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Contributors

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ASHFORD URBAN DISTRICT



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ANNUAL REPORT

FOR

1948

ON THE

HEALTH OF ASHFORD

BY THE

MEDICAL OFFICER OF HEALTH

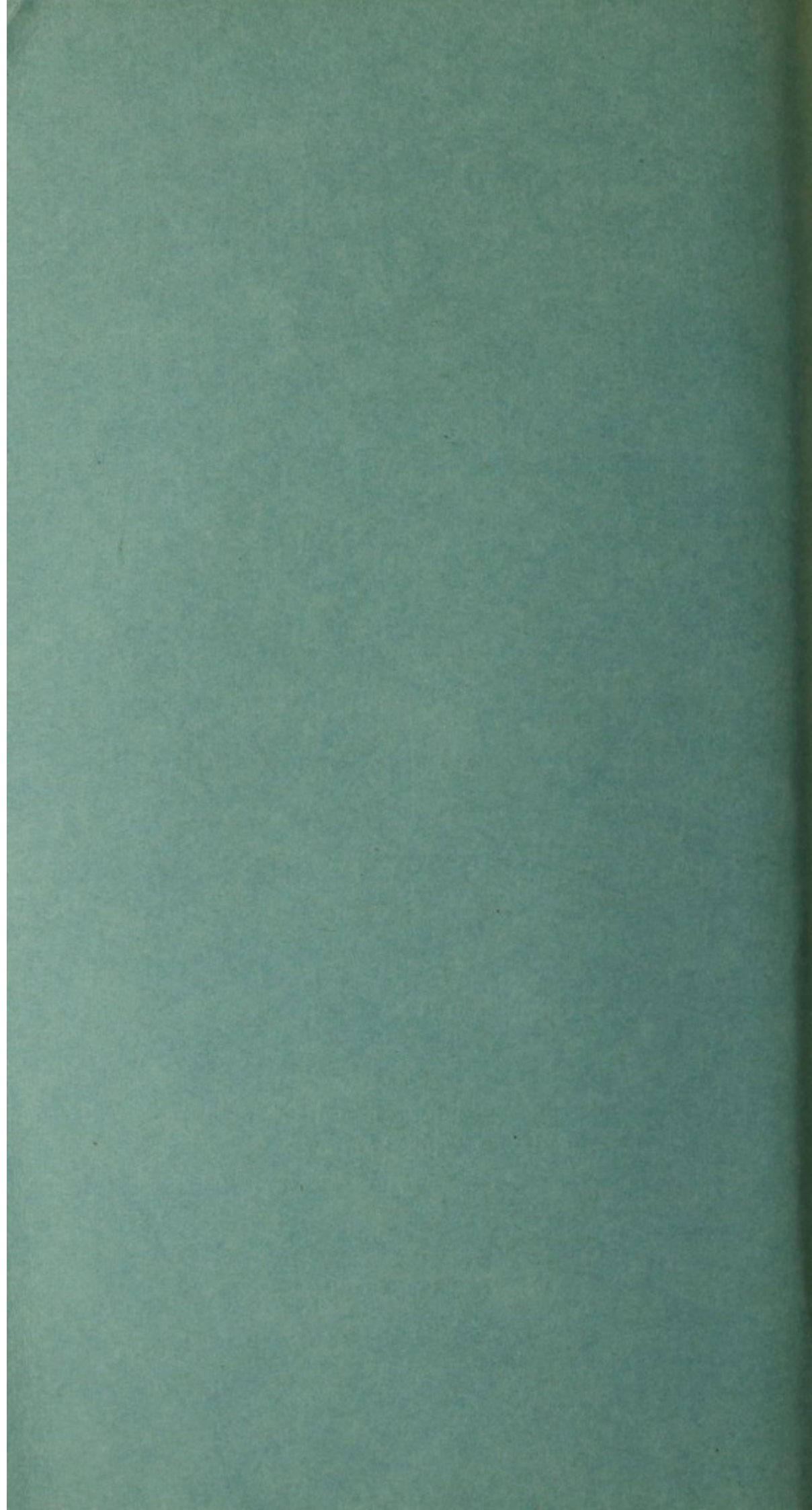
J. MARSHALL
M.B., Ch.B., D.P.H.

Medical Officer of Health for Ashford Urban District
and Area Medical Officer.

ASHFORD :

Geerings of Ashford, Ltd., 80, High Street.

1949.



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PUBLIC HEALTH OFFICERS OF THE LOCAL AUTHORITY, 1948

Medical Officer of Health and Assistant County Medical Officer.

MARSHALL, J., M.B., Ch.B., D.P.H., F.R.I.P.H.H.

Chief Sanitary Inspector.

HARLAND, H. J., Cert.R.S.I., M.S.I.A., M.R.I.P.H.H., Certified
Meat Inspector.

Additional Sanitary Inspector.

HAMMOND, S. F., Cert.S.I.E.J.B., M.S.I.A., Certificated Meat
Inspector.

Health Visitors.

WILLMORE, S. (Miss), S.R.N., S.C.M., H.V.
ROGERS, H. (Miss), S.R.N., S.C.M., H.V.

Matron of Day Nursery.

ROSS, A. (Miss), S.R.N., S.C.M.

Matron of Isolation Hospital.

SHALLCROSS, E. (Miss), S.R.N., S.R.F.N., S.C.M.

ASHFORD URBAN DISTRICT

ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH & SENIOR SANITARY INSPECTOR FOR THE YEAR 1948

To the Chairman and Councillors of the Ashford Urban District.

MR. CHAIRMAN, LADIES AND GENTLEMEN,

I beg to present to you my Annual Report for the year ending 31st December, 1948.

It will be noted from the Report that there were no unusual or exceptional influences or factors affecting the health of the inhabitants of the town.

The number of births fell from the record high number 482 in 1947 to 371 in 1948, most probably due to the present day difficult and harassing social and economic circumstances.

The death rate remains more or less constant. There was no unusual cause of deaths and as in former years Heart Diseases and Intra cranial vascular lesions were the cause of the highest number, aggravated no doubt by the stresses and strains of modern existence. Cancer, as expected, caused the second highest number. Many deaths could be prevented if early diagnosis and treatment were effected, but there are unfortunately many diverse and adverse influences which it is not yet possible to avert. The establishment of convenient, consultant Cancer Clinics within the new Hospital Service and appropriate Health Education propaganda would be big steps forward in the right direction.

Full reference is made in the report to the maternal and infantile mortality rates.

There was no epidemic of serious infectious disease. Unfortunately there was one case of Diphtheria, and the boy, who was not immunised, died. Immunisation has become an accepted health procedure with parents, whereas vaccination which can be done on the same voluntary and free of charge basis at the clinics or by the family Doctor, is being neglected. Recent outbreaks of smallpox through the Country are a danger signal which it would be well that parents should regard.

There were no cases of food-poisoning notified, and presumably none occurred. Owing to the shortage of food when many housewives are obliged to buy unrationed meat products, it could reasonably be anticipated that more cases might well occur. That none has occurred is testimony of the supervision exercised by the Sanitary

Inspectors. Ice Cream which is a common source of outbreaks is also closely watched by inspection of personnel and premises and by bacteriological examination of the products.

For the general information of the Councillors, I have appended a very brief resumé of the National Health Service Act. All the personal Public Health Services since the 5th July, 1948, as described, are the responsibility of the County Council, and the environmental services remain as previously with the District Councils.

In conclusion I should like to thank you for your interest and co-operation in the work of the Health Department, and my staff for their efficient and loyal service.

I am,

Yours obediently,

J. MARSHALL.

SECTION A.

STATISTICAL AND SOCIAL CONDITIONS OF THE DISTRICT FOR 1948.

AREA : 5,719 acres.

REGISTRAR-GENERAL'S ESTIMATE OF :—

The Resident Population	23,790
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NUMBER OF INHABITED HOUSES ACCORDING

TO THE RATE BOOKS	7,129
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RATEABLE VALUE :—£151,042

SUM REPRESENTED BY A PENNY RATE :—£611

SOCIAL CONDITIONS.

Ashford is a semi-industrial town, and a business and shopping centre for the large rural population which surrounds it. It merits importance by containing the largest agricultural market in Kent, and by being an important railway junction where five lines converge, associated with which there is a large Railway Works in which the majority of the working classes of the town are employed. There is also a number of other factories, viz., Cycle Works, Underwear Factory, Iron Foundry, Printing Works, Agricultural Repair Shops, Flour Mills, Marine and Industrial Works, and Ordnance Depot.

At present there is practically no unemployment in this District and in general apart from housing conditions, social conditions are fairly satisfactory.

EXTRACTS FROM VITAL STATISTICS.

	Total.	M.	F.		Ashford Urban District.	England and Wales.
1. Live Births	371	184	187	Birth Rate per 1,000 estimated resident population.	15.59	17.9
(a) Legitimate	349	175	174			
(b) Illegitimate	22	9	13			
2. Stillbirths	11	6	5	Rate per 1,000 total (live and still) births.	28.79	0.42
(a) Legitimate	11	6	5			
(b) Illegitimate	—	—	—			
3. Deaths	285	138	147	Death rate per 1,000 resident population.	12.55	10.8
4. Death from Puerperal Causes						
(a) Sepsis	—	—	—	Rate per 1,000 (live and still) Births.	—	0.13
(b) Other Maternal Causes	2	—	2		5.49	0.73
5. Death of Infants under One Year of Age	15	10	5			
(a) Legitimate	12	8	4			
(b) Illegitimate	3	2	1			
Infant mortality rate per 1,000 live births					40.43	34
Rate re legitimate infants					34.38	
Rate re illegitimate infants					136.36	
6. Deaths from Cancer (all ages)					45	
Deaths from Measles (all ages)					—	
Deaths from Whooping Cough (all ages)					—	
Deaths from Diarrhoea (under 2 years of age)					1	

CAUSES OF DEATH IN ASHFORD URBAN DISTRICT DURING 1948.

ALL CAUSES				Males 138	Females 147
1.	Typhoid and Paratyphoid Fevers	...	...	—	—
2.	Cerebro-spinal Fever	...	...	—	—
3.	Scarlet Fever	...	...	—	—
4.	Whooping Cough	...	...	—	—
5.	Diphtheria	...	...	1	—
6.	Tuberculosis of Respiratory System	...	...	3	5
7.	Other Forms of Tuberculosis	...	...	1	—
8.	Syphilitic Diseases	...	...	2	1
9.	Influenza	...	...	—	—
10.	Measles	...	...	—	—
11.	Acute Polio-myelitis and Polio-encephalitis	...	...	—	—
12.	Acute Infective Encephalitis	...	...	—	—
13.	Cancer of buccal cavity and oesophagus (M) and uterus (F)	...	...	2	2
14.	Cancer of Stomach and Duodenum	...	...	3	5
15.	Cancer of Breast	...	...	—	2
16.	Cancer of all other sites	...	...	19	12
17.	Diabetes	...	...	2	2
18.	Intra-cranial vascular lesions	...	...	10	27
19.	Heart Diseases	...	...	39	51
20.	Other diseases of the circulatory system	...	...	3	2
21.	Bronchitis	...	...	10	5
22.	Pneumonia	...	...	7	3
23.	Other respiratory diseases	...	...	2	4
24.	Ulcer of stomach or duodenum	...	...	4	1
25.	Diarrhoea under 2 years	...	...	1	—
26.	Appendicitis	...	...	—	—
27.	Other digestive diseases	...	...	5	5
28.	Nephritis	...	...	3	2
29.	Puerperal and Post-abortion sepsis	...	...	—	—
30.	Other Maternal Causes	...	...	—	2
31.	Premature Birth	...	...	3	4
32.	Congenital Malformation. Birth Injuries. Infantile Diseases	...	...	4	—
33.	Suicide	...	...	2	1
34.	Road Traffic Accidents	...	...	2	—
35.	Other violent causes	...	...	2	3
36.	All other causes	...	...	8	8

SECTION B.

GENERAL PROVISION OF HEALTH SERVICES FOR THE DISTRICT.

1. LABORATORY FACILITIES.

The Central Laboratory, County Hall, Maidstone, is the chief laboratory in the County for the bacteriological examination of samples of food and drink, as for example of water, milk, ice-cream and any class of food which may be a potential source of food poisoning. Pathological specimens such as blood, urine, faeces and swabs from infectious patients are also examined there, but in addition there are other laboratories within the Hospitals, such as that of Willesborough Hospital. The former County Council Laboratory is now within the organisation of the National Laboratory Service or Medical Research Council, whereas the Hospital Laboratories are administered by the Regional Hospital Board.

The Laboratory in County Hall adequately serves the needs of this Public Health Authority, and samples may be sent by post, train or bus or immediately delivered or collected in the event of urgency.

2. AMBULANCE SERVICES.

For the Urban District the St. John's Ambulance Brigade is still responsible for the execution of the service, acting on an agency basis on behalf of the County Council who re-imburse expenditure incurred for paid staff, maintenance of vehicles, etc.

The Ashford Corps has 4 modern ambulances, staffed by 2 paid full-time Drivers, and 4 voluntary drivers, and the attendants male and female, are drawn from a panel of voluntary members of the Corps.

The service is adequate for the needs of the District, and is efficiently conducted and the voluntary members deserve high appreciation.

3. HOSPITAL CAR SERVICE.

This service is now also administered by the County Council, locally through Area Transport Officers and District Officers. There is a panel of private car owners, who receive an allowance of 6d. per mile and subsistence. Any person, who on medical certification is unable to travel to and from Hospital by public transport and for whom an Ambulance is not required may be taken by the Car Service. This is a very necessary Service but strict supervision is necessary to prevent abuse and exploitation.

4. HOME NURSING AND MIDWIFERY SERVICES.

The administration of these services was taken over from the Ashford and District Nursing Association by the County Council on the 5th July, 1948. For this District, there are 6 Home Nurse Midwives, who attend expectant mothers and the sick in their homes. The Nurses have now been provided with cars and the pressure of their work has been correspondingly considerably relieved and the service now fulfills the needs of the District.

5. TREATMENT CENTRES AND CLINICS.

All Maternity and Child Welfare, School, and Dental Clinics are now administered by the County Council.

The following Clinics are held in Ashford :—

(i) *Station Road.* This is the Central and chief clinic and is contained in an "ad hoc" building. The outlying clinics are complementary. Sessions are held on Tuesdays and Thursdays of each week from 2.15 p.m.

(ii) *Women's Institute Hall, Church Road, North Willesborough.* Sessions are held at 2.15 p.m. on alternate Fridays.

(iii) *The Adult School Hall, Gladstone Road, South Willesborough.* Sessions at 2.15 p.m. on Fridays alternating with the North Willesborough Clinic.

(iv) *The Women's Institute Hall, Faversham Road, Kennington.* Sessions are held at 2.15 p.m. on alternate Wednesdays.

(v) *The Kingsford Memorial Hall, Kingsnorth Road, Ashford.* Sessions at 2.15 p.m. on Wednesdays alternating with Kennington Clinic.

Ante-Natal and Post-Natal Clinics.

These Clinics are held in the Station Road centre, the former Clinic being held every Monday at 2.15 p.m. with an additional session from 10 a.m. on the 3rd Monday in each month and the latter on the 1st Monday of each month from 10 a.m. by appointment. These Clinics are conducted by a Consultant.

(i) The following five clinics of the School Medical Service are held at 14, Canterbury Road.

- (a) Dental Clinic.
- (b) Ophthalmic Clinic.
- (c) Minor Ailment Clinic.
- (d) Speech Therapy Clinic.

(ii) *Orthopaedic Clinic.*

This is held in the Welfare Centre, Station Road. The Consultant attends on the 1st and 3rd Tuesdays of each month and out-patients treatment is given every Tuesday, Wednesday and Friday mornings. The sessions are from 10 a.m.

(iii) *Venereal Diseases Clinics.*

This clinic is held at Ashford Hospital on Tuesdays and Fridays at 10—11 a.m. for Females and from 11—12 noon for Males.

(iv) *Tuberculosis Clinic.*

At No. 1 Barrow Hill Place weekly on Thursdays from 10 a.m. to 12.30.

(v) *Hospitals.*

- (a) Ashford General
Accommodation—approximately 90 beds.
- (b) Willesborough General
Accommodation—212 beds.
- (c) Isolation Hospital
Accommodation—68 beds.
- (d) Grosvenor Sanatorium (Private)
Accommodation—265 beds.

MATERNITY AND CHILD WELFARE.

The following report relates only to the part of the year 1948, i.e., from 1st January to 4th July, during which the Urban Council administered these services before they were transferred on 5th July to the County Council.

Certain vital statistics are however available from the Registrar General for the whole year. The number of live births was 371, compared with 482 in 1947, the latter figure having been a record high number for the District. In the years immediately preceding the last war, the average number was approximately 290. The upward trend began in this District in 1944 when the number rose from 276 in 1943 to 375, reaching its peak of 482 in 1947. The fall to 371 in 1948 is significant and is in all probability due to the impact of social and economic circumstances. Approximately 250 childless families and 300 families with one child are awaiting Council Houses. Others are probably intentionally restricting the size of their families owing to the high cost of living. Those who intend to marry face high expenditure to equip and furnish a home. On the other hand the cost of confinement is now much less. Maternity benefits, free medical attention and free hospital accommodation for those who on medical or social grounds require this mitigates other expenses.

There were 11 stillbirths during the year. The rate per 1,000 total births, i.e., 28.8 is higher than usual, and it is considered that many could be prevented by more careful ante-natal supervision.

There were also two maternal deaths. Neither of these mothers attended the Ante-natal Clinic. The Ante-natal Clinic is conducted by a Consultant and full investigations, e.g., of blood, urine, etc., are made as routine procedure, and there is no doubt that many serious ante-natal complications are consequently averted.

There were 15 infant deaths during the year giving a mortality rate of 44.3 deaths per 1,000 live births. This compares unfavourably with the record low rate of 20.7 for 1947. The following table describes the causes of these deaths. The table gives 13 deaths, as only 13 were entered into the office register and the number 15 has been returned by the Registrar General.

Months	1	2	3	4	5	6	7	8	9	10	11	12
Congenital Atelectasis	1	—	—	—	—	—	—	—	—	—	—	—
Broncho Pneumonia	—	—	1	1	—	—	—	—	—	—	—	—
Congenital Heart Diseases	1	—	—	—	—	—	—	—	—	—	—	—
Prematurity	6	—	—	—	—	—	—	—	—	—	—	—
Acute Gastro-Enteritis	—	—	—	—	—	—	—	—	—	—	—	—
Lobar Pneumonia	—	—	—	—	—	—	—	—	—	—	—	—
Erythroblastosis Foetalis	—	—	—	—	—	—	—	—	—	—	—	—
Congenital Hydrocephalus	1	—	—	—	—	—	—	—	—	—	1	—
Cerebral Haemorrhage	1	—	—	—	—	—	—	—	—	—	—	—

It will be seen that the highest number of deaths was due to prematurity. These were all neo-natal deaths, i.e., they occurred within the first month. It has been stated that a considerable proportion of these premature neo-natal deaths—perhaps three fifths—can be prevented. For those born at home, draught-proof cots, electric blankets or hot-water bottles, mucus catheters, etc., are provided from the Infant Welfare Centre. Two died from Bronchopneumonia, which is also conceivably preventable, and the other deaths were due to congenital and developmental causes.

As stated later in the Report the Domestic Help Service is organised now by the County Council. Close supervision is necessary to prevent exploitation. There are people who deliberately exploit the service to the detriment of those in real need.

The Day Nursery at the time of writing has a waiting list for its 50 places.

Admissions are granted on the basis of real need, and priority is given to the children of widows, unmarried women and others whose social and economic circumstances are distressed. There is no question that the service is very necessary to these mothers, although it is expensive to maintain.

MATERNITY AND CHILD WELFARE FIGURES FROM 1ST JANUARY TO 4th JULY, 1948.

(i) Number of births notified as adjusted by transferred notifications.

(a) Live Births	...	...	...	371
(b) Still Births	..	..	..	11
(c) Total	..	..	..	382

(ii) Infant Welfare Centre.

(a) No. of clinics provided and maintained by Council and transferred to the County Council on 5th July, 1948

5

(b) Total number of children under 5 years of age who attended the Centres until 4th July, etc., and who on the date of their first attendance were :

(1) Under one year of age	..	..	201
(2) Over one year of age	..	..	52

(c) Total number of children under five years of age who attended the Centres who at the 5th July were :

(1) Under one year of age	..	..	327
(2) Over one year of age	..	..	658

(iv) Ante-natal and Post-natal Services.

These clinics are combined on behalf of expectant mothers from adjacent rural areas, in addition to those from the Urban District, by arrangements with the County Council.

	<i>Ante-Natal</i>	<i>Post Natal</i>
(a) Number of Clinics provided by the Council	1	1
(b) Total number of women who attended to 4th July, 1948	227	4

SECTION C.

SANITARY CIRCUMSTANCES OF THE AREA.

1. WATER SUPPLY.

The water supply within the Urban District is provided by two undertakings, viz., by Ashford Urban District Council and by the Mid-Kent Water Company.

The Council provides the supply for Central and South Ashford and North and South Willesborough, and The Mid-Kent Water Company for Kennington.

Ashford Urban District Council Undertakings.

This supply is obtained from the following three sources.

(i) *Westwell.*

A new gravel-screen bore-hole 160 feet deep was completed in August, 1948. The other two existing bore-holes were also gravel screened at the same time. A softening plant (Clark's Process) is in operation here. The water is pumped by an electrically-driven pump to a covered reservoir (capacity 1,000,000 galls.) at Potter's Corner, from where it enters the supply network. There is a connection between this reservoir and two stand-by reservoirs (280,000 and 36,000 galls. respectively) at Barrow Hill and a connection with the Mid-Kent Water Company's supply at Potter's Corner for emergency use. There is a further connection for emergency use with the Mid-Kent Water Company's supply in the Canterbury Road, at Little Bybrook.

(ii) *Henwood.*

This supply comes from four wells with interconnecting adits, approximately 40 feet deep. From the electrically-driven pumps (with stand-by steam plant) the water is pumped into the supply network and the surplus is diverted into the reservoir at Potter's Corner.

The above two supplies supply the whole of Central and South Ashford.

(iii) *Hinxhill.*

This water comes from a new bore-hole approximately 200ft. deep, being raised by compressed air into a storage adit. It is then pumped by Reciprocating and Centrifugal pumps to a covered reservoir at Broomfields (100,000 galls.) from where it enters the supply network for the whole of North and South Willesborough. There is a connection for emergency use with the Central and South Ashford supplies at the Railway Bridge, Hythe Road.

The waters from these three sources are all chlorinated, as an additional measure of safety, though the untreated waters have in successive years been of excellent bacteriological and chemical quality.

SAMPLES.

By arrangement with the County Laboratory, 6 quarterly bacteriological samples are taken, 2 from each of the three sources. Also three samples for chemical analysis were taken half-yearly at the three sources.

These samples were all highly satisfactory, and the waters are entitled to be graded Class I.

EXAMINATION OF SAMPLES TAKEN DURING THE YEAR.

	No.	Bacteriological Results	No.	Chemical Results
Raw Water	19	19 Satisfactory	18	17 Satisfactory 1 Unsatisfactory
Treated Water	25	25 Satisfactory	—	—

There are 14 houses not connected to the public supply mains and 9 of these are situate in Beaver Lane, 4 in Chart Road and 1 in Park Road. 7,115 houses are connected to the public mains.

THE MID-KENT WATER COMPANY.

(i) *Barham.*

This water is taken from the chalk, the well being about 200 feet deep. It is pumped to Hastingleigh Reservoir (capacity 500,000 gallons) from where it reaches the Kennington supply network.

(ii) *Charing.*

This water is obtained from the greensand and the borings are approximately 160 feet deep. It is pumped to Fairbourne and Charing Hill Reservoirs (capacity 1,000,000 and 283,500 gallons respectively). These reservoirs afford a subsidiary or auxiliary supply to Kennington.

SAMPLES.

Monthly bacteriological and quarterly chemical samples are taken. These, during the year were Class I waters bacteriologically and were chemically of good organic quality.

DRAINAGE AND SEWERAGE.

The only major development during the year was the construction of a new sewer from the Industrial Area (Cobbs Wood)

connecting with the system in South Ashford. It is also being further extended to the Chart Road, Maidstone Road Districts to connect several domestic properties and to take the surplus flow from the R.E.M.E. depot.

Total number of Inhabited Houses (including Flats) is	...	...	...	...	7,129
Total number of houses connected to the sewers	...	6,907			
Number of houses not connected to the sewers	...	222			
					<hr/> 7,129 <hr/>

The majority of the houses not connected to the sewers are situate in Sandyhurst Lane, Maidstone Road, Gore Hill, Chart Road and Beaver Lane, together with 69 at Kennington and 8 at Willesborough.

A sewer is at present being laid which will be available for 11 houses in Maidstone Road and 7 in Chart Road.

SWIMMING BATHS.

The Ashford Urban District Council Public Bath was in full use during the season. The water is chlorinated by a break-point chlorinator and there is also an electric suction sweeper for cleansing the bottom of the bath. The size of the bath is 100 x 25 yards, and its capacity 600,000 gallons. Regular samples of the water were sent for bacteriological examination, and all were satisfactory (B.Coli, presumptive, absent in 100 cc.s.).

ERADICATION OF VERMIN.

The number of houses found to be infested with vermin was as follows :—

	Bugs	Fleas
Council Houses	1	—
Other Houses	9	1

All these premises were disinfested by means of D.D.T. in spray form combined with another insecticide. This form of disinfestation proved very efficacious, as none of these houses needed a second treatment. The number of houses found to be infested with bugs has been steadily reduced each year and progress has definitely been made in the eradication of bugs from human dwellings.

Cluster fly infestations of the roofs of churches and private houses were dealt with by means of D.D.T. in smoke form, and the large amount of dead flies found after treatment proved its effectiveness.

Other forms of infestations occasionally dealt with included beetles, ants, earwigs and wasps.

RATS AND MICE DESTRUCTION.

The destruction of these vermin continued throughout the year and 102 infestations of rats and 68 of mice were dealt with. Damp sausage rusk was the base bait and zinc phosphide the poison mostly used, and very successful results were achieved. Unpoisoned pre-bait is laid down for three days before the poison is used. This is done to encourage the rats to feed at the points selected. Most of the infestations were small and only consisted of two or three rats and a few mice. The refuse dump at Bybrook was treated regularly and the rat infestation there was kept to a minimum. The sewers also received attention and results were good. The number of rats in the sewers was small.

SANITARY INSPECTION OF THE DISTRICT.

Details of Inspection work carried out :—

	<i>No. of Visits and re-visits</i>
Bakehouses	54
Dairies and Cowsheds	166
Slaughterhouses	460
Offensive Trades	7
Factories with Mechanical Power	212
Factories without Mechanical Power	
Workplaces	
Butchers' Shops	65
Fish Frying Premises	30
Other Food Shops	200
Food Preparing Premises	230
Ice Cream Vendors and Manufacturers	180
Rat and Mice Destruction	252
Other Vermin	70
Housing Repairs	1510
Housing-overcrowding	141
Tents, Vans and Sheds	30
Offensive Accumulations	18
Keeping of Animals	42
Dustbins	90
Drainage repairs	111
Drainage cleansing	60
Sanitary Accommodation	57
Shops Act	362
Water Samples	41
Milk Samples	62
Ice Cream Samples	110
Infectious Diseases	52

*No. of visits
and re-visits*

Smoke Abatement	28
Water Supply	30
Miscellaneous	593
Total Number of Visits	5263

Work Completed :—

Wash-hand Basins	21
Brickwork Repaired	43
Houses at which drains were repaired	41
Choked drains cleared	28
Intercepting traps fixed	3
Gully traps fixed	12
Inspection Chambers built, new cover provided	14
Soil and vent pipes fixed or repaired	8
W.C. pans fixed	21
Additional W.C.'s fixed	8
W.C. compartments ventilated	9
New flushing cisterns provided	23
Flushing cisterns repaired	19
Sinks renewed	10
Sink waste pipes renewed or trapped	7
Eaves, Gutters and Fall Pipes repaired or renewed	41
Roofs repaired	51
Stoves repaired or renewed	28
Water supply pipes repaired or renewed	12
Rooms cleansed and/or disinfected	45
Rooms cleansed and/or disinfected	45
Window frames repaired or renewed	47
Wall and Ceiling plaster repaired	62
Rooms re-decorated	10
Dampness in walls remedied	51
Yard paving renewed	7
Wash coppers repaired or renewed	11
Doors repaired	16
Floors repaired	37
Staircases repaired	5
Sanitary Bins provided	22
W.C. Seats renewed	12
Chimney Stacks repaired	14
Accumulations removed	7
Cesspools repaired	15
W.C.s repaired and rebuilt	8
Sub-floor ventilation provided	11
Miscellaneous	13

FACTORIES ACT, 1937.

1. Inspections for purposes of provision as to health (including inspection made by Sanitary Inspectors).

	Premises (1)	Number on Register (2)	Number of		
			Inspections (3)	Written Notices (4)	Occupiers Prosecuted
(i)	Factories in which Sections 1, 2, 3, 4 & 6 are to be enforced by Local Authorities	28	47	3	—
(ii)	Factories not included in (i) in which Section 7 is enforced by the Local Authority	118	141	14	—
(iii)	Other premises in which Section 7 is enforced by the Local Authority (excluding out-workers premises)	18	24	4	—
	TOTAL ...	164	212	21	—

2. Cases in which defects were found.

Particulars (1)	Number of cases in which defects were found.				Number of cases in which Prosecutions were Instituted (6)
	Found (2)	Remedied (3)	To H.M. Inspector (4)	Referred By H.M. Inspector (5)	
Want of cleanliness (S.1) ...	16	16	—	—	—
Overcrowding (S.2) ...	—	—	—	—	—
Unreasonable Temperature (S.3) ...	1	1	1	—	—
Inadequate Ventilation (S.4) ...	3	3	1	—	—
Inadequate drainage of floors (S.6) ...	1	1	—	—	—
Sanitary Convenience					
(a) insufficient ...	3	3	—	2	—
(b) unsuitable or defective ...	7	7	—	1	—
(c) Not separate for sexes ...	2	2	—	1	—
Other offences against the Act (not including offences relating to outwork) ...	—	—	—	—	—
TOTAL ...	33	33	2	4	—

SECTION D.

HOUSING.

New Council Estates are being built, as rapidly as general circumstances permit, in conformity with the Council's long term development plan.

On 31st December, 1948, the number of families re-housed during 1948 and in total since 1946 when building again became possible following the war, was as follows :—

	1948	1946-48 (inclusive)
(1) Prefabricated temporary bungalows	9	144
(2) New Permanent Houses, Willesborough (Osborne Road Estate)		
(a) 2 bedroom type	4	8
(b) 3 bedroom type	51	89
(c) 4 bedroom type	3	3
South Ashford (from Oct., 1947) (Woolreeds Estate)		
(a) 3 bedroom type	57	57
(b) 4 bedroom type	3	3
Total	118	160
(3) Flats	5	10
(4) Houses completed by private enterprise	18	26

In addition, approximately 76 families have been accommodated since 1946 in the former Army Hutments at Hothfield Common.

Ministry of Health Review of Local Authorities' waiting list for Houses, May 1949.

Total number on live waiting list	868
Number without separate homes	521
1. Living in unfit houses	4
2. Living in overcrowded houses	25
3. Others	
(a) Living in Army Huts	76
(b) Working in Ashford but householders in other districts	104
(c) Local householders with sufficient accommodation	120
(d) Applicants not working or residing in the Urban District	18
	347
	868

At the time of writing, the following is an approximate estimate of the number and size of the families on the waiting list.

(1) No children	253
(2) 1 child	306
(3) 2 children	16
(4) 3 children	18
(5) 4 children and over	15

The number of applicants changes from day to day, as new applications are received and others withdrawn, but these figures definitely indicate where the need is now greatest. It is the intention of the Council to build flats and to reserve as far as possible the temporary bungalows, for the no-child and one child families.

In time when these priority applicants are re-housed, it will be possible to resume slum clearance. There is not, however, a large number of slums in the town and during the year those houses which were beyond reasonable repair were demolished.

It will be noted from the table "Work Completed" the number of repairs of various kinds which were effected on houses during the year.

SECTION E.

INSPECTION AND SUPERVISION OF FOOD.

MILK SUPPLIES.

There are in the Urban District 3 Producer Retailers and 8 Producers. Of these Producers 3 produce Tuberculin Tested Milk, 3 Accredited Milk and 5 undesignated milk. There are also 1 other Retailers of milk.

Dairy Farms and Dairies are regularly inspected to ensure that the standards prescribed by the Milk and Dairies Order 1926 are maintained. Samples of milk are taken regularly from farms and dairies and with 3 exceptions all were satisfactory. Periodic samples of undesignated milks are taken for examination for the presence of Tubercle Bacilli and during the year 22 such samples gave negative results.

In addition samples are taken regularly under the Milk Testing Scheme of the Ministry of Agriculture, whose Regional Laboratory is situated in this District.

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

			<i>Satisfactory</i>	<i>Unsatisfactory</i>
Tuberculin Tested	...	...	12	1
Accredited	...	...	13	1
Pasteurised	...	...	5	1
Undesignated	...	...	6	1

ICE CREAM.

Licences for the sale of ice cream are granted under the Food and Drugs Act 1938. The Council may refuse to register if the premises are unsatisfactory, or the registration may be cancelled by the Council after the occupier has had the opportunity to appear before the Committee. Clubs, Hotels and Restaurants may manufacture or sell ice cream without a licence. Theatres and Cinemas do not need a licence unless they manufacture.

Vehicles coming into the district to sell ice cream do not require a licence from this Authority but their premises have to be licenced in the area in which they are situated. There are three dealers who usually retail ice cream in the Market.

Water, soap and towels are carried on these vehicles for the washing of hands and the metal servers for ice cream are kept in a sterilizing solution.

25 shops sell pre-wrapped ice cream only.

10 shops sell unwrapped ice cream in addition to wrapped.

Seventy samples of ice cream have been taken during the past year and the reports showed that none contained any pathogenic organisms.

The standard of hygiene in premises where ice cream is sold in this district is good, and the premises are provided with means of washing of hands, including hot and cold water, soap and towel. Where a metal server is used it is kept in a bowl of antiseptic fluid.

In shops where general goods are sold it would be preferable and desirable for all ice cream to be pre-wrapped, but this is not enforceable by law. The occupiers of shops have been recommended to sell only pre-wrapped ice cream and many have done so. Until recently it was difficult to obtain much wrapped ice cream, but now much more is being wrapped by the manufacturer. The supply to shops is often all sold in about two hours, and it is therefore usually possible to keep one person solely for the sale of ice cream at the time. There do not appear to be any cases of ice cream being sold with unclean hands and the occupiers of shops would prefer to sell all wrapped and will do so when sufficient supplies are available.

There is no legal standard for the constituents of ice-cream and this is due to the fact that most of these are controlled.

Ice cream is also sold from 7 restaurants and 2 cinemas which, as stated above, do not need to be registered.

All are inspected as to means of storage and serving and the provision of washing facilities.

There are three firms from outside the District which retail in Ashford from vehicles in the street.

MEAT AND OTHER FOODS

UNSOUND FOOD (FOOD AND DRUGS ACT 1938)

The following is a summary of unsound food surrendered :—

	lbs.		lbs.
Beef	106½	Custard Powder	56
Brawn	15	Broth	1
Corned Beef	285¾	Barley	368
Veal Loaf	19½	Carrot Meal	90
Stewed Steak	9	Biscuit Meal	1023
Lunch Meat	56¾	Cake	52
Fish	1188¾	Biscuits	54
Cheese	58½	Confectionery	148½
Fats	40	Sausages	91¾
Flour	39	Milk	655
Pork	5¾	Vegetables	938¾
Tea and Coffee	25½	Meat and Vegetables	4
Bacon	31¾	Soup	17½
Prunes	141½	Fruit	380¼
Oranges	9½	Steak and Kidney Pudding	3
Fruit Juices	93	Puddings	2
Cereals	42	Tomatoes	23¼
Oatmeal	280	Pickles and Sauce	51½
Jam	68¾	Paste	23¾
Marmalade	68¾	Potato Flour	40
Guet	1½	Fish Cakes	11
Sago	188	Milk Food	12½
Macaroni	68	Baking Powder	112
Mutton	182	Pudding Mixture	68

Total weight condemned : 3 tons 4 cwt. 2 qrs. 26¼ lbs.

23 registered food-preparing premises, and shops, stalls and vehicles, etc., where food is sold were frequently inspected for unsound food.

No cases of food poisoning were notified during the year which in view of the increased extent of communal feeding and the reliance of many housewives on obtaining unrationed meat to eke out the meat ration, is very satisfactory.

MEAT INSPECTION.

One of the two slaughterhouses was closed during the year, and the other is now used for a minimum amount of slaughtering. It is hoped that a Public Abattoir will be planned for the town.

CARCASSES INSPECTED AND CONDEMNED

	Cattle exclud- ing Cows	Cows	Calves	Sheep and Lambs	Pigs
Number Killed ...	719	216	1115	3105	64
Number Inspected ...	719	216	1115	3105	64
All diseases except Tuberculosis ...	257	106	23	206	18
Whole carcasses condemned ...	2	2	18	38	5
Carcasses of which some part or organ was condemned...	255	104	5	168	13
Percentage of the Number inspected affected with disease other than Tuberculosis ...	35.7	49	2.1	6.6	28.1
Tuberculosis only ...	74	53	5	2	4
Whole carcasses condemned	7	7	5	1	3
Carcasses of which some part or organ was condemned...	67	46	0	1	1
Percentage of the Number inspected affected with Tuberculosis ...	10.3	24.1	0.4	0.1	6.3

(i) The large number of sheep carcasses (39) condemned was mostly animals the subject of emergency slaughter of which a steadily increasing number are finding their way to the slaughterhouse.

(ii) The evidence of Tuberculosis among sheep, considered very rare, was proved by laboratory experiment at Wye Veterinary College in specimens submitted from the slaughterhouse.

4,068lbs. of Imported Argentine Beef was condemned on account of bone taint.

DISEASES AND ABNORMAL CONDITIONS FOUND IN ANIMALS
SLAUGHTERED FOR FOOD AT ASHFORD DURING 1948

Disease	Cattle exclud- ing Cows	Cows	Calves	Sheep and Lambs	Pigs
(a) Whole carcase and organs of animal rejected for human consumption :					
Tuberculosis ...	7	7	5	1	3
Emaciation associated with disease ...	2	1	—	17	—
Oedema ...	—	—	1	8	1
Septicaemia or Septic intoxication ...	—	—	—	5	1
Pyæmia including umbilical pyæmia and associated conditions ...	—	—	10	—	—
Empyæmia ...	—	—	—	2	—
Sæpraemia ...	—	—	1	1	1
Fever ...	—	—	—	3	2
Septic Pericarditis ...	—	1	—	—	—
Uraemia ...	—	—	2	1	—
Immaturity ...	—	—	4	—	—
Bruising ...	—	—	—	1	—

Diseases and Abnormal Conditions found in Animals—*continued*.

Diseases	Cattle exclud- ing Cows	Cows	Calves	Sheep and Lambs	Pigs
(b) Organ(s) and/or Part(s) rejected for human con- sumption :					
Tuberculosis	129	65	—	2	1
Actinomycosis	22	11	—	—	—
Bruising	6	2	1	9	3
Melanosis	—	—	3	—	—
Localized Inflammatory conditions	68	25	2	26	7
Distomatosis	192	50	—	79	—
Angiomatosis	33	51	—	—	—
Rheumatoid Arthritis	—	—	—	7	—
Cirrhosis	11	12	—	1	2
Parasite infestation (includ- ing cysts)	5	1	—	31	—
Unclassified	—	—	—	3	2
Abscesses	13	6	—	10	—

PREVALENCE AND CONTROL OVER INFECTIOUS
DISEASE.

ISOLATION HOSPITAL.

The control and administration of the Hospital were transferred from the Urban Council to the South-East Metropolitan Regional Hospital Board, on the 5th July, 1948, with the inception of the National Health Service. There is now a local and central co-ordination amongst the Hospitals which should be of mutual benefit, specially in respect of staff equipment.

Apprehension regarding sufficiency of staff was constantly present during the year but was counter-acted by the untiring efforts of the Matron and her staff when the number of patients was at its maximum. At the time of writing the number of nurses is sufficient for normal admission periods.

The following table describes the type, number and residential districts of the patients who were admitted during the year.

DIPHTHERIA.

There was only one case of Diphtheria during the year and unfortunately the child, who was not immunised and was admitted to the Isolation Hospital in an advanced stage of the disease, died.

When immunisation became the responsibility of the County Council on 5th July, 1948, 75% of the children under 15 years were immunised which is considered to be a satisfactory level as a barrier against epidemics of the disease.

Constant propaganda is essential to remind parents and is now the responsibility of the County Council, but District Councils are expected to co-operate with local propaganda. It has been shown in a recent enquiry that personal persuasion by Health Visitors and Public Health Medical Officers and others in close contact with parents has been the most important factor in achieving the greatest number immunised. External display hoardings on Council Estates, as is done in some Districts has also been an important source of acceptance. Other methods such as First Birthday Greeting Cards, advertisements in the Press and other publications, Radio talks, Cinema films and slides are valuable auxiliaries in disseminating information.

CARLET FEVER.

Nine cases were notified during the year, and there were no deaths. The disease per se in its present phase is not serious, relative to its virulence in the last Century, and the most common of the serious complications that may occur, is Otitis Media (Middle Ear Disease). This complication if inadequately treated, may become chronic and not only become a potential source of infection to others but may lead to deafness and other sequelae. It is found on examination of the tympanic membranes (ear drums) after admission of the patients to Hospital that the majority are inflamed and adequate early therapy with Antitoxin, Penicillin and/or Sulphonamides is necessary to prevent Otorrhoea (ear discharge). If only for this reason, apart from removing a source of infection and a possible subsequent convalescent carrier from the household, admission to hospital is preferable. All that is necessary to be known regarding the causal organism for preventing an epidemic, is fortunately known.

WHOOPIING COUGH.

Only thirteen cases, compared with 146 in 1947, occurred in the District during the year, and there were no deaths. The disease is particularly dangerous in infants because of the common complication Broncho-pneumonia and every precaution should be taken to prevent their exposure to infection when Whooping Cough is prevalent. Cases in the household should be properly isolated, and parents should avoid contact by their infants with other children.

The findings of the Medical Research Council regarding their recent research into the efficacy of vaccines for immunisation, is eagerly awaited. At present no adequate proof is available that vaccines are certain to prevent the disease.

MEASLES.

119 cases were notified during the year and probably more occurred which were not notified. Fortunately in this minor

epidemic there were no deaths. Measles is most infectious before the typical rash appears, and begins like the common cold, hence the large number of cases which occur amongst children, especially those at School. As in Whooping Cough, parents should be careful to prevent exposure of their infants as far as is practicable, for the death rate amongst infants is high throughout the country. Convalescent serum is available at the Central Laboratory, County Hall, to prevent or attenuate an attack in exposed susceptible children and its use is particularly advisable for weakly children or those suffering from some other illness.

PNEUMONIA (Acute Primary and Influenzal).

9 cases were notified and including secondary pneumonia which is not notifiable there were 10 deaths. Penicillin and Sulphonamide therapy has greatly reduced the number of deaths.

ERYSIPELAS.

3 cases were notified. This disease is now comparatively rare and whereas before the discovery of the Sulphonamides and Penicillin this disease was often fatal, it now responds dramatically to treatment.

ANTERIOR POLIOMYELITIS (Infantile Paralysis).

One case occurred in September, 1948, the patient being a boy, 8 years of age. He was admitted to the Isolation Hospital and after subsequent orthopaedic treatment in Willesborough Hospital made a satisfactory recovery. The source of infection could not be traced and fortunately there were no other cases.

There were no other cases of notifiable diseases as e.g., Typhoid, Paratyphoid, Dysentery, Cerebro-spinal Fever, etc.

TUBERCULOSIS.

New Cases and Mortality 1948.

Age Periods			New Cases				Deaths			
			Respiratory		Non-Respiratory		Respiratory		Non-Respiratory	
			M.	F.	M.	F.	M.	F.	M.	F.
0	...	...	—	—	—	—	—	—	—	—
1	...	...	—	—	—	—	—	—	1	—
5	...	...	—	—	1	2	—	—	—	—
15	...	...	6	3	—	—	—	2	—	—
25	...	...	2	4	—	—	1	2	1	—
35	...	...	1	—	—	1	—	1	—	—
45	...	...	1	1	—	—	1	—	—	—
55	...	...	—	—	—	—	—	—	—	—
65 and upwards	...	...	—	—	—	—	—	—	—	—
TOTALS	...	...	10	8	1	3	2	5	2	—

PUBLIC HEALTH (PREVENTION OF TUBERCULOSIS) REGULATIONS, 1925 and PUBLIC HEALTH ACT, 1936 (SECTION 172).

No action was taken during the year within the powers of the above Acts.

It will be seen from the above table that 18 new cases of Tuberculosis of the Lungs were notified during the year, exactly the same number as in 1947. The annual average for many years has been 10 new cases. The greatest problem today in respect of Tuberculosis is the shortage of nursing staff, and many beds in Sanatoria are empty for this reason. There is also an urgent need for more sanatoria. In consequence many patients with positive sputa are moving indiscriminately amongst the population infecting others.

There were four new cases of other forms of Tuberculosis, compared with 2 in 1947, and the previous annual average of 8. It is hoped that when all milk is compulsorily pasteurised that these cases will be reduced to an absolute minimum. There were 7 deaths from respiratory and 2 deaths from Non-respiratory Tuberculosis.

The dwellings of all Tuberculous Patients are regularly inspected and unhygienic circumstances are remedied as far as practicable and where appropriate, recommendation made for re-housing in Council houses.

APPENDIX.

The inception of the National Health Service Act 1946 on 5th July, 1948, has effected many far reaching administrative changes in the panorama of the Health Services. There are six parts in the Act dealing with :—

- (1) Central Administration.
- (2) Hospital and Specialist Service.
- (3) Health Services to be provided by Local Health Authorities viz. County Councils and County Boroughs.
- (4) General Medical and Dental Services, Pharmaceutical and Ophthalmic Services.
- (5) Special provision as to Mental Health Services.
- (6) General—financial, administrative and supplementary provision

The administration of the Act has been designed on a three-tier system, Central, Regional and Local.

(A) CENTRAL ADMINISTRATION.

The Minister of Health has the assistance of a Central Health Services Council, with Standing Advisory Committees.

(B) REGIONAL HOSPITAL BOARDS.

Centred upon Universities, have been established throughout the Country and are responsible for the Hospital and Specialist Services through the Region.

(C) LOCAL.

(i) *Hospital Management Committee.*

Each region is divided into groups of Hospitals, over which preside the Hospital Management Committees, whose offices in this group are situated in Folkestone, and on the extreme periphery are the local House Committees who are responsible to the Management Committees for day to day administration and the preservation of local interests and personal needs. In this District the House Committee is responsible for the day to day administration of the four local Hospitals, viz., Ashford General, Willesborough General, Infectious Diseases Hospital, Warren Lane, and Hothfield Hospital for the aged and infirm and chronic sick.

(ii) *Executive Councils.*

These Councils are responsible for the General Medical Practitioners' Service, The Dentists' Service and Pharmacists' Service and the supplementary Ophthalmic Service. The Kent and Canterbury Executive Council, situated in Maidstone, and composed of representatives from the Ministry of Health, Local Authorities, General Practitioners, Dentists and Pharmacists, directs the Services for the whole of Kent.

(iii) *Local Health Authorities.*

The Health Committee of the Kent County Council is responsible for the following services.

The County Council Scheme for the administration of the Personal Public Health Services divided the County into 7 areas and this area which comprises Ashford Urban District, Deal, Dover, Folkestone, Hythe, New Romney, Lydd, and Tenterden Borough and East and West Ashford, Dover, Elham, Romney Marsh and Tenterden Rural Districts was designated Area No. 1. The administration of the Services in each area was delegated to Area Sub-Committees, constituted of representatives from each Council whose function is to represent local and personal interests in the organisation and execution of the Services and to place the resolutions before the Central Co-ordinating Health Committee of the County Council.

Over the whole of the administrative County, the County Council became responsible for the services dealing with :—

(1) Maternity and Child Welfare, which includes briefly the establishment and maintenance of clinics, such as Infant Welfare, Ante-Natal, Womens' Welfare and Dental Clinics, Day and Residential Nurseries and Maternity Homes. Full and part-time Medical and Dental Officers, Health Visitors and Midwives are engaged in the work of these clinics. The chief part of the Health Visitors' duties is home visiting and they are the responsible officers for maintaining the link between the homes and the clinics.

(2) Home Nursing.—This service is conducted by State Registered Nurses who visit and nurse the sick in their homes.

(3) Domiciliary Midwifery.—This service is done by State Registered Midwives who conduct the confinements of mothers in their homes, and who also act as Maternity Nurses when Medical Practitioners are engaged.

(4) Immunisation and Vaccination against Diphtheria and smallpox respectively. These are done during Infant Welfare sessions or at special sessions if necessary.

(5) Ambulances and Sitting-case Cars.—This service is now one large unit throughout the Country, administered, and co-ordinated by the County Council, chiefly through the District Officers.

(6) Domestic Help Service.—Each area is supervised by a woman organiser, and each district has a local organiser, who assesses the need for domestic help, and arranges the attendance of the domestic helps. This service is not free. The family income is assessed by the District Officer, and the recipients are obliged to pay charges according to a fixed scale.

(7) Prevention of illness, care and after-care, particularly in respect of Tuberculosis. In general terms the County Council make arrangements for the prevention of tuberculosis and the care and after-care of persons suffering from tuberculosis, mental illness and other illnesses, the provision of nursing equipment and apparatus and the propagation of health education.

(8) Mental Health, including the certification and supervision of mental defectives. The District Officers, whose Offices are in Ashford, Folkestone and Dover and who were formerly Relieving Officers, are the Authorised Officers under the Lunacy and Mental Treatment Acts.

(9) Nursing Homes Registration Act 1927.—These private nursing homes are inspected regularly by the Area Medical Officers, on behalf of the County Medical Officer.

(10) National Assistance Act 1948 (Part III).—Briefly, it is the duty of the County Council to provide services for the welfare of the blind, partially sighted, deaf and/or dumb and other persons who are substantially and permanently handicapped by illness, injury or congenital deformity or other disability as may be described by the Minister.

(11) Nurseries and Child Minders Regulation Act 1948.

This Act places a duty upon the County Council to keep registers of, and empowers them to supervise :—

(a) Premises, other than premises wholly or mainly used as private dwellings where children are received to be looked after for the day or a substantial part thereof, or for any longer period not exceeding 6 days ; and

(b) Persons who for reward receive into their homes children under the age of 5 years to be looked after for the day or a substantial part thereof or for any longer period not exceeding 6 days.

As opposed to these Personal Public Health Services now entirely administered by the County Council, the administration of the environmental health services has been left within the control of the District Councils. A resume of these services has been given in the report.