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ALTON URBAN DISTRICT COUNCIL



ANNUAL REPORT

of the

Medical Officer of Health

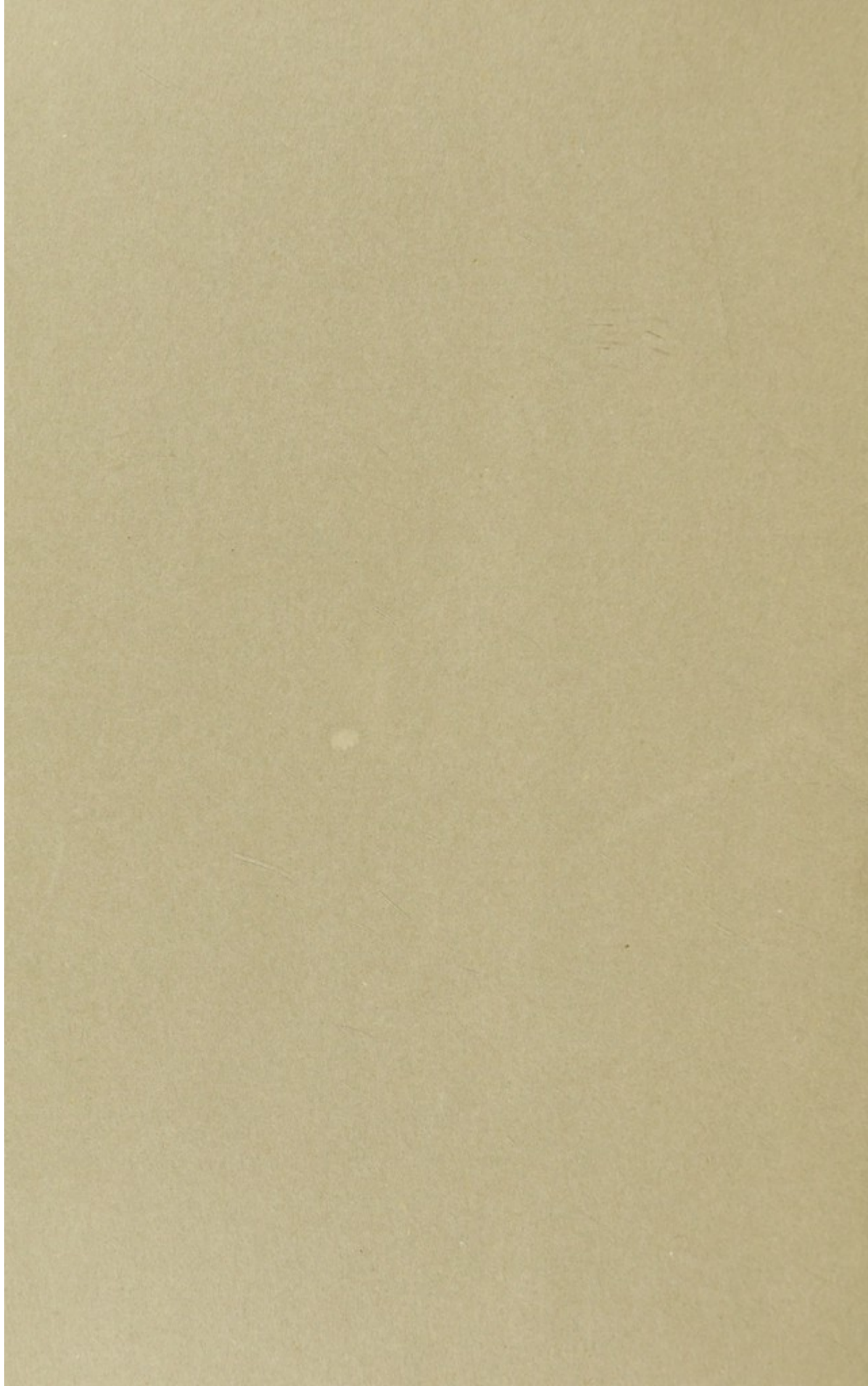
and

Chief Sanitary Inspector

for the year

1953





ALTON URBAN DISTRICT COUNCIL

Chairman of Council—

Councillor A. G. Finnimore

Vice-Chairman of Council—

Councillor B. C. Scurr

Public Health Committee

Chairman—

Councillor F. C. Jenner

Members as at 31/12/53

Councillor A. N. Bissett

Councillor Mrs. G. M. Pitt

„ A. G. Finnimore

„ B. C. Scurr

„ H. H. Mylward

„ A. G. Stickland

„ C. Passey

Staff

Medical Officer of Health—

Randall Martin, M.B., Ch.B. (Aber.)
D.P.H. (Edin.)

*Chief Sanitary Inspector and
Meat and Food Inspector—*

G. H. Webb, M.I.Mun.E., C.R.S.I.
Resigned 10-10-53.

C. L. Hunt, A.R.San.I., M.S.I.A.,
C.S.I.B.

Surveyor & Public Cleansing,

Scavenging and Water Works— F. T. Cornhill, A.M.I.Mun.E.,
M.R.S.I. Appointed 1-10-53

Clerk—

G. M. Stewart. Resigned 30-9-53

M. G. Worthington.
Appointed 19-10-53

ALTON URBAN DISTRICT COUNCIL,
COUNCIL OFFICES,
HIGH STREET, ALTON.

Mr. Chairman, Ladies & Gentlemen,

I beg to submit my annual report on the health and sanitary circumstances of your district for the year 1953.

As shown by the statistics the health of the community is good, the only factor causing concern is the relatively large increase in cases of non respiratory tuberculosis. This is being investigated to determine the reason and to obviate a similar recurrence of the disease.

With regard to the sanitary circumstances of the district you will note from the report of the Sanitary Inspector that steady progress is being maintained, and conditions in the area are being improved by the extension of water supplies and by the work in hand at the sewerage works.

Throughout the year I have had invaluable assistance from the staff. Mr. Webb who served your council since 1920 retired during the year and was succeeded by Mr. Hunt as Sanitary Inspector and by Mr. Cornhill as Surveyor. Mr. Cornhill is responsible for Public Cleansing, Sewerage and Water Supplies, three essential services to the public which have a very direct bearing on the health and happiness of the community. These are also directly affected by the very important and multifarious duties of the Sanitary Inspector, as is borne out by that section of the report, and the combined duties of Sanitary Inspector and Housing Manager is a combination from which much good accrues to the community.

My personal thanks are due to them for their unfailing and loyal co-operation.

RANDALL MARTIN.

STATISTICS OF THE DISTRICT

Area, in acres	4,085
Rateable Value, 1952-53	£65,031
Sum represented by a penny rate, 1952-53	£255
Population	8,581
Number of inhabited houses	2,764

Natural and Social Conditions of the Area

The Urban District consists of the market town of Alton with a small area of the adjacent countryside and includes the village of Holybourne on its Eastern boundary. The town serves the neighbouring country district and a Market is held every Tuesday.

The town has many buildings of historical note and retains the essential character of an English market town. The mainstay of the populace is the trading in relation to the neighbouring agricultural district. There are also two large breweries situated in the town, a battery making company, a manufacturer of prosthesis, an iron foundry and various other small engineering works, all of which give employment to residents.

The main communications in the district are the London-Southampton Road and Alton is the terminus for the electrified railway from Waterloo.

VITAL STATISTICS

Births.

	MALE	FEMALE	TOTAL
Live Births (Legitimate)	53	68	121
(Illegitimate)	7	7	14
Total Births	60	75	135
Live birth rate per thousand estimated population			15.7
Live birth rate per thousand estimated population, England and Wales			15.5
	MALE	FEMALE	TOTAL
Still Births (Legitimate)	0	1	1
(Illegitimate)	0	0	0
Totals	0	1	1
Still birth rate per thousand total live and still births			7.4
Still birth rate per thousand total live and still births, England and Wales			22.4

The comparability factor for 1953 for Alton is 1.00, therefore the birth rate for this area is comparable with that for England and Wales.

Deaths.

	MALE	FEMALE	TOTAL
From all causes—	61	41	102
Death rate per thousand estimated population			11.9
Death rate per thousand estimated population, England and Wales			11.4

Infant Mortality.

	MALE	FEMALE	TOTAL
Deaths of infants under one year of age—			
(Legitimate)	2	0	2
(Illegitimate)	0	0	0
	—	—	—
Total	2	0	2
	—	—	—
Rate per thousand live births			14.8
Rate per thousand live births, England and Wales ..			26.8

Neo-Natal Mortality.

No deaths of infants under four weeks of age occurred during 1953.

Maternal Mortality.

There were no deaths of mothers arising from pregnancy, child birth or abortion during the year.

The comparability factor for this district is .89, therefore the adjusted death rate for this district is 10.6. Allowance thus being made for local differences in the sex and age distribution of the population, this figure is therefore the one used for comparison with England and Wales.

Attention is drawn to the fact that the rates given above, owing to the relatively small numbers involved, are not statistically significant and rate comparisons with other districts and earlier years is misleading.

CAUSES OF DEATH

	Diseases	Male	Female	Total
1	Tuberculosis, respiratory	2	0	2
2	Tuberculosis, other	0	0	0
3	Syphilitic disease	0	0	0
4	Diphtheria	0	0	0
5	Whooping Cough	0	0	0
6	Meningococcal infections	0	1	1
7	Acute poliomyelitis	0	0	0
8	Measles	0	0	0
9	Other infective and parasitic diseases ..	0	0	0
10	Malignant neoplasm, stomach ..	2	0	2
11	" " bronchus ..	2	1	3
12	" " breast ..	0	2	2
13	" " uterus ..	0	0	0
14	Other malignant and lymphatic neoplasms	6	3	9
15	Leukaemia and Aleukaemia	1	0	1
16	Diabetes	0	1	1
17	Vascular lesions of nervous system ..	3	4	7
18	Coronary disease, angina	7	4	11
19	Hypertension with heart disease ..	4	1	5
20	Other heart diseases	16	5	21
21	Other circulatory diseases	0	2	2
22	Influenza	0	3	3
23	Pneumonia	4	4	8
24	Bronchitis	1	1	2
25	Other diseases of respiratory system ..	2	1	3
26	Ulcer of stomach and duodenum ..	0	0	0
27	Gastritis, Enteritis and Diarrhoea ..	0	0	0
28	Nephritis and Nephrosis	1	0	1
29	Hyperplasia of Prostate	2	0	2
30	Pregnancy, Childbirth and Abortion ..	0	0	0
31	Congenital malformations	1	1	2
32	Other defined and ill-defined causes ..	5	6	11
33	Motor vehicle accidents	0	0	0
34	All other accidents	0	1	1
35	Suicide	2	0	2
36	Homicide and operations of war ..	0	0	0
	All causes	61	41	102

From this table it is seen that the commonest cause of death was diseases of the heart and blood vessels (39), followed by diseases of the lungs (16) and malignant conditions (16). There was only one death amongst the infectious diseases during the year, namely a case of meningitis. This group of diseases accounted for many children's deaths in the past. However, the infectious diseases (measles and whooping cough, etc.) should never be regarded lightly and early medical care and attention sought in such cases.

Accidents, however, now account for many deaths and for more crippling conditions than the infectious diseases, including

poliomyelitis. One accidental death was recorded during the year. The continued vigilance of parents is required both in the home and on the road to prevent accidents.

Recorded Age at Death.

Age group	Males	Females	Total
0—9 ..	2	1	3
10—19 ..	0	0	0
20—29 ..	0	0	0
30—39 ..	0	2	2
40—49 ..	0	2	2
50—59 ..	2	5	7
60—69 ..	17	7	24
70—79 ..	28	10	38
80—89 ..	11	13	24
90—99 ..	1	1	2
	61	41	102

An indication of the longevity of mankind and the efficiency of the medical services is borne out by the age at death—62.7% of the persons who died were over the age of 70 years. The recorded age at death of the oldest persons dying during the year was that of a man aged 94 and of a woman aged 91.

The problem of the ageing community is a national one as well as a local one and calls for special consideration. The onus of the younger generation to look after their ageing and aged parents is not always fully met. The shortage of housing accommodation generally emphasises this and the Council in their future housing policy must consider the provision of suitable small homes to accommodate the aged within the community. The alternative is accommodation in an old people's home at increased cost to the state and at variance with the wishes of these old people, who are often people of independence and character who wish to be associated with their own area towards the close of their lives. Assistance with meals, shopping and small household duties can be given to the aged in their own homes by the Home Help Service operative in the district. q.v.

Prevalence of Infectious Diseases.

The following is an analysis of the infectious diseases notified during the year.

Disease	1953	1952
Scarlet Fever	3	5
Whooping Cough	32	12
Measles	91	6
Acute Primary Pneumonia	10	18
Poliomyelitis (paralytic) ..	2	1
Puerperal pyrexia ..	2	0
Totals	140	42

The age and sex distribution of the commonest diseases is :

Age group	Scarlet Fever		Whooping Cough		Measles		Acute Primary Pneumonia	
	M	F	M	F	M	F	M	F
0—4 ..	0	0	9	11	15	8	1	1
5—14 ..	3	0	7	2	39	22	0	0
15 and over..	0	0	1	2	5	2	3	5
Totals ..	3	0	17	15	59	32	4	6

The majority of the cases of whooping cough and measles occurred in the 2nd quarter of the year and represents the end of the epidemic of these diseases which occurred during the winter 1952-53.

There was no case of food poisoning notified during the year and no case of ophthalmia neonatorum was intimated.

The Minister of Health has had under review the arrangements for co-operation between hospitals and M.O's.H. regarding outbreaks of communicable diseases in Hospital. To this end he has recommended that the hospital authorities set up control of infection committees. It is important that the M.O.H. be informed of all outbreaks if he is to be in a position to discharge his general responsibilities for the health of his area. This applies not only to the notifiable diseases but also to communicable diseases of epidemiological importance.

Tuberculosis.

During the year 1953, seven cases of pulmonary tuberculosis and eleven cases of non-pulmonary tuberculosis were added to the register.

The following table indicates the age and sex distribution :

Age group	Pulmonary		Non-Pulmonary	
	M	F	M	F
Under 1 ..	—	—	—	—
1—4 ..	—	—	1	—
5—9 ..	—	—	—	2
10—14..	—	—	—	2
15—19..	—	—	1	1
20—24..	—	1	—	—
25—29..	—	—	—	1
30—34..	1	—	—	—
35—39..	—	1	—	1
40 and over ..	1	3	—	2
Totals ..	2	5	2	9

There were two deaths of men from respiratory tuberculosis during the year.

The figure of eleven non-pulmonary cases however calls for comment. The figures for earlier years are shown for comparison.

43—1	48—2
44—0	49—4
45—1	50—3
46—4	51—2
47—0	52—4

These figures show that there has been a marked increase during 1953 of cases of non-respiratory tuberculosis; when this occurs the milk supply becomes suspect and investigations into the cause of this increase were instituted.

By Section 28 of the N.H.S. Act, 1946, Statutory responsibility for preventing tuberculosis is placed upon the County Council and they are predominantly responsible for this duty. However, the hospital services and in particular the physicians in charge of chest clinics have a part to play in prevention of tuberculosis; and on district Councils are placed statutory duties as sanitary authorities under the P.H. Acts, and as housing authorities which have an important part in preventing the spread of Tuberculosis infection. The investigation mentioned above is an example. Towards co-ordinating such preventive work; consultation with chest Physicians and the County Council is being arranged.

The maintenance of a register of tuberculosis and the transfer of information from hospitals to district medical officers are not statutory duties but the Minister has urged that these still be carried on. The notification of cases of tuberculosis to District M.O's.H. is provided for by the P.H. (Tuberculosis) Regs., 1952.

For the proper assessment of the amount of tuberculosis in the district, these three administrative measures are important.

The gravity of the tuberculosis problem in this country appears to have lessened to some extent and although the mortality from tuberculosis has fallen the morbidity has not. This is evidenced by the increased notifications referred to above.

Tuberculosis is a national problem and efforts to combat it require action from most sections of the community, lay as well as medical, and in view of the increase in this district the early intimation of a case and a search for contacts and source of infection is important as it is the only way to find and treat cases of this infectious disease.

The chief objects of notification have been cited as :

1. To put the doctor and patient in touch with schemes of treatment.
2. To secure statistical information about the prevalence of the disease.

3. To bring the case to the notice of the P.H. Dept. whose duty is to co-operate with the particular G.P. in preventive measures.

Notification is information which is confidential. Both doctor and patient may have fears that notification may mean the leakage of this information to employers and neighbours and the patient and his relatives object to the supposed stigma attaching to such a diagnosis and the subsequent visits by P.H. officials. With regard to this latter point, co-operation between G.P. and the P.H. dept. can obviate further difficulties.

The question however of persons suffering from open pulmonary tuberculosis who are food handlers and in particular employed in the milk trade is covered by legislation designed to obviate this possible manner of spreading the infection.

No action was necessary relating to persons suffering from pulmonary tuberculosis employed in the milk trade.

Diphtheria Immunisation.

The figures for the year are given in the following tables.

	Under 1	1	2	3	4	5—9	10—14	Total
Number of children who completed a full course of primary immunisation during the year ..	24	39	8	2	1	1	—	75
Number of children who received a reinforcing injection during the year	—	—	—	—	2	21	2	25

Number of children at 31st December, 1953, who had completed a course of immunisation at any time before that date (i.e. at any time since 1st January, 1939).

Age at 31.12.53. i.e. born in year	Under 1 1953	1—4 1952—49	5—9 1948—44	10—14 1943—39	Total Under 15
Number Immunised	6	350	490	454	1300

You will note from these figures that 63 children around a year old received the necessary protection against diphtheria. The estimated figure of babies who could have been immunised judged on the average births occurring in the district is 133, so you will see that the percentage of children protected at this age is under 50%. The total number of children immunised however gives a better percentage, but some of these children have not been re-immunised for many years. To have full protection against diphtheria a baby should be immunised at about 6-9 months

for the first time. The course consists then of two small injections with 4 weeks between. By the time the child is five and ready to go to school, one re-inforcing injection is required. This is followed by another re-inforcing injection at about 10 years old to carry it through the remainder of its school career. The injections may be given by the child's own doctor or the treatment may be given at the child welfare clinic or at school at specially arranged clinics.

No case of diphtheria was notified in the town during the year and there has not been a case of diphtheria in Alton now for seven years. But the germ which causes the disease is still with us ready to strike an unprotected community. This is exemplified by the fact that in a recent outbreak in the Midlands, 78 cases of diphtheria occurred and there were 6 deaths, all of them children who had not been immunised.

If no cases of diphtheria are to appear in Alton, every effort must be made by parents to have their children immunised and re-immunised at the appropriate times and everyone concerned with the public's health must use persuasion and unrelenting propaganda towards this end.

The national figures for diphtheria are given below where it will be noted new low figures are reported.

Year.	Deaths.	Corrected Notifications.
1944	934	23,199
1945	722	18,596
1946	472	11,986
1947	244	5,609
1948	156	3,575
1949	84	1,890
1950	49	962
1951	33	664
1952	32	376
1953	24*	240*

*Provisional.

Vaccination.

District councils have no responsibilities in the matter of vaccination. It is a responsibility of the C.C. who keep the records etc., and who make payment to G.P's. for the return of the vaccination forms.

However the vaccination state of the community is one of concern to all. The higher the state of immunity the less likelihood is there of an outbreak of smallpox. Of the districts in Hampshire the U.D. of Alton is the district with the lowest percentage of babies vaccinated in 1952 under 12 months expressed as a percentage of babies born in that year.

National Assistance Act, 1948 (S. 47).

No action was required under section 47 of this Act, regarding the removal to suitable premises of persons in need of care and attention.

PROVISIONS OF GENERAL HEALTH SERVICES FOR THE AREA

Devolution of Health Functions.

On the 1st April, 1953, there came into operation a scheme of devolution of Health functions to existing District Health Sub-Committees. In this area, the No. 7 (Alton) District Health Sub-Committee comprises the areas of the Alton Rural District Council and Urban District Council, to which sub-committee both Councils nominate members. Among the resolutions made were :

“ In order to make the fullest possible use of local knowledge and to widen interest there be devolved upon the District Health Sub-Committee as far as possible responsibility for the supervision of the Health Services in the area; in particular services operating under Section 22 (Care of Mothers and Young Children), Section 24 (Health Visiting), Section 26 (Vaccination) and Section 28 (Prevention of illness, care and aftercare, so far as that section does not relate to tuberculosis) of the National Health Service Act, 1946, as amended, provided that those functions are exercised in such a way as to conform with the existing scheme.”

Ambulance Facilities.

The Ambulance Service is conducted by the 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.

A Child Welfare Clinic is held every Tuesday afternoon from 2 to 4 p.m. at the Assembly Rooms, Alton. This centre is for the attendance of mothers and babies, and children under five. Activities at the clinic, 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.

Health Visiting.

The Health Visitor for Alton is Mrs. J. E. Morrow, 13 Whitedown, Alton.

Day Nursery.

A Day Nursery was provided during the year at the Manor House, Alton, which provides accommodation for children aged 2-5. The children are admitted to the nursery on priority grounds and throughout the year the nursery was well used.

During the year a new scale of charges was made based on a new form of income assessment. In Alton this made relatively little difference to the numbers attending the nursery, being on an average 3 less than the permitted number.

The need for a nursery in this district was established by the County Health Committee and the fact that the increased charge has made little difference confirms this.

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.

In September the Home Help Service was reorganised, the County being divided into eight divisions. Division VI includes the Urban District of Alton and the Divisional Organiser now has her office at the Town Hall, Petersfield (Telephone : Petersfield 771/773), 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 at the Royal Hampshire County Hospital, Winchester.

Chemical analyses of water, sewage, milk and other samples are carried out by arrangement with the Public Analyst, Southampton.

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

Midwifery and Home Nursing.

These services are administered as follows :

DISTRICT SERVED	NURSE	SERVICE GIVEN
Alton Chawton E. & W. Worldham Farringdon	Miss D. R. HULL, S.C.M., GAS/AIR, 4 Edward Road, Alton. Mrs. M. COOMBES, S.R.N., Hillcrest, Windmill Hill, Alton.	Midwifery and general nursing General nursing only

QUALIFICATIONS : S.R.N., State Registered Nurse ; State Certified Midwife ; Gas/Air, Gas and Air Analgesia Certificate.

Ante-Natal Clinics.

A Clinic is held every Thursday at Alton General Hospital.

The Medical Officers attending the Alton Clinics at the end of the year :

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

School Health Services.

Clinics are held as follows :

Verminous cleansing	Y.M.C.A. Hut, Normandy Street, Alton.
Scabies	Isolation Hospital, Alton.
Orthopaedic	Lord Mayor Treloar Hospital, Alton.
Ear, nose and throat	Alton General Hospital.
Dental	At Schools.
Ophthalmic and orthoptic	Alton General Hospital.
Child guidance	Health Centre, Winchester.
Speech therapy	Leighton, High Street, Alton.

Tuberculosis.

Clinics are held at Aldershot, Basingstoke and Winchester, whilst sanatoria are available at Bishopstoke, Chandler's Ford, Liphook and Alton (Morland Hall (The Henry Gauvain Hospital) and Lord Mayor Treloar Hospital).

Venereal Diseases.

Clinics are held at Aldershot, Basingstoke and Winchester.

Area Welfare Officer.

The Area Welfare Officer is Mr. C. Hemsley, whose office is at Manor Park House, Aldershot (Telephone : Aldershot 2341). His assistant is Mr. P. H. Dean, County Council Health Centre, Bramblys Grange, Basingstoke (Telephone : Basingstoke 934).

ALTON URBAN DISTRICT COUNCIL

Annual Report of the Sanitary Inspector for the year ended 31st December, 1953.

SANITARY CIRCUMSTANCES OF THE AREA

1. Water Supply.

In spite of the fact that the total rainfall for 1953, which amounted to 25.77 inches, was the lowest since 1945, the supply of water has been satisfactory both as regards quality and quantity.

Chemical and Bacteriological analyses are carried out by the Analyst of the County Borough of Southampton.

The Beech Water Scheme was completed and the majority of properties in the area have taken supplies from the mains. The Booster Stations in the Scheme are working satisfactorily.

2. Sewerage.

The improvement scheme at the Outfall Works is in hand and good progress is being made. It is hoped that the Contractors will have completed constructional work by the late summer of 1954.

The Consulting Engineers for this scheme are Messrs. John Taylor & Sons, and the Contractors are Messrs. A. Streeter & Co., Ltd., Godalming, Surrey.

Co-operation with the Thames Conservancy Board has been maintained during the year regarding the standard of effluent being discharged into the river which, of course, comes under their control.

3. Public Cleansing.

The collection of house and trade refuse has been carried out in the method outlined in the report last year, and the system appears to be satisfactory.

Rodent and fly control of the controlled tip is carried out at regular periods.

4. Meat and Other Food.

Every animal slaughtered at the Ministry Slaughter House has been inspected. My thanks are offered to the Managers and Slaughtermen for their ready co-operation.

Carcases Inspected and Condemned.

	Cattle excluding Cows	Cows	Calves	Sheep and Lambs	Pigs
Number killed	747	589	703	2846	1431
Number Inspected ..	747	589	703	2846	1431
All diseases except T.B. whole carcases condemned	4	7	5	4	30
Carcases of which some part or organ was con- demned	308	166	7	261	263
Percentage of the number inspected infected with disease other than T.B. ..	41.77	29.37	1.71	9.31	20.48
Tuberculosis only, whole carcases condemned ..	2	5	—	—	3
Carcases of which some part or organ was con- demned	72	63	—	—	—
Percentage of the number inspected infected with T.B.	9.91	11.55	—	—	0.21

Food Condemned other than at the Slaughterhouse.

Canned Meat lbs. ozs.	Meat lbs. ozs.	Tinned Goods lbs. ozs.	Bottled Goods lbs. ozs.	Perishable Goods lbs. ozs.
247 3	719 0	1243 3	44 5	688 2

5. Rodent Control.

During the year 977 surveys of properties were carried out. In addition the Outfall Works and Controlled tip were kept under control. In the Urban District 7071 poison baits were laid and approximately 1500 rats were picked up. We had extremely good results from the poison "Warfarin" and by the use of containers were able to lay poison baits in the most advantageous positions.

Testing and poisoning of sewers was carried out throughout the year.

SANITARY INSPECTION OF THE AREA

Number of Inspections made.

Complaints received	..	..	..	..	..	..	28
Complaints investigated	..	..	..	..	..	..	28
Complaints justified	..	..	..	..	..	..	27
Inspections under the Housing Act, 1936 (Visits)	..	..	..	..	..	..	7
Inspections under the Housing Act, 1936 (Revisits)	..	..	..	..	..	..	97
Inspections of requisitioned properties	..	..	..	..	..	..	23
Verminous Premises	..	..	..	..	..	..	1
Old Drains tested	..	..	..	..	..	..	5
Tents, vans and sheds	..	..	..	..	..	..	8
Factories (mechanical power)	..	..	..	..	..	..	11
Factories (non-mechanical power)	..	..	..	..	..	..	3
Butcher's Shops	..	..	..	..	..	..	20
Fishmongers	..	..	..	..	..	..	2
Other Food Shops	..	..	..	..	..	..	19
Cafés, Restaurants, etc.	..	..	..	..	..	..	2
Bakehouses	..	..	..	..	..	..	3
Ice Cream Premises	..	..	..	..	..	..	3
Dairies	..	..	..	..	..	..	14
Bacteriological Milk Samples taken	..	..	..	..	..	..	14
Piggeries (and other animals not domestic)	..	..	..	..	..	..	18
Miscellaneous visits	..	..	..	..	..	..	4
Interviews	..	..	..	..	..	..	16
Diseases of Animals Acts	..	..	..	..	..	..	2
Drainage inspections	..	..	..	..	..	..	33
Marine Store Dealers	..	..	..	..	..	..	2
Disinfestation	..	..	..	..	..	..	6
Welfare (National Assistance Act)	..	..	..	..	..	..	1
Visits under Section 92 Public Health Act, 1936 (Premises)	..	..	..	..	..	..	17
Revisits under Section 92 Public Health Act, 1936 (Premises)	..	..	..	..	..	..	44
Farms	..	..	..	..	..	..	1
Water Supply	..	..	..	..	..	..	1
Rodent Control	..	..	..	..	..	..	26
Public Houses	..	..	..	..	..	..	1

	Work done by arrangement	Preliminary notices served	Statutory notices served	Work completed by owner	Work done in default by Council
1. Blocked drains (soil)	2	—	—	2	—
2. Repairs to drains (soil)	1	—	—	1	—
3. New W.C.s provided	—	—	—	—	—
4. Defective pans and traps of W.Cs.	—	—	—	—	—
5. Defective W.C. cisterns or flush pipes	6	—	—	6	—
6. Defective waste pipes (Bath, lav. and sinks)	—	—	—	—	—
7. Defective sink waste channels	—	—	—	—	—
8. Absence of sinks	—	1	1	1	—
9. Defective sinks	—	—	—	—	—
10. Defective eaves, gutters or R.W. pipes	—	5	—	5	—
11. Defective house gullies	—	—	—	—	—
12. Stagnant water	—	—	—	—	—
13. Offensive accumulations	1	—	—	1	—
14. Animals, poultry, etc.	3	—	—	3	—
15. Verminous premises	3	—	—	3	—
16. Insufficient or defective water supply	—	—	—	—	—
17. Defective dustbins	—	—	—	—	—
18. Absence of dustbin	—	—	—	—	—
19. Defective yard paving	1	—	—	1	—
20. W.Cs. requiring cleansing	—	—	—	—	—
21. Defective chimney flues	—	1	—	1	—
22. Damp walls due to internal defects	—	9	—	7	—
23. Damp walls due to lack of or defective D.P.C.	—	9	—	7	—
24. Defective fireplaces or stoves	—	2	—	2	—
25. Defective coppers	—	—	—	—	—
26. Defective ventilation	—	1	—	1	—
27. Defective sub-floor ventilation	—	2	—	2	—
28. Defective windows and doors	—	4	—	4	—
29. Defective roofs	—	11	—	9	—
30. Defective brickwork or pointing	—	7	—	5	—
31. Defective floors	—	4	—	3	—
32. Defective plastering	—	5	—	5	—
33. Defective stairs	—	2	—	2	—
34. Absence of handrails to stairs	—	1	—	1	—
35. Absence of or insufficient Food Stor- age	—	—	—	—	—
36. Other matters	—	—	—	—	—

Factories and Workplaces.

	Work done by arrangement	Preliminary notices served	Statutory notices served	Work completed by owners	Work done by Council in default
Unregistered	—	—	—	—	—
Overcrowded	—	—	—	—	—
Without Abstract or Blue Book ..	—	—	—	—	—
Absence of Thermometers in Workrooms	—	—	—	—	—
Absence of means of heating in work- rooms	—	—	—	—	—
Absence of suitable washing facilities ..	—	1	—	1	—
Absence of facilities for taking meals in factories	—	—	—	—	—
Requiring lime washing or cleansing ..	1	—	—	1	—
Requiring drains or drain alterations ..	—	—	—	—	—
Insufficient ventilation	—	—	—	—	—
Insufficient Water Supply	—	1	—	1	—
Sanitary accommodation :					
Insufficient	—	1	—	1	—
Unsuitable or defective	—	—	—	—	—
Not separate for sexes	—	—	—	—	—
Having improper accommodation for refuse	—	—	—	—	—
Offensive accumulations	—	—	—	—	—
Outwork in unwholesome premises ..	—	—	—	—	—
Outwork in infected premises	—	—	—	—	—
New W.Cs. erected	—	1	—	1	—
Emissions of Smoke	1	—	—	1	—
General dilapidations	—	—	—	—	—
Infestation by rats and mice	—	—	—	—	—
Contraventions of :					
Milk and Dairies Regulations ..	—	—	—	—	—
Milk (Special Designations) Regs.	—	—	—	—	—
Meat Regulations, 1924	—	—	—	—	—
Food and Drugs Act, 1938, Sec. 13	1	—	—	1	—
Ice cream Heat Treatment Regs.	—	—	—	—	—
Other matters	—	—	—	—	—

STATUTORY NOTICES

Number of Statutory Notices issued for abatement or abolition of nuisances.

	<i>Served</i>	<i>Complied With</i>
Statutory notices outstanding 31/12/52	2	—
Public Health Act, 1936, Section 93 ..	3	—
Housing Act, 1936, Section 9	1	2
Food and Drugs Act, 1938	—	—
	6	2
	—	—

LEGAL PROCEEDINGS

No legal proceedings were taken during the year.

DISINFECTIONS

Steam disinfection of bedding, clothing, etc., may still be carried out, by arrangement, at the Isolation Hospital.

Number of premises disinfected after infectious disease in the Urban District 3

DISINFESTATION OF PREMISES

<i>Reason for disinfection</i>	<i>Number of Premises</i>	<i>Number of Rooms</i>
Fleas	2	7
Cockroaches	1	3
Wasps	2	2
Ants	1	1
	6	13
	—	—

FACTORIES ACT, 1937

Factories, Factories (no mechanical Power) and Workplaces.

1. Inspections for purpose of provisions as to Health made by Sanitary Inspector.

	No. on Register	No. of Inspections	No. of Notices	No. of occupiers Prosecuted
(a) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authority	9	3	—	—
(b) Factories not included in (a) to which Section 7 applies	42	11	2	—
(c) Other premises under the Act (excluding outworkers premises)	—	—	—	—
Totals	51	14	2	—

2. Cases in which defects were found.

	Found	Remedied	Referred to H.M. Inspector	Referred by H.M. Inspector
Want of cleanliness ..	1	1	—	1
Overcrowding	—	—	—	—
Unreasonable temperature ..	—	—	—	—
Inadequate ventilation ..	—	—	—	—
Ineffective drainage of floors ..	—	—	—	—
Sanitary conveniences :				
(a) Insufficient ..	1	1	—	1
(b) Unsuitable and defective	—	—	—	—
(c) Not separate for sexes ..	—	—	—	—
Other offences (not including offences relating to home-work)	3	3	—	—
Totals	5	5	—	2

INSPECTION AND SUPERVISION OF FOOD

Milk Supply

Milk and Dairies Regulations, 1949

Milk Purveyors in the Urban District

Number of Producer Retailers	..	..	..	..	Nil
Number of Wholesale Retailers	..	..	..	..	Nil
Number of Retailers only	..	..	..	..	2
Number of Purveyors of Tuberculin Tested (Farm Bottled)	..	..	..	..	Nil
Number of Purveyors of Tuberculin Tested (Pasteurised)	..	..	..	..	1
Number of Purveyors of Pasteurised Milk	..	..	..	..	2
Number of Purveyors of Ungraded Milk	..	..	..	..	1

Milk Purveyors from outside Urban District

Number of Purveyors of Pasteurised Milk	..	..	..	..	3
Number of Purveyors of Sterilised Milk	..	..	..	..	1

Milk (Special Designation) Act, 1949

Designated licences granted during 1953 :

Raw Milk

Dealers' licences..	1
---------------------	----	----	----	----	----	----	---

Heat Treated Milk

Tuberculin Tested Pasteurised and Pasteurised Milk :

Producers' licences	..	..	..	..	..	..	1
Dealers' licences	1
Supplementary licences	3

Sterilised Milk :

Supplementary licences	1
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BACTERIOLOGICAL EXAMINATION OF MILK

Analysis of Results, 1953

Type of Milk	METHYLENE BLUE R.T.				PHOSPHATASE TEST			
	Total No. samples submitted	Passed	Failed	% Passed	No. of samples submitted	Passed	Failed	% Passed
Pasteurised	7	7	—	100	7	7	—	100
Tuberculin Tested (Pasteurised)	7	7	—	100	7	7	—	100
Totals	14	14	—	100	14	14	—	100

MANUFACTURE AND SALE OF ICE CREAM

No ice cream is now manufactured in the town. There are registered 31 retailers. No action in respect of contraventions of the Heat Treatment Regulations has been necessary during the year. There are two ice cream vans plying in the town.

HOUSING STATISTICS

1.	i. (a)	Total number of dwelling houses inspected for housing defects (under Public Health or Housing Acts)	24
	(b)	Number of inspections made for the purpose	141
	ii. (a)	Number of dwelling houses (included under sub-head (1) above) which were inspected and recorded under the Housing Acts	7
	(b)	Number of inspections made for that purpose	97
	iii.	Number of dwelling houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation ..	Nil
	iv.	Number of dwelling houses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation	24
2.		Remedy of defects during the year without Service of formal notices	
		Number of dwelling houses rendered fit in consequence of informal action by the Local Authority and their officers	20
3.		Action under Statutory Power during the year :	
	A.	Proceedings under Section 9, 10 & 16 of the Housing Act, 1936 :	
	i.	Number of dwelling houses in respect of which notices were served requiring repairs	1
	ii.	Number of dwelling houses which were rendered fit after service of formal notices :	
	(a)	By owners	1
	(b)	By Local Authority in default of owner	Nil
	B.	Proceedings under Public Health Acts :	
	i.	Number of dwelling houses in respect of which notices were served requiring defects to be remedied	Nil
	ii.	Number of dwelling houses in which defects were remedied after service of formal notices :	
	(a)	By owners	Nil
	(b)	By Local Authority in default of owners	Nil
	C.	Proceedings under Section 11 and 13 of the Housing Act, 1936 :	
	i.	Number of dwelling houses in respect of which Demolition Orders were made	Nil
	ii.	Number of dwelling houses demolished in pursuance of Demolition Orders	Nil
	iii.	Number of dwelling houses closed on undertaking from owners not to re-let for habitation	Nil
	D.	Proceedings under Section 12 of the Housing Act, 1936 :	
	i.	Number of separate tenements or underground rooms in respect of which Closing Orders were made	Nil
	ii.	Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement or room having been rendered fit	Nil

RANDALL MARTIN,

Medical Officer of Health.

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