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**ANNUAL REPORT**  
**OF THE**  
**MEDICAL OFFICER OF**  
**HEALTH FOR ROMFORD**  
**FOR THE YEAR**  
**1961**



*[Signature]*  
*ESK*



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**TOWN HALL, ROMFORD  
ESSEX**

To the Mayor, Aldermen and Councillors  
of the Borough of Romford

*Mr. Mayor, Ladies and Gentlemen*

In presenting this report on the health of the Borough for the year 1961, I should like to thank my colleagues and members of the Council for the help they have given during the year under review.

I am

Mr. Mayor, Ladies and Gentlemen

Your obedient servant

*Medical Officer of Health*

## PUBLIC BUILDINGS AND HEALTH COMMITTEE

as at December, 1961

*His Worship the Mayor*—Alderman A. McGONAGLE

*Chairman*—Councillor R. BAKER

*Vice-Chairman*—Councillor F. CARRICK

Alderman Mrs. M. CLARK-LEWIS	Alderman Mrs. L. A. IRONS
Alderman W. R. PIKE	Alderman G. ROBERTS
Councillor Mrs. D. M. BISHOP	Councillor E. T. DAVIES
Councillor J. RAEBURN	Councillor F. W. WRIGHT

## ROMFORD COMMITTEE FOR EDUCATION

as at December, 1961

*His Worship the Mayor*—Alderman A. McGONAGLE

*Deputy Mayor*—Alderman W. R. PIKE, J.P.

*Chairman*—Alderman Mrs. O. M. J. ROBERTS, J.P.

### *Representative Members:—*

Alderman Mrs. L. A. IRONS	Councillor Mrs. O. N. BOULTWOOD
Councillor F. G. CARRICK	Councillor G. R. G. JOHNSON
Councillor R. S. KILBEY	Councillor M. A. PHILLIPS, M.A., D.Sc., F.R.I.C., M.I. Chem.E., F.C.S.
Councillor V. ROWLANDS, A.M.I.E.E.	Councillor W. G. RUSSELL
Councillor S. E. SHUTE	Councillor G. URBEN, F.E.I.A.

### *Co-opted Members:—*

Mrs. I. BARBER	Mr. R. S. EMMS
Mr. F. FISHER	Mrs. R. M. LATHAM
Mr. J. G. PITTAWAY	

### *Nominated Members:—*

County Councillor H. G. H. EVERITT  
Mr. M. J. WARD

## ROMFORD HEALTH AREA SUB-COMMITTEE

of the Essex County Health Committee

as at December, 1961

*Chairman*—Alderman Mrs. L. A. IRONS, J.P., C.C.

*Vice-Chairman*—Alderman Mrs. O. M. J. ROBERTS, J.P., C.C.

### *Romford Borough Council Representatives:—*

Alderman F. C. BELL

Alderman W. R. PIKE

Councillor R. C. BAKER

Councillor Mrs. R. C. COFFIN

Councillor A. C. LATHAM

Councillor M. A. PHILLIPS,

M.A., D.Sc., F.R.I.C.,

M.I.Chem.E., F.C.S.

Alderman Mrs. M. CLARK-LEWIS

Alderman P. D. RIDLEY,

M.A.(Cantab)

Councillor F. G. CARRICK

Councillor R. S. KILBEY

Councillor H. PACKHAM

Councillor W. G. RUSSELL

Councillor P. J. SMYTH

### *Essex County Council Representatives:—*

County Alderman K. E. B. GLENNY

County Alderman Mrs. E. C. SAYWOOD

County Councillor A. V. CAVE

County Councillor Mrs. S. M. BOVILL

County Councillor S. A. LEGG

County Councillor Mrs. N. E. WILLIS

### *The Executive Council for Essex Representative:—*

The Venerable J. E. ELVIN

### *The Local Medical Committee for Essex Representative:—*

Dr. R. M. S. MATTHEWS

### *The Romford Group Hospital Management Committee Representative*

Mr. C. T. NUNN, J.P.

### *Voluntary Organisations' Representatives:—*

Mrs. L. N. GOMER

Mrs. C. E. SIMS

Mrs. E. McCORD

Miss N. HOWLEY



# HEALTH DEPARTMENT

## STAFF 1961

*Medical Officer of Health, Area Medical Officer, and  
Divisional School Medical Officer:—*

F. L. GROARKE, M.B., L.M., D.C.H., D.P.H.

*Assistant Medical Officers of Health and School Medical Officers:—*

Mrs M. M. DENHAM, M.B., B.S.

J. J. DUFFY, M.B., B.C.H., B.A.O., D.P.H.

Mrs. E. M. HAGA, M.B., B.S., M.R.C.S., L.R.C.P., D.P.H.

Mrs. K. THAKRE, M.B., B.S.

*Dental Officers:—*

Miss M. L. ELL, L.D.S., R.C.S.(Eng.) (Area Dental Officer)

Mrs. F. ELL, Registered Dentist (Part-time)

*Chief Public Health Inspector:—*

H. C. BOSWELL

*Senior Public Health Inspector:—*

W. HODSON

*Public Health Inspectors:—*

M. J. DOVE

G. F. HOBSON

P. W. EDWARDS

M. J. LEE

G. D. JOHN

(Pupil)

*Shops Inspector:—*

S. F. TITTERTON

*Superintendent Health Visitor:—*

Miss F. K. WELLS

*Health Visitors, School Nurses, etc.:—*

Mrs. P. ALGHALI

Mrs. C. C. LEDDON

Miss B. C. BLACKLEY

(Commenced 6.12.61)

Miss G. BROCKLEBANK

Mrs. J. E. LLOYD (Clinic Nurse)

Mrs. M. R. BUCKLEY

(Commenced 16.10.61)

(Commenced 29.8.61)

Mrs. F. C. MARSHALL

Mrs. J. A. CHILD

(Tuberculosis Visitor)

(Commenced 17.1.61)

Mrs. B. M. MATTHEWS

Mrs. W. CLEGG (Clinic Nurse)

(Commenced 29.8.61)

Miss O. CLEMENTS

Mrs. B. MORRISSEY

Miss E. COOGAN

(Tuberculosis Visitor)

(Commenced 29.8.61)

Mrs. E. PRESTON

Miss P. F. CULLIS

Mrs. M. RIGBY

Miss D. I. HALL

Miss A. P. M. THOMAS

Miss N. HARWOOD (Part-time)

Miss A. M. TIDD

Mrs. S. HOLLAND

Mrs. M. WILLIAMS

(Tuberculosis Visitor)



**STAFF—cont.**

*Superintendent of Home Nurses and Area Non-Medical  
Supervisor of Midwives:—*

Miss R. LISTER

*District Midwives:—*

Miss I. A. BASSETT	Miss D. D. K. MARTIN
Mrs. M. DOVE	Mrs. G. MERRY
Miss E. B. GRAHAM (Commenced 2.10.61)	Miss R. A. MERRY
Miss M. C. HAMER (Commenced 6.3.61)	Mrs. M. MYLWARD
Miss E. E. JEENES	Mrs. G. E. SEXTON
Miss C. M. KERR	Mrs. F. A. SMITH
Mrs. A. M. KING	Miss J. THOMPSON (Commenced 2.1.61)

*District Nurses:—*

Mrs. E. M. ANDREWS	Mrs. J. D. JENNINGS
Mrs. E. BROOME	Mrs. I. NORRIS
Mrs. E. D. CARRINGTON	Mrs. A. C. SILCOCK
Mrs. B. CASEY	Mrs. D. I. TOWELL
Mrs. C. COOK	Mrs. S. A. WOTHERSPOON

*Day Nurseries—Matrons:—*

“ St. Moritz ”—Mrs. I. C. BOWYER      Collier Row—Mrs. D. STINSON  
Rush Green—Mrs. R. M. O'HALLORAN

*Domestic Help Organiser:—*

Mrs. J. LOVELESS (Commenced 17.4.61)

*Dental Attendants:—*

Mrs. V. CREEPER (Commenced 24.7.61)  
Mrs. K. GOULDING (Part-time)  
Mrs. S. M. POLLARD (Commenced 5.10.61)

*Speech Therapists:—*

Miss E. BREWITT (Part-time)  
Mrs. J. M. LEE  
Miss P. OLDER (Commenced 14.8.61)

*Chiropodists:—*

Mr. G. H. Evans (Part-time)  
Mr. A. H. PARKER (Part-time)  
Mrs. A. GAMMON (Part-time)

*Occupational Therapist:—*

Mrs. Z. MERCER (Part-time)

## CLERICAL STAFF

*Chief Clerk (Administrative):—*

E. W. GOWERS

*Senior Administrative Assistant:—*

E. LAMB

*Administrative and Senior Assistants:—*

A. G. MELOY	—Supplies and Maintenance
Mrs. B. MATHER	—Secretarial and Records
S. A. BOWERS	—Environmental Health
Mrs. M. BARNARD	—School Health
Miss M. E. FIRMIN	—Immunisation and Vaccination
Miss P. MANN	—Domestic Help Section

*Clerical Assistants:—*

Miss D. M. BARTLEY-BERRY (Commenced 12.6.61)	Miss P. GOODREM (Commenced 31.7.61)
Mrs. B. CAREY (Clinic Clerk)	Mrs. P. A. HARRIS
Mrs. J. COMPTON (Commenced 3.7.61)	Miss R. HARVEY
Mrs. A. S. CORBEN	Mrs. D. HOBSON (Clinic Clerk) (Commenced 3.7.61)
Mrs. A. J. FASSAM	Miss M. O. LITTLE (Clinic Clerk)
Mrs. E. M. FLYNN (Part-time Clinic Clerk) (Commenced 7.6.61)	Miss J. SAGGERS (Clinic Clerk)
Miss Y. FRENCH (Clinic Clerk) (Commenced 28.8.61)	Miss G. G. SMITH (Clinic Clerk)
	Miss A. J. VALE
	Miss V. C. WARREN

*Public Analyst:—*

HUBERT HAMENCE, Ph.D., M.Sc., F.R.I.C.

## REGIONAL HOSPITAL BOARD STAFF

*Orthopaedic Surgeons:—*

G. BARCLAY, F.R.C.S.  
A. M. A. MOORE, F.R.C.S.

*Child Psychiatrist:—*

J. E. VINCENZI, M.R.C.S., L.R.C.P., D.P.M.

*Chest Physicians:—*

S. THOMPSON, M.B., Ch.B.  
E. WOOLF, M.R.C.S., L.R.C.P. (Harold Hill Area)

*Ophthalmologists:—*

T. J. REGAL, M.D., D.O.M.S.      B. G. DIAS, M.B., B.S., D.O.  
D. E. HONE, M.A., B.M., M.R.C.S., L.R.C.P., D.O.

*Physiotherapists:—*

Mrs. B. V. WAND      Mrs. A. SLIP



## GENERAL PUBLIC HEALTH

### *Oldchurch Hospital*

A new out-patients' hospital department is under construction in Waterloo Road. This building is urgently required locally because of the very large numbers of out-patients now attending this hospital for treatment. At present this service is undertaken in a temporary building where conditions and facilities are far from satisfactory, and complaints from both public and staff alike are not infrequently heard.

The developments proposed for increasing accommodation for maternity patients in surrounding hospitals has not yet materialised. The considerable increase since the war in the population of Romford, Hornchurch and surrounding districts has created a growing deficiency in the number of hospital beds generally in the area, more particularly for maternity patients. It is hoped that the hospital plan for England and Wales will note the deficiencies, and will show the way to complete the modernisation of the hospital services of the area.

## COUNTY WELFARE SERVICES

Mr. Walter E. Boyce, County Welfare Officer, has kindly supplied the following information :—

The statistics set out below show the extent to which the main services provided by the County Welfare Committee under the National Assistance Act, 1948, have been afforded to persons residing within the Borough of Romford during the year 1961 :—

### (1) *Residential Accommodation*

(a) Number of domiciliary visits undertaken	...	...	...	...	341
(b) Number of applications received	...	...	...	...	88
(c) Admitted to hostels and other residential establishments	...	...	...	...	35
(d) Number of Romford residents in residential accommodation at 31.12.61	...	...	...	...	128

### (2) *Temporary Accommodation (Homeless Families, etc.)*

(a) Domiciliary visits by Family Case Workers, etc.	...	...	...	...	383
(b) Number of applications (including references from Borough Council)	...	...	...	...	45
(c) Number of cases admitted to temporary accommodation	...	...	...	...	6

### (3) *Special Housing for Old People*

The County Council make contributions towards the cost of welfare services and amenities provided by the Borough in their special housing accommodation for old people.

### (4) *Blind Persons*

The number of registered blind, partially sighted and defective sighted persons resident in the Borough on the 31st December, 1961, was as follows :—

(a) Registered as blind	...	...	...	...	147
(b) Partially sighted	...	...	...	...	43
(c) Defective sighted	...	...	...	...	8

all of whom came under the supervision of the County Council's Home Teachers.



There were two blind persons in the Home Workers' Scheme operated through the agency of the Royal Society for the Blind and four were employed in special workshops for the blind. Additionally, 10 blind and 11 partially sighted persons were employed in open industry ; four blind persons from the Borough were admitted to homes for the blind. Occupational and recreational facilities are also available to the blind and many are taught braille and handicraft. Specialist officers are employed for the placement of blind persons in local employment and close co-operation is maintained with voluntary organisations working for the blind.

#### *(5) Deaf and Dumb and other Handicapped Classes*

The Welfare services for physically handicapped persons (other than blind as mentioned above) as provided by the County Council under Section 29 of the National Assistance Act, 1948, are available for all registered handicapped persons of whom, at the present time, 206 reside in the Borough ; these services have been extended considerably and in addition to direct provision, such as special equipment on loan, grants are made in approved cases towards the cost of structural adaptations to meet special home needs. Voluntary organisations also materially assist the County Council in this work.

The County Council provide Occupational Centres for the physically handicapped, and this service is being developed. Visiting of the handicapped is carried out by specialist officers and they are instrumental in the ascertainment of individual needs, giving advice and also instruction in handicraft, especially to the home bound.

## HOUSING

In my report for 1960 I stressed the relationship between good housing and good health. Below is set out a letter from a local Consultant Physician addressed to the Housing Officer.

“ I am sorry to burden you so often with problems about patients who are sent to me for advice on their medical conditions, but you may well at times hold in your hands a greater power to cure their ill health than I have.”

Your Council houses are let to applicants on a points code, and the scheme operated allows me to recommend priority to those suffering from ill health. Persons who suffer from tuberculosis are granted the maximum priority and lesser degrees of priority can be given in respect of persons with other disabilities. This latter authority is used cautiously because if widely used it affords relatively less priority to those most needing it.

Mr. C. Hetherington, Borough Housing Officer, has kindly supplied the following information : —

Total number of Council dwellings	...	...	...	4,566
Total number of applicants on housing waiting list				2,092
Applications received during 1961	...	...	...	565
Medical Certificates claiming priority submitted to to the Housing Office during 1961	...	...	...	321

### Lettings during 1961—

(a) New houses and flats	...	...	...	...	207
(b) Properties re-let	...	...	...	...	135

### Housing of Aged Persons

The Council have continued their progress of providing for the housing of old people. Two new blocks comprising 27 bed-sitting room flats have been completed and occupied in Queen Street and good progress is being made with the conversion and extension of No. 61 Main Road, which will provide a further 22 bed-sitting room flats.



## **Temporary Housing Accommodation**

Priority is being given to the clearance of the temporary prefabricated bungalows on the Highfield Estate and this will be continued during 1962. Of the original total of 235 prefabricated bungalows, there were 100 remaining at the end of 1961. The clearance of this temporary housing estate will enable the erection of over 600 new permanent houses and flats.

## **Caravans**

To assist in dealing with what was at one stage a serious problem with unauthorised caravan sites in Romford, the Broxhill Caravan Site accommodating 66 caravans was acquired in 1958. The turnover of vacancies on this site was originally used to enable the clearance of some 90 caravans on an unauthorised site in Oldchurch Road. The Council purchased this latter site and it is now being developed as a park. Broxhill Site is also being used to clear caravans from The Trees Caravan Site, Colchester Road, which is also an unauthorised site.

## **New Housing**

During 1961 the Council have completed the erection of their first multi-storey flats. These are comprised in two eleven-storey blocks on the Waterloo Road Estate. Waterloo Road Estate is, in fact, an area of some 12 acres from which approximately 230 families were rehoused to enable the removal of slum dwellings.

## **Future Houses**

Future housing is limited to some extent by the shortage of building land and the Council's building programme which has hitherto been at an average of nearly 250 new dwellings a year, is slowing down because of this factor. The number of new dwellings completed during 1961 was 207 and the number anticipated during 1962 will probably be considerably less than this.

# MATTERS OF LIFE AND DEATH

## Population of Romford

The Registrar General's estimated mid-year population for 1961 amounts to 114,670 compared to the figures of 115,840 and 114,800 for 1960 and 1959 respectively.

The population at the 1951\* census was 88,002 and at the 1931 census 35,918.

## Births

1,966 live births and 40 still births were registered in 1961, as follows :—

<i>Live Births : —</i>	<i>Males</i>	<i>Females</i>	<i>Total</i>
Legitimate ... ..	1,022	851	1,873
Illegitimate ... ..	48	45	93
	<hr/>	<hr/>	<hr/>
	1,070	896	1,966
	<hr/>	<hr/>	<hr/>
<i>Still Births : —</i>			
Legitimate ... ..	17	23	40
Illegitimate ... ..	—	—	—
	<hr/>	<hr/>	<hr/>
	17	23	40
	<hr/>	<hr/>	<hr/>
Total Live and Still-Births ...	1,087	919	2,006
	<hr/>	<hr/>	<hr/>
Rate per 1,000 of Estimated Population ... ..			17.5
Birth Rate adjusted by Comparability Factor of 0.84			14.7
Still Birth Rate per 1,000 (Live and Still) Births ...			19.9

## Loss of Infant Life

Statistics for the loss of infant life are divided into those occurring before Birth (Stillbirths) and those occurring between birth and the first birthday (Infant Deaths). The Infant Deaths are further divided into those occurring in the first month of life (Neo-Natal deaths) and those occurring between 1-12 months of age.

During the year 37 children died during the first year of life and there were 40 Stillbirths.



## Distribution of Infant Deaths

Under one day ... ..	18
One/Seven days ... ..	6
One/Four weeks ... ..	3
One/Twelve months ... ..	10

Trends over the past 25 years show that the greatest reduction has been made in the death rate for infants aged between 1 and 12 months. Neo-natal deaths and stillbirths have responded less dramatically to our efforts.

The prevailing perinatal mortality rate (Stillbirths and deaths in the first week of life) of 32 per 1,000 live and stillbirths for England and Wales is considered by the Ministry of Health to be too high, and compares unfavourably with some other countries, e.g. Sweden. It is estimated that in England and Wales alone the numbers of such deaths could be reduced by 5,000 per annum by raising the general standard of care of the premature baby, and by adopting all possible measures to prevent the onset of premature labour.

Year	Stillbirths		Deaths in first week of life		Perinatal Death Rate	
	At Home	In Hospital	Born at Home	Born in Hospital	Romford	England & Wales
1961	6	34	3	21	31.9	32.2
1960	6	24	6	22	27.2	32.9
1959	12	17	1	19	24.7	34.2
1958	10	37	4	25	35.9	35.1
1957	11	24	3	20	30.0	36.2

There is a special baby care unit attached to Oldchurch Hospital, for premature babies which serves the district adequately.

The cause of premature labour is unknown in about 50 per cent of cases, and in the remainder the most important associated conditions are toxæmia of pregnancy, ante-partum haemorrhage and multiple pregnancy.

Research on the causes of premature labour is continuing, and investigators are suspecting from the cases where all too often mothers appear to suffer from inadequate dietary that there is a close relationship between foetal and perinatal deaths with maternal protein deficiency.

Unsuspected urinary tract infections are believed to give rise to premature labour in other instances.

### Infant Deaths

The infant death rate for 1961 was 18.8. This is lower than the figure of 20.4 for 1960, and lower than the rate of 21.4 for England and Wales.

The following tables show the causes of infant deaths :—

INFANTILE MORTALITY—1961

<i>Cause of Death</i>	0-1 <i>mth.</i>	1-3 <i>mths.</i>	3-6 <i>mths.</i>	6-12 <i>mths.</i>	<i>Total under 1 year</i>
Abandoned Newborn Infant	1	—	—	—	1
Atelectasis ... ..	3	—	—	—	3
Birth Injury ... ..	2	—	—	—	2
Bronchitis ... ..	—	—	2	—	2
Congenital Malformations ...	3	1	—	—	4
Enteritis ... ..	—	2	—	—	2
Inhalation of Feed ... ..	1	—	2	—	3
Meningocele ... ..	—	1	—	—	1
Pneumonia ... ..	1	1	1	—	3
Prematurity ... ..	15	—	—	—	15
Septicaemia ... ..	1	—	—	—	1
Totals ... ..	27	5	5	—	37

NEO-NATAL MORTALITY—1961

<i>Cause of Death</i>	<i>Under 1 wk.</i>	1-2 <i>weeks</i>	2-3 <i>weeks</i>	3-4 <i>weeks</i>	<i>Total</i>
Abandoned Newborn Infant	1	—	—	—	1
Atelectasis ... ..	3	—	—	—	3
Birth Injury ... ..	2	—	—	—	2
Congenital Malformations ...	2	1	—	—	3
Inhalation of Feed ... ..	1	—	—	—	1
Pneumonia ... ..	1	—	—	—	1
Prematurity ... ..	14	1	—	—	15
Septicaemia ... ..	—	—	1	—	1
Totals ... ..	24	2	1	—	27



# DEATHS

## *Causes of Death in 1961*

	<i>Total</i>
Tuberculosis and other Infectious Diseases ... ..	7
Cancer and other Malignant Diseases ... ..	184
Diseases of the Brain and Nervous System ... ..	100
Diseases of the Heart and Circulatory System ... ..	292
Pneumonia, Bronchitis and other Respiratory Diseases (excluding T.B.) ... ..	90
Diseases of the Stomach and Digestive System ... ..	6
Accidents, Poisonings and Violence ... ..	39
Infant Deaths and Congenital Malformations ... ..	37
Other causes ... ..	84
<b>Total</b> ... ..	<b>839</b>

Crude Death Rate per 1,000 Estimated Population 7.3

Adjusted Death Rate (Comparability Factor 1.54) = 11.2

Lung Cancer caused the deaths of 58 residents of Romford during the year, of whom 51 were male and 7 female.

The deaths of 90 persons were ascribed to Bronchitis and other allied respiratory diseases.

Accidents accounted for the deaths of 24 of our townspeople during the year, of whom 19 were male and 5 female. This total includes the deaths of nine males and two females as a result of motor vehicle smashes.

Two persons were the unfortunate victims of homicide, while five males and eight females committed suicide.

It cannot be denied that the bulk of such deaths are preventable.

## INFECTIOUS DISEASES

The following notifications were received during the year :—

	<i>Notifications</i>	<i>Deaths</i>
Pneumonia ... ..	21	31
Tuberculosis : Respiratory ... ..	33	5
Non-Respiratory ... ..	5	2
	38	7
Scarlet Fever ... ..	107	—
Dysentery ... ..	101	—
Puerperal Pyrexia ... ..	5	—
Measles ... ..	2,242	—
Whooping Cough ... ..	24	—
Food Poisoning ... ..	108	—
Erysipelas ... ..	6	—
Meningococcal Infection ... ..	1	—
Poliomyelitis ... ..	—	—
Diphtheria ... ..	—	—
Ophthalmia Neonatorum ... ..	—	—
Typhoid and Paratyphoid Fever ... ..	—	—

### *Measles*

It will be noted that large numbers (2,242) of cases of Measles were notified. A measles vaccine has been tried out on a very limited scale in this country and abroad. Results are promising and indicate that while full protection is afforded the side effects produced make it clear that more research is necessary before a vaccine can come into general use.

### *Tuberculosis*

The number of primary notifications of cases of Tuberculosis received during the year was 38, and 7 deaths were ascribed to this disease. In 1960 the figures were 54 and 7 respectively. Ten years ago in 1951 there were 31 Tuberculosis deaths and 271 new cases of the disease were notified.

The figures show the dramatic improvement brought about by a combination of successful preventive measures allied to improved treatment techniques, and the closest co-operation between Chest Clinic and local health authority staffs.



Preventive measures which have largely contributed to this improved picture include the eradication of bovine tuberculosis, the scheme for the B.C.G. vaccination of Mantoux Negative case contacts and secondary school children, the assiduous follow-up of case contacts by health visiting staff, Mass Miniature Radiography, and the co-operation of the public.

Despite this bright picture there remains a depressingly large number of notified cases on the registers at the Chest Clinics and many patients require assistance for long periods.

The Romford and Hornchurch Tuberculosis Care Association (Secretary : Mr. E. W. Gowers, Chief Clerk, Health Department, Romford) provides material needs to needy cases, including extra nourishment, clothing, fuel, and help in many ways not provided for by other means.

*Domiciliary Occupational Therapy* :—Miss Z. E. Mercer, Occupational Therapist contributes the following :—

Among the facilities provided for those who have tuberculosis, is the Domiciliary Occupational Therapy. This service has been in operation for some years in Romford and other areas.

Patients who could benefit from this service are referred by the Chest Physician, with the co-operation of the Health Visitors.

After an initial visit by the Occupational Therapist who advises the patient of the various aspects of this service, some form of handicraft or study is undertaken.

In the past year such handicrafts as Bookbinding, Jewellery, Leatherwork, Weaving, Embroidery, Basketry, Painting, Toy-making, Marquetry, Knitting and Raffia work have been taught to patients whose work subsequently reached a high standard. In fact some prizes were won at the Dagenham Town Show in 1961. This competition work stimulates interest and encourages the patient to strive to improve his standard of work. Some of the completed articles are sold and this enables the patient to purchase materials for further work. These materials are supplied at cost price and suitable arrangements are made to enable the patient to obtain any necessary materials and pay for them. Any tools and equipment needed are loaned for an indefinite period.

In addition, two patients in the area undertook Study Courses arranged through the British Council for the Rehabilitation of the Disabled in order to enable them to take up more suitable work when they are ready to commence regular employment again.

Visits to patients in Romford during 1961 : —

	<i>New Visits</i>	<i>Re- Visits</i>	<i>Ineffective Visits</i>	<i>Clinic</i>	<i>Other Visits</i>	<i>Total Visits</i>
Romford ...	1	106	—	1	11	119
Harold Hill ...	3	149	4	3	2	163
Total ...	4	255	4	4	13	282

#### *Milk for Tuberculous Patients*

Free milk was provided throughout the year to tuberculous patients recommended by the Chest Physicians. For the first time for a number of years the number of patients receiving milk increased during the year. 69 patients were receiving a grant at the beginning of 1961 compared with 73 at the end of the year.

### ROMFORD CHEST CLINIC

Dr. S. Thompson, Consultant Chest Physician, reports as follows : —

During the year 1961 the Romford Chest Clinic has continued to serve the needs of the combined populations of Romford and Hornchurch.

The Hospital Management Committee (Romford Group 13), of which the Chest Clinic forms a part, decided to renovate the interior of the clinic and this was carried out satisfactorily and has improved the amenities of the clinic very markedly.

In the X-ray Department various additions to the technical apparatus have been provided and improvements added for the protection of the staff and the general public against scattered radiation.

The general trend of tuberculosis continues to be satisfactory, though, owing to transfers into the area of notified cases and a decreased death rate, the total number of notified cases on the register has increased slightly from 1,522 to 1,536. It is gratifying to note that the incidence in tuberculosis in children is very small



and continues to fall. This is partly due to the great reduction in sputum-positive cases throughout the country which is brought about by early diagnosis and effective chemotherapy, which is often continued on a domiciliary basis for periods up to 2 years.

The examination of contacts is considerably facilitated by the provision of the Miniature X-ray Unit in the Chest Clinic, and this is also used to follow up cases referred from the various Mass Radiography Units serving the Metropolitan Area.

B.C.G. vaccination is carried out in all cases of children who are at risk as contacts to notified cases of tuberculosis.

I should also like to mention the services of the Romford and Hornchurch Tuberculosis Care Association who have done invaluable work as a voluntary body for many years. Notified cases of tuberculosis can be registered as Disabled Persons and thereby become entitled to an extra allowance from the National Assistance Board if they are rendered incapable of work by the disease. They are also entitled to the National Insurance, but these two sources of help, generous though they usually are, do not cover all cases of need that arise in a family where a case of tuberculosis exists, and in these cases the Care Association are able, through their voluntary helpers, to render further most valuable aid.

### BRENTWOOD CHEST CLINIC

Dr. E. Woolf, Consultant Chest Physician, reports as follows:—

I herewith submit a report on the activities of the Brentwood Chest Clinic for the past year. From the Harold Hill area the statistical analysis is as follows:—

	<i>Respiratory</i>			<i>Non-Respiratory</i>		
	<i>M</i>	<i>W</i>	<i>C</i>	<i>M</i>	<i>W</i>	<i>C</i>
Cases on register—1.1.61 ...	220	227	58	19	25	9
Transfers in (notified cases)	9	6	1	1	—	1
Transfers out (notified cases)	12	9	1	—	1	—
New notifications ...	5	2	1	1	—	—
Recovered ...	8	9	2	1	—	—
Died ...	—	—	—	—	—	—
Total removed from register	20	18	4	—	2	—
Cases on register—31.12.61 ...	212	217	56	21	23	10

Number of contacts examined during the year—1,113



Unfortunately we have lost the services of Mrs. Morrissey, one of our tuberculosis Visitors, who had to leave us for domestic reasons, and Mrs. Marshall now carries out all the tuberculosis visiting duties required for Harold Hill. This now includes the domiciliary visiting of patients attending the Chest Clinic with complaints other than tuberculosis, and in view of the fact that she is doing this alone, this is being kept down as much as possible. Otherwise, the trend mentioned in the last Tuberculosis Report continues, with further increases in the number of non-tuberculous cases being referred to the Chest Clinic.

Great help is still being received from the Tuberculosis Care Association which provides many facilities for the tuberculous which are not provided for by other means.

## MATERNITY SERVICES

**Ante-natal Care.** In December, 1956, in response to a request from the Ministry of Health the first of a series of meetings of Professional Representatives was held at Oldchurch Hospital to discuss a report on Ante-natal care which had been produced by the Standing Maternity and Midwifery Advisory Committees. Representatives of general medical practitioners, public health and hospital staffs were in attendance.

At this meeting it was decided to adopt a form of ante-natal co-operation card as a means of facilitating continuity in ante-natal care. The General Medical Practitioner, Public Health Doctor, Hospital Medical Officer or Midwife was asked to record a summary of their findings at each examination on this form, which was then sealed and held by the patient.

This arrangement, where followed, resulted in better co-operation between those responsible for patient's ant-natal care, and has been adopted in the district as standard practice.

The Committee continued to meet regularly and helped to establish improved co-ordination of the Maternity Services, particularly in regard to the booking of hospital beds.

It is well known that certain groups of mothers are more liable to serious complications which may lead to maternal, foetal, or infant death. The hospital has undertaken to admit all patients which fall within these priority groups provided application is made in good time. Despite this facility some patients within the priority categories for hospital accommodation continue to be delivered at home.

During the year the Ministry of Health issued a Memorandum prepared on the advice of the Standing Advisory Committee, on maternal care under the Maternity Medical Services which summarises what should be comprehended in good maternal care such as might be reasonably expected under the Maternity Medical Services. The suggestions contained in this Memorandum now form the basic standards in local health authority ante-natal clinic practice in this area.

**Maternity Beds.** In my report for 1960 attention was drawn to the admitted deficiency in accommodation for maternity patients. Plans are well in hand to remedy this shortage, but for the present



our local maternity units will have to cope with the situation as best they can. One of the ways of meeting this situation is the early discharge from hospital of selected mothers and babies. In some districts mothers and babies are discharged to their own homes within 48 hours of delivery but it is more usual to retain mother and child for 7 days in early discharge schemes. The advantages of such schemes are that it can be done without danger to mother or baby, and is economical. The average hospital maternity bed is used by two patients only per month. If the average stay in hospital were reduced to 7 days the situation could be greatly relieved, and has the advantage of not requiring the numbers of additional midwifery staff, already in very short supply, that additional hospitals would require. On the other hand rapid turn over of patients might hamper good patient-nurse relationship and impose strain on staff as well as on patients.

Good co-operation between hospitals, general medical practitioners and local health authorities is essential to overcome obstacles to such schemes intended to provide safeguards for the expectant mother who falls within the priority groups for a hospital confinement. Too many high risk cases are being confined at home, for various reasons, and District Midwives are often required to undertake delivery in cases that should have been admitted to a hospital bed. Specialised help is not always immediately available when an emergency arises in a patient's home as in hospital despite the fact that there is a good "flying squad" service at Oldchurch Hospital for emergency domiciliary visits.

**General Practitioner Obstetricians.** 52 General Medical Practitioners are included in the list of the Executive Council for the County of Essex as practising in the Borough of Romford. The names of 41 of these Doctors are included on the Obstetric List.

**Confinements.** During the year 1,925 mothers were confined giving birth to 1,949 infants (including 24 pairs of twins). These were born as follows :—

		1961	1960
Oldchurch Hospital ...	...	831	804
Other Hospitals ...	...	280	420
At Home ...	...	838	932
		<hr/>	<hr/>
		1,949	2,156
		<hr/>	<hr/>



Two maternal deaths were the subject of investigation during the year, as mention was made of pregnancy or parturition on the death certificates. In one case the death was ascribed to Nephritis, and the other to Pneumonia.

**Home Confinements.** 838 mothers were confined at home during the year, of whom 755 received ante-natal care from General Medical Practitioners and District Midwives. 167 expectant mothers, compared with 181 in 1960, attended our ante-natal clinics, of whom 63 were confined at home.

**Ante-Natal Instruction Classes.** The classes for expectant mothers held by the Health Visitors (the syllabus of which was given in the 1960 Annual Report) were held at three centres throughout the year, and an additional class was commenced at Rise Park Social Hall in November.

**Post-natal Care.** Of the 63 mothers who attended the ante-natal clinics and were confined at home, 45 (71 per cent) returned for post-natal examination.

**Midwifery.** During 1961, the full establishment of 14 District Midwives was maintained, and the arrangement whereby an additional Salvation Army Midwife from the Mothers' Hospital, Clapton, provides a service in the Rush Green area continues. We are fortunate in being able to report that vacancies were filled almost as soon as they occurred.

**Analgesia.** 92.1 per cent of the women who were confined at home received inhalation analgesia during labour, and 49.5 per cent received pain killing injections of pethidine. Some mothers, of course, received both analgesia and injections.

**Training of Pupil Midwives.** In addition to the training facilities afforded to the Mothers' Hospital, Clapton, 5 Pupil Midwives from Thorpe Coombe Maternity Hospital received their district training under the tutelage of 3 of our District Midwives.

### **Clinic Premises**

During the year, owing to the pressure on accommodation at the clinic in Marks Road, premises in Mawney Lane, formerly used as a fire station were adapted for use as an annexe to this Clinic and were brought into use on the 11th September, providing

accommodation for a Chiropody Clinic, for the Speech Therapy Clinic and for other special examinations, immunisations, as required. The Dental Surgery at Marks Road Clinic was enlarged and re-equipped throughout during the year. Plans for the extension of this Clinic were under consideration at the end of the year.

Arrangements were made for an Infant Welfare Session to be held each week in the new Social Hall at Rise Park to serve the Rise Park Estate. These sessions commenced in November, and attendances had built up to approximately 25 per session by the end of the year.

At Hulse Avenue Clinic, plans for extensions to provide a new Dental Surgery, waiting room, recovery room and dark room were nearing completion. This extension will release accommodation at present used for dental clinic purposes for other services, at present without adequate facilities.

### **Infant Welfare**

Attendances at the Child Welfare Clinics are given below, with those of 1960 for purposes of comparison :—

	<i>1961</i>	<i>1960</i>
No. of children born in 1961 who attended	1,376	1,269
Total number of children who attended ...	3,380	3,144
Total Attendances ... ..	23,131	21,103

The 1,376 children born in 1961 who attended the Clinics during the year represents 74 per cent of the total number born, after allowing for the fact that mothers of babies born in the last two weeks of the year could scarcely have had an opportunity of taking their babies to a clinic before the end of the year.

### **Voluntary Assistance at Clinics**

From the very early days of Child Welfare Clinics, we have been fortunate in having the assistance of a number of voluntary workers at our clinic sessions. These ladies many years ago formed a Ladies Clinic Committee, the members of which all give



voluntary help at the various clinics. An average of seventeen ladies attend the thirteen Child Welfare sessions held each week. They undertake duties in connection with the recording of attendances, entering records of weights, sale of welfare foods, nutrients, etc. There is no doubt that their help contributes greatly to the smooth working of the clinics. Mrs. E. Burt is the present Chairman of the Ladies Clinic Committee, whilst the Secretary, Mrs. L. Gomer, has been a member of the Romford Health Area Sub-Committee since 1948, as one of the members nominated to represent the local voluntary organisations.

### Distribution of Welfare Foods

With effect from the 1st June, 1961, the charge for Orange Juice was increased from 5d. to 1/6d. per bottle, and charges of 1/- per bottle of Cod Liver Oil and 6d. per packet of Vitamin Tablets were introduced. These foods continued to be distributed from the Clinics and the Health Department, but the number of shops undertaking distribution on a voluntary basis fell from 16 to 7.

Set out below are details of the number of items distributed during the year with those of 1960 for comparison :—

	Year 1961	Year 1960
National Dried Milk ... ..	41,301	44,038
Cod Liver Oil ... ..	5,926	7,663
Vitamin Tablets (A & D) ...	6,470	7,779
Orange Juice ... ..	51,472	75,968

The following table shows the effect on distribution of the various items as a consequence of these changes :—

	<i>Dis- tributed 1.1.61 to 31.5.61</i>	<i>Av. per month for 5 mths.</i>	<i>Dis- tributed 1.6.61 to 31.12.61</i>	<i>Av. per month for 7 mths.</i>
National Dried Milk ...	9,105	3,821	22,196	3,171
Cod Liver Oil ... ..	4,592	918	1,334	191
Vitamin Tablets (A & D)	4,434	887	2,036	291
Orange Juice ... ..	36,819	7,364	14,653	2,093



## Day Nurseries

Attendances at the two 30-place Nurseries and one 40-place Nursery in the area during the year were as follow :—

		<i>No. on Register</i>		<i>Av. Daily Attendance</i>	
		1961	1960	1961	1960
January	...	119	117	80.0	83.3
February	...	122	114	78.9	86.4
March	...	122	123	74.7	93.1
April	...	131	125	89.9	92.5
May	...	137	133	97.1	103.9
June	...	142	131	99.1	100.1
July	...	134	127	91.5	90.5
August	...	140	135	81.7	82.3
September	...	145	126	99.3	95.4
October	...	144	132	108.4	96.4
November	...	143	137	108.3	100.7
December	...	142	132	95.5	95.5

## Nurseries and Child Minders' Regulation Act

Registrations in force under this Act during the year were as follow :—

		<i>Registered</i>	<i>Children Permitted</i>
Premises	...	1	12
Persons	...	1	8

## Refresher Courses

To enable the professional staff of the Department to keep abreast of modern techniques and advances in medical science, medical and dental officers are nominated from time to time to attend refresher courses or courses devoted to some particular aspect of their work. In addition, arrangements are made for Health Visitors, Midwives, Home Nurses, and the staff of the Day Nurseries to attend a refresher course at five-yearly intervals. During the year, two Assistant Medical Officers, one Dental Officer, four Health Visitors, three members of the Midwifery and Home Nursing Staff, and a Deputy Matron of a Day Nursery attended various courses arranged for the staffs of employing authorities by their respective professional organisations.

Whenever possible, facilities are also made available for the staff concerned to attend any lectures, study days, etc., held within easy travelling distance of the Borough.

## Health Visiting

During 1960, a total of almost 30,000 domiciliary visits was made by our Health Visiting staff. The visits were made to the following categories of patients :—

Expectant Mothers	...	...	...	345
Children under one year of age	...	...	...	7,138
Children aged one and under two years	...	...	...	4,224
Children aged two and under five years	...	...	...	5,600
Tuberculous households	...	...	...	3,780
The aged	...	...	...	229
Other cases	...	...	...	1,231

In addition to this work Health Visitors attended 954 clinic sessions.

At the end of the year there were 19 Health Visitors employed in this Health Area compared with 16 in the previous year. The majority of Health Visitors carry out in addition the duties of School Nurse.

The trend of increasing care being required for the elderly and infirm residing in their own homes continues, and Health Visitors' "social diagnosis" and reports on home conditions are being increasingly sought by doctors in hospital and general practice. There is, nevertheless, much scope for collaboration between hospitals and local authorities over the discharge of patients from hospital.

## Home Nursing

The ten full-time Home Nurses employed in the Area paid 24,832 visits to 874 cases during 1961.

## Vaccination and Immunisation

*Smallpox Vaccination.* The total number of primary vaccinations carried out in 1961 for persons of all ages was 1,358 of whom 645 were infants under one year of age. This means that approximately 32.8% of infants are being vaccinated during the first year of life.



*Poliomyelitis Vaccination.* The high acceptance rate of vaccination against Poliomyelitis of children continued during the year, and the extension of the scheme to provide a fourth injection for children age five years and under twelve added considerably to the total number of injections given.

During the year 7,305 persons were vaccinated as follows :—

	1961	1960
Children ... ..	2,910	2,013
Young Persons ... ..	783	840
Persons born before 1932 and under 40 years ... ..	3,607	3,616
Others ... ..	25	22

In addition, 5,768 third injections, and 10,885 fourth injections were given. A total of 29,796 primary and booster injections were given, of which 19,756 were performed by general practitioners.

### **Diphtheria and Whooping Cough Immunisation**

The number of children receiving primary courses of immunisation during the year was as follows :

#### **DIPHTHERIA**

	<i>Family Doctors</i>	<i>Clinics</i>	<i>Total</i>
Separate ... ..	854	701	1,555
Combined with whooping cough and/or Tetanus ... ..	802	—	802
Total ... ..	1,656	701	2,357

#### **WHOOPING COUGH**

	<i>Family Doctors</i>	<i>Clinics</i>	<i>Total</i>
Separate ... ..	623	723	1,346
Combined with diphtheria ... ..	801	—	801
Total ... ..	1,424	723	2,147



### **Chiropody Service**

During the year, this service was provided by three part-time sessional chiropodists who held sessions at the Harold Hill Health Centre, and at the Clinics in Marks Road and Collier Row. With the opening of the annexe at Marks Road Clinic in September accommodation was made available for a full-time Chiropodist, and it is hoped that a full-time Chiropodist will take up duties early in 1962.

The total number of attendances made for treatment during 1961 was 1,949. In addition 25 domiciliary visits were paid.

### **Sick Room Equipment**

The number of articles of sickroom equipment on loan continued to increase during the year. The total number of articles on loan at the end of the year was 816 compared with 685 at the commencement of the year.

Adequate accommodation for sick room equipment returned and awaiting re-issue became a necessity. A suitable store was provided by alteration to the garage accommodation used by the Public Health Department.

In July, 1961, the County Council's scheme for the provision of sick room equipment was extended to include cotton draw sheets, and for disposable pads for incontinent persons to be used free of charge.

### **Recuperative Holidays**

During the year, 32 persons, on the recommendation of their medical practitioner, were sent to convalescent homes for a recuperative holiday. In most instances the period recommended was two weeks.

### **Domestic Help Service**

There were approximately 110 part-time Domestic Helps engaged in the homes of patients throughout the year, 772 patients were helped and the total number of hours service given amounted

to 105,803. Equivalent figures for 1960 were 642 patients, 94,741 hours. Once again more than half the patients assisted (463) were in the category of aged chronic sick, 69,722 of the total number of hours service being provided for them.

### **Night Attendance Service**

This service was commenced during 1959, and enables patients critically ill in their own homes to have an attendant to wait on and watch over them at night. The types of cases provided for are :—

- (a) Patients residing alone who are seriously ill ;
- (b) Patients seriously ill in their own homes where an aged husband or wife cannot provide the necessary assistance ;  
and
- (c) The relief of relatives who have to give routine night attention to sick people.

The service is considered an auxiliary to and is administered by the Domestic Help Section.

During 1961, twenty patients were provided with a night attendant, and the total number of hours involved was 800. All requests for assistance were met, but the increased demand anticipated as the service became more widely known did not occur.

### **Care of the Aged**

This responsibility is shared between local housing, health and welfare authorities, general medical practitioners, the hospital geriatric service, voluntary organisations and others.

Provision of suitable housing accommodation is among the most important services for old people, and Romford's record in this respect is set out under the Section on housing. There is much demand for this type of accommodation particularly when favourably sited near shops and transport.



The various problems and risks of accidents to persons of advancing years and failing capabilities can be reduced by careful attention to the design of such accommodation.

Where accommodation for the elderly is grouped the appointment of a warden can be of tremendous benefit to infirm elderly persons and enables them to live out their days in their own homes.

*Home Help Service.* This service makes a substantial contribution to the care of the aged and enables considerable numbers of old people to maintain their independence at home. Nearly 70 per cent of the total hours of help provided by this service is given to persons in the category Aged or Chronic Sick.

The health visiting and home nursing services concentrate on health, social matters, and on keeping old persons active and alert to the problems of home accidents, nutrition and the prevention and treatment of illness.

Sick room equipment is readily available on free loan, and a free laundry service is available to incontinent patients for the washing of soiled clothes and bed linen.

Night attendance is available during periods of sickness and recuperative holidays are provided on the request of the general medical practitioners concerned.

The Chiropody Service is expanding in this area, and old persons have priority for treatment either at the clinic or at home. Sore feet can render a person immobile and housebound, and the establishment of an adequate chiropody service will make a great contribution to the health and happiness of many old people.

*Residential accommodation.* The first hostel of this kind in Romford is in course of construction at Harold Hill and it is hoped to be available for use during 1961.

*Workshop for the Elderly.* Romford Council is keen to provide a workshop for elderly retired townsfolk. It is well recognised that loneliness and inactivity can lead to mental and

physical deterioration, and it is with health promotion in mind that this Council is seeking ways of providing lonely old persons with the opportunity of spending a few hours each day in congenial surroundings in the company of others and to earn a little pocket money besides.

A major problem in an undertaking of this sort is to ensure a supply of suitable jobs for the old folk to do, and local industries will be combed for easy jobs which can be given to the workshop as "outwork."

*Voluntary Services.* Roger Reedes Charity provides 19 new almshouses together with a warden's house and ancillary buildings in Church Lane.

There has been a widespread development of clubs and luncheon centres in the town and meals on wheels are provided by the Women's Voluntary Service for persons who are house-bound and unable to provide an adequate meal for themselves. About 130 meals are supplied weekly.



## NATIONAL ASSISTANCE ACT, 1948

It was necessary during the year to take powers under this Act for the compulsory removal of one person who was no longer capable of caring for herself at home, and who refused to enter hospital.

This case concerned an old lady of 71 years living alone who had a fall at her home. She was found next morning lying helplessly on the floor. Her doctor suspected a fractured femur and obtained a hospital bed for her reception. When the lady refused his advice, the doctor confirmed the presence of a fracture by means of portable x-ray apparatus and specialist advice was obtained. All remonstrances however with the old lady were of no avail and a court order had to be obtained. She was admitted to Oldchurch Hospital where a successful operation on the neck of the fractured femur was performed, and the lady was discharged walking to her home within six weeks.

## CITIZEN'S ADVICE BUREAU

Mrs. E. McCord supplied the following information :

"During 1961, 1,200 queries were answered. Information or advice is sought on a wide range of subjects, for example domestic troubles, hire purchase, landlord or tenant troubles, accidents, Income tax, civic local or national affairs, matrimonial disputes, divorce, service and ex-servicemen's problems, pensions, trade matters, and scores of other subjects. We work in close liaison with other voluntary organisations and departments of statutory bodies, such as The National Assistance Board, Ministry of Labour, Ministry of Pensions and National Insurance, British Legion, Moral Welfare Organisations, Old People's Welfare Committees, Health and Welfare Departments, etc. We are frequently consulted in regard to the provision of free legal aid, and often help applicants for various services in form filling, etc.

We aim to provide a service to which all sections of the public can come along and pour out their troubles. A friendly welcome is extended to all and everything we hear or learn is treated in the strictest confidence. We are open Tuesdays and Thursdays, 11.0 a.m.—12.30 p.m.

## STAFF MEDICAL EXAMINATIONS

492 medical examinations were carried out by Assistant Medical Officers on entrants to County or Borough Council employment, entrants to Teachers' Training establishments, and the teaching profession.

## SCHOOL HEALTH SERVICE 1961

The school population of the Borough of Romford was approximately 22,295.

Number of schools :

Primary schools	... ..	40
Secondary (including grammar schools)	...	15
Technical colleges	... ..	Nil
Nursery schools	... ..	Nil
Special schools for handicapped pupils	...	Nil

*School Clinics.* There are three main clinics where the following facilities are available : treatment of minor ailments, dental, ophthalmic, orthopaedic, speech therapy, physiotherapy. The Child Guidance Clinic is situated in Western Road. Children who require to be seen by the Ear, Nose or Throat Specialist, Paediatrician or Dermatologist must attend the Out-patients Department of one of the local general hospitals.

### Medical Inspections

During a child's school life he normally has three routine medical inspections. The first is carried out soon after admission to school and the last shortly before reaching compulsory school leaving age. The intermediate inspection usually takes place just before transfer from the junior school to a secondary or grammar school.

At these inspections the School Medical Officer makes a routine examination of the child's general physical condition and, in consultation with the family doctor, any defects found to require treatment are referred to the appropriate specialist clinic or hospital department. The inspections also afford an opportunity for the School Medical Officers to talk to mothers about their



children and to offer advice about such things as vaccination, immunisation, etc. The Medical Officer is also able to discuss matters relating to the children's health with the school staff who are in a position to give much useful information about their pupils' problems.

During 1961, 7,440 children were examined at routine medical inspections and 1,288 were found to have defects requiring treatment. In addition to these, 1,931 defects were noted which, although not in need of treatment, were kept under observation so that treatment could be arranged at a later date if necessary.

The statistics relating to routine school medical inspections are shown in the table at the end of this report.

### Minor Ailment Clinics

These clinics were well attended during the year. Apart from the treatment of miscellaneous minor ailments the clinic sessions provide an opportunity for special consultations with the School Medical Officers and for follow up of children examined at the Routine Medical Inspections.

NEW CASES TREATED DURING THE YEAR:—						
Eye Diseases	...	...	...	...	...	3
Ear, Nose and Throat defects	...	...	...	...	...	16
Skin defects:—						
Scabies	...	...	...	...	...	3
Other skin conditions	...	...	...	...	...	149
Miscellaneous minor ailments	...	...	...	...	...	46
						217
MEDICAL CONSULTATIONS:—						
Special inspections	...	...	...	...	...	596
Re-inspections	...	...	...	...	...	410
EXAMINATION OF CHILDREN FOR EMPLOYMENT:—						
In entertainment	...	...	...	...	...	7
Other employment	...	...	...	...	...	147
TOTAL ATTENDANCES AT MINOR AILMENTS CLINICS	...	...	...	...	...	2,603

### Speech Therapy

During the year 88 new cases were referred to the Speech Clinics and 125 children were under treatment at the end of the year.

The total number of attendances during the year was 2,187.

Miss P. A. Older, L.C.S.T., Speech Therapist, has submitted the following report in regard to her clinic at Marks Road Annexe:—

Full-time speech therapy at Marks Road Clinic commenced in Mid-August, 1961. During the ensuing period from August to December much initial groundwork was necessary in the establishment of a clinical programme.

Three sessions each week were devoted to the visiting of day nurseries, infants, junior and secondary schools in addition to home visits and establishing contacts with the Medical Officers, the Educational Psychologist and the Physiotherapists.

By the end of December 44 children were receiving treatment on a weekly, bi-weekly, or fortnightly basis; and in all 443 attendances at the clinic had been made.

The majority of these children came in the 4-9 years age group and included cases of :

dyslalia—(defective articulation or slow development of articulatory patterns arising from deficient intelligence; emotional disturbance or immaturity; or imitation of abnormal patterns of articulation)

dyseneia—(defective articulation arising from defects in hearing)

dysarthria—(neuro-muscular articulatory disorder with inco-ordination of phonation, respiration and articulation)

dysphasia—(incomplete language function due to impairment of the dominant cerebral hemisphere subserving the special intellectual functions concerned with the use of language)

and structural defects.

The first four months culminated in a party for children who attended the clinic, and was held on the Saturday preceding Christmas. Some thirty children between the ages of three and 11 attended. Therapeutically this endeavour proved of great value. Those with only slight handicaps gained confidence to find others



who experience a much greater difficulty than they in making themselves understood; whilst the more severely handicapped, e.g. the cerebral palsied who are often excluded from party invitations, found others with a handicap comparable to their own. It was similarly encouraging for many parents.

Without the willing and valuable co-operation of Headmasters and Headmistresses and the constant helpfulness of members of the Health Department, the progress that has been made in the establishing of this speech clinic would not have been possible; and to them all, special gratitude is expressed.

### **Skin Diseases**

Skin conditions are prevalent in school children, especially warts of various kinds and fungal infections of the feet. Acne is particularly prevalent in adolescence and due to the fact that it can cause disfigurement it may also provoke psychological effects by disturbing the development of normal social relations, and can have a definite bearing on behaviour.

A recommendation has been forwarded from this Health Area Sub-Committee via the County Council to the Regional Hospital Board that regular Specialist Dermatological sessions should be held at the Health Centre, Harold Hill to assist in coping with this problem.

### **Audiometry**

At the end of 1960 an audiometer was purchased to enable the School Medical Officers to test children suspected of having defective hearing. During the year 115 such tests were carried out as follows :—

Referred from Routine Medical Inspections ...	80
Referred by Speech Therapist ... ..	8
Examined at request of Head Teachers ...	27

As a result of these tests six children were found to have hearing defects requiring further investigation and arrangements were made for them to be seen by a hospital consultant. Three others were kept under observation and listed for re-testing at a later date.

## **Dental Services**

The staffing position with regard to Dental Officers did not improve during 1961 and in consequence it was not possible for the School Dental Service to offer more than a token service.

The Dental Surgery at Marks Road Clinic was extended however, and following the installation of new modern equipment it is hoped that more staff can be attracted to the service.

The statistics relating to the School Dental Service are shown in the table at the end of this report.

## **Orthodontics**

A part-time Orthodontic Specialist was appointed by the Regional Hospital Board to the staff of Whipps Cross Hospital where his services are available to our local authority Dental Officers who require advice and assistance in the treatment of difficult cases of malocclusion.

## **Physiotherapy**

Mrs. B. V. Wand, M.C.S.P., Physiotherapist, submits the following in regard to her clinic held at the Health Centre, Harold Hill :—

During the year 1961 the total number of attendances was 2,136. This included infants and children up to school-leaving age.

The patients were referred in almost equal numbers by the School Medical Officers and the Family Doctors of the area. In addition, a few were referred directly by Consultants or from other clinics.

The type of work involved was largely orthopaedic foot conditions, varying from slight postural defects to gross deformities. The majority of the remainder of cases treated consisted of spinal postural defects, neuro-muscular conditions and the residual effects of poliomyelitis.

The appointments system worked well, despite a significant percentage of failures to keep appointments. Were it not for this, more children would have been able to have had more treatment during the year.

During the year Mr. A. M. A. Moore, F.R.C.S., Surgeon to the London Hospital, continued his appointment as visiting Consultant to the Clinic.



Mrs. A. Slip, M.C.S.P., Physiotherapist, submits the following report of her work at Marks Road Health Services Clinic.

During 1961, 149 Orthopaedic Sessions, including 10 Specialist Clinics, were held at Marks Road, Romford. A total of 368 patients were treated and there were 1,569 attendances.

133 new cases were seen; 11 patients were thought fit for discharge; three removed to other areas; nine left school, and we have on record 49 chronic non-attenders. Unfortunately non-attendance is as high as 30%.

Approximately 60% of patients are school children and 40% are referred from Child Welfare Clinics. These may be divided into the following groups:—

*School children*

Pes Planus	...	...	...	...	40%
Other foot defects :					
Hallux Valgus	...	...	...		20%
Hammer toes	...	...	...		
Metatarsus Varus	...	...	...		
Kyphosis	...	...	...	...	20%
Scoliosis	...	...	...	...	
Poor Posture	...	...	...	...	
Genu Varum	...	...	...	...	8%
Genu Valgum	...	...	...	...	
Asthma	...	...	...	...	7%
Pectus Excavatus	...	...	...	...	
Bronchitis	...	...	...	...	
Residual effects from congenital abnormalities and Poliomyelitis	...	...	...	...	5%

*Pre-school children*

Pes Planus	...	...	...	...	50%
Genu Valgum	...	...	...	...	18%
Genu Varum	...	...	...	...	15%
Metatarsus Varus	...	...	...	...	12%
Congenital abnormalities :					
Torticollis	...	...	...	...	5%
Talipes Equino Varus	...	...	...	...	
Scoliosis	...	...	...	...	

Treatment consists mainly of remedial exercises, but also may include Ultra Violet Irradiation, Faradism, Passive stretching. Splints of various types are frequently supplied.

Plaster of Paris (made in the Clinic) :—

Rest plasters	...	...	...	...	3
Hallux Valgus	...	...	...	...	6
Orthodox Splints for Hallux Valgus					
supplied by splint makers	...	...	...	...	6
Metatarsal Insoles (pairs)	...	...	...	...	10
Double leg irons	...	...	...	...	1

### SPECIALISTS SERVICES

In co-operation with the Regional Hospital Board the Ophthalmic and Orthopaedic Clinic sessions were continued at Marks Road Clinic and the Health Centre, Harold Hill.

Cases dealt with were as follows :

#### *Eye Clinics*

Cases dealt with :

External and other diseases	...	5
Errors of refraction (including squint)		889
		<hr/>
Total	...	894

The number of children for whom spectacles were prescribed was 501.

#### *Orthopaedic Clinics*

Number of children receiving treatment	945
Total attendances at Specialists' clinics	265
Total attendances at Physiotherapy sessions	...
	...
	...
	...
	...
	3,705

### VACCINATION AGAINST TUBERCULOSIS

B.C.G. vaccination was again offered to all 13-year-old school children and the statistics relating to this service are as follows :—

Number to whom offered	...	...	2,350
Number tuberculin tested after parents' consent had been received	...	...	1,526
Positive result	...	...	76
Negative result	...	...	1,341
Number who received B.C.G. Vaccination	...	...	1,341



## HANDICAPPED PUPILS

### Special Educational Treatment

Work was commenced on the Havering Grange Special School during the year. The school is being erected at the Northern end of Havering Road and will cater for educationally sub-normal pupils when it opens in 1962.

A summary is given below of the ascertainment and placement of handicapped pupils during the year :—

Category	No. of pupils ascertained during 1961	No. of pupils admitted to Special Schools during year		Total No. of pupil. in Special Schools at end of year	
		Day	Resi- dential	Day	Resi- dential
Deaf ... ..	—	—	—	4	—
Partially Deaf ...	1	1	—	8	1
Blind ... ..	—	—	—	—	2
Partially Sighted	—	—	—	4	—
Epileptic ... ..	—	—	—	—	1
Delicate ... ..	4	5	2	13	10
Physically Handicapped ...	1	4	1	17	8
Educationally Sub-normal ...	20	6	5	62	20
Maladjusted ...	4	—	5	—	16
Speech ... ..	—	—	—	—	—
Dual Defects* ...	—	—	—	6	3
Totals ... ..	30	16	14	114	61

\* Children ascertained in respect of more than one defect:—

*Attending Day Special Schools*  
 1 Partially Deaf/Physically Handi-  
 capped/E.S.N.  
 1 Partially Deaf/Partially Sighted  
 1 Partially Deaf/E.S.N.  
 1 Delicate/Maladjusted  
 2 E.S.N./Physically Handicapped

*Attending Residential Special  
 Schools*  
 1 Deaf/E.S.N.  
 1 Deaf/Physically  
 Handicapped  
 1 E.S.N./Maladjusted

### Convalescence

During the year 37 children were sent away for short stay convalescent holidays.

### Nursery Class for Maladjusted Pupils

Over a period of years the Consultant Psychiatrist at the Child Guidance Clinic had noted that some pre-school children had problems which could be more adequately dealt with in a group of children of approximately their own age than by out-patient attendance at the Clinic. These children tended to be much too disturbed to be included in ordinary day nurseries and might

also cause difficulties for other children attending these nurseries. A group of children of this type was admitted to the unit which was set up at Parklands Infants' School on the 1st November.

The class is in the care of Miss Reynish, a qualified teacher with experience of very young children, and Mrs. Inkpen, the Nursery Assistant, who is also a State Registered nurse and has had considerable nursing experience since qualifying.

The children attend from approximately 9.15 a.m. to 3.30 p.m. each day, being escorted to and from the class by their parents. They have their meal in their own room and the staff eat with them. After this they have a rest of about half an hour on their beds. The timetable for the rest of the day is kept flexible and periods of quieter and more active play are informally interwoven. The Headmistress of the school supervises the class and makes provision for them to have the use of the school hall on a few occasions each week so that they have experience of larger space than their own classroom.

On the 1st November three children were admitted, two of them having severe behaviour disorders and the third being a girl who had made a good response to psychiatric treatment while waiting for admission to the class. One of the boys was very aggressive and the other very over-demanding of his mother and given to quite hysterical outbursts of crying and screaming. For about three weeks these three children needed the full attention of the adults, but at the end of that time it was possible to admit a second girl who was less disturbed within herself but seemed unlikely to make a good beginning at school when she reached the age of five unless she had more experience of freedom to play than it was possible for her to have in her own home. After a further period of two weeks, the boys became considerably calmer and the work of the staff began to take effect. At this stage, two brothers were admitted and these were children who had much experience of parental quarrelling during the day because the father was on night work and could not tolerate them making any sound in the house, so that they had become withdrawn and intimidated. The six children were quite active together and by the end of the term had all begun to show considerable improvement.

Dr. Vincenzi was very satisfied with the progress which had been made during these first few weeks and would very much like to continue this type of treatment, and extend it where possible.



## **Child Guidance Service**

A stable home background is of predominant importance to the development of sound mental and emotional health. A common distinguishing mark of problem families is bad marital relationships, a crude reflection of parental instability. Children who grow up in quarrelsome and neglectful homes without appreciation may themselves develop into emotionally immature adults without a balanced personality. Such children may not only fail scholastically despite a good intelligence because of this type of home background, but in turn become unstable parents themselves and so perpetuate the situation through their children.

The emotional development of a child is determined by the quality of his relationship with his parents, more particularly with the mother, and maternal passivity, cruelty, neglect and absence are associated with disturbed development, behaviour problems and delinquency in a high proportion of children.

Children thrive best in the bosom of a united family where the parental behaviour pattern is consistent and loyal. Emotional security is a basic necessity to the health and welfare of the growing child.

Dr. J. Vincenzi, Consultant Psychiatrist to the Romford Child Guidance Clinic, reports on the year's work as follows: —

“During the past year there has been a slight decrease in the number of referrals, but not as much improvement as one would have hoped between the time of referral and the initial psychiatric interview. This is partly due to the much longer waiting list brought over from the previous year, and also to the fact that some of the cases needed prolonged treatment.

It will be seen that there has been an increase in the number of diagnostic interviews and an increase in the total attendances.

Fourteen cases of school refusal were referred in 1961. Of these eleven have returned to school, one has left school before anything could be done, one would not attend the diagnostic interview, and one, seen very recently, has still not returned to school.

A disturbing fact in the placement of maladjusted children is the long waiting list of seriously disturbed boys of all ages. There is one boy who presents a very grave problem, who has been waiting since September, 1960.

There is hardly any provision for adolescents who require hospital treatment. The Regional Hospital Board are aware of this, and it is hoped that facilities will be available at Claybury Hospital in the near future.

The number of Court cases seen at the Clinic was slightly less in 1961—twenty-two reports having been submitted to the Examining Magistrate against twenty-eight in 1960.

As regards staffing of the Clinic, the position remains the same.

A useful help to the work of the Clinic has been the formation of the Nursery Class for an under-five group, for children showing emotional or behaviour difficulties. The Class is staffed by a qualified teacher and an assistant. This has been a great success and greater use of the Class will probably be made in 1962."

### School Health Statistics for the year 1961

	Total (All Schools)
1. MEDICAL INSPECTION OF PUPILS	
(a) PERIODIC	
Number of children examined at school:—	
(i) Entrants ... ..	336
(ii) Second age group ... ..	2,189
(iii) Third age group ... ..	4,915
Total ... ..	7,440
Number of defects found requiring treatment ...	1,402
Number of defects found requiring observation ...	1,931
Number of individual pupils found to require treatment ... ..	1,288
Nutritional classification of pupils examined:—	
Entrants 2nd Age 3rd Age	
Group Group	
Satisfactory ... .. 336 2,187 4,914	7,437
Unsatisfactory ... .. — 2 1	3
(b) SPECIAL	
Number of children specially examined ... ..	681
Number of defects found requiring treatment ...	371
Number of defects found requiring observation ...	114
(c) RE-INSPECTION	
Number of children re-inspected ... ..	702
2. TREATMENT OF CHILDREN	
(a) Total attendances at Specialists' Clinics:—	
(i) Ophthalmic ... ..	1,348
(ii) Orthopaedic ... ..	265
(b) Total attendances at Treatment Clinics:—	
(i) Minor Ailment ... ..	2,603
(ii) Orthopaedic ... ..	3,705
(iii) Speech Therapy ... ..	2,187
(c) Number of children who received operative treatment for tonsils and adenoids ... ..	83



	<i>Total (All Schools)</i>
3. HYGIENE INSPECTIONS	
(i) Number of examinations of pupils in school ...	10,539
(ii) Number of pupils found unclean ...	47
4. DENTAL TREATMENT	
(i) Number of pupils inspected ...	1,013
(ii) Number found to require treatment ...	491
(iii) Attendance for treatment ...	1,816
(iv) Number of fillings: Permanent teeth ...	981
Temporary teeth ...	559
(v) Number of teeth filled: Permanent teeth ...	857
Temporary teeth ...	509
(vi) Number of teeth extracted: Permanent teeth ...	76
Temporary teeth ...	208
(vii) Number of general anaesthetics administered for extractions ...	152
(viii) Other operations: Permanent teeth ...	399
Temporary teeth ...	21

## SANITARY CIRCUMSTANCES OF THE AREA

Mr. H. C. Boswell, Chief Public Health Inspector, reports as follows: —

### THE PHYSICAL ENVIRONMENT

The duties of the Environmental Health Services are briefly to promote the highest possible standards of environment in order to ensure the promotion of good health.

Indeed a past-president of the Royal Society of Health, emphasized the importance of the health services in the following words when making his Presidential Address, when he said, "However effective the treatment of disease, the major contribution to the nations health will rest essentially, on preventative medicine."

In order to use "preventative medicine" and to secure the best possible conditions for healthy living, many are the channels that have to be investigated; the conditions under which we live, work or play, water supplies, the food we eat and the air we breathe, the disposal of refuse etc., indeed the list is never ending.

All this implies that Environmental Sanitation is complex and comprehensive and has a far reaching effect on the lives of individuals, but alas it is seldom spectacular or blazoned with glory. As long as the work carries on smoothly, very little notice is taken of the work of the health team who devote their labours and centre their interest on the well being of their fellow creatures. But what a difference when things go wrong, it has been significant in the past that a small failure on the part of the health team is more apparent and gets far more publicity than success.

It is against this background that the health services must work and in order to achieve success, the whole of the services, both medical and non-medical must work as a team, as the work of each is so closely related.

The Public Health Inspectorate are happy to serve as members of this team and the following report is a review of the work carried out in the past year. Some of the services mentioned are not the direct responsibility of the Public Health Inspector, but he must keep himself acquainted with all branches of environmental sanitation.



The amount of legislation in the form of Acts, Orders and Regulations, authorising the local authority to perform its varied duties, and where necessary to resort to enforcement action, is voluminous. However, as far as the Health Department is concerned as much work as possible is done in an informal manner, using the legislation as a guide and resorting to enforcement action only when all other measures have failed.

Many of the achievements of the health inspectorate are obtained either by co-operation, the education of various branches of the community in their duties, and giving advice on countless problems relating to environmental health. Indeed, one can justly say that the motto of the Public Health Inspectors Association "Amicus Humani Generis" which means "Friend of the Human Race" was aptly chosen and amply describes the inspectorate.

Although much of the following report relies on figures and numbers of visits made for all kinds of purposes, it does illustrate the varied and complex duties of the department.

#### 1. (i) **Water Supply**

Mr. P. Gordon Spencer, B.Eng.M.I.C.E., Chief Engineer to the South Essex Waterworks Company, has kindly provided the following information regarding the water supply to the district.

- (a) There have been approximately two miles of 36in. main laid along, or parallel to the Southend Arterial Road to improve pressures in Romford and elsewhere.

- (b) Length of mains laid in yards : —

3"	4"	6"	Total
572	266	33	871 yards

- (c) The water supply of the area and of its several parts has been satisfactory both as to quality and quantity.
- (d) Bacteriological and chemical examinations are made of the raw water, of the water in its various stages of treatment, of the water supplied from the Company's wells and of the water going into supply.

Analyses are also made of samples obtained from consumers' taps in the various parts of the Company's district, all proved to be satisfactory.

A total of over 4,120 chemical, bacteriological and biological examinations have been made. In addition samples were examined for radioactivity.

- (e) The waters are not liable to plumbo-solvent action.
- (f) No contamination has arisen therefore no action has been necessary.
- (g) The following are the average dwelling houses supplied during 1961, viz. 34,068.

### **Sampling of Water**

In addition to the control maintained by the Waterworks management the Public Health Inspectors take frequent samples from consumers' premises for bacteriological and chemical examination, all the samples taken during the year proved to be satisfactory. The Public Health Laboratories report on these samples generally was that the water was of a high bacteriological standard and was pure and wholesome.

### **(ii) Sewerage of the district**

Most of the Borough is provided with separate systems of foul and surface water sewers.

The foul sewage disposal works situated at Bretons Farm, Rainham Road, are under the control of the Romford and Hornchurch Joint Sewerage Committee.

The Borough Engineer has reported that during the year the following extensions have been made to the main sewers :—

1,260 yards of foul sewer

702 yards of surface water sewer

### **Orange Tree Hill**

The new foul sewer in Orange Tree Hill was completed during 1960, and during the past year the remainder of the house drains were connected to the sewer, making a total of 40 premises connected. The cesspools at these premises have been emptied and filled in.

### **North Road, Havering**

The new foul sewer, approximately 1180 yards long, serving North Road was completed during the year, at the end of the year 80 properties including the school had been connected to the sewer.

As a result of these two schemes some 120 cesspools, all of which were unsatisfactory, have been discontinued.



All the connections to both sewers were made by agreements, and without recourse to the service of a single Statutory Notice. The District Public Health Inspector, however, was required to spend considerable time and effort on this work, in assisting and advising the occupiers as to the best grouping arrangements and helping to smooth out difficulties that arose. In view of the result achieved the effort was well worth while.

### **Lower Bedfords Road**

Some 279 yards of new sewer has been laid in this road and negotiations were in progress at the end of the year to connect properties to this sewer and so do away with more cesspools.

### **(iii) Refuse collection**

Refuse collection is carried out under the supervision of the Cleansing Superintendent and forms part of the Borough Engineers Department.

A weekly service is in operation and during the year refuse was collected from 36,662 premises, amounting to 37,500 tons of refuse.

In addition 1,853 tons of refuse was collected from trade premises.

Salvage operations are carried out for waste paper and scrap metal, and the refuse is disposed of by tipping at South Ockendon.

During the year 4 new Shelvoke and Dewry, rear loading vehicles of 34 cubic yard capacity were put into operation. These vehicles are semi-dustless loading and being of a larger capacity than those they have replaced have naturally reduced the number of journeys to the disposal tip, which is some 16 miles distance, thus making a saving in mileage as well as introducing a much cleaner method of collection.

In addition 1 new large capacity Karrier vehicle has been put into operation for collecting refuse from multi-storey buildings, where refuse bins of 1½ yard capacity have been installed. This vehicle is fitted with a lifting gear and is dustless in operation. The introduction of this type of vehicle and a standard type of bin at multi-storey buildings has made the storage and removal of refuse at these premises far cleaner and more hygienic and has greatly reduced the number of complaints that were previously received concerning overspill.

(iv) **Sanitary Inspection of the Area**

(a) **COMPLAINTS**

During the year 1,656 complaints were received and recorded, 5,796 visits were made to investigate these complaints, and where necessary notices were served to abate nuisances or remedy defects.

(b) **TABLE 10**  
**NATURE AND NUMBER OF INSPECTIONS**  
**DURING THE YEAR**

Accumulations and Refuse Deposits ... ..	156
Agriculture (Safety, Health and Welfare) ... ..	22
Bakehouses ... ..	37
Butchers' Shops and Stalls, etc. ... ..	255
Cesspools ... ..	126
Clean Air Act General ... ..	144
Clean Air Act Smoke Observations ... ..	88
Clean Air Act Smoke Control Areas ... ..	87
Clean Air Act Atmospheric Pollution ... ..	368
Common Lodging Houses ... ..	11
Dairies and Milkshops ... ..	56
Drains, relaid and altered ... ..	572
Drainage—obstructed or defective ... ..	613
Drains, tested and inspected ... ..	1,057
Disinfections and Disinfestations ... ..	6
Diseases of Animals Act ... ..	31
Dustbins ... ..	79
Establishment for Massage and Special treatment ...	7
Fabrics Misdescription Act ... ..	6
Factories Act (Mechanical Power) ... ..	84
Factories Act (Non-mechanical) ... ..	15
Factories Act (Outworkers Premises) ... ..	37
Food Preparing Premises ... ..	222
Food Hawkers ... ..	27
Food Hygiene Observations ... ..	414
Food Inspections ... ..	414
Food Sampling—Formal ... ..	2
Food Sampling—Informal ... ..	208
Food Shops ... ..	357
Food Vehicles ... ..	13



TABLE 10—continued

Housing Acts—General	...	...	...	...	756
Housing—Rent Act, 1957	...	...	...	...	94
Heating Appliances (Fireguards) Act, 1952	...	...	...	...	54
Ice Cream Vendors	...	...	...	...	96
Ice Cream Samples	...	...	...	...	48
Infectious Diseases including Food Poisoning	...	...	...	...	866
Insects and Pests	...	...	...	...	75
Keeping of Animals	...	...	...	...	79
Licensed Caravan Sites	...	...	...	...	222
Milk Sampling	...	...	...	...	187
Miscellaneous	...	...	...	...	826
Markets	...	...	...	...	206
Noise Abatement Act	...	...	...	...	313
Nuisances, Public Health Act	...	...	...	...	1,267
Pet Animals Act, 1951	...	...	...	...	21
Prevention of Damage by Pests Act, 1949	...	...	...	...	3,327
Public Baths	...	...	...	...	53
Public Conveniences	...	...	...	...	41
Public Health Act, 1936, Section 59	...	...	...	...	54
Rag Flock Act	...	...	...	...	2
Sale of Horse Flesh	...	...	...	...	23
Schools	...	...	...	...	70
Shops Act—All Sections	...	...	...	...	2,856
Slaughterhouse and Meat Inspection	...	...	...	...	1,629
Streams, Ponds and Watercourses	...	...	...	...	168
Tents, Vans and Sheds	...	...	...	...	419
Verminous premises	...	...	...	...	107
Water Closets	...	...	...	...	16
Water Supplies and Samples	...	...	...	...	55
(c) Informal Notices (number served)	...	...	...	...	556
Statutory Notices (number served)	...	...	...	...	78
(d) As a result of the service of Notices, the necessary works were completed by the owners or occupiers in all cases except 39, the works for which were still in hand at the end of the year.					
(e) Notices served under the Shops Act	...	...	...	...	42
(f) Notices served under the Food Hygiene Regulations					23

(v) **Factories Acts, 1937 and 1948**

A summary of the statistics, as required by the Ministry of Labour and National Service, is given below :

TABLE 11  
1. INSPECTIONS

<i>Premises</i>	<i>No. on Register</i>	<i>Inspections</i>	<i>Written Notices</i>	<i>Occupiers Prosecuted</i>
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities ...	27	15	—	—
(ii) Factories not included in (i) in which Sec. 7 is enforced by the Local Authority ...	317	84	2	—
(iii) Other Premises in which Section 7 is enforced by the Local Authority (excluding outworkers premises)	69	8	1	—
Total ... ..	413	107	3	—

2. CASES IN WHICH DEFECTS WERE FOUND  
PARTICULARS

*No. of Cases in which defects were found*

	<i>Found</i>	<i>Remedied</i>	<i>Referred to H.M. Inspector</i>	<i>Referred by H.M. Inspector</i>
Want of Cleanliness ...	—	—	—	—
Overcrowding ... ..	—	—	—	—
Unreasonable Temperature	—	—	—	—
Inadequate Ventilation ...	—	—	—	—
Ineffect. drain. of floors...	—	—	—	—
Sanitary Conveniences				
(a) Insufficient ... ..	1	1	—	—
(b) Unsuitable or defective ... ..	2	2	—	—
(c) Not separate for sexes	—	—	—	—
Other Offences ... ..	—	—	—	—
Total ... ..	3	3	—	—

3. OUTWORK

<i>Nature of Work</i>	<i>No. of Out-Workers</i>	<i>No. of Cases of Default</i>	<i>No. of Prosecutions</i>
Wearing Apparel—Making, etc. ... ..	26	—	—
Box Making ... ..	9	—	—
Total ... ..	37	—	—

During the year 37 inspections were made of Outworkers' premises.



## **(vi) Caravan Act, 1960**

### **(a) LICENSED RESIDENTIAL SITES**

There are six residential caravan sites within the Borough, one of which is owned and managed by the Council.

At the end of the year there were 419 caravans, stationed on the sites, being used for residential accommodation.

These sites are provided with the essential amenities in the way of water supply, washing facilities, sanitary accommodation and refuse disposal, hard standings are provided for most of the caravans and electricity supply is available on two of the sites for the occupants of the caravans.

All these sites are subject to Planning Approval under the new Act, and conditions have been attached to the new licences in order to bring these sites up to the requirements of the Model Standards.

Frequent inspections are made of the sites and they are maintained in a reasonably satisfactory condition.

### **(b) INDIVIDUAL CARAVANS**

At the end of the year there were 45 individual caravans stationed in the Borough, some on isolated plots and others on land adjoining houses, most of these caravans are being used for residential purposes.

None of these caravans are licensed under the Public Health Act, 1936, and they will be subject to control under the new Act and it is anticipated that enforcement measures will have to be taken to secure the removal of the majority of these caravans that are on unauthorised sites.

### **(c) GIPSY ENCAMPMENTS**

A large number of gipsy caravans visit the district throughout the year and encamp on unfenced parcels of land, mainly in the northern end of the Borough.

These nomads cause a considerable nuisance to the householders in the neighbourhood of the encampments by their persistent demands for water, their very low standards of hygiene and the refuse they leave behind when breaking camp.

The Public Health Inspectors have to spend a considerable amount of time in securing the removal of these people, and in the majority of cases they have to resort to towing the caravans off the land with the assistance of tractors from the Parks Department and the protection of the police. The police have been very helpful in rendering assistance for this purpose. During the year the Public Health Inspectors made no less than 355 visits to gipsy encampments.

The owners of a number of these pieces of land have been persuaded to fence them in or to form other barriers to keep the gipsies off and the Council have authorised expenditure for the erection of barriers on pieces of land where the owners are not known.

It is hoped that by these means the gipsies will eventually be dissuaded from visiting this town.

#### **(vii) Prevention of Damage by Pests Act, 1949**

It is the duty of every local authority, under the above Act, to take such steps as may be necessary to secure as far as practicable that their district is kept free from rats and mice.

The local authority also have a specific liability to ensure, as far as practicable, that all land and buildings occupied by them are kept free from rats and mice. This includes Parks, Recreation Grounds, Schools and Public Buildings and all sewers vested in the local authority.

It is not widely known ; but it is the duty of the occupier or owner of any premises to notify the local authority of the presence of rats or mice on land that they occupy and it is in fact the responsibility of the occupier to take steps to rid their premises of these pests.

This Council have however provided a service for this purpose over a number of years, and two Rodent Operatives are employed in the Health Department. These operatives are provided with a van and the necessary equipment to trace and deal with all forms of infestation.

This service is provided free to all ratepayers in the district. Up until April of this year a charge was made to the occupiers of business premises, but as it was felt that the charge made was



a deterrent to these people notifying the presence of rats, the Council decided to make the service free to all types of premises, this has proved to be a satisfactory move and greater co-operation is now experienced in the department's efforts to keep infestations down to a minimum.

During the past year 642 notifications were received of infestations and the Public Health Inspectors and Rodent Operatives carried out 3327 inspections and reinspections of premises and all necessary measures were taken to eradicate the rats and mice.

Regular routine inspections are made of all Parks, Recreation Grounds and Schools and disinfestation is carried out when necessary.

Considerable thought has to be given to the right type of poison to be used, and after much experience it is considered that the most satisfactory and economical poison to use is that commonly known as "Warfarin." This poison has the approval of the Ministry of Agriculture, Fisheries and Food and has the following advantages :—

It is reasonably safe as far as humans and domestic animals are concerned, it is not necessary to use pre-baits, therefore the first baits contain poison and much time is saved.

There are two specific ways that members of the public encourage rats and mice, to which specific attention should be drawn.

The first of these is the frequent practice of the public in throwing large quantities of bread out to feed birds. Instances have been found where large slices of bread have been thrown onto lawns, these are far too large for birds to consume or carry away and supply plenty of food for rats and mice. If people desire to feed birds, the bread should be broken up fine and placed on a bird table.

The second point is the placing of sheds and chicken houses too close to the ground, all buildings of this type should be kept at least nine inches above the ground so as to enable a dog or cat to get under. Sheds very close to the ground afford comfortable nesting places for rats and mice.

## *Treatment of Sewers*

The inspection and baiting of sewers is under the supervision of the Highways Superintendent.

This work is usually carried out at regular intervals on a block basis, specified areas of the borough being treated at one time.

Where, however, it is proved that certain house drains are infested, treatment of the sewers in that area are carried out on request from this department.

During last year 367 manholes were inspected and treated.

### **(viii) Disinfestation of Insects and Pests**

Numerous complaints were dealt with during the year concerning insects and pests that invade homes, shops and stores.

Insects can have a variety of effects on the human race or its environment, they can destroy or harm food, ruin furniture, materials and works of art, cause damage to timbers, endanger health or just cause annoyance.

The present modes of travel, whereby any destination can be reached in a relatively short time is a great asset to the public, but at the same time it has brought its problems, as during recent years new species of insects have been introduced to this country from abroad, either in cargoes or luggage.

The variety of species of insect pests is always increasing, and identification becomes more difficult, however, we are fortunate in being able to send species either to the Natural History Museum or to one of the firms that manufacture "pesticides," for identification. From these sources, in addition to the identification, we can learn the life history, country of origin, whether the insect is harmful or not and the best control measures to use.

It is evident that the public are becoming more insect conscious by the number of requests that are made for assistance to eradicate various insects.

Apart from the housefly which is the most common of household pests, those that we are mainly called upon to deal with are timber beetle, furniture beetles, carpet moths, store beetles, gooseberry mite and most frequently wasps and ants.



One of the outstanding effects of the better standard of housing and hygiene enjoyed by most people today is the notable decrease in the infestations of bed-bugs and house fleas. Prior to the war these were common to the majority of working class houses, and created full time work for disinfestation teams, but today they are relatively rare.

Assistance and advice is given in all cases of infestation, some treatments are carried out by the Rodent Operatives, but in severe cases the persons concerned are advised to obtain the services of specialist firms.

Where necessary the destruction of clothing and bedding is undertaken by the Council upon the receipt of a written request from the owner.

#### **(ix) Pet Animals Act, 1951**

Under this Act a person who desires to sell pets, of any description, by retail, must be licensed by the local authority. These licences are renewable annually and conditions are attached to the licence, in order to regulate the manner in which the animals are kept and exposed for sale.

At present there are 14 persons licensed in the borough to keep Pet Shops, five of these are in respect of stalls in the Market Place. Pets on these stalls are restricted to puppies, goldfish and tortoises.

Frequent inspections of all Pet Shops are made to ensure that the conditions of the licences are complied with.

### **3. INSPECTION AND SUPERVISION OF FOOD**

The inspection, sampling and supervision of foods in all its phases, from the producer to the consumer, forms a very important part of the duties of the health inspectorate in the protection of the health of the public.

Various infectious diseases can be transmitted by foodstuffs. Food poisoning and other intestinal illnesses can be caused by the ingestion of foods that are either contaminated, are out of condition or badly processed.

It is therefore essential that all premises where foods are processed, manufactured, prepared and sold are kept under constant supervision in order to ensure that the food is handled and stored in a proper manner and also that the premises and personnel comply with the requirements of the Food Hygiene Regulations.

The various Acts, Regulations and Orders that are in existence for controlling the processing, manufacture, composition, labelling, storage and sale of food are far too numerous to list in detail in this report ; suffice it to say that they have been made by the Government with a view to protecting the public in one form or other. It is the inspectorates duty to be conversant with all this legislation and ensure that it is complied with.

More detailed information concernnig various branches of these duties are set out in the following remarks.

#### (i) **Milk Supply**

Milk has often been acclaimed as the "most perfect" of foods, inasmuch as it contains all the essential nutriments required by the human body, especially infants, and is a food that is easily assimilated by most persons.

It must be admitted, however, that it is unfortunately a very good media for the transmission of certain diseases.

Constant supervision is therefore essential at all stages that milk passes through from the cow to the consumer.

Since 1949, the control of milk production at the farm has been the responsibility of the Ministry of Agriculture, Fisheries and Food.

Local authorities, who are also food and drugs authorities, are responsible for the licensing of retailers and distributors and the administration of the Milk and Dairies (General) Regulations in respect of processing plants and dairies.

It is pleasing to be able to report that all dairy cattle in the country are now certified as tuberculin free, thus reducing the risk of the spread of bovine tuberculosis to the public.

All milk sold by retail must be heat treated to comply with the Milk (Special Designation) Regulations. Contrary to some beliefs, this heat treatment does not impair the nutritional value of milk, it does, however, destroy any harmful bacteria that may be present and improves the keeping quality.



It is only fair to say that the processing plants and dairies in this country have attained a very high standard and every endeavour is made to ensure that the public obtains a pure safe milk supply.

There is, however, one problem that is always with us and that is the occasional dirty milk bottle, this problem causes as much concern to the dairy trade as it does to local authorities, and in spite of all the efforts made by the trade to detect these offending bottles one occasionally gets through to the consumer.

The public are really to blame for this problem by their constant misuse of the milk bottle. It is well known that some people allow these bottles to accumulate in the house, a lot of them containing deposits of milk which sours and ferments, children are allowed to play with them in the garden, and building operatives are some of the worst offenders as they allow bottles to accumulate on building sites where they become coated with sand and cement. School authorities even are not free from blame, as it has often been found that scholars are permitted to use milk bottles to hold plants and as containers for washing brushes that have been used for water colour paints.

The long-term answer to this problem is primarily to educate the public to regard the milk bottle as a valuable returnable food container, for the dairy to make a returnable charge on the bottle, or to go over entirely to wax non-returnable containers which would naturally increase the cost.

### **Registration of Milk Vendors**

All dairies and distributors of milk must be registered with the local authority under the Milk (General) Regulations, 1959. Premises must comply with the conditions laid down in the regulations, and the local authority have power to revoke or cancel a registration for certain non-compliance of the Regulations. At the end of the year 49 firms were on the Council register as Retailers or Distributors.

### **Licensing of Milk Vendors**

As Romford is a specified area, where only designated milk may be sold, all retailers must be licensed under the Milk (Special Designation) Regulations, 1960, which came into operation on the 1st January, 1961.

The licensing authority under these Regulations is the Food and Drugs Authority, therefore as Romford is a Food and Drugs Authority we still retain these powers.

Supplementary licences are no longer necessary and a licence holder is now permitted to sell milk outside the area of the licensing authority without having to obtain a supplementary licence, this provision has reduced the work of cross checking between local authorities.

There is a new form of licence, known as the Dealers (Pre-Packed) Licence which permits the sale of the three types of designated milk. These are issued to the dealer who receives his milk in the bottle or container ready for sale to the consumer.

Licences are now issued to cover a period of five years instead of one year as previously.

The 49 dairies and distributors who are registered with this Council have all been granted Dealers (Pre-Packed) Licences.

### **Sampling**

During the year 144 samples of milk were taken for bacteriological examination. Of these 27 failed the Methylene Blue Test for keeping quality.

All of these unsatisfactory samples were obtained from vending machines. This matter was taken up with the dealers responsible for the machines, and faults were traced to the cooling elements and the infrequent change over of unsold stock.

12 samples of milk were submitted for chemical analysis and all proved to be satisfactory.

### **(ii) Ice Cream**

The manufacture and sale of ice cream is governed by the Food and Drugs Act and various Orders and Regulations made thereunder.

Provision is also made under the various Acts for the registration of manufacturers and vendors of ice cream. In this borough registration is made under the Romford Urban District Council Act, 1931, as this Act provides for the registration of the person as well as the premises, whereas the Food and Drugs Act, 1955, only provides for the registration of premises. By using the local Act, the local authority have control over the itinerant vendor which is not provided for under the National Act.



The ice cream trade has passed through many phases, and during the last few years it had reached the stage where practically 90% of the ice cream was sold pre-packed and frozen hard.

A recent development has been the sale of "soft" ice cream. This is an ice cream that has been made in the factory, put into hermetically sealed containers, and stored in a cold place. When required, this mix is fed into a freezer and served direct as a loose ice cream. The public seem to prefer this softer ice cream to the factory made pre-packed type that has undergone a hardening process.

The sales of this new type of ice cream was at first confined to shops, but now vans are being equipped with motor driven freezers for this type of trade, therefore vans adapted for this purpose can no longer be classified as vending vehicles, but are in fact a mobile manufacturing plant.

Vans that have been specially built for this purpose, comply in all respects with the Food Hygiene Regulations, as all surfaces are covered with impervious material and in addition to cold storage cabinets and freezers, they are equipped with hand basins and means for providing hot water for washing.

Providing the operator obtains his initial mix from a reputable firm and observes the highest standards of hygiene in regard to the equipment and methods of handling this new form of vending should not create any hazards or problems, but great care must be observed in cleaning and sterilising the equipment.

At the end of the year, 263 persons were registered with the Council as vendors of ice cream, of these 42 were registered as itinerant vendors, the remainder being shop premises. Regular checks are made on all premises and vehicles.

During the year 30 samples of ice cream were taken for bacteriological examination, two of these were reported on as being unsatisfactory, these 30 samples were further classified as follows :—

Ministry of Health (Provisional) Grade 1	21
Ministry of Health (Provisional) Grade 2	5
Ministry of Health (Provisional) Grade 3	3
Ministry of Health (Provisional) Grade 4	1

Twenty-five lollies were also submitted for bacteriological examination and only one was found to be unsatisfactory.

Seven samples of ice cream and six ice lollies were also submitted to the Public Analyst for chemical examination and all proved to be genuine and complied with the Food (Standard) Regulations.

### (iii) **Meat Inspection**

There are now four licensed slaughterhouses in the Borough, one of these being licensed for the slaughter of horses as well as livestock. Two slaughterhouses are operated by a firm of Wholesale Butchers who supply meat to retail butchers in the Borough and adjoining districts and provide meat for the London Markets.

Slaughtering takes place on seven days of the week and the Public Health Inspectors attend the slaughterhouses regularly including Saturday afternoons and Sundays to ensure that a 100% inspection of all meat produced in the Borough is maintained. During the year under review 1,629 such visits were made. During this period a total of 48,161 animals were slaughtered, a total of 11 tons 6 cwts. 15 lbs. of meat was found to be unfit for human consumption, this was disposed of through the recognised channels.

Table 12 sets out the particulars of the animals slaughtered and inspected and the details of condemnation.

The number of animals slaughtered within the district continues to rise and this year there was an increase of 54% over the total number of animals slaughtered during the previous year, and is in fact four times greater than the number slaughtered in 1959.

This continued increase means that in order to maintain 100% inspection of all carcase meat, the inspectorate are still required to devote a considerable amount of time outside of normal office hours to this particular duty.

This department has always considered that meat inspection is one of the most important aspects of food inspection, and therefore should be given priority as a public health service, it is for this reason that every effort is made to carry out 100% inspection in accordance with the Ministry Memorandum on Meat Inspection.



Unfortunately, every local authority does not look upon meat inspection in this light and the Ministry is now considering ways and means to introduce regulations to make meat inspection compulsory and also introducing a system whereby butchers will be charged for this service.

All the inspectors in the borough, who are responsible for meat inspection, are in possession of the Meat and Other Food Inspectors Diploma of the Royal Society of Health and are therefore permitted to use a Meat Marking Stamp as authorised by the Ministry.

### **Cysticercus Bovis**

During the year 30 beasts were found to be infested with *C. Bovis*, these are subdivided as follows :—

14 Cattle (ex cows)	lesions in the heart muscle
14 Cattle (ex cows)	lesions in the cheek muscles
2 Cows    ...    ...	lesions in the cheek muscles

No generalised cases were found and after condemnation of the affected parts, the carcasses were subjected to cold storage treatment for the required period.

### **Export of horse-flesh**

In addition to meat inspected for home consumption, horse carcasses are inspected for export to Belgium, this inspection has to satisfy the requirements of the Belgium Government, and each consignment of horse-flesh has to be accompanied by an official certificate signed by the inspector who has examined and passed the meat. These certificates as well as official labels are provided by the Ministry of Agriculture, Fisheries and Food and have been approved by the Belgium Government.

TABLE 12  
CARCASSES INSPECTED AND CONDEMNED  
1961

	<i>Cattle except Cows</i>	<i>Cows</i>	<i>Calves</i>	<i>Sheep and Lambs</i>	<i>Pigs</i>	<i>Horses</i>	<i>TOTAL</i>
Number killed ... ..	3,579	875	1,509	31,015	10,707	475	48,160
Number inspected ... ..	3,579	875	1,509	31,015	10,707	475	48,160
All diseases except Tuberculosis:							
Whole carcasses condemned ... ..	9	8	12	21	16	—	66
Carcases of which some part or organ was condemned ... ..	498	230	—	443	459	40	1,670
Percentage of the number inspected affected with diseases other than tuberculosis ...	14.11%	27.2%	0.79%	1.49%	4.44%	0.84%	3.60%
Tuberculosis only whole carcase condemned	1	—	—	—	—	—	1
Carcases of which some part or organ was condemned ... ..	4	2	—	—	70	—	76
Percentage of the number inspected affected with tuberculosis ... ..	0.14%	0.23%	—	—	0.65%	—	0.16%



During the year 923 quarters of horse meat were certified as fit for export. A charge of 1/- per quarter and 1/- for each certificate is made by the local authority.

In addition to the slaughterhouses, there are four wholesale butchers and 75 butchers shops in the district. These are all inspected frequently throughout the year.

#### (iv) Food Products in General

In addition to the premises used for Milk, Ice Cream and Meat referred to above, the following food premises are registered under the Romford Urban District Council Act, 1931, and are subject to the Food Hygiene Regulations, 1960.

Bakers ... ..	33	Cafés ... ..	59
Confectioners ...	95	Fishmongers ...	33
Greengrocers ...	69	Grocers ...	162
Miscellaneous ...	4	Hawkers ...	60

There are also 45 food stalls situated in the Market Place on three days of the week.

All these premises are subject to regular inspections to ensure that the requirements of the Food Hygiene Regulations are complied with. During the past year 2,153 such inspections were made, 23 informal notices were served where contraventions were noted, many improvements were obtained through personal approach and the majority of the food shops in the Borough comply with the requirements of the Food Hygiene Regulations.

#### (v) Unsound Food

During the year 414 visits were made to food premises mainly on request, for the purpose of dealing with unsound food, and a total quantity of 6 tons 13 cwt. 77 lbs. of food was surrendered as unfit for human consumption. Where possible all unsound food is disposed of for animal feeding, that which is not suitable for this purpose is disposed of by the Cleansing Department.

#### (vi) Food and Drugs Act, 1955

##### (a) FOOD AND DRUGS AUTHORITY

The Council are a Food and Drugs Authority as defined by Section 85 of the Food and Drugs Act, 1955, and are responsible

for the enforcement of the provisions of the Act relating to sampling of foods and drugs, and the Public Health Inspectors are accordingly "Authorised Officers" under the Act.

(b) PUBLIC ANALYST

It is the duty of every Food and Drugs Authority to appoint a Public Analyst; the Analysts appointed by this Council in accordance with the Act are Dr. J. H. Hammence, F.R.I.C., and Mr. P. S. Hall, A.R.I.C., both of 20 Eastcheap, E.C.3.

The Analysts have been most helpful in advising on the types and quantities of samples taken and any complicated points relating to samples.

(c) SAMPLES SUBMITTED FOR ANALYSIS

During the year 318 informal samples were submitted to the analyst, of these only 11 were found to be not genuine.

A few of these samples were submitted as a result of complaint, but in the majority of cases the complaints were not confirmed.

Informal samples are purchased by the sampling officers in the same manner that the articles would be purchased by an ordinary customer, no indication being given to the vendor that the article is to be subjected to analysis, should the informal sample however prove to be not genuine a formal sample is taken and the vendor is notified to this effect and is given one part of the sample for future reference.

The original purpose for sampling under the Food and Drugs Act was in order to trace adulteration of foods and drugs. Fortunately, this practice is not so common as it used to be in the early part of the century. Sampling nowadays is carried out to ensure that foods and drugs comply with the various legal standards and codes of practice regarding composition, and do not contain any harmful preservatives or colouring matter contrary to the Regulations on these matters. Also to ensure that the public are not being deceived by mis-descriptions or exaggerated claims on labels or advertisements.

Duplicity of sampling by local authorities is difficult to control, but fortunately as far as this area is concerned, consultations are held at regular intervals with the adjoining authorities, where information on sampling is exchanged and duplication is therefore reduced to a minimum.



As will be seen from Table 13, a wide variety of foods were sampled during the year.

The following comments are made concerning the unsatisfactory samples :—

#### **Bread (Four samples)**

Four samples of bread were submitted to the public analyst as a result of complaints that they contained foreign matter.

In three of the cases the matter was taken up with the manufacturers and remedies obtained.

In the fourth case, however, the analyst reported that the bread contained rodent excreta. The manufacturer was prosecuted and fined £10.

#### **Dried Milk Powder**

This sample was submitted as the result of a complaint from one of the school canteens, that when reconstituted the milk contained a number of black specks. The analyst reported that these specks were charred and overheated milk powder, no action resulted.

#### **Ice Lollies (2)**

1. The label on this sample had Saccharin in the wrong order in the list of ingredients. This was taken up with the manufacturer who agreed to change the labels.
2. The label on the sample stated that ice cream was the main ingredient, but no ice cream was found to be present on analysis. This was taken up with the manufacturer who stated that wrong labels had been used by accident.

#### **Pork Sausages (2)**

Both these samples contained preservatives, which was not printed on the labels or declared by means of a notice at the time of sale. This preservative is permissible providing it is declared. Warning letters were sent to the vendors.

#### **Sweets (1)**

This sample consisted of a bar of chocolate cream sold as Mocha Rum Chocolate, the label bore an illustration of a cup of coffee and a glass of rum.

The analyst reported that the chocolate contained no rum or rum flavouring.

The matter was taken up with the manufacturer for using misleading labels. The manufacturer agreed to change the labels, which they did after submitting a copy of the new label for approval.

#### **Yoghourt (1)**

This was submitted as a result of a complaint that the top was covered with a whitish mould growth. This was confirmed by the analyst, but as this appeared to have been partly due to the complainant no action was taken.

#### **(vii) Food Hygiene Regulations, 1955**

The Public Health Inspectors continue to devote a considerable amount of time to the inspection of food premises of all types to ensure that the requirements of the above Regulations are complied with.

Provision is not made in these Regulations for the service of Statutory Notices in the case of contraventions and legally every contravention found by the Inspectors could result in prosecution. However, in practice it is rare that the contraventions observed are sufficiently serious as to warrant immediate legal action. When contraventions are noted they are immediately drawn to the attention of the occupier and the need for improvement explained, this verbal intimation is always followed by a letter indicating the nature of the offence and allowing the offender a period of grace in which to comply with the Regulations. This procedure has been adopted with a view to educating food traders rather than to prosecute, and it appears to be paying dividends as the general standard of food shops in the district has greatly improved.

In addition to the inspection of food shops and restaurants frequent visits are made to factory and school canteens and other food preparing premises. The two main difficulties experienced with the enforcement of the Regulations are (a) the protection of open foodstuffs exposed for sale on stalls in the open market and (b) smoking by food handlers.

It is extremely difficult to impress on stallholders in the Market the real need for protecting foodstuffs from contamination in the open air, but there has been a marked improvement



especially with regard to the stalls used for the sale of meat and fish. Some concern is still felt, however, regarding the stalls used for the retail trade of biscuits, cakes and sugar confectionery. It is considered that the only way to ensure the Food Hygiene Regulations are complied with is to request these stallholders to provide their own mobile stalls constructed on a caravan basis, so that they are properly enclosed and service is only made from behind a screened counter.

As regards smoking, the main difficulty is that this habit is so widespread and ingrained and some food handlers, especially the stallholders, do not appreciate that they should be subjected to this prohibition whilst the customer is not. Few people appear to appreciate that the reason for prohibiting the use of tobacco, including snuff, whilst handling open food is that the habit brings the fingers into close contact with the nose and mouth, both possible reservoirs of food poisoning germs, the hands thus become contaminated and the contamination is then transferred to the foodstuffs.

During the past year it was necessary to prosecute three persons for smoking whilst handling open food, these were market stallholders.

TABLE 13

SUMMARY OF SAMPLES TAKEN FOR ANALYSIS  
DURING THE YEAR 1961

Article	Number examined			Result of Analysis	
	Formal	In-formal	TOTAL	Genuine	Not Genuine
Almonds, ground ... ..	—	2	2	2	—
Almond marzipan ... ..	—	1	1	1	—
Anchovy fillets ... ..	—	1	1	1	—
Anchovy paste ... ..	—	1	1	1	—
Apricots ... ..	—	1	1	1	—
Beans with pork sauce ...	—	1	1	1	—
Bemax ... ..	—	1	1	1	—
Blackcurrant Cordial ...	—	1	1	1	—
Blackcurrant Drink ...	—	1	1	1	—
Blackcurrant Mix-a-Shake ...	—	1	1	1	—
Boston Cream Pie ... ..	—	1	1	1	—
Bramble Jelly ... ..	—	1	1	1	—
Bread ... ..	—	2	2	—	2
Bread, brown ... ..	—	1	1	—	1
Bread, wholemeal ... ..	—	1	1	—	1
Brown Ale ... ..	—	2	2	2	—
Butter ... ..	—	2	2	2	—
Cheese ... ..	—	3	3	3	—
Cheese Food ... ..	—	1	1	1	—
Cheese Spread ... ..	—	5	5	5	—
Chicken Croquettes ... ..	—	1	1	1	—
Chicken & Ham Paste ... ..	—	1	1	1	—
Chocolate Cornflour ... ..	—	1	1	1	—
Chocolate Pudding Mix ...	—	1	1	1	—
Coconut, sweetened ... ..	—	1	1	1	—
Cocktail Cherries ... ..	—	1	1	1	—
Coffee ... ..	—	4	4	4	—
Coffee chocolate ... ..	—	1	1	1	—
Condensed Milk ... ..	—	1	1	1	—
Cornflour ... ..	—	2	2	2	—
Cornish Pasty ... ..	—	1	1	1	—
Corn Oil ... ..	—	1	1	1	—
Cream ... ..	—	5	5	5	—
Creme Wafer in Milk Choco- late ... ..	—	1	1	1	—
Custard Powder ... ..	—	2	2	2	—
Custard Creams ... ..	—	1	1	1	—
Dates ... ..	—	1	1	1	—
Dates, stoned ... ..	—	1	1	1	—
Desiccated Coconut ... ..	—	1	1	1	—
Dried Milk Powder ... ..	—	1	1	—	1
Drink, Vit. C ... ..	—	2	2	2	—
Edifas ... ..	—	1	1	1	—
Epsom Salts ... ..	—	1	1	1	—
Fish, steamed, creamed ...	—	1	1	1	—
Flour ... ..	—	3	3	3	—
Flour, self raising ... ..	—	1	1	1	—
Carried forward ... ..					



TABLE 13—continued

Article	Number examined			Result of Analysis	
	Formal	In-formal	TOTAL	Genuine	Not Genuine
Brought forward ...					
Fruit, mixed ... ..	—	1	1	1	—
Fruit Sauce ... ..	—	1	1	1	—
Food Colour Preparation ...	—	1	1	1	—
Glace Cherries ... ..	—	2	2	2	—
Glucose Vit. D. ... ..	—	1	1	1	—
Glycerine, Lemon & Honey...	—	1	1	1	—
Grape Fruit Juice ... ..	—	1	1	1	—
Gravy ... ..	—	1	1	1	—
Halibut Liver Oil Capsules ...	—	1	1	1	—
Ham & Pork, chopped ...	—	1	1	1	—
Honey ... ..	—	1	1	1	—
Honegar ... ..	—	1	1	1	—
Ice Cream ... ..	—	7	7	7	—
Ice Lollies ... ..	—	6	6	4	2
Instant Coffee ... ..	—	1	1	1	—
Instant Postum ... ..	—	1	1	1	—
Jam ... ..	—	1	1	1	—
Jellies, various ... ..	—	13	13	13	—
Kidney Soup ... ..	—	1	1	1	—
Lactogal ... ..	—	1	1	1	—
Lard ... ..	—	4	4	4	—
Lemon Crystals ... ..	—	1	1	1	—
Lemon Drink ... ..	—	1	1	1	—
Lemon Flavour Drink ...	—	1	1	1	—
Lemon Juice ... ..	—	3	3	3	—
Lemon Pie Filling ... ..	—	1	1	1	—
Lemon, Pineapple, Orange Trio	—	1	1	1	—
Light Meat Tuna ... ..	—	1	1	1	—
Macaroni ... ..	—	1	1	1	—
Margarine ... ..	—	3	3	3	—
Meat Patties ... ..	—	1	1	1	—
Milk ... ..	—	12	12	12	—
Milk, condensed ... ..	—	1	1	1	—
Milk chocolate table fingers...	—	1	1	1	—
Milk, dried ... ..	—	1	1	1	—
Milk, evaporated ... ..	—	2	2	2	—
Milk Gums ... ..	—	1	1	1	—
Milk Shake Syrup ... ..	—	1	1	1	—
Mincemeat ... ..	—	1	1	1	—
Mushrooms, creamed ...	—	1	1	1	—
Mustard, french ... ..	—	1	1	1	—
Nuts, K.P. ... ..	—	1	1	1	—
Olive Oil ... ..	—	1	1	1	—
Olives, stuffed ... ..	—	1	1	1	—
Orange Crush Vit. C. ...	—	1	1	1	—
Orange Drink ... ..	—	4	4	4	—
Orange Fruit Drink ... ..	—	1	1	1	—
Orange Barley ... ..	—	1	1	1	—
Orange Juice ... ..	—	1	1	1	—
Orange Juice Concentrate ...	—	1	1	1	—
Carried forward ...					

TABLE 13—continued

Article	Number examined			Result of Analysis	
	Formal	In-formal	TOTAL	Genuine	Not Genuine
Brought forward ...					
Orange Pie Filling ...	—	1	1	1	—
Orange Squash ...	—	8	8	8	—
Orange, sweetened ...	—	1	1	1	—
Pancake Mixture ...	—	1	1	1	—
Parsley & Thyme Stuffing ...	—	1	1	1	—
Pastes, fish various ...	—	14	14	14	—
Pastilles, various ...	—	4	4	4	—
Pate de Foie ...	—	1	1	1	—
Pate de Foie Truffle ...	—	1	1	1	—
Pears ...	—	1	1	1	—
Peas, garden ...	—	2	2	2	—
Pepper ...	—	2	2	2	—
Pickle ...	—	1	1	1	—
Pineapple grapefruit squash...	—	1	1	1	—
Pineapple Milk Shake ...	—	1	1	1	—
Pineapple Preserve ...	—	1	1	1	—
Pork Luncheon Meat ...	—	2	2	2	—
Pork Pie ...	—	1	1	1	—
Port Flavour Beverage ...	—	1	1	1	—
Potato, Instant Mashed ...	—	2	2	2	—
Potato Puffs ...	—	1	1	1	—
Quick Jel ...	—	1	1	1	—
Raisins ...	—	1	1	1	—
Raisin Flavour Beverage ...	—	1	1	1	—
Rice, flaked ...	—	1	1	1	—
Rivella ...	—	1	1	1	—
Rose Hip Syrup ...	—	1	1	1	—
Sage & Onion Stuffing ...	—	2	2	2	—
Salad Cream ...	—	1	1	1	—
Salmon ...	—	2	2	2	—
Salmon & Anchovy Paste ...	—	1	1	1	—
Salmon, potted ...	—	1	1	1	—
Salmon Spread ...	—	6	6	6	—
Sausages, beef ...	—	3	3	3	—
Sausages, pork ...	—	17	17	15	2
Sausages, Charma ...	—	1	1	1	—
Sausage Meat, Pork ...	—	1	1	1	—
Self Raising Flour ...	—	7	7	7	—
Shrimps, peeled ...	—	1	1	1	—
Shortbread ...	—	1	1	1	—
Soups ...	—	4	4	4	—
Sponge Mixture ...	—	1	1	1	—
Strawberries ...	—	1	1	1	—
Sugar ...	—	1	1	1	—
Sugar Cake Decorations ...	—	2	2	2	—
Sugar, granulated ...	—	1	1	1	—
Sugar, lump ...	—	1	1	1	—
Sugared strands ...	—	1	1	1	—
Sweets and Confectionery ...	—	21	21	20	1
Carried forward ...					



TABLE 13—continued

<i>Article</i>	<i>Number Examined</i>			<i>Result of Analysis</i>	
	<i>Formal</i>	<i>In-formal</i>	<i>TOTAL</i>	<i>Genuine</i>	<i>Not Genuine</i>
Brought forward ...					
Tea ... ..	—	8	8	8	—
Tobler-O-Rum ... ..	—	1	1	1	—
Tomato Ketchup ... ..	—	1	1	1	—
Tomato Juice ... ..	—	1	1	1	—
Tomato Puree ... ..	—	1	1	1	—
Tomato Sauce ... ..	—	1	1	1	—
Tongue and Ham Roll ... ..	—	1	1	1	—
Turkey in Jelly, minced ... ..	—	1	1	1	—
Vegetables and Kidney ... ..	—	1	1	1	—
Vegetables, mixed ... ..	—	2	2	2	—
Vegetables, Veal and Rice ... ..	—	1	1	1	—
Vinegar, malt ... ..	—	1	1	1	—
Vinegar, white wine ... ..	—	1	1	1	—
Wilco Japs ... ..	—	1	1	1	—
Yoghurt ... ..	—	1	1	—	1
<b>TOTAL</b> ... ..		318	318	307	11

**(viii) Educational Activities**

In addition to the routine duties of inspections and observations, the Public Health Inspectors continue to give talks and lectures to local organisations and wherever possible great stress is laid on food hygiene. At least once during the year a lecture is given to the staffs employed in the school canteens.

Frequent lectures are also given on the general work of the Health Department. These lectures are enhanced by the use of coloured slides depicting the various aspects of the work. The department now possesses a collection of over 500 coloured slides that have all been taken locally by one of the Public Health Inspectors.

**(ix) Legal Proceedings**

- (a) The following cases were taken under the Food and Drugs Act, 1955 :

<i>Offence</i>	<i>Section</i>	<i>Result</i>
Sale of loaf containing piece of wood ...	2(1)	Fined £15 0s. 0d.
Sale of loaf containing rodent excreta ...	8	Fined £10 0s. 0d.

- (b) The following cases were taken under the Food Hygiene Regulations, 1960 :

Smoking whilst handling			
open food	...	Reg. 9(e)	Fined £5 0s. 0d.
Smoking whilst handling			
open food	...	Reg. 9(e)	Fined £5 0s. 0d.
Smoking whilst handling			
open food	...	Reg. 9(e)	Fined £2 0s. 0d.

- (c) The following cases were taken under the Slaughter of Animals Act, 1958 :

Failing to properly stun			
a calf	prior to		Fined £15 0s. 0d.
slaughter	...	Sec. 1	Costs £5 0s. 0d.
Aiding and abetting the			
above	...	Sec. 3(1)	Fined £15 0s. 0d.
			Costs £5 0s. 0d.

#### 4. CLEAN AIR ACT, 1956

##### (a) SMOKE CONTROL AREAS

The Council have adopted the Building Byelaw, referred to in Section 24 of the Act, requiring the installation of approved heating and cooking appliances, capable of burning smokeless fuels, in all new buildings.

The Council have decided to establish Smoke Control Areas in the Borough and have approved a plan for dealing with the whole borough extending over a period of approximately ten years.

An exhibition staged at the Laurie Hall during October, provided stands showing aspects of atmospheric pollution, methods of recording, types of appliances and fuel necessary in a smokeless zone.

Considerable enthusiasm and energy was displayed by the Public Health Inspectors and local merchants in staging the exhibition, but the low numbers of general public attending was disappointing.

The exhibition served to inaugurate the commencement of smoke control in the Borough and surveys in the first two zones have been commenced.



## (b) ATMOSPHERIC POLLUTION

Romford is one of 120 towns that have agreed to co-operate with the Department of Scientific and Industrial Research in a National Survey. Five volumetric meter stations have been set up within the Borough and daily recordings are assessed and the results forwarded to the Ministry Department. A monthly bulletin is to be published showing a comparison between the towns participating. The sites were chosen under direct Ministry guidance and designed to standardise throughout the country the positioning of the meters so that National figures when obtained were from basically similar stations. These stations are set in the following positions :—

1. Residential district with high population density
2. Residential district with low population density
3. Industrial district
4. Business and commercial district
5. Proposed smoke control area.

A volumetric meter consists of apparatus capable of extracting from the atmosphere approximately 70 cubic feet of air per day. This air passes through a filter pad to remove the smoke and into a hydrogen peroxide solution to arrest the sulphur dioxide. By reading the stain density on an electrometer concentrations of smoke in microgrammes per cubic meter of air are obtained and by titration the concentration of  $\text{SO}_2$  is obtained.

Daily weather records are required and the Royal Liberty School Meteorological Society are kindly co-operating and supplying these records.

These daily recordings by use of the volumetric meter were commenced on the 1st November, 1960.

In view of the Council's decision to co-operate in this scheme, the measurement of atmospheric pollution by the old system of using a rain deposit gauge and lead peroxide candle was discontinued in June, 1960, therefore, owing to the change over, a table showing atmospheric pollution records is not included in this report.

## 5. RAINFALL

During the year the amount of rainfall recorded at Raphael Park was 22.36 inches, this being 6.2 inches less than in 1960.

## 6. PUBLIC BATHS

There is one Public Bath situated in Romford, which was opened in 1900. The swimming bath is 70 feet long by 30 feet wide.

The water for the swimming bath is obtained from a well situated in the curtilage of the baths. This water is filtered and heated with Break-Point Chlorination, and has a turnover every  $2\frac{1}{2}$  hours. The temperature of the water is maintained at  $76^{\circ}$  F. The maximum load for the swimming bath is 100 persons, the bath is very well patronised and during the high season admission has to be restricted. Both chemical and bacteriological samples are taken from the well and bath at frequent intervals and the results of the examination have always been satisfactory.

In addition to the swimming bath, hip baths are also available for the use of the public.

Although the baths are old they are maintained in a very satisfactory manner.

Improved lighting has been installed in several parts of this building, and interior decorating was carried out during the year.

An improved method of testing the swimming bath water by tablet has now been developed.

The Council have for a long time appreciated that this bath is inadequate and does not meet the demands of the public. Plans have now been approved for the building of a new swimming bath at Central Park, and at a later date the provision of another swimming bath near to the centre of the town.

## 7. NOISE ABATEMENT

The Noise Abatement Act, 1960, came into operation on the 27th November, 1960.

This Act empowers the local authority to deal with noise nuisances, and restricts the use of loudspeakers for certain purposes. It also restricts the use of loudspeakers on ice-cream vehicles except during the hours from noon to seven o'clock in the evening.

In addition Section 150 of the Romford Urban District Council Act, 1931, prohibits the sounding of noisy instruments for the purpose of advertising trade at all hours on Sundays.



During the year 13 ice-cream vendors were prosecuted under the local Act for sounding chimes on Sundays, of the offenders, twelve were fined ten shillings, and the other one pound.

Ten ice-cream vendors were prosecuted under the Noise Abatement Act for using chimes after 7 p.m., each offender was fined ten shillings.

## 8. HOUSING ADMINISTRATION

### (a) GENERAL

Surveys continue to be made in order to deal with sub-standard and unfit houses. During the year 19 unfit houses were demolished, demolition orders had been made in respect of eight individual houses and a further seven had been represented and were waiting final consideration by the Committee at the end of the year.

### (b) REDEVELOPMENT

(i) The Waterloo Road Redevelopment Scheme is progressing satisfactorily and the end of development is in sight. The second eleven-storey block of flats has been completed and the flats are now occupied. Progress was being made at the end of the year with regard to old people's dwellings and three-bedroom houses to complete the scheme.

(ii) The Highfield Road Redevelopment scheme is now under way, during the year 70 prefabricated bungalows were demolished and 48 flats were completed and occupied. Work on this scheme is still proceeding.

#### (iii) *Future Plans*

Three further schemes for redevelopment in different areas have been approved in principle by the Council and final details are being prepared.

Surveys have continued in the older parts of the Borough and plans are in preparation for redevelopment schemes over the next twenty years. One or two areas will have to be given urgent consideration in the near future, the main difficulty will be finding sites to rehouse the tenants in order to commence demolition.

(c) COUNCIL HOUSING

The Public Health Inspectors continue to co-operate with the Housing Department by carrying out inspection of houses, at present occupied by applicants on the Housing List, in order to assess the properties in connection with the "points" scheme for sub-standard housing.

TABLE 14

HOUSING STATISTICS FOR THE YEAR 1961

Number of houses erected during the year : —

1. By Local Authority	207
2. By Private Enterprise	187
3. By Essex County Council (Police Houses)	6

1. INSPECTION OF DWELLING HOUSES DURING THE YEAR

1. (a) Total Number of dwelling houses inspected for housing defects (under Public Health or Housing Acts)	3,748
(b) Number of inspections made for the purpose	4,852
2. (a) Number of dwelling houses (included under sub-head (1) above) which were inspected and recorded under the Housing Consolidated Regulations 1925 and 1932	Nil
(b) Number of inspections made for the purpose	Nil
3. Number of dwelling houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	12
4. Number of dwelling houses (exclusive of those referred to under the preceding sub-head) found not to be in all respects fit for human habitation	634

2. REMEDY OF DEFECTS DURING THE YEAR WITHOUT SERVICE OF FORMAL NOTICES

Number of dwelling houses rendered fit in consequence of Informal action by the local authority or their officers	466
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3. ACTION UNDER STATUTORY POWERS DURING THE YEAR

(a) Proceedings under Sections 9, 10 and 12 of the Housing Act, 1957—

(i) Number of dwelling houses in respect of which Notices were served requiring repairs	Nil
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(ii) Number of dwelling houses which were rendered fit after services of Formal Notices—	
(a) By Owners ... ..	Nil
(b) By Local Authority in default of owners ...	Nil
(b) Proceedings under the Public Health Acts—	
(i) Number of dwelling houses in respect of which Notices were served requiring defects to be remedied ... ..	115
(ii) Number of dwelling houses in which defects were remedied after service of Formal Notices—	
(a) By Owners ... ..	62
(b) By Local Authority in default of owners ...	37
(c) Proceedings under Section 16 and 17 of the Housing Act, 1957—	
(i) Number of dwelling houses in respect of which Demolition Orders were made ... ..	6
(ii) Number of dwelling houses demolished in pursuance of Demolition Orders ... ..	19
(iii) Number of Demolition Orders revoked ... ..	Nil
(iv) Number of Closing Orders made ... ..	1
(v) Number of Closing Orders revoked ... ..	1
(d) Proceedings under Section 18 of the Housing Act, 1957—	
(i) Number of separate tenements or underground rooms in respect of which Closing Orders were made ... ..	Nil
(ii) Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement or room having been made fit ... ..	Nil
4. HOUSING ACT, 1957 : PART IV—OVERCROWDING	
(a) (i) Number of dwellings overcrowded at end of year	14
(ii) Number of families dwelling therein ... ..	20
(iii) Number of persons dwelling therein ... ..	103
(b) Number of new cases of overcrowding reported during the year ... ..	1
(c) (i) Number of cases of overcrowding abated during the year ... ..	1
(ii) Number of new cases of overcrowding relieved during the year ... ..	Nil
(iii) Number of persons concerned in such cases ...	Nil

- (d) Particulars of any cases in which dwelling houses have again become overcrowded after the local authority have taken steps for the abatement of overcrowding Nil

### 5. RENT ACT, 1957

During the year the Public Health Inspectors made 54 inspections in connection with the requirements of this Act. These inspections dealt with applications for Certificates of Disrepair, checking Undertakings made by owners, and inspecting the works carried out to remedy the defects and disrepair.

The following is a summary of the matters dealt with during the year :—

Number of applications for Certificates	...	...	10
Number of Certificates issued	...	...	1
Number of Certificates cancelled	...	...	6
Number of Undertakings accepted	...	...	7
Number of applications for Certificates as to remedying of defects, "Form O"	...	...	4
Number of Certificates as to remedying of defects—			
Granted "Form P"	...	...	3
Refused	...	...	1

### 9. SHOPS ACT, 1950

Mr. S. F. Titterton, M.I.S.A.A., The Council's Shops Act Inspector, who works under the supervision of the Chief Public Health Inspector, has submitted the following report on the various duties for which he is responsible.

#### (a) SHOPS AND OFFICES LEGISLATION

For those who looked forward to the implementation of the Gowers Report (Cmd. 7664) on Health, Welfare and Safety in Non-Industrial Employment were again disappointed when the Minister of Labour on the 1st November, 1961, in a written answer said:—

"As my right hon. Friend the Home Secretary told the House on 28th July, 1960, the Government had intended to introduce a Bill on this subject before the Offices Act, 1960, entered into force on 1st January, 1962. The programme of essential legislation for the current Session is, however, already so full that it has been reluctantly decided that there



will not be time for proper Parliamentary examination of this complex and far reaching measure. The Government's comprehensive Bill on the subject will therefore be deferred until 1962-63 Session of Parliament. Since this legislation will be introduced in the autumn of 1962, no action will be taken in the meantime to implement the Offices Act, 1960."

During 1961, however, the Shops Act, 1950, has been enforced as can be seen in the schedule mentioned in this report.

The introduction into this country of the self-service shop has meant a radical change in shopping habits and in the environment of the shop worker.

Self-service shops are in a sense "Factories." The worker is no longer seen serving goods, save the few who mingle with the customers replenishing shelves and bins with merchandise obtained from the storage rooms and cashiers like sentries in their boxes operating automatic cash registers.

In the large self-service stores the rooms at the rear of, or above, the premises (normally out of bounds to the customer) have a similarity to a mechanised industry, many workers operating sausage making machines, mincers, bacon slicers, band saws controlled by workers especially trained for this purpose, waste paper and cardboard packing machines on the principal of an assembly line in a factory, selecting, weighing, wrapping, packing and pricing the commodities. There are telephones and indicator lights linking each floor and department. There is the calling of some wanted person over the loudspeaker system, employees shouting above the noise of clanging lift gates, trolley cars, conveyor belts, refrigerator motors and air extracting plants.

The style of "shop assistant" is no longer a feature of this business; there is no sales talk or the occasional chat with the customer. He is now a unit performing a task repeated many times in a working day. Staff facilities are generally good but one wonders if such conditions alone are sufficient to compensate the change in tempo of this new class of shop worker.

The small self-service shop has also introduced some tricky problems. Many of these businesses have been converted from original premises of the conventional style and require a larger staff to meet the demand attributed to self-service sales. In order to obtain the maximum accommodation of sales space there is

a tendency to fit more display shelves than the shop area can reasonably permit. The exhibition of merchandise in the gangways aggravates the position. The law requires the provision of seats in all rooms of a shop, for the use of females employed in the serving of customers. This provision cannot often be complied with due to restricted space in the shop and even if a seat is provided it causes obstruction to the customer. The cashier's desk, by necessity is placed near the "way out" but all too often in a position where the cashier is in a constant draught.

The use of sanitary conveniences for the making of tea, storage of milk and drinking vessels is not uncommon. This undesirable practice could well be a source for the spread of disease.

In one case which comes to mind, the only space available for the staff to rest is in the intervening space of the water closets provided for the separate sexes employed.

Many fires that occur in commercial buildings are attributed to faulty electrical wiring and fittings. During the year several instances of bare wires were found which on test were shown to be live. In one case a mains wireless lead was draped about a bacon cutting machine, in another several feet of lighting flex was wrapped around an iron soil pipe suspended from the basement ceiling. The basement contained inflammable materials.

Ventilation is a source of complaint particularly in modern buildings. Temperatures in the eighties have been recorded in rooms where the air movement has been insufficient to give employees comfortable working conditions. In a number of instances the original system has been made ineffective by the erection of partitions from floor to ceiling without consideration being given to the air ducts.

In one case, a room was partitioned off for staff use. The room contained a cooker, an electric fire and a drip feed oil heater. No window was provided or other means of ventilation. There was a danger of asphyxiation to those using the room.

The mushroom growth of the Launderette has brought in its wake the problems of ventilation, excessive moisture, the disposal of exhaust fumes and heat. Even customers have been heard to complain of the heat and the apparent lack of air in these establishments.



Shop development has considerably increased these past years and looks like continuing for some time as might offices in the future. However, as plans are submitted to this Council for planning approval, etc., statutory provisions referred to in the Shops Act and possible requirements of the future are recommended by this department. This procedure, a voluntary service, I think has helped to improve Public Relations. On the other hand, it has its limitation and does not obviate the kind of difficulty often discovered when carrying out routine inspections and which could be avoided had it been known beforehand of the contemplated change in circumstances, i.e. change of occupier or business, numbers and sexes of employees and of internal alterations. When an occupier of a shop is asked to provide perhaps, sanitary accommodation, washing facilities or means of ventilation, he usually replies, "the Council passed the plans." An explanation is given but this does not stop him from blaming the authority or abusing the inspector for what he joyfully calls "gross inefficiency."

Successive governments have failed to agree on the registration of shops, though a local authority is required to keep a register of shops for certain purposes. Section 137 of the Factories Act, 1961, requires occupiers of factories to notify the Inspector of intending occupation, etc. It seems analogous that as an Inspector under the Shops Act has the same powers as H.M. Inspector of Factories that registration of shops could well be applied in the same manner as factories and would help to ally the many difficulties which at present does exist between those who are required to abide by the law and those responsible for its administration. The shopkeeper would then be advised of his commitments and limitations before embarking on something which may involve him contravening the law.

#### (b) EVENING CLOSING HOURS

The observance of the evening closing hours has been well maintained throughout the year, most shops closing before the statutory closing hour of 8 p.m. Friday is popular for late family shopping particularly in the grocery and furniture trades when some of these businesses remain open until 8 p.m. Saturday is no longer observed as the late day.

#### (c) EARLY CLOSING DAY

There are no "orders" fixing the day of the weekly half-holiday. Each shopkeeper is required to fix his Early Closing Day and to exhibit a notice in his shop to this effect. I find no administrative difficulties and the shopkeeper appreciates the opportunity of being able to choose a day most suitable for his type of business. The public, I find, are better served and not frustrated by the closing of shops on a day fixed by "order." Thus in Romford we have shops closing on Monday, Tuesday, and Saturday which enables the public to shop elsewhere in the Borough on a day when the majority of shops by custom are closed either on Wednesday or Thursday. There are no legal difficulties for those wishing to adopt a five-day week. Several traders are now applying a five-day week by closing all day on Monday.

Again the closing hour has been well observed and in the case of the "mixed" trader remaining open for the exempted transactions, the number opening is limited mainly to newsagents, tobacconists and confectioners and a few food shops. The number of offences detected has been small.

#### (d) SUNDAY TRADING

The Sunday trading provisions have been rigidly enforced in so far as the law now permits. Generally the Act has been well observed though the used and second-hand car dealer has confronted the authority with some difficulties. There has been a number of successful prosecutions and the penalties imposed appear to have been effective in the closing of these businesses on a Sunday within the Borough.

The decision in the case of *Betta Cars Ltd. v. Ilford Corporation* (1959) has made enforcement considerably easier (evidence of a sale is not required), on the other hand the High Court decisions affecting food has made enforcement difficult in certain respects, thus a loaf of bread is a refreshment or alternatively a newly cooked provision, a kipper, is a refreshment, sugar is part of a meal, tea is not a refreshment. These decisions have placed a heavy burden both on the shopkeeper and the inspector, who neither can adhere or apply the law with a measure of certainty.



It is hoped that the Committee appointed by the Government to report on Sunday observance will arrive at a solution satisfactory to everyone concerned, particularly in the field of Sunday trading and employment.

(e) YOUNG PERSONS

The employment of young persons has received considerable attention throughout the year, many spot visits taking place in the evenings and on Sundays. In several cases young persons were working outside the hours specified by the employer in the prescribed notice, there was no evidence of exceeding the maximum working hours. However, employers were advised of the consequences for a failure to keep proper records of the hours worked by the persons concerned. It has been found that where longer hours are to be worked or where there is a deprivation of the meal break, it is the young person on whom this is imposed. Not all young persons are capable of standing up for their rights, some are timid or even scared. The meal interval is very important. Another point which causes deep concern and over which the inspector has no authority, is the practice of some employers leaving a young person in charge of a shop. Information can be obtained without a challenge of identity, they are an easy prey for the trickster and thug, this should be made an offence. Under these circumstances, though one has every right to do so, I make it a practice never to enter the premises beyond the shop counter but complete my enquiries another day when an older person is present. The public are trusting, it is on very rare occasions that I am asked to produce my "Certificate of Appointment" especially when visiting premises for the first time.

During the year a talk was given to the Romford and District Chamber of Commerce on "The Law and the Shopkeeper."

## 10. MEANS OF ESCAPE IN CASE OF FIRE

Authoritatively, many conflagrations resulting in serious loss of life could have been avoided by the observance of common sense rules and the carrying out to the letter of legal requirements. *One weak link in a chain of otherwise reasonably good provisions for safety may lead to disaster.*

It is with this in view that during the past year endeavours have been made to bring to the notice of the public Section 59 of the Public Health Act, 1936, which provides for the provision



of exits in certain classes of buildings and keeping the exits, gangways and passageways free from obstructions (e.g. chairs, tables, display boards and prams) whilst persons are assembled in the building.

The means of escape from a building should be the first consideration of those having control of commercial premises, large shops, restaurants, multiple stores and other buildings where persons are likely to congregate. To indicate the importance for strict observance of the legal requirements, two instances that were found during routine visits were as follows :—

- (a) Rooms on an upper floor of a store had an emergency escape route to the roof. The exit door was locked and bolted in three positions. The key to the lock, usually kept in a box fitted on the door, was missing. Several minutes lapsed before the key was found.
- (b) Another store had an enclosed emergency fire escape route from roof to ground floor internal. Doors leading to this escape from the various floors were obstructed by goods, it was therefore not possible to get on or off the escape at each floor level. Goods were also displayed on the main staircase landings which impeded the proper use of the stairway. On being requested to remove the obstructions, an assistant stated that goods were always displayed there and that in any case the emergency stairs were never used. How fortunate !

The Betting and Gaming Act, 1960, allows the playing of a game commonly called “Bingo” subject to certain rules being observed. “Bingo” is now played in every type of building, some constructed entirely of timber, and attracts large numbers of persons including the aged and the young.

In the passing of this Act, it seems inexplicable that no condition was implied as to safety requirements. Generally safety laws do not apply to clubs. However, in this connection the Association of Municipal Corporations have drawn the Government's attention to a serious defect in the law.

It is considered, however, that the persons organising these games have a moral responsibility and having this in mind, a number of buildings in the Borough were visited, when this game was in progress, when it was found, among other matters, overcrowding existed, no gangways were provided, exits could not be immediately opened and were obstructed by tables and chairs.



On the credit side, thanks to the co-operation of certain people who appreciated the reason for the visits, there have been some improvements. In this respect, the following cases are worthy of mention.

- (c) A room high above ground and capable of holding several hundreds of persons had only one exit, that used as the "way in." An emergency exit had been provided, this was by way of an external staircase which led to an enclosed yard from which there was no escape. This room is no longer used.
- (d) A room situated on the ground floor in a building of sound construction with secondary means of escape and fire fighting equipment. At tables, persons were seated in rows, touching back to back, there were no gangways between the rows. Persons were also seated at tables blocking the main and emergency exits. Escape would have been extremely difficult, if not impossible. A re-arrangement has now been made.

## 11. CONSUMER PROTECTION ACT, 1961

This Act came into force on the 19th August, 1961. The Secretary of State may by regulation impose safety requirements and instructions on certain goods likely to cause death or personal injury. The Act revokes The Heating Appliances (Fireguards) Act, 1952, and the Oil Burners (Standards) Act, 1960. However, The Heating Appliances (Fireguards) Regulations, 1953, are retained as if they were made under Section 1 of the Act.

No regulations have been made in connection with safety standards and instructions for the use of oil heaters, though it is understood they are at an advanced stage of preparation.

During the year 54 routine visits were made to shops and other selling points. There were four infringements. The guard on one electric fire had been fitted in the reverse position allowing the test probe to be inserted through the guard so as to touch the heating element. In another, the guard had become damaged during transit and had been put on sale without being noticed. One heating appliance was exposed for sale without a guard. The seller had forgotten to fix the guard supplied to him with the appliance.

## 12. THE FABRICS (MISDESCRIPTION) ACT, 1913 AND REGULATIONS, 1959

It was reported last year that there was no demand for children's non-inflammable fabrics owing to the cost. This year, it is pleasing to report that a well-known chain store is selling under a strict warranty of safety, children's and women's night-dresses of pleasing texture, colours and design at competitive prices, it is understood that sales have been most encouraging.

## 13. HOME SAFETY

From the inception of the Romford Home Safety Advisory Committee, in November, 1959, the Committee has steadily improved its organisation and associates and is geared to campaign by means of propaganda on the causes of accidents in the home.

With the coming into force of The Home Safety Act, 1961, this Committee has been reformed as a Sub-Committee of the Public Buildings and Health Committee. Bi-monthly meetings are held under the Chairmanship of Alderman Mrs. Irons, J.P., C.C., and the local press is invited to give coverage on the proceedings. The appointed Home Safety Officer is Mr. C. Hackett (Town Clerk's Department).

During the year several talks were given to schools and local organisations, competitions held and exhibitions staged. Thousands of pamphlets distributed. The causes of falls, burns and scalds, which claim the greatest number of victims, was given particular attention by the Committee. The Committee considered the Consumer Protection Bill and through its sponsor, Mr. R. Edwards, M.P. for Bilston, secured an amendment acceptable to the Government. (House of Commons — Official Report — Friday, 5th May, 1961.)

The annual returns of the Registrars-General for the year 1959 show that in Great Britain there were 8,096 deaths from accidents at home. Falls accounted for 4,839, burns and scalds 833. Deaths from accidents at home now exceed those on the road.

Figures are not available as to the causes of death within the Borough, therefore the Committee are unable to compare with the national figure of 16.0 per 100,000 of the population. If this figure was made available, it would give the Committee some idea if their efforts were having a salutary effect on the citizens of Romford.



# TABLE 15

## SHOPS ACT, 1950

### (a) INSPECTIONS

1,212 shops have been inspected and recorded on the register. Altogether 3,019 inspections and observations have been made for various purposes under the Act during the year.

The following contraventions were noted :—

#### (i) *Early Closing Day*

Failing to exhibit notice	...	...	...	...	63
Failing to close shop for serving of customers	...				4
Failing to observe the Regulations	...	...			8

#### (ii) *Evening Closing Hours*

Failing to close shop for serving customers	...				3
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#### (iii) Failing to close shop for the serving of customers

Failing to observe the Regulations	...	...			4
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#### (iv) *Conditions of Employment*

Failing to exhibit notice as to Assistants' Weekly Half-Holiday	...	...	...	...	55
Failing to allow proper intervals for meals and rest					2
Failing to exhibit abstract of Act and keep records of hours worked by young persons	...	...			66
Failing to keep records of Sunday employment	...				14
Failing to allow compensatory leave for Sunday employment	...	...	...	...	2

#### (v) *Health and Welfare*

Seats not provided for the use of female shop assistants	...	...	...	...	3
Failing to give notice of intention to use seats provided	...	...	...	...	42
Absence of, or unsatisfactory accommodation	...				16
Absence of, or unsatisfactory washing facilities	...				4
Ventilation unsatisfactory	...	...	...	...	5
Temperature unsatisfactory	...	...	...	...	5
Lighting	...	...	...	...	5
Cleanliness	...	...	...	...	12

(b) LEGAL PROCEEDINGS

<i>Offence</i>	<i>Section</i>	<i>Result</i>
1. Failing to close shop on Sunday	47	Fined £1 0s. 0d.
2. Failing to close shop on Sunday	47	Fined £5 0s. 0d.
3. Obstructing Inspector	71(2) and Factories Act 1937, Sec. 123	Fined £2 0s. 0d.
4. Failing to close shop in evening	2(1)	Fined £5 0s. 0d. Costs £2 2s. 0d.
5. Failing to close shop on Sunday	47	Fined £15 0s. 0d. Costs £2 2s. 0d.
6. Failing keep record of Sunday employment	22(3)	Fined £2 0s. 0d. Costs £1 1s. 0d.
7. Failing to close shop on Sunday	47	Fined £2 0s. 0d. Costs £1 1s. 0d.
8. Failing to close shop on Sunday	47	Fined £20 0s. 0d. Costs £2 0s. 0d.
9. Failing to close shop on Sunday	47	Fined £20 0s. 0d. Costs £2 0s. 0d.
10. Failing to close shop on Sunday	47	Fined £20 0s. 0d. Costs £2 2s. 0d.



