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AC 4411(1) WALT HAM STOW



BOROUGH OF WALTHAMSTOW

# REPORT

OF THE

# MEDICAL OFFICER OF HEALTH

for the Year 1950

A. T. W. POWELL, M.C., M.B., B.S., D.P.H. MEDICAL OFFICER OF HEALTH





# BOROUGH OF WALTHAMSTOW

# REPORT

OF THE

# MEDICAL OFFICER OF HEALTH

for the Year 1950

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# HEALTH COMMITTEE 1950-51

Chairman:

ALDERMAN LADY MCENTEE, J.P.

Vice-Chairman:

COUNCILLOR MRS. S. CANDY.

# Ex-officio:

THE WORSHIPFUL THE MAYOR—COUNCILLOR A. E. SIMMONS, J.P. THE DEPUTY MAYOR — ALDERMAN E. C. REDHEAD, J.P. CHAIRMAN OF FINANCE COMMITTEE—ALDERMAN ROSS WYLD, O.B.E., J.P.

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F. A. BURTON.

" W. H. SHAW.

G. R. LOWTON, J.P. ,, M. SHARLAND.

COUNCILLOR J. M. WIGHT.

Town Clerk: G. A. BLAKELEY, Esq.

# TO THE CHAIRMAN AND MEMBERS OF THE HEALTH COMMITTEE

LADIES AND GENTLEMEN,

I beg to submit herewith a report on the health of the Borough for the year 1950.

The directive of the Ministry of Health requires me to deal with all matters within my responsibility in regard to the health of the public in the Borough. The report therefore includes references to the personal health services transferred to the Essex County Council. Such references are made in my capacity as Area Medical Officer and by courtesy of the County Medical Officer of Health.

The mid-year population of the Borough was 122,700, and once again vital statistics were good and compared favourably with the National rates.

Although the birth rate was below the National rate, so also was the death rate. The infant mortality rate was 26 against a National rate of 30, stillbirths were 0.30 per thousand population against 0.37 for the whole country. There was no maternal death. Deaths from tuberculosis were only 0.26 per thousand population against 0.36 for the whole country.

The major problems of rehousing, tuberculosis, and the care of the aged and the chronic sick continue to claim an increasing amount of attention. All three problems are, of course, closely related. Experience in regard to Section 47 of the National Assistance Act, 1948, is described, and a claim is made for the restoration of the powers previously exercised by the Public Assistance Officer in regard to "Orders" for immediate admission to hospital.

The Chief Sanitary Inspector, in his report, refers to the campaign for clean food.

With regard to infectious diseases, once again poliomyelitis made an unwelcome appearance. In spite of one of the worst outbreaks of whooping cough ever recorded there was no death from whooping cough, largely due, it is thought, to the schemes of immunisation inaugurated by your Council.

The General Dental Service, one of the few in the country, has continued despite the difficulties of staffing. This Service is quite unable to cope with the demand made upon it. There was a large increase in the number of orthodontic appliances made in the dental laboratory.

With regard to the services transferred to the County Council, there was participation in the Ministry of Health enquiry into virus infections during pregnancy.

An increased number of visits was paid by health visitors and treatments given by the home nurses. Domiciliary maternity bookings tended to increase at the expense of midwifery bookings. There was a disquieting decrease in diphtheria immunisation, but good progress in immunisation against whooping cough. Vaccination against smallpox continued at what can only be regarded as a dangerously low level. The removal of "compulsion" has in no way stimulated a greater acceptance of vaccination. All known surviving cases of poliomyelitis were followed up and every possible assistance was given to those handicapped by their attack.

The prevention, care, and after-care of tuberculosis is fully discussed.

The review of the scheme of delegation of Part III services has not yet taken place, and further experience confirms that the only satisfactory solution would be the achievement of County Borough status.

Once more I have to record my appreciation of the help and understanding received from members of the committees concerned, and in particular from their Chairman, Alderman Lady McEntee, J.P. The staff of the Department have worked loyally and conscientiously, and the report is a record of their achievement.

I am,

Your obedient Servant,

A. T. W. POWELL, Medical Officer of Health.

# A.—STATISTICS & SOCIAL CONDITIONS OF THE AREA

Area (in acres)		4,343
Population (Registrar-General's Estimate, mid-year	1950)	122,700
Number of Assessments (1st April, 1950)		36,292
Rateable Value		£888,910
Sum represented by penny rate		£3,600

Population.—The Registrar-General's Estimate of the civilian population at mid-year, 1950, is 122,700, a decrease of 700 on the previous figure.

Census 1951.—The preliminary report in regard to the Census held on 8th April, 1951, shows that the population of the Borough then was 121,069, i.e., 57,113 males and 63,956 females. This total is a decrease of 11,903 on the 1931 census population. This decrease is shared (but to a lesser extent in the case of Walthamstow) with London Administrative County, East and West Ham, Tottenham and Leyton.

The census showed Walthamstow to be the 44th largest town in England and Wales. It was the 8th in size amongst Non-County Boroughs and Urban Districts, and there were no fewer than 45 County Boroughs with smaller populations.

Employment.—According to information kindly supplied by Mr. Percy C. Graham, Manager of the Local Employment Exchange, approximately 800 men and 350 women were on an average placed in employment each month during the year 1950, through the placing machinery of the Exchange. The number of persons insured under the National Insurance Acts, employed in the whole area covered by the Exchange, comprising the Boroughs of Walthamstow, Leyton, Chingford, Woodford and Wanstead, was approximately 82,000. Of this number, it is estimated that about 40,000 are employed in Walthamstow. During 1950, the average number of persons unemployed in the whole area was 800 men and 240 women; these included approximately 100 disabled men and 20 disabled women.

Extracts from Vital Statistics.—The Registrar-General's midyear 1950 estimate of the civilian population (viz. 122,700) has been used for the calculation of all vital statistics.

Live   Illeg	cimate itimate	1,536	35	728 27	Birth rate 1,000 of estimated	per the
Stillbirths					lian popular	tion 13.02
Deaths	1,305	Death	rate p	er 1,000	of the estim	ated

Deaths from puerperal ca	iuses :—
Puerperal Sepsis De	eaths Nil
Other Puerperal Ca	uses Nil

Death rate of infants under one year of age :-		
All infants per 1,000 live births		26
Legitimate infants per 1,000 legitimate live births		26
Illegitimate infants per 1,000 illegitimate live births	******	16
Deaths from Measles (all ages)		2
Deaths from Whooping Cough (all ages)		_
Deaths from Diarrhœa (under two years of age)		2
Pulmonary Tuberculosis death rate		0.26
Non-Pulmonary Tuberculosis death rate		-

The natural increase of population, i.e., excess of births over deaths was 293.

The usual comparison of rates with those for the whole country is shown in the table on the following page.

Deaths.—The Registrar-General's classification of causes of death by sex totals is given.

The total number of deaths in 1950 (1,305) compares with 1,299 in 1949, the respective death rates per 1,000 population being 10.6 and 10.5.

Comparability Factor.—The comparability factor for Walthamstow is given by the Registrar-General as 1.05, which, when applied to the crude death rate of 10.6, gives an adjusted rate of 11.1.

The following table gives various averages for five year periods since 1890.

	Average of									
Quinquennia	Population	Births	Birthrate	Infant Deaths	Infant Mortality					
1891/1895	53,149	1,823	34.3	257	137					
1896/1900	79,337	2,502	31.5	386	154					
1901/1905	106,493	3,397	31.9	425	125					
1906/1910	127,420	3,454	27.1	352	102					
1911/1915	129,800	3,119	23.8	270	86					
1916/1920	129,666	2,557	19.6	174	68					
1921/1925	130,276	2,506	19.2	123	57					
1926/1930	125,145	1,970	15.8	97	49					
1931/1935	134,922	1,758	13.0	88	50					
1936/1940	127,140	1,638	12.8	66	40					
1941/1945	99,556	1,696	17.0	66	39					
1946/1950	121,884	2,143	17.6	61	28					

Birth-Rates, Death-Rates, Analysis of Mortality, Maternal Mortality, and Case Rates for certain Infectious Diseases in the year 1950. Provisional figures based on quarterly returns.

	England and Wales.	126 County Boroughs and Great Towns (including London)	148 Smaller Towns (Resident Population 25,000-50,000 at 1931 Census)	London Adminis- trative County.	Walthamstow.
	Rat	tes per 1	,000 Ho	me Popi	lation
Births:— Live Births Still Births	15.8	17.6	16.7	17.8	13.02
Deaths:— All Causes Typhoid and Paratyphoid Whooping Cough Diphtheria Tuberculosis Influenza Smallpox Acute Poliomyelitis (includ-	11.6 0.00 0.01 0.00 0.36 0.10	12.3 0.00 0.01 0.00 0.42 0.09	11.6 0.00 0.01 0.00 0.33 0.10	11.8 0.00 0.01 0.00 0.39 0.07	10.6 0.00 0.00 0.00 0.26 0.07
ing Polioencephalitis) Pneumonia	0.02 0.46	0.02 0.49	0.02 0.45	0.01 0.48	0.01 0.52
Notifications (Corrected):— Typhoid Fever Paratyphoid Fever Meningococcal Infection Scarlet Fever Whooping Cough Diphtheria Erysipelas Smallpox Measles Pneumonia Acute Poliomyelitis (including Polioencephalitis) Paralytic Non-Paralytic Food Poisoning  Deaths:— All causes under 1 year of age Enteritis and Diarrhœa under 2 years of age Notifications (Corrected):— Puerperal Fever & Pyrexia	29.8(a) 1.9 Rates pe	33.8 2.2 r 1,000		0.25 Live Birth 26.3 1.0 Ive & Str	26.2 1.2 Il) Births
Maternal Mortality:—	5.81	7.43	4.33	6.03	8.56 800 H
P	No. 651. Abortion with Sepsis	No. 650, 652. Other abortion	Nos. 640-649, 670-678. Complica- tion of pregnancy and delivery	No. 681. Sepsis of childbirth and the puerperium	No. 680, 682-689 Other Complications of the puerperium
Rates per 1,000 total (Live and Still) Births:— Walthamstow England and Wales Rates per million women aged 15-44:— Walthamstow	0.09	0.05	0.54	0.03	0.15
P. damainstow		The second	-		-

# Causes of Death as given by the Registrar-General for the year 1950

# Whole District

				7
Causes of Death	Males	Females	Total	1949
1. Tuberculosis, Respiratory	23	10	33	44
2. Tuberculosis, other	-	-	_	8
3. Syphilitic Disease	4	3	7	7
4. Diphtheria	-	-	-	_
5. Whooping Cough		-	-	1
6. Meningococcal Infections	-	1	1	-
7. Acute Poliomyelitis	1	1	2	4
8. Measles	2	_	2	-
9. Other Infective and Parasitic	2	- ,	2	10000
Diseases	2	1	3	
10. Malignant neoplasm, stomach	22	15	37	34
11. Malignant neoplasm, Lung,	22	13	31	34
bronchus	41	9	50	5
12. Malignant neoplasm, breast		26	26	22
13. Malignant neoplasm, uterus	_	12	12	10
14. Other malignant and lym-				
phatic neoplasms	65	58	123	138
15. Leukaemia, aleukaemia	4	1	5	
16. Diabetes	2	2	4	8
17. Vascular lesions of nervous		To the same of		
system	75	72	147	133
18. Coronary disease, angina	102	66	168	-
19. Hypertension with heart				Part I
disease	16	38	54	-
20. Other heart disease	104	119	223	370
21. Other circulatory disease	20	15	35	49
22. Influenza	3	6	9	16
23. Pneumonia	32	32	64	67
24. Bronchitis 25. Other disease of respiratory	4/	33	80	115
system	0	2	10	24
26. Ulcer of stomach and	8	4	10	
duodenum and	12	4	16	15
27. Gastritis, enteritis and	1.0		10	
diarrhœa	2	_	2	2
28. Nephritis and nephrosis	8	9	17	24
29. Hyperplasia of prostate	10	_	10	-
30. Pregnancy, childbirth,				
abortion	_	_	_	2
31. Congenital malformations	4	9	13	37
32. Other defined and ill-defined				0.1
diseases	51	59	110	94
33. Motor vehicle accidents	10	3	13	6
34. All other accidents	5	7	12	23
35. Suicide	10	7	17	1
36. Homicide and operations of				1
war			1 001	
Totals, 1950	685	620	1,305	1 200
Totals, 1949	639	660		1,299
The age distribution of Cancer	deaths wa	as as follo	ws:-	
Under 1-2 2-5 5-15	15-25	25-45	45-65	65 yrs.
1 yr. yrs. yrs. yrs.	yrs.	yrs.	yrs.	& over
1	_	16	81	150
		1000		NAME AND ADDRESS OF THE OWNER, WHEN

# INFANT DEATHS, NEO-NATAL MORTALITY AND STILLBIRTHS

				Stillbirths.		Neo-Natal Deaths.		Infant Deaths.	
Year.	Live Births.	Birth Rate.	No.	Per 1,000 live births.	Per 1,000 popula- tion.	No.	Per 1,000 live births.	No.	Per 1,000 live births.
1950 1949	1,598	13.0	37	23.1	0.30	33	20.6	42	26
1949 1948	1,836 2,068	14.9 16.8	27 46	14.7 22.2	0.22	31 24	16.9 11.1	54 43	29 20
1947	2,670	21.8	59	22.1	0.48	35	13.1	77	29
1946	2,544	21.5	70	27.5	0.59	49	19.2	87	34

The death rate from Diarrhœa and Enteritis in children under one year of age per 1,000 live births was 1.2.

The table showing the classification of infant deaths is given in the section of the report dealing with the care of mothers and young children (Section 22).

#### MATERNAL MORTALITY

The maternal mortality rates (per 1,000 total births) for the past five years have been given as follows:—

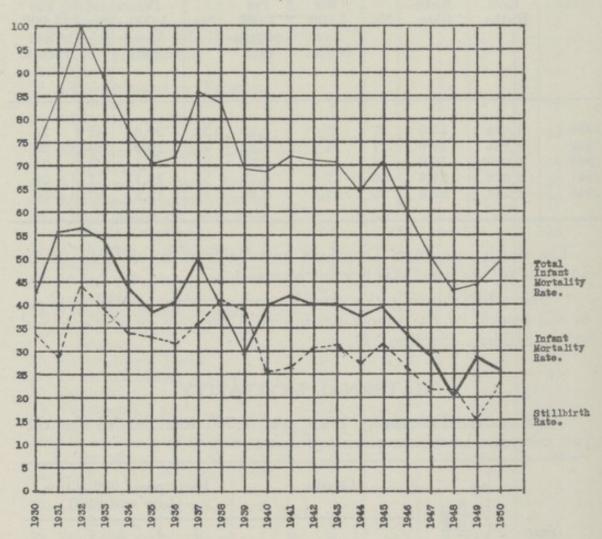
d.			Deaths.		Rates per 1,000 Births. (Live and Still)			
Yea	ar.	Total Births Registered.	Puerperal Sepsis.	Other Puerperal Causes.	Total.	Puerperal Sepsis.	Other Puerperal Causes.	Total.
1950		1,635	_	_	_	_	_	_
1949		1,863	_	2	2	_	1.07	1.07
1948		2,114	_	-	_	_	_	_
1947		2,729	_	4	4	_	1.46	1.46
1946		2,614	_	2	2	_	0.70	0.70

#### TOTAL INFANT MORTALITY

This is defined as the sum of the deaths that occur during child-birth and during the first year of life.

The attached graph shows the position since 1930:-

RATE PER 1,000 LIVE BIRTHS



## BIRTHS AND BIRTH RATES

In response to a special enquiry the number of births and rates for males and females since 1918 were extracted and are appended for purpose of record:—

Birth Rate per 1,000 Population

	Bir	ths Regist	ered	Birth Rates			
Year	Male	Female	Total	Male	Female	Total	
1918	1050	984	2034	8.0	7.9	15.9	
1919	1165	1136	2301	8.7	8.5	17.2	
1920	1669	1617	3286	12.5	12.2	24.7	
1921	1415	1399	2814	10.9	10.8	21.7	
1922	1355	1190	2545	10.5	9.1	19.6	
1923	1285	1244	2529	9.8	9.6	19.4	
1924	1161	1130	2291	8.8	8.6	17.4	
1925	1180	1171	2351	9.0	8.9	17.9	
1926	1114	1104	2218	8.9	8.8	17.7	
1927	1017	1008	2025	8.2	8.1	16.3	
1928	995	996	1991	8.1	8.1	16.2	
1929	976	958	1934	7.8	7.7	15.5	
1930	1001	958	1959	8.1	7.6	15.7	
1931	966	981	1947	7.2	7.3	14.5	
1932	909	880	1789	6.7	6.5	13.2	
1933	799	871	1670	5.9	6.4	12.3	
1934	869	846	1715	6.4	6.2	12.6	
1935	857	813	1670	6.4	6.0	12.4	
1936	902	813	1715	6.5	5.9	12.4	
1937	852	823	1675	6.5	6.2	12.7	
1938	799	818	1617	6.2	6.1	12.3	
1939	824	782	1606	6.3	6.0	12.3	
1940	820	755	1575	7.5	6.8	14.3	
1941	676	628	1304	6.9	6.4	13.3	
1942	865	853	1718	8.7	8.7	17.4	
1943	912	916	1828	9.1	9.1	18.2	
1944	992	923	1915	9.8	9.1	18.9	
1945	883	830	1713	8.5	8.0	16.5	
1946	1323	1221	2544	11.2	10.3	21.5	
1947	1368	1302	2670	11.2	10.6	21.8	
1948	1072	996	2068	8.5	8.3	16.8	
1949	976	860	1836	7.9	7.0	14.9	
1950	843	755	1898	6.9	6.1	13.0	

# MATERNAL MORTALITY, STILLBIRTHS & NEO-NATAL DEATHS

During 1950 there were no deaths classified as being due to pregnancy, childbearing or associated therewith.

The following table shows the maternal mortality, stillbirth and neo-natal death rates for the past five years:—

Rate (per 1,000 live births).	1950.	1949.	1948.	1947.	1946.
Maternal Mortality	_	1.09	_	1.49	0.78
Stillbirths	23.1	14.7	22,2	22.1	27.5
Neo-Natal Mortality	20.6	16.9	11.1	13.1	19.2

#### REGISTRATION OF BIRTHS

The Registrar-General's returns show the following registrations during the calendar year :—

(a)	Live Births.		Males.	Females.	Totals.
	Legitimate	*****	 808	728	1,536
	Illegitimate		 35	27	62
			843	755	1,598

The stillbirth rate per 1,000 population was 0.30.

Of the 1,668 birth registrations received in the Department during the year one was not notified. Appropriate action was taken.

Of the 1,668 local registrations, 324 belonging to other areas are excluded, leaving a nett total of 1,344.

	St. Ja		Hig		He		Wo		Ha En		High Hi	0.00	Т	tal.
Totals	м. 109	F. 84	м. 83	F. 92	м. 118	F. 91	м. 99	F. 96	м. 154	F. 132	м. 151	F. 135	м. 714	F. 630
Grand Totals	19	3	17	5	20	9	19	5	28	86	2	86	1,	344

# B.—GENERAL PROVISION OF HEALTH SERVICES IN THE AREA.

1. Public Health Officers of the Authority

There were no changes in the officers employed by your Authority.

2. Laboratory Facilities (See I.D. Section.)

#### 3. Ambulance Facilities

These are available from a local depot in Walthamstow which is administered centrally from Chelmsford.

#### 4. Scabies Clinic

The arrangements at the Special Treatment Centre detailed in previous reports were continued.

The Clinic premises are situated at the back of the Public Baths in High Street and treatment is my appointment only, i.e., through the family doctor or the Health Department.

Owing to a decrease in the number of cases requiring treatment, sessions were reduced to two per week, i.e., on Monday evenings and Saturday mornings as from 17th July, 1950.

The total cases treated during 1950 were 62, involving 140 treatments.

Facilities were made available to Leyton patients on the same basis as those from Wanstead/Woodford and the Forest Division, i.e., at a fee of 7/6d. per treatment, payable by the Local Sanitary Authority. There were 16 such treatments in 1950 out of the total specified above.

# 5. Hospital Accommodation

(a) Acute Cases.—There were no major changes in 1950 in regard to the hospital accommodation available for the inhabitants of the Borough.

The third Annual Report of the Forest Group, Hospital Management Committee, refers to the continuing shortage of beds, e.g., there were only 400 beds available for "acute" cases against the 1,400 which are required on the basis of five beds per thousand population. This does not take into account the complete lack of beds for chronic and long stay cases.

(b) CHRONIC CASES.—In order to ease the shortage in regard to accommodation for the chronic sick, the Board has a user arrangement for beds at three Nursing Homes in the Management Committee's area, and these are stated to be proving invaluable.

Regional Hospital Boards have asked that Medical Officers of Health shall support when necessary on "social grounds," the recommendations of medical practitioners for the admission of the chronic sick to hospital. All possible help was given when requested but even so, at the end of 1950, eighteen elderly chronic sick patients still awaited admission to a suitable hospital.

The following table shows the position in regard to hospital admissions considered and supported on "social" grounds.

1.	No. of	cases at end of 1949 awaiting Hospital admission	19
2.	No. of	new cases during 1950 considered on Social Grounds	32
3.	No. of	new cases during 1950 supported on Social Grounds	15
4.	No. of	old and new cases requiring Hospital admission	34
		admissions to Hospital during 1950	17
6.	No. of	outstanding cases at end of 1950	14

It is a pleasure to record the unfailing help and consideration experienced from the Senior Medical Officer (Dr. DeLargy) at Langthorne Hospital.

It has been stated (Ref. B.M.J. 1950, Vol. II, p. 699) that one-half of patients seeking admission to a hospital for the chronic sick were really long-stay annexe cases if such accommodation were provided by local authorities. Of these, one-half of this group (i.e., one-quarter of all patients seeking hospital admission) were reckoned to be suitable for care at home if provided with adequate domiciliary medical, nursing and domestic services.

With the disappearance of the former Public Assistance Officer there now seems to be no person charged with the authority to require the immediate admission to a suitable hospital of sick persons who need hospital care and who are willing and anxious for admission.

- (c) INFECTIOUS CASES.—The position in regard to beds for cases of infectious disease was at least on one occasion very unsatisfactory in regard to the admission of an urgent case of whooping cough with pneumonia. The shortage in regard to this type of accommodation appears to be one of nursing staff rather than one of actual bed accommodation.
- (d) Maternity.—The effect of the transfer of Thorpe Coombe Maternity Hospital to the Regional Hospital Board has, somewhat naturally, been to restrict the admission of Walthamstow patients who were expected to have a normal confinement other than the first and in favour of patients from other parts of the Hospital Group, and presumably requiring admission on obstetric and/or "social" grounds. At the same time it must be stated that no patient booking late and requiring hospital accommodation either on obstetric and/or "social" grounds has been refused admission to some other maternity hospital by arrangement made at Thorpe Coombe.

The percentage of Walthamstow residents admitted to Thorpe Coombe prior to the appointed day was of the order of 98—99. In 1949 it fell to 88.4 and in 1950, to 77.

### 6. Aged and Chronic Sick—Section 28/47 National Assistance Act, 1948

During the year it has been found necessary to visit an increasing number of persons with a view to the possible operation of Section 47 of the National Assistance Act, 1948. Most of these persons were sick and more often than not found to have no bed linen of any kind. In only one case had definite action under Section 47 to be initiated, the Court Order being finally obtained in the current year and renewed at the expiration of three months.

Under the Local Health Authority proposals in regard to Section 28 of the National Health Act, 1946, it is possible to provide bed and bedding only in cases of tuberculosis. Provision of bed linen and clothing in cases coming within the purview of Section 47 of the National Assistance Act is mainly one of a financial nature and would appear, therefore, to be the responsibility of the National Assistance Board.

It is gratifying to note that the Board has discretionary powers which enables it in certain cases to consider applications for grants in respect of bedding, bed linen, blankets, etc. The local Area Officer—Miss C. M. Burslam— has been most co-operative in this respect.

## 7. Public Health Act, 1936-Nursing Homes:-

	No. of Homes.	No. of Patients provided for.				
		Maternity Patients.	Others.	Totals.		
Homes first registered during the year	_	_	_	_		
romes on register at the end of the year	3	7	18	25		

There were no cancellations, refusals or appeals.

10 inspections were made by the medical staff. No difficulties in regard to supervision arose.

Routine enquiries are made with regard to unregistered homes.

# 8. Essex County Council Act

No new licences to practice chiropody were granted, and none lapsed.

#### C.—SANITARY CIRCUMSTANCES OF THE AREA

Water.—The authority responsible is the Metropolitan Water Board. Routine tests were carried out by the Board, and the previous practice was continued in notifying the Board of an actual or a suspected case of Enteric Fever so that special tests could be carried out at the addesses concerned.

All dwelling houses in the area are supplied direct with water. The information included in the report for 1949 in respect of Ministry of Health Circular 2/50, also applied to 1950.

# Sanitary Inspection of the Area

Mr. F. W. Kemp, Chief Sanitary Inspector, reports as follows:-

No. of inspections made.	No. of	No. of com-		of Notices		o. of y Notices.	Total Visits.
	nuisances detected.		Served.	Complied with.	Served.	Complied with.	Visits.
14,584	6,898	3,228	2,119	2,059*	290	329*	21,762

<sup>\*</sup> Includes notices outstanding from previous year.

Of the 2,119 informal notices served, 254 were in respect of business premises and the remainder (1,865) related to defects in private houses. Of the latter figure, 1,583 were complied with without resort to statutory procedure.

Owing to the failure of an Owner to comply with a statutory notice served under Section 9 of the Housing Act, 1936, the Council undertook the required work at a cost of £25 8s. 1d.

It was found necessary to institute legal proceedings against Owners for non-compliance with 14 Abatement Notices served under Section 93 of the Public Health Act, 1936. Orders were made by the Justices in six cases; fines with costs inflicted in three; costs ranging from £1 0s. 0d. to £2 2s. 0d. in three; and eight were withdrawn.

The following table shows the nature of work executed and improvements effected during the year:—

Drains tested, 424; Drains reconstructed or repaired, 465; Drains, obstructions removed, 198; Drains, means of access provided, 50; Drains, ventilation provided or improved, 88; Drains, ventilation repaired, 84; Soil pipes repaired or renewed, 104; Rain water pipes repaired or renewed, 211; Rain water

pipes disconnected from drains, 21; Roofs repaired or renewed. 874; Gutterings repaired or renewed, 359; W.C. pans or traps provided, 329; Gully traps provided, 109; W.C. flushing cisterns repaired or renewed, 245; W.C. floors concreted, 69; W.C.'s repaired and cleansed, 260; W.C.'s light and ventilation improved, 60; Waste pipes repaired, renewed or trapped, 206; New sinks provided, 109; Stoves and firegrates repaired or renewed, 369; Water supply reinstated, 13; Water supply taken off main, 11; Cisterns cleansed and covered, 18; Sculleries paved, 51; Yards and forecourts paved or repaired, 93; Dirty houses cleansed, 33; Dirty rooms cleansed, 840; Floors repaired, 476; Ventilations under floors provided or improved, 176; New damp-proof courses provided, 41; Sites concreted, 2; Offensive accumulations removed, 22; Animals improperly kept, removed, 7; Stables repaired and cleansed, 17; Manholes repaired or re-sealed, 170; Other causes of dampness remedied, 559; Miscellaneous repairs, 2,636.

#### INFECTIOUS DISEASES.

Visits to premises, 318; Re-visits to premises, 17.

#### DISINFECTIONS.

Rooms disinfected, 176; Articles disinfected at Low Hall Lane, 223; Articles destroyed at Low Hall Lane, 91.

#### SPECIAL PREMISES.

C	CIAL PREMISE	SS.						
								Visits
							Number	paid
	Factories (a)	Non-	power				108	184
	(b		-				465	653
	(c)	Oth	er pren	nises			54	84
	0.4						488	671
	Slaughterhou	ises		******		******	_	_
	Butchers	*****	*****				83	299
	Bakehouses						36	187
	Fishmongers,	Fish	Fryers	and	Curers,	etc.	44	187
	Cafés and Ca	aterers					114	443
	Grocers, etc.					*****	273	534
	Ice Cream N		cturers	and	Vendors		222	313
	Dairies and	Milkse	llers				67	87
	Laundries						2	16
	Hairdressers	******					74	81
	Rag and Bor	ne Dea	lers				3	21
	Piggeries						2	6
	Street Stalls						Numerous	354
	Greengrocers	3					93	170
	Stables					******	37	85
	Schools						_	19
	Convenience	S						64

As a result of the regular periodical visiting of the Special Premises the following works were carried out:—

BUTCHERS.

Special cleansings, 56; Pavings repaired, 8; Accumulations removed, 4; New galvanised bins provided, 21; Drains repaired, 5; W.C.'s repaired and cleansed, 20; Floors repaired and ventilated, 6; Light and ventilation improved, 7; Other improvements, 51.

BAKEHOUSES.

Special cleansings, 44; New ceilings fixed, 5; Floors repaired, 10; Light and ventilation improved, 5; Roofs repaired, 3; Other improvements, 36.

FISHMONGERS.

Special cleansings, 30; Yards repaved, 5; Accumulations removed, 4; Drains cleared, 4; Other improvements, 16.

GROCERS.

Store rooms cleansed, 104; Washing accommodation improved, 45; Other improvements, 104.

CAFES AND CATERERS.

Special cleansings, 76; Light and ventilation improved, 32; Floors repaired, 13; Other improvements, 128.

ICE CREAM MANUFACTURERS AND VENDORS.

Special cleansings, 7; Special cleansings of utensils, 5; Yard pavings repaired, 1; Other improvements, 12.

DAIRIES AND MILKSHOPS.

Special cleansings, 22; New fittings and other improvements, 13; Pavings relaid, 1; Light improved, 1.

HAIRDRESSERS.

Special cleansings, 18; Other improvements, 6.

STABLE PREMISES.

Cleansings, 20; Accumulations removed, 12; Roofs repaired, 3; Pavings repaired, 3; Other improvements, 9; Manure receptacles provided, 2.

LAUNDRIES.

Special cleansings, 2; Other improvements, 7.

RAG AND BONE DEALERS.

Cleansings, 4; Accumulations removed, 1.

PIGGERIES.

Cleansings, 2.

Camping Sites.

There are no authorised sites in the area. The caravan dwellers at Higham Hill still remain.

#### Smoke Abatement.

The number of complaints received during the year was eight. Two of these related to the burning of accumulations of factory waste and were suitably dealt with.

Three Intimation Notices were served and improvements brought about.

In one case an additional boiler is being provided and in another a better grade of fuel is being sought.

Several firms have taken advantage of the offer of the Ministry of Fuel & Power to provide assistance and advice by technical officers appointed for the purpose.

Eradication of Bed Bugs, etc.

The number of houses reported to be bug-infested is still comparatively low.

Fumigations or special sprayings with DDT solutions were carried out at 108 rooms and insecticides were issued, free of charge, to tenants of 85 premises.

Remedial measures were taken regarding a rather serious house-fly infestation in the South-West section of the district.

Hydrogen Cyanide (Fumigation of Buildings) Regulations 1938:—

No notifications were received during the year.

Swimming Baths and Pools.

The model bye-laws of the Ministry of Health were adopted in 1938.

(a) MUNICIPAL BATHS, HIGH STREET.—This is a covered swimming bath. Mr. W. Cantes kindly contributes the following report:—

"From January 1st to December 31st, 1950, the swimming bath was open on 292 days. The number of bathers during this time was 108,862.

"The maximum load was on June 5th, when we had 1,092 bathers."

Sampling was carried out on four occasions, with satisfactory results.

(b) WHIPPS CROSS BATHING POOL.—This is a large open-air pool situated in Epping Forest, in the area of the Borough of Leyton and a few hundred yards from the Walthamstow boundary.

It is administered by a joint Committee representing the two Boroughs.

The pool is supervised by the Medical Officer of Health for Leyton, who kindly sends a copy of the analytical findings when samples are taken.

- (c) SOUTH-WEST ESSEX TECHNICAL COLLEGE.—Sampling was carried out, with satisfactory results.
- (d) Forest School.—This is a small swimming bath with a capacity of approximately 47,000 gallons, treated with "Voxsan" with frequent changes of water. Sampling was carried out, with satisfactory results.
- (e) Kingfisher Pool.—The Managing Director kindly gives the following particulars:—
  - "Due to overhaul of the chlorination and infiltration plant there is a tendency to a turnover more consistently towards six hours.
  - "Due to inclement weather the approximate number of swimmers was 20,000.
  - "It was not necessary often to have to run the plant all night over the week-ends."

Bacteriological and chemical analyses were carried out on four occasions with satisfactory results.

#### D.—HOUSING

#### (a) Statistics

The Borough Architect, F. G. Southgate, Esq., A.R.I.B.A., A.M.T.P.I., has kindly contributed the following:—

Houses erected by the Local Authority during 1950:-

Hoe Street Ward St. James Street Ward Higham Hill Ward High Street Ward Hale End Ward	*****	*****	Nil Nil 80 Flats (P) 4 Houses (P) 36 Flats (P) 134 Houses (P)
Wood Street Ward TOTAL		*****	Nil  116 Flats (P) 147 Houses (P)

Houses erected by Private Enterprise during 1950 :-

		-			
Hoe Street Ward	******	*****	3 Houses (R)		
St. James Street Ward		******	Nil.		
Higham Hill Ward	******	******	12 Flats (P)		
High Street Ward	******	******	2 Flats (P)		
Hale End Ward	******	*****	22 Houses (P)		Houses (R)
Wood Street Ward	******		1 House (P)	29	Houses (R)
TOTAL	23 Hou	ises (P	) 14 Flats (P)	41	Houses (R)

Note: (P) Post-war permanent Houses and Flats.

(R) Rebuilding war-destroyed Houses.

## Houses Erected During 1950

During the calendar year 1950, 147 new houses and 116 new flats have been erected.

41 War destroyed houses were rebuilt by private enterprise and 37 new houses and flats were erected by private enterprise.

The new houses erected by the Corporation are of traditional construction with a living and dining room and a kitchen on the Ground Floor and three or four bedrooms on the first floor with a bathroom and separate W.C. One small scheme of four houses which have been erected is, however, of an experimental nature. The houses are two bedroom type and of a simplified system of construction to reduce costs.

The principal flats erected during the year are those at "Oak Hill Court" and the Scheme comprises 12 one bedroom flats and 24 two bedroom flats, with living room, kitchen, bathroom and W.C.

The main housing sites were those at Brookfield and Montalt Road.

# (b) Inspection

The following information is given in the form required by the Ministry of Health, and is supplied by the Chief Sanitary Inspector:—

I.—	-Ins	PECTION OF DWELLING-HOUSES DURING THE YEAR:	-
	(1)	<ul> <li>(a) Total number of dwelling-houses inspected for housing defects (under the Public Health or Housing Acts)</li> <li>(b) Number of inspections made for the purpose</li> </ul>	3,039 8,743
	(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	6
		(N.B.—These comprise individual unfit houses)	
	(4)	Number of dwelling-houses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation	1,859
II.—		MEDY OF DEFECTS DURING THE YEAR WITHOUT SE F FORMAL NOTICES:—	RVICE
		Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their Officers	1,583
II.—	-Act	TION UNDER STATUTORY POWERS DURING THE YEAR:-	-
	A.	Proceedings under Sections 9, 10, and 16 of the Housing Act, 1936:—	
		(1) Number of dwelling-houses in respect of which notices were served requiring repairs	5
		(2) Number of dwelling-houses which were rendered fit after service of formal notices:—	*11
		(a) By owners	*14

	(b) By Local Authority in default of owners (at a cost of £25 8s. 1d.)	1
	(c) Withdrawn—premises vacated and under- taking not to allow future occupation	Nil
В.	Proceedings under the Public Health Acts:—	
	(1) Number of dwelling-houses in respect of which notices were served requiring defects to be remedied	277
	(2) Number of dwelling-houses in which defects were remedied after service of formal notices:—	
	(a) By owners	*306
	(b) By Local Authority in default of owners	Nil
C.	Proceedings under Sections 11 and 13 of the Housing Act, 1936:—	
	(1) Number of dwelling-houses in respect of which Demolition Orders were made	2
	(2) Number of dwelling-houses demolished in pursuance of Demolition Orders	*8
D.	Proceedings under Section 12 of the Housing Act, 1936:—	
	(1) Number of separate tenements or underground rooms in respect of which Closing Orders were made	1
	(2) Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement or room having been rendered fit	Nil
	* Including those outstanding from previous year.	
	(c) Housing Act, 1936	
	Unfit Houses	
The	following premises were dealt with as follows:-	
Data of	Houses Demolished:	
Date of		
194	17, 10, 17 0 20, Coditolia, 1 11100	
19	21, Coditeriny 1 mee	
194		

#### Demolition Orders:

36, Elm Grove

38, Elm Grove

# Closing Orders: 197, Markhouse Road (Basement)

### Unfit Houses:

The Ministry of Local Government and Planning requested a return of unfit houses not included in clearance areas and for the period 1st April, 1945, to 31st March, 1951. The particulars given were as follows:—

	Number of persons
	s displaced
(a) Houses demolished as a result of formal procedure	
under Section 11 17	55
(b) Houses demolished as a result of informal notices	
preliminary to formal procedure under Section 11 1	8
(c) Houses closed in pursuance of an undertaking given	
by the owners under Section 11 1	_
(d) Parts of buildings closed (Section 12) 8	20
(e) Houses made fit—	
(i) as a result of formal notices under Sections	
9—12 315	
(ii) as a result of informal notices preliminary to	
formal procedure under Sections 9—12 11149	_
(2) Housing Act, 1949	
(f) Closing Orders made under Section 3 (1)	-
(g) Demolition Orders determined and Closing Orders	
substituted under Section 3 (2)	-
(h) Demolition Orders quashed under Section 2	_
(ii) Demontion Orders quasied ander occiton w	

### Landlord and Tenant (War Damage) Acts, 1939-41.

No applications were received from owners of houses for certificates.

## Rent and Mortgage Restriction Acts.

During the year nineteen certificates were granted to tenants. Two clearance certificates were issued to owners.

# Housing Act, 1936, Section 62.

Applications for "permitted number" were received and certificates issued during the year respecting 125 lettings.

## Local Land Charges.

Particulars relating to outstanding sanitary notices were supplied in reference to 1,613 enquiries.

### (d) General.

The following Report is kindly supplied by Mr. J. E. West, your Council's Housing Manager during the year under review:—

"Priory Court comprising 20 six-storey blocks of flats was completed during 1950 and the work of laying out the grounds of the Estate is now being carried out by contractors. This estate, the first of its kind in Walthamstow, has proved of immense benefit to the housing problem of the Borough and while it is not advocated that flats are more desirable than houses, it must be borne in mind that sites available in the Borough for building of houses are now to all intents and purposes non-existent. Therefore, the Council must make the most of all land that is at their disposal.

"Other schemes completed were the 105 houses on the Brookfield Estate and three blocks at Oak Hill Court comprising 36 flats. The 48 houses on the Montalt Estate have also been erected and are now in full occupation. The 22 flats included in the Montalt scheme will be ready for occupation during 1951.

"The policy of the transfer of tenants and co-operation with private landlords mentioned in previous Reports has been actively pursued and it is pleasurable to record that the negotiations involved have proved well worth while. This is borne out by the fact that although 257 new properties became available for letting during the year, suitable accommodation was obtained for 308 families on the register.

"The rehousing of families living in overcrowded conditions is still our major problem. It was serious in the pre-war years but in fact was overcome just prior to the outbreak of war. I cannot see an early solution to the problem existing to-day, when due regard be paid to the facts available, i.e. 677 families living in overcrowded conditions on our register, with an authorised building programme of 500 houses by the end of 1952 which, in turn, involves the development of all vacant building sites and Walthamstow will be a completely built-up area. Regard must, however, be given to the fact that the building of houses is being treated at National level and it is pleasing to know that the Council has been able to comply with the building quota authorised by the Ministry of Health.

"Of all the housing problems facing the Council, however, I consider that of the young married couple living with "in-laws" and those awaiting marriage, to be the most tragic and apparently insoluble unless drastic measures are undertaken to prevent broken marriages, disruption of home life—yes,

including the home life of the "in-laws" themselves who are not always blameworthy or responsible for the present situation. (2423 applicants registered as living with relatives).

"The relief anticipated by participation in the provision of housing in the New Towns such as Harlow, seems to be illusory, and no substantial early relief can be expected.

"Post-war rents are a further problem which concerns not only the successful applicant but also the landlord who must include in his budget, some substantial figure to cover future maintenance of the property. Having regard to postwar costs, the figure to be provided is almost three times that of pre-war and must be reflected in the nett rent to be paid by the tenant.

"Still another housing problem is that of housing on medical grounds. Such cases continue to be restricted to families affected by Tuberculosis. Again, pre-war, we had rehoused all such medically recommended cases. To-day there are still no less than 70 families on the waiting list—all medically recommended for rehousing. The shortage of sanatorium treatment is the probable cause of this high figure.

"In concluding this, which will be my final contribution to the Annual Report of the Medical Officer of Health on completion of 20 years service as Housing Manager to the Council, I would pay tribute to all who have in any way been associated with me in this social problem, for their patience, tolerance and loyalty. Particularly will I remember with pleasure the interest and keenness of my staff who always worked as a team for the ultimate good of the service, Alderman Mrs. Miller for many difficult years as Chairman, Members of the Housing Committee, property owners and the well established estate agents, particularly Messrs. Warner Estate Ltd., who have all contributed in no small measure to our task of housing those most in need."

(e) Rehousing of Medical Cases

During 1950, fifty-four cases claiming priority on medical grounds, in connection with rehousing and tuberculosis, were investigated. These cases are classified as follows:—

Class I.

(a) An urgent case on medical (clinical) grounds, and sputum positive.

- (b) Unsuitable housing accommodation, e.g., overcrowding on standards of Housing Act, 1936, especially if the Chest Physician advises separate bedroom.
- (c) Young children or adolescents in the family or in the same house.

#### Class II.

Less urgent cases with two of any of the three conditions (a), (b) and (c) mentioned above.

#### Class III.

Cases with one of conditions (a), (b) and (c).

#### Class IV.

Rehousing not urgent at time of consideration but for reconsideration if any of the conditions alter.

Similar consideration is given to families with young children or adolescents living in the same house as a sputum case.

The position at the end of the year was as follows:-

On List	Added	Removed	On List
Dec.	during	from list	Dec.
1949	1950	1950	1950
71	22	23	70

The 70 cases now on the list have been given the following classification:—

Class I: 14; Class II: 20; Class III: 7; Class IV: 29. Total: 70.

Approximately 40 reviews were carried out in connection with tuberculosis priority claims in cases already on the register.

Forty-three new cases—apart from the tuberculous—were recorded as needing special investigation and report, and forty-eight such cases—previously investigated—were reviewed.

A grand total of 205 cases were investigated during the year in order to assess the medical claims and prevent duplication of enquiries by the Housing Department from which the closest co-operation has been received.

#### E.—INSPECTION AND SUPERVISION OF FOOD

The following is contributed by the Chief Sanitary Inspector:—

# (a) Milk Supply.

Designated Milk.

During the year 144 samples of milk were submitted to the Counties Laboratories for bacteriological examination, including Phosphatase, Methylene Blue and Turbidity tests.

These samples of milk were taken from roundsmen during the course of delivery or on arrival at Schools. They include the bi-monthly sampling of the two dairymen holding Pasteuriser's Licences.

The following table gives details of samples taken :-

	No. of	Results			
Grade	Samples	Satisfactory	Unsatisfactory		
Pasteurised Tuberculin Tested Pasteurised Sterilised	111 24 9	111 24 9	=		
Totals	144	144	-		

Biological Test.

Four samples of pasteurised milk were examined, all of which were satisfactory.

THE MILK (SPECIAL DESIGNATION) (PASTEURISED & STERILISED MILK) REGULATION, 1949.

THE MILK (SPECIAL DESIGNATION) (RAW MILK) REGULATION, 1949.

Licences for the sale of milk under Special Designations were granted as follows:—

Dealers' Licences.		Supplementary	Licence	s.	
Pasteurised	 47	Pasteurised			10
Sterilised	 66	Sterilised			10
Tuberculin Tested	 24	Tuberculin	Tested		9
Licences (Plant). Pasteurisers	 2	Tuberculin	Tested (D	ealers	) 2

There are no Cow-keepers in the district.

The number of Retail Milk Distributors is 67.

Eighty-seven visits were paid to registered dealers and a satisfactory standard of cleanliness was maintained.

## (b) Ice Cream.

Sixty-one applications for Registration were received.

New licences were granted as follows: -

Manufactur	ers				*****	1
Vendors, N	lew				*****	39
Vendors, T	ransfers					18
Refused			*****			3
Number on Reg	gister at end	of year			*****	222
Number of abovetc., for ma	ve receiving anufacturing		ns of	fats,	sugar,	25*

<sup>\*</sup> Twelve of these pass their dockets to other firms who manufacture for them.

ICE CREAM (HEAT TREATMENT, ETC.), REGULATIONS, 1947/8.

The trade has continued to maintain a very good standard to comply with the above Regulations.

MEDICAL EXAMINATION—TYPHOID, ETC., CARRIERS.

The scheme of voluntary medical examination and blood testing of employees in the ice cream trade has now reached its fourth year.

A session is held one afternoon a week and 203 employees presented themselves for the purpose of having blood specimens taken by the Medical Officer of Health.

No "Carriers" were found during the period under review.

BACTERIAL QUALITY AND GRADING OF ICE CREAM.

One hundred and fourteen samples were submitted for bacteriological examination and for grading in accordance with the Provisional Test of the Ministry of Health.

The following summary shows the comparative results of the old standard test and the new (provisional) test. Grades 1 and 2 of the latter are considered satisfactory.

Plate Count	Coliform Reaction (in 1/10 ml.)	Bacterium coli (in 1/10 ml.)		*Pass- able	Not Pass- able	Red	Meth	nylene n		Test
* **	( 1, 10)			DOTAL T						1
3,000	-		X		1	lot in		nours		1
800	_	_	X			>>	41	>>		1
2,500	_		X			>>	41	99		1
1,400			Х			>>	41	53		1
1,600	-		X			33	41	33		1
600	-	-	x			55	41	33		1
3,000	_		X			3.7	41	33		1
2,500	_	_	X			33	41/2	22		1
2,000	-		X			33	41	33		1
800			X			22	41	>>		1
1,400			X			99	41	**		1
800			х			33	41	99		1
500			X			33	41	33		1
1,200		_	X			33	41	23		1
1,200	_		X			"	41	33		1
600			X			33	41	**		1
400	_		x			33	41	33		1
500			X			33	41	59		1
400	_	_	X			99	41	35		1
600	_	_	X			33	41	33		1
3,000	_		X			"	41	"		1
700			X			23	41	22		1
2,000			х			99	41	33		1
100	_	_	х			33	41	,,		1
200	_		X			99	41	53		1
500			X			22	41	77		1
900			Х			22	41	22		1
3,000	_		X			53	41	33		1
500	-		х			11	41	11		1
10,000		_	Х			11	41/2	**		1
2,500	_	_	X			>>	41	33		1
300	2 - 1		X			>>	41	**		1
42,000	x2 tubes			X		"	41	,,		1
8,200	2.1		X			33	41/2	"		1
5,000	x2 tubes			X		33	41/2	22		
6,800	-	_	X			33	44	33		1
1,600	_		X			59	41	33	1	1
600		_	X			55	45	33		1
200			X			33	41/2	"		
400	-1 -1-		X			33	41	33		1
700	x1 tube		X			55	41	22		1 1 1 1
12,000	x1 tube	w1 tubo	x			**	41	17		1
6,300	x2 tubes	x1 tube			X	22	4½ 4½	>>	-	
6,200		_	х			**	4分	,,		
400	w1 tuba		X			**	41	"		1
1,100	x1 tube		X			33	41	33	-	
3,200	x1 tube		х			99	4½ 4½	99	-	1
9,000	x1 tube		X			27	42	**		
4,500	_	-	X			"	41	22		1
900		A STATE OF	X			53	41	55	-	1
1 200			X			33	41	**		1
1,200 650			X			>>	41	>>		1 1 1 1 1 1
030			X			33	41/2	"		

Plate Count	Coliform Reaction	Bacterium	Satis-	*Pass-	Not Pass-	Re	Me	thylene	Blue	Test
	(in 1/10 ml.)	(in 1/10 ml.)		able	able	100	time		Grad	le
400	_	_	х		N	ot i	n 41	hours	1	
800	-	_	x			,,	41		1	
300	_	_	X			,,	41	"	1	
800	_		x			,,	41	33	1	
100	_	_	X			23	41/2	"	1	
5,800	_	_	Х			33	41/2	33	1	
12,000	7	-	X			22	41	>>	1	
5,800			X			53	41	33	1	
1,800		detail and	X			37	4½ 4½	"	1	
6,300	_	_	X			57	41/2	"	1	
300	_		X			"	41/2	22	1	
100	_	_	x			"	41	"	î	
600	_	_	X			33	41	,,	1	
100			x			33	41/2	,,	1	
800	_	_	X			>>	41/2	"	1	
100		Winds of	X			22	41/2	33	1	
2,700	x1 tube	x1 tube			X	>>	41/2	"	. 1	
3,000 5,300	x2 tubes	-	X		Tes			acticab	-	
5,800	x2 tubes			X		In		hours	2	
60,000	AZ tubes			X X		"	4	**	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	
10,000			x			22	4	>>	2	
5,800	x1 tube	_	x			"	4	"	2	
12,000	x1 tube	_	X			"	4	"	2	
8,000	x2 tubes	_		x		33	4	"	2	
12,000	x3 tubes	_		X		33	31/2	33	2	
7,200	-	-	х			22	3 3 3 3 3 3 3 3 3 3 3	"	2	
1,700 7,500	x2 tubes	_		Х		22	31	"	2	
4,200	x1 tube		X			33	3 1	"	2	
12,000	x1 tube		X			"	32	27	2	
6,200	AI tube		X			99	32	"	2	
30,000		Car Trans	X			99	32	22	2	
8,000	x2 tubes	1000	^	x		>>	3	33	2	
5,200	x2 tubes	_		x		55	3	33	2	
700	x3 tubes			x		"	24	"	2	
37,000	x2 tubes	_		x		,,	21	"	2	
18,000	x3 tubes	_		x		,,	21/2	33	2	
700 25,000	x1 tube	_	х			33	21/2 21/2	33	2	
180,000	x3 tubes			X		23	22	"	2	
250,000	x3 tubes			X		33	2 2	22	3	
42,000	x3 tubes	x2 tubes			X	22	2	>>	3	
28,000	x2 tubes	xz tubes			x	33	2	"	3	
17,000	x2 tubes	x1 tube		Х	-	22	$\frac{1\frac{1}{2}}{1\frac{1}{2}}$		3	
240,000	x3 tubes	-			x	33	1	"	3	
56,000	x3 tubes			x	-	>>	1	"	3	
9,000	x3 tubes	-		x		33	1	"	2 2 2 2 2 2 2 3 3 3 3 3 3 3 3 3 3 3 3 3	
14,000	x3 tubes	-		x		"	1	"	3	
180,000	x3 tubes	-		x		11	1	"	3	
250,000	x1 tube	-			x	22	1 1 2	33	3	
72,000	x3 tubes x3 tubes	-		X		2.5	0	"	4	
80,000	x1 tube	_		X		27	0	>>	4	
140,000	- Cube	MILL STREET		X		,,	0	>>	4	
120,000	x3 tubes	1		X		23	0	33	4	
	3000			X		23	0	33	4	

Plate Count	Coliform Reaction (in 1/10 ml.)	Bacterium coli Satis- (in 1/10 ml.) factory	*Pass- able	Not Pass- able	Redu	Methylene action me	Blue Test Grade
30,000	x3 tubes	_	x		In	0 hours	4
200,000	x3 tubes	x2 tubes		x	,,	0 ,,	4
23,000	x3 tubes	-	X		,,	0 ,,	4
80,000	x3 tubes	_	x		"	0 ,,	4

<sup>\*</sup> The Bacteriologists' reports call attention to desired improvements.

By the old test, of a total of 114, 78 were in the categories "Very Satisfactory" or "Satisfactory" and 28 "Passable." In the latter group the bacteriologists invariably amplified their classification with a special note.

By the new (provisional) test, 71 were in Grade I, 22 Grade II, 11 Grade III, 9 Grade IV and one could not be examined.

When an unsatisfactory sample is obtained the vendor is re-sampled as soon as possible.

In the case of ice cream manufactured other than within the district, copy reports are sent to the appropriate local authority.

#### Ice Lollies.

Twelve samples were submitted to the Public Analysts who reported all free from metallic poisoning.

## (c) Meat and Other Foods.

The Live Stock (Restriction of Slaughtering) Order, 1940, continued in force and no slaughtering was carried out.

The following summary gives details of food condemned as unfit for human consumption. Where possible the food was salvaged for animal feeding purposes, etc.

1324	tins	Evaporated Milk	17	tins	Sardines
496	,,	Full-Cream Milk	12	,,,	Herrings
300	**	Machine Skimmed	4	,,	Sild
		Milk	2	,,	Crab
78	,,	Malted Milk	2		Mackerel
557	,,	Baby Food	1	tin	Mussels
76	.,	Strained Foods	1	"	Shrimps
363	**	Roe	1	"	Fish Omelets
67	"	Pilchards	640	tins	Peas
48	"	Crawfish	402	,,	Beans
40		Fish Paste	82	,,	Carrots
32	,,	Brisling	64	,,	Tomatoes
31	"	Salmon	38	"	Beetroot

01		37 . 11 0 1 1			
	tins	Vegetable Salad			Spaghetti
9	"	Rhubarb			Sauce
9	11	Spinach		-	Pickles
5	"	Parsnips	16	,,	Horse-radish
3	"	Tomato Juice	62	"	Mustard
1	tin	Celery	2	bots.	Vinegar
1	22	Turnips			Salad Cream
80	lbs.	Potatoes			Pease Pudding
595	tins	Plums			Black Olives
38	,,	Grapes	6		French Capers
37	"	Cherries	187		Soup
24	"	Peaches			Beef Cubes
18	"	Pears	1		Beef Extract
17	33	Blackberries	17		Lentils
15	33	Greengages			Gravy Salt
14	"	Damsons	1		Gravy Browning
13	"	Gooseberries	199		Luncheon Meat
12	"	Grapefruit Juice	111		Meat in Gravy
12	"	Loganberries	43	,,	Beef Loaf
10	22	Prune Puree	23	"	Pork Loaf
7		Pineapple	22	"	
	"	Apples	17	"	Ham and Veal Loaf
6 5	"	Apricots	3	"	Veal Loaf
4	"	Blackcurrants	45	1)	Ham Loaf
4	"	Strawberries		"	Meat & Vegetables
	"		12	13	Pork
3	22	Pineapple Jelly	16	33	Sausage Meat
3	22	Pineapple Juice	7	"	Brawn
4	22	Orange Juice	7 5	"	Potted Meat
2	"	Apple Puree		"	Minced Beef
1	***	Oranges	4	11	Tongue
1		Guavas	8	"	Stewed Steak
1		Raspberries	4	"	Galantine
1	22	Apple & Blackcurrant	1	tın	Cottage Pie
0	:	Jelly Jelly	1	"	Bacon
01	jars	Fruit Salad	1		Meat Paste
77	IDS.	Apricot Pulp (tinned)			Corned Beef
77	2.0	Plums (tinned)	318		Ham (tinned)
141	tins		270		Beef
42	22	Marmalade	2484		Bacon
44	33	Sandwich Spread	841	,,,	Sausages
19	jars	Lemon Spread	72	"	Jellied Veal (tinned)
0	bots.	Cheese Sandwich	512	,,,	Rabbit
-		Spread	50		Pressed Beef
2	tins	Syrup Spread	10		Tongue
2	Jars	Honey Spread	91		Pressed Ham
2	tins	Chocolate Spread	8		Pressed Pork
0	**	Pudding	61		Kidney
2	33	Mincemeat	3	,,	Sausage Meat

2 lbs. Brawn	1 pkt. Blanc Mange Powder
	247 boxes Cheese
1187 ,, Cereals	4½ lbs. Cheese
14 pkts. Cerioca	
1 pkt. Tapioca	193 pkts. Nursery Rusks
1 ,, Semolina	147 ,, Patent Toast
23 bots. Coffee	86 lbs. Biscuits
5 tins Cocoa and Malt	9 ,, Sandwich Cake
57 lbs. Cocoa	4½ ,, Windsor Cake
3/4 ,, Tea	196 " Marzipan
1 bot. Ginger Wine	80 ,, Confectionery
1 " Cordial	144 bars Chocolate
357 lbs. Sugar	41½ stone Skate
2½ ,, Salt	14 ,, Plaice
119½ lbs. Prunes	11 ,, Whiting
112 ,, Figs	10 ,, Dogfish
33 ,, Currants	8 " Haddock
77 ,, Margarine	6 ,, Roker
196 pkts. Cake Flour	5 ,, Cod
62 ,, Pastry Mixture	4 ,, Ray
26 ,, Sponge Mixture	2 ,, Roe
2 ,, Pancake Mixture	2 ,, Prawns
37 lbs. Flour	541 Eggs
224 ,, Bi-carbonate of Soda	
2 pkts. Suet	15 Meat Pies
28 lbs. Liquid Frozen Eggs	36 Marshmallows
210 ,, Cornflour	40 Chocolate Rolls
	25 Swiss Rolls
72 pkts. Jelly	20 01100 21010

## (d) Adulteration, etc.—Food and Drugs Act, 1938.

One hundred and seven samples of food and drugs were submitted to the Public Analysts.

Four samples were found to be unsatisfactory. Details are given below:—

Description of Article Ginger Wine	Result of Analysis Blackish mould growth in suspension.	Action Taken Formal sample proved satisfactory.		
Self-raising Flour	Excessive proportion of acid sodium phosphate.	Manufacturer warned. (No stock available).		
	Deposit of miscellane- ous "dirt."			
Liqueur Truffles	Stale and out of con- dition.	Vendor warned. (No stock available).		

The following summary gives details of food and drugs sampled and the results of analyses:—

		Formal	No. examine	ed Total	Formal	o. unsatisfac	tory
Milk		17	1	18	Tormar	1	1
Oliva Oil	*****		2	2		_	_
Salad Cranm	******		1	1		_	_
Managarian			î	1		_	
C		THE REAL PROPERTY.	3	3			_
Tomato	******		1	1			MET O
C D.of		3		3	- 1		_
D I	******	2	1	3	_	_	_
Unalassified	Access	2	2	4		_	_
Liver	******	1	_	1	_	_	_
Luncheon Meat	******	1		î	_		_
Deaf Deate		_	1	î			
Jam, Pineapple	******	1	_	1		CAN DE M	_
Sandwich Spread	*****	_	2	2			_
Vinegar, Malt	******	8		8	_		_
Calatina	******		1	1			
Coconut, Desiccated			î	î	_		
Daal	******		î	i			
Pudding Mixture	******	HILL	î	i	-	_	_
Baking Powder	******		2	2	_	_	_
Com Diana	******	1	-	ĩ		_	_
Self-raising Flour	******		1	1		1	1
Almonds, Ground		1		î			_
Face	******		1	i		_	
C	******		2	2			_
Chocolate Easter Egg	******		1	1	_	_	
Truffles, Liqueur	*****	2	_	2	1	_	1
Croam Run	******		1	1	_	_	
Gingar Wina	******		2	2		1	1
Sparkling Orange		1		1		_	_
Lemonade Crystals	******	î	1	2			
Ice Cream	******		18	18			_
Water Ice	******		1	1	_	_	
Ice Inllies	******		11	11	_		
Vita Cream	******		1	1	_	_	_
Boracic Ointment	******		1	1	_		
Zinc Ointment	******	_	î	i		_	-
Syrup of Figs	******		1	1	_	_	_
Tincture of Iodine	******		1	1		-	_
Saccharin Tablets	******		i	1		_	_
T HOLEG	******		100				
				107			4
						-	

## (e) Chemical and Bacteriological Examination of Foods.

Chemical examinations of samples of food are carried out by the Public Analysts, Mr. G. Taylor, F.R.I.C., and Dr. J. H. Hammence, F.R.I.C., at 20, Eastcheap, E.C.3, and bacteriological examinations by the Counties Public Health Laboratories, 66, Victoria Street, S.W.1.

Biological tests are undertaken by Dr. A. L. Sheather of Chorley Wood.

## (f) Clean Food Campaign.

Steady progress has been made during the year.

The trades on which special attention has been concentrated include Caterers, Bakers, Grocers and General Storekeepers.

As a result of this effort many further improvements to premises and fittings have been made including additional sinks or double sinks, hand basins, crockery drying racks, improved hot water supplies, ventilation to Kitchens and Cafes, the provision of adequate cold storage and counter show cases.

Most of the large "Multiple Stores" have improvement schemes in progress or in hand.

The inspection of General Stores is progressing but presents a number of difficulties.

In some instances it has been found that the proprietor and his wife have had no training in food hygiene and possess very limited knowledge regarding hygienic standards. In most cases advice is gladly accepted, and suggested improvements in the conduct of their businesses are well received.

A considerable number of the more successful Storekeepers take a pride in keeping their small shops up to a standard of hygiene comparable with that of the big stores.

The Council adopted Byelaws re Handling, Wrapping and Delivery of Food and Sale of Food in the Open Air, on the lines of the model byelaws of the Ministry of Food. These became operative as from the 26th June, 1950.

In order to make known the coming into force of the byelaws, a circular letter was addressed to all food traders and no less than 1,183 were notified.

It will take some time for traders to realise the full meaning of the byelaws and a degree of latitude will have to be afforded them.

Lectures in connection with the Clean Food Campaign have been given by the Medical and Sanitary Inspector's Staffs; film strips being used to create added interest.

In the Autumn, the Council Chamber was used for a day for the showing of three films of special interest to food-handlers. The films were shown in conjunction with the Central Office of Information who provided all the necessary equipment and staff.

The free use of Public Conveniences and washing facilities has been continued.

## (g) Food Poisoning Outbreaks.

Information is given	below :-	-		
Schools Meals Service		1	Cases 10	Meals served 280
Private Houses	*****	3	16	Not prepared at home
Hospital Ward	*****	1	10	18 in Ward
Factory Canteen		1	42	200

- (a) Schools Meals Service. A specimen meal was available and this was sent to the Pathologist at Epping. Swabs from the Cook's nose were also sent. Both gave a growth of coagulase positive staphylococcus.
- (b) Hospital Ward. Canned Stewed Steak was suspected. A can of steak similar to that used was sent for examination.
- (c) Factory Canteen. Illness followed 10-12 hours after midday meal. Meat, Canned Carrots and Canned Beans, also faeces specimens sent to Laboratory. No causal agent identified.

## DISEASES OF ANIMALS ACTS

Swine Fever Order, 1938.—No action necessary.

Sheep Scab Order, 1938.—No action necessary.

Regulation of Movement of Swine Order, 1950. — Eleven licences were dealt with.

Parasitic Mange Order, 1938.—No action necessary.

The following Orders were dealt with as necessary:-

Live Poultry (Regulation of Sales, Exhibitions and Movements) Order, 1950.

Poultry Carcases (Importation) Order, 1950.

Foot and Mouth Disease (Infected Areas) Special Order No. 6, 1950.

Exportation of Horses (Minimum Values) Order, 1950.

# RATS AND MICE DESTRUCTION ACT, 1919 AND PREVENTION OF DAMAGE BY PESTS ACT, 1949

The Rats and Mice Destruction Act, 1919 was repealed by the Prevention of Damage by Pests Act, 1949 as from the 31st March, the date on which the latter Act came into force.

Certain financial benefits have been brought about by the introduction of the new Act, as local authorities are now permitted to give a free service to owners or occupiers of private dwellings

without prejudicing their claims for Treasury grants equal to one half of the expenditure incurred. Work undertaken at business premises is still charged for on a cost plus basis.

Two trained Rodent Operatives continue to be mainly engaged in the work of rodent repression in private dwellings and business premises.

The methods suggested by the Ministry of Agriculture and Fisheries (Infestation Control Division) are strictly followed and the Council continue to participate in the Ministry's Scheme.

The pre-baiting and poison baiting methods continue to be successful.

The following is a summary of the work undertaken during the year:—

#### SANITARY INSPECTORS

	nd No. of Inspected Other	Premises to be in Food		Met Baitir	hods u	sed at in	fested pro Gassing	emises Other
32	545	32	464	448	3	6	8	69
68	Comp	olaints re	ceived			432		
	Prem	ises rat-p	roofed			13		
		spections				628		

#### RODENT OPERATIVES

No. of	Infestations	No. of Infestations	Estimated
Treated	Re-treated	Cleared.	Kill.
610	13	642*	2,750

<sup>\*</sup> Includes cases brought forward from previous year.

## FACTORIES ACTS, 1937 & 1948

The following tables show the work carried out under these Acts:—

# 1.—INSPECTION OF FACTORIES, ETC. INCLUDING INSPECTIONS MADE BY SANITARY INSPECTORS.

Edec 1995	No. of Control	Number of				
Premises.	No. on Register	Inspections.	Written Notices. (4)	Occupiers Prosecuted. (5)		
Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities  Factories not included	108	184	9	Nil		
above in which Section 7 is enforced by the Local Authority Other premises in which	465	653	39	Nil		
Section 7 is enforced by the Local Authority	54	84	2	Nil		
Totals	627	921	50	Nil		

## 2.—DEFECTS FOUND IN FACTORIES, ETC.

			ses in utions			
Particulars.		E Found.	© Remedied.	Referred to H.M. Inspector.	Referred By H.M. Inspector	Number of cases in Swhich prosecutions were instituted
			- 10			
Want of cleanliness		64	58	_	-	-
Overcrowding				-	-	
Unreasonable temp	erature	1	1	_	1	_
Inadequate ventilation		13	12	1		-
Ineffective drainage	of floors	9	8	_	_	- S
( in	sufficient	13	12	-	2	-
	suitable or lefective	93	81	-	15	-
	or sexes	2	2	_	- 01	_
Other offences		71	68	-	-	-
Totals		266	242	1	18	_

# NUMBER AND TRADES OF OUTWORKERS NOTIFIED DURING 1950

Wearing apparel, making		Lampshades		 3
	359	Paper bags		 21
Artificial Flowers	3			
Boxes	37	Brush-making		 33
Stuffed toys	31	Textile weaving	ıg	 1

Total ..... 488

# F.—PREVALENCE OF, AND CONTROL OVER, INFECTIOUS AND OTHER DISEASES

General.—The following tables show the age and ward incidence of the various infectious diseases which are referred to in later pages of the report.

	All a		Under 1 yr.	1-5 yrs.	5-15 yrs.	15–25 yrs.	25–45 yrs.	45–65 yrs.	65 & over.
Scarlet Fever	181	182	1	56	116	5	2	1	_
Whooping Cough	502	226	27	248	224	1	2	_	-
Measles	308	1550	14	182	111	1	-	-	-
Diphtheria	1	_	_	-	1	_	_	-	-
Pneumonia	43	101	_	4	3	4	16	13	3
Meningococcal Infection	5	3	1	2	1	1	-	-	-
Acute Poliomyelitis:						1	No. of Lot	A SOUTH	
Paralytic	13	18	1	5	1	1	4	1	-
Non-Paralytic	-	1	_	_	-	-	-	-	-
Acute Encephalitis	_	_	-	-	-	-	-	-	-
Dysentery	6	3	-	1	-	1	3	1	-
Ophthalmia Neonatorum	1	1	1	-	-	-	-	-	-
Puerperal Pyrexia	14	17	-	_	-	4	10	-	-
Smallpox	-	-	-	-	-	-	-	-	-
Paratyphoid Fevers	1	4	-	-	-	-	-	1	-
Enteric or Typhoid Fever	_	2	-	-	-	-	-	-	-
Food Poisoning	28	15	-	1	3	5	7	6	6
Erysipelas	29	34	-	_	1	1	5	11	11
Tuberculosis	105	158	-	7	7	37	30	23	1
Totals, 1950	1237	_	45	506	468	61	79	57	21
Totals, 1949	-	2315	75	1063	879	81	123	67	27

	St. James Street.	High Street.	Hoe Street.	Wood Street.	Hale End.	Higham Hill.	Totals.
Scarlet Fever Whooping Cough Measles Pneumonia	35 105 45 — 3	13 68 26 1 2	24 99 34 	20 32 33 - 7	37 92 114 — 14	52 106 56 — 10	181 502 308 — 43 5
Meningococcal Infection Acute Poliomyelitis: Paralytic Non-Paralytic Acute Encephalitis Dysentery Ophthalmia Neonatorum	4 1	1 - 2 -	2 = = = = = = = = = = = = = = = = = = =	3 - 1 -	3 - 1 -	= = = = = = = = = = = = = = = = = = = =	13 — 6 1 14
Puerperal Pyrexia Smallpox Paratyphoid Fevers Enteric or Typhoid Fever Food Poisoning Erysipelas	2 - - - 7 17	2 - - 1 3 15	$\frac{3}{-}$ $\frac{10}{2}$ $\frac{2}{17}$	$-\frac{5}{1}$ $-\frac{1}{2}$ $\frac{2}{8}$	1 - - 11 8 25	- - 5 7 23	1 28 29 105
Totals, 1950 Totals, 1949	220 333	136 307	199 320	114 323	306 496	262 536	1,237 2,315

The Registrar-General gives the statistics for the 52 weeks ended 31st December, 1950, and these are given in the following table together with the case rates per 1,000 population both for England and Wales and for Walthamstow:—

Disease. Number	Scarlet Fever. 181	Diph- theria.	Enteric Fever.	Pneu- monia.	Puerperal Pyrexia.	Erysipelas 29
Case rate :— England and				43		27
Wales	1.50	0.02	0.00	0.70	Not available	0.17
Walthamstow	1.47	0.00	0.00	0.35	0.11	0.23

The rate for Puerperal Pyrexia is better expressed in relation to the number of births (i.e., live and still-births) registered than to population. When calculated on this basis the rate is:—

Walthamstow			 8.56
England and Wales	******	*****	 5.81

#### SCARLET FEVER

A total of 181 cases of Scarlet Fever was notified during 1950 as compared with 182 in 1949.

The incidence by months and wards is given below:-

January			26	July			14
February		*****	22	August	*****	*****	6
March			24	Septembe			7
April		*****	22	October			9
May		******	17	Novembe	r		13
June			11	Decembe	r		10
St. James	Street		35	Wood St	reet		20
High Stre	eet		13	Hale End			37
Hoe Stree			24	Higham			52

The last fatal case of scarlet fever occurred in 1936 and since then up to the end of 1950 there have been 3,701 notified cases without fatality.

## DIPHTHERIA

During 1950, 11 cases were notified, but in only one was the diagnosis confirmed. This position follows from a request to general practitioners to notify possible cases, even on suspicion, so that they can be removed to hospital for observation and the diagnoses confirmed or otherwise after initiating treatment for possible diphtheria. The confirmed case was partly immunised in 1944 at the age of 5 3/12 years, and received a "booster" dose in 1948. No

posterior negative Schick result was obtained, and therefore he could not be regarded with certainty as a completely immunised subject. On discharge from hospital he was regarded to have been a mild clinical case of diphtheria but without bacteriological confirmation, i.e., he was swab negative.

There has been no death from diphtheria for four years.

Approximately 30,000 persons had been immunised in Walthamstow up to the end of 1950.

The publicity given to the alleged association between "injections" and poliomyelitis has undoubtedly caused some decline in immunisation against diphtheria. The target of immunising three quarters of all babies before their first birthday has not yet been reached.

Immunisation is referred to more fully in Section G of the Report in regard to Part III Area Health Services.

#### MEASLES AND WHOOPING COUGH

During the post-war years, the general position in regard to these childhood infections has been as follows:—

Year	Measles	Whooping Cough
1947	1,081	223
1948	639	565
1949	1,550	226
1950	308	502

If the "Winter" notifications are taken, these were :-

Year		Measles	Whooping Cough
1950	(last quarter)	129	347
1951	(first quarter)	1,729	480

Thus the worst epidemics for many years of both diseases coincided during the last quarter of 1950 and more particularly the first quarter of 1951.

The details of incidence by months and wards are as follows:-

#### Measles.

۰	0.00						
	January			7	July		49
	February			11	August	*****	28
	March			6	September		18
	April			8	October		20
	May			11	November		56
	June			21	December		73
	St. James	Street		45	Wood Street	******	33
	High Stre			26	Hale End		114
	Hoe Street		******	34	Higham Hill		56

## Whooping Cough.

January			12	July		32
February			2	August		33
March			2	September	******	40
April			5	October		62
May		******	8	November		121
June			21	December	******	164
St. James	Street		105	Wood Street		32
High Str	eet		68	Hale End		92
Hoe Stre	et	******	99	Higham Hill		106

The age incidence was as follows :-

	Under	1-2	2-3	3-4	4-5	Over 5	
	1 yr.	yrs.	yrs.	yrs.	yrs.	yrs.	Total
1948	 70	102	74	84	76	159	565
1949	 21	29	42	30	33	71	226
1950	 27	40	68	82	58	227	502

Many fewer cases under two years of age (and especially under one year) occurred in 1950 than in 1948, when there were six deaths.

#### ACUTE PNEUMONIA

January			3	July		1
February		*****	6	August	******	1
March	*****		8	September	*****	_
April		*****	3	October		2
May	******		4	November	******	3
June		******	2	December		10
St. James	Street		3	Wood Street		7
High Stre	eet		2	Hale End		14
Hoe Stre	et		7	Higham Hill		10

#### **INFLUENZA**

Towards the close of the year epidemic influenza became widespread in other parts of the country.

The local weekly mortality returns were noted and compared with those for 1948, which was the record low year.

During the five weeks ended 30th December, 1950, there were 20 deaths from pneumonia and bronchitis compared with 10 in 1948 but there were none in either year from influenza.

During the first quarter of 1951 there were, however, seven deaths from influenza in January, five in February, and one in March, compared with none for the same quarter in 1948.

#### MENINGOCOCCAL INFECTION

Five cases were notified, the particulars being as follows:-

S	ex	Age	Ward		Hospital	Remarks
1.	F.	1 3/12 yrs.	Wood St.		Yes	Died few hours after admission. Post Mortem.
2.	M.	9/12 yrs.	St. James	St.	Yes	Recovered.
3.	F.	22 yrs.	Hoe St.		Yes	Died (T.B. Patient).
4.	F.	24 yrs.	High St.	****	Yes	Recovered.
5.	M.	5 yrs.	High St.		Yes	Recovered.

#### **ACUTE ANTERIOR POLIOMYELITIS**

During 1950, a total of 13 confirmed paralytic cases was notified against 18 in 1949. Thus after a very low incidence since 1937, there has been a much increased prevalence during the years 1947 (24), 1949 (18), and now thirteen in 1950. The maximum incidence in 1950 was as for the three previous years, during the summer months July to October, i.e.,

July	Aug.	Sept.	Oct.	Total
3	10	6	3	22
	_	_	1	1
1	4	4	, 8	17
2	6	3	_	11
6	20	13	12	51
	3 1 2	$ \begin{array}{cccccccccccccccccccccccccccccccccccc$	$\begin{array}{cccccccccccccccccccccccccccccccccccc$	$\begin{array}{cccccccccccccccccccccccccccccccccccc$

These 51 cases were out of a total of 59 notified cases during the four years.

The first four cases in 1950 were from the St. James' St. Ward, but of these, two had their onset in 1949, the other two following in June and July. The remaining cases in August and September were: High Street, 1; Hoe Street, 2; Wood Street, 3; Hale End, 3, and none in the Higham Hill ward.

During 1950 a follow-up of all known cases notified in previous years was carried out and a form of questionnaire was completed noting present health, degree of remaining disability, ability to work and nature of work, to use public transport, and the general domestic circumstances. Advisability of registration as a disabled person was stressed, and attention was drawn to the activities of the local branch of the Infantile Paralysis Fellowship. The results of the survey are given in Section G of the Report (Care and After-Care).

#### ACUTE ENCEPHALITIS

No case of infective encephalitis was notified, and only one post infective case.

### BACILLARY DYSENTERY

Six cases were notified during the year, and of these, five were at the end of October and the beginning of November, but all were apparently unrelated infections.

S	ex	Age	Ward		Removed to Hospital	Remarks
1.	M.	1 yr.	H.H	*****	No.	Recovered.
2.	M. F.	30 yrs.	Wood St.	*****	No.	Recovered.
3.	F.	43 yrs. 32 yrs.	High St. Hale End	******	No.	Recovered.
5.	M.	24 yrs.	High St.	******	No. No.	Recovered.
6.	F.	60 yrs.	Higham Hill	******	No.	Recovered.

### OPHTHALMIA NEONATORUM

One case was notified and removed to hospital. There was complete recovery.

## PREVENTION OF BLINDNESS

No action was necessary under Section 176 of the Public Health Act, 1936, for the prevention of blindness or the treatment of persons suffering from any disease of, or injury to, the eyes.

### PUERPERAL PYREXIA

Fourteen cases were notified—a reduction from 17 in 1949 and from an average of 27 each year during the five-year period 1945/49.

All notifications were from hospitals, one of which was outside the area. The incidence was spread fairly evenly throughout the year, the maximum being three in June.

#### **SMALLPOX**

Nine contacts or cases for diagnosis were seen—one a contact from a London hospital, the original case being later not confirmed, cases 2 and 4 were suffering from Chickenpox and were seen for confirmation of the family doctor's diagnosis—the fourth was a contact from an infected ship, and the fifth, a person who travelled from an area of risk by plane. Cases 6 to 9 were direct and indirect contacts with the Brighton outbreak of Smallpox. In this connection considerable anxiety was experienced in regard to the daily collection of articles from Brighton for dry-cleaning by a large firm in Walthamstow. The utmost co-operation was received from the firm, and vaccination was carried out on all wishing it to be done.

In regard to the diagnosis of doubtful cases, the pathological services of the Central Public Health Laboratory, Colindale, were used whenever necessary, and were of much help.

#### ENTERIC FEVER

Two cases were notified but were not confirmed. In September a message was received from the Coroner's Officer, stating a man aged 49 years in Wood Street Ward had died and that the post mortem revealed that death was due to perforated ulcer due to paratyphoid fever B (phage type I). The usual investigations were carried out but the source of infection could not be traced.

Public Health (Infectious Diseases) Regulations, 1947. Typhoid Carriers.—Part compensation continues to be paid to a chronic carrier in order to prevent her from following her normal occupation as a cook and to make up her wages as a convenience attendant.

Another person referred to in the Report for 1949 remained suspended from her work at a cafe.

#### FOOD POISONING

The necessary returns have been made to the Ministry of Health as required by their Circular 46/49. Reports are usually made to the Ministry in the following circumstances:—

- (a) Any fatal case.
- (b) Any case affecting another Sanitary Authority.
- (c) Two or more connected cases.

The following return was made to the Ministry during 1950 in the form specified in Appendix D(i) of Memorandum 188/Med.:—

# ANNUAL RETURN OF FOOD POISONING NOTIFICATIONS

(Corrected)

1. Local Authority—Borough of Walthamstow Year: 1950.

2. Food Poisoning Notifications (Corrected) Returned to R.G.

1 st Quarter 2nd Quarter 3rd Quarter 4th Quarter Total
1 3 16 8 28

3. Outbreaks Due to Identified Agents.

Total Outbreaks ..... 2 Total Cases ..... 13

Outbreaks due to :-

(a) Chemical Poisons.

(d) C1. botulinum.

(b) Salmonella Or-

(c) Staphylococci (including toxin) ..... 1

(e) Other bacteria.

### 4. Outbreaks of Undiscovered Cause.

Total Outbreaks ..... 4 Total Cases ..... 65

## 5. Single Cases.

Agent identified Unknown Cause Total Nil 15 15

The details given below are taken from summaries which were supplied to the Ministry at the conclusion of each "outbreak."

In March, 10 cases at a Girls' High School, due to a meal of Macaroni Cheese, and Plums and Custard. Both the Macaroni Cheese and the Cook's nose gave a growth of a coagulase positive staphylococcus.

In June and August three private households were affected by 6, 7 and 3 cases respectively. No causal agent was identified but ice cream and tinned milk were suspect. The three cases were due to Sal. Typhi. Murium.

In July there were 10 cases in a Female Medical Ward at a General Hospital and probably due to tinned stewed steak.

In August there were 42 cases at a factory employing 158 persons. The causal agent was not identified.

#### **ERYSIPELAS**

y mo	onths and	Wards is given	below	:
******	2	July	******	4
******	3	August		2
******	2	September		2
*****	3	October		4
	1	November	******	1
	3	December		2
	7	Wood Street		2
*****	3	Hale End		8
	2	Higham Hill		7
		2 3 2 3 1 3 7 3	2 July 3 August 2 September 3 October 1 November 3 December 7 Wood Street 3 Hale End	3 August

#### TUBERCULOSIS

The following table shows particulars of new cases of tuberculosis and of all deaths from the disease in the Borough during 1950:—

			New (	Cases.			Dea	ths.	
Age Periods.		Pulmonary.			on- onary.	Pulme	onary.	Non- Pulmonary.	
Under 1 year 1- 5 years 5-10 ,, 10-15 ,, 15-20 ,, 20-25 ,, 25-35 ,, 35-45 ,, 45-55 ,, 65 and over		M. 5 3	F	M. 2 - 1 - 1	F	M	F	M	F
Totals		66	32	4	3	19	14	3	

The 33 deaths represent a death rate of 0.26 per 1,000 population (England and Wales, 0.36).

New cases in 1949 were 158 with 52 deaths—a rate of 0.42.

The returns for the past two years are compared below:-

Year.		N	lew Ca	ses.		Deaths.				
	Pulmo	onary.	Pulmo	on- onary.	Total.	Pulmo	onary.	Pulm	on- onary.	Total.
	м. 66 78	F. 32 61	м. 4 9	F. 3 10	105 158	м. 19 27	F. 14 17	<u>м.</u> 4	F. 4	33 52

The period elapsing between notification and death and the number of cases not notified were as follows:—

	der 3			6 t			o 12 oths.	Ove	er 12 oths.	N noti		af	tified fter ath.
Pul.	Non- Pul.	Pul.	Non- Pul.	Pul.	Non- Pul.	Pul.	Non- Pul.	Pul.	Non- Pul.	Pul.	Non- Pul.		Non- Pul.
1	2	_	_	1	_	2	_	24	_	5	-	-	-

The ratio of deaths in non-notified cases (i.e., columns to the right of the double line) to total deaths from tuberculosis was 5 to 28 or 1 to 5.6.

The table given below shows the number of cases on the register at the beginning and end of 1950:—

Empire private Lagar	Pulmo	Pulmonary.		Non- Pulmonary.		Total.	Grand Total.
No. on Register 1st	M.	F.		М.	F.		-
No. on Register 1st January	1,059	894	1,953	489	403	892	2,845
Notified during 1950	66	32	98	4	3	7	105
Totals	1,125	926	2,051	493	406	899	2,9 0
Removed from Register,	59	45	104	9	8	17	121
No. on Register 31st December	1,066	881	1,947	484	398	882	2,829

Removals from the Register are made up as follows:-

a line	De	aths.	arte sind	Removals.					
Pulmon	Pulmonary. Non-Pulmonary.				Pulmonary. Non-				
м. 19	F. 14	м.	F.	M. 40	F. 31	м. 9	F. 8		
		33		-	8	8	3		
	,		121	77779					

Incidence notifications in 1950 were the lowest recorded, at least since 1930. The notification rates per thousand population were 0.79 pulmonary, 0.05 non-pulmonary—a total rate of 0.84. The previous lowest total notification rate was 1.05 in 1936. Deaths were 33 pulmonary, nil non-pulmonary—representing a death-rate of 0.26 per thousand population.

Full details as to notifications and deaths for the period 1930/49 were included in the report for last year. The following figures will enable the table to be kept up to date:—

History of the Control of the Contro	P	ulmona	ary	Non	Pulmo	onary	Total	Notification rates per 1,000 pop'ltn. Non-		
The last	M	F	Total	M	F	Total		Pul.	Pul.	Total
Notifica- cations	66	32	98	4	3	7	105	0.79	0.05	0.84
Deaths	19	14	33	_	_	_	33	0.26	0.00	0.26

Prevention.—Preventive measures include pasteurisation of milk supplies, immunisation with B.C.G., mass radiography, chest X-ray examination of staff whose work brings them into close contact with children, contact examinations, and rehousing on medical grounds.

Pasteurisation.—For many years, almost the whole of the milk consumed in Walthamstow has been pasteurised, and all of it since the end of 1949. An Order to be made by the Minister of Food will require compulsory pasteurisation in 1951.

B.C.G. Immunisation.—This matter is referred to more fully in the report on the School Health Services. In short, there is participation in the Medical Research Council's trials of anti-tuberculosis vaccine amongst school-leavers.

Medical Examination of Staff.—During 1950, 189 members of the staff of the County and Borough Councils, especially those working amongst children, were referred for chest X-ray as part of the normal medical examination on appointment or as an annual check-up.

Mass Radiography.—The Unit visited Walthamstow during 1950, and 11,153 persons were examined, including 4,414 staff and scholars in educational establishments.

Mass Radiography findings in other areas suggest that one out of every thousand persons in the population is an undiagnosed infectious case of tuberculosis, i.e., say 120 cases in Walthamstow. If this be correct there is clear need for increased facilities and education to bring the public to accept Mass Radiography.

Contact Examinations.—In co-operation with the Chest Physician, the aim now is for the maximum possible examination of contacts by treating each notified case on the same lines as a notified case of one of the major infectious diseases. To this end, both the Tuberculosis Health Visitor and the District Sanitary Inspector visit the house, and the latter in particular, concentrates on enquiry as to places of employment with a view to further confidential enquiries. No disclosure can of course be made without the patient's consent, and this adds very materially to the difficulties of such contact examinations.

Rehousing on Medical Grounds.—For many years tuberculosis has been the only ground for medical priority in rehousing. In making recommendations the infectivity of the patient, over-crowding on Housing Act, 1936 standards, and the presence of young children or adolescents in the house, are taken into consideration.

During 1950 seventeen patients with their families were rehoused out of a total of 308 changes of tenancy, i.e., say 5.5%.

Care and After-Care.—This matter is dealt with under Section 'G' of the report.

## LABORATORY FACILITIES

Dr. F. Marsh, Pathologist in charge of the Laboratory at Epping, has kindly supplied the following information in regard to work done in Walthamstow:—

	Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.	Sep.	Oct.	Nov.	Dec.	Total
Fæces	19	2	2	1		4	_	2	5	3	4	4	46
Agglutinations	15	31	48	35	35	20	21	11	7	16	10	6	255
Rhesus, etc	16	20	26	10	13	18	13	10	16	13	13		180
Urine	23	15	7	5	4	5	4	5	6	9	7	3	93
Plates	8	11	11	5	10	7	13	17	7	11	24	33	157
Eye Swab	_	_	2	2	_	_	1	_		_	_	_	5
Nose & Throat Swabs Ear Swabs	18	9	51	18	9	11	10	5	6	4	9	8	158
Fluid										1		The state of	
Food	_	_	2	1	2	2	_	4	_	1	1	1	14
Sputum	-	13	2	_	8	_	_	_	_	_	_	_	23
W.R. & Kahn	-	1	-	-	-	1	-	1	-	-	-	-	3
Totals	99	102	151	77	81	68	62	5.5	47	57	68	67	934

#### **MISCELLANEOUS**

1. Old People's Welfare.—The Council (under the provision of Section 31 of the National Assistance Act, 1948) made a contribution of £400.

In addition, two Council cars and drivers were made available for distributing meals on Mondays, Wednesdays and Fridays.

Free office accommodation and the services of a shorthandtypist were also made available.

2. Meals on Wheels Service.—Mr. T. A. O'Connor, Catering Manager, has kindly contributed the following:—

"This service is run by the Old People's Welfare Committee through which it is subsidised by the Council, and provides hot meals to the aged and infirm. The transport is provided in the main by private cars, with voluntary labour distributing the meals."

## 3. National Assistance Act, 1948 (Section 47).

The case of Mrs. I. was first brought to the attention of the Department in 1949 through the Hon. Secretary of the Walthamstow Old People's Welfare Committee on reference from the Connaught Hospital. She was stated to be over 90 years of age, blind, and deaf. Meals were provided from the Mobile Service but no satisfactory arrangements could be made to provide Domestic Help owing to her unwillingness to accept help.

In October, 1950, the Area Officer of the National Assistance Board reported that Mrs. I's. room was filthy and untidy, and that there were complaints by the neighbours of grossly insanitary habits. Visits were paid by the District Sanitary Inspector and the Domestic Help Organiser in an attempt to provide Domestic Help, who again was refused entry.

In November a petition was received from twelve neighbours as to Mrs. I's. insanitary habits and the Area Officer of the National Assistance Board raised the possibility of action under Section 47. A son living in Walthamstow was asked to co-operate in trying to secure his mother's voluntary acceptance of hospital treatment. A further attempt to provide Domestic Help again failed. The next development was the calling of the Police by the other tenant and the intervention of the Duly Authorised Officer, and General Practitioner, who found the patient not certifiable.

Representations were in due course made to your Council and finally authority to make application for compulsory removal was obtained and an Order was made by the Court on the 30th January, 1951, for removal to Part III accommodation at Langthorne Hospital and detention for a period of three months.

Removal took place to the Part III accommodation after previous agreement with the hospital and welfare authority as to the exact type of accommodation needed. A subsequent follow-up visit was paid to Mrs. I. and it was obvious to all concerned that an extension of the order would be necessary and this was granted for a further three months in May, 1951. When seen at Langthorne Hospital it was at once apparent that the care and attention bestowed had transferred her from a dirty and neglected old woman into a rather attractive old lady who would, however, need permanent care in an institution.

Two further cases have been dealt with during the current year, and the experience of all these cases stresses the need for a Local Authority to delegate its powers in order to avoid delay in making application to the Court, for agreement as between the hospital and the Part III Authority as to the type of accommodation needed, and for the definite reservation of a bed before the Court hearing, and finally, the co-operation of the family doctor and if possible, the written concurrence of the nearest relative.

There is also need for the restoration of authority similar to that formerly possessed by the Relieving Officer to require the immediate admission to hospital of the aged and chronic sick poor who need hospital treatment and who are willing to accept such treatment.

For those who will not accept such treatment there only remains the rather cumbersome procedure of Section 47.

- [It is understood that a Bill has been introduced in the House of Commons designed to amend the procedure for urgent cases under Section 47 of the National Assistance Act, 1948, with a view to avoiding the present delays.]
- 4. Funeral Arrangements.—Arrangements were made in regard to the burials of three persons.
- 5. Mortuary Provision, etc.—A Coroner's Court, mortuary (with special provision for infectious disease cases) and a postmortem room is provided by your Council at Queen's Road Cemetery.

The Borough Engineer and Surveyor reports that the number of Inquests and post-mortems were as follows:—

Inquests only		*****	 	57
Post-Mortems	only		 	253
Post-Mortems	and	Inquests		47
				357

6. Conveniences, Public.—During 1950 free washing facilities continued to be available by the supply of soap and paper towels at Public Conveniences.

A charge of 2d. continues for the issue of cloth towels.

As from 1st April, 1950, charges for the use of Public Conveniences were discontinued.

7. Erection of Additional Public Conveniences.—The Borough Architect, Mr. F. G. Southgate, A.R.I.B.A., A.M.T.P.I., summarises the position as follows:—

Tamworth Avenue/Stanford Road (adjoining Highams Park Lake).

The erection of the convenience on the above site has been approved by the Ministry of Local Government and Planning and the work will be commenced early in March, 1951.

## Oak Hill/Woodford New Road (opposite Napier Arms).

Tenders have been obtained for the erection of the convenience on this site and have been submitted to the Ministry for approval. It is anticipated that the work will be commenced in June, 1951.

## Chingford Road.

The Council have approved in principle plans for a public convenience to be erected on a site adjoining and immediately north of the Crooked Billet Public House.

## The Broadway, Highams Park.

The Council have approved, in principle, plans for a public convenience to be erected on an island site in the centre of the Broadway.

8. Cremation.—Facilities for cremation are available at the Crematorium provided by the City of London at Manor Park, Little Ilford.

Negotiations continued with adjoining local authorities.

9. Rainfall.—The monthly rainfall at the Ferry Lane Recording Station of the Metropolitan Water Board was noted in pre-war annual reports and the following summary is given:—

Average	per	annum	1900—1909	 23.21	inches
,,	,,	"	1910-1919	 24.82	11
,,	,,	"	1920-1929	 28.83	,,
,,	,,	,,	1930-1939	 23.58	"
			1940-1949	 21.58	,,

In order to complete the picture the following annual rainfall is quoted from Ferry Lane Station through the courtesy of the Borough Engineer and Surveyor:—

1945		******	19.62	1948			23.27
1946	*****		27.56	1949			18.47
1947			19.02	1950	*****	******	22.52

In view of the nature of the sub-soil over a considerable portion of Walthamstow, deficient rainfall is of considerable importance in regard to structural defects resulting from subsidence.

10. Medical Examinations. — During the year examinations were carried out by the Medical staff in respect of the Superannuation and Sick-Pay Schemes.

#### SECTION G

### PART III SERVICES

# WALTHAMSTOW HEALTH AREA SUB-COMMITTEE (1950/51)

### Chairman:

Cty. Ald. LADY MCENTEE, J.P. (Executive Council for Essex).

#### Vice-Chairman:

Councillor Mrs. S. CANDY (Walthamstow Borough Council).

## Membership:

## Nominated by-

	Nomi	nated by-	-	
Essex	County	Council	*****	Councillor K. E. B. GLENNY (Chairman, Health Committee, E.C.C.).
"	,,	"	*****	Councillor P. PORTER (Vice- Chairman, Health Committee, E.C.C.).
,,	,,	**		Councillor Mrs. L. P. BAILEY, J.P.
"	**	"		Councillor Mrs. A. M. Burrell.
,,	,,	***		Councillor Mrs. E. F. M. HOLLIS.
,,	,,	11		Councillor A. R. KIGGINS.
"	"	"		Councillor Mrs. E. SAYWOOD.
Walth	namstow	Borough	Council	Alderman W. B. FITT.
	,,	"	"	Alderman W. GILLETT.
	,,	"	11	Alderman T. W. SMITH.
	,,	"	"	Alderman Ross Wyld, O.B.E., J.P.
	,,	"	"	Councillor R. H. AYRES.
	,,	"	11	Councillor F. A. Burton.
	"	"	"	Councillor Mrs. S. CANDY.
	,,	11	33	Councillor H. F. Fulton.
	,,	,,	"	Councillor G. LOWTON.
	,,	"	,,,	Councillor Mrs. M. E. MARCHANT.
	"	"	33	Councillor E. G. RICHARDS.
	5,	"	"	Councillor W. H. SHAW.
	"	"	"	Councillor M. SHARLAND.
	"	"	11	Councillor A. E. SIMMONS, J.P.
	"	"	"	Councillor J. M. WIGHT.
Hospit	tal Manag	gement Co	mmittee	Cty. Councillor W. E. BARNES.
Execu	tive Cou	ncil for I	Essex	Cty. Ald. LADY MCENTEE, J.P.
Local Esse		Commit		Dr. J. L. McK. Brown, O.B.E.

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Walthamstow Association	District Nursing	Dr. M. Cohen.
Walthamstow	Child Welfare	
Invalid Childre	en's Aid Associa-	E. P. MARR, Esq.
	1 01: 6	Mrs. M. Osora.
Association	and Chingford of Tuberculosis	
Care Helper	s	Mrs. E. CORDELL

#### STAFF CHANGES

There were 21 new appointments to the Health Area Staff, and fifteen resignations.

## HEALTH CENTRES

(Section 21)

### HEALTH CENTRE SITES

The earmarking of sufficient and satisfactory Health Centre Sites has proved to be a difficult problem in a built-up area like Walthamstow, where conveniently situated sites of sufficient size are at a premium, having regard to the need for housing sites.

Originally some 14 sites were considered in conjunction with the representatives of the various professions which are to use them.

At the time of writing, six remaining sites are being considered, which have been inspected and reported upon. These sites have now been approved by the County Health Committee.

#### GENERAL DENTAL SERVICE

Mr. L. W. Elmer, L.D.S., Senior Dental Surgeon in charge of all Dental Services reports as follows:—

This service has been continued as in previous years, but, as foreseen in last year's report, upon a reduced scale.

A staff of two full-time and four part-time Dental officers has been reduced to five part-time officers, who have worked for 606 sessions as against 1,046 sessions in 1949.

The main encouraging feature is that the amount of conservation work shows a very small decline. This is due to the increasing proportion of younger patients receiving treatment, i.e., patients who have continued from their school-days and who would otherwise have almost certainly been unable to be accepted and receive treatment elsewhere.

Herewith is a summary of the work done during the years 1944-1950 inclusive:-

	1944	1945	1946	1947	1948	1949	1950
Number of patients treated	143	379	585	805	784	783	451
Appointments made	633	2234	3719	5614	7521	6256	4058
Appointments kept	558	2143	3315	5181	6858	5850	3755
Fillings	135	1005	786	1065	1829	1854	1453
Scalings	67	147	206	314	419	331	304
Dressings	71	228	207	451	530	812	473
Extractions	266	1068	1570	2075	2228	1479	739
General Anæsthetics	58	238	446	530	586	617	269
Local Anæsthetics	54	112	182	278	454	413	284
Impressions	33	223	371	863	1100	866	605
Bites	24	97	162	326	380	291	176
Try-ins	23	106	193	392	474	438	210
Dentures supplied	26	134	238	469	606	471	285

Dental Laboratory

Below is appended a list of the appliances completed in the Dental Laboratory for the General Dental Service during 1949 and 1950:—

				1949	1950
New Der			******	486	312
Orthodon	tic Ap	pliances	******	1	_
Crowns		******	******	12	18
Repairs				205	156
Inlays				3	3

During the year further structural alterations and installation of equipment have improved the laboratory and it is to be hoped that the acquisition of an electric furnace for porcelain work will enable every branch of prosthetic dentistry to be carried out.

Although fewer artificial dentures have been completed during the year the increase in the production of orthodontic and other appliances for the Walthamstow and Leyton School Dental Services has kept the staff fully occupied.

I should like to pay tribute to the continued keenness and skill of the dental technicians who have remained on the Dental Staff in spite of the financial attractions offered them elsewhere.

During the year the following appliances were completed for the Walthamstow and Leyton Committees for Education:—

Orthodon	tic Ap	pliances		Walthamstow 225	Leyton 66
Dentures	******	******	******	43	1
Crowns				29	_
Inlays		*****	******	1	1
Repairs	*****	******	*****	42	5

These are, of course, in addition to those listed above.

A limited number of appliances for patients referred by the Maxillo-Facial Surgeon, at the Connaught Hospital, are to be made for the Regional Hospital Board.

# CARE OF MOTHERS AND YOUNG CHILDREN (Section 22)

ANTE-NATAL AND POST-NATAL SERVICES
The following table summarises the attendances at the Clinics
held:—

New Patients— Thorpe Coombe Maternity Low Hall Lane Clinic Silverdale Road Clinic	Hospi	tal	Ante-Natal 1348 256 24	Post-Natal 912 51 5
Totals			1628	968

Total Attendances—			Ante-Natal	Post Natal
Thorpe Coombe Maternity I	Hospita	a1	10834	1162
Low Hall Lane Clinic			828	63
Silverdale Road Clinic			77	5
Totals	*****	*****	11739	1230

The percentage of Ante-Natal cases to notified births was 82.2.

Rhesus tests were taken at all clinics.

## VIRUS INFECTIONS DURING PREGNANCY Ministry of Health Enquiry Into

This enquiry extended to all the Ante-Natal Clinics including those at Thorpe Coombe Maternity Hospital. Notices were displayed at all, reminding expectant mothers of the need to report the occurrence of any infectious disease at the next visit to the Clinic.

The enquiry—which extended the observations on this matter already carried out for several years in Walthamstow — began towards the end of October. The purpose of the enquiry is to collect information as to a possible relationship between virus diseases (especially measles) during early pregnancy and congenital defects in the child.

#### CONFINEMENTS

The following table shows the location of confinements during 1950:—

Thorpe Coombe Maternity Hospital			1245
Other Hospitals and Maternity Homes		*****	332
Total in Hospital, etc.			1577
District	******		389
Total Confinements			1966

A total of 283 Walthamstow patients were unable to book accommodation at Thorpe Coombe. If they were unable to make their own alternative arrangements, bookings at other Maternity Hospitals were made for them through Thorpe Coombe.

The grounds for admission are :-

- (1) First Confinements.
- (2) Medical and Obstetrical.
- (3) Unsuitable home/social conditions.

#### VITAL STATISTICS

These are given in Section "A" of this Report. The birth rate was below that for England and Wales. The infant mortality rate was 26 against 29 for England and Wales, and the stillbirth rate 0.30 per 1,000 population as against 0.37. The neo-natal mortality rate was 20.6 per 1,000 live births.

### NOTIFICATION OF BIRTHS

1980 births (303 of which belonged to other areas) were notified during the year under the Public Health Act, 1936.

Notifications were received as follows: Doctors, 293; Midwives, 1,687.

Included in the above are 290 births which were notified as having occurred outside the area.

Also included are 51 stillbirths, nine of which belonged to other areas. Of the total, nine occurred outside the area.

### STILLBIRTHS

Stillbirths were 42, yielding a rate per 1,000 population of 0.30.

## **NEO-NATAL MORTALITY**

The neo-natal mortality is the number of infants dying under one month per 1,000 live births. During 1950, 33 infants died in the first four weeks of life, yielding a rate of 20.6.

## INFANT MORTALITY

The deaths of infants under one year were: -

Legitimate Illegitimate	 	Males. 23	Females.	Totals. 41
Totals	 	24	18	42

The death rate of infants under one year of age per 1,000 live births when calculated on the totals given by the Registrar-General are therefore:—

Legitimate, 25; Illegitimate, 0; Total, 26.

The Infant Mortality Rate for other areas during 1950 was as follows:—

Eng	land and Wales		26
126	County Boroughs	and Great Towns	
	(including Londo	n)	33
148	Smaller Town	s (25,000—50,000	
	population)		29

#### CARE OF PREMATURE INFANTS

The action suggested in Circular 20/44 (as amended by Circular LHAL 1/49) has been carried out as far as possible and the steps taken were detailed in the Report for 1944. During 1950, 77 premature infants were born to residents of the area, 22 at home and 55 in hospitals or Nursing Homes. One premature infant was born in a private nursing home in the area. It was not transferred to hospital.

Of the 22 born at home, nine were transferred to Hospital. The remaining 13 who were nursed entirely at home, survived at the end of one month.

## CAUSES OF DEATH OF CHILDREN UNDER 1 YEAR OF AGE-1950

	Under 1 week.	1-2 weeks.	2-3 weeks.	3-4 weeks.	Total deaths under 4 weeks.	4 weeks and under 3 months.	3 months and under 6 months.	6 months and under 9 months.	9 months and under 12 months.	Total deaths under 1 year.	St. James St.	High Street.	Hoe Street.	Wood Street.	Hale End.	Higham Hill.	Total.
Influenza Measles Whooping Cough Diphtheria Phthisis Other forms of T.B. T.B. Meningitis Meningitis (Non-T.B.) Convulsions Bronchitis Pneumonia Diarrhoea, Syphilis Rickets Inattention at birth, wilful neglect Suffocation (overlaying) Injury at birth Atelectasis Congenital malformation Premature birth Atrophy, debility, marasmus Inanition Heart failure. Other causes.										- - - 1 - - - - - - - - - - - - - - - -	1 1 1 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	- - - - - - - - - - - - - - - - - - -				- - - - - - - - - - - - - - - - - - -	
Totals	29	2	2	-	33	1	1	3	4	42	5	8	4	5	8	12	42

## ANALYSIS OF INFANT DEATHS, 1950

Dr. Melville Watkins reports as follows :-

Following last year's practice the classification of 42 infant deaths for the year 1950 is here shown:—

	Inevitable	Unavoidable	Preventable	Total
Number	10	22	10	42
Percentage	23.81	52.38	23.81	

No appreciable difference in trend under this classification occurred from that of 1949. The numbers classified under "Inevitable" and "Unavoidable" increased slightly, and preventable deaths were reduced from 19 to 10.

The inevitable deaths were mostly due to congenital malformations. Prematurity and atelectasis form the majority of conditions under "Unavoidable" deaths, whilst respiratory infections caused the bulk of "Preventable" deaths.

It will be seen that the majority of deaths occurred in the first week of life, thus emphasising the most dangerous period in an infant's life and the great care needed at this neo-natal period. As most of the deaths at this period were due to prematurity the problem appears to be one of ante-natal and obstetrical care.

If the infant survives the first four weeks the protection and care afforded to the baby up to the sixth month seems to be good. From the sixth month to one year the risk of exposure to infection appears to be greater. The cause of death in this age group is mostly due to respiratory and intestinal infections.

It will be seen from the table of causes of death that only four are due to infectious diseases; three from enteritis and one from meningitis. Although there was a considerable prevalence of whooping cough and measles during the year there were no deaths from these causes.

A still further reduction in preventable deaths depends on more favourable environmental factors and greater awareness amongst mothers of the dangers of infection during the first year of life.

The hard core of the problem still remains that of deaths during the first week of life.

Little can be done to reduce the numbers of inevitable deaths in the present store of our knowledge of the causes of congenital abnormalities.

## CARE OF ILLEGITIMATE CHILDREN

The action taken under Circular 2866/1944 is fully set out in the Report for that year.

The Walthamstow Moral Welfare Association provides a hostel of 19 beds staffed by three whole-time workers.

The chief difficulties in 1950 were again to secure accommodation for confinements and suitable foster mothers.

Every possible step has, as in previous years, been taken to ensure that the care of illegitimate children does not fall below that given to children who are legitimate. The figures quoted below give a comparison between illegitimate and legitimate rates.

## ILLEGITIMATE BIRTHS AND MORTALITY

Year	Live	Births	Infant	Deaths	Death Rates pe	
rear	Legiti-	Illegiti-	Legiti-	Illegiti-	Legiti-	Illegiti-
	mate	mate	mate	mate	mate	mate
1946	2,453	91	81	6	33.0	66.0
1947	2,597	73	76	1	29.0	13.0
1948	1,975	93	39	4	19.0	43.0
1949	1,771	65	51	3	28.0	46.0
1950	1,536	62	41	1	25.0	16.0
Totals 1946 to 1950 (5 yrs.)	10,332	384	2,888	15	27.0	39.0

Miss Williams, Superintendent of the Home provided by the Walthamstow Branch of the Chelmsford Diocesan Moral Welfare Association contributes the figures set out below and adds that they would be higher if more foster mothers and vacancies at Day Nurseries could have been obtained. As a result the stay of the mothers was longer and cases had to be refused. The larger number of cases helped from other areas is equalised by Walthamstow cases requesting help but naturally anxious to be cared for away from their homes.

Cases admitted during 1949-

A July 377 Li				
Adults—Walthamstow cases		******	*****	18
From other areas				76
				94
Rabine Walthamatan				
Babies—Walthamstow cases	******		******	16
From other areas	*****	*****		36
				52
Total admissions		146		

## MATERNITY AND CHILD WELFARE CLINICS

(a) Ante and Pos Monday (once Monday *Tuesday Wednesday	month	ly)	299	p.m. a.m. a.m.	Markhouse Markhouse Markhouse	Road,	E.17. E.17.	Park.
			*	New	cases only.			

(In addition, a large proportion of the ante-natal work is done at Thorpe Coombe Maternity Hospital).

#### (b) Child Welfare:

Monday	2 to	4 p.m.	St. John's Church Hall, Penrhyn Avenue, E.17.
Tuesday		"	The Memorial Hall, Winchester Road, E.4.
Tuesday		**	The Welfare Centre, West Avenue, E.17.
Wednesday		**	Low Hall Lane, Markhouse Road, E.17.
Wednesday		33	"Brookscroft," Forest Road, E.17.
Wednesday		**	Silverdale Road, Highams Park, E.4.
Thursday	10 to	12 noon	The Memorial Hall, Winchester Road, E.4.
Thursday	2 to	4 p.m.	Low Hall Lane, Markhouse Road, E.17.
Thursday		"	St. John's Church Hall, Penrhyn Avenue, E.17.
Thursday		"	"Brookscroft," Forest Road, E.17.
Friday		**	Low Hall Lane, Markhouse Road, E.17.
Friday		1)	St. John's Church Hall, Penrhyn Avenue, E.17.

In addition, the Walthamstow Child Welfare Society holds massage and sunlight sessions.

## Summary of Attendances at Welfare Clinics

Clinic.	First Attendances of New Cases.			Re-attendances.			Grand
	Under 1 yr. of age.	1-5 yrs. of age.	Total.	Under 1 yr. of age.	1-5 yrs. of age.	Total.	Total.
Markhouse Road Penrhyn Avenue West Avenue Winchester Road Silverdale Road	389 273 177 156 87	46 65 89 48 52	435 338 266 204 139	6,719 5,214 2,667 2,593 1,182	6,478 5,839 1,586 4,478 2,054	13,197 11,053 4,253 7,071 3,236	13,632 11,391 4,519 7,275 3,375
Total 1950	1,082	300	1,382	18,375	20,435	38,810	40,192

## Walthamstow Child Welfare Society

Clinics are held as follows at "Brookscroft," Forest Road:

Tuesdays and Fridays ...... Massage, Remedial Exercises and Sunlight Treatment.

Wednesdays ...... Weighing Clinic and Cookery Lecture.

Thursdays ...... Infant Welfare for old and new cases. Two Doctors in attendance.

Alternate Fridays ...... Diphtheria Immunisation.

The work done during the calendar year is shown in the following table compiled from information kindly supplied by Miss D. Carter:—

			Attendar New Case		Re-	Re-attendances.		
		Under 1 yr.	1-5 yrs.	Total.	Under 1 yr.	1-5 yrs.	Total.	Total.
1950	 	413 488	49 64	462 552	7,165 8,855	2,378 2,622	9,543 11,477	10,005 12,029
1949 1948 1947	 	596 697	70 64	666 761	10,028 11,074	2,923 3,353	12,951 14,427	13,617 15,188
1946 1945	 	690 545	79 55	769 600	9,631 7,211	2,988 2,348	12,619 9,559	13,388 10,159

A total of 31 children were immunised during the year at "Brookscroft."

Summary of Attendances at all Welfare Clinics

	First	Attenda	nces.	Re-a	Re-attendances.			
	Under 1 year of age.	1-5 years of age.	Total.	Under 1 year of age.	1-5 years of age.	Total.	Grand Total.	
Local Authority Scheme Brookscroft	1,082 413	300 49	1,382 462	18,375 7,165	20,435 2,378	38,810 9,543	40,192 10,005	
Total 1950	1,495	349	1,844	25,540	22,813	48,353	50,197	

#### TREATMENT

(a) Orthopædic.—The facilities provided by the Education Authority's Orthopædic Scheme are available for all children attending the Welfare Centres.

Miss Garratt, C.S.P., has kindly furnished the following information with respect to children under five years of age:

Defects Seen at Orthopaedic Clinic in Children Under

DEFECTS SEEN AT ORTHO.	LUPDIC	OFILIO III OIII DI	
Five	YEARS	OF AGE	
Anterior Poliomyelitis	6	Torticollis	19
Scoliosis, Lordosis, Kyphosis		Cerebellar Ataxia	1
Rickets—(a) Genu Varum		Spina Bifida	1
(b) Genu Valgum		Achondroplasia	1
Pes Plano Valgus		Digitus Varus	1
Spastic Paralysis		Congenital Defects	8
Talipes—		Miscellaneous	3
(a) Equino Varus	7		
(b) Calcaneo Valgus	16	Total	183
(c) Mid Tarsal Varus	6		-

- (b) Sunlight.—475 ultra-violet light treatments were given during the year.
- (c) Dental.—Mr. L. W. Elmer, L.D.S., Senior Dental Officer, reports as follows:—

"In so far as the treatment of expectant and nursing mothers is concerned, I can only repeat my statement of last year. That is, that it does not seem reasonable to expect many of these patients to willingly accept a prolonged course of treatment, and that is exactly what the majority require in order to be made dentally fit.

"It becomes more obvious to me each year that the only reasonable course is to follow up the treatment of the girl from school-leaving age through adolescence leaving little or nothing to be done during the period of expectant motherhood.

"A distinct improvement may be noted in the response to treatment of pre-school children and the number treated is almost double that of last year. Quite a large proportion of these children are brought to the clinic regularly and their mothers are not waiting until pain compels them to come.

"It is satisfactory to note that, out of 602 children examined it was only found necessary to extract 243 teeth.

"It is rather disheartening to note that 584 of these children needed at least some treatment, and of these 552 received it. 264 of them were made dentally fit.

"I should again like to congratulate Mr. Timmis, who has seen the majority of these children, on the success of his methods in treating these small children."

The following gives details of the work done during the year by the Dental Officers:—

## Numbers provided with dental care:

Number examined Number needing treatment Number treated Number made dentally fit	nurs	spectant and sing mothers 105 104 104 32	
Forms of dental trea	tment pro	ovided:	
Extractions		164	243
Anæsthetics—Local	******	8	4
General	******	37	135
Fillings	*****	52	166
Scalings or scaling and	gum		
treatment	******	16	6
Silver Nitrate Treatment	******	9	266
Dressings	******	10	81
Radiographs		1	-
Dentures provided—Compl	ete	13	_
Partial		5	-

- (d) Tonsils and Adenoids.—Children are treated at various hospitals.
- (e) Ophthalmic Defects and Minor Ailments.—Children are given treatment either at the School Clinics or by special appointment.
- (f) Child Guidance.—Arrangements exist for children under five years of age to be referred to the Education Authority's Child Guidance Centre.
- (g) Pædiatric Clinic. Pre-school children may attend the Education Authority's Clinic.
- (h) Invalid Children's Aid Association. Mrs. Osora, Secretary to the local branch of the Association, kindly reports that the following cases of children under five years of age were dealt with by her Association:—

#### Referred by :-Hospitals and Medical Men ..... 22 School Medical Services Welfare Centres..... Voluntary Agencies Parents ..... ..... 5 33 Classification of cases :-Anæmia, debility, malnutrition..... After-effects of illness ..... 11 Bronchitis and pneumonia Heart ..... Diseases of the ear, nose and throat ..... Various ..... ..... ..... ..... Visits, advice, follow-up after illness

(i) Convalescence.—During 1950 a total of 15 children were sent away on medical recommendation to convalescent homes. The arrangements were, as in previous years, made through the local branch of the Invalid Children's Aid Association.

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#### PROVISION OF NUTRIENTS AND MEDICAMENTS

The quantity and value of nutrients and medicaments sold and issued free during 1950 was as follows:—

				Sale	25	Free	Issue
				lbs.	ozs.	1bs.	ozs.
Adexoline			******	21	414	_	133
Ambrosia	*****	*****		234	_	-	_
Bemax	*****			129	91/2	_	_
Calfos Tablets			*****	_	-	1361	okts.
Colact				146	_	-	_
Cow and Gate			*****	3,657	_	_	_
Cod Liver Oil I	Emulsio	n		6	8	147	8
Farex				1,103	2	-	-
Fersolate Tablet	S	*****	*****	-	_	48 p	kts.
Glucodin			*****	125	4	_	_
H.O.E. Drops	******		*****	_	_	1	4
Lactogen	******		******	2,129	_	_	
Magnesia	*****		*****	_	-	350	8
Cod Liver Oil a	nd Ma	lt	*****	13	_	539	_
Maltoline				37		-	
Maltoline with	Iron	******	******	13		498	8
Marmite		******		144	4	923	_
Midlothian Oat	Food			232	_	_	_
Ostermilk				649	_	_	_
Ovaltine				492	_	_	_
Parrish's Food					_	115	8
Prune and Bana	na Syr	up		_	_	52	8
Robinson's Gro	ats			526			_
Roboleine				257	_		_
Scott's "Twin I	Pack "			210			
Sodium Citrate	Tablet	S	*****		_	1,000	tabs.
Trufood				41		_	_
Virol				1,117	_	_	_
Virolax				_	_	60	_

Value of Cash Sales ..... £1,330 8s. 7d.

#### VITAMINS

The facilities for the distribution of vitamins were continued at all Welfare Centres.

Every effort is made to increase the demand.

#### DAY NURSERIES

The following table shows the average attendances at the Day Nurseries during 1950 (Mondays to Fridays only).

Month.	Nurseries.	Under 2 yrs.	Over 2 yrs.	Total
January	Higham Hill	11.3	29.5	40.8
	Handsworth Ave.	9.9	38.0	47.9
February	Higham Hill	11.6	35.3	46.9
Union Contract of the Contract	Handsworth Ave.	11.1	39.3	50.4
March	Higham Hill	11.5	39.8	51.3
	Handsworth Ave.	11.9	39.0	50.9
April	Higham Hill	12.9	44.4	57.3
	Handsworth Ave.	11.8	43.5	55.3
May	Higham Hill	12.9	46.8	59.7
	Handsworth Ave.	12.7	45.7	58.4
June	Higham Hill	10.5	45.6	56.1
	Handsworth Ave.	12.9	43.3	56.2
July	Higham Hill	8.9	45.6	54.5
	Handsworth Ave.	12.3	40.7	53.0
August	Higham Hill	7.8	41.8	49.6
	Handsworth Ave.	12.7	33.1	45.8
September	Higham Hill	10.7	45.6	56.3
	Handsworth Ave.	15.1	35.1	50.2
October	Higham Hill	9.4	47.0	56.4
	Handsworth Ave.	8.4	38.6	47.0
November	Higham Hill	9.5	44.9	54.4
	Handsworth Ave.	7.5	21.0	28.5
December	Higham Hill	9.0	43.3	52.3
	Handsworth Ave.	6,4	32.6	39.0
Average	Higham Hill	10.5	42.4	52.9
Whole Year	Handsworth Ave.	11.0	37.5	48.5

Both Day Nurseries are approved for training in the care of children aged 0—5 years.

Training.—Five students obtained the Nursery Nurses' Certificate during the year.

# NURSERIES AND CHILD MINDERS (REGULATION) ACT, 1948

There were no registrations during 1950.

#### **INFESTATION**

The steps taken to combat infestation include cleanliness inspections, treatment at Clinics (which includes the supply of Lethane and of steel combs at cost price) and inspection and treatment for pediculosis at the Skin Clinic.

## OPHTHALMIA NEONATORUM AND PUERPERAL **PYREXIA**

These are referred to in Section F of the Report.

### MATERNAL MORTALITY

This matter is referred to in Section A of the Report.

## **MIDWIFERY** (Section 23)

No. of Notifications of Intention to Practice, Janua		35
No. of Notifications of Intention to Practice dur	ring	6
No. of Midwives ceasing to practise during 1950		41 9
" practising at the end of 1950		32
Medical supervision has been carried out by the Me and non-medical supervision by the Matron of the Hospital.	dical S Materi	staff
The following table shows the work done by Mid- cluding those employed at Thorpe Coombe Maternity during 1950:—	wives Hospi	(in- tal)
No. of confinements attended as a Midwife  " confinements attended as a Maternity Nurse " Medical Aid Notices sent " Twin Births Notified " Triplet Births Notified " Stillbirths Notified " Notifications of Liability to be a source of Info. " Notifications of Laying-out a Dead Body " Notifications of Artificial Feeding " Notifications of Disinfection		430 240 577 23 1 2 2 - 9
The previous table includes the following numbers to work done at Thorpe Coombe Maternity Hospital:  Midwifery cases 1,117  Maternity cases 128  Medical Aid Notices 509	7	ard
The percentage of Medical Aid Notices were :-		

34.5 40.8

16.0

All cases ..... Maternity Hospital Midwives

Other Midwives .....

The conditions for which Medical Aid was summoned by Midwives in domiciliary practice and private nursing homes have been summarised and are as follows:—

For	complications during pre	gnancy	r :		
	Miscarriage				
	Albuminuria				2
	Antepartum hæmorrhag	e			5
	Abortion				_
	Other conditions				5
		-			
		Total			12
For	complications during labou	ır:—			
	Prolonged first and secon	d stage			9
	Ruptured perineum		******		17
	Premature labour		*****		_
	Rise of temperature				1
	Post-partum hæmorrhage				1
	Uterine inertia				3
	Retained placenta	*****		******	3
	Abnormal presentation				2
	Other conditions				10
		Total	*****		46
For	complications in regard to	the inf	ant ·		
		the min	are.		
	Asphyxia Jaundice	*****			
100	Inflamed area	******		*****	1
	Prematurity and feeblenes		******	*****	1
(	Cyron and	55	******	******	1
	Other conditions	*****	*****	******	. 1
		*****	*****		
		Total			10

The table shows the number of District visits done:-

Ante-N	atal Examir	Deliv	eries.				
Patients' Homes.	Midwife's House.	Clinic.	Mid.	Mat.	Lying-in Visits.	Total Visits.	
2,445	1,149	53	271	110	7,460	11,488	

Two midwives in private practice undertook 42 cases as midwives and two cases as maternity nurses.

Gas and Air Analgesia.—The Ambulance Service provided transport facilities for gas and air apparatus.

A total of 174 patients in the District received gas and air analgesia, representing a percentage of 45.6.

Midwives acting as Maternity Nurses.—During the year the number of maternity cases (i.e., where responsibility for the case was taken by the doctor) increased to 110 or 28.8 per cent. of the total.

This percentage has been increasing steadily since the "appointed day." In 1947 it was 11%, in the period 1st January 1948 to the appointed day, 11%, from the appointed day to the end of 1948, 18%, during 1949, 21%, and during 1950, 28.8%.

Emergency Unit.—This Unit, stationed at Thorpe Coombe Maternity Hospital, was called out to one Walthamstow case during 1950.

Maternity Outfits.—A total of 441 outfits was issued.

Training of Pupil Midwives.—Thorpe Coombe Maternity Hospital is a training school for both Parts I and II, the latter in association with the "district." A total of 35 pupils received Part II training during 1950.

## HEALTH VISITING (Section 24)

Health Visiting Staff.—The equivalent of whole-time Health Visitors at the end of the year was 10<sup>1</sup>/<sub>4</sub>, equal to one whole-time Health Visitor per 163 notified births, and one whole-time Health Visitor per 156 registered births during 1950.

Most of the Health Visitors also carry out duties as School Nurses.

## HOME VISITS

- torok ett	Т	Children und 1 year of age.	To Children 1-5 years	Total.	
	First.	Subsequent.	Total.	of age.	
Total 1950	1,572 1,854	4,652 4,580	6,224 6,434	12,799 8,208	19,023 14,642

The detailed findings at first visits paid by Health Visitors are shown in the table on the following page.

	How Fed.		Sleeping Arrangements.		Condition of Baby.		Accommodation.							
	Breast	Breast & Hand	Hand	With Mother	Cot or Cradle	Good	Fair	Bad	Whole	Flat	Half house	Three	Two	One
St. James Street	198	34	23		255	216	38	1	61	30	79	5	43	37
High Street	188	14	11	1	212	200	13	-	62	120	4	3	18	6
Hoe Street	181	30	28	2	237	208	31	_	45	74	41	11	42	26
Wood Street	186	9	23	_	218	211	7	_	60	56	12	53	26	11
Hale End	264	20	20	_	304	299	5	_	180	57	26	9	17	15
Higham Hill	314	28	15	-	357	335	18	4	166	97	14	3	40	37
Total { 1950 1949	1,331 1,548	135 169	120 137	3 1	1,583 1,853	1,469 1,699	112 152	5 3	574 702	434 455	176 235	84 180	186 187	132

From the above table it will be seen that of 1,586 children, 1,331, or 83.9 per cent., were breast-fed on first being visited, and only three babies had no separate sleeping accommodation. 402 infants lived in accommodation of three rooms or less, as compared with 462 in 1949.

			s to Chil der 1 year		ars.	its.		te-Na Visits.				
WARD.		First.	Subsequent visits.	Total.	Visits to Children 1-5 years.	Grand Total.	Unsuccessful Visits.	First Visits.	Subsequent Visits.	Total Visits.	Other Visits.	Total Visits.
	1 2	3	4	5	6	-	_	7	8	Cols. 5-8		
St. James St		255	618	873	2,036	2,909	705	110	88	198	355	4,167
High Street		213	624	837	1,604	2,441	342	69	22	91	144	3,018
Hoe Street		239	530	769	1,272	2,041	430	29	7	36	221	2,728
Wood Street		218	405	623	908	1,531	299	67	19	86	117	2,033
Hale End		304	1,526	1,830	4,089	5,919	204	78	57	135	274	6,532
Higham Hill		357	946	1,303	3,112	4,415	312	68	28	96	222	5,045
Totals, 1950		1,586	4,649	6,235	13,021	19,256	2,292	421	221	642	1,333	23,523
Totals, 1949		1,854	4,580	6,434	8,208	14,642	1,979	368	171	539	1,806	18,966

## HOME NURSING (Section 25)

The Superintendent of the District Nurses' Home, Miss C. A. Lee, S.R.N., S.C.M., reports as follows:—

"The year 1950 has been a very busy year on the General side—less busy on the Midwifery. Bookings, however, for Midwifery and Maternity cases for 1951 have already shown a marked increase.

"The two houses 17 and 19, Carisbrooke Road, have been fully decorated inside and outside, and replacements made where necessary. It is all very nice and is giving us great pleasure.

"The arrangements for the Branch Home for Highams Park, are well under way, and it is hoped will be complete very soon.

"In view of the increasing population, the provision of staff living in Highams Park, has become a necessity.

"A further very urgent need is a second car for the Male Nurse. To be of use in relieving the Nurses of heavy and unsuitable male cases, the Male Nurse of necessity, has daily to cover most of Walthamstow.

"Staff on the 31st December, 1950 was as follows:-

- 1 Superintendent.
- 1 Full-time Queen's S.R.N., S.C.M.
- 5 Full-time S.R.N., S.C.M.
- 1 Full-time S.C.M.
- 1 Full-time Queen's Male S.R.N.
- 1 Part-time S.R.N.
- 1 Part-time S.E.A.N.
- 1 Part-time Auxiliary Male Nurse.
- 5 Pupil Midwives.

<sup>&</sup>quot;24 Pupils during the year entered for District Midwifery Training.

"Midwifery and Maternity Nursing undertaken during the year was as follows:—

				Cases	Visits
Midwifery		'	 	108	2727
Maternity			 	60	1342
Ante-Natal			 		1844
Post-Natal	*****		 	_	319
		Total	 ******	168	6232
Gas and Air adm	inistere	ed	 	*****	11
Maternity Outfits	suppl	ied	 		190

"The following gives details of Home Visits during the year.

				New	Total visits
Medical	*****		 	1237	34533
Surgical			 	305	8614
Tuberculosis			 	33	2604
Outpatients		*****	 	107	369
Operations		*****	 	18	58
Miscarriages			 	10	138
Specials			 	77	111
Casuals			 	258	283
		Totals	 	2045	46710
					-

# VACCINATION AND IMMUNISATION (Section 26)

# DIPHTHERIA IMMUNISATION

Immunisation was carried out at the weekly clinic held at the Town Hall, at Schools and at all Welfare Centres, on the lines detailed in previous reports. The following summarises the work done:—

Total number of immunisations completed during 1950 :-	
(a) School age 26	1
(b) Pre-school age 1,07	3
(c) Over school age	_
	-
1,33	4
(d) Number already immunised having a reinforcing dose 2,00.	5
The above total includes 31 children immunised at "Brooks croft" and 368 by General Practitioners.	,
No. of clinics held for immunisation at Town Hall 59	
No. of attendances made for diphtheria immunisa- tion 691	
No. of attendances made for whooping cough immunisation 828	
Average attendance per session for diphtheria/ whooping cough immunisation 25.7	
Immunised at schools (included above) :	
No. completely immunised 200	
No. awaiting completion 56	
No. having a booster dose, i.e., immunised in previous years 1,737	
No. Schick tested for the first time 6	
(a) Negative 4	
(b) Positive 2	
No. of posterior Schick tests 4	
(a) Negative 4	
(b) Positive	

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#### DIPHTHERIA IMMUNISATION

Age at Immunisation					Percentage Immunised to Population in Age Groups				10								
Year	Regd. Births	0—1 year	1—2 years	2—3 years	3—4 years	4—5 years	Total 0—5 years	School Age	Over School Age	Grand Total	% 0—1 to Total Births	% 0—5 years	% 5—15 years	% 0—15 years	Admitted to Hospital	Diagnosis Con- firmed	Death
1945	1,713	126	907	178	73	52	1,336	938	7	2,281	7.3	40.7	80.4	65.7	64	16	
6	2,544	287	946	212	140	160	1,745	882	11	2,638	11.2	50.3	77.4	67.7	80	22	6
7	2,670	719	869	111	68	77	1,844	810	4	2,658	26.9	52.4	86.0	72.2	38	0	_
8	2,068	1,076	780	105	41	47	2,049	662	1	2,712	52.0	61.5	91.5	79.2	34	1 -	_
9	1,836	1,112	391	63	60	32	1,648	304	1	1,953	60.5	62.5	96.2	82.1	20	0	_
1950	1,598	707	288	29	31	18	1,073	261		1,334	44.2	60.5	96.5	81.9	11	1	

From the above table it will be seen that there have only been two confirmed cases of diphtheria in the last four years, and no deaths.

On the other hand, the fall in the number of children immunised in 1950, especially in the 0—1 age group, gives rise to misgiving, especially since the target of immunisation in this group is 75% of babies born each year.

There are several contributory causes to this decline, e.g., the reduction in the number of births, the publicity given to the alleged association between injections of any kind and poliomyelitis, and the decreased awareness on the part of the public to the dangers of diphtheria. In addition there is some evidence that general practitioners do not send in records in order to claim fees for many of the immunisations done by them.

68 children were given "combined" diphtheria/whooping cough immunisation by general practitioners, but the prophylactic was not supplied by the Local Authority. These are included in the above total.

The following extract is from an article in the "Monthly Bulletin" of the Ministry of Health for June, 1951, summarising Report No. 272, issued by the Medical Research Council in regard to a study of diphtheria in two areas of Great Britain.

"It cannot be adequately emphasised that it is the bounden duty of parents to ensure that their children are actively immunised, whether diphtheria is or is not prevalent, and preferably before the end of the first year of life. Persons so treated can confidently expect protection in early life and also possess the means of acquiring it without delay in later life. It must never be forgotten that active immunity against diphtheria cannot be acquired in a few days but takes some weeks to develop, so that those who have been denied prophylactic inoculation in good time have no such assurance of safety."

# IMMUNISATION AGAINST WHOOPING COUGH

The trials of the vaccine supplied by the Medical Research Council and referred to in last year's report continued during 1950. In addition the use of the commercial vaccine commenced in 1947 was continued with good results.

	Age at			
	Under 1 year	1—4 years	5—14 years	Total
M.R.C. Scheme	220	22	_	242
Local Authority Scheme	176	108	. 1	285
TOTALS	396	130	1	527

The grand total of children immunised against whooping cough to the end of 1950 is 2,016.

During 1948, i.e., before the commencement of the M.R.C. Scheme and before the extension of the Local Authority Scheme, there were 565 notifications of whooping cough in the Borough with six deaths, 226 notifications with one death in 1949, and 501 with no death in 1950. The 1950 epidemic has continued into 1951 with a total of 640 cases to the end of June, and again with no known death.

The following table shows the position :-

Year	Re	Medical esearch Council Scheme	Local Authority Scheme	Total	Notifications of Whooping Cough	Deaths from Whooping Cough
1947		_	58	58	223	_
8		_	99	99	565	6
9	******	738	526	1,264	226	1
1950		242	285*	595	501	_
		980	968	2,016	1,515	

<sup>\*</sup> In addition, 68 children were given "combined" diphtheria/whooping cough immunisation by general practitioners, but the prophylactic was not supplied by the Local Health Authority.

It is understood that the trials carried out for the Medical Research Council will be the subject of a report later this year.

With regard to the cases done under the Local Authority Scheme, the ages at the date of the last injection were as follows:—

Year		Under 1 year	1—2 years	2—3 years	3—4 years	4—5 years	5+ years	Totals
1947/8		8	42	52	35	20		157
9	******	86	129	134	92	67	18	526
50		176	42	26	28	12	1	285
Totals		270	213	212	155	99	19	968

The following statement has been made by the Medical Officer of Health of the City of Manchester (Dr. C. Metcalfe Brown):—

"We believe that a large number of cases so immunised will be spared altogether the suffering and danger of whooping cough. In certain other cases, there may be a mild attack, but in any case it is quite certain that the vaccines will help in reducing the severity of the disease."

#### VACCINATION

The percentage of infants under one year vaccinated during 1950 to the total of births registered in that year was 23.0.

The number of vaccinations performed during recent years has been as follows:—

1st Januar 5th July,					 433 145
		Tot	tal 1948	3	 578
1949	 				 369 547

# VACCINATION AND RE-VACCINATION OF DEPARTMENTAL STAFF

The staff of the Department, especially those who would be expected to deal with smallpox in the event of cases occurring, were again offered facilities for vaccination and re-vaccination and 63 were done during 1950.

## AMBULANCE FACILITIES

(Section 27)

The Ambulance Service is administered centrally from Chelmsford and (as far as information is available) it appears to be adequate for the needs of the Borough.

The Local Service has continued from the Ambulance Depôt, which is situated at the Borough Council's Fulbourne Road Depôt.

# PREVENTION OF ILLNESS—CARE AND AFTER-CARE (Section 28)

#### TUBERCULOSIS

The following record has been completed from information supplied by Dr. H. Ramsay, Physician in Charge of the Walthamstow Chest Clinic, and Miss A. Woolgar, Secretary and Treasurer to the Walthamstow and Chingford Association of Tuberculosis Care Helpers.

- 1. Public Relations.—Miss Woolgar has given talks to seven local organisations and reports that the talks were well received and that the questions asked indicated a great interest in the subject. It was obvious, however, that there was an almost complete lack of information on the services available to the tuberculous and a rather shocking degree of ignorance on the possibilities of recovery. It is still quite widely believed that a diagnosis of tuberculosis is synonymous with a deferred death-sentence, that the tuberculous patient never regains working capacity and is a constant source of infection to others. The dispelling of these ideas might well be the most valuable outcome of any talk given.
- 2. Care and After-Care. Dr. Ramsay as Honorary Medical Adviser to the Association considers that the incidence rate of cases to population is the most reliable method of assessing the financial need of the Association.

Miss Woolgar has provided the following report in regard to the activities of the Association.

- 1. Provision of Extra Nourishment.—Milk vouchers (45 cases), Grocery vouchers for 5s. where need arises, either in addition to or instead of a milk voucher (20 cases). Particularly useful in cases of Old Age Pensioners receiving a National Assistance Board supplement for milk who cannot on that account be given a milk voucher. (Expenditure 1949/50 approximately £784).
- 2. Beds and Bedding. Provided where necessary to enable patient to sleep in a separate bed. (Expenditure 1949/50 approximately £28 for seven cases).
- 3. Clothing.—Supplied where provision is not the responsibility of the National Assistance Board or Education Authority or where the delay in applying to an official source would cause hardship. Bed-wear is also provided where the patient is in a hospital not covered by a Hospital Management Committee and no clothing is supplied to in-patients. (Expenditure 1949/50 approximately £19 for seven cases).
- 4. Fares to Visit Patients in Hospital.—Where the applicant is not eligible through the National Assistance Board and the patient could not be visited without hardship to the family, fares are paid. Frequency of payment varies according to the distance and the state of the patient's health and morale. Reference is made to the almoner or doctor at the hospital when there is doubt on these points. (Expenditure 1949/50 approximately £29).
- 5. Sick-Room Equipment.—Local stocks of air rings, back rests, etc., are inadequate and tuberculous patients generally require long-term loan which removes the appliance from circulation for a long period. A small stock is maintained at the clinic by the W.A.T.C.H. and where further appliances (e.g., invalid chairs, air-beds or additional air-rings and bed-rests) are borrowed from other agencies, the cost of hire is borne by the W.A.T.C.H. If space for storage were available, a larger stock could usefully be held at the clinic for use of tuberculous patients only. (Note by Area Medical Officer. These deficiencies in sick-room equipment are being remedied).
- 6. Coal.—Supplies sometimes provided by arrangement with trader and Fuel Controller where lack of coal would be detrimental to patient's health and insufficient money is available in the family.

- 7. Holidays and Convalescence. Occasionally undertaken to restore working capacity after temporary illness not necessarily involving the tuberculous condition. (Expenditure 1949/50 approximately £47).
- 8. Liaison.—Liaison with all other charitable and official welfare agencies which may be of assistance to the patient in any capacity. This is regarded as a most important matter as it may prevent mishandling of a case by another agency or duplication of assistance through lack of consultation. Local social workers do not normally take any action where a case of tuberculosis is concerned without first checking the position with the Secretary of the W.A.T.C.H.

## 9. Finance, 1949/50.

EGG G . C				Approx. £
E.C.C. per Capita Grant		******	******	254
E.C.C. Entertainment Tax	Grant			637
Stationery and Postage Refu	und			20
	Total		*****	£911
Local Voluntary Source				408
Expenditure for the Year	*****			1,020

Occupational Therapy. — Dr. Ramsay has contributed the following:—

"I have come to the conclusion that the only suitable arrangement for occupational Therapy would be a properly organised scheme which would provide for the training of patients confined to bed at home, or up and about but not yet fit for work. I feel that this would mean the appointment of suitably trained Occupational Therapists on a Local Area basis under the control of the Local Health Authority. It would be understood, of course, that the control of what the patient was to undertake would remain in the hands of the Chest Physician.

"With regard to War Pensioners who have contracted tuberculosis, it is understood that the War Pensions Committee help such cases with money grants and tuition. An endeavour is made to sell the articles after sterilisation. All work is done subject to the approval of the appropriate Chest Physician."

Miss Woolgar reports as follows :-

"Some months ago, I went to a Red Cross Handicrafts Exhibition to obtain ideas and found that the most suitable thing appeared to be a small hand-loom for the weaving of such articles as scarves. The possibilities were discussed with

Dr. Ramsay and one loom purchased in the first instance. This proved suitable in size and weight for the use of a bed-patient and the Care Committee have recently bought two more. These two are now in use, the patients being instructed by members of the Committee who learned on the first loom obtained. No patient will be supplied with a loom except on the recommendation of the Chest Physician, who will lay down the number of hours he may work at it. Wool is being provided by the Care Committee and eventually some means will be found to dispose of the articles made, but it is not proposed that selling them for profit should be made a matter of any consequence as the occupational value is felt to be sufficient justification for the expenditure, although it is hoped that after a time the sale of articles will cover the cost of materials, etc.

"Three patients were supplied with Dryad Hand Looms and with materials for use at home.

"A male patient was found to have started embroidery on his own initiative while awaiting admission to sanatorium. After a time he was unable to afford materials and when this was known to the W.A.T.C.H., they agreed to provide materials. The first set of materials had been provided by the Red Cross. Work done was of a high standard and resulted in his receiving orders from friends and becoming independent of help.

"Another male patient while in Broomfield Hospital learned to make cane-edged trays. On discharge he was put in touch with suppliers of the necessary materials by the Secretary of the W.A.T.C.H., and is now making and selling them independently.

"A female patient was provided with materials for embroidery."

Disposal of Articles made.—No final decision will be possible until developments show what will be practicable. The first scarves have only recently been completed and suggestions have been made that a sale of work could be arranged when sufficient finished work is available or that a local trader might be prepared to lend the use of part of a shop-window to display the goods.

Cost of Materials.—The Dryad loom costs only 17s. 2d. and the wool used so far was bought direct from Newcastle Wool Co., at 16s. per lb. A scarf takes 3—4 ozs.

Instruction was given by Mr. McGiverin (member of W.A.T.C.H.) and Miss Busby (Local Voluntary Helper), who learned the use of the Dryad loom from the Dryad instruction leaflet and undertook to visit the home, set up the loom and show the patient how to use it. Frequent visits have not been necessary

as the work is very simple and the instructors have been mainly concerned with calling at intervals to deliver materials and give advice on how to improve the standard of work. An instruction leaslet is supplied with each loom and could quite well be used without further instruction by most patients.

No record of the work of the Association would be complete without very sincere acknowledgement of the good work done by the Chairman, Members and the Officers of the Association, both during the past year and the previous years of even greater financial stringency.

The following summary of the arrangements made in regard to the prevention of tuberculosis, the care and after-care of those suffering from tuberculosis has been supplied by the County Medical Officer.

Under the provisions of the National Health Service Act, 1946, the County Council has wide responsibilities in regard to the prevention of Tuberculosis, and the care and after care of persons suffering from that disease. In this connection the following facilities are made available throughout the County:—

- (a) Propaganda directed towards the prevention of tuberculosis is undertaken in a variety of ways, e.g., lectures, film shows, exhibitions, and the County Council co-operate with the Regional Hospital Board in connection with the Board's mass radiography units;
- (b) Visits are made, and advice given, by the County Council's Health and Tuberculosis Visitors;
- (c) Sickroom equipment is loaned to persons who are being nursed at home;
- (d) Open-air shelters are provided free of charge on loan for assisting patients to segregate themselves as much as possible from other members of the family, and to take advantage of the open air;
- (e) Extra milk is provided free of charge when this might assist the patient's recovery;
- (f) Rehabilitation is provided free of charge at one of the Village Settlements in suitable cases;
- (g) Boarding-out with foster parents is arranged for children who are in close contact with a member of the family who is infectious;

- (h) B.C.G. Vaccination against Tuberculosis is provided for children who are in contact with Tuberculosis. This new service has just been introduced. It is necessary for a child undergoing B.C.G. Vaccination to be kept away from the source of infection for three months. This can in certain cases be achieved by arranging for the child to be cared for during that period by a foster mother, but it is also intended to set up a residential home for this purpose at an early date.
- (i) Finally there should be mentioned the great amount of good work which is done for Tuberculous persons and their families by voluntary Tuberculosis Care Associations. There are sixteen of these Associations, covering the whole of the County, and all of them are given full encouragement by the County Council, including financial assistance.

The number of visits made by the Tuberculosis Health Visitors during 1950 has been as follows:—

Walthamstow		 	945
Forest Area		 	383
	Total	 	1,328

#### POLIOMYELITIS FOLLOW-UP

During the course of their routine duties the health visitors visited all known cases of poliomyelitis. This disease first became notifiable in 1912, and up to the end of 1949 the total of notified cases was 147, of whom 19 died in the year of notification.

Unfortunately records previous to 1935 are not now available, and the total number of cases reviewed was 74. Of these 57 were visited, eight were not traced, and nine were dead.

Of the 57 cases alive only two were unable to walk. The disabilities were :—

Headache Paralysis—	2	Paralysis— One leg	8
One side	1	Foot	3
Shoulder, back, arm	1	Weakness, one leg	12
Shoulder and arms	2		-
One arm	3	Total	39
Arms and legs	2		-
Both legs	5		

These 39 disabled cases represented some 69 per cent. of all cases remaining alive. There were no disabilities in 18 cases.

At the time of the enquiry nine were under school age, six were attending special schools, 21 were at ordinary schools, fifteen were working whole-time, four were housewives, two were capable of work but unemployed.

The attention of all the patients (or their guardians) was drawn to the facilities of the Infantile Paralysis Fellowship, which affords means for training and re-education, and facilities for recreation. In addition, the advisability was stressed, if appropriate, of registering as disabled persons.

As a result of the follow-up it became apparent that there was difficulty in the purchase of surgical boots and shoes and their repair. After correspondence with the Ministry of Pensions and the Hospital Authorities, a leaflet of advice in regard to this difficulty was sent out. Briefly, the arrangement is for the family doctor to refer the patient to an orthopædic specialist who will, where necessary, issue a "Surgical Appliance" order on the Ministry of Pensions. Repairs are effected through the Ministry of Pensions' local branches at East Ham and Finsbury Park.

Cases notified in 1950 were followed up during the current year. Of 13 cases notified two had died and of the remaining 11 there was no disability in three, weakness or slight paralysis in the upper limbs of three, and of the lower limbs in four, and of the shoulder and foot in one. All four adults were in full work as, a furniture maker, landscape gardener, housewife, and inspector, respectively, but only one had registered as a disabled person.

# REHABILITATION OF TUBERCULOSIS PATIENTS

During the year the Area Sub-Committee accepted financial responsibility in approved cases for patients undergoing rehabilitation at Papworth and Preston Hall Settlements. Four patients (one of whom was eventually discharged) received rehabilitation treatment at Papworth Hall. No cases underwent rehabilitation at Preston Hall. No charge is made to the patient.

# CONVALESCENCE FOR ADULTS

The total of cases sent away for recuperative convalescence was 41. The length of convalescence was two weeks in 25 cases, three weeks in 15 cases, and four weeks in one case. Recovery of cost or part-cost is made.

# SICK-ROOM EQUIPMENT

Apart from stores which are only available to certain sections of the community, there are two main depôts for sick-room equipment, one at the District Nurses' Home in Carisbrooke Road, and the other at the British Red Cross Society Headquarters in Forest Road.

# CHIROPODY SERVICES

The Foot Clinic, originally established by the Borough Council, continued as in previous years with four whole-time Chiropodists.

Daily morning sessions were held, with afternoon sessions on Mondays, Wednesdays and Fridays, and evening sessions on Mondays, Thursdays and Fridays. Treatment was by appointment and unfortunately, there has always been a long waiting list.

Total attendances in 1950 were 15,496, including 2,037 new patients.

# DOMESTIC HELP SERVICE

Mrs. C. M. Hall, Domestic Help Organiser, reports as follows:—

"During the year this service continued to be administered along lines similar to those adopted during 1949 but with ever-increasing demands laid upon it. The year has been a particularly busy one and 1,145 visits were made to patients and helps. More applications of all descriptions have been dealt with and the number of helps employed has grown to six full time and 176 part time.

"Below is a summary of the year's work:—

DOMEDIIC HELF			
Brought forward from 1949			192
New cases during 1950 Cases completed in 1950	******	******	369
No. of cases carried forward to 1951			293
No. of cases extending over three months	******	*****	268
over three months	******	******	334

		Analysis:		
Acute	Chronic	Old People (not sick)	T.B.	Total
78	403	57	23	561
		HOME TIPE		

HOME HELP
No. of cases completed in 1950 ..... 125

"At the beginning of September the scale of assessment was adjusted and in a number of cases the charge for the service increased or a charge made where there had previously been no charge. This caused a certain amount of disruption as a number of patients appealed against their new assessment and such appeals were appropriately dealt with by the Health Area Sub-Committee or the Chairman of that Committee.

"Admission to hospital of the chronic sick became more and more difficult during the year thereby making continued domestic help necessary in many cases and thus absorbing a large number of the helps available. The winter months of 1950 proved very trying in view of increased sickness among patients and helps. Influenza was responsible for many absentee helps and this resulted in a certain amount of dislocation and delay in meeting patients' requirements. It has also become increasingly difficult to secure the services of the right type of helps, but nevertheless in spite of some disappointments a tremendous amount of good work has been done and there is no doubt that the year on the whole has been highly satisfactory."

# COUNTY COUNCIL OF ESSEX—WELFARE COMMITTEE WELFARE SERVICES

Mr. G. E. Pegram, County Welfare Officer, advises as follows:—

"The old Poor Law System has been superseded by new legislation provided in the National Assistance Act, 1948, and the County Council is concerned, at the present time, with two aspects of the new Welfare Services, viz.,

- (a) the provision of residential and temporary accommodation, and
- (b) welfare arrangements for blind and other handicapped persons."

The County Council has adopted schemes in respect of the provision of residential and temporary accommodation, as defined in section 21 of the National Assistance Act, 1948, and in respect of the general welfare of blind persons coming within the provisions of section 29 of the Act. So far no scheme has been prepared in respect of other handicapped persons but it is anticipated that the findings of an Advisory Council, set up by the Ministry of Health for the purpose of giving guidance to local authorities, will shortly be issued and appropriate steps taken to promote a detailed scheme for the purpose of carrying out a welfare service for handicapped persons.

"Statistics are appended showing the extent to which the present services have been applied to residents within the Borough of Walthamstow during the year 1950.

(1) Residential and Temporary Accommodation.

- (a) Admitted to hostels and other residential establishments: Men, 13; Women, 20 (including four blind persons).
- (b) Admitted to temporary accommodation: Men, 17; Women, 31; Children, 42.

## (2) Blind Persons.

Number of blind persons in the Borough :-

(i)	Registered as blind	*****		 219
(ii)	Partially sighted		******	 30
(iii)	Defective sight			 31

all of whom are under the supervision of Home Teachers and seven participate in the Home Workers' Scheme operated through the agency of the London Society for Teaching and Training the Blind.

"In addition, two blind persons are employed in the Workshops for the Blind and during the year four were placed in employment (open industry), the total number of Walthamstow residents so employed now being 17.

"In one instance only during the year did it become necessary for the Borough to make application under section 47 of the National Assistance Act, 1948, for the removal of an aged person to suitable accommodation. The order was made but the actual admission did not take place until early 1951. The person concerned would not voluntarily undertake to go into a residential home and the necessity to take Court action was for the reason only of securing for the person the care and attention needed."

