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THE RURAL DISTRICT OF ALTON

ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH

AND

CHIEF PUBLIC HEALTH INSPECTOR
for the year
1959





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MEDICAL OFFICER OF HEALTH

AND

CHIEF PUBLIC HEALTH INSPECTOR

FOR THE YEAR

1959

Council Offices,

Barton End,

Lenten Street,

Alton, Hants.

(Telephone:- ALTON 2263)

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THE RURAL DISTRICT COUNCIL OF ALTON

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Viscountess Hampden Countess of Selborne (Died 22.9.59

THE RUBAL DISTRICT COUNCIL OF ALCOH

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PUBLIC HEALTH COMMITTEE

hairman of Committee Cmdr. L. Derek-Jones, H.H. (Retd)

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PUBLIC HEALTH DEPARTMENT STAFF

(1) Prior to Mr. Bennett's retirement on 7.4.59:-

Medical Officer of Health - J. Coutts Milne, M.B., Ch.B., D. P. H. , D. T. M. & H.

Chief Public Health Inspector and Building Surveyor

- A. E. Bennett, C.R.S.I., A.M. Inst.B.E., (Retired on 7.4.59)

Senior Additional Public - J. H. Johnson, C. R. S. I., M. A. P. H. I. Health Inspector

Inspector and Assistant Building Surveyor.

Additional Public Health - A. L. Wesley, C. R. S. I., M. R. S. H., M. A. P. H. I.

Clerks

- P. F. Mercer

W. de T. Styles (Appointed 1.1.59)

Rodent Operator

- J. W. Debenham

(2) Subsequent to 8.4.59 when Building Byelaws were transferred to the Engineer's Department:-

Medical Officer of Health - J. Coutts Milne, M.B., Ch.B., D. P. H. , D. T. M. & H. (Resigned 7.9.59)

> - R. L. Goodey, B. A., M. R. C. S., L. R. C. P., D. P. H. (Appointed 2.11.59)

Chief Public Health Inspector and Petroleum Officer - J. H. Johnson, C. R. S. I., M. A. P. H. I. (Appointed 8.4.59)

Additional Public Health - A. L. Wesley, C.R.S.I., M.R.S.H., M. A. P. H. I. Inspector

Clerk - P. F. Mercer

- J. W. Debenham Rodent Operator

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- Chief Public Health A. E. Bennett, C.R.S.I., A.M. Inst.B.E. Inspector and Building (Retired on 7.4.59)

 Surveyor
 - Sentor Additional Public J. H. Johnson, C.R.S.L., M.A.F.H.L.
 - Additional Public Health A. L. Wesley, C.R.S.I., M.R.S.H., Inspector and Assistant M.A.P.H.I. Building Surveyor.
 - Building Serveyor.

 Olerks P. F. Hercer
 - Rodent Coerator J. W. Debenham

- (2) Subsequent to 5.4.59 when Eullding Byelaws were trans-
 - Medical Officer of Health J. Coutts Milne, M.E., Ch.B., D.F.H., D.T.M. & H. (Resigned 7.9.59)
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 - Inspector and (Appointed 8.4.59)

 Petroleum Officer
 - Additional Public Health A. L. Wesley, C.R.S.L., M.R.S.H., Inspector
 - Clerk P. V. Mer
 - Sodent Operator J. W. Debenham

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ALTON RURAL DISTRICT COUNCIL

Telephone Number:-ALTON 2263. Barton End, Lenten Street, Alton, Hants.

To the Chairman and Members of the Alton Rural District Council.

Ladies and Gentlemen,

I have the honour to present the Annual Report for the year 1959 on the health and sanitary circumstances of the Rural District of Alton. This is drafted in accordance with the requirements of the Ministry of Health.

The estimated population of the Rural area according to the statistics supplied by the Registrar General is 25,360, 150 more than in the previous year.

The incidence of infectious disease, apart from measles, was low; no cases of diphtheria and one confirmed case of poliomyelitis were reported. The scheme for vaccination against poliomyelitis was extended, being available between the ages of 6 months and 25 years.

I am grateful to the Chairman and Members of the Public Health Committee for their encouragement and help, to Mr. Holden, the Clerk of the Council, to Mr. Johnson, the Chief Public Health Inspector, and to the whole staff of the Public Health Department. I very much appreciate the willing help and co-operation of officers of other departments of the Council. I am indebted to my predecessor, Dr. Coutts Milne, for his help when I took up my appointment in November, 1959.

I should like to record here the loss sustained by the Alton Rural District Council through the death of the Countess of Selborne in September, 1959; she had been a Rural District representative on the 7 (Alton) District Health Sub-Committee for many years.

Medical Officer of Health

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Medical Officer of Health ALTON RURAL DISTRICT COUNCIL

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8 Charles

Medical Officer of Health

PART I

GENERAL REPORT OF THE MEDICAL OFFICER OF HEALTH

ALTON RURAL DISTRICT

The Alton Rural District is situated in North-East Hampshire, bordering on Surrey and Sussex. It is largely agricultural, with arable, dairy and pig farming predominating, some fruit, hops and poultry farming is also carried on. It contains two large military camps at Bordon and Longmoor.

The population estimated for mid-1959 was 25,360. Compared with the figure estimated for mid-1958, which was 25,210, this shows an increase in the year of 150.

STATISTICS OF THE AREA As at 31st December, 1959.

Area, in acres		65,526
Total estimated mid-year Home Population (including military)	0.0	25,360
Number of inhabited houses		6,562
Rateable value		£285,586
Product of the penny rate 1958-59		£1,119
Revised estimated product of penny rate 1959-60.		£1,150

VITAL STATISTICS

LIVE BIRTHS

Number: - 447 (Male - 229 Female - 218)

Rate per 1,000 population: - 17.6

Illegitimate Live Births per cent of total live births: - 4.5

STILLBIRTHS

Number: - 11

Rate per 1,000 total live and still births:- 18.0

Total Live and Still Births:- 458

Infant Deaths (deaths under 1 year) - 11

INFANT MORTALITY RATES

Total infant deaths per 1,000 total live births - 24.6

Legitimate infant deaths per 1,000 legitimate live births - 23.4

Illegitimate infant deaths per 1,000 illegitimate live births - 50

Neo-natal Mortality Rate -Deaths under 4 weeks per 1,000 total live births - 17.9

Early Neo-natal Mortality Rate -Deaths under 1 week per 1,000 total live births - 17.9 Perinatal Mortality Rate -Stillbirths and deaths under 1 week combined per 1,000 total live and still births - 41.5

Maternal Mortality (including abortion) Number of deaths - NIL

Rate per 1,000 total live and still births:- NIL

Comparability Factor is 1.16, so the adjusted Live Birth Rate for this District is 20.4 per 1,000 population. onlity farming as also carried on.

DEATHS

Deaths from all causes in the area were: - 253 (Composed of 132 males & 121 females)

Death Rate per 1,000 population:- 9.9

Comparability Factor is 1.03, giving an adjusted rate of 10.2.

Total entire ted mid-year Home Portur

Crude death rate for England and Wales for 1959 was 11.6 per 1,000 population.

It should be emphasised that where small numbers are involved these rates are not necessarily statistically significant and comparison with other years or other districts may be misleading.

STAFF Start of the penny rate 1938-59

Dr. J. Coutts Milne, the Medical Officer of Health, left in September, 1959, to take up appointment as Medical Officer of Health to Farnborough Urban District, Fleet Urban District, and Hartley Wintney Rural District Councils. Dr. Randall Martin acted as Interim Medical Officer of Health until the beginning of November, 1959, when I took my appointment with this Council.

Mr. A. E. Bennett, Chief Public Health Inspector and Building Surveyor since September, 1920, retired in April, 1959, and Mr. J. H. Johnson, his deputy for seventeen years, was then appointed in his place.

The amount of clerical work involved in the local administration of County immunisation schemes at Rural District Council level was increased considerably at the beginning of the year due to a fuller operation of the existing poliomyelitis vaccination scheme and its I ter extension to embrace a wider range of eligible age groups. Consequently, the Hampshire County Council approved the appointment of Mrs. G. E. Mayo as a part-time assistant from the 27th April, 1959, to undertake all clerical duties relating to their immunisation and vaccination schemes.

COMMENTS ON VITAL STATISTICS

BIRTHS

The rate of 17.6 per 1,000 live births for 1959 compares with an average of 17.2 for the previous quinquennium.

The Comparability Factor, which is provided by the Registrar General, when applied to the local rate, enables this to be compared with figures for other areas. The Comparability Factor for this area is 1.16, which gives an adjusted rate of 20.2.

The actual number of live births was 447. 4.5% of these were illegitimate.

Birth Rate (provisional), England and Wales for 1959 was 16.5 per 1,000 population.

INFANT MORTALITY RATE

This year additional statistics have been provided concerning Infant Deaths (deaths under 1 year). There is a total of 11, eight of which occurred during the first week of life.

The Infant Mortality Rate for England and Wales in 1959 was 22.0 per 1,000 live births. It is of interest to note that in Sweden it is 16.

DEATHS

Deaths from all causes in the area totalled 253. This figure included 132 males and 121 females, and gave a Death Rate of 9.9 per 1,000 total population.

The Comparability Factor is 1.03, giving an adjusted rate of 10.2.

The crude death rate for England and Wales for 1959 was 11.6 per 1,000 population.

CAUSES OF DEATH

Apart from accidents, the main causes of death were diseases of the heart and arteries and various forms of cancer. These, by their very nature, affected those persons aged 50 and over. Little is known concerning the normal degenerative processes of old age but there is general agreement on some measures of prevention of certain forms of heart disease and cancer. There were 48 cases of coronary heart disease in this year's returns. With middle age less exercise is taken and frequently diet is not adjusted to decreased needs. Regular exercise, particularly for people living sedentary lives, and in certain cases alteration in diet may postpone or reduce incidence of certain types of heart disease. Heart disease as a cause of death has increased by one quarter in the country during the last five years.

The association of heavy smoking with cancer of the lungs and bronchi has now been proved beyond doubt. There were 13 cases reported during the year. This particular form of cancer is increasing. Evidence from many parts of the world has been considered by the Medical Research Council. It is no coincidence that one part of the British Isles, Jersey, which has the highest cigarette consumption and lowest priced cigarettes, has the highest rate for cancer of the lung. This is a problem of health education primarily. If adolescents can be dissuaded from commencing smoking and adults from continuing smoking there is no question that the incidence of lung disease will decrease. Unfortunately although encouragement of smoking by high-powered advertising campaigns can be seen everywhere, there is little opportunity to stress its danger. Every day in England and Wales 54 persons die of cancer of the lung.

INFECTIOUS DISEASES

The incidence of infectious diseases notified in the area, apart from measles, remained low.

MEASLES

In the first six months of the year measles was widespread over all the parishes of the Rural District. In all, during 1959, 536 cases were notified.

WHOOPING COUGH TO THE BEE SAFELY SVIL TO TOCKET LEBYOS OF

The number of cases of whooping cough notified during the year was 26. This number has continually declined over the last five years possibly due to the fact that more children are being immunised against whooping cough at the same time as against diphtheria and tetanus with the combined or triple antigen.

SCARLET FEVER

Scarlet fever has declined considerably in its virulence from years ago. It is now generally a relatively mild disease although it can have serious results.

29 cases were reported during the year; 9 in the first quarter, 16 in the second, 3 in the third, and 1 in the fourth. There were 15 boys and 12 girls, together with 2 adults.

Scarlet fever is only one particular kind of disease caused by the streptococcus, other kinds are not notifiable. It is used as an index of streptococcal infection of the community.

POLIOMY TITIS

One confirmed case of poliomyelitis was reported during the year, in Binsted during July. The patient had been vaccinated against poliomyelitis; no virus was found in any of the contacts.

TURERCULOSIS

Two new cases of non-pulmonary tuberculosis and 7 of pulmonary tuberculosis were reported during the year, the same number as in 1958. No deaths due to tuberculosis were reported.

Age and Sex Distribution of the Notified Cases

	Age	Pulmo	nary	Menin C. N	ges &	Oti	ner
	gol saasser	M.	F.	-M.	ellp.	M.	F.
	5 - 14	1	date o	er halome	-	-	- 169
	15 - 24	To miol	oubts talcolar	b bgoys	d bevon	hean p	vo= asc
-	25 - 44	od ear b.	0 01 8	do law	LIGANO	1	1
	45 - 64	3	and .s	garatic	to Leof dong s	tg 2aes	ol -one
	65 & over	2	nonemin not not	taesp o	Denson I of eq	ing the	nes aver
	TOTALS:-	na con li	Esqueo atl s	antarz outs o	toyba b	Ta word	2 bid vo

DIPHTHERIA

As in the previous 13 years there were no cases of diphtheria in the area. It is of interest to note that in one parish alone, Wield, in 1932, there were 22 cases. In England and Wales in 1958 there were 80 cases with 8 deaths; incidence was mainly in younger schoolchildren.

OTHER DISEASES

DYSENTERY

There were 5 cases of dysentery notified during the year. It is probable that many cases occur which are not notified and never treated owing to the mild nature of the disease. Some dysentery is now increasing owing to the relatively large numbers of unknown carriers in the population. It is spread by direct or indirect contact, more rarely through food. As with all infections of the bowel, spread is best controlled by strict attention to personal hygiene. All notified cases and contacts are investigated.

PUERPERAL PYREXIA

There were 2 cases of puerperal pyrexia notified during the year.

ACUTE PNEUMONIA

There were 4 cases of acute pneumonia notified during the year.

FOOD POISONING

No cases of food poisoning were reported during the year.

PROPHYLACTIC IMMUNISATION SCHEMES

The great success of immunisation schemes is shown by the figures for diphtheria. From 1933-42 there was an annual average of 55,000 cases; as previously mentioned in 1958 there were 80 throughout England and Wales. But it is essential that in order to maintain this state of affairs an adequate level of immunisation should be kept up. This is usually considered as being about 75%. In this district parents of every child are contacted when their child is four months old and again at 5 and 10 years so that the child may be immunised either by their own doctor or at clinics. Owing to the scheme for protection against poliomyelitis which was being carried on at the same time, figures for 1959 are less than in 1958.

The number of children protected is shown in the following table:-

(I) Number of children who completed a course of primary immunisations and who received reinforcing injections

Ages	Diphtheria Diphtheria & Whooping Cough Cough		igh	Triple Antigen		Diphtheria & Tetanus				
	Prim	Bstr	Prim	Bstr	Prim	Bstr	Prim	Batr	Prim	Bstr
Under 1	8	-	23	-	1	-	201	~	1-	-
1 - 4	9	2	3	4	1	3	69	2	n Lal	000E 0
5 - 14	18	83	1	11	-		4	46		2
Potals:-	35	85	27	15	2	3	274	48	- 1	2

From this table it will be seen that protection against diphtheri was provided for 337 children under 14 with primary courses of injections and for 150 children with booster doses. 233 children under 1 year completed their primary course which means an acceptance rate of 52%.

To assess the extent to which children in this area have been protected, the proportion of children of each age who have received at some time a course of injections against diphtheria as well as the ages at which this course was received must be taken into consideratio The immunisation stage is shown in the following table by (a) age at inoculation, and by (b) age attained:-

(II) Number of children at 31.12.59 who had completed a course of immunisation at any time between 1.1.45 and 31.12.59.									
Age at 31.12.59, i.e., born in year	Under 1 1959		5-9 50-54	10+14 45-49	Total under 15 yrs.				
Last complete course of injections 1955-59	138	1195	1417	1041	3791				
1954 or earlier		Lincon-on	973	2468	3441				
Totals:-	138	1195	2390	3509	7232				

WHOOPING COUGH IMMUNISATION

This vaccine is now usually given combined with diphtheria antigen or in the triple antigen which also includes protection against tetanus. In one way or another 303 children were given primary protection against whooping cough and booster doses were given to 66 children.

VACCINATION AGAINST POLICHMELITIS

Protection during 1959 was available to all persons between the ages of 6 months and 25 years, to expectant mothers and to certain categories of persons who were at especial risk. At the beginning of 1959 in England and Wales nearly 6½ million people had received two injections and throughout 1959, although no figures are as yet available, the national campaign continued successfully. Figures for this district are given below:-

Period 1st Januar	ry to 31st December,	1959.
The state of the same	Second injections Third injections completed completed	
Children born in the years 1943-59	5,751	2,499
Adults born 1933-42 & special categories.	1,157	1,89
Expectant mothers.	_ 232 +	E 101 AF
Totals:- 84 MS &	7,140	3,089

These figures include persons given injections at their own doctors' surgeries or at public vaccination sessions advertised in the local press and by posters throughout the whole area. All persons who are eligible and who have not been vaccinated should register now.

At the moment it is generally necessary to acquire protection through a course of three injections. However, trials are being carried out with a new oral vaccine in various places, and it is possible that should these trials prove successful oral vaccine may replace that given by injection.

VACCINATION

A total of 458 primary vaccinations was carried out in this area and 60 re-vaccinations. Of these 458 primary vaccinations, 407 were carried out during the first year of life. As there were 447 live births in the area in 1959 and 436 in 1958, this would appear to show that about 91% of children in their first year of life were vaccinated. However, there is constant movement of military families in the Longmoor and Bordon areas and it is probable that a considerable number of children in those areas were born elsewhere. The County estimate for this area is given as 87.9%. In Hampshire 65.6% of 1959 births were vaccinated.

Although smallpox has almost disappeared in England, the few cases which do occur originating from abroad, it is still highly necessary that all children should be vaccinated. It is essential for service with the Armed Forces, and with the increasing possibilities of foreign travel a large number of persons will find it necessary to be vaccinated at some time in their life. The slight risk involved in primary vaccination is considerably less in infancy and for that reason alone it is most desirable for children to be vaccinated during their first twelve months of life.

The following table gives details of the age groups:-

Age at which vaccinated	Primary Vaccinations	Re- Vaccinations
Under 1 year	407	A Source Confe
1 - 4 years	21	7
5 - 14 years	13	18
15 yrs & over	17	35
Totals:-	458	60

NATIONAL ASSISTANCE ACT, 1948 (Section 47)

No action was called for during the year under this section of the Act. There is, and will be, an ever increasing proportion of old people in the community. Families are decreasing in size and the feeling of family unity tends to be put under considerable strain when there are fewer younger members in the family to help with the elderly and when accommodation may be insufficient to find a place for them in their children's homes.

The Home Help and other welfare services are used to the full in an effort to enable old people to maintain their place in the community. The provision of old people's bungalows could be increased as many old folk are living in houses too large for them to cope with. Accommodation would then be available for larger families in the houses they would vacate. Moreover, many old people live in isolation, their families have left, friends of their own age may have died. Suitable accommodation in many cases would prolong their lives and keep them in the community rather than in an institution. Such old people's bungalows should be part of an ordinary housing estate.

elsewhere. The County estimate f DNISUOH area is given as 67.5%. In Hampenire Cavity of 1959 births were vaccinated. Housing, as with water supplies and sewage, is a matter of environmental hygiene of main concern to public health.

Mr. E. C. A. Shuttleworth, the Housing Manager, has kindly provided the following particulars.

There are 277 families on the waiting list, many of whom occupy "tied" accommodation. Of the 21 parishes, five have more than 10 families requiring re-housing; Whitehill parish has 114, Headley 41, Four Marks and Bentley 22 each, and Medstead 11. Of these 277 families, 93 live in rooms or with relatives, 11 live in caravans. Erie Camp, Headley Down, is used as a halfway camp from which suitable families eventually will be offered other accommodation. The rents are low and this housing site fulfils a useful purpose.

CARAVANS

There are nine licensed permanent caravan sites in the area. It is generally agreed that in order to ensure the maintenance of at least minimum standards of public health with adequate provision for water supply, sanitation and refuse disposal, most caravans are best situated in a camp. Caravans meet a need; some "travellers", who, despite their name, remain permanently in the district, prefer a caravan to a house. Even the best proprietary caravan must be considered as inferior to a house when the question of young children is introduced. The standard of hygiene on some caravan sites still leaves much to be desired. A considerable improvement is expected in the coming year when one of the largest sites is being re-organised. A Bill is before Parliament which, if passed, will enable a greater control to be exercised over caravans and thereby fill a gap in Public Health legislation.

WATER SUPPLIES

Main water supplies in the area are provided by the Mid-Wessex Water Company and the Wey Valley Water Company; military camps have their own wells; Alton UDC supplies a few properties in Neatham.

Throughout England and Wales 90% of rural communities have piped water, the provision of such supply ranks only second to the provision of suitable housing in the needs of a rural community.

One complaint about water supply during the year was made at the end of a long, dry summer. The supply was derived from a well in the area and "small animals" were found coming from the tap. These turned out to be "fresh water shrimps", perfectly harmless but most disconcerting. Only one household was affected and the matter was soon cleared up.

Further information regarding water supplies in this district will be found in the Chief Public Health Inspector's report.

SWIMMING BATHS

There are no public swimming baths in the area.

ACCIDENTS

MOTOR VEHICLE ACCIDENTS

During 1958 15 people were killed every day in England and Wales on the roads. Twenty times more people die from such accidents than die from poliomyelitis. In this area last year there were 9 deaths on the roads. No returns are immediately available for the number of injuries in the area, although over Hampshire as a whole the injury rate increased 12% in 1959. Apart from a higher standard of driving care, the teaching of "road sense" to children, "road-worthiness" tests for cars, improvements in lighting and footpath provision, are obvious safety factors. Some Councils have a Road Safety Committee.

ACCIDENTS IN THE HOME

The majority of such accidents concern young children and persons over 65. These two groups constitute approximately 20% of the population. Every year more than 6,000 people die of accidents in the home. Burns and scalds are probably the greatest danger to young children and the frequency of scars due to these is very evident at school medical inspections. It is not generally known but it is an offence according to the Children and Young Persons Act, 1933, to have an unguarded fire in any housecausing injury tochildren under the age of 12. Drip feed oil heaters are another source of danger. Cotton nightdresses are perhaps one of the most dangerous garments for children; they are most inflammable and are easily set alight if they are blown against an unguarded fire. We had one such case in Alton last year.

For old persons, falls are another hazard. Uneven floors, loose steps, lack of adequate lighting are contributory causes. In the Alton area during 1959, 13 such cases required hospital attention.

The Secretary of the Alton General Hospital, Mr. D. W. Poole, has kindly supplied me with information concerning patients from the town and the surrounding area who attended the Casualty Department during 1959 as a result of home accidents.

The following table shows the figures classified by age, sex and type of accident:-

HOME ACCIDENTS - JANUARY TO DECEMBER, 1959.

000	Approximate Age percentage of populat-		Cuts		Burns and Scalds		Falls		Miscell -aneous		
	ion at age groups.	orth bey	H.	F.	M.	F.	M.	F.	M.	F.	nol a lo be
	8	0-4	7	4	11	4	15	12	18	6	77
	15	5-14	9	7	8	9	7	3	16	8	67
	66	15-64	10	15	5	17	10	18	13	29	117
	11	65+	the s	nt u	Stad Divi	3	1	12	1	5	22
	TOTAL	S:-	26	26	24	33	33	45	48	48	283
-	lend andiwale	dotte m	52	nered le di	5	7	7	8	96	5	During 1

It is noteworthy that burns and scalds in children aged 4 and under (approximately 8% of the population) accounted for over a quarter of such accidents in all age groups. In that 0-4 age group under "miscellaneous" are included a child of 2 who swallowed twenty aspirin tablets, a child of 2½ who swallowed phenobarbitone tablets, a child of 19 months who chewed razor blades, and a child of 1 year who was found drinking a strong proprietary bleach.

The method of prevention is obvious in such cases. Many home accidents are preventable; with foresight, improvement in housing design and increased care the number of home accidents at all ages could be reduced considerably.

FACTORIES ACTS

Information concerning factories will be found in the report of the Chief Public Health Inspector, details being supplied as required by the Minister of Health.

HEALTH EDUCATION

Further improvement in the general health of the community is now more than ever dependent on the inculcation of an attitude of mind. Information must be given to the public as to facilities that are available for protection against disease and education in ways of living and in healthy habits of life is one of the functions of the public health department.

-20

Health Education in a rural district presents many problems. The Health Visitor is, of course, the main means of communication with mothers and young children, either through home visits or at the local clinics. Posters are distributed for display on parish notice boards throughout the year concerning food hygiene, the prevention of the fly nuisance, the desirability of obtaining protection against poliomyelitis and similar subjects of public interest. Advertisements in the local press and posters give information about public sessions for poliomyelitis vaccination.

In Hampshire talks in schools are given to children of schoolleaving age on matters of Health Education and a Health Education Officer has now been appointed who will be available in this area.

The basis of future improvement in the health standards of the community lies in the field of Health Education. This does not consist merely in the provision of information to the public but in persuading the individual to accept changes in his method of living, in fact to put into practice principles of which he frequently is well aware.

PROVISION OF GENERAL HEALTH SERVICES OF THE AREA

Since 1954 there has been in the County a scheme of devolution to District Health Sub-Committees of certain functions of the National Health Service Act, 1946.

Membership of the No. 7 (Alton) District Health Sub-Committee is as follows:-

Chairman of Sub-Committee ... Mrs. C. P. Thomson-Glover Vice-Chairman Mrs. C. Harckham.

MEMBERS

- Alton Rural District Council Representatives -

Lady Bonham-Carter Viscountess Hampden

Col. J. D'Arcy Champney Mrs. N. S. Ryder

Mrs. H. M. Cumberbatch, J. P. Countess of Selborne (Died 22.9.59)

- Alton Urban District Council Representatives -

Col. J. P. Archer-Shee, Mrs. C. Harckham M.C.

- Nursing Association Representatives -

Mrs. G. Coke (Bentley)

Mrs. I. M. Durham (Grayshott)

- Special Nominee -

The Hon. Mrs. V. L. Gilmour, O. B. E. (Medstead)

- British Medical Association Alan F. Goode, Esq., F.R.C.S.

AMBULANCE FACILITIES

The Ambulance Service is conducted by the Hampshire County Council who supply monthly details of journeys to the Public Health Committee. The ambulances for the area are stationed at Alton.

Applications for the use of ambulances are made to:-

The Aldershot Ambulance Station, (Telephone: - Aldershot 2244)

CHILD WELFARE

Child Welfare Centres are situated throughout the District at the following places and on the dates and times given.

These centres are for the attendance of mothers and babies, and children under five. Activities at the clinics, at which a doctor and nurse attend, include advice on feeding and child management, immunisation, weighing and the distribution of welfare foods and certain medicaments.

Centres for children under the age of 5 years are available as follows:-

Centre	Address	Day of clinic per month	Time
Alton	Assembly Rooms	Every Tuesday	2-4 p.m.
Bentley	Memorial Hall	3rd Wednesday	2-4 p.m.
Binsted	Institute	4th Wednesday	2-4 p.m.
Bordon	Military Welfare Centre	Every Thursday	2-4 p.m.
Four Marks	Institute	1st and 3rd Wednesdays	2-4 p.m.
Froyle	Methodist Hall	1st Friday	11 a.m. -12 noon.
Grayshott	Village Hall	1st and 3rd Fridays	2-4 p.m.
Headley	Village Hall	2nd and 4th Fridays	2-4 p.m.
Kingsley	Cadet Hut	3rd Friday	3-4 p.m.
Longmoor	Military Welfare Centre	2nd and 4th Mondays	2-4 p.m.
Oakhanger	Village Hall	3rd Friday	2.15- 2.45 p.m.
Selborne	Village Hall	1st Wednesday	2-4 p.m.
Whitehill	Congregational Church Hall	2nd and 4th Thursdays	2-4 p.m.

NATIONAL WELFARE POODS

National Welfare Foods are distributed from the following centres in the Alton Rural District:-

BENTLEY: Bentley Post Office, Business hours. London Road.

BENTLEY: Child Welfare Centre, 3rd Wednesday in month Memorial Hall.

BINSTED: Child Welfare Centre, 4th Wednesday in month The Institute.

BORDON: Child Welfare Centre, Every Thursday Medical Inspection Room, from 2 p.m. The Barracks.

EAST TISTED: Mr. Budd, The Stores. Business hours.

FARRINGDON: Messrs. W. & L. Burr, Business hours. Stores & Post Office.

FOUR MARKS: Mr. Tomlinson, The Post Office.

FROYLE: Child Welfare Centre, 1st Friday in month Methodist Hall.

GRAYSHOTT: Child Welfare Centre, 1st & 3rd Fridays in month Village Hall. from 2.30 p.m.

HEADLEY: Child Welfare Centre, 2nd & 4th Fridays in month Village Hall.

KINGSLEY: Child Welfare Centre, 3rd Friday in month Cadet Hut.

LASHAM: Mrs. Collins, Business hours.
The Post Office.

LINDFORD: Mr. Pears,

Cross Road Store.

LONGMOOR: Child Welfare Centre, 2nd & 4th Mondays in month Medical Inspection Room, from 2.30 p.m.

The Barracks.

LOWER FROYLE: Messrs. E. Wheatley Business hours. & Sons, Froyle Stores.

MEDSTEAD: Women's Institute.

OAKHANGER: Child Welfare Centre, 3rd Friday in month Village Hall. from 2.15-2.45 p.m.

ROPLEY: Mrs. Knowles, Coffee Rooms.

SELBORNE: Child Welfare Centre, 1st Wednesday in month Village Hall.

WEST TISTED: Mr. Bayley, Business hours. Post Office Stores.

WHITEHILL: Child Welfare Centre, 2nd & 4th Thursdays in month Congregational Church from 2 p.m. Hall.

WIELD: Mrs. G. J. Baker, 2 Manor Farm Cottages, Upper Wield.

Centre Time of Opening

from 2 p.m.

from 2 p.m.

Business hours.

from 11 a.m.

from 2 p.m.

from 3 p.m.

Business hours.

4th Monday in month from 2.30-4.0 p.m.

1st Friday in month o shoom and has from 2-4 p.m.

from 2 p.m.

By arrangement.

HEALTH VISITING

The following are the Health Visitors and the areas which they serve:-

Name

Address

District

Mrs. J. E. Morrow, 13 Whitedown, Alton. Alton, Chawton, S. R. N., S. C. M., H. V. (Phone: Alton 2097) Farringdon.

Miss A. M. Knapp, 161a London Road, S.R.N., S.C.M., H.V. Holybourne. (Retired 31.12.59) (Phone: Alton 2829) (Phone: Alton 2829) Farringdon.

Bentley, Binsted, Frith End, Froyle,
Headley, Headley Down,
Holybourne, Kingsley,
Lindford, East & West
Worldham, Rowledge.

East Tisted. Grayshott.

Miss V. Gawthorp, Cherry Croft, S. R. N. , S. C. M. , H. V.

Liphook Road, Headley, Bordon. (Phone: Headley Down 3322)

Miss I. K. Brown, S. R. N., S. C. M., H. V.

No. 1 Bungalow, Infant Welfare Centre, Bordon. (Phone: Bordon 369)

Miss E. M. May, 22 Gosling's Croft, Blackmoor, Newton S. R. N., S. C. M., H. V. Selborne. Valence, Oakhange (Phone: Selborne 219)

Miss M. C. Tate, S.R.N., S.C.M., H.V.

Spadgers, Gascoigne Lane, Ropley. (Phone: Ropley 3237)

Miss D. McKenzie, S. R. N. , S. M. B(1),

c/o Hampshire County Bentworth, Lasham, Council Health Centre, Shalden, Wield. Bramblys Grange, Basingstoke. (Phone: Basingstoke 1878)

Bordon, Hollywater, Longmoor, Standford, Whitehill.

Valence, Oakhanger, Selborne.

Medstead, Ropley, West Tisted.

HOME HELP SERVICE

A scheme of domestic help is available. The helpers are experienced women carefully chosen for their suitability for the work. They will run the home carefully, their job being to take over the housewife's work.

Home Helps are available for the following types of cases:when the housewife is sick or has to have an operation; when a new baby is expected; when several members of a household are ill at one time; and to give help to the elderly and infirm.

Application for a Home Help, accompanied by a medical certificate, should be made to the District Organiser. The charge depends on the hours worked and the income of the family after certain allowances have been made.

Division VI includes the Rural District of Alton and the Divisional Organiser, Mrs. R. Holmes, has her office at the Town Hall, Petersfield, (Telephone No: - Petersfield 771/773 - Ext. 18), to whom application should be made for a Home Help.

LABORATORY FACILITIES

Bacteriological examinations of clinical matter (sputum, swabs etc.) and of water, milk and foodstuffs are carried out at the Public Health Laboratory, Royal Hampshire County Hospital, Winchester, (Telephone Number: - Winchester 3807).

Chemical analyses of water, sewage, milk and other samples are carried out by arrangement with the Public Analyst, Trafalgar Place, Clive Road, Portsmouth, (Telephone Number: - Portsmouth 23641).

Thanks are expressed to the Director of the Public Health Laboratory Service and the Public Analyst, Portsmouth, for their ready advice and assistance granted during the year.

ANTE-WATAL CLINICS

Clinics are held every Thursday at Alton General Hospital.

The medical officers attending the Alton clinics at the end of the year were as follows:-

> 1st Thursday - Dr. W. S. Larcombe. 2nd Thursday - Dr. T. C. Wilson. 3rd Thursday - Dr. Helen E. Larcombe. 4th Thursday - Mr. A. F. Goode.

Ante-natal relaxation classes are held at the Military Families Health Centre, Bordon, on Tuesday afternoons.

SCHOOL HEALTH SERVICES

Clinics are held as follows:-

Orthopaedic - Lord Mayor Treloar Hospital, Alton.

Ear, nose & throat - Alton General Hospital.

Dental - At Schools.

Ophthalmic & orthoptic - Alton General Hospital.

Child guidance - Health Centre, Winchester.

Speech therapy - Alton General Hospital.

TUBERCULOSIS

Chest clinics are held at Aldershot, Basingstoke, and Win-chester, whilst sanatoria are available at Bishopstoke, Chandler's Ford, and Liphook.

VENEREAL DISEASES

Clinics are held at Aldershot and Winchester.

AREA WELFARE OFFICER

The Area Welfare Officer is:-

Mr. A. C. Wood, 14 King George Avenue, Petersfield.

(Telephone Number: - Petersfield 1199 - mornings only)

MIDWIPERY AND HOME NURSING

Relief duties to cover holidays, sickness, or emergency calls undertaken by neighbouring nurse-midwives.

District served.	Nurse.	Service given.		
Alton Chawton Farringdon	ton S. R. N., S. C. M.			
Bentley Binsted E. & W. Worldham Froyle Holybourne	Mrs. K. V. Hutton, S. E. A. N., S. C. M. 10 Babs Field, Bentley. (Tele: Bentley 3158)	Midwifery & general nursing.		
Barford Bramshott Chase Grayshott Headley Common Headley Down (part) Hearn	Miss M. A. Cuff, S. E. A. N., S. C. M. Nurse's Cottage, School Rd, Grayshott. (Tele: Hindhead 409)	Midwifery & general nursing.		
Lindford Hollywater Headley Headley Down (part) Deadwater Standford Arford Passfield	Mrs. D. E. Stephens, S. R. N., S. C. M. (Resigned 18.1.59) Mrs. R. P. Eames, S. R. M., S. C. M. Lurganboy, Stonehill Road, Headley Down. (Tele: Headley Down 2170) (Appointed 1.2.59)	Midwifery & general nursing.		
Beech Bentworth Lasham Medstead Shalden Wield	Miss V. L. Lock, S.R.N., S.C.M., Q.N. 3 Green Stile, Medstead. (Tele: Medstead 2100)	Midwifery & general nursing.		
East & West Tisted Four Marks Ropley	Mrs. J. M. Cooper, S.R.N., S.C.M., Q.N., H.V.Cert. Cissbury, Redhill, Four Marks. (Tele: Medstead 2278) (Appointed 28.7.59)	Midwifery & general nursing & health visiting.		
Selborne Blackmoor Drift Road Oakhanger Newton Valence Empshott Longmoor Camp	Miss E. M. May, S.R.N., S.C.M., Q.N., H.V.Cert. 22 Gosling's Croft, Selborne. (Tele: Selborne 219)	Midwifery & general nursing & health visiting.		
Bordon Camp Bordon Village Whitehill Kin;sley Hogmoor Road Fir Grove Shortheath Common	Miss E. P. Goudie, S.R.N., S.C.M. No. 2 Bungalow, Infant Welfare Centre, Bordon Camp. (Tele: Bordon 292) (Appointed 6.5.59)	Midwifery & general nursing.		

VITAL STATISTICS

(Table 1)

BIRTHS

Total Populatio	1955	1956	1957	1958	1959	
Dontha under 1	25,280	25,710	25,750	25,210	25,360	
Live Births Legitimate	Male Female	191 198	217 202	214 187	200 205	221 206
Deaths under 1	Total	389	419	401	405	427
Live Births Illegitimate	Male Female	14 13	14 18	15 14	20 11	8 12
12.6 -9090301	Total	27	32	29	31	20
Total Live Birt	hs	416	451	430	436	447
Live Birth Rate per 1,000 Tota Population	16.5	17.5	16.7	17.3	17.6	
England and Wal	es	15.0	15.7	16.1	16.4	16.5
Still Births Legitimate	Male Female	3 5	3 5	6 2	2 4	7
10.2.	Total	8	8	8	6	10
Still Births Illegitimate	Male Female	0	0	0	1 0	0
Total		0	1	0	1	1
Total Still Bir	8	9	8	7	11	
Still Birth Rat per 1,000 Birt (Live & Still)	hs	18.9	19.6	18.2	15.8	18.0
Total Live & St Births	ill	424	460	438	443	458

Comparability Factor is 1.16, so the adjusted Live Birth Rate for this District is 20.4, which is the figure for comparative purposes with England and Wales.

VITAL STATISTICS

(Table 2)

DEATHS

The section is	A STATE OF THE PARTY OF THE PAR						
From all	causes	1067.562	1955	1956	1957	1958	1959
	200	Male	133	120	131	164	132
		Female	106	102	98	154	121
epaley	20	Totals	239	222	229	318	253
Death Raper 1,00 total po		es (Tel:	9.5	8.6	8.8	12.6	9.9
	for and Wale opulation		11.7	11.7	11.5	11.7	11.6

The Death Rate Comparability Factor for this District is 1.03, allowance thus being made for local differences in the sex and age distribution of the population.

The adjusted Death Rate for this area is, therefore, 10.2.

(Table 3)

INFANT MORTALITY

AND DESCRIPTION OF THE PARTY OF						
Deaths under 1	0	1955	1956	1957	1958	1959
(legitimate)	Male	6	7	4 .	5	6-S
0 0	Female	3	6	1	pt=4imi	110 4.A
Deaths under 1 year of age.	Male	0	0.7	0	2	f Mer
(illegitimate)	Female	0	0	0	0	7.0 Act
Totals:-	t . ses	9.0	13	5	er thro	9,11,0
Infant Mortality Rate per 1,000	Total	21.6	28.8	11.6	25.2	24.6
live births	Legitimate	No fi	gures av	ailable	20.6	23.4
13 23	Illegitimate	No fi	gures av	ailable	64.5	50.0
England & Wales Rate per 1,000 live births	d - 19 years	24.9	23.8	23.0	22.5	22.0

NEO-NATAL MORTALITY

			Append L	a version of the Line	THE RESERVE THE PARTY OF	
0 2	2 2	1955	1956	1957	1958	1959
Number of Deaths	Male	3	4	2	5	4
under 4 weeks	Female ***	LEGA REES	1011400	TO 1981	Stor Silse	38
(legitimate)	Totals	4	8	3143	ars7mm	7,75
(illegitimate)	Male	No fi	gures av	ailable	2	1 .09
0 0	Female	No fi	gures av	ailable	Consender	008
12 26	Totals ass	No fi	gures av	ailable	Pat2 rent	1.58
				STOREST STREET	THE RESERVE OF THE PARTY OF THE	

Percentage of illegitimate live births - 4.5%

Maternal deaths including abortion - NIL

Maternal Mortality Rate - NIL

Attention is drawn to the fact that these rates for the Rural District, owing to the small numbers involved, are not statistically significant and rate comparisons with other areas or earlier years is misleading.

(Table 4) ANALYSIS OF CAUSES OF DEATH

1. Tuberculosis, respiratory 2. Tuberculosis, other 3. Syphilitic disease 4. Diphtheria 5. Whooping Cough 6. Meningococcal infections 7. Acute poliomyelitis 8. Measles 9. Other infective & parasitic diseases 9. Other infective & parasitic diseases 10. Malignant neoplasm, stomach 11. Malignant neoplasm, lung, bronchus 11. Malignant neoplasm, breast 13. Malignant neoplasm, breast 14. Other malignant & lymphatic neoplasms 15. Leukaemia, Aleukaemia 16. Diabetes 17. Vascular lesions of nervous system 18. Coronary disease, angina 19. Hypertension with heart disease 21. Other circulatory disease 22. Influenza 23. Pneumonia 24. Bronchitis 25. Other diseases of respiratory system 26. Ulcer of stomach and duodenum 27. Gastritis, Enteritis and Diarrhoea 28. Nephritis and Nephrosis 29. Hyperplasia of Prostate 29. Hyperplasia of Prostate 20. Other defined & ill-defined diseases 34. All other accidents 35. Suicide 36. Homicide and operations of war 10. O 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Disease	Male	Female	Total
3. Syphilitic disease 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	1. Tuberculosis, respiratory	0	Forebri	80° ne
4. Diphtheria 0 0 0 0 5. Whooping Cough 0 0 0 0 0 6. Meningococcal infections 0 0 0 0 0 7. Acute poliomyelitis 0 0 0 0 8. Measles 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	2. Tuberculosis, other	0	0	0
5. Whooping Cough 6. Meningococcal infections 7. Acute poliomyelitis 8. Measles 9. Other infective & parasitic diseases 1 0 1 10. Malignant neoplasm, stomach 12 1 3 11. Malignant neoplasm, lung, bronchus 11 2 13 12. Malignant neoplasm, breast 13. Malignant neoplasm, uterus 14. Other malignant & lymphatic neoplasms 15. Leukaemia, Aleukaemia 16. Diabetes 17. Vascular lesions of nervous system 18. Coronary disease, angina 19. Hypertension with heart disease 19. Other heart disease 20. Other heart diseases 21. Other circulatory disease 22. Influenza 23. Pneumonia 24. Bronchitis 25. Other diseases of respiratory system 26. Ulcer of stomach and duodenum 27. Gastritis, Enteritis and Diarrhoea 28. Nephritis and Nephrosis 29. Hyperplasia of Prostate 29. Hyperplasia of Prostate 30. Pregnancy, Childbirth and Abortion 30. Other defined & ill-defined diseases 31. All other accidents 32. Motor vehicle accidents 33. All other accidents 34. All other accidents 35. Suicide 36. Homicide and operations of war 30. O o o	3. Syphilitic disease	0	0	0
6. Meningococcal infections 0 0 0 0 7. Acute poliomyelitis 0 0 0 0 8. Measles 0 0 0 0 0 8. Measles 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	4. Diphtheria	0	0	0
7. Acute poliomyelitis 0 0 0 0 8. Measles 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	5. Whooping Cough	0	0	0
8. Measles 9. Other infective & parasitic diseases 1 0 1 1 1 1 1 2 1 3 1 3 1 1 2 1 3 1 3 1 1 2 1 3 1 1 2 1 3 1 1 1 2 1 3 1 1 1 2 1 3 1 1 1 2 1 3 1 1 1 2 1 3 1 1 1 1	6. Meningococcal infections	0	0	0
9. Other infective & parasitic diseases 1 0 1 10. Malignant neoplasm, stomach 2 1 3 11. Malignant neoplasm, lung, bronchus 11 2 13 12. Malignant neoplasm, breast 0 1 1 13. Malignant neoplasm, uterus 0 2 2 14. Other malignant & lymphatic neoplasms 10 13 23 15. Leukaemia, Aleukaemia 1 0 1 16. Diabetes 1 4 5 17. Vascular lesions of nervous system 11 19 30 18. Coronary disease, angina 26 22 48 19. Hypertension with heart disease 3 3 6 20. Other heart diseases 10 24 34 21. Other circulatory disease 6 5 11 22. Influenza 2 0 2 23. Pneumonia 8 7 15 24. Bronchitis 6 2 8 25. Other diseases of respiratory system 1 0 1 26. Ulcer of stomach and duodenum 1 1 2 27. Gastritis, Enteritis and Diarrhoea 0 0 28. Nephritis and Nephrosis 2 0 2 29. Hyperplasia of Prostate 3 0 3 30. Pregnancy, Childbirth and Abortion 0 0 31. Congenital malformations 0 1 1 32. Other defined & ill-defined diseases 14 12 26 33. Motor vehicle accidents 8 1 9 34. All other accidents 8 1 9 35. Suicide 2 0 2 36. Homicide and operations of war 0 0	7. Acute poliomyelitis	0	(00	0
10. Malignant neoplasm, stomach 2 1 3 11. Malignant neoplasm, lung, bronchus 11 2 13 12. Malignant neoplasm, breast 0 1 1 13. Malignant neoplasm, uterus 0 2 2 14. Other malignant & lymphatic neoplasms 10 13 23 15. Leukaemia, Aleukaemia 1 0 1 16. Diabetes 1 4 5 17. Vascular lesions of nervous system 11 19 30 18. Coronary disease, angina 26 22 48 19. Hypertension with heart disease 3 3 6 20. Other heart diseases 10 24 34 21. Other circulatory disease 6 5 11 22. Influenza 2 0 2 23. Pneumonia 8 7 15 24. Bronchitis 6 2 8 25. Other diseases of respiratory system 1 0 1 26. Ulcer of stomach and duodenum 1 1 2 27. Gastritis, Enteritis and Diarrhoea 0 0 28. Nephritis and Nephrosis 2 0 2 29. Hyperplasia of Prostate 3 0 3 30. Pregnancy, Childbirth and Abortion 0 0 31. Congenital malformations 0 1 1 32. Other defined & ill-defined diseases 14 12 26 33. Motor vehicle accidents 8 1 9 34. All other accidents 3 1 4 35. Suicide 2 0 2 36. Homicide and operations of war 0 0	8. Measles	0	0	0
11. Malignant neoplasm, lung, bronchus . 11 2 13 12. Malignant neoplasm, breast . 0 1 1 13. Malignant neoplasm, uterus . 0 2 2 14. Other malignant & lymphatic neoplasms . 10 13 23 15. Leukaemia, Aleukaemia . 1 0 1 16. Diabetes . 1 4 5 17. Vascular lesions of nervous system . 11 19 30 18. Coronary disease, angina . 26 22 48 19. Hypertension with heart disease . 3 3 6 19. Other heart diseases . 10 24 34 19. Other circulatory disease . 6 5 11 10. Influenza . 2 0 2 11. Influenza . 2 0 2 12. Influenza . 2 0 2 13. Pneumonia . 8 7 15 14. Bronchitis . 6 2 8 15. Other diseases of respiratory system . 1 0 1 16. Diabetes . 1 1 2 30 17. Vascular lesions of nervous system . 1 0 1 18. Coronary disease . 6 5 11 19. Other circulatory disease . 6 5 11 19. Other circulatory disease . 6 5 11 19. Other circulatory disease . 6 5 11 10. Other diseases of respiratory system . 1 0 1 10. Other diseases of respiratory system . 1 0 1 10. Other diseases of respiratory system . 1 0 1 10. Other diseases . 1 1 2 2 10. Other diseases . 1 1 2 2 10. Other defined & ill-defined diseases . 1 1 1 2 2 10. Other defined & ill-defined diseases . 1 1 1 2 2 10. Other defined & ill-defined diseases . 1 1 1 1 2 2 10. Other defined & ill-defined diseases . 1 1 1 1 2 2 10. Other defined & ill-defined diseases . 1 1 1 1 2 2 10. Other defined & ill-defined diseases . 1 1 1 1 2 2 10. Other defined & ill-defined diseases . 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	9. Other infective & parasitic diseases	8 1	0	o totale
12. Malignant neoplasm, breast 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	10. Malignant neoplasm, stomach	2	1	3
13. Malignant neoplasm, uterus 0 2 2 14. Other malignant & lymphatic neoplasms 10 13 23 15. Leukaemia, Aleukaemia 1 0 1 16. Diabetes 1 4 5 17. Vascular lesions of nervous system 11 19 30 18. Coronary disease, angina 26 22 48 19. Hypertension with heart disease 3 3 6 20. Other heart diseases 10 24 34 21. Other circulatory disease 6 5 11 22. Influenza 2 0 2 23. Pneumonia 8 7 15 24. Bronchitis 6 2 8 25. Other diseases of respiratory system 1 0 1 26. Ulcer of stomach and duodenum 1 1 2 27. Gastritis, Enteritis and Diarrhoea 0 0 28. Nephritis and Nephrosis 2 0 2 29. Hyperplasia of Prostate 3 0 3 30. Pregnancy, Childbirth and Abortion 0 0 31. Congenital malformations 0 1 1 32. Other defined & ill-defined diseases 14 12 26 33. Motor vehicle accidents 3 1 4 35. Suicide 2 0 2 36. Homicide and operations of war 0 0	11. Malignant neoplasm, lung, bronchus	11	2	13
14. Other malignant & lymphatic neoplasms . 10	12. Malignant neoplasm, breast	0	1 1adra	d dvi
15. Leukaemia, Aleukaemia 1 0 1 16. Diabetes 1 4 5 17. Vascular lesions of nervous system 11 19 30 18. Coronary disease, angina 26 22 48 19. Hypertension with heart disease 3 3 6 20. Other heart diseases 10 24 34 21. Other circulatory disease 6 5 11 22. Influenza 2 0 2 23. Pneumonia 8 7 15 24. Bronchitis 6 2 8 25. Other diseases of respiratory system 1 0 1 26. Ulcer of stomach and duodenum 1 1 2 27. Gastritis, Enteritis and Diarrhoea 0 0 28. Nephritis and Nephrosis 2 0 2 29. Hyperplasia of Prostate 3 0 3 30. Pregnancy, Childbirth and Abortion 0 0 31. Congenital malformations 0 1 1 32. Other defined & ill-defined diseases 14 12 26 33. Motor vehicle accidents 8 1 9 34. All other accidents 3 1 4 35. Suicide 2 0 2 36. Homicide and operations of war 0 0 0	13. Malignant neoplasm, uterus	0	2	2
16. Diabetes 1 4 5 17. Vascular lesions of nervous system 11 19 30 18. Coronary disease, angina 26 22 48 19. Hypertension with heart disease 3 3 6 20. Other heart diseases 10 24 34 21. Other circulatory disease 6 5 11 22. Influenza 2 0 2 23. Pneumonia 8 7 15 24. Bronchitis 6 2 8 25. Other diseases of respiratory system 1 0 1 26. Ulcer of stomach and duodenum 1 1 2 27. Gastritis, Enteritis and Diarrhoea 0 0 28. Nephritis and Nephrosis 2 0 2 29. Hyperplasia of Prostate 3 0 3 30. Pregnancy, Childbirth and Abortion 0 0 31. Congenital malformations 0 1 1 32. Other defined & ill-defined diseases 14 12 26 33. Motor vehicle accidents 8 1 9 34. All other accidents 8 1 9 35. Suicide 2 0 2 36. Homicide and operations of war 0 0 0	14. Other malignant & lymphatic neoplasms	10	13	23
17. Vascular lesions of nervous system 11 19 30 18. Coronary disease, angina 26 22 48 19. Hypertension with heart disease 3 3 6 20. Other heart diseases 10 24 34 21. Other circulatory disease 6 5 11 22. Influenza 2 0 2 23. Pneumonia 8 7 15 24. Bronchitis 6 2 8 25. Other diseases of respiratory system 1 0 1 26. Ulcer of stomach and duodenum 1 1 2 27. Gastritis, Enteritis and Diarrhoea 0 0 28. Nephritis and Nephrosis 2 0 2 29. Hyperplasia of Prostate 3 0 3 30. Pregnancy, Childbirth and Abortion 0 0 31. Congenital malformations 0 1 1 32. Other defined & ill-defined diseases 14 12 26 33. Motor vehicle accidents 8 1 9 34. All other accidents 3 1 4 35. Suicide 2 0 2 36. Homicide and operations of war 0 0	15. Leukaemia, Aleukaemia	1	0	1
18. Coronary disease, angina 26 22 48 19. Hypertension with heart disease 3 6 20. Other heart diseases 10 24 34 21. Other circulatory disease 6 5 11 22. Influenza 2 0 2 23. Pneumonia 8 7 15 24. Bronchitis 6 2 8 25. Other diseases of respiratory system 1 0 1 26. Ulcer of stomach and duodenum 1 1 2 27. Gastritis, Enteritis and Diarrhoea 0 0 0 28. Nephritis and Nephrosis 2 0 2 29. Hyperplasia of Prostate 3 0 3 30. Pregnancy, Childbirth and Abortion 0 0 0 31. Congenital malformations 0 1 1 32. Other defined & ill-defined diseases 14 12 26 33. Motor vehicle accidents 8 1 9 34. All other accidents 3 1 4 35. Suicide 2 0 2 36. Homicide and operations of war 0 0 0	16. Diabetes	1	4	5
19. Hypertension with heart disease 3 3 6 20. Other heart diseases 10 24 34 21. Other circulatory disease 6 5 11 22. Influenza 2 0 2 23. Pneumonia 8 7 15 24. Bronchitis 6 2 8 25. Other diseases of respiratory system 1 0 1 26. Ulcer of stomach and duodenum 1 1 2 27. Gastritis, Enteritis and Diarrhoea 0 0 0 28. Nephritis and Nephrosis 2 0 2 29. Hyperplasia of Prostate 3 0 3 30. Pregnancy, Childbirth and Abortion 0 0 0 31. Congenital malformations 0 1 1 32. Other defined & ill-defined diseases 14 12 26 33. Motor vehicle accidents 8 1 9 34. All other accidents 3 1 4 35. Suicide 2 0 2 36. Homicide and operations of war 0 0 0	17. Vascular lesions of nervous system	11	19	30
19. Hypertension with heart disease 3 3 6 20. Other heart diseases 10 24 34 21. Other circulatory disease 6 5 11 22. Influenza 2 0 2 23. Pneumonia 8 7 15 24. Bronchitis 6 2 8 25. Other diseases of respiratory system 1 0 1 26. Ulcer of stomach and duodenum 1 1 2 27. Gastritis, Enteritis and Diarrhoea 0 0 0 28. Nephritis and Nephrosis 2 0 2 29. Hyperplasia of Prostate 3 0 3 30. Pregnancy, Childbirth and Abortion 0 0 0 31. Congenital malformations 0 1 1 32. Other defined & ill-defined diseases 14 12 26 33. Motor vehicle accidents 8 1 9 34. All other accidents 8 1 9 35. Suicide 2 0 2 36. Homicide and operations of war 0 0 0	18. Coronary disease, angina	26	22	48
21. Other circulatory disease 6 5 11 22. Influenza 2 0 2 23. Pneumonia 8 7 15 24. Bronchitis 6 2 8 25. Other diseases of respiratory system 1 0 1 26. Ulcer of stomach and duodenum 1 1 2 27. Gastritis, Enteritis and Diarrhoea 0 0 0 28. Nephritis and Nephrosis 2 0 2 29. Hyperplasia of Prostate 3 0 3 30. Pregnancy, Childbirth and Abortion 0 0 0 31. Congenital malformations 0 1 1 32. Other defined & ill-defined diseases 14 12 26 33. Motor vehicle accidents 3 1 4 35. Suicide 2 0 2 36. Homicide and operations of war 0 0 0	THE PORTS HAVE CONTAINED LIVE AGROUP TOP A	3	3	6
22. Influenza 2 0 2 23. Pneumonia 8 7 15 24. Bronchitis 6 2 8 25. Other diseases of respiratory system 1 0 1 26. Ulcer of stomach and duodenum 1 1 2 27. Gastritis, Enteritis and Diarrhoea 0 0 0 28. Nephritis and Nephrosis 2 0 2 29. Hyperplasia of Prostate 3 0 3 30. Pregnancy, Childbirth and Abortion 0 0 0 31. Congenital malformations 0 1 1 32. Other defined & ill-defined diseases 14 12 26 33. Motor vehicle accidents 8 1 9 34. All other accidents 3 1 4 35. Suicide 2 0 2 36. Homicide and operations of war 0 0	20. Other heart diseases	10	24	34
23. Pneumonia	21. Other circulatory disease	6	5	11
24. Bronchitis 25. Other diseases of respiratory system 1 0 1 2 2 8 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	22. Influenza Veet deet ceet	2	0	2
25. Other diseases of respiratory system 1 0 1 26. Ulcer of stomach and duodenum 1 1 2 27. Gastritis, Enteritis and Diarrhoea 0 0 0 28. Nephritis and Nephrosis 2 0 2 29. Hyperplasia of Prostate 3 0 3 30. Pregnancy, Childbirth and Abortion 0 0 0 31. Congenital malformations 0 1 1 32. Other defined & ill-defined diseases 14 12 26 33. Motor vehicle accidents 8 1 9 34. All other accidents 3 1 4 35. Suicide 2 0 2 36. Homicide and operations of war 0 0 0	23. Pneumonia	8	7	15
25. Other diseases of respiratory system 1 0 1 26. Ulcer of stomach and duodenum 1 1 2 27. Gastritis, Enteritis and Diarrhoea 0 0 0 28. Nephritis and Nephrosis 2 0 2 29. Hyperplasia of Prostate 3 0 3 30. Pregnancy, Childbirth and Abortion 0 0 0 31. Congenital malformations 0 1 1 32. Other defined & ill-defined diseases 14 12 26 33. Motor vehicle accidents 8 1 9 34. All other accidents 3 1 4 35. Suicide 2 0 2 36. Homicide and operations of war 0 0	24. Bronchitis	6	2	8
26. Ulcer of stomach and duodenum 1 1 2 27. Gastritis, Enteritis and Diarrhoea 0 0 28. Nephritis and Nephrosis 2 0 2 29. Hyperplasia of Prostate 3 0 3 30. Pregnancy, Childbirth and Abortion 0 0 0 31. Congenital malformations 0 1 1 32. Other defined & ill-defined diseases 14 12 26 33. Motor vehicle accidents 8 1 9 34. All other accidents 3 1 4 35. Suicide 2 0 2 36. Homicide and operations of war 0 0		1	0	nepm
27. Gastritis, Enteritis and Diarrhoea 0 0 0 28. Nephritis and Nephrosis 2 0 2 29. Hyperplasia of Prostate 3 0 3 3 0 3 3 0 0 0 0 0 0 0 0 0 0 0		1	1 atas	2
28. Nephritis and Nephrosis 2 0 2 29. Hyperplasia of Prostate 3 0 3 30. Pregnancy, Childbirth and Abortion 0 0 0 31. Congenital malformations 0 1 1 32. Other defined & ill-defined diseases 14 12 26 33. Motor vehicle accidents 8 1 9 34. All other accidents 3 1 4 35. Suicide 2 0 2 36. Homicide and operations of war 0 0		0		0
29. Hyperplasia of Prostate 30. Pregnancy, Childbirth and Abortion 31. Congenital malformations 32. Other defined & ill-defined diseases 33. Motor vehicle accidents 34. All other accidents 35. Suicide 36. Homicide and operations of war 30. 31. 32. 32. 33. 34. 34. 35. 34. 35. 35. 35. 35. 35. 35. 35. 35. 35. 35		2	0	2
30. Pregnancy, Childbirth and Abortion 0 0 0 31. Congenital malformations 0 1 1 32. Other defined & ill-defined diseases 14 12 26 33. Motor vehicle accidents 8 1 9 34. All other accidents 3 1 4 35. Suicide 2 0 2 36. Homicide and operations of war 0 0 0	t S laidellava aguntt ok	3	0	3
31. Congenital malformations 0 1 1 32. Other defined & ill-defined diseases 14 12 26 33. Motor vehicle accidents 8 1 9 34. All other accidents 3 1 4 35. Suicide 2 0 2 36. Homicide and operations of war 0 0 0		-	0	0
32. Other defined & ill-defined diseases 14 12 26 33. Motor vehicle accidents 8 1 9 34. All other accidents 3 1 4 35. Suicide 2 0 2 36. Homicide and operations of war 0 0 0	or	0	1	1
33. Motor vehicle accidents 8 1 9 34. All other accidents 3 1 4 35. Suicide 2 0 2 36. Homicide and operations of war 0 0		14	12	26
34. All other accidents 35. Suicide 36. Homicide and operations of war 36. Homicide and operations of war 37. O 0 0		8	1	9
35. Suicide 2 0 2 36. Homicide and operations of war 0 0		3	o charme	224
36. Homicide and operations of war 0 0 0		2	0 0	2
Attention is drawn to the fact that these rates for the Rural	214 - 851SE	. 0	0	0
All causes	to the fact that these rates for the Rural	nwenb	al nolin	Atte
	All causes	132	121	253

(Table 5) THE SEX AND AGE DISTRIBUTION OF DEATHS

	1951	A' 957	ge	6	el V	ale	Fema	le		
	Und	er 1 y	rear	T i	108	7	4		Scarlet Fever	
	36	9 уев	rs			4	2		Whooping Cough	
								101	(paralytic)	
	44	- 19 y				2	0	171	Acute policmyel	
	20	- 29 y	rears			4	1		(non-paralyt	
	30	- 39 y	rears		433	2	0		Monelos	
	40	- 49 y	ears			7	4		Olphtheria	
	02	- 59 y		8	e o	17	4		Cute pneumonia	
									Typhoid & para-	
	60	- 69 y	rears	B		27	13		typhoid fever	
	70	- 79 y	rears	-	THERE	32	41		irysipelas	
	80	- 89 y	rears			28	44		deningococcal infection	
	90	- 99 y	ears	YEA	8	2	8		leningi tis,	
	10								nnapecified	
	1				1	32	121		terperal pyres	
	1					J-			almiading	
	2	T	otal:-	13		25	3		neonatorum	
				-			25		-:slajoT	

Done of these cases was subsequently not confirmed as being policyelitis.

. 5

(Table 6) PREVALENCE OF INFECTIOUS DISEASES

The following is an analysis of the infectious diseases which were notified during the year, with the five preceding years for comparison:-

Disease	her		Totals	for	0 0	
3. Syphilitic disse	1954	1955	1956	1957	1958	1959
Scarlet Fever	11 -	6	17	12	6	29
Whooping Cough	75	74	43	37	36	26
Acute poliomyelitis) (paralytic)	111114		870		001 0	@
Acute poliomyelitis (non-paralytic)	0	altic d	0	- 29 ye	02	20
Measles	144	432	47	235	101	536
Diphtheria	0	0	0	0	0	0
Acute pneumonia	26	8	4	10	20	4
Dysentery	0	1	1000	3	08.6	5
Typhoid & para- typhoid fever	0.78	0	0	0	000	0
Erysipelas	0 55	0	3	- 15 ye	170	0
Meningococcal infection	1 85	0	0	0	08 1	0
Meningitis, unspecified	1	0	0	0	000	0
Food poisoning	0	6	1	2	1	0
Puerperal pyrexia	1 1 58	2	3	2	1	2
Ophthalmia neonatorum	€03	1	-0.53	02 1	2	0
Totals:-	259	531	119	304	179	604

[@] One of these cases was subsequently not confirmed as being poliomyelitis.

THE RURAL DISTRICT OF ALTON

ANNUAL REPORT

OF THE

CHIEF PUBLIC HEALTH INSPECTOR

FOR THE YEAR

The year 1959 was not all 1959

1959

1959

SANITARY CIRCUMSTANCES
OF THE AREA

The following is an analysis of the infectious diseases which were notified during the year, with the five preceding years for comparison:-

SANITARY CIRCUMSTANCES

one of these manners and to end on

ALTON RURAL DISTRICT COUNCIL

Telephone Number:- Barton End,
ALTON 2263. Lenten Str

Barton End, Lenten Street, Alton, Hants.

To the Chairman and Members of the Alton Rural District Council.

Ladies and Gentlemen,

I submit herewith my Report for the year 1959 on the Sanitary Circumstances of the District.

The year has been one of slow but steady progress, except in the field of housing, where work on the slum clearance programme accelerated and due to the Council's generous policies on improvement grants and loans, the standard of housing accommodation is being rapidly improved.

There are, however, still a few pockets of development without piped water supplies, unfortunately so situated that main extensions are uneconomic.

The year 1959 was notable in that Mr. A. E. Bennett, who had been Chief Public Health Inspector and Building Surveyor to the Council since 1920, retired in April and I, who had been his assistant since 1942, was appointed Chief Public Health Inspector.

This, therefore, is my first Annual Report and I wish to express my gratitude to my colleagues, Mr. Wesley and Mr. Mercer, for their help and assistance at all times.

Yours obed ently,

CHIEF PUBLIC WE

ALTON RURAL DISTRICT COUNCIL

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Yours obeddently,

HIMP PUBLIC WOOTH INSPECTOR

PART II

REPORT OF THE CHIEF PUBLIC HEALTH INSPECTOR

SANITARY CIRCUMSTANCES OF THE AREA

WATER SUPPLY

All built-up areas of the District have piped main supplies from the Wey Valley Water Company and the Mid-Wessex Water Company. Supplies have been satisfactory throughout the year, both in regard to quantity and to quality.

Samples from the main supplies are regularly taken for analysis by the Water Undertakers themselves, and copies of analysts' reports are submitted to the Council.

Other domestic supplies in the District are from wells, springs and underground rain water storage tanks.

The following table indicates the number of properties and approximate population served by main water:-

Parish	Area (acres)	Number of Houses	No. of houses supplies	Estimated population supplied
Bentley Bentworth Binsted Chawton East Tisted Farringdon Four Marks Froyle Grayshott Headley Kingsley Lasham Medstead Newton Valence Ropley Selborne Shalden West Tisted Whitehill Wield Worldham	2,483 3,763 7,799 2,194 2,621 2,105 1,502 4,641 901 4,771 1,540 1,797 2,809 2,069 3,704 4,830 2,160 2,356 5,509 2,104 3,868	262 199 534 152 74 182 507 216 481 896 148 47 511 91 438 376 139 1,058 112	261 180 379 104 71 146 460 216 476 884 135 447 40 312 275 119 31 873 62 103	780 540 1,140 310 200 430 1,380 640 1,430 2,650 400 130 1,040 120 930 820 340 90 2,620 180 310
TOTALS:-	65,526	6,562	5,518	16,480

N.B. The above figures apply to private dwellings only and do not include any living accommodation in the Bordon and Longmoor Military Camps which have their own piped water supplies.

As aforesaid all built-up areas have piped main supplies but there still remain isolated pockets of development which rely upon other sources of water supply. Unfortunately, for economic reasons, it has not so far been found possible to extend the mains to these areas.

Samples of water for analysis were taken during the year as follows:-

- (a) For bacteriological analysis ... 14
- (b) For chemical analysis ... 1 vollav you and more

Results:- Satisfactory ... 6 + 1 chemical

Unsatisfactory ... 8

With regard to the unsatisfactory samples, these were from shallow wells at two properties, one at Hollywater, Whitehill, and the other at South Hay, Binsted.

A statutory notice to provide a satisfactory supply was served in respect of the property at Hollywater and the cottage was duly connected to the mains.

With regard to the property at South Hay, a main supply not being available, it was necessary to trace and remove the source of contamination. The existing chemical toilet and sink soakaway were done away with and the soakage area chlorinated. A new septic tank drainage system was installed. The well top was removed and a new top and cover with concrete surround installed. The well was pumped out repeatedly over a long period, samples for analysis being taken during operations until three consecutive samples taken at weekly periods showed the supply satisfactory.

SEWERAGE

Work on the extension of main sewers to Grayshott continued during the year, connection to the treatment works at Lindford being via the Headley system.

Areas of the District already sewered are as follows:-

- (a) Part of Bentley, the effluent being treated by broad land irrigation.
- (b) The Holt Pound area of Binsted, with discharge into the sewers of the Farnham Urban District Council.
- (c) Lindford, Bordon and Whitehill in the Parish of Whitehill, together with the Bordon Military Camp, with discharge into the Council's own treatment works at Lindford.
- (d) Arford and Headley Down in the Parish of Headley, also discharging into the Lindford treatment works.
- (e) Part of the Parish of Grayshott in the areas where sewers became available during the general extension to the Parish.

Generally the larger Council housing estates where sewers are not available are provided with their own treatment plants.

DOMESTIC DRAINAGE

During the year connections to the Council's sewers continued steadily. Where a system with a septic tank or cesspool is connected to a sewer, the tank is emptied and filled with soil or rubble after perforating the base of the tank to allow the escape of subsoil water.

In areas not provided with sewers, the provision of new septic tank systems also continued steadily.

Connections to sewers during the year were as follows:-

Area	Connections during 1959		nnections date
(8.1)	Private	Private	Council Houses
Holt Pound	1	67	0
Whitehill	24	455	292
Headley	78	227	108
Grayshott	93	112	16
TOTALS:-	196	861	416

MOVEABLE DWELLINGS

There was no significant change in the general situation during the year.

There were 14 new licences issued; 17 caravans left the District. The position at the end of the year was:-

Licensed Parks:-

9 licences in force for 60 dwellings & 1 licence for 50 holiday caravans.

Individual Sites:- 46 licences in force for 46 dwellings.

Four of the parks, licensed for 23 dwellings, are occupied by the "traveller" type of family who occupy the converted bus type of dwelling.

One park at present licensed for 17 caravans has Planning permission for 56 and the owner proposes to continue the development by stages. This park, however, is in the nature of a show-piece, each plot having its own brickbuilt bathroom and water closet, connected to the Council's sewer.

Frequent visits are made to all sites occupied by caravans, more attention being paid to the "encampments" occupied by the "travellers". In several cases where large families were concerned, the occupiers were prevailed upon either to provide larger vans or to provide additional vans for sleeping purposes only.

There are no particular public health problems in connection with moveable dwellings, except in connection with those occupied by the "traveller" type, which need fairly constant supervision.

A good proportion of the licences issued are for temporary occupation during the erection of dwellings on the particular site, this mainly accounting for the number of caravans leaving the District.

The individual sites are well scattered throughout the District whilst the parks (sites occupied by more than one moveable dwelling) are practically all in the parish of Whitehill.

ACCOMMODATION FOR HOP-PICKERS

Control over accommodation for hop-pickers provided by farmers is by means of Byelaws made by the Council under Section 270 of the Public Health Act, 1936.

These Byelaws contain provisions relating to repair, cleanliness, overcrowding, cooking and sanitary facilities, water supply etc. and during the picking season regular visits were made to ensure compliance with these Byelaws. Only minor infringements were noted, dealt with immediately by informal action.

The number of huts in use and of pickers employed has declined enormously since the installation of hop-picking machines which are operated mainly by local labour.

There were 11 machines in use during the season and only 4 hutted encampments and 1 tented encampment were in use.

FACTORIES

Under the provisions of the Factories Act, 1937, the District Council is the authority responsible for enforcing the provisions regarding sanitary accommodation in all factories and, in addition, the provisions with respect to cleanliness, overcrowding, workroom temperature and ventilation, and floor drainage in all factories where mechanical power is not used.

The following particulars are those prescribed on the administration of the above Act:-

PART I OF THE ACT

1 - INSPECTIONS for purposes of provisions as to health (including inspections made by Public Health Inspectors)

durli	The County of total	Number	Number of			
105 105	Premises	Register	Inspections			
(0)7	(1)	(2)	(3)	(4)	prosecut- ed (5)	
(i)	Factories in which Sections 1,2,3,4 & 6 are to be enforc -ed by Local Auth- orities	9	3	1	0.00	
(11)	Factories not in- cluded in (i) in which Section 7 is enforced by the Local Authority	54	30	3	0	
(111)	Other Premises in which Section 7 is enforced by the Local Authority (excluding out- workers' premises)	120	62	0	Sterenz Sterenz Ide O'om di The "trev	

2 - Cases in which DEFECTS were found
(If defects are discovered at the premises on two, three or
more separate occasions they should be reckoned as two,
three or more "cases")

Particulars	Numbe		es in whice found	30 -6	cases	in which	
100000000000000000000000000000000000000	Found	Remedied	Refers	rea	were	institute	a
(1)	(2)	(3)	Inspector (4)		e des	(6)	200
Vant of clean -liness (S. 1)	1	0	0	1	en al	0	
Overcrowding (S. 2)	0	0	0	0		0	1 2 1
Unreasonable temperature (8.3)	0	0	0	0		0	10
Inadequate ventilation (S.4)	0	0	0	0		0	200
Ineffective drainage of floors (S.6)	0	0	0	0		0	TO GO
Sanitary Conveniences (S.7) (a)Insufficien	t 2	2	0	1	igor loid at r	0	20
(b) Unsuitable or defective	2	2	0	0	dry,	0	The
(c) Not separ- ate for sexes		0	0	0	送 加	0	nU
Other offences against the Act (not in- cluding offen -ces relating to Outwork.	0	0	0	0	n car o be name aloge	0	to as
TOTAL:-	5	4	0	2	VI.O.	0	r edi

PART VIII OF THE ACT

Outwork (Sections 110 and 111)

	300000	Section 1	10	Se	ction 111	- anis
Nat- ure of work	No. of out-workers in August list required by Section 110(1)(c)	No. of cases o default in sendi lists t the Counc	f prosecu- tions for ng failure to supply	unwhole-	Notices served	Prose- cutions
(1)	(2)	(3)	(4)	(5)	(6)	(7)
Toy Manu- fact- urers (mak- ing of boxes or other		0	0	0 195	t (r.s	ilbworo- airi(S alona dition diarona
tacles or parts thereo made wholly or partis of par	of l				0 10	dmin- ofaccet trafits (d. luding vircell ogania () eroo

Of the above registered factories, these mainly consist of garages (motor vehicle repairs) - 23, and builders' yards (joinery) - 13. There is 1 factory engaged on fibre glass fabrications, 2 concrete block works, 1 light engineering factory, 2 blouse factories, 1 laundry, 1 brickworks and 1 toy factory.

There is only 1 factory, the fibre glass works, employing over 20 persons.

Under Section 34 of the Factories Act, 1937 certain factories need to be certified by the Council as being provided with such means of escape in case of fire for the persons employed therein as may reasonably be required in the circumstances of each case.

Whether or not a factory needs such certification depends on the number of employees or the storage or use of highly inflammable materials.

Six premises in the District were inspected particularly for this purpose and four were found to need such certificates in view of the use of highly inflammable materials.

Detailed inspections were made in conjunction with the Fire Prevention Officer of the Hampshire Fire Brigade and the necessary certificates were duly issued after completion of various works recommended by the Fire Prevention Officer.

INSPECTION AND SUPERVISION OF FOOD

There are no slaughterhouses in the District. The slaughterhouse in the Alton Urban District which was at one time run as a joint slaughterhouse by the Urban and Rural District Councils, subsequently reverting to private control, is now used only on occasion. It would appear that the other private slaughterhouses in the Urban area, together with the facilities in surrounding districts, are sufficient for the needs of the Rural District.

The following foodstuffs were inspected in shops and stores and surrendered for condemnation:-

- 59 tins (3271 lbs)
- 10 tins (28 lhs)
- 21 tins (229 lbs)
- 2 tins (2 lbs)
- 1 tin (30 ozs)
- 4½ lbs.
- 42 lbs.
- 11 lbs.

MILK

All milk retailed in the District is now pasteurised, sterilised or tuberculin tested. The retail sale of milk is controlled by licences and the following shows details of such licences grant-ed by the Council:-

Pasteurised

	Pasteurising licences	0
	Dealers' licences	4
	Supplementary licences	7
terilised		

Sterilisers' licences		 0
Supplementary licences	300	 4

Dealers'	licen	nces	 	3
Supplemen	tary	licences		5

23 samples of milk were taken and submitted for examination for efficiency of pasteurisation.

All the samples were found satisfactory.

There are no ice cream manufacturers in the District and no clean food organisation exists.

39 premises are registered under Section 16 of the Food and Drugs Act, 1955, for the sale of ice cream. These are all village stores retailing pre-packed ice cream, kept in refrigerators.

FOOD HYGIENE REGULATIONS

These Regulations contain provisions in respect of the hygienic handling of food and the construction and maintenance of premises where food is handled. A memorandum on the provisions of the Regulations has been circulated to the occupiers of all food premises in the District and routine inspections have been made. Generally speaking all premises comply with the requirements of the Regulations except in minor respects and full compliance was obtained by informal action.

The number and type of food premises in the area are as follows:-

Bakehouses	4
Baker's shops	1
Butchers	14
Cafes	15
Chemists	3
Clubs and institutions	17
Confectioners	5
Fishmongers	2
Food warehouses	1
General stores	70
Greengrocers	3 2
Hotels	
Public houses	45
School kitchens	23
Wine merchants	2
Dairies	3
Sweet factory	1
Mobile canteen	1

All the above are retail or wholesale premises. There are no food manufacturers.

No occasions arose for formal action against the occupiers of food premises and there were no prosecutions.

FOOD SAMPLING

Sampling of food for adulteration is carried out by the Hampshire County Council (as the Food and Drug Authority) and I am indebted to Mr. J. S. Preston, M. I. W. M. A., Chief Inspector of Weights and Measures, for the following information which he has supplied:-

During the year ended the 31st December, 1959, 55 samples were procured under the Food and Drugs Act, 1955, within the area of the Alton Rural District Council.

Milk Samples

37 samples of milk, including six of Channel Islands, were obtained and in only one case was an adverse report received. This affected a bottle of pasteurised milk from a Dairy situated outside the County, which proved to contain a very slight amount of added water of the order of one per cent. In the circumstances the result was referred to the Authority in whose area the Dairy is situated, and subsequent checks by this Authority and in the County, proved to be satisfactory. It was thought that the presence of water might have been due to insufficient drainage of the pasteurising plant before the first of the milk was passed through it.

Miscellaneous Articles

Of 18 samples of articles other than milk, four were unsatisfactory as follows:-

- (i) Minced Beef incorrect label.
- (ii) Minced Beef with Gravy incorrect label.

These samples were obtained from different retailers but were produced by the same company. The first sample was reported to contain insufficient meat to warrant the description "Minced Beef", whilst in the second case, the wording of the label, which had been modified by the company in respect of the same product, was regarded as satisfactory, but objection was taken to the form of the additional words "With gravy", these not being readily discernible. These matters were raised with the company responsible, who eventually agreed to make a further revision of the label applied to their product in order to overcome the objections.

- (iii) Double Cream deficient of fat.
- (iv) Double Cream deficient of fat.

These two samples were from different producers and were in cartons bearing the description "Double Cream", which requires a minimum of 48 per cent of fat. Both articles contained sufficient fat to enable them to be sold as "cream", and inquiries disclosed that the vendors had unwittingly used cartons without appreciating the higher fat content denoted by the description "Double Cream". In view of what was accepted as a genuine misunderstanding in each case, however, further action was not taken, but the position was made known to the vendors. Appropriate cartons were immediately obtained by these persons, and there has not since been any further cause for complaint.

General

It will doubtless be appreciated that many products sold within the Alton Rural District are subjected to checks in other areas. This remark applies particularly to pre-packed articles, and in certain cases to milk received from Dairies outside the immediate locality.

RODENT CONTROL

Under the Prevention of Damage by Pests Act, 1949, the primary obligation is upon the Council to ensure that so far as it is practicable, its area is kept free from rats and mice, although it does not relieve the owners or occupiers of premises of their responsibility for the actual destruction of rats and mice.

In accordance with the above, the Council's Rodent Operator makes regular routine inspections of all agricultural and commercial property, drawing the occupiers' attention to any infestations and advising when required on methods of treatment.

Although a general service of treatment is not given, it is found desirable in some cases affecting agricultural and commercial property, particularly where infestations affect more than one property, for a treatment service to be given upon charge on an "ad hoc" basis. As regards private houses, a free treatment service is given upon request.

Appreciation is expressed to Mr. J. W. Debenham, the Council's Rodent Operator, for his efficient services rendered during the year.

The Council's Rodent Operator carried out general inspections and treatments throughout the District as follows:-

ngo atores retailing	pro-payer	Paraletho			
label. Charkyn kurding a gapt	Council	Private	Agricul -tural	Other	Totall)
Number of properties in District.	6	6,231	632	186	7,055
Number of properties inspected.	6	221	309	83	619
Number of properties infested.	6	177	51	34	268
Number of properties treated.	6	171	26	30	ry esent

In connection with the above tables as regards type of property, Council houses are included under column "private", the Council property referred to being refuse tips, sewage works, depots and the like.

The tables relate only to the number of properties inspected and/or treated and not to the number of inspections or visits. Treatments always involve several visits during the work and follow-up visits to ensure total clearance of infestation. The Council properties are visited regularly once a month and oftener if necessary.

The number of inspections and/or visits actually made were:-

Council properties	mer a 73
Dwelling houses (private)	654
Agricultural premises	409
Business and other premises	168

Total:-ver91,304rebnU

As regards infestation of sewers, this is no problem as all are new. Periodically test baits are laid in the more vulnerable sections and should at any time a "take" be found then the whole of the particular system will be treated. So far no "takes" have been recorded in any of the Council sewers.

In addition to the service of Rodent Control, assistance was also given to the public in connection with other pests as follows:-

Wasps' nests de	estroyed	39
Treatments for	flies	v510gorg I
Treatments for	fleas	9
Treatments for	cockroaches	2
Disinfections		in Apprehit

PET ANIMALS ACT, 1951.

There are no premises in the District licensable under this Act.

HOUSING ACTS

Further progress was made with the Council's programme of slum clearance.

Number of houses demolished as a result of formal action		10	
Number of houses demolished by owners voluntarily	df eonin t		
Number of houses rendered fit as a result of formal action		5	
Number of houses rendered fit as a result of informal action		11	

Of the 10 houses demolished as a result of formal action, 3 were demolished in default by the Council and expenses recovered from the respective owners.

RENT ACT, 1957.

There was only one application received for a Certificate of Disrepair under the above Act, work being carried out by the owner immediately upon vacation by the tenant who was under notice to quit.

IMPROVEMENT GRANTS FOR HOUSING

The House Purchase and Housing Act, 1959, came into force on the 14th June, 1959, and introduced a new system of "standard grants" to supplement the existing system of "discretionary grants", at the same time making a number of changes in the latter.

The new grants became available only towards the cost of installing "standard amenities", i.e., a bath, a water closet, a wash hand basin, a hot water supply and a food store, in dwellings which lacked any of these amenities but differing from "discretionary grants" in that they are claimable as of right, subject to conditions. The amount of grant is one-half of the cost actually incurred on the works, subject to a maximum grant of £155.

The main changes in "discretionary grants" system are in the conditions, the conditional period being reduced from 20 years to 10 years, and the letting requirement being relaxed so that a property can be sold after 3 years from completion of improvements to another owner/occupier.

DISCRETIONARY GRANTS

Applications for discretionary grants continued to increase during the year, 38 proposals in respect of 52 houses being approved, bringing the grand total since inception of the scheme to 181 proposals for 274 houses. Of these, 209 properties had been completed by the end of the year, 41 during 1959.

The estimated cost of works shown below relates to works of improvement only and do not include the cost of incidental repairs. Such repairs, however, have to be effected to comply with the standard. Thus 41 houses during the year under this scheme were thoroughly repaired as well as improved, thus obviating any possible action under the repair sections of the Housing Acts.

It follows that since the inception of the Discretionary Improvement Grant Scheme, 209 houses have been made fit in all respects.

	Constitution of the second sec	the state of the s	
11	During 1959	Up to 1959	Total
Number of formal approvals granted	38	143	181
Number of houses in approved applications	52	222	274
Number of houses in completed schemes	41	168	209
Estimated cost of works	£45,112	£123,053	£168,165
Amount of grant approved	£17,010	£58,109	£75,119
Average cost of work per house	£867	£554	£614
Average grant per house	£327	£262	£274

It will be noted that the average cost of work per house increased sharply during the year. This is accounted for, mainly, by the fact that of the 52 houses for which grants were approved, the cost of works for 10 were between £800-£1,000; for 10 between £1,000-£2,000; with 1 between £2,000-£3,000 and 1 over £3,000. These latter two were for conversions of stable blocks to individual dwellings.

Of the 274 houses in approved applications, 78 were for owneroccupiers, 187 for farms and estates, and 9 only for tenanted
houses.

STANDARD GRANTS

There was a prompt response from the public to this new system of grants. For the period from 14th June, 1959, to 31st December, 1959, there were 44 applications, of which 36 received immediate approval. The total maximum grant applicable to the approved schemes amounted to £5,625, although in fact every application did not finally rank for a maximum grant as seen below.

It was noted that a number of standard grant schemes took longer over execution than discretionary grant schemes, this being accounted for by the fact that in these cases work was being done on the "do it yourself" principle by the owners at evenings and weekends. In all such cases so far completed, however, the quality of workmanship has been found entirely satisfactory.

Contrary to the discretionary grant scheme where a single application can cover a number of houses, a separate application for each house is necessary for standard grants, so that the number of applications and number of houses concerned are the same.

Applications Maximum Grant		Completed Schemes				
Jesebool Rentyly	applicable	Num-	Max-		Grant	Savings
us rollmar-	wate properties	Nora	grant applicab-	Cost	Case 2	Maximum
Submitted	Total number of	Leboul		new pr	to te	
44	£6,290	AL SHOT	reduct		8800	There we
Approved	ings are sinte	build	These		the v	galrub bei
36	£5,625	6	£790	£1,438	£675	£115

Average Cost per house ... £240

Average maximum grant per house ... £131

Average actual grant per house ... £112

These averages are on the low side as 2 of the 6 completed schemes only qualified for a small grant, thus bringing down the overall average. Over a longer period, I anticipate that the average grant will be very near to the maximum applicable.

Of the 36 approved applications, 30 were for owner-occupiers, 5 for farms and estates and only 1 for a tenanted house.

PETROLEUM SPIRIT AND MIXTURES

The storage of petroleum spirit and mixtures containing petroleum spirit is subject to strict control by annual licence. All licences contain conditions based on the model code of the Home Office.

85 licences were issued and t new installation was inspected and tested. Routine visits were made to other existing installations. No infringements were found during the year.

I am indebted to the Council's Engineer and Surveyor, Mr. Mr. Mara John Blackwell, M. I. Mun. E., M. R. S. H., Chartered Municipal Engineer, for the following statistics relating to Building Byelaws and Planning, local authority housing, sewerage and public cleansing.

BUILDING BYELAWS AND PLANNING

The total number of plans deposited with the Council for the building works and development was as follows:-

New private dwellings	000	160
Alterations and additions	000	174 1000 11
Conversions and adaptations of buildings to dwellings	ses i	all auch ca
Domestic drainage	nes va	199
Domestic garages	10001	83 od riose
Sheds and stores	B and	applica 8 on
Farm and other buildings		48
Planning applications only, i.e., electricity lines, outline applications, moveable dwellings etc.	ano	344 ⁸¹
Total number of plans deposited:-	-	929

The number of new private dwellings completed by private enterprise during the year was 101.

There was a further reduction in the number of temporary building licences in force, i.e., 17, no new licences being issued during the year. These buildings are all regularly inspected with a view to maintenance in a good state of repair.

PUBLIC WORKS

HOUSING

The number of dwellings provided by the Council as at 31st December, 1959, was as follows:-

Pre-War dwellings, permanent	10 The viels of	62
Post-War dwellings, permanent		742
Post-War dwellings, temporary	00000	116
Total number of dwellings:-		920

During the year no new permanent Council houses were completed.

SEWERAGE

Sewage received and treated at the Council's sewage works at Lindford was at the rate of 324,198 gallons per day. This figure shows a steady annual increase.

These works treat sewage from Bordon, Whitehill, Lindford, Headley, Grayshott and the Military Camp at Bordon. and tested. Routine visits were made to oth

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PUBLIC CLEANSING

All public cleansing work is carried out by the Council's own vehicles and staff.

Refuse Collection

A general scheme of full refuse collection operates throughout the District. Weekly collections are made in the Parishes of Whitehill and Grayshott, the remainder being served fortnightly.

The Council also undertake a weekly collection of domestic refuse from the married quarters in the Bordon and Longmoor Military Camps, together with regular removal of refuse from unit incinerators (approximately 90 cubic yards per week).

The refuse collecting vehicles averaged a total of 3,864 miles per month, collecting an average per month of 2,714 cubic yards of refuse.

Disposal of refuse is by means of controlled tipping at various tips throughout the District. The main tip is on Council land at Headley.

Cesspool Emptying

Cesspools and septic tanks were emptied upon request by owners as follows:-

Private properties 1,272 loads Council properties 1,491 loads

Total number of loads (750 galls approx) 2,763

Nightsoil Collection

Collections of nightsoil are made in defined areas of most Parishes, some twice weekly and some once weekly.

The cesspool and nightsoil vehicles averaged a total of 1,667 and 1,351 miles per month respectively.

Nightsoil collections decrease as new domestic drainage systems are installed and cesspool emptying increase accordingly.

Public Conveniences

The Council maintain public conveniences at Bordon and Grayshott.

Depots

The cleansing service vehicles operate from depots at the Council Offices in Alton and at the Sewage Works at Lindford.

1,667 and 1,354 miles per month respectively.



