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**Contributors**

Tottenham (England). Borough Council.

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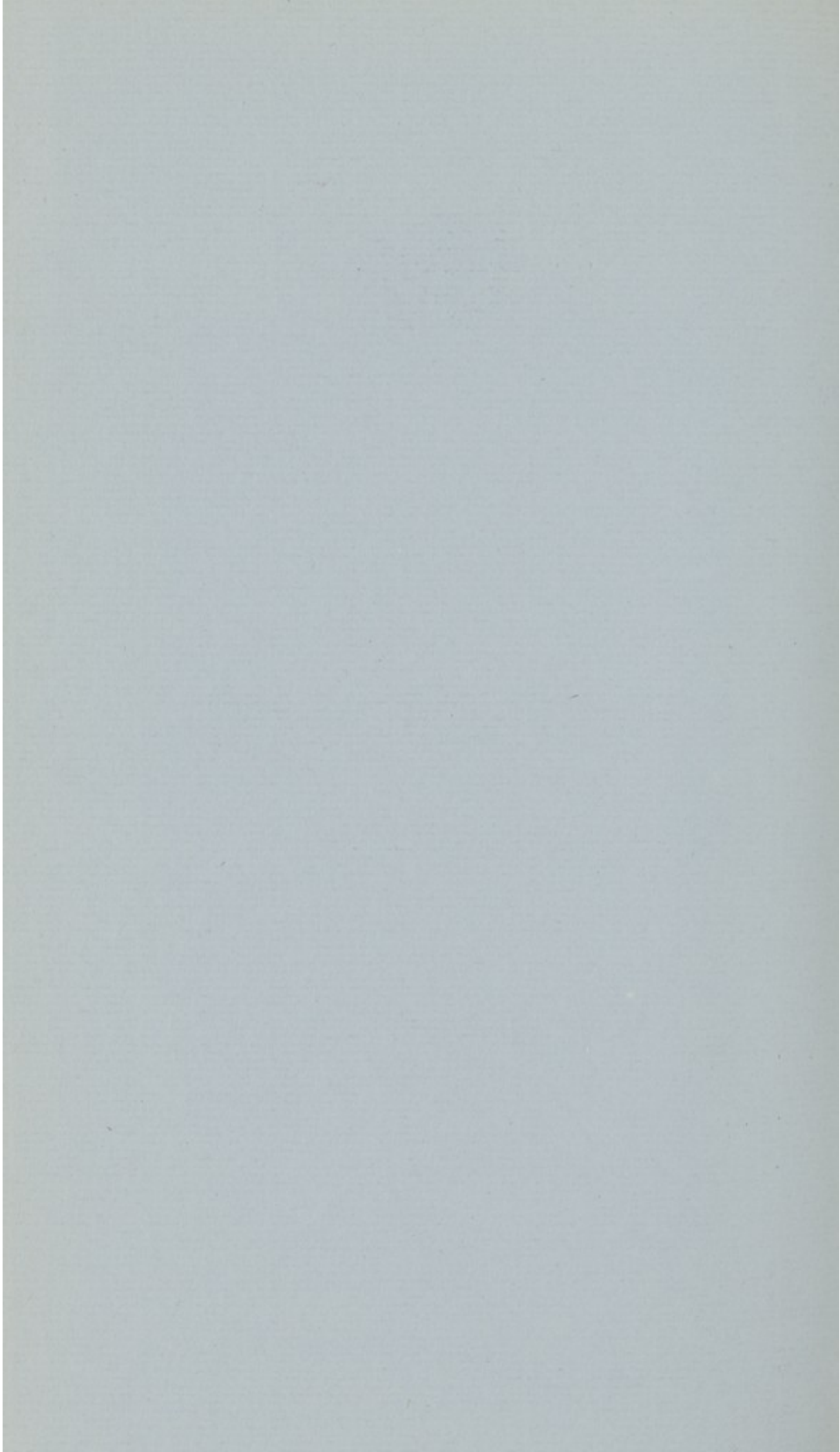
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# TOTTENHAM'S HEALTH B 1953



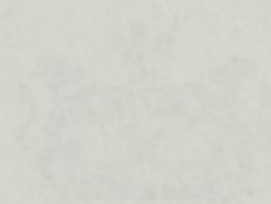


# TOTTENHAM'S HEALTH

1953

The Annual Report of the  
Medical Officer of Health, Borough of Tottenham.





TOTTENHAM'S

HEALTH

1958

Health Department,  
Town Hall,  
Tottenham, N. 15.

MEMBERS OF THE COUNCIL

To the Worshipful the Mayor  
Aldermen and Councillors of the  
Borough of Tottenham.

Mr. Mayor, My Lady, Ladies and Gentlemen,

I have pleasure in submitting to you my Annual Report on the health of the Borough for the year ended the 31st December, 1953.

The work of the department is set out in detailed sections of this report and includes, as an appendix, the work carried out on behalf of the Middlesex County Council in the personal health services under the National Health Service Act and the school health service under the Education Act.

Special reference is made to the forthright policy of the Borough Council in tackling the difficult problem of improving local housing conditions. No function of local government has a more profound and lasting effect upon the health and happiness of the community than this. While quick off the mark in resuming slum clearance under the Housing Acts there has been no slackening in action to secure the repair of individual unfit and insanitary houses.

I take this opportunity to record my appreciation of the loyal work of all my colleagues in the health department; and to express my indebtedness to the many individuals and outside agencies who have so fully co-operated with us during the year.

I am also indeed grateful to my Chairman (Alderman R.H. Warren), whom I have had the privilege to work with for so many years, and to members of the Health and Housing Committee for their ready help and encouragement.

I am,

Your obedient Servant,

G. HAMILTON HOGGEN,

Medical Officer of Health.

29th June, 1954.

Health Department,  
Town Hall,  
Tottenham, N. 15.

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Aldermen and Councillors of the  
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Health and Housing Committee for their ready help and encouragement.

I am,

Your obedient servant,  
G. HAMILTON HODGKIN,  
Medical Officer of Health.

20th June 1954



## MEMBERS OF THE COUNCIL

Alderman the Rt. Hon. the Lord Morrison,  
P.C., D.L., J.P. (Dec'd. 25.12.53)

## MAYOR

Councillor Mrs. A. F. Remington

## DEPUTY MAYOR

Alderman	E. J. Field	Alderman	J. J. Pagin
"	W. S. Herbert	"	A. Reed, A.C.I.I., J.P.
"	Mrs. M. C. Irving (Dec'd. 20.12.53)	"	A. R. Turner
"	Mrs. A. Kitchener	"	H. W. Turner
"	Mrs. J. D. Lynch	"	R. H. Warren
Councillor	Mrs. E. M. Bohringer	Councillor	T. R. Izzard
"	F. G. Bohringer	"	F. A. F. Keay, J.P.
"	E. Brown	"	S. E. Kemp (Resigned 22.10.53)
"	E. J. J. Carter	"	Mrs. W. A. Kent
"	Douglas Clark	"	H. Langer
"	E. J. Clook	"	Mrs. A. A. Miller
"	P. F. Collins	"	The Lady Morrison
"	C. H. Colyer	"	I. L. Peirce
"	A. J. Davies	"	P. Readings
"	J. A. S. Dipple	"	W. T. Richards
"	T. A. Dutton	"	T. A. Riley
"	R. W. H. Ford	"	P. H. Roberts
"	K. A. E. Gregg	"	G. W. Rowley
"	Mrs. F. E. Haynes	"	E. C. Smith
"	J. W. Hollingsworth	"	A. E. Soall
"	Mrs. F. C. Ilsley	"	C. Wise

## Town Clerk:

M. Lindsay Taylor, LL.B.

## HEALTH AND HOUSING COMMITTEE

Alderman R.H. Warren

Chairman

His Worshipful the Mayor, Alderman the Rt. Hon.  
the Lord Morrison, P.C., D.L., J.P.

The Deputy Mayor, Councillor Mrs. A.F. Remington  
(*ex-officio members*)

Alderman A. Reed, A.C.I.I., J.P.

Councillor F.G. Bohringer

" E.J.J. Carter

" E.J. Clook

" R.W.H. Ford

" K.A.E. Gregg

Councillor P. Readings

Alderman A.R. Turner

Councillor T.A. Riley

" P.H. Roberts

" G.W. Rowley

" E.C. Smith

" A.E. Soall

## METROPOLITAN WATER BOARD

Council's representative - Alderman E.J. Field

## STAFF OF THE PUBLIC HEALTH DEPARTMENT

Medical Officer of Health

G. Hamilton Hogben,  
M.R.C.S., D.P.H.

Deputy Medical Officer of Health

F. Summers, M.B.,  
B.S., D.P.H.

Chief Sanitary Inspector

E.T. Jenkins., F.S.I.A.

Chief Clerk

A.W. Lawrence, M.S.I.A.



## Sanitary Inspectorial Staff

Senior District Sanitary Inspector - E.S. Gregg (a) (b) (c)

C.J. Cattell (a) (b)

L.J. Kerridge (a) (b)

A.E. Clarke (a) (b) (c) (d)

E. Kipping (a) (b)

D.R. Howe (a)

G.W. Maidlow (a) (b)

C.J. Johnson (a) (b)

W. Openshaw (a)

W.P. Kent (a) (b)

F.J. Parsons (a) (b)

- NOTE: (a) Certificate of the Royal Sanitary Institute and Sanitary Inspectors' Joint Examination Board.  
 (b) Meat Inspectors' Certificate.  
 (c) Institution of Sanitary Engineers' Certificate.  
 (d) Sanitary Science Certificate.

## Shops Acts Inspector

F.T.G. Lock

## Public Health Nurse

Mrs. W. Mathias, S.R.N.

## Clerical Staff

W.E. Lawson (Senior Clerk:  
General)

D.J. McLintic, B. Com.,  
(Senior Clerk: Housing)

C.J. Lemon

C.S. Clark

R.G. Hull

Mrs. C.E. Moody  
(left 23.6.53)

Mrs. E.D. Whittle

B. Brill  
(commenced 4.8.53)

Miss J. Whillock

## Outside Staff

Foreman

S.H. Reid

Disinfectors: W. Butcher

Disinfecting

E.E. Mannell

Apparatus A. Dowse

Van Driver

Attendants A.E. Moon

Drain Testers

A.E. Crow

Rodent J. Lawrence

F.T. Dowse

Operatives: G.W. Percival

R.E. Hobbs

B. Joscelyn

Labourer A. Ferridge

F.J. Slater

R.C. Wilson

## GENERAL STATISTICS

AREA OF DISTRICT IN ACRES ... 3,013

POPULATION: Census 8th April, 1951 ... 126,929

Estimate of Registrar General of Population -

Mid-year, 1953 ... 124,400

APPROXIMATE NUMBER OF DWELLINGS IN DISTRICT ... 30,561

RATEABLE VALUE OF DISTRICT at 1st April, 1953 ... £1,011,380

SUM REPRESENTED by PENNY RATE at 1st April, 1953 ... £4,040

LIVE BIRTHS -

Legitimate ... 1,567 1,642

Illegitimate ... 75

Birth Rate (per 1,000 population) ... 13.20

STILL BIRTHS ... 44

DEATHS ... 1,347

Death Rate (per 1,000 population) ... 10.83

Infantile death rate (per 1,000 live births) 26.19

Maternal death rate (per 1,000 live and still-births) 1.779

COMPARABILITY FACTORS -

Deaths ... 1.03

Births ... 0.95

(NOTE: Detailed vital statistics appear on pages 62 to 76 in the Statistical Summary)



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## GENERAL STATISTICS

## PART I

## CONTROL OF DISEASE

The incidence of common infectious diseases has again been low. This satisfactory situation is due in no small measure to the efforts of preventive medicine over a period of many years. To ensure its continuance these efforts must be sustained and expanded to embrace conditions such as food poisoning and poliomyelitis which still show no marked diminution in their incidence.

As mentioned in my last Annual Report there is scope for research and endeavour in the field of "stress" diseases. A survey in general practices, reported recently, revealed that some 20% of the cases attending doctors' surgeries fall predominantly into this group. The causative factors cannot be isolated and examined by bacteriological techniques but must be sought in the social, economic and physical environment of the individual. Elucidation and control of these factors need close co-operation between all three branches of the health service. Diagnosis is the concern of the general practitioners and the hospital; but the environment is largely a matter for the local authority health and welfare services to which, however, the general practitioner can make a valuable contribution.

## Public Health (Infectious Diseases) Regulations 1953

These regulations which came into force on 1st April, 1953 replace similar regulations made in 1927. They provide additional preventive measures to enable prompt action to be taken.

The definition of diseases covered by the regulations has been altered and extended to conform with present views on the causation of food poisoning. Now a local authority may give its Medical Officer of Health general authority to issue notices to deal with food handlers who are suspected of suffering from, or being carriers of, an infection liable to cause food poisoning. Until these regulations were made it was necessary to report to the local authority before action could be taken.



Another important new provision gives a Local Authority (or its Medical Officer of Health) power to prevent known carriers of disease from entering employment involving handling of food.

### Tuberculosis

This is the first full year during which there has been no statutory obligation for the Medical Officer of Health to keep a tuberculosis register or to notify transfer of cases from one district to another. Despite this the arrangements previously in force have continued to operate on a voluntary basis so that it is considered that the register maintained is approximately accurate.

The number of cases on the register on 31st December, 1953, was 1,649 a decrease of 33 on the previous year.

There were 163 new cases of tuberculosis notified during 1953 (143 pulmonary and 20 non-pulmonary) compared with 172 in 1952 (163 pulmonary and 16 non-pulmonary.)

There has been no visit this year to Tottenham of the Mass Radiography Unit, but facilities for miniature radiography are now available at the Chest Clinic for four sessions per week without prior appointment.

Environmental reports in respect of tuberculous patients which are regularly received from the Chest Clinic are carefully studied, and where it appears that action is possible by this department to eliminate any adverse conditions, further visits are paid to see what steps can be taken in this behalf. In addition, meetings have taken place between Officers of the Chest Clinic and the Area and Borough Health Departments to discuss environmental problems which from time to time arise.

### Distribution of New Tuberculosis Cases notified during 1953

Age Periods	New Cases				Deaths			
	Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary	
	Male	Female	Male	Female	Male	Female	Male	Female
Under 1 year	-	-	-	-	-	-	-	-
1 - 4 years	1	1	3	1	-	-	-	-
5 - 9 "	2	4	1	1	-	-	-	-
10 - 14 "	4	4	-	1	-	-	-	-
15 - 19 "	4	6	3	-	-	-	-	-
20 - 24 "	8	12	-	-	-	1	1	-
25 - 29 "	8	13	-	2	1	-	-	-
30 - 34 "	4	5	-	2	1	1	-	-
35 - 39 "	5	2	1	1	-	1	-	-
40 - 44 "	7	6	-	-	1	2	-	-
45 - 49 "	9	7	1	-	1	1	-	-
50 - 54 "	10	2	1	1	3	-	-	-
55 - 59 "	2	2	-	-	-	-	-	-
60 - 64 "	5	1	-	-	2	-	-	-
65 - 69 "	3	1	-	1	5	1	-	-
70 - 74 "	-	1	-	-	1	-	-	-
75 Years and over	4	-	-	-	2	-	-	1
Total	76	67	10	10	17	7	1	1



The following is an analysis of non-pulmonary tuberculosis cases notified during 1953:-

	Male	Female	Total
Bones and Joints ...	4	5	9
Meninges ...	3	1	4
Genito-urinary system	1	2	3
Glands ...	1	1	2
Peritoneum ...	1	-	1
Skin ...	-	1	1
	<u>10</u>	<u>10</u>	<u>20</u>

Ward Distribution of Cases of Tuberculosis on the Register at  
31st December, 1953

Ward	Estimated Population	Male		Female		Total	Rate per 1,000 population
		Pulmonary	Non-Pulmonary	Pulmonary	Non-Pulmonary		
White Hart Lane	12,063	110	10	117	12	249	20.6
Park	11,574	71	14	73	13	171	14.8
Coleraine	11,874	57	8	57	2	124	10.4
West Green	11,479	63	4	55	11	133	11.6
Bruce Grove & Central	11,225	69	4	46	3	122	10.9
High Cross & Stoneleigh	11,177	75	13	48	10	146	13.1
Green Lanes	11,051	75	6	62	9	152	13.8
Chestnuts	11,514	62	5	48	10	125	10.9
Seven Sisters	10,526	75	6	50	6	137	13.0
Town Hall	11,017	73	6	65	13	157	14.3
Stamford Hill	10,900	80	4	42	7	133	12.2
Total	124,400	810	80	663	96	1,649	13.3

NOTE: To obtain the estimated population for each ward, the Registrar-General's estimate for the Borough has been divided in the same proportions as number of persons on the Register of Electors for each ward.

Tottenham Chest Clinic

I am indebted to Dr. T.A.C. McQuiston for the following observations on the work of the Tottenham Chest Clinic during the past year.



Though one often hears these days of the decreasing urgency of the tuberculosis problem, we feel here that it will be a long time before there is any room for complacency. Tuberculosis mortality has certainly fallen but morbidity figures do not seem to get less. Cases are seeking advice more readily and general medical practitioners given every encouragement to send their cases early.

Apparatus for taking miniature chest X-ray films has been installed, greatly reducing the cost, and with the additional advantage of helping to solve the problem of storage and filing of records. All local doctors have been told of this service and supplied with appointment forms giving details of times and place where X-ray examination may be carried out without prior appointment. Patients requiring full investigation are, however, referred in the ordinary way. All children under sixteen years of age are Mantoux tested in addition to clinical and X-ray examination. The immediate contacts of children Mantoux positive are offered X-ray and response on the whole has been good. The Chest Clinic seeks the fullest co-operation and stresses the importance of notification of all tuberculous conditions. Only in this way is it possible to continue supervision for the requisite period of time and to arrange examination of contacts. Liaison on the whole is excellent but sometimes one finds a reluctance to notify, for example, a case of simple tuberculous pleural effusion; but any "stigma" attached to notification is far out-weighed by the importance of adequate supervision for a period of at least five years and by necessary attempts to trace the source of infection.

During the year we have acquired charge of one hundred and twenty beds for cases of pulmonary tuberculosis in the St. Ann's General Hospital, Tottenham. Many local cases are treated there making it convenient for relatives visiting them. A thoracic surgeon attends and undertakes any necessary chest surgery at the hospital. Later it is hoped to increase the number of tuberculosis beds.

B.C.G. vaccination has been limited by official sanction to contacts of known cases, though the department is willing to co-operate in any extended scheme as for children in the school leaving age group.

As elsewhere, the number of cases presenting themselves at the Chest Clinic with lung cancer has increased. Those suitable for surgical treatment are dealt with expeditiously at the North Middlesex Hospital. Deaths from this condition in males is now much in excess of those from tuberculosis.

In conclusion, I am happy to acknowledge the co-operation of the Medical Officer of Health and members of the Area medical staff in helping us to achieve our common task of eliminating the most important infectious disease from both personal and social points of view.



The following figures summarize the work of the chest clinic during 1953, but as the clinic serves both Tottenham and Wood Green the information given deals with both Tottenham and Wood Green patients.

Chest Clinic Statistics 1953  
(Tottenham and Wood Green)

Details	Patients aged 15 years and over		Children (under 15)	Total
	Males	Females		
Diagnosed cases on Register at 1.1.53.	929	743	198	1,870
New cases diagnosed during 1953	113	72	27	212
Cases restored to register during 1953	6	7	1	14
Cases transferred from other areas	39	37	7	83
Children transferred to adult category	4	13	-	17
	1,091	872	233	2,196
Cases removed from Register				
Children transferred to adult category	-	-	17	17
Recovered	14	21	4	39
Died	29	10	-	39
Transferred to other areas	47	35	11	93
Lost sight of	13	8	4	25
	103	74	36	213
Diagnosed cases on Register, at 31.12.53.	988	798	197	1,983

No. of Clinic Sessions	1,079
Total number of Attendances	28,384
No. of contacts who attended (1,020 were new)	5,663
No. of new patients referred to clinic	3,873
No. of X-rays	18,657
No. of A.P. refills carried out	10,935
No. vaccinated with B.C.G. through the County Council approved arrangements under Section 28 of the National Health Service Act.	134

Comparative Table

	<u>1951</u>	<u>1952</u>	<u>1953</u>
A.P. refills carried out	8,417	9,648	10,935
No. of X-rays	12,934	12,855	18,657
No. of Contacts seen	4,259	5,198	5,663
Cases referred	3,154	2,891	3,873
Total attendances	21,583	24,050	28,384

## B. C. G. Inoculation

The follow-up in connection with the Medical Research Council's Tuberculosis Vaccine Clinical Trial continues, and the following report on the progress of the trial has been submitted by Dr. T.M. Pollock, Physician in charge:-

## Tuberculosis Vaccines Clinical Trial

During 1953, the investigation into tuberculosis vaccines in which the Tottenham Public Health Authorities are co-operating with the Medical Research Council, continued. This scheme is being undertaken to discover the duration and degree of protection afforded by the vaccine in the general population, and in Tottenham it began in 1951. Twenty-one other London boroughs, besides areas in Manchester and Birmingham, are taking part, and the 54,000 volunteers in the scheme, some of whom were vaccinated during their last terms at school, are now being followed up to determine the value of the vaccine. Seven hundred and seventy seven young people in Tottenham are included.

The follow-up consists mainly of a Health Visitor's visit and an annual chest X-ray. During 1953, as in the previous year, the Health Visitors concerned in the visiting played a great part in the successful progress of the trial. At these visits details of the scheme were explained to the parents, and encouragement given to the young people concerned to take advantage of the necessary X-ray examination. During these visits the Health Visitors also recorded data essential to the investigation. The X-ray Unit visited Tottenham Municipal Medical Centre, Lordship Lane, last December, when invitations were sent to the group, numbering 199, who left school in the Summer of 1951. About three-quarters of the young people invited attended for examination, a slight decline from the high figures of the previous year. The X-rays are a great health safeguard in adolescents at a time of life when tuberculosis



is common, and it is hoped that as many of the young people concerned as possible will continue to take advantage of this health check and help in the investigation.

### Diphtheria

One case of diphtheria was confirmed during the year, the first since 1950. This occurred in a woman aged 48 years, normally resident outside the Borough. The infection was very mild and it is probable that she was either suffering from the disease or incubating it when she came to Tottenham. There were no secondary cases arising from this patient.

In twenty-six other cases the diagnoses were amended by the hospital as follows:-

Glandular Fever; 5; Tonsillitis, 17; Sore Throat, 2; Stomatitis, 1; and Scarlet Fever, 1.

Diphtheria immunisation facilities are provided at all the health centres under the control of the local County Area Health Committee and arrangements have also been agreed between the majority of general practitioners and the County Council for the family doctor to give the injections. The following table shows the number of children of each age group who have had a complete course of injections:-

Number of Children at 31.12.53. who had completed  
a course of immunisation at any time before that date.

Age at 31.12.53. i.e. Born in year	Under 1 1953	1 1952	2 1951	3 1950	4 1949	5 - 9 1944-48	10-14 1939-43	Total
No. who completed a course of injections or had a booster during years 1949-1953	182	929	944	1,017	1,209	3,507	352	8,140
No. immunised during 1939-48	-	-	-	-	-	5,093	5,864	10,957
Total	182	929	944	1,017	1,209	8,600	6,216	19,097



## Scarlet Fever

The number of cases of Scarlet Fever notified during 1953 was 215. The disease again was mild in character and no deaths were attributed to it, 102 cases were admitted to hospital but the diagnosis was amended in 20 of these.

Details of cases admitted to hospital were as follows:-

Hospital	Diagnosis confirmed and Cases treated to a conclusion		Diagnosis amended	
	Number of Cases	Average stay in hospital (days)	Number of Cases	Average stay in hospital (days)
St. Ann's General	63	13.9	18	9.7
Other Hospitals	19	25.8	2	13.5

## Whooping Cough

During the year, 360 notifications of the disease were received, an increase of 221 over last year. There was one fatal case in a baby girl of three months.

During the five years 1949-53 there have been a total of 1634 notifications of the disease and five deaths. The notification of whooping cough is believed to be very incomplete, probably only about a quarter of the cases being notified. Analysis of the figures by yearly age groups shows that the number of cases notified for each year of age up to four increases gradually but there is a marked rise at the age of five. This could be due to greater risks of exposure to infection at school or more certain notification consequent upon certification for absence from school. In all probability both operate to give a higher notification in this group. After the age of five notification shows a sharp decline.

The figure of five deaths considered against the probable incidence of the disease gives a low case mortality. What it does not show, however, is the disability which is caused to many of the sufferers from the disease. The damage to the lungs which may follow whooping cough can cause much ill-health to the individual for many years - perhaps for life.

The deaths attributed to whooping cough in the past five years have been in infants whose ages ranged from three to twelve months. This bears out the fact that it is in the first year of life that whooping cough is most dangerous.

### Whooping Cough Vaccination

From what has been said it will be apparent that an efficient vaccine against whooping cough would achieve three things.

1. Prevent a child from suffering from a complaint which is most distressing both for the patient and those who have to look after him;
2. Prevent much chronic ill-health in later life with its calls upon the curative services; and
3. If given early in the first year saving of infant life.

The trial which has been conducted by the Medical Research Council in this area as part of an effort to produce such a vaccine is not yet complete but it is hoped to give an account of it in my next Annual Report.

### Smallpox Vaccination

In the appendix to my last annual report I reported that facilities for infant vaccination had been made available at infant welfare clinics in addition to the service provided by general practitioners.

1953 was the first full year in which this scheme had operated and the accompanying table shows that the hope of an increase in the percentage of infants vaccinated has been justified.

Primary Vaccinations in Tottenham

Age	1951	1952	1953
Under 1	381	386	701
1	37	28	24
2 - 4	43	19	19
5 - 14	26	19	12
15 and over	88	54	49
	575	506	805
Children vaccinated under 1 year of age expressed as a percentage of live births.	23	23	42

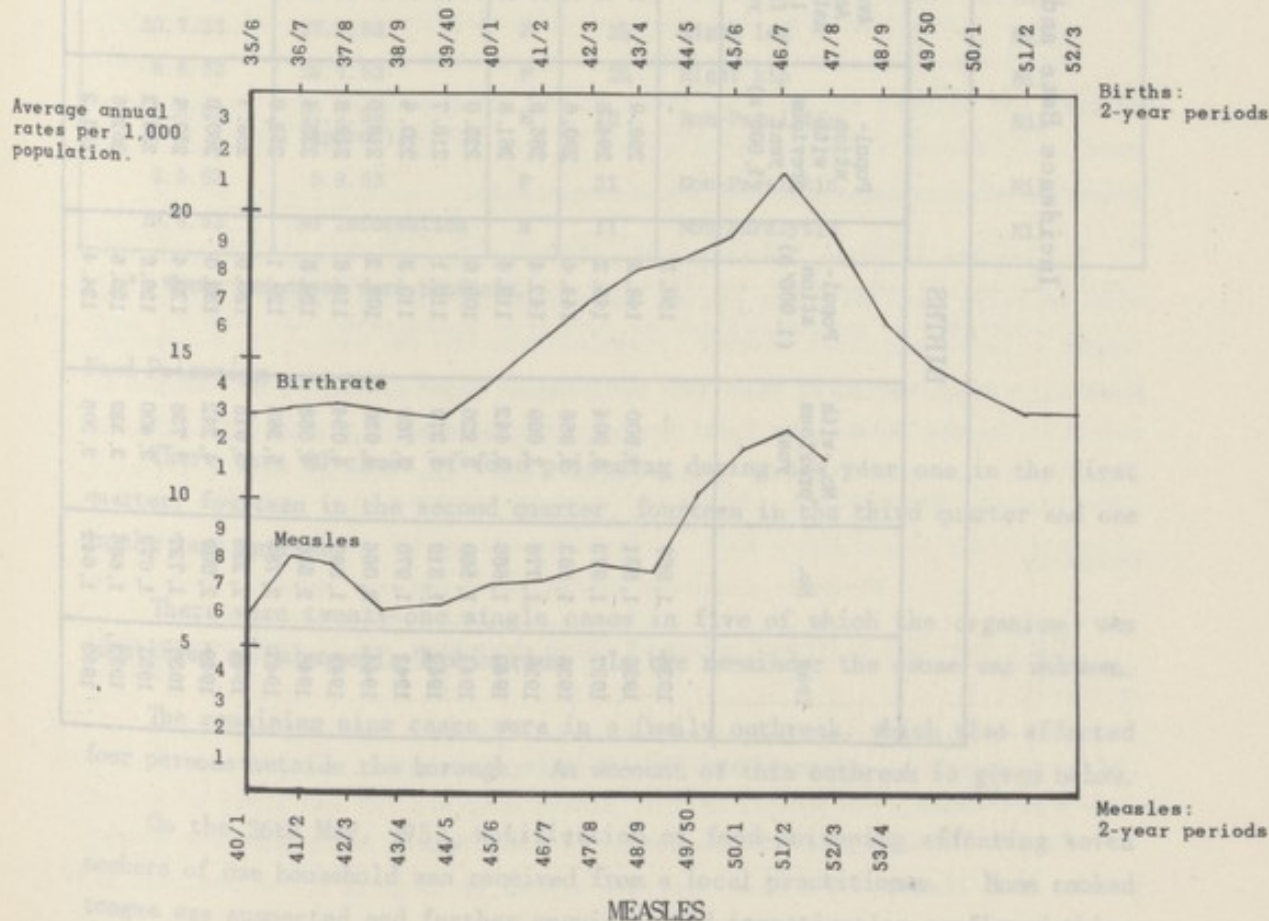


## Measles

There were 1,020 cases of measles notified in 1953. This is 719 less than in 1952 when notifications were the highest recorded since the disease was made notifiable in 1940. The reduced incidence in 1953 is probably due to two factors: (1) Measles appears to run in two-yearly cycles and 1953 corresponded to a year of expected reduced incidence on these grounds; (2) The disease has its maximum incidence in the 5 year olds and following the decline of the birth rate after 1947 there is a smaller number of children in this group to be exposed to infection.

The following graph which appeared in my annual report for 1951 has been brought up-to-date and shows continuing relationship between the measles incidence and the birth rate five years earlier. To level out the biennial peaks and troughs which characterise the incidence of measles, average figures for 2 year periods are shown.

Forty-one cases of measles with complications were removed to hospital and the average length of stay in hospital was 14 days. Little information is available as to the nature of the complications necessitating hospital admission, but there was one case of meningo-encephalitis following measles in a child of one year.



Notification Rate and Birthrate shown five years earlier

# MEASLES

Incidence Rate and Birthrate 5 years earlier

BIRTHS						MEASLES					
Year	No.	No. with previous year	Population (1,000's)	Population with previous year (1,000's)	Average Annual Rate per 1,000 for 2 years	Year	No.	No. with previous year	Population (1,000's)	Population with previous year (1,000's)	Average Annual Rate per 1,000 for 2 years
1935	1,969	-	150.3	-	-	1940	236	-	119.4	-	-
1936	1,931	3,900	148.6	298.9	13.05	1941	1,044	1,280	105.6	225.0	5.69
1937	1,973	3,904	146.2	294.8	13.28	1942	712	1,756	110.1	215.7	8.14
1938	1,893	3,866	144.4	290.6	13.31	1943	1,037	1,749	110.3	220.4	7.93
1939	1,776	3,669	142.4	286.8	12.79	1944	297	1,334	108.2	218.5	6.10
1940	1,666	3,442	119.4	261.8	13.15	1945	1,088	1,385	110.6	218.8	6.33
1941	1,560	3,226	105.6	225.0	14.34	1946	592	1,680	124.8	235.4	7.13
1942	1,819	3,379	110.1	215.7	15.66	1947	1,227	1,819	129.1	253.9	7.16
1943	1,970	3,789	110.3	220.4	17.19	1948	825	2,052	130.0	259.1	7.92
1944	2,066	4,036	108.2	218.5	18.47	1949	967	1,792	130.0	260.0	6.89
1945	1,988	4,054	110.6	218.8	18.52	1950	1,622	2,589	129.4	259.4	9.98
1946	2,580	4,568	124.8	235.4	19.4	1951	1,331	2,953	126.8	256.2	11.52
1947	2,785	5,365	129.1	253.9	21.13	1952	1,739	3,070	125.8	252.6	12.15
1948	2,233	5,018	130.0	259.1	19.36	1953	1,020	2,759	124.4	250.2	11.03
1949	2,009	4,242	130.0	260.0	16.31						
1950	1,727	3,736	129.4	259.4	14.40						
1951	1,673	3,400	126.8	256.2	13.27						
1952	1,666	3,339	125.8	252.6	13.22						
1953	1,642	3,308	124.4	250.2	13.22						



## Polio-myelitis

Eleven cases of poliomyelitis occurred during the year, and in a further 11 suspected cases the diagnosis was amended after admission to hospital.

Of the confirmed cases six had paralysis to a varying degree and one of these was certified as having polio-encephalitis as well.

There were also two fatal cases of polio-encephalitis in Tottenham children who died outside the Borough. One died soon after admission to Great Ormond Street Hospital, and the other whilst away on holiday.

The following table gives such details of the confirmed cases as are available:-

Date of Notification	Date of Commencement illness	Sex	Age in Years	Site of Paralysis	Recent History of Inoculations
3.6.53	14.5.53	F	2½	One leg, slightly	Nil
6.6.53	1.6.53	M	10	Both limbs Resp. Para. Abdominal and Spinal	Nil
*7.7.53	26.6.53	M	6½	(Encephalitis)	Nil
*11.7.53	No information	M	11	Non-paralytic	Nil
16.7.53	No information	M	3	Right leg	Nil
27.7.53	23.7.53	M	7	Non-paralytic	Nil
30.7.53	27.7.53	F	2½	Right leg	Nil
6.8.53	28.7.53	F	2¼	Right hip	Nil
6.8.53	27.7.53 (approx)	M	12	Non-Paralytic	Nil
8.9.53	5.9.53	F	21	Non-Paralytic	Nil
10.8.53	No information	M	11	Non-Paralytic	Nil

\* These two cases were brothers.

## Food Poisoning

There were 30 cases of food poisoning during the year, one in the first quarter, fourteen in the second quarter, fourteen in the third quarter and one in the last quarter.

There were twenty-one single cases in five of which the organism was identified as *Salmonella Typhimurium*. In the remainder the cause was unknown.

The remaining nine cases were in a family outbreak, which also affected four persons outside the borough. An account of this outbreak is given below.

On the 26th May, 1953, notification of food-poisoning affecting seven members of one household was received from a local practitioner. Home cooked tongue was suspected and further enquiries and investigation confirmed this.



A sanitary inspector visited the premises the same day and was informed that there were eight persons in the house ill and that three living elsewhere were said to be affected.

The tongue in question had been bought and cooked at home on Friday, 22nd May to be eaten the following day at a child's birthday party. Some of the tongue however, was eaten both before and after the party by members of the household. As far as could be ascertained during the investigation no children ate tongue at the party. Later however, a case was reported of a child affected but it could not be definitely established whether or not she had eaten tongue.

The incubation period varied from 5 hours (in the case which proved fatal) to 39 hours. The average period appeared to be 21-24 hours. The fatal case was a man aged 62 who died 48 hours after the onset of symptoms.

The suspected tongue and faeces from the patients were submitted for pathological examination at the Colindale Laboratories and a heavy growth of the food poisoning organism - *Salmonella Typhi Murium* was reported in all cases.

Investigation at the retail butcher's shop revealed that the tongue concerned was one of a consignment of twelve which had been pickled for about a week. Specimens of faeces from the staff of the butcher's shop were examined with negative results.

The housewife stated that after being cooked by her, the tongue was skinned and allowed to cool, at first in the kitchen and later in the front room. It was on a dish covered with a plate all the time. The source of infection of the tongue is a matter of conjecture.

The kitchen in which the tongue was prepared was very clean and the housewife emphatic that no other person was concerned in the preparation of the tongue. Later enquiries however, revealed that the day before the tongue was bought, a cake was made with two duck eggs, always a possible source of infection by the *Salmonella Typhi Murium*. It is possible that infection was deposited on some utensil which later came into contact with the tongue.

### Dysentery

There were 143 confirmed cases of Sonne dysentery and 30 cases were treated in hospital.

#### School Outbreak of Sonne Dysentery

On 13th March, 1953, the assistance of the Health Department was sought by the Head Teacher of a local private school on account of an outbreak of dysentery in the infants department.



The school was visited and advice given as to the management of children taken ill whilst at school and also on measures for the cleansing and disinfection of the lavatories and fittings of the infants department.

The head teacher provided a list of children who were or had been absent during the previous fortnight. The outbreak was mainly confined to the infants department. Three cases occurred later in the senior department but these were all home contacts of affected children in the younger age group.

As many as possible of the local cases were visited that day and unless the absence was obviously not due to bowel infection e.g. mumps and otitis media, containers were left for faecal specimens. The general practitioner was informed in each case and kept advised throughout the outbreak as to the results of laboratory investigations.

The population of this school is drawn from a large area so that the medical officers of health of a number of neighbouring authorities had to be informed.

Laboratory findings established that the responsible organism was "Shigella Sonnei" and children were excluded from school until three consecutive negative specimens were obtained.

The coming of the Easter holidays facilitated exclusion but to some extent slowed up the collection of specimens. It was not until 6th May, 1953, that the last negative results were obtained and the incident considered closed.

Four children (3 Tottenham, 1 Wood Green) were removed to hospital.

In the investigation carried out within the Borough faecal specimens were examined from 34 children and 12 members of the school staff. No positive specimens were obtained from any of the staff or from eight of the children. Some 220 specimens altogether were sent to the laboratory by this department.

Twenty-six children were resident in the areas of other authorities each of which undertook local investigations.

In addition five parents reported an attack of diarrhoea three of whom gave positive results during the outbreak. Also a pre-school child investigated gave negative results in all three specimens examined.

#### Malaria

Four cases of malaria were notified during the year. Three were recurrences in young men who had been abroad and the fourth was induced for therapeutic purposes.



## Paratyphoid

One case of paratyphoid fever occurred in a child aged three.

## Puerperal Pyrexia

There was one notification of puerperal pyrexia during the year.

## Diseases of circulatory system

Returns of mortality from coronary disease are slightly less for 1953 than 1952 - 163 as against 183. The male population is more frequently affected than the female.

In most other forms of circulatory disease females show a higher mortality figure than males. This is most marked in vascular lesions of the central nervous system. Perusal of figures for previous years shows that this difference was apparent then. As this cause of mortality affects those in the later age groups it may be that the difference is partly due to the greater female population in these age groups.

## Cancer of the lung

The rise of mortality from this disease continues - the deaths in 1953 being 68 - (53 men, 15 women) an increase of 11 over the previous year.

## Summary of Disinfection work during 1953

Rooms disinfected after occurrence of infectious disease	...	397
Bedding disinfected after occurrence of infectious disease or death		246
Library books disinfected	... ..	230
Articles disinfected for the Ambulance Service		
Blankets	... ..	7
White Coats	... ..	7
Pillow Slips	... ..	1

Some premises require to be registered under the Food and Drugs Act, 1938, others do not, but in any place where food is prepared, stored or sold certain provisions of the Food and Drugs Act apply. The Food Hygiene byelaws are enforced to secure that sanitary practices obtain in the handling and wrapping of foodstuffs.

The number of premises dealing in food are many and, as will be seen from the list, are varied in the products sold. Grocers shops outnumber the rest, but these do not present any problem the only food commodities which are sold unwrapped being bacon and fat.

Regular visits are made to ensure that proper standards of hygiene prevail. Visits to bakers and confectioners are mainly concerned with the bakehouses and in addition to the general operational cleanliness, checks are made for evidence of any infestation by insect pests.



## Summary of Food Premises

Bakers and Confectioners	...	...	...	61
Butchers	...	...	...	99
Coffee Stalls and Small Cafes	...	...	...	29
Confectioners	...	...	...	254
Dairymen	...	...	...	43
Dining Rooms	...	...	...	91
Fishmongers	...	...	...	54
Fruiterers and Greengrocers	...	...	...	128
Grocers and Provision Dealers	...	...	...	346
Ham and Beef Dealers	...	...	...	8
Off Licences	...	...	...	86
Public Houses	...	...	...	59
Tripe Dealer	...	...	...	1
Factory and Works Canteens	...	...	...	78
School Meals Kitchens	...	...	...	21

## Registered Premises

Included in the regular visits to food premises generally are those made to premises which are registered under the Food and Drugs Act.

These include places where ice cream is manufactured and where meat and fish are dealt with. In the case of the ice cream manufacturers a reduction in the number of premises registered is noticeable. Only four premises remain where heat treatment is carried out - the remaining manufacturers use the complete cold mix method.

Thirty four new premises were registered during 1953 in accordance with Section 14 of the Food and Drugs Act, 1938, for the sale of ice cream, 9 premises which ceased to be used for the sale of ice cream were removed from the Register.

The total number of ice cream premises on the register at 31st December, 1953 was as follows:-

Sale only	...	...	...	314
Manufacture and Sale	...	...	...	6
Storage	...	...	...	2
Total				<u>322</u>

### Samples of Ice Cream submitted for Bacteriological Examination

	Results				Total
	Grade 1	Grade 2	Grade 3	Grade 4	
Samples of ice cream produced in Tottenham	6	3	1	-	10
Samples of ice cream produced outside of Tottenham	11	3	1	1	16
Total	17	6	2	1	26

### Preserved Foods

One hundred and fourteen premises used in connection with the manufacture and/or preparation of preserved foods are registered under Section 14 of the Food and Drugs Act, 1938. During the year 4 new registrations were made.

The following is a summary of the processes carried on at the registered premises, namely:-

Cooking of Hams and other Meats	...	...	41
Fish Frying	...	...	13
Sausage Manufacture	...	...	55
Preparation of Jellied Eels	...	...	3
Boiling Shell Fish	...	...	2
Total			<u>114</u>

### Middlesex County Council Act, 1950; Section 11: Registration of Hawkers

Section 11 of this Act, requires the registration of all food hawkers and their storage premises. Four new applications were investigated by the sanitary inspectors in 1953 and found to be satisfactory. Thirteen registrations were cancelled where it was found that the business had been discontinued.

The following is a summary of the registered hawkers and their storage premises at the 31st December, 1953:-



Articles	Number of persons registered for sale	Number of registered storage premises
Fruit and Vegetables	100	96
Shell Fish	13	9
Fish	7	7
Ice Cream	3	3
Peanuts	2	2
Light Refreshments (Mobile Canteen)	2	2
Total	127	119

#### Slaughterhouses and Knackers' Yards

Five premises were licensed as slaughterhouses under Section 57 of the Food and Drugs Act, 1938. Regular slaughtering is carried on at only one of these and this establishment deals solely with the slaughter of horses for human consumption.

The number of horses slaughtered in the slaughterhouse during the past six years is as follows:-

<u>1948</u>	<u>1949</u>	<u>1950</u>	<u>1951</u>	<u>1952</u>	<u>1953</u>
3,189	2,889	2,750	2,856	2,454	1,467

One horse carcase was condemned because of severe and extensive bruising. Parts were condemned in 154 cases principally because of parasitic conditions. The parts condemned were as follows:-

Livers 137

Lungs 29

Forequarters 2(Extensive Bruising).

Another section of the premises is licensed as a knacker's yard and during 1953, 2,357 animals were dealt with there.

Regular visits are made by the district sanitary inspectors to ensure compliance with the regulations.

During the year 15 licences to slaughter were issued under the provisions of the Slaughter of Animals Act, 1933.

#### Milk and Dairies

All milk sold in Tottenham must be specially designated milk, that is, "sterilised", "pasteurised", "tuberculin tested" or "accredited" milk.

Every milk dealer known to the Department holds a licence under the Milk (Special Designation) Regulations, and the following is a summary of the dealers, licences issued for 1953, namely:-

Designation	No. of Licences	No. of Supplementary Licences
Pasteurised	63	14
Sterilised	145	16
Tuberculin Tested	32	14
Accredited	3	-

During the year 14 applications for registration as milk distributors were dealt with. No applications were received in respect of dairies. Of the 14 new registrations 4 were for new premises and the other 10 were in respect of the change of proprietorship of previously registered premises.

The number of premises and distributors registered at 31st December, 1953, was as follows:-

Distributors	...	...	...	157
Dairies	...	...	...	11

The Chief Officer of the Public Control Department of the Middlesex County Council (which is the licensing authority for premises at which milk is processed) reported that, "at the commencement of the year the only licences granted and in force under the regulations were one dealer/pasteuriser licence and one dealer/steriliser licence both held by the same firm. In August 1953 this firm ceased to operate under the dealer/pasteuriser licence but continued to sterilise milk. The premises were visited regularly throughout the year and the plant and premises were found satisfactory. Twenty-nine samples of pasteurised milk and forty-five samples of sterilised milk procured each passed the appropriate tests."

#### Food Hygiene

The established practice of giving lectures and demonstrations to organisations in the Borough has continued. During the year this has included talks to personnel engaged in the school meals service.

The sanitary inspectors' work in this field is regarded as being a most important contribution to health education. While resenting any interference the food handler on the job appreciates the worth of practical help and guidance. Mistakes or faults in hygiene methods are best remedied at the place where the food is handled and it is here the sanitary inspector's work is most valuable.



## Condemned Food

Disposal of condemned food offers no problem in Tottenham. The refuse disposal works and waste food plant provide the ideal method. Wherever possible the Cleansing Superintendent utilises condemned foodstuffs in the processed food plant and the remainder is dealt with by incineration. The department can thus satisfy itself that no unsound or condemned food will find its way into unauthorised hands. The bulk of the food condemned comes from two large wholesale organisations.

## Special Stock

Occasions arise when special examinations have to be made of stocks or consignments at a local warehouse. During the year the department was called in to examine stocks of concentrated orange juice and altogether 5,587 gallons were condemned and disposed of at the sewage pumping station. This quantity represented less than 2% of the total amount passing through the warehouse.

## Food Condemned

The following tinned articles were condemned during the year, namely:-

Beans ... ..	466	Marmalade ... ..	15
Beans & Sausages ... ..	1	Meat Pudding ... ..	13
Beetroot ... ..	5	Milk ... ..	1,767
Beverage Powder ... ..	2	Mincemeat ... ..	8
Broth ... ..	10	Oranges ... ..	34
Chicken ... ..	1	Peas ... ..	1,242
Chinchards ... ..	160	Pease Pudding ... ..	17
Coffee ... ..	206	Pickle ... ..	35
Corn ... ..	1	Pork ... ..	5
Cornish Pasties ... ..	24	Potato Salad ... ..	1
Cream ... ..	65	Processed Meats ... ..	558
Custard Powder ... ..	1	Rabbit ... ..	1
Figs ... ..	1	Ravioli ... ..	2
Fish ... ..	445	Sausages ... ..	116
Strained Food ... ..	5	Sausages & Spaghetti ... ..	7
Fruit ... ..	6,362	Soup ... ..	185
Fruit Juice ... ..	70	Spaghetti ... ..	17
Fruit Pulp ... ..	149	Stewed Meat ... ..	307
Ham ... ..	69	Syrup ... ..	1
Hearts ... ..	1	Tomato ... ..	471
Jam ... ..	192	Tomato Concentrate ... ..	21
Kidneys ... ..	73	Tomato Paste ... ..	4

Liver ... ..	2	Tongues ... ..	28
Lobster ... ..	1	Veal ... ..	29
Macedoine ... ..	12	Mixed Vegetables ... ..	47

Other articles of food condemned were as follows:-

Beef ... ..	2,172 lbs.	Hearts ... ..	10½ lbs.
Beef Fat ... ..	15½ lbs.	Horseradish Cream ...	2 Jars
Beverage Powder ...	1 Jar	Lamb ... ..	4 lbs. 6 ozs.
Cake ... ..	320 lbs.	Liver ... ..	83 lbs.
Cashew Nuts ... ..	1 lb.	Meat (Processed) ...	20 lbs. 10ozs.
Cheese ... ..	10 lbs.	Milk (Dried) ... ..	65 lbs.
Cheese Spread ... ..	1 Pkt.	Nuts ... ..	4½ lbs.
Chocolate ... ..	7½ cwts.	Pea Flour ... ..	106 lbs.
Chocolate Biscuits ...	4 lbs.	Pigs Plucks ... ..	141 lbs.
Christmas Pudding ...	1 only	Pork ... ..	268½ lbs.
Cornflakes ... ..	9 Pkts.	Pork Trimmings ... ..	192 lbs.
Dates ... ..	3 Cases	Rabbit ... ..	60 lbs.
Eggs ... ..	720	Sausages ... ..	2 lbs.
Fish ... ..	42 Stone 3 lbs.	Sweet Siftings ... ..	2 tons
Fruit ... ..	227 Jars	Swiss Rolls ... ..	187
Fruit (Dried) ... ..	192 lbs.	Tea ... ..	2 lbs.
Fruit Juice ... ..	5,587 Gallons	Tongues ... ..	50 lbs.
Ham ... ..	592½ lbs.	Turkey ... ..	14 lbs.

### Food Sampling

The Public Control Department of the Middlesex County Council has supplied the following information of food and drugs sampling in the Borough during 1953:-

### FOOD AND DRUGS ACTS, 1938 - 1950

Lists of samples procured in the Borough of Tottenham during the year 1953

<u>Article</u>	<u>Total samples procured</u>	<u>Unsatisfactory</u>
Milk (various)	157	9
Almond Oil	1	-
Baking Powder	1	-
Cakes (various)	46	-
Cheese	3	-
Cherry Wine	1	-



<u>Article</u>	<u>Total samples procured</u>	<u>Unsatisfactory</u>
Chops	11	-
Condensed Milk	6	-
Cooked Meat	6	-
Cream	19	-
Cream Lolly	3	2
Dessicated Coconut	2	-
Dried Milk	1	1
Dripping	3	-
Drugs	12	-
Fish	8	-
Fish Paste	2	-
Flour	1	-
Gelatine	1	-
Glacé Cherries	1	-
Ground Almonds	3	-
Honey	1	-
Ice Cream	11	-
Jams	5	-
Jelly	7	-
Meat Paste	1	-
Meat Pie	1	-
Minced Meat	2	-
Morfat (Imitation Cream)	1	-
Non-brewed Condiment	4	1
Nutmeg	1	-
Pineapple	1	-
Pork	2	-
Sausages	29	-
Soups	2	-
Stewing Meat	3	-
Suet	1	-
Sweets (various)	6	1
Tea	2	-
Tomato Ketchup	1	-
Vinegar	20	9
Whale Meat	1	-
Wines and Spirits	11	-
Totals ...	<u>401</u>	<u>23</u>

The Chief Officer of the Public Control Department makes the following comments on the samples listed as unsatisfactory:-

"As to the nine unsatisfactory milk samples, all were of hot milk, seven (procured from four restaurants) contained added water. The percentages of water varied from 34 to 10.3. All four restaurant proprietors were prosecuted and convicted. One was fined £6 with £2.2.0d. costs another £1 with £2.2.0d. costs and in each of the other two cases an absolute discharge was granted on payment of £1.1.0d. costs. The other two samples of hot milk were deficient in fat - follow-up samples proved genuine and no further action was taken.

The two samples of "cream lolly" were the product of the same manufacturer and contained no milk fat. The firm was prosecuted under the Defence (Sale of Food) Regulations and fined £2 and ordered to pay £5.19.0d. costs.

The sample of dried milk was unfit for human consumption. It had been distributed by the Ministry of Food who, when informed, withdrew existing stocks and took steps to prevent recurrence.

The sample of non-brewed condiment was deficient in acetic acid and the seller received an official caution.

The case of the sweets was a sample of fruit flavoured sweets described by the confectioner-retailer as crystallised fruits. He received an official caution.

The nine samples of vinegar adversely reported upon were procured from six traders and were all samples of loose vinegar. In one case there was a slight deficiency in acetic acid, otherwise the vinegar was genuine malt vinegar. A subsequent purchase was correct and no further action was taken. In the other eight cases non-brewed condiment was sold for vinegar. One trader was prosecuted and allowed an absolute discharge on payment of £2.2.0d. costs; three traders received official cautions, and in the last case on a check follow-up the trader declared that what he was selling was non-brewed condiment and no further action was taken on the first sample.

As the Food and Drugs Authority my Council enforces the provisions of the Merchandise Marks Act, 1926 and the Imported Food Orders made thereunder which require in the cases of foods controlled that imported articles bear an indication of origin, namely either "Empire" or "Foreign" as the case may be or else the specific country in which the goods were produced. During the year 388 inspections were made at retail premises in Tottenham and 2,174 pieces, packets or stacks of meat, apples, tomatoes, poultry, dried fruit, gelatine were examined. Arising from these and apart from verbal cautions for minor non-labelling offences two traders received official cautions, one in respect of Australian turkeys not marked with their origin and one for Empire apples similarly not marked.



To ensure compliance with the Labelling of Food Order 361 premises were visited and 1,337 different packets of foodstuffs were examined as to the statements of the designation and ingredients of foods in the packs and the declaration of the name and address of the packer or labeller. No substantial infringements were discovered."

#### Food and Drugs Act, 1938: Legal Proceedings

Legal proceedings were taken in 3 cases in respect of contaminated foods, namely:-

##### (1) Section 9. Unfit Meat

Summons in respect of 20 lbs. of Beef unfit for human consumption for sale. Defendants fined £10 and £5.5.0d. costs awarded.

##### (2) Section 9. Nail in Cake

The two defendants pleaded guilty and the summonses were dismissed conditionally on the payment of £2.2.0d. costs each.

##### (3) Section 3. Mouldy Cake

Legal proceedings resulted in the company, who pleaded guilty, being fined £5 and ordered to pay £2.2.0d. costs.

## PART III

## SANITARY CIRCUMSTANCES OF THE AREA

## Water Supply

The Metropolitan Water Board has continued to supply water to the Borough and I am indebted to the Director of Water Examination for the following information:-

"The area is supplied from two sources:-

- (a) Water from the New River and treated at the Board's filtration works at Hornsey and Stoke Newington.
- (b) River Thames water stored in Walton Reservoir and treated at the Board's filtration works at Walton. A contact tank was brought into operation in April, 1953.

Samples are collected on five days in every week, or more often if required, at each stage of the purification process and tests include physical, chemical and microbiological examination. The water supplied to this area is not plumbo solvent. All new and repaired mains are chlorinated before being restored to use and samples of water from them are tested bacteriologically to ensure that its quality is up to that normally supplied.

The supply to the Tottenham area has been satisfactory both in quantity and quality during the year 1953. Details of the analytical results of the water passing into supply are given in the tables."

Attention was drawn in last year's annual report to the provisions of



Average Results of the Chemical and Bacteriological Examinations of the Water Supplied to the Borough of Tottenham  
for the Year 1953

Parts per Million (Unless otherwise stated)

Description of the Sample	No. of Samples	Ammoniacal Nitrogen	Albuminoid Nitrogen	Oxidised Nitrogen (Nitrate)	Chlorides as Cl	Oxygen abs. from Permanganate 4 hrs. at 27°C	Turbidity in Terms of Silica	Colour, m.m. brown 2ft. Tube Burgess's Tintometer	Hardness (Total)	Hardness (Non-carbonate)	pH. Value	Phosphate as P.O. 111 4	Silica as SiO <sub>2</sub>	Conductivity
New River water filtered at Hornsey works	235	0.008	0.059	5.5	37.5	0.59	0.1	7	305	74	7.8	0.72	14	600
New River water filtered at Stoke Newington works	235	0.008	0.062	5.3	37.4	0.61	0.1	7	304	73	7.9	0.69	13	575
River Thames water filtered at Walton works	236	0.010	0.079	3.8	27.1	1.09	0.3	13	250	64	7.8	0.65	11	500

Bacteriological Results

Description of Sample	No. of Samples	No. of microbes per ml. Colonies counted on agar after 20-24 hrs. at 37°C.	Bact. coli Test	
			Percentage of samples negative to Bact. coli in 100 ml.	Bact. coli per 100 ml.
New River water filtered at Hornsey works	256	12.0	100.0	Nil
New River water filtered at Stoke Newington works	258	33.3	100.0	Nil
River Thames water filtered at Walton works	256	19.7	100.0	Nil

Section 54 of the Tottenham Corporation Act, 1952, dealing with defective pipes and fittings. A difficulty faced in operating this section is that, where the Water Board cut off the supply due to waste, a charge is usually incurred which must be paid before the Board will reinstate the supply. Under the terms of the Tottenham Act there is no authority for the Council to to pay this charge.

Discussions with the Water Board have taken place and agreement has been reached ensuring that the supply will be reinstated when the Council have carried out the work of repair to the defective pipes or fittings.

#### Drainage and Sewerage

There are two separate systems of drainage for soil and surface water. The soil sewers drain to the pumping station at Markfield Road where the sewage is raised and discharged into the London County Council sewerage system. The surface water sewers discharge into the local streams and the river Lee.

Investigations continue to be made into pollution of the two main water courses by sink wastes or other soil fittings wrongly connected to surface water drains. Where this is found the necessary notices for disconnection are served.

#### Closet Accommodation

The water-carriage system operates throughout the Borough.

Use was made of Section 37, Tottenham Corporation Act, 1952, to secure the provision of sanitary accommodation in the case of a sub-let house. The work was carried out without the service of a formal notice and action taken because the sub-letting occurred after the Act became operative.

#### Atmospheric Pollution

Following the severe December fog of 1952 the Government set up a committee, the Beaver Committee to investigate the nature, cause and effect of air pollution.

An interim report of this Committee draws attention to the fact that air pollution comes from many sources and takes many forms.

In 1952 approximately 205 million tons of solid fuel were burned of which nearly 44 million were consumed by industry and nearly 37 million by domestic consumers.



Pollution of the air from this consumption is estimated as equivalent to approximately two million tons of which half came from domestic sources.

From these figures it will be seen that although industrial emissions may be more spectacular the steady pollution of the air from domestic fires needs constant supervision and education of the public as to means of prevention.

The powers given in the Tottenham Corporation Act to form "smokeless zones" will in time prove an effective way of eliminating the nuisance from domestic appliances.

During the year a number of industrial undertakings sought, and were given, prior approval to the installation of solid fuel burning appliances.

### Housing

Since the end of the War the Council has provided 744 units of living accommodation in houses and flats. This is a substantial contribution and is no doubt reflected in the health and well being of those fortunate citizens now living in new dwellings.

Far too many citizens of the Borough, however, live in old property in varying stages of disrepair. It is to the Health Department that the occupants of these houses look for relief from their difficulties. Complaints which are investigated reach substantial numbers and during the past year there has been no diminution in the number of notices served.

### Housing Act, 1936: Sections 9 and 10

These sections of the Housing Act, 1936, are popularly known as the "repair sections" and are the statutory authority by which the Council can obtain the repair of unfit and insanitary houses.

Having regard to economic trends many authorities make little or no use at all of these sections. The difficulty of the interpretation of "reasonable cost" is a very real one and the question of "the value" of a house is far from being solved. Nevertheless, these sections have been used by this authority as being more expeditious than the more cumbersome procedure under the Public Health Act, 1936.

The decline in the amount of work being done "in default" has been maintained and whilst the reasons for this are much as stated in my last year's report there is no doubt that owners are now more anxious to carry out their own work.

The following is a summary of work carried out under sections 9 and 10 in the owners' default during the past 15 years.

## Housing Act, 1936: Sections 9 and 10 - Work in Default

Year	Number of Houses	Cost		
		£.	s.	d.
1939	31	605	3	5
1940	3	25	4	4
1941	19	319	7	0
1942	21	543	4	10
1943	114	2,559	7	3
1944	45	1,026	6	9
1945	17	658	3	11
1946	152	7,329	16	8
1947	241	14,272	16	9
1948	181	13,160	8	4
1949	106	6,593	6	5
1950	77	4,035	8	5
1951	72	3,186	3	4
1952	47	2,445	1	9
1953	33	1,918	8	0

## Housing Act, 1936, Section 11

The making of demolition orders on individual houses has again had to be considered and in eight cases it was necessary to make orders under Section 11 of the Housing Act, 1936.

There has been an interesting and useful amendment to the law on this subject during the year and it is now possible for the Council to make a Closing Order with respect to a whole house where hitherto they were obliged to order its demolition. These new powers, contained in the Local Government (Miscellaneous Provisions) Act, 1953, are particularly useful in dealing with the house which forms part of a terrace.

Premises the subject of Demolition Orders  
not demolished as at 31st December, 1953

Premises	Date of Order
10, The Hale	5. 4. 50
12, The Hale	25. 1. 52
16, The Hale	2. 3. 51
1, Kings Road	1. 12. 53 *
3, Kings Road	1. 12. 53 *
31, Langham Road	6. 8. 52 *
42, Love Lane	28. 10. 53 *
44, Love Lane	28. 10. 53 *
2, Moselle Street	1. 12. 53 *
4, Stanley Grove	1. 6. 43 *
5, Union Row	11. 8. 48
6, Union Row	11. 8. 48
7, Union Row	11. 8. 48
8, Union Row	11. 8. 48

\* These premises were still occupied at 31.12.53



## Premises Demolished during 1953

Premises	Date of Order	Date Demolished
16a, The Hale	7. 7. 52	November, 1953
55, The Hale	2. 4. 48	September, 1953
57, The Hale,	2. 4. 48	September, 1953
9, Holmdale Terrace	29. 7. 53	November, 1953
8a, Lawrence Road	13. 10. 48	March, 1953
16, Moselle Street	9. 10. 53	November, 1953
1, St. John's Road	29. 7. 53	November, 1953

## Closing Order made during 1953

Premises	Part of Premises Concerned	Date of Order
4, Park Lane	First floor room and attic room	19. 10. 53

## Housing Act, 1936: Part III

With the resumption of slum clearance procedure the Health Department has taken immediate advantage of the opportunity given.

At the time of preparing my previous annual report representations had been submitted in respect of certain parts of Broad Lane, Newton and Victoria Roads. These areas have since been confirmed as "clearance areas" by the Minister and plans are well ahead for their general redevelopment.

An official representation this year dealt with Hale Gardens, part of High Cross Road and Cape Road, an area well known to the Council which I originally represented in 1939. The problem of dealing with conditions in this area has been a major one and it will give the department much satisfaction to see it resolved.

The subject of Housing should not be left without some comment on the Government White Paper "Houses: The Next Step" (Command 8996) and the subsequent issue of the Housing Repairs and Rents Bill. The objects of the Bill are to confer additional powers on local authorities in relation to unfit houses, and in certain circumstances, to permit an increase of rent for repairs.

One of the most important provisions in the Bill is the proposal to define a standard of fitness for human habitation. Matters to be taken into consideration include: repair; freedom from damp; stability; natural lighting; ventilation; water supply; drainage and sanitary conveniences; facilities for the preparation, storage and cooking of food and disposal of waste water. The Bill is not yet law but a first impression suggests there may be a lessening in standards. Where, at the present time, provisions in the Middlesex County Council Act enable us to deal with certain matters, these will no longer operate if the Bill becomes law as it stands.



Local authorities will be required to submit a programme of slum clearance and to this end preliminary surveys have already taken place. It is anticipated that some 2,000 houses will be included.

The provisions of the Bill relating to rent increases have been received with mixed feelings and it remains to be seen whether wholesale applications will be forthcoming for certificates of repair.

#### Tottenham Corporation Act, 1952

The provisions of the Tottenham Corporation Act, 1952, relating to sanitation and buildings have been used as and when the necessity has arisen. The provisions relating to stopped up drains (Section 36) and defective premises (Section 43) have proved most valuable.

In the case of the latter it has been possible to deal with urgent roof repair with a minimum of delay. Section 43 has also proved its usefulness in provoking early action on the part of owners who would otherwise take advantage of the delay under the Public Health Act.

#### Public Health Act, 1936

Continued use has been made of the provisions of the Public Health Act, 1936, relating to specific matters such as defective public sewers (Section 24) drains (Section 39) and water closets (Section 45) and for dealing with nuisances.

The nuisance Sections 90/94 are used in dealing with complaints relating to old properties where use of the Housing Act, 1936 is inadvisable. In such cases failure to comply with the notice does not enable the Council to carry out the work in default, and recourse to the Magistrates Court is necessary to secure an order for the abatement of the nuisance. Summonses were issued in 25 cases where the owners failed to comply with abatement notices.

#### Public Health Act, 1936: Section 154

On two occasions during the year dealers were reported by the Police to have been seen giving toys to children in exchange for rags. In both cases the offenders were prosecuted; in the first case a fine of £1 and 10/6 costs were imposed and in the second the penalty was £3 and 2 guineas costs.

#### Rag Flock and other Filling Materials Act, 1951

At the 31st December, 1953, one establishment was licenced for the manufacture of rag flock and 24 premises registered for the use of filling materials.



Regular visits were made by the district sanitary inspectors to the licensed and registered premises to ensure that only clean filling materials were used and to inspect the records which the occupiers are required to keep.

Samples of the rag flock product submitted for laboratory examination were found to pass all the tests prescribed in the regulations.

#### Pet Animals Act, 1951

At the 31st December, 1953, fifteen premises were licensed as Pet Shops in accordance with the Pet Animals Act, 1951. Regular visits were made to the premises by the district sanitary inspectors to ensure that the requirements of the Act and the licensing conditions were complied with.

#### Rodent Control

It is now ten years since the Council became responsible for the work of rodent control in the Borough and, arising out of a Ministry directive, it is ten years since the first sewer treatment was carried out. Maintenance treatments have continued at the rate of two per annum and are carried out in accordance with the Ministry's recommendations.

Contracts are not entered into for the treatment of business premises but regular treatments are given to selected corporation owned premises. Certain premises are dealt with on a systematic basis and the costs are recovered from the owners or occupiers. The value of these treatments is shown by the substantial reduction in the rodent population.

#### Sewer Maintenance - results of Baiting Manholes

Poison take at Manholes	Treatment No. 17: April/May	Treatment No. 18: Oct./Nov.
Complete	-	-
Good	136	130
Small	261	362
Nil	611	541
Estimated number of rats killed	4,595	5,005
Poison used	10% arsenious oxide	2½% zinc phosphide

The following is a summary of dwelling houses and business premises treated during 1953:-

(1) Dwelling houses	520
(2) Business and Factory premises	147
(3) Total charge for (2) above	£104. 13s. 5d.

## Insect Pests

Insect pests are treated as hitherto by the application of "D.D.T." Some concern has been expressed of certain types of insect developing an immunity to the treatment. This can best be prevented by the use of the insecticide in sufficient strength, as sub-lethal doses may produce immunity, and it is, therefore, our practice to maintain an application of at least 5% D.D.T. in kerosene.

## Summary of Disinfestation Work During 1953

Cause	Private Houses		Council Houses		Other Premises	Totals		
	Houses	Rooms	Houses	Rooms		Houses	Rooms	Other Premises
Ants	7	-	-	-	4 schools 1 canteen 1 school kitchen	7	-	6
Bees	1	-	-	-	-	1	-	-
Beetles	25	25	-	-	1 school	25	25	1
Bugs	124	271	3	10	-	127	281	-
Earwigs	2	7	-	-	-	2	7	-
Fleas	5	18	-	-	-	5	18	-
Flies	-	-	-	-	3 canteens	-	-	3
Lice	3	7	-	-	-	3	7	-
Moths	3	4	-	-	-	3	4	-
Woodworm	7	9	-	-	-	7	9	-
Totals	177	341	3	10	10	180	351	10

Disinfestation upon the removal to Council dwellings was carried out in 140 instances.

## Inspections Carried out by the Sanitary Inspectors

Appointments and Interviews	...	...	...	1,168
Cinemas and Halls	...	...	...	48
Complaints Investigated	...	...	...	3,950
Conveniences and Urinals	...	...	...	90
Drains Defective	...	...	...	394
Drains Tested	...	...	...	799
Factories with Mechanical Power	...	...	...	487
Factories without Mechanical Power	...	...	...	62
Food Poisoning	...	...	...	50
Food Premises	...	...	...	
Bakehouses	...	...	...	100
Butchers	...	...	...	276



Cafes	...	...	...	...	258
Dairies	...	...	...	...	272
Factories	...	...	...	...	53
Factory Canteens	...	...	...	...	58
Fishmongers	...	...	...	...	141
Greengrocers	...	...	...	...	144
Ice Cream Premises	...	...	...	...	213
Slaughterhouses	...	...	...	...	285
Other food premises	...	...	...	...	383
House to House	...	...	...	...	77
Infectious Disease	...	...	...	...	478
Other visits	...	...	...	...	2,663
Outworkers	...	...	...	...	297
Rat Infestation	...	...	...	...	923
Re-inspections	...	...	...	...	11,778
Schools	...	...	...	...	31
S. D. A. A. and Housing Act Advances	...	...	...	...	118
Smoke Observations	...	...	...	...	103
Stables and Mews	...	...	...	...	45
Tuberculosis	...	...	...	...	10
Workplaces	...	...	...	...	39
<b>Defects Remedied</b>					
Drains reconstructed	...	...	...	...	40
Drains repaired	...	...	...	...	280
Drains cleared	...	...	...	...	206
W. C. Cisterns repaired or renewed	...	...	...	...	221
W. C. Pans renewed	...	...	...	...	153
W. C. Pans cleansed	...	...	...	...	35
Waste Pipes repaired or renewed	...	...	...	...	161
Rain water pipes repaired or renewed	...	...	...	...	342
Roofs repaired or renewed	...	...	...	...	801
Eaves Gutters repaired or renewed	...	...	...	...	530
Drinking Water Cisterns renewed	...	...	...	...	2
Drinking Water Cisterns covered	...	...	...	...	6
Water Service Pipes repaired	...	...	...	...	129
Water supply reinstated	...	...	...	...	50
Yards repaired or reconstructed	...	...	...	...	129
Sinks renewed or provided	...	...	...	...	39
Floors repaired or renewed	...	...	...	...	509
Floors ventilated	...	...	...	...	184
Dampness remedied	...	...	...	...	
by insertion of damp proof courses	...	...	...	...	83
by pointing of brickwork	...	...	...	...	153

by internal rendering ...	340
by miscellaneous remedies ...	254
Window Frames and Sashes repaired or renewed or painted ...	632
Coppers repaired or renewed or provided ...	22
Fireplaces, Stoves and Ovens repaired or renewed ...	340
Flues and Chimney Stacks repaired ...	173
Brickwork of Walls repaired and Walls rebuilt ...	170
Ventilated Food Stores provided ...	3
Rooms cleansed ...	1,141
Staircases, Passages and Landings Cleansed ...	261
Staircases, Balconies and Steps repaired or renewed ...	132
Noxious Accumulations removed ...	38
Nuisances arising from Animals abated ...	3
Miscellaneous Defects Remedied ...	1,115

#### Notices Served

##### Statutory:-

##### Housing Act, 1936:

Section 9 ...	279
" 11 ...	8
" 12 ...	1
	<u>288</u>

##### Public Health Act, 1936:

Section 24 ...	5
" 39 ...	45
" 44 ...	1
" 45 ...	14
" 79 ...	1
" 94 ...	258
	<u>324</u>

##### Tottenham Corporation Act, 1952:

Section 35 ...	2
" 36 ...	11
" 43 ...	21
	<u>34</u>
Informal ...	1,910
	<u>646</u>

During the year one non-mechanical and 35 mechanical factories were found to have been discontinued, and 42 mechanical factories started.



## Repair of Houses by the Council

Work carried out in default or by agreement with the owners during 1953:-

Housing Act, 1936:			£	s.	d.
Section 9	33 premises		£1,918	8	0

## Public Health Act, 1936:

Section 39	11 premises		322	4	8
" 45	3 "		10	5	6
" 94	4 "		261	4	11

## Tottenham Corporation Act, 1952

Section 36	4 premises		48	10	5
" 43	6 "		158	2	7
			£2,718	16	1

## PART IV

# FACTORIES AND SHOPS

Tottenham has a large number of diverse industries in its area. Altogether there are 735 factories on the Factories Register varying from small businesses with one or two employees to large concerns employing two or three thousand people. Close co-operation is maintained with H.M. Inspector of Factories and systematic and regular inspections are carried out by the sanitary inspectors to ensure compliance with those parts of the Factories Acts which are enforceable by the local authority.

## Factories Acts, 1937 and 1948

Inspections for purposes of provisions as to health  
(including inspections made by Sanitary Inspectors)

Premises	Number on Register	Number of		
		Inspections	Written notices	Occupier prosecuted
(i) Factories in which Sections 1, 2, 3, 4, and 6 are to be enforced by Local Authorities	68	62	2	-
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	667	487	28	-
(iii) Other Premises in which Section 7 is enforced by the Local Authority (excluding out-workers' premises)	5	5	-	-
Total	740	554	30	-

During the year one non-mechanical and 35 mechanical factories were found to have been discontinued, and 42 mechanical factories started.



## Summary of Defects found in Factories

Particulars	Number of cases in which defects were found			
	Found	Remedied	Referred to Factories Inspector	Referred by Factories Inspector
Want of cleanliness (S. 1.)	1	1	-	-
Overcrowding (S. 2.)	-	-	-	-
Unreasonable temperature (S. 3.)	-	-	-	-
Inadequate ventilation (S. 4.)	-	-	-	-
Ineffective drainage of floors (S. 6.)	-	-	-	-
Sanitary Conveniences (S. 7.)	-	-	-	-
(a) Insufficient	5	5	-	1
(b) Unsuitable or defective	32	32	-	5
(c) Not separate for sexes	1	1	-	-
Other offences against the Act (not including offences relating to Outwork)	-	-	-	-
Total	39	39	-	6

## Outworkers (Sections 110 and 111)

Regular visits were made by the Sanitary Inspectors to the homes of persons notified to the Department as outworkers. It has been found that the home conditions are generally satisfactory and that the cleanliness in such homes is usually above average.

The following is a summary of the types of outwork carried on in the Borough:-

Wearing apparel	321
Household linen	7
Lace, lace curtains and nets	1
Artificial flowers	12
The making of boxes or other receptacles or parts thereof made wholly or partially of paper	66
Brush making	7
Feather sorting	1
Carding, etc., of buttons, etc.	11
Stuffed toys	6
Chocolates and sweetmeats	2
Cosaques, Christmas crackers, Christmas stocking, etc.	4
Lampshades	1
Total	439

During the year 297 visits were made to outworkers' premises. No contraventions of the Factories Acts were reported.

Workplaces not covered by Factories Act: Shops, Offices etc.

In January 1946, the Gowers Committee was set up with the following terms of reference:-

- (i) To enquire into the provisions of the Shops Acts relating to closing hours (general or local) and to report as soon as possible whether any alterations are desirable.
- (ii) To enquire into and make recommendations as to extending strengthening or modifying:-
  - (a) The statutory provisions relating to the health, welfare and safety of employed persons at places of employment other than those regulated under the Factories or Mines and Quarries Acts, and
  - (b) The statutory regulation of hours of employment of young persons.
- (iii) To enquire into and make recommendations as the machinery for enforcing statutory provisions within the scope of (i) and (ii) above.

An interim report relating to closing hours of shops was submitted in 1947, followed in March 1949 by a full report on Health, Welfare and Safety in Non-Industrial Employment. This report not only suggested extending existing control over shops but also the inclusion of similar measures for other non-industrial premises, such as offices and theatres.

Early in 1953 the Home Office forwarded draft proposals for legislation based on the recommendations of the Gowers Committee to organisations which gave evidence before that committee.

The proposals indicate the type and nature of the work-places to be covered and that the local authority to enforce the legislation (elsewhere than in the County of London) be "as respects a borough, urban district or rural district, the council of the borough or district".

The suggested legislation would place a duty to appoint suitable Shops Act Inspectors and give the Secretary of State power to make regulations prescribing qualifications to be held by inspectors.

The proposals are far reaching and merit very careful study, but the possibility of early action along these lines appears remote.

Nevertheless it was thought advisable to carry out locally a preliminary survey of shops within the borough and the following report was submitted to the Health and Housing Committee of the Council.



### A preliminary survey of shop premises and occupational health needs

There are 2,309 shops in the Borough, 1,251 of which are carried on by the proprietor and his wife, who usually live on the premises.

The trades which are many and varied have been analysed in schedules at the end of this report.

#### Shop assistants

The majority of the 1,058 shops where assistants are employed are of small or medium size, as will be seen from the following table:-

Shops with	1 to	5 employees	971
"	"	6 to 10	65
"	"	11 to 20	15
"	"	21 to 50	2
"	"	51 to 100	4
"	"	over 100	1
			<hr/>
			1,058
			<hr/>

The number of assistants employed (excluding office workers) are:-

Females	1,999
Males	1,145
Young Persons: Female	310
Male	84
Part time Assistants: Females	355
	<hr/>
	3,893

The number of women and girls employed are in the majority, and the proportion of young persons employed is relatively low. In the case of boys, employers do not appear to be keen to employ them because of their liability for military service as soon as they are trained and become useful to them.

During the last war and since, shopkeepers have had great difficulty in obtaining sufficient staff for their needs. This is attributed to the better financial prospects and conditions of service in factories and offices. The introduction of the 5-day week in some factories also attracts many would be shop employees, who dislike having to work on Saturdays. As an inducement, many shopkeepers now allow their assistants two half-day's holiday a week instead of the one required by statute.

## First Aid Arrangements

The provision of first aid boxes in shops is almost non-existent. The number of accidents in shops is low, but so also is the cost of supplying and maintaining a first aid box. The matter has been considered by the Committee of Enquiry into Health and Welfare in Shops, and it appears likely that any amending legislation will deal with this subject. It is important that if and when first aid boxes are provided they should contain simple instructions upon action to be taken in respect of accidents which might arise.

## Sanitary Accommodation

In all cases sanitary conveniences are provided in accordance with the Shops Act 1950, except where the Council have granted in rare instances exemption certificates because restricted space makes it impossible to provide sanitary accommodation on the premises and other conveniences are readily available in the near vicinity.

There is no legal standard of "sufficiency" and in some cases, although it would be difficult to prove insufficiency, conditions would be improved if additional facilities could be provided. The restricted space available often makes it impossible to add to existing accommodation.

## Washing Facilities

Washing facilities are provided in all shops, with the exception of those which have been exempted by the Council. The actual facilities vary considerably from shop to shop. In many shops there is a cold water supply only, with a kettle and gas ring as the only means of heating it.

Although legally this may be regarded as sufficient, in many cases the shopkeeper has been persuaded by the inspector to install an appliance for providing a supply of hot water on tap.

The provision of soap and towel is often left to the assistants, many of whom prefer bringing their own towel to using a communal one.

## Lighting

The lighting of shops is generally good. Most shops, particularly the larger ones, realize that good illumination is a commercial asset both as means of attracting customers and of saving time. There is, however, room for improvement in the lighting of store rooms and passages to avoid accidents.



## Cleanliness of shop premises

The standard of cleanliness is generally satisfactory.

## Seats for shop assistants

Seats are provided in shops where female assistants are employed in accordance with the law, usually in the proportion of one seat for every 3 assistants. It is the duty of the employer to permit the use of these seats whenever this does not interfere with the work. Most of the work in shops is done standing, and in many the use of seats is discouraged in the interests of "salesmanship" and "pleasing the customer".

## Heating in shops

As would be expected in a district with so many shops of varying size and trades, the methods of heating shops vary from central heating in the large shops to the modest electric bowl fire in some of the smaller shops. There is no standard minimum temperature for shops, the law requiring that a reasonable temperature shall be maintained having regard to the circumstances and conditions affecting the shop.

At a recent conference it was pointed out that:-

"The degree of warmth required for comfort in shops depended largely on the amount of clothing worn, and the extent of physical activity. It was difficult to say what is a reasonable temperature. The officer whose duty it is to enforce the law must determine what is unreasonable. High temperatures were very often found in crowded departmental stores, and likely to be more detrimental to the health of the worker than colder conditions against which the employee can adequately cloth himself/herself".

The government proposal as a result of the Gowers Committee report is that a temperature of 60° F shall be maintained after the first hour in shops, unless this minimum temperature would be likely to cause deterioration of any goods kept there.

## Facilities for meals

The provision of facilities for mid-day meals varies generally with the size of the shop. Some of the larger firms provide a dining room and serve meals at a reasonable price.

In common with other suburban towns, many assistants are able to go home for their mid-day meal, or to local cafés and dining rooms. This provides a threefold benefit from the assistants' point of view.

1. It makes a welcome break after being confined behind the shop counter all the morning.
2. It ensures that the full statutory interval for meals is received.
3. It is possible to do any necessary personal shopping.

In shops where the assistant wishes to have a meal on the premises, there is usually a room or a private space for this purpose, but there are seldom adequate means for cooking a meal. In many cases the only heating appliance is a gas ring. Some assistants have ready cooked meals sent in from nearby cafés.

In most shops a tea break of 10 minutes is allowed morning and afternoon.

### Conclusions

Conditions in shops generally have improved during recent years, but many improvements are still desirable.

- (1) Any future industrial health service should be extended to include supervision of the health of the shop assistant.
- (2) Research is needed in investigating the special stresses of a shop assistant's life, e.g. fatigue and causes of breakdowns in health.
- (3) In shops engaged in the handling and preparation of food, continuous effort should be made to educate management and the food handler in the principles of food hygiene.
- (4) Means should be available for voluntary periodic health overhauls of shop employees.

### Shops, Summary of Trades carried on

Art Needlework Dealers	14
Athletic Outfitters	4
Bakers and Confectioners	61
Bird Fanciers	5
Booksellers	29
Boot and Shoe Dealers	56
Boot Repairers	76
Builders Merchants	36
Butchers	99
Cats Meat Dealers	6
Chemists	39
China, Glass and Hardware	37
Clothiers and Outfitters	32



Coal and Coke Merchants	21
Coffee Stalls and Small Cafés	29
Confectioners	254
Corn, Flour and Seed Dealers	20
Corset Makers and Dealers	3
Costumes, Dress and Mantle Dealers	34
Cutlers	4
Cycle Accessories Dealers	25
Cycle Dealers	29
Dairymen	43
Dining Rooms	91
Domestic Machinery Dealers	8
Domestic Stores	190
Drapers	56
Dyers and Cleaners	19
Electrical Fittings and Wireless Dealers	35
Fancy Goods	24
Fishmongers	54
Florists	17
Fruiterers and Greengrocers	128
Furniture Dealers	46
Furriers	6
Gas Fittings Dealers	9
Grocers and Provision Dealers	346
Haberdashers	24
Hairdressers - Ladies and Gents	103
Ham and Beef Dealers	8
Hatters	11
Hosiers	35
Ironmongers and Tool Dealers	17
Jewellers	17
Ladies and Childrens Outfitters	45
Leather and Grindery	19
Lending Libraries	5
Linoleum Dealers	7
Marine Store Dealers	19
Mattress and Bedding Dealers	4
Milliners	16
Motor Car and Cycles	24
Music and Musical Instrument Dealers	14
Newsagents	107
Off Licences	86
Opticians	13
Photographers	18

Public Houses	59
Sewing Machine Dealers	3
Shopfitters	1
Stationers	111
Tailors	40
Timber Merchants	7
Tobacconists	288
Toys and Games Dealers	55
Tripe Dealer	1
Umbrellas and Walking Sticks	3
Watch and Clock Dealers	3
Wardrobe Dealers	12
Wireless Accessories Dealers	3
Total	<u>3, 163</u>

Single Trade Shops	1, 300
Multi Trade Shops	995
Co-operative Stores	7
Other Departmental Stores	7
	<u>2, 309</u>

#### Shops Act, 1950

In the administration of the Shops Act, 2589 inspections were made by the Shops Inspector and it is gratifying to note that in general the provisions of the Act have been well observed. Most contraventions recorded have been minor defaults such as the non-exhibition of statutory notices, and the failure to keep proper records of hours of employment of young persons. 332 verbal warnings and notices have been issued in respect of such offences.

Systematic visitation of shops throughout the Borough has secured effective administration, and information has been obtained for the purpose of keeping up to date a register of shops in the Borough. Regular visits and investigations are made on the days of the weekly half holiday, and in the evening to ensure that the provisions of the Act, and the various early closing orders made thereunder are duly complied with.

Subject to the various exemptions, shops in the Haringay Area close for the weekly half holiday on Wednesday and in the remainder of the Borough the early closing day is Thursday. Butchers shops close on Monday subject to the alternative day (Saturday) in all cases. In connection with half holiday closing 194 visits were made.



Every shop assistant in every class of shop must be allowed a half-holiday once a week commencing not later than 1.30 p.m. The rule applies whether the shops are required to be closed for a weekly half-holiday or not.

#### Meal times

The requirements in respect of assistants meal times are as follows:-

##### Dinner

If the hours of employment include the hours from 11.30 a.m. to 2.30 p.m. each assistant must be allowed an interval of at least three quarters of an hour within that time if the meal is taken on the premises, or an interval of a full hour within that time if the meal is taken off the premises.

##### Tea

If the hours of employment include the hours from 4.0 p.m. to 7.0 p.m. each assistant must be allowed an interval of half an hour within that time. No assistant may be employed for more than 6 hours (5 hours if under 18) without an interval of half an hour within that time.

Many shops allow assistants a tea break of 10 minutes during the morning and afternoon.

#### Sunday Trading

The provisions of the Act restricting Sunday Trading are effectively enforced by means of systematic investigations and observations. 82 visits were made for this purpose and 5 warning notices were sent in respect of contraventions.

#### Shops Act and Young Persons Employment Act, 1938

Regular investigations and inspections were made in connection with these Acts and it has been ascertained that the conditions of employment have improved, both as to the hours of employment of young persons and the arrangements made for the health and comfort of shop workers generally. Two hundred and forty nine visits were made in connection with these Acts.

It is gratifying to note that the provisions of the Acts have been well observed.

## PART V

## GENERAL

## Health Services provided by other Authorities

## (a) Hospitals:- North-East Metropolitan Hospital Regional Board

The hospitals in the Borough are locally administered by the Tottenham Group Hospital Management Committee whose offices are at the Prince of Wales's General Hospital. The Group Secretary is Lt. Col. J.C. Burdett, D.S.O., M.C.

The Group comprises the following hospitals, namely:-

Hospital	Bed Complement	Beds Open	Remarks
Bearsted Memorial Hospital, Annexe at Hampton Court	38	38	Maternity Hospital
St. Ann's General Hospital	756	490	Includes Infectious Disease Wards
Prince of Wales's General Hospital Annexe at Nazeing (Princess Louise Convalescent Home)	219 20	200 20	
Tottenham Chest Clinic			

A table giving details of the out-patient clinics provided by the Prince of Wales's General Hospital is set out on the following page.



## PRINCE OF WALES'S HOSPITAL

## Timetable of Out-Patient Clinics

	Monday	Tues.	Wed.	Thurs.	Friday	Sat.
Medical ... ..	P.M.	A.M.		P.M.	A.M. & P.M.	-
Surgical ... ..	P.M.	P.M.	A.M.	-	P.M.	
Diseases of Women	P.M.	-	-	P.M.	-	-
Children (Medical)	-	A.M.	-	A.M.	-	-
Eye ... ..	-	-	A.M.	-	-	-
Throat, Nose & Ear	P.M.	-	-	P.M.	-	-
Skin ... ..	-	-	P.M.	-	A.M.	
Teeth ... ..	-	-	-	A.M.	-	A.M.
Neurological ...	-	P.M.	-	-	-	-
Genito-Urinary ...	-	A.M.	-	-	-	-
Psychiatric ...	P.M.	-	-	-	P.M.	-
Physical Medicine	9 - 5	9 - 5	9 - 12	9 - 5	9 - 5	9 - 12
X-ray ... ..	9 - 5	9 - 5	9 - 5	9 - 5	9 - 5	9 - 12
Orthopaedic ...	-	A.M.	-	A.M.	-	-
Fractures ...	A.M.	A.M.	-	A.M.	A.M.	-
Allergy ... ..	-	-	-	P.M.	-	-
Venereal Diseases Medical Officer-						
Males	4.30 - 7	-	4.30 - 7	10 - 12.30 4.30 - 7	-	10 - 12.30
Females		4.30 - 7	-	10 - 12.30	2 - 4.30	10 - 12.30
Intermediate Treatment	9 - 7	9 - 7	9 - 7	9 - 7	9 - 7	9 - 12.30

Doctors' Letters required.

All patients seen by appointment.

The Casualty Department is always open for medical and surgical emergencies.

## (b) Area Health Service

The personal health services now provided by the Middlesex County Council are administered from the Area Health Office, Somerset Road, Tottenham, N. 17.

## (c) Area Welfare Service

The Welfare Service of the Middlesex County Council is administered in Tottenham by the Area Welfare Officer, 5, Lansdowne Road, Tottenham, N. 17, telephone number TOTtenham 1212, and it is to this officer that enquiries should be directed regarding the admission of persons to residential homes provided by the Middlesex County Council.

## (d) Lunacy and Mental Treatment Acts

The Authorised Officers for the purpose of these Acts have their offices at 5, Lansdowne Road, Tottenham, N. 17, telephone number TOTtenham 1211.

## (e) Ambulance Service

Ambulances are stationed at the Edmonton Fire and Ambulance Station, but vehicles are retained at the Tottenham Central Fire Station and at Coombes Croft for accident and emergency cases. Telephone number EDMonton 5544 or, for emergency calls, dial 999.

## Public Health Laboratory Service

The Public Health Laboratory Service provides a comprehensive service for the bacteriological examination of specimens submitted by general practitioners and local authorities.

The existing system for the supply of containers and the delivery of specimens by the Public Health Department remains unchanged. Specimens may be sent to the Public Health Department and providing they reach there not later than 3.0 p.m. on Monday to Friday and 11.0 a.m. on Saturday, they will be sent on the same day by special messenger to the Hornsey branch laboratory.

As it is not possible to send a second messenger on any one day, it is essential that specimens be delivered to the Town Hall before the times stated. Alternatively, specimens may be sent direct to the Hornsey laboratory, which remains open until 5.0 p.m. on Monday to Friday and 12 noon on Saturday. The address is:-

Public Health Laboratory,  
Coppett's Wood Hospital,  
Coppett's Road,  
N. 10.

A 24 - hour emergency service is maintained by the Central Laboratory at Colindale.

The following is a summary of the work carried out during 1953, namely:-

## Record of Examinations

Throat/Nose Swabs:-	Total Specimens				
Diphtheria Bacilli	...	...	...	...	191
Haemolytic Streptococci	...	...	...	...	24
Haemolytic Streptococci and Vincents Angina	...	...	...	...	2
Negative	...	...	...	...	165



Faeces:- Total Specimens	846
Shigella	177
Salmonella	36
Negative	633
Sputum:- Total Specimens	4
T.B. Smear	-
Other Organisms	-
Negative	4
Pertussis:- Total Specimens	185
Positive	24
Negative	161
Ice Cream:- Total Specimens	26
Water:- Total Specimens	6
Domestic Supplies	3
Swimming Pools	3
Miscellaneous Specimens	18
Total Number of Specimens	1,276

#### Care of the Aged

The care of the aged infirm and sick is still a major problem to all concerned. Information of the conditions under which old people are living in the borough is obtained from many sources - general practitioners, health visitors, home helps, county welfare officer, sanitary inspectors, Old People's Welfare Organiser and the general public. Many queries from the public arise where the aged person is living in the same house and not a member of the family. In a few cases perhaps the main object of enquiry or complaint is to shed responsibility. Investigation of the majority shows, however, that efforts have been made to cope with the situation and appeal to the Health Department only comes when real and genuine difficulties exist.

In all instances a visit is paid and the needs of the case assessed. Additional information required is obtained from any of the many other sources mentioned above. In some cases assistance can be given to alleviate the condition by the appropriate contacts. This may suffice and ease the lot of the old person and those looking after him or it may be merely a temporary measure until such time as admission to a home or hospital can be arranged.

The good relationship between the department and the geriatric unit at St. Ann's General Hospital, Tottenham, has been maintained. Environmental reports concerning aged persons on the hospital waiting list are forwarded to the hospital authorities to assist them in assessing priorities. In addition, cases needing urgent admission which come to the notice of the department are reported to the hospital whose co-operation in admitting them early has always been forthcoming.



Some of the old people who are seen do not consider that they are in need of help and resent what they think is unwarranted interference from outside. In such cases those that are definitely in need of care and attention may have to be dealt with under the National Assistance Act.

In practice action is delayed as long as possible to see if the old person can be made to recognise his or her need and so consent voluntarily to go into a suitable home.

A difficult case is the old person who is ambulant but can only look after him or herself to some extent. The home help service and the old peoples welfare organisation can assist here, provided they are allowed to do so. Some old people, however, remain stubbornly independent refusing all offers of help, preferring to live alone surrounded in their one room by masses of valued but valueless rubbish. One is reluctant to uproot these old people or clear out the rubbish providing it is not filthy or verminous. Experience in the borough and elsewhere has shown that precipitate action tends to cause distress and even accelerate the death of the old person. In dealing with the problems of old age, supervision by the Health Department is maintained as unobtrusively as possible.

#### Provision of Laundry Facilities for Old Persons

It has been apparent for some time that one of the great problems in looking after bedridden aged persons in their home is the laundering of soiled bed-linen and other articles particularly of the incontinent cases. Generally the home help service has endeavoured to deal with this as it arises but often the situation can not be adequately dealt with in the cramped accommodation in which so many old people are living.

At the end of the year a scheme was drawn up in conjunction with the Tottenham Hospital Management Committee for a service to deal more efficiently with this problem in the laundry at St. Ann's General Hospital, Tottenham. The service which is limited to satisfy the requirements of Section 84 of the Public Health Act, 1936, provides for collection of soiled linen twice a week. The clean laundry is returned when the next soiled bundle is collected.

#### Old People's Welfare

The following brief summary of the work of the Old People's Welfare Committee has been abstracted from the annual report of the Chairman of the Committee, The Lady Morrison.

The year has been a very busy one for the Committee and has seen the opening of their fourth Old People's Club. In addition to annual efforts to raise funds, many Coronation events have been organised. As more and more old



people become aware of the Committee's work, there is a corresponding increase in the demand for help and advice.

(a) Handicraft Exhibition

A very successful exhibition of Old People's Handicraft was held at the Bruce Castle Museum in June. Over 200 entries were received from men and women over 60 whose entries displayed a fine delicate and artistic touch. In spite of failing eyesight, hands often crippled with rheumatism, they were able to show that they had still the mastery of their crafts. The Exhibition, which was a tribute to their skill, aroused a widespread interest in the Borough and more than 3,500 members of the public visited Bruce Castle to admire the entries, but more important was the interest of the old people themselves. During the weeks of preparation, the steps of the old people seemed lighter, heads were held higher, and eyes shone with a fully justified pride of achievement. £200 in prizes was awarded.

(b) Coronation Events

The organisation of a Coronation Dinner for 8,000 aged residents of the Borough at the Royal Theatre of Dancing was undertaken by the Committee with the help and co-operation of the management. Many crippled and housebound were conveyed to and from the function by cars provided by voluntary workers. The Tottenham Corporation made a special donation of £500 towards the cost as a part of the Borough Coronation celebrations.

Many old folk were able to view the Coronation on television because of the co-operation and kindness shown by a local firm who installed without cost two large sets in each of the old people's clubs for three days during that week. The Clubs were open to any old people who wanted to come along.

(c) Outings

A number of outings to the coast or country were arranged during the summer months. There was also a visit to a B.B.C. "Music Hall" broadcast and 500 old people were given free tickets to the Harringay Circus.

(d) Christmas Parcels

Over 650 Christmas Parcels were packed and delivered into the homes of the sick and housebound aged with the ready help of the voluntary workers who undertook the delivery of the parcels in their cars. The flood of letters received from the old people proved how deeply the gifts were appreciated.

(e) Chiropody Service

The Chiropody service is one of the most popular of the welfare services and in 1953/4 1,660 patients received treatment. Three sessions are fully utilised each week but in spite of this there is a long waiting list and the clinic is fully booked for 5 weeks ahead. The charge to the old people is one shilling per foot.



## (f) Meals-on-Wheels

This service is of great help to the sick and housebound and approximately 3,792 meals have been taken into the homes of the aged. Co-operation exists between the Committee, the W.V.S., and the Home Help Department of the Area Health Service, to ensure that the most needy of these old people are covered for meals during the greater part of the week.

## (g) Club Meals

Meals, supplied by the Corporation's Catering Department, are served at the clubs on Tuesday and Thursday of each week and during the year 11,422 meals were served. One shilling for main meal and sweet is the charge to the old people, who greatly appreciate the service.

## (h) Holidays

There has been a very heavy demand for holidays and the Organiser, acting locally for the Women's Holiday Fund, has been able to arrange for 78 old people to have a seaside holiday at an approximate cost of 32/6d. (week inclusive of full board and coach fare). This has been a boon to many and thanks are due to the Secretary of the Women's Holiday Fund for her help and acceptance of all the applications put forward by the Organiser. A list of addresses of holidays at reduced rates is also kept at the office for elderly couples wishing to go for a seaside holiday.

## (i) Shoe Repairs

To date 130 aged persons have applied for dockets to enable them to have shoe repairs at a reduced rate under a scheme agreed with the "St. Crispin Group" of shoe repairers.

## (j) Old People's Clubs

Membership remains steady and, with the opening of the Old People's Club at St. John's Hall, Great Cambridge Road, there are now four full time Clubs in the Borough as follows:-

High Cross Congregational Church Entrance Colsterworth Road, N. 15.	Daily from 10 a.m. to 5 p.m. (Dinners Tuesdays and Thursdays: 12 noon).
Friends' Meeting House 594, High Road, N. 17.	Daily from 10 a.m. to 5 p.m. (Dinners Tuesdays and Thursdays: 12 noon).
Woodberry Down Baptist Church Corner Vartry Road, Seven Sisters Road, N. 15.	Daily from 10 a.m. to 5 p.m. (Dinners Tuesdays and Thursdays: 12 noon).
St. John's Church Hall Entrance Laburnum Grove, Gt. Cambridge Road, N. 17.	Tuesdays, Thursdays, Fridays. (Dinners Tuesdays and Fridays 12 noon).



## (k) Wireless

The "Wireless for the Bedridden Society" have been very helpful towards the housebound old people. In addition the Committee keep and maintain six portable sets which are available from the Organiser.

## (l) General Welfare

Many more old people are visiting the Welfare Office for help and advice on various problems and during the year there were:-

Office interviews - 3,174

Domiciliary Visits - 413

(Not included in these figures are the numerous enquiries received and dealt with by letter and telephone).

The above details give some idea of the work of the Old People's Welfare Committee, but there is still a great need for more voluntary helpers for visiting. Many old people are just lonely, and an occasional visit, whether during daytime or evening, would make a great difference and help to brighten their lives.

## National Assistance Acts 1948 - 51

The number of cases investigated as likely to be in need of care and attention was 60, but the actual visits paid in connection with these cases were much in excess of this figure.

In no case was it necessary to take formal action under these acts. Action was contemplated in a few instances but on each occasion the individual voluntarily consented to go into a home or a hostel.

In addition close liaison was maintained with various statutory and voluntary bodies which might be of assistance in relieving the distress in these cases.

## National Assistance Act, 1948, Section 50: Burials

During the year it was necessary to arrange four burials where deaths occurred and suitable arrangements for burial would not otherwise have been made.

## Establishments for Massage and Special Treatment

At the 31st December, 1953, 12 licences were in force in the borough.

One application for a chiropody licence was refused on the grounds of inadequate qualifications and training. The applicant gave notice of appeal but later withdrew.

Periodic visits are made to these establishments by the Deputy Medical Officer of Health to ensure that they are properly conducted and that the by-laws are complied with.

### Medical Examinations of Council's Staff

During the year 94 candidates were examined for purposes of the super-annuation scheme. 5 persons failed to pass the examination.

7 employees were examined in connection with the Sick Pay Scheme.



## PART VI

## STATISTICAL SUMMARY

The classification of deaths is in accordance with the International List of Diseases, Injuries and Causes of Death as revised in 1948 under the auspices of the World Health Organisation.

	1952	1953
Area of District (in acres)	3,013	3,013
Population:		
Census, April, 1951 . . . . .	126,929	
Mid-year: Registrar General's estimate	125,800	124,400
Rateable Value	£1,018,284	£1,011,380
Sum represented by penny rate	£4,000	£4,040
<i>Births:</i>		
Registered live-births		
(a) Legitimate:		
Males	815	812
Females	774	755
Total	1,589	1,567
(b) Illegitimate:		
Males	37	38
Females	40	37
Total	77	75
(c) Total Live-births:		
Males	852	850
Females	814	792
Total	1,666	1,642
Birth-rate per 1,000 estimated population	13.24	13.20

Stillbirths:

		<u>1952</u>	<u>1953</u>
(a) Legitimate:	Males	24	22
	Females	10	20
	Total	<u>34</u>	<u>42</u>
(b) Illegitimate:	Males	1	2
	Females	1	0
	Total	<u>2</u>	<u>2</u>
(c) Total:	Males	25	24
	Females	11	20
	Total	<u>36</u>	<u>44</u>
Stillbirth rate per 1,000 total (live and still) births		21. 15	26. 10

Deaths:

Males	786	659
Females	629	688
Total	<u>1,415</u>	<u>1,347</u>
Death-rate per 1,000 estimated population	11. 25	10.83

Maternal Deaths:

Puerperal Sepsis	0	0
Other puerperal causes	2	3
Total	<u>2</u>	<u>3</u>
Maternal Death-rate per 1,000 total (live and still) births	1. 175	1.779

Deaths of Infants under 1 year of age

(a) Legitimate:	Males	23	25
	Females	11	14
	Total	<u>34</u>	<u>39</u>
(b) Illegitimate:	Males	0	1
	Females	0	3
	Total	<u>0</u>	<u>4</u>
(c) Total Infantile Deaths:	Males	23	26
	Females	11	17
	Total	<u>34</u>	<u>43</u>
Infantile Death-rate per 1,000 live births		20. 41	26. 19



*Neo-Natal Deaths:*

	1952	1953
Deaths of infants under 4 weeks	27	30
Neo-natal Death-rate per 1,000 live births	16.21	18.27

*Comparability Factors:*

Births	0.93	0.95
Deaths	1.06	1.03

*The 1951 Census:*

In 1953 the detailed analysis of the Census for the County of Middlesex was published by the Registrar General. Comparison with earlier census reports shows the following trends as far as Tottenham is concerned:-

*Population*

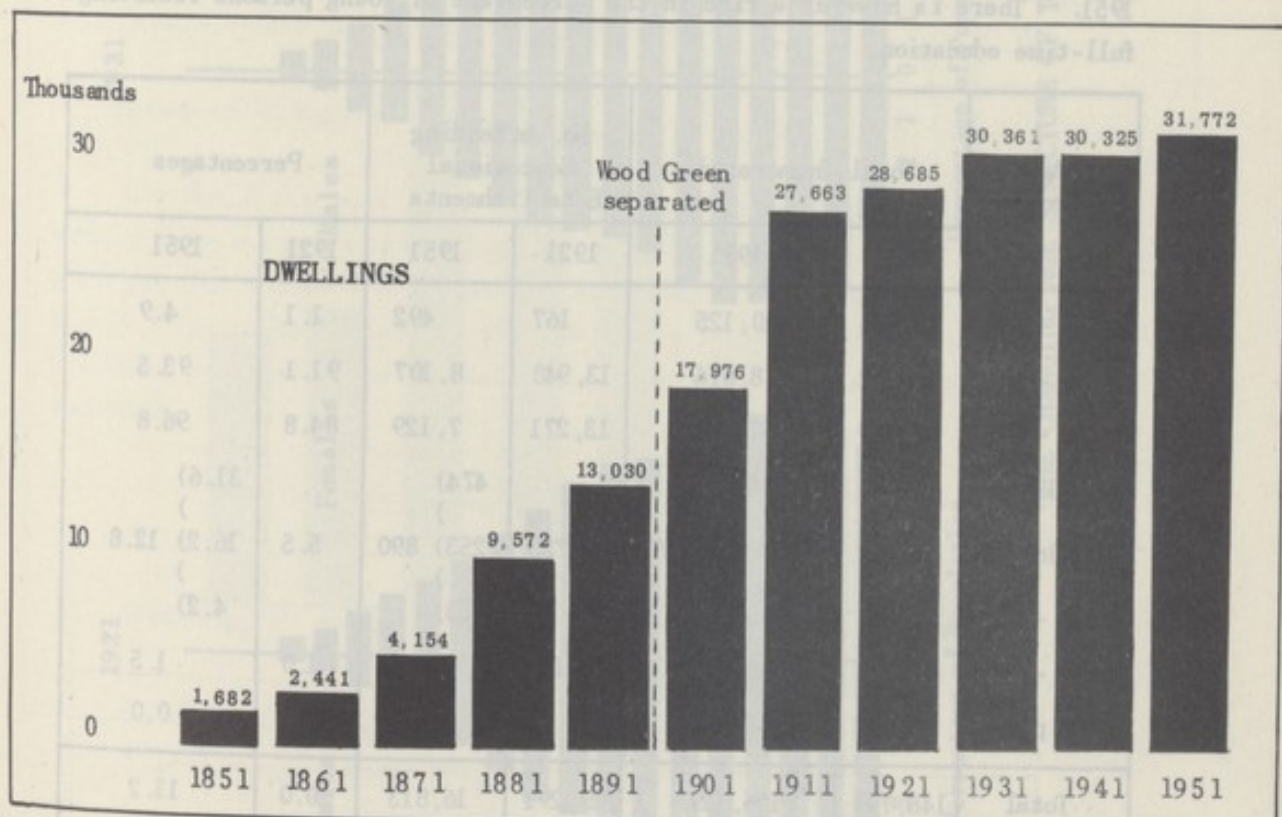
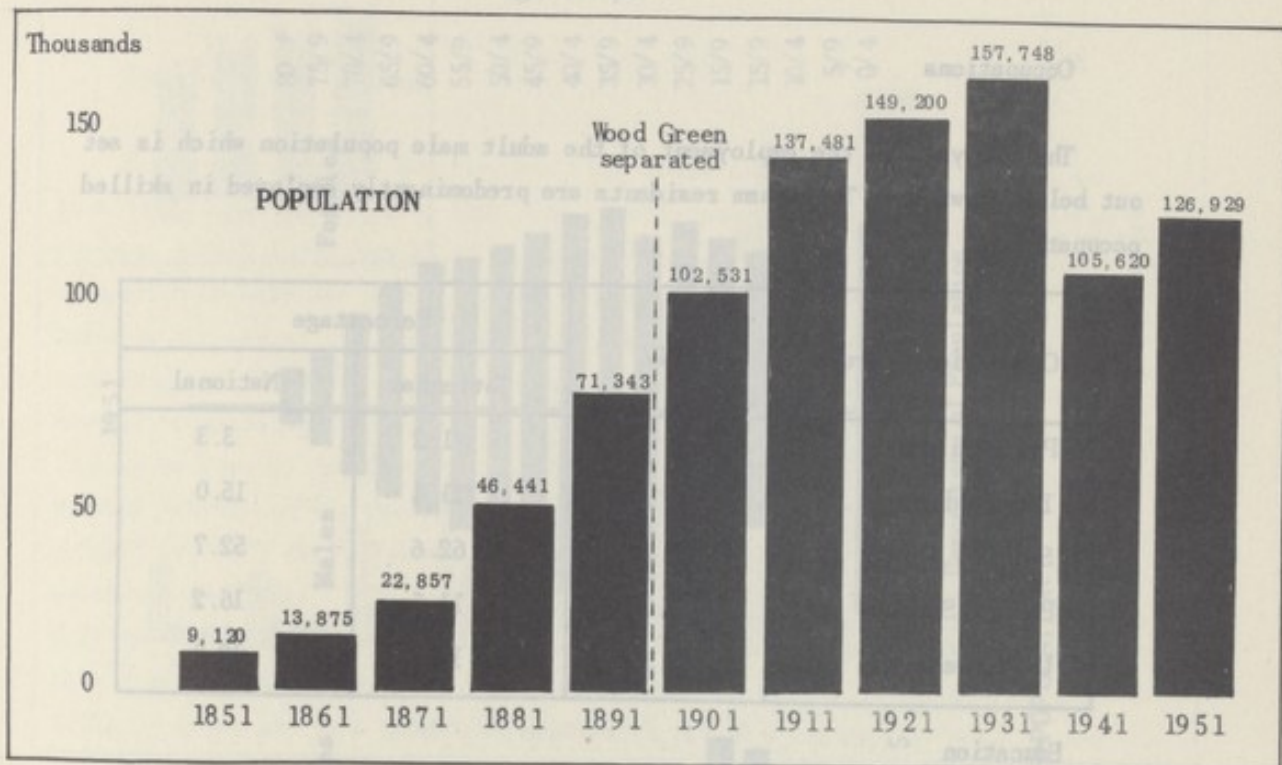
The 1951 figure for Tottenham, 126,929, is 30,738 less than 1931 when the last census was taken. This is the number of persons actually staying in Tottenham on the night of the census and no account is taken of persons temporarily absent in the Armed Forces which with the present compulsory National Service is a larger number than it was in 1931. While the County of Middlesex as a whole has increased its population, a decline is shown in the population of the County of London and in the Middlesex districts immediately adjoining. The steady outward movement of population has led to the growth of districts on the outer fringes, and it is known that many of the 1931 Tottenham residents have moved to these outer districts and in their place have come residents from Central London where the fall in population has been most noticeable.

*Age Distribution*

In common with the national trend the proportion of older persons in Tottenham has increased considerably since the 1931 Census and there has been a corresponding reduction in the lower age-groups. Although there is only a slight reduction in the working age-group 15 - 64 taken as a whole, there are now fewer younger persons. The slight increase in the group under 5 years reflects the exceptionally high birth rates in 1946 and 1947.

*Age Distribution of Tottenham's Population*

Age Groups	1921	1931	1951
	%	%	%
0 - 4	9.2	7.3	8.0
5 - 14	21.1	16.7	12.6
15 - 44	47.5	49.8	43.7
45 - 64	17.3	20.4	24.7
65 plus	4.9	5.8	11.0



THE GROWTH OF TOTTENHAM DURING THE  
PAST CENTURY



## Occupations

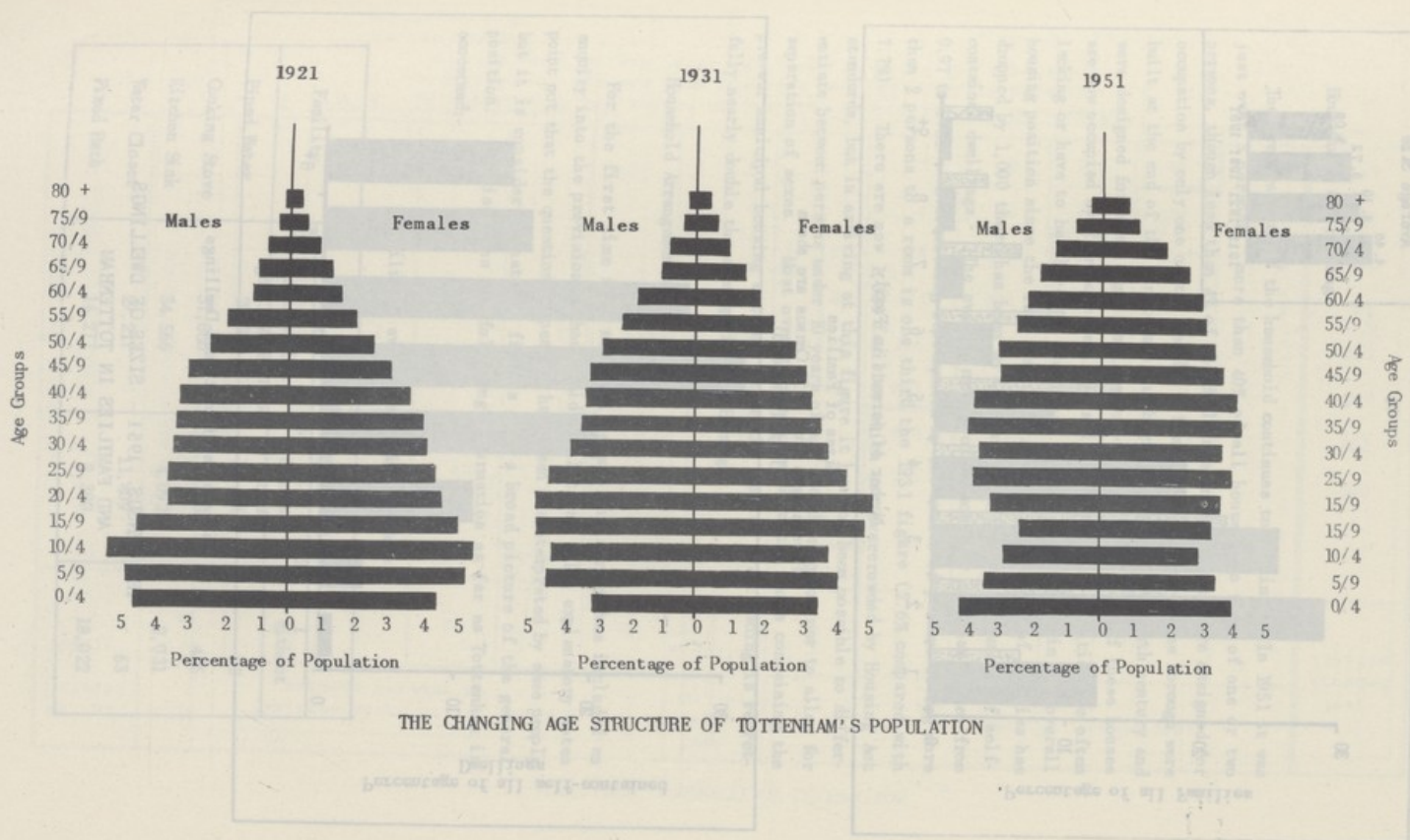
The analysis of the employment of the adult male population which is set out below shows that Tottenham residents are predominantly employed in skilled occupations.

Occupational Group	No.	Percentage	
		Tottenham	National
Professional	548	1.2	3.3
Intermediate	4,740	10.4	15.0
Skilled	28,451	62.6	52.7
Partly Skilled	5,232	11.5	16.2
Unskilled	6,510	14.3	12.8

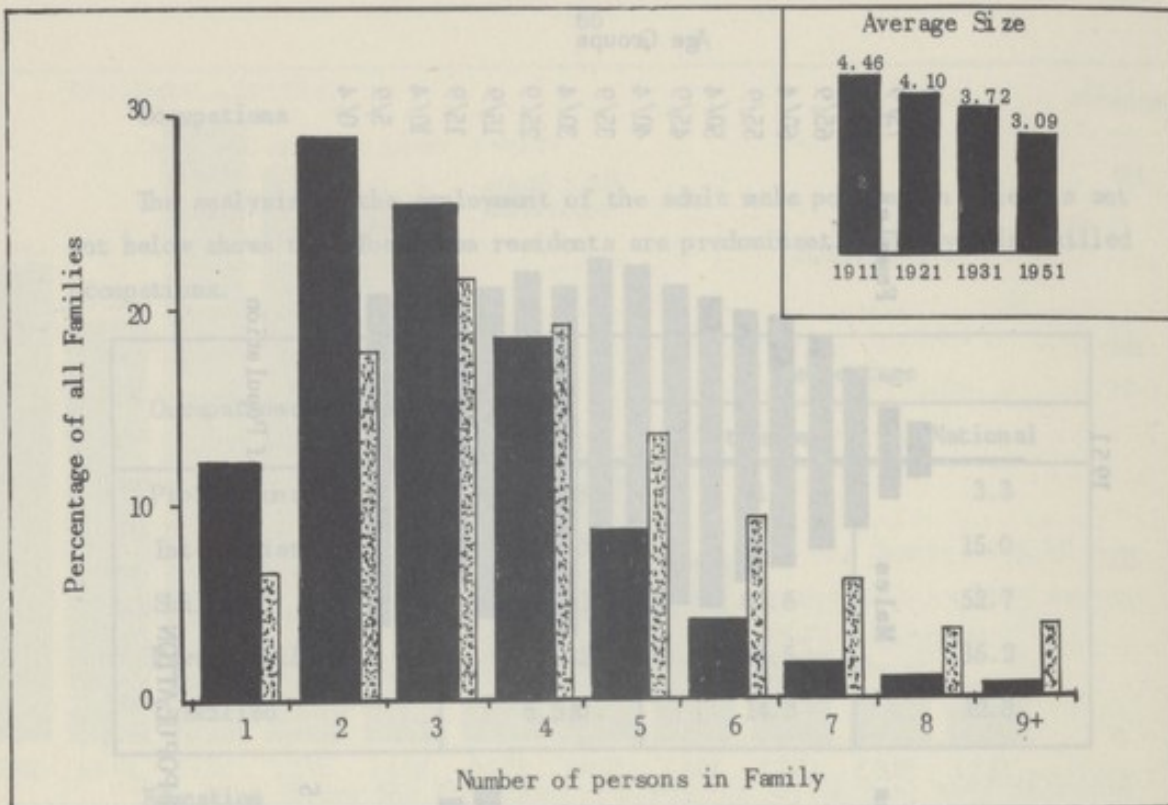
## Education

Owing to the drop in the number of young persons, in Tottenham the number receiving full-time education has fallen from 29,291 in 1921 to 16,813 in 1951. There is however a rise in the percentage of young persons receiving full-time education.

Age Groups	Total Enumerated		No. attending Educational Establishments		Percentages	
	1921	1951	1921	1951	1921	1951
0 - 4	13,434	10,125	167	492	1.1	4.9
5 - 9	15,292	8,676	13,948	8,107	91.1	93.5
10 - 14	15,649	7,361	13,271	7,129	84.8	96.8
15 )		1,515)		474)		31.6)
)		)		)		)
16 )	13,680	1,549) 6,949	755	253) 890	5.5	16.2) 12.8
)		)		)		)
17 - 19)		3,885)		163)		4.2)
20 - 24	12,053	8,762	117	136	1.0	1.5
25 plus	76,603	85,056	33	59	0.0	0.0
Total	146,711	126,929	29,291	16,813	20.0	13.2

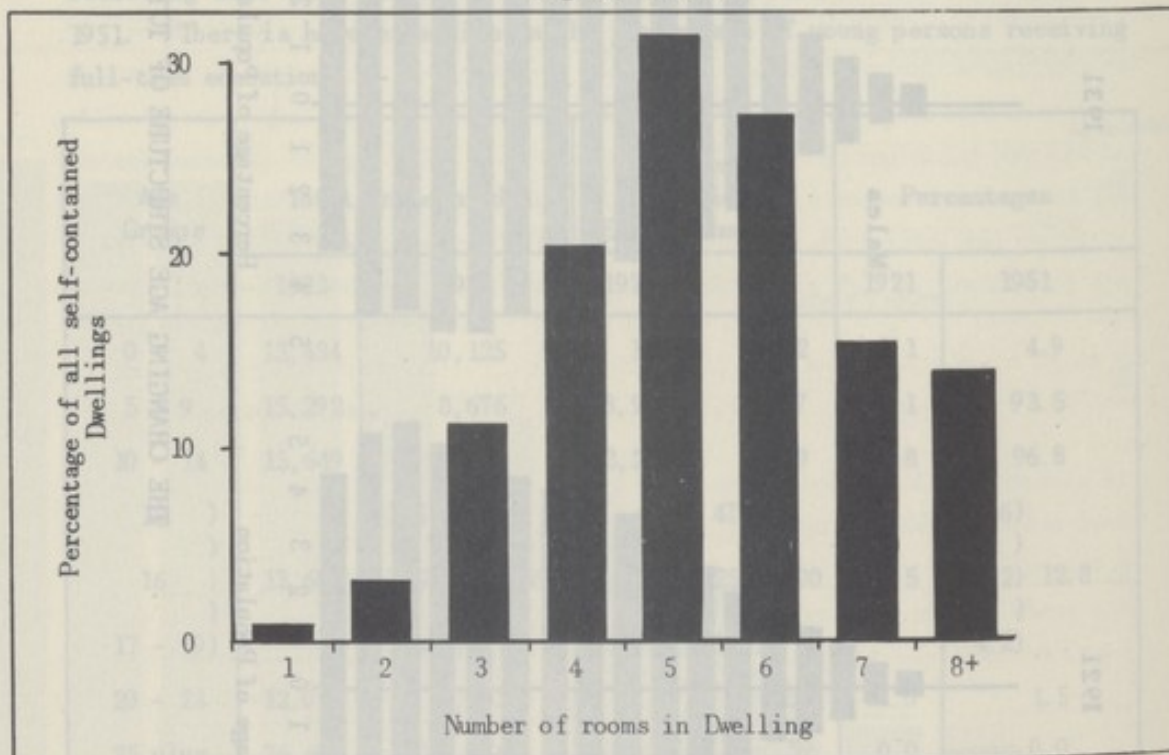






#### Sizes of Families

(Percentages from 1921 Census are shown lightly shaded)



#### Sizes of self-contained Dwellings

THE CENSUS, 1951 - SIZES OF DWELLINGS  
AND FAMILIES IN TOTTENHAM

## Households and Housing

The average size of the household continues to decline. In 1951 it was just over 3 persons; more than 40% of all households were of one or two persons, though less than 4% of the dwellings in the Borough are designed for occupation by only one or two people. Most of the houses in the Borough were built at the end of the nineteenth and beginning of the twentieth century and were designed for the larger families of the period. Many of these houses are now occupied by 2 or more families and in consequence amenities are often lacking or have to be shared. There has been an improvement in the overall housing position since the last census. Although the number of families has dropped by 1,000 there has been an increase of 1,500 in the number of self-contained dwellings. The average number of persons per room has fallen from 0.97 to 0.81. Overcrowding represented by the number of persons living more than 2 persons to a room is one third the 1931 figure (2.6% compared with 7.7%). There are now 1,324 families which are overcrowded by Housing Act standards, but in arriving at this figure it has not been possible to differentiate between persons under 10 years of age and those over, nor to allow for separation of sexes. Most overcrowding occurs in the Wards containing the pre-war municipal housing estates, where the rate of overcrowding is regrettably nearly double the average for the Borough.

### Household Arrangements

For the first time in a national census the survey has included an enquiry into the provision of household facilities. The explanatory notes point out that the questions appear to have been misinterpreted by some people but it is considered that the figures give a broad picture of the general position. It discloses the following information as far as Tottenham is concerned:-

Facilities available to Householders

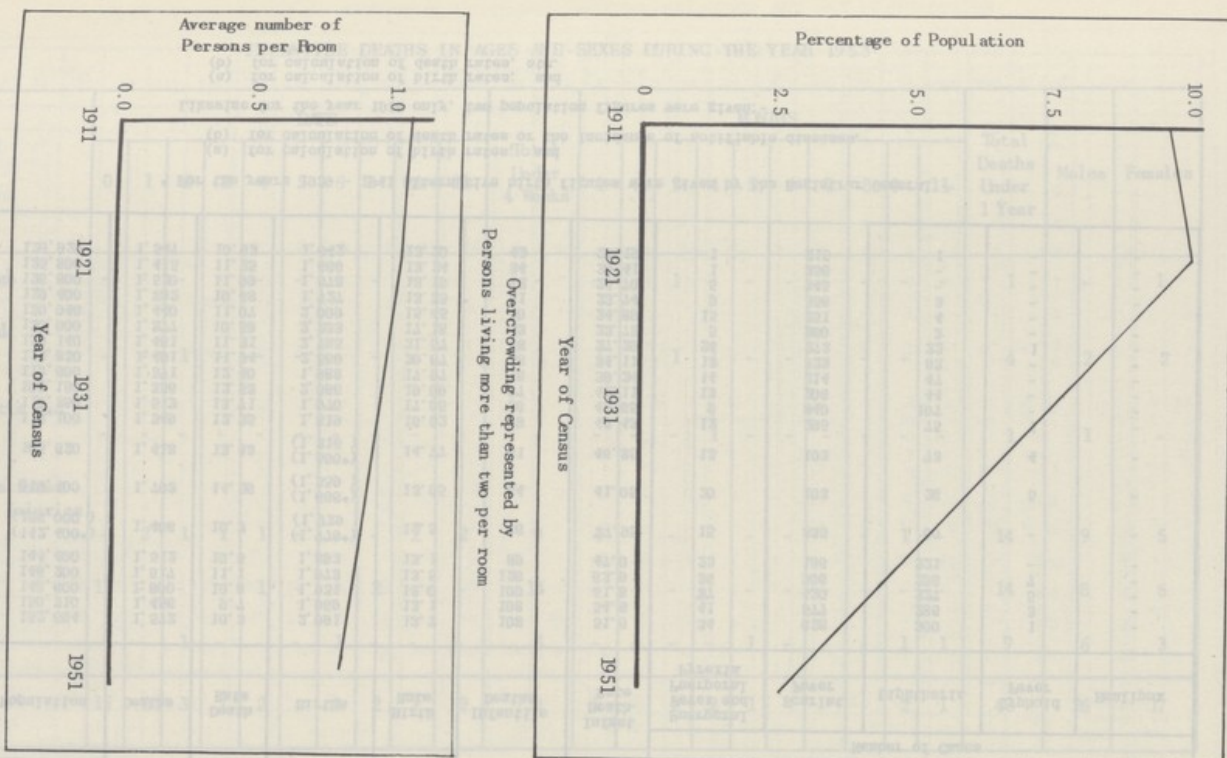
Facility	No. of Householders with:		
	Exclusive Use	Sharing	Without
Piped Water	28,310	12,326	53
Cooking Stove	37,880	2,383	426
Kitchen Sink	34,566	4,092	2,031
Water Closet	29,217	11,409	63
Fixed Bath	14,277	8,390	18,022



DWELLINGS - DENSITY OF OCCUPATION

No. of Persons in Family	Families where No. of rooms exceeds persons by -						Fams. where No. of rooms equals per- sons	Families where No. of Persons exceeds rooms by -						Over- crowded families
	6+	5	4	3	2	1		1	2	3	4	5	6+	
1	19	121	303	584	1,567	1,436	769							
2	23	73	590	1,987	2,276	4,680	1,841	281						
3	6	16	102	930	2,367	2,454	3,370	964	200					200
4	3	5	26	122	918	2,104	1,780	1,990	434	75				509
5		3	5	20	90	533	1,163	868	697	100	14			114
6			4	5	15	53	284	513	398	229	20	4		253
7				2	3	10	37	139	251	187	62	4	2	68
8						2	4	13	64	110	75	23	3	101
9						1	3	5	7	29	57	36	10	46
10+							3	3	4	6	27	40	33	33

(NOTE: In arriving at the number of families overcrowded by Housing Act standards, it has not been possible to differentiate between children under 10 and those over, nor to allow for separation of sexes).



THE CENSUS 1951 - DENSITY OF OCCUPATION  
OF DWELLING ACCOMMODATION



# Statistics of Tottenham for the last Twenty Years

Year	Population	Deaths	Death Rate	Births	Birth Rate	Infantile Deaths	Infant Death Rate	Number of Cases				
								Puerperal Fever and Puerperal Pyrexia	Scarlet Fever	Diphtheria	Typhoid Fever	Smallpox
1934	152,694	1,572	10.3	2,091	13.7	108	51.6	34	628	300	1	-
1935	150,310	1,456	9.7	1,969	13.1	108	54.8	41	577	286	3	-
1936	148,600	1,600	10.8	1,931	13.0	100	51.8	37	430	227	5	-
1937	146,200	1,617	11.1	1,973	13.5	126	63.9	36	306	236	7	-
1938	144,400	1,512	10.5	1,893	13.1	89	47.0	23	186	221	-	-
1939	(142,400*) (136,000)	1,406	10.3	(1,776*) (1,739)	12.5	66	37.95	15	335	60	-	-
1940	119,400	1,703	14.26	(1,666*) (1,559)	13.95	64	41.05	20	103	28	5	-
1941	105,620	1,418	13.43	(1,560*) (1,316)	14.77	61	46.35	13	103	73	4	-
1942	110,100	1,349	12.25	1,819	16.52	79	43.43	12	295	75	1	-
1943	110,350	1,513	13.71	1,970	17.85	86	43.65	9	340	107	-	-
1944	108,180	1,356	12.53	2,066	19.09	87	42.11	13	206	44	-	-
1945	110,600	1,371	12.40	1,988	17.97	78	39.24	14	214	47	-	-
1946	124,830	1,491	11.94	2,580	20.67	88	34.11	13	323	83	-	-
1947	129,140	1,461	11.31	2,785	21.57	76	27.29	24	272	22	1	-
1948	130,000	1,377	10.59	2,233	17.18	53	23.73	5	260	3	-	-
1949	130,040	1,440	11.07	2,009	15.45	50	24.89	15	251	4	-	-
1950	129,400	1,382	10.68	1,727	13.35	41	23.74	9	356	3	-	-
1951	126,800	1,520	11.99	1,673	13.19	43	25.70	5	245	-	-	-
1952	125,800	1,415	11.25	1,666	13.24	34	20.41	1	356	-	-	-
1953	126,929	1,347	10.83	1,642	13.20	43	26.19	1	215	1	-	-

\* For the years 1939 - 1941 alternative birth figures were given by the Registrar General:-

- (a) for calculation of birth rates; and
- (b) for calculation of death rates or the incidence of notifiable diseases.

Likewise for the year 1939 only, two population figures were given:-

- (a) for calculation of birth rates; and
- (b) for calculation of death rates, etc.

CLASSIFIED DEATHS OF TOTTERHAM RESIDENTS SHOWING AGE GROUP AND SEX DISTRIBUTION

INFANTILE DEATHS IN AGES AND SEXES DURING THE YEAR 1953

CAUSE OF DEATH	DAYS											Total Under 4 Weeks	MONTHS											Total Deaths Under 1 Year	Males	Females
	0	1	2	3	4	5	6	7-	14-	21-	1		2	3	4	5	6	7	8	9-	11-					
Whooping Cough	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	1	-	1		
Pneumonia and Bronchitis	-	-	1	-	-	-	-	-	-	-	1	1	-	1	1	-	-	-	-	-	4	2	2			
Gastroenteritis and Diarrhoea	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	1	1	-			
Congenital Malforma- tion. Birth Injuries Atelectasis	-	2	1	1	1	-	-	-	2	2	9	4	-	-	-	-	-	-	1	-	14	9	5			
Prematurity	11	-	-	-	1	-	-	2	-	-	14	-	-	-	-	-	-	-	-	-	14	8	6			
Other Causes	4	-	1	-	-	-	1	-	-	-	6	-	-	-	-	1	-	-	-	1	1	9	6	3		
Total	15	2	3	1	2	-	1	2	2	2	30	5	-	2	2	1	-	-	-	2	1	43	26	17		



Table of Cases of Infectious Diseases coming to the  
knowledge of the Medical Officer of Health during the year 1953,  
in the Borough of Tottenham, classified according to Diseases and Ages

Disease	Under 1		1		2		3		4		5-9		10-14		15-19		20-34		35-44		45-64		65 & up		Total	Total cases removed to hospital
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F		
Scarlet Fever	-	-	-	5	6	5	11	7	12	15	73	52	13	8	4	1	3	-	-	-	-	-	-	-	215	82
Measles	14	13	55	52	83	64	91	77	101	82	184	173	3	10	2	2	3	6	3	2	-	-	-	-	1,020	41
Whooping Cough	12	12	21	17	17	35	18	21	18	26	77	80	4	1	-	-	1	-	-	-	-	-	-	-	360	42
Pneumonia	3	-	-	2	-	1	5	1	3	-	3	2	2	-	2	2	3	6	8	7	14	25	19	19	127	21
Erysipelas	-	-	-	-	-	-	-	-	-	-	1	-	-	1	-	-	-	1	2	2	8	2	2	-	19	7
Food Poisoning	-	-	1	3	2	2	-	-	-	-	3	-	-	1	-	5	3	-	2	4	4	-	-	-	30	4
Puerperal Pyrexia	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	1	-
Acute Encephalitis	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Infective	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Post-infectious	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1
Acute Poliomyelitis	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	6	6
Paralytic	-	-	-	-	-	3	1	-	-	-	1	-	1	-	-	-	-	-	-	-	-	-	-	-	5	4
Non-paralytic	-	-	-	-	-	-	-	-	-	-	1	-	3	-	-	-	1	-	-	-	-	-	-	-	1	1
Diphtheria	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	1	1
Paratyphoid	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1
Dysentery	5	1	3	7	2	4	6	6	3	5	17	24	3	8	-	-	12	10	3	9	5	5	3	2	143	30
Malaria	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	3	-	-	-	-	1	-	-	4	3
Scabies	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2	3	-	-	1	-	-	-	6	-
Tuberculosis	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Respiratory	-	-	-	-	-	1	-	1	-	1	2	4	4	4	4	6	20	30	12	8	26	12	7	2	143	-
Non-respiratory	-	-	-	-	1	-	1	-	1	1	1	1	-	1	3	-	-	4	1	1	2	1	-	1	20	-
TOTAL	34	26	81	86	111	114	134	113	138	130	359	340	33	32	17	11	51	64	28	32	54	57	31	26	2,102	243

CLASSIFIED DEATHS OF TOTTENHAM RESIDENTS SHEWING AGE-GROUP AND SEX DISTRIBUTION

DISEASE	TOTAL		0-4		5-9		10-14		15-19		20-24		25-34		35-44		45-54		55-64		65-74		75-84		85 +	
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
Tuberculosis respiratory	17	7	-	-	-	-	-	-	-	-	1	2	1	1	3	4	1	2	-	6	1	2	-	-	-	-
Tuberculosis other	1	1	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-
Syphilitic disease	8	1	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	2	-	2	-	3	1	-	-	-
Diphtheria	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Whooping Cough	-	1	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Meningococcal Infection	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Acute poliomyelitis	1	1	-	-	-	1	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Measles	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Other infective & parasitic diseases	1	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	1	-	-	-
Malignant neoplasm of stomach	21	13	-	-	-	-	-	-	-	-	-	-	-	-	1	4	1	9	2	6	6	2	3	-	-	-
Malignant neoplasm of lungs & bronchus	53	15	-	-	-	-	-	-	-	-	-	-	-	8	2	3	27	3	12	5	1	-	-	-	2	-
Malignant neoplasm of breast	-	29	-	-	-	-	-	-	-	-	-	-	-	-	3	-	6	-	5	-	7	-	5	-	3	-
Malignant neoplasm of uterus	-	15	-	-	-	-	-	-	-	-	-	-	-	-	-	3	-	2	-	6	-	3	-	1	-	-
Other malignant & lymphatic neoplasms	72	62	1	-	-	-	1	-	-	1	-	-	1	1	8	10	12	16	27	11	20	19	1	5	-	-
Leukaemia & Aleukaemia	1	3	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1	-	1	1	-	-	-	-	-
Diabetes	2	5	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1	-	1	1	2	-	-	-	-
Vascular lesions of nervous system	37	98	-	-	-	-	-	-	-	-	-	-	-	3	-	1	7	5	14	14	26	9	35	5	16	-
Coronary disease, angina	95	68	-	-	-	-	-	-	-	-	-	-	-	1	14	2	28	9	33	30	17	23	3	3	-	-
Hypertension with heart disease	20	20	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	2	8	5	11	10	-	3	-	-
Other heart diseases	50	93	-	-	-	-	-	-	-	1	-	1	-	1	2	2	5	5	10	21	23	40	7	23	-	-
Other circulatory diseases	22	29	-	-	-	-	-	-	-	-	-	-	-	3	-	2	3	4	3	10	6	-	12	3	5	-
Influenza	9	10	-	-	-	-	-	-	-	-	-	-	1	-	-	1	-	2	1	-	4	6	3	-	1	-
Pneumonia	35	44	2	2	-	1	-	-	-	-	-	-	-	2	2	2	3	6	1	13	15	9	15	1	5	-
Bronchitis	72	60	-	-	-	-	-	-	-	-	-	-	-	-	2	4	2	12	9	37	14	16	24	3	9	-
Other diseases of respiratory system	4	3	1	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	1	1	1	2	-	-	-
Ulcer of stomach & duodenum	14	6	-	-	-	-	-	-	-	-	-	-	-	-	-	2	-	1	-	6	3	4	3	1	-	-
Gastritis, enteritis & diarrhoea	5	7	1	-	-	-	-	-	-	-	-	-	-	1	-	-	-	1	2	5	-	1	1	-	-	-
Nephritis & nephrosis	10	6	-	-	-	-	-	-	-	-	-	-	-	2	-	3	3	2	1	1	1	2	1	-	-	-
Hyperplasia of prostate	17	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	11	-	-	4	-	-
Pregnancy, childbirth & abortion	-	3	-	-	-	-	-	-	-	-	-	-	2	-	1	-	-	-	-	-	-	-	-	-	-	-
Congenital Malformations	7	5	6	4	-	1	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-
Other defined and ill defined diseases	48	62	19	7	-	1	1	-	-	-	1	-	-	1	1	5	3	5	6	8	5	8	7	24	5	3
Motor vehicle accidents	9	1	1	-	1	-	-	-	1	-	1	-	-	-	-	-	1	1	1	-	-	3	-	-	-	-
All other accidents	13	15	-	2	1	1	-	-	1	1	-	-	1	-	3	1	2	1	1	-	1	5	2	2	1	2
Suicide	14	4	-	-	-	-	-	-	-	-	-	-	1	-	1	-	4	1	1	1	6	1	1	1	-	-
Homicide & operations of war	1	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
TOTAL	659	688	32	16	2	5	3	-	2	1	5	1	6	5	28	24	63	56	129	85	202	183	152	231	35	81



# CANCER DEATHS 1953

Classification of Deaths showing Age and Sex distribution and System affected

	TOTAL		0-4		5-9		10-14		15-19		20-24		25-34		35-44		45-54		55-64		65-74		75-84		85 & up	
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
Buccal cavity and pharynx	4	2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1	1	1	2	-	-	-	-	-
Digestive Organs and Peritoneum	55	49	-	-	-	-	1	-	-	-	-	-	-	-	1	2	6	5	14	11	19	12	13	17	1	2
Respiratory system	58	16	-	-	-	-	-	-	-	-	-	-	-	-	8	2	6	3	29	3	14	6	1	-	-	2
Breast and Genito-urinary system	19	56	-	-	-	-	-	-	-	-	-	-	-	-	3	-	10	3	11	9	14	7	12	-	6	
Other and unspecified sites	8	8	1	-	-	-	-	-	-	-	1	-	-	-	-	4	2	-	2	-	2	2	1	-	1	
Lymphatic & Haematopoietic Tissues	3	6	-	-	-	-	-	-	-	-	-	-	-	-	-	-	3	1	1	1	2	1	-	-	-	
TOTAL	147	137	1	-	-	-	1	-	-	-	1	-	-	-	9	7	17	24	48	29	45	36	24	30	1	11

Birth-rates, Death-rates, Analysis of Mortality and Case-rates  
for Certain Infectious Diseases in the year 1953 for Tottenham  
compared with the Registrar-General's provisional figures based on  
Quarterly Returns

	England and Wales	160 County Boroughs and Great Towns (including London)	160 Smaller Towns (Resident Population 25,000-50,000 at 1951 Census)	London Administrative County	Tottenham
Rates per 1,000 Home Population					
<b>BIRTHS</b>					
Live births	15.5	17.0	15.7	17.5	12.54(c)
Still births	0.35	0.43	0.34	0.38	0.35
	22.4(a)	24.8(a)	21.4(a)	21.0(a)	26.8(a)
<b>DEATHS</b>					
All causes	11.4	12.2	11.3	12.5	11.15(c)
Typhoid and paratyphoid	0.00	0.00	-	-	-
Whooping Cough	0.01	0.01	0.00	0.00	0.01
Diphtheria	0.00	0.00	0.00	-	-
Tuberculosis	0.20	0.24	0.19	0.24	0.21
Influenza	0.16	0.15	0.17	0.15	0.15
Smallpox	0.00	0.00	0.00	-	-
Acute poliomyelitis (including polioencephalitis)	0.01	0.01	0.01	0.01	0.02
Pneumonia	0.55	0.59	0.52	0.64	0.64
<b>NOTIFICATIONS (CORRECTED)</b>					
Typhoid fever	0.00	0.00	0.00	0.01	-
Paratyphoid fever	0.01	0.01	0.01	0.01	0.01
Meningococcal infection	0.03	0.04	0.03	0.03	-
Scarlet fever	1.39	1.50	1.44	1.02	1.73
Whooping Cough	3.58	3.72	3.38	3.30	2.89
Diphtheria	0.01	0.01	0.01	0.00	0.01
Erysipelas	0.14	0.14	0.13	0.12	0.15
Smallpox	0.00	0.00	0.00	-	-
Measles	12.36	11.27	12.32	8.09	8.21
Pneumonia	0.84	0.92	0.76	0.73	1.02
Acute poliomyelitis (including polioencephalitis)					
Paralytic	0.07	0.06	0.06	0.07	0.05
Non-paralytic	0.04	0.03	0.04	0.03	0.04
Food poisoning	0.24	0.25	0.24	0.38	0.24
Puerperal Pyrexia	18.23(a)	24.33(a)	12.46(a)	28.61(a)	0.01(a)
Rates per 1,000 Live Births					
<b>DEATHS</b>					
All causes under 1 year of age	26.8(b)	30.8	24.3	24.8	26.2

(a) Per 1,000 Total (Live and Still) Births

(b) Per 1,000 related Live Births

(c) Corrected by comparability factors

Area Medical Officer

and Borough School Medical Officer.





## MEMBERS OF LOCAL AREA HEALTH COMMITTEE

(TOTTENHAM AND HORNSEY) AS AT

31st DECEMBER, 1953

## APPENDIX

## MEMBERS OF MIDDLESEX COUNTY COUNCIL

County Alderman Mrs. E.M. St. P. Group

County Councillor Mr. M.V. Barnes

County Councillor Mr. R.A. Clarke

County Councillor Mr. W. East

County Councillor Mr. W. East

County Councillor Mrs. M.E. Small

## COUNTY COUNCIL OF MIDDLESEX

## AREA HEALTH COMMITTEE

(HORNSEY AND TOTTENHAM)

Councillor Miss D.R. Anderson (Chairman)

Councillor Miss A.G. Bell

Councillor Miss J. Richardson

Councillor Mr. C.V. Tipping

Councillor Miss M. Toyn

## REPORT OF THE

## AREA MEDICAL OFFICER

## FOR THE YEAR

1953

## MEMBER NOMINATED BY APPROPRIATE HOSPITAL MANAGEMENT COMMITTEE

Mrs. R.M. Fry

## PERSONS WHO MAY ALSO ATTEND IN AN ADVISORY CAPACITY

Miss V. Eady (Royal College of Midwives)

Dr. E.C. Girling

Dr. I.E. Fox (County) (Middlesex Local Medical Committee)

Dr. R.V.C. Howells (Middlesex Local Dental Committee)

Mr. L. Hayward (Middlesex Local Health Committee)

G. HAMILTON HOGBEN

Area Medical Officer

and Borough School Medical Officer.



APPENDIX

COUNTY COUNCIL OF WILTSHIRE

AREA HEALTH COMMITTEE

(BORNESY AND TOTTENHAM)

REPORT OF THE

AREA MEDICAL OFFICER

FOR THE YEAR

1953

G. HAMILTON HOGGREN

Area Medical Officer  
and Borough School Medical Officer

MEMBERS OF LOCAL AREA HEALTH COMMITTEE  
(TOTTENHAM AND HORNSEY) AS AT  
31st DECEMBER, 1953

MEMBERS OF MIDDLESEX COUNTY COUNCIL

County Alderman Mrs. K.M. St. P. Crump  
County Councillor Mr. M.W. Burns  
County Councillor Mr. R.A. Clarke  
County Councillor Mr. W. East  
County Councillor Mrs. H.C. Norman, J.P.  
County Councillor Mrs. M.E. Soall

MEMBERS OF HORNSEY BOROUGH COUNCIL

Councillor Miss O.R. Anderson (Chairman)  
Councillor Miss A.G. Bell  
Councillor Miss J. Richardson  
Councillor Mr. C.V. Tipping  
Councillor Miss M. Toyne

MEMBERS OF TOTTENHAM BOROUGH COUNCIL

Alderman Mr. A. Reed, A.C.I.I., J.P.  
Alderman Mrs. A.F. Remington (Vice-Chairman)  
Councillor Mr. H. Langer  
Councillor Mr. P.H. Roberts  
Councillor Mr. G.W. Rowley  
Councillor Mr. E.C. Smith

MEMBER NOMINATED BY APPROPRIATE HOSPITAL MANAGEMENT COMMITTEE

Mrs. R.M. Fry

PERSONS WHO MAY ALSO ATTEND IN AN ADVISORY CAPACITY

Miss V. Eady (Royal College of Midwives)  
Dr. E.C. Girling (Middlesex Local Medical Committee)  
Dr. I.S. Fox (Deputy)  
Mr. R.W.D. Brownlie (Middlesex Local Dental Committee)  
Mr. L. Hayward (Middlesex Local Pharmaceutical Committee)



# CARE OF MOTHERS AND YOUNG CHILDREN

## (SECTION 22)

### Care of the Expectant Mother

The supervision and care of the expectant mother in this district is a comprehensive service provided in local centres and is designed to ensure that each mother is fit and equal to contend with her confinement as a normal function of her family life.

Difficulties and disorders are dealt with as soon as possible so as to avoid unnecessary strain and anxiety.

Arrangements are made for regular examination (more frequently towards the end of the pregnancy) to ensure the physical well-being of the mother and child.

The Service also provides means for securing a hospital bed or the services of a domiciliary midwife as required. Arrangement for either of these is made during the mother's attendance at the ante-natal clinic and so save her time and travelling.

Special transport is arranged for those who have some disability which prevents them from travelling by ordinary means.

We welcome the practice of some general medical practitioners who send their patients to these clinics for examinations and other services.

The average attendance at ante-natal clinics continued the decline that was noted in the annual report for 1952, as will be seen from the following table. In spite of this progressive decline, it is apparent, from the most recently published statistics, that this Area does not compare unfavourably with other parts of the County.

TABLE 1

Ante-natal Clinics	No. of sessions held	No. of new cases		Total attendances		Average attendances per session
		A. N.	P. N.	A. N.	P. N.	
Burgoyne Road	49	139	101	1,044	116	23.7
Church Road	72	127	86	1,104	90	16.6
Fortis Green	99	232	168	1,974	183	21.8
Hornsey Town Hall	191	280	171	2,374	194	13.4
Mildura Court	64	175	77	1,302	83	21.6
Stroud Green	52	121	74	842	81	17.7
The Chestnuts	252	511	250	3,212	258	13.8
Lordship Lane	202	343	197	2,383	199	12.8
Park Lane	104	356	202	1,498	202	16.3
Totals 1953	1,085	2,284	1,326	15,733	1,406	15.8
1952	1,078	2,461	1,333	17,063	1,377	17.1
1951	1,038	2,439	1,330	16,999	1,332	17.7

The North East Metropolitan Regional Hospital Board has continued to provide consultant obstetricians at the Tottenham clinics and, as from 2nd December, 1953, appointed Miss Margaret Salmond, M.B.E., M.D., F.R.C.S., F.R.C.O.G., to undertake two sessions a week at the Park Lane Medical Centre.

#### Midwives Ante-natal Clinics

At the beginning of the year a separate midwife's clinic was started at the Mildura Court Centre, and the following table shows the attendances made at all clinics during the year:-

TABLE 1A

Midwives Clinics	No. of sessions held	No. of new cases	Total No. of attendances	Average attendance per session
Burgoyne Road	42	2	163	3.9
Fortis Green	43	4	189	4.4
Mildura Court	47	1	168	3.6
Stroud Green	49	4	260	5.3
Park Lane	153	-	1,243	8.1
Totals	334	11	2,023	6.1

#### Blood Tests

At three of the ante-natal clinics the mothers attending have their blood tested for haemoglobin as anaemia in an expectant mother is a serious disability for both mother and child. The mother is tested on her first visit and thereafter as often as may be required. In this way the state of her blood is kept under review and where iron deficiency is found, iron in the most suitable form for the patient is given.

During the year the following results were obtained:-

Centre	No. of women attended	No. of tests made	Results obtained	
			Percentage Haemoglobin	Percentage of women attended
Church Road	195	276	90-100	1.5
The Chestnuts	509	1,377	85- 90	13.0
Lordship Lane	346	968	75- 85	70.0
Totals	1,050	2,621	60- 75	14.0
			50- 60	1.5

In addition to haemoglobin estimation all expectant mothers attending ante-natal clinics have a specimen of blood taken for Wasserman reaction, blood grouping and determination of Rhesus factor.



### Mothercraft Classes and Relaxation Exercises

These classes have been extended to include another Hornsey centre, making seven in the Area at which these services are given. Many letters of appreciation have been received from mothers who have received instruction from the health visitors who carry out this educative work.

TABLE 2

Clinic	No. of sessions held	No. of new cases	Total No. of attendances	Average attendances per session
Burgoyne Road	26	13	158	6.1
Church Road	49	39	249	5.1
Fortis Green	46	81	573	12.5
Hornsey Town Hall	48	75	294	6.1
The Chestnuts	52	96	466	9.0
Lordship Lane	50	84	455	9.1
Park Lane	52	46	457	8.8
Totals	323	434	2,652	8.2

### Post-natal Care

A post-natal appointment for examination is given to each mother who has received ante-natal care at the local centre. These appointments are the occasions on which the mother is informed of her physical condition following confinement and of what treatment should be undertaken in certain cases to ensure her return to full health.

### Child Welfare and School Health Services Centres

The following twelve centres serve the needs of the Area:-

Lordship Lane, N. 17.

Park Lane, N. 17.

The Chestnuts, St. Anns Road, N. 15.

Cornwall Road, N. 15.

At rear of Hornsey Town Hall, N. 8.

Burgoyne Road, N. 4.

Church Road, Highgate, N. 6.

162 Stroud Green Road, N. 4.

Mildura Court, N. 8.

Fortis Green, N. 10.

At rear of Tottenham Town Hall, N. 15.

41 Coldfall Avenue, N. 10.

Infants and young children attend following the health visitor's initial visit to the home following the notification of birth. Supervision of physical and mental health is given by health visitors. Medical officers

experienced in child care attend on a sessional basis. Behaviour problems, feeding and other matters are attended to in reasonable privacy and arrangements are made for immunisation and vaccination to be carried out.

Toddler Sessions are now operating in all Welfare Centres in the Area.

The periodic examination of children in the 2 - 5 age group ensures that children who are not otherwise regularly examined receive a medical overhaul. By this means defects are detected early and arrangements made for correction or treatment. Signs of maladjustments are discussed with the parents in order to restore the child to a mental and physical condition of well-being.

All the children attending the Toddler clinic at Mildura Court have been tested with tuberculin jelly.

Out of 322 children, two had been infected with tubercle.

The source of infection of these two children was traced to a person who was already under treatment at the Chest Clinic.

This small survey shows a very satisfactory state as far as tuberculosis in young children can be assessed.

		Feb. 1st 1952 - Jan. 31st 1953						Feb. 1st 1953 - Jan. 31st 1954					
		Under 2	2-3	3-4	4-5	Over 5	Total	Under 2	2-3	3-4	4-5	Over 5	Total
BOYS	Negative	19	58	51	53	3	184	11	53	58	36	2	160
	Positive	0	1	1	1	0	3	0	1	0	0	0	1
	Defaulters	0	4	0	2	0	6	1	4	1	2	0	8
	Totals	19	63	52	56	3	193	12	58	59	38	2	169
GIRLS	Negative	10	67	48	48	5	178	16	49	55	29	1	149
	Positive	0	1	2	0	0	3	0	0	1	0	0	1
	Defaulters	0	0	0	0	0	0	0	1	1	1	0	3
	Totals	10	68	50	48	5	181	16	50	57	30	1	153



TABLE 3

Name of Centre	No. of sessions held	No. of first attendances under 1 year	No. of attendances			Total attendances	No. of cases seen by M.O.	Average attendance per session
			Under 1 year	Over 1 but under 2 years	Over 2 but under 5 years			
<b>(i) <u>Infant Welfare Sessions</u></b>								
Burgoyne Road	148	210	3,828	856	154	4,838	1,245	32.7
Church Road	152	190	2,990	770	339	4,099	1,742	26.9
Fortis Green	197	261	3,997	923	341	5,261	1,665	26.7
Hornsey Town Hall	202	358	5,068	1,139	754	6,961	3,232	34.5
Mildura Court	102	202	3,567	974	447	4,988	1,692	48.9
Stroud Green	104	196	3,016	511	316	3,843	909	36.9
The Chestnuts	255	558	7,296	1,158	408	8,862	2,702	34.8
Lordship Lane	258	438	6,118	1,244	389	7,751	1,672	30.4
Park Lane	204	356	6,333	1,070	403	7,806	1,585	38.2
Total (i)	1,622	2,769	42,213	8,645	3,551	54,409	16,444	33.5
<b>(ii) <u>Toddler Sessions</u></b>								
Burgoyne Road	28	-	-	-	531	531	531	19.0
Church Road	47	-	-	-	458	458	441	9.7
Fortis Green	24	-	-	-	357	357	357	14.4
Hornsey Town Hall	52	-	-	-	637	637	637	12.3
Mildura Court	50	-	-	-	765	765	640	15.3
Stroud Green	23	-	-	-	313	313	312	13.6
The Chestnuts	52	-	-	-	736	736	736	14.2
Lordship Lane	52	-	-	-	807	807	807	15.5
Park Lane	101	-	-	-	804	804	778	8.0
Total (ii)	429	-	-	-	5,408	5,408	5,239	12.6
Total (i) and (ii)	2,051	2,769	42,213	8,645	8,959	59,817	21,683	29.2

#### Daily Guardian Scheme

This scheme has been operating in this Area for six years and has provided a very useful service for parents who are in need of assistance in finding a daily minder for one or two children under five years of age.

Certain safeguards for the protection of the children are imposed on Guardians undertaking this work. Health visitors are responsible for the approval of Guardians for registration and for visiting children in their care.

In order that both parents and Daily Guardians shall be aware of their responsibilities under the scheme, written information is given to each so that they are mutually aware of their obligations. At the end of 1953 there were 133 daily guardians on the register of whom 68 were minding 79 children. The number of individual children minded during the year was 174 and they were in the care of guardians for 17,559 days. These figures compare with 143 and 18,876 respectively for 1952.

## Day Nurseries

The following table shows the number of children on the registers at the end of the year and the attendances made during the year. Comparative figures for 1951 and 1952 are also given.

TABLE 4

Name of Day Nursery	No. of approved places		No. of children on register at end of the year		Total No. of attendances			Average daily attendance
	Under 2	2 - 5	Under 2	2 - 5	Under 2	2 - 5	Total	
Ladywell	24	50	17	40	2,785	5,256	8,041	31.5
Red Gables	23	23	10	12	2,650	3,965	6,615	26.0
Stonecroft	15	45	8	8	1,717	4,806	6,523	25.6
Lordship Lane	10	30	1	5	1,965	4,707	6,672	26.2
Park Lane	20	30	14	30	2,540	4,369	6,909	27.1
Plevna	20	30	16	36	3,013	6,938	9,951	39.0
Totals 1953	112	208	66	131	14,670	30,041	44,711	175.4
Totals 1952	112	208	83	153	20,521	46,166	66,687	260.0
Totals 1951	112	208	114	232	21,867	45,479	67,346	262.0

## Priority Dental Service

During the year the dental officers were able to devote approximately 15% of their time to the priority dental service. This is an improvement over previous years as will be seen from the following table. With the development of the dental service the percentage should rise to 20%, which is accepted as the proportion of the whole dental service which should be devoted to the priority classes, i.e. expectant and nursing mothers and children under five years of age. A new dental clinic was completed at the end of the year and we were fortunate in obtaining the services on a newly qualified dental officer for it. A second new dental clinic has since been completed, but at the time of writing this report the services of another dental officer have not been obtained.



TABLE 5

	1953		1952		1951	
	Expectant and Nursing Mothers	Children under 5	Expectant and Nursing Mothers	Children under 5	Expectant and Nursing Mothers	Children under 5
No. examined by dental officer	388	833	226	1,127	43	879
No. referred for treatment	349	750	211	992	42	795
New cases commenced treatment	298	745	179	876	37	715
Cases made dentally fit	113	380	77	663	21	462
Forms of dental treatment provided:-						
Teeth extracted	478	610	200	879	53	893
Anaesthetics:-						
(a) Local	126	148	64	192	10	196
(b) General	85	217	40	308	9	275
No. of fillings	637	1,323	234	1,562	35	1,005
No. of root fillings	2	-	-	-	1	-
No. of inlays	1	1	2	-	-	-
Scalings and gum treatment	156	-	72	-	16	-
Silver nitrate treatment	-	791	-	1,165	-	944
Dressings	141	547	81	752	6	687
Other operations	20	207	11	106	1	94
No. of Radiographs:-						
(a) at County Council clinics	18	3	5	2	-	2
(b) at hospital	-	-	2	-	-	-
Denture dressings	168	-	73	-	55	-
Dentures fitted:-						
(a) full	14	-	5	-	6	-
(b) partial	45	-	14	-	8	-
No. of attendances	1,133	1,827	468	2,114	104	1,663
No. of appointments not kept	321	326	170	306	16	230
No. of ½ days devoted to treatment	365		300		212	

## MIDWIFERY SERVICE (SECTION 23)

The number of home confinements shows a slight increase over 1952, but the expected increase in bookings due to the larger financial benefits now available has not yet developed. As from 26th October, 1953 maternity cash benefits were increased and changes were made in the conditions under which they are paid, with the object of encouraging mothers to have their babies at home instead of in hospital.

One midwife retired during the year and this reduced the number employed in the Area to twelve. Seven midwives are teachers of district midwifery approved by the Central Midwives Board. During the year nineteen pupil midwives were given the three months training required before taking their examinations.

Relief of pain in childbirth has received much attention. All the midwives are conscious of their responsibility in this matter, and with the new drugs and gas and air analgesia the results have been good. With more knowledge of the mind of the expectant mother greater care is taken to help



her to get the right psychological approach to her confinement. With this end in view the mothercraft classes teach simple breathing exercises, relaxation, and the use of the gas and air apparatus, all of which contribute to the relief of pain.

Co-operation with other branches of the health service is good, especially with the general practitioners and the ambulance service. There is a free interchange of information between the midwives and health visitors.

The following table shows details of the cases attended by the Area domiciliary midwives:-

TABLE 6

No. of deliveries attended	572
No. of visits made	10,327
No. of hospital confinements discharged before 14th day	29
No. of visits made	276
No. of cases in which medical aid was summoned	158
No. of cases in which gas and air analgesia was administered	405
No. of cases in which pethidine was administered	196

#### HEALTH VISITING (SECTION 24)

The health visitor/school nurse is the all-purpose medico-social worker who visits the family in health and sickness but her main duty is to advise and help all persons on her district to promote and maintain good health, to prevent mental and physical disorders and anxieties which often precede breakdown. She plays a useful part in after-care by visiting the home prior to a patient's return from hospital (when this is known) to make arrangements for reception and home-care. Her work in advising parents on the feeding and care of children in Infant Welfare Centres is well known as are her duties in the ante-natal clinics and school health service.

The health visitor as the family confidante visits all the homes on her district and this is still the most important part of her work.

Practical training of health visitor students in home visiting, duties in the Centres, health education, writing of reports, maintenance of records, has been given to students from Middlesex, Battersea Polytechnic and the Royal College of Nursing. The shortage of health visiting staff and the increasing demand for her services is a matter of some concern and on this account more selective visiting has taken the place of routine visiting and other measures have been taken to relieve the health visitor of some clerical work. Some school nursing duties have also been delegated to school and clinic nurses.



TABLE 7

No. of visits paid by Health Visitors working in the Area:-				1953	1952
Expectant Mothers ... ..	...	...	First Visits	2,013	2,077
			Total Visits	3,278	3,332
Children under 1 year of age ... ..	...	...	First Visits	3,227	3,204
			Total Visits	14,448	15,241
Children age 1 - 2 ... ..	...	...	Total Visits	8,343	20,804
			Total Visits	14,522	
Tuberculous households ... ..	...	...	Total Visits	3	
Other cases ... ..	...	Total Visits as Health Visitor		4,478	4,010
		Total Visits as School Nurse		1,326	3,417

### Co-operation with General Medical Practitioners

The extent to which co-operation between general practitioners and health visitors exists varies considerably but full co-operation can only be achieved by goodwill on both sides. This is developing in this Area.

A circular letter and map showing the position of local clinics was sent to each general practitioner giving the address and telephone number of the health visitor of the district and the time that she is available to receive calls.

Suggestions were also made as to the means by which health visitors can assist general practitioners.

Discussions have also taken place at the liaison committee of the local branch of the British Medical Association.

### Co-operation with hospitals

There is excellent co-operation between the Area Health Department and neighbouring hospitals and their personnel. A health visitor regularly attends the paediatric department of the Prince of Wales's Hospital and has personal contacts with consultants and almoners so that there is free exchange of information between the hospital and health visiting services. Information and enquiries are also received daily by telephone concerning patients living in this Area from hospitals further afield and 248 written health visitors reports were sent out to these and other bodies during the year.

### Health Education

A very important part of the health visitor/school nurse's work is teaching parentcraft and home-making to individuals in their own homes, at welfare centres and schools.



Class teaching in schools (particularly secondary modern girls schools) in the Area has increased during the last few years and in 1953 no less than one hundred talks were given. The aim is that as many girls as possible shall receive a course of lectures, discussions and demonstrations on mothercraft before they leave school. A few of the talks were given to mixed school audiences on common health problems.

Several members of the health visiting staff also gave talks to such local organisations as Old People's Welfare Associations, The Women's Branch of the British Legion, British Red Cross Society, Girls Life Brigade, Church Societies, Student Nursery Nurses and the Training Home for Women Delinquents.

#### Lectures to Student Nurses at the Prince of Wales's General Hospital

The General Nursing Council's revised syllabus of training requires a study of social and preventive medicine to fit the nurse in training for her place in the National Health Service.

During 1953 four lectures were given by the Superintendent Health Visitor in this connection at the request of the Prince of Wales's Hospital. To satisfy a later request two lectures were given to Ward Sisters, and one other to nurses in the Preliminary Training School.

#### Surveys and Researches

Health visitors have assisted government departments, national bodies, health and education authorities by undertaking special investigations for the following purposes:-

Enquiry into Public Opinion on Health (T.B.)

Ministry Enquiry into Virus Infection.

Enquiry into Prematurity and Neo-natal Deaths.

National Survey on the Health and Development of Children.

Tuberculosis Vaccine Trials.

#### HOME NURSING (SECTION 25)

The home nursing service has continued on the same lines as in previous years. The winter of 1953 was very mild with few fogs and as a consequence the service did not encounter the overwhelming demand which usually occurs during November and December.

General practitioners and hospitals use the service very fully. The number of requests for the administration of antibiotics increases year by



year. A Ministry of Health circular has laid down the method to be used when administering streptomycin on account of the tendency of staff to develop a reaction after handling the drug, usually in the form of dermatitis. No nurse has suffered any reaction in this Area.

Another aspect of the home nursing service which is becoming more familiar is the nursing at home of the elderly ill patient who for one reason or another cannot be admitted to hospital. These patients are a constant source of anxiety as they are often in a very neglected state and living alone, and all the resources of the service do not seem adequately to meet their needs.

Very full use is made of the services of the British Red Cross Society and the Old People's Welfare Committees and all requests are met with promptness and courtesy.

The following table gives details of the cases attended by home nurses during the year. It is set out in the form now required by the Ministry of Health and direct comparison with previous years is not possible.

TABLE 8

Type of Case	No. of new cases attended by home nurse during year			No. of cases remaining on register at end of year			No. of visits paid by home nurses during year
	M	F	Total	M	F	Total	
Medical	842	1,537	2,379	148	316	464	55,727
Surgical	193	328	521	21	29	50	10,348
Infectious diseases	1	2	3	-	-	-	17
Tuberculosis	86	56	142	13	10	23	5,056
Maternal complications	-	18	18	-	1	1	179
Others	-	4	4	-	-	-	125
Totals	1,122	1,945	3,067	182	356	538	71,452

## VACCINATION AND IMMUNISATION (SECTION 26)

### Vaccination

The scheme to provide for the vaccination of infants by medical officers at the centres has produced dramatic results and a better percentage of infant vaccination was achieved last year than when vaccination was compulsory. In 1947 the percentage of vaccinated children under 1 year of age was 41%. In 1949 the figure had fallen to 18% and last year the percentage for the Area was no less than 51%. This indicates that the intensive education of parents on the importance of vaccination, which has been a routine function of the medical and nursing staff of the area health service, is bearing fruit and is greatly aided by the facilities now available at the clinics.



The following table records the number of persons known to have been vaccinated or re-vaccinated during 1953, by general practitioners and clinic medical officers.

TABLE 9

	Under 1 year	1 year	2 - 4 years	5 - 14 years	15 years and over	Total
No. of persons primarily vaccinated	1,594	64	43	34	109	1,844
No. of persons re-vaccinated	-	1	7	50	321	490

#### Immunisation against Diphtheria and Whooping Cough

As mentioned in my last annual report it was decided towards the end of 1952 that general use should be made of the new combined diphtheria pertussis vaccine in preference to the previous policy of providing immunisation against diphtheria and whooping cough in two separate courses of injections. The new vaccine has the advantage of reducing the number of injections required from five or six to only three.

The success of previous efforts to secure that all children were immunised against diphtheria can be measured by the fact that this disease has been virtually eliminated, but as was pointed out by the Minister of Health early in 1953 the continuance of this happy state of affairs is conditional upon the maintenance of an adequate level of immunisation. To ensure that this is done the Minister suggested that the aim of all authorities should be to secure that at least 75% of babies are immunised before the end of the first year of life.

In order to achieve this it was considered necessary in May 1953 to implement a new policy in the Area with the intention of combatting any tendency on the part of parents to the complacent attitude that it was no longer necessary to have their children immunised against diphtheria.

The following is the outline of the scheme which was then put into operation and which is continuing in use.

#### Primary Immunisation

1. Doctors and health visitors are asked to make a particular point of enquiring of all mothers attending welfare centres whether their children have been immunised, and as more than 85% of children born attend in their first year of life, the aim must be to secure the immunisation of most of this number.
2. Immunisation sessions are held at least monthly at all welfare centres (twice a month at the larger ones).



3. Immunisation sessions are on an appointment basis, although no child who attends without an appointment is refused immunisation. The appointment system has been devised to operate as follows:-

- (a) Appointments to commence a course of injections are sent out by reference to the birth register as soon as a child reaches the age of six months.
- (b) Non-attenders are given a second appointment.
- (c) Failure to attend at the second opportunity is followed up by the health visitor.
- (d) Children who do not return for second or third injections are sent further appointments and followed up by the health visitor to ensure completion of the course.
- (e) All completed courses are noted against the child's name in the birth register and if there is no entry by the time a child is a year old the name is notified to the health visitor for further follow-up.

4. Graphs and statistics are prepared at regular intervals and widely distributed to foster a spirit of competition between different centres and health visitors.

#### Boosting Injections

1. The aim is to secure that all children receive a boosting injection in their first year at a primary school. Letters to parents of all new entrants are distributed through the schools.
2. When the necessary consents have been received in response to these letters, sessions are arranged at the schools when a doctor attends to carry out all immunisations necessary.

It became apparent during the year, from information supplied by health visitors, that a number of children were leaving the Area before reaching the age of six months. As this factor, if significant, would tend to explain the difficulty in achieving the Ministry of Health target of 75% immunised children under one year of age, a fuller investigation was carried out. It was found that for the Area as a whole approximately 10% of the children born between October, 1952, and July, 1953, moved out of the Area before they were six months old. The health visitor's district served by the Fortis Green Centre showed the greatest number of such removals, no less than 20% of such children having left the district. This migration is compensated to some extent, by movements into the Area. Some of these children are notified to us by the health authorities in whose areas they previously resided, while others are taken by their mothers to the infant welfare centres or are found

by the health visitors on their districts. There is no guarantee, however, that every unimmunised baby who comes to live in the Area is brought within the ambit of the above scheme, and to that extent the attainable immunisation percentage is reduced.

Notwithstanding this, the success of the local campaign may be judged from the following table which records immunisations carried out by area medical staff and general practitioners during 1953. 410 more children were primarily immunised and 1,258 more received reinforcing injections than in 1952.

TABLE 10

Age at date of immunisation	No. of children immunised			No. of children given re-inforcing injections	
	Diphtheria only	Combined Diphtheria & Whooping Cough	Whooping Cough only	Diphtheria only	Combined Diphtheria & Whooping Cough
Under One	253	1,093	62	-	-
One	268	647	313	-	-
Two	59	70	71	-	-
Three	33	45	43	6	2
Four	44	30	21	344	51
Five to Nine	98	19	17	2,025	62
Ten to Fourteen	7	-	-	40	1
Totals	762	1,904	527	2,415	116

#### PREVENTION OF ILLNESS, CARE AND AFTER CARE (SECTION 28)

##### Recuperative Holiday Homes

During the year area health staffs continued to be responsible, on behalf of the County Health Department, for dealing with applications for admission to recuperative holiday homes.

The following table shows the cases dealt with during the year:-

	<u>Applications received</u>	<u>Admissions recommended</u>
Adults	312	216
Children	17	13
	<u>329</u>	<u>229</u>



## DOMESTIC HELP SERVICE (SECTION 29)

The number of new cases provided with help during the year was 742 compared with 638 in 1952. The number of old cases for which help was continued from 1952 totalled 520 as compared with 605 for the previous year. The total number of cases, old and new, provided with help during the year was almost the same as the total for 1952. The number of cases being provided with help at the end of the year, however, indicates that the demand for the service is likely to increase in future.

The following table shows details of the cases served during the year:-

TABLE 11

Cases provided with help	No. of new cases provided with help	No. of old cases for which help was continued from 1952	Total No. of cases provided with help during year	Total No. of cases still being provided with help at end of year
Maternity (including expectant mothers)	123	2	125	10
Tuberculosis	47	46	93	58
Chronic Sick (including aged and infirm)	357	433	790	512
Others	215	39	254	38
Totals	742	520	1,262	618

## SCHOOL HEALTH SERVICE

The year 1953 has been a successful one for the School Health Service. The routine work has been carried out as in previous years and progress can be reported in several branches.

A considerable increase is noted in the number of children receiving a booster immunisation dose against diphtheria.

The dental services have expanded by completion of new accommodation at Park Lane and Cornwall Road. Also a much needed Child Guidance Centre has started work at Cornwall Road.

Progress envisaged during the coming year includes the establishment of a Spastic Unit at Vale Road Day Special School for Physically Handicapped Children, and the possible introduction of B.C.G. Vaccination against Tuberculosis for thirteen year olds.

## Routine Medical Inspection

The value of present day routine medical inspection depends on the ability of doctor and parent to establish a relationship when they can discuss



the child in an atmosphere undisturbed emotionally by any illness of the child. Ample time is most desirable and it may be true to say that the value of a routine medical inspection is in inverse proportion to the number of children seen at the session.

Discussion with parents and talks given to Parent-Teacher Associations suggest that most parents are very satisfied with the physical health of their children, but they are frequently worried by behaviour problems. The proportion of a doctor's time needed to deal with these problems is increasing and a knowledge of child psychology is of great value to the school doctor.

Routine medical inspections carried out in this Area confirm that the children are healthy. From time to time attempts are made to assess children's health in statistical form. Statistics relating to child health can be divided into two types, figures based on factual diagnosis and figures based on the opinion of the examining medical officer. The factual group of statistics include figures relating to visual defects, squint, enlarged adenoids and measurement of intelligence. Such statistics may be usefully recorded and compared from place to place in differing periods of time. Statistics that are based on the opinion of the examining doctor should be accepted with reserve when recorded numerically unless a serious attempt has been made to standardise the opinions of the examining doctors. Such statistics include figures relating to enlargement of tonsils, flat feet, general condition or deviations in behaviour. Statistics gained from this latter source will show variations attributable more to the differing standards of the doctors concerned than to any fundamental difference in the children examined.

#### Hospital Child Health Departments

Once again I wish to pay tribute to the co-operation received by the School Health Service from the Children's Department at the Prince of Wales's General Hospital, Tottenham, under Dr. Ian Anderson, M.D.; M.R.C.P., Consultant Paediatrician, and for the opportunity of having the services of Dr. J. Nuttall-Horne, M.D.; M.R.C.P., Paediatric Registrar, in Tottenham, participating in the work of the local authority's clinics. We are also grateful for the opportunity given to a member of the area medical staff to attend as a clinical assistant in the children's department of the hospital for one session a week.

In Hornsey close co-operation has been made with the Child Health Department in Whittington Hospital under Dr. S. Yudkin, M.B.; M.R.C.P.; D.C.H.; the Consultant Paediatrician. During the year members of the area medical staff have accepted the opportunity to attend weekend post-graduate sessions in Dr. Yudkin's department, primarily arranged for general medical practitioners in the district.



## Rheumatism Supervisory Centre

The rheumatism supervisory scheme has now been in operation since August 1951 under the overall direction of Dr. I.M. Anderson, Consultant Paediatrician, Prince of Wales's Hospital, with the close co-operation of the local Public Health and Area Health Departments.

Children are referred to the clinic by general medical practitioners and through the School Health Service. A number of children are also admitted directly to the paediatric wards of the Prince of Wales's Hospital and St. Ann's General Hospital suffering from acute rheumatic fever and allied conditions. After discharge from hospital these patients attend the supervisory clinic.

The supervisory clinic sessions for follow-up are held on alternate Monday mornings in the Out-patients Department of the Prince of Wales's Hospital. The routine examinations are carried out by the paediatric registrar and an assistant area medical officer, assisted by a sister-in-charge and a clerk from the Area health office. Both first and subsequent cases are seen at each session. In the case of new patients a full history is taken and a complete clinical examination is carried out. The various forms are then completed and other investigations, where necessary, such as X-rays and electrocardiographs are performed. After these preliminary procedures the patients are seen by Dr. Anderson on Tuesday and Thursday mornings at the Prince of Wales's General Hospital. At this examination and from the results and reports previously obtained the diagnosis and clinical assessment are made and recommendations regarding future schooling are sent to the School Health authorities.

Following this initial assessment the patients are seen at regular intervals at the supervisory clinic by the paediatrician or local authority medical officer and should any significant change appear in the clinical condition they are again referred to Dr. Anderson for further discussion regarding treatment or special educational requirements.

It was originally intended to take steps to obtain a local order making acute rheumatism compulsorily notifiable, but following discussion with officers of the Ministry of Health it was decided during the year not to proceed with this application since the present scheme appeared to bring under the care of the supervisory centre all children in the Area needing treatment.



				Resident in Tottenham area	Resident in other areas
No. of New Patients	Male	...	...	13	12
	Female	...	...	14	6
Total				27	18
<u>Diagnosis</u>					
	Rheumatic Fever cases	...	...	12	9
	Rheumatic Fever recurrence	...	...	-	1
	Rheumatic Carditis	...	...	3	2
	Chorea alone	...	...	1	1
	Chorea with Carditis	...	...	1	-
	Congenital Cardiac Lesions	...	...	4	5
	Rheumatoid Arthritis	...	...	3	-
	Rheumatic Pains	...	...	1	-
	Other causes	...	...	2	-
<u>Disposal</u>					
	Admitted to hospital	...	...	19	13
	Deaths (Mongol infant with Congenital Heart Lesions)	...	...	1	-
	Transfers	...	...	-	1
	Discharges	...	...	2	2
<u>School Attendance</u>					
	Full School	...	...	21	7
	Restricted School	...	...	3	5
	Special School	...	...	-	1
	Pre-school	...	...	3	5

### The Handicapped Pupil

A Handicapped Pupil is by definition one who is in need of Special Educational Treatment. For the thinly populated rural areas the only possible provision for such children is residential schooling, but in the densely peopled Metropolitan Area residential provision is an expensive alternative to day special schools. In this Area there appears to be a sufficient number of children of junior school age to justify the establishment of a day school for partially deaf children, which unit could be attached to an ordinary school.

The proposal to provide facilities for the treatment of children suffering from cerebral palsy at the Vale Road Special School for Physically Handicapped Children will need extra accommodation for the larger number expected and for the expansion of therapy facilities following the appointment by the North East Metropolitan Regional Hospital Board of a Medical Director to the Spastic Unit. For the third year in succession disappointment must be expressed at the failure to obtain a full establishment of physiotherapy staff at this school.

### Ascertainment of Deaf and Partially Deaf Children

Following a gramophone audiometry survey into the incidence and causes of deafness in school children, carried out in this Area and two other Areas in the County, the County Council decided during the year to extend the scheme



in a modified way to the whole County. Under the new arrangement, this Area is grouped with Area 4 (Finchley and Hendon) and will share the services of an audiometrician and also equipment. Miss L. Harper, who carried out the initial survey in this Area, resigned in July, 1953, and was replaced by Mrs. E.M. Perry in September, 1953. Since the 1st December, 1953, Mrs. Perry has been working in Area 4, and while it is intended that her time will be shared equally between the two Areas, for the sake of convenience she will generally work for a fairly long continuous period in each Area.

#### Tottenham Day Special School for the Deaf

The work of the School for the Deaf which had accommodation for 80 children has been augmented by the establishment of a nursery class for 20 children under the age of five years. This nursery class was officially opened at the end of last year. The age range is now from three to sixteen years and the catchment from a wide area of Middlesex plus a few children by arrangement with neighbouring Counties. Children living at a distance from the School are provided with motor transport and a number of the senior children travel independently by public transport.

A waiting list of Middlesex children is kept for children awaiting admission to the School, and before names are added to the list there is full consultation on the medical and educational aspects between the staffs of the two departments. The teaching of the school is by oral method, i.e. the aim is to produce speech as opposed to communication by the manual method. Each year one or more pupils enter the entrance examination for Mary Hare Grammar School for Deaf Children at Newbury.

As in previous years I would again stress the importance of separating, as far as possible, the partially deaf from the totally deaf, the former at present being in the minority at the School. The question of establishing a class for the partially deaf in an ordinary school is mentioned earlier in this report.

#### Audiology Unit

To improve further the service for the treatment of children totally or partially deaf, the Committee has recommended, and the County Health Committee has approved in principle, a proposal to establish an Audiology Unit which will be concerned with the speech training of infants under two years of age, in co-operation with their parents.

Although the Education Committee provides special educational treatment for deaf and partially deaf children from the age of two years, early diagnosis and parental co-operation in speech training of even younger children are essential to obtaining the best results.



Delay in establishing such a unit has arisen because of the shortage of trained teachers in this work; but the matter is still under consideration by the Borough of Tottenham Education Committee.

### Orthopaedic Service

The orthopaedic clinics, as in previous years, are attended by the visiting orthopaedic specialists, appointed by the Regional Hospital Boards, as follows:-

Lordship Lane	Mr. E. Hambly, M.B., F.R.C.S.
Hornsey Town Hall	Mr. G. Rigby-Jones, M.C., M.B., F.R.C.S.

Children are referred to these clinics as a result of routine medical inspections in schools or from minor ailments clinics, and following the advice of the orthopaedic specialists arrangements are made for remedial exercises and physiotherapy.

### Chiropody Service

This useful medical auxiliary service has been continued for the priority classes of mothers and school children. Details of attendances and conditions treated are set out in a table in the Appendix to this report.

A chiropody service for aged persons is conducted on school health service premises at Lordship Lane by arrangement with the Tottenham Old People's Welfare Committee. It is known, however, that there is a long waiting list and once again the Committee's attention is drawn to the apparent need for expansion of this worth-while service.

### Speech Therapy

Work has continued without interruption during 1953. Through the co-operation of doctors and health visitors, about a quarter of the children referred during the year were under five years of age. This has given invaluable opportunities for re-assurance and guidance to mothers, even where the child is too young for direct treatment, as failure of their children's speech to measure up to normal standards is a major source of anxiety.

Early referral is of particular importance in cases of stammering. The older the child, the more lengthy becomes his treatment, on account of habit factors and the development of secondary symptoms. The problem of adequate testing for an intermittent difficulty, and the possibility of serious deterioration in even an initially slight case should be kept in mind.

Cerebral palsy cases at Vale Road School for Physically Handicapped Children have been receiving two to three treatments weekly.



## Orthoptic Treatment

During the year arrangements were made for children suffering from squint to attend for treatment at the clinic at Prince of Wales's General Hospital, all cases being recommended by the ophthalmologist at the Lordship Lane Clinic. This local service is proving more convenient for parents than having to make the journey to a central London hospital.

In Hornsey, four sessions a week have been held at the orthoptic clinic at Hornsey Town Hall, and such additional sessions as are needed from time to time.

## Child Guidance Centres

I am indebted to Dr. Cyril Phillips, Visiting Psychiatrist, for the following report on the year's work:-

The work at the Hornsey Child Guidance Centre has continued on well-established lines, but two important changes have occurred. A full Child Guidance Service for children of school age started for the first time in Tottenham at the beginning of December, 1953, and this enables the integrated handling of emotional and educational problems to be dealt with within our area instead of by an outside Clinic with its disadvantages of long travelling time and a somewhat unavoidable remoteness. During the three months the centre in Tottenham has been functioning, it has been pre-occupied with acute cases, mostly of behaviour problems, where exclusion from school was necessary or urgent placement required.

The treatment waiting list at Hornsey, where the lay therapist works six sessions weekly, is now well over a year and in Tottenham, where only four similar sessions are worked, it is reasonable to assume that the waiting period will be even longer. There has also been an enquiry from the Juvenile Court in Tottenham about seeing some of their cases for psychiatric diagnosis and possibly treatment, so that at the time of review it seems that the moderately ill and disturbed children, or the minor cases, for which so much can be done with relatively little effort, might well be crowded out.

The second of the two changes concerns the children aged two to five years, that is, pre-school age group. While awaiting for the Tottenham Centre to begin functioning, the Psychiatrists' two available sessions were spent semi-officially in seeing children of these ages together with the mothers for advice and treatment. In this project, which was somewhat experimental, and which lasted a year and had the interested co-operation of Health Visitors and School Medical Officers, a great deal was accomplished. It was found that these very young



children and their mothers responded extremely well and in a much shorter time than either children of an older age or parents seen on their own. There is no doubt that the mother of a very young child has far less rigidity in her personality and is more able to make changes because of her maternal feelings than at any other time in her life. Therefore, psychiatric work with this age group is possibly the most valuable that can be done from the point of view of public health and preventive medicine, particularly as modern scientific work emphasises that these years are the important formative years for the child's personality. It would seem, therefore, from the economic point of view, that work of this nature produces a far better return for the expenditure involved than any other in the psychiatric field. Unhappily, only an insignificant number of pre-school children can be seen in the ordinary way at the Hornsey and Tottenham centres and it must be said that the lack of psychiatric help readily available for them is a most serious defect in the present service.

#### Tuberculosis in School Children

During the past year an attempt has been made to devise a plan for epidemiological action when a case of tuberculosis is discovered in a school.

Notified cases are classified as infectious or non-infectious. If the case is infectious and the contacts are over the age of 14 years, a chest X-ray is advised. If the case is infectious and the contacts are under 14 years, a patch test is given and if the result is positive an X-ray is advised together with a search for undiagnosed infectious home contacts; should the patch test be negative no further action is taken.

When a case of non-infectious tuberculosis is discovered in a school child, the source of infection is sought in the child's own family, but if two or more children attending the same school are notified as tuberculous or if no infecting contact is found at home, arrangements are made for epidemiological investigation of the school, as if an infectious case had been notified.

The following epidemiological investigations were carried out during 1953:-

##### Tollington Grammar School

389 boys and 24 staff were X-rayed following the discovery of a case of open tuberculosis in a 17 year old boy attending the school. As a result of the X-rays one boy is under observation at the Chest Clinic though he is not a notifiable case of tuberculosis. It is unlikely that this boy's infection was acquired in a school because two older brothers are suffering from the disease.



### Tottenham Grammar School

Following a diagnosis of tuberculosis in a master at the school, 533 boys and 23 staff attended for X-ray. As a result, one inactive case of primary tuberculosis was found and two boys are being kept under observation at the Chest Clinic.

### Rowland Hill Secondary Modern School

A patch test was carried out on 18 classmates of a boy who was found to be suffering from pulmonary tuberculosis of a type not regarded as infectious. Two of the boys were positive to patch test and a subsequent chest X-ray of these two boys showed no abnormality.

### Down Lane Junior School

Following a report that a teacher had been admitted to hospital with pulmonary tuberculosis, patch testing with Evans' modified Vollmer and Goldberger Method was carried out on 255 children aged between seven and eleven years.

The result of the patch test showed 239 children negative and 16 children positive. The 16 'patch positives' were scattered in different classes in the school and therefore it was considered improbable that they had derived their infection from a common source. Further enquiry revealed that four of the children had experienced home contact with tuberculosis infection.

An attempt was made to compare the life history of the twelve unexplained 'patch positives' with twelve patch negative controls. The homes of both series were visited by a health visitor who asked the mother of each child 'How many weeks has you child spent in hospital during his life?'. The answers are tabulated below and the result suggests that a history of admission to hospital for any reason is a factor in the conversion to tuberculin sensitivity.

Estimated number of weeks stay in hospital	
12 patch positives	12 patch negatives controls
0	0
0	0
0	0
0	0
$\frac{1}{2}$	0
2	0
2	0
4	0
4	0
12	0
39	8½
42	10

### Statistical Information

Statistics relating to the work of the school health service during 1953, are contained in the Appendix to this Report.

SCHOOL HEALTH SERVICE

THE YEAR ENDED  
31st DECEMBER, 1953



## SCHOOL HEALTH SERVICE STATISTICS FOR 1953

TABLE 12 - PERIODIC MEDICAL INSPECTION

Periodic Medical Inspections				Other Periodic Inspections	Other Inspections	
Entrants	Second Age Group	Third Age Group	Total		Special Inspections	Re-inspections
3,903	3,116	2,569	9,588	4,457	5,908	5,722

TABLE 13 - CLASSIFICATION OF THE GENERAL CONDITION OF PUPILS

Age Groups	No. of pupils inspected	A (Good)		B (Fair)		C (Poor)	
		No.	%	No.	%	No.	%
Entrants	3,903	1,486	38.1	2,396	61.4	21	0.5
Second Age Group	3,116	1,244	39.9	1,841	59.1	31	1.0
Third Age Group	2,569	903	35.2	1,635	63.6	31	1.2
Other periodic inspections	4,457	1,525	34.2	2,878	64.6	54	1.2
Total	14,045	5,158	36.7	8,750	62.3	137	1.0

TABLE 14 - DEFECTS FOUND BY MEDICAL INSPECTION

Defect or Disease	Periodic Inspections		Special Inspections	
	No. of defects		No. of defects	
	1	2	1	2
Skin	86	73	736	7
Eyes	442	309	280	14
a. Vision	60	31	24	3
b. Squint	69	22	331	13
c. Other	38	61	78	7
Ears	27	91	33	3
a. Hearing	20	18	210	4
b. Otitis Media	172	447	192	10
c. Other	42	54	71	3
Nose and Throat	13	127	19	1
Speech	14	130	10	1
Cervical Glands	58	160	168	5
Heart and Circulation				
Lungs				
Developmental -				
a. Hernia	4	11	1	2
b. Other	3	81	14	1
Orthopaedic -				
a. Posture	81	175	21	1
b. Flat Foot	96	138	26	1
c. Other	227	237	243	8
Nervous System -				
a. Epilepsy	3	9	3	-
b. Other	6	20	30	5
Psychological -				
a. Development	-	33	63	15
b. Stability	7	66	31	11
Other	212	439	2,628	75

1. Requiring treatment

2. Requiring to be kept under observation but not requiring treatment.

TABLE 15 - PUPILS FOUND TO REQUIRE TREATMENT

Number of individual pupils found at periodic medical inspection to require treatment (excluding dental disease and infestation with vermin):-

Group	For defective vision (excluding squint)	For any of the other conditions recorded	Total Individual Pupils
Entrants	15	341	350
Second Age Group	113	287	384
Third Age Group	134	138	264
Total (prescribed groups)	262	766	998
Other periodic inspections	180	400	564
Grand Total	442	1,166	1,562

TABLE 16 - MINOR AILMENTS

	Number of cases treated or under treatment during the year	
	By the County Council	Otherwise
<b>A. Diseases of the Skin (excluding uncleanness)</b>		
Ringworm - (i) Scalp ... ..	-	-
(ii) Body ... ..	6	-
Scabies ... ..	3	-
Impetigo ... ..	105	5
Other skin diseases ... ..	756	12
Total	870	17
<b>B. Other treatment given (not covered by tables 16A, 17, 18, 19 and 20).</b>		
(a) Miscellaneous minor ailments	2,029	129
(b) Other (specify under one of following headings):-		
1. Nervous System ... ..	30	-
2. Digestive System ... ..	20	-
3. Respiratory System ... ..	44	185
4. Skeletal System ... ..	9	-
5. Circulatory System ... ..	2	10
6. Infectious Disease ... ..	9	11
7. Pyrexia of unknown origin ... ..	3	-
8. Ductless Glands ... ..	-	-
9. Psychogenic ... ..	22	10
10. Helminthiasis ... ..	18	-
11. Developmental ... ..	2	4
12. Excretory System ... ..	46	-
13. Debility ... ..	99	-
14. Colds and Rheumatism ... ..	75	-
15. Minor Injuries ... ..	691	-
16. Miscellaneous Surgical ... ..	64	-
Total	3,163	349



TABLE 17 - EYE DISEASES, DEFECTIVE VISION AND SQUINT

	Number of cases dealt with	
	By the Authority	Otherwise
External and other, excluding errors of refraction and squint	278	230
Errors of Refraction (including squint)	-	2,381
Total	278	2,611
Number of pupils for whom spectacles were:-		
(a) Prescribed	-	1,190 +
(b) Obtained	-	698 ø

+ Including cases dealt with under arrangements with the Supplementary Ophthalmic Services.

ø Known to be incomplete as glasses supplied direct to patients by National Health Service Opticians.

TABLE 18 - DISEASES AND DEFECTS OF EAR, NOSE AND THROAT

	Number of cases treated	
	By the Authority	Otherwise
Received operative treatment		
(a) for diseases of the ear	-	-
(b) for adenoids and chronic tonsillitis	-	84
(c) for other nose and throat conditions	-	2
Received other forms of treatment	565	448
Total	565	534

TABLE 19 - ORTHOPAEDIC AND POSTURAL DEFECTS

(a) Number treated as in-patients in hospitals	14	
	By the Authority	Otherwise
(b) Number treated	40	1,320

TABLE 20 - CHILD GUIDANCE AND SPEECH THERAPY

No. of pupils treated

	Child Guidance	Speech Therapy
(i) By the Authority	-	250
(ii) Otherwise	49	-

TABLE 21 - DENTAL INSPECTIONS AND TREATMENT

Age Groups	No. inspected (i)	No. found to require treatment (ii)	No. referred for treatment at the County Council's Dental Clinics (iii)
Under 5 +	104	65	65
5 - 16 and over	15,620	10,742	10,592
Specials	4,686	4,566	4,555
Total	20,410	15,373	15,212

+ Nursery Schools only

iv.	Number of pupils commenced treatment		10,188
iva.	Number of pupils treatment completed		7,606
v.	Number of attendances made by pupils for treatment		22,034
vi.	Number of appointments not kept		4,521
vii.	Number of half days devoted to	(a) Inspection	120
		(b) Treatment	2,671
		Total	2,791
viii.	Fillings.	Permanent Teeth	11,043
		Temporary Teeth	4,084
		Total	15,127
ix.	Number of teeth filled.	Permanent Teeth	9,702
		Temporary Teeth	3,910
		Total	13,612
x.	Extractions.	Permanent Teeth	1,324
		Permanent Teeth for Orthodonture	162
		TOTAL Permanent Teeth	1,486
		Temporary Teeth	9,531
		Total	11,017
xi.	Anaesthetics	(a) General	1,721
		(b) Local	4,526
		(c) Regional	715
		Total	6,962
xii.	Other operations	(a) Permanent Teeth	3,120
		(b) Temporary Teeth	6,072
		Total	9,192



TABLE 21 (contd.) - SPECIAL DENTAL TREATMENT  
UNDERTAKEN BY DENTAL OFFICERS

Number of impressions, etc	513
Number of Dentures fitted	63
Number of crowns and bridges	25
Number of inlays	2
Number of radiographs	
(a) at Dental Clinics	234
(b) at Hospitals	-

TABLE 22 - ORTHODONTIC EXAMINATION AND TREATMENT

	AGE GROUPS										Totals
	5	6	7	8	9	10	11	12	13	14	
Number of pupils examined	-	-	-	4	1	3	1	4	7	4	24
Number of pupils selected for treatment	-	-	-	4	1	3	1	4	7	4	24

Number of pupils commenced treatment (first attendance)	136
Number of attendances made for treatment	1,963
Number of consultations	17
Number of impressions, etc.	459
Number of fixed appliances fitted	5
Number of removable appliances fitted	156
Number of radiographs	
(a) at Dental Clinics	47
(b) at Hospitals	-
Number of pupils treatment completed	29
Number of orthodontic sessions ( $\frac{1}{2}$ days)	168

TABLE 23 - INFESTATION WITH VERMIN

Total number of examinations ... ..	101,155
Total number of pupils found to be infested ... ..	666
Total number of <u>individual</u> pupils found to be infested for the first time during current year ... ..	341
Number of individual pupils in respect of whom cleansing notices were issued. (Section 54/2, Education Act, 1944)	-
Number of individual pupils in respect of whom cleansing orders were issued. (Section 54/3, Education Act, 1944)	-

TABLE 24 - EMPLOYMENT OF CHILDREN AND YOUNG PERSONS

1. Number of children medically examined in order to ascertain whether they were physically fit to undertake employment of a light nature outside school hours ... ..	224
2. Number of instances in which the state of health was found to be such that certificates were withheld ... ..	1
3. Number of children examined as to fitness to take part in entertainments ... ..	10
4. Number of cases in which certificates to take part in entertainments were withheld ... ..	-

TABLE 25 - EDUCATION ACT, 1944 - SECTIONS 57(3), 57(4) and 57(5)

Cases dealt with under Section 57, Education Act, 1944:-

Sub-Section 3:	13
Sub-Section 4:	-
Sub-Section 5:	4

Cases de-notified under Section 8, Education (Miscellaneous Provisions) Act, 1948:

TABLE 26 - MEDICAL EXAMINATION OF TEACHERS

(a) Number of Teachers examined as to fitness for appointment ... ..	9
(b) Number of Students examined as to fitness for first appointment ... ..	25
(c) Number of Students examined as to fitness to undertake Training Course ... ..	51



# RETURN OF HANDICAPPED PUPILS, YEAR ENDED 31st DECEMBER, 1953

## ASCERTAINMENT

## DISTRIBUTION (as at last day of year)

CATEGORY	No. of ascertained Cases known first day of year		No. of New Cases ascertained during year		No. of ascertained Cases known last day of year		In Special Day Schools		In Special Residential Schools		In Maintained Primary and Secondary Schools		In Independent Schools		Not at School		TOTAL	
	B	G	B	G	B	G	B	G	B	G	B	G	B	G	B	G	B	G
Blind Pupils	4	6	1	1	4	5	-	1	3	4	-	-	-	-	1	-	4	5
Partially-Sighted Pupils	7	14	5	1	10	12	7	11	1	1	-	-	-	-	2	-	10	12
Deaf Pupils	12	5	3	1	13	5	7	4	6	1	-	-	-	-	-	-	13	5
Partially Deaf Pupils	44	29	2	-	41	21	5	2	4	2	32	17	-	-	-	-	41	21
Delicate Pupils	21	13	30	20	25	20	2	4	21	14	2	2	-	-	-	-	25	20
Educationally Sub-normal Pupils	64	58	24	15	72	62	50	50	8	2	12	9	-	-	2	1	72	62
Epileptic Pupils	2	3	1	1	2	4	-	-	2	3	-	1	-	-	-	-	2	4
Maladjusted Pupils	41	13	6	-	26	7	-	-	13	5	12	2	1	-	-	-	26	7
Physically Handicapped Pupils	29	16	7	6	23	15	17	12	1	1	1	-	2	-	2	2	23	15
Pupils with Speech Defects	196	74	68	41	136	62	1	-	-	-	132	62	1	-	2	-	136	62
Pupils with Multiple Defects	9	4	6	3	11	7	5	5	2	2	3	-	-	-	1	-	11	7
Totals	429	235	153	89	363	220	94	89	61	35	194	93	4	-	10	3	363	220
Grand Totals	664		242		583		183		96		287		4		13		583	

Children not ascertained as H.P. but recommended convalescence in a Holiday Home or Camp School during Year ended 31st December, 1953.

B	G
56	83

### ORTHOPTIC TREATMENT

Number of New Cases	Number of Cases receiving treatment	Total Attendances
69	79	794

30 children were referred to The Royal Eye Hospital  
for Orthoptic treatment

## CHIROPODY

Expectant and Nursing Mothers and School Children

[illegible]



# COUNTY COUNCIL DAY SPECIAL SCHOOLS

County District in which children reside	No. of new recommendations received during year	No. of children admitted during year	No. of children on waiting list on last day of year
<b>Vale Road School for Physically Handicapped Children</b>			
Tottenham	11	9	3
Hornsey	2	1	1
Edmonton	4	2	3
Hendon	3	4	1
Wood Green	2	1	1
Enfield	6	5	3
Southgate	5	5	1
<b>Totals</b>	<b>33</b>	<b>27</b>	<b>13</b>
<b>Tottenham School for the Deaf</b>			
Tottenham	2	2	1
Enfield	1	1	-
Hendon	5	3	1
Southgate	1	-	-
<b>Totals</b>	<b>9</b>	<b>6</b>	<b>2</b>

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