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of Bacup

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# ANNUAL REPORT

ON THE

# **PUBLIC HEALTH SERVICES**

**OF THE** 

**BOROUGH OF BACUP** 

1952





With the Compliments of the Medical Officer of Health

Stubbylee Hall, Bacup.

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# **HEALTH COMMITTEE**

# 1952 - 1953

#### HIS WORSHIP THE MAYOR, COUNCILLOR J. CRABTREE, J.P.

(ex-officio).

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COUNCILLOR J. H. HARGREAVES

VICE-CHAIRMAN:

COUNCILLOR A. LAMBERT

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#### STAFF OF HEALTH DEPARTMENT

Medical Officer of Health	T. P. O'Grady, M.B., B.Ch., D.P.H.
Chief Sanitary Inspector	R. Haworth, M.S.I.A.
Additional Sanitary Inspector	G. A. Webb, A.R.S.I.
Clerk	Miss D. M. Holt.

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#### Stubbylee Hall, Bacup, Lancashire, August, 1953.

#### TO THE MAYOR, ALDERMEN AND BURGESSES OF THE BOROUGH OF BACUP.

#### Mr. Mayor, Ladies and Gentlemen,

I have the honour of presenting for your consideration, the Annual Report on the Health of Bacup and the work of the Public Health Department for the year 1952. My appointment as your Medical Officer dates from July, when Dr. Farquhar resigned to take up duty elsewhere in the County.

This year's Report follows the usual pattern and the Section dealing with the General Health Services provided in the area has again been included.

The first Section of this Report is largely statistical in character, and tables are provided in the Appendix which indicate many of the trends in the health of the population. For the first time since 1947 the birth rate shows a slight increase on that of the previous year; on the other hand, the number of deaths and the death rate show a decrease as compared with 1951.

The infant mortality rate of 28 compares very favourably with the rate of 33 for 1951 and reflects credit on the Maternity Services provided in the district.

Regarding infectious diseases the outstanding occurrence was the outbreak of smallpox in Rochdale and surrounding County Districts in the early months of the year. Happily only one case occurred in the Borough and the extensive vaccination programme carried out by the General Practitioners and by the Clinic staff should, for some time at least, provide a very useful, if incomplete, bulwark against further inroads of this disease.

An adequate Health Service demands full co-operation between the various Services, comprising the General Practitioners, the Hospital and the Local Authority Services. In my opinion such co-operation does exist to a marked degree in the Bacup area. I am particularly appreciative of the co-operation and advice which has always been available from the Family Doctors in the Bacup area.

I take this opportunity of expressing my thanks to the Chairman and Members of the Health Committee for their unfailing support and encouragement since taking up my appointment. To the staff of the Health Department and in particular to Mr. Haworth, Chief Sanitary Inspector, I am indebted for their hard work, loyalty and co-operation.

> I am, Mr. Mayor, Ladies and Gentlemen, Your obedient servant, T. P. O'GRADY,

> > Medical Officer of Health.

#### SECTION I

#### STATISTICS AND SOCIAL CONDITIONS

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#### SUMMARY OF STATISTICS - 1952

Area (Acres)	 	 	6,121
Population (Estimated mid-1952)	 	 	18,300
Population (Census 1951)	 	 	18,374
Number of Inhabited Houses (1931)			5,964
Number of Inhabited Houses (1952)			6,503
Rateable Value			£94,466
Sum represented by a penny rate			

	Male	Female	Total		
LIVE BIRTHS				Birth Rate (Crude)	
Legitimate	133	129	262	per 1,000 estimated	
Illegitimate	8	12	20	population	15.4
	141	141	282		
STILLBIRTHS	4	3	7	Rate per 1,000 total	
				live and still births	24
DEATHS	134	122	256	Death Rate (Crude)	
DEATHS	151	122	200	1,000 estimated per	
				population	14.0

DEATHS FROM MATERNAL CAUSES

Deaths from Pregnan	ncy, Ch	ildbi	rth a	and A	bort	tion	1
Maternity Mortality	Rate						3.46

INFANT MORTALITY

Deaths of infants under one year of age:

Male Female Total 3 5 8

Death rate of infants under one year of age:

D	eaths from Certa	IN S	Specie	TED	Disi	EASES	Deaths	Rate per 1000 of population
	Cardio-Vascular	Dis	eases				144	7.3
	Cancer						50	2.73
	Tuberculosis						4	0.22

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#### COMMENTS ON VITAL STATISTICS

#### Population

The Registrar-General's estimate of the population (mid-1952) was 18,300, which is 74 below the census figure of April, 1951.

#### Births

There has been a gradual decline in the birth rate over the whole country since the year 1947. The actual number of live births registered in Bacup in 1952 was 282, giving a crude birth rate of 15.4 per 1,000 of the population, as against 273 births and a rate of 15.0 for the previous year.

The 20 illegitimate births registered in 1952 represent 7.1% of the total live births, compared with 6.6% in 1951.

#### Deaths

Table 1, Appendix A, gives the causes of deaths occurring in the Borough of Bacup during the year 1952. Total deaths show a decrease, with 256 registered, as against 307 in 1951, the comparative crude death rates being 14.0 and 16.9 respectively. Crude death rates are shown in Table V, Appendix A, from which it will be seen that the 1952 figure of 14.0 is about the average for the five-year period.

The relative importance of the principal causes of death is shown in the following table:

Cause of Death	1952					
	No. of Deaths.	Percentage of Total Deaths.				
Heart Disease	91	35.5				
Cancer	50	19.5				
Cerebral Haemorrhage, etc.	37	14.4				
Bronchitis	14	5.4				
Violence (including suicide and road traffic accidents)	10	3.9				
Influenza, Pneumonia and other respiratory diseases	8	3.1				
Other circulatory diseases	16	6.2				
Tuberculosis (all forms)	4	1.5				

It will be seen that heart disease, cancer and cerebral hæmorrhage are still the three most common causes of death. The number of deaths from Bronchitis was less than that of the previous year.

#### Maternal Mortality

Table V. Appendix A shows that the maternal mortality rate has decreased markedly in the Borough within the last decade. During 1952 one death occurred in Bacup due to a complication of pregnancy.

#### Infant Mortality

There were eight deaths of infants under one year of age in 1952, equivalent to a mortality rate of 28 per 1,000 live births, compared with nine such deaths and a rate of 33 in 1951. The corresponding figure for England and Wales in 1952 was 27.6 and for the 160 smaller towns, 25.8, as will be seen from Table IV. Appendix A.

The infant mortality rate has always been considered to be a good indication of the social condition of the area. Where, however, the numbers concerned are small, fluctuations of no great significance are apt to occur in the annual infant death rate, and the progress made can best be judged from a consideration of the quinquennial mortality rates as shown in Table V. Comparative figures for the whole of the Administrative County are also given in this Table.

#### Neo-Natal Mortality and Stillbirths

Neo-Natal period is the term used to indicate the first four weeks of an infant's life. It will be seen from Table II, Appendix A, that of the eight infants who died under the age of one year, four of these, i.e. 50%, died in the first four weeks of life. This represents a neo-natal mortality rate of 14 per 1,000 live births. Table III shows that of the four neo-natal deaths one occurred within one day of birth as a result of a congenital abnormality.

Stillbirths during the year totalled seven, representing a stillbirth rate of 24 per 1,000 total live and still births. Amongst the factors responsible for stillbirths, and deaths in the first month after birth, the nutrition and health of the mother during pregnancy is now generally regarded as the most important. Much of this wastage could be prevented by improved ante-natal care, and by further research into the, as yet, little known causes of prematurity and congenital abnormalities.

#### **Comparative Tables**

Attention is drawn to Tables IV and V in Appendix A, which enables certain comparisons to be made. Table IV comprises provisional figures based on the quarterly returns of the Registrar General. Table V gives the mean rates over periods of five years from 1900 - 1949 relative to live births and crude deaths in Bacup. It should be understood that there are certain statistical fallacies attached to such comparisons. For example, the trend of the crude death rate over a period of years for the same town can only be regarded as a true index of local conditions if the age and sex structure of the population has not altered.

#### SOCIAL CONDITIONS

#### **Chief Occupations**

The shoe and slipper trades and cotton manufacturing provide the chief occupations in the Borough, but light engineering and quarrying also give employment to a number of people in the district. The country is hilly and there are many scattered hill farms with small dairy herds.

#### Morbidity

Through the courtesy of the Manager of the local office of the National Insurance, which covers the Borough of Bacup and the district of Shawforth, the weekly figures of new claims to sickness benefits during 1952 have been made available, and it is hoped that analysis and comparison of these figures from year to year will provide some useful information about the general health of the population.

#### Housing

The hilly nature of the district has led in the past to the building of many back to back, back to land and basement dwellings, and the prevalence of such a large proportion of these types of houses, which to-day cannot generally speaking be regarded as of a satisfactory standard, has created a difficult problem.

During 1952 many more new houses were built than in the previous year and good progress is being made with further housing schemes.

\*

#### SECTION II

#### GENERAL PROVISION OF HEALTH SERVICES FOR THE AREA

Any review of the general provision of health services for the area should of necessity cover all three branches of the National Health Service. Lack of space, however, precludes more than a brief mention of two of these, namely, the General Medical Practitioner (and Dental etc.) Services, and the Hospital and Specialist Services, so that this section will be confined mainly to a review of the health services provided by the Local Health Authority, i.e. by the Lancshire County Council.

Certain of these local services were previous to 5th July, 1948, the responsibility of the Borough Council and it is realised that your own Health Committee (and indeed the Council as a whole) are still deeply interested in the personal health services provided for the inhabitants of the town. The day-to-day administration of these services is now the responsibility of Divisional Health Committee No. 13, on which the Bacup Borough Council is represented.

The environmental health services are, of course, still under your own control but, as your Medical Officer of Health is also Divisional Medical Officer, co-ordination locally of the whole of the Public Health Service is assured.

#### Notification of Births

It is a requirement of Section 203 of the Public Health Act, 1936, that every birth shall be notified to the Medical Officer of Health of the Welfare Authority for the area in which the birth takes place. Since the National Health Service Act, 1946, came into operation, arrangements have been made for every birth notification to be sent to the Divisional Medical Officer, as this method greatly facilitates the prompt visiting of new-born infants and their mothers by the health visitors in the area. During 1952 there were 282 births and 7 stillbirths registered as belonging to mothers normally resident in Bacup.

#### Ante-Natal Clinic

During 1952 weekly ante-natal sessions were held at the Bacup Clinic and were attended each week by the local Midwives and a Health Visitor, while Dr. Feeny, the Assistant Divisional Medical Officer, attended every second week. The total attendances made by expectant mothers were somewhat lower than the very high figure of 1951.

Facilities are now available for specimens of blood to be taken from expectant mothers at the ante-natal clinic, Routine blood grouping, hæmoglobin estimations, listing for the Rh. factor and the Wasserman reaction are carried out on all new cases, and copies of the reports are sent to the general practitioners. The following table gives a summary of the attendances during 1952:

#### ATTENDANCES AT BACUP ANTE-NATAL CLINIC DURING 1952

Number of Sessions	Number of Individual	Number of attendances at Sessions conducted by:—						
during year	Women attending during year	Consultants	A.D.M.O's.	Midwives Health Visitors, etc.	Total			
47	106	_	216	128	344			

#### **Domiciliary Midwifery Service**

During the year one of the three Bacup midwives was transferred to the Whitworth area, but is still available for emergency cases in the Bacup area. During the year the domiciliary midwives attended 109 live and still births and miscarriages, as compared with 137 during 1951. Domiciliary confinements continue to decrease while hospital confinements tend to increase.

All county midwives in practice in Bacup are qualified to administer analgesia and in 1952 gas and air analgesia was administered in the home in 41% of the domiciliary confinements.

The services of emergency obstetrical units are available from several hospitals in the neighbourhood, the nearest unit being stationed at Bank Hall Maternity Hospital, Burnley. The essential role of these units is to provide a resuscitation of domiciliary patients suffering from shock and too ill to withstand the journey to hospital. Detailed figures of the work done by the Bacup midwives are given in the following table:

#### WORK CARRIED OUT BY L.C.C. MIDWIVES IN BACUP AREA DURING 1952

Number of Mid- wives	birth misca	e and still is and rriages nded	Cases in which		Visits	Paid	
	As midwife	As maternity nurse	GAS/AIR admin- istered	Ante- natal	Puer- perium	Post- natal	Total
2	68	41	45	622	1574	_	2196

#### Child Welfare Centre

A weekly welfare session was held at the Bacup Clinic throughout the year. The total number of attendances made by children amounted to 3122, this being six fewer than in 1951.

The number of individual children attending however was 472 as compared with 423 in the previous year.

#### ATTENDANCES AT BACUP WELFARE CENTRE ALL SESSIONS (INCLUDING DOCTOR'S SESSIONS)

No. of				f individu ding at a		Number of attendances by children at ages			
Year	Ses'ns during year	Under 1 year	1 - 2 years	2 - 4 years	Total	Under 1 year	1 - 2 years	2 - 4 years	Total
1950	51	271	46	66	383	2509	436	433	3378
1951	51	260	61	102	423	2272	370	486	3128
1952	53	273	71	128	472	2301	387	434	3122

#### Health Visiting Service

During 1952 the two health visitors in Bacup did much valuable work and they were able to devote more of their time to home visiting. It is in the home that the health visitors can render such valuable assistance to young and harrassed mothers and once accepted by the neighbourhood, the "nurse" becomes the trusted friend and advisor of the whole household. During the year they made 6717 individual visits, visiting 4155 homes.

Special mention should be made of the Welfare work carried out during the year by the health visitors, in particular the compiling of a Register of Disabled Persons which has already led to the provision of at least some services for such disabled persons.

The health visitors also carry out the duties of school nurses, and further information on the extent of their work will be found in the following table:

#### WORK CARRIED OUT BY HEALTH VISITORS IN BACUP

Indiv	ber of idual sits	Number of Homes visited	Number of School Clinics Attended	Number of Child Welfare Sessions Attended	Number of Ante-natal and Post- natal Clinics Attended	Number of other Sessions
1952	6717	4155	206	59	25	65
1951	6484	3545	197	74	23	60

#### Immunisation and Vaccination

Immunisation against diphtheria and vaccination against smallpox continue to be practised regularly, and parents have the choice of having this protection for their children carried out either by their own doctor or at the Rochdale Road Clinic. Every endeavour is made by the medical and nursing staff to persuade parents to give their consent to these very necessary and valuable preventive measures.

The phenomenal increase in vaccination figures was occassioned by the outbreak of smallpox in Rochdale and surrounding districts.

As will be seen from the table below, 304 children completed the full course of primary immunisation, while 449 received reinforcement injections. This represents a substantial increase on the previous year's figure and reflects the good work done by the clinic staff.

# NUMBER OF IMMUNISATIONS PERFORMED IN BACUP

	cou	rse of p	rimary	immur	isation o	luring	the per	iod	R	einforce	ements	
	Age at final injection								Age Group			
0- yrs.	1- yrs.	2- yrs.	3- yrs.	4- yrs.	Total under 5 yrs.	5– yrs.	10- yrs.	Total 5–14 yrs.	0– yrs.	5- yrs.	10- yrs.	Total 5-14 yrs.
1952 112 1951	89	22	13	15	251	47	6	53	29	276	144	449
54 1950	160	16	5	4	239	25	-	23	49	182	158	389
22	125	22	7	4	180	11	1	12	_	83	_	83

# NUMBER OF VACCINATIONS PERFORMED IN BACUP

	1	PRIMARY V	ACCIN	ATIONS				RE-V	ACCINA	TIONS	
	Age in years						Age in years.				
		Under 1	1 -	5 -	15 -	Total	Under 1	1 -	5 -	15 -	Total
1952	Р. S.	112 100	408 397	1506 1478	1330 1308	3356 3283	33	12 8	166 159	1245 1172	1426 1342
1951	Р. S.	37 35	17 16	8 8	8 8	70 67	_	_	=	46 38	46 38
1950	P. S.	19 17	13 12	1	10 9	43 39	3	1 1	=	37 25	41 27

P. - Performed.

S - Successful.

#### Home Nursing

With the continued pressure on the general practitioners and hospital services, the need for domiciliary nursing has tended to increase. During the year under review the three Bacup nurses attended 293 new cases and the total number of visits amounted to 9807.

Nurses continue to issue articles of nursing equipment as required, free and on loan. Arrangements are in force whereby in cases requiring immediate nursing attention on leaving hospital a message is passed by telephone to the nurse concerned.

Further analysis of their work will be found in the following table:

#### WORK CARRIED OUT BY DISTRICT NURSES IN BACUP - 1952

	CASES A	VISITS MADE				
On books 31st Dec., 1951	New Cases attended 1952	Cases completed 1952	Remaining on books 31st Dec. 1952	Routine	Casual	Total
66	293	280	79	9726	81	9807

#### Home Help Service

This service is designed primarily to deal with emergency cases, ready to give assistance to families with young children so that the breadwinner may return to work. During the year there was a noticeable increase in the demand for domestic help from the chronic sick, and the aged and infirm. In these cases help is required almost continuously or over a long period of time, so that cost tends to become the limiting factor. Applicants are required to contribute towards the cost of this service according to the financial circumstances of the household, but most old age pensioners are given this service free of charge.

It has never been easy to recruit home helps in Bacup and now that the demand is growing it is becoming increasingly difficult to give the old people as much help as they need. Every effort is made to encourage the spirit of voluntary service amongst relatives and neighbours. The following table summarises the work done in 1952 and provides a comparison with the previous year.

#### NUMBER OF FAMILIES ASSISTED IN BACUP

			1952	1951
1.	Confinement at home	 	3	3
2.	Confinement away from home	 	1	5
3.	Tuberculosis	 	-	1
4.	Sickness other than tuberculosis	 	7	8
5.	Old age and infirmity	 	42	32
				-
			53	49

# Prevention of Illness, Care and After-Care

The most valuable form of health education is undoubtedly that of a personal and informal nature such as is carried out by all members of the Health Services in the course of their day-to-day duties. In this field the health visitor and the school doctor have infinite scope for health teaching. In addition, propaganda is used as occasion arises and during the year numerous leaflets, posters and booklets have been distributed from the clinic.

The happy relationship established with the staffs of hospitals in the area allows of continuity of treatment when persons are discharged from hospital and come under the care of midwives, district nurses, health visitors, home helps or mental health workers. The system of notification of discharges from hospital was improved during the year.

As part of their arrangements for Care and After-Care, the County Health Committee have authorised that arrangements be made for Convalescent Home accommodation. During 1952, eleven adult persons were admitted from Bacup to convalescent homes. For this service also applicants are required to contribute according to their means.

The care and after-care of persons suffering from Tuberculosis is carried out as a routine duty by the Tuberculosis Health Visitor, based on the Dispensary at Stacksteads, and the following table gives details of her visits to patients in their homes for 1952.

#### WORK CARRIED OUT BY TUBERCULOSIS HEALTH VISITOR DURING 1952

Number of Dispensary Sessions attended	 	 	74
Routine Visits:			
New Cases and Contacts	 	 	60
Old Cases and Contacts	 	 	370

Articles of sick room and after-care equipment are stored at convenient centres and are available on loan from district nurses and tuberculosis health visitors.

#### Ambulance Service

As regards the total number of cases conveyed and mileage covered the 1952 figures show a considerable increase over the previous year.

Adaptations at the premises acquired for the new Stacksteads Ambulance Station were completed in the Autumn and the new Station opened on 2nd November, 1952, when the service area was extended to cover Rawtenstall and Haslingden, in addition to Bacup and Whitworth.

No. of vel at 31.12				Cases ren	moved d	luring 1952	and n	nileage inv	olved.	
Ambu- lances		Cars	Eme	rgency	(incl	neral uding atients)	Infectious disease		Total Cases	
			No.	Mileage	No.	Mileage	No.	Mileage	No.	Mileage
1952	5	3	674	11406	6124	77648	23	501	6821	89555
1951	2	1	508	9498	4013	57694	27	646	4548	67838
1950	2	1	499	7206	3813	57962	42	1141	4354	66309

The following table shows the work done by the Bacup Ambulance Station:

#### Mental Health Service

By virtue of the National Health Service Act, 1946, the Divisional Health Committee is responsible for the ascertainment of mental ill health and mental deficiency, for the community care of mental defectives by statutory supervision or guardianship, and the provision of after-care for persons who have undergone treatment for mental illness. The duties relating to the above service are undertaken on a divisional basis by Mr. E. B. Williams and Mr. J. H. Todd, who function as duly authorised officers or as mental health workers as may be required.

There is no Occupation Centre for mental defectives within the Division, but of the total number of defectives in the community of Bacup two are attending the Rochdale C.B. Occupation Centre and another two are attending the Burnley C.B. Occupation Centre. Arrangements have been made for the acceptance of these pupils at the Lancashire County Council Occupation Centre, Stubbins, near Ramsbottom, with effect from the 6th January, 1953.

#### School Health Services

Local co-ordination between the School Health Service and the other health services of the County Council is secured by reason of the fact that your Medical Officer of Health, in his capacity of Divisional Medical Officer, is required to undertake duties as Senior School Medical Officer within his division including Bacup. Close integration in the field is achieved also since the Bacup health visitors also act as school nurses, so that continuous contact with and supervision of children can be maintained from birth to the end of school life.

#### Laboratory Facilities

The bacteriological examination of milk, water and ice-cream is now carried out at the Public Health Laboratory at Monsall Hospital, Manchester, and this laboratory may also be used for the examination of specimens of fæces, urine, sputum, throat swabs, blood, etc. The laboratories attached to Birch Hill, Bury General and other local hospitals, continue to carry out bio-chemical and other examinations for general practitioners.

#### Clinic Sessions and Health Staff, Bacup

In Appendix B will be found two tables which give detailed information about sessions held at the Bacup Clinic and members of the Divisional Health Staff working in the Bacup area.

#### SECTION III

#### PREVALENCE OF, AND CONTROL OVER, INFECTIOUS AND OTHER DISEASES

#### Notifications

The National Health Service Act, 1946, requires copies of all notifications of infectious diseases to be forwarded without delay to the County Medical Officer of Health, but in actual practice these are sent to the Divisional Medical Officer so that he may correlate action within his divisional area. Table IX, Appendix C shows the total number of cases of each disease notified during 1952, together with the age incidence. Cases continue to be admitted to the Florence Nightingale Hospital, Bury, when this is considered necessary.

#### Incidence of Main Infectious Diseases

The notification of various diseases totalled 293 as against 130 the previous year and an average of 214.6 during the five years 1946-1950. Comparative figures for the main infections are given in the following summary:

	1952	1951	Average 5 years 1946-50
DIPHTHERIA		_	2.6
SCARLET FEVER	. 8	21	18.2
Measles	. 22.1	44	188.8
WHOOPING COUGH	. 37	56	45.0
TUBERCULOSIS	. 10	13	20.2
PNEUMONIA	. 10	3	14.6
Smallpox	. 1	-	_
OTHER DISEASES	. 16	6	5.2
	303	143	294.6

#### Measles

This disease again accounted for the major number of the infectious diseases, although many of the cases were of a mild nature, and no deaths resulted.

#### Whooping Cough

The incidence of whooping cough was below the average, 37 cases having been notified during the year 1952, compared with 56 cases in 1951. No deaths resulted. Further large trials are still being carried out with whooping cough vaccine, but the Ministry of Health have not yet issued any official recommendations as to its use, although a definite pronouncement is expected shortly.

#### Scarlet Fever

There were eight cases of scarlet fever notified during 1952, this being 13 less than in the previous year. There were no resultant deaths.

#### Diphtheria

It is satisfactory to record that for the fifth year in succession no cases of diphtheria have occurred in Bacup. On page 12 will be found figures showing the number of children immunised against diphtheria. Although more children were immunised than in the previous year (the number of reinforcement injections being especially satisfactory) there must be no relaxation in our efforts to maintain a high rate of immunisation in the child population.

#### Tuberculosis

There were ten new cases of tuberculosis notified as against thirteen in the previous year, and an average of 20.2 during the five years 1946-1950. Of these ten cases, six were Pulmonary and four Non-Pulmonary. During the year there were five deaths in total, all of which were due to the pulmonary type of the disease. The Mortality rate of respiratory tuberculosis for England and Wales as a whole has shown a fairly steady decline over the past 50 years, and reference to Table V, Appendix A shows that in Bacup the mortality from this disease has followed a similar course, although the rate for 1952 is higher than the record low figure for 1951.

#### Smallpox

One case of Smallpox occurred in Bacup during the year when this disease was prevalent in the County Borough of Rochdale. The amount of work involved in the tracing and surveillance of contacts and the organisation of vaccination clinics in order to prevent the spread of the disease threw a very heavy burden on the staff of the Health Department and the Clinic, to whom every credit is due for their whole-hearted response.

#### Chickenpox

Chickenpox, not naturally a notifiable disease, was made notifiable for a period of six months. This was part of the precautionary measure taken against the spread of smallpox, making less likely the possibility of a mild case of smallpox being overlooked as a case of the milder disease. In all, 15 cases were notified.

Public Health Department, Stubbylee Hall, Bacup. August, 1953.

#### Dr. T. P. O'Grady, Medical Officer of Health, Borough of Bacup.

Sir,

I have pleasure in submitting the Report on the Sanitary Inspection of the Borough for the year 1952.

It is noteworthy that it was found possible during the year to commence the closing of a few houses where extremely bad conditions were present, and although only a small number of houses were dealt with in this way, it forms the beginning of efforts to secure a better standard of housing within the district. The owners of small cottage property still find difficulties in meeting the cost of repairs where rents are restricted, and complain bitterly when served with notices to carry out major repairs.

A main feature of the work of the Health Department was that in connection with the outbreak of Alastrim in Rochdale, which fortunately only resulted in the occurrence of one case within the Borough of Bacup. This entailed much work, but a noteworthy point was the excellent cooperation by the members of the public, and this I feel, had much to do with the eliminating of the infection.

The private water supply within the town came under review, and many samples were taken. Several of the houses affected had town's water installed, and suitable action was taken in other cases.

Remarks on the environmental services will be found in the text of the Report, and in conclusion may I express to you, Sir, and to Dr. R. W. Farquhar, your predecessor, my thanks for the guidance and co-operation received throughout the year.

My thanks are also due to the staff of the Health Department, and Officials of the Council for the splendid co-operation received.

I am,

Your obedient servant,

#### R. HAWORTH,

Chief Sanitary Inspector.

#### SECTION IV

#### ENVIRONMENTAL HEALTH SERVICES

#### (A) SANITARY INSPECTION OF AREA

#### Water Supply

The main supply of water to the town is satisfactory, being provided by the Borough of Bacup Water Undertaking, and a large percentage of the domestic properties enjoy a supply of water which is wholly sufficient and excellent in quality.

The whole of the water supplied by this undertaking is now filtered and chlorinated, and is collected from the upland surface gathering ground and stored in three main reservoirs at Cragg, Cowpe and Sheephouse.

Thirty-six samples of the town's water were taken during the year and submitted for bacteriological examination. Thirty-two of these proved satisfactory and the remaining four samples which were unsatisfactory had very low bacterial counts.

Thirty samples were submitted for chemical analysis and of these twenty-eight proved satisfactory, one was slightly acid and plumbo solvent and one opalescent. Appropriate action was taken to remedy the tendancy to plumbo solvency.

The number of dwelling houses supplied from the public mains is 6276.

The private water supplies from shallow wells are gradually going out of use, but during the year some sixty-six samples were submitted for bacteriological examination, Fifty-four of these proved unsatisfactory. Prompt action was taken and the supplies are kept under constant review.

#### **River and Streams**

The Mersey River Board is the controlling authority for the main river in the Borough, and the Local Authority are responsible for the streams and the portion of the Irwell which joins on to the main river.

The river Irwell is used in connection with the Local Industries and is widely used for trade effluents.

#### **Public Cleansing**

The household refuse collection service is maintained on a weekly basis from all houses in the town, and approximately 7,000 dustbins are emptied weekly by the three side loading freighters each manned by a driver and four loaders.

Refuse disposal is carried out by controlled tipping at the two tips at Sharneyford and Blackwood, and the Council have in operation a salvage scheme. Street cleansing is carried out under the supervision of the Borough Surveyor, and gully emptying is done by modern mechanical means.

One hundred and twenty pail closets are emptied each week.

#### **Closet Accommodation**

The closet accommodation in the Borough consists mainly of fresh water closets, there being approximately 4,589 of these, and gradual abolition of the 358 waste water closets is encouraged by the grants made by the Health Committee in respect of conversions. Details of the closets other than fresh water closets are given in Table XI, Appendix D.

Many of the back-to-back type houses have joint W.C. accommodation and this type of house would be greatly improved if separate indoor sanitary accommodation could be provided.

#### Eradication of Bed Bugs

Hydrogen Cyanide is used in connection with the disinfestation of household goods when transfers are made from infested property to Council Houses, and others are treated with D.D.T. Solution and Spray.

These methods proved effective particularly if a follow up spraying was performed and the advice given to tenants was acted upon.

#### **Atmospheric Pollution**

Little trouble was experienced during the year by atmospheric pollution from smoke, and it was only necessary to take action in one case.

Many of the local industries are using electrically driven machinery to a great extent and it would seem that this is already having its effect on the amount of atmospheric pollution by smoke from steam raising plants. Much still remains to be done with regard to the atmospheric pollution caused by domestic chimneys, and smokeless fuels and improvement in the design of domestic fireplaces will no doubt aid progress in this direction.

#### **Rodent Control**

This work is carried out in accordance with the recommendations of the Ministry of Agriculture and Fisheries, and the Council's sewers were treated on two occasions.

During the first treatment carried out in April, 260 manholes were treated and 54 showed a prebait take, and as a result 138 poison baits were laid.

The second maintenance treatment carried out in October necessitated the treatment of 160 manholes and 50 showed a prebait take.

In addition to this, 13 Business Premises, 71 Dwelling Houses, 2 Agricultural Property and 12 Local Authority Properties were treated.

#### Swimming Baths

The Council own and administer the Public Baths which are situated in the centre of the town.

The new modern filtration and chlorination plant which was installed during 1950 has led to greatly improved conditions from public health point of view, and the public no doubt have now excellent conditions for bathing.

#### Factories

The sanitary accommodation in most of the factories within the district is reasonable in standard as more firms are realising the necessity of modern conveniences, and recognise this as one of the necessities for attracting labour.

Table XII, in Appendix D gives a summary of the inspections made and details of the results.

#### Sanitary Inspection of the Area

Many of the owners of small cottage property still complain bitterly that the rents received do not allow for the increased cost of building materials and labour, and the efforts required to enforce statutory notices and informal notices requiring repairs, remains a major problem in the department.

This problem is one which is not easy of solution and although no relaxation can be condoned, the economic difficulties of the owners of small cottage property obviously present themselves.

The Statement in Table X, Appendix D shows the number and nature of the inspection made.

#### (B) HOUSING

The building of new houses continues and new sites are in the course of preparation and completion. The housing problem is one which requires constant attention, and whilst every endeavour is made to keep the old houses weather proof, and in a reasonable state of repair, the work done is often not sufficient to render the old houses in all respects fit for habitation. In addition, the lack of amenities in the numerous back-to-back houses is a matter of serious concern.

Greatly improved progress was shown during the year in the erection of new houses, 104 being completed by the Local Authority, and many more houses will shortly be ready for occupation.

One new house was erected by private enterprise.

It is difficult to assess the extent of overcrowding in the Borough, in the absence of a proper survey, but it is known that some overcrowding exists. Table XIII, Appendix D, gives details of the new houses provided and also the action taken with regard to unfit dwellinghouses.

It is noteworthy that the Health Committee saw fit to make Closing Orders in respect of houses which were unfit for habitation and a start was therefore possible in getting rid of the worst living conditions in the Borough.

#### (C) INSPECTION AND SUPERVISION OF FOOD

#### Milk Supply

The responsibility for the supervision of farms and the production of milk having passed to the Ministry of Agriculture and Fisheries, the main duty of the Local Authority was in connection with distributors of milk, and the registration of milk distributors, dairies or milk shops.

Details of the premises within the Borough and the results of bacteriological samples of milk are given in Table XIV, Appendix D.

#### Food Hygiene

Routine visits were made during the year to the premises in the Borough where ice cream is manufactured and the 54 premises where ice cream is sold by retail only.

The bulk of the ice cream which is sold in the town is manufactured by persons who have premises outside the Borough and little difficulty was experienced with this commodity. Much of the ice cream sold is now prepacked.

The County Health Exhibition was held in January, 1952, and food hygiene formed one section.

No cases of food poisoning occurred during the year and details of the food condemned and surrendered are given in Table XV, Appendix D.

#### Food and Drugs Act - Sampling

Under the provisions of the act, the Local Authority act as a food and drugs authority, samples of milk and other foods being taken at various times throughout the year.

For details see Table XVI, Appendix D.

#### (D) GENERAL

#### Petroleum Acts and (Carbide of Calcium) Order

The licencing of petroleum stores is a duty carried out by the Health Committee and 55 licences are at present in operation for the storage of petroleum spirit or mixtures.

Three persons are licenced to keep carbide of calcium.

#### Hackney Carriage and Driving Licences

During the year 23 Hackney Carriage Licences were issued and 21 Licences to drive Hackney Carriages.

\*

#### **Game Dealers Licences**

Two licences to deal in game were renewed and issued.

#### **Old Metal Dealers**

Six Licences were issued to dealers in old metal.

#### APPENDIX A

# STATISTICAL AND SOCIAL CONDITIONS

#### TABLE I.

# REGISTRAR GENERAL'S RETURN

#### FOR THE YEAR 1952

#### CAUSES OF DEATH

GROUP CAUSES OF DEATH	MALES	FEMALES	TOTAL
Tuberculosis Respiratory		0	1
Tuberculosis other forms	4	0	4
Syphilitic disease	0	0	0
Diphtheria	0	1	1
Whooping Cough	0	0	0
Meningococcal infections	0	0	0
	0	0	0
Measles		0	0
Other infection and any lit it	0	0	0
Malignant neonlasm stomash	6	1	1
Malignant neoplasm, lung and bronchus	3	0	8
Malignant neoplasm, breast	0	0	5
Malignant neoplasm, uterus		5	2
Other malignant and lymphatic neoplasms	15	12	8 3 5 5 27
Leukæmia and Aleukæmia	2	0	21
Diabetes		2	22
	19	18	37
Coronary disease, angina.	22	10	29
Hypertension with heart disease	5	1	
Other heart diseases	21	35	6
Other circulatory diseases	21	35	56
Influenza	ó	9	16
Pneumonia	3	4	0
Bronchitis	12	7	14
Other diseases of respiratory system	0	2	14
Ulcer of stomach and duodenum	2	0	
Gastritis, enteritis and diarrhœa	ő	2	2
Nephritis and nephrosis	0	ő	2 2 0
Hyperplasia of prostate	1	0	1
Pregnancy, childbirth and abortion	Ó	1	1
Congenital malformations	2	1	1
Other defined and ill-defined diseases	2 5 3	8	3 13
Motor vehicle accidents	3	0	15
All other accidents	1	4	35
Suicide	1	0	1
Homicide and operations of war	0	1	1
	v		
ALL CAUSES	134	122	256

#### TABLE II.

~						N	IONTH	łS					Terel
Cause of Death	Under- 1 month	1	2	3	4	5	6	7	8	9	10	11	- Total under 1 year
Broncho- Pneumonia	1	-	-	-	-	-	-	-	-	-	-	1	2
Prematurity	1	-	-	-	-	-	-	-	-	-	-	-	1
Gastro Enteritis	-	-	-	1	-	-	-	-	-		-	-	1
Subdural Hæmatoma	-	_	-	_	-	-	-	-	-	-	-	-	-
Atelectasis	1	-	-	-	-	-	-	-	_	-	-	-	1
Sonne Dysentery	-	-	1	-	-	-	-	-	-	-	-	-	1
Operational Shock	-	-	-	-	-	-	-	1	-	-	-	-	1
Leukæmia	1	-	-	-	-	-	-	-	-	-	-	-	1
	4	-	1	1	-	-	-	1	-	-	-	1	8

#### **INFANTILE MORTALITY - 1952**

#### TABLE III.

Cause of Death	Under 1 Day	1 Day	2 Days	3 Days	4 Days	5 Days	6 Days	7 to 13 Days	14 to 20 Days	20 to 28 Days	Total
Broncho Pneumonia	-	-	-	-	-	-	-	-	-	1	1
Prematurity	-	-	1	-	-	-	-	-	-	-	1
Atelectasis	1	-	-	-	-	-	-	-	-	-	1
Leukæmia	-	-	-	-	-	-	-	1	-	-	1
	1	-	1	-	-	-	-	1	-	1	4

#### NEO-NATAL MORTALITY - 1952

TABLE IV.

# COMPARATIVE TABLE OF VITAL STATISTICS FOR 1952

# Birth Rate, Death Rate and Analysis of Mortality

	1	_				
Infant Death Rates per 1,000 Live Births	Total Deaths Under 1 yr.	28.0	27.6	31.2	25.8	23.8
Infant Rat 1,00 Big	Diar'a and Enter's under 2 yrs.	7.09	1.1	1.3	0.5	0.7
	Pneu- monia	0.38	0.47	0.52	0.43	0.58
ULATION	Acute polio- myel- itis	0.00	0.01	0.01	0.00	0.01
000 Pop	Small- pox	0.00	0.00	0.00	0.00	0.00
E PER 1,	Influ- enza	0.00	0.04	0.04	0.04	0.05
ANNUAL DEATH RATE PER 1,000 POPULATION	Tuber- culosis	0.22	0.24	0.28	0.22	0.31
JAL DEA	Diph- theria	0.00	0.00	0.00	0.00	0.00
ANNI	Whoop- ing Cough	0.00	0.00	0.00	0.00	0.00
	Typh'd an Whoop Para- Typh'd Cough	0.00	0.00	0.00	0.00	0.00
	All Causes	14.0	11.3	12.1	11.2	12.6
Birth Rate per 1,000 Total Population	Still Births	0.38	0.35	0.43	0.36	0.34
Birth Raper 1,00 Total Populati	Live Births	15.7	15.3	d- lg 16.9	15.5	17.6
		BACUP 15.7	ENGLAND AND WALES 15.3	160 Great Towns includ- ing London (exceeding 50,000 population)	160 Smaller Towns (Resident Population 25,000 to 50,000)	London 17.6

	>		
	-		
E	-	9	

BACUP M.B. - VITAL STATISTICS

MEAN RATES FOR THE PAST FIFTY YEARS

PER 1	,000 of Esti	PER 1,000 of ESTIMATED POPULATION	NOIT	MATERNITY MORTALITY RATE	MORTALITY TE	INFANT N R	Infant Mortality Rate
	Crude Death-rate	Death-rate from tuberculosis of respirat'y system	Death-rate from cancer	Per 1,000 live births	Per 1,000 total (live and still births)	Rate of de one year live	Rate of deaths under one year per 1,000 live births
1						Bacup	Administra- tive County
	17.6	96.0	0.65	I	I	146	119
	15.4	0.82	0.48	I	I	119	86
	16.3	0.95	0.69	I	I	112	67
	16.9	0.79	1.11	6.32	1	109	68
	14.2	0.69	1.02	4.34	1	84	70
-	16.1	0.61	1.27	6.74	1	88	99
	14.2	0.56	1.15	3.87	3.70	19	19
	15.5	0.64	16.1	6.12	5.74	19	52
	14.8	0.46	1.93	2.24	2.15	46	46
	14.1	0.40	1.70	2.41	2.34	45	41
	15.6	0.22	2.88	0.0	0.0	25	
	16.9	0.16	1.98	3.66	3.58	33	
1	14.0	0.22	2.73	3.54	3.46	28	

#### APPENDIX B

# GENERAL PROVISION OF HEALTH SERVICES FOR THE AREA

#### TABLE VI

# Clinic Sessions at the School Clinic, Rochdale Road, Bacup

	Ν	Ion.	TUES.	WED.	THURS.	Fri.
Minor Ailments	9–10	.30 a.r	n. —	9-12 noon		9–10.30 a.m.
Eye Clinic	2-4 j (every week	p.m. second only).	-	-	-	
Dental Clinic	9–12	noon	9-12 noon	_	9-12 noon	9-12 noon
Immunisation and Vaccination		_	_	11.0 a.m.	_	_
Child Welfare Clinic		_	_	2–4 p.m.	_	_
Ante-Natal and Post-Natal Clir	nics -	_	_		_	2–4 p,m.

#### TABLE VII.

#### Divisional Health Staff - Bacup Area

Assistant Divisional Medical Officer and School Medical Officer.	Dr. M. A. Feeny, School Clinic, Rochdale Road, Bacup. Tel. Bacup 65.
Dental Officer	J. Barcroft, School Clinic, Rochdale Road, Bacup.
Health Visitors and School Nurses.	Miss B. A. Kelly do. do. Miss E. M. Rainford do. do.
Tuberculosis Health Visitor.	Mrs. M. E. Schofield, Chest Clinic, Knott Hill House, Stacksteads, Bacup. Tel. Bacup 201.
District Nurses.	Miss D. L. Cummings, 33 Dale Street, Bacup. Tel. Bacup 297. Miss P. M. John do. do. Miss I. Hindle, 15 Pine Street, Bacup. Tel. Bacup 578
Domiciliary Midwives.	Miss D. M. Fox, 91 Bankside Lane, Bacup. Tel. Bacup 349. Mrs. M. Nicholson, 93 Bankside Lane, Bacup. Tel. Bacup 339.
Warden of Olive House Hostel for Old People.	Miss E. Hopwood. Tel. Bacup 322.
Bacup Ambulance Station.	Station Leader J. A. Ashforth, Commercial Street, Stacksteads. Tel. Bacup 728.
Home Help Organiser.	Mrs. J. M. Harrison, Divisional Health Office, Rochdale. Tel. Rochdale 48231.
Mental Health Workers.	Mr. J. H. Todd, Divisional Health Office, Rochdale. Tel. Rochdale 48231. (Outside Office hours, Tel. Heywood 69384)
	Mr. E. B. Williams, Divisional Health Office, Rochdale. Tel. Rochdale 48231. (Outside Office hours, Tel. Oldham MAIN 5488)

#### APPENDIX C

# PREVALENCE OF, AND CONTROL OVER, INFECTIOUS AND OTHER DISEASES

#### TABLE VIII

#### Cases notified and Deaths from Tuberculosis during 1952

		New Cases	De	ATHS
Age	Pulmona M F	ry Non-Pulmona M F	ry Pulmonary M F	Non-Pulmonary M F
0-1	-			
1-5	-			
5-10	-	1 1 –		
10–15	-			
15–20	-	- 1 -		
20–25	-	2 1 -		
25-35	1	1 – –	1 -	
35-45	-	1	1 –	
45-55	-	- 1 -	1 –	
55-65	-		1 –	
65 and over	-			
	1	5 4 0	4 0	0 0
-	6	4	4	0

# TABLE IX

# INFECTIOUS DISEASES (Excluding Tuberculosis)

# NOTIFIED DURING 1952

		NO. OF CASES NOTIFIED.											
	Total Cases				ŀ	GE	Periods – Years.						
Disease	all ages	un'r 1	1-2	2-3	3- 4	4-5	5- 10	10- 15	15- 20	20- 35	35- 45	45- 65	65 and over
Smallpox	1	-	-	-	-	-	_	_	1	-	-	_	_
Scarlet Fever	8	-	-	2	-	-	4	2	-	-	-	_	-
Diphtheria	-	-	_	-	-	-	-	_	_	_	_	_	_
Enteric Fever	-	-	-	-	-	-	-	-	-	-	-	-	-
Paratyphoid Fever	-	-	-	-	-	-	-	-	_	-	_	-	-
Measles	221	5	27	40	39	44	62	3	_	1	_	-	_
Whooping Cough	37	3	6	2	9	5	12	_	_	_	_	_	_
Acute Pneumonia	10	1	-	1	1	2	-	1	-	3	-	_	1
Puerperal Pyrexia	1	-	-	-	-	-	-		-	1	-	_	
Cerebro Spinal Fever	-	-	-	-	-	-	_	-	_	_	-	_	_
Acute Poliomyelitis	-	-	-	-	-	-	_	_	_	-	_	_	-
Acute Polio Encephalitis	-	-	-	_	-	-	-	_	_	-	-	-	_
Dysentry	-	-	-	-	-	-	_	-	-	_	-	_	_
Ophthalmia Neonatorum	-	-	_	_	-	-	_	_	_	_	_	_	_
Erysipelas	-	-	-	-	-	-	-	-	-	-	-	_	_
Malaria	-	-	-	-	-	-	-	-	-	-	-	-	-
Food Poisoning	-	-	-	-	-	-	-	-	-	-	-	-	-
Gastro Enteritis	-	-	-	-	-	-	-	-	-	-	_	-	-
Chicken Pox	15	-	2	1	4	-	8	-	-	-	-	-	-
Total	293	9	35	46	53	51	86	6	1	5	-	-	1

#### APPENDIX D

#### ENVIRONMENTAL HEALTH SERVICES

#### SANITARY INSPECTION

#### TABLE X

#### (1) INSPECTION OF DWELLINGHOUSES

	Total Houses inspected	under P	ublic H	Health	and H	lousing	Acts			216
	Total number of inspect									634
	Housing (Consolidation)									19
	Visits after Infectious D									562
	Number of Houses foun	d to be	not in	all res	spects	reasona	bly fit			196
	Defects found									259
	Defects remedied									197
	Notices served (Prelimin									160
	Notices complied with (									125
	Re-inspections re notices									298
(2)	PREMISES CONTRO	LLED	BY B	YELA	WS A	ND R	EGUL	ATION	IS	
	Offensive Trades									8
	Markets									9
										-
(3)	FACTORIES, WORKS	HOPS	AND	WOF	RKPL	CES				
	Factories									42
	Bakehouses									17
	Food Premises									25
	Stables and Piggeries									10
(4)	MISCELLANEOUS									
	Rats and Mice Destruct	ion								56
	Schools									5
	Shops									23
	Drainage									149
	Water Supply (Private S	amples	taken)							59
	Visits re Water Supplies									119
	Ice Cream Shops									10
	Food Inspections									61
	Permit Pigs inspected									30
	Petroleum Stores inspect									34
	Public Mortuary									8
	Public Sanitary Conveni									72
	Visits re Conversions to									14
	Visits re Disinfection									28
	Verminous Premises									3
	Interviews with owners									733
	Special Visits									12
	Smoke Observations									3
	Cleansing visits									927
	Housing Let in Lodging									2
	Old Metal Dealers									7
	Aged and Infirm People									12
	Hackney Carriages									15
	Fried Fish Shops									8
	Milk Shops									9
	Housing Application									378
	Visits re Slaughterhouse									16
	Visits re Housing Act (C									45
	Visits re Rag Flock Act									34

Swine Fever									7
Visits re Improvement	Grants								1
Pet Animals Act Game Dealers		• •	• •		• •				1
Miscellaneous Visits	•••	• •	•••		• •	• •	• •	••	2
wilseenaneous visits		••	••	• •					851

#### (5) NOTICES SERVED

Informal Notices		 	 	 	 	160
Statutory Notices	••	 	 	 	 	18

#### (6) NOTICES COMPLIED WITH

Informal Notices	 	 	 	 	125
Statutory Notices	 	 	 	 	19

#### Statutory Notices:-

Public Health Act, 1936

Section	93	 	 	 15
Section	45	 	 	 2
Section	39	 	 	 2

#### TABLE XI

# CLOSET ACCOMMODATION

Type of Closet	Number in 1950	Number in 1951	Converted 1952	Number at end of 1952
Pail Closets	120	120	0	120
Waste Water Closets	374	364	6	358
Privy Middens	4	4	0	4
Total number of closets excluding fresh water closets	498	488	6	482

#### TABLE XII

#### FACTORIES ACTS, 1937 AND 1938

#### 1. INSPECTION FOR PURPOSES OF PROVISION AS TO HEALTH

				NUMBER				
	Premises.	Number on Register	Inspections	Written Notices	Occupiers Prosecuted			
(1)	Factories in which Sections 1, 2, 3, 4 and 6 can be en- forced by Local Authorities	19	0	0	0			
in which	Factories not included in (1) in which Section 7 is enforced by the Local Authority	167	42	6	0			
-	10.5	186	42	6	0			

#### 2. CASES IN WHICH DEFECTS WERE FOUND

	Num	nber of cases	in which d	efects were f	found
Particulars	Found	To H.M. By H.M. cution         Inspector       Inspector         -       -       -         -       -       -         -       -       -         -       -       -         -       -       -         -       -       -         -       -       -         -       -       -         3       1       -       2         10       6       -       2       -         -       -       -       -       -         -       -       1       -       -			
Want of Cleanliness	-	_	_	_	_
Overcrowding	—	—	—	—	_
Unreasonable Temperature	-		-	-	-
Inadequate Ventilation	-	-	-	-	_
Ineffective Drainage of Floors	_	_	-	—	-
Sanitary Conveniences-					
(a) Insufficient	3	1	—	2	-
(b) Unsuitable or defective	10	6		2	—
(c) Not separate for sexes	-		-	-	-
Other offences against the Act	-	_	1	-	-
Total	13	7	1	4	-

# HOUSING STATISTICS

#### TABLE XIII

(a)	NU	MBER OF NEW DWELLINGS PROVIDED IN BACUP DURING 1952-	
		) By the Borough of Bacup	04
(b)	UN	TT DWELLING HOUSES	05
1.	Insp	ection of dwelling houses during the year :	
	(1)	(a) Total number of dwelling houses inspected for housing defects	16
		(b) Number of inspections made for the	34
	(2)	(a) Number of dwelling houses (included under sub-head (1) above) which were inspected and recorded under the Housing Con- solidation Regulations	19
		(b) Number of inspections made for the survey	15
	(3)	Number of dwelling houses found to be in a state so dangerous or	9
	(4)	Number of dwelling houses (exclusive of those referred to under the preceding sub-head) found not to be in all respects fit for habitation 19	16
2.	Rem	edy of Defects during the year without Service of Formal Notices.	
		Number of defective dwelling houses rendered fit in consequence of informal action by the Local Authority or their Officers 16	3
3.	Actio	n under Statutory Powers during the Year:	
Α.		Proceedings under Sections 9, 10 and 16 of the Housing Act, 1936-	
	(1)	Number of dwelling houses in respect of which notices were served	0
	(2)	Number of dwelling houses which were rendered fit after service of formal notices:	
		(D) By LOCal Authority in default of owners	0
B.		Proceedings under Public Health Act:	
	(1)	Number of dwelling houses in respect of which notices were served requiring defects to be remedied 20	)
	(2)	Number of dwelling houses in which defects were remedied after service of notices:	
		<ul> <li>(a) By owners</li> <li>(b) By Local Authority in default of owners</li> <li>(c) and a state of owners</li> <li>(</li></ul>	
C.		Proceedings under Sections 11 and 13 of the Housing Act, 1936-	
	(1)	Number of dwelling houses in respect of which Demolition Orders were made	,
	(2)	Number of dwelling houses demolished in pursuance of Demolition Orders	

D.		Proceedings under Section 12 of the Housing Act, 1936-	
	(1)	Number of tenement or underground rooms in respect of which Closing Orders were made	3
	(2)	Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenements or rooms having been rendered fit	)
4.	Hous	sing Act, 1936, Part IV - Overcrowding:-	
А.	(1)	Number of new cases of overcrowding reported during the year	)
В.	(1) (2)	runder of eases of oreference and being her year of the	)
5.	Hou	sing Act, 1949:	
А.	(1)	Number of schemes submitted:	
		(,,	1
	(2)	Number of dwelling houses affected	1
B.	(1)	Number of schemes:	
		Of Private Individuals	1
	(2)	Number of dwelling houses affected	1
	(3)	Number of additional separate dwellings provided	0

#### MILK SUPPLY

#### TABLE XIV

Registered Producers		 	87
Licences to Produce Tuberculin Tested Milk		 	4
Supplementary Licences for Distribution of Tuberculin Tested	Milk	 	2
Licences issued to Retail Distributors of "Pasteurised" Milk		 	2
Licences issued to Retail Distributors of "Sterilised" Milk		 	53

# ANALYSIS OF MILK SAMPLES WHICH HAVE BEEN EXAMINED DURING THE YEAR

		Methyle	ene Blue			No. of Samples		9/ I.I.a
Sourse of Supply	No. of Sa'les	Satis- factory	Unsat- isfac'y	T.B. Posi- tive	T.B. Nega- tive	Satis- factory	Unsat- isfac'y	% Un- satis- factory
Producer retailers within the area (Raw Milk)	. 28	27	1	0	16	27	1	3.58
Pasteurised	. 2	2	-	0	-	2	-	-

#### TABLE XV

# **UNSOUND FOOD CONDEMNED - 1952**

Bacon	••		 	 	17	lbs.
Beans			 	 	74	Tins
Peas			 	 	1,128	Tins
Apples			 	 	101	Tins
Cherries			 	 	104	Tins
Ham			 	 	21	Tins
Plums			 	 	231	Tins
Strawberries	;		 	 	6	Tins
Pork			 	 	5	Tins
Orange Seg	ments		 	 	47	Tins
Bottled Fru	it		 	 	29	Tins
Processed C	heese		 	 	7	Boxes
Tongue			 	 	10	Tins
Luncheon M	Aeat		 	 	62	Tins
Milk			 	 	88	Tins
Salmon			 	 	15	Tins
Sandwich S	pread		 	 	15	Tins
Sardines			 	 	9	Tins
Macedoine			 	 	18	Tins
Melon and	Lemon	Jam	 	 	24	Tins
Minced Bee	f Loaf		 	 	3	Tins
Soup			 	 	56	Tins
Rabbit			 	 	15	Tins
Prunes			 	 	15	Tins
Braised Kid	ney		 	 	7	Tins
Apple Puree					13	Tins
Biscuits			 	 	175	Tins
Canadian A					40	lbs.
Eggs					23	
Miscellaneou					237	Tins
TOTAL	ARTICL	ES			2 595	
				 	-,070	

36

#### TABLE XVI

#### FOOD AND DRUGS ACT, 1938

#### Samples submitted for Examination - 1952

Plum Jam			 		 2
Lemon Cheese			 		 1
Custard Powder			 		 1
Baking Powder			 		 1
Sausage			 		 1
Sauce			 		 3
Ground Almond	ls		 		 1
Coffee and Chic	ory Ess	sence	 		 1
Shortbread Mix	ture		 		 1
Fish Paste			 		 1
Coffee			 		 1
Malt Vinegar			 		 1
White Pepper			 		 1
Sage and Onion	Stuffin	g	 	•	 1
Bicarbonate of S	Soda		 		 1
Milk			 		 30
TOTAL			 		 48
					-

The above samples were certified genuine with the exception of the following:

Sample	Article	Meat Deficiency	Action Taken
1 Informal	Beef Sausage	4%	Vendor Warned





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