[Report of the Medical Officer of Health for Richmond].

Contributors

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BOROUGH OF RICHMOND (SURREY)

ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH
1956

J. H. BROAD & Co. Ltd., Printers, 8, King Street, Richmond, Surrey.

BOROUGH OF RICHMOND

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PUBLIC HEALTH DEPARTMENT,

PARKSHOT,

RICHMOND.

August, 1957.

To the Mayor, Aldermen and Councillors .

of the Borough of Richmond (Surrey).

Ladies and Gentlemen,

I have the honour to present the Annual Report of the Medical Officer of Health for the year 1956 upon the Sanitary Circumstances, Sanitary Administration and Vital Statistics of the Borough.

The form of the report is in accordance with the instructions of the Minister of Health and special reference is made to certain subjects at the Minister's request.

I wish to express my thanks to all members of the Council for their continued support throughout the year, and to record my gratitude to every member of the Staff of the Public Health Department for their loyalty, hard work and co-operation.

I am, Ladies and Gentlemen,
Your obedient servant,
ERIC PEREIRA,
Medical Officer of Health.

LIST OF STAFF.

Medical Officer of Health:

ERIC PEREIRA, M.B., B.S., D.P.H

Chief Public Health Inspector:
BERNARD AISTHORPE, M.R.S.H.

Senior Additional Public Health Inspector: EDWARD S. HERBERT, M.A.P.H.I.

Additional Public Health Inspectors:

CHARLES S. SMEATON, M.R.San.I.

NOLAN VICTOR SAUNDERS, M.R.San.I. (Until August)

Senior Clerk: MRS. F. G. SMITH.

Clerks:

MRS. M. SUMPTER. MISS J. TRANTER.

Rodent Officer:
THOMAS R. SMITH.

Rodent Operator:
RONALD EVANS.

Drain Tester, Disinfector and Driver:

JAMES DAVIS.

BOROUGH OF RICHMOND (SURREY).

Report of the Medical Officer of Health for the year 1956.

PREFACE.

Staff.

The year commenced with a full staff but in August Mr. Saunders resigned to take up an appointment with a neighbouring Authority.

The vacancy was advertised repeatedly but no appointment had been made at the end of the year.

Population.

The Registrar General's estimate of the population in 1956 was 42,420 which can be compared with the 1951 Census population of 41,944 and the population for 1955 which was estimated to be 42,240.

Births.

During the year 556 births were recorded (292 males and 264 females). This figure may be compared with 623 in 1955 and 851 in 1947.

The proportion of births taking place in dwelling houses increased slightly to 23.6% compared with 21% in the previous year.

I am hopeful that this level may be maintained and that any future improvement in the housing situation may gradually lead to an increase in the number of babies born at home.

There is an efficient domicilliary Midwifery Service provided by the County Council and it is to the advantage of all concerned if full use can be made of it.

There were 35 premature live births and of these, 24 survived.

Of the eleven infants who failed to survive, 6 weighed less than 31bs. 40zs. and so would be extremely difficult to rear.

The cause of prematurity is receiving much attention at present and it is hoped that this waste of life will be reduced. Of 14 deaths of infants under 1 year of age, no less than 9 were due to this cause.

Deaths.

The total number of deaths occurring amongst residents was 549. (256 males and 293 females) compared with 564 in 1955.

The death rate, when corrected to allow for the high proportion of elderly residents, is 9.9 per thousand population which compares favourably with other towns in the country.

Once again the death rates due to cancer are unfavourable in Richmond. There is no doubt that this is due to the high proportion of elderly residents.

NOTIFIABLE DISEASES.

The table in Section F sets out the number of cases of infectious diseases notified by General Practitioners during 1956.

Following the high incidence of measles in the previous year there was the expected reduction in numbers during the year under review.

The incidence of all other infectious diseases was also very low.

Whooping Cough.

Only 26 cases were notified and most of these were quite mild.

Poliomyelitis.

Two cases only occurred — one in January and the other in August. The first was a married man aged 33 who became ill during the last days of December 1955. On the 2nd January serious symptoms had developed including paralysis of the limbs and he was removed to hospital.

Unfortunately he became progressively worse and died two days later. This was an example of the worst form of the disease which can be rapidly fatal and which is more often seen in adults than in children.

The other case was an eleven year old boy who in August had an illness associated with pain in the legs. He was not confined to bed and it was not until the latter part of September that he was taken to hospital, suffering from weakness of the muscles of the left leg. This was a mild form of paralytic poliomyelitis which was undiagnosed while the patient was in the infective state. There were seven close household contacts but no further cases occurred.

Meningitis.

In October a boy aged 13 was admitted to hospital with all the signs of meningitis and he was strongly suspected of being a case of poliomyelitis. Accordingly full preventive action was taken as regards close contacts.

However, he made good progress in hospital and after full investigation it was decided that he was a case of lymphocytic meningitis and not a case of poliomyelitis.

Meningococcal Meningitis.

This was a case of a girl aged 13 years who was suddenly taken ill with symptoms of Meningitis. As soon as a diagnosis of Meningococcal meningitis was made appropriate modern treatment was commenced and she made an uneventful and complete recovery.

This is a desease which occurs mostly under overcrowded living conditions and there was cause for concern since the patient came from very overcrowded accommodation situated over a restaurant.

Very close contacts consisted of 3 adults and six children. Appropriate preventive action was taken and the contacts were kept under surveillance.

Fortunately, no further cases occurred.

Dysentery.

Only five cases of dysentery were known to have occurred and all of these were due to an organism known as Shigella Sonnei. This organism is found widespread throughout the country and it causes a mild form of dysentery which is usually readily amenable to treatment.

I have no doubt that in fact there were many more cases which responded to simple remedies and which were never diagnosed as dysentery.

Food Poisoning.

There was a short, sharp, outbreak of food poisoning amongst a family of two adults and three children. Within a period of two days all suffered from severe diarrhoea and all made rapid recoveries.

No causative organism could be isolated. It is probable that this outbreak was due to toxins produced by organisms in food which had been kept too long or at a temperature which was high enough to encourage the multiplication of bacteria. I think that this very small number of cases speaks highly for the care generally taken by the housewives and the good standard of food production in the local hotels, restaurants, cafes, etc.

IMMUNIZATION.

As the incidence of poliomyelitis was low there was no interruption of any scheme and good progress was made.

As your Medical Officer of Health I am responsible for this aspect of preventive medicine but for the sake of convenience the work is mainly carried out at Clinics administered by the County Council.

Prevention of Diphtheria.

At the request of the Chief Medical Officer, Ministry of Health, great efforts have been made during recent years to get as many as 75% of infants under 1 year immunized against diphtheria. This objective has now been achieved and I think that this district is amongst the first to do so.

If the diphtheria prophylactic is used cobined with Whooping Cough vaccine it is effective against both diseases when commenced as early as 3 months of age. The combined prophylactic is popular with parents as the numbers of injections is thereby reduced and early protection is made possible.

Prevention of Whooping Cough.

The proportion of infants protected against Whooping Cough is now as high as for diphtheria. The vaccine does not give complete protection to all those who receive it, but when Whooping Cough does occur in an inoculated child it is a mild illness. Early protection is most important as the disease is much more fatal to infants than to older children.

Prevention of Smallpox.

The policy of vaccinating against small pox after immunization against diphtheria (and Whooping Cough) has been continued with great success. Infants suffer so little inconvenience from the first course of injections that mothers present them for Smallpox vaccination with increasing regularity.

The proportion of babies vaccinated fell to a low level when the National Health Service Act was introduced but in Richmond it has been rising steadily and reached 64.7% in 1956.

Prevention of Tetanus.

Active immunization against tetanus is now available to those who desire it. It is particularly popular with parents who have lived in America, or Canada.

Prevention of Tuberculosis.

Active immunization against tuberculosis with B.C.G. is offered to all children aged 13 years. The object is to give them added protection against this disease during the adolescent years when they are especially susceptible. Subsequently they develop the natural immunity which results from the normal activities of adult life.

Of the children inoculated during the year there were no complications of any importance.

Prevention of Poliomyelitis.

A vaccine prepared by the Glaxo Laboratories became available in limited quantities for use for the first time in this country.

Parents with children in certain age groups were invited to register them for inoculation. A small quantity of vaccine was provided in May and June and this was administered to registered children without any resulting reactions or harmful effects.

The scheme was then suspended until December when a few more doses were supplied and were administered to those children who had received only one out of the two doses required for protection.

The public demand for this vaccine has been growing steadily throughout the year and it is hoped that supplies will be more adequate next year.

Figures relating to these various immunization schemes are set out in Section F.

CARE OF THE AGED AND THE CHRONIC SICK.

The local scheme for the care of the aged and the chronic sick which was outlined in the Annual Report for 1955 has worked smoothly. There is improved co-operation between the Hospital Services, the Welfare Services, the General Practitioner Services and the Medical Officer of Health.

The appointment of a Geriatrician jointly by the Surrey County Council and the Kingston Hospital Group has been a successful move and has done much to improve the general situation.

Proper priority is given to cases for admission to hospital and really urgent cases are invariably admitted with a minimum of delay. There is a greater awareness of residents who are beginning to need assistance and available facilities are brought into action earlier than formerly. The establishment early in 1957 of a service for laundering sheets for incontinent patients has done much to reduce the difficulties of those being nursed at home.

Attention has been focussed on this difficult problem and I am pleased to report that there is a gradual but continuing improvement in the situation.

NATIONAL ASSISTANCE ACT 1948. SECTION 47.

Under this Section of the above Act the Council is able to apply to a Court of Summary Jurisdiction for an Order for the compulsory removal to suitable accommodation of a person who is living in insanitary circumstances, or who is suffering from grave chronic disease and who is unable to get the assistance required.

Old or chronically sick patients are often very difficult to deal with because they refuse to enter a Home or a Hospital. Available domiciliary services may also be refused, but even if accepted they may not meet the real needs.

Generally persuasion leads ultimately to a solution of the problem and compulsory action is rarely necessary; however, in 1956 action was taken in two cases which I report briefly below:—

Case No. 1.

A woman aged 80 occupied a ground floor room and she and her accommodation became seriously neglected. The room was infested with bugs. The old woman was deaf and was suffering from mild senile dementia with occasional delusions; she did her own cooking and was slowly starving herself. Despite great efforts by the Health Visitor and the District Nurse, she was becoming more and more neglected in her person.

Persuasion was of no avail; she resolutely refused to consider admission to a Home.

An Order was applied for and obtained and she was transported (unwillingly) to an Old Peoples Home.

Within a few days of her arrival there her general condition had considerably improved and she announced that she was happy to stay. She was well liked by the staff and the other residents and there is no doubt that the use of compulsory powers in this case was completely successful.

Case No. 2.

This was a man aged 70 who was suffering from chronic heart disease so serious that he was unable to care properly for himself. There seemed also to be some mental disturbance because he stubbornly refused every type of help and insisted that as there was nothing wrong with him there was no need for official interference.

He managed, and lived in, a clock and jewellery shop. The premises were in a chaotic state of untidiness and filth. The patient remained in the shop all night, either sitting in front of an open fire into which he was liable to fall or lying behind the counter on an assortment of rags. After all other efforts had failed a Court Order was obtained and this unhappy man was admitted to a hospital bed. After 3 months his physical condition had improved and he was transferred by Order of the Court to an Old Peoples Home.

The Order was extended from time to time on application by the Council and appeals by the patient were resisted, since his health was such that it was impossible to allow him to return to the original conditions. He was most unhappy in both Hospital and Home, and he died on the 25th January, 1957 shortly after his last appeal had been rejected.

While this case had not the happy ending of the first one, there can be no doubt that compulsory action was correctly taken. He not only created insanitary conditions but owing to his liability to "heart attacks" there was a real danger of fire. He was thus a danger to himself and to the tenants of the flat above him.

Provision of Health Services in the Area.

Section B outlines the Health Services provided by the Authorities concerned. They are well developed, actively used, and generally cover the requirements of the residents.

The chief need is for an adequately sized permanent clinic at Ham. The Surrey County Council have agreed in principal to the provision

of a Clinic, and the Borough Council have ear-marked a site at Ham Close. Housing development will soon commence in this area and it is hoped that the necessary approval for the erection of a Clinic will not be too long delayed.

HOUSING.

With the development of the Peldon Avenue and Ham Close sites there is every reason to hope that the programme for Slum Clearance will be started in the not too distant future.

In addition to ridding the borough of worn out, unhealthy dwellings, this should also provide a site for useful re-development.

SANITARY CIRCUMSTANCES.

The report of the Chief Public Health Inspector is included in Section C, D, and E and reference to these indicates the large volume and varied nature of the work carried out by the Staff of the Health Department. Unfortunately, there was a vacancy for a District Inspector in August and it had not been possible to fill this by the end of the year. This meant that some of the routine duties had to be curtailed so that the more urgent work could always be covered.

APPENDIX.

SECTION A—SUMMARY OF STATISTICS AND SOCIAL CONDITIONS.

CO	MILLIONS),			
Area in acres				4	4,234
Population (Census 1951)				41	1,944
Population (Estimated 1956)				42	2,420
Number of inhabited houses	(estimated)			11	1,833
Rateable value				£992	2,894
Sum represented by a Penny	Rate			£	3,967
BIRTHS.					
Birth Rate per 1,000 of est	timated resi	dent pop	ulation		13.1
		(Correct			12.0
Total number of births (liv	ve and still)				556
Analysis:—	λ	1	F	Tota	1
Live Births Legitimate	26	58	236	504	
Illegitimat	e 1	7	23	40	
Still Births Legitimate		7	4	11	
Illegitimat	е -	4	1	1	
Still Birth Rate per 1 000	total birth	C			216

Environment of Births:-		
Proportion taking place in Institutions		76.4
Proportion taking place in dwelling houses		23.6
DEATHS.		
Death Rate per 1,000 estimated resident population		12.9
(corrected)		9.9
Total number of deaths from all causes		549
Analysis:— M F	Total	Rate
All causes 256 293	549	12.9
Cancer 44 49	93	2.2
Diphtheria — —	-	Nil
Measles — —	_	Nil
Whooping Cough	_	Nil
Diarrhoea (under two years) — —	_	Nil
Tuberculosis 4 2	6	0.14
Influenza — 1	1	0.02
Acute Poliomyelitis (including		
Polioencephalitis) 1 —	1	0.02
Pneumonia 6 7	13	0.30
MATERNAL MORTALITY.		
The provisional numbers of deaths and death rates live and still births are:—	per 1,00	0 total
England and Wales.	umber	Rate
Maternal causes, excluding abortion	330	0.46
Due to abortion	71	0.10
Total maternal mortality	401	0.56
Richmond.		
Maternal causes, excluding abortion 1	Vil	Nil
Due to abortion 1	Vil	Nil
Total maternal mortality 1	Vil	Nil

Infant Mortality (Deaths	under one	year of ag	e).		
Infant Mortality Rate for	r all infants	per 1,000	live l	oirths	25.7
Rate for legitimate infan	ts per 1,000	legitimate	live	births	21.8
Rate for illegitimate infar	nts per 1,000	illegitima	te live	births	75.0
Total number of infant de	eaths in the	Borough			14
Analysis:		M	F	Total	
Legitimate		4	7	11	
Illegitimate		-	3	3	
Environment of Infant D	eaths:—				
Number occurring	in the Boro	ugh			2
Number occurring	g outside the	e Borough	n		12
Number occurring	g in Institut	ions			12
Causes of	Death under	1 year of	age.		

Cause of Death	Under 1 week	1-2 weeks	2-3 weeks	3-4 weeks	Total under	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 I year
1. Pneumonia 2. Acute Suppurative										
Bronchitis	***									
3. Whooping Cough						***	***			***
4. Atelectasis	1	***			1				***	***
5. Prematurity	8			***	8		***		***	
6. Congenital Abnormality			***		2		***		***	
7. Asphyxia (Accidental)	2				2					
8. Middle Ear Disease			1		1					
	13		1		14					·

PREMATURE LIVE BIRTHS.

PREMATURE STILLBIRTHS.

		Born in	Hospital			Born and	ome	and Transferred to Hospital			Born in Hospital	Born at Home	Born In Nursing Home			
Weight	Total	Died within 24 hours of birth	Died 2nd-28th day	Survived 28 days	Total	Died within 24 hours of birth	Died 2nd-28th day	Survived 28 days	Total	Died within 24 hours of birth	Died 2nd-28th day	Survived 28 days				
3lb. 4oz. or less	5	5	_	-	-	_	-	-	1	-	1	-	2	. 1	-	
Over 3lb. 4oz to 4lb. 6oz	8	2	1	5	-	-	-		-	-	-	-	1	-	-	
Over 4lb. 6oz. to 4lb. 15oz.	6		-	6	1	-	- 1	1	1		-	1	-	_	. —	1.5
Over 4lb. 15oz. to 5lb. 8oz	8	_	1	7	5	1	-	4	-			-	1	-	-	
TOTALS	27	7	2	18	6	1	_	5	2	_	1	1	4	1		

Note:

No cases in following catergories:

- 1. Born in Nursing Homes and nursed entirely there.
- 2. Born in Nursing Home and transferred to hospital on or before 28th day.

ILLEGITIMATE BIRTHS

	1947	1948	- 1949	1950	1951	1952	1953	1954	1955	1956
No. of illegitimate live births	54	38	40	43	43	25	34	33	31	40
No. of illegitimate deaths under 1 year	2	0	1	2	0	3	1	2	0	3
Illegitimate death rate	36	0	25	46	0	120	29	60	0	75

COMPARATIVE STATISTICS - 1956.

	Rate per 1,000 Population LIVE BIRTHS	Rate per 1,000 (Total Live & Still) STILLBIRTHS	Rate per 1,000 Population DEATHS (All Causes)	Rate per 1,000 Related Live Births DEATHS (Under One Year)	Neonatal Mortality (Under 4 weeks) (Live Births).
England & Wales	15.6	22.9	11.7	23.8	16.9
Richmond	12.0 (Corrected)	21.6	9.9 (Corrected)	25.7	25.7

14

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

These are mainly provided by the Surrey County Council, the South West Metropolitan Regional Hospital Board, and the Executive Council for the County. In order to make the report complete these are briefly described below.

(a) Services Provided by the Surrey County Council.

These are organized on a Divisional basis, the Northern Division comprising the Boroughs of Richmond and Barnes. The Medical Officer of Health for Richmond is also the Divisional Medical Officer and this arrangement provides close co-ordination of the personal health services and environmental health.

Administrative, Infant Welfare, and School Medical functions are carried out from the following Centres:—

Divisional Health Offices and Welfare Centre, Kings Road,

Richmond.

Welfare Centre, Windham Road, Richmond.

Welfare Centre, Back Lane, Ham.

Health Visitors are employed and, according to the District in which they work they are based on one or other of the above centres.

District Nurses and Midwives are provided and in Richmond their centre is the Nurses Home, 19, Larkfield Road. They work under the direct supervision of the general practitioners.

Moral Welfare or the care of unmarried mothers and illegitimate children is undertaken by an officer based at the Divisional Health Office.

A Home Help Service provides for domestic help in the home in cases of home confinement or illness. The service is under the management of the Home Help Supervisor who is based at the Divisional Health Office.

An Ambulance Service is provided from the station in Kings Road, Richmond which operates under the control station in Malden. The service is supported by the ambulance of the local division of the St. John Ambulance Brigade.

A Day Nursery for the care of children up to the age of five years is located in Parkshot, Richmond.

(b) Services Provided by the Regional Hospital Board.

Hospitals.

The Royal Hospital and Kingston Hospital provide general treatment both for in-patients and out-patients. In addition, hospitals in London and Middlesex are frequently used by Richmond residents.

Patients suffering from infectious diseases are admitted to the South Middlesex Hospital, Mogden Lane, except in the few instances when no beds are available. In these cases, patients are admitted to Tolworth Isolation Hospital or to a hospital in the London area.

Psychiatric Services.

The Medical Staff of Banstead Hospital hold an Out-patient Clinic every Tuesday afternoon at the Royal Hospital for patients living in Richmond and Barnes.

During the year there were 125 new cases with a total of 564 attendances at the Clinic.

Admissions to hospital numbered 78 females and 49 male patients and of these, over 90% entered as voluntary patients.

In addition to the Clinic and Hospital facilities, local General Practitioners can readily arrange for domicilliary visits by Specialist psychiatrists.

Laboratory Facilities.

The laboratory of the Royal Hospital is available for the examination of specimens sent in by general practitioners.

The Ministry of Health, Public Health Laboratory, Epsom, is available for the examination of samples of milk, ice-cream, and water and of any pathological specimens.

In addition, the staff is always available to assist the Medical Officer of Health in field investigations in the case of epidemics or outbreaks of food poisoning.

The Central Public Health Laboratory, Colindale, N.W.9, is available for advice, special immunising agents and special investigations.

The Counties Public Health Laboratories, Victoria Street, S.W.1 are used for the examination of water samples and for advice in the control of purity of the water supply.

Mortuary. This is provided and maintained by Richmond Borough Council on a site close to the Petty Sessions Court. It is well equipped with two post-mortem examination tables. All such examinations required within the boroughs of Richmond and Barnes are carried out here and Barnes Borough Council make an annual payment for this service.

Nursing Homes.

The following private Nursing Homes are registered by the Surrey County Council:—

The Misses E. Town and D. Smith, 9, Townshend Road. Tyneham House Nursing Home, 108, Church Road. Tuqvor House Nursing Home, 18, Mortlake Road, Kew.

(c) Services Provided by the Surrey Executive Council.

Under Part IV of the National Health Service Act 1946, the Surrey Executive Council has the responsibility of providing General Medical and Dental Services, Pharmaceutical Services, and Supplementary Ophthalmic Services.

Twenty-two doctors living within the Borough have undertaken to provide General Medical Services. Many of these have also undertaken to provide Maternity Medical Services. A list of doctors taking part is available at the Main Post Office, Public Library and Public Health Department.

The offices of the Council are situated at 187, Ewell Road, Surbiton

SECTION C-SANITARY CIRCUMSTANCES.

Water Supply.

Richmond has two separate sources of drinking water:-

- (a) From local wells.
- (b) From the Metropolitan Water Board.

The origin and method of treatment of these supplies have been fully reported in previous years and remain unchanged.

Both supplies are treated by chlorination: and very close observation of the purity of the water is maintained by frequent examinations of the water samples.

During the year the following samples were taken for examination:—

(a) Richmond Water Supply.

Untreated water ... 229 samples
Treated water ... 383 samples
For chemical analysis ... 18 samples

Every sample of treated water passing into public supply was of the highest standard of bacterial purity.

Chemical analysis of samples showed that the organic quality of the water maintained a high and satisfactory standard.

(b) Metropolitan Water Board Supply.

Samples examined bacteriologically ... 985 Samples examined chemically ... 225

The results of these examinations indicated that a very high standard of chemical and bacteriological purity was maintained throughout the year.

In addition to these two supplies of drinking water there is a supply of raw river water which is delivered to Kew Gardens, allotments and to the gardens of a proportion of the residences in Richmond. The water is chlorinated as a precautionary measure but is not fit for drinking. Forty-nine samples of river water were bacteriologically examined during the year.

The following figures show the daily average consumption from the three sources:—

	1955	1956
All Richmond Wells	 757,972 galls.	728,134 galls.
Metropolitan Water Board	 932,320 galls.	926,140 galls.
Raw River Water	 251,896 galls.	247,945 galls.

The drinking water supplies in the district are not plumbosolvent.

Water fit for human consumption is made available by piped supply to every dwelling house in the Borough.

PUBLIC HEALTH INSPECTIONS.

For the following particulars I am indebted to the Chief Public Health Inspector, who submitted his Report in accordance with the Sanitary Officers (Outside Tondon) Regulations, 1935.

Sanitary Officers (Outs	side Lond	on) Regulation	ns, 193	5.			
Inspections during 195			/77				
Houses inspected a			(Hous	ing Act)	68 824		
Houses inspected (Houses inspected (Public Health Acts)						
Revisits to houses	er premises			1245			
Houses visited for	Certifica	ites of Disrepa	ir		44		
Visits paid in connec	ction with	h:—					
Permitted number	for dwell	lings			28		
Vermin					69		
Disinfection					86		
Enquiries into Inf					78		
					, ,		
Routine inspections	in connec	tion with:—					
Factories (mechan	ical)				28		
Factories (non-med	chanical)				10		
Outworkers					3		
Bakehouses					60		
Butchers' Shops					11/3		
Dairies and Milk S					57		
Fishmongers and	*				52		
		S			17		
Fried Fish Shops				•••	92		
Ice-cream premises					85		
Greengrocers and	Fruiterers						
Grocers					117		
Public Houses					51		

Restaurants and Tea Shops			 198
Food and Drugs Act Sampling			 157
Milk Sampling (Designated M	Milk)		 152
Ice-cream Sampling			 50
Unsound Food			 154
Drainage			 541
Interviews			 441
Massage Establishments			 4
Pet Animals Act, 1951			 21
Petroleum Act, 1928			 158
Piggeries			 9
Public Conveniences			 11
Rag Flock Act			 24
Rats and Mice (Visits to Pro	operties)		 4805
Rats and Mice (Visits re sewe	er treatment	s)	 1293
Schools-Elementary and Second			 31
Shops Act, 1950			 316
Smoke Nuisances—Inspection	and Obser	vations	 28
Theatres and Cinemas			 6
Water Supply			 214
Miscellaneous Visits			 1005
			12,745

PUBLIC HEALTH CONTRAVENTIONS AND DEFECTS.

The visits and inspections made during the year, which covered all classes of premises, resulted in the following matters being reported for attention:—

Animal nuisances			,	1
Basement areas inadequate				2
Ceilings broken or otherwise def	ective			83
Chimney stacks defective				19
Clothing accommodation in food	premises	inadequate		8
Coppers broken or otherwise def				3
Damp-proof courses required or		,		4
Doors defective				27
Drainage systems obstructed				63

Drainage systems leaking or defecti	ive		 69
Firegrates and flues defective			 27
First-aid equipment in food premise	s inadequate	2	 28
Floors broken or otherwise defective	e		 61
Floor drainage inadequate			 6
Food preparation equipment unsati	isfactory		 55
Food rooms requiring reconstruction	n		 11
Food storage unsatisfactory			 18
Gutters leaking or defective	****		 71
Hot water supply provided			 . 6
Lighting inadequate			 4
Paving inadequate or defective			 8
R.W.Ps. ventilating drainage syste	ms		 2
R.W.Ps. broken or otherwise defec	tive		 22
Refuse accumulations			 49
Refuse receptacles defective			 92
Roofs leaking or defective			 131
Rooms requiring cleansing			 1:00
Sanitary accommodation insufficien	t		 2
Sanitary accommodation not separa	ate for sexes		 _
Sinks insanitary or defective			 32
Sites requiring concrete			 3
Soilpipes leaking or defective			 19
Staircases defective			 26
Ventilation of rooms inadequate			 8
Verminous premises			 3
Walls: plaster defective			 186
Walls: brickwork defective			 29
Washing facilities in food premises	inadequate		 23
Wastepipes leaking or defective			 24
Water fittings defective			 63
Water supply inadequate			 24
W.C.'s leaking or defective			 66
Windows defective			 190
Miscellaneous defects			 89

1,757

At the end of the year, 1,182 of the defects discovered had been abated, the work of remedying 141 was in hand, and the balance of 434 was still outstanding.

In order to see that the defects were being properly remedied 1,245 visits were paid to the various premises.

NOTICES TO REMEDY CONTRAVENTIONS AND ABATE NUISANCES.

Informal Action.			
Preliminary intimations			448
Verbal intimations			40
Statutory Action.			
Act and Section.	No	tices	Notices
	Autho	orised.	Served.
Housing Act, 1936			
Section 9 (Repairs)	 _		-
Public Health Act, 1936.			
Section 24 (Drainage)	 12		5
Section 39 (Drainage)	 24		16
Section 45 (Defective Closets)	 13		7
Section 46 (Insufficient Closets)	 		_
Section 75 (Dustbins)	 13		13
Section 92/93 (Nuisances)	 50		39

In the main the requirements of statutory notices were complied with, but in respect of two properties urgent drain repairs were carried out by the Council in default of the owners, following the service of notices under the Public Health Act, 1936. In all cases where the local authority do work in default, the cost is recovered from the persons responsible in law.

Legal proceedings were taken in respect of one property under Section 94, Public Health Act, 1936, when on the 16th April, 1956, a nuisance order was made against the owner to carry out works of repair within six weeks.

COMPLAINTS.

The number of complaints received was 842, which is an increase of 38 compared with 1955.

The	complaints	received	have	been	classified	as	follows:
-							

Disrepair or unsatisfactory	conditions	s of premises	s:	
Dampness				. 30
Drainage				89
General Defects				320
Nuisance from Animals				6
Nuisance from Refuse				13
Nuisance from Smoke, fun	nes			25
Nuisance from Vermin				39
Rodent infestations				275
Unsound food				31
Miscellaneous Nuisances				14
				842

Prompt investigation was made and suitable action taken to remedy the complaints.

DISINFECTION AND DISINFESTATION OF PREMISES.

Reason.	Houses.	Rooms.	Bedding, etc
Infectious Fevers	22	22	68
Tuberculosis	9	9	48
Vermin	11	24	19
Other Diseases	5	6	429

Costs recovered throughout the year: £14 6s. 0d.

Evidence of bed-bug infestation in dwellinghouses continues to diminish; spraying with a 5% D.D.T. solution in Kerosene remains the most economic and effective treatment, and no instance has been recorded in Richmond of Cimex Lectularius being resistant to D.D.T. An alternative treatment employing a 5% B.H.C. spray is also available in cases where D.D.T. is considered undesirable.

The policy of spraying School Kitchens, operating under the School Meals Service, has been continued and involves one treatment annually of 5% D.D.T. solution which leaves a residual film of insecticide on the walls as a deterrent to flies.

The quantity of clothing fumigated before being sent abroad has increased in recent years; this service is carried out on behalf of members of the public to satisfy Post Office regulations, and a small charge is made for the treatment.

Factories Act, 1937.

At the end of the year there were 159 factories on the register (138 mechanical and 21 non-mechanical) carrying on the following trades:—

	Mechanical.	Non-
		Mechanical.
etc	 2	
	 8	_
	 _	1
	 - 2	_
epairing	 9	_
	 2	2
	 2	_
	 5	_
	 4	_
	 1	. 1
	 . 7	. 5
its, etc.	 6	anager
	 20	
lstery	 8	6
	 6	2
aning	 4	1,
	 2	_
iring	 24	_
	 3	_
	 6	_
	 2	_
	 1	2
	 1	_
ture	 1	_
	 4	1
	 8	
	138	21
	 epairing its, etc. iring iring iring iring iring	etc 2 82 epairing 9 2 5 4 1 7 6 20 6 20 6 6 6 6

In addition, 6 premises were recorded for the purpose of Section 7 of the Act (suitability of sanitary accommodation) being Institutions or sites of building operations.

Thirty-eight visits of inspection were made to the premises outlined above and the following defective conditions were remedied:—

Want of cleanliness t	to Factory walls, etc			10
Inadequate ventilation	n of Factories			-
Ineffective drainage	of Factory floors			_
Insufficient Sanitary				_
Unsuitable or defec	tive conditions in	Sanitary	accom-	
modation				2
Other matters requir	ing attention			9
				-
and the second		1-1	,	21

ATMOSPHERIC POLLUTION.

Richmond, being a residential town, has few large works or factories, but the number of complaints concerning smoke emission continues at a comparatively high level, and their investigation remains an important duty of the Inspectors.

Twenty-five complaints were received during the year and twentyeight observations for excessive smoke were made. Generally, interviews, with managers and advice to stokers resulted in improved conditions and no grounds were found to justify statutory action.

Many of the complaints related to factory chimneys which are set among residential properties, and powers under the Public Health Act byelaws limit action by the local authority to those instances only where black smoke is being emitted. Despite this inadequate statutory standard there has been a happy record of co-operation with factory managements in reducing smoke emission to a minimum.

The Clean Air Act was passed by Parliament during the year but had not come into operation by the 31st December. The Act will strengthen the control which local authorities can exercise in reducing atmospheric pollution, and it is likely that emphasis will need to be given to this field of environmental hygiene as soon as the Act becomes effective.

PREVENTION OF DAMAGE BY PESTS ACT, 1949.

The rodent control section of the staff have done much useful work during the year in eradicating rats and mice from premises and foul sewers.

A total of 4,805 visits was made to dwellings and business premises througout the year.

Complaints of infestation by rats or mice numbered 275 and inspection and investigation revealed rat infestation at 148 premises and mice infestation at 113 premises. By the end of the year infestation had been cleared at 244 of these premises.

Treatment of the foul sewers was carried out on two occasions, a total of 1,293 visits being made for this purpose in connection with inspection, baiting, poisoning and checking results. In all, 383 manholes were dealt with and of this number 144 were found to be infestated and were poison baited.

An interesting departure was made from the accepted baiting routine when the second treatment of foul sewers was carried out in November. In co-operation with the Ministry of Agriculture, Food and Fisheries, a new technique was practised whereby a mould-inhibitor (paranitrophenol) was added to the baits, thus providing a longer period for the rats to establish a feeding habit in the sewer manholes. A comparison between the baiting time-tables of the old and new methods clearly shows this advantage.

OLD METHOD.

1st day: Prebaiting with damp sausage rusk.

2nd day: Renew baits.

3rd day: Poison baiting (zinc phosphide).

5th day: Inspection.

New Method.

1st day: Prebaiting with damp sausage rusk + paranitrophenol.

4th day: Renew baits.

8th day: Poison baiting (zinc phosphide).

11th day: Inspection.

The degree of added efficiency which is claimed for the new method can only be assessed when the treated areas are baited again in 1957, but preliminary inspections indicate that there is now a greater prospect of reducing sewer infestations.

SHOPS ACT, 1950.

There are 793 shops on the Department's Register and 316 inspections were made during the year. This work continued the survey of

shop premises which was started at the end of 1955, and the attention of occupiers was drawn to the following contraventions of the Act:-

(1)	Failure to exhibit necessary forms	 26
(2)	Lack of satisfactory ventilation	 _
	Lack of satisfactory heating	 4
(4)	Lack of satisfactory lighting	 _
(5)	Lack of suitable handwashing facilities	 1
(6)	Lack of suitable sanitary accommodation	 _

Advice is given, from time to time, on the employment of young assistants, hours of closing, and other welfare provisions of the Act, and in no instance was it necessary to resort to legal proceedings to enforce these statutory requirements.

RAG FLOCK AND OTHER FILLING MATERIALS ACT, 1951.

This Act came into force on the 1st November, 1951 and briefly its provisions call for the registration of all premises in which Rag Flock or other filling materials, as defined in Section 33 of the Act (i.e.: Kapok; Woollenfelt; Cotton flock, etc.) are used, in the manufacture of bedding, toys, babycarriages and other articles of upholstery.

The Act also calls for the licensing of premises where Rag Flock is (a) Manufactured; (b) Stored for distribution to registered premises but no premises coming within this definition are situated within the Borough.

Only one factory in the Borough has been registered, and no infringement of the provisions of the Act was observed.

PET ANIMALS ACT 1951.

This Act came into force on the 1st April, 1952 and is designed to secure for Pet Animals kept in shops, for sale to the Public, suitable accommodation as regards size, temperature, lighting, ventilation and cleanliness; adequate supplies of food and drinking water; prevention of sale at too early an age; precautions to prevent the spread of infectious diseases amongst the animals and precautions to be taken in case of fire or other emergency.

No person may now keep a pet shop unless he obtains a licence from the Local Authority, and it is an offence to sell animals as pets in any part of a street or public place, except at a stall or barrow in a market, or to sell pets to children under 12 years of age.

In the Act, "animals" is defined as including any description of vertebrate and as such includes goldfish and cage birds, which are the principal sales in the shops licensed in the Borough.

Five premises hold licences from the Richmond Borough Council to carry on this business.

Regular inspection of the premises is carried out, and a close liaison maintained with the Local representative of the Royal Society for the Prevention of Cruelty to Animals.

Licences are renewable annually and an inspection is made before renewals are brought before the Council.

DISEASES OF ANIMALS ACT 1950.

The number of outbreaks of Foot and Mouth Disease reported throughout England and Wales was not unduly serious in 1956.

Richmond was not directly involved in any outbreak and was not affected by Infected Area Restrictions on any occasion.

These restrictions control the movement of animals except for special purposes and in this connection no licences were issued or countersigned.

PETROLEUM (CONSOLIDATION) ACT 1928 AND REGULATIONS MADE THEREUNDER.

Fifty-seven premises within the Borough are licensed to store a total of 65,043 gallons of Petrol, Petroleum Mixtures and Cellulose solutions.

They have received regular inspection to ensure that the various regulations have been observed. In all a total of 158 visits was made to the various installations.

Six new licences were approved, three licences were not renewed, and the total licence fees amounted to £35 17s. 6d.

Only minor infringements of the Regulations were found,

SECTION D-HOUSING.

Housing Statistics for the Year 1956.

1.	Number	of dwellings owned by the Local Authority:-	
		Number of Houses 1440	
		Number of Flats 400	
	1.1		
		1840	
2.	Unfit H	ouses.	
	(I) Insp	pection of Dwelling Houses during the Year:-	
	(i)	(a) Total number of dwelling houses inspected for housing defects (under Public Health or Housing Acts) 892	2
		(b) Number of inspections made for the purpose 218	1
	(ii)	(a) Number of dwelling houses (included under sub-head (1) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925 and 1932	8
		(b) Number of re-inspections made under the Regulations 154	1
	(iii)	Number of dwelling houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation 10	
	(iv)	Number of dwelling houses (exclusive of those referred to under the preceding subheading) found not to be in all respects reasonably fit for human habitation 318	3
	(III) D	reasonably he for human habitation	
		emedy of Defects during the Year without service formal notices:—	
	,	Number of defective dwelling houses rendered fit in consequence of informal action by the Local Authority or their officers (including cases outstanding from	
		the previous year) 294	-

(III). Acti	on under Statutory Powers during the Year:-	
A. Pr	roceedings under sections 9, 10, and 16 of the Housing Act, 1936:—	
(i)	Number of representations made to the Local Authority with a view to the serving of Notices	N7:1
(ii)	Number of dwelling houses in respect of which	Nil Nil
(iii)	notices were served requiring repairs Number of dwelling houses which were rendered fit after service of formal notices:—	1/11
	(a) By owners (b) By Local Authority in default of owners	Nil Nil
B. Pro	oceedings under the Public Health Acts:-	
(i)	Number of dwelling houses in respect of which notices were served, requiring defects to be	
(ii)	Number of dwelling houses in which defects were remedied after service of formal notices:—	47
	(a) By owners (b) By Local Authority in default of owners	55 2
C. Pro	Act, 1936:—	
(i)	Number of representations made to the Local Authority with a view to the making of Demo-	
(;;)	lition Orders	1
	Number of dwelling houses in respect of which Demolition Orders were made Number of dwelling houses demolished in pur-	Nil
()	suance of Demolition Orders	Nil
(iv)	Number of houses in respect of which an under- taking was accepted under sub-section (3) of	
	Section 11 of the Housing Act, 1936	Nil
D. Pro	occeedings under section 12 of the Housing Act, 1936:—	
(i)	Number of representations made to the Local Authority with a view to the making of Closing	
	Orders	NII

(ii) Number of separate tenements or underground rooms in respect of which Closing Orders were made	Nil
(iii) Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement or room having been rendered fit	1
3. Overcrowding.	
Overcrowding is still considerable throughout the Bor The points scheme of House allocation usually covers the wo these cases and their overcrowded conditions are relieved as and houses are available.	rst of
4. Council Houses.	
Total number of houses erected post-war to 31st December,	
1956 Temporary bungalows	179
Permanent houses 485 Permanent flats 232	717
	896
During 1956, 22 Temporary Bungalows in Peldon Avenue were demolished	22
	874
Total number included in above, erected in 1956 Permanent houses	Nil
Permanent flats	28
Total number of Emergency houses up to 31st December,	
195,6 4 comprising 13 units	
Total number of requisitioned premises up to December 31st., 195.6 60 (comprising 134 units)	
Total number of families rehoused in 1956	13
Total number of families still on Waiting List at December	
31st 1056	907

Future Programme.

The erection of 8 one-bedroom flats and 2 two-bedroom flats in Stuart Road and Raleigh Road respectively, are nearing completion.

Following the demolition of the 22 prefabricated bungalows in Peldon Avenue, the redevelopment of this site to provide 100 units of accommodation has commenced.

As to the future, the temporary bungalows occupying the Ham Close site are to be demolished in stages ultimately giving a redevelopment of 229 units of accommodation. Planning permission has also been granted for the erection of 14 maisonettes on land adjoining Argyll House in Ham Street, and 6 flats at the northern end of King's Farm Avenue.

5. Housing Act, 1936: Unfit Houses.

During the year a group of 8 almshouses was inspected and represented for action under Section 25, Housing Act, 1936. A Clearance Order in respect of these properties was made by the Council in February, and was confirmed by the Minister in October. The demolition of these houses had not been started by the end of the year.

Two individual unfit houses were inspected during the year. In one instance the owner voluntarily demolished the property and cleared the site without recourse to statutory action, and in the other instance the owners voluntarily undertook not to allow the property to be used for human habitation.

6. Housing Repairs and Rents Act, 1954.

Part II of the Housing Repairs and Rents Act 1954, allows a "repair increase" of the rents of controlled houses, given certain conditions, and under Section 26, power is given to the local authority to grant certificates of disrepair if a house is not in good repair or is unsuitable for occupation having regard to the standard laid down in the Act. The granting of a certificate of disrepair by the local authority must be preceded by an application from the tenant after the landlord has claimed a repairs increase in rent.

The following tables show the action taken since the Act came into force:—

	1954	1955	1956
Certificates of Disrepair:			
Applications received	17	29	8
Applications refused	Nil	. 3 .	1
Certificates granted	17	26	7
Revocation Certificates (granted on completion of necessary repairs):			
Applications received	Nil	25	5
Applications refused	Nil	Nil	Nil
Certificates granted	Nil	25	5

SECTION E.—INSPECTION AND SUPERVISION OF FOOD.

Food Inspection.

The following foodstuffs, found to be unfit for human consumption, were surrendered by the owners and either salvaged for animal food or destroyed.

Articles	Tons	Cwts.	Qrs.	Ibs.
Fish	 _	2	2	24
Flour and Flour Confectionery	 	1	2	8
Fruit and Vegetables	 -	_	2	_
Meat and Meat Products	 _	7	1	18
Milk and Milk Products	 _	-	2	_
Sugar and Sugar Confectionery	 -	_	-	13
Tinned Goods (all classes)	 _	16	2	5
	1	9	1	12

Whenever possible condemned food is salvaged to be used for animal feeding, but in all other cases, the food is destroyed by burning at the Refuse destructor.

Thirty-one complaints, alleging that food had been sold in a condition unfit for human consumption, were received during the year and received full investigation, and in fifteen cases reports were made to the Health Committee. Warning letters were sent to offenders in twelve instances, and legal proceedings were taken in two cases under Section 2, Food and Drugs Act 1955. Both cases related to the same firm, and were heard on the 23rd July, 1956, when in respect of a jam sandwich containing a metal screw and a meringue containing a wire nail, the defendants were fined £20 and a total of 5 guineas costs.

Food & Drugs Act, 1938 (Sampling of Food and Drugs).

The following table shows the results of examinations made of samples procured for analysis during the year.

			Num	ber Ana	lysed		ulterated Irregular	
Articles.			Formal	In- formal	Total	Formal	In- formal	Tota
Almonds, ground			-	1	1			
A 1 T 11			_	1	î			
Di				î	i	195		
Diamita				1	î			
Duttur.			1	i	2	1 4 4 4		
Calca				3	3			
Cala Mino			5	,	5	4		4
Ot 0:1	•••		U	1	1	7		
	•••		- 1	1	2		1	1
	•••		1	1	1		1	
	***	***		2	0			
		***	-	2	2	1		
			. 1	-	1			
			-	4	4			
		***	. —	1	1			
	***		-	1	1			
			-	4	4	-	1	1
Glycerine of Thymol			-	1	1			
Halibut Liver Oil			_	1	1			
Ice-cream			6	1	7			
Lemon Cheese			_	1	1			
T ! C			1		1	1		
Manani			1	-	1			
Mr			_	1	1			
Milk		/	16	3	19	1	-	1
Muscatels			_	1	1			
Oil of Eucalyptus			_	2	2			
Onions, pickled				1	1			
				i	i			
D				1	1			
	•••			1	1	1 79.6		
Rice, creamed	***			1	1			
Roll and butter	***	***		1	1			
Salt, tenderising	***	***		1	1		-	
Sandwich spread			_	1	1			
Sausages		***	2	1	2		1	
Shrimps, potted		***	-	1	1			
Slimming Tablets	***			1	1			
Soup			-	1	1			
Steak and Kidney Pie			-	1	1	1 34		
Sweets	***		2	9	11	1	1	2
Trout, Smoked, pâte			-	1	1			
Totals			36	53	91	6	3	9

Samples Nos. 215, 217, 218 and 220: Cake Mixes.

Four formal samples of Cake Mixes were purchased on the 20th March, 1956, and in respect of each sample the Public Analyst reported that the ingredients did not include icing or filling, but that the carton bore a large picture of an iced and filled cake. The Public Analyst stated that in his opinion it should have been made clear on the carton that the contents did not include ingredients for icing and filling.

Correspondence with the four manufacturers showed that in two cases the product sampled was no longer being made. Representations were made by the other two manufacturers that the packaging and labelling of their products were not misleading, and no further action was taken on these samples.

Samples Nos. 222 and 252: Rum Fudge.

Samples of rum fudge purchased on the 9th April and 14th June, 1956 were examined by the Public Analyst and found not to contain genuine rum. Correspondence with the wholesaler and retailers showed that in each case the retailer had chosen to sell the sweets as "Rum Fudge", whereas the wholesaler described them as "Fudge with Rum Flavour". Undertakings were given by the retailers that the correct designation would be adhered to in the future.

Sample No. 265: Channel Islands Milk.

A formal sample of Channel Islands milk purchased on the 13th July, 1956 was examined by the Public Analyst and found to contain only 3.38% milk fat, whereas the statutory standard is 4%. In this case a warning letter was sent to the dairyman concerned.

Sample No. 269: Friars Balsam.

An informal sample of Friars Balsam B.P. was purchased on the 13th July, 1956 and the Public Analyst reported the product to be deficient in total solids and in total balsamic acids. Correspondence with the retailers showed that the stock had been immediately with drawn from sale, and the manufacturers stated that they had taken action to comply with the standards referred to by the Public Analyst. A subsequent sample of the product was found to be genuine.

Sample No. 273: Cottage Cheese.

An informal sample of Cottage Cheese purchased on the 6th December, 1956 was found by the Public Analyst to be deficient in milk-fat. The manufacturers stated that their product was based on an American recipe, but that they had immediately revised the ingredients to ensure a satisfactory standard. A subsequent sample of the product was found to be genuine.

CLASSIFICATION AND INSPECTION OF FOOD PREMISES.

The following table classifies food premises in the Borough according to the principal business carried on, and sets out the visits made to each class of trade:—

BUSI	INESS				No. of Premises	No. o Visits
Bakehouses					11	60
Butchers (includes 28	premises	registe	red for	the		
manufacture of prese	erved for	od)			34	113
Confectioners (Flour) .					17	10
Confectioners (Sugar) .					44	24
Dairies (premises register	red unde	er Milk	and Da	iries		
Regulations) .					6	57
Fishmongers					16	69
Greengrocers					39	85
Grocers					78	83
Ice-Cream Premises (Reg	istored	for Man	nfacture		21	
Jee-Cream Fremises (Reg	stored f	on Solo e	and Store	200)	108	92
Ice-Cream Premises (Regi			inu bioi		77	51
***************************************					4 (2)	198
Restaurants, Cafes, etc	••			***	92	190
					524	842

IMPROVEMENTS IN FOOD PREMISES.

The standard of hygiene required in food premises is now set out in the Food Hygiene Regulations 1955, which became operative during the year under review.

The old standard was contained in Section 13 of the Food and Drugs Act, 1938, and many of its provisions had been found, in practice, to be ambiguous and to contain loop-holes which resulted in a lack of uniformity when applying the section.

The new Regulations are not perfect, but they contain many improvements which are welcomed. A constant supply of hot water for sinks and wash-hand basins, first-aid equipment, clothing lockers, and the temperature control of certain foods, are among the new provisions which make the Regulations workable and in line with the demand of public opinion for cleaner food.

Throughout the post-war years, considerable attention has been focused, in Richmond, on attaining higher standards in food premises, and successive annual reports give evidence of the ready co-operation extended by proprietors and managements in achieving this end. It is therefore pleasing to record that during the year the work of implementing the new Regulations was effected with the same degree of harmony and without recourse to statutory action.

As the result of the inspections made the following improvements have been carried out:—

1.	Food Rooms reconstructed		10	premises
2.	Food rooms repaired, cleansed or redecorated		73	,,
3.	Food storage improved	11996	17	
4.	Food preparation equipment renewed			**
5.	Ventilation and lighting of food rooms impro	ved	1	,,
6.	Staff washing facilities improved		20	"
7.	Staff clothing accommodation provided		4	,,
8.	First Aid Boxes provided		27	"
9.	Constant hot water supply installed		5	**
10.	New sinks provided		10	"
11.	Existing Sanitary accommodation improved		10	,,,
12.	Drainage improved, repaired or altered		9	"
13.	Refuse accumulations removed		11	"
14.	Refuse receptacles provided		33	"
15.	Other improvements or repairs carried out		77	,,

Byelaws as to the Handling, Wrapping and Delivery of Food and Sale of Food in the Open Air.

The above byelaws which came into force on the 24th July, 1950, have received special attention by Public Health Inspectors visiting and inspecting food premises and it is pleasing to note that proprietors and staff of food establishments are in general observing the requirement.

In many cases attention has been drawn to infringements, and advice has been given in an endeavour to help management and staff to reach a higher hygienic standard.

Ice-Cream.

Premises manufacturing, storing or selling Ice-Cream have been regularly supervised, a total of 92 visits being made. Two premises are registered for the manufacture of ice-cream, and 108 premises are registered for sale and storage; both manufacturers carry out the heat-treatment of ice-cream by raising the product to a temperature of not less than 160°F. for 10 minutes, and the high-temperature-short-time method of heating to 175°F. for 15 seconds, permitted by the Ice-Cream (Heat Treatment) Regulations, 1952, is not in use.

Eighty-six samples were submitted to the Public Health Laboratory for examination, and 65 were satisfactory (Grades I and II) and the remaining 21 were considered to be unsatisfactory (Grades III and IV). The unsatisfactory samples were followed up by careful inspection of the premises, equipment and methods of manufacture and storage. Fourteen of these samples came from eight retailers' premises and were due to unsatisfactory methods in sterilizing the servers. Four of the samples were taken from a restaurant where investigation showed that the main water supply was being contaminated in an old uncovered storage tank; a chain of contamination followed from the server water to the servers and then to the ice-cream. The remaining three samples were taken from a local manufacturer, and in this instance, it was found that the cooling process was being delayed. In carrying out these investigations, 43 samples of server water were examined bacteriologically of which 13 were found to be unsatisfactory. In all cases the necessary improvements were advised and carried out to eliminate unsatisfactory results.

The policy in sampling is to concentrate upon premises which have produced unsatisfactory samples in the past, and to sample only occasionally those dealers who produce good results. The standard of ice-cream production, storage and sale is generally high and complies with the Ice-Cream (Heat Treatement) Regulations, 1947/52.

Sampling for Bacteriological Examination.

A wide range of food was sampled during the year, attention being concentrated on those foods which provide a good medium for bacterial contamination.

Twenty-two samples were taken of synthetic cream, egg albumen, ice and iced water, mussels, cockles, meat patties, flavoured drinks and salad cream. The results were satisfactory in all cases except one of synthetic cream, which had been taken from a restaurant kitchen. The proprietor was advised on the importance of storing the opened tin in the refrigerator when it was not in use.

Milk-Licencing and Sampling.

Under the provisions of the Food and Drugs (Milk, Dairies and Artificial Cream) Act, 1950, and Regulations made thereunder, Dairy Farms have become the direct responsibilty of the Ministry of Agriculture and Fisheries: the premises on which milk is pasteurised or sterilised are licenced by the Food and Drugs Authority and in all other cases, Dairies or Dealers in Designated milk come under the complete control of the Local Authority in respect of licencing, inspection and control.

There is one dairy farm within the Borough under the control of the Ministry, and there are two pasteurising premises licensed by the Council as the Food and Drugs Authority.

The following licences have been granted by the Council authorising dealers to store and sell Designated milks:—

Pasteurise	d Milk		 18
Tuberculin	n Tested	Milk	 19
Sterilised	Milk		 21

Supplementary licences were also granted, authorising dealers to retail milk in the Borough from premises situated outside, as follows:—

Pasteurised Milk	 9
Tuberculin Tested Milk	 9
Sterilised Milk	 8

All premises are inspected before licences are granted, and principal licences are verified with the appropriate local authorities before licences are issued.

No licences were refused.

Under the regulations the Local Authority continued to take samples from dealers and during the year under review the following were taken:—

Pasteurised Milk		110	samples
Number found unsatisfactory		Nil	
Tuberculin Tested (Pasteurised)	Milk	24	,,
Number found unsatisfactory		Nil	
Raw Milk examined biologically f	for the		
presence of Tubercle bacilli		3	**
Number found unsatisfactory		Ńil	

The District Medical Officer of Health retains the power to take appropriate action to prevent the spread of disease by infected milk.

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

(Civilians only).

Diseases.	Total Cases Notified.	Cases Admitted to Hospitals.	Total Deaths
Scarlet Fever	25	15	
Pueperal Pyrexia	_	_	
Pneumonia	13	_	1
Erysipelas	8	5	_
Measles	85	_	_
Whooping Cough	26	1	_
Poliomyelitis Paralytic	2	2	1
Poliomyelitis Non Paralytic	_		_
Dysentery	3	_	_
Ophthalmia Neonatorum	3	_	_
Food Poisoning	5	_	_
Typhoid	-	_	_
Paratyphoid	_	_	
Encephalicis	_	_	
Meningoccocal Infection	1	1	_
Total	171	24	2

FOOD POISONING.

Total number of outbreaks	 	1
Number of cases notified	 	5
Number of deaths	 	Nil

DIPHTHERIA IMMUNISATION.

Number of children immunised for the first time during the year 1956:—

(a)	Pre-School children (under 5 years)	 555	
(b)	Between 5 and 15 years	 38	
1			593

Grand Total of Children in the Borough who have received immunising treatment by the end of the year:—

(a)	Under 5 years			2020
(b)	Between 5 and 15	years		4867
Number of	of children given re-in	nforcing doses	during	900

The following table shows the percentages of children immunised as recorded in the Annual Reports since 1949:—

	1949	1950	1951	1952	1953	1954	1955	1956
Under 1 year		_		_	_	_	66.3	77.2
Under 5 years	69.8	69.0	67.6	69.9	65.1	71.1	70.7	72.7
5 to 15 years	94.0	91.4	95.2	91.5	95.8	95.9	96.0	96.1

In addition the policy of giving single reinforcing doses at appropriate intervals during a child's school life has been continued.

WHOOPING COUGH IMMUNISATION.

A combined prophylactic giving protection against Diphtheria and Whooping Cough is used, or in cases where Diphtheria Immunisation has already been completed, protection against Whooping Cough is given separately.

During the year 550 children completed a primary course of inoculation against Whooping Cough. In addition 75 older children received reinforcing doses. At the end of the year, 2,437 children had been given the full course of protective inoculations since the scheme commenced in October 1952.

VACCINATION AGAINST SMALLPOX.

 Analysis of vaccinations at Welfare Centres and Private Doctors' Surgeries.

			Children.	Adults.
Primary Vaccina	ation		429	24
Re-vaccination			39	220
		Totals	468	244
	Gran	nd Total	712	

 Figures showing the percentage of children under 1 year vaccinated during 1956.

No. Vaccinated Estimated mid-year Population % Vaccinated under 1 year.

369 570 64.7

Immunization against Tetanus.

In August 1956 the Ministry of Health approved the use in County Clinics of Anti-tetanus Antigen, either in the form of the triple Antigen (with diphtheria and whooping cough) or separately. It is available on request by the parent.

At the end of 1956, 29 children had been given full courses of the inoculations.

VERMINOUS CONDITIONS.

YEAR	1944	1945	1946	1947	1948	1949	1950	1951	1952	1953	1954	1955	1956
Scabies .	431	274	377	66	12	11	7	2	Nil.	4	Nil.	Nil.	Nil.
Head Lice	181	188	308	239	78	141	129	98	40	54	42	62	57

Figures in the above table are children attending schools in the Borough found to be verminous at routine inspections in school by Health Visitors.

Scabies is no longer a problem in the district. The 57 cases of louse infestation are school children who are well known to the School Nurses. They are given materials for cleansing and parents are given full instructions. Bad cases are cleansed at the school clinics by the Health Visitors.

TUBERCULOSIS.

The position in Richmond for the year 1956 may be summarised as follows:—

NOTIFICATIONS:

Respiratory Tuberculosis.

Twenty cases of respiratory tuberculosis were notified during the year, viz:—14 males and 6 females. The corresponding figure for 1955 was 28.

Non-Respiratory Tuberculosis.

Two new cases of non-respiratory tuberculosis were notified during the year and there were no deaths from this cause. Five such cases have been notified during 1955.

TUBERCULOSIS REGISTER.

After all additions and deletions had been taken into account the number of cases of tuberculosis remaining upon the Register at the close of the year was as under:—

			Pulmonary	Non- Pulmonary
Males			164	13
Females			109	16
			273	29
orresponding f	figures for	1955	281	36

		New (Cases		Deaths				
Age Periods	Respiratory		Non- Respiratory		Respiratory		Non- Respirator		
	M	F	M	F	М	F	M	F	
Under 5 5 15—24 25—44 45—64 65 and upwards	- 1 7 4 2		- - 1 -	- - - 1	- - - 1 3	- - - 1 1	111111		
Totals	14	6	1	1	4	2			

PREVENTION OF TUBERCULOSIS.

During the year 514 children aged 13 were inoculated with B.C.G. (Bacille Calmette-Guerin).

Under the Public Health (Prevention of Tuberculosis) Regulations 1925, powers are given to prohibit any person suffering from respiratory tuberculosis from entering upon employment involving the handling of milk.

Under the Public Health Act 1936 (Section 172) powers are given to cause the removal and detention of any tubercular patient where proper precautions are not being taken and the circumstances are such as could constitute a danger to others.

AFTER CARE.

The Barnes and Richmond Tuberculosis Care Committee continued their important part in the Surrey County Council Scheme for the "care and after care" of tuberculous patients.

The aim of the Committee is to supplement official help for the patient and his family, according to his individual needs, and so lessen the anxieties which hinder recovery.

AFTER CARE

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