (82 babies).

DISPOSITION OF CASES.

Referred elsewher	re	***	***	26
Mother married				9
Not pregnant	***			1
Miscarriage	***	***		1
Stillbirth	***			9
Infant death				5
Adopted		***	(0)	78
Fostered				6
Mother keeping	***			166

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ANTE-NATAL AND POST-NATAL CLINICS.

_		Sec. 10						_
satal.	No. of att- endances.	7 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	86	10 21	1 69	6	172	434
Post-natal.	No. of women who attended during 1950.	8 9 5 6 4 4 6 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	66	10	1 28	6	167	420
Ante-natal.	No. of attendances.	183 180 180 118 72	1,079	298	618	150	2,460	5,489
Ante-	No. of women who attended during 1950.	37 9 51 10 26 19	311	1 %	8	29	280	1,461
	Medical Officer.	Dr. E. M. Stockwin Dr. J. A. W. Reid	Dr. D. W. HENDRY Dr. D. W. HENDRY	Dr. D. W. HENDRY Dr. D. W. HENDRY	Dr. J. R. OWEN Dr. J. R. OWEN	Dr. M. Thomson	Dr. A. Field*	TOTALS
	When held.	Alt. Tuesdays 10 a.m. Every Tuesday 2 p.m. Alt. Wednesdays 10 a.m. Alt. Thursdays 2 p.m. Every Friday 2 p.m. Every Friday 2 p.m.	Every Tuesday 10 a.m. 2nd & 4th Thursdays	2 p.m. 5th Thursday 2 p.m. 1st & 3rd Thursdays 2 p.m.	Every Wednesday 2 p.m. 3rd Thursday 2 p.m.	1st Wednesday 10 a.m.	Every Monday and Thursday 2 p.m. 2nd & 4th Fridays 10 a.m.	
Antomatal	or Post-natal.	A.N. & P.N. A.N. & P.N. A.N. & P.N. A.N. & P.N. A.N. & P.N. A.N. & P.N.	A.N. & P.N. A.N.	P.N. A.N. & P.N.	A.N. P.N.	A.N. & P.N.	A.N. & P.N.	
	Clinic.	1. SUTTON COLDFIELD. 49, Holland Street Church Hall, Four Oaks Britwell Hall, Boldmere The Clinic, Minworth Bannersgate Clinic Walmley Clinic	2. North Eastern. Child Welfare Centre, Bedworth. Riversley Park Clinic,	Nuneaton. Cross St., Stockingford	3. EASTERN. Temple St., Rugby	4. NORTH WESTERN. Welfare Centre Hut, Keresley.	7. SOUTHERN. Tyler St., Stratford-on-Avon.	

DAY NURSERIES.

Nursery.	1	No. of pla	ces.	Number of children on register at 31-12-50.
* Leamington No. 1, Portland P	lace	40		32
Leamington No. 2, Tachbrook	Road	40		41
Nuneaton, Merevale Avenue		40		29
Rugby, Holbrook Avenue		40		34
Shirley, Marshall Lake Road		40		30
Warwick, Priory Road		40		30
		240		196

^{*} This nursery was closed in May, 1951.

DENTAL TREATMENT FOR EXPECTANT AND NURSING MOTHERS AND YOUNG CHILDREN.

TABLE 13. NUMBERS PROVIDED WITH DENTAL CARE. EXPECTANT AND NURSING MOTHERS.

Area.		Examined.	Needing Treatment.	Treated. *	Made Den- tally fit.
1. SUTTON COLDFIELD		 -	-	-	_
2. NORTH EASTERN		 43	40	41	12
3. Eastern		 _	_	_	_
4. North Western		 -	-	_	
5. Solihull		 -	-	- "	_
6. Central	***	 5	5	6	3
7. Southern		 -	NUCLEUM)	-	_
COUNTY TOTAL		 48	45	47	15

CHILDREN UNDER FIVE.

Area.		Examined.	Needing Treatment.	Treated. *	Made Den- tally fit.
1. SUTTON COLDFIELD	 	67	63	67	63
2. North Eastern	 	146	137	133	62
3. Eastern	 	1	1.	1	Lenna 2
4. NORTH WESTERN	 	16	1	1	14 11 11 11
5. SOLIHULL	 3	-	-	-	um-T
6. CENTRAL	 1	81	76	85	57
7. Southern	 	36	7	7	6
COUNTY TOTAL	 	347	285	294	189

^{*} Including cases carried over from 1949.

TABLE 14. FORMS OF DENTAL TREATMENT PROVIDED.

EXPECTANT AND NURSING MOTHERS.

	Extrac-	General	No. of	Scalings or scaling	Other	Dentures	provided.
Area.	tions.	Anaes- thetics.	teeth fillied.	and gum treat- ment.	Treat- ments.	Complete.	Partial.
1. SUTTON COLDFIELD	-	-	-	-	-	-	-
2. North Eastern	65	4	63	9	27	-	2
3. Eastern	-	1111-	hve=	-	-	-	
4. North Western	-	-	-	-	7	-	HAME!
5. Solihull	-	-	-	-	-	-	-
6. CENTRAL	16	1	9	4	25	1	3
7. SOUTHERN	-	-	-	-	-	-	_
COUNTY TOTAL	81	5	72	13	52	1	5

CHILDREN UNDER FIVE.

Area.	Extractions.	General Anaesthetics.	No. of teeth filled.	Other Treatments.
1. SUTTON COLDFIELD	. 102	55	11	6
2. North Eastern	. 239	73	75	146
3. Eastern		-	-	2
4. North Western	. –	-	-	1
5. Solihull		-	-	Value of S
6. CENTRAL	. 121	43	166	118
7. SOUTHERN	. 4	-	2	8
COUNTY TOTAL	. 466	171	254	281

TABLE 15. NURSING AND MATERNITY HOMES ON REGISTER, 31st DECEMBER, 1950.

			No. of E	leds.
Area.	Home.	Maternity.	Other.	Total.
1. Sutton Coldfield.	"Woodleigh" N.H. 315, Birmingham Road, Wylde Green.	-	14	14
	"Highfield" N.H. Boldmere Road, Sutton Coldfield.	8	3	11
5. Solihull.	Francis Way N.H. Bentley Heath, Knowle.	30	-	30
	"Moville" N.H. 667, Haslucks Green Road, Shirley.	-	5	5
3. Central.	" Moorlands," Warwick Road, Kenilworth.	4	6	10
	"River Park," Blackdown, Learning- ington Spa.	6	18	24
	"Priors" N.H. 51, Lillington Road, Leamington Spa.	6	7	13
	"Breton Lodge," Holly Walk, Leamington Spa.	5	5	10
	"Priory Lodge," Priory Terrace, Leamington Spa.	2	3	5
	".Grasmere," Avenue Road, Leam- ington Spa	5	4	9
A Kumani	* Wynne Hall, Binswood Avenue, Leamington Spa.	-	8	8
	Levens N.H. 1, Warwick New Road, Learnington Spa.	-	12	12
7. Southern.	Avon Cottage, Ryon Hill, Stratford- on-Avon.	2	-	2
	Mrs. B. Stevens, Kinwarton Road, Alcester.	2	-	2
		70	85	155

^{*} Closed, January, 1951.

NUMBER OF IMMUNISATIONS CARRIED OUT DURING 1950.

STREET, NO.		hildren who con f primary immus		Number of
Area.	Ag	e at final injectio	n.	- children given reinforcing
	Under 5.	5—14	Total.	injection.
1. Sutton Coldfield	305	13	318	278
2. North Eastern	747	178	925	861
3. Eastern	634	97	731	434
4. North Western	524	57	581	391
5. Solihull	486	33	519	1,088
6. Central	629	129	758	845
7. Southern	514	95	609	605
County Total	3,839	602	4,441	4,502
1949 Total	5,456	883	6,337	5,002
1948 Total	5,988	1,047	7,035	3,276

TABLE 17.-NUMBER OF CHILDREN WHO HAVE BEEN IMMUNISED AT ANY TIME BEFORE 31st DECEMBER, 1950.

Annal			N ₁	umber of i	mmunisea	d children.	A THE STREET		Abbeni
Age at 31st Dec., 1950.				Are	a.			County Total.	Appros % of all children
1950.	1	2	3	4	5	6	7	I Steet.	CAMAREN
14	256	1,074	743	598	511	846	170	4,198	79
13	271	1,313	642	609	564	864	192	4,455	81
12	281	1,136	595	574	644	737	271	4,238	69
11	288	947	554	632	664	867	294	4,246	68
10	299	1,130	497	611	672	761	252	4,222	68
. 9	285	1,093	663	606	706	540	276	4,169	61
8	300	991	724	685	674	706	301	4,381	58
7	329	1,019	847	805	777	945	308	5,030	63
6	341	1,078	795	937	947	937	358	5,393	61
5	263	676	518	763	766	876	448	4,310	54
4	321	601	671	699	810	883	185	4,170	54 47
3	531	929	778	780	903	1,034	525	5,480	57
2	515	1,069	673	754	827	1,055	626	5,519	63
1	305	600	555	428	414	554	480	3,336	46
Under 1	7	36	43	19	2	28	31	166	2
All ages			10000						
under 15	4,592	13,692	9,298	9,500	9,881	11,633	4,717	63,313	55

TABLE 18. DIPHTHERIA CASES AND DEATHS, 1950.

Area.	numb cases	tal er of and ths.	respect of	ion of Ca of Diphthe course nmun- tion.		inisation.
	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.
1. SUTTON COLDFIELD. Sutton Coldfield M.B.	1	-	1	_	-	_
2. NORTH-EASTERN. Nuneaton M.B Bedworth U.D Atherstone R.D	5 —		111		5 — —	111
TOTAL	5	- 10	_	-	5	-
3. Eastern. Rugby M.B Rugby R.D	石	=		=	-	=
TOTAL	-	-	-	-	-	N -
4. NORTH WESTERN. Meriden R.D Tamworth R.D	=	=	=	=	=	=
TOTAL	72_ 0	-	-	-	-	-
5. SOLIHULL. Solihull U.D	1	-	1	-	_	_
6 CENTRAL. Leamington M B Warwick M.B Kenilworth U.D Southam R.D Warwick R.D	2 1 2 1 1		1 - - 1		1 1 2 1	
TOTAL	7	1	2	-	5	1
7. SOUTHERN. Stratford-on-Avon M.B. Alcester R.D Shipston-on-Stour R.D. Stratford-on-Avon R.D.	1111	1111	1111	1111		
TOTAL	-	- 1	-	-	-	-
COUNTY TOTALS	14	1	4	100	10	1

TABLE 19.

VACCINATION 1950.

-					discountry 1000.	1000.						
				NUMBER OF	PERSONS	ACCINATE!	OR RE-VA	CCINATED	NUMBER OF PERSONS VACCINATED OR RE-VACCINATED DURING YEAR.	AR.		
	Age at date of Vaccination.	Under 1.	r 1.	1	4	5	5—14	15 or	15 or over.	Total.	al.	
	Area.	Vaccinated,	Re- Vaccinated.	Vaccinated.	Re- Vaccinated.	Vaccinated.	Re- Vaccinated.	Vaccinated.	Re- Vaccinated.	Vaccinated.	Re- Vaccinated.	
-	1. Sutton Coldfield	167	1	131	10	25	19	34	110	357	140	
	2. North Eastern	52	-	72	-	15	-	53	79	192	80	
	3. Eastern	170	1	47	4	37	19	4	9/	258	66	
	4. North Western	158	64	88	60	9	7	80	20	210	82	
	5. Solihull	208	1	250	1	17	15	45	76	574	16	
	6. Central	226	1	162	- 13	27	=	105	124	520	137	
	7. Southern	114	1	130	1	31	10	59	132	334	142	
	TOTALS	1,095	3	830	19	212	8.2	308	199	2,445	1771	
	TOTALS, 1949	688	19	692	14	97	46	132	347	1,810	426	

TABLE 20. NOTIFICATION OF INFECTIOUS DISEASES.—Summary of Returns of Medical Officers of Health for the year ended 31st December, 1950.

Area. \$\frac{1}{2} \frac{1}{2} \frac{1}										1950),														
Area. \$\frac{1}{2}\frac{1}\frac{1}{2}\frac{1}{2}\frac{1}{2}\frac{1}{2}\frac{1}{2}\frac{1}{2}\frac{1}{2}\frac{1}{2}\frac{1}{2}\frac{1}{2}\frac{1}{2}\frac{1}\frac{1}{2}\frac{1}{2}\frac{1}{2}\frac{1}{2}\frac{1}{2}1																	Mala	tria.	Tuber	culosis.					
L. Surton Coldfield M.B. Sutton Coldfield M.B. 2. North EASTERN. Nuncton M.B. Bedworth U.D. 24,540 2,70 = 70,388 117 2 = 7 = 7 = 1 = 24 = - 25 = 13 = 1 = 7 = 1 = 8 = 8 = 1 = 1 = 1 = 1 = 1 = 1 = 1	Area.	Estimated Population Mid-1950.	Small Pox.			Scarlet Fever.	Measles chaling man Me	Whooping										Other Chees,					Dysentery.		Meningococcal Infection.
Setton Coldfield MB.			1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23
Nuncaton M.B 53,940 — 2 5 47 589 80 5 — 10 — 61 2 — — 58 13 1 — 7 1 2 — Atherstone R.D 24,540 — — 70,889 117 2 — 7 — 1 24 — — 25 1 — 18 6 1 — 2 1 1 1 Total 102,180 — 2 5 139 1270 218 8 — 21 — 1 131 2 — — 101 20 2 2 — 13 4 1 3 4 1 3 4 1 4 1 4 1 4 1 1 4 1 1 4 1 1 4 1 1 4 1 1 1 4 1 1 1 1	I. SUTTON COLDFIELD. Sutton Coldfield M.B.	47,440	_	-	1	104	466	201	2	-	40	_	_	38	5	-	_	-	40	5	_	_	3	4	2
8. EASTÉRN. Rugby M.B	Nuneaton M.B Bedworth U.D	24,540	-	-	-	70	389	117	5 2 1	-	7	-		24	-				25	1	-		4	2	_
Rugby M.B 46,780 — — 92 1057195 14 — 6 — — 39 — 1 — — 70 6 6 — — 3 — 1 — 1 Total 20,230 — — 33 137 26 10 — 1 — — 8 2 — — 25 3 — — 1 — 1 — 1 Total 67,010 — — 125 1194 221 24 — 7 — 47 2 1 — 95 9 — — 4 — 2 2 4 — 2 2 4 — 7 — 47 2 1 — 95 9 — — 4 — 2 2 4 — 2 2 4 — 15,890 — 1 — 16 141 26 1 — 3 — 15 — — 12 10 — — 3 28 1 Tamworth R.D 15,890 — 52 — 58 744 154 2 — 18 2 — 47 10 5 — 37 12 — — 3 28 1 Total 52,880 — 52 — 74 885 180 3 — 21 2 — 62 10 5 — 49 22 — — 3 28 2 5 5 50.HULL. Solibull U.D 67,640 — 1 73 416 355 11 — 19 — 1 49 1 2 — 59 6 — — — 1 1 6 6. CENTRAL. Learnington M.B 36,370 — 2 14 223 123 4 — 5 — 12 5 — — 28 4 — — 2 1 4 11 — 1 11	Total	102,180	-	2	5	139	1270	218	8	-	21	-	1	131	2	-	-	-	101	20	2	-	13	4	1
4. North-Western. Meriden R.D 36,990 — 52 — 58 744 154 2 — 18 2 — 47 10 5 — 37 12 — 3 28 1 Tamworth R.D 15,890 — 52 — 74 885 180 3 — 21 2 — 62 10 5 — 49 22 — 3 28 2 5. Solhuell. Solhuel	Rugby M.B		1000										_		_	-									1 1
Meriden R.D 36,990 -52 -58 744 154 2 -18 2 -47 10 5 -37 12 -3 3 28 1 Total 52,880 -52 -74 885 180 3 -21 2 -62 10 5 -49 22 -3 3 28 2 5. Solihull U.D 67,640 -1 73 416 355 11 -19 -1 49 1 2 -59 6 -1 1 6. Central Learnington M.B 36,370 -2 2 14 223 123 4 -5 -1 2 5 28 4 2 -1 1 Marwick M.B 15,360 -1 1 9 159 50 1 6 15 3 1 1 1 -1 Remilworth U.D 10,550 2 9 80 97 2 -5 1 3 1 1 Warwick R.D 12,870 1 6 182 18 -3 -6 6 3 1 1 Warwick R.D 19,670 1 6 171 30 4 -1 33 -1 5 5 22 3 Total 94,820 7 44 815 318 10 -7 59 6 -6 7 1 2 25 4 3 7. Southern N. Stratford-on-Avon M.B. 14,930 21 29 6 1 4 22 5 14 2 Shipston-on-Stour R.D. 8,230 3 83 24 5 6 2 1 2 Stratford-on-Avon R.D. 20,310 38 104 32 6 5 5	Total	67,010	-	-	-	125	1194	221	24	-	7	-	-	47	2	1	-	-	95	9	-	-	4	_	2
5. SOLHBULL. Solibull U.D. 67,640 — 1 73 416 355 11 — 1 49 1 2 — 59 6 — — — 1 6. CENTRAL. Learnington M.B. 36,370 — — 2 14 223 123 4 — 5 — 12 5 — — 2 4 — 2 — 1 1 1 — 1 1 — 1 1 — 1 1 — 1 1 — 1 1 — 1 — — — 1 1 1 — 1 1 — — 1 1 — 1 1 — — — 1 1 — — — 1 1 1 — — — — 1 1 — — — — —	Meriden R.D								2							5		_			_		3		1 1
Solihull U.D 67,640 - 1 73 416 355 11 - 19 - 1 49 1 2 - 59 6 1 1 6 CENTRAL. Learnington M.B 36,370 - 2 14 223 123 4 - 5 - 12 5 28 4 - 2 2 1 1 Warwick M.B 15,360 - 1 9 159 50 - 1 1 - 6 6 15 3 1 1 1 - 1 1 1 - 1 1 1 1 1 1 1 1 1 1 1	Total	52,880	-	52	-	74	885	180	3	-	21	2	_	62	10	5	+	-	49	22	-	-	3	28	2
Leamington M.B 36,370	C.P. B. T. T.	67,640	_	-	1	73	416	355	11	-	19	-	1	49	1	2	_	-	59	6	_	_	_	_	1
7. Southern. Stratford-on-Avon M.B. Alcester R.D 13,140 8 75 23 2 - 8 - 27 1 7 4 - 2 2 Shipston-on-Stour R.D. Stratford-on-Avon R.D. Stra	Learnington M.B Warwick M.B Kenilworth U.D Southam R.D	15,360 10,550 12,870	=		1 2	9 9 6	159 80 182	50 97 18	_ 2 _		1 -	111		6 5 3	_ 1 _			-	15 3 6	3 -3	-	1	1	<u>-</u>	1
Stratford-on-Avon M.B. 14,930 — — — 21 29 6 1 — 4 — — 22 5 — — — 14 2 — — — — — — — — Alcester R.D 13,140 — — — 8 75 23 2 — 8 — — 27 1 — — — 7 4 — — 2 — — — — — Shipston-on-Stour R.D. 8,230 — — — 3 93 24 — — — — 5 — — — 6 2 — — 1 2 — — Stratford-on-Avon R.D. 20,310 — — 38 104 32 — — 6 — — 10 — 1 — — 19 2 — — — — 1 TOTAL 56,610 — — — 70 301 85 3 — 18 — — 64 6 1 — — 46 10 — — 3 2 1 COUNTY TOTALS 488,580 — 54 14 629 5347 1578 61 — 133 2 2 450 32 9 — — 457 87 3 2 51 42 12 1949 484,760 — 18 20 684 2988 1235 77 12 60 4 — 420 29 15 — — 466 106 — 8 167 35 —	TOTAL	94,820	_	-	7	44	815	318	10	-	7	-	-	59	6	-	-		67	15	1	2	25	4	3
COUNTY TOTALS 488,580 — 54 14 629 5347 1578 61 — 133 2 2 450 32 9 — 457 87 3 2 51 42 12 1949 484,760 — 18 20 684 2988 1235 77 12 60 4 — 420 29 15 — 466 106 — 8 167 35 —	Stratford-on-Avon M.B. Alcester R.D Shipston-on-Stour R.D.	13,140 8,230	-	1111		8 3	75 93	23 24	2	_	8	-		27 5	1	_ _ _ 1	_	1111	7 6	4 2		-	_ 2 1 —		_ _ 1
1949 484,760 — 18 20 684 29881235 77 12 60 4 — 420 29 15 — — 466 106 — 8 167 35 —	TOTAL	56,610	-	-	-	70	301	85	3	=	18	-	-	64	6	1	-	-	46	10	_	_	3	2	1
171.050 111.00 000 101.111.0115 10 15 1 100 01 10 1 500 100 1 1 110			-			200	200000	2000				-	2				_	-			3				12
1948 474,670 — 14 96 983 4344 1119 105 10 17 1 — 403 34 18 — 1 509 108 4 1 110 — —			-										-	2000				-							_
	1948	474,670	-	14	96	983	4344	1119	105	10	17	1	77	403	34	18		1	509	108	4	1	110	-	-

TABLE 21. POLIOMYELITIS 1950. CASES OF WHICH DETAILS ARE AVAILABLE.

		AGE (n years).		RE	COVERE	D.	1	
Area.	0-4	5—14	15 and over.	Total	No para- lysis through- out illness.	No resi- dual para- lysis.	Some resi- dual para- lysis.	Still under treatment.	DIE
Sutton Coldfield.	8	16	16	40	14	11	5	8	:
North Eastern.	10	7	4	21	4	7	1	8	
Eastern.	-	4	2	6	1	2	1	2	
North Western.	7	8	6	21	6	5	1	8	
Solihull.	2	9	5	16	2	4	-	9	
Central.	-	_	1	1	-	-	-	-	
Southern.	6	8	3	17	4	4	2	6	
TOTAL	33	52	37	122	31	33	9	41	

TABLE 22.

TUBERCULOSIS, 1950.

	PRIMARY NOTIFICATIONS.							OTHER NOTIFICATIONS.								No. of Definite Cases on Clinic Register at the end of 1950.									DEATHS.						MORTALITY. RATES.					
Area. County Districts comprised,		Pulmonary. Other Fe				Form	5.		Other Forms.					Puls			nary. Other			For	orms. F			tonar	7.	Other Forms.			ms.							
		M.	F.	Ch.	Total.	M.	F.	Ch.	Total	М.	F. (Ch.	Total.	M.	F.	Ch.	Total.	M.	F.	Ch.	Total	М.	F.	Ch.	Total.	M.	F.	Ch.	Total.	M.	F.	Ch.	Total	Pul- monary.	Other Forms.	Total
1 SUTTON COLD- FIELD.	Sutton Coldfield M.B.	18	11	4	33	1	2	3	6	5	2	-	7	1	-	-	1	73	50	15	138	8	10	17	35	10	6	-	16	1	1	-	2	0.33	0.04	0.37
2. North-Eastern	Nuneaton M.B Bedworth U.D Atherstone R.D	21 9 8	25 17 4	8 10 2	54 36 14	1	4 -1	5 2 2 2	14 3 3	3 -1	2 1	-	5 2		111	-		198 79 59	70	24	421 173 116	8	10	16	76 34 33	14 5 8		=	23 6 10			3	7 1	0.42 0.24 0.42	0.12	0.55 0.24 0.46
	TOTAL	38	46	20	104	6	5	9	20	4	3	-	7	1	-	-	1	336	255	119	710	49	47	47	143	27	12	-	39	3	2	3	8	0.38	0.07	0.45
3. Eastern.	Rugby M.B Rugby R.D	30 10	23	7 4	60 17	-	4 1	2 2	6 4	3 4	=	2	5 4	-	=		-1	157 41	119 30	23 13	299 84	24 7	28 8	20 16	72 31	7 6		=	10 7	- 2		1	2 3	0.21 0.34	0.04 0.14	0.25 0.49
	TOTAL	40	26	11	77	1	5	4	10	7		2	9	1	-	-	1	198	149	36	383	31	36	36	103	13	4	-	17	2	1	2	5	0.25	0.07	0.32
4. NORTH-WEST- ERN.	Meriden R.D Tamworth R.D	16 6	12 2	1 1	29 9	4 2	1 3	6 5	11 10	3	4	2	9	=	=	1		72 21		4 4	137 43	23 4	14 7	28 12	65 23	3	2	1	7 4	1		1	2 2	0.18 0.25	0.05 0.12	0.24 0.37
10000	TOTAL	22	14	2	38	6	4	11	21	4	4	2	10	-	=	1	1	93	79	8	180	27	21	40	88	7	3	1	11	1	2	1	4	0.20	0.07	0.28
5. SOLIBULL.	Solihull U.D	27	21	7	55	-	3	4	7	4	1	1	6	2	-	-	2	133	74	16	223	7	9	16	32	9		-	12		-	-	1	0.17	0.01	0.19
6. CENTRAL.	Leamington M.B Warwick M.B Kenilworth U.D	5 2	10 4 1	4 3 -	27 12 3		1 -	3 2	4 4	3 1	3 1	1	3		=	_	FEET	78 46 17 18	46 21 13 15	9 13 2 3	133 80 32 36	5 2 4 4	4 2 1 6	9 3 2 10	18 7 7 20	4 4 2	2 - 2		6 4 	_ _ _	-	1 1	- 2 - 2	0.16 0.26 0.31	0.13	0.16 0.39
	Southam R.D Warwick R.D	6	6	1	13	1	_	6	6	4	i					-		51			80	2	3	15	20	2	-	-	2	-	-	-	_	0.10	_	0.10
The state of	TOTAL	28	26	9	63	3	1	12	16	8	6	1	15	-	-	-	-	210	114	37	361	17	16	39	72	12	4	-	16	1	1	2	4	0.16	0.04	0.21
7 SOUTHERN.	Stratford-on-Avon M.B. Alcester R.D	5 5	7 2	1 -	7	=	1	4	1 5 2	1	1			Ξ	-	-	111	18 26 9	9 5 6	5 3 3	32 34 18	3 3	3 4	6 10 4	9 16 11	3	1 1	=	4	1 =	=	-	1 1	0.13 0.30	0.06	0.20
1000	Shipston-on-Stour R.D. Stratford-on-Avon R.D.	7	3	2 2	12			-	2	1		-	4		-	-	-	31	22	3	56	5	3	3	11	2		_	5	-	-	-	1	0.24	0.04	0,29
	TOTAL	18	14	5	37	2	4	4	10	3	4	-	_7	-	-	-	-		42		140				47	6	-	-	11	1	1		3	0.19	0.05	0.24
	COUNTY TOTALS	191	158	58	407	19	24	47	90	35	20	6	61	5		1	_				2135			_	520	1000		1	122	1000	-	1	-	0.24	0.05	0.30
	TOTALS FOR 1949	219	148	64	431	18	19	46	83	44	18	4	66	4	3	-		1069			1939				548			2	146		-	15	-	0.30	0.06	0.45
	TOTALS FOR 1948	232	163	62	457	17	23	64	104	23	4	3	30	3	1	3	7	1042	672	184	1898	141	179	252	572	117	63	0	186	16	3	10	31	0.30	0.00	0.40

TABLE 23. NUMBER OF TUBERCULOSIS CASES ASSISTED IN 1950.

4	1	ree Extra	a Rations		В	edding, C	lothing, El	tc.
Area.	Men.	Women.	Children.	Total.	Men.	Women.	Children.	Total.
1. Sutton Coldfield	8	1	-	9	-	-	-	-
2. North Eastern	24	9	7	40	4	1	-	5
3. Eastern	8	1	-	9	3	-	-	3
4. North Western	6	2	-	8	4	-	-	4
5. Solihull	9	2	2	13	2	2	3	7
6. Central	13	4	3	20	2	-	-	2
7. Southern	10	6	-	16	2	-	-	2
Totals	78	25	12	115	17	3	3	23

TABLE 24. NUMBER OF CASES ADMITTED TO CONVALESCENT HOMES IN 1950.

	Me	n.	Wor	nen.	Pre-S Child		Total.	
Area.		Total Weeks.	No. of Cases.	Total Weeks.	No. of Cases.	Total Weeks.	No. of Cases.	Total Weeks.
1. Sutton Coldfield	2	4	8	22	1	2	11	28
2. North Eastern	18	56	20	78	6	39	44	173
3. Eastern	1	4	11	44	2	6	14	54
4. North Western	3	7	14	41	5	47	22	95
5. Solihull	1	. 4	12	30	-	-	13	34
6. Central	5	20	13	41	1	4	19	65
7. Southern	1	2	6	28	4	35	11	65
TOTALS	31	97	84	284	19	133	134	514
Average stay in weeks	3	.1	3	.4	6	.0	3	. 8

TABLE 25. NUMBER OF DOMESTIC HELPS AND CASES ATTENDED.

		olps employed ember, 1950.	Cas	ses attende	d in 1950.	
Area.	Whole-time.	Part-time.	Matern- ity.	Tuber- culosis.	Others.	Total.
1. Sutton Coldfield	 7	16	108	2	159	269
2. North Eastern	 4	11	13	3	29	45
3. Eastern	 4	22	51	7	92	150
4. North Western	 -	8	10	3	12	25
5. Solihull	 2	13	86	4	120	210
6. Central	 -	32	43	5	75	123
7. Southern	 8	20	25	10	44	79
COUNTY TOTAL	 25	122	336	34	531	901

TABLE 26. ATTENDANCES AT V.D. CLINICS, 1950.

	fo	irne- rd pital.	War'l	try & kshire bital.		eral bital, ı'ham.	St. C	p. of cross, gby.		eaton D. nic.	Totals.
1 Persons dealt with at Out-patient	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	-
Clinic for first time suffering from Syphilis	10	12	12	9	15	6	8	5	11	10	98
Gonorrhoea	15	5	22	3	8	1	9	2	14	3	82
Not suffering from Venereal Disease	63	25	65	18	86	31	20	3	74	31	416
2 Persons discharged from Clinic after completing treatment for—	0.5	20	0.0	10	00	31	20		/-	31	410
Syphilis	8	2	5	2	2	1		_	9	13	42
Gonorrhoea 3 Persons who ceased to attend with-	16	2	12	1	3	1	3	1	11	. 7	57
out completing treatment 4 Persons in an infective condition at	7	2	18	6	-		0	4	1	1	39
time of default 5 (a) Total attendances of all persons	2	0			-	-		-	-		2
at Clinics	950	717	1187	495	1340	984	424	265	983	658	8,003
	1	667	16	82	99	24		389	10	341	
(previous year) (b) No. of persons in attendance at	0.5	538)		378)		216)		664)		917)	(7,713)
Clinics (c) Average attendance at each	238	167	221	129	-	-	140	67	262	192	1,416
Clinic session 6 No. of in-patient days of treatment to persons suffering from—	18	7	7.8	4.7		-	8.1	5	13	12.9	12.5*
Syphilis		-	-		95	176		-31		_	271
Gonorrhoea		-			-				1	_	_
Non-Venereal Disease		_	-		23	22	-		-	- : 1	45
7 No. of new cases of Venereal Disease	25	17	34	12	23	7	17	7	25	13	180
(previous year)		42	4 (4)	16	3 (41	80	(2)	24	3 (8:	38	(228)

^{*} Items 5(b) and 5(c) in respect of 4 County Centres (excluding Birmingham).

The Ambulance and Transport Officer makes the following Report on the Vehicles of the Ambulance Service:—

Prior to 1947/48 the motor industry was not in a position to provide in any quantity well designed ambulances for general purposes, and the task of obtaining and equipping the necessary replacement vehicles and providing additional staff to man them, together with the rapid reorganisation of the whole service, proved a task of considerable magnitude.

When the National Health Service Act came into force, there was very little to form the nucleus of the new service as the majority of the vehicles then in use were of the wartime pattern, many of them having a record of between 12 and 15 years of useful service. The last two years, however, has seen the rapid development of the small commercial chassis as the basis of the orthodox pattern ambulance on to which have been mounted well fitted coach built bodies, provided with air-conditioning and heating system and all the necessary surgical and toilet requirements. The coming year, I think, will see a further satisfactory development of the commercial chassis by the inclusion of such important items as a synchromesh gear box and double acting shock absorbers suitably pre-set to work with a more progressive form of springing, the latter being further assisted by the fitment of low pressure large section tyres. The standard specification provides for an interior designed to carry a stretcher on the near side within the wheel-base, and side seating to accommodate up to six sitting cases on the off side. Several methods are employed to allow a second stretcher to be brought into use on the off side when the occasion demands. Special consideration has also been given to the layout to facilitate cleaning and disinfection, and past difficulties have been further solved by the inclusion of better class fittings and attention to detail.

Two vehicles which have proved most successful in this county are the Morris Commercial "CV" pattern with a standard works built ambulance body, and the Bedford "KZ" chassis with a Lomas "B" type body. These vehicles, priced at approximately £1,200, give excellent service and their suitability has been exemplified by the many satisfactory reports and special tributes received from the staff and patients alike after travelling long journeys to many parts of the country.

The Wolseley cars at present used have also given excellent service and bearing in mind the excessive mileage they have travelled, and the exacting nature of the services performed, running costs have been comparatively low. The estimated all-in cost per mile is 1/- per car. The only adverse criticism which can be made of this model is that the entrance to the rear is not very accessible to the crippled patient. Practically all modern cars provide for the maximum accessibility to the front seats, and in considering the replacement of the Wolseley cars the Committee decided that the most suitable car for future use is the current design private hire car which is a development of the London taxicab. The notable features are the wide deep rear seats to provide seating for four adults. A division with sliding glass window separates the front and rear compartments, and wide low slung entrance doors are also provided. By virtue of its common sense design, I believe this car will prove eminently suitable for hospital work and show a marked reduction in operating costs.

COUNTY AMBULANCE SERVICE. DETAILS OF DEPOTS.

				Establ	ishment of V	chicles.	
Depot.	Sta	ff.	Emergency	Long Distance	Utility	Sitting Case	Clinics
Depos.	S/L.	D./ Att.	Ambs.	Ambs.	Vehicles.	Cars.	Type.
HERSTONE. Supt.: Mr. S. Burnett	 3	10	2	1	1	2	-
EDWORTH. Supt.: Mr. J. H. BOTTRILL	 . 1	5	3	11-2	1	1	-
LESHILL. Supt.: Mr. W. C. CHAPMAN	 3	14	3	-	1	2	-
Supt.: Mr. J. P. MELVIN	 3	18	4	1	1	2	1
ogby. Supt.: Mr. A. J. Burton	 3	16	4	1	1	2	-
LIHULL. Supt. : Mr. M. Ross	 3	18	4	1	1	2	1
RATFORD-ON-AVON. Supt.: Mr. E. T. SAUL	 3	18	3	1	1	2	-
TION COLDFIELD. Supt. : Mr. E. Towers	 3	16	2	1	1	2	_
FO GATES. Supt.: Miss B. D. SMITH	 -	4	1	-	5	1	-
ARWICK. Supt.: Mr. G. D. WHITING	 3	23	4	1	2	2	-
CESTER	 -	1	1	-	-	-	-
SERVE VEHICLES	 -	-	4	1	-	2	-
COUNTY TOTALS	 25	143	35	8	10	20	2

CODE :

(A) 24 Hourly Service.

(B) Day-time service only.

TABLE 27. ANALYSIS OF AMBULANCE AND SITTING CASE CAR JOURNEYS (County Owned Vehicles).

	Alcest	ster.		erstone.	Bedwe	worth.	Colesh (A	shill.		eaton.		ugby.		olihull. S		I-on-Avon	Sutton Co	Coldfield.	Two G	Gates.		rwiek.		tals. her and g Cases.	Tota	als.
	Cases	Miles.	cases.	Miles.	Cases.	Miles.			Cases.	Miles.	-	Miles.	Cases.		-	1	Cases.	Miles.	Cases.	Miles.	, Cases.	Miles.	Cases.	Miles.	Cases.	Miles.
Maternity. Stretcher cases Sitting cases	21 6	653 112				356 704			184 176	1,589 1,106	77 782		760 93		87 261			1,509 1,878	46 103							58,726
Illness. Stretcher cases Sitting cases		3,781 5,784	1,142 4,336						2,103 10,736										681 2,175		3,056 8,269				78,200	912,741
Military. Stretcher cases Sitting cases	=	-	=			_	=	=	1	276	=		=	=	7 1	107 18		=	=		1 1	8 6		391 24	11	415
Accident. Stretcher cases Sitting cases	27 32								288 129	1,793 697				3,571 2,133	168 30		97	809 71	60 39							29,978
School Children. Stretcher cases Sitting cases	-4			28 4,533				132	2 145	16 1,579		39 1,985	4 47	41 374		=	78	824	10 24		1 9	199 463			970	11,800
Nurseries. Stretcher cases Sitting cases	=	=	=	=	=	=	Ξ	=	=	=	2 10		-3		=	=	=	=	7 5		=	=	9 18		27	574
Infectious Di- seases. Stretcher cases Sitting cases	=	Ξ	2		1	28	34 6		200 13	5,256 269	96 19	2,515 300		3.064	36 2			1,999	9 12	96 280		1,226 119			697	17,680
Mortuary. Stretcher cases	4	38	10	78	15	200	14	144	17	145	30	225	36	265	41	470	34	201	3	29	74	1,038	298	2,853	298	2,850
Servicing & runn- ing Repairs, Ambulances Sitting case cars	-	213	=				=	628 866	=	185 230	=			627 283	=			133	=			2,132 1,609				10,394
Totals. Stretcher cases Sitting cases		5,390 6,383						24,696 93,907	2,795 11,199					45,159 100,364		25,698 101,755		21,159 52,433	816 2,358			47.883 104,177				
Totals. All cases	593	11,773	6,308	84,558	5,801	44,509	5,794	118,603	13,994	121,690	12,355	123,272	12,481	145,523	7,258	127,453	7,142	73,592	3,174	42,133	12,502	152,060	87,402	1,045,166	87,402	1,045,16
Totals. Previous year	144	3,578	4,874	73,502	6,069	46,788	5,722	103,345	11,905	123,652	12,510	120,068	11,581	140,112	6,083	119,806	5,739	68,421	2,261	39,012	13,627	173,298	80,515	1,011,602	80,515	1,011,80

INSPECTION AND SUPERVISION OF FOOD. MILK AND DAIRIES ADMINISTRATION.

The principal acts and regulations now in force relating to the production, processing and sale of milk are as follows:—

Food and Drugs Act, 1938.

Food and Drugs (Milk and Dairies) Act, 1944.

Milk (Special Designations) Act, 1949.

The Milk and Dairies Regulations, 1949.

Milk (Special Designation) (Raw Milk) Regulations, 1949.

Milk (Special Designation) (Pasteurised and Sterilised Milk) Regulations, 1949.

In addition there are explanatory circulars from the Ministries of Agriculture, Food, and Health, and various minor regulations.

During the year the Food and Drugs (Milk, Dairies and Artificial Cream) Act, 1950, was placed on the statute book and came into force on the 1st January, 1951. This is an Act to consolidate certain enactments relating to milk, dairies and artificial cream, and repeals the Milk (Special Designations) Act, 1949, part of the Food and Drugs (Milk and Dairies) Act, 1944, and the whole of Part II of the Food and Drugs Act, 1938, which relates to milk, dairies and artificial cream, but the provisions are re-enacted so that legally the position is not materially altered.

The effect of the legislation which came into force on the 1st October, 1949, was to redistribute duties and functions of the various authorities, the basis of the redistribution being that County Agricultural Executive Committees with powers delegated by the Minister of Agriculture are responsible for administration of milk production on the farms; Food and Drugs Authorities are responsible for the processing of milk and for licensing plants under Pasteurised and Sterilised Milk Regulations; and District Councils for duties in connection with distribution. The County Council, in addition to its duties under Food and Drugs Acts is responsible for the prohibition of sale of tuberculous milk, and milk of cows suffering from tuberculosis and certain other specified diseases under the Food and Drugs Act, 1938, which is replaced by the 1950 Act as from the 1st January, 1951.

Food and Drugs Act, 1938.

During the latter part of 1949 and the early part of 1950 discussion took place with officers of the County District Authorities regarding milk and dairies administration generally, and in particular, with regard to the duties of the County Council for the control of tuberculous and other infected milk. At about the same time discussions took place with the Director of the Public Health Laboratory at Coventry, which resulted in the second half of the year in increased facilities for the biological examination of milk samples.

It is anticipated that approximately 1,000 samples can be dealt with in a full year. Ever increasing quantities of milk are being pasteurised, and the Attested Herd Scheme and licences for Tuberculin Tested milk continue to grow. Part of the discussion with officers of the County District Authorities was, therefore, devoted to that part of the milk supply of the County which does not yet fall within either of the foregoing groups, and a scheme of priority groupings of milk supplies was agreed upon, and samples are now taken in accordance with their terms. These priority groups are as follows:—

- A. All school milks other than milk pasteurised under licence, or Tuberculin Tested milk.
- B. All milk not subject to pasteurisation.
- C. Special investigations.
- D. Pasteurised milk.

(Part of the routine checking of pasteurising plant now consists of biological sampling to ensure that any infection in the raw milk supply to the plant is in fact destroyed by the process).

In addition, the officers of the County Borough of Coventry are collaborating, and the same system and methods are being used within the County Borough and in the County with advantage to both. In the Boroughs of Sutton Coldfield and Rugby and the Urban District of Solihull regular sampling for biological examination has been carried out by arrangement with the officers of these authorities. The Department's own officers undertake the regular sampling for biological examination in the majority of districts.

In addition to the infections discovered by routine work referred to above, my department receives notifications from authorities outside the County of milk infections found within their areas but arising from milk produced in the County of Warwick. These, too, are dealt with administratively in my Department.

An important advance in milk and dairies administration was contained in the Milk and Dairies Regulations, 1949, whereby the District Medical Officer of Health is empowered to stop the supply of an infected milk until he is satisfied that it is being adequately treated and until the infection has been removed. District Medical Officers are immediately informed of infections arising within their area, and details are furnished by this Department and by the Divisional Veterinary Officer of the Ministry of Agriculture and Fisheries (Animal Health Division) as to the progress and finality of veterinary investigations.

Summaries of the work undertaken during the year are given in the following tables:-

Table I. FOOD AND DRUGS ACT, 1938.

TUBERCULOUS MILK INVESTIGATIONS—ROUTINE MILK SAMPLES FOR BIOLOGICAL EXAMINATION DURING THE YEAR 1950.

NO. OF SAMPLES.

Health Area.	Local Authority.	Pa euris			.T. ist).	T.	T.	Accredited and Non-graded.	
Area.	Authority.	Total.	No. Pos.	Total.	No. Pos.	Total.	No. Pos.	Total.	No. Pos.
1. Sutton Coldfield.	Sutton Coldfield* Borough.		-	-	-	-	-	10	-
2. North Eastern.	Nuneaton Borough. Bedworth Urban. Atherstone Rural.	- 4 -				_ _ 2		27 13 45	_ _ 2
3. Eastern.	Rugby Borough* Rugby Rural	4 2	_	-	_	18	=	45 56	1 1
4. North Western.	Meriden Rural. Tamworth Rural.	=	=	=		=	Ξ	77 41	3
5. Solihull.	Solihull Urban.*	5	-	-	-		-	20	-
6. Central.	Warwick Borough. Warwick Rural. Southam Rural. Kenilworth Urban. L'ton Spa Borough.	2 - - 2 -	11111	===	11111		11111	39 67 2 2	- 1 - - -
7. Southern.	Stratford-on-Avon Borough. Stratford-on-Avon Rural. Alcester Rural. Shipston-on-Stour. Rural.	2				- - 4 -	-	54 35 28	- 3 - 1
TOTALS		21	_	2	-	24	-	561	13

^{*} Samples taken by the Chief Sanitary Inspectors of the Local Authorities for the County Council.

Table II.

FOOD AND DRUGS ACT, 1938.

Details of Investigations of Tubercle Infected Milk Supplies during Year 1950.

Health Area.	Local Authority.	Completed investiga- tions.	Cows examined.	Milh samples for diagnostic purposes.	Cows slaughtered under T.B. Order.	Cows removed from herds during invest- igations which may have been infected.
1. Sutton Cold- Coldfield.	Sutton Coldfield Borough.	2	31	6	_	-
2. North Eastern.	Nuneaton Borough Bedworth Urban. Atherstone Rural.	3 (2)	98 (48)	18 (6)	4 (1)	_ _ 4 (3)
3. Eastern.	Rugby Borough. Rugby Rural.	1 (1) 3 (1)	10 (10) 49 (15)	6 (6) 19 (2)	1 (1) 3 (1)	=
4. North Western.	Meriden Rural. Tamworth Rural.	19 (3) 5 (1)	351 (69) 91 (8)	77 (10) 15 (1)	17 (4) 5 (1)	9 (1) nil.
5. Solihull.	Solihull Urban.	4	87	18	1	3
6. Central.	Warwick Borough. Warwick Rural. Southam Rural. Kenilworth Urban. Leamington Spa Borough.			- 6 (2) - 4 -	- 1 1	- 11 (11)* - 8 -
7. Southern.	Stratford-on-Avon Borough. Stratford-on-Avon Rural. Alcester Rural. Shipston-on-Stour. Rural.	5 (3) 2 1 (1)	108 (54) 52 35 (35)	34 (10) 8 4 (4)	7 (6) 1 1 (1)	- - 5 -
TOTALS		48 (13)	953 (250)	215 (41)	42 (15)	40 (15)

Figures in brackets shew cases arising from routine sampling in the County, and are included in the totals representing notifications from all sources.

During the year a total of 608 samples were submitted for biological examination, compared with 189 during the year 1949. 13 were found to contain living tubercle bacilli, compared with 2 in the previous year. It will be observed that all the pasteurised and Tuberculin Tested milks gave negative results, and that the 13 infected milks came from a total of 561 Accredited and non-graded samples—being approximately 2.3%.

During the year 35 notifications of tubercle infected milk were received from authorities outside the administrative county, relating to milk produced within the county, compared with 44 such notifications received during 1949.

^{*} entire herd.

Notifications relating to individual herds are reported to the Divisional Veterinary Officer of the Ministry of Agriculture and Fisheries (Animal Health Division), and details of the 48 completed investigations are given in Table II.

From this total it will be observed that 42 cows were slaughtered under the Tuberculosis Order, compared with 49 during the previous year. Reports are received from the Divisional Veterinary Officer during the progress of the investigations, and final reports are received when the herd is considered to be free from infection. The collaboration between the Divisional Veterinary Officer's Department and mine is excellent, and I wish to place on record my appreciation to the Divisional Officer.

Milk (Special Designation) (Pasteurised and Sterilised Milk) Regulations, 1949.

8 applicants for Dealers' (Pasteurisers') licences were received during the year, and 7 licences were granted. The remaining application was held over at the beginning of the year until agreement could be reached as to the major improvements that were needed, and subsequently the business was sold and processing has now ceased at this dairy.

2 of the 7 applicants for licences were entirely satisfactory, but 5 required improvements in varying degrees. One new dairy and new plant was installed, and one dairyman carried out a number of improvements of a temporary character pending the erection of a new dairy and the installation of new plant. For the remaining 3 dairies, agreement in principle regarding the improvements needed had been secured before the year commenced, and during the year the necessary plans were prepared and orders for equipment placed. Due to the long period which elapses between the placing of an order and the delivery of equipment, this work was not completed during the year, but there is no doubt it will be completed in 1951.

During the year 7 enquiries regarding new dairies and the installation of pasteurising plant were received and dealt with, but for reasons given above it may be some time before they come into operation.

Each pasteurising dairy was visited at frequent intervals and the records, temperature charts, and the methods of processing observed. Considerable improvement was effected in plant operation, and the following samples were submitted to the prescribed tests with the results stated:—

Samples from Licensed Pasteurisation Plants.

Code No.	No. of	No. of	7	est failed :-	To the same		
of Dairy.		Failures.	Phosph: & M.B.	Phosph: only.	M.B. only.		
7/7/1	55	4	_	4			
2/10/2	18	-	_	-	-		
6/11/1	65	3	_	2	1		
2/10/1	79	3	_	1	2		
6/18/1	70	2		2	-		
7/16/1	120	12	-	9	3		
3/4/1	89	1	_	1	-		
6/5/1	7	2	-	1	1		
TOTALS	503	27		20	7		

These results show that that no sample failed both prescribed tests at the same time, that 4.0% of samples failed the phosphatase test, and 1.4% the methylene blue test.

During the first half of the year an entirely new plant was installed in the dairy, 7/16/1. All the 9 samples which failed the phosphatase test, as shown in the table, occurred from milk pasteurised in the old plant, and during the second half of the year when the new plant was in

operation not a single phosphatase failure occurred. The results as shown are considered to be satisfactory; but for the 9 failures from the plant which although previously licensed was considered to be inadequate, the results would have been even better,

Milk in Schools Scheme.

Milk is supplied free of charge for pupils in grant-aided schools, the source and quality of which must be approved by the Medical Officer of Health.

In practice, supplies are obtained and supervised by consultation between the Health and Education Departments, with assistance from the Area Milk Officer of the Ministry of Food, whose help is gratefully acknowledged. Two grades of milk normally are approved, namely Pasteurised and Tuberculin Tested; in a very small number of schools where it is impossible to obtain either of these grades of milk the best alternative available is temporarily approved. Supervision by the Health Department includes visits to dairies and schools, and examination of milk supplies, in addition to knowledge of supplies gained from the Department's other activities in connection with Milk and Dairies.

All supplies of milk to schools are the subject of visits and samples at least once in every school term.

The following is a summary of the number of schools, the suppliers and grade of milk supplied, and samples taken during the year:—

Designation of milk supplied.	No. of Schools.	No. of Suppliers.	No. of Samples.	No. of unsatis- factory samples.
Pasteurised	209	44	369	75
" Tuberculin Tested "	18	10	48	10
" Accredited " and Non- graded.	7	6	25	5
TOTALS	234	60	442	90

It will be observed that a fraction over 20% of milk samples are classed as "unsatisfactory," but all for convenience are taken after delivery and, therefore, under more exacting conditions, and the great majority of failures were methylene blue test for keeping quality. Although some changes were made during the year to obtain improved supplies, none were made necessary by reason of unsatisfactory samples, and the only action necessary in this connection was advice and caution.

Miscellaneous.

Samples of milk are taken on behalf of the Ministry of Health from hospital dairy farms (33); from supplies made under contract to hospitals on behalf of the Regional Hospital Board (17); and for various enquiries necessary in the Department (26); a total of 76 during the year.

MENTAL HEALTH.

1 Administration.

(1) Constitution and Meetings of Mental Health Sub-Committee.

The functions of the Council relating to the Mental Health Service are delegated to the Mental Health Services Sub-Committee of the Health Committee, this Sub-Committee consisting of fifteen members. Three meetings of the Sub-Committee were held during the year.

(2) Staff employed in the Mental Health Service.

The staffing arrangements have been unchanged during the year.

The Chief Administrative Officer of the Mental Health Services Sub-Committee is the Mental Health Officer, Mr. H. J. Kotch, who has supplied this section of my report. By arrangement with the Birmingham Regional Hospital Board, Dr. Henry Brougham Leech, B.A., M.B., B.Ch., B.A.O., the Acting Medical Superintendent of Weston Colony, continued to act as Medical Adviser to the Committee during the year. The medical staff of the Health Department have, of course, also been available when required in connection with the Mental Health Service.

Eight duly Authorised Officers are engaged in the County, one of these officers being located in each of the seven areas of the County, with the remaining officer located at head-quarters. Mr. R. E. Langley was appointed as Duly Authorised Officer for the Sutton Coldfield Area as from the 1st May, 1950, in place of Mr. D. T. Baldwin, who resigned.

One female Visitor is employed for the visitation of mental defectives in the County.

The Council's Occupation Centres are staffed in each case by a Supervisor and an Assistant Supervisor, with part-time assistance for domestic duties and guiding the patients.

- (3) Co-ordination with Regional Hospital Boards and Hospital Management Committees. The Council's Officers have continued to supervise, on behalf of Hospital Management Committees, the mental defectives who have been placed on licence within the County. There were thirty of these patients under supervision in the County at the end of the year.
 - (4) Training of Mental Health Workers.

Mrs. M. L. Roberts, the Assistant Supervisor, engaged at the Nuneaton Occupation Centre, attended a refresher course for staffs of occupation centres, organised by the National Association for Mental Health, which was held in London from the 12th to the 20th April, 1950.

2 Work undertaken in the Community.

(1) National Health Service Act, 1946; Prevention, Care and After-Care.

The Psychiatric Out-Patient Clinics arranged and staffed by Specialists of the Birmingham Regional Hospital Board have continued to be held at hospitals within the County. The Social Workers on the staff of the Central Hospital, Hatton, have undertaken the after-care of patients discharged from the hospital and the Council's officers have also been available to assist in this matter.

Responsibility was accepted by the Local Health Authority for the maintenance of certain patients placed in After-Care Homes through the Mental After-Care Association after treatment at the Central Hospital, Hatton.

(2) Lunacy and Mental Treatment Acts 1890-1930—Work undertaken by Duly Authorised Officers.

The following is a summary of the cases dealt with by the Duly Authorised Officers in the County during the year:—

Patients dealt	with unde	r the Lunacy	Acts				269
Patients dealt	with under	r Section I of	the Mental	Treatment	Act,	1930	144
Patients dealt	with under	Section 5 of	the Mental	Treatment	Act,	1930	12

425

(3) Mental Deficiency Acts, 1913-1938.

(i) Ascertainment.

(a) Number of defectives.

The number of cases ascertained as at the 31st December, 1950, excluding patients maintained in, or on licence from, institutions for mental defectives, was as follows:—

					M.	F.	T.
Under guardianship		***			27	36	63
In " Places of safety"					-	_	
Under statutory supervision	***	***	***		154	139	293
Under voluntary supervision	***		***		108	81	189
Under investigation	***			***	17	16	33
In the Central Hospital, Hatton		***	***		79	81	160
					385	353	738

(b) Cases reported during the year.

There were seventy-six new cases reported to the Committee during the year and these were dealt with as follows:—

				M.	F.	T.
Admitted to institutions		***	***	3	4	7
Placed under statutory supervision		*** "	***	9	11	20
Placed under voluntary supervision			***	7	5	12
Died or removed from area			***	3	1	4
Found not to be defective		***		2		2
Remaining under investigation at end	of year	ar		16	15	31
				40	36	76

(c) Defectives awaiting vacancies in institutions.

There were seventy-one patients awaiting admission to institutions for defectives at the end of the year. The position relating to the provision of vacancies for defectives requiring institutional care continued to be most difficult during the year and many of the cases remaining on the waiting list were of an urgent nature.

(ii) Guardianship and supervision.

The patients under guardianship in the County and those on licence from institutions or under statutory or voluntary supervision have been visited, as necessary, by the Committee's officers.

(iii) Training.

The training of defectives at the Council's Occupation Centres at Nuneaton and Warwick, has continued successfully during the year. At the end of 1950 there were forty-three defectives in attendance at these two Centres.