

**Report of the County Medical Officer on isolation hospitals
accommodation in Leicestershire : being a supplement to the Annual
Health Report for 1913 and presented to the Council, Nov. 11th, 1914 /
Leicestershire County Council.**

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Leicestershire County Council.

REPORT

OF THE

County Medical Officer

ON

Isolation

Hospitals Accommodation

IN

Leicestershire.

Being a Supplement to the
ANNUAL HEALTH REPORT for 1913
and presented to the Council, Nov. 11th,
1914.

ISOLATION HOSPITALS.

In accordance with the resolution of the County Council, directing me to make an inquiry, under Section 6 of The Isolation Hospitals Act, 1893, I beg to submit my Report on the Isolation Hospitals in the County.

The Isolation Hospitals Act, 1893.

The following are the principal clauses affecting the position at the present time:—

(3) The Council of every County may, on such application being made to them, from proof adduced, as is in this Act mentioned, provide, or cause to be provided, in any district within their County a hospital for the reception of patients suffering from infectious diseases (in this Act referred to as "an isolation hospital").

(4) An application may be made by any one or more of the Local Authorities having jurisdiction in the County, or by any number of ratepayers, not less than 25 in any contributory place.

(5) (1) The application shall be made by petition, and (2) the County Council shall, by themselves or by a committee of their body, appointed for that purpose, consider the petition, and if satisfied with the statement of the petition as originally prepared, or by any amendment made therein, that a *prima facie* case is made out for a local inquiry to be made as to the necessity for the establishment of an isolation hospital.

(6) The County Council may direct an inquiry to be made by the Medical Officer of Health of the County as to the necessity of an isolation hospital being established for the use of the inhabitants of any particular district in the County, and in the event of such Medical Officer reporting that such an hospital ought to be established for the use of inhabitants of a district, may take the same proceedings in all respects for the establishment of such hospital as if a petition had been presented by a local authority for the establishment of an isolation hospital for the district named in the report of such Medical Officer of Health.

(7) The Council shall conduct the local inquiry into the necessity for, the proper site for, and the district for which the hospital is to be established, by a committee consisting of such number of their members, either with or without the addition of such other persons or in such other manner as the Council think expedient.

(8) (1) Every hospital district shall consist of a single or two or more local areas. (2) The County Council may vary any proposed hospital district by adding to or subtracting from it any local area. A local area which is already provided with such isolation hospital accommodation as may, in the opinion of the County Council, be sufficient for the reasonable exigencies of such area, shall not, without the assent of the local authority of such area testified by a resolution of such authority, be included in a hospital district under this Act. (3) If any local authority having jurisdiction within any part of the proposed hospital district, object to the formation of such a district, or to the addition or subtraction thereto or therefrom of any local area within their jurisdiction, such authority may at any time within three months from the date of the order appeal to the Local Government Board, and the decision of such Board shall be conclusive.

(9) On conclusion of a local inquiry the County Council shall make an Order either dismissing the petition or constituting a hospital district, and directing an isolation hospital for such district to be established.

Contributions of County Council, granted August, 1900.

(1) Annual contributions to be made towards "establishment expenses," of a sum equal to one-half of such expenses, for a number of years equal to the period of the loan on "structural expenses," such sum in no case to exceed a rate of £10 per bed.

(2) After the period for the repayment of the loan, annual contributions be made towards "establishment expenses" of a sum equal to one-sixth of such expenses, such sum in no case to exceed a rate of £3 15s. 0d. per bed.

(3) Such contributions be only paid to permanent Hospitals fully equipped and considered "sufficient" by the County Council.

PERMANENT HOSPITALS—JOINT HOSPITAL AREAS.

ALL THE EXISTING PERMANENT BUILDINGS BUILT ON LOAN BELONG
TO JOINT HOSPITAL DISTRICTS.

Ashby Joint Hospital District.

By Orders of the County Council, dated 8th November, 1911.

This Hospital District was formed under the Isolation Hospitals Act, the Districts included in this area being Ashby-de-la-Zouch Urban, Ashby Woulds Urban, Ashby-de-la-Zouch Rural, Castle Donington Rural, with a population of 30,381 in Leicestershire together with Hartshorn and Seals Rural, population 7,939 in Derbyshire. Total area, 65,288 acres.

A new permanent Hospital of 25 beds is to be provided at an estimated cost of £13,600. The Local Government Board Inquiry was held on May 19th, 1914, and it is expected that the plans will be approved. The site of the Hospital is in the Ashby-de-la-Zouch Urban District, on the north side of the road to Loughborough. The construction of the Hospital is to be of brickwork. Scarlet Fever, Enteric Fever, and Diphtheria are to be isolated.

The Scarlet Fever block contains 16 beds, and has on the south side a verandah 12 feet wide along the whole length. Over the centre portion of the building (kitchen, entrance hall, etc.) there is a day-room, approached by a fireproof staircase from the verandah. All the windows in the wards are centre pivot hung, in the vertical direction, and over each there is a Hopper window. In addition to beds in the ward, the verandah is provided with a view to treating patients thereon, and this, together with the special ventilation of the wards, would provide open-air and semi-open-air treatment.

The Diphtheria block for four beds is built on the separate ward principle, with glass partitions instead of walls, and is provided with a verandah like the Scarlet Fever block.

In the Enteric Fever block there are five beds, exactly on the same lines as the Diphtheria block. One or more of these wards will be used for Observation.

The Discharge block is built in connection with the cottage at the entrance, and in addition to having an undressing, bathing, and dressing room, a 2-bed ward is provided. After disinfection, the patients will remain the night. This arrangement has been

found to be absolutely necessary, as in the past so many patients after bathing have been taken home in open conveyances, and have subsequently developed inflammatory trouble.

The Administration, Disinfecting, and other blocks are provided on up-to-date lines, and the first named is capable of extension.

Heating is both by fireplaces and hot water. Electric lighting is to be provided. The water supply is from a well. An ambulance is to be provided, but whether horse or motor has not yet been decided. The sewage is to be passed through a settling tank and treated on the adjoining field, the property of the Committee.

Although this Hospital has 25 beds in wards, if patients are treated entirely on the verandahs a much larger number can be provided for.

In every respect the Hospital fulfils the requirements of the Local Government Board, and when completed should be one of the best of its kind in the country.

Hinckley Joint Hospital District.

This Joint District was formed, under The Isolation Hospitals Acts, by Order of the County Council, dated 9th August, 1911, and includes the Hinckley Urban and Rural Districts, with a population of 26,662. The total area is 22,581 acres.

This Hospital, which, except for the Administration block, was of temporary construction, formerly belonged to a Committee appointed by agreement between these same two Authorities. When those Authorities decided to provide permanent wards and enlarge the Administration block, they agreed that the new District should be formed by the County Council, under the Isolation Hospitals Acts.

The extensions and alterations are now in progress; the estimated cost of which was £8,772; the Local Government Board Inquiry being held on 16th December, 1912.

The site of the Hospital is in the Hinckley Rural District, just north of the Urban District, on the west side of the road to Stapleton. The new buildings are to be all of brickwork, on plans approved by the Local Government Board. The diseases to be isolated are Scarlet Fever, Enteric Fever, and Diphtheria.

The Scarlet Fever block will contain 12 beds, and the Diphtheria and Enteric Fever blocks 4 each.

The description of these blocks is almost identical with that of similar blocks in the Ashby Hospital. The principles of open-air and semi-open-air treatment were first adopted by the Hinckley Committee.

The Discharge block consists of undressing, bathing, and dressing rooms, and is attached to the general laundry block.

The Administration block has been enlarged, and the disinfecting and other blocks meet the requirements of the Local Government Board. The heating is both by fires and hot water. The water supply is the public supply. An ambulance is provided. The sewage is treated in a settling tank and afterwards on land, being part of the site.

The question of staff necessary for the new buildings when completed will have to be considered.

This Hospital has been brought thoroughly up-to-date, and the Committee is to be congratulated on being the first in the County to build new Fever wards on the most improved lines.

Melton Joint Hospital District.

This District was formed under the Isolation Hospitals Acts, by Order of the County Council, dated 16th March, 1901, and includes the Melton Urban, Rural, and the Belvoir Rural Districts, with a total population of 27,728. The total area of the District is 111,886 acres.

The Hospital is situated in the Melton Urban District, on the east side of Scalford Road. The buildings are brick buildings, sanctioned by the Local Government Board, at a cost of £9,437. The Hospital was opened on 4th December, 1905.

The diseases isolated are Scarlet Fever, Enteric Fever, and Diphtheria; a few cases of Cerebro-Spinal Meningitis have in the past been admitted.

The Scarlet Fever block contains 12 beds, and the Diphtheria and Enteric Fever blocks 4 each. To each of the latter there is a small verandah. All these blocks were built on the then recognised plans of the Local Government Board.

The Discharge block is a separate block, consisting of undressing, bath, and dressing rooms.

In addition to the administration, disinfecting, and laundry block there is a cottage. The latter is occupied by the porter, and contains a waiting room for patients' friends. The Administration block, although thought to be larger than necessary for the present wards, is really only adequate. There is plenty of room for extension of further wards.

The ambulance is of the brougham type.

The heating is by fires and hot water. The lighting is gas. The water supply is the Melton town supply. The sewage passes through a septic tank, and then on to land—part of the site.

The Staff consists of a matron, 2 fully trained nurses, 2 probationers, cook, housemaid, 2 ward maids, 1 laundry maid, and the porter and his wife—the latter of whom superintends the laundry.

This is a thoroughly well equipped and well managed Institution; it is, moreover, the only Isolation Hospital in the County at present receiving the County grant.

Wigston and Blaby Joint Hospital District.

This Hospital District includes the Wigston Urban and Blaby Rural, and the newly-formed Oadby Urban, Districts (formerly part of the Blaby Rural District), with a total population of 27,764. The area of the District is 33,483 acres.

The Committee is formed by Agreement, and is not a Joint Hospital Board.

The Hospital is situated in Countesthorpe Road, on the south side of the road from Blaby to Countesthorpe Lodge.

All the permanent buildings were built on loan, and approved by the Local Government Board, and are all of brick construction, except those wards used for the isolation of Typhoid Fever, which are of wood and iron. In addition there are some old temporary buildings, formerly used for the isolation of Scarlet Fever, but the use of these has been discontinued for about two years. The diseases isolated are Scarlet Fever, Diphtheria, and Enteric Fever.

The Scarlet Fever block is built for 12 beds, but contains 16.

The Diphtheria block contains 2 wards of 2 beds each, with a separate kitchen to each ward; the idea of a separate kitchen to each ward being possibly to isolate two diseases, but in that case the sexes in one ward could not be separated if both were admitted.

The Typhoid Fever block is a temporary wooden building, and consists of two wards, each with a cubic space of 1,728 feet; there is cold water but no hot, and there is no bath.

The Laundry, Disinfecting block, etc., are satisfactory, except the Mortuary, which has no inspection window, no drains, and no water.

There is no Discharge block.

The Administration block is very small and not sufficient to accommodate the whole staff. The cook and maids sleep at the lodge, which is the home of the engineer and his wife.

The heating is by fires and stoves. The lighting is by electric light. The water is the public supply. An ambulance is provided. The sewage passes through a settling tank, and is irrigated on part of the site, on which osiers are planted. The whole site is surrounded by a galvanised iron fence.

The Staff consists of matron, staff nurse, 3 probationers, cook-housemaid, one ward maid, one laundress, an engineer, and a porter-gardener.

There are five houses within a quarter mile and six within half a mile radius.

The site is an admirable one, and the buildings, so far as they go, satisfactory. The Hospital is too small for the needs of the Districts provided for, and there are several important deficiencies.

TEMPORARY HOSPITALS.

Coalville Urban District.

Population, 18,548; area, 6,229 acres. The Coalville Urban Council have an Isolation Hospital of temporary construction, situated in the south-west corner of the Urban District, and near to Ibstock.

Enteric Fever only is isolated.

There is only one block, which is of temporary construction on brick foundations, and contains a single ward, kitchen, nurses' bedroom, caretaker's bedroom, pantry, store, etc. There is a small outside wash-house and coal-house, and a small separate wood and iron mortuary. It is only really possible to isolate one sex at a time, but a curtain is provided if two sexes are admitted.

There is no discharge block.

There is no disinfecter.

The heating is chiefly by stoves. The lighting is by oil. The hard water supply is from a well, but all water has to be carried. There is also a soft water supply. Earth closets are provided, but the sink and bath waste is passed through a tank and treated on the land.

A caretaker and her husband reside on the premises. Nurses are obtained when required, but when there is only one case that is nursed by the caretaker, who is not trained.

There are 12 houses within a quarter mile, and many others in the parish of Ibstock, within the half-mile radius.

Loughborough Borough.

Although Loughborough Borough does not come within the scope of the Isolation Hospitals Act, 1893, without their consent, I thought it advisable to give the particulars of the accommodation provided, especially for the reason that Enteric Fever may be admitted into this Hospital from the Loughborough Rural District.

Population, 22,990; area, 3,079.

The Hospital is situated in the south of the Borough, on land purchased on loan, after Inquiry by the Local Government Board.

All the buildings are of a temporary nature, except the caretaker's house, which is the Administration block, and is of brick.

The disease isolated is Enteric Fever only now, but formerly some Diphtheria cases have been admitted.

The Enteric Fever block is of temporary construction on brick foundations. There are 16 beds; a nurse's bedroom, and an observation room, kitchen, etc. There is no bathroom.

There is a small block, with about 2,700 cubic feet capacity, adjoining the caretaker's house, and also another small single ward attached. The small block is within six feet of the boundary fence, but the land on the other side belongs to the Borough, and is part of that acquired with the Hospital site. There is a small bathroom and movable bath. There are six beds.

In the house there is a sitting-room, kitchen, back kitchen, three bedrooms, and a bathroom.

There is no Discharge block.

A disinfecter is provided at the destruction works. There is an ambulance. The sewage is conveyed to the town sewers, but the Typhoid excreta are conveyed in special tins to the destructor and burnt.

Heating is by stoves and open fireplaces. Lighting by gas. Water supply from the town. Nurses are obtained as required. There is a telephone.

The total area of the land is about five acres, of which one acre is used for the Hospital site, and this latter is surrounded by a close wooden fence, 6ft. 6ins. high. The site can only be approached through the town. There are three houses within a quarter mile, and a little beyond that is the built-up streets of the Borough.

Market Harborough Urban District.

Population, 8,853; area, 4,673 acres.

This Hospital site adjoins the cemetery, and was originally acquired for cemetery purposes. Not all being wanted, however, the Local Government Board sanctioned the use of a portion of it for Isolation Hospital purposes some ten years ago. The Hospital site is surrounded by a corrugated iron fence.

The diseases isolated are Diphtheria and Scarlet Fever.

All the buildings are of temporary construction, on brick foundations.

The Scarlet Fever block has six beds in one ward, and there is also a room with two beds which can be used for nurses or patients. There is no bath and no attached closet accommodation.

The Diphtheria block contains two separate wards of three beds each, with a bathroom between them. Separate earth closets are provided to each ward.

The Administration block consists of two bedrooms, sitting room, pantry, and kitchen-wash-house, with earth closet accommodation.

There is only 33 feet between each block and 26 feet between the Administration block and the end fence.

There is no Discharge block; patients are disinfected in the wards. There is a disinfecter in the town. The ambulance—an old cab—is kept at the town stores. The town water is laid on. The mortuary is a small wooden shed.

Earth closets are provided throughout and the contents of these are emptied on the site and dug into the ground. The bath and other liquid waste is discharged into soak-away drains on the site.

There is a caretaker, who is responsible for the nursing, she having had some little experience before her marriage. Extra nurses would be obtained if necessary. The greatest number of cases isolated at one time has been 14.

Patients are admitted on the recommendation of the Medical Officer of Health, the only question considered being the practicability of efficient isolation at the patient's home. After admission the Committee consider the means of the family and fix a charge if they think any can be properly paid without hardship.

Market Bosworth Rural District.

Population, 21,858; area, 61,027 acres.

This Hospital is situated at Ibstock. On two sides there are allotments, from which the Hospital is separated by an ordinary hedge in a poor condition. On the other two sides there is a low open iron fencing.

Several of the buildings are very close to the fence.

The Diphtheria block is only 9 feet from the iron fence at one end; the Mortuary block is 7 feet from the hedge; although the

Scarlet Fever block is 42 feet from the hedge, the Ambulance and Wash-house block, and separate ashpit, are situated between them, the latter being close up to the fence.

The diseases isolated are Scarlet Fever, Diphtheria, and Enteric Fever.

The Scarlet Fever block is of temporary construction, and has two wards containing altogether 8 beds and 2 cots. Each ward measures 20 feet long, 20 feet wide, and about 13 feet high. There is also a bathroom with cold water only, nurses' bedroom, nurses' sitting room, kitchen, and larder. There are pail closets attached to each ward with cross ventilation.

Enteric Fever and Diphtheria are provided for in one block—one disease at each end of the block.

The two sexes are provided for by a division wall down the centre. There are five beds for each District. The block also contains nurses' sitting room, nurses' bedrooms, kitchen, linen room, etc. There is also a bath room, but there is no water laid on. The walls inside are only rough finished, there being no plaster lining. There is no discharge block nor disinfecter. The out-buildings consist of a mortuary, ambulance shed, wash-house, and an ashpit. The ambulance is an old cab. The heating is by fires and stoves. Oil lamps are used for lighting. The water supply is from a well. There is a telephone.

The sewage passes through a tank and then direct to the adjoining ditch.

There are no houses within a quarter mile, but there are public allotments on two sides of the Hospital. Beyond the quarter mile lie the outskirts of the village of Ibstock.

There was a fire in the Scarlet Fever block a few years ago.

Ashby Woulds Urban and Ashby Rural Districts.

The two existing Hospitals (one temporary and the other of brick), in the Ashby Woulds and Ashby Rural Districts, I have not described, as they will not be further used for the purpose when the new Ashby Joint Hospital is erected.

DISTRICTS WITHOUT HOSPITALS.

Urban Districts.

QUORN, SHEPSHED, THURMASTON.

Rural Districts.

BARROW, BILLESDON, HALLATON, LOUGHBOROUGH, LUTTERWORTH,
MARKET HARBOROUGH.

None of the above Districts have Isolation Hospitals, nor at the moment have any steps been taken to make such provision.

The following are the arrangements made by the above Authorities for the isolation of cases:—

Quorn Urban have made no arrangements.

Shepshead Urban have made no arrangements.

Thurmaston Urban have made no arrangements.

Barrow Rural empower their Medical Officer of Health to send cases to the Leicester Borough Hospital, when necessary.

Billesdon Rural empower their Medical Officer of Health and Sanitary Inspector to arrange for the admission of patients to a suitable Hospital when desirable.

Hallaton Rural have made no arrangements.

Loughborough Rural send cases of Enteric Fever to the Loughborough Borough Hospital.

Lutterworth Rural empower their Medical Officer of Health to send cases of Scarlet Fever, Diphtheria, or Enteric Fever to Blaby Hospital, when desirable.

Market Harborough Rural have an agreement with the Blaby and Wigston Joint Hospital. The charges are two guineas per week, medical fee one guinea, and removal charges.

OBSERVATIONS.

Permanent Hospitals.

The following Districts are, or will shortly be, provided with adequate up-to-date Permanent Isolation Hospitals, viz.:—*Ashby Urban, Ashby Woulds Urban, Ashby Rural, and Castle Donington Rural* at the Ashby Joint Hospital. *Hinckley Urban and Rural* at the Hinckley Hospital. *Melton Urban and Rural* at the Melton Hospital.

Whilst the *Wigston and Oadby Urban and Blaby Rural* Districts are provided with a permanent Hospital for 16 beds, in many respects this Hospital is insufficient. Based on the population of the Census, 1911, Wigston Urban 8,650, Oadby 2,609, Blaby Rural 16,505, there should be provided for Wigston and Oadby at least 11 beds (on a rate of 1 bed per 1,000 population), and for Blaby Rural 11 beds (on a basis of 1 bed for each 1,500 of the population).

There being no Discharge block, the Scarlet Fever patients are bathed in the bath room of that block after it has been disinfected, and then have to go and wait in the kitchen of the Administration block for their friends to come and fetch them. This is far from satisfactory, and a proper Discharge block on the lines of that to be provided at the Ashby Hospital is imperative.

The principle of part of the staff sleeping at the lodge is, of course, wrong, and provision for this (which is of recent date), should never have been made. The Administration block itself ought to have been enlarged.

The plan of the Diphtheria block is bad, and there is a large amount of waste space which could be easily converted to much better use by slight structural alterations.

The Typhoid Fever block is insufficient in itself, and in its equipment; and the old temporary Fever blocks now very much dilapidated, but used as stores. Both would be better burnt down.

At the Lodge there is no w.c. accommodation at all in the house or directly connected with it.

There is ample room for extension of premises on this site, which is an exceedingly good one for an Isolation Hospital.

Some years ago this Committee applied to the County Council for their grant, but as the Committee could not see their way to comply with the rules of the County Council governing the grant, the grant was never made.

There used to be considerable overcrowding of these wards in the past, but this is not permitted now except on occasions.

Temporary Hospitals.

At *Coalville*, with a population of 19,000, the accommodation is totally inadequate and insufficient. I believe I am right in stating that for many years now the Urban Council have been aware of the inadequacy of the accommodation and have considered from time to time the question of providing a suitable Hospital.

At *Market Harborough*, the buildings cannot be said to come up in any way to modern requirements. All the buildings are really a makeshift. There is no Discharge block, and the sewage either percolates into the soil or is dug in on a small confined site. All the wards are sadly overcrowded. The cubic space necessary per bed for proper treatment of cases was evidently not considered when 14 patients were admitted at one time.

In the *Market Bosworth Rural* District the Hospital hardly meets the requirements of a proper modern Hospital in any respect. The sewage goes untreated to a ditch, which runs towards the village. The wards are sadly overcrowded, and there is no proper water supply and bathing arrangements. There is no Discharge block or Administration block, nor a disinfectant. The out-buildings are inadequate, and all, together with the Diphtheria block, too close to the fencing. The hedge on two sides is very bad, and the iron fencing on the other two sides is only about 4 feet high.

RECOMMENDATIONS.

Hospital Districts.

I am of opinion that the Districts named below are without Hospitals or proper Hospitals, and that they should be grouped into Hospital Districts as stated:—

- (1) Coalville Urban and Market Bosworth Rural.
- (2) Shepshed, Quorn and Thurmaston Urban, Barrow and Loughborough Rural, together with Loughborough Borough, if that Authority would join.
- (3) Market Harborough Urban, Billesdon, Hallaton, and Market Harborough Rural.
- (3) Lutterworth Rural, to join the Blaby Joint Hospital District.

Motor Ambulances.

I most strongly recommend every Hospital Committee, with a large area, to provide a motor ambulance. The great advantage is that longer distances can be done in a very much shorter time; the patient does not suffer the effects of a long, tiring drive, such as in a horse ambulance, and the saving of the staff's time is very considerable. The risk of infection of children running behind the ambulance is avoided, and the danger of any spread of infection from the ambulance is reduced to a minimum. Such provision is favoured by the Local Government Board, and I believe advocated for large districts.

Number of Beds.

The basis of calculation of the number of beds for any area is 1 per 1,000 of the population in Urban Districts, and 1 per 1,500 in Rural Districts; these beds will be divided up amongst the three diseases—Scarlet Fever, Enteric Fever, and Diphtheria—to be isolated.

Type of Building.

I most strongly recommend the type of wards as now being provided at Ashby and Hinckley. This type gives, at very little extra cost, an extra bed accommodation on the verandahs. In addition, the principle of treating this disease in the open air has been carried on for some years now at Nottingham with great success. We can rest assured that the principle has been accepted by the Local Government Board because they have already sanctioned plans for it in this County. I believe the Hinckley Hospital plans were the first of the kind in the country, but other existing Hospitals have been converted to the same principle.

T. ROBINSON,

County Medical Officer.

SCARLET FEVER, ENTERIC FEVER and DIPHTHERIA. Cases notified and isolated, 1909—1913.

Totals.

1913.

1912.

1911.

1910.

1909.

URBAN.	Notified.			Isolated.			Notified.			Isolated.			Notified.			Isolated.			Combined Total.				
	S.F.	E.F.	Diph.	S.F.	E.F.	Diph.	S.F.	E.F.	Diph.	S.F.	E.F.	Diph.	S.F.	E.F.	Diph.	S.F.	E.F.	Diph.	Notified.	Isolated.	Total.		
Ashby-de-la-Zouch	4	1	1	2	3	12	3	1	5	6	1	4	25	6	25	25	4	25	56	..	..
Ashby Wolds	3	..	4	29	1	8	26	..	..	14	2	1	75	3	16	41	..	2	94	43	..		
Coalville	106	4	14	30	14	19	8	28	6	18	2	42	222	31	138	..	13	..	391	13	..		
Hinckley	34	5	2	429	17	5	139	1	81	14	1	6	589	44	18	255	..	10	651	265	..		
Loughborough	57	13	..	70	10	12	2	2	2	26	7	23	11	237	28	56	3	23	16	321	42	..	
Mkt. Harborough	83	1	9	17	..	23	8	3	2	3	2	31	2	141	4	101	37	1	10	46	48	..	
Melton	108	4	50	65	1	38	4	1	33	17	2	34	15	22	57	8	125	6	121	361	252	..	
Oadby	..	..	..	..	..	..	..	..	..	4	..	2	4	..	2	4	..	2	6	6	..	..
Quorn	4	7	..	1	5	1	..	7	1	3	..	4	15	7	15	..	..	..	37	..	..	..
Shepshed	53	..	1	5	1	11	..	6	1	9	..	1	79	1	15	..	..	..	95	..	..	..
Thurmaston	2	..	1	3	..	1	..	6	2	1	4	3	21	..	9	..	..	..	30	1	..	..
Wigston	53	..	20	38	..	11	27	8	35	12	27	26	192	2	87	160	1	66	281	227	..	..
Totals	507	16	122	157	3	52	210	28	76	71	13	37	630	52	148	112	3	44	1790	139	640	625	897
RURAL.	Notified.			Isolated.			Notified.			Isolated.			Notified.			Isolated.			Combined Total.				
	S.F.	E.F.	Diph.	S.F.	E.F.	Diph.	S.F.	E.F.	Diph.	S.F.	E.F.	Diph.	S.F.	E.F.	Diph.	S.F.	E.F.	Diph.	Notified.	Isolated.	Total.		
Ashby-de-la-Zouch	44	15	16	36	6	25	21	..	..	79	1	10	51	89	250	29	75	89	..	..	354	89	..
Barrow	49	1	30	119	3	26	2	..	..	52	5	15	1	6	379	11	112	6	2	..	502	8	..
Belvoir	28	1	1	18	..	12	..	..	..	52	1	1	40	7	126	4	7	96	1	3	137	100	..
Billesdon	14	..	..	13	1	1	..	..	..	5	1	2	..	2	53	3	6	2	1	..	62	3	..
Blaby	78	4	26	87	8	22	52	4	18	160	3	40	83	28	447	20	112	256	6	79	579	341	..
Castle Donnington	11	1	27	71	..	1	9	..	1	29	1	4	2	1	122	4	39	11	1	3	165	15	..
Hallaton	..	..	8	..	..	..	..	..	..	..	..	3	..	2	..	15	..	..	..	..	17	..	..
Hinckley	14	3	5	207	13	14	83	1	78	8	2	45	50	3	367	27	72	195	..	30	466	225	..
Loughborough	35	2	2	15	3	15	..	3	8	3	3	..	3	2	64	9	24	5	1	97	6	..	
Lutterworth	31	13	..	14	1	10	..	..	..	20	2	21	1	6	89	8	57	1	6	154	7	..	
Mkt. Bosworth	58	1	12	106	3	19	37	..	3	119	..	16	65	25	500	9	62	185	1	11	571	197	..
Mkt. Harborough	19	..	8	17	4	24	..	..	..	15	1	21	..	5	66	5	78	7	..	1	149	8	..
Melton Mowbray	72	2	35	36	3	8	35	3	5	27	9	28	12	9	242	20	115	144	16	81	377	241	..
Totals	453	31	183	739	45	165	251	10	27	652	37	150	225	12	2707	149	774	992	33	215	3630	1240	..
Total for County	960	47	305	1369	97	306	451	28	71	910	64	298	337	15	4497	288	1414	1617	77	443	6199	2137	..

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