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WEST SUFFOLK COUNTY COUNCIL

ANNUAL REPORT

OF THE

Medical Officer of Health

FOR THE

YEAR 1942.

HENRY ROGER, M.A., M.B., Ch.B., D.P.H.

County Medical Officer



County Health Department,

Bury St. Edmund's.

To the Chairman and Members of the Public Health Committee.

Mr. Chairman, Ladies and Gentlemen,

I have the honour to present to you the Annual Report on the health of the County of West Suffolk for the year 1942. This report, as in previous war years, is, at the request of the Ministry of Health, an abbreviated one.

This is the third complete year of work under war conditions, and it is satisfactory to be able to record that not only has the standard been maintained, but, as will be seen in the body of the report, marked development has been effected, notably in the Midwifery and Tuberculosis Services. No appreciable deterioration in the health of the community can be demonstrated and the statistics may be regarded as satisfactory.

Full co-operation has existed with the Regional Office of the Ministry of Health at Cambridge, and I would particularly wish to thank Dr. Banks, the Regional Medical Officer, for much friendly advice and assistance.

I acknowledge again the loyal co-operation of all members of the Public Health Staff, and express my gratitude to the members of the Public Health Committee for the help and encouragement they have given us in our work.

I have the honour to be,

Mr. Chairman, Ladies and Gentlemen,

Your obedient servant,

HENRY ROGER.

County Medical Officer of Health.

September, 1943,

STAFF OF THE COUNTY HEALTH DEPARTMENT.

(a) Medical and Dental Staff.

H. Roger, M.A., M.B., Ch.B., D.P.H., County Medical Officer, School Medical Officer and Chief Tuberculosis Officer.

Alison J. Rae, M.R.C.S., L.R.C.P., D.P.H., Senior Assistant County Medical Officer.

R. H. Clayton, M.B., B.S., B.Hy., D.P.H., Assistant County Medical Officer and District Medical Officer of Health.

D. Barclay, M.B., Ch.B., D.P.H. (Resigned 24-9-42), Assistant County Medical Officer.

C. M. Wells, L.R.C.P. and S., L.D.S. (Appointed 18-11-42), Assistant County Medical Officer.

E. A. Haxton, B.D.S., Assistant Dental Surgeon (Joined H.M. Forces 14-6-42).

A. Hay, L.D.S.,

Mrs. M. Porter, L.D.S. " " " (Appointed 1-6-42).

(b) Milk Officer.

W. Paterson, N.D.D., C.D.A.

(c) General Nursing Staff.

G. M. Penly Cooper, M.B.E., S.R.N., Certified Midwife, Chief Health Visitor

*L. Richardson, S.R.N., " " Health Visitor.

B. W. Collins, S.R.N., " " " "

*C. B. Coleman, S.R.N., " " " "

K. Woodhead, S.R.N., " " " "

E. Stephenson, S.R.N. [Appointed 18-5-42] " " " "

E. Fletcher, Matron, County Sanatorium [Resigned 4-2-42].

B. Dawes, Dental Attendant.

M. Keeley,

*These Officers hold the Health Visitors' Certificate.

(d) Home Teacher for the Blind.

M. D. Gourlay.

(e) Clerical Staff.

The Chief Clerk to the Department, Miss D. Kilner, is assisted by ten assistant clerks.

One of the London County Council School Nurses who had been sent to work among the evacuated children was withdrawn on May 1st, 1942, and the other on July 1st, 1942. It was considered necessary, therefore, to appoint an additional Health Visitor, who took up her duties on May 18th, the Ministry of Health agreeing to pay 50 per cent of her salary and travelling expenses as a charge to the Evacuation Account.

STATISTICS.

Rateable Value (General)		£459,816
Produce of a Penny Rate (General)		£1,863

EXTRACTS FROM VITAL STATISTICS OF THE YEAR.

Birth Rate per 1,000 of the estimated resident population, 16.8.

Still Birth Rate per 1,000 total births, 29.5.

Death Rate per 1,000 of the estimated resident population, 13.5.

Deaths from diseases of pregnancy and childbirth :—

(a) from sepsis		2
(b) from other causes		6
Maternal Mortality Rate per 1,000 total births		4.2
Death Rate of Infants under 1 year of age :—		
All Infants per 1,000 live births		41.2
Legitimate per 1,000 legitimate live births		40.1
Illegitimate per 1,000 illegitimate live births		61.9
Deaths from Measles (all ages)		Nil
Deaths from Whooping Cough (all ages)		2
Deaths from Diphtheria		Nil
Deaths from Diarrhoea (under 2 years of age)		2
Deaths from Cancer (all ages)		240

Birth Rate.

The Birth Rate was 16.8 per 1,000 of the estimated population as compared with 14.6 for 1941 and 15.8 for England and Wales.

Death Rate.

The Death Rate was 13.5 per 1,000 of the estimated population as compared with 13.7 for 1941 and 11.6 for England and Wales.

Infant Mortality.

The rate for the Administrative County of 41.2 per 1,000 live births was practically the same as the figure for the previous year. The rate for England and Wales was 49.

Maternal Mortality.

The Maternal Mortality Rate per 1,000 total births was 4.2 compared with 3.2 for 1941 and a rate of 2.01 for England and Wales.

In 1942 there were eight maternal deaths, which figure is an increase of 2 on the figure for last year.

Zymotic Deaths.

A total of 10 zymotic deaths was returned. A summary of the causes of death is as follows :—Scarlet Fever, 1 ; Typhoid Fever, 1 ; Whooping-cough, 2 ; Cerebro-spinal Fever, 2 ; Acute Infantile Encephalitis, 1 ; Acute Poliomyelitis and Polio-encephalitis, 3.

GENERAL PROVISION OF HEALTH SERVICES FOR THE AREA.

LABORATORY FACILITIES.

Throughout the year the main pathological work for which the County Council was responsible, was carried out at the West Suffolk General Hospital, Bury St. Edmund's, although blood specimens for Wassermann reaction continued to be sent to King's College Hospital, London, and milk samples to the Veterinary Research Laboratory at Pakenham.

The Laboratories both at the West Suffolk General Hospital, Bury St. Edmund's, and at White Lodge Emergency Hospital, Newmarket, were recognised by the Ministry of Health as Area Laboratories under their scheme. Under this scheme the work for which the County Council is responsible, except blood specimens for Wassermann reaction and milk samples, will be dealt with at White Lodge. All Wassermann reactions will be carried out at the Public Health Emergency Laboratory at Cambridge.

AMBULANCE FACILITIES.

The British Red Cross Society continued to provide ambulances for general purposes. At the end of the year they disposed of one vehicle, leaving five still in use. In addition, one ambulance is provided by a voluntary Society at Haverhill.

At the end of the year there were thirty ambulances and thirty-seven "sitting-case cars" provided under the Civil Defence Scheme, and these were available, under certain conditions, for the removal of patients to and from hospitals and treatment centres.

NURSING IN THE HOME.

This has continued to be undertaken by the West Suffolk County Nursing Association. In some districts difficulties arose owing to the shortage of nurses, but these were overcome by re-arrangement and amalgamation of districts.

HOSPITALS.

The Hospital services for the County were as described in my Report for 1941.

At White Lodge, Newmarket, the remaining huts provided under the Emergency Medical Service Scheme, were brought into commission on March 9th, bringing the total number of beds up to 730. In October the offer of St. Phillip's Church Hall, Newmarket, as a Recreation Room for patients at White Lodge was accepted, and certain furniture for this was provided by local residents.

During the year, at the request of the Ministry of Health, a house in Newmarket known as Heathside, was requisitioned as an Emergency Hostel for Aged and Infirm persons who have been evacuated from their homes, the cost being borne by the Ministry. It was opened on December 1st, and 30 patients can be accommodated. As a matter of economy and convenience, the catering was undertaken by the Clerk and Steward of White Lodge.

MATERNITY AND NURSING HOMES.

Routine inspections of all registered Nursing Homes have been carried out, as in previous years, by the Superintendent Health Visitor. At the end of the year there were six such homes, providing 8 beds for maternity cases, and 241 for other cases. Three applications for exemption from registration were received and granted.

TRAINING OF NURSES.

The scarcity of Nurses in the Institutions in the County having become a pressing problem, I submitted the following Report to the Council, who adopted the scheme as outlined therein.

"After consultation with Miss Penly Cooper and Mr. Thompson, the following points are submitted for consideration.

At the moment this question of the scarcity of nurses is exercising the minds of all who are interested in the organisation of nursing and the Ministry of Health at the moment is giving serious consideration as to what steps are to be taken to provide an adequate nursing service throughout the country. It is probable that some time in the near future a National Nursing Service will be set up which will embrace all who make nursing their livelihood, which will be controlled by Law, and in which all persons licensed to practise will be enrolled on a Register.

For several years now the problem of securing candidates for the nursing profession in any hospital has been increasingly difficult and the difficulties have been more marked in hospitals receiving chronic cases. It will be realised that apart from local conditions, the type of work in a hospital receiving chronic cases, compared with hospitals receiving acute cases, is difficult and unattractive. The result has been that on many occasions our Institutions have been

under-staffed and the deficiencies in the nursing personnel have had to be made up from Co-operative Associations. This has been found to be an unsatisfactory arrangement from every point of view. In the great majority of cases these nurses are sent from the Associations without any guarantee of having had adequate training or of being proper persons to be in charge of the sick; efficiency, therefore, has suffered and consequently there has been a lowering of nursing standards, apart from the inferior work done by these imported nurses, which is bound to have an effect on the work done by permanent members of the staff. Economically, too, this recruitment from Co-operative Associations is unsound, which is proved by the following figures, which represent the expenditure on temporary nurses:—

	<i>Bury St. Edmund's.</i>	<i>Sudbury.</i>
Year to 31-3-1939	£137	£132
1940	£387	£283
1941	£677	£749

Any scheme should ensure (i) that a steady supply of properly-trained nurses is available for all patients who require nursing, and (ii) that by control and organisation of all who make nursing their profession, patients are protected from exploitation by unqualified women.

With these two prime objects, the following points are set out for the consideration of the Sub-Committee to deal with the problem as it applies to West Suffolk.

In this connexion attention should be given to:—

- (a) the attracting of recruits,
- (b) the training of candidates.

(a) **The attracting of recruits.**

Consideration should be given to an examination of present conditions, so that nursing should be made as attractive as possible. In order that the right type may be recruited, the profession should be at least as attractive as any other open to women. The following points are worthy of consideration:—

- Hours of duty.
- Rates of pay.
- Conditions of work and living.

It is difficult to make any hard and fast suggestions for salaries as it will be realised that any scale laid down now is liable to radical readjustment, owing to the fact that the Minister of Health proposes to set up a Salaries Committee in the near future.

Although we wish to attract the best possible type of recruit, it should be realised that this branch of nursing offers a limited opportunity for advancement when the nurse is fully trained. The positions open to nurses trained in acute general hospitals, such as Matrons, Sisters, or other Administrative Posts, are not open to the Assistant Nurse, and therefore the initial salaries should be made as attractive as possible.

The following scale, which is in force in other counties who have adopted a scheme successfully, is suggested:—

During the period of training, candidates to be paid £50 for the first year and £55 for the second year, together with full emoluments. After qualifying as Assistant Nurses, they would be appointed to permanent pensionable posts in the County at a commencing salary of £60 per annum rising by annual increments of £7 10s. to £75 per annum plus emoluments. Any candidate obtaining honours in the final examination (75% marks or over) will be given a commencing salary of £67 10s. per annum rising to £75 per annum.

(b) **The training of candidates.**

We are concerned at the moment with the training of candidates for Public Assistance Institutions. Nursing in these Institutions requires training in no less a degree than is required in a hospital for the reception of acute cases, but the training should be of a specialised character suitable to the type of work that will be required of the nurses. Mention has already been made of the importance of an adequate training for the nursing of the chronic sick. The training for nurses in Public Assistance Institutions should be less detailed than, but as comprehensive as, the training required for acute hospitals. The following is suggested for training applicable to West Suffolk.

The period of training should be for two years, with a third year's compulsory service.

The first part should be taken in a preliminary training school and the suggested period is one of six months, during which the theory of nursing would be taught with, of course, the necessary practical applications.

The nurses would then be drafted to various hospitals in the County for the continuation and completion of their training.

A passing out test would be given at the end of the preliminary period and a final examination at the end of the two years for qualification as an Assistant Nurse.

During the training, of course, the nurses would be under the supervision of the various matrons and would be trained and examined according to a prepared schedule.

For West Suffolk the following scheme of training is suggested :—

- (i) Sudbury as the preliminary training school for a period of six months, the rest of the training to be completed as follows :—
- (ii) White Lodge Emergency Hospital—six months.
- (iii) A Sanatorium —two months.
- (iv) Risbridge Home, Kedington —one month,

the rest of the period of training to be spent in one or other of our two Public Assistance Institutions at Bury St. Edmund's or Sudbury.

It will be noted that it has been suggested that the preliminary training school should be at Sudbury. It is considered that there the nurses would receive an excellent background for the first six months. This is an essential part of the scheme, for it will be appreciated that the first six months of training will colour the whole nursing outlook of the candidate. It will be recognised that much additional work will be necessary and that the present staff would be inadequate. At present there is only one Day Sister, and even for normal requirements, it is considered that there should be two Sisters at Sudbury, one for the Male side and one for the Female side. To deal with the training, therefore, it is suggested that a Sister should be appointed to Sudbury with the specific added duty and qualifications to act as Tutor-Sister.

In connexion with the Scheme it is suggested that all applications should be received through the County Medical Officer of Health and that Miss Penly Cooper should receive the designation of Supervisor, her duties to include the interviewing of candidates for training and the supervision of training of Assistant Nurses."

A Sister-Tutor, resident at Walnuttree Hospital, was appointed, and took up her duties on October 8th. Sixteen candidates were accepted for training and started this before the end of the year.

MATERNITY AND CHILD WELFARE SERVICE.

MIDWIFERY.

(a) Domiciliary Service.

The arrangement for carrying out the midwifery service of the County through the County Nursing Association has continued in force as have also the ante-natal, post-natal and consultative and emergency unit services.

The number of midwives practising at the end of the year in the area served by the Council was seventy. In 1942 they attended as midwives eleven hundred and forty-eight cases, while in five hundred and seventy-seven cases they acted as Maternity Nurses, there being a practitioner in attendance. Medical help was called by midwives in a total of three hundred and sixty-eight cases, which represents a percentage of 32.05. In 329 of these cases medical help was sought in respect of the mother, and in 39 cases in respect of the baby.

A total of four hundred and thirty ante-natal examinations including twenty-nine second examinations were made. This figure represents 48.2 per cent. of the total domiciliary midwifery cases taken by the Midwives during 1942. Fifty post-natal examinations were made during the period.

(b) Institutional Maternity Accommodation.

The Scheme for the reception of complicated Maternity Cases at the West Suffolk General Hospital, Bury St. Edmund's, as outlined in my Report for 1941, came into operation on April 1st, 1942. After that date, 116 cases were admitted to the Hospital.

During the year the Committee gave consideration to the need for increased and improved Institutional Maternity accommodation. The practice in the County previously had been that where it was represented that the home conditions were unsuitable, accommodation was offered in the Public Assistance Institution, and such patients were admitted under an Order through the Relieving Officer. It had become increasingly evident that this accommodation in the Public Assistance Institution was quite insufficient to deal with the number of applications. These applications had increased owing to the fact that the existence of the Alexandra Home was known. Such applications came from doctors and midwives and from expectant mothers themselves owing to the unsatisfactory home conditions which make domiciliary midwifery either difficult, impossible or dangerous. An added reason was that in many cases local girls have married soldiers and have not set up house, or have gone into furnished rooms or that wives from other parts of the country have evacuated themselves in order to be near their husbands who are serving in the County. These in most cases are accommodated in furnished rooms or in quarters where the confinement cannot be carried out at home.

With the consent of the Ministry of Health, arrangements were made to admit to the Alexandra Emergency Maternity Home such local cases as were prepared to pay the full cost of maintenance.

In addition, the Public Health Committee took over the responsibility for maternity cases to be admitted to the maternity wards in the two Public Assistance Institutions at Bury St. Edmund's and Sudbury, and in White Lodge Emergency Hospital, Newmarket.

It was agreed to provide, by upgrading the present accommodation, additional beds in the Public Assistance Institutions and in White Lodge Emergency Hospital, Newmarket, the accommodation to be as follows :—

Bury St. Edmund's Institution	8
Sudbury Institution	6
White Lodge Emergency Hospital	6

At the Bury St. Edmund's Institution, where the accommodation was both insufficient and unsuitable, the following additions were made :—

- A lying-in ward of 6 beds, with the necessary sanitary annexes.
- A new labour ward.

The plans for these had the sanction of the Ministry of Health.

Dr. D. J. P. O'Meara, the Obstetric Adviser to the County Council, was appointed Obstetric Adviser to the Bury St. Edmund's Institution and the Alexandra Home.

(c) Evacuated Women.

The Alexandra Emergency Maternity Home has been maintained throughout the year and 231 cases were admitted. Small parties of expectant mothers from evacuation areas were sent from time to time by the Ministry of Health.

Continued use has been made, for expectant mothers, of Parva Cottage, a hostel in Bury St. Edmund's maintained by the Billeting Authority.

INFECTIOUS DISEASES OF SPECIAL NATURE.

Seventeen cases of puerperal pyrexia or fever were notified during the year. Six of these occurred in institutions, two were removed to hospital, and in the other cases the necessary facilities for treatment were available.

There was only one case of Ophthalmia Neonatorum which occurred in an Institution.

INFANT WELFARE CENTRES AND HOME VISITING AND SUPERVISION.

The sixteen Infant Welfare Centres maintained and staffed by the County Council have been continued throughout the year and have been open to evacuees.

During the year a total of 6,272 attendances (6,716 in 1941, 5,167 in 1940, 5,030 in 1939, and 5,110 in 1938) were made by children attending these centres ; of these, 2,634 attendances were made by children under one year of age.

The number of children who attended for the first time was 773 (957 in 1941, 642 in 1940, 550 in 1939 and 457 in 1938) and this number included 513 children under the age of one year.

In most areas of the County, the health visiting of children under five years of age has been carried out as previously, by the District Nurses who, for this purpose, act as servants of the Council. In a few additional districts, however, this work has been undertaken by the County Health Visitors on account of the extra work, due to the amalgamation of District Nursing Associations or the presence of evacuees, falling on the District Nurses.

The total number of visits paid during the year was 20,334. This included 5,831 visits to children under one year of age, and 14,503 visits to children between the ages of one and five.

CHILD LIFE PROTECTION.

The County Health Visitors have continued to visit regularly all children registered under Part VII. of the Public Health Act, 1936, and the work has proceeded satisfactorily throughout the year.

The statistical details of the year's work are as follows :—

Number of cases on Register, 1-1-42	123
Number of New Cases	22
Number returned to parents	9
Number adopted	3
Number died	—
Number who attained 9 years of age	22
Number who left County	6
Number transferred to Public Assistance Institutions	—
Number of Cases on Register, 31-12-42	105
Number of unsatisfactory cases	3

WAR-TIME NURSERIES.

War-time Nurseries have been maintained at Hadleigh, Haverhill, Sudbury and Lavenham. At Haverhill, owing to fewer mothers working, the number of children attending was reduced and the two nurseries were therefore amalgamated in July and were carried on at " Orchard Place," whilst the premises at " Weavers " were retained on a care and maintenance basis in case the numbers should at any time increase to such an extent as to render the accommodation at " Orchard Place " insufficient.

At the end of the year the attendance at the Nurseries was as follows :—

	No. on Roll.	Average Attendance.
Hadleigh	18-20	61%
Haverhill	26-30	83%
Sudbury	27-33	71%
Lavenham	20-21	91%

Generous gifts of toys have been received from America, from the National Fire Service, and from various Youth Organisations.

SICK BAY ACCOMMODATION.

The " Sick Bay " at Risbridge Home, Kedington, has been maintained throughout the year for evacuated children who cannot conveniently be nursed in their billets or whose mothers have been admitted to a hospital, or cannot for some temporary reason care for them. One hundred and one cases, including 56 school children, 41 children under school age and 4 adults, were admitted for the following reasons :—

Scabies, 13 ; Impetigo, 6 ; Uncleanliness, 2 ; Enuresis, 2 ; Epilepsy, 1 ; Care and Maintenance, 77.

COUNTY TUBERCULOSIS SERVICE.

GENERAL STATISTICAL FACTS.

Eighty-seven cases of pulmonary tuberculosis were notified during 1942 ; this is a decrease of six on the corresponding figure for 1941 and is an increase of nineteen on that for 1940.

The new cases of non-pulmonary tuberculosis notified during the year numbered thirty-seven which is a decrease of five on the figure for the previous year.

During the year a total of fifty-three deaths was recorded, forty-one being pulmonary cases and twelve being non-pulmonary cases. In the previous year the total deaths were sixty-two comprising forty-nine pulmonary cases and thirteen non-pulmonary cases.

The number of notified cases on the Register at the end of the year was three hundred and thirty-three. The number on the Register shows a decrease of fourteen on the figure for the previous year.

I submit herewith a Table of New Cases reported in 1942, together with a summary of the total deaths from tuberculosis in the area during the year.

NEW CASES AND DEATHS DURING 1942.

New Cases.					Deaths.				
Age Periods.	Pulmonary.		Non-Pulmonary.		Age Periods.	Pulmonary.		Non-Pulmonary.	
	M.	F.	M.	F.		M.	F.	M.	F.
0	—	—	—	—	0	—	—	—	—
1	—	—	3	2	1	—	—	3	1
5	1	—	1	2	5	—	—	—	3
10	—	—	4	4	15	14	11	—	2
15	4	5	1	3	45	7	3	1	—
20	9	3	—	2	65	2	4	1	1
25	10	13	3	8					
35	6	5	1	1					
45	6	11	—	2					
55	2	6	—	—					
65 and upwards	4	2	—	—					
Totals	42	45	13	24	Totals ...	23	18	5	7

SANATORIUM ACCOMMODATION.

A Scheme as set out in the following report was submitted to the Council and, as a result, the County Sanatorium was closed on 1st April, and later sold. The patients were transferred to White Lodge Emergency Hospital, Newmarket.

" The Ministry of Health has been concerned with the increase of tuberculosis in wartime and the insufficiency of sanatorium beds throughout the country. In West Suffolk there is a tendency to an increase of notified cases and it is becoming increasingly difficult to find accommodation for cases requiring sanatorium treatment.

The Ministry of Health have made an offer to allocate a hut at White Lodge for the reception of tuberculous cases in the County, with the suggestion that, as occasion demands, beds might be available for cases from East Suffolk and for some Service cases.

In correspondence with the Ministry of Health I have agreed that such facilities for West Suffolk cases would be welcome. I have drawn the attention of the Ministry however to one important point which ought to be considered, and that is, whether these beds at White Lodge should be given over to males or females and I have expressed the opinion that facilities should be extended to both sexes for these reasons:—

- (1) If one were to allocate beds only for male cases it would still leave the females unprovided for, especially as the tendency at the present moment is for the rate of occurrence of tuberculosis to increase amongst young females.
- (2) Accommodation within the County for both males and females is thoroughly unsatisfactory and beds are inadequate in number. For some years the Committee have been seriously concerned with regard to the County Sanatorium and just before the war it will be remembered that plans for a new sanatorium were prepared. The present building is not only unsuitable but it has deteriorated in the past year or so as it was felt that no more money should be spent on it in view of the fact that it was hoped to replace it soon. Owing to the lack of proper facilities for treatment, cases that can be received there are very restricted and it fails to fulfil a real need for providing beds for tuberculous cases.

It would seem, therefore, for the above reasons, and also because it would be most uneconomical to provide two sanatoria in the same area, that the question ought to be seriously considered whether it is possible to provide accommodation for both sexes at White Lodge, either by the adaptation of an existing hut or the provision of two huts.

A middle way which would solve the problem would be

- (1) To allocate one hut for males, to include West Suffolk cases, Service cases and cases from East Suffolk or from other Authorities if room were available, and,
- (2) A small ward in the main building for the reception of female cases.

The Ministry have agreed that this would be an acceptable arrangement.

In company with the Chairman, I have surveyed the proposed accommodation and the following are the suggested arrangements:—

One hut, suitably sited, for the reception of male patients, to accommodate approximately twenty patients, and one ward in the main building with adequate cross-ventilation and a small balcony, to accommodate ten female patients.

With regard to the medical and nursing arrangements, it is suggested that the tuberculosis treatment arrangements should come entirely within the framework of the Emergency Hospital Scheme. The clinical treatment would be the responsibility of the Medical Staff at White Lodge for the reason that at least two members of the Staff there have experience in the treatment of tuberculosis. With regard to the nursing, too, it is considered that adequacy of the nursing and smoothness of working would be much more likely than if an independent nursing staff were introduced into the Hospital. The administrative control would be in the hands of the Chief Tuberculosis Officer. With regard to the financial arrangements, it is considered that payment should be made for all tuberculous cases based on the ascertained cost per patient over the whole Institution, such payments being credited to the Hospital account.

All these arrangements would be contingent on the closing of the present Sanatorium, with the consequent transfer of such staff as would wish to be transferred.

The above scheme, if approved by the Committee, would have the approval of the Ministry of Health."

At the time of the transfer, however, it was not found practicable to take into use for the male patients the hut as set out in the Scheme. They were therefore accommodated in a ward in the main building similar to that allocated for female patients. From experience it has been found that this arrangement is preferable for several reasons. The unit is smaller and therefore it has not been necessary to monopolise a whole hut with its possible accommodation for forty general cases, it is provided with balcony arrangement, absent in a hut, and it is capable of extension as admissions increase in number. In addition to this accommodation several chalets were transferred to White Lodge for the reception of suitable cases.

Arrangements were made through the Emergency Medical Service for the consultative services of a chest surgeon and for the temporary admission of patients requiring surgical chest treatment to Hill End Hospital, St. Albans.

Since April 1st, twenty males and twenty-eight females were admitted to White Lodge Hospital under the Scheme.

VENEREAL DISEASES.

Owing to the increasing incidence of Venereal Disease it was found advisable to extend facilities for treatment at the County Clinic in Bury St. Edmund's. The main clinic continued to be held as before on Wednesday morning, but, in addition, arrangements were made for consultations and treatment to be carried out on other days and in the evenings as found necessary. A certain number of patients who lived in the out-lying parts of the County, were treated, for convenience, at Addenbrooke's Hospital, Cambridge, and the East Suffolk and Ipswich Hospital, Ipswich.

The total number of cases treated at the County Clinic at Bury St. Edmund's was two hundred and eleven, of whom 163 were Service cases. Thirty-two new cases, including six Service men, were seen for the first time at the County Clinic and thirteen new cases were treated at Centres outside the County, making a total of forty-five new West Suffolk cases. The diagnoses in these cases were: Syphilis 7, Gonorrhoea 18, and other conditions 20.

The number of attendances at clinics were:—Bury St. Edmund's 900, Cambridge 89, Ipswich 13.

During the year 157 specimens were sent to laboratories for examination from the Clinic at Bury St. Edmund's. Of these, 93 were blood specimens for Wassermann test.

HOUSING.

Housing (Rural Workers) Acts, 1926 to 1938.

No grants were promised by the County Council under these Acts during the year.

Housing Acts, 1930 to 1938.

The statutory grant of £1 per annum per house for 40 years was made, under these Acts, to the following District Councils:—

Clare	R.D.C. in respect of 150 houses	
Cosford	R.D.C. " " "	102
Thedwastre	R.D.C. " " "	185
Thingoe	R.D.C. " " "	205
		642

INSPECTION AND SUPERVISION OF FOOD.

(a) MILK SUPPLY.

(1) General Bulk Milk.

In 1942 thirty-eight samples of bulk milk were examined. Eleven samples failed in the Methylene Blue and B. Coli tests. Tubercle bacilli were found in four cases, all of which were referred to the Veterinary Inspector of the Ministry of Agriculture and Fisheries who carried out Veterinary Inspections of the herds involved. In the first case it was found that four cows had been slaughtered between the time the first sample was taken and the herd was inspected, and it was probable that one of these was responsible for the presence of tubercle bacilli in the bulk sample.

In the second case ten group samples and eighteen individual samples were taken, and as a result two cows were slaughtered under the Tuberculosis Order.

In the third case thirteen herds were involved, three of which were attested. A Veterinary Inspection was made of the other ten herds and twelve bulk samples and one individual sample were taken. It was found that the infected milk came from a farm situated outside the County. This herd was inspected again, and after two further bulk samples and one individual sample had been taken, one cow was slaughtered under the Tuberculosis Order.

In the fourth case, five herds were involved and five bulk samples were taken, one of which gave a positive result. Further group samples from this farm were taken, and appropriate action will be taken when the results of the examination are known.

(2) Milk (Special Designations Order).

Accredited Milk Licences.

During the year 117 Producers' Licences were issued, of which 10 were for the first time. Five licences were withdrawn, 2 were suspended and 1 was re-instated. At the end of the year there were 111 herds on the Accredited Register.

The Milk Officer took 438 samples of milk, 339 of which passed the tests during the year.

Tuberculin Tested Milk Licences.

During the year 32 T.T. Licences were issued, of which 4 were for the first time. One was withdrawn. At the end of the year there were 31 Tuberculin Tested herds on the Register.

The Milk Officer took 102 samples of milk, 78 of which passed the tests.

(3) Veterinary Inspection of Cattle.

The Veterinary Inspector of the Ministry of Agriculture and Fisheries has supplied the following statistics of his work during the year:—2,361 animals in 36 Tuberculin Tested herds, 14,294 animals in 412 Accredited herds and 8,311 animals in 822 Non-designated herds were examined. Of these, 5 animals in Accredited herds and 3 animals in Non-designated herds were dealt with under the Tuberculosis Order. The statutory tests were carried out on 2,849 animals in "Tuberculin Tested" and "Certified" herds and 8 reactors were found.

(4) Milk in Schools' Scheme.

Many war-time difficulties in connection with transport, scarcity of bottles, etc., have been encountered, but these have generally been overcome, and the scheme has been maintained throughout the County.

The following table shows the position at the end of the year, as compared with 1941 :—

	1941.		1942.	
	Local.	Evacuees.	Local.	Evacuees.
Number of Schools with Scheme	146	—	151	—
Number of children taking milk	7767	2331	7773	1500
Number of children attending these schools..	10293	2882	10568	1881

As previously reported, free milk is given entirely on a financial basis, the standard adopted being a family income not exceeding 9s. per head per week of the dependent family, after deduction of the rent. Any cases coming to the notice of the Medical Officers, where free milk is not being received and would appear to be desirable, are referred for investigation.

(b) SALE OF FOOD AND DRUGS ACTS.

During the year one hundred and ninety-seven samples were taken under these Acts, and analysed : Apple jelly, 1 ; Arrowroot, 1 ; Baking-powder, 4 ; Black-currant wine flavour, 1 ; Brawn, 1 ; Butter, 4 ; Chocolate flavour, 1 ; Cocoa, 1 ; Coffee de luxe [sweetened], 1 ; Cooking economy powder 1 ; Cornflour, 1 ; Fluid beef, 1 ; Glucose barley sugar, 1 ; Grape-fruit squash, 1 ; Ground almond substitute, 1 ; Ground nuts, 1 ; Honey, 1 ; Lard, 1 ; Lemon concentrated, 1 ; Lemonade, 1 ; Lemon curd, 1 ; Lemexa, 1 ; Lemon substitute, 2 ; Malted milk and eggs, 1 ; Milk, 119 ; Milk bread, 2 ; Malt vinegar, 1 ; Malted milk, 1 ; Meat extract, 1 ; Orange jam, 1 ; Orange and grape-fruit marmalade, 1 ; Orange jelly crystals, 1 ; Orange squash, 1 ; Peanut butter, 1 ; Pepper, 2 ; Potted meat, 1 ; Saccharin tablets, 2 ; Salmon and shrimp paste, 1 ; Seasoned meat gravy, 1 ; Soya flour, 2 ; Special mints, 1 ; Strawberry jam, 1 ; Sweetened custard powder, 1 ; Sweetened lemon sponge mixture, 1 ; Sweetened pudding mixture, 1 ; Sweetening tablets, 1 ; tea, 1 ; Tea saver, 1 ; Vinegar, 2 ; Whey powder, 1 ; Yorkshire pudding mixture with eggs, 1 ; Yeast spread, 1 ; Aspirin tablets, 2 ; Camphorated oil, 1 ; Castor Oil, 3 ; Extract of Cod-liver oil, 2 ; Glycerine of thymol, 1 ; Kill-germ ointment, 1 ; Menthol snuff, 1 ; Quinine and iron tonic, 1 ; Tincture of Iodine, 1 ; Tincture of Rhubarb B.P., 1 ; Vapour Rub, 1.

Of these, 23 samples of Milk, 1 of Cooking economy powder, 1 of Lemon concentrated, 2 of Milk bread, 1 of Blackcurrant wine flavour, 1 of Sweetening tablets and 1 of Tea saver were found to be not genuine.

(c) NUTRITION.

The following table shows the classifications of children routinely inspected in 1941 and 1942 :

	1941.		1942.	
	Local.	Evacuees.	Local.	Evacuees.
Number of Children Examined ..	2512	1572	3752	1145
Excellent Nutrition	11.6%	13.3%	16.5%	15.7%
Normal Nutrition	68.5%	69.6%	73.7%	77.8%
Slightly Sub-Normal Nutrition ..	19.2%	16.5%	9.7%	6.2%
Bad Nutrition	7.0%	6.0%	1.1%	3.0%

These statistics may be considered satisfactory and there is no doubt that the nutrition and well-being of the school children has shown improvement during the year. Much of this may be attributed to the Milk in Schools scheme which has been maintained throughout the year, and to the extension of the arrangements made for the provision of school meals.

School Meals.

By the courtesy of the County Education Secretary, I give the following extracts from a Report on the Provision of Meals and Milk to School Children, which he presented to his Committee :—

“ During the year 1942 ten additional school canteens were opened and arrangements made for one Junior School to be served from a Senior School Canteen, giving a further 360 meals per day. Meanwhile British Restaurants had been opened by Local Authorities and the Education Committee made arrangements for school children to take advantage of these centres. Arrangements were made with four British Restaurants for the pupils to attend in organised school parties, and approximately three hundred pupils had their meal each day in this manner.

The position in October, 1942, the beginning of the third year of the war, was that the number of meals consumed on a single day was as follows :—

(i) Free	192
(ii) Payment (including part-payment)	1366
Total	1558

It would perhaps be fitting to close this report with a word about the effect the school canteens are having on the school life and the health of the children. From both these points of view they can be claimed to have achieved unqualified success. The training in manners and behaviour has been very effective, and from the social side, in spite of the additional work it has proved of great advantage to the life of the school. Although it is not possible to give statistics, it can be said that the health of the children has improved by the

provision of well-balanced hot midday meals, and less exhaustion is to be found towards the end of the day; also, children tend to absent themselves from school less frequently where distances are involved. They have an appearance of well-being and alertness. This has been borne out by the reports made by the School Medical Officers on their visits. The menus used are supplied by the Board of Education supplemented from the Education Office, and consist of two courses—a meat, cheese or fish dish with two vegetables, and a sweet course.

Parents.

Education of the parents through school dinners has begun. They are beginning to realise that school dinners are good, not only because it means extra rations, but because it is served in the middle of the day and counteracts fatigue. A point which surprises many mothers is that a child who refuses vegetables and other food at home, will eat these in school without question. For this reason, the benefit should be greater the younger the child. Apart from this there is reason to believe that the choice of food may be a guide to home catering. Certainly it should influence the parents of the future."

PREVALENCE OF AND CONTROL OVER INFECTIOUS AND OTHER DISEASES.

(a) Notifiable Diseases (Other than Tuberculosis) during 1942.

	<i>Total Cases Notified.</i>	<i>Deaths.</i>
Small Pox	—	—
Scarlet Fever	141	1
Diphtheria	22	—
Enteric Fever	5	1
Puerperal Fever and Pyrexia	17	2
Pneumonia	47	36
Erysipelas	31	—
Ophthalmia Neonatorum	1	—
Cerebro Spinal Fever	—	2
Measles	118	—
Whooping Cough	285	2
Polio-myelitis and Polio-encephalitis	—	3

(b) Infectious Diseases and School Children.

During 1942, one school was closed on account of Whooping Cough.

During the year, 143 Low Attendance Certificates were issued by the Medical Department in respect of the following conditions:—

Whooping Cough 45, Measles 7, Chickenpox 12, Influenza 7, Coughs and Colds 35, Whooping Cough and Measles 4, Whooping Cough and Chickenpox 1, Mumps and Whooping Cough 1, Mumps 13, Mumps and Chickenpox 14, Whooping Cough and Influenza 1, Scarlet Fever and Impetigo 2, Scarlet Fever and Chickenpox 1.

(c) Infectious Disease Hospital.

Highbury House, the emergency infectious disease hospital opened in 1940 to deal with evacuated children suffering from minor infectious diseases, has functioned throughout the year: 187 cases, including 110 school children, 59 children under school age and 18 adults, were admitted. The reasons for which they were admitted were as follows:—

Measles	8
Whooping Cough	15
Chickenpox	5
Mumps	9
Scabies	43
Impetigo	25
Septic Infection	4
Discharging Ear	2
Pemphigus	11
Diphtheria	1
Tonsillitis	1
Prematurity	1
Vermin	17
Psoriasis	1
Scalp Wound	1
Ophthalmia	1
Enuresis	8
Conjunctivitis	1
Dermatitis	1
Chilblains	1
Cough	1
Contacts, etc.	22
Care and Maintenance	8
	187

(d) Treatment of Scabies.

The incidence of this disease, in spite of all efforts to combat it, continued to be high, and the problem of its treatment was, therefore, a pressing one.

During the year the Local Sanitary Authorities in the County all made arrangements for the treatment of cases of scabies in accordance with the Scabies Order of 1941.

A preliminary meeting of the Medical Officers of Health to discuss a co-ordinated scheme for dealing with the problem was held in my office. With the sanction of the Ministry of Health, treatment clinics have been established in the Cleansing Sections of the First Aid Posts at Hadleigh (for Hadleigh Urban District), Haverhill (for Haverhill Urban and Clare Rural Districts), Newmarket (for Newmarket Urban District), Sudbury (for the Sudbury Borough and Melford Rural District). The Cosford, Mildenhall, Thedwastre and Thingoe Rural Districts have entered into an agreement with the County Council for the use of premises at the Public Assistance Institution at Bury St. Edmund's for the purpose.

In each case, a member of the County School Nursing Staff attended the first clinic to demonstrate the technique of the benzyl benzoate method to the personnel appointed by the Local Authority. Ascertainment continued throughout the year to be carried out by the County Medical Officers and County Health Visitors and School Nurses.

As these arrangements were not in operation during the early part of the year, the clinic set up by the County Council at the Public Assistance Institution at Bury St. Edmund's was maintained until the end of June. There, 294 cases, including 135 evacuated and 159 local persons, were dealt with. Of these, 150 were of school age, 50 were under school age and 94 were adults.

Since July, 125 cases, of whom 83 were of school age, 19 under school age, and 23 adults, were referred to the Local Sanitary Authorities for treatment. Of these, 14 were evacuated and 111 were local people.

(e) Immunisation Against Diphtheria.

Immunisation on new entrants to schools and children who for some reason had not been previously protected was carried out routinely in the schools and clinics.

As in 1941, the schools were used as centres for the inoculation of pre-school children when no infant welfare clinic was accessible.

During the year 1,236 school children and 1,127 children under school age were immunised.

In this connection, the following Press Report is of interest :—

" Figures published by the Ministry of Health provide an impressive picture of the war which is being waged in the Eastern Region against diphtheria. From returns of 145 local authorities these important facts appear : (1) Up to the end of 1942 approximately 50 per cent of children under five and 68 per cent. of children between five and fifteen—a grand total of 332,847—were immunised against the disease. . . . Two areas in particular achieved outstanding results in the campaign. One was Chelmsford Borough, where 93 per cent. of children under 15 were treated ; the other was West Suffolk, which, in spite of its rural character, involving difficulties in distance and transport, polled a figure of 81 per cent."

Not a single death from diphtheria occurred in the County during the year.

(f) Cancer.

The arrangements for the treatment of patients suffering from Cancer were as in previous years. 18 cases were admitted to the Council's Institutions.

During the year 240 deaths from Cancer occurred. This number is 16.2% of the total deaths. The following table shows the age distribution :—

Deaths from Cancer 1942.

	0—	1—	5—	15—	45—	65—	Total.
Males	—	—	—	3	39	77	119
Females	—	—	1	9	38	73	121
Total	—	—	1	12	77	150	240

BLIND PERSONS ACT, 1920.

(1) GENERAL REPORT ON THE SERVICE IN WEST SUFFOLK.

Registration.

There were 215 registered blind persons in the County ; the age groups being as follows :—

Age Period.	Age Period.	Age Period.	Age Period.	Age Period.	Age Period.	Age Period.	Total.
0—5	5—16	16—21	21—50	50—65	65—70	Over 70	
—	4	3	29	34	61	84	215

In addition there were 5 blind persons evacuated from other areas.

Institutions.

Ten persons were maintained in Public Assistance Institutions, four in special Schools, and four in Institutions for the Mentally Defective.

Work of Home Teacher and Visitor.

The Home Teacher has paid 900 routine visits during the year, and given 11 lessons in Braille, 3 in Moon Type and 2 in Handicrafts.

Home Workers.

The arrangement with the Norwich Institution for the Blind for the supervision of the Home Workers in the County is still in force although the Institution experienced great difficulty in obtaining materials. There were four such workers recognised under the scheme.

Workshop Workers.

Two persons were maintained in Institutions for the Blind, where they were employed in their workshops.

Other Workers.

In addition to the recognised " Home Workers," ten persons were employed in remunerative occupations as follows :—Basket and Cane Workers, 2 ; Boot repairers, 2 ; Braille Copyist, 1 ; Wood-worker, 1 ; others, 4.

Training.

In addition to sending blind children to special schools, the Education Committee undertake the training of blind adults on the advice of the County Medical Officer.

Domiciliary Assistance.

At the end of the year 122 blind persons, including 5 evacuees, were in receipt of domiciliary assistance.

(2) WEST SUFFOLK VOLUNTARY ASSOCIATION.

The Association continues to give assistance outside the scope of the County Council where necessary.

Although social activities have been somewhat curtailed, four social gatherings were organised during the year.

The wireless sets were well maintained, over £100 having been spent during the year for this purpose.

Special cases were allowed weekly grants for extra nourishment. Emergency grants were paid towards extra expenses incurred for Medical and Dental treatment, and also to give assistance whilst waiting for decisions with regard to pensions, etc.

Holiday grants were allowed, and extra grants amounting to £32 were given at Christmas.

BIRTH RATE, DEATH RATE AND DEATHS DUE TO CERTAIN DISEASES.

DISTRICT.	Birth Rate.	Death Rate.	Scarlet Fever.	Typhoid and Paratyphoid.	Diphtheria.	Measles.	Whooping-Cough.	Ac. Inf. Encephalitis.	Ac. Poliomyel. and Polio-Enceph.	Tuberculosis of the Respiratory System.	Other Tuberculous Diseases.	Cancer.	Puerperal and Post-abort. Sepsis.	Other Maternal Causes.
Boroughs and Urban.														
Bury St. Edmund's ..	17.9	12.7	—	—	—	—	—	—	—	14	—	35	—	—
Hadleigh ..	18.0	15.2	—	—	—	—	—	—	—	—	—	5	—	—
Haverhill ..	12.8	13.8	—	—	—	—	—	1	—	—	2	10	—	1
Newmarket ..	14.7	14.9	—	—	—	—	—	—	—	1	1	22	—	2
Sudbury ..	13.5	15.2	—	—	—	—	—	—	—	2	1	14	—	—
Total ..	15.6	13.9	—	—	—	—	—	1	—	17	4	86	—	3
Rural.														
Clare ..	16.0	15.6	—	—	—	—	1	—	1	1	1	34	1	—
Cosford ..	15.3	12.9	1	—	—	—	—	—	—	3	—	19	—	—
Melford ..	16.2	14.0	—	—	—	—	—	—	—	6	2	23	—	—
Mildenhall ..	21.8	12.8	—	—	—	—	—	—	1	4	3	25	1	1
Thedwastre ..	16.8	13.1	—	—	—	—	—	—	—	4	—	24	—	—
Thingoe ..	16.6	12.8	—	1	—	—	1	—	1	6	2	29	—	2
Total ..	17.2	13.3	1	1	—	—	2	—	3	24	8	154	2	3
Grand Total ..	16.8	13.5	1	1	—	—	2	1	3	41	12	240	2	6